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STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
Honolulu, Hawaii 96809

November 4, 2010

MEMORANDUM

TO: Honorable John M. Mizuno, Chair
House Committee on Human Services

FROM: Lillian B. Koller, Director

SUBJECT: Informational Briefing on Foster Care

Hearing: Friday, November 5, 2010, 1:00p.m.
Conference Room 309, State Capitol

PURPOSE: The purpose of this informational briefing is to discuss the concerns with foster care. The briefing will review the foster care system and review "best practices" and solutions for foster youth who "age out" of the system without being adopted or having a permanent legal guardian.

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the Legislature's concern for children and youth in foster care and the services provided to assist them in transitioning to life as an independent adult. DHS has worked for many years to improve and increase services for youth.

Despite the impression given by some that the Department abandons youth as soon as they turn 18 years of age, this is most certainly not true. The truth is, these young people continue having access to a wide range of help, such as support groups, funding for college or vocational schools, Medicaid health insurance, food stamps, psychological counseling and more.

DHS firmly believes every foster child deserves "a family for life" so they can receive love and support throughout the years. For that reason, the Lingle-Aiona Administration places a high priority on keeping foster children connected with their parents and other relatives. In our efforts to meet this goal, the Department has developed numerous services, programs and collaborations, some of which are included below.

Efforts to Find "Forever Families"

Ohana Connections is a program whose mission is to: do intensive family finding and engagement; find and engage family members and other kinship family for every child entering foster care; nurture and support family connections for every child in foster care; and help find family for children and youth who are in permanent care with no family connections.

Wendy's Wonderful Kids, supported by a grant from Wendy's, is for a part-time adoption recruiter to find permanent homes for children in care. Catholic Charities Hawaii has the grant.

HOPE INC, under contract to the Department, assists in finding permanency for youth who have high special needs. The youth generally are teens or older children with multiple challenges.

Heart Gallery Hawaii, under contract to the Department, enlists professional photographers who donate their time to take portraits of foster youth in need of permanent homes. HGH also collaborates with DHS and other partners to facilitate events and other efforts to find permanency for the youth in care.

Pohai Ke Aloha (Permanency Roundtables) case review teams include Child Welfare Services Branch (CWSB) staff, a master permanency practitioner from CWS, a Casey Family Programs consultant, a cultural consultant as applicable and available, a community

consultant with expertise in permanency, a former foster youth and 'ohana. The goal is to find and develop innovative ways of finding permanent homes for foster children.

EPRT (Early Permanency Roundtables) are a similar process starting earlier in the life of the case.

Adoption and Permanency Assistance are available for all children in care who move to these permanency options

Transition-Related Services

Independent Living Services include statewide purchase of services (POS) contracts that provide services and support to help foster youth develop skills and knowledge, make connections with resources and access transitional living arrangements. Services include individualized assessment and service planning based on the needs, strengths and goals of the individual. These services are for young people ages 12 through 21.

Higher Education Board Allowances, for youth age 18 through 26, allows up to 60 months of payments to help with living expenses while attending school or taking part in vocational training. Participation has increased from 184 youth in SFY 2006 to 342 in SFY 2010. Services include supportive counseling through the independent living POS contracts.

Education and Training Vouchers provide up to \$5,000 per year toward the cost of attendance at an accredited institution of higher learning. The amount of an individual award depends on the financial need and the amount of federal funding available.

Youth Circles help foster youth plan for transition to independence and reconnect them with members of their extended families who can offer support and encouragement. Foster youth

choose the plan to pursue and who will help implement the plan. Since its beginning in 2004, the program has provided 776 youth with 1,471 youth circles.

Medical coverage continues to be provided for youth after they leave foster care. They are eligible to receive individual medical coverage in accordance with Med-QUEST administrative rules.

Hawaii Youth Opportunities Initiative (HIYOI) is a youth-adult partnership to improve outcomes for youth as they transition from foster care to adulthood.

The HIYOI partnership includes leaders from child welfare, Family Court, former and current foster youth, post-secondary education, business, communications, housing and the health care industry. Current and former foster youth may enroll in Opportunity Passport™, complete financial literacy training and set up a personal savings account and a matched savings account to purchase approved assets.

Streamlined Referrals and Treatment

CWS and the Department of Health's Children and Adolescent Mental Health Division (CAMHD) implemented a streamlined process for referral and treatment of children.

This process accommodates referrals of children with potential problems that would require intensive mental health treatment. The process also expedites treatment and increases access to mental health services, including therapeutic foster homes for children with severe emotional and behavioral needs.

Exceeding Compliance with National Standards for Child Welfare

By aggressively overhauling Hawaii's child welfare system since 2003, DHS and its community partners have now met or exceeded all six federal standards required by the nationwide Child and Family

Services Review. These standards help protect America's children from abuse and neglect.

Because the standards are set very high, only a small fraction of states meet all the federal requirements. In a congratulatory letter to Human Services Director Koller, Acting Associate Commissioner Joseph J. Bock of the U.S. Administration for Children and Families praised DHS for its commitment to "systems change."

When federal officials conducted their first onsite review of Hawaii's child welfare system in July 2003, the state met only two of the six national standards. Those results prompted Director Koller to begin investing Temporary Assistance for Needy Families (TANF) federal funds in a wide range of preventative social services provided by community-based organizations statewide. This was the first time DHS spent TANF federal funds for such services, which prevent child abuse and neglect, strengthen families and help at-risk youth succeed in school and avoid crime, substance abuse and unwanted pregnancies.

When federal officials returned to Hawaii for their second onsite review in June 2009, they found "significant changes in practice," Bock wrote, which enabled DHS to meet four of the national standards. A subsequent data analysis determined that Hawaii had met all six standards.

These standards pertain to child re-abuse by family members, maltreatment in foster care, reunifying foster children with their families, stability of foster care, achieving permanent placements for children in long-term foster care, and timeliness of adoptions.

The extensive reforms brought about by DHS and its community partners safely reduced the number of children in foster care from 3,000 in 2005 to about 1,300 today.

Hawaii has also achieved one of the lowest rates of child re-abuse in the nation, and gained America's number-one ranking in terms of timely adoptions for foster children.

Because of these accomplishments, DHS and its community partners were invited to share their expertise with the State of Alaska and Native Alaskan tribal organizations in July 2010 with the goal of safely reducing the number of Native Alaskan children in foster care.

Family and youth engagement

`Ohana Conferencing is a family decision-making practice that develops and implements safety and permanency plans agreed upon by family members. The `Ohana Conferencing process enlists the support of key family members and others to work with the Department in addressing and resolving child safety issues.

First started as a pilot project in 1995, `Ohana Conferencing has been greatly expanded over the past several years. We have made `Ohana Conferencing available to all parties in a CWSB case, funded outreach into the community to provide information on `Ohana conferences to potential participants, and increased the number of `Ohana conferences available.

Since 1996, `ohana conferencing has provided 6,561 families with 11,242 conferences.

Hawaii Foster Youth Coalition, supported by DHS, is a youth-led organization providing a voice for youth currently and formerly in foster care. This organization is the youth advisory board for CWSB. Their active components include youth helping youth (networking and support), developing youth leadership, youth

advocacy, testifying before the Legislature, and serving as youth advisors to the child welfare system.

Kapiolani Mentoring Program - Survivors Offering Support

Has the goal of offering the foster youth of Hawaii "support, stability and enriched social experiences to help them overcome their past traumas, take control of their lives and prevent the cycle of abuse and neglect."

'Ohana is Forever Conferences are held annually in partnership with the Hawai'i Foster Youth Coalition, Kapiolani Child Protection Center's Foster Youth Mentoring Program and the Family Court to improve and celebrate efforts in family connections for foster children/youth.

These conferences bring together youth in foster care, DHS staff, community partners, Family Court judges, other judicial and legal advocates, resource caregivers and other individuals and agencies representing a wide range of higher education, education advocacy, legal rights advocacy, job training, health education, arts, mental health, independent living programs and youth organizations.

Project First Care (PFC) for Infants and Toddlers, which helps carry out Act 199, is a partnership of CWSB, the Office of Hawaiian Affairs, Partners In Development Foundation, Hui Ho'omaluu, Kōkua 'Ohana, the Na Kupuna Tribunal Council and EPIC 'Ohana Conferencing.

PFC was implemented to provide safe, nurturing, temporary and on-call placement with specially trained resource caregivers for infants and children in CWSB custody. This model requires caregivers to work with the birth parents to support reunification or placement with relatives through First Meetings, Family

Finding, facilitation of meaningful and supportive visitations, participation in 'Ohana Conferencing, etc.

Project First Care for Teens provides similar supports and is designed to meet the needs of teens.

Kokua 'Ohana Project is a federally-funded effort to increase recruitment and retention of Native Hawaiian foster resource and adoptive families. This project builds on the targeted recruitment plan in West Hawaii, with on-site consultation from AdoptUSKids, the National Resource Center on Adoption, and Harvest Family Life Ministry on faith-based recruitment.

Ma'ili Receiving Home-Ho'omalulu O Na Kamali'li opened in March 2009 as an on-call residential assessment center for abused or neglected children and families in the Waianae area. Its purpose is to keep siblings together, keep children in the same schools and neighborhood, conduct comprehensive medical and mental health assessments and facilitate accessible visits for the children and their families.

Services include support from elders and foster youth mentors in the community, family finding and 'Ohana conferencing services provided by EPIC 'Ohana to support reunification or relative placement.

Project Visitation is a collaboration with CWSB, the Family Court, Volunteer Legal Services of Hawaii and the Foster Family Program. This project recruits and trains volunteers to provide transportation and facilitate visits with siblings living in different foster homes on Oahu.

Family Drug Court partners with CWSB and the Department of Health's Alcohol and Drug Abuse and Public Health Nursing

Divisions to assist child welfare families that have substance abuse problems.

Attachment and Biobehavioral Catch Up (ABC) Pilot Project is a partnership between the Department and the Consuelo Foundation to address the special emotional and relationship needs of very young children in child welfare services to help them develop secure attachments with their caregivers.

Other Child Welfare Services Branch (CWSB) Collaborations

CWSB continues to work with the **State Continuous Quality Improvement (CQI) Council** to review and analyze supervisory review data, case review findings and data gathered on specific cases. CWSB expanded funding and the scope of services for comprehensive service contracts to allow access by resource families.

CWSB expanded efforts to locate, recruit and place children with extended family and kin. These efforts help ensure permanency for children by increasing the identification of connections and placement resources within their own family.

The Department participates in on-going collaborative groups, including the Child Welfare Services Advisory Council and the Court Improvement Project.

The Department partnered with **Casey Family Programs** to establish a strategic planning committee to re-assess social work practice related to assessment, case planning, appropriate service provision and client engagement.

Outcomes from this collaboration include the **Hawaii Child Welfare Services Family Partnership and Engagement Practice Model** to align agency written policies and procedures with the Department's mission, guiding principles, practice strategies and activities.

This model includes outcomes-based contracting for relevant and culturally appropriate community-oriented and community-based services.

One of the highlights of the Casey/DHS collaboration was the recent Aha, or Native Hawaiian gathering, to "kuka kuka" or discuss Native Hawaiian involvement in the child welfare system. This event brought participants together from all of the Islands to help the Department develop strategies to work together for the sake of the children.

Participants also discussed strategies to seek out relatives, preserve cultural connections, provide more culturally appropriate and effective services and recruit, retain and support foster and adoptive families.

The first **Program Improvement Plan (PIP)** for child welfare services was developed by DHS in coordination with community stakeholders during the 2003 Federal Child and Family Services Review (CFSR).

More than 200 trainings, community meetings, informational sessions and workgroups were held over the course of the PIP. This means there was one event held approximately every three days during the PIP. This engagement and development process continues with the 2009 CFSR and 2010 PIP.

Technical Assistance

The Department participated in a comprehensive review of independent living and transitioning services with the **National Resource Center on Youth Services**. Leading the review was Dorothy Ansell, a nationally renowned expert on these services.

The review process involved meeting with foster youth, providers, community members and DHS staff. The report indicated that the

Department's program was sound and included "cutting edge" programs such as Youth Circles.

DHS collaborated with the National Resource Center for Adoption, AdoptUSKids and local organizations to provide training and technical assistance for faith- and community-based organizations to help them recruit and support foster parents.

Conclusion

The Department's commitment to children and families is shown by investment of staff, energy and funding in the above programs and services. We constantly strive to improve services and outcomes for our families and children.

The outcomes for any child or youth can never be the full responsibility of any one entity - it is a shared privilege and a shared responsibility. Likewise, the loss of any person, especially a youth, causes us all pain.

We must regard the loss of former foster youth Erwin Celes as an added incentive to continue our efforts in pulling the entire community together to support our youth.

Thank you for this opportunity to testify.



DEPARTMENT OF HUMAN SERVICES

News Release

LINDA LINGLE
GOVERNOR

Lillian B. Koller, Esq., DIRECTOR
DEPARTMENT OF HUMAN SERVICES
Phone: (808) 586-4997
Fax: (808) 586-4890

For Immediate Release: October 28, 2010

**DHS TO RELEASE CHILD PROTECTIVE SERVICES RECORDS FOR
SUICIDE VICTIM AND FORMER FOSTER TEEN ERWIN CELES**

HONOLULU – To help the public gain a greater understanding about the life of Erwin Celes, a former foster teen who recently committed suicide, the State Department of Human Services (DHS) is preparing to release his child protective services (CPS) records.

These records will be posted on the agency's Web site (www.hawaii.gov/dhs), just as DHS did in 2005 for the first time ever with the case of "Peter Boy" Kema, Jr., a Big Island child abuse victim who disappeared in 1997 and is presumed dead.

"In the short time since Erwin's tragic suicide occurred, a lot has been said about this young man and what happened to him in foster care," DHS Director Lillian Koller said. "Some of those comments are consistent with what is in the CPS records and some comments are not consistent.

"My intention in sharing this information – which is normally confidential – is not to bare Erwin's life but, instead, to ensure transparency and accountability so the public can see what CPS, the Family Court and our other partners did and did not do in this foster care case."

Koller created administrative rules in 2004 allowing the release of confidential CPS records under certain circumstances. This enables DHS to disclose information without a court order or consent from any parties.

– MORE –

Before posting the CPS records, which date back to 1997, DHS is required by law to redact certain items, such as medical information and the names of family members, those reporting child abuse, therapists and others involved in this foster care case.

“It is the Lingle-Aiona Administration’s policy that only through public disclosure – withholding no more than what the law requires us to withhold – that people can make informed evaluations regarding what can and cannot be done by government and others to prevent such tragedies,” Koller said.

“By collectively examining Erwin’s case, we hope to find additional ways of helping foster children – especially older teens as they make the often difficult transition from foster care to independent living.”

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**For more information, contact:
DHS Public Information Officer Toni Schwartz
Phone: 586-4882**

TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

FROM: Linda A. Santos, President & CEO
Family Programs Hawai'i

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

Good Afternoon Representative Mizuno and members of the Committee on Human Services.

I am Linda Santos, President and CEO of Family Programs Hawai'i. FPH provides programs to help prevent children from entering the foster care system, supports children and families involved in the system and assists youth emancipating from foster care.

In America today, few 18 year olds are ready for the adult world. We have managed to stretch adolescence well into the 20's. This is particularly difficult for those young people who turn 18 in foster care. Historically, these youth were literally turned out to fend for themselves and success was very difficult. Luckily in the last 10-15 years, much has changed. Both state and federal governments have expanded eligibility for services and provided funding to open up opportunities in health, education, employment, housing and financial management. Hawaii has done a good job, especially in the area of higher education. It has been a great start, but unfortunately, it is not enough and many youth are unable to take advantage of these opportunities for many varied reasons.

We still have many young people in the age range of 16-28, who are vulnerable, often troubled, mostly impoverished, mostly unskilled, and far less prepared for healthy and independent adulthood than their peers who have not encountered the difficulties associated with abuse and neglect and out of home placement. Trauma suffered in childhood does not go away just because a child becomes an adult. It is particularly difficult for our youth to take advantage of the resources available on their own

We know the importance of strong relationships in our lives. Even with the many concrete supports available, positive youth outcomes will not occur without a healthy emotional connection with a caring committed adult. Many foster kids don't have that.

What still needs to be developed or enhanced:

- Caregiver training – resource caregivers should be actively involved in assisting with the transition to adulthood.
- Adequately funded support and training programs for youth after 18. These programs must include sufficient trained staff and allow for youth self referral.
- Mentoring – no youth should leave care without a positive adult connection
- Programs for youth not ready or able to attend higher education.
- A safe and convenient space to come to for support and resources.
- Resources and services must be provided in a developmentally appropriate manner. Youth need assistance in applying for and maximizing use of resources.
- Continue to listen to the voices of the youth and partner with them.

We have a lot to do, but as you can see from the interest in our transiting youth, there are a lot of us willing and able to help.

From: Jaque Kelley-Uyeoka [mailto:Jaq@halekipa.org]
Sent: Thursday, November 04, 2010 6:30 PM
To: HUS testimony
Subject: TESTIMONY RE: INFORMATIONAL BRIEFING ON FOSTER CARE

November 4, 2010

To: Committee on Human Services
Representative John M. Mizuno, Chair
Representative Tom Brower, Vice Chair
Committee Members

From: Jaque Kelley-Uyeoka, Deputy CEO-Outreach Services
Hale Kipa, Inc.

BRIEFING: Informational Briefing on Foster Care
Friday, November 5, 2010, 1:00 pm
Conference Room 309

Dear Representative Mizuno and Committee Members,

My name is Jaque Kelley-Uyeoka, Hale Kipa Deputy CEO and one of the providers of Independent Living Services for youth currently and formerly in foster care on O'ahu.

Thank you for allowing us to share some of our observations of the foster care system as it relates to youth transitioning out of foster care. This area has been of vital interest to Hale Kipa who saw a need and began services geared toward preparing young people for interdependence in the early 1980's. Since that time, the combined efforts of many community members and agencies have made a significant difference in the number and types of resources and opportunities. Agencies such as Hale Kipa, EPIC O'hana, Hawaii Foster Youth Coalition, Salvation Army Family Intervention Services, Hale 'Opio, Child and Family Services, Catholic Charities, Family Programs, Maui Youth and Family Services and many others have partnered with the Department of Human Services and strived to provide youth with access to a range of different types of services focused on ensuring these young people can maneuver the transition into adulthood with more competencies and support systems. Two most recent promising initiatives include Jim Casey Opportunities and the Step-Up Housing program.

But even with these gains, we are not reaching every youth transitioning out of foster care and we have more to do. Hale Kipa served, on some level, over 150 transitioning youth last year and almost 100 youth ages 12-17 in the foster care system and there were more than 100 we did not get referred. But even if we had those referrals, we would not have the staff available to support them. Many of the transitioning youth, particularly if they are not pursuing higher education or vocational schooling, tend to drop all ties with systems and then become lost to the programs who are still able to serve them. They often end up in the lowest paying jobs, some end up homeless and others don't have that person they can count on to prevent them from hitting rock bottom and feeling so very alone.

It's a very real and sad downward spiral; one that service providers would do anything to prevent if we could.

There remain clear gaps in the safety net for transitioning youth and they include employment that comes with mentors, affordable housing and mental health supports as that service is most frighteningly dropped upon turning eighteen. While we do collaborate with other agencies, we could do more partnering with educational, housing, financial, employment and other resources. We need to ensure that we, the larger community that even goes beyond foster parents and service providers, see these youth as our own and work together in any collaborative measure that promises they have resources, opportunities and linkages.

We applaud the Legislature's willingness to highlight this need and sincerely hope new action plans can be developed with accompanying appropriate support.

Thank you.

TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

FROM: Cynthia White

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

The tragic suicide death of Erwin Viado Celes has brought to light the sad reality for transitioning foster youth. Suicide is the third leading cause of death for Hawaii's youth between the ages of 15-24. This is a mental health issue not just a foster care issue.

As Executive Director of the Hawaii Foster Youth Coalition (HFYC), I am well aware of the struggles of transitioning foster youth. When youth leave care it is a crisis. They need to be involved with support services long before that time comes.

HFYC is a statewide, youth led organization whose members are 14-24 year old current and former foster youth. These young people work very hard to engage youth in resources, educate youth about resources, and support youth as they age out of the system reaching nearly 400 youth a year. HFYC is a DHS sponsored organization. The department provides many resources for youth and opportunities for youth to have a voice in making improvements in the system. No one is more aware of the needs of transitioning youth than the Child Welfare System. The laws and policies that make up the system put the welfare of children as a top priority. On the other hand, funding cutbacks and hiring freezes have tied the hands of those who are in the position to help most. Additionally, the peer support that HFYC provides to transitioning foster youth needs to be more accessible to youth in care, creating a place for youth to experience normalcy, connect with opportunities and resources, and learn self advocacy.

In 2007, a qualitative study was released that identified unmet healthcare needs of Hawaii's foster youth. "One major theme, *mental health*, and 6 subthemes—*being different, transitions, coping strategies, normalcy wanted, autonomy wanted, and connections wanted*—were derived from the focus group interviews with foster youth." They "...indicated that frequent movement between homes and schools decreased their level of trust of others and adversely affected their desire to build new relationships. Foster children were further confused by (1) inconsistent directives for problem solving within the system, (2) restrictive rules that did not allow maintenance of prior relationships, and (3) varying communication patterns used in foster homes and by their assigned professionals." In the past three years, DHS has addressed many of these identified issues by 1) funding the family finding project and other efforts to reunite, reconnect, and develop permanent relationships for foster youth; 2) supporting youth circles; 3) supporting an annual Ohana is Forever conferences; 4) extensive training of workers; 5) engaging the National Resource Center for Youth Services; to name a few. There are more proactive initiatives underway and in which youth are involved.

The death of someone so young, especially a preventable death, is tragic. It reminds us that we must be vigilant in caring for Hawaii's most vulnerable children. It propels us to keep moving forward in meeting their needs. While much is being done and is available, we still need to find more ways to engage youth in the resources that are available, improve access to resources, and increase efforts to respond compassionately to the mental health needs of youth in care.

Thank you for hearing this testimony and taking the time to address the needs of foster youth.

The Hawaii Foster Youth Coalition

“Not Bound by Blood”

November 2010

245 N. Kukui St. Ste. 202,
Honolulu, HI, 96817

Phone/Fax:
545-5683

Facebook:
FosterYouthSpeak

Email
fosteryouthspeak@gmail.com

Erwin Celes: The Need for Foster Youth Support

Erwin Celes aspired to one day go to college on the mainland. He had a 1986 Toyota Supra he called the Batmobile. He worked at Wahiawa Little Caesars Pizza Restaurant. The former foster youth died of suicide on September 7th, just 6 months after he exited extended jurisdiction.

For those of you that don't know, extended jurisdiction is when the court keeps in contact with you through your social worker and GAL. You still must move out at the age of 18 or after you finish high school, whichever comes later.

Even though Celes had many siblings, he had been able to connect with any of them. We will never truly know what he was going through at the time, but we do know his suicide was followed by the suicide of his girlfriend. As a former foster youth, it would be safe to say that she may have been the only person in his life that he spoke to about personal things. She may have been his only support system. When she died, we can only imagine how alone he felt without anyone who could understand. Erwin Celes is evidence that transitioning foster youth who undergo dramatic changes lack adequate support. Many people don't understand or are even aware of the difficulties foster children face. Very often our own close friends and families, if any, don't realize the difficulties we face as foster youth and the horror of turning

18, when in the eyes of society we are full grown adults who must learn to fend and care for ourselves overnight. It breaks my heart to hear a story like this. I can't recall how many times I've contemplated suicide myself aging out of the system. It was because of the feeling of loneliest and despair. The 12 months after I aged out was the most difficult, depressing, and loneliest period of my life. I can't help but feel empathy and sorrow for what Erwin Celes was going through because I was in his position not more than 6 months ago. The irony strengthened when I learned he was just 2 months older than me. I wish someone could have showed him, the way people have shown me, that foster youth are not as alone as they think they are.

His death is a tragic event and was preventable. What's done is done and there is nothing we can do to change the past. However, if there ever was a moment to speak out to the community to an audience with such intent ears, it is now. We can seize the opportunity while the attention is turned to the needs of transitioning youth. This is the time when we speak out and share with the world what we have experienced and what lies ahead of us. This is the opportunity to reach out to fellow foster youth and make sure no one follows in his footsteps and to let all of you know that you are not as alone as you may imagine. Although Erwin Celes is no longer with us, he has given us the opportunity to speak out so more can be done to help transitioning foster youth.

Inside:

- In Memory of Erwin Viado Celes:
19 Years Old, Former Foster Youth**
- Jim Casey Youth Opportunities Initiative**
- DHS: Changing Schools While In The
System**
- October Flashback**
- Upcoming November Events**
- Other Islands**
- HFYC Statewide Board Meeting**

Jim Casey Youth Opportunities Initiative

Jim Casey was a foster youth who excelled in life and ended up creating UPS as we know it today. After his death, he included in his will to give back to the foster youth community. The Youth Opportunities Initiative was one of the things he created.

Hawaii is the 12th state to have the Initiative. The Initiative provides financial opportunities for foster youth ages 14-24 who have been in the system or adopted after the age of 14.

The Initiative provides Financial Literacy Training in four separate classes, each two hours long, teaching about banking, budgeting, credit, interest, and much more. Upon completion of the training, the youth will receive \$150 to be deposited in their newly opened Bank of Hawaii accounts. Aside from the \$150, the Initiative will also match the **Opportunities Passport Holder** Dollar-For-Dollar on certain purchases, meaning they will pay for half the cost on qualified asset purchases, up to \$1000 a year

Breaking it down;

-Financial Literacy Training

-Upon completion of the four Financial Literacy Training classes, \$150 to help you start saving up for your goals.

-\$1000 matched funds a year for qualified asset purchases, e.g. education, transportation, medical. Matched meaning they will pay for half the cost of what you are purchasing.

-Two savings accounts at Bank of Hawaii, an Individual Development Account where your matched funds will be drawn from, and a personal savings account.

The next set of classes starts on **November 9th, 16th, 23rd, and 30th** from **5:30-7:30** at EPIC OHANA. If you are interested in attending, please contact either HFYC here at the office or Delia Ulima of Epic Ohana at 748-7052.

DHS: Changing Schools In The System

The DOE and DHS collaboration committee is trying to create a plan to ensure youth in foster care can (if at all possible) remain in his/her original school. The committee

would like to get input from youth about their experiences with changing schools and any suggestions.

The issue was brought up in legislation, but the bill did not pass. And just five months ago, DOE and DHS teamed up to tackle the issue again.

The committee agreed it should be a presumption that it is in the child's best interest to have that child remain in the same school. The committee is working on a detailed, state-wide process to support the presumption. The committee wants to make sure it is a process that can work for the 200 plus schools statewide. The committee is still in the drafting stage. They plan to first target specific regions then gradually go statewide.

If you have any comments or suggestions, you can call the office or message us on facebook or email.

October Flashback

Na Kama Kai October 10

Was at Pokai Bay this month where the Waianae Chapter and Kids Hurt Too got the opportunity to paddle board as well as canoe. They also learned about native marine biology and other ancient Hawaiian cultural practices.

Waianae Chapter Meeting October 10

Was held during the Na Kama Kai and in attendance were four Waianae youth, as well as a handful of younger youth who participated in a beach clean-up.

FBI Program October 13

Agent Luke came in and talked about the FBI and its office right down the street from HFYC. He informed the kids and we watched a video of the history of the FBI and talked about what they do. He gave the kids brochures and workbooks, and plans to come back in November with even more surprises!

Bryan Clay Foundation KidFit Camp October 23

Drills and more drills were held at the KidFit camp with recent Olympian decathlete gold medalist Bryan Clay. Bryan Clay was born and raised right here in Hawaii and even graduated from Castle High School. It was an all paid

for event, courtesy of Straub, and Bryan went around and encouraged kids as they participated in the many drills and exercises. At the end, he inspired the kids to follow their dreams and that anything is possible with enough hard work.

North Shore Chapter Meeting October 29

We visited the Coysa group up in Haleiwa. We were able to educate the youth who lived there about the benefits they have while in foster care, as well as the benefits they will receive after aging out. We then went out for some ice cream and chilled to some live music. Overall, it was a pretty incredible chapter meeting!

Surf For the Soul October 30

Kids Hurt Too and the Hawaii Foster Youth Coalition gathered at Queens Beach in Waikiki to participate in some surfing activities as well as face painting. The surfboards and instructors was courtesy of SurfRider Spirit Sessions, who encouraged the youth and shared with them the spirit of surfing.

November Events

Water Park November 6

For all of the HFYC members who attended the ISPCAN Youth Empowerment Forum on September 25, the reward was a free trip to the water park! We're meeting up there at 12 noon, and already have the tickets for every person attending. If you attended the ISPCAN, make sure you confirmed your ticket by calling the office.

Poi for The Soul November 6

Not going to the Water Park because you missed the ISPCAN? Well if so, you can still participate in Poi for the Soul, where you learn about the Taro plant and learn how to make the ancient Hawaiian healthy staple: Poi. It starts at **8:30 am** at **Kanewai Lo'i** by the UHM Hawaiian Cultural Center.

FBI: Evidence Response Team November 10

The FBI is returning to share with us more cool stuff. The evidence response team is the FBI equivalent to the Criminal

Science Investigators. This month they promised to bring in some real live lie detectors. Hope to see you there.

Na Kama Kai November 14

Is the opportunity for youth to paddle board and go canoeing! Location this month is in Ewa Beach.

FBI: To Be Announced November 17

The FBI are returning after a week to share with us more cool stuff.

Other Islands:

Kauai Chapter Meeting October 24

Kauai got together for their local chapter meeting. They discussed famous celebrities that were in foster care as children, such as actor/comedian Eddie Murphy, Rapper Ice-T, NFL player Duante Culpepper and many more. They also plan to have an ATV event on November 20th, as well as some local fundraisers at the upcoming Waimea Town Celebration.

Statewide Board Meeting on Kauai

There was a statewide board meeting on the island of Kauai.

Allow us to welcome our new Youth leaders, Kaimana Kepaa of Kauai and myself, Jarvis Mina of Oahu, both of which were also voted onto the board during the board meeting. Jessie Bonachita will be acting as our Youth Outreach Coordinator on the island of Kauai.

We discussed more about our current project, a performance piece titled "Not Bound By Blood." If interested in being a part of this project, please contact the office. We had performed a piece of it at the ISPCAN and plan to perform at the next Ohana is Forever conference as well as on all of the neighbor Islands.

The board also voted for new positions of officers as follows:

President	Blake Lanoza
Vice President	Shatay Kauhaahaa
Treasurer	Alex Logan
Secretary	Jocelyn Galase

During the session of the board meeting, we evaluated the performance of our very own Cynthia White, Executive Director of the Hawaii Foster Youth Coalition. We concluded that Cynthia balances professionalism and compassion amazingly well. She does an excellent job when it comes to our financial reports and does a lot for the Coalition when it comes to bringing in grants. We found, however, that the Oahu staff, meaning Jocelyn and Jarvis, should become more involved with the programs and events operations and start taking more initiative and control of operations.

The next statewide board meeting will take place on the Big Island, Hilo side, with the National Resource Center for Youth Services leading the board in revising the mission statement and planning for more involvement in State initiatives that will improve services for foster youth. The meeting will be held from December 3-5.

Maui Chapter Meeting

Maui continues to meet regularly. They are actively assisting youths who transition out of care with grants and other resources. Thank you Mark Spiegel for going the extra mile to help youth make it on their own.

Big Island Meetings

Big Island has chapters in Kona and Hilo. Sidra Brown has been working as the Youth Outreach Coordinator but with a new full time job, school, and her commitment to the military she has less time to give. So Alex Logan, the Youth Outreach Coordinator for Kona will take care of both chapters. Savannah will be voted onto the board as she accepted the position of Hilo chapter president. The Kona chapter engages in weekly community service projects that help the local homeless and engages youth in meeting people who offer services. Hilo has been partnering with EPIC

Ohana, Inc. meeting youth at youth circles and holding beach clean-ups and barbecues.

The West Hawaii Chapter for the Hawaii Foster Youth Coalition invites all current and former youth involved in any level of out of home placement to its next Chapter Meeting on November 17, 2010 at 6:30pm at the Brand New Jack in the Box in Kailua Kona town at the corner of Henry and Kuikini Highway. The meeting will focus on the chapter's identity, planning recreational activities for 2011, recruitment of new members and fundraising ideas. A cultural activity will also be coordinated to prepare for the Giving Thanks demonstration.

Additionally, all active members are welcome to participate in the Giving Thanks demonstration scheduled for November 18, 2010 at 10:30am at the West Hawaii Child Welfare Services Office. Members that will be in school during that time need to request a temporary release from their school from 10:00am to 11:00am. Foster Parents and Guardians must approve of the temporary release from school and contact the Chapter Coordinator to request activity documentation to submit to their young person's school.

Transportation to the demonstration may be coordinated amongst the chapter members. Carpooling and ride sharing are responsibly encouraged. Members unable to coordinate ride sharing with other members for any reason may be eligible for transportation through the chapter staff and lead volunteers.

Foster Parents, Guardians, and of course all youth are welcome to contact the chapter leadership with any questions about this month's activities and events.

Alex J. Logan, Hawaii Island Coordinator 430-5551
Joyce Lapenia, West Hawaii Rep. 990-5386

HAWAII YOUTH SERVICES NETWORK

677 Ala Moana Boulevard, Suite 702 Honolulu, Hawaii 96813

Phone: (808) 531-2198 Fax: (808) 534-1199

Web site: <http://www.hysn.org> E-mail: info@hysn.org

Alan Shina, President

Judith F. Clark, Executive Director

Acadia Hawaii Residential Treatment Center
Adolescent Services Program, Kaiser
Permanente Medical Care System

Aloha House

American Civil Liberties Union of Hawaii

Assistive Technology Resource Ctrs. of HI
Bay Clinic, Inc.

Big Brothers Big Sisters of Honolulu

Big Island Substance Abuse Council

Blueprint for Change

Bobby Benson Center

Catholic Charities Hawaii

Central Oahu Youth Services Assn.

Child and Family Service

Coalition for a Drug Free Hawaii

College Connections

Community Assistance Center

Domestic Violence Action Center

EPIC, Inc.

Family Support Services of West Hawaii

Friends of the Missing Child Center of HI

Hale Kipa, Inc.

Hale 'Opio Kauai, Inc.

Hawaii Behavioral Health

Hawaii Student Television

Healthy Mothers Healthy Babies Coalition

Hina Mauka Teen Care

Hui Malama Learning Center

It Takes An Ohana

Kahi Mohala Behavioral Health

Kama'aina Kids, Inc.

KEY (Kua'aoa-Hoola Ecumenical Youth)
Project

Kids Behavioral Health

Kids Hurt Too

Kokua Kalihl Valley

Kula No Na Poe Hawaii

Lanai Community Health Center

Life Foundation

Maimed Foundation

The Maui Farm, Inc.

Maui Youth and Family Services

Palama Settlement

P.A.R.E.N.T.S., Inc.

Parents and Children Together (FACT)

Planned Parenthood of Hawaii

Queen Liliuokalani Children's Center
Kona Unit

REAL

Salvation Army Family Intervention Svcs.

Salvation Army Family Treatment Svcs.

Sex Abuse Treatment Center

Susannah Wesley Community Center

The Catalyst Group

Turning Point for Families

Waikiki Health Center

Women Helping Women

YouthVision

YWCA of Kauai

November 1, 2010

To: Representative John Mizuno, Chair,
And members of the Committee on Human Services

Testimony for House Informational Briefing on Foster Care November 5, 2010

Hawaii Youth Services Network (HYSN) is a statewide coalition of more than 50 youth-serving organizations. Many of our members provide foster care services and/or work with youth and families who are at-risk for entering the foster care systems.

HYSN recognizes and applauds the Department of Human Services efforts to improve foster care system over the past several years.

HYSN makes the following recommendations to improve foster care systems:

1. **Make foster care available to youth aged 18-21.** Most youth are not ready to live entirely independently at age 18 when they age out of care. Many have not yet graduated from high school and most lack the work skills and education to obtain jobs that will enable them to support themselves adequately. Young adults aged 18-21 still need adult guidance and support. Without it, up to 30% of former foster youth become homeless before age 21.
2. **Increase the foster care room and board payments.** The amount currently provided does not cover the actual cost of providing care to a foster child and the payment has not been increased in many years. It is a limiting factor in recruitment and retention of foster families.
3. **Ensure that foster families have adequate training and 24-hour crisis support.** HYSN has heard consistently from both foster parents and foster youth that the quality and amount of training and support foster families receive is critical. When there is a middle of the night crisis (e.g., when a foster youth come home drunk after curfew), having a supportive person to call can facilitate a positive

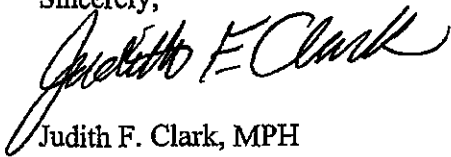


HYSN page 2

resolution to the crisis, reinforce concepts learned in initial training, and help with long-term retention of foster families.

Thank you for this opportunity to testify.

Sincerely,

A handwritten signature in cursive script that reads "Judith F. Clark". The signature is written in black ink and is positioned above the printed name.

Judith F. Clark, MPH
Executive Director

TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

FROM: DeeannaMarie Wallace
Foster/Adoptive Mother
Founder and Director of
HOPE INC, Inc.

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

My husband and I became foster parents over 32 years ago. We have cared for foster children in Oregon, Washington, Japan and Hawaii. We have 12 children, 10 of them are adopted, 7 of them were foster children in the U.S. 5 of them were foster children in Hawaii. Their current ages are 13 to 39 y/o.

We are also the founders of HOPE INC, Inc. a faithbased fostercare and adoption agency licensed by DHS CWS. HOPE INC, Inc. has a subcontract under Hui Ho'omalua called Families for Waiting Keiki. FWK recruits, trains and licenses parents to adopt foster children who the state CWS has not been able to find forever families for. None of the foster children adopted by HOPE INC, Inc. families have re-entered the foster care system since the onset of the program in 2006.

Nine of the 10 children that my husband and I have adopted came to us between the ages of 5 and 19 y/o. One was an infant. Several of them came to us with a long list of mental health diagnosis. The children have suffered from PTSD and varying degrees of depression. Some of them have definitely considered ending their lives as Erwin Celes did in September.

A child who has been abused gets a message from the abuser that says, "I don't like you." A child who has been neglected gets a message from the neglecter, "You don't exist." In either circumstance the child believes they have little or no value. It takes years of living in a safe, stable environment with a balance of nurture and structure to help a child learn to trust and begin to heal.

Without a consistent safe environment with the balance of nurture and structure children do not heal. They cannot mature or trust. They grow into adults and the cycle repeats itself with their children and their children's children.

In the last 12 years, especially the last 8 years, we have watched the Hawaii DHS CWS make progress in the care that is provided for Hawaii's vulnerable children. There are many more programs available for the children now than

there were in the past. But we as a responsible people we must admit that we have far to go to meet the needs of families and children in Hawaii

With limited resources and not enough staff DHS CWS works hard to meet the needs of foster youth. Community stake holders, such as HOPE INC, Inc. also attempts to provide services with limited budgets. Some state service providers have not been paid for 6 months. HOPE INC, Inc. is waiting for 3 ½ months. As difficult as it is not one wants to give up. Families and children are our most valuable resource. The best investment we can make as a state is to invest in the health of families and children.

I suppose it should go without saying that every child in Hawaii deserves a stable, loving, nurturing family who will be there for them throughout their life time! But I must say it anyway, so we can keep in mind the needs of each child when looking at the big picture.

I would like to suggest that money be made available to not only pay for current programs but also to support mandatory training for both kinship caregivers and the general licensed resource caregivers of our precious keiki.

This quarter I am providing training for resource caregivers through Family Programs Hawaii. FPH does a wonderful job setting up and facilitating the quarterly trainings, but only a handful of the licensed resource families who are providing foster care attend those trainings. All caregivers and therefore all foster children will benefit by required ongoing education and training programs that include both the caregiver and the children.

I'd like to take a moment to publicly thank Rep. John Mizuno for giving attention to the needs of foster children as well as all the stateholders, families and foster youth that are here today because they have a heart for Hawaii's keiki. Thank you

Deeanna Wallace
Founder and Director of:
Hope In the Name of Christ Inc.
dba HOPE INC, Inc.

Cell Phone: 808-398-3089

E-mail Address: Deeannamarie@hopeinchawaii.org

Web: www.hopeinchawaii.org



KAPI'OLANI CHILD PROTECTION CENTER

Protecting Children and Strengthening Families

55 Merchant Street, 22nd Floor

Honolulu, Hawaii 96813

Telephone: (808) 535-7700

Fax: (808) 535-7722

To: Rep John M. Mizuno
Chair, House Committee on Human Services

Rep. Tom Brower,
Vice Chair, House Committee on Human Services

From: Steven J. Choy, Ph.D.
Kapi'olani Child Protection Center
Director & Clinical Psychologist

Judy Adviento, Mentor-Kapi'olani Peer Mentoring Program

Re: Informational Briefing on Foster Care

The Kapi'olani Child Protection Center is deeply saddened by the recent suicide of Erwin Viado Celes, a former foster youth. Our Center, a division of the Kapi'olani Medical Center for Women and Children and an affiliate of Hawai'i Pacific Health, specializes in the prevention, early identification, and treatment of child abuse and neglect. We have worked with the community for the last 41 years to provide treatment and support services for victims of child maltreatment and their families. As part of our Center, we have established the Kapi'olani Peer Mentoring and the Survivors Offering Support programs, which are aimed at address the needs of children in foster care. Through these programs, we have become painfully aware of the plight of children in foster care. Many of our youth unconnected as they feel that they are not really part of their foster family and they are separated from their biological parents. Sadly, many of them are even separated by their biological siblings. These experiences result in uncertainty and instability in their lives, and in addition to dealing with their abusive trauma, they often have to grow up too fast and need to be on their own after reaching the age of 18 years. The difficulties experienced in securing a residence, working through issues with their biological parents, and obtaining a job to support themselves often find these youth homeless without any support after they age out of foster care.

Fortunately, the Department of Human Services and many private non-profit agencies including the Kapi'olani Child Protection Center, have been aware of these concerns for many years and have worked collaboratively to develop programs to address the issues of the "aged-out" foster youth. We want to commend the Department of Human Services in their support of these programs and their participation in the development of several conferences on supporting foster youths. Nevertheless, there continues to be much more that all of us need to do. We must be able to identify and follow these youths before and after they reach the age of 18 years old and we need better outreach programs. The Kapi'olani Peer Mentoring Program is now on its 12th

year of existence and although we have demonstrated our ability to provide support to current and former youths in foster care so that they will be able to reach their fullest potential, we have been funded privately without any funding support from the State of Hawai'i and thus we have only been able to service about 40 youth a year. Our Survivors Offering Support program has now completed our 3rd year, but we are also only funded by private grants and may not be able to continue without additional financial support. We have been able to service many more foster youths with this program as we have made over 500 contacts during the past 3 years. We have been working with the Department of Human Services to increase our outreach efforts so that our program can contact each youth as they enter foster care rather than wait for the youth to contact us. We hope that this can be supported by the Department and that more devoted funds can be used to provide outreach support for the youths in foster care as well as the youth that have aged out of foster care. Without the outreach and follow-up elements to these programs we will continue to miss foster youths that are in trouble. We hope that you can provide the necessary funding support for these programs and the support program that utilize outreach methods to reach these children.

We want to thank you and your committee for addressing this issue. If you would like more information or have any additional questions, please feel free to contact us.

Respectfully Submitted through email on Thursday 11-04-2010.

Steven J. Choy, Ph.D.
Director and Clinical Psychologist
Kapi'olani Child Protection Center
Email: stevenc@kapiolani.org
Ph: (808) 535.7711

Judy Adviento
Peer Mentor & Representative
Peer Mentoring & Survivors Offering Support
email: judy.adviento@kapiolani.org

TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

FROM: Alda St. James, Executive Director
Keiki Kokua Inc.
P.O. Box 880787
Pukalani, HI 96788

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

TESTIMONY:

I am the founder and Executive Director of a Maui based non-profit called Keiki Kokua. Our Mission is to be a practical resource that supports foster and adoptive parents to successfully raise and nurture the children in their care. A major part of our Mission also involves helping transitioning foster youth who are not attending college, have no job skills, and no place to go.

Keiki Kokua established a thrift store in 2009 in Haiku, Maui. Its purpose was two-fold: First, the economic downturn made it essential for this agency to find a reliable income stream in order to survive, since we receive a minimum of county funding and no state funding. Secondly, the thrift store's goal was to assist our target group by allowing families to purchase items at a 30% discount anytime they shop at the store. Having met these goals, a third objective was proposed: to give foster youth and former foster youth their first job experience by working at the Keiki Kokua Thrift Store.

Although this program is under-funded, it has been a success. Our most pressing goal is to expand the program because we have already seen results. It is a known fact that most businesses consider foster youth unemployable, and often, no one will give them their first job opportunity if their history in foster care is revealed. In contrast, foster teens in our program not only gain self esteem, they learn valuable job skills which will help them acquire gainful employment later on, giving them a better chance at establishing themselves in the community. If they fail at this task, a national study shows that 30 to 40% of former foster youth will end up jobless and homeless.

What former foster youth need is continued, on-going support. Keiki Kokua maintains its connection with as many of them as we can, even after they leave the island in search of a new life. Their struggles are unrelenting and DHS, having released them, is no longer involved. That is why what we do is critical.

In Hawaii as elsewhere, all of these youth need to be counted, tracked, and connected with a caring individual and/or agency who is concerned about their welfare. Former foster youth do not trust the "system," so DHS is not the answer to the problem. Hawaii must contract with its local non-profits, like Keiki Kokua, to engage in this work. Otherwise, our state will continue to see more young adults like Erwin Celes who feel isolated and desperate, pushed to the point of suicide. Those of us who advocate for these youth, have known this sorry fact for years. Yet, there has been no response made at the state or county level to specifically address this issue. Let us hope that with the spotlight on this new tragedy, something will finally be done.

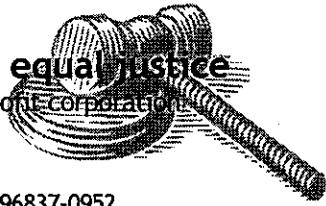
I will be happy to discuss this problem and potential solutions with anyone willing to listen. Thank you for your efforts to address this issue.

Sincerely,
Alda St. James

Alda St. James, ED
Keiki Kokua Inc.
(808) 573-4972
www.keikikokua.org

lawyers for equal justice

a hawai`i non-profit corporation



P.O. Box 37952
Honolulu, Hawai`i 96837-0952
(808) 587-7605

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TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

FROM: Victor Geminiani, Executive Director of Lawyers for Equal Justice

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

Thank you Representative Mizuno and members of the Committee on Human Services for an opportunity to testify about the failures in our state system to assist foster youth. My name is Victor Geminiani and I am the Executive Director of Lawyers for Equal Justice (LEJ), a nonprofit legal aid program that focuses primarily on systemic advocacy.

Over this past summer, LEJ conducted a study of the weaknesses in Hawaii's child welfare system. The state wide study was conducted by interviewing 20 Guardian ad Litem (GALs) about their observations on the services received by the children they represent in child welfare cases. As you know, GALs are appointed by the family courts to represent the best interests of foster children and have continuous contact with the children they represent until court supervision of the child ends.

The primary finding of the study centered on the failures of the Department of Human Services and the Department of Health to provide timely and appropriate services to foster children who are suffering from significant trauma and in great need of mental health services. Despite the diversity of geographical locations and work experiences, those GALs interviewed consistently raised serious concerns about social workers' competency and availability, delays in providing critical mental health services, the quality and kind of services provided and the barriers to services including transportation and convenience. A copy of our study is attached to this testimony.

It is clear from national and local research that has been conducted on the development of foster children, providing early intervention in their lives with the appropriate and timely mental health services required plays a critical role in the repairing the significant trauma caused by the abuse and neglect that they have often suffered and the pain often associated with separation from their biological parents and family.

It is clear from case law, statutes and regulations governing the child welfare system that the state is legally responsible to provide an array of services to children under their protection. In my opinion, timely and appropriate mental health services are the most critical and our state is failing both morally and legally in fulfilling that responsibility.

Thanks you again for an opportunity to testify today on this most important issue.

To: Victor Geminiani, GAL Community
From: Rebecca Wolitz
Date: August 5, 2010
Re: Interviews Regarding Foster Children and Access to Mental Health and Other Government Services

I. Questions Presented

- A.** What are the most prominent problems interfering with foster children's access to mental health services?
- B.** What other problems exist with the foster care system in general or provision of services in particular?
- C.** What federal laws govern these issues and might be a source for future investigation into, and potential litigation over, agency compliance?

II. Brief Answers

- A.** Interviewees frequently cited problems with social workers, delays, the quality, kind, and availability of mental health services, and transportation as major barriers to the successful administration of mental health services to foster children.
- B.** Lean foster parent training, a lack of education about mental health services available to foster children, and inadequate transitional services for children aging out of the system were cited by interviewees as additional problems with the foster care system.
- C.** Title IV of the Social Security Act, The Fostering Connections to Success and Increasing Adoptions Act of 2008, and the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) provisions under Medicaid govern services provided to foster children and are appropriate sources for further investigation into agency compliance with federal law.

III. Discussion

Introduction

Foster children often come from difficult pasts and have uncertain futures. Lacking alternatives, they are dependent upon government agencies to provide them with crucial services. Such services are not only necessary to promote and safeguard the current health and wellbeing of these children, but to ensure that they have adequate support to become well adjusted, flourishing adults.

Lawyers for Equal Justice (LEJ) was informed that a variety of services required by foster children were not being properly provided by the Department of Human Services (DHS) and/or the Department of Health (DOH). In particular, LEJ was told that the provision of mental health services was an area in need of dramatic improvement. Recognizing the profound effect inadequate provision of services would have on Hawaii's foster children, LEJ set out to acquire more information with the goal of identifying systemic issues. Depending upon these results and further research, LEJ may decide at a future date to initiate litigation.

During the months of June and July 2010, LEJ contacted 26 community members possessing direct experience with and knowledge of foster children and their ability to access and receive government services. These individuals were predominantly guardian ad litem (GALs), however, a few were voluntary guardian ad litem (VGALs) or foster parents; one was a social worker. The Executive Director of LEJ, Victor Geminiani, in conjunction with Danny Pollard from the Honolulu office of Legal Aid Society generated the contact list. To facilitate this project, contacts were either affiliated with Legal Aid Society of Hawaii or professional acquaintances. The decision to focus primarily on GALs was

motivated by a desire to speak with an accessible group of professionals that would be able to provide a wide range of potentially unbiased information. Information would be gathered through relatively unstructured, informal conversations providing interviewees with the opportunity to reflect upon their experiences, and share their thoughts about particular cases or overarching issues.

Of the 26 individuals contacted, 20, or seventy-seven percent (77%), were available for interviews. Interviews were predominantly conducted in person or over the phone, though a few participants submitted email responses. The experience of interviewed GALs ranged from less than 1 year to more than 20. Their number of current foster cases ranged from 0 to 37. While most interviewees were based in Oahu, 3 were from Big Island (representing both Kona and Hilo), 3 were from Maui, and 2 were from Kauai.

This memo is divided into three parts. Parts A and B summarize the results of these interviews. Part C presents a brief discussion of the federal laws governing issues raised by interviewees and makes suggestions for further research. To respect the confidentiality of individuals interviewed for this project, identifying citations have been redacted.

A. What are the most prominent problems interfering with foster children's access to mental health services?

This section summarizes the most prominent issues, identified by interviewees that interfere with access to mental health services by foster children. Despite the diversity of geographic location and work experience, interviewees consistently raised concerns about: social workers, delays, quality, kind, and availability of care, transportation and convenience.

1. Social Workers

A majority of interviewees, sixty-five percent (65%), reported either dissatisfaction with social workers or expressed concern that social workers were overextended and therefore unable, through no fault of their own, to accomplish everything that their jobs demand. Comments were on a spectrum. Some felt that, "Social workers are overworked, but good." Others remarked: "Social workers are terrible." "Only 2% of social workers do a good job." A few when asked about their interactions with social workers said that they had no problems to report.

Those expressing dissatisfaction with social workers were most concerned about the following:

- Required referrals not being made.
- Referrals not being made in a timely manner.
- Legally mandated timelines for follow-ups and visits not observed.
- A lack of awareness on behalf of social workers of all the services available to foster children.
- Increased pressure on GALs to be more aggressive advocates and pick up the slack for social workers.
- Social worker apathy about their employment.
- Social workers potentially actively causing harm, for example, by refusing to implement a therapist's treatment regime.
- Budgets cuts resulting in social worker aversion to calling and participating in team meetings.

Interviewees repeatedly emphasized that social workers are gatekeepers to accessing mental health services. "Who your social worker is, is key." As facilitators and coordinators social workers are often responsible for making referrals and appointments, arranging transportation, and interfacing between different government agencies or other members of the foster child's team. Failure to facilitate or coordinate effectively was cited as causing delays and ultimately affecting access to government services.

The issue of psychiatric evaluations repeatedly arose. According to interviewees, only social workers can place requests for initial psychiatric evaluations. When this request is made is very important because DOH will not provide a foster child with mental health services until it receives the results of this initial evaluation. Delays in placing the referral negatively affect foster children in need of care. It also causes a ripple effect of delays because the system is not necessarily well functioning further down the line. Similar concerns were raised regarding other kinds of referrals.

Despite deep frustration with individual social workers, many interviewees were at pains to point out that budget cuts likely play a significant role in social workers being unable to perform their jobs properly. Reduced funding has forced social workers to take on an increased caseload. One GAL estimated that each social worker is now responsible for double the amount of cases. Under such circumstances, "It is inevitable that some things fall between the cracks." The work that social workers do is very important for adequate access to and provision of mental health services for foster children. If their jobs are not done properly, however, for whatever reason, the mental health of foster children will likely suffer the consequences.

2. Delays

Sixty-five percent (65%) of interviewees expressed concern about unnecessary and harmful delays in the provision of mental health services for foster children. LEJ was repeatedly told that getting mental health services for foster kids is “slow.” As one GAL puts it, “You can’t get it when you need it. You need something tomorrow, it takes six months.” Delays were reported as interfering with the timely provision of appropriate services at multiple stages:

- Getting initial psychiatric evaluations.
- Receiving the results of those evaluations.
- Making a diagnosis about what kind of therapy is needed.
- Forcing a child to start with least level of services and slowly ratchet up until the appropriate level is reached.

While delays occurred at multiple stages in the provision of services, the most significant challenge, LEJ was told, is often just getting a child into therapy. As mentioned earlier, DOH will not provide services until it has the results of a foster child’s psychiatric evaluation. On Oahu, an interviewee reported that it took nine months to get a child into therapy. Others on Oahu indicated that it could take four or five months just to get a determination that therapy is needed. On Maui, LEJ was told that it usually takes more than a month to get a psychiatric evaluation. Big Island GALs reported a six-month wait for initial psychiatric evaluations; the contractor Kapiolani Child Protection Center (KCPC) in charge of evaluations has been backed up and DHS has done nothing to remedy the situation.

These delays are harmful to foster children and those with whom they interact. One GAL, for example, spoke about a child who needed therapy. In the 3-5 month interim while waiting for therapy, the child began to touch his sleeping female relatives in sexually inappropriate ways. These incidents could have been avoided, in the GAL's opinion, if this child had been in therapy.

Once a child is in therapy, interviewees expressed concern about the practice of starting with a low level of mental health services and slowly increasing services until reaching the appropriate level. This was generally viewed as counterproductive, a waste of time and energy. In the opinion of GALs, these delays have prevented foster children from receiving the mental health services that they need in a timely manner. Such delays moreover, as we were told in one case, can aggravate mental illness making foster children worse off than they otherwise would or should be.

Delays contributing to mental health issues, but derivatively related to the provision of mental health services themselves were also described. There was a general expression of concern regarding the timely and appropriate placement of foster children. GALs reported that such delays resulted both in their foster children being bounced around from one placement to another or the children languishing in a particular placement far beyond the time that they were supposed to have been moved. Either situation is less than ideal. In the opinion of interviewees, however, constantly changing placements is particularly damaging to the mental health of foster children.¹

¹ A study that interviewed foster children about effects on their mental health supports these observations; iterative uprooting interferes with the ability and desire to forge positive connections and relationships. See Caroline R. Ellermann, *Influences on the Mental Health of Children Placed in Foster Care*, 30 Fam Community Health S23, S25-S28 (2007).

This uprooting furthermore interferes with the provision of mental health services. One GAL remarked that repeated moving interferes with “establishing a good physician-patient relationship necessary for progress.” It also “disrupts the continuity of care to have to constantly start over.” Another GAL importantly noted that the bouncing around because of delays in finding an appropriate placement is contraindicated for children with mental health issues like autism who require stability.

3. Quality, Kind, and Availability of Services and Providers

Sixty percent (60%) of interviewees were concerned about the quality or kind of mental health services being provided to foster children. Additionally, thirty percent (30%) felt that there were not enough available providers and fifteen percent (15%) expressed concern about children with severe mental health issues being forced to pursue treatment on the mainland due to a lack of on-island facilities.

Some GALs expressed concern about the quality of the care given by mental health care providers. They felt that the mental health care received was not very good. Several also expressed concerns about DOH cutting off services prematurely thus negatively impacting the overall quality of care. As soon as progress is made “they want to cut you off.” Noting that the emotional wellbeing of children and adolescents can be volatile, one GAL observed that this practice is short sighted. Just because progress has been made one week, does not mean that it will necessarily be sustained over subsequent weeks. DOH mental health care coordinators, furthermore, were often perceived in a negative light. “It’s as if someone takes them aside and tells them to provide as few services as possible or try to get someone else to be responsible.” Interviewees also complained that agency

employees say “no” too frequently and refuse creativity in overcoming barriers to providing services. GALs attributed this behavior to budget cuts. Several interviewees had experiences where they were told a service could not be provided because there was no funding.

Most interviewees, however, raised concerns about the kind of services available to foster children. One interviewee observed that it is harder to get therapy for children who are not high end, but who nevertheless are having a hard time coping with separation from parents or siblings. Twenty-five percent (25%) of interviewees spoke in particular about the predicament of “in-between” cases. Examples of in-between cases included those suffering from mild mental retardation (MMR) and autism. According to GALs, foster children with MMR, for example, have a very hard time getting services because the Mental Health Division of DOH considers the individual to have too low an IQ to qualify for their services and the Developmental Disability Division considers the individual’s IQ to be too high. LEJ was told about a 17 year old with MMR who needs 24-hour supervision, but does not qualify for services under Support for Emotional and Behavioral Development because of the nature of his condition. In another case, a teenager with Asperger’s, a form of autism, has been bounced around between shelters because there are no appropriate homes set up to deal with her condition. The various government agencies involved (DHS, DOH, and DOE) pass the responsibility for providing this child with services amongst themselves ultimately rendering the receipt of services delayed or inaccessible.

GALs also expressed dissatisfaction with the kind and number of residential care facilities and services available to foster children. Like the child with Asperger’s, foster children who are very high end or no longer acute but still struggling with significant

mental health issues often lack appropriate placements. According to one interviewee, the “highest end kids get sent to the mainland, to places where it would be very hard for a kid from Hawaii to go, like Colorado.” This is because there either is not an appropriate facility or placement in Hawaii, or because the facility that would have been utilized is at capacity. Concern was also reported about children who are no longer acute. It was said that few options exist for foster children who need significant residential care but no longer qualify for facilities treating acute cases.

In addition to a deficit of certain kinds of facilities, interviewees, particularly from neighbor islands, were very concerned about a lack of providers. Providers are particularly scarce for foster children living in remote or rural parts of an island. This can be a major stumbling block for children in need of mental health services. One GAL described a case on Big Island where there was only one specialist that could provide the therapy needed by a foster child. The child and doctor had a strained relationship. The child dropped out of therapy, but had nowhere else to go. Consequently, the foster child never received the needed therapy.

4. Transportation and Convenience

A lack of providers dovetails with the problem of transportation. Forty-five percent (45%) of interviewees cited transportation as being a major interference with the provision of mental health services. While GALs on Oahu also raised this issue, those interviewed from neighbor islands frequently cited transportation as being one of the most significant interferences with access to mental health services by foster children. Because

local providers are scarce in rural areas, foster children (and foster parents) often have to travel great distances to access therapy or other mental health services.

GALs said that DHS and in turn its contractors are responsible for providing transportation. Due to budget cuts, however, these entities seldom provide this service in practice. Catholic Charities on Big Island, for example, provides many kinds of services including transportation. The demand for services, however, outstrips the ability of this contractor to fulfill its obligations. Significant delays of multiple months have resulted. The transportation burden then falls on foster parents who are often unable or unwilling to routinely make a two or three hour roundtrip trek, on outer islands, for weekly therapy appointments. Though foster parents might be able to receive extra payments for transporting foster children themselves, interviewees thought that DHS does not do an adequate job of educating foster parents about this possibility. This situation has, for many foster children, rendered crucial mental health services inaccessible.

The problem of transportation is more generally an issue of convenience. In that vein, many GALs also lamented the availability of convenient mental health appointments for foster children. After-school therapy appointments are hard to come by. The situation of choosing between missing school or missing a therapy session is less than ideal—particularly when school may be the only constant in a foster child's life.

B. What other problems exist with the foster care system in general or provision of services in particular?

Interviewees raised three important additional issues that either constituted a small minority or did not fit squarely under the umbrella of access to mental health services.

Lean foster parent training, a lack of education about mental health services available to foster children, and inadequate transitional services for children aging out of the system were cited by interviewees as additional problems with the foster care system.

1. Foster Parent Training

One interviewee expressed deep concern about the criteria for becoming a foster parent, and the process by which foster parents are trained. According to this individual, "Training for foster parents keeps getting cut back. It is now only nine hours of face time training. The rest is computerized." It was also noted by the interviewee that, "Hawaii is only one of two states that does not require continuing training to foster parents." This scaling back of training was viewed as a deep disservice to foster children.

2. Education About Services

Twenty percent (20%) of interviewees raised concerns about a general lack of education regarding what services are available as well as agency procedures for eligibility and receipt of services. Many GALs felt that DHS and DOH do not adequately educate children, parents, foster parents, and professionals about available resources. LEJ was told, for example, about the predicament of teenagers approaching their 18th birthdays. "Kids don't know what services are available to them...to help their transition and their future." Acronyms were said to be numerous and confusing, administrative procedures opaque. Interviewees felt as though they need to be especially zealous advocates because they work within a broken system. A lack of comprehensive education about how the system works

and what services the system provides, can make this situation that much more challenging to navigate.

3. Transitional Services for Children Aging Out

Twenty-five percent (25%) of interviewees expressed discomfort with how teenagers age out of the foster care system. As one individual expressed it “Kids reach their 18th birthday and are told ‘Congratulations you’re 18 and now you’re homeless.’” This interviewee described getting calls from kids whose foster parents told them to be out of the house within days following their 18th birthdays.

GALs observed that how a teenager fared earlier in life was a good indicator of how he/she would transition out of the system into adulthood. They also noted that a child’s last placement and foster parents could have great negative or positive influence on this process.

Anecdotes about kids aging out, however, were generally grim. The most vulnerable of foster children, those with significant mental health or other issues, often have rough transitions. GALs frequently fear that these kids are at increased risk for either ending up homeless or in jail. In terms of services available to foster children aging out of the system, interviewees discussed youth circles and some transitional programs offered by Hale Kipa. Interviewees, however, were uncertain as to what services government agencies in particular must provide, by law, for these teenagers. There was simply concern and consensus that the needs of this population desperately require more robust regard.

C. What federal laws govern these issues and might be a source for future investigation into, and potential litigation over, agency compliance?

These interviews have revealed that the foster care system's ability to provide services to children faces multiple systemic failures. Whether litigation is an appropriate remedy will depend, in part, on the relevant statutes. It is beyond the scope of this study to provide comprehensive legal analysis of federal statutes and case law governing the provision of mental health and other services by DHS and DOH. However, several provisions of the following statutes, discussed in brief, show a great deal of promise for generating claims based upon some of the issues raised by interviewees. Continued investigation into these sources will reveal whether DHS and DOH operate in compliance with federal law.

1. Title IV of the Social Security Act and The Fostering Connections to Success and Increasing Adoptions Act of 2008

Title IV of the Social Security Act governs "Grants to States for Aid and Services to Needy Families with Children and for Child-Welfare Services." Part B, 42 U.S.C.S. § 622 (LexisNexis 2010), appears most relevant to the issues raised by our interviewees and will be discussed in detail below. It should be noted that Part E, 42 U.S.C.S. §§ 670-679c (LexisNexis 2010), merits further study as it governs federal payments for foster care assistance. On its face, however, Part E does not seem as relevant to the issues documented by this memo.

Part B is entitled "Child and Family Services". § 622 of Part B lays out rules for state constructed plans for child welfare services. Of particular interest under this section are

subparts (b)(15) and (b)(17). Subpart (b)(15) mandates that the relevant state agency must craft “a plan for the ongoing oversight and coordination of health care services for any child in a foster care placement”. It lists a series of requirements, including a continuity of care requirement. By federal law, these individualized plans are required to outline “steps to ensure continuity of health care services, which may include the establishment of a medical home for every child in care”. § 622(b)(15)(iv). Whether or not steps were spelled out in foster children’s plans, interviewees, as noted earlier, were very concerned about the continuity of children’s care given frequent moves. As such, this may be a fruitful avenue for further exploration.

Another exciting subpart of Part B is § 622(b)(17). This section specifies that caseworker visits to foster children must be, at a minimum, monthly.

“...State standards for the content and frequency of caseworker visits for children who are in foster care under the responsibility of the State, which, [must] at a minimum, ensure that the children are visited on a monthly basis and that the caseworker visits are well-planned and focused on issues pertinent to case planning and service delivery to ensure the safety, permanency, and well-being of the children.”

Given the reports that social workers² are incredibly over burdened with cases, it may be likely that they are not able to comply with this federal provision. Indeed, several GALs claimed that social workers were not making as many visits to children as legally required—though these GALs did not specify which laws were being violated.

The purpose of *The Fostering Connections to Success and Increasing Adoptions Act of 2008*, Pub. L. No. 351, 122 Stat. 3949 (2008), is, “To amend parts B and E of title IV of the Social Security Act to connect and support relative caregivers, improve outcomes for children in foster care, provide for tribal foster care and adoption access, improve

² Assuming the terms “caseworker” and “social worker” are synonymous.

incentives for adoption, and for other purposes.” 122 Stat. at 3949. Amendments as provided by § 201 and § 202 are particularly pertinent to interviewee concerns about older teenagers and adolescents aging out of foster care.³

§ 201 lays out more expansive criteria for allowing certain children to remain in foster care past the age of 18. Whether these provisions are adopted, however, is left up to states. § 202 explicitly deals with the issue of children aging out of the foster care system. According to these provisions, state agencies must create a concrete transitional plan within the 90 days prior to a foster child aging out of the system:

“during the 90-day period immediately prior to the date on which the child will attain 18 years of age, or such greater age as the State may elect under paragraph (8)(B)(iii), whether during that period foster care maintenance payments are being made on the child's behalf or the child is receiving benefits or services under section 477, a caseworker on the staff of the State agency, and, as appropriate, other representatives of the child provide the child with assistance and support in developing a transition plan that is personalized at the direction of the child, includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services, and is as detailed as the child may elect.”

The creation of a plan, and not implementation of its substance is the only part of this process federally mandated. Given the reports from interviewees, it is unclear that this provision is being observed by Hawaii's foster care system.

2. *Early and Periodic Screening, Diagnostic, and Treatment Services under Medicaid*

Medicaid Act, 42 U.S.C.S. § 1396d(r) (LexisNexis 2010), is commonly referred to as EPSDT (early and periodic screening, diagnostic, and treatment services). Services

³ While not a subject of this memo, § 204 on Educational Stability is likely of interest of LEJ.

provided under EPSDT are available to all eligible youths up to the age of 21. It is unclear whether states may be able to set their local program's age limit lower. 42 U.S.C.S. §§ 1396d(a)(4)(B), (a)(i). At least one court has written that the age limit of 21 is federally mandated for all states. "Thus, California, like all other states participating in Medicaid, is required to provide EPSDT care to eligible children under the age of 21." *Katie A. v. Los Angeles County*, 481 F.3d 1150, 1154 (9th Cir. 2007).

States must make all services listed under § 1396d(a) available to all those eligible for EPSDT, including services that would be otherwise optional for states to provide. *Id.* Medicaid also includes a promptness provision. State Medicaid plans must "provide that all individuals wishing to make application for medical assistance under the plan shall have opportunity to do so, and that such assistance shall be furnished with reasonable promptness to all eligible individuals". 42 U.S.C.S. § 1396a(8) (LexisNexis 2010). This provision has been interpreted as rendering delays in the provision of services actionable. *See, e.g., Rosie D. v. Romney*, 410 F. Supp. 2d 18, 52 (D. Mass. 2006) (noting that defendant agencies "failed to perform their statutory obligation to furnish these medical services with 'reasonable promptness'").

Delays were one of the most significant issues reported by interviewees; Hawaii's foster children face severe and chronic delays in accessing mental health and other services. 42 U.S.C. § 1396a(8) may provide the basis for an actionable claim. Consequently, a thorough investigation of Ninth Circuit and Federal District Court of Hawaii case law surrounding this provision is strongly suggested.

IV. Conclusion

Interviews with GALs and other community members make clear that Hawaii's foster care system has significant problems that negatively impact children. The provision of mental health and other services by DHS and DOH is in drastic need of attention and improvement. Foster children are not getting the crucial services that they need, when they need them. As suggested by Part C of this memo, federal laws exist to protect against several of the foster care system's problems reported by interviewees. More research is needed to investigate available legal claims, and to determine what role, if any, LEJ will play in rectifying this unfortunate situation.

LEJ would like to thank the participants in these interviews for their time, concern, and candid responses. We hope that this memo is informative and works towards improving the lives of Hawaii's foster children.

Testimony by Antonia Alvarez, M.S.W., Director of Youth Suicide and Bullying Prevention,
Mental Health America of Hawai'i

Presented to the Committee on Human Services

Friday, November 5, 2010, 1pm

Solutions for Foster Youth who are "aging out" of the System

On September 7th—almost two months ago today, Erwin Celes was found dead. Erwin Celes was 19 years old when he died by suicide— just 6 months after he “aged-out” of Hawai'i's foster care system. After 14 years in foster care (with an extension granted to him to remain in care until his 19th birthday), Erwin became one of O'ahu's worst statistics—another teen suicide.

I did not know Erwin Celes personally, so I do not know what experiences he might have had while growing up in our foster care system, but I do know that 38% of foster youth suffer from emotional and behavioral problems, a huge majority of foster youth survive trauma due to abuse or neglect, and all are living with the pain of being separated from their biological parents. An estimated 125 young people age-out of the foster care system in Hawai'i each year after their 18th birthday and many have very few resources. Up to one-third of these youth become homeless, one quarter of them end up in the criminal justice system, and as much as 50% of them abuse illegal substances. How do these young people fall through the cracks? After so many years in the care of the state, why do we release these young people without ensuring their safety and stability?

According to an article in the Hawaii Reporter on 11/28/10, the State Department of Human Services (DHS) has agreed to release Celes' child protective services (CPS) records to the public. Lillian Koller, the Department's Director said, “My intention in sharing this information—which is normally confidential—is not to bare Erwin's life but, instead, to ensure transparency and accountability so the public can see what CPS, the Family Court and our other partners did and did not do in this foster care case.” These records may shed some light into what happened in Celes' life in the foster care system. They may document various traumas or incidents that impacted Celes while he was in the care of the state. But they will not show us what Erwin Celes experienced between his 19th birthday and his suicide.

Youth who transition out of a system of organized care (for example, the foster care system) are at very high risk for depression, anxiety, and possibly suicidal ideation (or in Erwin Celes' case, suicide). According to the national survey conducted by the CDC, in Hawai'i we already have the highest rates of ideation, planning and suicide attempts among teenagers in the

country—are these risk we are willing to continue to take? Why didn't Erwin Celes have some additional support? Why are his co-workers from Little Ceasars in Wahiawa and his friends from the Heart Gallery Hawai'i (an organization that works to find resources for Foster Youth) taking donations because they were \$5,000 short for Celes' burial services?

There are many services available to foster youth and former foster youth, but most of the young people themselves are not aware of them. We need to create better connections between the former foster youth and the community they are entering before they are forced out of the system of care. We need to minimize their anxiety about "aging-out" by taking preventative measures long before their 18th birthday to ensure their safety and stability as they begin to live independently. We need to offer mental health assessments and services—and follow up!—after the foster youth have transitioned out of the system. And most of all, we need to prevent the suicides of these important members of our community.

Mahalo for your time.

Testimony by Marya Grambs, Executive Director, Mental Health America of Hawai'i

Committee on Human Services

Friday, November 5, 2010, 1pm

Solutions for Foster Youth who are "aging out" of the System

Each year in Hawai'i, between **100 and 125** 18-year-olds leave foster care with fewer resources or life skills than non-foster youths. Many have mental health challenges. Most are not aware of the resources that are available to help them.

Many youth leaving foster care have endured frequent trauma due to:

- abuse or neglect,
- separation from their biological parents, and
- often-repeated separations from a succession of foster, guardian, kinship, or adoptive families.

While there are increasing resources available to foster youth when they turn 18, such as higher education funds, college scholarships and training programs, as well as Independent Living programs and Youth Circles, many of the youth are not aware of them.

- 65% leave foster care with no place to go (www.childrensrights.org)
- Half of foster youth drop out of high school
- 1/3 to 1/2 become homeless (www.childrensrights.org)
- Foster youth are 2-3 times more likely to be psychotic, to suffer from paranoia, to have obsessive-compulsive symptoms, or to be clinically depressed than the general population (www.heysf.org); 38% suffer from emotional or behavioral disorders
- 50% use illegal drugs
- Four times as many become single parents prematurely as non-foster youth (Casey, 2005)
- More than half are unable to obtain employment (Groves & Kenny, High Cost of Emancipation);
- Of those who are employed, most have earnings below the poverty level (www.heysf.org; www.childrensrights.org)
- Over 70% of CA state penitentiary inmates were former foster children (Groves & Kenny, High Cost of Emancipation); 30-40% of foster youth get arrested after they leave foster care (Alexander & Huberty, 1993)

What are the urgent, unmet needs of Transition Age Youth (TAY) in the Foster Care System?

To find out, Mental Health America of Hawai'i convened the TAY Task Force that met monthly throughout 2008 and into 2009. Our goal was to bring together stakeholders to identify the services available to help this group of young people, and then identify and prioritize programs and services that are missing and needed to help them transition to a life of healthy independence.

These young people, in the age range of 14¹ to 28, are vulnerable, often troubled, mostly impoverished, mostly unskilled, and far less prepared for healthy and independent adulthood than their peers who have not encountered such difficult life circumstances. Too many of them end up in more serious trouble, such as criminal justice problems, poverty, homelessness, giving birth to children they are unable to care for, or serious mental health or substance abuse problems. To turn our backs on them is unforgivable – and that is what many feel that we as a community are doing now.

What Services Are Unavailable: What Are the Urgent Unmet Needs of Transition Age Youth?

After reviewing the Resource Map, the input from the youth, and based on the Task Force participants' extensive knowledge of this population, the Task Force recommends the following as the top priorities that should be developed for Transition Age Youth:

1. LIFE COACH. Youth and providers alike agree that these young people want and need a person who will help them navigate the dangerous shoals of moving towards an independent and healthy life. But, very importantly, they, the youth, want to select the Life Coach themselves – i.e., they don't want to be "matched" such as current programs do (My Space, Facebook, or "speed dating" concepts could be used). TAY feel a life coach will have enhanced credibility if he/she has faced adversity. Meetings or contact could be daily, weekly, or monthly, depending on the type of program, and the setting for meetings is preferred to be informal, such as a coffee shop. These coaches need to be available on a long-term basis. TAY prefer the coaches to not be situated inside of a program or agency, because many TAY have negative associations with many institutions and programs.
2. COMPREHENSIVE RESIDENTIAL AND YOUTH CENTER FOR FOSTER YOUTH. The dream for this center would be an apartment building, providing affordable and partially supervised housing for transition age foster youth ages 17-27 and including a range of programs and services, including a Youth Center, an Individual Development Account (IDA)* program, tutors, youth support groups, therapists/life coaches, computers, rec room, fitness room, classes on substance abuse, anger management, violence prevention, financial literacy. Ideally there would be a 30-passenger van to take TAY to on-site training, mentoring, etc., in the community. There may need to be a mix of market-rate apartments to help pay for the building. Need to get start-up grant.
3. EDUCATION AND PREVENTION. Need for more sex education, violence prevention, mental health/substance abuse treatment, gay/lesbian support, support for youth with learning disabilities, and wellness promotion. Need to reach out to find the young people who are falling through the cracks and aren't hooked up to services yet. (See Resource Directory, #4 below).

¹ The Family Court of Hawai'i and disability law mandates that transition planning begin at age 14.

These could take place at non-stigmatizing wellness resource centers at school sites to connect youth to resources, which would reach more TAY in the prevention stages. Peer educators could work/be trained here, because they are often the most effective “messengers” for TAY.

4. **RESOURCE DIRECTORY.** Finalize/refine the Resource Map, put online and print into portable hardcopy format that can be placed in all youth-related agencies, with case managers, at behavioral health and juvenile justice agencies, at schools, in pediatrician’s offices, given to all foster parents, and any other places youth hang out. Urgently needed because TAY do not know how to find the resources that are available to them.

Thank you.

November 4, 2010

John M. Mizuno
30th Representative District
Hawaii State Capitol, Room 436
Honolulu, HI 96813

Aloha John,

My name is Richele Awana. Currently, and for the past 17 months, I've had a former foster youth residing with my daughter and me. She has had a difficult past; however, I'm happy to say she is doing quite well. She has been able to benefit from multiple services offered by the Department of Human Services. She was a part of both the Independent Living Program and Youth Circles, and is currently attending college pursuing a career in carpentry. I believe that if it weren't for the Department's efforts in providing these services and others for youth in foster care that her life may not have turned out as well. Although she still has a long way to go in achieving her degree and career, and at times it's a struggle to keep her motivated and responsible, I'm thankful that she was provided these opportunities.

Mahalo

Richele L. Awana, Executive Assistant

Partners in Development Foundation

Hui Ho'omalua

680 Iwilei Road, Suite 500, Honolulu, HI 96817

(808) 441-1127 | Fax (808) 441-1122

www.pidf.org

~ Serving Hawai'i's Families, Living Hawaiian Values ~

From: Jason Badua [mailto:jbadua@pidfoundation.org]
Sent: Thursday, November 04, 2010 1:12 PM
To: HUSstestimony
Subject: Testimony

November 14, 2010

John M. Mizuno
30th Representative District
Hawaii State Capitol, Room 436
415 South Beretania Street
Honolulu, HI 96813

Dear Mr. Mizuno:

I would like to express my support with The Department of Human Services in providing a variety of programs serving youth that are transitioning into adulthood. Though my experience working with the Department I feel there is tremendous efforts to ensure that the youth in foster care are well-equip to deal with the challenges of living on their own. There are currently independent living programs, higher education board allowances, medical coverage plans, support services, resources etc. available to help off-set or alleviate expenses for youth that are transitioning into adulthood, especially during these tough economic times. Furthermore, the Department is continuously looking out for ways to improve the system and services provided to the youth in foster care and seek out innovative solutions to continue services as they transition out of the system. It's a critical transition for the youth to be overwhelmed with financial challenges, but I believe the Department is doing a great job in providing the much needed services to them.

Sincerely,

Jason M. Badua

SUZANNE GREEN
Native Hawaiian/Faith-Based/Oahu Recruitment Coordinator
Partners in Development Foundation
Hui Ho‘omalua Foster Care Program

• The Committee the comments are directed to;
COMMITTEE ON HUMAN SERVICES

• The date and time of the briefing;
FRIDAY, NOVEMBER 5, 2010 1:00PM

Legislative Briefing on Youth Aging Out of Foster Care

My name is Suzanne Green, and I would like to comment on the work being done to support youth in Foster Care in the state of Hawai‘i.

I work for an organization that recruits and supports families and individuals who want to become licensed Resource Caregivers (foster parents) for youth who are removed from their homes because of abuse or neglect. Because of my personal involvement in this work, one of my close friends got licensed. I have gotten to see first-hand the support both she and her foster child are offered by DHS. He will soon turn 18, and because of the services provided for foster youth from DHS, he has options such as Education vouchers, special training which has given him a deeper understanding of what to expect and how to navigate his future, MedQuest, networking and support through the Hawai‘i Foster Youth Coalition and more. His Resource Caregivers have also been offered training so they can be informed if the system is confusing to him. This is key, as how many of us would be confident that our own birth children could keep up with future opportunities without our help?

I am impressed with the initiative the Hawai‘i State Department of Human Services has taken in order to protect and serve the foster youth of our state, and I am confident in the State’s desire to be the best ‘ohana it can to these children.

Sincerely,

Suzanne Green
(808) 277-7573

STATE OF HAWAII HOUSE OF REPRESENTATIVES
THE TWENTY-FIFTH LEGISLATURE
TESTIMONY TO THE COMMITTEE ON HUMAN SERVICES
TRANSITIONAL SERVICES FOR HAWAII'S FOSTER YOUTH

Rep. John M. Mizuno, Chair

Name: Stephanie Helbush
Position/Title: Statewide Recruitment and Training Coordinator
Partners In Development Foundation
Committee: Human Services,
Rep. John M. Mizuno, Chair
Date/Time: November 5, 2010, 1:00pm

Aloha and Thank You for the opportunity to give testimony on the issue of foster care in Hawaii. I have worked within the foster care system in Hawaii for over 10 years.

There are many services available to youth in foster care and youth transitioning out of foster care. Like children who grow up in their birth families, youth in foster care have options. They can attend choose to attend college, get a job, move out. Turning 18 and specific challenges that presents to youth in foster care is not new. The need for specific services for this group of youth has been answered by DHS, and as a result there are a multitude of services that are offered to help ease this transition.

This recent tragedy should be viewed as an opportunity for the community to become aware of the needs of the foster care population in Hawaii, and how this issue affects each one in its own way. Because of histories of abuse and neglect, foster youth have higher rates of dropout, homelessness, unemployment, and that affects every member of the community. Because they do not grow up in their birth families they often do not have a strong connection to an adult who can assist them through this transition in their lives. Moving out, starting college, becoming financially independent can be an overwhelming experience. Community members should be encouraged to get involved in issues that affect youth in foster care and Resource Caregivers.

From: D. Kaulana Iokia [mailto:diokia@pidfoundation.org]

Sent: Thursday, November 04, 2010 1:02 PM

To: HUS testimony

Subject: Youth Aging Out of Foster Care

To whom it may concern:

I wanted to write in support of DHS. They have been working so hard to help support all the children in the foster care system. This is not time to place blame on ANYONE. Especially those who are working so hard in the state to do all that they can.

With budget cuts, loss of positions, increased standards, etc. We all do the best that we can. DHS has a wonderful working relationship with many community and non-profit organizations out there because we all care about these kids. We want to help them have a better tomorrow.

D. Kaulana Iokia

West Hawaii General License Community Liaison

Partners in Development Foundation

Hui Ho'omalu

P.O. Box 71

Kealahou, Hawaii 96750

808.896.3829 cell 808.441.1115 phone 808.441.1122 fax 888.879.8970 toll-free

www.pidf.org

~Serving Hawai'i's Families, Living Hawaiian Values~

November 4, 2010

TO: Rep. John M. Mizuno, Chair
Rep. Tom Brower, Vice Chair
House Committee on Human Services (HUS)

FROM: Carol Morimoto, LSW
Project Director, Partners in Development Foundation-Hui Ho'omalua Program

SUBJECT: WRITTEN TESTIMONY FOR THE LEGISLATIVE BRIEFING ON YOUTH AGING OUT OF FOSTER CARE

Briefing: Friday, November 5, 2010
1:00 p.m.
Conference Room 309, Hawai'i State Capitol

Dear Chairman Mizuno,

I would like to share my thoughts regarding the foster care system and what is available for youth who are transitioning to adulthood. I was saddened to hear of what happened to Erwin Viado Celes but I believe that there are many other factors that were not portrayed accurately or in its entirety regarding this case.

I am a licensed social worker in Hawai'i and have been working in the field for 17 years. Much of my work has been in the field of mental health but I am currently working in the foster care system. Throughout my career, I have seen many individuals struggle with the challenges that life throws at them; some are able to overcome them while for others, it is an ongoing battle. There are so many factors that need to be taken into consideration when trying to figure out the "whys" of each individual who is struggling in their life. What I have found to be the common theme though is that there is never only one reason.

There is no doubt that youth transitioning from foster care face challenges during that time. The Department of Human Services as well as various community agencies recognizes this and has made significant strides to provide services that will meet the needs of our youth in order to help them succeed. For example, they have Independent Living Services, Higher Education Board Allowances, Youth Circles and many more opportunities to provide support to the youth prior to and following turning 18. I truly believe that the Department is committed to providing the best possible services to Hawai'i's children and youth.

Thank you for this opportunity to testify.

November 4, 2010

TO: Rep. John M. Mizuno, Chair
Rep. Tom Brower, Vice Chair
House Committee on Human Services (HUS)

FROM: Cindy Shimabukuro, LSW
Assistant Project Director, Partners in Development Foundation-Hui Ho'omalua
Program

SUBJECT: WRITTEN TESTIMONY FOR THE LEGISLATIVE BRIEFING ON YOUTH AGING OUT
OF FOSTER CARE

Briefing: Friday, November 5, 2010
1:00 p.m.
Conference Room 309, Hawai'i State Capitol

Dear Chairman Mizuno,

I have been a social worker providing services to children and families since 1987. For several years, from 1989 – 1991 I worked with young men and women who were transitioning from Foster care to independent living. We taught them life skills, both practical like how to wash clothes to the more personal / psychological skills such as making peace with your past. At that time, these youth were afforded support and guidance through this difficult transition time. I felt we were doing a good job at that time. I have not worked directly with youth in this age group since the early 90s. As I look at what's available to these youth now, I am completely impressed. There has been a huge nation-wide movement to give these vulnerable youth the best support and resources available. Hawaii it seems, has been taking advantage of this national movement to increase and enhance services to these youth. While the death of this young man is a tragedy, it is my understanding that he was afforded an array of positive and supportive resources. While anything can be improved upon, I do not see that the safety net provided by DHS is full of holes. I feel that it is full of caring and committed individuals who strive to provide the very best for the children in their care.

Testimony from Arlina Wong, L.S.W.,
Statewide General Licensing Clinical Coordinator for Partners in Development Foundation
To the Committee on Human Services
For the Informational Briefing on DHS Services
Friday, November 5, 2010, 1:00 p.m.
Conference Room 309
State Capitol

Since graduating with my Master's degree from the University of Hawaii School Of School Work in 2000, I have worked with foster youth and their foster families. A majority of this time was spent serving adolescents in foster care and collaborating with their team members, comprised of DHS, DOH, and DOE professionals, and others, all of which were committed and dedicated to providing the best care for these youth.

In January of 2003 I founded a collaborative group called T.H.E. Collaboration (Transition, Housing, Education), whose mission is to inform and assist foster youth in their transition into adulthood. This group is still in existence, and is comprised of various agencies who serve the families and youth in foster care. Around the same time I developed an independent living program, which grew into a transition home with individual services, available to all adult males who were previous foster youth. More recently, I have worked with DHS in various capacities to improve the services to foster youth, including establishing a family finding process, strengthening reunification services, finding appropriate permanency options, and recommending resource families.

I give you my background as a testimony to what I have experienced in working with foster youth and what I have seen of the Department of Human Services, as well as what is available to foster youth in transition. Throughout the years DHS, has evaluated and improved their services to focus on the past, present and future of foster youth in our state. This is evidenced by the positive review by the National Resource Center on Youth Services, with Dorothy Ansell (who is an expert in the independent living realm). If it weren't for the extended services provided by DHS, many others services would not be in existence today. The financial and educational services DHS provides to transitioning youth are generous and available to youth who desire to accept them. It is my experience that not all youth accept what is provided.

One system or one department cannot be held responsible for the outcome of the decisions made by the youth they serve. We are individuals with our own values, beliefs, shortcomings and fears. Our government cannot be everything to everyone. As a community, we are all responsible to care for those closest to us. Therefore, we should all be held responsible to carry the burden of our families and neighbors. Improvement should start here.

From: Pauline Pavao [mailto:pauline.pavao@usw.salvationarmy.org]

Sent: Wednesday, November 03, 2010 1:05 PM

To: HUS testimony

Subject: Informational Briefing - November 5, 2010, 10:00 am - Committee on Human Services

Rep. John M. Mizuno, Chair - Committee on Human Services

Rep. Tom Brower, Vice Chair and Members of the Committee

Re: Informational Briefing - November 5, 2010, 10:00 am. - Youth Aging Out of Foster Care

The Salvation Army - Family Intervention Services (TSA-FIS) provides independent living/transitional living residential programs to youth aging out of the foster care system. TSA-FIS is currently contracted for 1.5 beds in Hilo (E. Hawaii) and 1.5 beds in Kona (W. Hawaii) through funds received from the Dept. of Human Services and Office of Youth Services. At this time we have a wait list of 10 youth in Hilo and 4 youth in Kona - waiting for residential independent living bed to become available. The average length of stay for youth in the Independent Living Program (ILP) residential program is anywhere from 9 to 15 months. TSA-FIS utilizes the Botvin transitional living curriculum while youth is in residence. The Botvin Curriculum is designed to promote health and personal development through the following components: Goal Setting, Effective Communication, Managing Stress, Decision Making and Risk, Managing Time and Money, Building Relationships.

Youth Development Specialists, assigned to the ILP program, aid youth in attaining a job and/or enlisting in military, or higher education. TSA-FIS works with youth in finding a place to live while continuing in their work and/or higher education. The University of Hawaii at Hilo continues to be an integral partner in helping our youth finding grants for higher education, dorming, etc.

We are thankful that the Committee on Human Services is concerned in creating solutions for our youth aging out of foster care as we find that most of these youth if not afforded housing will become a large part of our homeless population.

Thank you.

Pauline Pavao, Administrator

The Salvation Army - FAMILY INTERVENTION SERVICES

P.O. Box 5085

Hilo, Hawaii 96720-1085

Ph: (808) 959-5855 ext 28 Fax: (808) 959-2301

Pauline.Pavao@usw.salvationarmy.org

From: becca.cheung [mailto:becca.cheung@yahoo.com]
Sent: Thursday, November 04, 2010 12:11 PM
To: HUS testimony
Subject: DHS testimony

HOUSE OF REPRESENTATIVES
THE TWENTY-FIFTH LEGISLATURE
INTERIM OF 2010

COMMITTEE ON HUMAN SERVICES

Rep. John M. Mizuno, Chair
Rep. Tom Brower, Vice Chair

Rep. Della Au Belatti Rep. Maile S.L. Shimabukuro
Rep. Joe Bertram, III Rep. Ryan I. Yamane
Rep. Mele Carroll Rep. Gene Ward
Rep. Scott Y. Nishimoto

NOTICE OF INFORMATIONAL BRIEFING

DATE: Friday, November 5, 2010
TIME: 1:00 p.m.
PLACE: Conference Room 309
State Capitol
415 South Beretania Street

Aloha,

My name is Rebecca Cheung, and I am a resource caregiver (aka foster parent). I have cared for many children and worked alongside many DHS employees. I know first-hand that there are many services available to foster children of all ages. As we all know, all teenagers that turn 18 are free to do as they please and make their own decisions, whether they are a child in foster care or not. Birth parents do not even have the legal right and support to force their children to do something that they do not want to. As parents, you guide them through childhood, adolescence, and into adulthood and hope that they will make the right decisions. For children in foster care, there are many resources available to help them get through the tough times and assist them in achieving goals that they set. Being in foster care is unfortunate and not easy. However, the department has services in place for those that want it. DHS provides youth with services which include academic stipends, family connections, independent living skills training, medical coverage, as well as many support groups for all teens to come together and help each other through their difficult times. Like everything else, it cannot be forced.

In the case of Erwin Viado Celes, it is very unfortunate that he did not utilize the services being provided to him. While we mourn his loss, pointing fingers without truly understanding the circumstances does not change the incident or situation. Part of what we should look at is his whole story. While many will blame "the system" and its flaws, we should also look at ourselves as a community. What can we do as a community to better support our youth in foster care? This starts with supporting friends and family with children whom are struggling to provide for their children, all the way up to becoming a resource caregiver for children of all ages, especially teens. By opening up our hearts and homes to these children, we are reducing the number of times they "bounce from home to home." By supporting these children and loving them as our own will give them the support and confidence to enter into their adulthood with the ability to make good decisions. Without all of our hands in the sink, we shouldn't be able to wash only ourselves clean from responsibility.

Doing my share, to the best of my ability,

Rebecca Cheung, Resource Caregiver

Lisa Ann M. Letoto-Ohata
1485 Haku Street, Honolulu, HI 96819
(808)450-2785, laletoto@hawaii.edu

November 4, 2010

Representative John M. Mizuno
Chair, House of Representatives, Committee on Human Services
Hawaii State Capitol, Room 436
Honolulu, HI 96813

Dear Representative Mizuno,

I am writing to offer testimony in regards to the concerns with foster care. As a current DHS resource caregiver, H.A.N.A.I. trainer, and mentor, I have personally cared for and assisted foster teens who have “aged out” of our system.

Some of the teens that I have had the opportunity to work with are ready to go on to higher education upon graduation from high school. The current higher education board allowance, as well as, grants, scholarships, financial assistance, and case management programs (Excel and E Makua `Ana) assures them of being able to and gives them the confidence to succeed. For many others, they are not ready to go directly into higher education and have other resources that are available to help them through the time of transition. Many of our foster youth have resources and opportunities to help them, but the issue is really if they know about it or are taking advantage of it.

One of my greatest success stories highlights the teenage boy that was a chronic runaway and thought the least likely to succeed by both his family and friends. During his time with us, we worked on his transitional plan, along with his EPIC Inc case manager, Randy Shiraishi, so that he knew what his options were and what HE would be able to pursue upon aging out. He successfully graduated from high school in 2009 and recently graduated from Job Corps one year early. We are working on securing stable employment for him and pursuing housing options available to former foster children. This is because HE wants it and is asking for the help to get it. I am extremely proud of him! It was not an easy journey, but he worked hard to make it happen.

Another one of our former foster teens graduated from high school on the mainland and attends college as a pre-law student. During his time with us, we discussed what was available to him as a foster child in hopes that he would take advantage of it. And, he did.


And yet, another one of our former foster teens refused to hear or look into any of the resources that we offered him. Trainings and workshops that are offered for foster teens are very poorly attended. They are free, held at times that teens say are most convenient for them, and have

many incentives (prizes, food, gift cards, etc). While most of my foster teens would willingly go, I've also had a few that refused and said they didn't need it. I didn't force them, because I believe that a person has to want something in order for it to be useful and of value to them.

The point being, our children in foster care have many options, resources, and opportunities that are available to them to help them succeed, but the gap is either in they are not being told or they do not want to pursue it.

I applaud our leaders in taking the steps that are needed to find out where the gaps are what needs to be done to continue helping our children. Thank you for your time.

Sincerely,

A handwritten signature in cursive script that reads "Lisa Ann M. Letoto-Ohata".

Lisa Ann M. Letoto-Ohata

TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair

FROM: Jonathan Mendoza

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

Thank you for this opportunity to share my thoughts in regard to foster youth transitioning into life as young adults. There is a need for support of some kind to be able to assist the youngsters moving on their own. I recall when I had turned 18, able to go on my own and explore. I did and what I found out real quick was that it is very difficult to do it on no support & no money. I found myself going home to my family. I notice that in most of my challenges I quickly began to learn that I need my family to get through this so called life.

For the youth in foster care, I am sure that it is the same; they run into different situations that would result in needing assistance and support to make it in life. I think that the majority of youth in foster care are not truly connected and tied in with their biological families to "go back home" or even to go back to their previous foster/resource family to seek support & assistance.

I have been involved with providing a foster home for a few youth that have since transitioned into adulthood. Our former foster youth are struggling to move on in life, I see them going through various family, friends and partners just trying to get by. Often visiting to hang out, rest; ask for money, wash clothes and the typical things that I remember doing at the age of 18 through 21. And even beyond the age of 21 through 28... till this day I am 46 years old and still call upon my mom for support, and help whether it is financially or emotionally or just simply belonging...

I guess what I am trying to put into words, for this young man Erwin Celes, and many other youth in foster care, we need to somehow be there for the youth that don't have significant Ohana that can help them through the years of young adult life; that is too difficult for these young adults to have to deal with on their own. We need mostly to create support & resources for this population that so deserve to have a family for life as we all do...

Aloha & Mahalo

Jonathan Mendoza - Foster Parent Big Island

From: Santo and Dani Ruiz [mailto:santo.ruiz@hawaiiantel.net]
Sent: Friday, November 05, 2010 10:10 AM
To: HUS testimony
Subject: Testimony for Breifing on Foster Children Aging Out

November 5, 2010

To the Honorable Rep. John Mizuno and the Committee of Human Services,

As a DHS licensed foster parent since 1999, I wanted to be able to render my personal experience as a foster parent in order to assist in continuing to make the CWS system are better for your teenagers aging out of care. Nearly my entire 11 years as a foster parent with my husband, my experience in foster parenting has been dedicated to teenage girls who needed permanent placement. We also provided a few years of emergency shelter for teenage girls. We have done several legal guardianships and several adoptions of teenagers. In both situations, we have always tried to reason with our youth on why they should remain in our home after turning 18. This is not to say we did not have a relationship with these girls to the point that they felt we were their family also. It is quite the opposite. They all considered us their parents, their home, their family. My relationship with them allowed for us to have discussion about their birth families and desires as adults. Many expressed great gratitude and love for our home but also felt they need to connect to their birth families. They wanted to go back to their parents or grandparents who they felt they needed to be with and see if they loved them. Unfortunately, every single one that left to be with their birth family realized that although they have made many changes in their own life in this family with school, healthy choices, peers, and community activates, it was not the same for them family. Many still suffered for the reasons they were removed or even the after effects of have been on drugs for many years. Most have been able to ask to return to us, which we have always excepted and respected their courage to ask, put some had too much pride until word would get back to me and I will initiate their return.

In learning really quickly the biological bonds that hold many of these teenagers hostage, for the last four years, we have taken it upon ourselves to nurture some type of relationship with their birth families. Granted, this can be a very emotional and draining process as the new caregiver. It is trying at best to figure out what will be the correct amount of interaction and at what level, dependent on the birth family's place in time. There are many non-threatening ways to include birth families like sporting or drama events, birthday celebrations, and holidays. I know it can be fearful and difficult for foster parents to be the mediator but we have discovered this is the primary intervention needed in order for our children to maintain their stability into adulthood. If foster parents can be willing to be "a family helping a family", it is highly successful. The teenagers feel we are trying to connect them and not severe them. They feel we are taking interest in what is important to them and not what is important to the system. And the eyes of these very young adults become wide open to the lives they have built for themselves with their new family and the lives that their parents have struggled with. These children are looking for validation that their birth parents did love them and that they are still deserving of their love, even though they have a new family now. Our teens are able to see for themselves what kind of love and commitment their birth parents are able to provide and how it relates to them in their new families. I am able to have conversations with them after visits to stress the fact that their parents have loved them and always will. That their parents have felt that they made the choice that they felt were the best at that time and may not have had many good choices to pick from. They all can relate because as teenagers they have faced similar battles. But with the support of my husband and I, we can facilitate these emotions and natural unfolding of relationships, BEFORE they turn 18. This has eliminated our children from leaving us Dear John letters about how they love us so much but gotta go on their 18 birthday.

Here is a recent beautiful example of this with my 17 year old that we adopted last year: She comes to me one day and tells me about her Facebook page and she has posted some family photos of all of us at the beach and labels the photo album "Family Photos". She says that her biological mother post a comment to say how come there are no pictures of her in the "Family Album". She tells me, I love my mom so I put a photo of us on Facebook just because I know my mom is lonely, love us, and miss us. But I see her every other week and I reassure her she is my mom. But this is my family now and I just need to reassure her and myself that we are still mother and daughter.

I can only have these conversations with her because I foster her relationship with her mother. As much as her mother has not changed her lifestyle at all, we focus on the love that she has for her children and the person she is aside from the choices that she makes on how to live her life. This is not an easy process, but if continue to ignored and not address how much birth parents impact teenager foster children, we will continue to have negative outcomes when they age out. If we understand and know that these emotional bonds will haunt our children as they become adults, we have no choice but to address them. We have no choice but to repair and facilitate at least one emotional bond to their birth family, regardless of the choices these members are making. Our teenagers need to processes this bond and evaluate, compare, and use their new skills to sort their entire history in a safe and nurturing environment with caregivers that understand their parents loved them regardless of what they did to them and they did what they thought was the best of bad choices at that time. Example: Take them with me to the drug house where I sell myself for drugs or leave them abandon at home where they are kept safe from my lifestyle? Not the best choices or outcomes but some love there.

I also know Erwin's bothers personally as they are in my extended family. I believe more could have been done, even according to the records, to facilitate Erwin having a bond with his biological mom and siblings. It was obvious it was important to him because he always found a way to find them and have random contact. But no one decided that his ability to keep track of them as a young teenager that this was important to him. That someone who he currently trusted could have nurture what HE felt was important. To assist him in forming healthy emotional bonds to the people whom HE felt were important. All it would have took is one person who he categorizes as important to HIM, for him to have that one emotional bond, that could have left him feeling he had no one now that his girlfriend was gone. He did not have that bond with his brothers, sister, or biological mom. The contact he had with his biological mom was based out of need and survival and was not facilitated to be a healthy emotional bond.

Sincerely,

Dani Ruiz
PO Box 700502
Kapolei, HI 96709
808-220-8111

TO: Committee on Human Services
Representative John Mizuno, Chair
Representative Tom Brower, Vice Chair
FROM: Marvin St. Clair
Volcano

BRIEFING: Friday, November 5, 2010
1:00 p.m.
Conference Room 309

First: Congratulations and Best Wishes on your electoral success. You carry with you the highest hopes of those of us concerned with, and committed to, the health and welfare of our most vulnerable fellow travelers.

Among those fellow travelers are the most recent *former* Keiki. By that I mean those unfortunate youth who have, for whatever the reason, lacked the family structure to sufficiently nurture their growth and development and then displayed the temerity to achieve 18 years of age. I refer more specifically to those who had been in foster care.

The concept that all youth somehow becoming capable of total independence and good judgment at age 18 seems a remnant of an earlier, pre-industrial age. Many youth involved in our well-meaning social programs yearn for the time when they will be able to reject them and declare their autonomy. Many who do so soon find themselves bereft of social, educational, and financial support.

Despair and escape from despair through reckless behaviors and chemical abuse all too often become the route travelled by those no longer "Fellow Travelers."

Some will overcome and find success. Most will not. Many of those who survive will turn up on the back page of our local newspaper and burden us, our neighbors, and our rehabilitation and prison systems, while leaving in their wake another generation placed upon the same path.

One thing we may do to help is to allow youth who opt out of our care at 18 an option to opt back in until a later age. Recent Health care reform has extended the age that an *adult* may be covered under a parent's policy to the age of 26. That is, if you are so fortunate as to be well-born you will be cared for. If not, you are on your own at 18.

I urge you to explore, identify, and implement opportunities to extend support, not only to our keiki but to our newest "adults."

Mahalo for entertaining my input as you go about your vitally important work.

Marvin St. Clair

Testimony

LATE

Cost Avoidance for Improving Outcomes for Transitioning Foster Youth

Each year in the United States, about 24,000 youth age out of the foster care system.

- The data shows that 13% of the general population has neither graduated high school nor received a GED by age 21, while that figure is 25% for youth aging out of foster care.
- The data shows that 71% of females aging out of foster care become pregnant at least once before age 21, while this is true for only 34% of the general population.
- Males in the foster care group were four times more likely to have ever been arrested than a comparison group, while females were nearly ten times as likely to have been arrested.

The differences in outcomes result in welfare and Medicaid costs, the cost of incarceration, lost wages and other significant costs to society. We estimate that the outcome differences between youth aging out of the foster care system and the general population is nearly \$5,700,000,000 for each annual cohort of youth leaving care. To summarize:

- One cohort year graduating at the rate of the general population would increase earnings over a working life . . . \$748,800,000
- One cohort year unplanned parenthood based on the cost of first 15 years of life for the first child . . . \$115,627,350
- One cohort year criminal justice costs for a criminal career . . . \$4,833,736,200¹

The Hawaii costs for an annual cohort of 100 are estimated proportionally as follows:

- One Hawaii cohort year graduating at the rate of the general population would increase earnings over a working life . . . \$3,120,000
- One Hawaii cohort year unplanned parenthood based on the cost of first 15 years of life for the first child . . . \$481,800
- One Hawaii cohort year criminal justice costs for a criminal career . . . \$20,140,568

Total estimated costs for outcome differences for education, unplanned pregnancy and criminal involvement for each cohort year aging out in Hawaii is estimated to be \$23,742,368.

¹Source: "Cost Avoidance: Bolstering the Economic Case for Investing in Youth Aging Out of Foster Care." Cutler Consulting, 2009. Page 1.

Arlyne Howell
Executive Director EPIC
838 1261