Grandparents as Caregivers in Utah

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Introduction
(The following story has been used with permission from “Grandfamilies,” an arm of the Children’s Service Society of Utah. Names have been changed to protect identities.)

“Missy was a newborn when she came to her paternal grandparents’ home with her mom and dad to live. Mom and Dad had been homeless and were abusing drugs. Grandma and Grandpa are a middle class religious family. The grandparents took on the financial obligation of parenting Missy, and at the same time they tried to support and encourage her parents to get the help that they needed. After about a year, Mom and Dad left the home and Grandma and Grandpa took on the full-time responsibilities of parenting Missy. Mom and Dad were inconsistent at best with visitations, offered no support or help with parenting, but asked for money and assistance. If the grandparents refused to help, the parents would threaten to take Missy with them.

The grandparents decided to fight in court for the guardianship of their granddaughter. They kept a detailed journal identifying visitation (or lack thereof), the many criminal behaviors of the parents, and the move from one drug house to another. Finally, they took the information to court. They had to bring charges against their own son. It took over three years in the court system and a substantial amount of money for legal fees, but in January 2007, they adopted their own granddaughter. They still live in fear that the father will try to kidnap Missy in retaliation.”

This real story is not unique. Data from the U.S. Census show that the phenomenon of grandparents raising grandchildren is increasing. In 2000, 2.4 million grandparents were raising their grandchildren in the U.S., representing an approximate 30% increase from 1990 (U.S. Census Bureau, 2000). In Utah, the 2006 American Community Survey estimated that approximately 15,652 grandparents had primary responsibility for their grandchildren’s care (U.S. Census Bureau, 2006).

On the surface it may seem a simple solution to place children with grandparents when their parents can no longer look after them. However, without social, emotional and/or financial support, grandparents and other relatives may not be prepared or able to care for children. Relative caregivers who are outside the Utah foster care system have little assistance available to them. Once families become involved with the child welfare system because of abuse, neglect or dependency, the state oversight becomes intensive and expensive. This report will look at the continuum of supports that are available to families in Utah where relatives, most of whom are grandparents, are trying to care for children. By examining the complex needs of kin families...
and the supports that exist both inside and outside the child welfare system, we hope to identify strengths and gaps where policy solutions could improve the system.

We will begin an exploration of kinship caregiving in Utah by examining the social factors that are associated with grandparents or other relatives having responsibility for child rearing (“kinship caregiving”). We will then review the research literature on the impact of kinship caregiving on both children and grandparents. An examination of Utah child welfare data will help us understand how out-of-home child placements in Utah compare with practices in surrounding states. Then we will compare Utah policies with policy options proposed or tried in other states. Finally, we will outline some policy options that address the growing phenomenon of grandparents raising children.

**Reasons for the Growth in Grandparents Caring for Grandchildren**

There are many reasons for the growth in grandparents as caregivers, and there are both demographic and public health factors at play. Longer life spans and relatively high levels of activity of grandparents are positive explanations for this (Thomas, Sperry & Yarbrough 2000). On the other side, negative stressors affecting parents include: increasing frequencies of divorce and single parenting, rising rates of substance abuse, AIDS and other public health problems, poverty, and incarceration of parents. Mental illness or other disability of the parent or child are also reasons why children end up being cared for by grandparents (Utah Division of Child and Family Services, 2007).

According to Jacci Graham, the Director of Grandfamilies, a program of the Children’s Service Society of Utah, the primary reason for the recent increase in grandparent caregiving in Utah is the increase of methamphetamine use among parents. This is supported by data from the Utah Division of Child and Family Services, which show that there were 12,579 reported victims of abuse and neglect handled by Child and Family Services in Utah in the fiscal year 2004. Drug abuse was a contributing factor for the neglect, abuse or dependency that led to removal for over 1,000 of the 1,894 children who were placed out of their homes (Grandfamilies website, 2007). The Executive Director of the Department of Human Services recently reported to the Utah Legislature that between 60 and 80 percent of child welfare placements are due to methamphetamine abuse (Health and Human Services Interim, 2007, October 17). Other reasons for removal include an inability of the parent to deal with a child’s disability or ineffectiveness in disciplining a child, or other health conditions of the parent.

**The Impact of Kinship Care**

A growing body of research shows that children who are placed with relatives do better than those who are placed with non-relatives. Studies have shown that relative placements last longer and are more permanent and that children are able to live within stable, safe and healthy families (Generations United, 2007; Sellick, 2006). Other research reveals that there are intangible benefits for children such as a sense of belonging and an ability to maintain sibling relationships (Testa, Bruhn and Helton as cited in Generations United, 2007).
Stability for children who are in foster care is a key issue. Most of these children have already experienced disruption and instability and it is, therefore, beneficial to find ways to care for them that maximizes stability. The Center for Law and Social Policy (CLASP) reports that children in kinship care experience greater stability because they have fewer placement changes than children placed in non-kin foster care (Conway and Hutson, 2007). Such children also change schools less often, are less likely to re-enter foster care when reunified with their parents, and are more likely to remain with siblings. Children in kinship care report positive perceptions of placements and have fewer behavioral problems. Kinship care also reduces racial disparities because relatives are more likely to respect cultural traditions (Conway & Hutson, 2007).

Of course, positive outcomes do not always result. There have been questions raised about whether children who have been abused or neglected are safer in relatives’ homes where individuals have not received the same scrutiny as foster families. Utah passed a law in 2007 in response to the new federal Adam Walsh Child Protection and Safety Act which prevents even temporary or “emergency” child placement into any home, relative or not, until all adults have cleared FBI and other jurisdictional background checks. This can take anywhere from a few days to several weeks. This recent change in state law has resulted in larger numbers of children spending more time in group shelter care while awaiting foster placement. Legislators and Child and Family Services administrators are currently reviewing this law for reconsideration in the 2008 legislative session (Health & Human Services Interim Committee, 2007, September).

**Challenges for Grandparents**

Kinship families have very different needs from non-relative foster care families, partly because the family dynamics are different when the caregiver has a long-standing history and relationship with the child’s parent(s). Many custodial grandparents experience disappointment, resentment and feelings of being taken advantage of by their son or daughter (Shore & Hayslip as cited in Hayslip & Kaminski, 2005). Some parents are manipulative and disrespectful to the caregivers, causing them stress and anxiety. Grandparents may find themselves caught in between parents and children.

These factors can cause a great deal of tension for grandparents who might have to give up social activities to care for their grandchildren, affecting their own mental health. In a review of literature on grandparents as caregivers, researchers concluded that “the experience of parenting one’s grandchild is necessarily complicated by the child’s temporary or permanent loss of a parent(s). No matter what the circumstances of the parents’ absence, children will be bereaved, requiring more emotional resources from grandparents” (Hayslip and Kaminski, 2005). The family dynamics are complicated even more because grandparents often must cope with their own grief due to a parent’s physical or emotional absence or death (Levine-Perkell & Hayslip, McKelvy & Draimin as cited in Hayslip & Kaminski, 2005).

Studies have shown that grandparents raising their grandchildren have higher rates of depression than those of their age that are not raising grandchildren (DeToledo & Brown; Kornhaber, Musil, as cited in Hayslip & Kaminski, 205). Not surprisingly, grandparents raising grandchildren with physical, emotional or behavioral problems experience greater distress than do non-custodial...
grandparents or grandparents raising grandchildren without such problems (Emick as cited in Hayslip & Kaminski, 2005).

Social isolation and inadequate support reported by custodial grandparents are related in part to demands of the parenting role. Most of the grandparents did not plan on having responsibility for the children in their care but agreed to it when asked. They express having little in common with the parents of their grandchildren’s friends and their own peers cannot relate to their experience (Erhle, as cited in Hayslip & Kaminski, 2005). Another study identified that grandparents with custody of the grandchildren reported feelings of loneliness, feeling different, and having a sense of invisibility (Wohl, et al., as cited in Hayslip & Kaminski, 2005). The kinds of support these custodial grandparents need are both emotional support, such as friendship and empathy, and instrumental support, such as child care and respite care (Minkler & Roe, as cited in Hayslip & Kaminski, 2005).

Financial strains related to child rearing occur in more than half of grandparent-headed households (Kelley, as cited in Hayslip & Kaminski, 2005). Low income grandparents often have limited financial resources to cover the increased financial demands. Many grandmothers give up working outside the home to raise a grandchild, losing income and the less tangible benefits of employment, such as better health and less parenting stress (Musil, Schrader & Mutikani, as cited in Hayslip & Kaminski, 2005).

Grandparents may also have difficulty with legal issues because they do not have legal rights to their grandchildren unless the courts have granted this through legal guardianship or adoption. Relatives who have custody without legal guardianship may have difficulty enrolling children in school and/or obtaining medical treatment. Many grandparents do not seek legal guardianship or adoption because it might cause hostility within the family, especially when there are issues over child support.

If the state has legal custody, as in the case of foster care, the Division of Recovery Services contacts the absent parent(s) to pay child support. If a relative has custody, the parent has no legally enforceable obligation to pay child support unless the relative applies for some form of public assistance, such as Medicaid, TANF or foster care payments. Thus the internal family dynamics are affected by whether the custodial relative applies for public benefits. Where the custodial agreement is informal (i.e., no legal guardianship), the parents may threaten to remove the child from the grandparents’ home to avoid having to pay child support.

**Utah’s Current Policies on Kinship Care**

In Utah, the Division of Child and Family Services is required to consider kin first when seeking out-of- home placement for a child. The authority to provide kinship placements and services is given to Child and Family Services under Utah Code sections 62A-4a-209 and 78-3a-307. The law (R512-500-1) states the purposes of kinship care are to:

- make it possible for children who cannot remain safely at home to live with persons they already know and trust;
• reduce trauma children may experience when placed with a non-relative caregiver who is not known to the child;
• maintain children’s family history, culture, and sense of identity;
• assist families to consider and rely on family resources and strengths; and
• support families to provide children the support they need.

There are several strict requirements that relatives who accept emergency kinship placements must meet. These include not allowing custodial parents or guardians to have any unauthorized contact with the child, not talking to the child about the events that led to the removal, agreeing that Child and Family Services will continue to search for other potential kinship placements if needed, and that the relative is willing to assist the custodial parent or guardian in reunification efforts and to follow all court orders (R512-500-2). Further, a relative will be considered for an emergency placement only if they provide information such as full names, identifications and social security numbers of those living in the household (R512-500-2) so the agency can conduct a criminal background check.

Utah is currently encouraging kin caregivers to complete the foster care licensing process (D. Betournay, personal communication, September 21, 2007). This allows the state to provide them with more benefits. If grandparents want to become licensed they have to apply and pass the same requirements as any other foster parents. Home inspections are required to ensure the safety and comfort of the child, and include aspects such as the cleanliness and repair of the home, sufficient bedroom space, light and ventilation, smoke detectors, and first aid (R501-12). All adults that reside in the foster care home, including relatives, must submit to and clear criminal background checks. The relative foster caregivers must also complete the required 32 hours of foster care training.

Utah has favorable laws allowing access to medical care and educational enrollment for relatives that are not legal guardians of the child. Utah Code 74-14-5 allows a qualified adult acting in loco parentis, whether formally or informally, to consent to medical care on behalf of children under 18, except where prohibited by law. Further, Utah Code 53A-2-201(3)(A) defines a child’s school district as one where the custodial parent or legal guardian resides, or the school district where the child resides, if they reside with a “responsible adult.” The responsible adult may be a grandparent, sibling, aunt or uncle or other blood relative. Thus there does not appear to be significant legal barriers for custodial grandparents in regard to consent to medical care and school enrollment.

**Resources Available for Kinship Caregivers**

Kinship families and the kinds of resources that are available to them can be considered on a continuum (Allen, 2007). The continuum ranges from families that provide informal, temporary support with no government assistance on one end, to families that have permanently adopted relative children and receive a public adoption subsidy at the other end. Figure 1 below illustrates the continuum concept in relation to resources and supports available.
A large majority of the 15,652 Utah grandparents acting as primary caregivers for their grandchildren do not receive any government assistance. The Division of Child and Family Services reports that of the kin caregivers who are involved in the child welfare system, those who become licensed to care for their relative’s child may receive more support because the child remains in the custody of the state. As of November 1, 2007, there were 2,669 children in foster care and of those, 407 were placed with licensed kin families in which the State had custody. On the same date, there were 475 children who were in the temporary custody and guardianship of relatives (P. Van Wagoner, personal communication, November 13, 2007). Kin caregivers with temporary custody and guardianship may receive case management services from Child and Family Services. However, they have to rely on community resources that they seek out and qualify for to meet the needs of the child.

In Utah there is a significant difference between the resources available to relative caregivers compared with those available to licensed foster parents. If relative caregivers choose not to become licensed they can expect far less assistance from various public programs. While the Division of Child and Family Services makes some of the services available, the limited capacity of the system makes it difficult to serve relative caregivers who need extra support. This section considers various types of resources needed by kinship caregivers: Financial, Health Care,
Counseling, Training and other resources.

**Financial Resources**

There are two types of cash benefits that can be paid out to relative caregivers in Utah: the Specified Relative Grant, and the Foster Care Subsidy. The Specified Relative Grant, also referred to as the “kinship subsidy,” is administered by the Department for Workforce Services. The relative does not need to have legal custody or guardianship of the child to receive this grant, but they must document that the child lives with them and the parent does not. They must also provide documentation such as a birth certificate to prove that they are a blood relative of the child.

The amount of the Specified Relative Grant varies depending on the number of children: $274 per month for one child with the amount on a sliding scale as more children are added. This is funded by the Temporary Assistance for Needy Families (TANF) block grant. The Specified Relative Grant covers the child only, so the income and resources of the relative are not considered for eligibility purposes. Data from the Department of Workforce Services indicate that 2,665 children were on the rolls of the Specified Relative Grant in September 2007, and 70% of those were living in the care of grandparents (H. Thatcher, personal communication, October 23, 2007).

Because of the complexity of the system and the bureaucracy that surrounds it, it is hard for many grandparents to understand and navigate the systems of public assistance. Lack of training of Workforce Services case workers can also lead to some relatives being turned away or being given less than they qualify for. The standard application for financial benefits used by Workforce Services does not list the Specified Relative Grant as an option on the first page of the form alongside other common types of assistance. The application form also does not explain that the income of the relative caregiver will not be considered in the eligibility for a Specified Relative Grant. Thus many relatives unnecessarily report their own income on the application, or they choose not to apply because they do not want to report their income to the state (J. Graham, personal communication, October 27, 2007).

If licensed for foster care, grandparents may receive the Foster Care Subsidy, administered by Child and Family Services. Amounts for this are based on both the needs and the age of the child. The current rates are $14 per day for ages 0-11, rising to $15 per day for ages 12-15 and $16 per day for age 16-18 (J. Green, personal communication, September 25, 2007). Additional amounts are available for “structured foster care,” which may be as much as twice the basic subsidy amount. Children with disabilities or challenging behaviors can qualify for extra amounts.

Table 1 below shows Kinship and Foster Care subsidies as a comparison.
Table 1: Comparison of Financial Support Available in Utah for Kinship and Foster Care

<table>
<thead>
<tr>
<th>No. of Children</th>
<th>Specified Relative Grant (Kinship Subsidy) (per month)</th>
<th>Minimum Foster Care Subsidy (per month)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$274</td>
<td>$450</td>
</tr>
<tr>
<td>2</td>
<td>$380</td>
<td>$900</td>
</tr>
<tr>
<td>3</td>
<td>$474</td>
<td>$1350</td>
</tr>
</tbody>
</table>

*This figure is based on the mid-range amount of $15 per day for children aged 12-15, and is calculated as a 30-day month.

Grandparents often have one-time expenses associated with children that they are asked to care for. This can range from purchase of a bed to new clothes. In Utah, there is no program to assist with these expenses. Some states have passed legislation authorizing programs that include one-time payments for this purpose.

Health Care Resources

Medicaid benefits are available for children both in licensed foster care as well as in the custody of grandparents or other relatives. Eligibility is based on the income and assets of the child, without consideration of the custodial relatives’ income. Medicaid is available whether or not the caregiver receives a Specified Relative Grant. Health care benefits, especially mental health benefits, are critical for many children who have experienced the kinds of family disruption that are common in these families.

The package of Medicaid benefits differs depending on whether the caregiver is licensed for foster care or not. Mental health services for children in licensed foster care are available through a “carve out” of the pre-paid (or managed care) mental health system, giving access to more providers. Special health care nurses provide medical case management to help ensure the children in foster care receive needed medical benefits. Children in kin care are limited to receiving mental health benefits through the Prepaid Mental Health Plans in their local areas. The custodial, non-licensed relatives must navigate the complex mental health and medical maze on their own, without the assistance of special nurse case managers.

Counseling & Support Resources

The counseling support available for grandparents and other kinship caregivers in Utah is limited. There is one program, run by the Children’s Service Society, called Grandfamilies. The group is based in Salt Lake City and serves mainly Tooele and Salt Lake counties. The current annual income for the program is $107,000 from state public funds and approximately $110,000 from several local private foundations. The organization provides a variety of support services, including information and support classes, family counseling, and assistance with applying for benefits. Grandfamilies also provides mediation, advocacy services, and family recreation activities. The organization is currently serving 250 families.
**Training Resources**

The state encourages kin families to pursue foster care licensure. To become licensed they are required to attend mandatory 32 hours of training conducted by the Utah Foster Care Foundation. The Foundation combines both relative and non-relative foster parents in the same training sessions. The non-relative foster families must receive the training *prior to* caring for children in their home. Yet kin families – because they are thrust into the caregiving role usually without advanced warning – receive the training *at the time* that they are caring for children. Thus the caregiving challenges at the time of the training are real for the kin caregivers, but are hypothetical for the non-relative caregivers. This situation makes for a different perspective between the non-relative and relative caregivers in their training experience (P. Van Wagoner, personal communication, October 11, 2007). Topics covered in the Foundation pre-service training include, as examples, foster care licensure rules, symptoms of abuse and neglect, dealing with attachment disorder, and techniques for applying effective discipline (Utah Foster Care Foundation, 2007).

**Other Resources**

The state designates trained and experienced caseworkers to serve as “Resource Family Consultants” in various communities throughout the state. The resource family consultants provide support to other Child and Family Services families in their area. While they primarily work with licensed foster families, these resource family consultants may provide support to non-licensed kinship families. However, the number of resource family consultants is limited, thus their availability to non-licensed families is constrained.

“Clusters” are another resource for kinship families sponsored by the Utah Foster Care Foundation and Child and Family Services. These are geographically organized groups of licensed foster families that provide support to each other. These cluster groups are organized by region and rely on a “family to family” philosophy of peer support. A licensed foster family facilitates the cluster group and invites other foster families in their area, including the non-licensed relatives caregivers, to participate in group activities and training. This activity has proven successful in increasing retention of children in foster placements (H. Liese, personal communication, November 15, 2007). Recently, specialized “kinship clusters” have been formed in two regions of the state in recognition of the value of kin families providing support to one another. Kinship clusters are being considered in other regions of the state as well (H. Liese, personal communication, November 15, 2007).

Non-licensed families do not have a formal channel of communication for information about resources in the community. They are not included in the regular mailings that are made to foster families, including the monthly newsletter sent out by the Utah Foster Care Foundation. Their awareness of the Cluster Groups, for example, would be based on whether their caseworker informs them of the group in their area (P. Van Wagoner, personal communication, October 11, 2007).
Current Initiatives in Utah

In 2005, a task force was created to develop an initiative on foster care issues with a shared vision for meaningful collaboration. The Initiative on Utah Children in Foster Care (“IOU”) builds collaboration between all branches of Utah government and other key participants in the child welfare system, including leaders of business, education, religious and charitable communities. The group is made up of approximately thirty members who were selected for their ability to influence policy and to obtain accountability on issues affecting Utah’s child welfare system.

The IOU committee has several subcommittees, including one dedicated to exploring community support for kinship caregivers. The kinship subcommittee is chaired by a former General Authority in the Church of Jesus Christ of Latter-day Saints (LDS) Church and contains members from Child and Family Services, Department of Workforce Services, Children’s Services Society, Allies for Families, LDS Social Services, Ute Tribal Social Services, Utah Juvenile Courts, the University of Utah, and the Provo School District. There are no representatives from the legislature on the full task force or on the kinship subcommittee.

The kinship subcommittee has studied issues related to: Funding supports for relative caregivers, the type and timeliness of information available to relatives before they agree to take custody and guardianship of a child, and educational issues related to the ability of relatives to enroll children in local school districts. The subcommittee has assisted the Children’s Service Society to obtain funding to publish informational fliers about their Grandfamilies program, and to develop a specialized website to inform kin caregivers and link them to information and resources in the community (Gregory, K., 10/24/2007).

The Utah Legislature established the Child Welfare Legislative Oversight Panel to focus on the many complex issues surrounding child welfare. This panel oversees the progress of the Division of Child and Family Services in meeting a settlement agreement resulting from the 1993 David C. v. Leavitt lawsuit. In recent meetings the panel has been asking for information about kinship placement policies (Child Welfare Legislative Oversight Panel, 2007, October).

Alternative Policy Approaches in Other States

There are a number of alternative policy approaches that have been developed by other states. The programs that are described below are Subsidized Guardianship programs, Kinship Navigator programs, and other permanency-based programs.

Subsidized Guardianship

Subsidized Guardianship Programs allow children to exit the “system” and instead to live with relatives who become their legal guardians. The program also provides financial assistance for the care of the children. It is an option that allows grandparents and other relatives to obtain the legal authority to consent to school enrollment, medical care, and to oversee the child’s daily activities without recourse to expensive and intrusive government intervention. It does not
terminate parental rights. More than half the states have these programs, which are financed by state money or through federal sources (Cornerstone Consulting Group, 2006).

The most successful state programs give relative caregivers the same or nearly the same level of financial support as non-relatives (Senior Journal, 2006). While this may appear to cost more, in fact the costs of kinship care are much less due to lower administrative costs because the state no longer has custody and legal guardianship (Generations United, 2007).

The principal source of funding for these programs comes from Title IV-E federal funds. The authority to provide these funds for subsidized guardianship programs under a waiver program, has expired as of March 31, 2006 (Generations United, 2007). However, earlier this year (Feb 2007), the “Kinship Caregiver Support Act” was introduced into Congress (S. 661, 110th Congress; see also H.R. 2188 introduced into the House May 7, 2007). This bill aims to provide each state with the option of providing assistance to relative caregivers through federal Title IV-E funds without a waiver.

Illinois has a successful model of subsidized guardianship. Its state program has been running since 1997 and has reduced the foster care caseload by placing children with relatives and providing living expenses and other support services. Many other states offer similar programs using a piecemeal approach to funding, ranging from TANF, Medicaid and state sources. Many state kinship subsidy programs started under a Waiver of Title IV-E of the Social Security Act, however, these waivers are no longer being granted. Louisiana, Ohio and Nevada have offered state financial support to grandparents of kids who have never entered the child welfare system.

Illinois’ Subsidized Guardianship Program provides a subsidy at the same rate as the state’s foster care and adoption subsidy rates, if the options of returning home and adoption have been ruled out by the Department. There is also a program available to provide resources and support for guardians if needed.

Louisiana also has a Kinship Care Subsidy Program that provides cash assistance for eligible children who reside with qualified relatives (other than parents) who have legal custody or guardianship of a child living in their home. Even if the guardianship is not finalized, assistance may still begin for a period of one year prior. Louisiana’s policy allows children who are not in state custody to qualify for the subsidy.

In Utah the financial support available to relatives from the monthly Specified Relative Grant is much lower than the foster care daily rate. If the state were to increase the kinship subsidy, policymakers would have to fund it from state funds, or allocate a larger share of the TANF block grant to fund the Specified Relative Grants. The federal government is no longer allowing IV-E waivers for kinship subsidies. However, this would change if the federal Kinship Caregiver Support Act was enacted.

**Kinship Navigator Programs**
Some states are offering support to relative caregivers in the form of Kinship Navigator Programs. These programs are designed to provide information and to help caregivers navigate the process and obtain access to services.
In New Jersey, the Department of Human Services funds and administers such a program. The service is a centralized, statewide program that provides services to grandparents and other relative caregivers. The program provides information on a wide variety of services including support groups, financial benefits, medical coverage and services, child care, tutoring, and child support. The Navigator Program also provides referrals to wraparound services such as housing assistance, legal services, and respite care for low income kinship caregivers.

Washington State’s Kinship Navigator Program was created by a subcommittee of the Washington State Kinship Oversight Committee. The programs assist in navigating the system of services for children in out-of-home care including information and referral, advocacy, and support. The navigators are people who assist in providing information and support in the state. In the first year, the program kept 169 children from going into foster care; a saving of $2 million per year (National Council of State Legislatures, 2007).

Utah’s Resource Family Consultants, that are intended to provide information through the foster care system, may be the most similar in function to a Kinship Navigator program. However, as has been noted, these are usually only available to licensed families. The State has no Kinship Navigator Program in place.

Other Innovations
In recent years, some states have passed legislation authorizing programs that include one-time payments to relatives caring for children. For example in 2005, Ohio established a Kinship Permanency Incentive Program, and the same year Texas authorized monetary assistance to relative caregivers for one time payments of up to $1000 per family to allow grandparents and other relatives to purchase needed child care items. This is funded partly by the state’s general fund and federal TANF dollars (Texas Department of Family and Protective Services, 2006).

Washington State provides a good model for how to approach these complex policy changes because it used a planned, multi-step process involving many stakeholders. First, the Washington Legislature commissioned a study of the prevalence and needs of families raising related children. The study compared policies with other states and identified possible changes in services and policies that would increase appropriate kinship care placements. As a result, the Kinship Care Workgroup was formed to propose policy options. One of these options was the establishment of a Kinship Care Oversight Committee, which has provided guidance in finding, supporting, and strengthening kinship care families. The Kinship Oversight Committee is a collaboration of kinship caregivers, child advocates, legislative staff, foster parents, and representatives of state agencies, non-profit service providers, tribes, and the legal community. Additionally, Washington’s “Relatives as Parents Program” (RAPP) Coalition was formed to bring together a variety of public and private organizations, kinship advocates and caregivers to address issues facing kinship caregivers across the state, as well as develop information and public awareness.

The Utah Division of Child and Family Services received funding from the Brookdale Foundation in 2003 to establish the “Relatives as Parents” Program. The grant was used to develop a kinship brochure to educate families about their options for being a placement for a
child that had been removed from a relative due to abuse, neglect, or dependency. However, second year grant funds were rescinded in 2004 because the Division was not in a position to carry out the requirements of the grant to get kinship support groups up and functioning (P. Van Wagoner, personal communication, October 25, 2007).

Summary – Policy Alternatives

The number of grandparents caring for grandchildren is an issue that is unlikely to go away. With the “graying of America” demographic changes occurring, it is likely that the trend seen in the past decade will continue with more grandparents parenting their grandchildren. The goal of having relatives as caregivers is to achieve positive outcomes for children and limit intrusive government intervention into family life. State data show that most grandparents who care for grandchildren are outside the child welfare system, and many want to stay that way. However, if Utah continues to push relatives along the foster care licensing route, government costs and state involvement will continue to rise.

There are several ways in which the problems faced by relative caregivers could be addressed by Utah policy makers.

1. Address the unique needs of kinship families separately from those of foster families with non-relative children. The Utah Foster Care Foundation is an effective state partner in providing training and support for licensed foster families. The model of the Utah Foster Care Foundation – as a private not-for-profit organization established by a State initiative to fulfill specific functions for the child welfare system – appears to be a workable approach to privatizing certain aspects of child welfare services. It is not the mission of this organization to focus on the unique needs and family dynamics of relative caregivers. Yet, an expansion of the kinship cluster groups is a positive approach to addressing the special issues faced by kin families.

   The Children’s Service Society and its Grandfamilies program is another model for meeting needs of troubled families where there is less likely to be court involvement and no state supervision of the families. Because resources for the Grandfamilies model are quite limited and the needs of custodial relatives appear to be growing, the state should explore the desirability of allocating resources differently to these programs. Ultimately this might save state dollars by preserving kin families and keeping more kids out of the more intensive foster care system.

2. Provide relative caregivers with the same financial resources as non-relative foster care providers. Other states have shown a decrease in state custodial foster care when financial payments to relatives are on par with foster care payments. The state has a much higher burden of oversight for foster care. By encouraging more families to take guardianship when appropriate, and providing parity in the support payments, taxpayer money would be saved through decreased state oversight.
3. **Improve access to information about resources.** A website may be enough for some families, for example, to find out where to apply for public assistance, but other families may need a knowledgeable person to assist them in identifying what they need and where to find resources. A Kinship Navigator Program provides assistance in “navigating” the complex network of agencies and programs. The navigators assist families with information and referral, advocacy and support. These programs have been shown to be beneficial in assisting grandparents to locate services in a system very unfamiliar to them at a time when they are vulnerable.

4. **Improve the application process used by the Department of Workforce Services.** The Department can add the Specified Relative Grant as a type of assistance on the front of the application when the forms are re-printed. The application should also include instructions explaining that relatives applying for the grants do not have to provide their own income information, but only that of the child. Workforce Services workers should be trained to know about this unique category of TANF in which the relative does not have to report his/her income in order for the child to qualify.

5. **Increase the visibility of the Initiative of Utah Children in Foster Care Kinship Subcommittee.** The addition of legislators to the Kinship Subcommittee would help ensure its issues are coordinated with a recent kinship focus of the Child Welfare Oversight Panel.
References


U.S. Census Bureau, American Community Survey (2006) Selected special characteristics.

