

STEPPING UP FOR KIDS

what government and communities
should do to support kinship families



policy
report
KIDS COUNT





STEPPING UP FOR KIDS

what government and communities
should do to support kinship families

Across every generation and culture, grandparents, other relatives, and close family friends have stepped forward to raise children whose parents can no longer care for them. This time-honored tradition, known as kinship care, helps protect children and maintains strong family, community, and cultural connections. When children cannot remain safely with their parents, other family and friends can provide a sense of security, positive identity, and belonging.

Extended family members and close family friends care for more than 2.7 million children in this country, an increase of almost 18 percent over the past decade.¹ The vast majority of these living arrangements are established informally within families.

Nevertheless, about 104,000 of these children have been placed with kin formally, as part of the state-supervised foster care system. In fact, children placed with kin by the formal foster care system represent one-fourth of all children who have been removed from their homes by the public child welfare system and placed in state custody.²

Whether they took in children through informal arrangements or through the state-supervised foster care system, all kinship caregivers face the emotional, physical, and financial strain of raising children who

have experienced the trauma of parental separation. Many kinship caregivers take on this responsibility without government assistance, often because they do not realize they could get help. And even those who are able to get help find themselves navigating through thickets of bureaucratic rules and procedures that evolved without kinship families in mind.

With help, kinship caregivers have proven they can ensure that children are kept safe and healthy and are able to achieve their full potential. Smart investments in these caring families also save money. Their loving support enhances children's development, preventing the need for more intrusive and expensive government interventions down the line.

This policy report summarizes what we know about kinship care, identifies

Overall, 1 in 11 children lives in kinship care at some point before the age of 18. One in 5 black children spends time in kinship care at some point in their childhood.

What Is Kinship Care?

The term *kinship care* refers to situations in which children are cared for full time by blood relatives or other adults with whom they have a family-like relationship, such as godparents or close family friends. There are two main types of kinship care. **Private, or informal, kinship care** is an arrangement in which extended family members raise children without child protective services involvement. **Public kinship care** describes situations in which families care for children involved with the child welfare system. **Kinship foster care** describes the subset of child welfare-involved children who are placed with relatives, but remain in the legal custody of the state.³

the problems and issues these families face, and recommends how we can best support caregivers as they step up to take responsibility for children in their extended families and communities.

KINSHIP CARE: A COMMON SOLUTION THAT WORKS FOR KIDS

Nationally, relatives or family friends are raising approximately 2.7 million children because their parents can no longer care for them.⁴ Kin and close friends step up to care for children for many reasons: parental substance abuse and mental illness; child abuse, neglect, or abandonment; illness or death; incarceration; and domestic violence.⁵

Children may also go to live with relatives because of military deployment, employment opportunities in other states, divorce, and deportation. In all of these very different circumstances, kinship care arrangements vary in length from several weeks or months to lifelong caregiving relationships.⁶

Although the vast majority of children live in kinship families without any child protective services involvement, state agencies also depend on kin to care for abused and neglected children under state supervision. The most recent data available show that more than 1 in 4 children in foster care—approximately 104,000 children—are in foster care with relatives.⁷ In addition, approximately 400,000 children who came to the attention of the child welfare system, but were diverted from state custody, live with kin as an alternative to foster care.⁸ In other words,

after a referral has been made to the child welfare system, a worker helps the family find an alternative living arrangement for the child with a family member, at least temporarily, without that system securing legal custody and accepting oversight responsibility.

Data show that families are relying on kinship care at a much higher rate than in years past. In fact, over the past decade the number of children in kinship care grew six times faster than the number of children in the general population (18 percent versus 3 percent).⁹ Newly available data suggest that a large number of children spend time in kinship care at some point during their childhoods, with 1 in 11 children living in kinship care for at least three consecutive months at some point before the age of 18. The likelihood that African-American children will experience kinship care is more than double that of the overall population, with 1 in 5 black children spending time in kinship care at some point during their childhood.¹⁰

Kinship Care Increases Child Safety, Stability, Permanence, and Well-Being

The notion that children do better in families is a fundamental value that cuts across all racial, ethnic, and socioeconomic boundaries. Kinship care helps children maintain familial and community bonds and provides them with a sense of stability, identity, and belonging, especially during times of crisis. Kinship care also helps to minimize the trauma and loss that accompany parental separation. For children

TABLE I

How Many Children Are in Kinship Care?

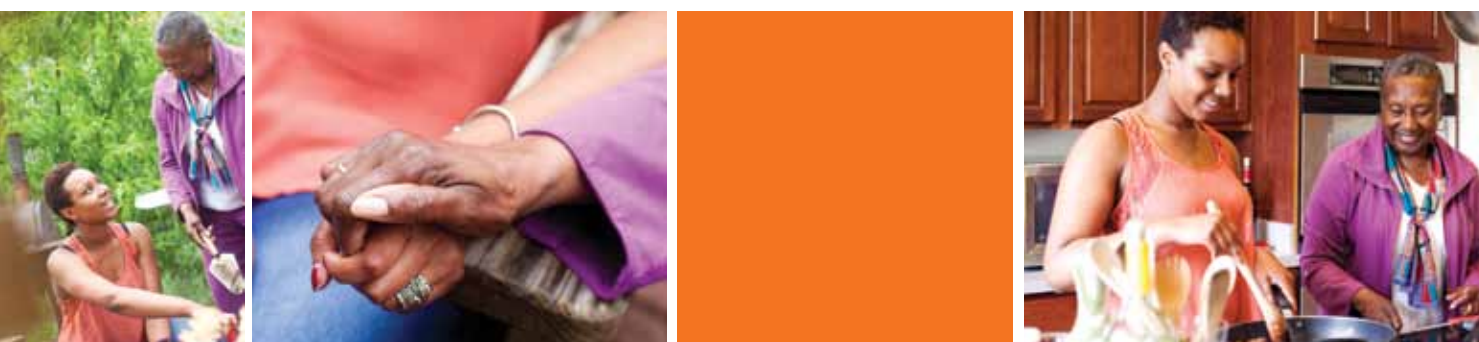
About 4 percent of all children are in kinship care. While only around 104,000 of them are in state-supervised foster care, they represent nearly 26 percent of the foster care population.

State	Children in Public and Private Kinship Care ¹		Children in State-Supervised Kinship Foster Care ²		State	Children in Public and Private Kinship Care ¹		Children in State-Supervised Kinship Foster Care ²	
	Number	% of all children	Number	% of all children in foster care		Number	% of all children	Number	% of all children in foster care
United States	2,712,000	4%	103,943	26%	Missouri	56,000	4%	2,087	21%
Alabama	50,000	4%	660	12%	Montana	8,000	3%	562	33%
Alaska	7,000	4%	451	25%	Nebraska	14,000	3%	1,153	22%
Arizona	60,000	3%	3,605	37%	Nevada	19,000	3%	1,619	34%
Arkansas	34,000	5%	566	15%	New Hampshire	5,000	2%	139	18%
California	333,000	4%	16,338	28%	New Jersey	58,000	3%	2,518	35%
Colorado	32,000	3%	923	13%	New Mexico	24,000	5%	324	17%
Connecticut	24,000	3%	601	14%	New York	153,000	3%	5,433	20%
Delaware	8,000	4%	71	10%	North Carolina	101,000	4%	2,076	24%
District of Columbia	5,000	5%	322	16%	North Dakota	4,000	3%	115	11%
Florida	164,000	4%	8,071	43%	Ohio	100,000	4%	1,631	14%
Georgia	103,000	4%	989	14%	Oklahoma	56,000	6%	2,271	29%
Hawaii	12,000	4%	556	46%	Oregon	22,000	3%	2,254	25%
Idaho	7,000	2%	399	27%	Pennsylvania	101,000	4%	3,456	23%
Illinois	105,000	3%	6,208	35%	Rhode Island	6,000	2%	534	26%
Indiana	59,000	4%	3,814	31%	South Carolina	54,000	5%	294	7%
Iowa	18,000	3%	1,478	23%	South Dakota	7,000	3%	244	16%
Kansas	27,000	4%	1,536	26%	Tennessee	67,000	5%	537	8%
Kentucky	63,000	6%	632	9%	Texas	276,000	4%	8,506	29%
Louisiana	65,000	6%	956	21%	Utah	15,000	2%	553	19%
Maine	8,000	3%	408	26%	Vermont	4,000	3%	132	14%
Maryland	48,000	4%	2,037	34%	Virginia	69,000	4%	312	6%
Massachusetts	31,000	2%	1,616	18%	Washington	53,000	3%	3,404	34%
Michigan	59,000	2%	5,690	35%	West Virginia	19,000	5%	549	13%
Minnesota	21,000	2%	879	17%	Wisconsin	20,000	2%	1,944	30%
Mississippi	53,000	7%	998	28%	Wyoming	4,000	3%	196	20%

¹ Population Reference Bureau's analysis of 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys. Estimates represent 3-year averages. Children in Public and Private Kinship Care are those children under age 18 who were living in households with no parents present and includes those who are related to the householder by blood or marriage, as well as unrelated children who are not classified as roomers, boarders, or foster children.

² KIDS COUNT Data Center's analysis of 2010 AFCARS data, <http://datacenter.kidscount.org/data/acrossstates>.

NOTE U.S. total includes 1,296 children in state-supervised kinship foster care in Puerto Rico.



in the custody of the state child welfare system, placement with caring relatives helps prevent the unnecessary stress of adjusting to foster care with adults they do not know. Kin can provide safe, stable, and nurturing care temporarily when children are removed from their homes, and they can provide care permanently when parents are unable to resume full-time care of their children.

A growing body of research confirms that, in most circumstances, kinship care

is the best option when children cannot live with their own parents.¹¹ Particularly for foster children placed with kin, several studies have found that children in kinship foster care are better able to adjust to their new environment and are less likely to experience behavioral problems and psychiatric disorders than those in the general foster care population.^{12,13} Finally, children in kinship foster care experience fewer school disruptions than children in non-kin foster care.¹⁴

TABLE 2

Who Are Kinship Families?

According to U.S. Census Bureau data, kinship caregivers are more likely to be poor, single, older, less educated, and unemployed than families in which at least one parent is present.

	Children Living With at Least One Parent	Children in Public and Private Kinship Care		Children Living With at Least One Parent	Children in Public and Private Kinship Care
HOUSEHOLD POVERTY			RACE/ETHNICITY		
Below the poverty line	22%	38%	White (non-Hispanic)	55%	40%
Below 200% of the poverty line	43%	63%	Black	14%	31%
EMPLOYMENT			Hispanic	23%	23%
Caregiver employed	71%	50%	OTHER CHARACTERISTICS		
Employed full time	53%	36%	Single parent	31%	55%
Caregiver retired	<1%	16%	Caregiver age 50+	10%	60%
Caregiver disabled	5%	19%	No high school diploma	14%	27%

SOURCE Population Reference Bureau's analysis of the 2011 Current Population Survey Annual Social and Economic Survey.

COMMON CHALLENGES FOR KINSHIP FAMILIES

While many kinship families value the emotional rewards of caregiving, they also experience serious hardship in taking on the full-time care of additional children. Raising children costs money and requires serious commitments of time, energy, and attention. Kin who are given the unanticipated responsibility of caring for additional children quickly confront financial, health, and social challenges. Many grandparents and other relatives raising children also struggle with feelings of guilt and shame about the family circumstances that led to the caregiving arrangement.

These challenges are all the more daunting when caring for children who have experienced trauma, and they are further exacerbated by the difficulties of navigating government and community support systems in an effort to meet children's needs. In some cases, kinship care families lack the requisite legal authority to make decisions on behalf of the children in their care. While these challenges do not diminish the positive impact that kin can have on children, they do call attention to the need for comprehensive supports to address the common barriers facing these families.

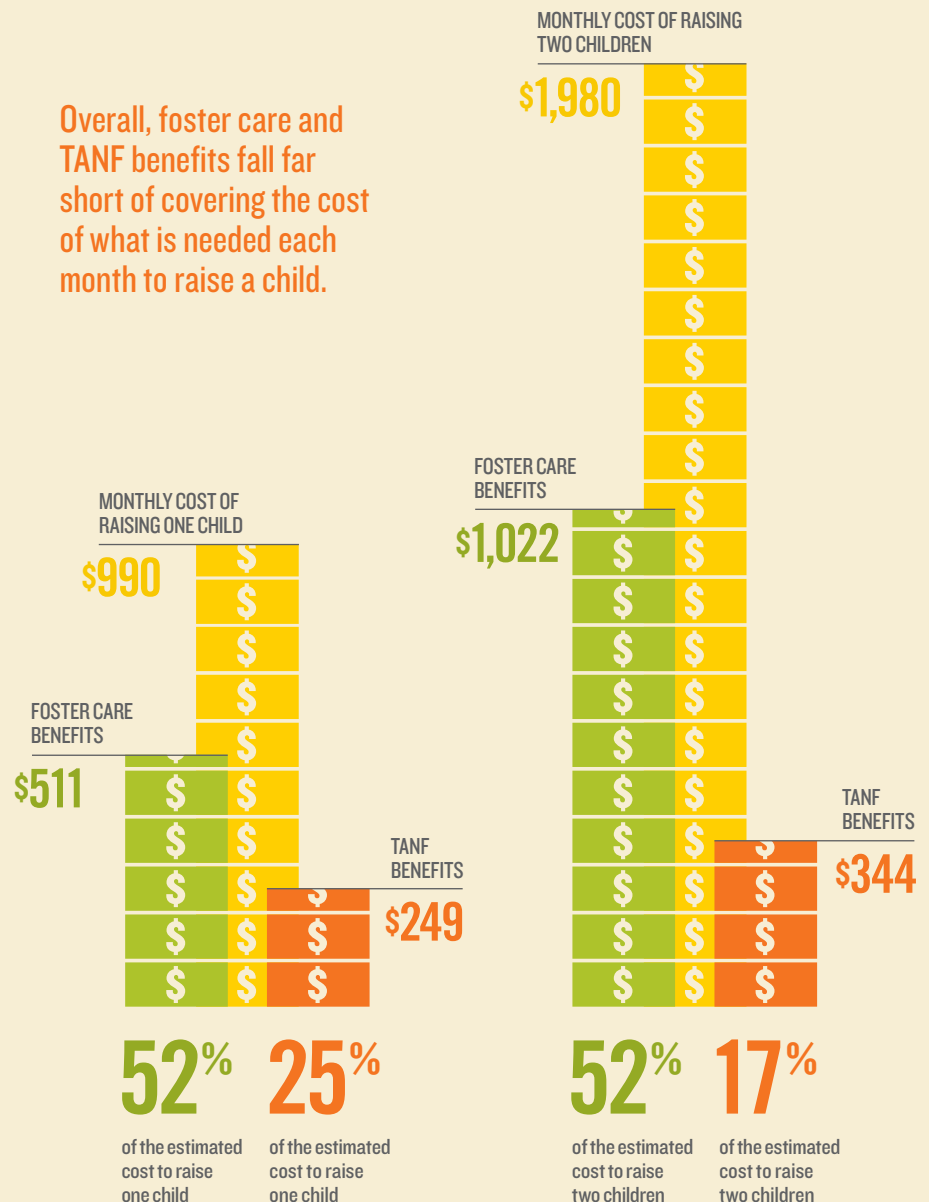
Financial, Health, and Social Stresses of Caregiving

According to U.S. Census Bureau data, kinship caregivers are more likely to be poor, single, older, less educated, and

FIGURE 1

How Does the Cost of Raising Children Compare to Available Government Support?

Kinship caregivers, whether they obtain assistance from foster care or TANF, receive much less financial support than what the USDA estimates it costs to raise a child. Caregivers receive considerably greater assistance from foster care than from TANF, especially when they care for more than one child, because TANF assistance only increases incrementally.



SOURCES Data from Mark Lino, *Expenditures on Children by Families*, miscellaneous publication no. 1528-2010 (Washington, DC: U.S. Department of Agriculture, Center for Nutrition Policy and Promotion, 2010); U.S. Government Accountability Office (GAO), *TANF and Child Welfare Programs: Increased Data Sharing Could Improve Access to Benefits and Services* (Washington, DC: GAO, October 2011), see <http://www.gao.gov/products/GAO-12-2>.

A growing body of research confirms that, in most circumstances, kinship care is the best choice when children cannot live with their own parents.

unemployed than families in which at least one parent is present.¹⁵ The financial burdens kin face can be even more severe when kin are already caring for other children, take in large sibling groups, are retired, or are living on a fixed income.

Whether children living with kinship families were placed through the formal child welfare system or informal agreements within a family, they often face similar challenges, such as a history of parental abuse and neglect, substance abuse, and/or domestic violence. Compared to the general population of children, those in private, informal kinship care tend to have higher poverty rates, are less likely to be covered by health insurance, and are more likely to have physical and mental disabilities.¹⁶ Children in public, formal kinship care are also more likely to face behavioral and emotional issues associated with the abuse or neglect that initially brought their families to the attention of the child welfare system.

In addition to its impact on work, finances, and retirement plans, the sudden decision to take in a child may also disrupt important family relationships. Caregivers often experience a complex set of emotions, including shame, guilt, or anger over the behavior of the children's parents. The emotional impact is especially difficult on grandparent caregivers who must also manage relationships with, and sometimes provide care for, their adult children at the same time they are raising their grandchildren. Focusing on the needs of the children in their care while

ignoring their own needs can lead to chronic stress, depression, or physical illness such as hypertension.¹⁷

It Can Be Hard for Kinship Families to Get Help

Kin caregivers often find it difficult to get the benefits and services they need to take care of the children they've taken in. In fact, many do not even realize that certain government supports exist to help them, or they receive inaccurate information about their eligibility for help.

Financial Help: Temporary Assistance for Needy Families

For many families, their most immediate need is for additional money to pay for the added costs of caring for a child. As mentioned above, kin families are more likely to be poor or low income, and many older kin caregivers are living on fixed retirement incomes. Adding the expense of caring for a child, or several children, is a significant challenge.

Many kin caregivers do not realize that they may be eligible for financial help to pay these extra expenses. In most states, almost all children living apart from their parents—including those living with other family members—are eligible for cash assistance through Temporary Assistance for Needy Families (TANF), even if the family member they are now living with is not eligible. Full-time relative caregivers do not need legal custody or guardianship to apply for assistance on a child's behalf. Additionally, if they meet certain eligibility requirements,

low-income caregivers themselves may also receive cash grants.

Although states can use TANF funds to provide cash assistance and services to kinship families, these programs do not always respond to the unique needs of kinship families. The program has evolved with a focus on nuclear families, including restrictions and time limits that can be inappropriate and unworkable when applied to kinship families.

Less than 12 percent of kinship families receive any assistance from TANF, although nearly 100 percent of the children in such families are eligible, as well as many of the caregivers themselves.¹⁸ Kin are often reluctant to apply for TANF assistance because of a perceived stigma associated with the program, or because they do not know that TANF is available or how to apply for it. They also may not have appropriate documentation verifying the caregiver's relationship to the child.¹⁹

Other Financial Assistance

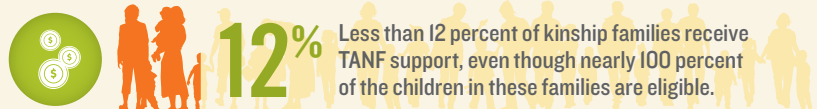
Because most kinship caregivers fail to receive TANF, they miss opportunities to receive other public benefits, as well. For example, less than half of low-income kinship care households receive assistance from the Supplemental Nutrition Assistance Program (SNAP—formerly Food Stamps), despite the fact that most report food insecurity. Less than half of eligible children in kinship care receive Medicaid coverage. Only 17 percent of low-income working kinship caregivers receive child care assistance. Similarly,

FIGURE 2

How Many Kinship Families Receive Financial Assistance?

The majority of kinship caregivers are not receiving the financial help for which they are eligible, and many do not even realize that certain government supports exist to help them care for the children they have taken in.

TANF



SNAP



MEDICAID



CHILD CARE



HOUSING



SOURCES TANF data from Richard Bavier, "Children Residing With No Parent Present," *Children & Youth Services Review* 33, no. 10 (2011); SNAP, Medicaid, Child Care, and Housing data from Jennifer Ehrle and Rob Geen, *Children Cared for by Relatives: What Services Do They Need?* National Survey of America's Families, Series B, No. B-47 (Washington, DC: The Urban Institute, 2002).



only 15 percent of low-income kinship caregivers receive any housing assistance, despite most having reported difficulty paying housing costs.²⁰

Lack of Affordable Legal Representation

Kinship families are called upon to take the place of parents, yet they often need basic legal authority to make daily caregiving decisions for children, such as obtaining medical care or enrolling children in school. Private health insurance usually covers only biological and adoptive children, not children in kinship care, and caregivers are often unaware of children's eligibility for Medicaid and the Children's Health Insurance Program (CHIP). Because of their unclear legal status, some kinship families struggle to access other critical benefits, including Supplemental Security Income (SSI), SNAP, available child care subsidies, and other programs.

Many caregivers find it difficult and intimidating to interact with adversarial court systems, especially when they have to bring cases against their own family members.²¹ Cuts in funding for legal services and growing caseloads make it difficult for low-income families to find qualified and affordable lawyers. Many caregivers earn too much to qualify for free or low-cost legal services, but too little to afford the high cost of a private attorney. Although some courts have committed to making their proceedings more open and supportive for kinship families, the majority still fail to consider the complex dynamics of these families.

Barriers to Effective Use of Kinship Families in the Child Welfare System

Federal and state child welfare policies express a strong preference for relatives to care for those children who cannot safely live with their parents. In fact, federal and state laws require that child welfare agencies notify and consider placement with relatives from the time a child first enters state custody. In 2010, more than one-fourth of children in foster care—approximately 26 percent—were placed with kinship families.²²

Yet, just as the nation's financial support system has evolved with a primary focus on nuclear families, the foster care system itself was not originally designed to assist family members with playing such a direct, parent-like role in meeting the needs of children.

Uneven State Progress in Placing Children With Kin

Despite the fact that policies and laws prefer placement with kin over placement with families unknown to the child, state reliance on kinship families for children in foster care varies widely, ranging from 6 percent to 46 percent. The failure to identify and engage family resources for children in foster care too often results in losing the family connections that are vital to their long-term well-being. The lack of family connections is particularly difficult for those children who leave foster care at age 18 (or, in some cases, up to age 21) with no permanent relationships.

Despite making resources available to children in kinship care, public benefits programs have evolved with nuclear families in mind. As a result, kinship care families are often the “square pegs” in the round holes of the TANF program and other existing government systems.

Barriers to Licensing Kin as Foster Parents

To care for a child in foster care and receive the same supports as other foster parents, relatives typically must be fully licensed as kinship foster parents. However, current state licensing requirements and agency practices for licensing kin families often prevent caregivers from being approved for licensed placements. In fact, more than half of children placed with relatives under state supervision are in unlicensed homes.²³

In some cases, foster care regulations such as physical space requirements (e.g., square footage of bedrooms, size of windows) were not designed with relatives in mind. Foster parent training, a licensure requirement in almost all states, typically focuses on the wide range of issues facing traditional foster families and may not be relevant to kinship families. While many states allow waivers—exceptions to licensing requirements that do not directly impact child safety—the waiver process is often ignored or inconsistently applied.²⁴ The failure of some state child welfare agencies to inform caregivers that licensing is an option may also cause them to miss out on the financial support and other benefits that are typically offered to non-kin foster parents.

Inconsistent Kinship Diversion Policies

When a child first comes to the attention of the child welfare system, many agencies divert children to live with kin as an alternative to bringing the child into state custody, a practice that is commonly referred to as *kinship diversion*. This means

placements are made without the system securing legal custody and accepting oversight responsibility. It is estimated that kin are caring for more than 400,000 children who have been diverted from foster care.²⁵

Despite their prevalence, diversion practices vary significantly both across and within states, and few jurisdictions have developed clear policies to guide them. While some agencies offer ongoing services and supervision, others provide few if any follow-up services to the birth parent, the caregiver, or the child. Many families also agree to diversion without a full understanding of their other options (including the choice to become a licensed foster parent), or without the appropriate legal authority to make decisions on behalf of the child. Because most states do not track outcomes for children who are diverted, little is known about the experience of children living with kin outside of foster care.

Expanding Permanency Options for Children in Kinship Foster Care

When child welfare agencies determine that it is not possible for a child to return home to their parents, many relatives choose adoption to ensure a permanent home for the child.²⁶ Recognizing that adoption may not be the most appropriate choice for every kinship family, federal law also allows states to use federal funds to provide an ongoing payment so that eligible children can live permanently with relatives who obtain legal guardianship through the courts. Although 30 states have taken advantage of this option, 21 states have yet to apply for the program.²⁷

POLICY RECOMMENDATIONS

how to improve government and community support for kinship families

Kinship families step forward to nurture and protect some of our nation's most vulnerable children. Government agencies and community stakeholders also have an important responsibility to help struggling kinship families provide the best possible care and opportunities for the children they are raising. In many states, innovative models and best practices are emerging that help increase the financial stability of kinship families, meet the unique needs of families who have come to the attention of the child welfare system, and improve and expand community-based responses to help kinship families thrive. The following recommendations are based on the best of these ideas and should be expanded across states to strengthen the support system for kinship families.

I. Increase Financial Stability of Kinship Families

To increase their financial stability and prevent unnecessary and more costly involvement in the child welfare and other systems, states should use the flexibility under current federal statute to increase basic income supports for low-income kinship families. Here are some examples of how states can help kinship families secure the resources they need to meet the basic needs of the children they are caring for:

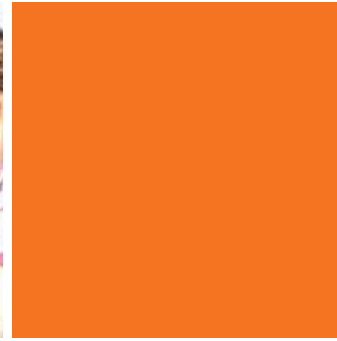
Ensure kinship families have access to benefits to which they are eligible. States should ensure that kinship families are aware of and receive available assistance to meet the basic needs of the children in their care. This includes access to TANF, SNAP, the National School Lunch Program, Social Security, Medicaid, CHIP,

child care, housing assistance, foster care subsidies, and other programs as appropriate. For working kinship caregivers, receipt of the Earned Income Tax Credit (EITC) can also help to ensure family financial stability.

Kinship navigator programs are proving to be excellent vehicles to link kinship families with resources to meet their needs.²⁸ These programs coordinate efforts among public agencies and educate workers and families about eligibility requirements. United Way-sponsored 211 call-in centers, as well as state resource and referral programs, which provide information on local government and community-based services through a single point of contact by telephone, can also be a first point of contact for access to benefits.

Design TANF-funded programs that meet the unique needs of kinship care families.

TANF block grants provide states with opportunities to better meet the needs of low-income kinship families. Some states have increased TANF grant levels to better reflect the actual cost of raising children who have been separated from their parents, and they have extended child care benefits to working caregivers.²⁹ States have also increased asset limits, removed work requirements, and ignored time limits on cash assistance for older caregivers.³⁰ States implementing these reforms recognized that such eligibility requirements and restrictions were designed primarily with young, single mothers in mind and are not as relevant for older kin. States can also use flexible TANF funds or authorize state funding for emergency assistance to help



kinship families through the transition of assuming responsibility for their children.³¹

States can do more to coordinate TANF programs with child welfare agencies, especially for kinship caregivers involved in both systems, such as unlicensed foster parents or those who became caregivers as a result of diversion. For these families, states can ensure that kinship caregivers have the financial capacity to meet the needs of children without foster care payments. And certainly states need to ensure that the needs of biological parents are being met so that reunification can occur.

2. Strengthen Kinship Families Involved in the Child Welfare System

As reliance on kinship care continues to grow, states are recognizing the need to

ensure that abused and neglected children living in kinship families achieve safety, permanence, and well-being, as required by federal law. Best practices from around the country include the following:

Aligning public agency and court practices with the philosophy of placing children with kin.

Leading state and local child welfare systems are now working to identify and engage kin as early as possible when a child becomes involved in the child welfare system; to assess kin for their capacity to serve as appropriate placement resources; and to support kin when they step up to care for children. Courts are also playing an increasing role by requiring agencies to identify and engage kin whenever possible. Family decision making

CASE STUDY

Allegheny Department of Human Services: A Second Chance for Kinship Families

In 1994, Allegheny County in Pennsylvania responded to a judicial consent decree requiring that resources be provided to kinship foster parents. Recognizing that kinship families needed an approach that was different from the way traditional foster care is provided, the county partnered with A Second Chance, Inc. (ASCI), a licensed

foster care agency designed to meet the unique needs of kinship care families. As the only agency in the country that specializes in child welfare-involved kinship families, ASCI is able to license 93 percent of its families so that they have access to needed financial support, while providing parents with services to help them regain custody of their

children. As part of its comprehensive approach, ASCI provides kinship care training specially designed to address the dynamics of kinship families; intensive in-home services; emergency assistance, including a clothing bank and flexible funding for other necessary expenses; respite services; and transportation. ASCI also assigns different

social workers to work with the caregiver and the parent to ensure that immediate service needs, as well as longer-term reunification and permanency goals, are being met. The Department of Human Services now places more than 60 percent of the children in foster care with kin and achieves permanence in 89 percent of its cases.



and front-end family finding are just two examples of promising practices that help agencies work with kin families.^{32,33}

Assuring that any decision to divert children to live with kin as an alternative to state custody is guided by sound policy and practice.

Clear policies help workers determine whether diversion away from state custody is appropriate for children who come to the attention of the child welfare system. Clear program guidance defines how the agency supports these families outside of the traditional foster care structure. These policies include provisions for an independently facilitated team decision-making meeting³⁴ to explore the best options for care and protection of the child with the family.

Kinship families need to understand all of their options, including the option to become licensed kinship foster parents, and they need to understand what supports will be available to them, the children, and the birth parents once the diversion occurs. Child welfare agencies should also track the experiences of children who are diverted from foster care to live with kin to ensure that they are in safe and stable living arrangements. Finally, caregivers who may be struggling should feel safe in seeking support from the child welfare agency without worrying that doing so might lead to having the child removed unnecessarily from their home.

Reforming foster home licensing requirements.

Some states and counties have carefully reviewed their existing licensing standards

to eliminate overly burdensome or prescriptive requirements. States have developed clear and timely processes to grant waivers for those standards that might be appropriate for traditional foster care but that are not relevant for kinship families. States should ensure that training for kinship foster parents is relevant to their needs and does not create a barrier to licensing kinship families.

Adding subsidized guardianship to the permanency options for foster children.

All states should opt into the federal government's Guardianship Assistance Program (GAP). GAP provides federal subsidies for kinship families who agree to permanently care for foster children when they cannot return home or be adopted. GAP can help children leave foster care to find permanent homes with kin and can help states save the administrative costs of continuing to visit with and provide court hearings for the child.

3. Enhance Other Community-Based and Government Responses for Kinship Families

Community and government systems can come together to develop a comprehensive and coordinated network of services and supports for kinship families. This network harnesses the collective action of government agencies, state legislatures, businesses, the legal community, faith-based organizations, and others. An effective network would ensure that kinship care families have the following:

In many states, innovative models and best practices are emerging that help increase the financial stability of kinship families, meet the unique needs of these families, and improve and expand community-based responses to help them thrive.

► **Stable Housing:** The U.S. Department of Housing and Urban Development, housing authorities, housing developers, and children's agencies can promote the development of grandfamily housing. Grandfamily housing enables children and their relative caregivers to live in stable housing with other kinship families with supportive services specially designed to meet their needs.³⁵

► **Affordable Legal Representation:** The legal community can help kinship families secure quality and low-cost legal representation through partnerships with local law schools or pro bono representation through local law firms and bar associations. It can also advocate for the expansion of legal services programs targeted at kinship families.

► **Access to Health Care:** States should enact medical consent laws that allow kinship caregivers to access medical care for children without court-ordered legal custody or guardianship.

► **Ability to Enroll Children in School:** States should enact educational consent laws that allow kinship caregivers to enroll children in school without legal custody or guardianship.

► **Community-Based Support:** The National Family Caregiver Support Program (NFCSP)³⁶ enables state Area Agencies on Aging to use up to 10 percent of their funding to support grandparents and other relatives age 55 and older who are raising children. This funding has provided critical community-based services and supports for kinship families. States should be encouraged to use the full 10 percent of their NFCSP allotment to enhance community support for kinship families.

CONCLUSION

Millions of American families have stepped up to care for the children in their extended families. To help them care for these children, public systems, private agencies, faith-based organizations, and the entire community must also step up. The Casey Foundation encourages states and communities to continue to strengthen existing policies and programs for kinship care families.

Kinship care enjoys strong bipartisan support. In 2008, Congress unanimously passed the Fostering Connections to Success and Increasing Adoptions Act, which provided new federal resources to support kinship care families and instructed states to ensure that relatives are identified and engaged when children must be removed from their parents' homes.

States are also stepping up. Many states have focused on removing barriers to licensing kin to care for children placed in foster care.³⁷ Several states have also taken advantage of the flexibility of the TANF block grant to help kinship care families cover the unexpected costs of taking in a child and eliminate the need for unnecessary foster care.³⁸ Community-based programs have created effective one-stop service delivery models designed specifically for kinship families.³⁹

Now is the time to bring many of these innovative programs and policies to a national scale so that no matter where they live and what their needs are, kinship care families have the support they need to ensure that children thrive.

“Ours is by no means a tradition limited to respect for the bonds uniting the members of a nuclear family. The tradition of uncles, aunts, cousins, and especially grandparents sharing a household...has roots equally venerable and deserving of recognition.”

Supreme Court Justice Lewis Powell, *Moore v. City of East Cleveland*⁴⁰

ENDNOTES

1. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.
2. Ibid.; KIDS COUNT Data Center's analysis of 2010 AFCARS data, see <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=a&order=a&cind=6247&dtm=12994&ch=2621&tf=133>.
3. *Grandfamilies* is also used to describe families in which grandparents and other relatives are caring for children who cannot remain with their parents, a term popularized by Generations United based on extensive public opinion research.
4. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.
5. James P. Gleeson et al., "Becoming Involved in Raising a Relative's Child: Reasons, Caregiver Motivations, and Pathways to Informal Kinship Care," *Child & Family Social Work* 14, no. 3 (August 2009): 300–10.
6. Richard Bavier, "Children Residing With No Parent Present," *Children & Youth Services Review* 33, no. 10 (2011): 1891–1901; Olivia Golden and Amelia Hawkins, *TANF Child-Only Cases* (Washington, DC: The Urban Institute, 2012), 3.
7. KIDS COUNT Data Center's analysis of 2010 AFCARS data, see <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=a&order=a&cind=6247&dtm=12994&ch=2621&tf=133>.
8. Jennifer Ehrle, Rob Geen, and Regan Main, *Kinship Foster Care: Custody, Hardships, and Services* (Washington, DC: The Urban Institute, 2003). The difference between the estimated 542,000 children placed as a result of social services involvement and the 131,000 known to be in state custody in that year (2001) was approximately 400,000.
9. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.
10. Richard Bavier's analysis of data from the 1997 National Longitudinal Survey of Youth, prepared for the Annie E. Casey Foundation. For more information, contact Rob Geen at the Annie E. Casey Foundation, rgeen@aecf.org.
11. Marc Winokur, Amy Holtan, and Deborah Valentine, "Kinship Care for the Safety, Permanency, and Well-Being of Children Removed From the Home for Maltreatment," *Campbell Systematic Reviews* 1 (2009), doi:10.4073/csr.2009.1.
12. Ibid.
13. D. M. Rubin et al., "The Impact of Kinship Care on Behavioral Well-Being for Children in Out-of-Home Care," *Archives of Pediatrics & Adolescent Medicine* 162, no. 6 (2008): 550–56.
14. *National Survey of Child and Adolescent Well-Being (NSCAW), CPS Sample Component Wave 1 Data Analysis Report* (Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, April 2005).
15. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.
16. Richard Bavier, "Children Residing With No Parent Present," *Children & Youth Services Review* 33, no. 10 (2011): 1891–1901; Olivia Golden and Amelia Hawkins, *TANF Child-Only Cases* (Washington, DC: The Urban Institute, 2012), 3.
17. Jennifer Crew Solomon and Jonathan Marx, "The Physical, Mental, and Social Health of Custodial Grandparents," in *Grandparents Raising Grandchildren*, ed. Bert Haylsip Jr. and Robin Goldberg-Glen (New York: Springer Publishing Company, 2000); Meredith Minkler et al., "Grandparent Caregiving and Depression" (ibid.).
18. Bavier, "Children Residing With No Parent Present."
19. U.S. Government Accountability Office (GAO), *TANF and Child Welfare Programs: Increased Data Sharing Could Improve Access to Benefits and Services* (Washington, DC: GAO, October 2011), see www.gao.gov/products/GAO-12-2; Golden and Hawkins, *TANF Child-Only Cases*, 3.
20. Jennifer Ehrle and Rob Geen, *Children Cared for by Relatives: What Services Do They Need?* National Survey of America's Families, Series B, No. B-47. (Washington, DC: The Urban Institute, 2002).
21. Additional research is needed to determine precisely how many private kinship families lack legal custody or guardianship of the children under their care.
22. KIDS COUNT Data Center's analysis of 2010 AFCARS data, see <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=a&order=a&cind=6247&dtm=12994&ch=2621&tf=133>.



23. Children's Bureau, Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, *Report to Congress on States' Use of Waivers of Non-Safety Licensing Standards for Relative Foster Family Homes* (2011), see www.acf.hhs.gov/programs/cb/pubs/statesuse/statesuse.pdf.

24. Federal legislation enacted in 2008, the Fostering Connections to Success and Increasing Adoptions Act, reaffirmed the ability of states to grant waivers for non-safety licensing standards on a case-by-case basis, but many states still fail to take advantage of this flexibility.

25. Jennifer Ehrle, Rob Geen, and Regan Main, *Kinship Foster Care: Custody, Hardships, and Services*. (Washington, DC: The Urban Institute, 2003). The difference between the estimated 542,000 children placed as a result of social services involvement and the 131,000 known to be in state custody in that year (2001) was approximately 400,000.

26. U.S. Department of Health and Human Services, Administration on Children and Families, Administration on Children, Youth and Families, Children's Bureau, *The Adoption and Foster Care Analysis and Reporting System (AFCARS) Report: Preliminary FY 2010 Estimates as of June 2011* (18), see www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm.

27. The District of Columbia is considered a state for the purposes of the Guardianship Assistance Program (GAP). For more on GAP, see *Title IV-E Guardianship Assistance*, www.acf.hhs.gov/programs/cb/programs_fund/index.htm#state. The following 21 states have not yet taken up the GAP option: Arizona, Delaware, Florida, Georgia, Indiana, Iowa, Kansas, Kentucky, Minnesota, Mississippi, Nevada, New Hampshire, New Mexico, North Carolina,

North Dakota, Ohio, South Carolina, Utah, Virginia, West Virginia, and Wyoming.

28. Kinship navigator programs are state initiatives that provide information and referral services to grandparents and other relatives raising children to link them to the benefits and services that they or the children need. For more information, see www.grandfamilies.org/index.cfm?page=topics&topicid=29.

29. The Urban Institute's analysis of state information in the Welfare Rules Database.

30. Ibid.

31. GAO, *TANF and Child Welfare Programs*.

32. "Family team decision making" is a process for making decisions about the safety of the child anytime a placement decision is being contemplated. It is designed to bring together the agency, families, and their communities and empower families to participate in developing action plans.

33. "Family finding" is a practice initially designed to conduct an extensive search for family members of children who had become disconnected from their family networks while in foster care. Some agencies have adapted family finding as a practice to find family resources for children when they first come into foster care. For more on family finding and other strategies for identifying and engaging relatives, see www.senecacenter.org/familyconnectedness and <http://childfocuspartners.com/pdfs/RelativeSearchGuide10-15.pdf>.

34. "Team decision making" is a form of team meetings specifically designed around the decision to place or to change the placement of a child. Other forms of family team meetings are used at various points in the case process, but are not specific to the placement decision.

35. For more on grandfamily housing and other solutions to securing stable housing for kinship families, see Generations United, *Grandparents and Other Relatives Raising Children: An Action Agenda to Create Affordable Housing Opportunities* (Washington, DC: Generations United, 2005).

36. For more on the National Family Caregiver Support Program, see www.gu.org/LinkClick.aspx?fileticket=Lgq5WfhP-Tg%3d&tabid=157&mid=606.

37. For example, in Indiana, between 2006 and 2012, the percentage of foster children placed with relatives increased by 118 percent (from 18 percent to 40 percent). Similarly, Connecticut had an increase of 79 percent (from 14 percent to 25 percent) in a single year (2010–2011).

38. For example, Washington State allows unrelated caregivers, such as a friend or neighbor, to apply for TANF child-only assistance after undergoing a home study and background check. In addition, Washington developed appropriate standards and requirements to ensure the health, well-being, and success of children, including caregiver training and well-child exams. Finally, the TANF agency implemented an integrated case management model that serves relative caregivers receiving child-only grants.

39. Examples include the K.A.R.E. Center in Arizona, Grand Central in Philadelphia, and Edgewood Center in San Francisco.

40. *Moore v. City of East Cleveland*, 431 U.S. 494, 97 S. Ct. 1932, 52 L. Ed. 2d 531 (1977).

ABOUT THE ANNIE E. CASEY FOUNDATION AND KIDS COUNT

The Annie E. Casey Foundation is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of UPS, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities, and communities fashion more innovative, cost-effective responses to these needs.

KIDS COUNT®, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the United States. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for all children. At the national level, the initiative develops and distributes reports on key areas of well-being, including the annual *KIDS COUNT Data Book*.

The initiative also maintains the KIDS COUNT Data Center, which uses the best available data to measure the educational, social, economic, and physical well-being of children.

Additionally, the Foundation funds a nationwide network of state-level KIDS COUNT projects that provide a more detailed, community-by-community picture of the condition of children.

Additional data and copies
of this report can be found at
www.aecf.org/kinship.



ACKNOWLEDGMENTS

Research and writing assistance for this report was provided by Mary Bissell and Jennifer Miller of ChildFocus, and we thank them for their expertise and tireless efforts.

Permission to copy, disseminate, or otherwise use information from this policy report is granted as long as appropriate acknowledgment is given.

Designed by KINETIK
www.kinetikcom.com

Photography © Cynthia Sambro-Rier and Jason Miczek

Printed and bound in the United States of America on recycled paper using soy-based inks.

KIDS COUNT® is a registered trademark of the Annie E. Casey Foundation.

© 2012 The Annie E. Casey Foundation
 701 St. Paul Street
 Baltimore, MD 21202
www.aecf.org

The Annie E. Casey Foundation



701 St. Paul Street
Baltimore, MD 21202
410.547.6600
www.aecf.org