



Highlights of [GAO-07-1097T](#), a testimony before the Subcommittee on Income Security and Family Support, Committee on Ways and Means, House of Representatives

Why GAO Did This Study

Congress passed the Foster Care Independence Act of 1999 (FCIA), which doubled annual federal funds for independent living programs to \$140 million. This testimony discusses (1) states' FCIA funding allocations, (2) services provided and remaining challenges, (3) state coordination of programs to deliver services, and (4) the states and the Department of Health and Human Services' (HHS) Administration for Children and Families' (ACF) progress toward meeting program accountability requirements. This testimony is primarily based on our 2004 report on FCIA (05-25), with updated information from our 2007 testimony on state child welfare challenges (07-850T). To conduct the 2004 work, we surveyed state independent living coordinators, conducted 4 state site visits, and reviewed states' plans and annual reports. Updated information from our 2007 testimony was taken primarily from a 2006 survey of state child welfare directors.

What GAO Recommends

We recommended that HHS improve access to federal program information. HHS did not comment on this recommendation in 2004, but disagreed with a similar recommendation in our 2007 testimony. We also recommended that HHS improve its state monitoring processes. HHS agreed to develop uniform monitoring tools, but disagrees that standard state reports are necessary.

www.gao.gov/cgi-bin/getrpt?GAO-07-1097T.

To view the full product, including the scope and methodology, click on the link above. For more information, contact Cornelia M. Ashby at (202) 512-7215 or ashbyc@gao.gov.

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CHILD WELFARE

HHS Actions Would Help States Prepare Youth in the Foster Care System for Independent Living

What GAO Found

States' funding allocations for independent living programs effectively ranged from a maximum of approximately \$500 to \$2,300 for each foster care youth who was eligible for independent living services, according to data available at the time of our 2004 report. Funding varied because of differences in states' eligibility requirements and the funding formula used to allocate funds.

Although our 2004 survey of state independent living coordinators showed that 40 states reported expanding existing independent living services to younger youth and 36 states reported serving youth older than they had previously served, states varied in their ability to engage youth and to provide key services. About one-third of reporting states were serving less than half of their eligible foster care youth population, while an equal percentage of states were serving three-fourths or more. Our 2006 survey of state child welfare directors showed that critical gaps remain in providing services such as mental health and housing for youth transitioning to independence. Mental health barriers included differences in eligibility requirements and level of services between the youth and adult systems, and long waiting lists. Housing barriers included limited affordable housing in costly urban areas, scarce rental housing in rural areas, and problems obtaining a rental lease due to the lack of youth employment and credit history or a co-signer to guarantee payment.

Almost all states that we surveyed in 2004 reported an increase in coordination with some federal, state, and local programs, but linkages with other federal and state youth-serving programs were not always in place to increase services available across local areas. Many programs exist at the federal, state, or local level that can be used to provide or supplement independent living services, and each state reported in our survey using some of these programs to provide services. Despite these coordination efforts, some states may not make full use of the available resources. Inconsistent availability of information on the array of programs that were operating in each state and local area was cited as a challenge in promoting coordination in both our prior and more current work.

States and HHS have taken action to fulfill the accountability provisions of FCIA, but 8 years later, little information is available to assess program outcomes. All states developed multiyear plans for their programs and submitted annual reports, but using these documents to assess state performance was hindered by inconsistencies between the plans and reports, an absence of goals and baseline information to measure progress, and incomplete information on outcomes for the youth serviced. ACF started developing an information system in 2000 to monitor state performance, but final regulations directing states to begin collecting data and tracking outcomes are still pending. ACF is also conducting evaluations of selected independent living programs, but results are not yet available.