


## Addressing the Educational Needs of Youth in Foster Care

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Court Improvement Program Distance Learning Series




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## Foster Children and the Education System

Why are we here?

Many of the organizations that have the responsibility to support children have failed foster children so much that they could be called the "forgotten children."  
 We want to change that trend!

Why are you here?





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## Foster Children and the Education System

What will we learn?

- Barriers and potential solutions for systems and agencies that exist for children
- How to navigate the school system with the efficiency and knowledge to most benefit foster children
- Raise awareness of extraneous issues that complicate foster children's ability to learn.


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## Barriers between Schools, DCS & Professionals in Foster Care

Two (or three) wrongs don't make a right, they can create a catastrophe:

- The School System, DCS, and the Judicial System all exhibit strengths and weaknesses.
  - Effective communication is a challenge between these government agencies.
  - Personnel in each of these organizations have their biases and assumptions about each other.



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## Barriers: Communication

Schools impede communication through:

- Negative perceptions of foster care children (increases in secondary schools)
  - Ignorance of how the foster system works
  - Disorganization



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## Barriers: Communication

Why Negative Perceptions?:

- Impact of behaviors on school
- Often little guardian support
- Confusion with roles of GAL, DCS caseworker, foster parent, and birth parent-who has the rights?
  - High mobility and little documentation
  - School Personnel Incompetence/ Burn-out/Personal Bias/ Ignorance
  - Low Expectations



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**Solutions:  
Communication**

- School Personnel need to be educated on the Foster Care System.
- Children need to stay at the initial school: McKinney-Vento Act, Continuation Forms
- If the child cannot stay at the same school, look for schools that can align with similar credits (high school)




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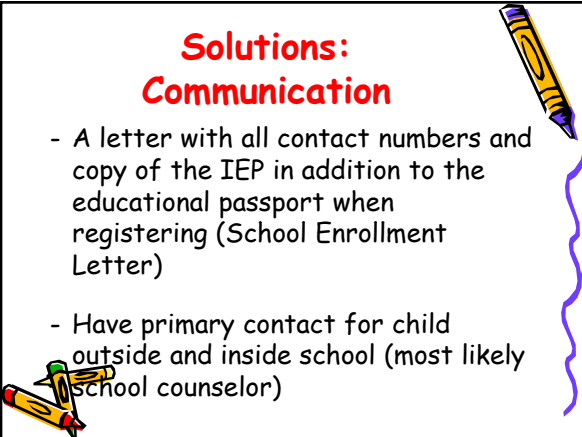
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**Solutions:  
Communication**

- A letter with all contact numbers and copy of the IEP in addition to the educational passport when registering (School Enrollment Letter)
- Have primary contact for child outside and inside school (most likely school counselor)




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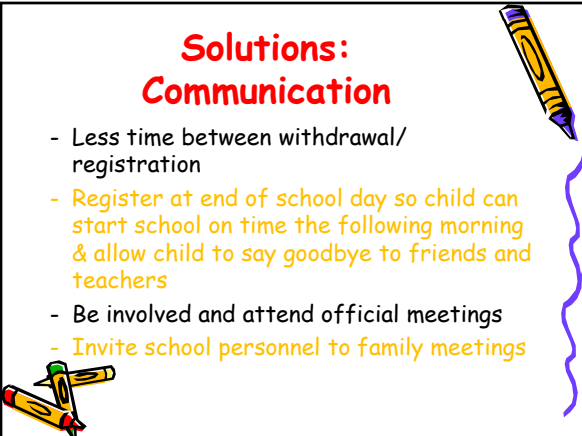
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**Solutions:  
Communication**

- Less time between withdrawal/ registration
- Register at end of school day so child can start school on time the following morning & allow child to say goodbye to friends and teachers
- Be involved and attend official meetings
- Invite school personnel to family meetings




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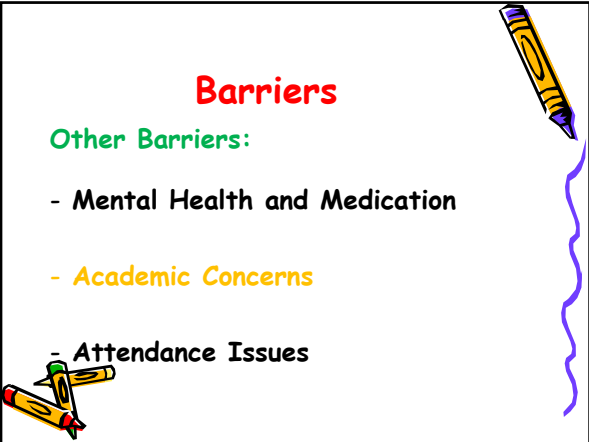
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**Barriers**

Other Barriers:

- Mental Health and Medication
- Academic Concerns
- Attendance Issues



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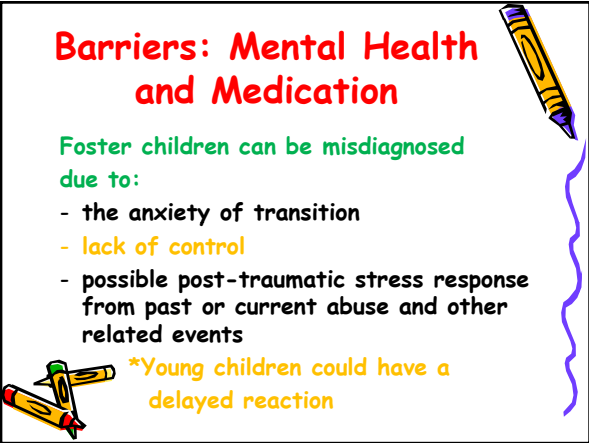
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**Barriers: Mental Health and Medication**

Foster children can be misdiagnosed due to:

- the anxiety of transition
- lack of control
- possible post-traumatic stress response from past or current abuse and other related events

\*Young children could have a delayed reaction



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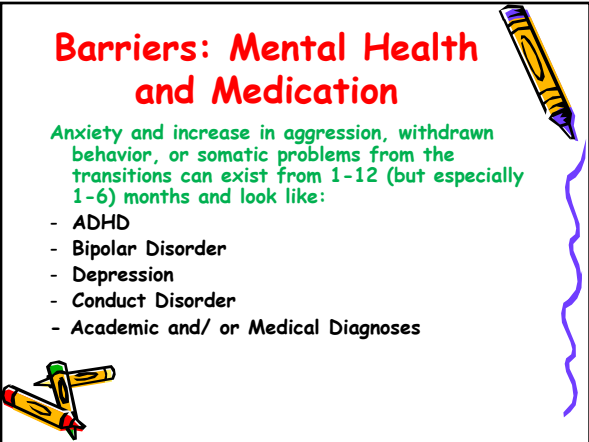
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**Barriers: Mental Health and Medication**

Anxiety and increase in aggression, withdrawn behavior, or somatic problems from the transitions can exist from 1-12 (but especially 1-6) months and look like:

- ADHD
- Bipolar Disorder
- Depression
- Conduct Disorder
- Academic and/ or Medical Diagnoses



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## Barriers: Mental Health and Medication

Anxiety from transition can also look like post-traumatic stress disorder (PTSD).

However, both PTSD and attachment disorders are common with children who have been abused and/ or lived in a chaotic or unsafe household.



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## Barriers: Mental Health and Medication

### PTSD Symptoms:

- Recurrent thoughts from past
- Recurrent nightmares
- Acting or feeling as if event were occurring in the present
- Less interest in normal activities
- Estrangement and limited emotion



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## Barriers: Mental Health and Medication

### PTSD (con't)

- Difficulty falling or staying asleep
- Irritability/ Anger
- Difficulty Concentrating
- Hypervigilance (nervous energy)
- Easily Startled



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## Barriers: Mental Health and Medication

### Attachment Disorder:

- Has difficulty responding developmentally appropriate in social interactions, such as:
  - Excessively shy, ambivalent, or angry without apparent reason
  - Mixed Interactions
  - Inconsistent Relationships



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## Barriers: Mental Health and Medication

### Misdiagnosis could cause misappropriation of medicine which could result in:

- Intensifying the undesirable behaviors
- Increased sleeplessness
- Creating behaviors unusual to that particular child



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## Barriers: Mental Health and Medication

### Incorrect use of medication could also:

- Potentially harm the child mentally, physically, or emotionally
- Cause schoolwork to suffer due to behavior issues or inability to focus
- Strain foster child's relationships with foster parent, school personnel



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## Solutions: Mental Health and Medication

- Wait at least three months to start medication unless behaviors are physically threatening to self or others
  - Look at sleeping and eating patterns as well as changes in behavior to determine overmedication
  - If medication is being used incorrectly it can be given at school once a medication permission form has been filled out



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## Solutions: Mental Health and Medication

- A 504 Plan can be created for any child with a medical problem
  - If needed, a child can benefit from an IEP under "Other Health Impaired" or "Emotional Disturbance"
  - A child can be assigned a mentor or a "check-in/ check-out" person at school
    - A child can participate in individual/ small group counseling or be assigned a "buddy" for help



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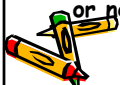
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## Academic and Attendance Barriers

### Foster children rarely attend Head Start Programs

- Continuous school transfers put children 4-6 months behind each move
- Foster children are overly-identified in Special Education- is this positive or negative?



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## Academic and Attendance Barriers

- School transfers cause high school children to lose credits and have difficulty finding courses related to their initial plan (esp in rural, alt schools)
- Sometimes, children are encouraged to take the GED when they could achieve a diploma or take the GED before coursework is finished



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## Academic and Attendance Barriers

- The chaotic and unstable environment of the foster child can cause academic difficulties
- Mental and Physical Issues can impede a child's academic progress
- Constant tardy and attendance issues greatly impact learning and can result in grade retention
  - Court dates
  - Doctor and/or counseling appts.



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## Academic and Attendance Solutions

- Keep school transfers to a minimum through the McKinney Act
- Utilize the s-team process to increase child's opportunity for progress through intervention. Plus, this meeting will put the foster child on school personnel's "radars"
- If a s-team or IEP team meeting is requested, the school must respond with a meeting date within 10 school days.



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## Academic and Attendance Solutions

- Doctor's Appointments need to be made during hours that least impact the child's school schedule
- Children respond best when they can begin the school day on time
- Scheduler needs to know when weakest school subjects are taught during the day or when non-academic subjects are taught, depending on child's interest



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## Academic and Attendance Solutions

- Counseling can occur at the school if a relationship with the school has been formed and if the school has a quiet and confidential space
- The child's foster parent, guardian ad-litem, and/or DCS caseworker should attend district-wide parent conference days
- A 504 Plan can offer extra support to the child if needed



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## Academic and Attendance Solutions

Other Academic Interventions (can occur in a s-team or another meeting):

Volunteer Tutor

Peer Tutoring

Foster Child in a leadership position

Extra time/ projects in areas of interest

Extra Support from Reading Specialist

Special Ability Grouping

Conforming assignments based on strengths: use of computer, etc.

Mindful Selection of Teacher



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## Academic and Attendance Solutions

A referral for evaluation in the s-team process should not occur in the following cases:

- following a disruption in the home environment
- a deficient home environment with respect to education
- excessive tardies or absenteeism



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## Academic Solutions and Awareness

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IEP teams should include

- Guardians
- At least one regular education teacher of the child
- At least one special education teacher or provider
- A principal or other representative
- An individual who can interpret test results
- Other individuals who have knowledge or special expertise regarding the child
- When appropriate, the child



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## Academic Solutions and Awareness

The IEP or Individual Education Plan process includes 7 steps:

1. Referral
2. Pre-Evaluation
3. Evaluation



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## Academic Solutions and Awareness

4. Eligibility Determination (team meets to determine whether the evaluation results indicate a disability and whether the child exhibits a need for special education within 40 days of signature)

5. Development of the IEP



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## Academic Solutions and Awareness

6. IEP Implementation ( the school district is responsible for obtaining informed written parental consent prior to implementation of the initial IEP placement)

7. Annual Review (must be reviewed at least annually but can be reviewed more often if requested by an IEP team member).



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## Academic Solutions and Awareness

Common disabilities of foster care children include:

1. **Learning Disabilities** (mainly in reading or math): when a child is performing significantly below in one of these areas but has a pattern of strengths in one or more other cognitive/academic areas.
2. **Developmental Delay** (age 3-9): when a child is experiencing significant delays in one or more of these areas: physical, cognitive, communication, social or emotional, or adaptive development that adversely affects a child's educational performance.

(Tennessee Special Ed Manual, 2008)



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## Academic Solutions and Awareness

3. **Other Health Impairment:** when a child has impaired focus or limited strength in respect to his or her learning environment due to chronic or acute medical problems.
4. **Emotional Disturbance:** when one or more of the following characteristics are exhibited to a marked degree over an extended period of time: inability to learn or maintain satisfactory interpersonal relationships, inappropriate behavior when no stressors are present, general mood of unhappiness or depression, and tendency to develop fears or symptoms associated with personal or school problems.



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## Academic Solutions and Awareness

Dissatisfaction with the Sp Ed process:

Administrative Complaints:

<http://tennessee.gov/education/speced/doc/62007AdministrativeCompl.pdf>

Mediation Request Form:

<http://tennessee.gov/education/speced/doc/63007MediationR0qst.pdf>

Due Process Hearing Request Form:

<http://tennessee.gov/education/speced/doc/62807DueProcessRqst.pdf>



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## Permanency Plan Solutions: Elementary

Under "Relevant Educational Information" in Section 7, include the following information (Use Rating Scale 1-5, 1 being deficient -5 excellent):

- Relationships with teachers
- Child's attitude toward school
- Social Aptitude/ Friendships



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**Permanency Plan  
Solutions: Elementary**

- Child's Attendance
- Child's Tardies

Also include answers to these questions:

1. Does the child have particular classes/ subjects he/she enjoys?
2. What (if any) services does the child receive through school and does the child have an IEP or 504?


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**Permanency Plan  
Solutions: Elementary**

3. If the child has an IEP or 504 plan, has the team met this year to update that plan? If so, what changes have been made to the plan and will the child exit special education this year? If exiting, what supports have been put in place to aid the child's transition?
4. If the plan has not been updated, has a meeting been scheduled


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**Permanency Plan  
Solutions: Elementary**

5. Has the DCS caseworker or foster parent made any attempts to communicate with the school?
6. Has there been any decrease or increase in the child's grades this year and can the foster parent attribute these changes in grades to any particular reason(s)?
7. If the child does not have an IEP, how have the child's weak academic areas been addressed?


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## Permanency Plan Solutions: High School and Beyond

What do we mean by "raising the bar?"

- Individualized
- Creative
- High Expectations
- Experiences



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## Permanency Plan Educational Goals

- Graduation requirements
- It's all about credits!
- In January 2008 the TN State Board of Education passed a new high School Policy requiring all students to complete the same graduation requirements.



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## Graduation Requirements "Raising the Bar"

- Gateway tests are being eliminated and replaced with more rigorous end-of-course assessments that are aligned to the revised standards.
- Students must take Math each year of high school.
- Biology 1, physics or chemistry, and a third lab science course



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## Graduation Requirements

- All students must also complete an elective focus of at least three credits.
- Course modifications and alternative performance-based assessments will be allowed for students with disabilities.



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## Traditional High School Alternatives

- Will vary from county to county
- Districts have been very creative
- Dual high school and college enrollment
- Online instruction
- Non traditional environment and hours (at the mall in the evening)
- Highly personalized



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## General Educational Development - GED

- High School Equivalency Diploma
- Designed to measure skills and concepts generally associated with four years of high school
- Must be 18 years old and not have received a high school diploma to be eligible to test



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## GED

Individuals who are seventeen may be tested if

- the superintendent of the school system where the applicant resides signs a waiver, and
- not presently enrolled in high school, or
- is currently enrolled in a state approved GED Option Program



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## Permanency Plan - Career Goals

• Experience Needed!

- Employment
- Volunteer opportunities
- Extracurricular activities



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## Foster Care and Beyond 18 Years

- Drivers license
- Bank account
- Support system



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## Presentation Assessment

1. If one solution could be chosen as the most important factor to benefit foster children, what would it be?
2. What is one of the biggest concerns in giving inappropriate medication to foster children?
3. What the two mental health diagnoses that a foster child might potentially be diagnosed with?
4. What is one question (of the several) that should be answered when filling out the permanency plan for elementary students?



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## Presentation Assessment

5. How many days does the school have to respond to a request for an official meeting, such as a s-team, 504, or an IEP meeting?
6. How can the McKinney-Vento Act be used to help a foster child?
7. Statistics show that foster children are identified more than the general population as eligible for special education services. How can this be used to the child's advantage?



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## Presentation Assessment

8. What is the difference between an S-team and an IEP meeting?
9. What is the GED and who can take it?
10. How can you help "raise the bar" for a foster child when writing a Permanency Plan?



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## Last Words.....

"Coming together is a beginning  
Keeping together is progress  
Working together is success"  
Henry Ford

Let's continue to take these steps in order  
to work together for the benefit of foster  
children.



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