Kinship Foster Care

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Welcome to CASCW Practice Notes

This is the Center for Advanced Studies in Child Welfare I's third issue of CASCW Practice Notes. The publication is designed to assist child welfare practitioners in connecting their practice with research findings. In its first year, Practice Notes will focus on areas of concern that relate to placement permanency. For this issue, we will look at the topic of relative foster care, also known as kinship care (the terms will be used interchangeably throughout the digest).

Benefits of Relative Foster Care:

Burdnell Wilson, D.; & Stukes Chipungu, S. (1996). From Introduction to special issue on kinship care. *Child Welfare*, 75 (5), 387 - 395.

- Enables children to live with persons whom they know and trust; strengthens families' ability to provide support
- Placements are characterized by fewer disruptions than non-kin foster care (from Davidson article -- click here for citation
- Reinforces children's sense of identity & self-esteem, which flows from knowing family history
- Facilitates children's connections to their siblings

Definitions and Context:

Formal Kinship Caregiver:

A person raising a relative's child within the child welfare system. The relationship can be by marriage, blood, or adoption and includes grandparents, siblings, stepparents, stepsiblings, nieces, nephews, uncles, or aunts. It can also be an important friend with whom the child has resided or with whom the child has significant contact.

Informal Kinship Care:

Arrangements made by families that do not involve the child welfare system.

Extensive placement with relatives has created a rapidly expanding segment of the child welfare system. When permanency plans are required, the state has indicated that relative care is a preferred option (MN Chapter 259.29). The advantages for children are many, including stability, permanency, and a lifelong tie to family networks. Relative care is another form of family preservation. In Minnesota, as in the rest of the nation, more than 1/3 of children in out-of-home care are living with grandparents or maternal aunts. The following options are available to relatives for income support:

- A child-only grant from MFIP-S (Minnesota Family Investment Plan) (formerly AFDC)
 which does not require an order of custody, only proof of the relationship (typically
 \$351/month, including food stamps).
- This does not apply to an "important friend." A child with health problems or severe physical or mental impairment may be eligible for SSI (Supplemental Security Income). The amount in 1998 is \$494/month.
- A child placed through a CHIPS petition makes the relative eligible to receive a foster care payment, providing the relative is licensed. In addition to the basic rate (\$430 -550/mo. based on childs age) there is a Difficulty of Care rate.
- An adoption assistance grant is available, when the child has "special needs." Again, this applies only to a relative.
- Relative custody assistance is provided to a relative who, through a court order, will have physical custody of the child. The grant is the same as an adoption assistance subsidy, available only to relatives.
- Consult your county regarding food stamps, WIC and emergency assistance. Health care is available through MN Care and M. A.

The following section features articles and other documents that provide strategies and guidelines for working with kinship caregivers.

Nisivoccia, D. (1996). Working with kinship foster families: Principles for practice. *Community Alternatives*, 8 (1), 1 - 21.

This article presents an overview of the development of kinship care in the U.S. and provides a set of guidelines for practitioners working with kinship families. Practice recommendations include:

- Recognize that kinship families are biological families and that they have an interest in providing stability and continuity to the children in their care
- Ethnic, class and culturally sensitive practice is crucial, especially as it relates to perception of the extended family and role
- Establish an eco-map with families in order to assess what systems make up a family's support network.
- Start where the kinship parent is. Recognize how intervention is an intrusion into a family's life and be sensitive to that. Try to connect on that basis.
- Understand the crisis nature of the kinship parenting and don't assume it is the operating norm of that parent.
- Facilitate the role adjustment for the kinship parent
- Recognize the importance of the birth parents
- Work together with family members to address oppressive forces in the family's and children's lives
- Encourage the kinship parent to become an active partner in planning for the child
- Remember that permanency is the objective, while recognizing that kinship families may view permanency differently than a child welfare agency

Mitchel, W.; Dale, M.L.; Tencza, B.A. & Tencza, C.B. (1994). A piece of the puzzle: Understanding substance abuse for family services (participant's guide). Florida Department of Health and Rehabilitative Services, Professional Development Centers and Florida International University Department of Social Work, Institute on Children and Families at Risk, p. 40. (This is a modified adaptation found in Bonecutter & Gleeson.)

Below are suggestions for working with families where substance abuse is present; these suggestions also provide a good checklist for practitioners working with families in various circumstances.

The Art of Relationship Building (with families)

- Engender hope
- Use some self-disclosure of commonalties
- Demonstrate warmth and emphasize positive motivation
- Communicate the attitude that the family's problem is of real importance
- Convey sensitivity to the family's feelings through voice tone and body language
- Match the person/family's pace of speech
- Validate the person's experience and perception of an event
- Attempt to engage and improve self-esteem by eliciting responses from family members and making positive comments about each family member
- Demonstrate a good sense of humor
- Focus on strengths more than weaknesses
- Be sensitive to the pace set by family members in working on problems, while placing the needs of the child first and focusing on permanency and safety
- Demonstrate awareness of cultural strengths and differences
- Facilitate empowerment by doing with, not for, focusing on person's own dreams and goals

This next section focuses on the service needs of kinship caregivers and points out some of the issues that have arisen regarding providing services to these families.

Davis, N.; & Chiancone, J. Research basics: The kinship care option: Applying research to practice. *Child Law Practice*, 15 (6).

Studies indicate that relative caregivers receive fewer services from child welfare agencies than other foster care placements.

Advocacy for relative caregivers is needed to insure that grandparents and other relatives providing care receive the services they need.

Below is a list of the service needs most frequently mentioned in current papers that address a comprehensive program to support relative caregivers.

An Editorial Comment from CASCW Director, Esther Wattenberg:

- Help to meet licensing requirements
- Availability of mental health services for children in relative care
- Full disclosure of income supports available
- Full disclosure of permanency options such as custody, adoption, and long-term foster care
- Assistance with sorting out relationships with birth parents
- Legal services
- Emergency assistance due to illness, eviction, or utility service cessation
- Support groups for kinship caregivers

Davidson, B. (1997). Service needs of relative caregivers: A qualitative analysis. Families in Society: The Journal of Contemporary Human Services, 78, 502 - 510.

This article reports on a qualitative study conducted with kinship caregiver families served by Lucas County Children Services in Toledo, Ohio.

This study interviews nine kinship caregiver families providing care for children under 18 who have an open file with Lucas County Children's Services. Half of the relatives interviewed were white and half were African American.

The study looked at (1) services needs, (2) impact of kinship care on the family system, and (3) the families' experiences with the children welfare system.

A majority of families indicated:

- specific needs such as household items, transportation, and other needs
- financial strain with the adjustment.
- a reliance on outside supports from family, friends or church community
- an overall positive experience with child welfare services, but a frustration with lack of communication
- an interest that children's services develop an educational process for relatives regarding the system
- that a kinship advisory council made up of community members that could assist in developing policy for kinship caregivers would be useful
- that caseworker home visits were "necessary and not intrusive"

One kinship caregiver stated:

"I think there should be a support group for relatives where we can learn about the system...We need some kind of way to inform relatives of the timeliness, types of meetings, and outcomes of the cases so we can prepare for the future."

Given that a disproportionately high percentage of relative care families in the United States are families of color (which is true of child welfare service recipients in general), it is crucial that practitioners working with kinship and relative foster care families are familiar with the strengths and traditions of these communities.

Robert Hill's research (1972; 1997) (found in Bonecutter & Gleeson) revealed the following strengths of African American families:

Strengths and Traditions of African American Families:

Excerpted from Bonecutter & Gleeson, Achieving Permanency for Children in Kinship Foster Care: A Training Manual.

- Strong respect for elders and a tradition of caring for elders and children
- High value placed on children as gifts from God and the continuity of Black people
- High value placed on education and willingness to sacrifice to educate the younger generation
- Work/achievement orientation as a pro-social behavior and a way to uplift self and others
- Extended family relationships that provide its members with a source of connection, attachment, validation, worth, recognition, respect, and legitimacy
- Elasticity of boundaries and flexibility of roles that allows the family to meet the needs of its members, particularly under conditions of hardship; expresses the value orientation of communality, kinship obligation, and male-female equality.
- Value placed on "mutual aid", a reciprocal effort made by family members to pool resources necessary to sustain and move a family forward.
- A tradition of self-help and practice of cooperation and sharing.

The following section is excerpted from a chapter by Bill J. Burgess of the Native American Research Associates, Inc. in Lawrence, Kansas.

Burgess, B.J. (1980). Parenting in the Native-American community, in M.D. Fantini & R. Cardenas (eds.), Parenting in a Multi-Cultural Society. New York, Longman, pp. 63-73.

The author begins the chapter by cautioning the reader to be aware that making generalizations about Native Americans can often distort the reality and characteristics of specific Native American communities. Information from this chapter should be read with this in mind. Burgess points out that the practices stated below are based on "the typical and traditional rural-reservation situation."

The illustrations of some of the practices below are valued by most societies, but it is believed that they occur more frequently in the Native American community than in the non-Native American community. Some of the more significant characteristic elements that are visible in the Native American community follow (Burgess, 1980, p. 66):

- Children--from birth--are regarded as important units of the family and heirs to its concerns and belongings. Children are considered...by Native Americans...as more important than material possessions.
- Songs and lullables sung to children by the parent and grandparents carry messages of hope and aspiration, the appreciation of beauty, sharing, and physical strength (so as to be of service to each other).
- Families engage only in those social activities which include their children; if the children cannot go, no one goes.
- Native American children are seldom, if ever, struck by an adult: not parents, uncles, aunts...no adults.
- Considerable parental time and effort is devoted to making items for children to play with, or operate, or use when participating in popular activities and ceremonies (costumes for special dances, etc.)
- Talking loudly, especially while correcting children, is highly disapproved of.
- Artifacts (baskets, rugs, etc.) are made with purposeful imperfections, as a lesson to children that no one is perfect; we all make mistakes, and hence, censure and punishment are very minimal.
- Respectfulness is taught by example as well as by precept. Respect is paid to a large number of worthy objects...parents, grandparents, members of the extended family, elderly people, various totem animals and objects, and various abstractions such as natural beauty and nature, dignity, and modesty.
- Competition is considered acceptable as long as the object is not to get the best of (hurt) someone (Burgess, 1980, p. 67).

This next section provides suggestions to practitioners in the process of assessing a relative caregiver placement.

Davis, N.; & Chiancone, J. (1997). Research basics: The kinship care option: Applying research to practice. *Child Law Practice*, 15 (6), 90 - 94.

Questions the child welfare agency should ask when considering kinship placement:

- Did the proposed caregiver volunteer to provide care, rather than having to be asked?
 Why or why not?
- Do the parent, the child, and other family members favor choosing this person? Why or why not?
- How strong is the relationship between the relative and the child?
- How strong is the relationship between the relative and the parents?
- Are the parent and the relative in agreement with the conditions, duration, and responsibilities of the planned arrangement?
- Is the proposed caregiver healthy enough to care for the child?
- Can the proposed caregiver offer at least minimal financial stability, either individually or in cooperation with other family members or other sources?
- If there is a sibling group, will siblings be able to remain together, in close proximity to each other, or in regular contact?

- Does the planned arrangement permit the child to stay in a familiar neighborhood, school, or family community?
- Does the proposed kinship home meet basic safety and privacy standards?
- Is the relative aware of, and interested in, the basics of good child care?
- Can the relative, with or without assistance, provide a healthy, safe, and wholesome living environment for the child?
- What is the proposed caregiver's attitude toward the child?
- Will this kinship placement ease the child's trauma of being separated from the parents?
- Will the relative provide needed emotional, physical, social, other support to the child?
- Can and will the relative protect the child from: further abuse or neglect? retaliation for disclosing maltreatment? pressure to recant?
- Does the relative recognize the need for the child not to be placed with the parent at this time?
- Will the relative follow any prescribed rules for visitation or care?
- Will the relationship between the parent and relative reduce or contribute to the child's stress?

Considerations for Assessing a Family's Decision-Making

Excerpts from Breunlin, D.; Schwartz, R.; & MacKune Karrer, B. (1992). *Metaframeworks*. San Francisco, CA: Jossey-Bass. (Found in Bonecutter & Gleeson.)

Below, the authors make recommendations of questions for the practitioner to ask him or herself when in the process of setting up a family meeting for the purpose of determining a child's placement.

BALANCE

- How have critical decisions been made in this family/network in the past?
- Who in the biological family, extended family, kinship network participated?
- Did other informal and/or formal systems participate? (church, school, courts, child welfare)
- What is the nature of the family's/network's relationship with its environment?

LEADERSHIP

- Authority issues: Who has the authority to make decisions? Is their authority sanctioned at all levels of the family/network and environment?
- Persons within the kinship network?
- Persons outside the kinship network?
- Where is the leadership located in the family?
- Type of leadership expressed: instrumental (task oriented), affective (social-emotional), etc.
- Who deals with extreme positions or polarizations among members of the family/kinship network?

HARMONY

• What does the family/network perceive as constraints/obstacles to decision-making?

- Splits, feuds among family/network members?
- Loyalties or legacies that "automatically" rule out certain options?
- How do members feel about the perceived authority for decision-making regarding the family/network and its members?

This next and final section looks at considerations for permanent placement options related to relative care and concludes with a list of kinship care resources.

Johnson-Bonecutter, F.; & Gleeson, J.P. Achieving permanency for children in kinship foster care: A training manual. Chicago: Jane Adams School of Social Work.

In this manual, the authors focus on how to achieve permanency through relative care, and they use the family meeting as a primary tool for accomplishing this goal. Below are some of their findings regarding characteristics of the process in successful and unsuccessful adoptions with relatives.

Apparently "Successful" Adoptions:

- involvement of many members of the child's kinship system, including both maternal and paternal relatives, in decision-making and planning
- creative re-definition of family roles
- · facilitating informed decision-making
- a long-term view of child-rearing

"Failed" kinship adoptions are characterized by:

- little involvement of the members of the child's kinship system in planning and decisionmaking
- the caseworker's goal of adoption took precedence over the family's decision-making process
- inattention to lifetime needs of the child with a focus on shorter term goals for childrearing

As the points above suggest, the authors recommend that caseworkers involve as many members of the family system as possible as early as possible in the decision-making process regarding a child's placement and long-term care.

Relative Caregiver Resources

Johnson-Bonecutter, F.; & Gleeson, J.P. (1997). Achieving permanency for children in kinship foster care: A training manual. Chicago, IL: Jane Addams College of Social Work, University of Illinois.

The authors of this comprehensive manual suggest practice principles and provide a practice model for working with kinship caregivers. This excellent resource contains a section on relevant policy, preparing for a family meeting, and working with families experiencing chemical

dependency. Excerpts from the manual are found throughout this issue of CASCW Practice Notes. The manual includes a set of videotapes depicting preparation and execution of a family meeting.

To receive a copy, send your request to Jim Gleeson at Jane Addams College of Social Work (MC 309), 1040 West Harrison Street, Chicago, IL 60607-7134; or fax a request to 312-996-2770. Include a mailing address and day phone number on your request. A limited number of complimentary copies are available.

Beeman, S.; Wattenberg, E.; Boisen, L.; & Bullerdick, S. (1996). Kinship foster care in Minnesota: A study of three counties. Minneapolis: Center for Advanced Studies in Child Welfare, University of Minnesota School of Social Work.

This report to the Department of Human Services looks at the status of kinship foster care in Minnesota between 1994 & 1996. It provides county-by-county data on kinship care as well as an analysis of that data. The full report or executive summary are available at the CASCW office or via on-line request using our publication order form. Use the on-line form or call CASCW at (612) 626-8202 or write CASCW, SSW, U of M, 425 Ford, 224 Church St. S.E., Minneapolis, MN 55455.

Beeman, S.; & Boisen, L. (in press). Child welfare professionals' attitudes toward kinship foster care. Child Welfare.

This article reports on a survey of 259 urban, metropolitan, and rural child welfare professionals about their perceptions of kinship foster care. Most professionals had generally positive perceptions of kinship foster parents and kinship foster care. They believed that kin were motivated to provide care by familial obligations rather than money, that they were competent in foster parenting, and that children were better off being placed with kin than with nonkin. However, they believed that kin were most difficult to supervise and that the agency needed to make changes in practice and policy to accommodate kin. Differences between Caucasian workers and workers of color are reported. [Quoted from the article abstract.]

Crumbley, J.; & Little, R.L. (eds.) (1997). Relatives raising children: An overview of kinship care. Washington, DC: Child Welfare League of America Press.

This book provides extensive practical information for services providers working with kinship caregivers. It focuses on role changes for family members providing relative foster care and offers information to practitioners on how to facilitate and support these changes in roles. The authors discuss clinical issues that arise around relative care, provides intervention strategies and includes program and policy recommendations.

Legal Aid Society of Minneapolis & Lutheran Social Services of Minnesota (1995). Grandparent resource manual. Minneapolis: Legal Aid Society.

This manual is prepared for grandparents who are long-term caregivers for their grandchildren. It provides relevant legal information , and an extensive list of local, state and national services and resources available to kinship caregivers. An updated version, entitled Kinship Caregiver Manual, will be available in June 1998, at Lutheran Social Services of Minneapolis, 2414 Park Avenue, Minneapolis, MN 55404, (612) 879-5351; or through the Legal Aid Society of Minneapolis, (612) 827-3774.

Minnesota Kinship Caregivers Association is a statewide organization whose purpose is to be a voice and a resource for kinship caregivers. To contact the organization, write to: Minnesota Kinship Caregivers Association, 501 East 45th Street, Minneapolis, MN 55409.

Wilhelmus, M. (1998). Mediation in kinship care: Another step in the provision of culturally relevant child welfare services. Social Work, 43 (2), 117 - 126.

As an ethnocentrically designed children welfare system grapples with how to best incorporate kinship care into its array of services, conflicts between kinship caregivers and the foster care system have arisen. This article points to mediation as a possible approach to facilitate social workers' efforts of striving to achieve culturally relevant services.

Contributors

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