

The Relentless Pursuit of Families: Why Kids Thrive with Kin

PRESENTED BY:

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Kinship Care and Protective Factors

Why utilize kin?

Compared to children living in foster care with non-kin foster parents, children in foster care living with relatives have:

1. Greater likelihood of achieving permanency

Recent study = 90% of teens in relative foster homes achieved permanency

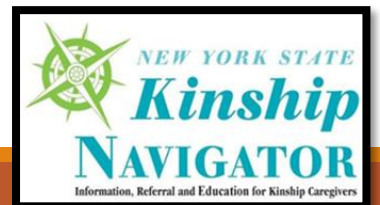
2. Experience fewer school changes

3. Better behavioral and mental health outcomes

4. More likely to report “feeling loved”

5. More likely to keep connections to sibling groups, extended family, and loved ones

6. Less likely to re-enter foster care after returning to birth parents



Profiles in Kinship Care: Children

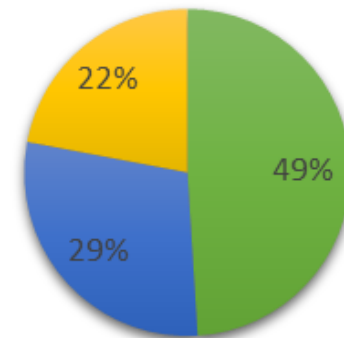
1 in 11 of all children will live in a kinship home during childhood

1 in 5 black children live in a kinship home

80% have had Child Welfare involvement before entering kinship care (CHSR study)

Age:

- 49% of children are under the age of 6
- 29% are between 6-11
- 22% between 11-17



■ Under Six ■ Six to Eleven ■ Twelve to Seventeen

Profiles in Kinship Care: Children

Trauma

- Abuse/Neglect
- Separation from parents

Often upset and derailed

Disruptive Behaviors

Higher rates of ADHD, ODD, PTSD,
adjustment and attachment disorders

ACE scores tend to be higher



Profiles in Kinship Care: Caregivers

65% of caregivers are grandparents

- Other types include aunts/uncles, siblings, fictive kin

Average age of caregivers is 56 years old

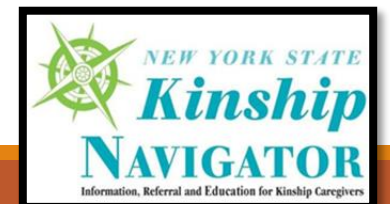
36% of households have an income of less than \$20k/year (CHSR study)

Race:

- 45% Caucasian
- 28% African American
- 27% Hispanic

Challenges for Kinship Families

- Kin who are asked to care for children typically have not anticipated having to care for children, and quickly experience the financial, health, and social/behavioral challenges associated with children who have experienced trauma
- Research indicates that kinship caregivers tend to be poorer, older, and less educated compared to families with at least one biological parent present
- Financial burdens include caregivers on fixed incomes (retirement, disability) or being unprepared for child care expenses due to current job schedules or income levels
- Children who enter kinship care through foster care tend to have more behavioral and emotional challenges
- Caregivers have to deal with complex family relationships



Supporting Families

Kinship caregivers may receive children in a multitude of ways:

- **Foster Care** (30% of NYS FC is children living with relatives)
- **CPS facilitated** (N-Docket/Safety Plans) – over 2000 placements per year and growing
- **Private Care** (no CPS involvement) – research says 50% of children living with kin have no prior CPS contact

The caregiving arrangement determines the amount of support a family is eligible for, both from Child Welfare (FC) and/or from other community supports

How do children end up in Kinship Care?

Causes for Care:

- Abuse, neglect or abandonment
- Parental alcohol and/or substance abuse
- Parents are deceased,
- Parents are mentally ill
- Parents are incarcerated
- Parents are unable or unwilling to care
- Military deployment

Children enter informal care for the SAME REASONS a child might enter into foster care

How do children end up in Kinship Care?

Formal Kinship Foster Care

- Child removed from parents by CPS, relative caregiver identified, caregiver goes through foster care certification and the child is placed with them in foster care
- Permanency Options Include:
 - Kinship Guardianship Assistance Program (KinGAP)
 - Adoption

How do children end up in Kinship Care?

Direct Placements (N-Docket, V-Docket)

- N-Docket (Direct Custody under Article 10 of Family Court Act): Child removed from parents by CPS, relative caregiver identified, CPS places child with caregiver without certifying them as foster caregiver. Caregiver given “Temporary Custody” under article 10 while CPS remains involved in the case, often with a reunification goal.
- Permanency Options:
 - Reunification with Parents
 - V-Docket (Article 6) placement with relative

How do children end up in Kinship Care?

Direct Placements (N-Docket, V-Docket)

- V-Docket (Direct Custody under Article 6 of Family Court Act): Child is removed by CPS, caregiver identified, CPS places child with caregiver without certifying them as a foster caregiver. The caregiver gets Article 6 “permanent legal custody” of the child and CPS is no longer involved in the case. Reunification is ruled out.
- Permanency Options:
 - Article 6 Custody is considered permanency
 - Bio-parent may petition the court to re-gain custody at any time

How do children end up in Kinship Care?

Private Custody Arrangements

- No Court Order, parental designations, affidavits, person in parental relations, in loco parentis
- Caregiver petitions the court, without prior involvement of CPS, for Article 6 permanent legal custody, or joint custody with the parents (with care and control going to the caregiver).
- Permanency Options:
 - Caregiver may relinquish care and control back to bio-parents at any time
 - Bio-parents may petition the court to re-gain custody at any time

Supporting Families

What supports are available?

Foster Care allows for families to have support to deal with trauma and the fall-out from adverse childhood experiences. Ensuring supports for families is a protective factor that will help mitigate ACEs. Foster Care subsidies also ensure financial stability.

KinGAP and Adoption, both available post-foster care, they also have a number of services available through:

- Permanency Resource Centers funded throughout the state, offering respite, support groups, and case management to post-permanency families.
- Subsidies ensure financial stability.

Custody cases (N-Docket, V-Docket) and Private Cases have limited resources available to them.

- Twenty-two counties have OCFS Kinship Care Programs, while 40 counties rely only on the NYS Kinship Navigator for services. PRCs are unable to service this population of families.
- The TANF Child Only Grant is available to children without income, but is hundreds less than a FC subsidy.



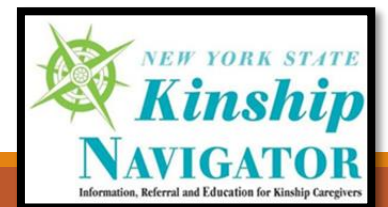
Supporting Families

Research shows that when kinship caregivers receive services and support, children have better social and mental health outcomes than children who live with caregivers who receive no such supports. Examples of services that help support families include:

- Support groups
- Mental Health Services
- Case Management
- Kinship Navigator

Families receiving such supports experienced increases in:

- Permanency and Stability
- Safety
- Lower rates of foster-care re-entry
- Lower rates of behavioral problems in children



NYS Kinship Navigator

Information

- Legal Fact Sheets
- County Resources
- Helpline

Referral

- Case Management Programs
- Support Groups
- Legal Referral Network

Education

- Statewide Presentations
- Online Video Archive
- Legislative education

Advocacy

- Case by case advocacy
- Statewide advocacy



Strategies:

- Connections to available financial assistance and legal advocacy
- Partnering with local kinship services and departments of social services
- Centralized information database

Helpline:
877-454-6463

Website:
www.nysnavigator.org



Family Finding Model



**One fourth of youth are reading at a third grade level or lower when they age out of foster care*

**Less than one in five youth are completely self sufficient when they age out of foster care.*



Risk Factors

Compared to peers are at increased risk for:

- *incarceration*
- *high school dropout*
- *poverty*
- *early pregnancy*
- *unemployment*
- *homelessness*

***Legal Permanence** – child permanently lives with a biological parent, an adoptive parent, a legal guardian or in a custody arrangement.*

Relational and Emotional Permanence

- Financial, social and emotional safety net
- Transition to adulthood - Interdependence vs. Independent
- Sense of belonging



Permanency is NOT a place—it is a state of mind



Importance of Connections

Youth need lasting connections with caring adults in order to succeed. Loneliness and disconnection are dangerous to youth, both in the short and long term. Disconnection creates hopelessness.



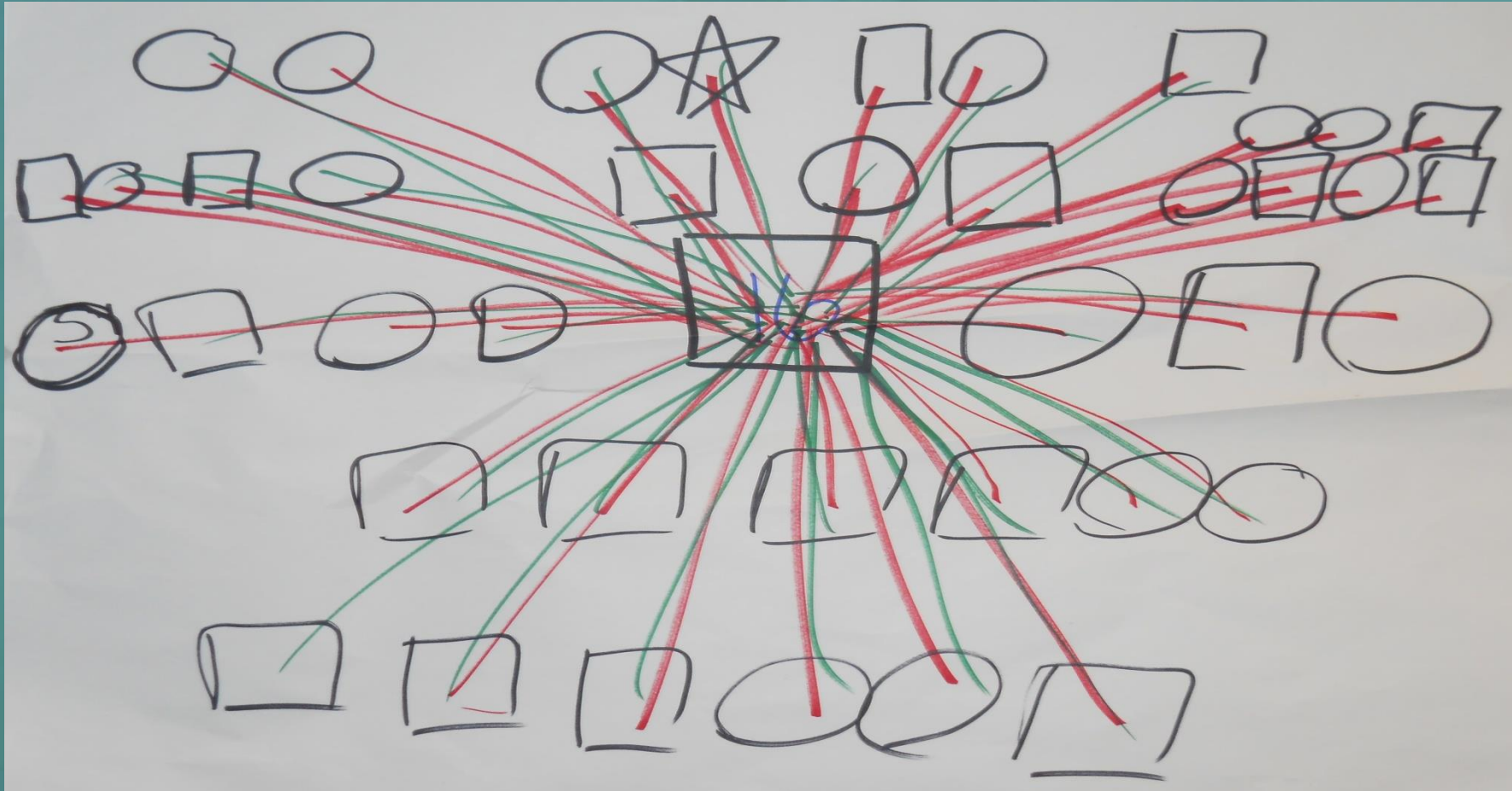
Permanent Connections

Most Staff members and foster parents are NOT permanent connections—they are temporary connections

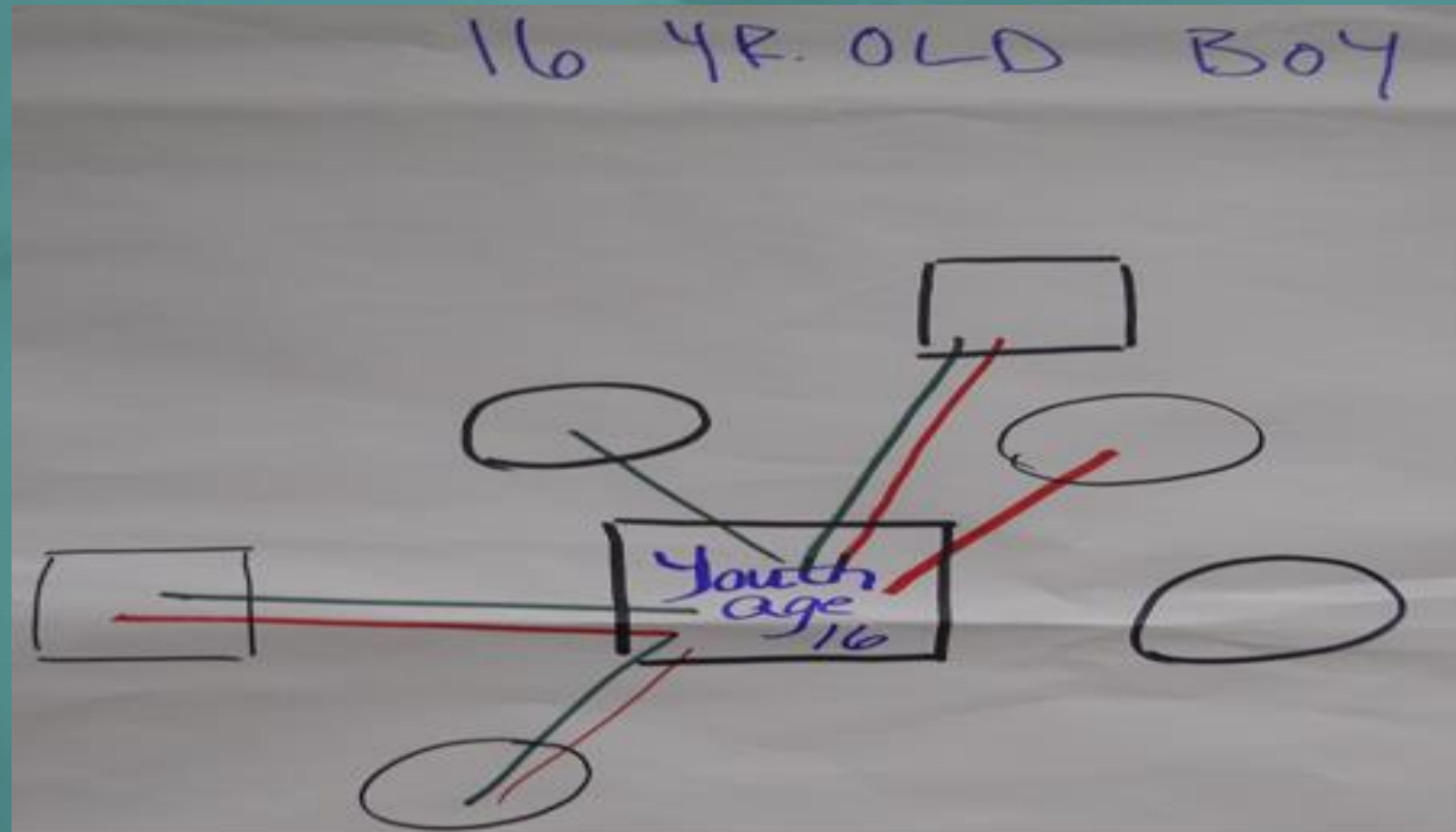
These relationships come with Expiration Dates



Connectedness Map - typical 16 yr old



Connectedness Map – 16 yr old in care



Safety, Risk and Well Being



Equal Efforts



Family Finding Video



THANK YOU!

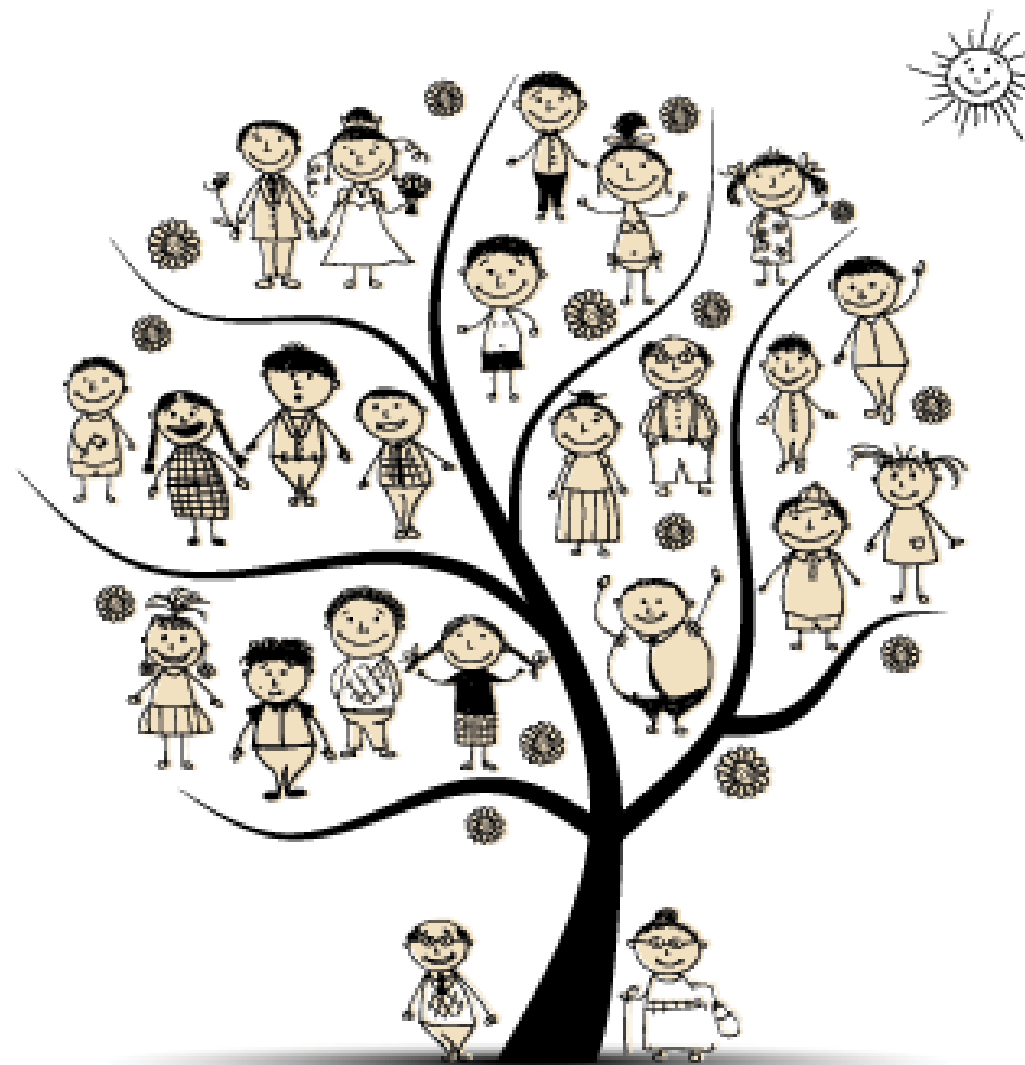
Onondaga County Commitment to Kin

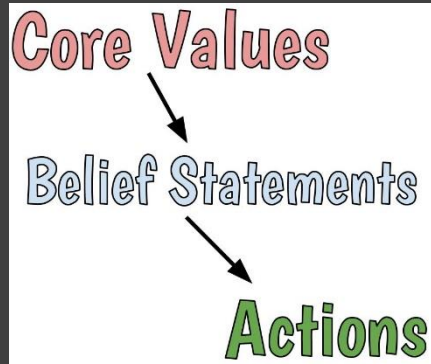
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Onondaga County's Commitment to Kin: Core Beliefs

***Removal of a child from their home is a family CRISIS and should be treated as such**

*Children have better outcomes and achieve permanency quicker with fewer disruptions when they are placed with kin.

*Finding fathers is critical

*Intensity and urgency to seek out kin is necessary and once found, immediate supports for the family and children are required to support the placement and reduce trauma.

* It's not about the money. Many times the services and supports and getting answers to questions is more important and is the support caregivers need.

Agency Strategies to Support Kin

Creation of the Triage Team

Increased the number of certification trainings for kin to become Foster Parents

Expanded funding for encouraging kin to get certified and identified flex funds to support barriers to placement

Increased access to services for kin: IL Program, Kinship Navigator, Summer Camps

Coming Soon Referral to Salvation Army FFT Child Welfare clinician for cases needing additional supports



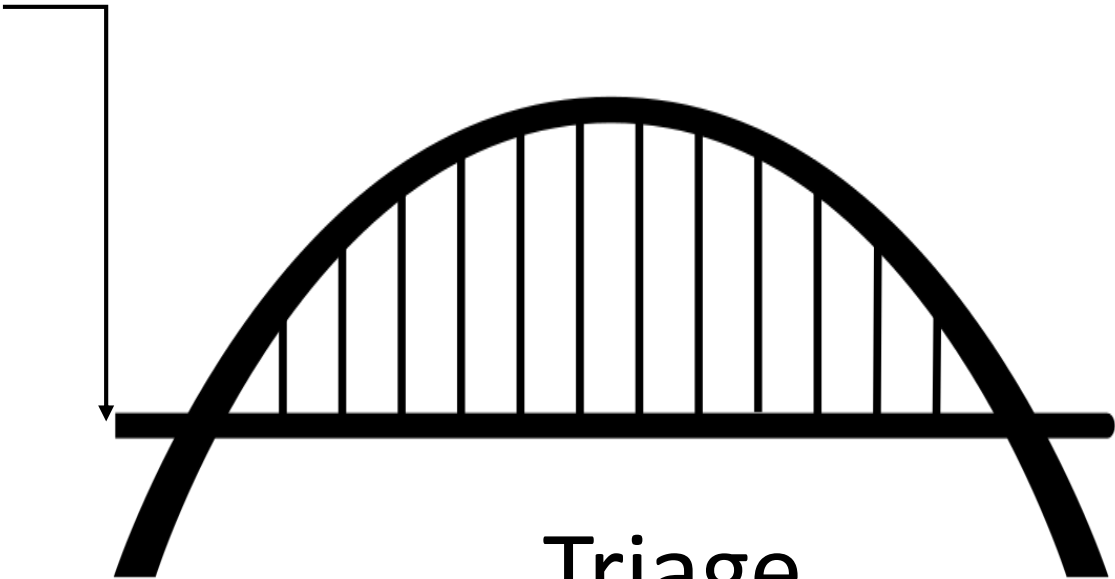
Triage Team

Triage Team is an internal process that is initiated by a child being removed from their home and placed in foster care or with kin.

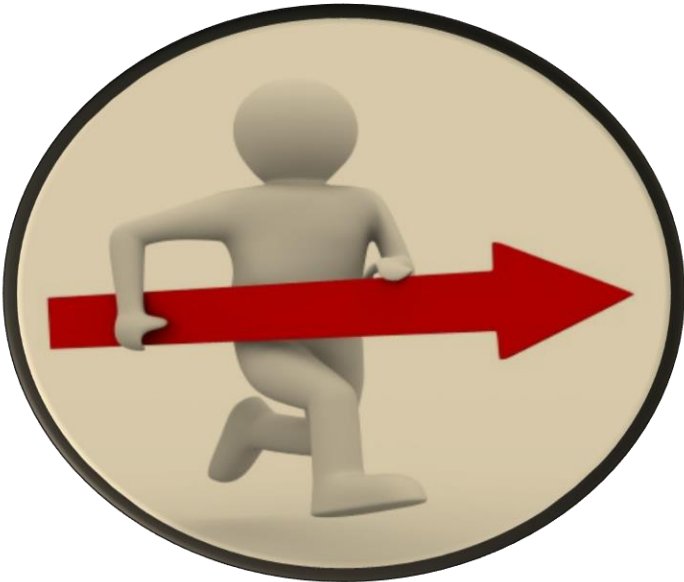
The team creates a bridge between the removing worker and the permanency worker in order to ensure the family's needs, as well as the relative caregiver's needs, are met.

Investigations and Direct Service workers make an internal referral to the Triage Team when an emergency removal has occurred or they anticipate a removal in court

CPS/DP



Triage



Permanency

Triage Team: Tasks

Engage with the parents and family immediately and assist them in making a safe and appropriate plan

Identify, locate, and engage fathers

Arrange for visitation for the child and the parents/family within 24 hours of removal

Parents are invited to and encouraged to attend the child's medical appt, usually occurring within 3 days of the placement

Gather important documents for the Permanency Worker ie: birth certificate, medical records, ICWA

Facilitates an internal transfer meeting



Triage Team: Supporting Relatives

Relative is provided with information regarding permanency options including, fostering, KinGap, and V-Docket custody (Article 6)

Emergency certifying relatives with no CPS and no criminal history

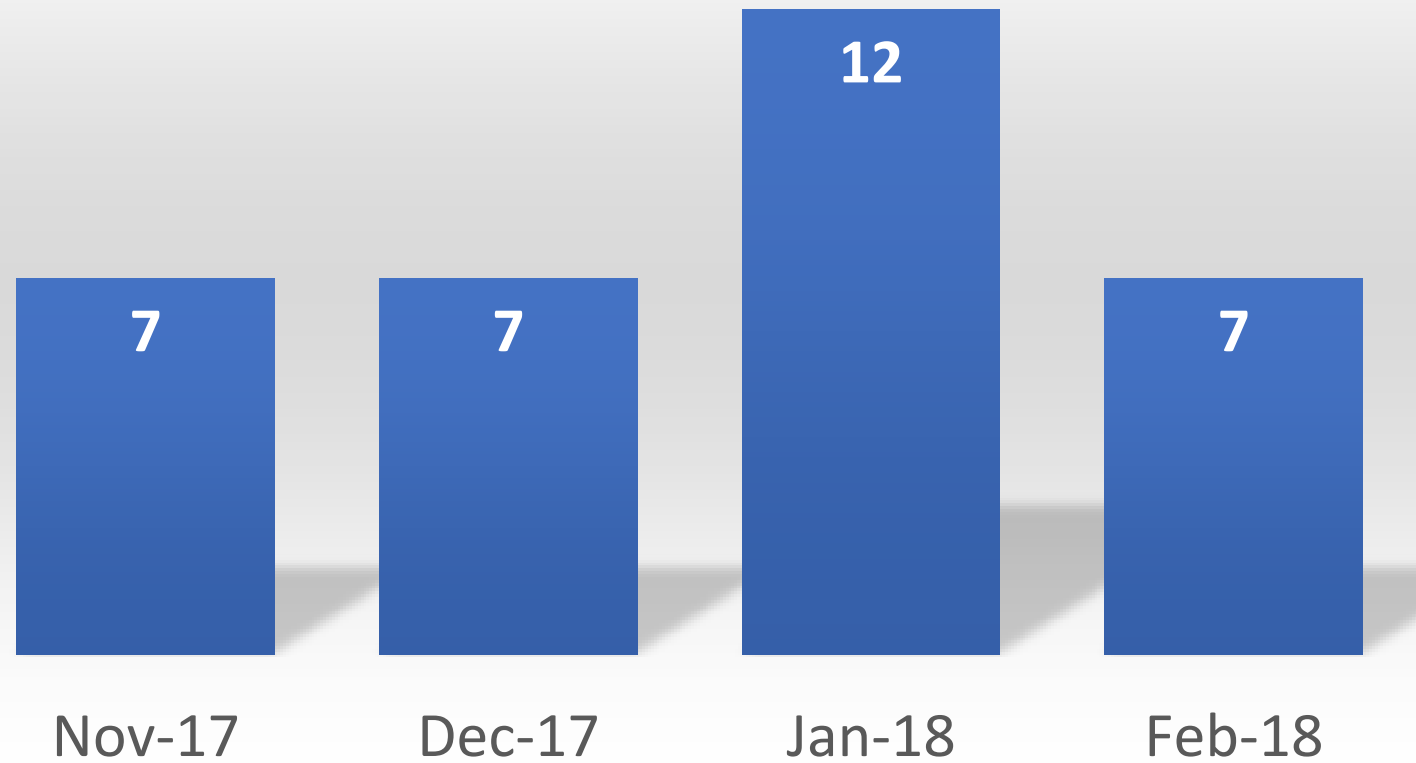
Referring relatives interested in becoming foster parents to our home finding unit for certification

Providing clothing vouchers, beds, car seats, baby supplies, food vouchers, etc

Relatives meet a DCFS worker immediately and assist in arranging for school, daycare, medical, and any other necessary services

These are cases wherein a child was placed with a relative on a safety plan that Triage supports

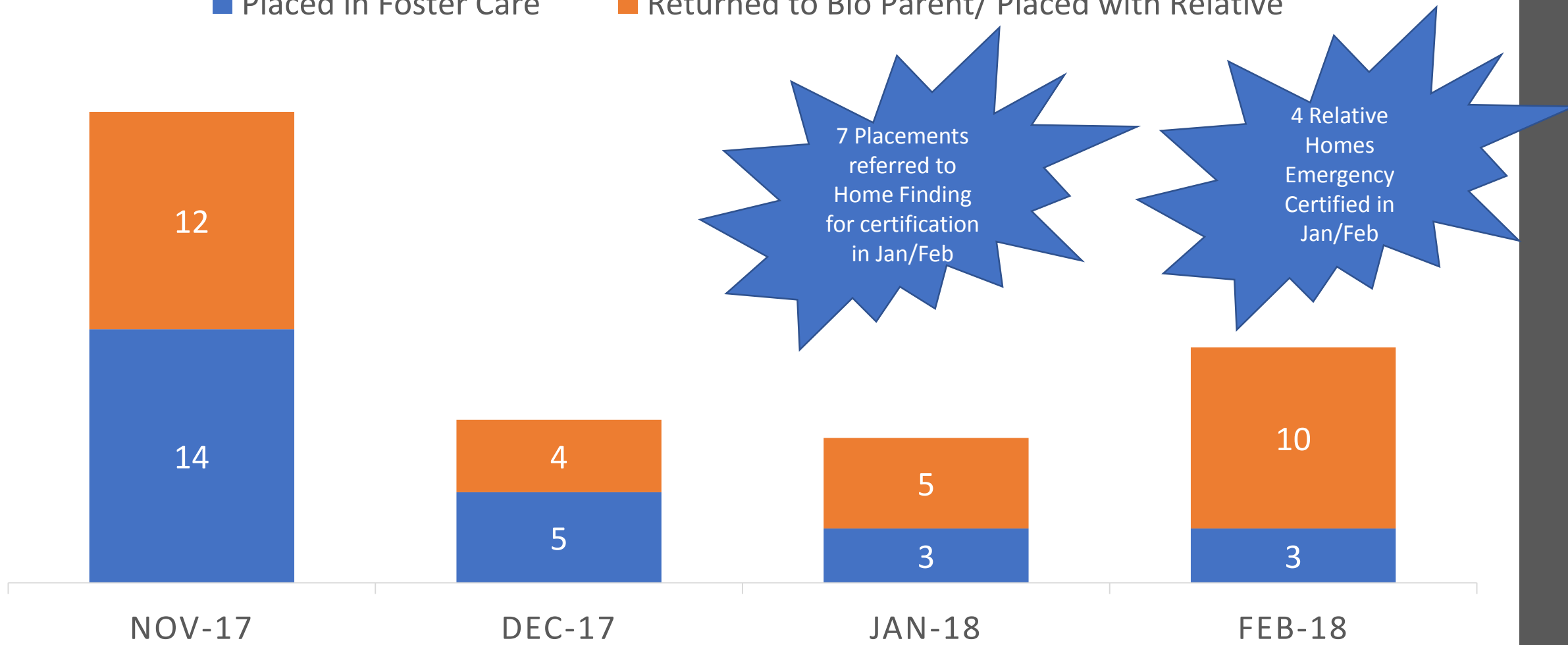
Children placed directly with relatives



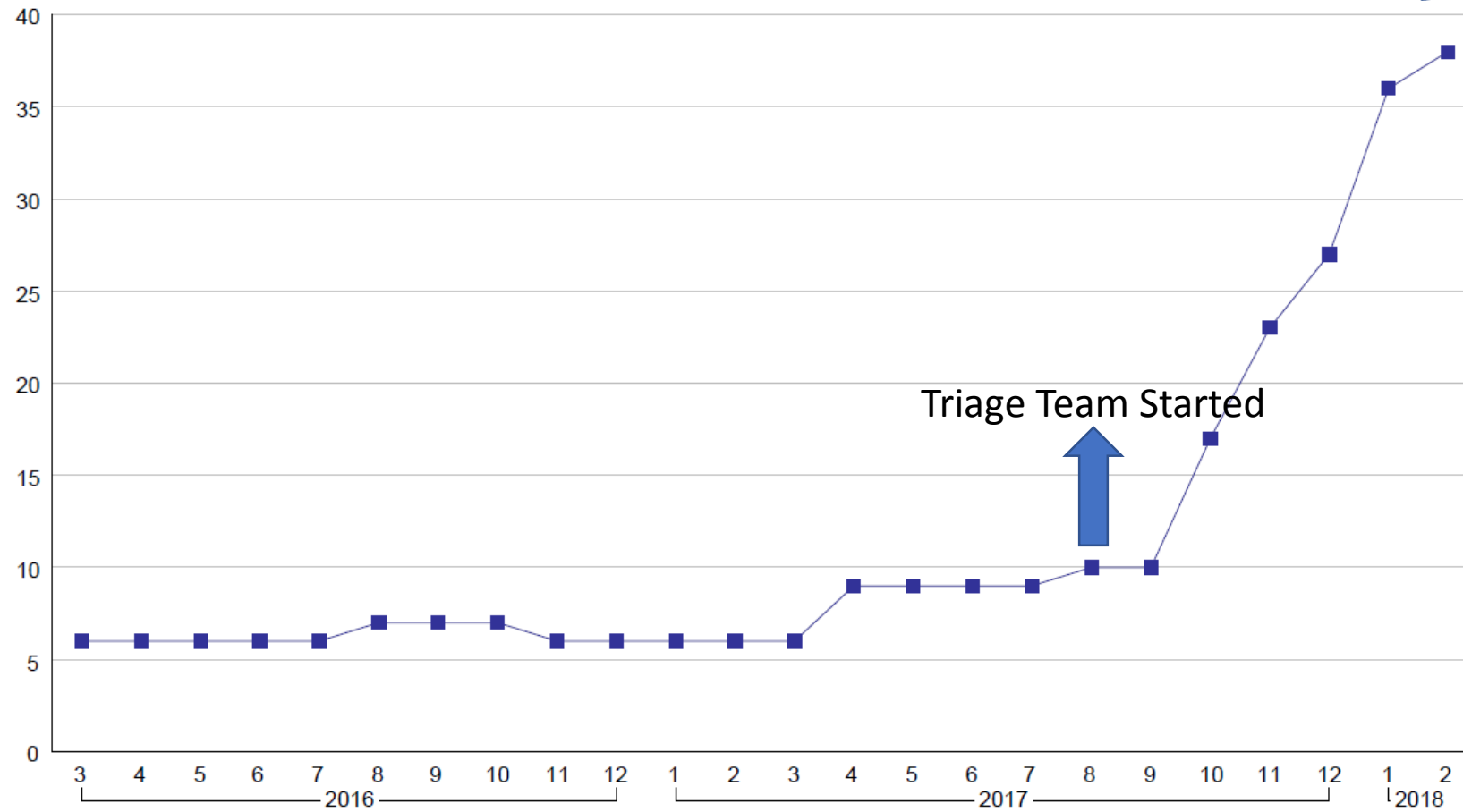
OUTCOME OF CPS REMOVALS REFERRED TO TRIAGE

■ Placed in Foster Care

■ Returned to Bio Parent/ Placed with Relative



Number of Children in Kinship Placements 25 Month Trend
District: ONONDAGA



Questions?

Comments?