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ABSTRACT

This document contains the final report on the Life Skills for Adolescents Project in northwestern Texas. The report is in the form of a process evaluation of progress toward achieving the project goal of enabling adolescents leaving substitute care to be better prepared to manage their own lives. The report describes the efforts of the project director and four child protective services specialists who formed the Adolescent Care Team to work with 20 adolescents 14 through 18 years of age who were expected to be in long-term substitute care. The background and origin of the project are described and the project goal and objectives are listed. Project accomplishments are discussed in the areas of: (1) the Adolescent Care Team; (2) the adolescents involved in the project; (3) life skills training; (4) peer support system; (5) therapy group structure and focus; (6) individual problems; (7) jobs and education; and (8) assessment and outcome. The section on life skills training is further divided into the areas of job hunting skills, money management skills, human sexuality, health care, communication and interpersonal relationships, and need for education. Topics addressed in a section on adolescents in independent living arrangements include emancipated youths, support system after substitute care, recruiting foster parents for adolescents, and local private child care facilities. The appendix contains a support group curriculum outline. (NB)

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Innovations in Protective Services

P.L. 93-247 Grant Award #06C23-10

FINAL REPORT

Life Skills for Adolescents Project

September 30, 1986

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LIFE SKILLS FOR ADOLESCENTS

Final Report

September 1, 1985, through August 31, 1986

September 30, 1986

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CONTENTS

General Introduction	iii
Acknowledgments	vii
Executive Summary	viii
Background and Origin	1
Youths in Conservatorship	1
Preventing a Return to DHS Services.	1
Project Operations	1
Goal	1
Objectives	2
Project Accomplishments	
Adolescent Care Team (ACT)	3
Adolescents Involved	3
Life Skills Training	3
Job Hunting Skills	4
Money Management Skills	4
Human Sexuality	4
Health Care	4
Communication/Interpersonal Relationships	4
Need for Education	4
Peer Support System	5
Therapy Group Structure and Focus	5
Individual Problems	6
Jobs and Education	6
Assessment and Outcome	6
Adolescents in Independent Living Arrangements	7
Emancipated Youths	7
Support System after Substitute Care	7
Recruiting Foster Parents for Adolescents	8
Local Private Child Care Facilities	8
Project Issues	8
Profile of Project Staff Members	9
Conclusion	10
Appendix	
A Support Group Curriculum Outline	

GENERAL INTRODUCTION

In the past year, the Texas Department of Human Services (DHS) conducted eight projects that present creative ideas to develop, strengthen, and carry out programs for prevention and treatment of child abuse and neglect. (Project titles and locations are shown in figure 1.)

PROJECT GOALS

The goals of the eight projects, funded by Part I of the Child Abuse Prevention and Treatment Act (Public Law 93-247, as amended), are as follows:

- o developing innovative child abuse and neglect programs using volunteer and private agencies;
- o developing innovative child abuse and neglect programs for adolescents;
- o strengthening the quality of child abuse and neglect services through competency-based and specialized training programs and through automated performance tracking;
- o developing an Interagency Child Abuse Network (ICAN) in conjunction with the criminal justice system; and
- o developing models and program designs for planning and delivering child abuse and neglect services and for allocating resources.

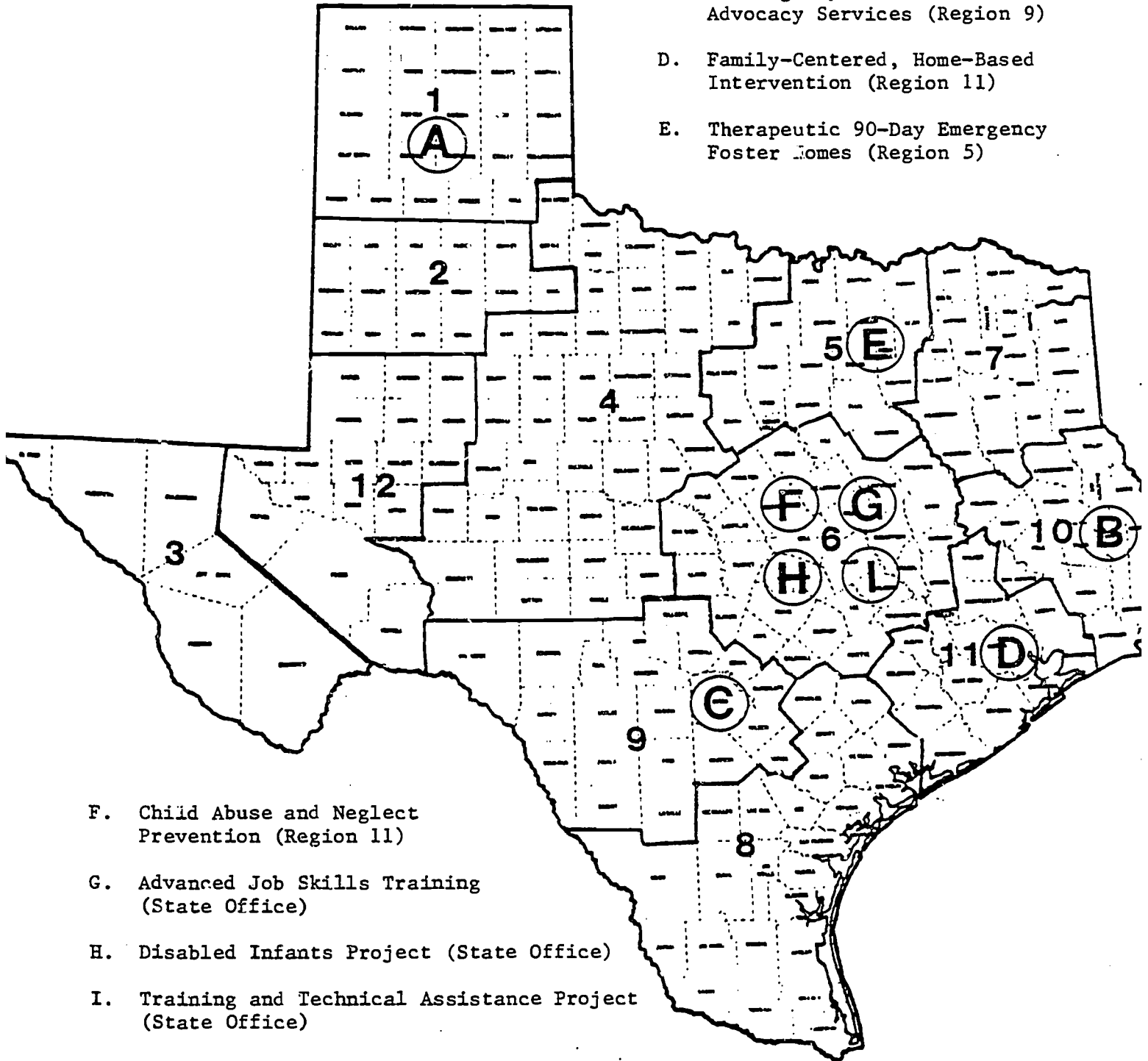
PROJECT NAME AND TYPE OF REPORT

This report is one in a series of eight separately packaged reports on the following demonstration projects, five of which are ending this year (final reports) and three of which will continue for another year (annual reports):

- o Child Abuse and Neglect Prevention (final report);
- o Advanced Job Skills Training (annual report);

LEGEND

- A. Life Skills for Adolescents (Region 1)
- B. Automated Performance and Productivity Improvement (Region 10)
- C. Interagency Child Abuse and Advocacy Services (Region 9)
- D. Family-Centered, Home-Based Intervention (Region 11)
- E. Therapeutic 90-Day Emergency Foster Homes (Region 5)



- F. Child Abuse and Neglect Prevention (Region 11)
- G. Advanced Job Skills Training (State Office)
- H. Disabled Infants Project (State Office)
- I. Training and Technical Assistance Project (State Office)

Figure 1. Location of projects by DHS region (or state office—located in DHS Region 6)

- o Family-Centered, Home-Based Intervention for Protective Services Clients (final report);
- o Automated Performance Tracking and Productivity Improvement (final report);
- o Life Skills for Adolescents (final report);
- o Therapeutic 90-Day Emergency Foster Homes (final report);
- o Interagency Child Abuse Network (annual report); and
- o Advocacy Services (annual report).

SELECTION AND ADMINISTRATION

Priorities from DHS's long-range plan provided the basis for selection of the eight projects to be demonstrated, and project results will be used in planning improvements in systems for delivering child protective services (CPS).

Six projects were managed by various DHS regions, and two were run by the Protective Services for Families and Children (PSFC) Branch at DHS headquarters in Austin

Three of the projects--Interagency Child Abuse Network, Advocacy Services, and Family-Centered, Home-Based Intervention--were cooperative ventures between DHS and community-based organizations (for the first two projects, with the Alamo Area Council of Governments and the Bexar County District Attorney's Office of San Antonio; for the third project, with DePelchin Children's Center of Houston).

The Automated Performance Tracking and Productivity Improvement Project was conducted in DHS's Region 10, the Life Skills for Adolescents Project in Region 1, and the Therapeutic 90-Day Emergency Foster Homes Project in Region 5.

The projects entitled Child Abuse and Neglect Prevention and Advanced Job Skills Training operated out of the PSFC Branch at DHS headquarters in Austin.

FOR MORE INFORMATION

Each of the eight annual or final reports may be obtained by contacting--

Texas Department of Human Services
Office of Strategic Management, Research, and Development
P.O. Box 2960--Mail Code 234-E
Austin, Texas 78769
Telephone Number (512) 450-3646

ACKNOWLEDGMENTS

The Texas Department of Human Services (DHS) wishes to acknowledge the contributions of a number of people who participated in the development and implementation of the Life Skills for Adolescents Project.

Pat Devin, CPS supervisor, served as project director. Faye McClung, child protective services (CPS) supervisor, served as interim project director until Pat completed her last semester of graduate work at the University of Texas at Austin.

Fred Seale, regional director for Services to Families and Children and Jim Coventry, program director, provided administrative support to the project. CPS specialists Gladys Diggs, Kirk Merker, Cirilda Ramos, and Margie Stevenson were members of the Adolescent Care Team (ACT) that worked directly with the youth in the project.

Special appreciation is accorded to the youth in DHS Region 1 conservatorship who participated in the project.

From the Protective Services for Families and Children Branch (PSFC) in Austin, Tommy Chapmond, program specialist, served as liaison to the region.

From the Office of Strategic Management, Research, and Development, headed by Murray A. Newman, Ph.D., several staff members made contributions to the project. The Special Projects Division, administered by Alicia Dimmick Essary, made the following contributions: Joe Flores, project designer, wrote the original grant application. Lucretia Dennis-Small, project specialist, served as consultant to the project, wrote and submitted reports to the funding source, and monitored progress on project operations. Nicholas Constant, Phyllis Jamar, and Peggy Borgfeld of the Technical Communications Section contributed to the good quality of project documents.

EXECUTIVE SUMMARY

The final report on the Life Skills for Adolescents Project is a process evaluation of progress toward achievement of the established goal and objectives. The project's goal was to enable adolescents leaving substitute care to be better prepared to manage their own lives. Adolescents 14 through 18 year of age who were expected to be in long-term substitute care were the target population. The report describes the efforts of the project director and four child protective services (CPS) specialists who formed the Adolescent Care Team (ACT) to work with these youths in DHS Region 1 conservatorship.

In Region 1, all cases having adolescents were transferred to the four CPS specialists in the project. Out of these 73 cases, 20 adolescents were found suitable for project activities. These adolescents attended group therapy sessions, a life skills training group, or--in a few instances--both groups.

Throughout the project, adolescents received training in groups with youths their own age who were preparing to become emancipated. The training consisted of practical life skills, e.g., money management, nutrition, job hunting. A manual prepared by the project staff outlines the training curriculum used during the project.

BACKGROUND AND ORIGIN

Youths in Conservatorship

The developmental tasks associated with adulthood and independent living have never been particularly easy to accomplish. However, youths who grow up in their own home generally proceed through the maturation process on a gradual basis. As they gain more knowledge and skills, they are given more rights and responsibilities. Most importantly, they have a support system in the biological family.

In contrast, children who are removed from their homes (as a last resort to protect them from abuse and neglect) sometimes spend the rest of their youth in substitute care, where they often miss out on some of the experiences needed to become independent at age 17 or 18. They get few opportunities to make decisions (most are made for them by the agency responsible for their protection, the Texas Department of Human Services---DHS). They often miss out, too, on emotional and other support that allows children to gradually reach adulthood within a biological family.

Preventing a Return to DHS Services

In the absence of sufficient preparation for independence and adulthood, a number of individuals formerly in DHS substitute care return to the agency's attention as abusive or neglectful parents. To reduce such reentries into the service system, DHS Region 1/2 proposed the Life Skills for Adolescents Project, a one-year demonstration aimed at developing a model that prepares adolescents currently in substitute care for independent living.

PROJECT OPERATIONS

Goal

The goal of the project was to enable adolescents leaving substitute care to be better prepared to manage their own lives. Adolescents 14 through 18 years of age who were

expected to be in long-term substitute care were the target population.

The project used a service delivery model designed to (1) prepare adolescents currently in substitute care for independent living, (2) recruit and train foster parents, and (3) develop volunteer resources that will provide support and training to adolescents.

Objectives

The established objectives for the project were--

- o to provide adolescents currently in substitute care with life skills training,
- o to provide adolescents in substitute care with a peer support system,
- o to provide supervision of adolescents in independent living arrangements,
- o to provide a support system for adolescents after they leave substitute care,
- o to recruit and train foster and group home parents serving adolescents,
- o to develop volunteer resources that will provide support and training to adolescents, and
- o to inform local private care facilities about project methodology and progress.

PROJECT ACCOMPLISHMENTS

At the beginning of the project, staff members set out to identify the skills adolescents would need to adequately plan for independence upon leaving substitute care. From personal life experiences and a review of the literature,

project staff developed a list of curriculum topics and activities suitable for youth approaching emancipation.

Adolescent Care Team (ACT)

In preparation for project activities, the region put together an Adolescent Care Team (ACT), which consisted of four child protective services (CPS) specialists and a CPS supervisor who served as project director. One of the specialists spent half of her time recruiting foster homes for adolescents in the project and the other half attending to a caseload of adolescents in the project.

ACT carried a combined caseload of 73. The cases included parents and siblings of some of the adolescents. Because of staff restrictions and good social work practice, the region chose not to isolate an adolescent's case from the case of his or her parents and siblings.

Adolescents Involved

Twenty adolescents were involved in project activities. They attended the group therapy sessions, the life skills training group, or--in a few instances--both groups. Adolescents were assessed by a psychologist to determine which group was most appropriate and whether they could benefit from group interaction. The psychologist conducted the group therapy sessions; project staff members served as facilitators for the life skills training group.

Life Skills Training

Throughout the project, adolescents received training on job hunting and money management, human sexuality/birth control, nutrition, health care (personal grooming), communication/interpersonal relationships and the need for education. An outline of the life skills curriculum prepared by the project staff can be found in Appendix A.

Job Hunting Skills. In the sessions on job hunting, adolescents learned techniques such as how to use newspaper want ads and employment agencies. Included in these sessions were discussions of job applications, interviews, and acceptable behavior at work. Also in this session were brief discussions about paychecks and standard deductions.

Money Management Skills. Adolescents were taught about everyday living expenses (e.g., rent, utility bills, transportation, maintenance, selection of food and clothing, and purchasing strategies). The facilitators of these sessions emphasized budgeting techniques for these predictable expenses.

Human Sexuality. The session facilitators discussed people as sexual beings. The group talked about human anatomy. They also talked about the importance of birth control, the types and availability of birth control devices, and the kinds of sexually transmitted diseases.

Health Care. The youths discussed the need for personal grooming and dental and medical care. Facilitators talked about ways that youths could gather information to reconstruct the history of their health care, an important consideration for youths who have been in a succession of foster homes and have received care from a succession of different doctors. Other points discussed included (1) how to locate physicians and (2) preventive health care.

Communication/Interpersonal Relationships. The facilitator discussed writing and talking as ways for the youths to express ideas to others, the importance of being able to express their thoughts, and the best ways to express themselves.

Need for Education. The youths talked about their current academic performance records (e.g., successes and failures) and how they could improve performance. Also, the youths discussed plans after high school graduation--vocational training, college, work, and the need for some type of advanced learning to prepare themselves for the job market.

Peer Support System

The project staff designed the weekly group meeting to serve as a peer support system for adolescents in the project. In these meetings, the staff team facilitated interaction among the adolescents. Team members encouraged the youths to share experiences and feelings with each other. In most instances, each of the youths became attached to at least one person that she or he contacted outside the structured group setting. Two of the adolescents found that they attended the same high school, and they shared school experiences and activities. These two adolescents also talked about their plans for after graduation.

Project staff also arranged outings such as picnics and camping to encourage the support system. Because adolescents often feel they are alone, project staff felt the interaction among adolescents attending groups was one of the project's most valuable aspects.

Adolescents referred to the clinical psychologist were "non-psychotic, mostly undersocialized, and relatively non-aggressive." Generally ages were less important than grade placement, and most successful members were in the 9th through 12th grades. None were living with their biological parents.

Therapy Group Structure and Focus

One female and one male therapist held the therapy group for 1 1/2 hours per week. Ordinarily, the youths' rate of attendance was 75 to 80 percent; the main reason for absences was practical transportation problems rather than resistance to therapy. The group's orientation was supportive.

Since most of the adolescents were undersocialized, the therapists spent a lot of time on the group process. Therapists focused the group on understanding different roles and characteristics of group participation and learning that groups can be helpful in dealing with intellectual and emotional issues.

Individual Problems

Adolescents talked about dealing with authority, use and misuse of drugs, school relationships, dating, impulse control, and getting and keeping friends of the same sex. Since all of the youths were living away from home, problems with placements and adjustments were discussed. They discussed the legal system as it related to their individual circumstances and talked about their struggles to deal with placements that were less than perfect. Also, adolescents talked about parental relationships and feelings of rejection. Periodically, some evidence of mourning those relationships was noted.

Jobs and Education

The adolescents initiated a number of practical discussions about getting and keeping jobs, appropriate behavior on the job, going to school, and integrating work with planning for the future.

Assessment and Outcome

The therapists conducting the therapy group assessed it as moderately successful. "It was very difficult," they stated, "to get the adolescents to function as a group and because it was an open-ended group, the intimate expression and giving of feedback from group members sometimes suffered." By contrast, the project staff assessed the support group as extremely successful and helpful in giving the adolescents the chance to express their ideas and feelings.

The therapist noted that some adolescents were too aggressive or undersocialized to benefit from the therapy group. These adolescents were referred for individual therapy sessions.

ADOLESCENTS IN INDEPENDENT LIVING ARRANGEMENTS

Emancipated Youths

In Texas, youths are emancipated at age 18 and become ineligible for state financial support. During the project, youths 16 and 17 years of age were targeted to receive intensive help with planning for independent living after substitute care.

Project staff helped these youths search for shelter, find jobs, and plan for further education. Youths going into independent living arrangements received \$200 a month for four months to help them in this initial adjustment period.

During the project, four youths went into an independent living arrangement. One is now working and plans to attend a community college in the fall. For two youths, one male and one female, foster parents have agreed to allow them to remain in their home even though they are 18 years old. The male plans to pursue a trade at an area community college in the fall, and the female plans to attend a beauty college. The male also has a job. A fourth youth (a male) is living with a relative and is undecided about future plans.

Support System after Substitute Care

At the beginning of the project, staff members planned to recruit volunteers to serve as mentors for adolescents during and after their stay in substitute care. Project staff found that recruiting volunteers to make such long-term commitments to project adolescents was extremely time-consuming. They also found that the youths were involved in too many activities to have time to devote to another person. Although the project staff would like to pursue the concept of finding volunteer mentors for specific youths, the program may require some restructuring to make time for this additional support component.

Recruiting Foster Parents for Adolescents

Throughout the project, one staff member devoted half of her time to recruiting foster-parents for adolescents. The main vehicle for recruiting was newspaper advertisements. The project staff received a number of responses from the ads, but some respondents were considered inappropriate to care for adolescents, others screened themselves out after getting further information, and others did not attend initial orientation sessions. To date, the recruiter for the project has licensed five homes for adolescents in DHS conservatorship.

Local Private Child Care Facilities

At the beginning of the project, the director visited local private child care facilities and informed them about the project and its purposes. These facilities were interested in the project and asked to be kept informed about progress made during the year. As youths in child care facilities in Potter and Randall counties were identified as being in permanent DHS conservatorship, project staff assessed their suitability for project services; when appropriate, youths in these local child care facilities received project services.

PROJECT ISSUES

Throughout this demonstration project, the Adolescent Care Team (ACT) counseled 20 adolescents, ages 14-18. While project staff felt good about their accomplishments, they related some problem areas.

- o The project's original plan was to serve only individual adolescents who had no involvement with parents or siblings. Because of regional staff constraints, however, all CPS cases with youths ages 14-18, including cases that involved parents and siblings, were transferred to the project. This change in the project's direction created staff morale problems.

- o Another change in the original project plan resulted from the decision to transfer all adolescent cases: youths with severe emotional problems came onto the project's caseload. The project's planned services were not designed to help youths with such problems, who were not ready for life skills training and who could not benefit from group therapy. Nevertheless, project staff members spent a great amount of time and effort trying to help them.
- o Since the recruiting of foster parents exclusively for care of adolescents was untried, the recruiter had to develop a profile of the best suited applicants as she gained experience.
- o As the project progressed, staff members learned that the life skills sessions conducted by community experts were better received by project youths. The youths were more attentive and participated in experiential exercises more readily.
- o Project staff members spent many hours coordinating schedules and providing transportation to project youths to be sure they participated in all project activities.
- o Project staff members should have realistic expectations about adolescents and should understand that they cannot reach every youth they encounter.

PROFILE OF PROJECT STAFF MEMBERS

The CPS supervisor of the ACT stated that the project's success was a result of the hard work and caring of project staff members. She characterized project staff members as being--accepting, comfortable with conflict, willing to be challenged by adolescents, optimistic, calm, and fun. They also had had a high level of energy, she said, and a sense of humor.

CONCLUSION

Project participants believe that agencies that keep youth in substitute care until they reach the age of emancipation must provide some kind of preparation for living outside of their very structured environment. This demonstration, Life Skills for Adolescents, pointed out that these youths need extra attention in order to begin life on their own.

As the Adolescent Care Team worked closely with youths in DHS conservatorship, they found that these youths needed help in learning how to interact with peers and adults. Also, they noted that the adolescents had few support systems, little knowledge of what it takes to survive on their own, and limited information about options for the future.

The project served as a means to introduce the youths to ideas and options for providing for themselves. Region 1/2 will continue to use knowledge gained from the project to better prepare youths in their conservatorship for independent living.

APPENDIX A

**Support Group
Curriculum Outline**

SUPPORT GROUP

Of supreme importance to adolescents is peer support and approval. At a time when being "like someone" and having the approval of a peer group is so important, many adolescents in our care find themselves isolated and alone, different from any other adolescent they may know.

Initially, the purpose of the Life Skills for Adolescents Support Group was to provide a forum for teaching life skills. However, it soon became apparent that another very real function of this group was peer counseling and support. The adolescent support group was designed to meet our adolescents' need for peer affiliation while providing a place to teach skills necessary for surviving independent living. The group was composed of eight to ten adolescents, all living in substitute care and each with a history of abuse or neglect.

Three functions of this group were identified: life skills training; recreation; and socialization.

LIFE SKILLS TRAINING

The Life Skills Training component of the Adolescent Care Team was implemented to assist adolescents achieve social, emotional, physical, and economic independence. Community volunteers, foster parents, and agency staff provided weekly training during each training phase, October-December and February-May.

Topics covered (see chapter appendix) included:

- money management
- job preparation, job search, job interviewing
- parenting
- problem solving/decision making
- interpersonal relationships (communication skills, peer refusal, values clarification)
- human sexuality
- birth control
- continuing education opportunities (scholarships, grants)

Making It On Your Own. (Region III Resource Center for Children, Youth, and Families, School of Social Work, Virginia Commonwealth University) and Ready Or Not (Portland Institute for Human Services) were utilized for these training sessions. Each provided materials that facilitated the adolescents' participation in training and are highly recommended.

Volunteer trainers were professionals from the private and public sector. Counselors from Planned Parenthood and Parenting Services and representatives of the Texas Employment Commission and the Texas Agricultural Extension Agency provided training for several sessions. Information on financial aid for further education was provided by staff from Amarillo Junior College. Without exception, community members who

LIFE SKILLS FOR ADOLESCENTS

Job Preparation and Interviewing Skills Part I

CURRICULUM

- I. Snacks and visitation**
- II. Review of previous week - Discussion of assessment sheets/needs**
- III. "Making It On Your Own" Unit #1 - Job Hunting**
- IV. Survey of newspaper for prospective jobs**
- V. Discussion**

LIFE SKILLS FOR ADOLESCENTS
Job Preparation/Interviewing Skills

Part II

CURRICULUM:

- I. Snacks and visitation
- II. Presentation by representative from Texas Employment Commission
 - A. Realistic planning for present/future
 - B. T.E.C. services
 - C. Vocational/ Educational Opportunities
 - D. Loans and Grants
 - E. Pamphlets:
 1. "Partners for Jobs" (Job Training Partnership Act)
 2. "Hold That Job" (Problems and solutions)
 3. Choosing Your Occupation (self inventory of aptitudes, interests, and experience)
 - F. Interviewing Do's and Don'ts
 - G. Completing Job Applications (group exercise)
 - H. Group Discussion and Questions

*** In the Spring session, a practice session was added to this series. This session utilized videotaping the adolescents in role-playing, job-interview situations. Allowing the adolescents to participate in the taping of their co-members and to act as friendly "critics" kept all members involved during the video taping session.

LIFE SKILLS FOR ADOLESCENTS

Money Management

CURRICULUM:

I. Snacks and Visitation

II. Presentation by project staff:

- A. How to prepare a budget
- B. Banks vs. Savings and Loan Associations
- C. How to write a check
- D. Balancing your checkbook
- E. Check endorsement

III. Large group discussion and questions

IV. Small group project with staff

Note: Chapter 8 in the Making It On Your Own Handbook was used during these sessions. Bankers have also been utilized to present some of this material. It is important to allow the adolescents time to work on individual budgets with staff help. Money Management often extends into at least two sessions.

LIFE SKILLS FOR ADOLESCENTS

Parenting Skill (Part I)

CURRICULUM:

- I. Snacks and visitation.
- II. Introduction of guests (representatives of Parenting Services)
- III. Presentation of topic by Parenting Services:
 - A. General Information - statistics
 - B. Information concerning specific costs for a baby
 1. Cost breakdown for pre-natal care
 2. Costs of birth and hospital care

**** General information includes high-risk pregnancy statistics, etc. Because this session can appear to be "scare tactics" to the adolescents, it is suggested that parenting sessions begin with Values Clarification games, eliciting informations from the adolescents re: values already held about parenting. Issues around how the adolescent feels about how they were parented, though often painful and time-consuming to process, are important to address.

LIFE SKILLS FOR ADOLESCENTS
Parenting Skills - Part II

I. Snacks and Visitation

II. Introduction of guests

III. Presentation of topic

A. Child Development

B. Discipline

C. Child-rearing and stress

IV. Group discussion/ "What-if" situational exercises

******* Parenting sessions require extensive processing, both in group and individually. These topics are particularly sensitive to children who have been in substitute care and generate emotionally charged discussion. We have also experienced that it is during these sessions that abortion, sexual abuse, and abandonment issues are raised.**

LIFE SKILLS FOR ADOLESCENTS

Human Sexuality/Birth Control

CURRICULUM:

- I. Snacks and visitation**
- II. Introduction of guests (Planned Parenthood Representatives)**
- III. Presentation of topic:**
 - A. Facts about teenage pregnancy**
 - B. General information - birth control**
- IV. Values Clarification Games - ACT staff**
- V. Group Discussion and Questions**

****** Values clarification issues should relate not only to birth control mechanics, but to relationships, self-awareness, and personal goals/needs. Finding appropriate Planned Parenthood trainers (those who relate well to adolescents, can use their language, and are comfortable with the realities of talking about sexuality with sexually abused teens) is essential.**

LIFE SKILLS FOR ADOLESCENTS

Interpersonal Skills

CURRICULUM:

I. SNACKS AND VISITATION

II. Getting to Know Yourself - Worksheet - Ready or Not

III. What are my values?

IV. Discussion

*****Group discussion is particularly valuable for this session. Because this session was presented late in the series, each group member could give legitimate feedback to other group members, validating or challenging perceptions each had of him or herself. Group cohesiveness and support should be assessed by facilitators prior to opening discussions about worksheet.

LIFE SKILLS FOR ADOLESCENTS

Interpersonal Skills - Communication

CURRICULUM:

I. Snacks and visitation

II. Communication

- A. "Communication Killers" and "Communication Feeders"**
- B. Constructing "I" messages"**
- C. "Speaking Constructively"**
- D. "Elements of Communication Style"**

III. Discussion

RECREATION

"Recreation night" was scheduled once a month. Responsibility for the planning of recreational activities was left with the group and became an exercise in problem-solving and decision-making.

Resources for recreation night were often donated. Local YMCA gymnasiums were used for basketball and volleyball games, local conference rooms turned into screening rooms for movies, and staff homes were used for cookouts.

Some of the recreational activities chosen by this group were:

- Pizza and movies party
- Basketball
- Volleyball
- Hamburger cookout to honor graduating Seniors
- Christmas party
- Halloween party
- reception for foster parents

The participating adolescents took responsibility for planning and implementing these activities.

Benefits of the recreation nights were numerous. In addition to practicing planning and decision-making skills, the adolescents were able to enjoy the rewards of "doing something for others." Recreation nights also enabled the adolescents to socialize, in "normal" teenage situations, among peers with whom they already felt safe. This rehearsal is particularly important for our adolescents, who have rarely had such social experiences.

SOCIALIZATION/ESTEEM BUILDING

In the past, the Adolescent Care Team planned and staffed two-day workshops to provide an opportunity for adolescents to combine a life skills learning experience with camp. We found that spending time with the adolescents, away from the office or substitute care facility and over a two-day period, often freed the adolescent to share experiences and feelings that he or she had previously withheld. We also found this was the only camping or "vacation" experience many of our youth had ever had. However, because of limited time, this was not an effective way to impart life skills information.

This project year, we decided to separate life skills training from camp. The PEAKS (Physical, Environmental, and Knowledge Skills) Camp, sponsored by Texas Network of Youth Services was utilized for the majority of adolescents in the Life Skills Project. This five day camp, held in the "Hill Country" near Kerrville, involved the adolescents in activities ranging from art therapy to repelling. Benefits to the adolescents were numerous. (see chapter appendix).

were approached to provide training to the adolescents were enthusiastic and positive in offering their services. (Because the adolescents became so familiar with our casework staff and often digressed into personal experiences during group, we found these trainers to be more effective in successfully relating information without interruption than casework staff.)

Life Skills Training sessions were held weekly at the DHS office. Group began with refreshments and time for the adolescents to relax and visit with other group members. Didactic presentation of materials, followed by group participation in a learning experience (i.e., completing a budget, role playing a job interview, etc) and discussion of material presented was routine. Group normally lasted two to two and one-half hours. ACT caseworkers rotated responsibility for group content and for providing transportation.

According to the participating adolescents, the sessions on budgeting were "the best". These sessions involved having the adolescents set up a budget after using the newspaper to find a job, apartment, and car. The adolescents were least impressed with the session on birth control, probably because many of the adolescents had been provided this information repeatedly by caseworkers.

Sessions were repeated with some content change for the Spring session.