Adolescents—young people ages 10 to 25—make up nearly one-fourth of the U.S. population. Drawing upon recent scientific advances, The Promise of Adolescence: Realizing Opportunity for All Youth (2019), a report from the National Academies of Sciences, Engineering, and Medicine, highlights the need for policies and practices that better leverage the developmental opportunities offered by adolescence. The changes in brain structure and function that happen at this age present adolescents with unique opportunities for positive, life-shaping development, and for addressing the harmful effects of negative early-life experiences, such as trauma, abuse, or economic hardship.

The report examines how the nation’s child welfare system can better support adolescents, and these findings and recommendations are highlighted in this brief.

**WHAT IS ADOLESCENCE?**

Adolescence is a developmental period rich with opportunity for youth to learn and grow. Throughout adolescence, the connections between brain regions become stronger and more efficient. This means that adolescents’ brains can adapt, and they become more specialized in response to demands placed on them by their environments—by learning opportunities at school, for example, and by social interactions with their peers and families.

The adolescent brain also has an exceptional capacity for resilience, meaning adolescents can develop neurobiological adaptations and behaviors that leave them better equipped to handle adversities. By intervening during adolescence, we can improve young people’s overall well-being and help them lead meaningful, healthy, and successful lives.
ADOLESCENCE AND THE CHILD WELFARE SYSTEM

The current structure of the child welfare system was designed based on the needs of younger children and does not fully incorporate adolescents’ more advanced developmental needs and abilities into its aims and methods. The help and support adolescents require differs greatly from that required by young children. Cognitively, the adolescent brain is maturing, and adolescents are capable of more abstract thinking and problem solving than they were in early childhood, including an understanding of cause and effect, perspective-taking, having a sense of agency, and increased planning and future orientation skills. These skills enable them to be active participants in planning for their future. Socially, adolescents enjoy spending time with other adolescents. These peer-based social connections often take center stage in adolescents’ lives, impacting their well-being.

In addition, adolescents have greater awareness of their own and others’ feelings and emotions than they did just a few years prior, enabling them to understand the perspective of others and contribute as productive members of society. Together, the higher-level cognitive, social, and emotional capacities that adolescents develop provide them with a toolkit of skills they can use to actively participate in creating their own futures, and to participate in and play a lead role in decision making about their education, residential and custodial situations, and treatment and health care needs.

DISPARITIES IN THE CHILD WELFARE SYSTEM

There are also disparities within the child welfare system: poor children and children of color are disproportionately referred to the child welfare system. Both disproportionate need and differential treatment by community members and the child welfare system play important roles in explaining these disparities. Community reporters are more likely to report children of color to child welfare authorities, which suggests discriminatory reporting in communities of color.

A second important source of systemic disparity in treatment is that families of color are offered fewer in-home services that might prevent the placement of a child or adolescent in foster care. As a result, children of color are both more likely to be removed from a home and more likely to remain in foster placements longer without a permanent resolution. To reduce such disparities, decision makers may consider policies and practices that ensure that families of color have access to the same levels of in-home preventive services as other at-risk families as well as establish guidelines and protocols regarding appropriate reporting.

OPPORTUNITIES FOR FURTHER REFORM IN THE CHILD WELFARE SYSTEM

While over the past two decades Congress has gradually enacted statutory changes that better align the child welfare system with the developmental assets and challenges that adolescents face, including focusing attention on family reunification, prioritizing placement with relatives over strangers, and providing services for adolescents transitioning to young adulthood, additional efforts are needed to ensure that all adolescents involved with the child welfare system have the opportunity to flourish. The committee’s recommendations center on providing services and supports for adolescents that differ from those provided to their younger counterparts within the child welfare system, focusing on adolescents’ need to be involved as partners in decisions affecting their housing, health and mental health, and education. The recommendations also recognize the need to foster greater collaboration between the child welfare, juvenile justice, education, and health systems.
Recommendation 8-1: Reduce racial and ethnic disparities in child welfare system involvement.
A. State and local departments of child welfare should implement policies and practices that ensure that families of color have access to the same levels of in-home preventative services as other at-risk families.
B. State and local departments of child welfare should establish guidelines and protocols regarding appropriate levels of surveillance in communities to improve the overall efficiency and benefit of surveillance systems, a practice also expected to reduce disparities. Responsible agencies should actively monitor implementation of these guidelines.

Recommendation 8-2: Promote broad uptake by the states of federal programs that promote resilience and positive outcomes for adolescents involved in the child welfare system.
A. All states should adopt the existing federal option to provide extended care to youth until age 21 and Chafee services to age 23 and provide comprehensive aftercare support to youth as they transition out of the child welfare system.
B. All states should ensure that child welfare-involved youth are eligible for education and training vouchers until they reach age 26 and should facilitate and support youths’ application process.
C. All states should ensure that youth who have experienced foster care are eligible for Medicaid until age 26.

Recommendation 8-3: Provide services to adolescents and their families in the child welfare system that are developmentally informed at the individual, program, and system levels.
A. State and local departments of child welfare should implement policies and practices that incorporate a developmental approach to service provision and case management for adolescents with child welfare system involvement, prioritizing family connections and supportive adults, and taking maximum advantage of adolescents’ increasing cognitive and social capacities.
B. State and local departments of child welfare should adjust the type and structure of services and the level of adolescent involvement in decision-making related to their housing, education, and services to best align with adolescents’ developmental capabilities and needs.
C. Recognizing the growing capacity of adolescents for self-direction, case managers and courts should ensure that adolescents have the opportunity to fully participate in developing and implementing their service and transition plans, while maintaining critical ties with caring adults. To this end, adolescents should be viewed as respected partners in decision-making regarding their placements, education, and support services.

Recommendation 8-4: Conduct research that reflects the full range of adolescents in the child welfare system.
A. The federal government, state and local child welfare agencies, and philanthropic institutions should fund research on service characteristics and outcomes for the full range of adolescents in the child welfare system in order to better design and evaluate services specifically for adolescents, depending upon their age, child welfare system history, and placement situation.
B. Individual and program successes identified through this research should be scaled to system-level change for adolescents in the child welfare system.

Recommendation 8-5: Foster greater collaboration between the child welfare, juvenile justice, education, and health systems.
A. Child welfare, juvenile justice, education, and health agencies should collaborate to create an integrated data system that links information to track, evaluate, and provide an effective and integrated set of services to adolescents across these systems.
B. State and local child welfare and education agencies should collaborate to minimize educational disruptions for child welfare-involved youth. This includes insuring proper transfer of credits, appropriate school placement and services, and school transportation services when continuation in the original school is desired.
C. An arrest, court petition, delinquency finding or other involvement in the juvenile justice system should not disqualify an otherwise eligible child from remaining in or re-entering foster care for the full period of eligibility.

Recommendation 8-6: Provide developmentally appropriate services for adolescents who engage in noncriminal misconduct without justice-system involvement.

A. The primary strategy for states and localities for addressing noncriminal misconduct (status offenses) by adolescents should be the provision of services to the youths and their families on a voluntary basis, wholly outside the legal system.

B. States should end the practice of treating a violation of a court order by an adolescent adjudicated as a child in need of services (CHINS) as contempt of court and, thus, as a legal basis for initiating a juvenile delinquency proceeding.

C. If adolescents are referred to the juvenile justice system for noncriminal misconduct, the disposition should be limited exclusively to placement in a community-based program that emphasizes the provision of services and keeps the child at home.