



## Working With Kinship Caregivers

Kinship care is the full-time care and nurturing of a child by a relative or someone with a significant emotional connection to the child, such as a close family friend, when parents are not able to provide care. When out-of-home care is needed, kinship care is the preferred option because it can reduce trauma and help children maintain family bonds, a sense of belonging, and their identity. Many kinship families provide care outside of the formal foster care system and therefore may not be aware of their eligibility for resources and services to help them be successful.

The growing need for kinship families and related support services has led many States to launch kinship awareness campaigns to recognize the tremendous contribution these caregivers make, the challenges they face, and the help they need. This bulletin highlights supports and services for kinship caregivers, training for caseworkers and caregivers, and examples of successful kinship care programs.

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## Trends in Kinship Care

Over the last several years, there has been an increase in the number of children living with extended family or close family friends (without any parents in the home), from an average of roughly 2.4 million children during 2010–2012 to an average of almost 2.6 million children during 2013–2015 (Annie E. Casey Foundation, 2017). The Social Security Act’s Title IV-E foster care program requires State and Tribal agencies to exercise due diligence when a child is removed from his or her home by identifying and notifying all adult relatives within 30 days of the removal. The law also requires child welfare agencies to consider giving preference to an adult relative over a non-related caregiver when determining a placement for a child, provided that the relative caregiver meets all relevant State child protection standards.

According to the 2017 Adoption and Foster Care Analysis Reporting System report, Federal statistics for the last day of Federal fiscal year 2016 show that 32 percent of all children in foster care resided in a relative’s home (U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau, 2017).

Generations United, a national advocacy organization for children, youth, and older adults, offers the following in a 2017 report:

- Approximately 3.5 percent of all children in the United States (almost 2.6 million) are being raised in some form of kinship care where there is no birth parent in the home.<sup>1</sup>
- For every child in kinship foster care, there are 20 children being raised by relatives outside the child welfare system.<sup>2</sup>

<sup>1</sup> Generations United calculated this figure based on the following two data sources: (1) The Annie E. Casey Foundation Kids Count Data Center. 2014–2016 Current Population Survey Annual Social and Economic Supplement (CPS ASEC). Children in Kinship Care. (2) U.S. Census Bureau. 2014–2016 CPS ASEC. Estimates represent a 3-year average.

<sup>2</sup> Generations United calculated this figure based on the following two data sources: (1) The Annie E. Casey Foundation Kids Count Data Center. 2014–2016 CPS ASEC. (2) U.S. Census Bureau. 2014–2016 CPS ASEC. Estimates represent a 3-year average.

Kinship care has become increasingly important for families battling addiction. In Ohio, for example, where drug addiction has been recognized as a major factor in children entering out-of-home care, the number of children the child welfare system has placed with relatives increased 62 percent between 2010 and 2017 (Public Children Services Association of Ohio, 2017).

## Types of Kinship Care

Kinship care arrangements fall into three categories: (1) informal kinship care without child welfare involvement; (2) voluntary kinship care in which the child welfare agency is involved, but the State or Tribe does not have child welfare agency oversight; and (3) formal kinship care, in which a child welfare agency has legal custody and places a child with relatives or kin in a foster care arrangement.

### Informal Kinship Care

The vast majority of kinship care arrangements occur outside the child welfare system. These informal arrangements are often made by family members without the involvement of the child welfare or juvenile court systems and are sometimes referred to as either informal or private kinship care (Walsh, 2013). For example, a parent may require inpatient addiction treatment and leave children with a grandparent, aunt, or uncle while they are in treatment. In informal kinship care, parents retain legal custody of the children and can take them back at any time. Parents also maintain legal authority for all decisions related to their children’s medical treatment and education or special education needs. In some cases, relatives may care for children indefinitely and may ultimately obtain legal custody, temporary guardianship, or even adopt the children through family and/or probate courts.

## Voluntary Kinship Care

Another form of kinship care may occur when children who are known to the child welfare agency are placed with relatives without the State or Tribe assuming legal custody and oversight responsibility. In these cases the child welfare agency has determined that the children may live safely with relatives without further monitoring and oversight, and, therefore, the agency does not take responsibility for the care or placement of the child. This practice is also sometimes known as “diversion.” In some cases, a court may have placed children with relatives, and in others, the child welfare agency arranges for a placement without any court involvement. Depending on the State and the circumstances, the legal custody may remain with the parents, or the parents may sign over temporary custody—referred to as temporary guardianship—to the kin caregivers. In States and situations where the kin caregiver has temporary guardianship, the caregiver can usually make decisions about education and medical matters, although parents should be included, when appropriate. For more information on the legal conditions of guardianship, see *Standby Guardianship* (<https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/guardianship/>) in Child Welfare Information Gateway’s State Statutes series and the Resources for Kinship Caregivers: Legal and Financial Information webpage (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/legalinfo/>).

## Formal Kinship Care

Relatives and kin may serve as a child’s foster family home when a child comes into foster care under the placement and care of a State or Tribe. This type of arrangement is often referred to as either “formal” or “public” kinship care. Relative foster homes may be either licensed or unlicensed, depending on State licensing requirements and family preferences. Some kinship foster caregivers are unlicensed. They do not receive the same monthly subsidies.

Licensed kinship foster care most closely resembles nonrelative foster care in its structured involvement with a child welfare agency and access to services. In licensed kinship foster care, children are placed in legal custody of the State by a judge, and the child welfare system then places the child with grandparents or other family members. Licensed kinship caregivers, like nonrelated foster care and other resource parents, receive monthly subsidies to help with expenses and are required to undergo licensure and training, including a home approval process. Although these relatives must meet the same licensing standards as nonrelatives, the Federal title IV-E program allows States the option of waiving non-safety-related licensing standards for relatives on a case-by-case basis.

The licensing status of a relative or kinship foster family home can affect permanency options for a child in foster care, since eligibility for the optional title IV-E kinship guardianship assistance program is tied, in part, to the child having lived with the relative in a licensed foster care placement for at least six consecutive months. For more information, visit the Children’s Bureau Title IV-E Guardianship Assistance webpage at <https://www.acf.hhs.gov/cb/resource/title-iv-e-guardianship-assistance> and Information Gateway’s Subsidized Guardianship webpage at <https://www.childwelfare.gov/topics/management/funding/program-areas/kinship/subsidized/>. See also *Kinship Caregivers and the Child Welfare System* at <https://www.childwelfare.gov/pubs/f-kinshi/>, and for more State-specific materials, see Information Gateway’s State Guides and Manuals Search (<https://www.childwelfare.gov/topics/systemwide/sgm/>).

## Benefits of Kinship Care

Research shows that children benefit from kinship care in many ways. Kinship care can reduce the trauma that children may have previously endured and the trauma that accompanies parental separation by providing them with a sense of stability and belonging in an otherwise unsettling time. Children who have been placed with relatives may have experienced chronic neglect and physical, sexual, or emotional abuse. While these experiences place children at risk for behavioral and health problems, a positive relationship with a caregiver and a stable and supportive living environment can mitigate their impact (Center on the Developing Child, 2007). Grandparents, other relative caregivers, and “fictive kin”—close friends holding a family-like bond with a child—are in a unique position to fill this supportive role and promote resiliency (Generations United, 2017).

Kinship care has the following additional benefits:

- Ongoing connections with a child’s birth family, extended family, siblings, and community—bonds that are essential to well-being
- Preservation of cultural identity (Generations United, 2016)
- Higher likelihood siblings will remain together
- Greater placement stability than for children in other out-of-home care arrangements (Winokur & Drendel, 2010)

## How to Support Kinship Caregivers

Children in out-of-home care are more likely to have better social and mental health outcomes when their caregivers can access a wide variety of services, such as financial assistance and related public benefits, case management, legal assistance, support groups, respite care, and mental health counseling and treatment (Generations United, 2017). Kinship caregivers outside the child welfare system often request fewer services than licensed foster parents (James Bell Associates [JBA], 2013), either because they do not realize they are eligible for support services (Annie E. Casey Foundation, 2012b) or because eligibility, application requirements, and the necessary legal documentation are confusing and cumbersome (Cooper & Donovan, 2014).

Caseworkers can help promote a “kin-first” culture by tailoring services to the needs of local kinship families, promoting kinship placement, and helping children in foster care maintain their family connections (American Bar Association [ABA] Center on Children and the Law, ChildFocus, & Generations United, 2017). The ABA’s Center on Children and the Law, ChildFocus, and Generations United produced “wikiHow for Kinship Foster Care” with funding from the Annie E. Casey Foundation. The wikiHow tool offers strategies for developing a kin-first culture and is available at <http://www.grandfamilies.org/wikiHow-for-Kinship-Foster-Care>.

## Helping Kinship Caregivers Understand Options

As with any out-of-home care placement, caseworkers should work with prospective kinship caregivers to fully disclose a child’s needs and situation and allow the potential caregiver and child welfare agency to make the best possible placement decision for the child.

Caseworkers should provide potential kinship caregivers with information on the foster care provider options in the State and thoroughly discuss each option, including the requirements for becoming a licensed foster home and its associated benefits. Kinship caregivers should be aware of all permanency options, including guardianship.

Caseworkers should also provide information to relative caregivers about the court process, the different types of hearings, court procedures, and the caregiver’s role in any court proceedings. See Information Gateway’s webpage, Resources for Kinship Caregivers: Legal and Financial Information (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/legalinfo/>).

For more information on State laws that give priority or preference to relatives when children are in need of out-of-home care, read Child Welfare Information Gateway’s *Placement of Children With Relatives* at <https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/placement/>.

*Home Study Requirements for Prospective Foster Parents* includes information about State laws and policies for licensing or approving family foster homes, including laws about standards, the approval process, kinship foster care, and interjurisdictional approval. Read more at <https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/homestudyreqs/>.

## Assessing for Strengths and Needs

The child welfare agency assesses the strengths and needs of the kinship caregiver. The Child Welfare League of America (CWLA) recommends assessments evaluate the following (CWLA, 2000):

- The nature and quality of the relationships between the kinship caregiver, child, parents, and other relatives
- The physical, emotional, and mental health of the kinship family
- The kinship caregiver's ability to meet the child's developmental and educational needs, including any special needs
- The predicted length of time the child will be placed in the kinship home
- How long the kinship caregiver is willing to have the child in the home
- The kinship caregiver's current resources and support system
- The willingness and ability of the kinship caregiver to comply with the child welfare agency and associated safety and case plans
- Other family members who can assist with the responsibility of caring for the child

## Considering Kin-Specific Concerns

The Division of Child Welfare Services in Arlington County, Virginia, has created a special kinship assessment protocol that considers kin-specific concerns when making placements. The assessment covers issues that help to make kinship care successful, such as the configuration of the household, caregiver motivations, and family relationships. Rather than focusing solely on the number of bedrooms or bathrooms in a potential kinship home, the assessment considers a caregiver's abilities to set healthy emotional boundaries with the birth parent, the child entering out-of-home care, and extended family members. Questions for potential caregivers in the initial kinship assessment include how they manage stress, whether they have concerns or fears about maintaining connections with the most important individuals in the child's or children's lives, and what the child or children entering care might need that is different from what their own children needed (L. Friedman, personal communication, October 23, 2017).

Arlington County has increased its emphasis on related trainings for kinship caregivers, employing kinship expert Joseph Crumbley's approach, which emphasizes family dynamics and the importance of considering preexisting relationships when placing a child in kinship care—conditions that are nonexistent in traditional foster care (L. Friedman, personal communication, October 23, 2017).

For more information, see Dr. Crumbley's website at <http://www.drcrumbley.com/index.html>) and his 2017 video series, *Engaging Kinship Caregivers: Managing Risk Factors in Kinship Care*, which is available through the Annie E. Casey Foundation (<http://www.aecf.org/blog/engaging-kinship-caregivers-with-joseph-crumbley/>).

## Using Family-Centered Practice

Family-centered practice that actively involves family members in caregiving and placement decisions may make kinship care more successful by expanding placement options and giving the family ownership (i.e., family members can determine who they deem the best candidate for the primary caregiving responsibility, the secondary backup person, etc.). Family partnership meetings, family group decision-making (FGDM), and team decision-making models are all part of family-centered practice. This approach can help caseworkers recognize a family's strengths and understand its needs.

The Children's Bureau awarded seven Family Connection demonstration grants in 2011 to measure the effectiveness of FGDM when working with families. A synthesis of reports from 2011 grantees recommends the following to remove barriers to family involvement (Child Welfare Information Gateway, 2017):

- Provide training for as many caseworkers as possible to promote a more family-centered approach
- Examine caseload management issues to identify areas that can be improved
- Locate staff who can promote the family-centered approach in child welfare offices
- Promote a family-centered agency culture

Visit Information Gateway's webpages, *Using Family Group Decision-Making to Build Protective Factors for Children and Families* (<https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/fgdm/>) and *Resources for Kinship Caregivers: Changing Family Dynamics* (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/familydynamics/>) to find resources related to FGDM and the impact of kinship care on caregivers and family members.

## Working With the Kinship Caregiver to Develop a Permanency Plan

Caseworkers should be prepared to facilitate the relationship between the kinship caregivers and the birth parents and openly discuss the possibility of a long-term or permanent placement for the child. Caseworkers should also ensure that caregivers are knowledgeable about the court process as well as services that would be available should the kinship care arrangement become permanent.

A 2009 Children's Bureau grantee, the Rhode Island Partnership for Family Connections, found that developing and supporting kinship connections made a significant contribution in achieving permanency for children in kinship care. The report concluded that support for kinship caregivers is essential to increasing the number of kinship homes. The final report is available through the Children's Bureau Discretionary Grants library (grant #90CF0015 at [https://library.childwelfare.gov/cbgrants/ws/library/docs/cb\\_grants/PISearch](https://library.childwelfare.gov/cbgrants/ws/library/docs/cb_grants/PISearch)).

In cases where kinship caregivers choose not to pursue permanency through adoption, guardianship—including subsidized guardianship—offers an opportunity to assume responsibility for the child without the termination of parental rights. This may support cultural norms and be easier for some families to accept.

Many States provide kinship caregivers with written and/or electronic information pertaining to the permanency options for the child in their care. Consult Information Gateway's database of State Guides and Manuals (<https://www.childwelfare.gov/topics/systemwide/sgm/>) for State-specific details. For more information, see *Kinship Guardianship as a Permanency Option*, a 2014 update to Information Gateway's State Statutes Series (<https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/kinshipguardianship/>) and Information Gateway's webpage, *Resources for Kinship Caregivers: Establishing Permanency* (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/establishingpermanency/>).

## Accessing Services

Caseworkers should provide information to kinship caregivers on financial resources and other supportive services. Kinship caregivers may not seek available services due to unfamiliarity with their availability or a reluctance to access help. Several factors may influence whether caregivers access services, including child behavioral or emotional problems, caregiver mental health, social supports, perceived need for services, availability and accessibility of resources, and service provider characteristics (Coleman & Wu, 2016).

## Kinship Navigator Programs

Many States have launched kinship navigator programs to create a single point of entry to connect relative caregivers with a range of supportive services. These initiatives have provided information, referral, and follow-up services to grandparents and other relatives raising children either inside or outside the child welfare system. The navigator programs have also promoted partnerships among public, private, and community-based agencies to broaden access to kinship-related services, such as financial and legal assistance, case management, emotional support, FGDM and related services, and a variety of supports for children. Permanency rates have increased as a result through guardianship and reunification with parents (JBA, 2013).

Kinship navigators are most effective when they have the following strengths (JBA, 2013):

- Knowledge of community resources and services
- Listening skills
- Compassion and empathy
- Experience with the child welfare system
- Case management skills

A 2017 Child Welfare Information Gateway podcast series featured successful kinship navigator programs in California and Florida that were designed to identify kinship caregivers outside the child welfare system and connect them with available services. Listen to the two-part series to learn how technological innovations can connect more kinship caregivers to services:

- “Supporting Kinship Caregivers, Part 1” (<https://www.acf.hhs.gov/cb/resource/child-welfare-podcast-supporting-kinship-caregivers-part1>)
- “Supporting Kinship Caregivers, Part 2” (<https://www.acf.hhs.gov/cb/resource/child-welfare-podcast-supporting-kinship-caregivers-part2>)

Additional information on supporting kinship caregivers and examples of kinship navigator programs are available on the Information Gateway webpage Finding and Providing Support for Kinship Caregivers at <https://www.childwelfare.gov/topics/outofhome/kinship/findsupport/>. Find information on State kinship care contacts on Information Gateway’s Related Organizations webpage ([https://www.childwelfare.gov/organizations/?CWIGFunctionsaction=rols:main.dspList&rolType=Custom&RS\\_ID=148](https://www.childwelfare.gov/organizations/?CWIGFunctionsaction=rols:main.dspList&rolType=Custom&RS_ID=148)).

## Financial Support

Adding children to a household is expensive. Many kinship families report food insecurity, inadequate housing, and insufficient child care assistance, and, in 2011, 38 percent lived below the poverty line (Annie E. Casey Foundation, 2012b). In addition to the resources listed below, kinship caregivers may also be eligible for child care and housing assistance as well as help with health-care expenses for children in their care. Information Gateway’s webpage, Resources for Kinship Caregivers: Legal and Financial Information (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/legalinfo/>), includes a list of available resources and State and local examples.

The following financial assistance is generally available.

**The Temporary Assistance to Needy Families (TANF) program** provides a monthly subsidy to eligible kinship caregivers, commonly called a “child-only” grant. While relatives caring for a child do not need to have legal custody to apply for TANF benefits, they must meet their State’s TANF definition of a kinship caregiver. In most States, caregivers are able to receive the TANF child-only grants (these are significantly lower than foster care payments). Children whose caregivers are eligible for TANF are also eligible for Medicaid and may be eligible for assistance with child care costs.

The New York State Kinship Care Navigator County Collaboration Project ([www.nysnavigator.org](http://www.nysnavigator.org)), funded through a 2012 Children’s Bureau Family Connections grant, established a “Kinship Corps” composed of peer mentors who provided a pro bono attorney network to assist with legal issues and TANF access. The program required county child welfare agencies to complete a permission-to-contact form to allow kinship navigators to contact caregivers and walk them through the process of obtaining TANF child-only grants. The program succeeded in helping more than 400 caregivers in five counties access benefits. For more information, see the April 2016 Children’s Bureau site visit report (<https://www.childwelfare.gov/pubPDFs/nykinship.pdf>). See also *Grand Resources: A Fact Sheet for Relative Caregivers to Help Access Support Through the Temporary Assistance for Needy Families program* from Generations United (<http://www.gu.org/LinkClick.aspx?fileticket=ZBNaB6jZmDQ%3d&tabid=157&mid=606>).

**Supplemental Nutrition Assistance Program (SNAP)** benefits, formerly known as food stamps, are available to families with incomes below a certain level. In this case, the entire household’s income is considered, and the relative children can be included in family size for determining the benefit amount. Less than half of low-income kinship families receive SNAP assistance even though a majority reports food insecurity (Annie E. Casey Foundation, 2012b).

**Supplemental Security Income (SSI)** may be available to children or caregivers who are disabled. Information about SSI benefits is available from the local Social Security office or online (<http://www.ssa.gov/ssi>). Benefits.gov is a Federal government website that allows caregivers to answer questions to determine their eligibility for Federal programs in their State (<https://www.benefits.gov>).

**National Family Caregiver Support Program (NFCSP)**, administered by the U.S. Department of Health and Human Services Administration for Community Living, provides funds to States to offer support to grandparents or persons aged 55 and over who are raising children as well as family caregivers of older individuals. Support includes information about accessing available services, training, respite care, and individual counseling and support groups. For more information, visit the NFCSP webpage (<https://www.acl.gov/programs/support-caregivers/national-family-caregiver-support-program>).

**Foster care payments** are available for licensed kinship caregivers who are raising children under the placement and care of a child welfare agency. Child welfare agencies should inform kinship families about the licensing process and the related financial support and benefits offered to nonrelative foster parents. While licensing regulations, such as physical space requirements, might prevent kinship caregivers from being approved as licensed caregivers, many States allow waivers for requirements that do not directly impact child safety (Annie E. Casey Foundation, 2012b). Model licensing standards developed by the ABA Center on Children and the Law, the Annie E. Casey Foundation, Generations United, and the National Association for Regulatory Administration (NARA) attempt to address unnecessary barriers to licensure. More information on the Model Foster Family Licensing Standards can be found on the NARA website (<http://www.naralicensing.org/model-family-foster-home-licensing-standards>).

**Guardianship Assistance Program (GAP)** payments, also referred to as Kin-GAP, are an option in many States and some Tribes. For States and Tribes that have opted to participate in the program, GAP provides title IV-E funding to help expand permanency options through financial support for eligible children and youth placed in permanent legal guardianship arrangements with relatives. GAP payments are used to support eligible children discharged from foster care to legal guardianship because they cannot return home or be adopted, or to support their siblings in certain situations as specified in the statute. The responsible title IV-E State or Tribal agency must determine eligibility including, but not limited to, the following:

- There are no other appropriate permanency options for the child.
- The child shows a strong attachment to the prospective guardian.
- The relative guardian has a strong commitment to the child's permanent care.
- Any children aged 14 or over are consulted regarding the potential kinship guardianship.

For more information, visit the Children's Bureau Title IV-E Guardianship Assistance webpage at <https://www.acf.hhs.gov/cb/resource/title-iv-e-guardianship-assistance> and Information Gateway's Subsidized Guardianship webpage at <https://www.childwelfare.gov/topics/management/funding/program-areas/kinship/subsidized/>.

**Adoption assistance payments** may also be an option for kinship caregivers should they choose to adopt an eligible child from the formal foster care system. See Information Gateway's Adoption Assistance by State webpage for State-specific information (<https://www.childwelfare.gov/topics/adoption/adopt-assistance/>).

## Respite Care

Kinship caregivers may need reliable and regular respite care to give them a break from their caregiving responsibilities. This may be particularly important for older relatives or kin caregivers taking care of children who have experienced significant trauma or those with special needs. The National Foster Parent Association recommends that foster parents receive a minimum of 2 scheduled days of respite care per month (Annie E. Casey Foundation, 2012a). Many States and community organizations offer respite care ranging from a few hours to overnight and weekends. In situations where formal respite services are not available, caseworkers can help kinship caregivers identify their informal support systems—neighbors, friends, extended family members—for potential relief.

Read more on the National Respite Network website (<https://www.caregiver.org/arch-national-respite-network>) and find respite providers and programs using a respite locator (<https://archrespite.org/respitelocator>).

## Support Groups

Support groups provide caregivers with an invaluable source of social support and a forum for sharing tips and resources. Caseworkers will find tips and lessons for establishing effective kinship support groups in the 2017 State of Grandfamilies report from Generations United, an advocacy group for kinship caregivers (<http://www.gu.org/OURWORK/Grandfamilies/TheStateofGrandfamiliesinAmerica/TheStateofGrandfamiliesinAmerica2017.aspx>).

The Children's Home Society of New Jersey (CHSofNJ) offers kinship care services to seven counties through the Kinship Navigator's wraparound and legal guardianship programs. The wraparound services program may help eligible kinship caregivers with an annual \$500 stipend to assist with short-term or one-time expenses such as housing, furniture, clothing, or with paying for special activities, such as camp. CHSofNJ has noticed that financial crises periodically surface that can threaten stability, such as health emergencies, pending evictions, and utility shutoffs. CHSofNJ staff work hard in these instances to identify additional funding sources and sustain services. CHSofNJ community-based Family Success Centers provide a local gathering place for caregiver education and support groups, referrals, and services to support kinship families (D. Bryant, personal communication, February 28, 2018). CHSofNJ's kinship work is discussed in the March 2015 Children's Bureau site visit report (<https://www.childwelfare.gov/pubPDFs/NJhomesociety.pdf>).

### Other Services

Additional services needed by kinship care families include family counseling and potential psychiatric services for children, child care, education advocacy, tutoring, and affordable housing. Because many older relatives have reduced mobility, accessing services can be challenging. Providing in-home services when available is a best practice in these situations.

See Information Gateway's webpage Resources for Relative and Kinship Caregivers (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/>) for a comprehensive list of resources to help support kinship families. Many States have resource manuals or websites for kinship caregivers. The Information Gateway website maintains a database of State Guides and Manuals. Check for your State's kinship care resources at <https://www.childwelfare.gov/topics/systemwide/sgm/>. Generations United also offers State-specific information, including 52 State factsheets with data on key State and local programs and resources, public benefits, educational assistance, legal relationship options, and State laws (<http://www.grandfamilies.org/State-Fact-Sheets>).

### Training Caseworkers and Caregivers

Kinship care is most likely to succeed when both the caregivers and the caseworkers they are working with have received kinship-specific training. Kinship caregivers are often contacted shortly after a child enters care and may need to make quick decisions and undergo expedited training, if available, in their State or jurisdiction. Providing preplacement supports, family-centered practice principles, cultural sensitivity, and a wide range of services can help families adjust to new circumstances and improve outcomes for children and families. Information Gateway's webpage, Cultural Competence in Kinship Care, offers resources to help caseworkers consider various aspects of cultural sensitivity when working with kinship families (<https://www.childwelfare.gov/topics/systemwide/cultural/kinship/>).

## Training Caseworkers

Caseworkers who are assigned kinship care cases should receive training in the specific skills and competencies required to work effectively with the kinship triad (parents, children, and the kinship caregivers), including how to do the following:

- Assess families and identify risk factors, safety factors, strengths, and needs
- Use family-centered practice to develop a plan that meets the needs of the child and the family
- Effectively address the challenges of kinship care using cultural sensitivity
- Locate and access the services available to kinship caregivers
- Navigate the Interstate Compact on the Placement of Children to get approval for placement with a relative identified out of state (for kinship foster care exclusively)
- Help caregivers manage stress and avoid burnout

The Annie E. Casey Foundation launched a five-part video series to help child welfare professionals working with kinship caregivers, including a discussion guide to inform program directors, supervisors, and trainers. The training, led by kinship care expert Joseph Crumbley, provides a variety of approaches, scripts, and sample dialogues for working with kinship families (<http://www.aecf.org/blog/engaging-kinship-caregivers-with-joseph-crumbley/>).

The Child Welfare Capacity Building Collaborative (CBC), a service of the Children’s Bureau, created an e-learning training module on placement stability for kinship care. The free online course, “Achieving Placement Stability,” includes a training assessment for kinship care. The course offers caseworkers an opportunity to work through common scenarios they may encounter when working with potential or current kinship families. To access the training, visit the My Learning section on the CBC website at <https://learn.childwelfare.gov/>.

CWLA produced a 12-hour training curriculum for purchase to help caseworkers collaborate with kinship caregivers to improve outcomes for child safety, well-being, and permanence. The training addresses legal, financial, physical/mental health, child behavior, school/education, family relationships, support services, and fair and equal treatment for the kinship family. *Collaborating With Kinship Caregivers: A Competency-Based Research to Practice Training Program for Child Welfare Workers and Their Supervisors* is available at <http://www.cwla.org/collaborating-with-kinship-caregivers/>.

*Traditions of Caring and Collaborating: Kinship Family Information, Support Groups, and Assessment* (<http://www.cwla.org/kinship-family-information-support-groups-assessment/>) is a CWLA course for purchase designed to bring caregivers together to learn new skills. It also helps agency staff assess the willingness and ability of kinship caregivers to protect and nurture children and work collaboratively with birth parents and other family members.

The Child Welfare Peer Kinship Network (<http://www.grandfamilies.org/Resources/Child-Welfare-Peer-Kinship-Network>), funded by the Annie E. Casey Foundation, helps public child welfare agencies explore best practices in kinship care through an interactive listserv and access to kinship-specific training webinars. Topics include kinship caregiver engagement, kinship treatment foster care (TFC), foster care licensing for kinship families, and kinship diversion.

The University of Maine offers an online “Certificate in Grandfamilies Leadership” for professionals and volunteers working with kinship caregivers (<https://mainecenteronaging.umaine.edu/education/kinshipcert/>).

## Training Caregivers

Many kinship caregivers take in children during or after a family crisis and have not had time to prepare for the role. They often have limited knowledge about the child welfare system or the resources available to them. Additionally, kinship caregivers often need to develop new skills to effectively raise emotionally abused and neglected children. Caregivers may also need training and guidance on how to best work with the children's parent(s) (who may be the caregiver's own child). Regardless of whether they are providing care inside or outside of the formal foster care system, kinship caregivers may have a greater need for services due to their age and restricted income levels—especially those who are caring for more than one child or sibling groups (Annie E. Casey Foundation, 2012b).

Kinship caregivers have many concerns, including the following:

- Financial security
- Preparing their home for incoming children (e.g., additional furniture or expanded living space)
- Children's behavioral and emotional needs from related trauma
- Decisions related to children's education and health care
- Disruption in family relationships
- Affordable child care and after-school care
- Interaction with the child welfare system

## Kinship Caregivers Receive Less Training Than Traditional Foster Parents

A study from the Carsey School of Public Policy at the University of New Hampshire compared kinship caregivers with nonrelative foster parents over a 6-month period. They found that the kinship caregivers were significantly less likely to have received training, used respite care, or participated in peer support groups (Walsh & Mattingly, 2014). This applied to kinship caregivers raising children both inside and outside the child welfare system and at all socioeconomic levels. Kinship caregivers outside the system had the lowest rate of training of all caregivers at just 16 percent, while 24 percent of kinship foster parents received training. Nonrelative foster parents received the highest rate of training at 71 percent. Kinship caregivers outside the system (7 percent) were also less likely to be involved with organized peer support groups than kinship caregivers inside the child welfare system (17 percent) or nonrelative foster parents (32 percent).

Kinship caregivers need to understand the impact of caregiving on their well-being and may benefit from tips on managing stress, personal health, and emotionally stability. Information Gateway provides related self-care guides on its Resources for Kinship Caregivers: Impact on Caregivers webpage (<https://www.childwelfare.gov/topics/outofhome/kinship/resourcesforcaregivers/impact/>).

Kinship caregivers—whether inside or outside the foster care system—may also need training on how to respond to emotional and behavioral challenges with trauma-informed care. TFC provides caregivers with skills for coping with challenging behaviors and complex health issues in children who have experienced trauma (Generations United, 2017). An evaluation of a kinship TFC program in Texas showed that 80 percent of participating children were able to remain stable with their relative caregivers. The study also estimated significant cost savings from kinship TFC, noting that to maintain one child in such care in Texas would cost approximately \$20,000 less per year than residential treatment (Generations United, 2017).

## Promoting Kinship TFC

The Family-Focused Treatment Association (FFTA) sponsored six State and county “summits” in 2014 and 2015 to promote kinship TFC, explore opportunities and barriers to implementing TFC in their jurisdictions, and identify children and families who might benefit from the kinship TFC approach.

FFTA acknowledges there are several barriers to setting up a kinship TFC approach, including licensing restrictions, financing structures that fail to encourage kinship TFC, and a treatment system designed for traditional foster care.

FFTA produced the *Kinship Treatment Foster Care Initiative Toolkit* as a resource for engaging and supporting relatives caring for children and youth with treatment needs, available at <https://formedfamiliesforward.org/images/Kinship-TFC-Toolkit.pdf>.

For more information, visit the FFTA website at [www.ffta.org](http://www.ffta.org) or the Bair Foundation Child and Family Ministries at [www.bair.org](http://www.bair.org).

There are several resources for training kinship caregivers, including the following:

- Introducing TSC-FC: A Trauma-Focused Curriculum for Caregivers, a free, online training designed to help caregivers understand how trauma affects behavior and family dynamics (<http://www.aecf.org/blog/introducing-tst-fc-a-trauma-focused-curriculum-for-caregivers/>)
- In-Service Training for Resource and Adoptive Parents and Kinship Caregivers, designed to give resource and adoptive parents the background and tools they need to help children with complex caregiving issues (<http://www.family.umaryland.edu/rpt/>)
- KEEP (Keeping Foster and Kin Parents Supported and Trained), a training program for caregivers of children ages 4–12 to provide effective tools for dealing with a child’s behavioral and emotional problems, rated as promising by the California Evidence-Based Clearinghouse for Child Welfare (<http://www.cebc4cw.org/program/keeping-foster-and-kin-parents-supported-and-trained/detailed>)
- Kinship Center Educational Institute, an organization that offers classes and custom training in both English and Spanish on kinship care, foster care, and adoption for parents and caregivers (<http://www.kinshipcenter.org/services/education-institute.html>)
- Technical assistance and training from Generations United, including webinars and access to a peer network (<http://www.gu.org/RESOURCES/Trainings.aspx>)

## Examples of State and Local Kinship Programs

There are many programs to promote kinship care, support caregivers, and raise awareness. Some are the result of Federal initiatives (e.g., Children’s Bureau grants) and others are community-based:

- **Arizona’s Kinship Navigator Project** (AzKN) is implemented through a 2012 Children’s Bureau award to Arizona’s Children Association. The project emphasizes outreach through its website (<http://arizonakinship.org>), community events, and “an office on wheels” in the form of two AzKN-purchased minivans that visit caregivers in rural areas and offer bilingual services to assist Spanish-speaking families. For more information, see the 2016 Children’s Bureau site visit report on this project (<https://www.childwelfare.gov/pubPDFs/azkinship.pdf>) or listen to a related podcast on the family group conference focus (<https://www.acf.hhs.gov/cb/resource/child-welfare-podcast-fgdm-implementing-fgc>).
- **California’s Kinship Support Service Program** (KSSP) is available to 20 California counties for kinship support services through grants awarded by the California Department of Social Services. Counties with 40 percent or more children in the custody of the child welfare agency and living with relatives were eligible to apply for KSSP funding. KSSP programs provide community-based family support services to help create supportive and stable family environments ([www.cdss.ca.gov/inforesources/Foster-Care/KinshipCare](http://www.cdss.ca.gov/inforesources/Foster-Care/KinshipCare)).
- **Connecticut’s Department of Children and Families** (DCF) made kinship care the presumptive placement for children removed from their parents’ care—and nonrelative care the exception— beginning in 2011. Between 2011 and 2015, the number of children living with kin jumped from 19 percent to 37 percent (Foster Family-based Treatment Association, 2015). In addition to collaborating with frontline staff, community providers, legislators, judicial staff, and peers from other States, several key reforms made this possible, including the following:
  - **Kinship process mapping.** DCF identified barriers to kinship care in each of the regional and local offices and took systemic steps to remove them where possible.
  - **Flexibility in caregiver licensing.** DCF streamlined the process for issuing licensing waivers for nonsafety issues, such as space requirements, income guidelines, or even a past criminal or child protective services history that has since been resolved. (Promoting a “shared-risk” environment, the DCF commissioner pledged to stand behind local kinship placement decisions when officials could provide supporting documentation.)
  - **Firewall to ensure kinship care is the first consideration.** To ensure there is a diligent search for any known relatives or family friends to care for children removed from their homes, local DCF offices are required to designate one individual to sign off on all initial nonkinship foster care placements.
  - **Improvements to the emergency placement process.** DCF streamlined the walk-through process to approve prospective kinship homes.
- **Tennessee’s Kinship Exception Request** is a statewide form that case managers must complete before making a nonkin placement, similar to Connecticut’s kin-first presumptive placement approach (ABA, ChildFocus, & Generations United, 2017).

- **Denver’s Department of Human Services** has created a firewall that requires caseworkers to call in requests for an out-of-home placement on a one-line, single point-of-entry system. The call results in a diligent search in the database for related family members within the first hour and a half, including a comprehensive background check. Denver DHS maintains a dedicated kinship support staff for conducting orientation, safety checks, abbreviated home inspections, and needs assessments. Kinship staff connect relative caregivers immediately with any services they might need and with the caseworker who stays on a case for its duration. The most requested services from kinship caregivers include financial assistance, day care, behavioral intervention, and crisis management (M. Scheuermann & M. Carson, personal communication, September 22, 2017). Denver DHS staff attribute their success with kinship placements—48 percent of children entering care are placed with kin compared with 30 percent statewide and nationally—to these measures.
- **Edgewood’s Kinship Support Network (KSN) Program** in San Francisco, CA, has various support groups led by kinship caregivers, including: a Spanish-language kinship caregiver support group; a quilting circle support group; and support groups connected to church communities through the city of San Francisco. Edgewood’s kinship programming includes trauma-informed training for kinship caregivers, educational workshops to help caregivers manage chronic disease, and family finding and kinship relative placements for transition-age youth to prevent homelessness ([www.ikinship.org](http://www.ikinship.org)). Edgewood was awarded a Children’s Bureau Kinship Navigator grant in 2009. The final report is available on the Children’s Bureau Discretionary Grants library (Family Connection Discretionary Grants/#90CF0025/[https://library.childwelfare.gov/cbgrants/ws/library/docs/cb\\_grants](https://library.childwelfare.gov/cbgrants/ws/library/docs/cb_grants)).
- **New York’s Office of Children and Family Services** funds 22 local kinship programs that serve 22 counties in New York with case management services (<https://ocfs.ny.gov/kinship/map.asp>) as well as the New York State Kinship Navigator, a statewide information, referral, and education program for kinship caregivers and professionals. The Kinship Navigator answers a help line to assist caregivers and professionals by providing information on financial assistance, legal information, referrals to community services, and educational forums. A directory of county resources displays kinship, legal, aging, youth, and other services that are available in each county. The Navigator also supports a website with over 50 cited legal fact sheets and a variety of online resource features, including online chat assistance and interactive educational videos. The project hosted a 2014 summit aimed at educating policymakers about the needs of kinship caregivers, resulting in the creation of a teen leadership program to help adolescents and their kinship caregivers with a variety of coming-of-age issues. It also led to a State proclamation recognizing September as Kinship Care Month. The site visit report is available at <https://www.childwelfare.gov/pubPDFs/nykinship.pdf>.
- **Northern Virginia Kinship Symposium** convenes kinship care experts and legal representatives from Northern Virginia jurisdictions to bring statewide attention to developments in kinship care and spread awareness about the need to support kinship caregivers. The third annual symposium, *Mobilizing Kinship: Valuing, Assessing and Supporting Families*, was held in September 2017 (L. Friedman, personal communication, October 23, 2017).

## Conclusion

When relatives or close friends take care of children who can no longer remain at home, those children experience less instability and a stronger sense of security, identity, and belonging than children who are placed in nonrelative foster care. Kinship care helps to maintain family culture, traditions, values, and goals and often connections to schools and communities as well. Agencies that welcome and treat kinship caregivers as partners and ensure they have access to supportive services are helping to provide children with the safety, permanency, and well-being that comes from being with family.

## Additional Resources

- Generations United is a national advocacy organization for policies and programs to help “grandfamilies”—kinship families in which children are being raised by grandparents or other family members—and promote intergenerational collaboration (<http://www.gu.org/>).
- Grandfacts provides State-specific factsheets containing information and contacts on public benefits, state laws, and resources for kinship caregivers (<http://www.grandfactsheets.org>).
- [Grandfamilies.org](http://www.grandfamilies.org) provides free access to a wide variety of resources that support grandfamilies; educate individuals about State kinship laws; and assist legislators, caregivers, attorneys, and policymakers about kinship support options, including a guide on raising children with disabilities.
- *Kinship Process Mapping: A Guide to Improving Practice in Kinship Care* (<http://www.aecf.org/resources/kinship-process-mapping-full/>) offers an outline for agencies to use in analyzing their kinship caregiver recruitment and supports.
- The National Foster Care and Adoption Directory (<https://www.childwelfare.gov/nfcad/>) is an Information Gateway listing of kinship care, foster care, and adoption support groups by state.
- The National Kinship Alliance for Children (<http://kinshipalliance.org/>) is a nonprofit information and referral network that supports kinship families.
- The National Kinship Care Listserv (<http://web.wnylc.com/cgi-bin/mailman/listinfo/kinship>) is a forum for professionals working with kinship caregivers to share information and resources.
- *The Grandkin Guide: Frequently Asked Questions and Answers for Relatives Raising Children* ([https://www.facesofvirginia.org/images/stories/documents/TheGrandKinGuide\\_lowres.pdf](https://www.facesofvirginia.org/images/stories/documents/TheGrandKinGuide_lowres.pdf)) explains what extended family members can expect when they are asked to step in and care for children, including information on the types of kinship care, the choices involved, and available support services.

- *Taking Care of Yourself: Tips for Kinship Care Providers* (<https://www.cssp.org/reform/strengtheningfamilies/2015/Self-Care-for-Kinship-Care-Providers.pdf>) is a tool to help relatives and fictive kin caring for a family member’s children identify their strengths, understand the impacts of trauma, engage in self-care, and avoid burnout.

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