

Kin First

Keeping Families Together



THE ANNIE E. CASEY FOUNDATION



1

The Importance of Kin

- Kin can maintain and preserve family relationships and connections.
- Kin can mitigate trauma caused by removal.
- Kin can reinforce a child's sense of identity and culture.
- Kin can serve as excellent placement and visitation resources. Kin placements are more stable, allow for more frequent family visits, and help keep siblings together.
- Kin are more likely to be a permanent home through adoption or guardianship when reunification cannot be achieved.

2

Identifying, Engaging and Informing Kin

- Identification, location and engagement of maternal and paternal kin should start as soon as the agency begins working with a family. This includes inquiring about Native American or Alaska Native ancestry so that the Indian Child Welfare Act can be followed.
- Good casework practices, including interviewing the child, typically result in identification of a child's extended family network. Internet searches can complement conversations with family to locate kin.
- All options to be involved in the child's life must be explained to kin early.
- The agency should document efforts to identify, notify and engage kin including: who was contacted, relationship to the child, willingness to be a placement option or assist in other supportive role.

3

The Role of the Court

Court oversight is critical to achieving best practices and improving permanency outcomes. Judges can ask the following questions to create an expectation for a kin first culture:

- What is preventing a kinship placement now?
- What reasonable efforts were made to place siblings together?
- Ask the agency at each and every hearing: What efforts has the agency made to identify and locate kin? What efforts have been made to engage kin beyond a notice letter so that they may be part of a child's life?
- Ask the parents and child(ren) at first and all subsequent hearings to give the court information about their important family connections.
- Has the agency explained all possible placement options to kin (i.e. guardianship, adoption, foster care, etc.)?
- Order a visitation plan not only for parents, but for siblings and relatives so children can maintain family connections.
- Inquire as to whether or not the Indian Child Welfare Act applies and ensure the agency makes efforts to identify appropriate placements.

4

Judicial Licensing Considerations

- Does your state require relatives to be licensed foster parents in order to care for children in state custody?
- Are licensing waivers used in your jurisdiction?
- If relatives are not licensed, the court should ask why. Is it by the relative's choice? Do the relatives fully understand all of their placement options? Is there an environmental barrier that can easily be fixed or waived (i.e. family needs a new bed or fire extinguisher, etc.)?
- Do kin have the services and supports needed to meet the unique needs of the children placed in their home?
- Ultimately, it is up to the agency to determine whether or not a relative can be licensed. The court cannot order a home to be licensed, but can inquire and provide oversight as needed.



Benefits of Kinship Placement

Social science support for your in-court and out-of-court legal advocacy
A tool for lawyers

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Information is up to date as of January 2022. To share information to be added to this tool or to provide feedback, please e-mail cathy.krebs@americanbar.org

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Benefits of Kinship Placement

I. EXECUTIVE SUMMARY

Research shows that kinship care for children in the child welfare system often leads to better outcomes for children than when they are placed in non-kinship care. Specifically, kinship care generally leads to fewer placements, greater stability for children, and more contact with parents, siblings, and other kin. In addition, children in kinship care generally have better mental and physical health, fewer behavior problems, higher levels of competence, higher levels of placement satisfaction, and better outcomes as adults.

Government institutions often pose obstacles to kinship care. In some states, the regulatory framework makes it difficult for kinship caregivers to become licensed or approved as foster parents for their related children. Kinship caregivers often have difficulty understanding and processing the paperwork necessary to access financial and other benefits, and they are often ineligible for certain benefits or financial supports. Compounding these problems, kinship caregivers – particularly grandparents – often have limited financial resources prior to taking on a caregiving role. Because kinship caregiving often arises on an emergency basis, caregivers often lack access to childcare, respite care, or other services. Counsel for parents and children who support the kinship caregiving arrangement should consider advocating for, and helping the caregivers to obtain, necessary benefits, supports, and services to assist in ensuring a successful placement.

II. HOW TO USE THIS TOOL

How you can use this tool in trial or appellate advocacy will largely depend on your jurisdiction. For example, you may be able to include the clinical summaries below (or your own synthesis/analysis of them) in your:

- Motion for custody to a kinship resource
- Guardianship petition for a kinship resource, or your client's motion in support of a that person's guardianship petition
- Permanency plan, or opposition to the agency's permanency plan
- Adoption plan or opposition to an adoption plan
- Motion for visits with the kinship resource
- Other motion, petition, memorandum, or
- Appellate brief to educate your appellate court on the importance of kinship placements.

There are other ways, outside of court, you can use this toolkit to affect the outcome of your case or even to effectuate long-term change. For example, you may be able to provide this tool to:

- Your expert
- Your child client's therapist/mental health provider
- Your child client's residential/group home case manager

- A guardian ad litem, CASA, probation officer, or other “neutral” investigator in order to educate (and persuade) them
- The agency social worker or other staff in order to educate (and persuade) them.
- Any workgroup or committee in your jurisdiction, including those that include judicial officers, to further educate them on this issue.

Further, if you have provided this information to your own expert, you may, depending on the jurisdiction, be able to examine the expert on it. If you have provided it to one or more of the other persons listed above, your jurisdiction may permit you to examine or cross-examine them as to whether they read it and whether they pursued (or failed to pursue) a kinship placement.

In any event, regardless of jurisdiction, counsel should be able to *speak* to judges and social workers about the benefits of kinship placement (as set forth in section III, below). Decisions in child welfare cases should be guided by social science research.

Please note that we are including URLs to all cited articles. Some URLs link to complete articles; others link to abstracts, where the complete article can be ordered from the author or from a proprietary database.

III. TALKING POINTS FOR TRIAL COUNSEL

Below are key takeaways and talking points from social science research that may help lawyers persuade judges (and the foster care agency) to place children with kin. Note that all sources cited in these talking points are discussed, with full citations, in section V.

A. When children are removed from parents, they generally have better outcomes when placed with kinship caregivers than their peers who are placed in non-kinship placements. Benefits from kinship care include:

- Reduced trauma after removal by providing familiarity, continuity, and retention of familial ties. ([Epstein 2017](#); [Ehrle & Geen 2002](#)).
- Improved mental health outcomes. ([Epstein 2017](#); [Messing 2006](#); [Winokur, et al. 2018](#)).
- Fewer behavioral problems and better social outcomes. ([Holtan, et al. 2005](#); [Rubin, et al. 2008](#); [Sakai, et al. 2011](#); [Winokur, et al. 2018](#)).
- Better educational outcomes and educational stability. ([Conway & Hutson 2007](#); [Holtan, et. al. 2005](#); [Mass. Ct. Impr. Prog. 2019](#)).
- Greater placement stability and higher levels of permanency. ([Hegar & Rosenthal 2009](#); [Koh 2010](#); [Koh & Testa 2008](#); [Koh & Testa 2011](#); [Sugrue 2019](#); [Winokur, et al. 2018](#); [Winokur, et al. 2018](#))

- Better cultural, ethnic, racial, and traditional connections to their communities of origin. ([Child Wel. Info. Gateway 2021](#); [Conway & Hutson 2007](#); [Hopkins 2020](#); [Nat'l Ass'n of Black Soc. Workers 2003](#); [Sugrue 2019](#)).
- Stronger ties to the child's biological family. ([Holtan, et al. 2005](#); [Metzger 2008](#)).
- Greater placement satisfaction for children and youth, including feelings of love and belonging. ([Chapman, et al. 2004](#); [Conway & Hutson 2007](#); [Hegar & Rosenthal 2009](#); [Metzger 2008](#); [Montserrat & Casas 2006](#)).

B. Kinship care is most effective when caregivers are provided proper services and support.

- Kinship care should generally be prioritized and supported. ([Bissell, 2017](#); [Doblin-MacNab 2015](#); [Lin 2014](#); [Miller 2017](#); [Raphel 2008](#))
- Kinship caregivers need better, and more equitable, access to the financial resources and services available to non-kinship foster families. Their caregiving role often comes unexpectedly, leaving many kinship caregivers unprepared for the financial demands of caring for a child. Consequently, child welfare agencies and state governments should work to provide a greater number of resources to meet the demands of caregiving. ([Bailey, et al. 2013](#); [Lin 2014](#)).
- Kinship caregivers need more flexible licensing standards in order to remove barriers to kinship care. ([Bissell 2017](#); [Miller 2017](#)).
- Kinship caregivers need better access to and information about supportive services, support groups, and parenting skills training/education. ([Castillo, et al. 2013](#); [Collins 2011](#); [Gerard, et al. 2006](#); [Hayslip, et al. 2019](#); [Hayslip & Kaminski 2005](#); [Kirby 2015](#); [Lee & Blitz 2014](#)).
- Kinship caregivers need resources directed to their individualized needs. ([Carr, et al. 2012](#); [Hayslip, et al. 2020](#)).
- Child welfare agencies and advocates can better support kinship caregivers if they consider cultural, racial, and ethnic differences and the impact of systematic oppression on different groups. ([Carr, et al. 2012](#); [Collins 2011](#); [Fuller-Thompson 2005](#); [Kopera-Frye 2009](#)).

IV. FEDERAL AND STATE LAW AND POLICY RESOURCES REGARDING KINSHIP PLACEMENTS

- *New Opportunities for Kinship Families: Action Steps to Implement the Family First Prevention Services Act in Your Community*, ABA CENTER ON CHILDREN AND THE LAW, CHILDREN'S DEFENSE FUND, AND GENERATIONS UNITED (last accessed 1/21/22), <https://www.grandfamilies.org/Portals/0/Documents/FFPSA/new-opportunities-kinship-families.pdf>.

This brief champions the federal Family First Prevention Services Act (Family First Act) and encourages meaningful implementation to support kinship families. It highlights the potential benefits of the Act for kin, such as prevention services to keep children out of foster care, elimination of licensing barriers in order to increase the number of kinship foster homes, support for kinship navigator programs to aid kinship families, and better family involvement for children in group homes.

- Children’s Bureau, *Placement of Children with Relatives: State Statutes Current through January 2018*, CHILD WELFARE INFORMATION GATEWAY (Jan. 2018), <https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/placement/>.

This article details how U.S. states and territories can receive federal support for foster care and adoption under Title IV-E of the Social Security Act. In particular, Title IV-E requires that states “consider giving preference to an adult relative over a non-relative caregiver . . . provided that the relative caregiver meets all relevant state child protection standards.” This provides an incentive to place children with kin when possible. The article also discusses various state requirements for placement with kinship providers, including inquiries into the caregiver’s criminal background, fitness and willingness to provide the child care. The article notes that some states provide provisional foster care licensure, while many more require the caregiver be fully licensed in order to assume care.

V. SOCIAL SCIENCE RESEARCH

A. Children removed from their parents generally experience better outcomes when placed with kin, including:

1. Reduced trauma upon removal

- Heidi Redlich Epstein, *Kinship Care is Better for Children and Families*, 36 ABA CHILD L. PRAC. TODAY 77 (2017), https://www.americanbar.org/groups/public_interest/child_law/resources/child_law_practice_online/child_law_practice/vol-36/july-aug-2017/kinship-care-is-better-for-children-and-families/

This review of social science research concludes that children have better mental health measures when placed with relatives than when placed in non-kinship foster care. First, placing children with kin caregivers minimizes the trauma that comes with removal. When children are removed from their homes, they often lose all prior attachments. Placement with a relative diminishes the loss that comes with removal from parents. Additionally, children who live with relatives have fewer school changes and a better relationship with their caregiver than children who live with unrelated foster parents. Moreover, children who live with relatives are more likely to live with or stay connected to their siblings.

- Jennifer Ehrle & Rob Geen, *Kin and Non-Kin Foster Care – Findings from a National Survey*, 24 CHILD. & YOUTH SERVS. REV. 1-2, 15-35 (Feb. 2002), <https://www.sciencedirect.com/science/article/pii/S0190740901001669>

This article explains that children placed in kinship care can experience less trauma upon removal because of the familiarity, continuity, and connection to family ties these placements offer. Despite these benefits, kinship caregivers are provided fewer financial and family support resources than non-kinship caregivers, which hampers kinship caregivers' ability to provide care and reduce trauma.

2. Better mental health outcomes

- Heidi Redlich Epstein, *Kinship Care is Better for Children and Families*, 36 ABA CHILD L. PRAC. TODAY 77 (2017), https://www.americanbar.org/groups/public_interest/child_law/resources/child_law_practice_online/child_law_practice/vol-36/july-aug-2017/kinship-care-is-better-for-children-and-families/

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- Jill Theresa Messing, *From the Child's Perspective: A Qualitative Analysis of Kinship Care Placements*, 28 CHILD. & YOUTH SERVS. REV. 1415 (Dec. 2006), <https://www.sciencedirect.com/science/article/pii/S0190740906000673?via=ihub>.

This study focuses on seven focus groups that consist of forty children; thirty of them had caregivers who were legal guardians and the remaining ten were under informal kinship care. Questions were presented to the children regarding their transition into care, family relationships, stigma they faced in care, and placement stability. Many children were placed in kinship care when they were too young to remember the transition; for those who were not, the option to live with a relative caring for a sibling factored into their decision to live with the relative. Children overall adjusted smoothly and saw their caregiver as a constant source of support. Children did not feel ostracized from their peers due to their living arrangement and often had friends who could relate as they also lived with a kinship caregiver. Last, the children saw their placements as stable but not permanent because most sought to eventually live with their parents.

- Marc A. Winokur, et al., *Systematic Review of Kinship Care Effects on Safety, Permanency, and Well-Being Outcomes*, 28 RES. ON SOC. WORK PRAC. 19 (2018),

This review evaluates the effects of kinship care compared to foster care on factors such as safety and well-being of the children. The authors review and evaluate 102 quasi-experimental studies and extract outcome data for meta-analysis. Their findings show that children in kinship care have fewer behavioral problems and mental health disorders in comparison to children in non-kinship foster care. Children in non-kinship foster care are 2 times more likely to experience mental illness than children in kinship care. They also have less placement disruption; children in non-kinship foster care are 2.6 times more likely to experience three or more placements than children in kinship care. Children in kinship care also have similar reunification rates. Because there is a significant disparity between the mental health and the number of placements of children in foster care and children in kinship care, the researchers assert that kinship care should be a priority for children who cannot live with their parents.

3. Better behavioral and social outcomes

- Amy Holtan, et al., *A Comparison of Mental Health Problems in Kinship and Non kinship Foster Care*, 14 EUROPEAN CHILD & ADOLESCENT PSYCH. 200 (2005), https://www.researchgate.net/publication/7762944_A_comparison_of_mental_health_problems_in_kinship_and_nonkinship_foster_care

Children in kinship care experience fewer placement changes, maintain greater contact with their biological parents, and stay closer to their original community, all of which are associated with positive behavioral outcomes. This study compares psychiatric problems and placement characteristics of 124 children (ages 4-13) in kinship and 90 in non-kinship foster homes in Norway, with a minimum one-year stay in care. Their caregivers filled out the Child Behavioral Checklist (CBCL), a 120-item questionnaire that reflects their view of the child's behavior. Results show that kinship placements are more stable, and these children have fewer prior placements and foster care breakdowns. Additionally, the kinship group scores significantly higher than the non-kinship group on Total Competence and School Competence scales. Regarding the CBCL Total Problem scales, which measures Total Problems, Withdrawn Behavior, Social Problems, Attention Problems, and Delinquent Behavior, 51.8% of the non-kinship group score above the borderline and only 35.8 % of the kinship group score above the borderline Total Problem score. The kinship group are more integrated with their community and have more contact with their biological parents, which could influence their lower Total Problem scores.

- David M. Rubin, et al., *Impact of Kinship Care on Behavioral Well-being for Children in Out-of-Home Care*, 162(6) ARCH. PEDIATR. ADOLESC. MED. 550-56 (June 2, 2008), <https://jamanetwork.com/journals/jamapediatrics/fullarticle/379638>.

This cohort study examines the association between kinship care and likelihood of child behavior problems after 18 and 36 months in out-of-home care, using a national sample of

children who entered out-of-home care. To gather data, interviews were conducted with children, caregivers, birth parents, child welfare workers, and teachers. This study finds that children in kinship care experience fewer behavioral problems than peers in non-kinship care three years after placement. The study characterizes kinship care as a “protective effect” against behavioral problems. Furthermore, children placed directly in kinship care, rather than being placed into foster care and then transitioning later to kinship care, exhibit better behavioral outcomes than children originally placed with non-kin.

- Christina Sakai, et al., *Health Outcomes and Family Services in Kinship Care, Analysis of a National Sample of Children in the Child Welfare System*, 165 ARCH. PEDIATR. & ADOLESC. MED. 159 (Feb.7, 2011), <https://jamanetwork.com/journals/jamapediatrics/fullarticle/384260>.

This three-year study on health outcomes for children in kinship care relies on the National Survey of Child and Adolescent Well-Being and utilizes face-to-face interviews and assessments with 1,308 American children and caregivers, with follow-up interviews three years later. Children in kinship placements show “significantly lower risks of behavior problems and poor social skills” in comparison to non-kinship placed children three years post-placement, despite the lack of support for kinship caregivers in comparison to non-kinship foster caregivers.

- Marc A. Winokur, et al., *Systematic Review of Kinship Care Effects on Safety, Permanency, and Well-Being Outcomes*, 28 RES. ON SOC. WORK & PRAC. 19 (2018), https://www.researchgate.net/publication/288888726_Systematic_Review_of_Kinship_Care_Effects_on_Safety_Permanency_and_Well-Being_Outcomes.

The authors review 102 quasi-experimental studies that extracted outcome data for meta-analysis, finding that children in kinship care have fewer behavioral problems and increased well-being. This may be related to the lower levels of placement disruption for children in kinship arrangements.

4. Better educational outcomes and educational stability

- Tiffany Conway & Rutledge Q. Hutson, *Is Kinship Care Good for Kids?*, CTR. FOR L. & SOC. POL’Y (Mar. 2, 2007), <https://www.clasp.org/sites/default/files/public/resources-and-publications/files/0347.pdf>

This fact sheet provides a summary of various research studies. The authors conclude that children in kinship care are less likely to change schools in comparison to children in non-kinship care placements or group care facilities. A data analysis from 2005 shows that only 63% of children in kinship care changed schools compared to 80% in non-kinship care and 93% in group care.

- Amy Holtan, et al., *A Comparison of Mental Health Problems in Kinship and Non kinship Foster Care*, 14 EUROPEAN CHILD & ADOLESCENT PSYCH. 200 (2005),

https://www.researchgate.net/publication/7762944_A_comparison_of_mental_health_problems_in_kinship_and_nonkinship_foster_care.

Children in kinship care demonstrate higher levels of competency in school settings when compared to children in non-kinship care settings. This study measures the behavioral outcomes of 214 Norwegian children in kinship and non-kinship care settings using the Child Behavioral Checklist, which assesses behavioral and emotional problems in children. The checklist also measures competency in school settings and finds that children in kinship care score higher in this category, especially girls in kinship care. Holtan reasons that children in kinship care experience fewer placements, maintain greater contact with their biological parents, and stay closer to their original community which is associated with positive behavioral outcomes, such as school competency.

- Mass. Court Improvement Program, *Stable Placement, Stable School: Improving Education Outcomes of Children in Foster Care in Massachusetts* (Mar. 2019), <https://www.mass.gov/files/documents/2019/04/23/Educ%20Study%20Report%20printer%20Final%20March%202019.pdf>.

This study looks at data collected in Massachusetts during the 2014-2015 school year for 6,000 foster care children, as well as surveys from school counselors and other professionals who work with the children. The study finds that, in Massachusetts, children with fewer foster care placement changes have better school experiences. They are less likely to attend 2 or more schools, less likely to be chronically absent, less likely to have a disciplinary action, and less likely to be held back a grade at the end of the school year. Students in kinship homes fare better academically overall than students in non-kinship placements and have fewer school changes, better attendance, and less disciplinary actions. Recommendations from the study include adding support to keep children at home, placing children with kin when possible, and providing kin with services.

5. Increased levels of stability and permanency

- Rebecca L. Hegar & James A. Rosenthal, *Kinship Care and Sibling Placement: Child Behavior, Family Relationships, and School Outcomes*, 31 CHILD. & YOUTH SERVS. REV. 670 (2009), https://www.researchgate.net/publication/223721596_Kinship_care_and_sibling_placement_Child_behavior_family_relationships_and_school_outcomes

This study relies on data from the Child Protective Services Sample, Long Term Foster Care, and NSCAW data which include quantitative and qualitative data from 2,472 youth in kinship or non-kinship foster care. The authors find that kinship care placements are more stable than non-kinship placements. Additionally, the study finds that kinship foster care can result in increased emotional support particularly for children in minority groups. The study also finds that children experience lower levels of internalizing problems (i.e., depression and self-blame) when placed with their siblings; this benefit was more pronounced for children in non-kin placements but was still applicable to children placed with kin.

- Eun Koh, *Permanency Outcomes of Children in Kinship and Non-Kinship Foster Care: Testing the External Validity of Kinship Effects*, 32 CHILD. & YOUTH SERVS. REV. 389 (March 2010), <https://www.sciencedirect.com/science/article/pii/S019074090900276X>.

This study examines permanency outcomes for children in kinship foster homes and non-kinship foster homes in the Foster Care Improvement Project states (Arizona, Connecticut, Missouri, Ohio, and Tennessee). The study relies on Adoption and Foster Care Analysis and Reporting System data and limits the sample size to children who are placed at kinship or non-kinship foster homes within 60 days of removal and who stay at their placement for at least a week. The study took place between 1999 and 2005 and finds that children in kinship care are more likely to experience placement stability. Placement instability is defined as experiencing “three or more placements within a year of entry.”

- Eun Koh & Mark F. Testa, *Propensity Score Matching of Children in Kinship and Non Kinship Foster Care: Do Permanency Outcomes Still Differ?*, 32(2) SOC. WORK RES. 105 (2008), <https://academic.oup.com/swr/article-abstract/32/2/105/1620753?redirectedFrom=fulltext>

This longitudinal study relies on mandatory data collected from the Adoption and Foster Care Analysis Reporting Systems (AFCARS) from 1998 to 2007. Researchers selected a random sample of records of Illinois children which included over 30,000 children and specifically matched a subset of 1,500 kinship children to 1,500 foster care children and compared the sample. The authors find that children generally experienced more placement stability in kinship care settings as compared to non-kinship placements: 71.2% of children placed with kin do not experience a placement disruption, compared to 62.9% of children in non-kinship homes.

- Eun Koh & Mark F. Testa, *Children Discharged from Kin and Non-Kin Foster Homes: Do the Risks of Foster Care Re-Entry Differ?*, 33(9) CHILD. & YOUTH SERVS. REV. 1497 (2011), https://www.researchgate.net/publication/227414007_Children_discharged_from_kin_and_n-on-kin_foster_homes_Do_the_risks_of_foster_care_re-entry_differ

The authors compare exit events from kinship and non-kinship foster care (adoption, guardianship, or return to birth parents) as well as rates of re-entry into the foster system. “[C]hildren in kinship foster homes experience greater stability during their out-of-home placements than children in non-kinship foster placements.” The authors note that “[k]in children are more likely to stay in out-of-home care for a shorter period of time than non-kin children in the samples of reunified and guardianship children, but the opposite finding is reported for adopted children.” Children in kinship foster placements have a lower rate of re-entry into the system following discharge due to reunification (16.7%) or guardianship (1.3%) than non-kinship placements (21.6% and 4.3%, respectively).

- Erin Sugrue, *Evidence Base for Avoiding Family Separation in Child Welfare Practice: An Analysis of Current Research*, ALIA INNOVATIONS ORG. (July 2019), https://www.ncsc.org/_data/assets/pdf_file/0031/18985/alia-research-brief.pdf.

This research report reviews studies addressing the impact of out-of-home placement on children who have been maltreated and the impact of kin foster home placement versus foster home with strangers on children's wellbeing. The report finds that, when out-of-home care is necessary, kinship care is the best option for children because it provides greater stability, leads to fewer emotional problems for children, and keeps children connected to their family.

- Marc A. Winokur, et al., *Matched Comparison of Children in Kinship Care and Foster Care on Child Welfare Outcomes*, 89 FAMILIES IN SOC'Y: J. CONTEMP. SOC. SERVS. 338 (2018), <https://journals.sagepub.com/doi/10.1606/1044-3894.3759>

This study uses a comparative design to review differences between children in kinship care and children in foster care by focusing on permanency, safety, and stability outcomes. The sample included children who lived in their placements for 60 days or longer and who spent 90% of their total days in the placement. The resulting sample included 1,377 children: 505 in kinship care and 872 children in foster care from 12 Colorado counties. The primary findings are: (1) non-kinship foster care children are more likely to be in multiple placements; (2) non-kinship foster care children are more likely to be reunified than kinship children; (3) kinship care children are more likely to achieve permanency through guardianship; (4) non-kinship foster care children are about 10 times more likely to have a new allegation of institutional abuse or neglect while in care; (5) non-kinship foster care children are more likely to be involved with a detention or commitment facility; and (6) non-kinship foster children stay in care placements longer than children in kinship care.

- Marc A. Winokur, et al., *Systematic Review of Kinship Care Effects on Safety, Permanency, and Well-Being Outcomes*, 28 RES. ON SOC. WORK & PRAC. 19 (2018), https://www.researchgate.net/publication/288888726_Systematic_Review_of_Kinship_Care_Effects_on_Safety_Permanency_and_Well-Being_Outcomes

The authors review and evaluate 102 quasi-experimental studies and extract outcome data for meta-analysis. Their findings show that children in kinship care have less placement disruption; children in non-kinship foster care are 2.6 times more likely to experience three or more placements than children in kinship care.

6. Better cultural, ethnic, racial, and traditional connections

- Child Welfare Information Gateway, *Child Welfare Practices to Address Racial Disproportionality and Disparity*, U.S. DEP'T OF HEALTH & HUMAN SERVS., ADMIN. FOR CHILDREN & FAMILIES, CHILDREN'S BUREAU (April 2021), https://www.childwelfare.gov/pubPDFs/racial_disproportionality.pdf#page=1&view=Introduction.

This report analyzes racial disparities in the child welfare system and recommends ways to reduce them, including prioritizing kinship care placements. The report discusses the cultural practices of kinship care in "many African-American, Hispanic, and American Indian or Alaska Native communities." Prioritizing kinship care honors these traditions and

promotes “the preservation of family, community, and cultural ties.” The report also emphasizes the need to provide resources for both formal and informal kinship caregivers.

- Tiffany Conway & Rutledge Q. Hutson, *Is Kinship Care Good for Kids?*, CTR. FOR L. & SOC. POL. (Mar. 2, 2007), <https://www.clasp.org/sites/default/files/public/resources-and-publications/files/0347.pdf>.

This fact sheet addresses the various benefits of placing children in kinship care versus non-kinship care. Kinship care reduces racial disparities. In many cultures, “the family and home are understood to include the extended family,” and, as a result, kinship care allows children to remain connected to their “ethnic, racial, and cultural traditions.”

- Marcía Hopkins, *Family Preservation Matters: Why Kinship Care for Black Families, Native American Families, and Other Families of Color is Critical to Preserve Culture and Restore Family Bonds*, JUVENILE LAW CENTER (Sept. 24, 2020), <https://jlc.org/news/family-preservation-matters-why-kinship-care-black-families-native-american-families-and-other>.

This blog post advocates for kinship care to promote racial equity and support permanency for children and youth. The author, a Senior Manager of Youth Advocacy Program & Policy at Juvenile Law Center, shares her lived experience and advocates for kinship care in an effort to pursue racial equity and permanency for children and youth. The author explains how communities of color have, historically, informally used kinship care to care for children and family members. The author explains that remaining with kin can provide long term positive effects such as strong bonds, a sense of community, and cultural identity. By using kinship care instead of non-kinship care, children can “remain within their family of origin” which “ensures children continue to maintain strong bonds with other family members, like siblings, and grandparents.” Consequently, children in kinship care can heal from the trauma of removal and experience a sense of cultural identity and belonging with their family. According to the author, zealously pursuing kinship care is key to promoting racial equity.

- Nat’l Ass’n of Black Social Workers, *Kinship Care Position Paper* (Jan. 10, 2003), https://cdn.ymaws.com/www.nabsw.org/resource/resmgr/position_statements_papers/kinship_care_position_paper.pdf.

Written by the National Association of Black Social Workers (NABSW), this position paper argues that kinship care provides “cultural and historical continuity for children who are unable to live with their parents” and serves as a “continuation of the African tradition of caring, supporting and providing cultural continuity for families.” As such, the NABSW provides seven recommendations to improve kinship care: (1) provide more resources to kinship caregivers; (2) remove culturally insensitive licensing standards; (3) entitle kinship families to the same level of foster care stipends as non-related families; (4) provide easily accessible, family/child friendly quality services; (5) lengthen the timeline for termination of parental rights; (6) provide child welfare workers with specialized training related to family legacies and kinship; and (7) expand the definition of kin/relative in policies to include extended non-relative family members.

- Erin Sugrue, *Evidence Base for Avoiding Family Separation in Child Welfare Practice: An Analysis of Current Research*, ALIA INNOVATIONS ORG. (July 2019), https://www.ncsc.org/_data/assets/pdf_file/0031/18985/alia-research-brief.pdf.

This research report reviews studies addressing the impact of out-of-home placement on children who have been maltreated and the impact of kin foster home placement versus foster home with strangers on children's wellbeing. The report finds that children in kinship care are often able to remain closer to their biological parents and remain connected to their family history and culture. By living with kin, foster children can retain a "sense of personal and cultural identity" not available to children in non-kin placements. Living with kin can also boost self-esteem as a result of "knowing family history and culture." These factors positively contribute to the child's mental health and wellbeing.

7. Stronger connections to child's biological family

- Amy Holtan, et al., *A Comparison of Mental Health Problems in Kinship and Non kinship Foster Care*, 14 EUROPEAN CHILD & ADOLESCENT PSYCH. 200 (2005), https://www.researchgate.net/publication/7762944_A_comparison_of_mental_health_problems_in_kinship_and_nonkinship_foster_care.

This study compares psychiatric problems and placement characteristics of 124 children (ages 4-13) in kinship and 90 in non-kinship foster homes in Norway, with a minimum stay in care of 1 year. Their caregivers filled out the Child Behavioral Checklist (CBCL), a 120-item questionnaire that reflects their view of the child's behavior. Results show that children in kinship care are able to maintain higher levels of contact with their biological parents which likely contributes to positive wellbeing.

- Jed Metzger, *Resiliency in Children and Youth in Kinship Care and Family Foster Care*, 87 CHILD WELFARE LEAGUE OF AMERICA 115 (2008), <https://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.459.956&rep=rep1&type=pdf>

This study examines self-concept, resiliency, and social support in foster care children through a private nonprofit child welfare agency contracting with DSS. Data was collected in 1997 via voluntary participation of individuals filling out questionnaires. The questionnaire utilizes the PAIC which measures a child's sense of well-being and self-worth. The sample size includes 107 children in New York City; 55 in non-kin foster care, and 52 in kinship foster homes. The study finds that children in kinship care experience more communication with their biological parents compared to children in non-kinship care. Children in kinship care are also more likely to receive monthly visits from both their mothers and fathers. The study also suggests that increased visitation is correlated with increased well-being for the child. Children in kinship foster homes have "significantly more robust self-concept, performance, and personal attribute scores."

8. Improved placement satisfaction for children and youth

- Mimi V. Chapman, et al., *Children's Voices: The Perceptions of Children in Foster Care*, 74(3) AM. J. ORTHOPSYCHIATRY 293 (2004), <https://pubmed.ncbi.nlm.nih.gov/15291706/>

In this paper, researchers review data from 727 children who had been in out-of-home placement for 12 months. The researchers examine the children's perceptions of their foster care experience based on demographics and placement type. They ask the children how they view their current living situation, their thoughts about where they would live in the future, and their view of their biological parents. The study finds that children in kinship care have a greater chance of liking their foster family in comparison to children in group homes and non-kinship care. Additionally, children in kinship placements are less likely to run away. They also experience closer relationships to their kin caregivers as noted by their increased likelihood to talk about personal matters like dating and relationships. Children in kinship homes also report feeling closer to and more cared for by their caregivers, displaying a level of closeness similar to the national average for children out of foster care.

- Tiffany Conway & Rutledge Q. Hutson, *Is Kinship Care Good for Kids?*, CTR. FOR L. & SOC. POL'Y (Mar. 2, 2007), <https://www.clasp.org/sites/default/files/public/resources-and-publications/files/0347.pdf>.

In this factsheet comparing children in kinship care versus non-kinship care, the researchers note that children in kinship care are "[m]ore likely to report liking those with whom they live" and "[m]ore likely to report that they 'always felt loved'" during their placement.

- Rebecca L. Hegar & James A. Rosenthal, *Kinship Care and Sibling Placement: Child Behavior, Family Relationships, and School Outcomes*, 31 CHILD. & YOUTH SERVS. REV. 670 (2009), https://www.researchgate.net/publication/223721596_Kinship_care_and_sibling_placement_Child_behavior_family_relationships_and_school_outcomes.

This study, which relies on data from 2,472 youth in kinship or non-kinship foster care, finds that children in kinship care placements are more likely to like living with and feel part of the family, especially when living with siblings. They are also more likely to feel part of the family early into their placement, whereas children in non-kin placements take longer to feel part of their foster family.

- Jed Metzger, *Resiliency in Children and Youth in Kinship Care and Family Foster Care*, 87 CHILD WELFARE LEAGUE OF AMERICA 115 (2008), <https://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.459.956&rep=rep1&type=pdf>.

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foster homes. The study finds that kinship foster children develop “feelings of being valued” and resiliency to stress because they are often able to maintain stable caretaking and communication with their biological parents while being nurtured by another family figure. Metzger’s study also finds that kinship foster mothers provide “a type of enhanced care” – a “reverberation between kinship foster parent and kinship foster child” – that promotes children’s self-conception. The study also finds that kinship placements, which often allow for increased contact with the child’s biological parents, may promote the child’s resiliency and coping strategies.

- Carme Montserrat & Ferran Casas, *Kinship Foster Care from the Perspective of Quality of Life: Research on the Satisfaction of the Stakeholders*, 1(3-4) APPLIED RES. QUALITY LIFE 227 (2006), <https://psycnet.apa.org/record/2007-19580-001>.

This study compares the points of view of the following three stakeholders of kinship care within the child protection system in Spain: the kinship caregivers, children placed with kin, and practitioners of the Childhood and Adolescence Interdisciplinary Care Teams. This study measures stakeholders’ satisfaction with kinship care situations at least five years after kinship care had started, including the children’s satisfaction with kinship care and with life as a whole. Researchers analyzed 451 questionnaires and observed 57 caregivers who participated in caregiver support groups over a year for a total of 109 meetings. The “[r]esults showed that both children and caregivers report high levels of satisfaction with the fostering situation within the extended family.” Further, the study notes that “[t]hat the characteristics of kinship care, like the maintenance of family bonds and stability and the existence of a familiar network, may indicate already a more functional support system and suggest a positive aspect for child well-being.” Surprisingly, the satisfaction rates of children in kinship homes is higher than that reported by the population of children ages 12-16 as a whole with their natural family.

B. To support successful kinship placements, lawyers must advocate for appropriate services and resources to support the kinship caregivers.

Kinship caregivers often lack the financial benefits and support services needed to help them care for nieces, nephews, cousins, and grandchildren. They also often lack – or lose, after they take legal guardianship or custody – mental health and other resources necessary to help children who were removed from their homes of origin. The child protection agency, as well as other state agencies, by withdrawing, denying, or failing to give access to such supports, in effect sets kinship caregivers up to fail. Accordingly, lawyers for parents and children must zealously advocate for such supports in order to ensure that kinship placements and permanency with kin succeed.

Note that, while kinship caregivers may be grandparents, aunts, uncles, cousins, adult siblings, or even unrelated persons with a significant connection to the child falling under a broader definition of “kin,” the vast majority of clinical literature about needed support services concerns grandparents.

1. General recommendations for creating a kin-first culture

- Mary Bissell, *Recruiting and Supporting Kinship Foster Families*, 36 ABA CHILD LAW PRACTICE 4 (July 1, 2017), https://www.americanbar.org/groups/public_interest/child_law/resources/child_law_practice_online/child_law_practice/vol-36/july-aug-2017/recruiting-and-supporting-kinship-foster-families/.

According to the author, child welfare reform must be grounded in children's needs; thus, kinship care should be better supported and accessible. Bissell's recommendations include early engagement with kin when a child is involved in child welfare services, full disclosure of options available to kin caregivers, adequate financial resources, and foster care licensing programs that consider the needs of kin caregivers.

- Megan L. Dolbin-MacNab, *Critical Self-Reflection Questions for Professionals who Work with Grandfamilies*, 2(1) GRANDFAMILIES: THE CONTEMP. J. OF RES., PRAC. & POL. 139, 142 (Mar. 2015), <https://scholarworks.wmich.edu/cgi/viewcontent.cgi?article=1010&context=grandfamilies>.

This article poses a series of reflective questions and exercises for social workers and other professionals in child welfare to reduce the negative stereotypes and stigmas held against grandparent caregivers. For example, Dolbin-MacNab discusses the incorrect assumption that grandparents are not well-suited to raise their grandchildren because they did not raise their grandchildren's parent well. To address bias stemming from incorrect assumptions like this, professionals should go through reflective practice to consider how their own biases impact their ability to support grandparent caregivers.

- Ching-Hsuan Lin, *Evaluating Services for Kinship Care Families: A Systematic Review*, 36 CHILD. & YOUTH SERVS. REV. 32 (2014), <https://www.sciencedirect.com/science/article/abs/pii/S0190740913003393?via%3Dihub>

This literature review relies on 13 carefully selected peer-reviewed articles evaluating services/interventions for kinship care families or caregivers. Studies generally show positive outcomes for children, caregivers, and families. The review concluded that kinship care families do not receive the same amount of financial support as their non-kin peers, often because of obstacles to foster care licensure and payments. It also noted that kinship caregivers receive lower levels of support from child welfare agencies. Lin concludes that child welfare agencies can support kinship families by ensuring access to resources and support. Both informal and formal supports – including support groups, tutoring for the child, healthcare, and legal assistance – can help achieve permanency outcomes, improve the child's self-esteem, and boost the child's mental health and academic performance.

- Jennifer Miller, *Creating a Kin-First Culture in Child Welfare*, 36 ABA CHILD L. PRAC. 4 (July 1, 2017), https://www.americanbar.org/groups/public_interest/child_law/resources/child_law_practice_online/child_law_practice/vol-36/july-aug-2017/creating-a-kin-first-culture-/

In this article, Miller proposes a multi-step approach to creating a kin-first culture in child welfare. The first step is a message through court and child welfare systems that children belong with their family. The next step is to develop a series of written policies that allow a kin-first culture to flourish. Kin-first policies must include notifying kin of child welfare services' involvement, emergency placement protocols that emphasize kin placements, flexible licensing policies to ensure kin caregivers have access to needed resources, parenting training, and general financial support.

- Sally Raphael, *Kinship Care and the Situation for Grandparents*, 21(2) J. CHILD ADOLESC. PSYCHIATR. NURS. 118 (May 2008), <https://pubmed.ncbi.nlm.nih.gov/18429842/>

Raphael discusses the implications of key studies regarding kinship foster care, including a 2000 U.S. Department of Health and Human Services report stating that kinship caregivers receive less financial assistance than non-kinship caregivers despite rising costs associated with kinship care and increased demand for kin caregivers. Another report by the U.S. General Accounting Office concludes that children benefit from kinship care in terms of stability. As a result of these reports, Raphael states that kinship caregivers need education on resources they are eligible for, and states should become more involved in kinship policies and resources. For example, “many service providers are unaware of grandparent or relative caregivers and have no system for identifying them or helping them access appropriate services.” Creating a system that connects service providers to caregivers is one way the state can become more involved in supporting kinship families.

2. Kinship caregivers need supports to be successful, including:

a. Financial support

- Sandra Bailey, et al., “*How can you retire when you still got a kid in school?*”: *Economics of raising children in rural areas*, 49(8) MARRIAGE & FAM. REV. 671-69 (Dec. 2013), <https://www.tandfonline.com/doi/abs/10.1080/01494929.2013.803009>

Grandparents raising their grandchildren, especially single grandmothers, face significant financial difficulties, especially in rural areas. In a study of grandfamilies in Montana, researchers find that grandparents raising grandchildren are more likely to work, and more likely to work longer hours than their peers. Additionally, grandparents who are not legally recognized as foster-parents struggle to obtain financial assistance because of work requirements that elderly caregivers cannot meet. Grandparents who are legally recognized as foster parents and qualify for foster-parent benefits still struggle with making ends meet. Financial assistance and resources, such as food stamps, health care, and housing, can help caregiver grandparents.

- Ching-Hsuan Lin, *Evaluating Services for Kinship Care Families: A Systematic Review*, 36 CHILD. & YOUTH SERVS. REV. 32 (2014), <https://www.sciencedirect.com/science/article/abs/pii/S0190740913003393?via%3Dihub>

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b. Support groups and parenting skills support

- Katherine D. Castillo, et al., *The Relation Between Caregiving Style, Coping, Benefit Finding, Grandchild Symptoms, and Caregiver Adjustment Among Custodial Grandparents*, in *RESILIENT GRANDPARENT CAREGIVERS: A STRENGTHS-BASED PERSPECTIVE*, 25-37 (Bert Hayslip Jr. & Gregory Smith eds., 2013), <https://psycnet.apa.org/record/2012-32833-002>

In this study, grandparents' caregiving and coping styles, "perceptions of their grandchild's behavior problems," and resources/benefits are examined to determine how they impact the custodial grandparent's adjustment to a parenting role. Psychological adjustments and grandparenting behaviors may impact custodial grandchildren's adjustments. Consequently, custodial grandparents should be provided some sort of training or intervention to foster authoritative caregiving styles which can better support their grandchildren's development.

- Wanda Lott Collins, *A Strengths-Based Support Group to Empower African American Grandmothers Raising Grandchildren*, 38(4) *SOC. WORK & CHRISTIANITY* 453-466 (2011), <https://www.proquest.com/docview/906851420?pq-origsite=gscholar&fromopenview=true>.

Support groups that provide tailored caregiver support can be helpful for African American grandmothers raising children. This report follows a support group comprised of African American grandmothers raising grandchildren in either formal or informal arrangements. The group uses five interventions centered on certain main concerns: health; social services; financial and legal matters; religious and spiritual connections; socio-economic support; and the need for respite care. The support group met with nurses, legal aid speakers, and a private lawyer to discuss the first two themes. The church tied to the support group also provides reduced charges for recordings of Sunday sermons for grandparents who could not attend either due to work, caregiving, or sheer exhaustion, so they can stay connected to their spirituality. They also meet with a counselor to "discuss strategies to reduce day-to-day anxiety and emotional frustrations." Finally, the church offers youth lock-in programs with safe and fun activities so grandmothers can rest and socialize with their friends. These forms of support result in positive improvements for the grandmothers.

- Jean M. Gerard, et al., *Grandparents Raising Grandchildren: The Role of Social Support in Coping with Caregiving Challenges*, 62(4) *INT'L J. OF AGING & HUMAN DEV.* 359-383 (2006), <https://pubmed.ncbi.nlm.nih.gov/16739469/>.

Researchers examine 133 grandparents with primary responsibility for their grandchildren and the potential moderating role of social support on stressors and well-being. Results show that formal support improved the relationship between grandchild health problems and both grandparent caregiving stress and life satisfaction. Also, satisfaction with the availability and adequacy of informal (i.e., aid from family or friends) and formal (i.e., assistance from professional helpers) support systems is beneficial to grandparents regardless of children's health and daily stressors. Professional assistance and community services are important in minimizing the negative impact of child-related challenges on grandparents' well-being and life satisfaction.

- Bert Hayslip, Jr., et al., *Grandparents Raising Grandchildren: What Have we Learned Over the Past Decade?*, 59(3) THE GERONTOLOGIST 152-163 (May 2019), <https://pubmed.ncbi.nlm.nih.gov/28666363/>.

Support groups can be beneficial for grandparents taking on caregiving roles. This article provides an overview of key research on grandparents raising children and provides suggestions for future research. Most notably, the authors discuss the importance of grandparent resilience in order to “counteract the negative effects of stressors on [their] physical and mental health.” Resilience can be taught through interventions and “enhancing protective factors” such as social support and health care resources. Additionally, family trauma can increase the intensity of grandparents' stress. Social support and healthcare resources are especially beneficial for grandparents in situations involving family trauma.

- Bert Hayslip, Jr. & Patricia Kaminski, *Grandparents Raising Their grandchildren: A Review of the Literature and Suggestions for Practice*, 45(2) THE GERONTOLOGIST 262-269 (2005), <https://academic.oup.com/gerontologist/article/45/2/262/815984?login=true>.

This article reviews the literature regarding grandparent caregivers as of 2005 regarding financial resources, social support, and parenting practices. The authors note that the majority of grandparents raising grandchildren are younger than 65, and the reasons they assume this role vary by ethnicity. Caregivers report loneliness and a lack of support but nevertheless state that raising their grandchildren is inherently rewarding. They also discuss having little in common with the younger parents of their grandchild's friends and struggling to maintain their own social networks. The authors suggest providing greater social support which can aid them in tolerating challenging behavior in their grandchildren.

- James N. Kirby, *The Potential Benefits of Parenting Programs for Grandparents: Recommendations and Clinical Implications*, 24(11) J. OF CHILD & FAM. STUDIES 3200-3212 (Jan. 20, 2015), <https://psycnet.apa.org/record/2015-02742-001>

This research examines the effectiveness of parenting programs for grandparents. When grandparents participate in parenting programs, it leads to positive social, emotional, and behavioral outcomes for the children in their lives, even if the children do not directly live with them. These programs positively impact both children and grandparents. The grandparents who participate in parenting programs (specifically support groups, parenting

education, and psychoeducation) have better outcomes in terms of reduced distress levels and improved grandparent-parent relationship satisfaction.

- Youjung Lee & Lisa V. Blitz, *We're GRAND: A Qualitative Design and Development Pilot Project Addressing the Needs and Strengths of Grandparents Raising Grandchildren*, 21(4) CHILD & FAM. SOCIAL WORK 381-390 (May 5, 2014), <https://onlinelibrary.wiley.com/doi/10.1111/cfs.12153>

The authors interviewed caregiving grandparents to determine their key needs, finding that family conflicts, financial instability, and a lack of community resources are a concern of grandparents. When schools communicate openly with grandfamilies, they are able to assist these families in finding helpful, relevant resources and educational programs to ameliorate the negative experiences of custodial grandparenting and emphasize the positives. With this assistance, custodial grandparents are more supportive to their grandchildren, are more comfortable discussing diversity as it relates to their specific family unit, and feel more fulfillment from caring for their kin.

- Anne L. Strozier, *The Effectiveness of Support Groups in Increasing Social Support for Kinship Caregivers*, 34(5) CHILD. & YOUTH SERVS. REV. 876-881 (May 2012), <https://www.sciencedirect.com/science/article/abs/pii/S0190740912000229>.

Strozier argues that kinship support groups should be more readily available because of their ability to “increase formal social supports” for grandparents and combat their reported feelings of isolation. Given the unique and stressful position grandparent caregivers are in, social support groups are an important tool. The study finds that caregivers who attend support groups experience a significant increase in social support when compared to caregivers who do not attend kinship support groups. Additionally, caregivers who attend kinship support groups are more likely to seek out formal social supports from sources such as parent groups, social clubs, church members, physicians, early childhood programs, and schools.

c. Knowledge of, access to, and availability of individually tailored resources

- Gloria F. Carr, et al., *Needs for Information about Supportive Resources: A Predictor of Needs for Service and Service use in African American Grandmother Caregivers*, 10(1) J. OF INTERGENERATIONAL RELATIONSHIPS 48-63 (March 7, 2012), <https://www.tandfonline.com/doi/abs/10.1080/15350770.2012.647566>.

In this study of 93 African American grandmothers, researchers find a link between what services are needed and the grandmother’s age and number of grandchildren in her care. The findings suggest that older grandmothers and grandmothers with more children in their care are more likely to need information and access to social, medical, and legal services. Though needs vary for each person, this study helps predict what resources and information may be most helpful for African American custodial grandmothers depending on their particular situation.

- Bert Hayslip, Jr., et al., *Thematic Dimensions of Grandparent Caregiving: A Focus Group Approach*, 6(1) GRANDFAMILIES: THE CONTEMPORARY J. OF RES., PRAC. & POL. 1 (2020), <https://scholarworks.wmich.edu/cgi/viewcontent.cgi?article=1092&context=grandfamilies>.

This study, relying on qualitative information provided by 75 Texas grandparent caregivers during focus groups, finds that grandparents experience isolation, disenfranchisement, and marginalization from others due to financial costs of raising grandchildren and stigmatization. Providing knowledge of available resources through a needs-based approach can empower caregiving grandparents. Major concerns for grandparent caregivers include affordable and trustworthy day care, difficulty dealing with the adult child (parent of the child they are raising), dealing with their own emotions and life situations, and the emotional, interpersonal, and behavioral problems of the grandchild. The article recommends “Empowerment Training” and “Grandchildren Fact Sheets” along with grandparent specific interventions.

3. Cultural, racial, and ethnic considerations

- Gloria F. Carr, et al., *Needs for Information about Supportive Resources: A Predictor of Needs for Service and Service use in African American Grandmother Caregivers*, 10(1) J. OF INTERGENERATIONAL RELATIONSHIPS 48-63 (March 7, 2012), <https://www.tandfonline.com/doi/abs/10.1080/15350770.2012.647566>.

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- Wanda Lott Collins, *A Strengths-Based Support Group to Empower African American Grandmothers Raising Grandchildren*, 38(4) SOC. WORK & CHRISTIANITY 453-466 (2011), <https://www.proquest.com/docview/906851420?pq-origsite=gscholar&fromopenview=true>.

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- Esme Fuller-Thomson, *Canadian First Nations Grandparents Raising Grandchildren: A Portrait in Resilience*, 60(4) INT’L J. OF AGING & HUMAN DEV. 331-342 (2005), <https://pubmed.ncbi.nlm.nih.gov/15954683/>.

This study focuses on Canadians of First Nations origin living in skipped generation households and the serious hardships they face as a result of inadequate financial assistance. The author argues that an understanding of the historical context surrounding people of First Nations origin (including forced acculturation, residential schools, and family separation) is essential when considering the hardships and resilience of these grandparent caregivers. The article discusses the cultural components of these living arrangements; while grandparents generally become involved with raising their grandchildren “in order to enhance children’s understanding of traditional ways and values,” many First Nations grandparents are unprepared when they become full-time caregivers due to a family crisis (i.e., the imprisonment or death of the grandchildren’s parents) because they are significantly financially disadvantaged. Thus, financial assistance is especially important because of the historical disenfranchisement that has contributed to their financial disadvantages.

- Karen Kopera-Frye, *Needs and Issues of Latina and Native American Nonparental Relative Caregivers: Strengths and Challenges Within a Cultural Context*, 37(3) FAM. & CONSUMER SCIENCES RES. J. 394-410 (July 2, 2009), <https://legalaidresearch.org/2020/01/31/needs-and-issues-of-latino-and-native-american-nonparental-relative-caregivers-strengths-and-challenges-within-a-cultural-context/>.

The need for resources varies depending on the family’s racial and cultural identity. This study consists of a series of interviews with Native American and Latino caregivers to determine the specific needs and issues they face as grandparents. The author finds that both groups have financial and health related concerns, but they also struggle accessing other kinds of support. Latino caregivers in particular express concerns about “inadequate resources for the child’s medical care,” while Native American caregivers struggle with legal custodial issues. Moving forward, child welfare agencies should consider how needs and issues vary across different groups of caregivers so as to best serve the families.

- Additional Resources on Cultural Issues
 - Generations United Toolkit: American Indian and Alaska Native Grandfamilies: Helping Children Thrive Through Connection to Family and Cultural Identity [American Indian & Alaska Native Grandfamilies: Helping Children Thrive Through Connection to Family and Cultural Identity - Generations United \(gu.org\)](https://www.generationsguide.org/american-indian-and-alaska-native-grandfamilies)
 - Generations United Toolkit: African American Grandfamilies: Helping Children Thrive Through Connection to Family and Culture [African American Grandfamilies: Helping Children Thrive Through Connection to Family and Culture - Generations United \(gu.org\)](https://www.generationsguide.org/african-american-grandfamilies)

4. Additional Resources on Kinship Care

Grandfamilies.org (www.grandfamilies.org). This website includes a database of existing state laws and policies, resources to support grandfamilies both inside and outside of the child welfare system, and publications such as *Kinship Caregiving Options: Considerations for Caregivers* (January 2022), [https://www.grandfamilies.org/Portals/0/kin-caregiving-options-dec21%202022-01-10%2022 34 13.pdf](https://www.grandfamilies.org/Portals/0/kin-caregiving-options-dec21%202022-01-10%2022%2034%2013.pdf)

Kinship Caregiving Options

Considerations for Caregivers

December 2021



Purpose

This publication—

- helps kinship families and the professionals who assist them compare caregiving options.
- provides a broad, national overview about the choices and considerations to help caregivers make informed decisions about the pathways to pursue.

How caregiving options look at the state, tribal, territorial, and local levels differ. Kin caregivers should consider this an informational resource and consult local kinship navigator programs, attorneys or legal professionals, caseworkers, and other available professionals. Ultimately, kin caregivers and their families must choose the caregiving option that best meets their needs.

For information on programs and state and national data on children in kinship families, see www.grandfamilies.org/State-Fact-Sheets.

About 2.6 million children are being cared for by kin—both blood relatives and people with a significant connection to the family (sometimes referred to as “fictive kin”)—without parents present in the home. Of these children, approximately 137,000 are being cared for by kin in the legal custody of the child welfare system. Although this number represents almost one-third (34%) of all children in foster care, most children cared for by kin are not in child welfare system custody and therefore do not get the same level of support as those inside the system.

Family and close family friends stepping up to raise children is not new. Kinship care is a traditional practice among families in most cultures and has evolved into a leading form of foster care.



Kinship Care Benefits

Research repeatedly shows that, compared to placement in non-kin settings, placement with kin:

- reduces a child's trauma of removal from their parents, and
- reduces their chance of being moved to other homes.

Children with kin are more likely to:

- have better behavioral health outcomes,
- stay connected to siblings,
- keep their cultural identity and community connections, and
- exit foster care to a permanent family if they cannot return to their parents.



Considerations for Kin: Caregiving Inside vs. Outside the Child Welfare System

While it is important that kinship families have all relevant information to decide which caregiving option is best for them, the fundamental choice of whether to care for children inside or outside the child welfare system is not always a choice the family can make. Child welfare system involvement may depend on several factors, such as:

- ▶ the need for services,
- ▶ the ability to care for the child safely, and
- ▶ the preference of the parents.

For kin who are potential caregivers of children in the custody of child welfare agencies to make important placement and permanency decisions, caseworkers must engage them and provide all relevant information as early in the process as possible. Making an informed, well-thought-out decision early often minimizes difficulty and placement instability later. There are many factors to consider when making these complex decisions, including the perspectives, rights, and responsibilities of all involved—kin, parents, children, child welfare agencies, and courts.



How Kinship Families are Formed

Kinship families are formed in various ways, both inside and outside the child welfare system. Examples of paths to kinship caregiving arrangements include:

Inside

- ✓ As a result of a child protective services investigation, the child welfare agency may take legal custody of the child and ask the kin to care for the child within the child welfare system.



Inside/Licensed = the child welfare agency has legal custody of the child, and the kin is a licensed foster parent.



Inside/Not Licensed = the child welfare agency has legal custody of the child, but the kin is not licensed.

Outside



- ✓ The parents may ask the kin to care for the child.
- ✓ The kin may ask the courts to award them legal custody/guardianship of the child, either with or without parental consent.
- ✓ As a result of a child protective services investigation, the child welfare agency may become involved and ask kin to care for the child outside the child welfare system. This is often referred to as “kinship diversion.”



There are many factors to consider when making these complex decisions, including the perspectives, rights, and responsibilities of all involved—kin, parents, children, child welfare agencies, and courts.

Considerations by Type of Kinship Placement

Help with decision making about caregiving options



INSIDE/LICENSED

- ▶ Caseworkers must provide caregiver, youth, and family help in the decision-making process, which should include written materials.
- ▶ Family Group Decision Making may be available.
- ▶ Kinship navigators may be available and able to assist.



INSIDE/ NOT LICENSED

- ▶ Caseworkers may provide caregiver, youth, and family help in decision-making process, which may include written materials.
- ▶ Family Group Decision Making may be available.
- ▶ Kinship navigators may be available and able to assist.



OUTSIDE

- ▶ Kinship navigators may be available and able to assist.

Legal assistance



INSIDE/LICENSED

- ▶ Child and parents are typically provided attorneys.
- ▶ Kin caregivers typically do not get an attorney, unless pursuing kinship guardianship or adoption.



INSIDE/ NOT LICENSED

- ▶ Child and parents are typically provided attorneys.
- ▶ Kin caregivers typically do not get an attorney, unless pursuing kinship guardianship or adoption.



OUTSIDE

- ▶ Kin caregivers may hire a private attorney whom they must pay, unless they qualify for and have access to free legal aid based on their income.

Legal relationships and authority



INSIDE/LICENSED

- ▶ The state has legal custody of the child.



INSIDE/ NOT LICENSED

- ▶ The state has legal custody of the child.



OUTSIDE

- ▶ Legal custody is either with the parent or with the kin caregiver. For the kin caregiver to get a legal relationship, such as legal custody, guardianship, or adoption, they will need to file a petition with the court either with or without the assistance of an attorney.

Parental rights and responsibilities



INSIDE/LICENSED

- ▶ Parents retain certain rights, including the right to visit and maintain contact with the child.
- ▶ Parents are not typically allowed to live in the home with the kin caregiver and the child.
- ▶ Parents also retain responsibilities, including the obligation to financially support the child through child support payments.



INSIDE/ NOT LICENSED

- ▶ Parents retain certain rights, including the right to visit and maintain contact with the child.
- ▶ Parents are not typically allowed to live in the home with the kin caregiver and the child.
- ▶ Parents also retain responsibilities, including the obligation to financially support the child through child support payments.



OUTSIDE

- ▶ Parental rights and responsibilities will depend on the court-ordered legal relationship the kin caregiver obtains.
- ▶ If the kin caregiver has a court-ordered legal relationship, the order will include which rights the parents retain, if any, including ongoing visitation and contact with the child.
- ▶ In general, parents retain rights, including the right to visit and maintain contact with the child.
- ▶ Parents also retain responsibilities, including the obligation to financially support the child through child support payments.

Relationship with the birth parents



INSIDE/LICENSED

- ▶ The system will try to reunify the child with their parents as the first permanency option.
- ▶ The agency may help the kin caregiver manage boundaries with the parents.
- ▶ The kin caregiver may have to supervise parental visits with the child.



INSIDE/ NOT LICENSED

- ▶ The system will try to reunify the child with their parents as the first permanency option.
- ▶ The agency may help the kin caregiver manage boundaries with the parents.
- ▶ The kin caregiver may have to supervise parental visits with the child.



OUTSIDE

- ▶ The kin caregiver and their family manage the relationship with the birth parents.
- ▶ Unless the kin caregiver obtains a legal relationship with the child and has a court order restricting or prescribing visits with the parents, determining those visits and contact with the child is up to the kin caregiver and their family.

Children's health care consent authority and insurance



INSIDE/LICENSED

- ▶ The agency has legal authority for obtaining health care for the child.
- ▶ The agency provides the child with automatic Medicaid coverage.



INSIDE/ NOT LICENSED

- ▶ The agency has legal authority for obtaining health care for the child.
- ▶ The child may not receive automatic Medicaid coverage.



OUTSIDE

- ▶ Health care providers may challenge the kin caregiver's authority to consent to the child's health care unless the caregiver has a court-ordered legal relationship, a [health care consent affidavit](#), or a power of attorney or similar legal document signed by the parents.
- ▶ The kin caregiver may be able to obtain Medicaid or other public health insurance coverage for the child or include them on their private insurance coverage, depending on that company's policies.

Children's education



INSIDE/LICENSED

- ▶ The child welfare agency is required to help enroll the child in school, provide protections and supports to stay in the same school, or facilitate immediate enrollment in a new school with transfer of school records. The choice will depend on the child's best interest. The agency will also help access early intervention and special education services for the child.



INSIDE/ NOT LICENSED

- ▶ The child welfare agency is required to help enroll the child in school, provide protections and supports to stay in the same school, or facilitate immediate enrollment in a new school with transfer of school records. The choice will depend on the child's best interest. The agency will also help access early intervention and special education services for the child.



OUTSIDE

- ▶ School districts or other education providers may challenge the kin caregiver's authority to enroll the child in school unless they have a court-ordered legal relationship, an [educational consent affidavit](#), or a power of attorney or similar legal document signed by the parents.
- ▶ Federal law provides that kin caregivers should be able to access special education without a court-ordered legal relationship to the child.

Oversight from the child welfare agency and the courts



INSIDE/LICENSED

- ▶ The kin caregiver has routine caseworker visits to their home and the caseworker's office.
- ▶ Kin caregivers are expected to attend, and may be asked to testify at, frequent court dates.



INSIDE/ NOT LICENSED

- ▶ The kin caregiver has routine caseworker visits to their home and the caseworker's office.
- ▶ Kin caregivers are expected to attend, and may be asked to testify at, frequent court dates.



OUTSIDE

- ▶ There are no caseworker visits.
- ▶ There is no involvement of or oversight from the child welfare system.
- ▶ There is no judicial involvement unless pursuing a private legal relationship, such as legal custody, guardianship, or adoption. Once the court hearing ends, there will be no further court involvement without a petition.

Foster home licensing process



INSIDE/LICENSED

- ▶ Kin caregivers must meet state or tribal licensing standards, which include a background check and a home study.
- ▶ Waivers and variances for non-safety licensing standards should be available for relatives.
- ▶ In some jurisdictions, provisional/emergency licensing provisions may allow kin to be put on the path to full licensure while having the children immediately placed in their homes.



INSIDE/ NOT LICENSED

- ▶ Kin caregivers typically do not have to meet any licensing standards, although they may be required to go through an approval process with a modified home study and background check.



OUTSIDE

- ▶ Kin caregivers are not eligible to be licensed foster parents for the child unless the child welfare agency has removed the child from the parents' home, or the parent has voluntarily placed the child with the child welfare agency. Otherwise, kin caregivers are not eligible to be licensed foster parents for the child.

Monthly financial support



INSIDE/LICENSED

- ▶ Each foster child in the home will receive a monthly payment (referred to as a “foster care maintenance payment”) and automatic Medicaid coverage to meet their needs.
- ▶ This payment is typically bigger than TANF child-only assistance, especially if the kin caregiver is caring for more than one child.
- ▶ Monthly dollar amounts of both foster care maintenance payments and TANF child-only assistance vary greatly by the kin caregiver’s location.



INSIDE/ NOT LICENSED

- ▶ The child will not receive a monthly foster care maintenance payment and may not receive automatic Medicaid coverage.
- ▶ The child may receive a smaller monthly payment to help meet their needs or be referred for TANF child-only assistance.



OUTSIDE

- ▶ The child will not receive a monthly foster care maintenance payment and will not receive automatic Medicaid coverage.
- ▶ The child may receive TANF child-only assistance to help meet their needs. This assistance is typically less than a foster care maintenance payment and only increases by a smaller amount for each additional child.

Child welfare agency supports and services



INSIDE/LICENSED

- ▶ A caseworker may facilitate supports and services for the kin caregiver, the child, and the parents. Various services and supports are available including behavioral health or substance use treatment and/or assistance with managing the relationship with the parent.



INSIDE/ NOT LICENSED

- ▶ A caseworker may facilitate supports and services for the kin caregiver, the child, and the parents. Various services and supports are available including behavioral health or substance use treatment and/or assistance with managing the relationship with the parent.



OUTSIDE

- ▶ Prevention services may be available from the child welfare system for the kin caregiver, the child, and the parents (if the child is at imminent risk of entering or re-entering the child welfare system or at risk of adoption or guardianship disruption).

Community-based supports and services



INSIDE/LICENSED

- ▶ Supports from the local Area Agency on Aging, community-based organizations, and faith-based organizations may be available. See www.grandfactsheets.org



INSIDE/ NOT LICENSED

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OUTSIDE

- ▶ Supports from the local Area Agency on Aging, community-based organizations, and faith-based organizations may be available. See www.grandfactsheets.org

Chafee Independent Living Program



INSIDE/LICENSED

- ▶ Current and former foster youth are eligible for activities and programs under the John H. Chafee Foster Care Program for Successful Transition to Adulthood (Chafee) to help them transition from foster care to independent living. Supports under Chafee include help with education, employment, financial management, mentoring, preventive health activities, housing, and other services.
- ▶ Chafee eligibility:
 - ☐ youth in foster care between ages 14-21
 - ☐ youth who left foster care at age 16 for kinship guardianship or adoption, until they reach 21 (or up to age 23 in states that have extended foster care to age 21)
 - ☐ youth who aged out of foster care between ages 18-21 (or up to age 23 in states that have extended foster care to age 21)



INSIDE/ NOT LICENSED

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 - ☐ youth who aged out of foster care between ages 18-21 (or up to age 23 in states that have extended foster care to age 21)



OUTSIDE

- ▶ Youth who are not in foster care are not eligible for these services.

Chafee Education and Training Vouchers



INSIDE/LICENSED

- ▶ Current and former foster youth may be eligible under Chafee for an Education and Training Voucher (ETV), worth up to \$5,000 each year or the cost of attendance (whichever is less) to attend an institution of higher education.



INSIDE/ NOT LICENSED

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OUTSIDE

- ▶ Youth who are not in foster care are not eligible for Chafee Education and Training Vouchers.

Continued next page

Chafee Education and Training Vouchers (continued)



INSIDE/LICENSED

- Cost of attendance includes tuition, fees, books, supplies, and an allowance for transportation and childcare. Institutions of higher education include traditional higher education institutions (e.g., public or private nonprofit colleges and universities) and post-secondary institutions (e.g., technical training programs and post-secondary vocational schools).
- Youth are eligible for ETVs for as many as five years (up to age 26) and must be making satisfactory progress toward completing their program, regardless of whether they attend in consecutive years or if they go full- or part-time.



INSIDE/ NOT LICENSED

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Kinship Navigator Programs



INSIDE/LICENSED

- Kinship navigator programs should be available within the state or tribe but may not be available in the kin caregiver's local community. Many programs are in the development stage. To learn if the community has a program that can link the kin caregiver with services, consult www.grandfactsheets.org or email grandfamilies@gu.org.



INSIDE/ NOT LICENSED

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OUTSIDE

- Kinship navigator programs should be available within the state or tribe but may not be available in the kin caregiver's local community. Many programs are in the development stage and some are limited to those with child welfare involvement. To learn if the community has a program that can link the kin caregiver with services, consult www.grandfactsheets.org or email grandfamilies@gu.org.

Federal and state child tax credits



INSIDE/LICENSED

- Typically for children age 17 and younger, the kin caregiver can claim the child as a dependent if they have been caring for the child for more than half the tax year.
- A federal adoption tax credit allows those who have adopted children to claim an extra tax credit. If adopting from foster care, caregivers can claim the full deduction without showing expenses.
- A state adoption tax credit may be available.
- Unlike with adoption, there are no federal or state tax credits for those who obtain guardianship or legal custody of children.



INSIDE/ NOT LICENSED

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OUTSIDE

- Typically for children age 17 and younger, kin caregivers can claim the child as a dependent if they have been caring for the child for more than half the tax year.
- For the federal adoption tax credit, kin caregivers must show legal and other adoption expenses and can only deduct actual expenses up to the full deduction amount.
- A state adoption tax credit may be available.
- Unlike with adoption, there are no federal or state tax credits for those who obtain guardianship or legal custody of children.

Long-term permanency options: possible related financial assistance



INSIDE/LICENSED

- **Guardianship/Legal Custody:** Guardianship assistance may be available, along with Medicaid, attorney/court fees, and possible services (for list of jurisdictions, see: www.grandfamilies.org/Topics/Subsidized-Guardianship/Subsidized-Guardianship-Summary-Analysis).
- **Adoption:** Adoption assistance may be available, along with Medicaid and possible services.



INSIDE/ NOT LICENSED

- **Guardianship/Legal Custody:** Limited guardianship assistance may be available, along with Medicaid, attorney/court fees, and possible services.
- **Adoption:** Adoption assistance may be available, along with Medicaid and possible services.



OUTSIDE

- **Guardianship and Legal Custody:** TANF child-only assistance may be available.
- **Private Adoption:** Separate ongoing financial support or services are typically not provided.

Long-term permanency options: legal support and post-permanency services



INSIDE/LICENSED

- ▶ Legal expenses and nonrecurring expenses reimbursement up to \$2,000 for adoption or guardianship are available.
- ▶ Post-permanency supports, such as family counseling and respite care, may be available.



INSIDE/ NOT LICENSED

- ▶ Legal expenses and nonrecurring expenses reimbursement up to \$2,000 for adoption and may be available for guardianship.
- ▶ Post-permanency supports, such as family counseling and respite care, may be available.



OUTSIDE

- ▶ Typically, no help with legal expenses or nonrecurring expenses.
- ▶ Post-permanency supports, such as family counseling and respite care, may be available.

Tips for Kin Caregivers

- ▶ **Refer to your state [GrandFacts fact sheet](#) and connect with community-based resources and your kinship navigator program if it exists.** Among the professionals you consult with about your options, ensure you talk with an attorney or other legal professional.
- ▶ **Know that in many instances you will not be able to choose whether you raise the kin child inside or outside the child welfare system.** The child must generally be removed from the parents by child protective services (CPS) for the child to go “inside” the system.
- ▶ **Ask your local child welfare agency and/or trusted community-based service providers for help accessing preventive services.** Even if the child is not removed by CPS, you, the child’s parents, and the child may be able to get “preventive” services through the child welfare agency.
- ▶ **Develop good working relationships with any social workers or other service providers who help you.** Communicate what you and the child need and respond to requests for more information promptly. If you do not have a good working relationship, ask to change the staff who helps you.
- ▶ **Keep clear records showing your family or kin relationship to the child,** including birth certificates, divorce decrees, other legal documents, and religious records, such as an official church document that shows you as the child’s godparent.
- ▶ **Keep records that show you are raising the child,** including:
 - ☐ School documents with your name as the point of contact
 - ☐ Health care records that mention you as the primary caregiver
 - ☐ Any court orders or legal documents, such as a power of attorney, showing that you have legal authority over the children
 - ☐ Any public benefits you receive for the child
 - ☐ Your tax returns or other tax documents showing you are claiming the child as a dependent

You do not need all these records; they are just examples. Try to collect and save all documents you can showing you are the child’s primary caregiver.

- ▶ **Safeguard the child’s social security card and number for them.**



Tips for Professionals Working with Kin

- ▶ **Help kin make informed decisions about how best to care for the child and what is best for the family by providing guidance and support.** Use written materials and charts to help them understand their role and the available options. If possible, refer kin to local kinship navigator programs or knowledgeable attorneys for assistance.
- ▶ **Remember kin often feel powerless,** as they do not have complete autonomy to make placement and permanency decisions, especially if they are caring for a child in the custody of the child welfare agency. Acknowledge these feelings and support them while they make these important decisions about how to best care for the child.
- ▶ **When possible, involve all parties in decision making,** including the parents, child, and kin caregivers. Use tools to engage the family, such as [genograms, eco maps, and family circles](#). Conduct facilitated Team Decision Making or Family Group Decision Making Meetings.
- ▶ **When working with families, focus on their strengths and get full “buy-in” from the parents** to encourage them to actively participate in planning for their child’s future.
- ▶ **Use the principle of full disclosure,** which encourages professionals to always be truthful and upfront with the family about the plan for the child.
- ▶ **Explain all terms,** using appropriate language without speaking down to the family.
- ▶ **Always respect the parent and kin’s opinion about their own family,** as well as their culture and diversity. Show respect and empathy for all family members by taking the time to learn and understand the family’s past experiences, current situation, and concerns.
- ▶ **Check your own feelings, biases, and prejudices** toward the family as well as potential punitive attitudes towards the parents. Remain nonjudgmental and genuine in your approach to families. Above all, acknowledge and respect the child’s attachment to their parents and their family.
- ▶ **Remember you may encounter reluctance by some kin to become involved** due to complex family dynamics and mistrust of systems but recognize the value of kin placements and the supportive role kin can play in assisting families in need.
- ▶ **Understand that kin caregivers often have unique needs** that differ from traditional foster parents. Offer tailored support to kin who step up to care for children, including concrete items such as cribs, baby formula, and clothing.
- ▶ **Explain the kinship foster home approval process and public benefits.** Develop strong relationships and referral processes with community organizations that can provide tailored, culturally appropriate, and relevant services to children, parents, kin caregivers, and other kin interested in supporting the child.
- ▶ **Guide and support kin through the approval process to become foster parents.**
- ▶ **Cultivate kinship champions** or specialized staff who are sensitive to the needs of kin caregivers and who help them navigate the various complex systems.



Chafee Independent Living Program

The John H. Chafee Foster Care Program for Successful Transition to Adulthood (“Chafee”) aids current and former foster youth in achieving self-sufficiency. States and tribes can use Chafee grants for financial, housing, counseling, employment, education, and other appropriate supports, including secure connections with caring adults. The program serves children ages 14 to 21 (or 23 in states that have extended foster care to age 21) who are likely to age out of foster care, who have left foster care to kinship guardianship or adoption, or who have aged out of foster care.

Chafee Education and Training Vouchers

The Education and Training Voucher (ETV) program provides funding to pursue post-secondary education or training for youth eligible for the Chafee program. The program provides vouchers of up to \$5,000 per year, which can be used for cost of attendance, including tuition, fees, books, room and board, supplies, and other items, at higher education institutions. States and tribes can provide vouchers for up to five years or until a child reaches age 26.

Foster care maintenance payments

Monthly payments to meet the needs of children in the licensed care of relative or nonrelative foster parents vary based on jurisdiction. These payments are typically twice as high as TANF child-only grants for the first child and are the same amount per child, unlike TANF child-only. The caregiver must assign child support collection to the state or get a good cause exemption for not doing so.

Licensing standards

Each jurisdiction has its own requirements for kin to become licensed foster parents for their related child. These standards include background checks, training requirements, home safety standards, and other safety-related standards. Some of these standards may be waived; see the definition of non-safety licensing standards.

Long-term permanency options

Legal options vary based on jurisdiction and typically include legal custody, guardianship, and adoption. These options provide a permanent home for children in the care of relatives whether exiting foster care or not. The level of permanency varies, as adoption is typically the only option that comes with termination of parental rights and responsibilities.



Non-safety licensing standards

Which standards are considered non-safety are defined by each jurisdiction, and each jurisdiction has the federal authority to waive those licensing standards for relatives on a case-by-case basis. The only standards that cannot be waived under federal law are known as Adam Walsh barrier crimes, which prohibit a foster parent applicant who has been convicted of a violent felony or a drug-related felony within the last five years from being licensed as a foster parent.

Post-permanency supports

Services and assistance, such as respite care, childcare, and mental health services, depending on the jurisdiction may be available to the family after the caregiver adopts or obtains guardianship or legal custody of their kin child.

TANF child-only grants

Monthly payments to help meet the needs of children in the care of relatives based on the income of each child vary based on jurisdiction. Caregiver income is not a factor in most states, and these grants are typically not time-limited like TANF family grants. Unlike foster care maintenance payments, the support only rises incrementally for each additional kin child in the home. The caregiver must assign child support collection to the state or get a good cause exemption for not doing so.

Resources

- ✓ [Brief](#) and related [chart](#) to compare adoption and guardianship for children in kinship foster care, so that these children can exit foster care into permanent families (2018 & 2021).
- ✓ [GrandFacts fact sheets](#) for each state and the District of Columbia provide caregivers resource information, including available kinship navigator programs and legal providers. The fact sheets are available in English and Spanish (2021).
- ✓ [State charts](#) for New Mexico, New York, Pennsylvania, Virginia, and Washington, based on the national chart, comparing adoption and guardianship for children in kinship foster care (2021).



- ✓ [Grandfamilies.org](#) serves as a national resource in support of grandfamilies within and outside the child welfare system.

Features:

- ▶ easy-to-use searchable database of laws and legislation impacting kinship families
- ▶ analysis and comparison of laws on many kinship topics
- ▶ resources and publications for professionals who work with grandfamilies
- ▶ timely resources tied to new developments in the field
- ▶ technical assistance and training opportunities



This resource was developed in partnership with the ABA Center on Children and the Law, Children's Defense Fund, and Generations United, with support from Casey Family Programs. Visit www.grandfamilies.org for more resources. Images by Pixabay and freeimages.com.

Kinship Promising Practices

ABA Center on Children and the Law | Generations United

Federal law, policy, and practice is shifting toward a kin-first culture, a child welfare system that consistently promotes immediate kinship placements, helps children in foster care maintain connections with kin, and tailors services and supports for kinship families. To help jurisdictions successfully implement a kin-first culture shift, national kinship technical assistance partners have gathered promising kinship practices from across the country. The following kinship practice examples, organized by seven main topics, can help jurisdictions change policy and practice to promote kin placement and permanency.



Identification, Notification, and Engagement of Kin

1

Identify and engage maternal and paternal kin for placement and support. Federal law requires child welfare agencies to send written notice to any identified relatives within 30 days of a child coming into care and custody of the agency. Kin should be provided resources and tools to engage them in support of the family.

Promising Practice:

Dedicated kinship staff trained to locate, engage, support, and assist kin

Jurisdictions find it beneficial to assign dedicated kinship staff to ensure families and kin caregivers fully understand their options to care for children and support kin caregivers as they work through system requirements and processes.

State Examples:

- **New Mexico** has a Kinship Unit dedicated to supporting kinship placements. Staff work to support family search and engagement efforts, support kin throughout the process of placement, which includes the licensing process, and help kin explore and achieve the most appropriate permanency option. This unit completes genograms, works with tribal and rural communities, trains community providers, and engages nonplacement kin resources to create a support network for the family.
- **New York** requires each county to have a “Kin Champion” who, after training, acts as an onsite advocate for a kin-first culture, provides kinship expertise for colleagues, and supports kin caregivers.
- Other jurisdictions, such as **Florida** and **Connecticut**, also have dedicated staff who assist kin caregivers.

Promising Practice:

Family-finding efforts

Efforts to identify and notify relatives are a federal requirement. However, some jurisdictions have gone beyond the federal requirements by implementing family finding throughout the life of the case or using extra efforts to identify relatives.

State Examples:

- **Pennsylvania** state law requires family finding when a child is accepted for services and then annually throughout the child's involvement in foster care. The state law requires courts, at every stage of a case, to inquire and make a finding on the family-finding efforts made by the agency.
- **Missouri** increased family finding through Extreme Recruitment and 30 Days to Family. Extreme Recruitment is a 12–20-week intensive intervention to identify kin for the hardest to place children by using staff and a private investigator to mine records of the children to identify and locate relatives and kin to be explored for potential placement. Introducing private investigators to the program increased contact with relatives from 23% to 80%. The process involves weekly meetings of the youth's team and follow-up until the youth achieves permanency. 30 Days to Family in Missouri builds off the success of Extreme Recruitment and focuses on entry into foster care rather than focusing on youth once they are deemed hard to place while in care. This program places equal focus on finding maternal and paternal relatives. The goal is primary placement with kin in addition to locating two-to-three backup kinship placements.
- **Ohio** uses [Kinnect to Family](#), a specialized intense family search and engagement program that is similar to Missouri's 30 Days to Family program. Kinnect to Family expands on 30 Days to Family by allowing all foster youth, not just those entering care, to be eligible. The program works with families before children are removed so they avoid foster care entry when possible.

Promising Practice:

Meaningful kin engagement

Federal guidance, [ACYF-CB-IM-19-03](#), emphasizes the importance of meaningfully engaging families and youth, including kin caregivers, by giving them the opportunity to be heard and considering their input in critical decisions that affect their lives. Their ability to participate in all aspects of child welfare decision making can increase engagement and empower families and youth.

State Examples:

- **Hawaii** uses Ohana Conferencing to bring together extended family and hanai family (defined as family formed when children are taken informally under custom and usage into another's home, but not formally adopted), agency staff, service providers, and the support system of the children. This strength-based, solution-focused group conferencing honors the voice of the family and youth in care by creating opportunities for the family to work with the agency to make the best decisions for the safety of the children. The conferencing results in a plan for strengthening the family and exploring possible roles for family members to support the child.
- **Virginia** uses Family Partnership Meetings to explore and discuss the family's needs, strengths, and challenges. These meetings often begin before a child is removed from their parents.

Promising Practice:

Expanded definition of “relative”

Research shows that placement with kin has several benefits, such as increased permanency, reduced placement moves, improved behavioral health, and increased likelihood of remaining with siblings and staying connected to communities. Remember when thinking about a kin-first culture that both fictive kin and relatives are included in efforts. The definition a jurisdiction uses for “relative” may impact eligibility for services and supports. The definition varies by jurisdiction and sometimes even within the same jurisdiction, based on individual laws and policies. Definitions of “relative” sometimes include only blood or adoptive relatives and may leave out fictive kin, such as family friends, coaches, teachers, or other adults with whom the child has a positive relationship. Approximately 24 jurisdictions have expanded the definition of “relative” to include fictive kin in some or all their child welfare laws and policies. Jurisdictions should strive to include fictive kin in the definition of relative in all relevant laws and policies.

State Example:

- **Virginia** has included fictive kin in their statutory definition of “relative” for purposes of child welfare policies, including licensing requirements. To make notification of “relatives” manageable, policies only require a certain number of fictive kin to be notified. This flexibility is allowed by federal law and allows jurisdictions to be more supportive of all kinship families.



Placement with Kin

2

When children can no longer remain with their parents, a kin-first culture prioritizes placement with kin over other placement options. There are many options for placement with kin. It is important to ensure staff, stakeholders, and kin caregivers understand these options.

Placement options for kin caregivers vary by jurisdiction. In several states, kin caregivers who step up after the child welfare agency has removed the child from their parents have the option to become licensed foster caregivers. There are benefits to all options, including varying financial assistance, eligibility for public assistance such as Medicaid, access to services and supports, and permanency options.

Promising Practice:

Kinship firewall

Several jurisdictions use kinship firewalls to ensure placement with kin whenever possible by treating non-kinship placements as exceptions that require approval by agency leadership. Such kinship firewall policies make placement with kin the presumptive placement option.

State Examples:

- Four jurisdictions, **Tennessee, New York, Connecticut, and Oklahoma**, currently implement some version of a kinship firewall.

- **New York's [firewall policy](#)** requires a high-level review of efforts to achieve a kinship placement before any non-kinship placement is made. This high-level review is required at the child's initial removal and any time there is a placement change into a non-kinship placement.
- **Washington [House Bill 1747](#)**, signed into law in March 2022, was proposed to prohibit the child welfare agency from moving children out of a kin placement unless a court finds a change in circumstances requires a placement change.

Promising Practice:

Written materials to train staff and inform kin of options

Creating written materials about kinship placement options and their various benefits and supports can assist in training staff and can be used to inform kin of their options.

State Examples:

- **Georgia** supplemented their written materials with the development of a kinship website and by creating a short video providing a high-level overview of the kinship foster care approval and payment process, as well as a [video on kinship care](#) generally.
- Other written training materials developed by states include:
 - **Colorado:** [Kinship Care in Colorado Options and Resources Brochure](#);
 - **Texas:** [Kinship Manual](#); and
 - **New York:** [ABA Kin Options Full Options Chart](#).

Promising Practice:

Using data to drive practice and address inequities

Jurisdictions can disaggregate and analyze kin-specific data to drive practice changes and measure improvements.

State Examples:

- **Virginia, Pennsylvania, and New York** use data to encourage kin-first cultures and increase kin placements by informing counties of their kinship numbers based on age, race, and gender, as compared to other counties.
- **Connecticut** uses [disaggregated data](#) by race and placement to identify social determinants impacting kinship placement and offer targeted interventions.
- **New York** posted the [NY Kinship Report](#) online to share data on a variety of kinship variables for the state and by county. Data can often inform and catalyze practice change. It is important to monitor ongoing efforts and achievements in creating a kin-first culture.
- **Pennsylvania** has seen an increase in kinship placements, part of which can be attributed to efforts by the state to inform the counties on their progress to increase the use of kin based on age, race, and gender, as compared to other counties in the state.



Financial assistance for kinship families varies depending on the jurisdiction and placement type.

Kin caregivers may receive financial assistance depending on a variety of factors, including whether the child is in the legal custody of the child welfare system, if the caregiver is a licensed foster parent, the type of permanency outcome achieved, and where the family resides. Generally, kin caregivers caring for children outside of the child welfare system may qualify for public assistance such as Temporary Assistance for Needy Families (TANF). Kin caregivers caring for children inside the child welfare system and licensed as a foster parent should be receiving the same foster care maintenance payments and other financial assistance as non-kin foster parents. If the child has achieved permanency with kin and has exited the child welfare system under adoption assistance or the guardianship assistance program (GAP), the child may qualify for an ongoing monthly subsidy. If the child welfare system is involved and the child is eligible, significant financial assistance derives from federal Title IV-E funding, as well as the required state or local funds.

Promising Practice:

Child-only financial assistance

Child-only TANF is available around the country for children cared for by kin outside of the child welfare system. The grant amount, application process, and whether the caregiver's income is considered varies by jurisdiction, but the monthly amount is almost always significantly less than foster care maintenance payments.

State Examples:

- In **Minnesota**, kinship caregivers can access child-only assistance through the Minnesota Family Investment Program, which combines cash assistance with SNAP benefits through a waiver from the U.S. Department of Agriculture.

Promising Practice:

Additional subsidy for kin

Some states provide an additional subsidy for kin to keep children out of the child welfare system.

State Examples:

- **Illinois** has an [Extended Family Support Program \(EFSP\)](#) that aims to support and stabilize caregivers who have cared for relative children for more than 14 days and have kept the family out of the child welfare system. The EFSP provides support for obtaining guardianship – including assistance with caregiver attorney fees, enrolling children in school, and obtaining the TANF child-only grant, subsidized day care and other benefits. The EFSP also provides cash assistance to support stabilization when necessary.
- **Tennessee** recently passed [Senate Bill 2398](#), effective January 1, 2023, which will provide a monthly stipend to reduce the financial strain on designated relative caregivers who have final custody orders for children in their care. The Tennessee Department of Children's Services will be required to pay the caregivers an amount equal to 50% of the full nonrelative foster care board rate if certain conditions are met.

- **Virginia** has the Relative Maintenance Support Payment Program, which provides an additional \$200 per child per month in TANF funding for kin caregivers who have been certified by the child welfare agency as having kept the child out of foster care.
- The [Kinship Care Subsidy Program](#) in **New Jersey** provides eligible kinship legal guardians \$250 a month, multiplied by the number of eligible children in the home, minus all combined countable income of the eligible children, such as any child support payments.
- In **Louisiana**, specifically listed qualified relative caregivers with legal or provisional custody (or who obtain it within one year of certification) and who have an annual income of less than 150% of the federal poverty threshold may receive \$450 per month for each eligible child as part of the [Kinship Care Subsidy Program](#).

Promising Practice:

Financial assistance for licensed kin foster parents

In most jurisdictions, kin who choose to become licensed foster parents will receive the same financial assistance as non-kin foster parents. Some states have specific programs for kin caregivers caring for children in the legal custody of the child welfare system, who are not fully licensed.

State Examples:

- **California's** [Approved Relative Caregiver \(ARC\) Funding Option Program](#) allows either approved relative caregivers caring for a nonfederally eligible foster child, or relatives who cannot get licensed but care for children under a court-ordered placement to receive per-child, per-month payments, if their county opts into the program. The funding is equal to the amount licensed foster parents receive. If a county has not opted into ARC, kin caregivers receive CalWORKs, California's TANF program, which provides less financial assistance to the families.
- **Arizona, Maine, Nebraska, Michigan, and Washington** equitably support all kin caring for children in foster care, regardless of whether they are licensed or not.
- **Arkansas, Illinois, Iowa, and Ohio** also provide support for nonlicensed kin at a lesser rate.



Emergency Licensing Procedures

4

Emergency licensing, also known as provisional licensing, is a way for child welfare agencies to immediately and safely place children with kin, while the kin pursue full licensure.

Jurisdictions often use emergency licensing to allow a child in their legal custody to be immediately placed with kin. The full licensing process for a home can be lengthy and may encounter delays. Emergency licensure allows the child to be placed immediately with kin, as opposed to waiting until full licensure, resulting in improved placement stability and supporting the notion that the child's first and only placement should be with kin.

If using emergency licensure, look at your jurisdiction's definitions of "relative" and "kin" to ensure that non-blood related significant persons are also eligible to provide this type of placement. Agencies tend to be risk-adverse, which can deter placement with kin and negate the benefits and importance of immediate kin placements. To effect a culture shift and increase the use of immediate kinship placements, jurisdictions should explore ways to license more kin rather than focusing on reasons to deny them licensing.

In most jurisdictions that use this process, children are immediately placed with kin after a safety assessment is completed. The kin then must complete full licensure within a specific time period (60, 90, or 120 days). Some states do allow for a limited extension of this time period.

Promising Practice:

Expedited background/fingerprint checks

While traditional background checks and finger printing may take several days or longer, some jurisdictions are looking for ways to speed up this process.

State Examples:

- **Connecticut's** Criminal History Request System uses a global security company, in close partnerships with local law enforcement, to provide background history results within hours, as opposed to days.

Promising Practice:

Private agency support

Kin caregivers may require specialized attention and kin-specific supports in ways that traditional foster family homes do not. To help provide kin-specific services, such as emergency licensing or expediated licensure, some jurisdictions rely on private agencies. Private agencies may have an increased capacity to work closely with kin to help them achieve full licensing within the required time period.

State Examples:

- In **Louisiana**, the public agency conducts initial safety and background checks for kin and then seeks the assistance of private agencies to help them complete the requirements for full licensure.
- In **Pennsylvania**, A Second Chance is a nonprofit organization that partners with county child welfare agencies to provide family finding, kinship emergency services at initial placement, kinship family assessments, training for kin caregivers to meet licensing requirements, and permanency planning.

Promising Practice:

Financial assistance during emergency license

Traditionally, only kin who are fully licensed receive the maximum financial assistance. However, a benefit of emergency licensure can be to provide financial assistance while kin are pursuing full licensure.

State Examples:

- **Tennessee** uses state dollars to pay a care rate per child/per day. For states where this is not an option, kin must be made aware and encouraged to apply for public benefits – including TANF child-only grants and Medicaid. These benefits will help support the family while the kinship caregiver is pursuing full licensure.
- In **Oklahoma**, if full licensure is not achieved within 60 days of placement and the delay is due to the agency, policy dictates that the state immediately support the kinship caregiver with the full foster care maintenance payment rate.



When kin become fully licensed, they are eligible for financial assistance and support to be long-term placement resources. Additionally, full licensure is required for federal guardianship assistance (also known as GAP) to be a permanency option.

Jurisdictions have varying licensing requirements, such as background checks, health checks, home safety assessments, references, and training. These licensing requirements can be confusing, take a long time, and are often geared toward traditional foster family homes. To increase licensing of kin, several jurisdictions have implemented kin-specific supports or paths toward licensure.

Promising Practice:

Dedicated kin staff or kinship champions

To increase kinship placements, at least eight jurisdictions (Washington, Florida, North Carolina, Georgia, Hawaii, Connecticut, Virginia, and New York) have seen success by creating kin-specific units or specialized staff to assist in finding kin placements, kinship licensing, and kinship permanency. These staff are trained on kin-specific processes and practices so they can promote a kin-first culture and be a resource for kin caregivers.

State Examples:

- **Washington** has a “Kinship Caregiver Engagement Unit (KCEU),” which is almost a concierge kinship licensing unit that provides one-on-one assistance to kin caregivers through the licensing process. The unit contacts kin caregivers 48 hours after placement to discuss needs, connect to resources, and help early in the process before the child’s case is transferred to a foster care worker. The KCEU is in its early days, with a set of accompanying administrative code changes and an electronic portal rolling out in fall 2022.
- **Florida** has a specialized team that within 48 hours of placement walks families through the licensure process and the various benefits and requirements of the state’s Level 1 or Level 2 licensing options.
- **North Carolina** is piloting a program to license kin as therapeutic foster parents in three counties through partnerships with private agencies. For more information on this pilot program, please see this [handout](#).
- In **Connecticut**, the foster care division is split into traditional foster care workers and kinship licensing workers. The kinship licensing workers assist kin caregivers with licensing, and training for licensing, while fostering a kin-first culture.

Even in jurisdictions with kin-specific staff or units, it is important that all staff understand the importance of kin, the nuances of kinship placement and permanency options, and the various public benefits, supports, and financial differences. Staff appreciate short lists, easily accessible packets of information, and access to someone with in-depth kinship knowledge as a resource.

- **Connecticut** has found it is worth taking extra time to train staff in small groups to increase understanding and allow for questions. The state has also moved its training online and has seen an increase in staff participation and capacity to offer more trainings.

Promising Practice:

Waivers and exceptions for kin

Federal child welfare law allows jurisdictions to waive or create variances or exceptions for non-safety licensing requirements for relatives, to allow for increased licensed kinship placements. Several jurisdictions (Nevada, Georgia, Texas, Florida, Oklahoma, Louisiana, Arkansas, and Iowa) routinely waive certain non-safety criteria for kin that would not normally be waived for non-kin foster families.

Jurisdictions have a lot of flexibility to define “safety” and “non-safety” and can waive non-safety licensing standards as they see fit, provided they do not waive any of the specific requirements of the federal Adam Walsh Child Protection and Safety Act. The types of non-safety criteria being waived include sleeping arrangements, such as bunk beds or number of rooms; income requirements; training timeframes; and crimes not included in the Adam Walsh Act. Often jurisdictions have specific procedures for these waivers that either require county agency or state agency approval.

State Examples:

- **California** passed CA Bill SB354, effective in 2022, that broadens the list of criminal convictions that qualify for exemptions for licensing kinship foster homes if the court finds that placement does not pose a risk to the health and safety of the child, allows case-by-case waivers of financial requirements for kin caregivers, and allows for child-specific approval for kin caregivers.
- **New Jersey** allows local area managers to give a verbal waiver for emergency placement where there is a history of criminal conviction for crimes not included under the Adam Walsh Act. Following the verbal waiver there is a follow-up conference with the director of the child welfare agency within one business day to continue the presumptive eligibility.

Promising Practice:

Child-specific or two-tier foster home licensing standards

Child-specific licensing and two-tier licensing standards are approaches child welfare agencies use to support expedited placement of children with kin and avoid unnecessary placements with non-kin while kinship caregivers become licensed.

Kinship caregivers often become foster parents due to the removal of a specific related child, rather than as a preplanned choice to pursue the role of foster parent. Therefore, unlike typical foster families, kin caregivers are usually not licensed before being called on to care for a child(ren). Child-specific licensing allows a kinship placement to become licensed only to care for a specific child with whom they have a kinship relationship, but not any other child.

State Examples:

- **Utah** administrative code R501-12-15 allows a kinship caregiver applicant to be licensed for the placement of a specific foster child or sibling group, recognizing the importance of preserving family and cultural connections for children in foster care. The regulation also allows for

emergency placement with a probationary license and waiver of non-health or safety related licensing requirements.

- **Washington** recently passed [SB 5151](#), which will allow relatives or suitable persons to be licensed to care for a specific child/sibling group by meeting minimum qualifications set out in child-specific licensing standards that are under development.

Two-tiered licensing standards have been developed by some states to distinguish between requirements for kinship foster home applicants and non-kinship applicants. The difference between the two tiers is often the availability of a waiver of non-safety related requirements.

- **Florida's** state regulation Chapter 65C-45 provides for a two-level foster care licensing structure. It provides child-specific licensing for kinship caregivers under level I licensure and allows for waivers of non-safety related requirements set forth for level II non-child specific licensure. However, Florida's level I licensure provides a lower level of financial and other supports to caregivers.
- In **New Jersey**, under administrative code N.J.A.C. 10:122C, all foster parents must meet level I licensure requirements, however level II requirements can be waived on a case-by-case basis for a specific child(ren) in a kinship placement. Additionally, a child may be placed with a kinship caregiver prior to a license being issued under certain circumstances.

Promising Practice:

Kin-specific training requirements

For various reasons kin caregivers experience the foster care system differently than traditional foster parents. Acknowledging these differences, several jurisdictions provide kinship caregivers with kinship specific training, which addresses things like family dynamics and can be tailored specifically to each family's needs. Often these kin-specific trainings are more accessible and shorter.

State Examples:

- **Arkansas** created a four-day kin-specific training modeled after the non-kinship licensing training that requires nine weeks to complete. This training program, called "Arkansas Kinship Pride Connect," is customized to include kin-specific needs and is given virtually or in-person.
- **Hawaii** created their kin training after soliciting feedback from caregivers through focus groups. The result is a separate kin training with reduced required hours, trauma-informed content, and online availability.
- In **Florida**, kin complete a two-hour basic kinship training followed by training that is customized to the family's needs.



When kin are caring for children involved in the child welfare system for whom reunification with parents is no longer possible or in their best interests, there are different options for permanency with kin.

Promising Practice:

Written materials and trainings about permanency options

Written materials specifically about permanency options for kin can assist with informed decision making and ensure families are choosing the best option for their individual circumstances.

State Examples:

- **North Carolina** developed a [Foster Care and Beyond Kinship Care flyer](#) for kin caregivers.
- **New York** requires kin caregivers to receive the state's [Know Your Permanency Options: The Kinship Guardianship Assistance Program Brochure](#).
- **Maine's** new publication, [A Guide to Kinship Care & Minor Guardianship in Maine](#), provides an overview of the options and concrete steps to pursue guardianship.
- **New Mexico's** child welfare agency partnered with Generations United and the American Bar Association Center on Children and the Law to create an [adoption and guardianship comparison chart](#). Similar charts have been and can be created for other jurisdictions, thanks to support from the Dave Thomas Foundation for Adoption (contact Generations United at gu@gu.org for more information).
- **Virginia** created a brochure, [Kinship Care: Exploring options for relatives and close family friends of children in foster care](#).
- **New Mexico** and **Vermont** offer annual trainings for kin caregivers that include resources for caregivers and information about GAP as a permanency option.
- **Florida** uses a peer-to-peer approach to help families better understand the tangible benefits and long-term supports of guardianship assistance.

Promising Practice:

Increase use of kinship guardianship assistance

Kinship Guardianship Assistance Program (GAP), also known as subsidized guardianship, is a permanency option created in federal law to provide permanency with kin without requiring termination of parental rights and adoption. Most jurisdictions offer this type of guardianship as an option for kin caregivers if reunification and adoption are not in the best interests of the child. Federal law sets out the minimum eligibility requirements for GAP; however, jurisdictions are allowed to create additional eligibility criteria beyond the federal requirements. To increase use of GAP, jurisdictions should remove any extra eligibility criteria beyond federal requirements.

State Examples:

- **New Mexico** recently removed their age limit for children.
- **Alabama** eliminated state law requiring written parental consent for guardianship.

- **Washington** is prioritizing guardianship assistance through the passage of [House Bill 1747](#), which requires their Department of Children, Youth and Families to prioritize guardianships over termination of parents' rights when children are placed with kin.
- To increase eligibility, at least **27 jurisdictions** have state funded guardianship assistance for children who are not IV-E eligible (AK, AR, CA, CO, CT, DC, HI, ID, IL, LA, MA, MD, ME, MI, MO, MT, NE, NY, NJ, OK, PA, RI, SD, TN, TX, VT, WI). For more information about best practices for Kinship Guardianship Assistance, see [Guardianship Assistance Program \(GAP\): Barriers and Key Considerations](#).

Promising Practice:

Post-permanency supports

Post-permanency services and supports should be provided to assist kin caregivers after they adopt or enter into guardianship or custody to prevent disruption and maintain these permanent homes. When children exit care to an adoptive home or guardianship the safety net and supports provided by the child welfare system often abruptly end. If properly supported as soon as an issue arises, stability can be maintained for the child and the family.

State Examples:

- **Michigan** has tied post-guardianship supports to their post-adoption support program, allowing kin caregivers who receive guardianship assistance to access additional supports after they have been granted guardianship.
- **Pennsylvania** took a similar route and offers post-adoption and post-guardianship support, which includes case advocacy, respite care, and support groups.
- **Maine** provides post-permanency supports to kin caregivers through [Adoptive & Foster Families of Maine, Inc. & the Kinship Program](#).
- **Ohio's** Department of Jobs and Family Services oversees [OhioKAN](#), a statewide kinship and adoption navigator program organized into regional offices offering support specific to a family's location and individual circumstances, including post-permanency. OhioKAN staff maintain a comprehensive information hub of all resources and programs available statewide. Staff use the information hub to provide one-on-one support to help families develop personalized resource plans specific to their needs and provide follow-up to ensure they receive their eligible supports.



General Kin Support

7

Regardless of placement or permanency type, kin caregivers face unique challenges and may need different support than traditional foster families.

Promising Practice:

Support for kin caring for children with increased needs

Several jurisdictions support kin caregivers who are caring for children with increased needs by developing targeted tools and resources.

State Examples:

- Dr. Joseph Crumbley has created a [video series](#) on specific challenges kin caregivers face. To determine kinship families' unique needs, consider using a needs assessment tool.

- **Virginia** uses such a tool to assess which families need additional financial support for children with increased needs.
- **Colorado** uses this [needs assessment tool](#) to determine supports for kin families.

Promising Practice:

Kinship navigator programs

Most jurisdictions have kinship navigator programs, which help caregivers navigate the many systems that impact them, help connect them to services, and support their access to public benefits. Ideally, these programs should serve all kin caregivers, regardless of child welfare system involvement. Jurisdictions may choose to serve only kin caregivers outside the child welfare system, only kin caregivers within that system, or both.

State Examples:

- In **Georgia** all kin who care for children involved in the child welfare system are referred to the kinship navigator program for intake and needs assessment. When a kin caregiver finishes working with the navigator the caregiver completes a survey to determine if their needs were met, their level of understanding of what kinship care is, and the quality of kinship care being provided.
- **Washington's** kinship navigator program, a 20-year-old program, is for kin in and outside the child welfare system and is jointly managed with their department of aging and child welfare agencies. Washington is also piloting and evaluating an enhanced kinship navigator program. The program's [website](#) includes videos on the [community of kinship care](#) and [navigating kinship care](#).
- **Florida's** [Children's Home Network](#) has a kinship navigator program for kin caregivers who are either inside or outside the child welfare system. The program's unique features include a single e-application, peer-to-peer support, and interdisciplinary team support for kin caregivers.
- **Maine, Montana, Vermont, and Wyoming** are working together as part of a Kinship Navigator Collaborative with support from Generations United, Casey Family Programs, and the University of Washington, to develop a Kinship Navigator Program model with an evaluation.

Promising Practice:

Websites and apps with information, supports, and resources for kin

Several jurisdictions have created websites and phone apps to easily provide updated information, supports, and resources to kin.

State Examples:

- **Hawaii** has a [resource family app](#), which is used to build a support network for kin caregivers. The app connects kin caregivers to mentors and other kin caregivers and provides access to the state's kinship navigator warmline to ask questions.
- **Georgia** has created a [website](#) with information and a [video](#) on kinship care generally.

Promising Practice:

Public-private/ community partnerships and legal services

Supporting kin caregivers involves engaging and partnering with several different stakeholders, including courts, community-based service providers, and other public agencies.

State Examples:

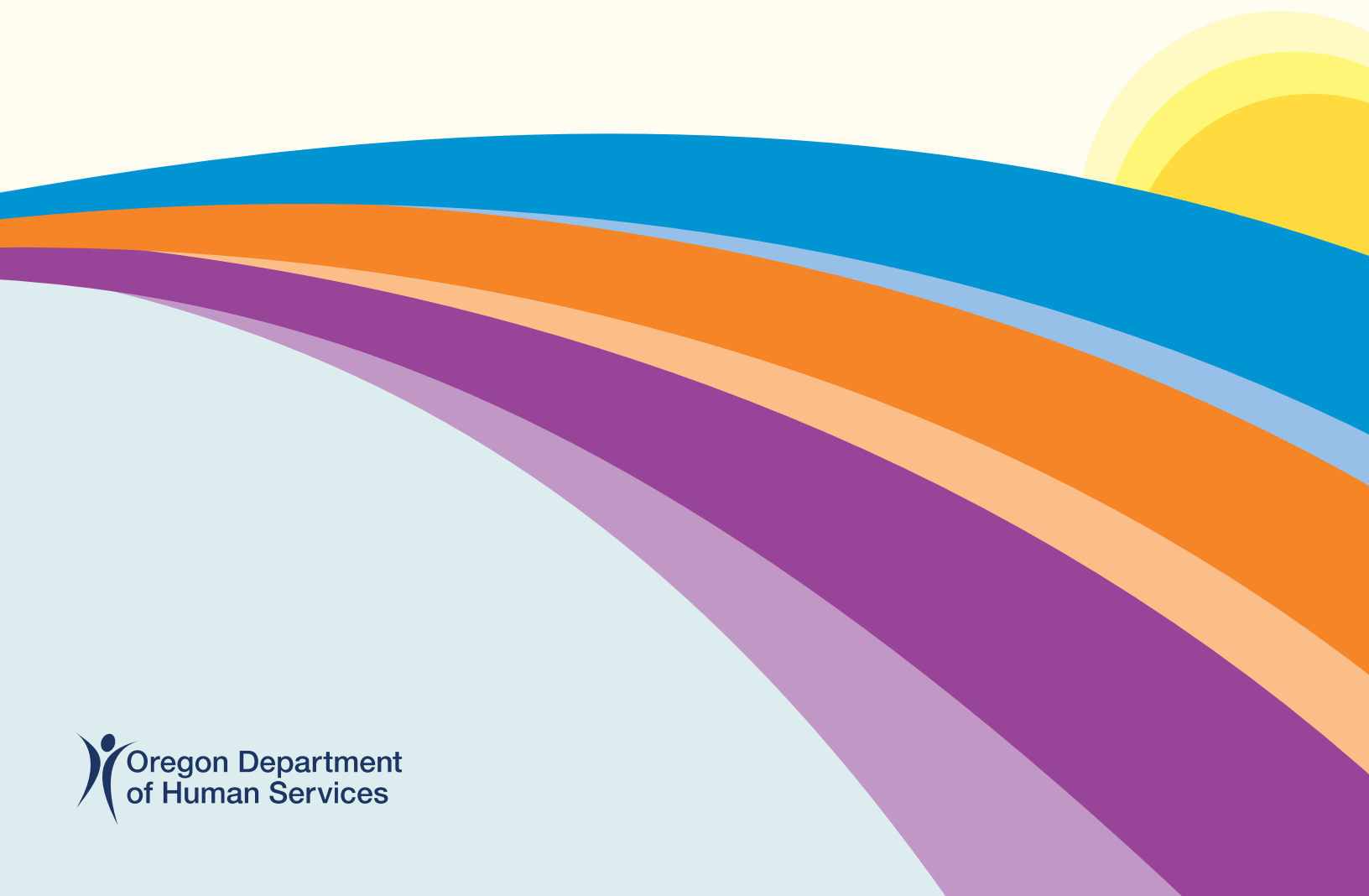
- As part of their Kinship Navigator services, **New Mexico** has a contract with statewide legal agencies and relative success centers to provide legal services to kin caregivers.
- **Alabama's** iCAN initiative connects county child welfare agencies and courts to work together to improve outcomes for children, with a special focus on improving kinship practices.
- **Colorado's** Rocky Mountain Children's Law Center (RMCLC) is partnering with the city of Denver to provide workshops on Kinship Legal Options for kin caregivers. It is also piloting a limited representation legal model through which RMCLC attorneys will support kin caregivers by reviewing documents to be submitted to court.
- **Michigan's** kinship navigator program, the [Kinship Care Resource Center](#) (KCRC), is a program of the School of Social Work at Michigan State University. KCRC participates in the Michigan Kinship Care Coalition, a cross-systems collaboration advocating for, educating, and raising awareness about kinship care. Partners include the Guidance Center, Michigan's Children, Oakland Livingston Human Service Agency, and Fostering Forward Michigan. The Coalition is divided into three committees: communications, policy and advocacy, and mobilizing the field.
- In 2008, **Massachusetts** legislation created a permanent 15 member [Commission on the Status of Grandparents Raising Grandchildren](#), which fosters collaboration between entities working on kinship issues, acts as a liaison between government and private interest groups, and assesses programs and practices of state agencies for their impact on grandparents raising grandchildren.



This resource was developed in partnership with the ABA Center on Children and the Law and Generations United, with support from Casey Family Programs. Visit www.grandfamilies.org for more resources.

Oregon Child Welfare Division

Vision for Transformation



“We all know that infants, children, adolescents and young adults do best growing up in a family that can provide love, support, life-long learning, shared values and important memories.”

Rebecca Jones Gaston

Oregon Department of Human Services

Child Welfare Director

The Oregon Department of Human Services (ODHS) is transforming the Child Welfare Division. ODHS seeks to create a Child Welfare Division that supports the individual needs of families and best serves Oregon's children and young people.

ODHS envisions a true transformation built on core values and a belief that children do best growing up in a family.

This Vision for Transformation came from a collaboration among diverse partners to create and implement a strategic roadmap for success. Our Vision for Transformation includes specific guiding principles, strategies and measurable outcomes.

As a result, ODHS will be better able to support Oregon families and children at home and in their communities. Transforming our child welfare system will support children, and young adults to be safer and healthier and to experience less trauma and greater well-being. Our children and families deserve nothing less.





A Vision for Transformation

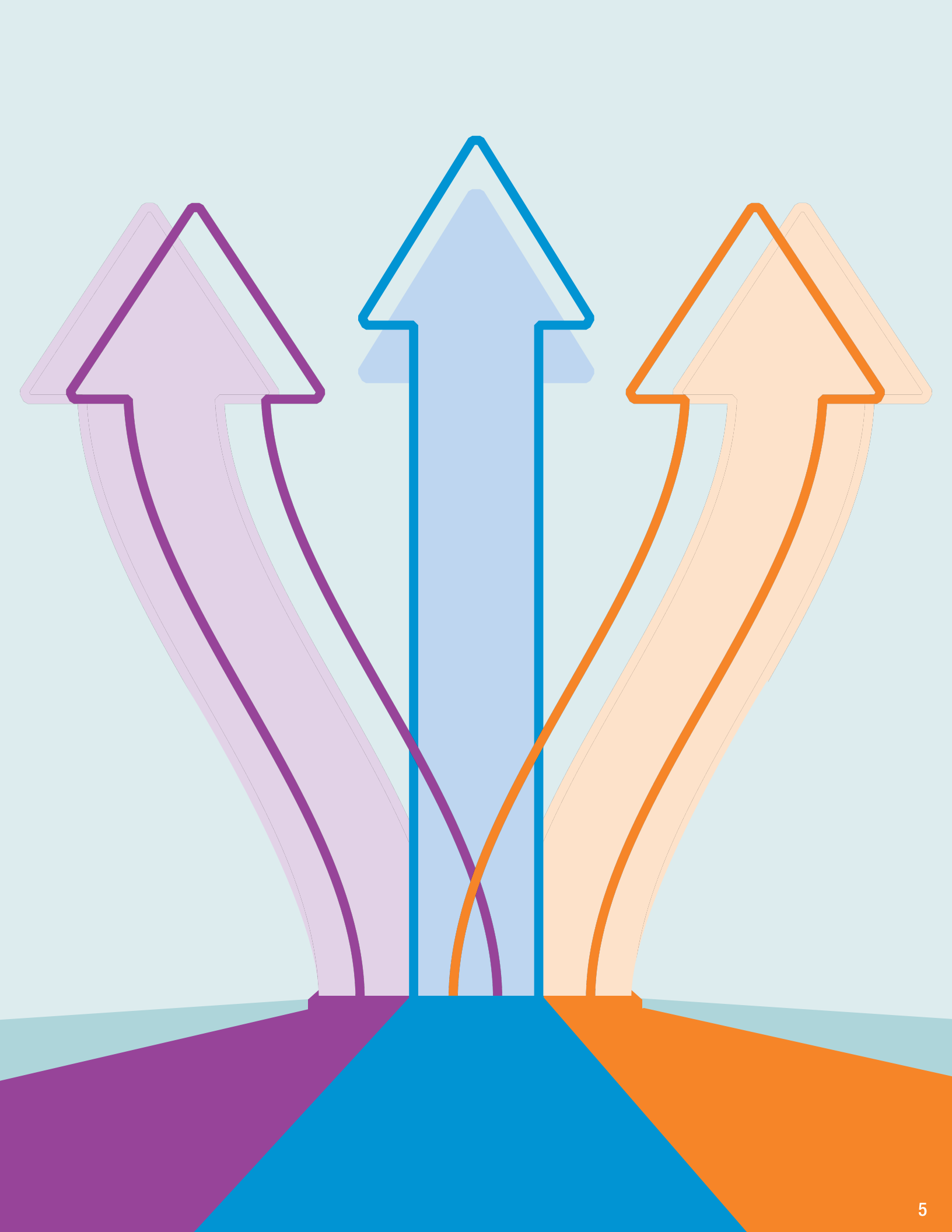
All children experience safe, stable, healthy lives and grow up in the care of a loving family and community.

The Child Welfare Division of the Oregon Department of Human Services (ODHS) is part of a larger statewide social safety-net system that works to support families and communities. This safety net not only works during a life-threatening crisis but well beforehand, when small interventions can make an enormous difference in their lives.

Collectively, ODHS, public and private partners are working to support families and communities in myriad ways. This may include:

- Providing economic support
- Enhancing parenting skills
- Helping people with their housing needs and employment goals
- Providing health and behavioral services
- Helping treat alcohol and substance use disorders, and
- Ensuring child safety and family well-being.

We help families access resources within their natural support networks and the service provider community. This helps them address their own underlying needs and resolve the most common causes of stress and trauma linked to child maltreatment.



The Child Welfare Division's mission is to ensure every child and family is empowered to live a safe, stable and healthy life. This mission is based on a set of beliefs and core values:

We believe children, and young adults do best when they grow up in a family.

We value fairness, equity, inclusion, accessibility, diversity and transparency in our work.

We value the voices, experiences, cultures, intellect and uniqueness of the children, and families we serve.

We believe that communities often already have the wisdom and assets to provide safe, stable and healthy lives for their children. Thus, Child Welfare needs to partner, listen and lift up community voices and their decision-making powers. This builds on existing resources, creates pathways to new resources and promotes community interdependence rather than a system of dependence.

We value building authentic relationships and being accountable to communities of color and other marginalized communities by elevating their voices and proactively engaging with individuals, families and communities. This builds their power so Child Welfare and its partners can better ensure people's safety, health and well-being.

WE . VALUE
Believe

We believe providing earlier, less-intrusive support for parents and families means more children can remain safe and healthy at home and in school. This helps children and young adults have better long-term outcomes and keep the bonds and connections critical to their well-being.

We believe families and communities working together in a more proactive, holistic way will allow ODHS and its partners to allocate resources where they have the greatest impact for children, young adults, parents and families. Comprehensive services outside of ODHS will decrease the need for costly foster care, residential placements and other crisis support. This will create opportunities for more innovation, creative solutions and new business models.

Our Vision for Transformation is based on a belief that children do best growing up in a family and on values related to honoring and supporting cultural wisdom, building community resilience and voice, and ensuring the self-determination of our communities of color. The goal is an absolute transformation.

We believe when families and communities are strong, fewer children experience abuse and neglect.

We recognize the importance of challenges and struggles of transforming the current system into one that is fair and just. Anti-racist principles guide us. We recognize that white supremacy and systemic racism are deeply embedded in the history, fabric and institutions of our country, including child welfare systems. Long-lasting social change comes from communities of color and other marginalized communities' leadership and power in social movements and systems transformation. To this end, we will leverage our resources, technical knowledge and role within the broader ODHS and child welfare systems to support transformation.

Our Vision for Transformation is based on a belief that children do best growing up in a family and on values related to honoring and supporting cultural wisdom, building community resilience and voice, and ensuring the self-determination of our communities of color. The goal is an absolute transformation.

Families will be strong and successful when everyone works together. ODHS Child Welfare will work collaboratively to uplift families, communities, Oregon Tribal Nations and partners.

ODHS Child Welfare will achieve this Vision for Transformation through its various functions to do the following:

- Assess child safety and provide in-home support to prevent placements away from parents, family, friends and community.
- Expand services to prevent unnecessary foster care placements and ensure that intensive interventions are as effective as possible.
- Ensure foster care is family-based, time-limited, culturally responsive and designed to better stabilize families rather than just serving as a placement for children.
- Establish that children, and young adults will be in the care of family, friends and neighbors whenever possible, and help children keep connections to their cultures, communities and Oregon Tribal Nations.
- Recognize that children who need higher-level physical or mental health services need short-term treatment programs customized to support the individual child's therapeutic needs. These supports should occur while children or teens are living in families with birth or adoptive parents, relatives, close friends or foster caregivers.
- Collaborate and build strong relationships with our partners.
- Strive for a supported workforce that has the resources, training, coaching and services needed to support our children, families and communities.
- Dismantle structural and systemic racism and move toward a more equitable and fair system of support for all families.

By honoring the diversity and lived experiences of our families, Oregon Tribal Nations, community and stakeholders, we will build meaningful, authentic and community-centered relationships that will build our collective knowledge, expertise, and education on child safety and support.

This transformation will not happen overnight. Some families will still experience crises, even with proactive engagement and support services. To meet this challenge, ODHS and its partners must create interdisciplinary and cross-system teams to support children and families to meet their individual needs. ODHS Child Welfare will also improve its use of data to inform decision making and activate correct levels of services and supports.

The world's circumstances have profoundly changed since ODHS first developed this vision. Many of this document's strategies require investment and development of resources and tools. The COVID-19 global pandemic has affected access to those resources. However, the focus and goals of transformation have not changed.

The need to transform child welfare

Nationally, the current approach to child welfare is not working. Research shows the following:

- Preventable fatalities due to child abuse and neglect remain high. ⁽¹⁾
- Subsequent maltreatment remains high. ⁽²⁾
- Poverty is often mistaken for neglect, resulting in increased rates of child abuse reports ⁽³⁾ and unnecessary foster care, group and institutional placements.
- Research shows placement in substitute care can cause further serious trauma. ⁽⁴⁾
- Due to racial and discriminatory biases, practices and critical decisions result in racial, ethnic and tribal disproportionality in children of color. ⁽⁵⁾
- Systemic racism results in the design and implementation of child welfare practices and policies that do not include communities of color and other marginalized communities. These communities are also often left out of decisions about the best use of resources and services.
- Children who stay in the child welfare system longer will have a higher risk of not finding permanency. Then, as young adults, they age out of the system without strong, permanent family connections and supports needed to become self-sufficient. ⁽⁶⁾

- Inadequate training resources and professional support for child welfare staff create an unsupportive work environment and add to the lack of retention in the workforce, thus a constant strain on child welfare system. ⁽⁷⁾
- Across the United States, between 7 and 30% of children and young adults crossover from child welfare into the juvenile justice systems. These trends are partly due to the lack of strong cross-system coordination and inattention to child well-being indicators. ⁽⁸⁾
- Historically, the system has focused on removing kids from their families, homes and neighborhoods for safety reasons. Research, however, consistently shows that children and young people can have better outcomes when they remain safely in their homes while receiving services allows children to keep ties with their family, friends, schools and communities. ⁽⁹⁾

By honoring the diversity and lived experiences of our families, Oregon Tribal Nations, community and stakeholders, we will build meaningful, authentic and community-centered relationships that will build our collective knowledge, expertise, and education on child safety and support.

To truly ensure the safety, good health and well-being of children and young adults, we must rethink our approach and our systems, processes and structures for serving and supporting them, their families and communities. More input and rethinking with our internal staff and community partners are critical to developing and realizing this Vision for Transformation. Short-term and long-term planning and actions will ensure that transformation efforts are nimble and adaptive to respond to the global changes in child welfare.

Families will be strong and successful when everyone works together. ODHS Child Welfare will work collaboratively to uplift families, communities, Oregon Tribal Nations and partners to make this transformation a reality, based on the guiding principles, strategies and measures that follow.



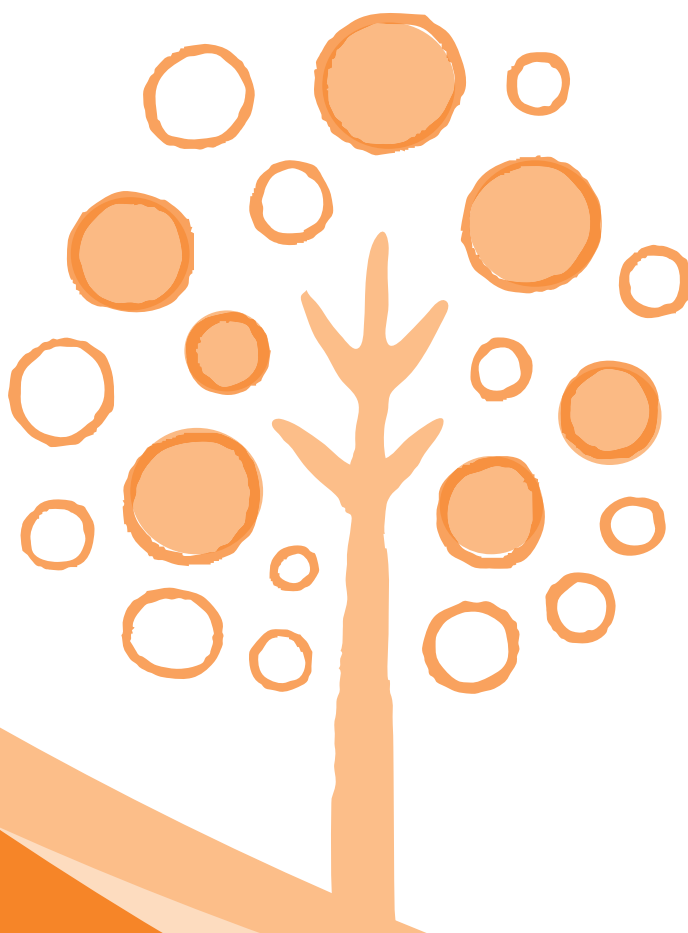


1

Guiding Principle

Supporting families and promoting prevention

Our Child Welfare transformation is built on trauma-informed, family and community-centered and culturally responsive programs and services focused on engagement, equity, safety, well-being and prevention.



This means strategies with an approach that:

- ⦿ **Are centered on family support** focusing on individual needs and appropriate services.
- ⦿ **Value the voices**, experiences, cultures, intellect and uniqueness of the children, and families we serve.
- ⦿ **Are based on early support services** at a time when small interventions can make an enormous difference in people's lives, prevent a crisis and provide appropriate resources if a crisis occurs.
- ⦿ **Use a multi-generational approach** to meet families' needs and address factors that contribute to risk, trauma and safety concerns and the cycles of child abuse and neglect.
- ⦿ **Focus on strengthening and preserving connections to family and community** by keeping children and young adults safely in their own home and communities whenever possible; maintaining connections to family, culture and community when temporary substitute care is needed; and making permanency the priority, starting with safely reunifying families.
- ⦿ **Engage with the community** by integrating the voices of children, young adults, parents, families, Oregon Tribal Nations and partners to be more responsive to the needs of families and community partners.
- ⦿ **Honor and support the self-determination of communities of color** and other marginalized communities and aim to build their power.
- ⦿ **Are culturally responsive** by embracing the communities' lived experiences and the cultures of children and young adults in decision-making that affects their safety, health and well-being; as a result, delivering services aligned with the cultural context of children, young adults, family and community so they can live their lives with dignity, autonomy and equality.
- ⦿ **Are trauma-informed** to recognize the impact of trauma, including historical trauma, and promote a culture of safety, empowerment and healing.
- ⦿ **Strength-based** to support families and individuals with the tools to better handle mental health, substance use, domestic violence issues, and other factors that can contribute to child abuse and neglect.

Strategic projects and initiatives

ODHS Child Welfare has several initiatives and improvement projects in a planning phase or underway. They align with this guiding principle to create a road map for transformation.

Area of focus	Description
Family support to prevent unnecessary foster care	This initiative is to improve support and remove barriers for families to become self-sufficient, prevent unnecessary foster care for children, and support those children and families that have experienced out-of-home care.
Response to community concerns and reports of child abuse and neglect	ODHS Child Welfare created a centralized hotline for screening reports and allegations of child abuse and neglect. The hotline was fully operationalized in 2019 and will need ongoing improvements to help reduce wait times, better manage workloads and address the correct number of assessments assigned to specific districts.
Safety and fatality review and prevention	This project improves the various aspects of the Safety Program and the Fatality Review and Prevention Program to better ensure the safety of children and young adults.
Foster family recruitment, training, support and retention	Oregon is making significant investments in recruiting, training, supporting and retaining foster families to mirror the needs of our children, young adults and communities we serve.
Equity and inclusion	This initiative improves the equity and inclusion of all aspects of the ODHS Child Welfare and provides anti-racist, inclusive, equitable and culturally appropriate services to children, young adults and families.
Timeliness to permanency and family ties	ODHS Child Welfare is working on several related initiatives to improve procedures for reunification, family engagement in case planning and coordination with court partners to improve time to permanency. These initiatives include setting deadlines that result in better outcomes for children and young adults in care.
Training, policy and practices related to Oregon's tribal children and families	ODHS, including the Child Welfare Division, is working to improve training, policy and practices that reflect a tribally responsive approach. By partnering with Oregon's Oregon Tribal Nations and honoring tribal history, ODHS Child Welfare can better serve tribal children and families.

2020–2022 strategic communications plan

A long-term strategic communications plan will guide how Child Welfare engages families and partners and communicates with both internal and external audiences. Its purpose is to take a proactive, strategic approach to communications by ensuring better clarity and transparency; providing opportunities to gather and incorporate input and feedback; and improving collaboration and coordination with staff and community partners.

DESIRED OUTCOMES

By following this principle, we expect to achieve these outcomes:

- A more equitable system leading to better outcomes for children of color
- Fewer children in foster care
- Safer and more stable placements
- Stronger community partnerships
- Stronger tribal relationships
- Increased cross-system collaboration
- Decreased racial disproportionality and disparities
- More children served in their homes and fewer in substitute care
- Lower rates of child neglect and abuse



2

Guiding Principle

Enhancing our staff and infrastructure

Our Child Welfare transformation depends on a diverse, supported, skilled, respected and engaged workforce that reflects and embraces the communities we serve.



This means strategies have:

- ⦿ A clear vision and purpose for transformation and a strategic direction that staff understand and collectively and individually see.
- ⦿ A commitment to fairness, equity, inclusion, accessibility, transparency and diversity.
- ⦿ An effective organization and implementation infrastructure driven by inter-and cross-program collaboration that facilitates shared decision-making and respect.
- ⦿ A culture of spiritual, social, psychological and physical safety across the workforce that values and enhances well-being.
- ⦿ A strong anti-racist approach committed to ending structural racism.
- ⦿ Approaches that actively work to dismantle systems of oppression and institutional barriers that have prevented women of color and LGBTQIA+ people of color from living their lives with dignity, autonomy and equality.
- ⦿ A recognition of the importance of struggle and the challenges to transform the system into a fair and just one.
- ⦿ High, clear expectations and accountability for all staff, managers and leadership that ensure staff have the direction, guidance and support needed for the challenging work they do every day.
- ⦿ Management structure that values staff input and feedback and ensures meaningful participation, engagement and inclusion, including many chances to share ideas and develop professionally.
- ⦿ A partnership-focused relationship between management and labor working toward common goals and outcomes.
- ⦿ Recruitment and hiring, workforce development, retention and succession-planning practices that attract, reward and promote high performing staff and represent the communities we serve with clear opportunities for career advancement.
- ⦿ An exceptional workforce developed and supported at all levels that is diverse, talented, dedicated, motivated, skilled, resilient and adaptable to change, and includes those with lived experiences to competently, confidently and compassionately apply what they are learning to their day-to-day work.

Strategic projects and initiatives

ODHS Child Welfare has several initiatives and improvement projects underway or in a planning phase. These projects and initiatives align with this guiding principle to create a road map for transformation.

Area of focus	Description
ODHS Child Welfare organizational effectiveness	ODHS Child Welfare is improving the program's effectiveness by redesigning organizational infrastructures and systems to support the organization's core work.
A supported and engaged workforce	These initiatives seek to improve and transform ODHS Child Welfare's organizational culture and to develop a supported and engaged workforce through the following:
	<ul style="list-style-type: none">• Improved training: Staff training will align best practices, build allyship, and reflect the overall goals and values of the organization.• Improved employee onboarding: The onboarding process for all classes of new employees will ensure they have the needed training and other resources to effectively begin their work. This will lead to onboarding consistency and continuity.• Implement RiSE: RiSE is an agency-wide effort to develop an intentional and positive organizational culture that helps employees thrive at work. It is both a direct response to employee input and a commitment from leadership.• Improved recruiting and hiring practices: Hiring and recruiting will help ensure Child Welfare has the workforce, leadership and succession planning it needs to support its mission, vision and goals.

DESIRED OUTCOMES

By following this principle, we expect to achieve these outcomes:

- Strong, consistent leadership with an effective organizational infrastructure.
- A clear and transparent implementation process of the agency's transformation.
- Increased teamwork in field offices with a team-oriented environment.
- Improved field and central office connection and clarity of roles and responsibilities.
- An effective, adaptive and responsive learning environment.
- Improved training and coaching at all levels.
- Fewer vacancies.
- Higher retention rates and longer tenures.
- Increased promotions from within.
- Reduced caseloads.
- Higher morale.
- Increased internal communications that improve engagement and morale through all levels of the organization.
- Staff are the respected and empowered as the experts in child safety and support that they are.



3

Guiding Principle

Enhancing the structure of our system by using data with continuous quality improvement

Our Child Welfare transformation is built on data-informed practice and is supported by continuous quality improvement and modernized information technology systems and tools.



This means strategies have:

- ◎ **A holistic continuous quality improvement (CQI) system**, based on implementing evidence-based best practices to evaluate and improve child and family outcomes, as well as the ongoing delivery of services and supports.
- ◎ **Clear, uniform metrics** that align with the Vision for Transformation, measure progress toward key goals and outcomes, and provide metrics that are relevant to our children, families, partners and Oregon Tribal Nations.
- ◎ **Timely, accurate, useful and easy to understand data** to highlight progress, identify and close gaps, and to drive education, policies and strategies for change.
- ◎ **Managers to champion the use of data to ensure staff and partners understand its value**, have access to it, and use it effectively in decision making and their day-to-day work
- ◎ **User-friendly and effective information technology systems and tools** that make it easier to improve outcomes for children and families, keep them safely together, and provide insight and analysis into what's working and what's not to leverage advancements in research and technology.
- ◎ **Identify opportunities with our data** to drive education, policies and strategies.

Strategic projects and initiatives

ODHS Child Welfare has several initiatives and improvement projects underway or in a planning phase that align with this guiding principle as to create a road map for transformation:

Area of focus	Description
CQI and quality assurance systems for evaluation of ODHS Child Welfare programs and initiatives	To become an evidence-based, data-driven and implementation-science-informed organization, ODHS Child Welfare is developing data collection and analysis processes to identify areas for improvement and to assess and measure our progress and outcomes over time.
The Child Welfare Research Agenda	This agenda will use data and research to help establish and assess further progress toward program goals and priorities, including the use of evidence-based and evidence-informed practices and the development of effective services.
Comprehensive Child Welfare Information System (CCWIS) implementation	OR-Kids, the state's case management system, is being updated to meet the new federal CCWIS regulations and improve ODHS Child Welfare's infrastructure and processes to better enhance and support our workforce.
An array of treatment services based on evidence-informed data	These initiatives seek to improve the array of treatment services to better suit the individual needs of children and young people in care using data.
An array of prevention and family support services based on evidence-based data	ODHS Child Welfare will use evidence-based data to develop an array of services to support individual families and reduce the need for out-of-home substitute care.

DESIRED OUTCOMES

By following these principles, we expect to achieve outcomes that include:

- Aligned reports, metrics and measures across the child and family serving system.
- Focus on research that supports key goals and child and family outcomes.
- Use of data and data-dashboards in daily operations and decision making.
- Improve usability of information technology solutions that meet the needs of case management and data information systems.
- Increase usage of CQI systems across programs that are based on up-to-date technology, science and best practices.
- Increase of real-time, accurate data dashboards for key metrics.



Endnotes

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Oregon Department of Human Services, Child Welfare Division welcomes review, input and support for these ambitious transformation plans. They embrace our beliefs and core values. The plan is based on three key principles, supportive strategies and specific outcome measures outlined in this Vision for Transformation. For more information, contact ChildWelfare.DirectorsOffice@dhsola.state.or.us



You can get this document in other languages, large print, braille or a format you prefer. Contact Child Welfare Director's Office at 503-945-5600 or email ChildWelfare.DirectorsOffice@dhsosha.state.or.us. We accept all relay calls or you can dial 711.