

# CHILD WELFARE IMPROVEMENT TASK FORCE

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### Hon. Gregory C. Pittman

Chief Judge  
14<sup>th</sup> Circuit & 61<sup>st</sup> Probate Court  
Muskegon County

### Michael E. Williams

President & Chief Executive  
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## Recommendations from the Michigan Child Welfare Improvement Task force: Increasing Prevalence, Support Stability, and Outcomes for Children Placed with Kin

### The Challenge

Too often, children entering out-of-home care in the child welfare system are placed with strangers in non-kin settings. Yet, evidence demonstrates significant benefits of kinship care, e.g., placements with relatives (family), including enhanced placement stability, positive identity formation, improved behavioral outcomes, and preservation of sibling ties. Youth in kinship placements are more likely to graduate from high school than their peers in traditional foster care. The evidence is clear that kinship placements offering a range of supports for children and kin are more likely to be stable and successful.

- As of January 2022, 9,991 Michigan children were in out-of-home placements (foster care), among whom 52.9% were placed with family members (kin).
- In Michigan's Business Service Center 3 (see map), that number is 46.5% of the total children placed and only 40.1% of Black/African American children.
- Like many states, Michigan's counties vary in the proportion of children placed with kin, and in racial/ethnic disparities in placement. (See appendices for data on kinship placements.)

### Barriers & Potential Solutions

Kin cannot care for family unless they know their relative is about to be placed *and* that they may qualify as a kinship home. The requirements are unclear and the process to become a licensed foster parent is long, burdensome, and intrusive. This lack of clarity is a barrier to kinship care.

Families of color can be reluctant to invite the authorities into their homes and may believe they lack the resources and supports to take in their young relative. Their historical experiences with child welfare and law enforcement can lead to mistrust and fear of unintended consequences.

# CHILD WELFARE IMPROVEMENT T A S K F R C E

## The Request

**Total 1 Year Funding Requested: \$606,240**

The Michigan Child Welfare Improvement Task Force (MCWITF) has reviewed MDHHS efforts and its plans to address this. We believe that with strategic investment in the two projects described below, MDHHS can significantly increase the number of children placed with kin. Combined with kinship supports, Family Finding may increase the number of children placed with kin and their stability and outcomes.

### Family Finding Pilot

MDHHS will pilot a Family Finding program in Muskegon County. This approach centers around a concerted family search effort and engagement process. Muskegon will serve as the first MI site in which staff are trained in the effort; monitoring will determine whether the effort is associated with an increase in the proportion of kinship placements. Two new staff members.

**Total 1 Year Funding Requested: \$313,240**

### Kinship Advisory Council (KAC)

The KAC advises the MDHHS on issues related to kinship, including identification, licensing, and the needs of kinship caregivers and children in their care. We recommend a dedicated, full-time position to staff the KAC. This staff member will assist the KAC in developing plans and means for decision making, data analysis, and related efforts to inform and monitor related initiatives. Staff will consult with national experts and conduct a kinship service gap analysis. Also included are outreach and education events (conference, public awareness campaign) to raise awareness of kinship care statewide. Full time staff member.

**Total 1 Year Funding Requested: \$293,000**

States with high rates of kinship placement have implemented a range of strategies to reduce barriers:

- Move to kin-preference policies at the legislative, regulatory, and agency levels
- Modify practices to prioritize relative placements and reduce administrative burden to kin
- Engage in concerted efforts to locate kin and promote kinship care
- Create a culture of kinship, employing family finding initiatives, and assign dedicated kinship staff

The Michigan Child Welfare Improvement Task Force recommends providing the above-noted resources for Kinship Care support and a Family Finding Pilot. These recommendations are aligned with evidence-based efforts and national best practices to address the barriers to placing children with family.

### Expected Outcomes

As a result of these investments, we expect to see the following outputs and outcomes:

Family Finding Pilot	Kinship Advisory Council
Output #1: Increased in the number prospective family members identified per child	Output #1: Increased statewide participation in kinship advisory council (# members participating)
Output #2: Develop strategy to reliably measure well-being.	Output #2: Kinship service gap analysis (report)
Outcome #1: Increase in # and % of kinship placements, overall and within racial subgroups (Black, Latinx, Indigenous, and Multi-racial Families)	Output #3: Products of public awareness campaign to increase awareness of/opportunity for kinship care
Outcome #2: Higher placement stability among children placed with kin	Outcome #1: Increased public awareness of kinship as an option.

# CHILD WELFARE IMPROVEMENT T A S K F R C E

Outcome #3: Kinship placements will result in higher well-being

Outcome #2: Increased access to tailored supports among kinship providers (in response to gap analysis)

The Task Force recommends consistent monitoring of these outputs and outcomes, specifically that MDHHS provides placement data and reports from the Kinship Advisory Committee. The appendices contain reference materials about national and State trends in kinship care and can be used to inform goal setting. In the future, the MCWITF will recommend additional actions and progress indicators and will be pleased to share those. The MCWITF is pleased to work with MDHHS to define and refine progress indicators, review quarterly progress reports, and advise further efforts.

Thank you for your consideration of these proposals, please reach out to us if you have any questions or concerns that we may clarify for you.

Respectfully Submitted,

Hon. Gregory C. Pittman  
Chief Judge, 14<sup>th</sup> Circuit Court and 61<sup>st</sup> Probate Court  
Muskegon County

Michael E. Williams  
President and Chief Executive Officer  
Orchards Children’s Services, Inc.  
Wayne County

Co-Chairs, Michigan Child Welfare Improvement Task Force

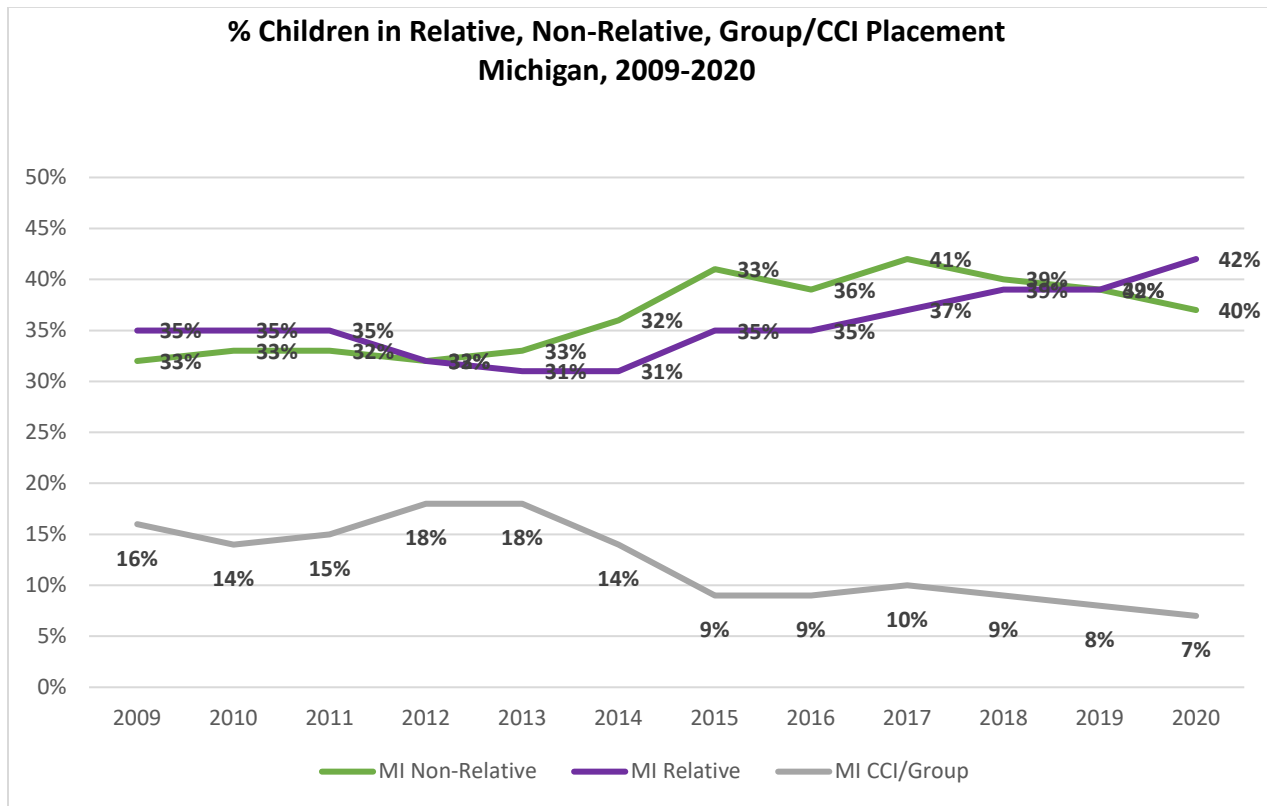
# CHILD WELFARE IMPROVEMENT TASK FORCE

**Figure 1: Michigan Data Trends, Placement Type**

The figure below shows the percent of Michigan children who were in relative, non-relative, or group/CCI settings on September 30 of the reporting year, for years 2009-2020. 2020 was the most recent year available for this analysis.

Source: Adoption and Foster Care Analysis and Reporting Data (AFCARS), Children's Bureau, Administration for Children, Youth and Families, US Department of Health & Human Services

Figure 1. Percent of Children in Relative, Non-Relative, Group/CCI Placement, Michigan 2009-2020



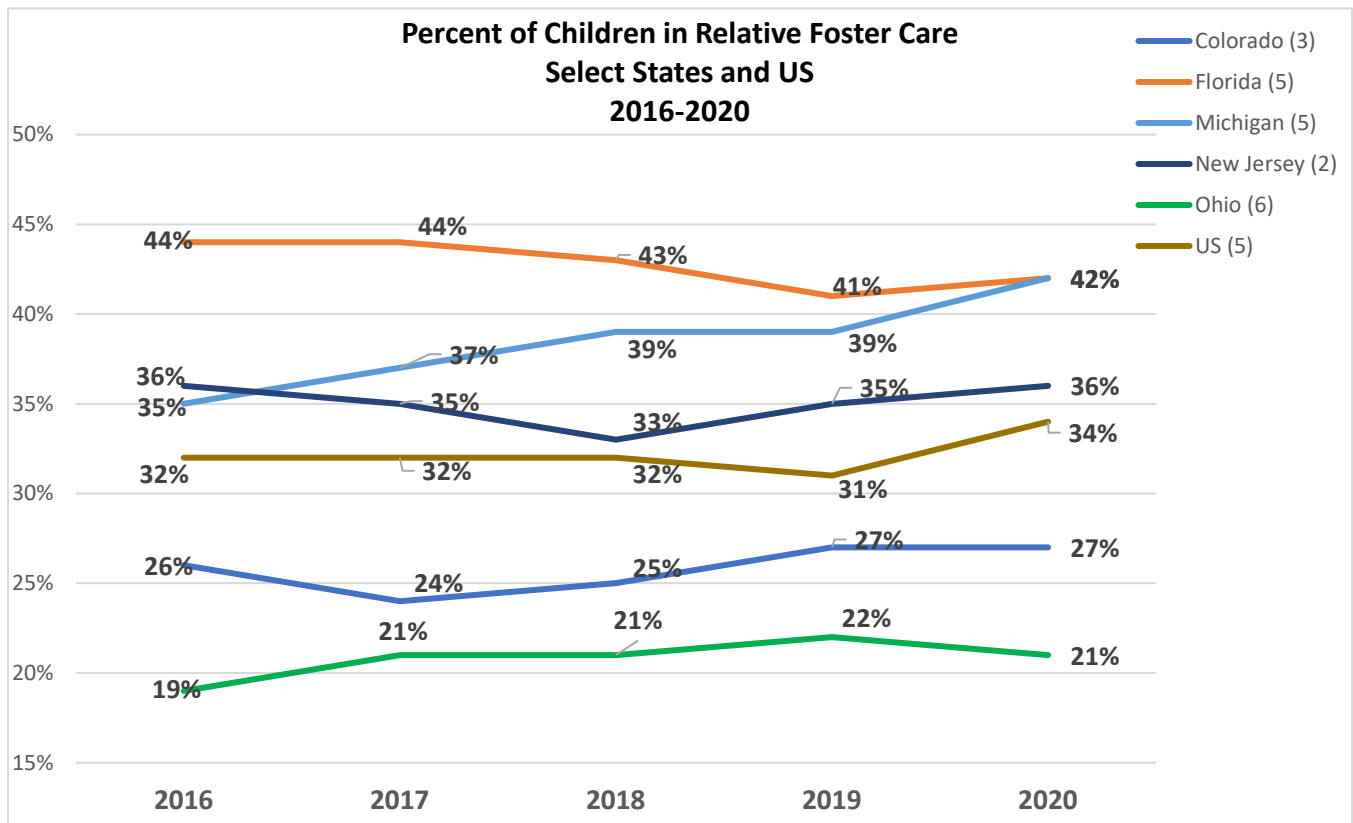
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**Figure 2: Multi-State Trends of Children in Relative Foster Care**

The figure below shows the percent of children in foster care with a relative for Colorado, Florida, Michigan, New Jersey, Ohio, and the United States overall for 2016 to 2020. 2020 was the most recent year available for this analysis.

Source: Adoption and Foster Care Analysis and Reporting Data (AFCARS), Children's Bureau, Administration for Children, Youth and Families, US Department of Health & Human Services

*Figure 2. Percent of Children in Relative Foster Care, Select States and the United States, 2016-2020*



(#) The number in parentheses after the state name indicates the rate of children in foster care per 1,000.

# CHILD WELFARE IMPROVEMENT TASK FORCE

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## Appendices

*The following documents are included here to serve as evidence to support the use of the initiatives proposed here.*

### **Appendix 1**

The Campbell Collaboration Campbell Plain Language Summary, *The health and well-being of children placed in kinship care is better than that of children in foster care*, Center for Evidence and Implementation, 2016

### **Appendix 2**

Strong Families Strategy Brief, *How Can Guardianship Be Better Utilized to Promote Permanency and Well-Being*, Casey Family Programs, 2021

### **Appendix 3**

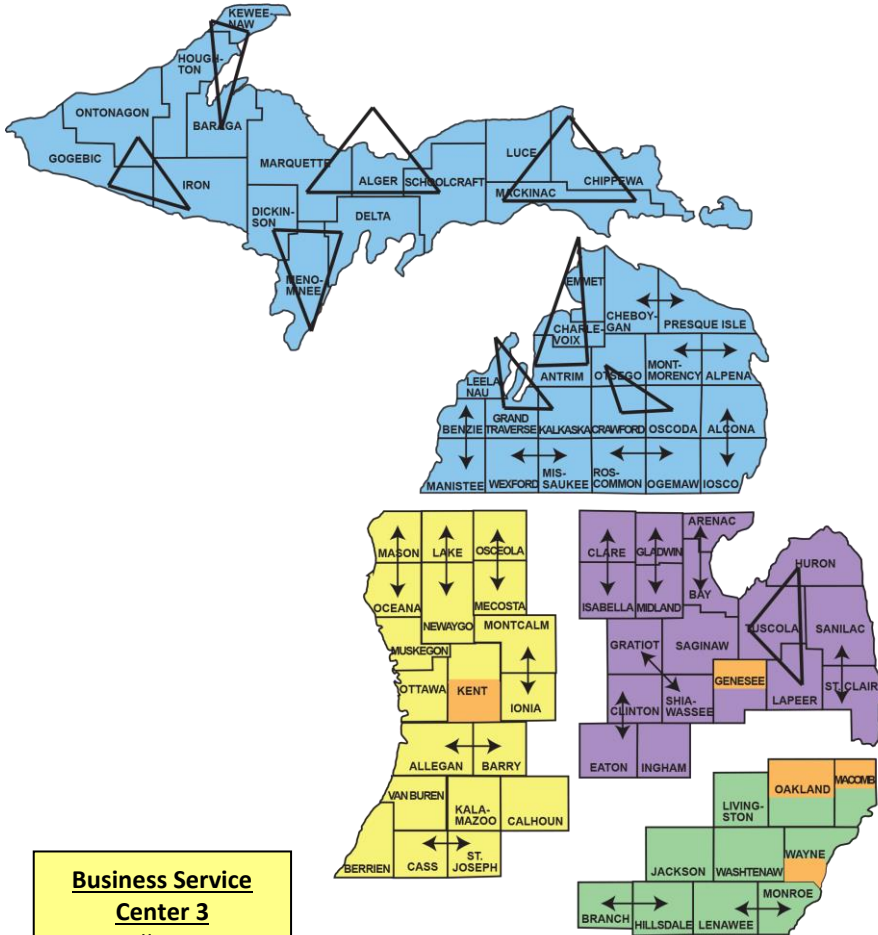
Education Fact Sheet, *Education Outcomes Among Youth in Kinship Care and Foster Care in Washington State*, Washington State Department of Children, Youth, and Families, 2018

### **Appendix 4**

Issues for Michigan's Children, *Critical Issues in Foster Care: Kinship Caregivers*, Michigan's Children 2019

# Michigan Department of Health & Human Services

## Business Services Centers



### Business Service

#### Center 1

Luther Lovell  
Director  
231-527-5120

**Gogebic-Ontonagon-Iron:** Scott Parrott  
**Keweenaw-Houghton-Baraga:** Matt Yohe  
**Marquette-Alger-Schoolcraft:** Jamie Lemay  
**Dickinson-Delta-Menominee:** Mark Kwarciany  
**Luce-Chippewa-Mackinac:** Lisa Davis  
**Emmet-Charlevoix-Antrim:** Maureen Clore  
**Cheboygan-Presque Isle:** Julie Waldron  
**Montmorency-Alpena:** Tina Smigelski  
**Otsego-Crawford-Oscoda:** Jody Schlaufman  
**Leelanau-Gr. Traverse-Kalkaska:** Barb LaRue  
**Benzie-Manistee:** Jennifer Savage  
**Wexford-Missaukee:** Carey Adrianse  
**Alcona-Iosco:** Mark Jordan, Acting  
**Ogemaw-Roscommon:** Kara Mularz

### Business Service

#### Center 2

Shelly Marner  
Director  
989-430-7117

**Isabella-Clare:** Antoinette Prabucki  
**Gladwin-Midland:** Brian Millikin  
**Arenac-Bay:** Kathleen Sperling  
**Gratiot-Shiawassee:** Alison Morrison  
**Saginaw:** Jennifer Shores  
**Huron-Tuscola-Lapeer:** Karen Southgate  
**Sanilac-St. Clair:** Stella Daniels  
**Clinton-Eaton:** Stacy Houghtaling  
**Ingham – CW:** Carol Kehoe  
**Ingham – Cash:** SuAlyn Holbrook  
**Genesee – Cash:** Sandi Mose

### Business Service

#### Center 3

Danielle Martin  
Director  
231-492-7939

**Kent County – Cash:** Tracey Fountain  
**Mason-Oceana:** Janet Vyse-Staszak  
**Lake-Newaygo:** Lori Schultz  
**Osceola-Mecosta:** Jennifer Schmidt  
**Muskegon:** Donata Kidd  
**Ottawa:** Kendra Spanjer  
**Montcalm-Ionia:** Michelle Seigo  
**Allegan-Barry:** K. Noelle Bair, Acting  
**Van Buren:** Eleanor Marquis, Acting  
**Berrien:** Emersond Jean-Baptiste, Acting  
**Kalamazoo:** Lenier Holston, Acting  
**Cass-St. Joseph:** Charles Rose  
**Calhoun:** Shaun Culp

### Business Service

#### Center 4

Doug Williams  
Director  
248-972-9121

**Oakland – Cash:** Belinda Arbogast  
**Macomb – Cash:** Sandra Cheatem-Dooley  
**Wayne – Cash:** Dwayne Haywood  
**Livingston:** Ahmad Sabbagh  
**Washtenaw:** Renee Adorjan  
**Jackson:** Zoe Lyons  
**Branch-Hillsdale:** Laura Nye  
**Lenawee-Monroe:** Linda Needham

### BSC 5 – Child Welfare Programs

#### Jennifer Wrayno, Director

313-456-3629

**Genesee Child Welfare:** Michael Milks  
**Kent Child Welfare:** Savator Selden-Johnson  
**Macomb Child Welfare:** Kim Borja  
**Oakland Child Welfare:** Tom Scheuer  
**Wayne Child Welfare:** Lynette Wright

# The health and well-being of children placed in kinship care is better than that of children in foster care



*Children in kinship care have better behavioural and mental health than children in foster care*

#### **What is the aim of this review?**

This Campbell systematic review examines whether kinship care is more effective than foster care in ensuring the safety, permanency and wellbeing of children removed from their home for maltreatment. The review summarizes findings from 102 studies involving 666,615 children. 71 of these studies were included in meta-analyses.

The behavioural and mental health, and the well-being of children placed in kinship care is better than that of children placed in foster care. Children in kinship care experience fewer placement disruptions and incidents of institutional abuse. The likelihood that guardianship is awarded to relatives is higher for children in kinship care compared to foster care.

There are no differences between kinship and foster care for the rates of reunification with birth parents, the length of stay in placement, children's educational attainment, the strength of family relations or the degree to which developmental and physician services are utilised. However, children in foster care are more likely to utilise mental health services and to be adopted, which removes any involvement of their birth parents in their upbringing.

#### **What did the review study?**

Kinship care - the placement of children with a family related to the child - is increasingly utilised in many Western countries as an alternative to placing children who have been maltreated in residential settings or with unrelated foster families.

This review examines the effect of kinship care compared to foster care on the safety, permanency and well-being of children removed from their home for maltreatment. Outcomes include children's behavioural health, mental health, placement stability and permanency, educational attainment, family relations, service utilisation, and re-abuse.

#### **What studies are included?**

Studies included in this review compare data on the safety, permanency and well-being of children placed in kinship care with data for children placed in foster care.

The review includes 102 studies, all of which were controlled experimental or quasi-experimental



#### How up-to-date is this review?

This review includes studies published between March 2007 and March 2011. It was published on March 3, 2014.

#### What is the Campbell Collaboration?

The Campbell Collaboration is an international, voluntary, non-profit research network that publishes systematic reviews. We summarise and evaluate the quality of evidence about programmes in the social and behavioural sciences. Our aim is to help people make better choices and better policy decisions.

#### About this summary

This summary was prepared by Bianca Albers (Centre for Evidence and Implementation, Save the Children Australia) based on the Campbell Systematic Review 2014: 2 'Kinship Care for the Safety, Permanency, and Well-Being of Children Removed from the Home for Maltreatment: A Systematic Review' by Marc Winokur, Amy Holtan, and Keri E. Batchelder (DOI 10.4073/csr.2014.2). Anne Mellbye (R-BUP) designed the summary, which was edited and produced by Tanya Kristiansen (Campbell Collaboration).



studies: 89 of were conducted in the U.S., and the remainder in Spain, the Netherlands, Norway, Ireland, United Kingdom, Israel, Sweden and Australia.

#### Is kinship care more effective than foster care in ensuring the safety, permanency and well-being of children removed from their home for maltreatment?

Children in kinship care have better behavioural and mental health than children in foster care, i.e. fewer internalising and externalising behaviours, better adaptive behaviours, fewer psychiatric disorders and better emotional health. They also experience greater stability and permanency in their placement and suffer from less institutional abuse than children in foster care. Also, the chance of relatives being awarded guardianship is greater for children in kinship care than for those in foster care.

Children in foster care are more likely to be adopted than children in kinship care, and they utilise mental health services to a greater degree than children in kinship care.

No differences between children in kinship and in foster care are found for the utilisation of other public services than mental health services (i.e. developmental services, or physician services), or for educational attainment, the rate of reunification with birth parents, or for the strength of their relations and attachment to their family.

Some of the findings are context specific, notably the lesser support which may be given to kinship carers compared to foster carers, and whether permanency of the kinship or foster arrangement, adoption or reunification is the preferred end goal.

#### What do the findings in this review mean?

Kinship care is a viable option for the children that need to be removed from the home for maltreatment. However, policy issues remain to balance the cost-effectiveness of kinship care with a possible need for increased levels of caseworker involvement and service delivery.

A considerable number of the included studies showed weaknesses in their methodologies and designs. There is a need to conduct more high quality quantitative studies of the effects of kinship care based on robust longitudinal designs and psychometrically sound instruments.



STRATEGY BRIEF

# STRONG FAMILIES

## How can guardianship be better utilized to **promote permanency and well-being?**

Tania never had met her brother's daughter, Naomi, when she found out the 4-year-old had been placed in foster care.<sup>1</sup> A single mother with one adult son, Tania recently accepted a promotion at work and had not been thinking about raising another child. Nevertheless, she felt called to reach out to Naomi. The two bonded instantly and Tania became Naomi's foster parent, later becoming her permanent guardian.

Naomi, now 8, is one of about [2.7 million children](#) who live with grandparents, aunts and uncles, other relatives, or close family friends (collectively referred to as *kin*). The vast majority of these kin support their families outside of the child welfare system. Two [primary goals](#) have emerged to improve the well-being of children: (1) reduce the need for formal intervention with the child welfare system through primary prevention, and (2) keep children connected to their extended families and communities when removal from the home may be necessary. Guardianship, as part of a strong [kin-first](#) continuum, can support both of these goals. This brief provides an overview of the different types of guardianship arrangements, shares the benefits of placing children with kin, and offers some considerations for improving the use of guardianship as a permanent placement option for children.<sup>2</sup>



# How can guardianship be better utilized to promote permanency and well-being?

## A range of definitions

When children are removed from their families, federal law requires they be placed in the [least restrictive, most family-like setting](#) possible, and placement with kin is considered less restrictive than non-kin foster care. Guardianship practice and policy is complex, given the inconsistent definitions and approaches across the country and whether guardianship is obtained as an exit from child welfare or privately without child welfare involvement.

Definitions of guardianship and terms for guardianship orders [vary by state](#). Most states use the term *guardianship*, while others use the term *legal custody*, and some use both depending on circumstances. At a minimum, guardians in all states provide care and protection, and are able to make decisions about schooling and routine medical care. Guardianships can be obtained privately outside of child welfare system involvement or as a way to exit the foster care system. To exit the system and obtain monthly assistance through federal Guardianship Assistance Programs (GAP), a child needs to have been living with a licensed kinship foster parent for six months before guardianship can be considered a permanent placement.<sup>3</sup> States [vary in their monthly subsidies](#) to guardians and in policies on who can be considered a guardian. As of 2018, [11 states](#) did not include fictive kin in their definition of relative for purposes of GAP (fictive kin are close family friends who are not related by blood).

## Positive impact

Guardianship provides numerous benefits to children and families, including:

**Connection to kin:** Guardianship offers children the stability of a permanent home while maintaining connections to family or fictive kin. Because

guardianship does not sever parental rights and responsibilities, it can provide permanency when [adoption](#) and [reunification](#) are not feasible, and it allows for continued bonds between children and their birth families. As such, guardianship is a critical option for children who do not want to sever ties to their birth family, for caregivers who do not want to legally change their relationship to the child and become their “parents,” and for birth parents who want to maintain connections to their children but may be unable to care for them due to illness or disability. Further, guardianship can promote permanency in communities where [termination of parental rights](#) violates cultural norms.

For Tania’s niece Naomi, guardianship allowed for the stability of permanency without losing connections with her birth mother. Naomi and her mother recently spoke on FaceTime. “Naomi was so happy,” Tania said. “She was so, so happy. Naomi loves her mom.”

**Permanency:** The [benefits of placement with kin caregivers](#) are well understood and, while more research is needed, evidence suggests that subsidized guardianship (GAP) leads to improved permanency. An [evaluation](#) of a federal subsidized guardianship waiver demonstration project in Illinois (conducted before GAP became a federally funded option for all states) found that subsidized guardianship not only increased the percentage of children achieving permanency, it also sped up the rate of permanency, particularly for children ages 6 to 13.

**Well-being:** The vast majority of children (92%) who were in a [subsidized guardianship](#) in Illinois felt “like part of the family” most or all of the time. Another [evaluation](#) of subsidized guardianship as part of child welfare waiver demonstrations found that children in guardianship appreciated “shedding the social stigma”

Our favorite phrase is, ‘We’d rather have a kid sleep on grandma’s couch than in a bed at a stranger’s home.’

— PAM BOOKHART,

SOCIAL WORKER SUPERVISOR, CATAWBA COUNTY GOVERNMENT, N.C.

# How can guardianship be better utilized to promote permanency and well-being?

of being in foster care, increased stability, and greater freedom to participate in normal childhood activities.

**Financial supports for caregivers:** Compared to non-kin foster parents, [kin caregivers](#) are generally older, less educated, more likely to have chronic health issues or disabilities, and more likely to live in single-parent households. The extra expenses incurred caring for children can be difficult for kin caregivers to manage. Providing subsidies to guardians helps them afford to care for children long-term. Further, GAP allows children to maintain eligibility for Medicaid, which is an important benefit for families.

**Cost savings:** Permanent guardianship, even when subsidized, costs significantly less than foster care due to savings in court and agency supervision and intervention, thereby allowing those resources to be used to support other families. The average [annual cost per child](#) served by GAP in fiscal year 2016 was \$9,513, while the annual cost of a child living in foster care was \$59,056.

## Federal policies and programs

[Subsidized waiver demonstration projects](#) — which showed that subsidized guardianships increased permanency (without negatively impacting [reunification rates](#)), increased placement stability, and decreased agency costs — informed the development of legislation expanding federal support for guardianship.

States have offered subsidies to guardians since the early 1980s, but federal assistance was not available until passage of the [Fostering Connections to Success and Increasing Adoptions Act](#) in 2008. (In contrast, federal adoption assistance has been available since 1980.) The Title IV-E Guardian Assistance Program (GAP), authorized through the Fostering Connections Act, incentivizes the use of relative guardianship for children in foster care, permitting states and tribes to use federal Title IV-E child welfare funds to subsidize relative guardianship up to the same rate as the state's foster care subsidy.

The Administration for Children and Families developed an [information memorandum](#) with instructions for states on how to implement and operate GAP, which

## GUARDIANSHIP AS A PREVENTION STRATEGY

For every child living with a relative in foster care, [19 children](#) live with relatives without child welfare involvement. Kin caregivers who take care of children outside of the child welfare system, even those who are court-ordered guardians, receive relatively few supports. Given their important role in preventing children from experiencing the trauma of entering foster care, more resources should be directed to these caregivers and guardians.

**Washington, D.C.**, established the [Grandparent Caregivers Program](#) in 2005 to provide a monthly subsidy to low-income residents who are raising grandchildren, great-grandchildren, great nieces, or great nephews. In 2018, the program served 900 children, with only four entering foster care. In addition, the [Close Relative Caregiver Pilot Program](#) is for low-income residents who are raising siblings, nieces, nephews, and cousins. These programs, which are part of D.C.'s [Four Pillars](#) strategy to keep children from entering foster care, are for families without child welfare involvement.

**Louisiana's Kinship Care Subsidy Program**, funded by the state's Temporary Assistance for Needy Families block grant, provides monthly cash assistance to relatives who are taking care of children. Within one year of being certified as eligible for the program, the qualified relative must be granted legal custody or guardianship by a court or be granted provisional custody by the child's parent.

is available for children who have been under the care of licensed relative foster parents for at least six months and for whom adoption or reunification are not appropriate options. As of April 2021, 40 states, the District of Columbia, Puerto Rico, the Virgin Islands, and 10 tribes have [approved GAP plans](#). However, [utilization of GAP](#) is uneven across states.

# How can guardianship be better utilized to promote permanency and well-being?

The [Family First Prevention Services Act of 2018](#) provides federal funding for evidence-based kinship navigator programs, but as of April 2021, [no states were receiving federal funding](#) under this ongoing opportunity because the Title IV-E Prevention Services Clearinghouse had found no model to have met its evidence-based standards.<sup>4</sup>

## Challenges and areas for improvement

Despite federal legislation supporting its use, guardianship is underutilized as a permanency option for children in out-of-home care. Guardianship was the [case plan goal for only 4% of children in care](#) on September 30, 2019, though 11% of children who exited care during fiscal year 2019 exited to a guardianship. Rates of exit to guardianship were slightly higher for American Indian children (15%), Latinx children (11%), and Black children (11%) than for white children (10%).<sup>5</sup> The effective utilization of guardianship could be improved in a number of ways:

### Providing information to families

Kinship families that are caring for children need to understand all of their options. [Kinship navigator programs](#) increase social support, improve family resources, and improve child safety and placement stability by providing prospective guardians information, referrals, and assistance applying for services and supports.<sup>6,7</sup> In addition, caseworkers need to be transparent in informing families about the experiences of the children in their care and in explaining the benefits and requirements of different legal options. Caseworkers must begin these conversations as early as possible to ensure that caregivers' decisions are well-informed, which can minimize placement instability.

Among states that have created useful guides for relative caregivers are [New Hampshire](#), [New York](#), [Ohio](#), and [Wisconsin](#).

### Identifying family members

When a child needs a placement, it is important to prioritize [placement with family members](#) from the very start. The Fostering Connections Act requires Title IV-E agencies to find all adult relatives within 30 days and notify them of their option to become a placement resource, but fathers and other paternal relatives are often [overlooked](#). In Tania's case, caseworkers did not reach out to her as a paternal relative; rather, she reached out to them when she learned of Naomi's removal from another family member.

### Ongoing supports

The [Children's Bureau](#) suggests that all guardians and children exiting foster care should have access to post-guardianship services. Guardians should be educated about eligible services for older youth, such as the John H. Chafee Foster Care Program for Successful Transition to Adulthood and educational training vouchers. Proactive supports should be provided both before and after guardianship is established to further [support families](#). These include providing support groups; helping children cope with separation, loss, and trauma; understanding how to meet children's challenges and needs (behavioral, emotional, developmental, intellectual, and physical); providing information and training for birth parents and kinship caregivers; and helping meet financial and material needs. [Pennsylvania's Statewide Adoption and Permanency Network](#) provides critical post-permanency support for guardians, including

I knew nothing about the system. The social workers didn't tell me anything about the system. I just knew this was my niece. I figured they were telling me everything I needed; they were not.

— TANIA,  
KINSHIP GUARDIAN

# How can guardianship be better utilized to promote permanency and well-being?

assessment, case advocacy (including connections to local resources for mental health and educational services), respite, and support groups.

## Caseworker attitudes and training

Advancing a [kin-first approach](#) requires a cultural shift. Caseworkers sometimes avoid pursuing guardianship with relatives because of a flawed belief that “the apple doesn’t fall far from the tree.” Agency leaders in **Westmoreland County, Pa.**, worked closely with the [American Bar Association Center on Children and the Law Permanency Barriers Project](#) to revise agency policies to remove barriers to kinship care and elevate the importance of kin. Between 2009 and 2019, the use of kinship care in Westmoreland County increased 281% while the use of traditional foster care decreased 30%. The achievements of Westmoreland County, along with nine other jurisdictions, were instrumental in developing a [WikiHow for kinship care](#), created by ABA Center on Children and the Law, ChildFocus, and Generations United, with support from the Annie E. Casey Foundation.

**Wisconsin** has made a concerted effort statewide to place children with kin caregivers and provide needed supports both in the short-term and permanently: about 43% of children placed in out-of-home care are placed with relatives (compared to 32% nationwide). In 2010, Wisconsin implemented its [Level of Care](#) initiative, which requires relatives who are court-ordered kinship care providers to go through the licensing process. Although providers are not required to become licensed, going through the licensing process opens up permanency options for children in their care, including GAP. Kinship caregivers receive monthly payments even if the family is not licensed.<sup>8</sup> Caseworker trainings

include information on specific needs of kinship providers. In 2015, Wisconsin [expanded the definition of relative](#) (for purposes of GAP) to include adults who have a familial type of relationship with a child (often referred to as “fictive kin”). Caseworkers in all counties are trained in [Family Finding](#) to ensure that children have as many long-term, lasting connections as possible. Wisconsin also holds a [Families Like Mine](#) conference for relative caregivers, which provides opportunities for training and networking. To ensure that families are informed about their options and resources, the state created a [resource portal](#) that provides information on benefits, subsidies, and resources, [online kinship navigator training](#), and a [kinship navigator guide](#).

## Consistent and equitable funding

Foster parents who become guardians received [lower monthly subsidies](#) compared to their foster care maintenance payments in 44% of 36 states responding to a 2017 survey. Further, children who are not Title IV-E eligible are not eligible for subsidized guardianship through GAP, although most states have parallel programs for children who are not Title IV-E eligible.

Tania, who lives in North Carolina, had been receiving a \$600 a month stipend as a foster parent for Naomi. Her family was not offered GAP, however, since North Carolina limits GAP eligibility to older youth — one of only a few states to do so. Instead of receiving \$600 in GAP to meet Naomi’s needs, Tania as a guardian receives \$181 a month through Temporary Assistance for Needy Families and \$16 a month in food and nutrition benefits. As a disabled veteran with a steady job, Tania is able to provide for Naomi without the extra

Continue to support families and children, and you’re going to end up with children who have lifetime permanency, not just permanence until they’re 18, but lifelong permanence and lifelong connections with their relatives.

— LINDSAY WOOD,  
PROGRAM AND POLICY ANALYST, WISCONSIN DEPARTMENT OF CHILDREN AND FAMILIES

# How can guardianship be better utilized to promote permanency and well-being?

subsidy, but many kinship care providers are not in a financial position to do so.

## Evaluation

Few studies have examined outcomes of kinship guardianships. Better tracking of the impacts of GAP on children's well-being is needed. Only a small number of states have been tracking program implementation and conducting evaluations. New York creates an [annual report](#) that includes information on the implementation of GAP and changes in outcomes over time, such as average length of stay in foster care and percentage of children achieving permanency.

## Additional resources

- [Kinship Caregivers and the Child Welfare System](#) is a fact sheet for kinship caregivers taking care of children who are involved in the child welfare system. It includes information about different types of kinship care, court processes, child welfare processes, and available services including counseling, financial support, health insurance, respite care, support groups, and kinship navigator programs.
- [Kinship Guardianship as a Permanency Option](#) provides information about guardians' rights and responsibilities, processes for establishing or modifying a guardianship order, kinship guardianship assistance, and state-specific regulations and policies (current as of July 2018).
- The [Adoption and Guardianship for Children in Kinship Foster Care: National Comparison Chart](#) includes a national overview of differences between adoption and guardianship in terms of rights and

**Catawba County, N.C.**, created a unit dedicated to providing a continuum of kinship supports, including getting caregivers trained and licensed, providing ongoing services, and informing caregivers of their options regarding guardianship and GAP eligibility. The unit tripled the number of licensed kinship families between 2018 and 2020 and utilizes licensing waivers to overcome non-safety related requirements. Kinship care providers attend [Caring for Our Own](#) (offered by [Model Approach to Partnerships in Parenting](#)), a nine-week training and support group that provides information on trauma and federal guidelines for kinship care, and helps kinship caregivers develop strong relationships with the children in their care, the children's birth parents, and the helping network in their community. Many families that have completed the training stay in touch with one another and benefit from informal support networks.

responsibilities, financial and legal assistance, public benefits, health insurance, federal and state tax credits, caregiver successor planning and death benefits for children, and college and independent living. Similar [state-specific charts](#) are available for New Mexico, New York, Pennsylvania, Virginia, and Washington, and additional state charts are being developed in 2021. A database of [state-specific laws](#) is also available.

Naomi is resilient. I love her. I'm not in this just to give her a bed and hot meals. There's so much potential there. I'm in it to make this child better. I can't even imagine not having her.

— TANIA,  
KINSHIP GUARDIAN

# How can guardianship be better utilized to promote permanency and well-being?

- [Grandfamilies.org](https://www.grandfamilies.org) has additional resources and publications on guardianship, including a [brief on adoption and guardianship for children in kinship foster care](#), [state fact sheets](#), [financial assistance](#), and [subsidized guardianship](#).
- The Quality Improvement Center for Adoption and Guardianship Support and Preservation's [Permanency Continuum Framework](#) is a guide for proactively addressing and responding to needs that arise in planning for and maintaining adoption and guardianship to ensure stability and well-being.

To learn more, visit [Questions from the field](#) at [Casey.org](https://www.casey.org).

- 1 Tania and Naomi are not the actual names of the aunt and niece featured in this brief. The names were changed in order to respect the family's privacy.
- 2 Based on interviews with Crystal Ward Allen, Senior Director of Strategic Consulting, Casey Family Programs, September 10, 2020; Ana Beltran, Co-Director, Generations United's National Center on Grandfamilies, Nicole Dobbins, Child Welfare Partnerships Advisor, Casey Family Programs, Heidi Redlich Epstein, Director of Kinship Policy, ABA Center on Children and the Law, Steven Olender, Senior Policy Associate, Child Welfare and Mental Health, Children's Defense Fund, Cindy Santos, National Partnerships Advisor, Casey Family Programs, and Stefanie Sprow, Director of Child Welfare Policy, Children's Defense Fund, September 14, 2020; Erin Baluyot, Project Manager, Casey Family Programs, Pam Bookhart, Social Worker Supervisor, Catawba County Government, N.C., Debbie Dunn, Program Administrator, Child Welfare, Catawba County, Crissy Triplett, Program Manager, Child Welfare, Catawba County, October 14, 2020; Carl Ayers, Senior Director of Strategic Consulting, Casey Family Programs, Diane Pluck, Fiscal Officer, Westmoreland County Children's Bureau, Shara Savekikis, Executive Director, Westmoreland County Children's Bureau, November 17, 2020; Kari Brock, Program and Policy Analyst, Wisconsin Department of Children and Families (DCF), Emily Erickson, Child Welfare Program and Policy Section Chief, Wisconsin DCF, Moe Green, Social Worker, Wisconsin DCF, Holly Telfer, Kinship Care Specialist, Wisconsin DCF, and Lindsay Wood, Program and Policy Analyst, Wisconsin DCF, December 9, 2020; Tania Scott, Kinship Guardian, North Carolina, January 7, 2021.
- 3 State-funded GAP programs, while not required to follow federal guidelines, generally do so.
- 4 Congress has appropriated four consecutive years of Title IV-B funding, three years of which have been disseminated to all states, tribes, and territories that applied to develop, enhance, or evaluate their kinship navigator programs. As of April 2021, the Administration for Children and Families has not yet issued guidance on the 2021 appropriation, but it will resemble the application process described in the 2020 [guidance](#). The [Consolidated Appropriations Act, 2021](#), also provides for additional flexibility from April 2020 through September 2021 in response to the COVID-19 pandemic, allowing 100% federal reimbursement for all kinship navigator programs that are or will be in the process of being evaluated for building an evidence base to later meet the requirements established in Family First.
- 5 Adoption and Foster Care Analysis and Reporting Data (AFCARS) made available by the National Data Archive on Child Abuse and Neglect Data and analyzed by Casey Family Programs staff, January 25, 2021.
- 6 Littlewood, K. (2015). Kinship Service Network Program: Five year evaluation of family support and case management for informal kinship families. *Children and Youth Services Review*, 52, 184-191.
- 7 Littlewood, K., Cooper, L., & Pandey, A. (2020). Kinship and placement stability for the Children's Home Network kinship navigator program. *Child Abuse and Neglect*, 106, 104506.
- 8 As of January 2021, the monthly kinship care payment rate in Wisconsin is \$254. This payment rate is 47% to 100% of the state's monthly basic foster care maintenance payments, which differ based on child age and resource family level of care certification. In addition to the basic foster care maintenance payment, foster care payments also can include a supplemental rate and an exceptional rate based on the needs of the child.

**P** 800.228.3559  
**P** 206.282.7300  
**F** 206.282.3555

[casey.org](https://www.casey.org) | [KMResources@casey.org](mailto:KMResources@casey.org)





# Education Outcomes Among Youth in Kinship Care & Foster Care in Washington State

## APPENDIX 3

### Educational Challenges of Youth in Out-of-Home Care

In the United States, youth who do not live with their parents experience unique challenges that can cause them to struggle in school.<sup>1,2</sup> Youth living in out-of-home care change schools more often than their peers, which creates barriers to forming strong school connections.<sup>3</sup> School mobility (changing schools two or more times in the past year) weakens peer and adult supports and often negatively impacts social and academic outcomes, such as a child's likelihood to graduate.<sup>4,5,6,7</sup> Although youth living in both foster care and kinship care have more educational challenges than youth living with their parents, youth living in kinship care have better educational outcomes than youth living in foster care.<sup>4</sup>

### What is Kinship Care?

There are two major types of out-of-home care: foster care and kinship care. Kinship care refers to the full-time care of a youth by a relative or another adult who has a close relationship with the youth and their family.<sup>8</sup> Kinship care can be either formal or informal, depending on the level of child welfare services involvement.<sup>8</sup> Formal kinship care is state-mandated, whereas informal kinship care can be state-mediated (e.g., kinship diversion) or state-independent (a private kinship care arrangement).<sup>9</sup> Over seven million youth in the United States live in households headed by kinship caregivers.<sup>10,11,12</sup> Most of these kinship placements are informal arrangements made without the involvement of the child welfare system.<sup>13,14</sup>

### Benefits of Kinship Care

Among out-of-home placement options, kinship care is preferred over foster care because it helps maintain youths' key attachments.<sup>15</sup> Kinship care has also been shown to minimize the trauma of being separated from parents. Being placed with family members improves youths' well-being, increases permanency, and preserves youths' cultural identity and community connections. Strong community connections are vital for educational success.<sup>11,16,17</sup> While youth living in both kinship care and foster care have lower graduation rates than youth living with their parents, youth in kinship care or guardianship arrangements are significantly more likely to graduate from high school than their peers living in foster care.<sup>8</sup> These higher graduation rates can be partially attributed to the greater stability and community connections that youth in kinship care enjoy when compared to their peers in foster care.<sup>18</sup> Youth in kinship care are more likely to remain in their communities of origin and maintain their school connections.<sup>10</sup>

### Barriers for Kinship Caregivers

Kinship caregivers tend to have lower incomes and levels of educational attainment when compared with foster parents.<sup>8</sup> Many are grandparents and live on fixed incomes.<sup>8</sup> Despite this, research suggests that caregivers' level of education does not have a significant impact on children's educational outcomes.<sup>19</sup> Other factors, such as placement stability and community connections, are much more predictive of educational success.<sup>3,10</sup> Prioritizing school stability and community connections through kinship care placements has a positive impact on educational outcomes among youth who are not able to live with their parents and helps maintain community ties that support educational success. Financial hardship is another significant barrier for kinship families. Over 30% of kinship households live below the poverty line, and many potential kinship caregivers worry about their ability to adequately provide for the youth in their care and support their education.<sup>8</sup> Ensuring that kinship caregivers have adequate supports and financial resources to care for youth is important when considering strategies to support youths' educational outcomes. Washington State is responding to this need by increasing resources to support kinship caregivers, in part, due to research suggesting that kinship care can be an important protective factor for helping youth achieve educational success.

### Educational Outcomes of Youth Living in Kinship Care in Washington State

This fact sheet compares the educational outcomes of Washington State youth living in kinship care with those living in foster care. The data used in this fact sheet comes from the 2018 Washington State Healthy Youth Survey (HYS). The HYS is a biannual survey that includes 8th, 10th, and 12th-grade public school students.<sup>20</sup> The survey offers a representative sample of young people in Washington State and provides important details about their health and well-being and helps guide policies to support healthy youth and families.<sup>20</sup>



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## Living in Kinship Care

5,410 Youth

## Living in Foster Care

794 Youth

**Note:** 142,296 youth lived with their parents.

## Healthy Youth Survey Sample Demographics

The 2018 Washington State Healthy Youth Survey (HYS) sample included 148,500 public high school students. Youths' living situations were determined based on the question: *Who did you live with most of the time in the last 30 days?*

### School Mobility

Youth living in kinship care experienced significantly more school stability.

- Compared to youth living in kinship care, school mobility was **3.1** times higher among youth living in foster care.

### Involvement in School Activities

Youth in living in kinship care were significantly more likely to say that they felt they had chances for involvement in school activities, such as sports or clubs.

- Feeling as though they had fewer chances to participate in school activities was **1.6** times higher among youth in foster care.

### Motivation for School Success

Youth in kinship care were significantly more likely to say that they gave their best effort in school.

- Compared to youth living in kinship care, saying that they did not try to do their best work in school was **1.4** times higher among youth living in foster care.

### School Safety

Youth living in kinship care were significantly more likely than youth living in foster care to say that they felt safe at school.

- Not feeling safe at school was **1.2** times higher among youth living in foster care.

### School Access

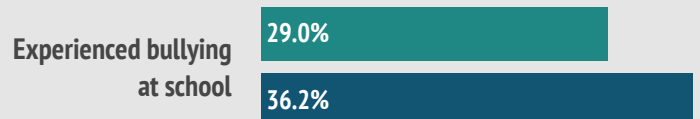
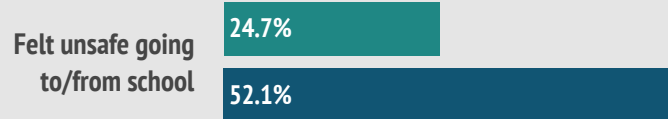
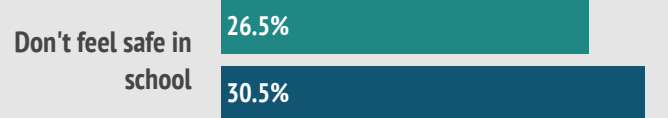
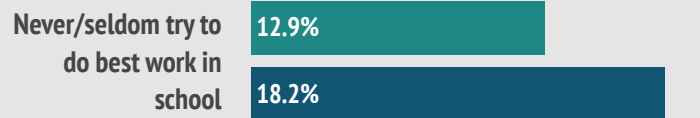
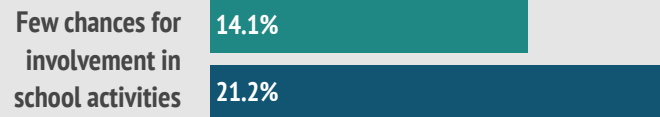
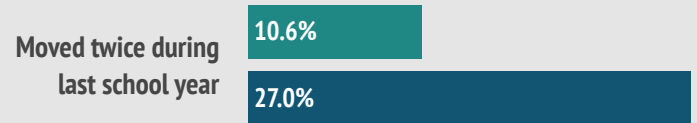
Youth living in kinship care were significantly more likely than youth living in foster care to say that they felt safe going to and from school.

- Not feeling safe going to and from school was **3.3** times higher among youth living in foster care.

### School Bullying

Youth living in kinship care were significantly more likely than youth living in foster care to say they experienced bullying at school.

- Experiencing school bullying was **1.5** times higher among youth living in foster care.



## Key Takeaways from the Washington Healthy Youth Survey

- Youth living in kinship care have better educational outcomes than youth living in foster care.
- Kinship care can be an important educational support for youth who might otherwise enter foster care and face educational instability.





# Education Outcomes Among Youth in Kinship Care & Foster Care in Washington State

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# Issues for Michigan's Children

An in-depth look at some of the  
public policy issues affecting  
children and youth in Michigan

Michigan's  
Children

January 2019

## Critical Issues in Foster Care: Kinship Caregivers

Many children and youth in Michigan are being raised by grandparents and other relatives when their own parents are unwilling or unable to care for them. In some situations, this “kinship care” with grandparents, aunts and uncles, older siblings and other relatives is informally arranged. In other situations, the child welfare or court systems get involved and relatives are given legal status as guardians or licensed as foster parents. There is ample evidence showing that in many circumstances, children thrive in the stable environments created through kinship care, which is why child welfare systems have stated priorities that include placing children with suitable relatives when possible.

In Michigan, over 4,000 children live with a relative who is a licensed foster parent, and according to Generations United, it is estimated that more than ten times that many children outside the foster care system live with a grandparent or other relative. However, the full picture of Michigan children in informal living arrangements with relatives is not well known.

### Why is kinship care so often the best placement for children and youth?

Prior to leaving or being removed from their homes, many maltreated children experience high rates of trauma and have significant mental and physical health needs. The uncertainty that comes with removal itself, including possible separation from siblings, can create additional trauma. Considering this exposure, placement with a supportive relative is often more beneficial to children than placement with a non-relative foster parent. Children living with the support of trusted family members in a familiar and safe environment with familiar routines and family traditions have a greater sense of safety and stability. Additionally, kinship care placement may allow children to stay with their siblings and maintain their cultural identity. Many studies have confirmed that these situations result in better social, behavioral, and mental health outcomes for children and youth separated from their biological parents (Generations United, 2017).

### What challenges do kinship caregivers face?

*Limited access to services.* Children removed from their homes have experienced the same types of trauma and have the same needs for trauma-informed mental health and support services, and access to healthcare coverage regardless of who is caring for them. While these desperately-needed services are part of the foster care system, when relatives take on responsibilities without having the children officially enter the foster care system, these services are not paid for, and without legal status, “informal” kinship caregivers may have difficulty enrolling the children in school and providing consent for medical or mental health services.

*Financial hardships.* Suddenly having to care for a relative’s child can be a significant financial strain on any caregiver, especially those with lower incomes. There are a few different ways for relative caregivers to get financial support for the children in their care, but many aren’t accessing resources at all. The caregivers can be licensed foster parents, allowing them access to the payments given any other foster parent. If their caregivers aren’t licensed foster parents, they may qualify for guardian assistance

payments. If they become “approved” kinship caregivers through the foster care system without being licensed, they are able to access payment for services, but not income supports. And some children may qualify for child-only cash assistance through the Family Independence Program (FIP), where payments are significantly less than the maintenance payments provided to licensed foster parents. Many caregivers aren’t aware of their options, aren’t eligible due to income or asset restrictions, or are denied because forms are completed incorrectly (Generations United, 2017). According to the Census, in 2016, while nearly one third of grandparents raising grandchildren in Michigan had incomes below the poverty level, fewer than one in ten of them received any type of cash assistance for the children in their care (Generations United, 2017).

*Added vulnerability of caregivers themselves.* Older relatives providing care may be especially vulnerable: many are retired, on a fixed income, and have their own health issues. Many older adults live in senior housing where children are not permitted, or their home may be too small to accommodate the child. The added expense of finding and moving to suitable housing may be especially burdensome. Caregivers may also risk isolation, with caregiving limiting their opportunities to socialize with friends and receiving much-needed respite and emotional support as they learn to parent again with ever-changing technology and new educational practices. Their isolation can lead to loneliness and depression which directly affects the well-being of children in their care.

### **Why don’t relatives become the child’s legal guardian or get licensed as a foster parent?**

Relatives don’t allow the children in their care to become wards of the court and become licensed foster parents to care for them, or obtain legal guardianship of the children in their care for many reasons. Legal guardianship is often a lengthy and expensive process. Without legal or financial assistance, obtaining legal guardianship may be unrealistic for anyone on a fixed income.

Allowing the child and their parents to be connected to the welfare system has risks. If the caregiver goes through the process but then does not qualify for a foster care license, the child may be taken away from them and placed elsewhere. Despite the benefits for children staying with family, there are a variety of reasons that a kinship caregiver could be denied a foster care license; the majority of denials for licensure for kinship caregivers are because of non-safety related restrictions. Additionally, licensing can take 2 months or more, during which time children may be required to stay with a non-relative foster parent. Placement in a home with a stranger re-traumatizes children who have already endured a significant amount of trauma.

### **Recent Policy Changes:**

*Providing maintenance payments for approved kinship caregivers.* As a result of the Sixth Circuit U.S. Court of Appeals ruling in the D.O. vs. Glisson case, states under the court’s jurisdiction (Michigan is included) are required to make maintenance payments to “approved” kinship caregivers, meaning unlicensed relative caregivers with whom the child was placed by the state. The ruling mandated that these payments be made at the same rate as foster care maintenance payments. The state has an obligation to appropriate funds to support the ruling, and they appropriated \$10 million in the current budget earlier in 2018 to do that. However, the costs of foster care payments are covered in partnership between the state and counties, who were not willing to put in their share of the additional costs. As a result, a supplemental appropriation signed into law by the Governor in late December

included an additional \$10 million of state funds to cover the county share. Full funding for these maintenance payments needs to be continued and increased on an annual basis. We would expect additional caregivers who may feel it is worth coming into the child welfare system once they are aware of this financial benefit without getting licensed. We hope that Michigan will consider similar payments to informal relative caregivers as well in light of what we know about the low incomes of those caregivers. Children have the same basic needs regardless of whether they are being raised by a relative foster parent, an approved relative caregiver, or an informal kinship caregiver, so it makes sense to provide maintenance payments to these families.

*Implementing a kinship navigator program.* Michigan has received federal funding to set up a kinship navigator program and is required to fund it to continue to draw down federal dollars. The program is meant to provide kinship caregivers with information and connect them with resources in their community. To be effective, this needs to be more than just a phone number for caregivers to call for a list of resources in their area. Kinship families need access to direct services such as one-on-one conversations with a navigator who can guide them through the maze of resources, applications, and steps to establishing permanency, mental health services and family therapy with a licensed therapist, parenting classes to help caregivers raise a new generation of children, support groups, and respite services. The program should provide peer-to-peer support using navigators who are or have been kinship caregivers. Who would better understand what caregivers are going through than someone who has been down the same road? These individuals should be located throughout the state, understand the community they serve, and know what local resources are available. Additionally, cultivating a working relationship between navigators and DHHS and allowing navigators to advocate for the families would help alleviate the frustration caregivers experience when they try to access services. Emergency funding should be available to help with necessities such as clothing, formula, diapers, cribs, beds, car seats, etc. when the children arrive with nothing but the clothes they are wearing and to help with home repairs needed to ensure the safety of the children or to make the home accessible to a child with special needs.

At this point, there is not enough funding in the kinship navigator program to facilitate a comprehensive navigator program, but Michigan could invest in a program that provides these much-needed services and support to caregivers. Additional investment in assisting relatives is much less burdensome than the cost of placing all the children currently being raised by relatives into the foster care system. If program coordinators build relationships with organizations within the community who are already equipped to provide many of the needed services, the cost of funding the kinship navigator program would be less prohibitive, and the program would be more sustainable.

#### **Next Steps:**

- **Design a kinship navigator program that provides the services and support kinship families need using the best methods possible:** Design the program to offer direct services such as peer-to-peer support and guidance, advocates to act as liaisons with DHHS to help families access services and benefits, clinical therapists to provide family therapy and mental health services, parenting classes, support groups, respite services, and more.
- **Select navigators who are or have been kinship caregivers and make them available in different counties:** Place trained peer navigators in counties throughout the state. If navigators

are familiar with the community, they will understand the unique challenges caregivers in their county face and will know what resources are available in the area.

- **Establish an emergency fund for kinship families:** Make appropriations for an emergency fund for caregivers to use when the children or infants arrive without necessities such as a change of clothes, formula, diapers, car seats, cribs, etc., or to help with home repairs to make the home safe for children or accessible for children with special needs.
- **Make ongoing appropriations to support the kinship navigator program:** Annually appropriate and increase funding to support the program and expand the types of service available to kinship families.
- **Provide continued and increasing appropriations to fund the maintenance payments required by the lawsuit:** Annually appropriate enough funding to cover the maintenance payments to all approved kinship caregivers. Increase appropriations to allow informal kinship caregivers to receive maintenance payments to meet the needs of the children in their care.
- **Modify licensing guidelines to reduce barriers for kinship caregivers who want to obtain a foster care license.** Allow for more variances to non-safety-related regulations and avoid placing restrictions on the number of variances allowed for each county. Assist with home repairs needed to make the home safe for the child or accessible for a child with special needs. Allow caregivers to use other relatives outside the home as a back up for transporting the child to doctors appointments, school, and other activities. Make licensing training more accessible by providing more online training.

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