

INFORMATION PACKET: Kinship/Relative Care

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KINSHIP FOSTER CARE SUMMARY

Kinship care is the full time care, nurturing and protection of children by relatives, members of

their tribes or clans, godparents, stepparents, or any adult including family friends or neighbors

who has a kinship bond with a child, when the birth parents are unable or unwilling to do so. It

allows a child to grow to adulthood in a family environment¹. Alcohol and drug abuse, child

abuse and neglect, incarceration, domestic violence, and illnesses such as HIV/AIDS have

resulted in an unprecedented number of relative caregivers or kinship caregivers raising children,

both inside and outside of the formal foster care system.²

There are two forms of kinship foster care: Informal and formal. With informal kinship care, the

child is voluntarily placed with relatives or other kin and a child welfare agency does not assume

legal custody of or responsibility for the child. Because the parents still have custody of the child,

relatives need not be approved, licensed, or supervised by the state. The parents may, at will,

come to take their child.³ Informal kinship care arrangements provide a safety net for an

additional 2.1 million children who might otherwise be channeled into the child welfare system. 4

¹ CWLA http://www.cwla.org/programs/kinship/faq.htm
² CDF, http://www.childrensdefense.org/ss-kinship-care-overview.htm

³ CWLA http://www.cwla.org/programs/kinship/faq.htm
⁴ CDF, http://www.childrensdefense.org/ss-kinship-care-overview.htm

Formal kinship care involves the parenting of children by kin as a result of a child being placed in the legal custody of a child welfare agency. Formal kinship care is linked to state and federal child welfare laws. Public and private social services agencies provide support services for families including kin who are caring for their grandchildren, niece or nephew.⁵ Close to one-third of the 554,000 children in the formal child welfare system are currently placed in relative foster homes.⁶ Research suggests that kinship care offers greater stability for children who are living with their relatives, but it reduces their chances of obtaining permanent legal status such as adoption, custody and guardianship. Federal legislation strongly encourages adoption as a viable permanency option for children in kinship care.⁷ While relative placements in the formal foster care system can provide a child with family and cultural continuity and a unique opportunity for permanence, there also can be great stresses involved in kinship foster care placements. These stresses are often exacerbated by policies and practices that deny kin adequate supports.⁸

⁵ CWLA http://www.cwla.org/programs/kinship/faq.htm

⁶ CDF, <u>http://www.childrensdefense.org/ss_kinship_care_overview.htm</u>

⁷ CWLA http://www.cwla.org/programs/kinship/faq.htm

⁸ CDF, http://www.childrensdefense.org/ss kinship care overview.htm

FACTS

Three categories of kinship care are identified:

- **Private kinship care** (1.3 million children): Children are being cared for privately by relatives without involvement of a public child welfare agency.
- **Kinship foster care** (200,000 children): Children live with relatives because a child welfare agency removed them from their parents due to abuse or neglect, took them into state custody and placed them in the care of a relative.
- **Voluntary kinship care** (300,000 children): Children in these arrangements had come to the attention of child protective services and were placed with kin, but are not in state custody.
- The population of children living in voluntary kinship care (300,000), those placed with kin due to abuse or neglect but not taken into state custody, is substantial. This population had never been identified using national data and it is notable that it is so large. Moreover, findings show that these children experience similar levels of socioeconomic risk as children in other kinship arrangements. This is problematic because these children have already experienced abuse or neglect and are now in precarious environments with potentially lower levels of monitoring from the child welfare agency.
- Children in all kinship care environments face substantial socioeconomic risk. One fifth (22 percent) of children in kinship care simultaneously face three or more risks, while only 8 percent of the overall population of children in the United States have this experience. Given that only children in kinship foster and voluntary kinship care receive services from the child welfare agency, child welfare decision makers have become increasingly concerned that more private kinship caregivers, who are equally needy, will seek assistance from the child welfare system.
- Despite being eligible to receive services, relatively few children in kinship care live in families that do. More information is needed to address the access issues these families may face.

(Ehrle, J.; Geen, R. & Clark, R.L. (2001) Children Cared for by Relatives: Who Are They and How Are They Faring? Number B-28 in Series, "New Federalism: National Survey of America's Families" Washington, D.C.: The Urban Institute.)

Environments of Children in Kinship Care

Substantial numbers of children in all types of kinship care face various socioeconomic risks to their healthy development:

- Two in five (41 percent) live in families with income less than 100 percent of the federal poverty level (FPL).
- •One in three (36 percent) live with a caretaker without a high school degree.
- •One in two (55 percent) live with a caretaker who does not a have a spouse.
- •Nearly one in five(19 percent) live in households with four or more children.
- •One in five (22 percent) face three or more risks simultaneously.
- •In comparison, only 8 percent of all children in the United States fall into this category. (Ehrle, J.; Geen, R. & Clark, R.L. (2001) Children Cared for by Relatives: Who Are They and How Are They Faring? Number B-28 in Series, "New Federalism: National Survey of America's Families" Washington, D.C.: The Urban Institute.)
- In New York, an average of 16,859 of the City's 42,000 children living in foster care are in kinship care (*Mayor's Office of Operations, 1996, CASA All IN THE FAMILY: A MIXEDBLESSING, January, 1998*).
- The percent of U.S. children living with relatives, with no parent present, remained fairly steady from 1983 to 1992, at about 2.1%. However, this percent has increased to 2.9% in 1998. (*CWLA* http://www.cwla.org/programs/kinship/faq.htm)

Foster Grandparents

Serving as the primary caregiver to one's grandchildren is not an uncommon experience:

- More than one in ten grandparents (10.9%) at some point raise a grandchild for at least six months.
- The median age of grandparent caregivers is 59.3 and over half are aged 60 and above.
- The typical grandparent raising a grandchild is a white married woman living modestly but above the poverty line.
- Nationally, slightly more than half of grandparent caregivers are married (54%). more than three quarters (77%) are women.
- 62% are non Hispanic white.

(Brookdale Foundation Group (2001) http://www.ewol.com/brookdale/rapp1.html)

Researchers have found that kinship caregivers share a number of qualities. These include the following:

- *Most kinship parents are grandmothers or other close relatives.* University of Maryland School of Medicine researcher Howard Dubowitz, in his 1990 study of kinship cases in Baltimore, found that one-half of the providers were grandmothers; one-third were aunts.
- *Kinship families are predominately families of color*. Ninety percent of New York City kinship providers were African-American, according to a 1987 study by researcher Jesse L. Thorton. Dubowitz's study showed the same percentage in Baltimore.
- *Kinship families tend to have limited incomes*. Thorton found that although nearly half of the kinship providers worked full-time, they were also more likely to receive AFDC (33 percent) than their traditional foster care counterparts (6 percent).
- *Kinship families have less formal contact with social workers than traditional foster families.* In the Maryland study, relative caregivers were visited by social workers 40.8 percent of the time; non relative foster homes were visited 53.2 percent of the time. Only

37 percent of relatives had telephone contact with social workers, compared with 83.5 percent of traditional foster families.

Families were overwhelmingly against adopting their foster children. Thorton found that 85 percent of families studied did not want to adopt the children. Most believed it wasn't necessary because they were "already family." Others thought it would cause problems in their relationships with the child's birthparents. Despite reservations about adoption, these families remained committed to the children in their care. Seventy percent said they would allow the child to stay either "as long as he/she wants to remain in the home" or "until he/she is able to take care of him/herself." Hochman, G; Prowler, M. & Huston, A., (1996. Rev. 1997) The National Adoption Information Clearinghouse.

Federal Legislation Impacting Kinship Care

The Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272); Title IV of the Social Security Act; the U.S. Supreme Court Decision, Miller v. Youakim (1979); and The Indian Child Welfare Act (P.L. 95-608). The legislation most directly related to the funding of kinship care is Title IV of the Social Security Act, and additional requirements are imposed by the U.S. Supreme Court Decision, Miller v. Youakim (1979).

- •Title IV of the Social Security Act authorized welfare grants to be received by relatives.
- •The U.S. Supreme Court Decision, Miller v. Youakim (1979) entitled relatives to receive the same federal foster care benefits as those received by non-relative foster parents providing that the kinship placements are eligible for federal reimbursement under the AFDC-Foster Care Program which is Title IV-E of the Social Security Act. The child must be in the legal custody of the state.
- •The Adoption and Safe Families Act of 1997 (P.L. 105-89) is the most recent federal legislation representing both a continued commitment towards family and an attempt to promote adoption.
- •The Act establishes new time lines and conditions for filing termination of parental rights. States must file a petition to terminate parental rights and concurrently, identify, recruit, process and approve a qualified adoptive family on behalf of any child, regardless of age, if the child has been in foster care for 15 out of the most recent 22 months. Exceptions can be made to these requirements if at the state's option, a child is being cared for by a relative.
- •The Act requires notice of court reviews and an opportunity to be heard is sent to relatives, foster parents and pre-adoptive parents. A relative, foster parent or pre-adoptive parent caring for a child must be given notice of and an opportunity to be heard in any review or hearing involving the child. This provision does not require that any relative, foster or pre-adoptive parent be made a party to such a review or hearing.
- •The Act requires the Federal Department of Health and Human Services (HHS) to complete a study on kinship care.
- •The Act requires HHS to convene an advisory panel to review the Kinship Care Report on state kinship care policies, kinship care provider characteristics and household characteristics, kinship care cost and funding sources. (CWLA; http://www.cwla.org/programs/kinship/faq.htm)

Practice Tips/Best Models

The Child Welfare League of America and its North American Kinship Care Policy and Practice Committee believe that child welfare agencies can do much to ensure the success of kinship placements and work toward permanency for children by providing the following:

- Family preservation services -- Secure parental agreement for a child's temporary placement with a relative to help parents through a crisis and avoid court involvement.
- Family support services -- Work with birthparents, relatives, and the child to create a plan for the child's care and welfare. Options are enlisting relatives to demonstrate appropriate child care techniques to birthparents or asking relatives to provide child care while birthparents work or improve their lives.
- Family reunification services -- Return children from traditional foster care to a relative's home. Relatives, in these cases, need support services to understand the children's needs and resolve family relationship issues.

Respite care -- Encourage relatives to be respite care providers, even if they cannot care for the children all day every day. Also, encourage relatives to make use of outside respite care providers if that will help to stabilize the placement. (Hochman, G; Prowler, M. & Huston, A., (1996. Rev. 1997) The National Adoption Information Clearinghouse.)

The League has also developed guidelines that agencies can use to assess the appropriateness of a family member as caregiver. The League recommends that an assessment include a review of the following:

- Nature and quality of the relationship between child and relative
- Ability and desire of the kinship parent to protect the child from further abuse or other maltreatment
- Safety of the kinship home and ability of kin to provide a nurturing environment for the
- Willingness of the kinship family to accept the child into the home
- Ability of the family to meet the developmental needs of the child
- Nature and quality of the relationship between the birthparent and the caregiver, including the birthparents' preference about placing the child with kin
- Any family dynamics in the home related to the abuse or neglect of the child
- Presence of alcohol or other drug use in the prospective home
- Family's willingness and ability to cooperate with the agency

- Existing supports to which the family has access
- Number of children already being cared for by the relative and status of other children in the home (such as HIV status, drug or alcohol exposure, or medical conditions)
- Health of the caregiver
- Age of the caregiver in light of the child's developmental and long-term needs
- When relevant, the possibility that the relatives will pressure the child into recanting a disclosure of abuse

(Hochman, G; Prowler, M. & Huston, A., (1996. Rev. 1997) The National Adoption Information Clearinghouse.)

Initiatives

CWLA and the State of Maryland's Baltimore City Department of Social Services (BCDSS) have formed a three year research project partnership. The project is designed to improve safety, permanence and well-being outcomes for children who are a part of the Maryland Kinship Care Program.

Enhanced support services will be provided to one hundred (100) randomly selected kinship caregiver families as they enter the Kinship Care Program, for a period of two years. The services will consist of a kinship caregiver's workbook, concurrent permanency planning training and access to legal services. Additional support services and social activities will also be included. A second group of 100 families entering the program at the same time will be randomly selected as the control group. They will receive standard support services.

To evaluate the success of the project, CWLA will study and evaluate the affect of these enhance services to determined the extent to which there is an impact on the safety, permanence and well-being of children in kinship care. CWLA and its partner, BCDSS, expect to show an increase in the achievement of permanency plans and consumer satisfaction, as well as improvement in child safety and well-being outcomes. (CWLA, http://www.cwla.org/programs/kinship/initiatives.htm)

http://www.uic.edu/jaddams/college/kincare/

The Kinship Care Practice Project The University of Illinois at Chicago Jane Addams College of Social Work

The Kinship Care Practice Project conducts research, develops training materials, and provides educational opportunities to ensure safety, well-being, and permanent homes for children through collaborative work with extended families.

The 1992 research and demonstration project: (1) examined child welfare practice with children in foster care placements with relatives, and (2) developed a training curriculum based on practice principles that promote safety, well-being, and permanent homes for children. Currently the kinship care practice project provides training for supervisors, trainers, and child welfare practitioners, based upon this training curriculum.

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WEB SITES

National Organizations and Associations

http://www.hunter.cuny.edu/socwork/nrcfcpp

The National Resource Center for Foster Care and Permanency Planning at the Hunter College School of Social Work

129 East 79th Street

New York, NY 10021

212/452-7000

NRCFCPP at the Hunter College School of Social Work is a training, technical assistance, and information services organization dedicated to increasing the capacity of child welfare agencies to provide children with safe, permanent families in supportive communities.

http://www.acf.dhhs.gov/programs/cb/

Children's Bureau 330 C Street, SW Washington, DC 20447 202/205-8769 The Children's Bureau (CB) is located within the United States Department of Health and Human Services' Administration for Children and Families, Administration on Children, Youth and Families. It is responsible for assisting States in the delivery of child welfare services services designed to protect children and strengthen families. The agency provides grants to States, Tribes and communities to operate a range of child welfare services including child protective services (child abuse and neglect) family preservation and support, foster care, adoption and independent living. In addition, the agency makes major investments in staff training, technology and innovative programs.

http://www.cwla.org

The Child Welfare League of America 50 F Street NW, 6th Floor Washington, DC 20001-2085 (202) 638-2952 Fax: (202) 638-4004

The Child Welfare League of America (CWLA), an association of public and non-profit child welfare agencies, holds a national conference every two years on kinship care as it relates to the child welfare system.

http://www.childrensdefense.org

The Children's Defense Fund 25 E Street NW Washington, DC 20001 (202) 628-8787

cdfinfo@childrensdefense.org

CDF pays particular attention to the needs of poor and minority children and those with disabilities. Site contains publications, news and reports, links and information pertaining to their numerous campaigns and projects.

http://www.aoa.gov/NAIC

National Aging Information Center U.S. Administration on Aging

330 Independence Avenue, SW - Room 4656 -

Washington, DC 20201

(202) 619 7501; Fax: (202) 401-7620

NAIC serves as a central source for a wide variety of information on aging for older people, their families, and those who work for or on behalf of older persons. NAIC resources include program and policy-related materials for consumers and practitioners as well as demographic and other statistical data on the health, economic, and social conditions of older Americans.

http://www.ewol.com/brookdale/rappi.html

The Brookdale Relatives as Parents Program (Brookdale Foundation)

126 East 56th Street

New York, NY 10022-3668

RAPP initiative began in October, 1991 and focuses on services to grandparents and other relatives who have taken on the responsibility of surrogate parenting when the biological parents are unwilling or unable to do so.

http://www.casey.org/cnc/

Casey Family Programs

National Center for Resource Family Support (CNC)

1808 Eye St. NW, 5th Floor

Washington, D.C. 20006-5427

Phone: 202/467-4441 Toll-free: 888/295-6727 Fax: 202/467-4499

CNC is the national information and referral arm of Casey Family Programs (CFP), a direct service operating foundation that provides an array of services for children and youth, with foster care as its core.

Grandparent Web sites

http://www.grandparentagain.com/

• Grandparent Again

http://www.edgewoodcenter.org/results/stuartfactsheets.htm

• Edgewood Center for Children and Families Kinship Support Network Factsheets

http://www.grandparenting.org/

• The Foundation for Grandparenting

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http://www.gao.gov/archive/1999/he99032.pdf

Foster Care: Kinship Care Quality and Permanency Issue (U.S. General Accounting Office)

http://www.acf.dhhs.gov/programs/cb/publications/afcars/apr2001.htm

This summary provides the answers to the most commonly asked questions about how ASFA and the new regulations will affect kinship care families inside and outside of the child welfare system. While the following provides an overview of relevant kinship care issues, readers are encouraged to refer to the regulations themselves for more detailed information. The regulations can be found in the Federal Register for Tuesday, January 25, 2000 (Vol.65, No. 16) at pp. 4020—4093.

http://www.uic.edu/jaddams/college/kincare/

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RESOURCES

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Grandparent caregiver fact sheet

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http://www.childrensdefense.org/ss_kinship_care_overview.htm

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