Extended family caring for children has been a part of society since antiquity. Family members are the natural child welfare system, stepping in to care for children when parents are unable or unwilling to do so. Now referred to as kinship caregivers, family members continue to play a large role in raising children today, but raising a child when disaster strikes, often on short notice, can cause high levels of stress, financial burdens, and other difficulties for kinship caregivers. Government action to offer support has a much shorter history, and the available supports continue to lag behind these families’ levels of need.

Kinship caregivers are usually family members, often grandparents and other close relatives, or family friends. They assume care for children who are in need for various reasons, such as experiencing abuse or neglect in the home of their parents; having a parent who is deceased, incarcerated, or too ill to provide care; and having parents who are deployed in the military. Kinship care also encompasses caregivers who do not share a relationship through blood, marriage, or adoption. They are known as fictive kin and can be godparents, neighbors, teachers, or anyone with a previously established relationship with the family. Kinship caregivers have a wide variety of custodial arrangements, with some becoming certified as foster parents (known as kinship foster parents), while some obtain custody orders through family court, and still others care for children with no court or child welfare involvement at all. The type of custodial arrangement may directly impact the level of support available to a family.

Children do best with people who know them well, love them, and can keep them connected to their extended families. Much of the policy focus around children living with relatives has been about the use of kinship caregivers as foster parents, with little attention paid to children who live with kinship caregivers outside foster care. As a result, fewer resources have been allocated to this population to help sustain families in need. Through our increased understanding of the complex issues around raising children who have experienced trauma, the disproportionate number of poor and often children of color who experience the need for kinship care, and the high percentage of kinship caregivers who are older and who experience more disabilities and health concerns, we see the need for an enhanced support system for kinship families who are not in foster care to ensure stability and permanency.

**CHILDREN RELY ON KINSHIP CARE**

Kinship caregivers are raising an estimated 195,000 children in New York and about 2.7 million children nationally. Of those children in New York, 7,297 are children in foster care with relatives who were certified as foster parents (about 41% of all foster care in New York is comprised of children who live with kinship foster parents). The overwhelming majority of kinship caregivers (96%) are raising children outside of foster care, which limits their access to resources, supports, and benefits compared to their counterparts who become foster parents.

Kinship care is more prevalent in the African-American/Black community, meaning kinship issues are quite often tied to other issues faced disproportionately by African-Americans/Blacks as well as other racial and ethnic groups in New York. African-American/Black children continue to be sharply overrepresented in child welfare. Placement rates in foster care are more than three times their proportion to the population.
Thus, they have an increased risk for negative outcomes such as homelessness, criminal justice involvement, and low educational attainment. While child welfare reform has been underway for years, more needs to be done to undo underlying racism within our child welfare system.

It is estimated nationally that 1 in 11 children will live in a kinship home during their childhood, and the likelihood that African-American/Black children will live in a kinship home is more than double that at 1 in 5 children. One reason for this may be attributed to the overrepresentation of African-American/Black and other children of color in child welfare cases. In 2019, 40% of all children in foster care in New York were African-American/Black, and 23% of children were Hispanic, compared to only 25% of children in foster care who were white. The New York State Office of Children and Family Services (OCFS) has acknowledged the disparity in one of their most recent Administrative Directives:

In 1972, authors Billingsly and Giovannoni wrote Children of the Storm: Black Children and American Child Welfare. The book detailed how the child welfare system was failing children of color through policies and practices directly resulting from a history of racism. Fifty years later, the continued overrepresentation of children of color in the child welfare system is a painful reminder there remains work to be done. National research shows, and OCFS’ data confirms, disparities exist throughout the child welfare system. Families of color are more likely to be involved in a report to the New York Statewide Central Register for Child Abuse and Maltreatment (SCR). Moreover, children of color are more likely to be placed in foster care and generally experience slower achievement of permanency goals.

OCFS data shows that in New York African-American/Black children were 1.95 times more likely, Hispanic children were 1.32 times more likely, and Native American children were 1.11 times more likely to be the subject of an SCR report than white children were. African-American/Black children were 2.5 times more likely to have their SCR report be indicated, 3.74 times more likely to be placed into foster care, and 5.7 times more likely to be in foster care than their white counterparts were. Compared to their white counterparts, Hispanic children were 1.7 times more likely to be indicated, 1.5 times more likely to be placed in foster care, and 2.0 times more likely to be in foster care, and Native American children were 1.13 times more likely to be indicated, 2.67 times more likely to be placed in foster care, and 1.46 times more likely to be in foster care.

Foster care is not the only metric to measure child welfare involvement in the placement of children with kinship caregivers. As costs to maintain children in care have risen, and research has shown that removal of children may be preventable, the priority of New York State has been to drive down the use of foster care. Through interventions, such as utilizing prevention services for parents and diverting children to non-foster kinship families, New York has reduced the number of children in foster care from 53,902 in 1995 to 15,399 in 2020.
A recent national report estimated that between 100,000 and 300,000 children are diverted from foster care to live with relatives each year. In New York, a 2010 sampling of 3,351 kinship children showed that 55% had experienced involvement with child welfare, but only 4% of those were in foster care placements, while the rest had some other form of custody, or no formal custody at all. Since 2012, counties have diverted 16,183 children from foster care through the use of direct custody placements, in which a child is judicially removed and placed with a kinship caregiver, but the county responsible for removing the child has not made the kinship caregiver a foster parent and instead given them temporary custody. This keeps a child from officially entering the foster care system. However, the care responsibilities and many of the requirements remain the same for the family as if they had entered foster care, such as permanency hearings in court and regular CPS visits, but without the supportive systems in place to provide for the needs of the child.

While diversion has helped the state and counties keep children out of foster care and save hundreds of millions of dollars in foster care expenses, funding to support those kinship resources has remained extremely low, despite many families’ need for additional support.

Informal arrangements, often called safety plans, are a national practice with extensive use in New York. In using safety plans, a child welfare department will look for a willing kinship caregiver to relieve the safety issues identified during an investigation of child abuse or maltreatment. This is accomplished by informing the parent of their intent to judicially remove the child if the parent does not give their child voluntarily to a kinship caregiver.

In New York, these safety plan arrangements are unstable and unregulated. The state gives no guidance on the use of safety plans and collects no data to ensure that safety is maintained or services offered to the kinship caregiver, child, or parent that would encourage reunification. The kinship caregivers have no legal authority to make decisions for children in their care due to a lack of a court order or any written agreement from a parent. They may lack the needed authority to bring a child to the doctor for medical treatment or to make educational decisions, and they risk the stability of the children in their homes, and are even less likely to gain access to much-needed services and supports.
RECOMMENDATIONS:

• Regulate the use of safety plan arrangements that leave kinship caregivers unequipped to successfully care for children. Unregulated, untracked, and unsupported arrangements facilitated by child welfare agencies can destabilize families and may leave children at risk. Regulations that include data collection, time limitations on arrangements, and administrative reviews of cases, with the child welfare agency conducting extensive follow-up with parents, children, and kinship caregivers to ensure permanency is achieved, should be developed and followed.

• Reduce the over-surveillance and over-reporting of African-American/Black and other children of color to a punitive system by diverting resources that are used to separate families to instead address conditions brought about by poverty. Restructure the child welfare system to focus on strengthening families to achieve safety and stability. Redirect funds to promote new priorities that keep children in their homes, and in the event that children need to live with relatives at the behest of Child Protective Services, ensure that supports are robust and referrals to services are made.

KINSHIP CAREGIVERS ARE RESILIENT DESPITE CHALLENGES

Kinship caregivers have been shown to be the best option for children who cannot live with their parents because those caregivers increase the children’s well-being, safety, stability, and permanency outcomes.\(^2\) In New York, according to the American Community Survey, there are 120,376 grandparents who are responsible for their grandchildren,\(^2\) making up about 65% of all kinship caregivers in New York.\(^2\) With the average age of grandparent caregivers being 59,\(^2\) this population fits squarely in the aging discussion. While grandparents and other kinship caregivers provide loving, healthy homes for children, they often experience a number of challenges associated with an aging population and children who have experienced trauma.

Many grandparents are caring for children while on fixed incomes (21.1% of grandparent caregivers in New York have income under the federal poverty line)\(^2\) and have inadequate housing arrangements, with less than one third of eligible grandparent-headed households receiving housing assistance.\(^2\) Lack of awareness of available benefits and services, such as housing, legal assistance, financial benefits, and child care, creates an initial obstacle for all kinship caregivers. Other issues; including enrolling children in school, making educational or medical decisions for children, and obtaining documents, such as birth certificates; can keep families from achieving stability for long periods of time. Research shows that older kinship caregivers are even less likely than other low-income applicants for assistance to know what supports they are eligible for, or how to apply, and many experience discomfort with using the internet and online applications.\(^2\)
National research indicates that kinship caregivers are older and are more likely to report chronic health conditions or disabilities because of their age, yet they care for larger sibling groups, compared to non-kin foster parents. Additionally, they are more likely to be in poverty (half of all single grandmothers raising grandchildren live in poverty, and women are more likely to be grandparent caregivers than men). They are also more likely to be out of the labor force, and more likely to experience increased stress due to having to manage relationships with the parents of the children in their care and take on a new parenting role. Children in kinship caregiver homes who have had interaction with the child welfare system have higher rates of trauma (38% of children involved in child welfare under 3 years old have experienced severe trauma), leading to higher rates of behavioral and emotional health disorders and a disruptive home life.

With only 4% of all kinship children in New York in foster care with kinship foster parents, most kinship families who don’t become foster parents will experience difficulties in obtaining available benefits due to the lack of knowledge of resources both by kinship families and the professionals who interact with them. In New York, financial benefits are available for most non-parent caregivers of children who are not biologically their own or adopted. Commonly called the Non-Parent Grant, it is a monthly stipend of roughly $430 per month for one child, and eligibility is based upon the income and resources of the child, not the kinship caregiver or parent. While this monthly benefit is available to most children in kinship homes, only 15% of eligible children in New York receive the grant. Reasons for underutilization of the grant are attributable to a lack of knowledge of the grant, inconsistent application of the eligibility guidelines across counties, and complex, lengthy applications.

Despite the lack of resources, kinship caregivers have shown resiliency to care for traumatized children for long periods of time, with recent data indicating that 46% of grandparents who are raising their grandchildren have had them for 5 or more years. In addition to longevity of care, research has shown that grandparents and other kinship caregivers are uniquely situated to help mitigate the negative effects of trauma experienced by children. By providing a greater likelihood of having a permanent home, maintaining connections to siblings and other extended family, and a remaining connected to a sense of cultural identity, kinship homes lead children to better behavioral and mental health outcomes in the short-term, and decreased adverse health effects as the child enters adulthood.
RECOMMENDATIONS:

• Define the term kinship caregiver in statute to bring greater recognition to this population, to strengthen laws that apply to them, and to denote eligibility for services clearly.

• Increase access to services, such as financial benefits, childcare assistance, legal services, and housing vouchers:
  - The New York State Office of Temporary and Disability Assistance should aim to double the number of children enrolled in the Non-Parent Grant (from 15% to 30% of eligible children) to ensure families have the financial supports they need through wider community education of the grant and increased training to staff to ensure they inform eligible families of the benefit.
  - Kinship caregivers who are working should be granted priority to childcare assistance.
  - Legal services specific to kinship issues should be funded in every major population center in New York.
  - Housing issues specific to kinship caregivers should be addressed, such as being given "special population" status for new housing construction, and easing restrictions on housing assistance when kinship caregivers take children into their homes.

THE NEED FOR INCREASING SUPPORTIVE SERVICES

The importance of supportive services to help maintain families cannot be overstated. Giving families the supports they need to raise the children successfully in their homes has been shown to lead to better social and mental health outcomes for both children and kinship caregivers. The creation of a robust service system to support the varying needs of kinship caregivers, such as housing, financial stability, mental and emotional health, legal consultation, and childcare, will lead to increased stability, increase the likelihood of permanency, and reduce stress in the household.

Foster care is the most comprehensively funded part of the child welfare system, but it is not the only system of supports available to kinship caregivers. OCFS funds a statewide system of services specifically devoted to helping all kinship caregivers. This unified system of care is made up of the NYS Kinship Navigator program, which provides information, referral, and education for all kinship caregivers throughout the entire state, as well as local kinship programs that offer case management, respite, and support groups for informal (non-foster) kinship families.
Regional Permanency Resource Centers are not kinship-specific services but can also help kinship caregivers who have exited foster care with guardianship or who have adopted the children in their homes. These kinship programs also offer a single point of access to many other supportive services that kinship caregivers may need. Since 2016, New York has funded these kinship-specific services at a total of $2,559,250. This money currently funds 14 local kinship programs serving 25 counties, and the one statewide Kinship Navigator.

In addition to the funds provided by OCFS, the National Family Caregiver Support Program, or NFCSP, is a federal initiative designed to support caregivers as they carry out their caregiving responsibilities. Local Area Agencies on Aging (AAA) can use these funds to offer assistance, support groups, respite, and supplemental services to family caregivers, grandparents, and other older relatives (age 55 or older) who are caring for children. In FY 2019-20, 13 AAAs spent $275,524 (about 2% of the 12 million Title III-E dollars appropriated to the state) supporting kinship caregiver initiatives, such as legal services and kinship caregiver services, in 12 counties and New York City. Models for effective aging programs can be seen around the state: from New York City where the Grandparent Resource Center focuses on case management services for seniors raising grandchildren, to the Center for Elder Law and Justice that provides kinship legal services in Erie and Niagara Counties.

The Families First Prevention Services Act of 2018 reformed federal financing of foster care and shifted priority to family-based care by restricting reimbursement of congregate care (i.e., group homes) and incentivizing the use of federal funds on services intended to keep children in their parents' home (prevention services), with family (kinship services), or in non-kin family-based foster care (foster care recruitment). The act gives states the opportunity to receive a 50% match on the funds they spend on Kinship Navigator services, intended to support children in the homes of kinship caregivers who are outside foster care.

Eligibility requirements have proven unattainable thus far for Kinship Navigator programs nationally, as the Children’s Bureau Clearinghouse has not approved any programs to date, despite all 50 states actively implementing, expanding, and evaluating their Kinship Navigator programs, with the help of federal grants, to meet the standards the act set forth. With significant dollars on the line from the federal government, some states have decided to invest more state dollars in the development of kinship services, realizing the cost-benefit of supporting families and keeping children from having to enter the foster care system. Conversely, New York’s legislature cut funds to kinship services by $950,000 in 2020, forcing OCFS to re-direct one-time funds to bridge the shortfall.

The Consolidated Appropriations Act of 2021 incentivized investing in kinship supports by pausing the evidence-based requirements and increasing the matching dollars to a 100% match during the COVID-19 pandemic. Now more than ever is the time to invest in these families to ensure safety and stability for children.
RECOMMENDATIONS:

- Robustly fund the kinship system of care, both local kinship programs and the Kinship Navigator. Funding supportive services is a cost-effective method for keeping children in safe, stable homes with family members. Funding should be maintained and expanded to ensure every kinship family who needs support has access to localized services and that New York is ready to implement services eligible for matching federal aid.

- Explore potential opportunities for support through NFCSP. AAAs in New York may consider allocating resources to kinship caregivers in their jurisdictions based on the specialized needs of their communities.

2 https://pediatrics.aappublications.org/content/139/4/e20170099

10 An excellent article by Bryan Samuels in Imprint News gives an overview of the need for reform in child welfare. That article can be accessed here: https://imprintnews.org/opinion/addressing-systemic-racism-in-our-child-welfare-system/47430


20 A Generations United report from 2017 estimated that if half the children being raised by grandparents nationally were in foster care, it would cost an additional $4 billion dollars each year. https://www.gu.org/app/uploads/2018/05/Grandfamilies-Report-SOGF-2017.pdf

21 For more information on safety plan practices, see Josh Gupta-Kagan’s recent article: America’s Hidden Foster Care System: https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3437849


24 A review of Non-Parent Caregiver Cases October 2020 by the Office of Temporary and Disability Assistance show that 64% of children who receive this benefit are grandchildren being raised by grandparents (N = 20,958 children). Table can be accessed at http://www.nysnavigator.org/?page_id=273.


39 See the 2015 Grandfamilies Housing Study Policy Recommendations at: https://www.albany.edu/chsr/Publications/NYS%20Grandfamilies%20Housing%20Study%20FINAL%20REPORT_Mar%202015.pdf

40 Many of these recommendations can also be seen in the 2011 AARP Report on Kinship Care and can be accessed here: http://www.nysnavigator.org/files/professionals/AARP_KincareKeepingFamilies10.pdf

41 Information about NFCSP in NY can be found on NYSOFA webpage: https://aging.ny.gov/national-family-caregiver-support-program


43 Data provided to author by NYSOFA.

44 Additional information on NY’s Families First Preparations can be found here: https://www.rhfdn.org/resources

45 Data provided to author by NYSOFA.

46 In 2019, Ohio put forth $8.5 million to fund its statewide Kinship Navigator program. Information on that funding can be found here: http://ohioaging.org/wp-content/uploads/TURPIN-KINSHIP.pdf


48 https://www.qgazette.com/articles/funding-restored-for-kinship-care-programs/

49 https://www.congress.gov/116/bills/hr133/BILLS-116hr133enr.pdf
Acknowledgements

AARP STAFF:

Rhonda Richards  Senior Legislative Representative
Rebekah Mason  Senior Legislative Representative
Nicole Burda  Legislative Representative
Rita Choula  Director, Caregiving
Amy Goyer  Family and Caregiving Expert
Lynda Flowers  Senior Strategic Policy Advisor
Erik Kriss  Associate State Director, Communications
Kristen McManus  Associate State Director, Advocacy

COLLABORATORS:

Jo-Ann Yoo  Executive Director, Asian American Federation
Frankie Miranda  President and CEO, Hispanic Federation
Hazel Dukes  President, NAACP New York State Conference
Arva Rice  President and CEO, New York Urban League

WRITTEN BY:

Ryan Johnson  MSW Associate Director, NYS Kinship Navigator