

Kinship Care in Washington State

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partners
for our children.

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Contents

<i>About Partners for Our Children</i>	2
Executive summary	3
Definitions of terms	4
Overview of kinship care	5
Methodology	5
Results	6
Experiences of kinship caregivers in Washington	6
Experiences of caregivers by age	9
Experiences of caregivers by race	10
Kinship caregivers in rural and non-rural areas	11
Summary	12
References	13
Appendices	15
Appendix 1. Tables and Figures	15
Appendix 2. Statewide Caregiver Survey	39

About Partners for Our Children

Partners for Our Children (P4C) was founded in 2007 to focus new thinking, resources and expertise on the state's child welfare system. We are a collaboration between Washington State Department of Children, Youth, and Families, the University of Washington School of Social Work and private sector funding. The mission of P4C is to combine the strengths of a public research university with resources from the private sector to improve outcomes for vulnerable children and families touched by Washington's public child welfare system. We advance our mission through three interrelated tasks: system level research, data and analytic support, and public policymaking. As an independent entity with both the research assets of a major university and strong relationships with policy makers, we are in a unique position to research and evaluate the effects of policy choices and practice changes in the public child welfare system. We analyze data from the Department of Children, Youth, and Families to better understand trends within the system, and when possible, combine it with data from related systems (courts, education, etc.) to create a more complete picture of how the child welfare system operates. Findings ultimately provide critical decision-making support for lawmakers and agency staff. Finally, we provide non-partisan input on proposals and legislation related to children and families in Washington state and at the federal level – and whenever possible, we bolster public policy discussions with solid research evidence and data.

Washington's Kinship Navigator program has enjoyed legislative support and growth over the past 15 years since it was first implemented in 2005. In order to promote stability, Kinship Navigators provide kinship care families with assistance in applying for state and federal benefits as well as providing information and referrals for services to address their specific needs. These services promote knowledge and awareness of available resources for health, financial, legal, and other support services, such as, local support groups, kinship closets, legal clinics, and free family recreational passes. The economic services administration (ESA) also works with DCYF to provide supports to kinship caregivers. In addition to providing information and referral services, Kinship Navigators also help to reduce barriers faced by kinship care families through problem solving and collaboration with public, private, local, and state service providers.

This report provides the first statewide glimpse into the needs of formal and informal kinship caregivers since the WA kinship navigation program was implemented in 2005. This survey is a result of a partnership between UW, Adult Long-Term Services Administration (AL TSA), and the Department of Children, Youth and Families (DCYF). The authors would like to thank our external partners for their valuable collaboration, comments, and support. The results from this survey will inform the modification of a statewide kinship navigation program manual for consistent statewide use by navigators as well as inform future program and resource development.

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Executive summary

In order to understand the experiences of kinship caregivers in Washington State, Partners for Our Children (P4C) conducted a statewide survey with kinship caregivers. Eight hundred and sixty-eight kinship caregivers responded to the survey. Responses indicated that kinship caregivers in Washington state are primarily white, generally over the age of 55 and typically identify as grandparents. Kinship caregivers in Washington most frequently select finances, their child's emotional health, and the child's behavior as their greatest challenges. Kinship caregivers most frequently select financial support, recreational and social activities for the child in their care, and respite care as unmet needs.

This report provides an analysis of the differential responses provided by kinship caregivers who are over the age of 55, kinship caregivers who identify as non-White (referred to as POC caregivers for person of color), and kinship caregivers who reside in rural areas (as compared to younger, white, and non-rural residing kinship caregivers, respectively). The analysis revealed that kinship caregivers over the age of 55 more frequently select lower levels of income and are more likely to select physical health as their top challenge. POC caregivers were less likely to select their spouse or partner as their primary source of support and were less likely to select access to respite care services as their top challenge. POC caregivers selected their most frequent sources of support as public social services and other relatives. POC caregivers were more likely to select medical services as their top unmet need for their child. Kinship caregivers who reside in rural areas are more likely to select legal problems as a challenge than those who reside in non-rural areas.

Kinship caregivers provide an important source of support for children. This survey, conducted in partnership with the Adult Long-Term Services Administration (AL TSA) and the Department of Children, Youth and Families (DCYF), provides information on the characteristics of those who provide kinship care in Washington state, as well as their primary sources of support, top challenges, and ongoing unmet needs.

Definitions of terms

Adoption. The legal process by which children join a family, where they will not be raised by their birth parents (CB, n.d.).

Durable power of attorney. An agreement by which a parent designates a trusted caregiver to make legal and medical decisions for a child (HCA, 2016).

Foster parent. Adults who provide a temporary home for children in their care. They may be relatives or non-relatives of the children and must be licensed caregivers (CB, n.d.).

Guardianship. A judicially determined relationship in which an adult cares for a child and assumes parental responsibility, without the termination of parental rights (CB, n.d.).

Kinship care. Full-time care provided by a child's relative or close family friend (CB, n.d.).

Non-parental custody (also known as third party custody). An agreement where someone other than a child's parents, with close ties to a child, assumes legal custody of the child's physical, medical, and emotional needs (Legal Voice, 2017).

TANF child-only grant. Funds granted to the child on behalf of the government, which are based on the child's income (Legal Voice, 2017).

TANF needy family grant. Governmental funds that can be granted for up to 60 months to the child and caregiver, which are based on the incomes of the children and adults in the household (Legal Voice, 2017).

Overview of kinship care

Kinship care involves the full-time care of a child by a close family friend or relative. Approximately 7.6 million children currently live in households headed by kinship caregivers in the United States (Lent, & Otto, 2018; U.S. Census Bureau, 2018). Kinship care arrangements can be informal (taking place without state involvement) or formal (arranged/supervised by the state). Informal kinship care arrangements take place most frequently (Gleeson & Seryak, 2010). As of September 2, 2020, 3,548 children (47%) within Washington State of children experiencing out-of-home placement were placed in kinship care (DCYF, 2020). However, 44,000 children lived with a grandparent through informal kinship care arrangements during that same time period in Washington State (Annie E. Casey Foundation, 2020). Nationally, 59% of kinship care arrangements involve grandparents, which is the most common placement type (2020). In 2018, the U.S. Census Bureau found that over 2.4 million households could be classified as grandparent-head-of-households with no parent present (indicating that the grandparents cared for their own grandchildren under the age of 18) (U.S. Census Bureau, 2018).

Kinship care can provide a sense of stability and security to children. For example, children in kinship care experience fewer instances of school and neighborhood changes than in foster care, which leads many researchers to argue that kinship caregiving arrangements should be considered the preferred placement option for children whose parents cannot care for them (Winokur & Batchelder, 2015; Gleeson, 1999). Kinship caregiving arrangements result in fewer placement disruptions and are generally seen as more financially effective for states than foster care placements (Littlewood, 2015).

Informal kinship caregivers are eligible for a few different types of financial resources, such as the Temporary Assistance for Needy Family (TANF) Child-Only Grant, which provides government funds for children in kinship care. Caregivers may also be eligible for time-limited governmental funds based on their income. Additional financial support for kinship caregivers can come from the Kinship Caregivers Support Program (KCSP), which provides state funding for basic needs on a short-term basis. KCSP grants are annually limited to \$2500 per caregiver and TANF grants provide \$363 for the first child per month (the amount provided is higher for the first child and lower for each additional child). The Economic Services Administration (ESA) also works with the Department of Children, Youth, and Families (DCYF) to provide supports for kinship caregivers. These funds are less than the financial supports provided to foster parents in Washington State. Formal kinship families who are not licensed are eligible for non-needy, child-only TANF. While formal kinship families do not receive monthly foster care reimbursements, they may be eligible for child care. Medical coverage is also available to informal caregivers whose dependents are Medicaid eligible. Formal kinship caregivers are eligible for certain types of mileage reimbursement and a very limited amount of clothing support, such as a clothing voucher (DCYF, n.d.).

Methodology

Recruitment. Participants were recruited through mass mailings developed in partnership with the three major state department offices responsible for providing services to kinship caregiving families across the state of Washington, which includes DCYF, the Aging and Long-Term Support Administration (AL TSA), and the Economic Services Administration (ESA, which is the TANF office where child-only TANF benefits are distributed). ESA recruited about half of the participants, while DCYF and AL TSA each recruited approximately 25% of the participants. Surveys were distributed between November 2019 and May 2020. Partners for Our Children conducted both a satisfaction survey and a statewide survey (see

Appendix 2). Participants who completed the satisfaction survey received a \$15 gift card for compensation of their time. For the statewide survey, 20 names were randomly selected for \$50 gift cards. Each survey took approximately 15 minutes to complete. This study was approved by the Washington State IRB.

Quantitative analytic method. The statistical software program STATA (v. 16) was used to calculate general descriptive statistics for program participants. Differences between comparison groups (such as caregivers above and below the age of 55) were calculated using a chi-squared test for categorical outcomes and a t-test for nominal outcomes. Given that respondents could select up to three sources of support, unmet needs, and challenges, differences between age group do not necessarily indicate that the need does not exist for a certain group. Instead, the differences reflect varying degrees of prioritization and selection of the three content areas. Percentages for results may not equal 100% as respondents were often allowed to select multiple choices for some factors such as race. For the results on unmet needs, greatest challenges, and biggest sources of support, participants could select up to three options meaning that most percentages will not total 100%.

Qualitative methodology. Qualitative responses were coded for common themes using Dedoose, a secure mixed-methods research application. The number of respondents who answered the question and the percentage of those respondents who selected a given theme in their response are reported below along with representative quotes from each category. Percentages do not equal 100% because respondents could write about multiple topics and thus more than one code could be assigned to their response.

Results

Experiences of kinship caregivers in Washington

Caregiver demographics. Eight hundred and ninety-eight kinship caregivers responded to the statewide survey. Kinship caregivers who completed the survey ranged from ages 21 to 88, with an average age of 58. While majority of kinship caregivers identified as white (80%), black (8%) and American Indian¹ caregivers (8%), caregivers of other races² (1.4%) were also represented in the sample. Fifteen percent of the kinship caregivers also reported Hispanic origin. Most caregivers identified as female (90%), and caregivers reported a median income between \$30,000-\$39,999, which is lower than Washington State's 2018 median income of \$73,294 (Office of Financial Management, 2020). The participants represented all 39 counties in Washington State, with the greatest percentages of caregivers responding from Pierce (11%) and King Counties (13%). See Table 1 for a detailed summary of kinship demographics and placement types.

Kinship caregiver placement types. Most of the participants in this sample identified as grandparents (71%) and aunts and uncles (13%) in relation to the child in their care. Other kinship caregivers described their relationship to the child in their care as siblings (.95%), cousins (1.9%), nieces/nephews

¹ Many terms are used to describe indigenous people to the United States. For the sake of consistency, this report uses terminology consistent with the U.S. Census Bureau: American Indian.

² Other races represented in this sample included Native Hawaiian (.002%), Korean (.006%), Japanese (.002%), and Filipino (.004%).

(2%), adoptive parent(s) (1.5%), family friends (1.3%) and other³ (9%).⁴ The majority of participants identified as informal kinship caregivers (83.8%). For formal kinship caregiver arrangements, the most common types of placements involved guardianship (32%), third-party custody (28%), and unlicensed caregiver arrangements (11%). Informal kinship caregiver placements most frequently involved third-party custody (38%), guardianship (24%), and parental consent agreement⁵ (23%). Kinship caregivers cared for an average of two children, but a small percentage of the sample cared for four or more children (10%). Kinship caregivers reported that they had cared for children for an average of six and a half years; however, informal kinship caregivers reported having cared for children for longer on average (seven years) than formal kinship caregivers (four years). Children resided with their kinship caregivers for a variety of reasons. The most frequently cited circumstance leading to the kinship caregiver arrangement involved birth parent substance use (64%), but participants also reported that incidents of abuse and neglect (28%), birth parent behavioral health (16%), and birth parent incarceration (20%) also contributed to the placement decision. Informal kinship caregivers were more likely to select birth parent incarceration, substance use, and finances as factors that led to the current arrangement than formal kinship caregivers. These same circumstances may have prompted the child welfare intervention for formal kinship caregivers.

Sources of support reported by kinship caregivers. Kinship caregivers reported sources of support as well as the greatest challenges and unmet needs that they experienced in their roles. The most common sources of support selected by kinship caregivers involved their spouse or partner (42%), relatives (35%), and public social services (35%). See Figure 1 for more information about sources of support. Informal kinship caregivers were more likely to select other relatives and public social services as sources of support than formal kinship caregivers. See Table 8 for the statistical differences between informal and formal caregivers in reported sources of support.

Kinship caregivers who marked “other” described a variety of sources of support. A qualitative analysis revealed a few prominent themes, including family or community support (25%), with 8% of the sample indicating that one or both of the child’s biological parents were a source of help. Caregivers over the age of 55 made up 69% of respondents indicating that family or community support was another source of help for them. Non-white caregivers (63%) and informal caregivers (55%) were also more likely to indicate that family or community were another source of help for them. The other sources of help included service agency support (24%) and financial support (18%), including public benefits (16.2%), childcare (6%), and health insurance (4.3%). Twenty-three percent of the 117 respondents reported that they had not received any help. Younger caregivers were more likely to indicate they had received no help, making up 73% of respondents who indicated they had not received help. Formal caregivers (69%) and white caregivers (56%) were also more likely to say they had not received any help. See Figure 2 and Table 2 for more information on the qualitative responses to the “other” sources of support indicated by kinship caregivers.

³ Responses under the category of “other” revealed numerous types of kinship caregiving arrangements such as non-biological grandparents, pending adoption, or different types of arrangements for each of the children in their care (among others).

⁴ Total percent exceeds 100 due to rounding.

⁵ A temporary parental consent agreement grants temporary permission to a caregiver to make medical or educational decisions for a child. This agreement is not legally binding.

Challenges reported by kinship caregivers. When asked to describe the top three challenges they faced, the most frequent challenges selected include finances (36%), the child’s emotional (32%) and the child’s behavior (27%). See Figure 3 for more information about kinship caregiver reported challenges. Informal kinship caregivers were more likely to select finances, housing, and the child’s education as top challenges than formal kinship caregivers. See Table 8 for the statistical differences between informal and formal caregivers in reported challenges.

A qualitative analysis of the “other” response revealed that kinship caregivers reported financial challenges with the greatest frequency (30%). Within the category of financial challenges, respondents described clothing (8%) and needing to delay retirement (7%) most frequently. The next most frequent challenges reported were accessing high quality mental health for themselves or the child (17%), parenting challenges caused by advanced age (11%), legal support (10%), the child’s education (9%), issues with a service agency (8%), and the child’s health (8%). See Figure 4 and Table 3 for more information on the qualitative responses to other reported challenges.

Unmet needs reported by kinship caregivers. Kinship caregivers also reported various unmet needs that they experienced in their role. The most frequently selected of these unmet needs included financial support (35%), recreational and social activities for the child (31%), and respite care (23%). See Figure 5 for more information about kinship caregiver reported unmet needs. Informal caregivers were more likely to select financial support and finding affordable and adequate housing as unmet needs than formal caregivers. See Table 8 for the statistical differences between informal and formal caregivers in reported unmet needs.

When asked what needs had not been met, a qualitative analysis of the respondents who selected “other” (N=113) indicated financial needs with the highest frequency (42.5%). Informal caregivers were more likely to indicate financial needs were unmet (74%), as were white caregivers (61%) and older caregivers (56%). The next most frequent unmet needs were mental health needs (13.3%), school support (8%), support for transition-aged youth including college tuition assistance (7.1%), relationship with the child’s parents (6.2%), and clothing (6.2%). See Figure 6 and Table 4 for more information on the qualitative responses to other types of unmet needs.

Qualitative results. Kinship caregivers also answered a few open-ended questions that provide insight into current support and barriers that they experience. The section below provides the results of the qualitative analysis of those responses.

Most helpful resources and services reported by kinship caregivers. In response to the question, “Which resources and/or services have been most helpful to you as a kinship caregiver raising a child?”, kinship caregivers reported a variety of helpful resources. The analysis revealed that for the majority (54%) of the 724 kinship caregivers, financial support provided the biggest help. Informal caregivers and white caregivers were more likely to indicate that financial support was the most helpful resource. Within the theme of financial support, 31% of the 392 respondents described public benefits such as TANF or food stamps. Kinship caregivers also indicated that the state provided healthcare plan for children and the provision of vouchers or in-kind donations of clothing, supplies, and groceries provided needed support. Other types of support reported by kinship caregivers included service agencies (34%) and mental health support (15%). Eleven percent of caregivers stated that they had not received help of any kind during their time as a kinship caregiver, with younger caregivers, white caregivers, and formal caregivers more

likely to indicate they had received no help. Ten percent of the sample said that the child’s school was the biggest help, and another 10% indicated that childcare/respite care were most the most helpful services. See Figure 7 and 8 for depictions of reported helpful resources for kinship caregivers. See Table 5 for representative quotes for most helpful resources.

Policy, service, and legal needs identified by kinship caregivers. Kinship caregivers described “the most important thing that needs to change to help you and others in your situation”, by identifying various policy, service, and legal needs. Caregivers most frequently mentioned that financial support (41%) needed to change in order to help kinship caregivers. Within the theme of financial support, 43 respondents (7%) mentioned affordable housing and 30 (4.6%) mentioned food assistance. Informal caregivers and white caregivers were more likely than formal caregivers and non-white caregivers to identify financial support as an issue that needs to change. The second most frequently mentioned type of needed change included mental health support (12%). Informal caregivers were overwhelmingly more likely to identify mental health needs as an issue (78%). Non-White respondents were also slightly more likely to identify mental health as a problem (55% of the response sample). The next most frequently mentioned issues involved fixing problems with child welfare policies and procedures (11%), providing more communicative and supportive case management (10%), offering affordable legal assistance (9%), providing childcare/respite care (9%), and kinship caregiver/grandparent rights (7%). See Figure 9 and Table 6 for more information.

Additional information reported by kinship caregivers. Kinship caregivers also had an opportunity to share additional information about their needs or experiences in their current role. Forty-eight percent of respondents expressed needing more financial support. Specifically, caregivers needed help paying for legal assistance (10.9%), needed more public benefits such as TANF and food stamps (9.6%), needed help securing affordable housing and/or utilities such as internet and heat (8%), school expenses (7.5%), extracurricular activities for children (7.3%), and child or respite care (6.6%). Experience with a service agency was the next most frequently described experience (23.7%), with 9.3% of respondents indicating a need for more agency communication about resources and case updates, 6.4% of respondents expressing a need for more resources for kinship caregivers, 5.9% desiring more substance abuse support for the child’s parents, and 3.9% reporting policy or procedural issues with a child welfare agency. Mental health was the next most frequently reported need or experience (18.2%), followed by parenting challenges including advanced age and a desire for parenting training (17.8%), legal assistance (10.9%), and kinship caregiver rights (10.2%). See Figures 10, 11, and 12 as well as Table 7 for more information.

Experiences of caregivers by age

The majority of the kinship caregivers who responded to this survey identified as over the age of 55. Those over the age of 55 (referred to as older caregivers) may face different challenges than those under the age of 55 (referred to as younger caregivers) such as a fixed income (for retired kinship caregivers) and struggles related to physical health. This section discusses differences in the experiences of older and younger kinship caregivers in Washington state.

Demographic differences between older and younger kinship caregivers. Older kinship caregivers reported less income than younger caregivers. Older caregivers are also less likely to receive income from wages and salary and are more likely have income sources such as social security, disability payments, pension, and TANF grants than younger caregivers. Older kinship caregivers are also less

likely to be employed than younger caregivers. Older kinship caregivers were also more likely to be married than younger kinship caregivers. See Table 9 for detailed results of the statistical analysis regarding demographic and placement type differences for these age groups.

Differences in kinship caregiver placement types by age group. Older kinship caregivers differed from younger kinship caregivers in placement types in a few key respects. A greater percentage of younger caregivers reported birth parent substance use and incidents of child abuse/neglect as reasons for the current placement arrangement than older caregivers. Older caregivers were also more likely to be grandparents of the child in their care than younger caregivers. Older caregivers reported fewer numbers of children in their care as well as having had children in their care for a greater number of years than younger caregivers.

Differences in challenges, needs, and sources of support by age group. A few differences existed in the types of challenges, needs, and sources of support selected by those over and under age 55. In regard to sources of support, older caregivers were more likely to select community health clinics as source of support. However, younger caregivers were more likely to select partners, friends, and other relatives were sources of support. Concerning challenges experienced in their caregiving role, younger caregivers were more likely to select child-care arrangements, the child's emotional health, and the child's relationship with their birth parents. Older caregivers were more likely to select their own physical health, delaying their retirement, and the child's education as challenges they experienced. For unmet needs, younger caregivers were more likely to select a need for legal services and advice, infant and toddler services, and childcare. Older caregivers were more likely to select the inability to access special education services for children in their care as an unmet need than younger caregivers. See Table 10 for detailed results of the statistical analysis regarding differences for these age groups in their reported challenges, needs, and sources of support.

Experiences of caregivers by race

While the majority of the participants identified as white and non-Hispanic, it is important to understand whether any differences exist between white non-Hispanic kinship caregivers and kinship caregivers who identified as people of color (POC).⁶ This section discusses differences in the experiences of caregivers who identify as white and POC.

Demographic differences between white and POC caregivers. No significant age difference was found between white and nonwhite caregivers. However, White kinship caregivers reported higher levels of income than POC caregivers. While the median income for POC caregivers was between \$20,000 and \$29,999, white kinship caregivers reported a median salary range of \$30,000 to \$39,999. White caregivers were more likely to report incomes sources that included wages and salary, social security, pension, child only TANF grants, state medical assistance for their children, and working connections childcare.⁷ While

⁶ The authors of this report recognize that grouping all people of color together results in an inability to identify the diverse experiences between those of various racial groups. The experiences of all non-White people are not identical. This analysis seeks to meet the necessary requirements of the Prevention Services Clearinghouse, which stipulates that analyses should include a comparison between White and non-White participants. For more information on unique experiences of the various demographic groups described in this paper, please contact the authors.

⁷ These differences in income between white and POC caregivers also exist when AI/AN caregivers are removed from the POC caregiver group.

American Indian (AI) caregivers were more likely to report tribal per capita payment as a source of income, only 13% of AI respondents received Tribal Per Capita Payments, and it was not their only income source. Differences were also found in the marital status of kinship caregivers, as POC caregivers were more likely to identify as single. County differences were also found between white and POC caregivers, with a greater percentage of POC caregivers residing in Yakima. These residential differences may be due to the fact that the largest tribal reservation in Washington State is within Yakima County. Yakima County also has a large percentage of migrant workers. See Table 11 for detailed results of the statistical analysis regarding white and POC kinship caregiver demographic and placement type differences.

Differences in kinship caregiver placement types by race. Several differences in placement type were found between White and POC caregivers. The children placed with POC caregivers were younger than those staying with white caregivers. White caregivers were more likely to state that kinship caregiver arrangement was due to the age of the birth parent⁸, substance use, incidents of child abuse/neglect, and birth parent behavioral health. POC caregivers were more likely to report death of the birth parent as a circumstance leading to the kinship caregiving arrangement. Regarding the type of informal kinship caregiver arrangement, more POC caregivers were more likely to describe their informal arrangement as a family decision, while white caregivers were more likely to define their informal arrangement as non-parental custody and guardianship.

Differences in kinship caregiver reported challenges, needs, and sources of support by race. A few differences existed in the types of challenges, needs, and sources of support selected by white and POC caregivers. POC caregivers were less likely to select their spouse, friends, religious organizations, behavioral health services, and schools as sources of support. Concerning challenges, white caregivers were more likely to select their physical health, delaying their retirement, and the child's education as challenges. POC caregivers were more likely to select child-care arrangements, the child's emotional health, and the child's relationship with their birth parents as challenges. In regard to unmet needs, POC caregivers were less likely to select legal services and advice and respite care. However, POC caregivers were more likely to select medical care for their child as an unmet need. See Table 12 for detailed results of the statistical analysis regarding differences white and POC kinship caregivers in their reported challenges, needs, and sources of support.

Kinship caregivers in rural and non-rural areas

Kinship caregivers living in rural areas may face unique challenges, as compared to kinship caregivers living in suburban and urban areas. This section discusses differences in the experiences of caregivers who live in rural and non-rural areas. Washington State's Office of Financial Management (OFM) maintains a list of designated rural counties,^{9,10} which was used to guide this analysis (OFM, 2020). Two hundred and eighty-six kinship caregivers identified as living in rural counties.

⁸ The response "age of the birth parent" does not indicate the specific age of the birth parent (i.e. whether they were a teenager), only that age was a contributing factor leading to the placement decision

⁹ The OFM describes its designation process as follows, "In 1999, RCW 82.14.370 was revised to include a rural county definition based on population density. In this legislation, "rural county" was defined as "... a county with a population density less than 100 persons per square mile." Subsequent legislation expanded the definition to include "... a county smaller than two hundred twenty-five square miles" (2020).

¹⁰ Washington's rural counties include the following: Adams, Asotin, Chelan, Clallam, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, San Juan, Skagit, Skamania, Stevens, Wahkiakum, Walla Walla, Whitman, and Yakima (OFM, 2020).

Demographic differences between rural and non-rural status. Rural and non-rural kinship caregivers reported similar demographics, with a few notable differences. Rural kinship caregivers were younger (57.9 years old) than non-rural kinship caregivers (59.4 years old). A greater percentage of non-rural kinship caregivers reported incomes above \$70,000 (23.4% for non-rural and 10.9% for rural). A greater percentage of rural kinship caregivers described their informal role as a parental consent agreement (28.3%) than non-rural kinship caregivers (20.9%). See Table 13 for kinship caregiver demographics and placement type by rural status.

Differences in kinship caregiver placement types by rural status. Non-rural kinship caregivers were more likely to describe the birth parent behavioral health as a circumstance leading to the kinship caregiving arrangement. A greater percentage of rural kinship caregivers described their informal role as a parental consent agreement (28.3%) than non-rural kinship caregivers (20.9%). However, non-rural kinship caregivers were more likely to describe their role as adoptive (6.7%) than rural kinship caregivers (2.1%).

Differences in challenges, needs, and sources of support by rural status. A few differences existed in the types of challenges, needs, and sources of support prioritized by rural and non-rural kinship caregivers. Non-rural kinship caregivers were more likely to select support groups as sources of support than non-rural kinship caregivers. Concerning challenges, rural kinship caregivers were more likely to select legal problems as a challenge. In regard to unmet needs, non-rural kinship caregivers were more likely to select services for infants and toddlers. See Table 14 for detailed results of the statistical analysis regarding differences kinship caregivers who resided in rural and non-rural areas in their select challenges, needs, and sources of support.

Summary

Kinship caregivers provide an important source of support for children throughout the state of Washington. This statewide kinship caregiver survey revealed that kinship caregivers in Washington State are primarily over the age of 55 and make between \$30,000-\$39,999- lower than the median income in Washington State of \$70,116 (U.S. Census Bureau, 2020). Kinship caregivers experience a variety of sources of support, such as their spouses/partners, other relatives, and public social services. Kinship caregivers frequently report their unmet needs as financial support, recreational activities for their child, and respite care. Kinship caregivers describe their top challenges as finances, their child's emotional health and their child's behavioral health. Informal kinship caregivers are more likely to report finances as a challenge and are more likely to report financial support as an unmet need than formal kinship caregivers. Policymakers seeking to support kinship caregivers may want to consider increases in financial aid resources, such as levels of KCSP funds families are eligible to receive annually, as well as increasing investments in mental health services for the children in kinship caregiver placements. Older kinship caregivers and POC kinship caregivers also have unique experiences, and policymakers may want to consider ways to provide additional support to these groups. Given that older kinship caregivers and POC caregivers have lower levels of income, policymakers may want to consider ways to provide additional financial aid to caregivers who are older and non-White.

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Appendices

Appendix 1. Tables and Figures

Table 1. Kinship caregiver demographics and placement type

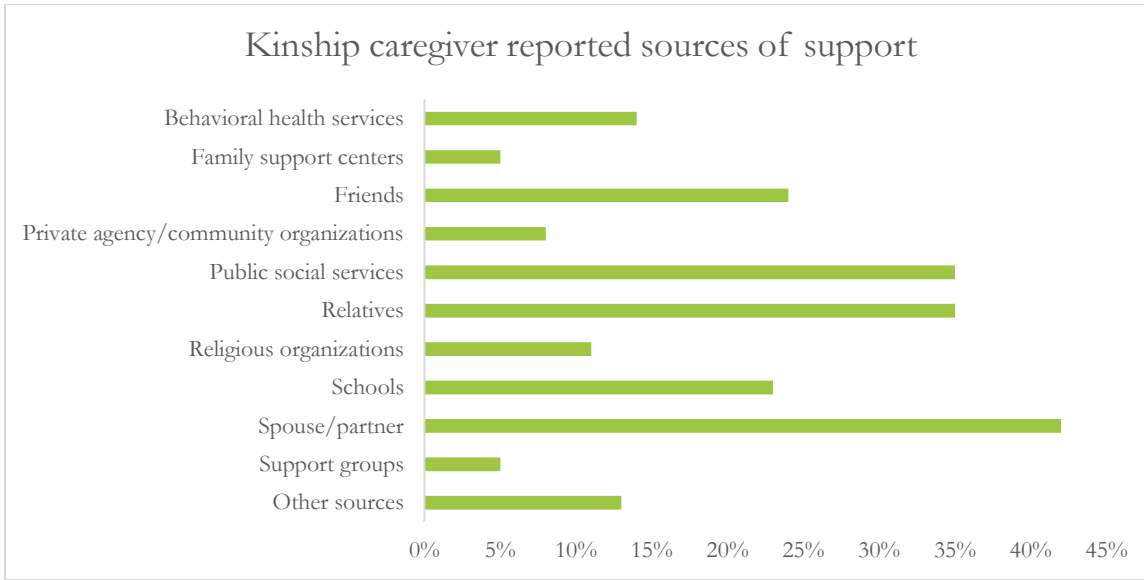
Characteristic	(N=868)
Age, mean (SD)	58 (11.6)
Marital status (%)	
Married	354 (42.9%)
Single	145 (17.5%)
Divorced	147 (17.8%)
With a partner	65 (7.9%)
Widowed	94 (11.4%)
Separated	21 (2.5%)
Gender identity (%)	
Female	744 (90.2%)
Male	23 (9.7%)
Prefer not to say	1(.1%)
Race (%)	
African American	72 (8%)
American Indian/Alaskan Native	70 (8%)
Caucasian (non-Hispanic)	691 (80%)
Other	26 (4%)
Income level	
Less than \$5,000	70 (8.7%)
\$5,000 to \$9,999	43 (5.4%)
\$10,000 to \$19,999	132 (16.5%)
\$20,000 to \$29,999	125 (15.6%)
\$30,000 to \$39,999	96 (12%)
\$40,000 to \$49,999	77 (9.6%)
\$50,000 to \$59,999	62 (7.7%)
\$60,000 to \$69,999	47 (5.9%)
\$70,000+	150 (18.7%)
Informal role (%)	
Parental consent agreement ¹	197 (22.7%)
Durable power of attorney	29 (3.3%)
Informal arrangement (no paperwork)	87 (10%)
Family decision	121 (13.9%)
Health care consent waiver	17 (2%)
Non-parental custody	328 (37.8%)

Guardianship	196 (22.6%)
Adoption	44 (5%)
Other ²	111 (12.8%)
Number of children in home	1.9 (1.16)

¹ A parental consent agreement provides temporary permission for a trusted adult to enroll a child in school or obtain medical care for the child. This consent agreement is not legally-binding.

² Examples of other responses included the following: emergency placement, temporary custody, and pending adoption.

Figure 1. Sources of support for kinship caregivers



Note. Kinship caregivers reported areas where they received help with raising their children. Columns represent the percent of caregivers who indicated that the items were one of their top sources of support. Totals do not equal 100, as caregivers were allowed to select multiple sources.

Figure 2. Qualitative responses: Other sources of current help for kinship caregivers

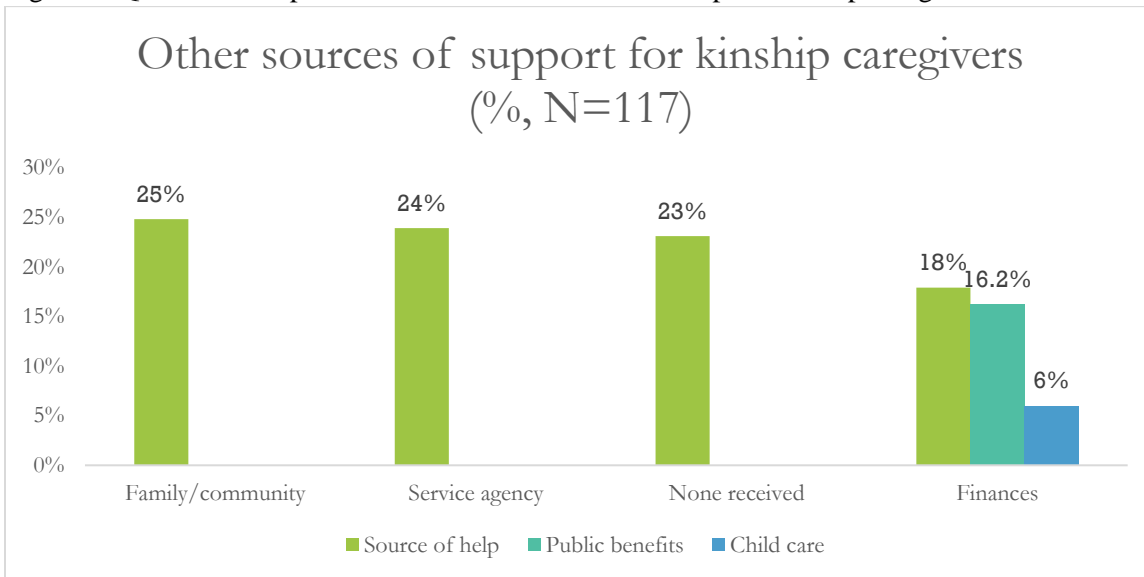
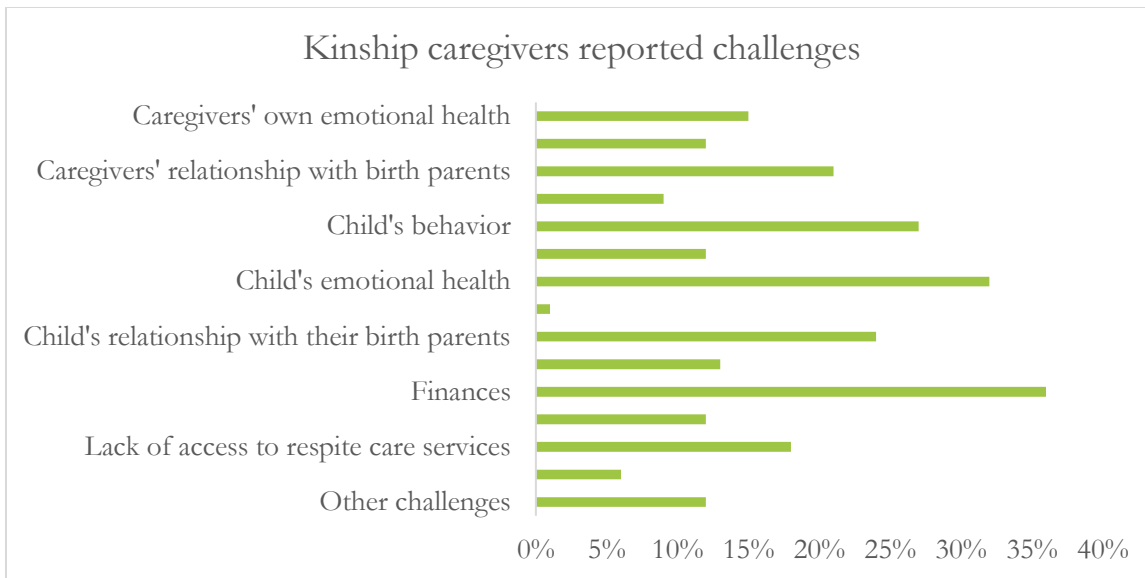


Table 2. Representative quotes: Other sources of support for kinship caregivers (N=117)

Theme	% of question respondents	Quotes
Family/community	25%	“My husband and grown children help” “his mom she has been clean 4 or 5 years” “Their father” “Oldest grandchild is mother of youngest. She helps take care of sisters and brother”
Service agency	24%	“Rural resources - Stevens County” “Kinship program is all I got” “My church - hope sparks”
None received	23%	“We received no help from outside providers even though it was requested several times” “I receive no help or support of any kind and I am a single parent” “I don't get help raising them. Only break was school or daycare prior to covid-19. nothing since”
Finances	18%	“I just receive cash and not food benefits. I would really appreciate food benefits” “Only help I receive is SSI check once a month”

Figure 3. Kinship caregivers reported challenges



Note. Kinship caregivers reported up to three areas that presented the greatest challenges related to raising their kinship children. Columns represent the percent of caregivers who indicated that the items were a challenge. Totals do not equal 100, as caregivers were allowed to select multiple sources.

Figure 4. Other challenges facing kinship caregivers

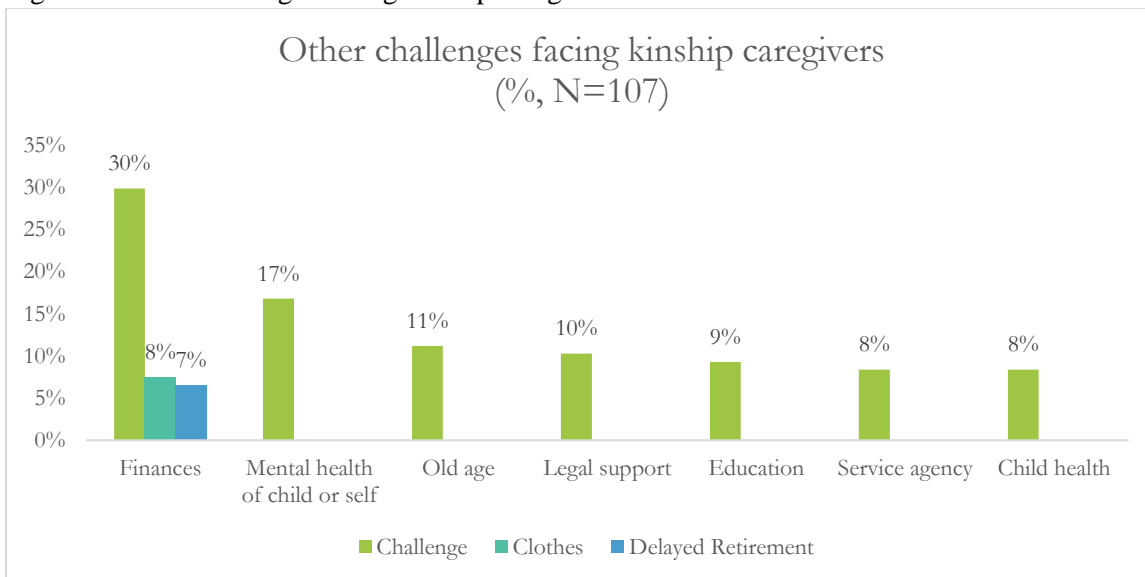
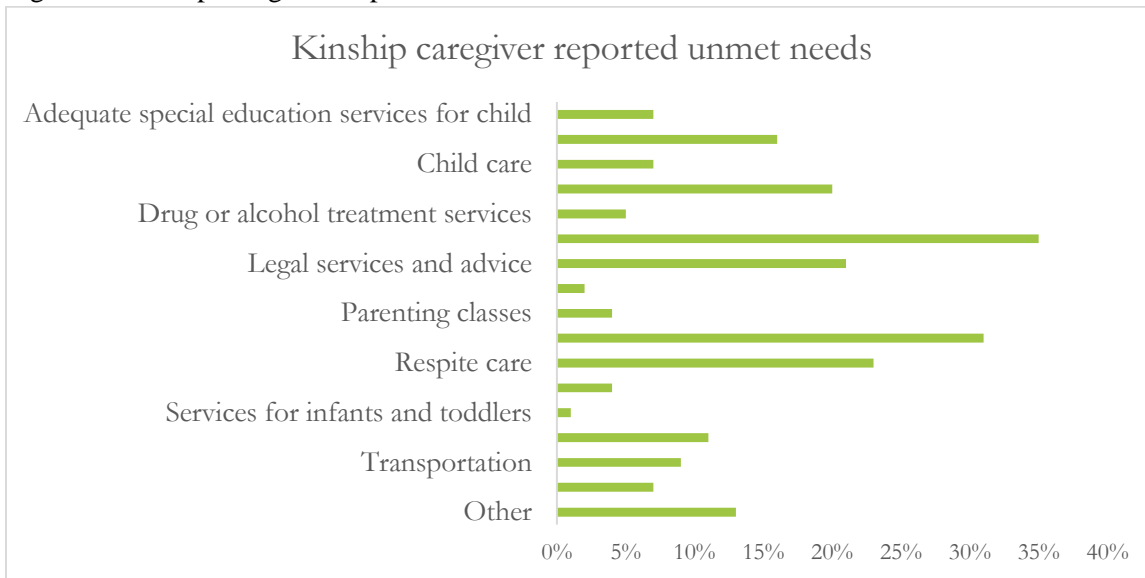


Table 3. Representative quotes for other challenges

Theme	% of question respondents	Quotes
Financial support	30%	“Auto repairs” “No car for transportation” “Finances tie into a lot, like the extras (school clothes and supplies, holidays, Christmas gifts, winter clothes, the extra gas to go to child's sports

		and karate classes and tournaments, any extra legal fees if problems arise in regards to the birth parents)”
Mental health	17%	“Finding good counseling for child that is consistent. Coordinated care accepting counselors are hard to find and the ones we found are interns and don't stay”
Advanced age	11%	“Can't pay for school expenses”
Legal support	10%	“No adoption help”

Figure 5. Kinship caregivers reported unmet needs



Note. Kinship caregivers reported up to three areas that were unmet needs. Columns represent the percent of caregivers who indicated that the items were unmet needs. Totals do not equal 100, as caregivers were allowed to select multiple sources.

Figure 6. Other unmet needs kinship caregivers

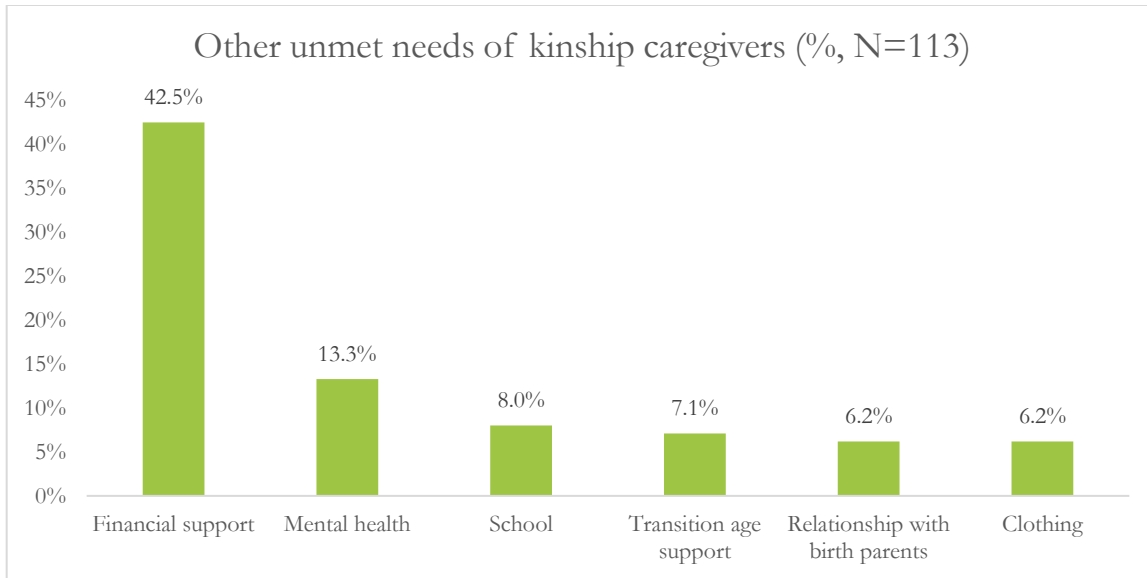


Table 4. Representative quotes: Other unmet needs (N=113)

Theme	% of question respondents	Quotes
Financial support	42.5%	<p>“I finally got a full-time job at age 70. I MUST work in order to support us.”</p> <p>“There's not a whole lot of help/resources there for grandparents who raise their grandkids or lack of knowing of the resources. Like only found one and its the kinship program and it only helps once a year. It would be awesome if instead once a year. Do the same help quarterly every 3 months or give a list of help for grandparents from kinship. A lot of us grandparents are on a fixed and limited income. thank you and thanks for your program.”</p> <p>“I pay the bills - I need help with his clothes (which resources) help me with sports programs, supplies for sports”</p>
Mental health	13.3%	<p>“Professional referrals by CPS for child's emotional needs”</p> <p>“My wife and I need counseling to strengthen our marriage.”</p>

		“Getting counseling services in Spanish my home language”
School	8%	“Can't pay for school expenses”
Support for transition-aged youth	7.1%	“Resources for this child as she ages out to meet her independent living needs”
		“Saving for their college education”

Figure 7. Most helpful resources/services for kinship caregivers

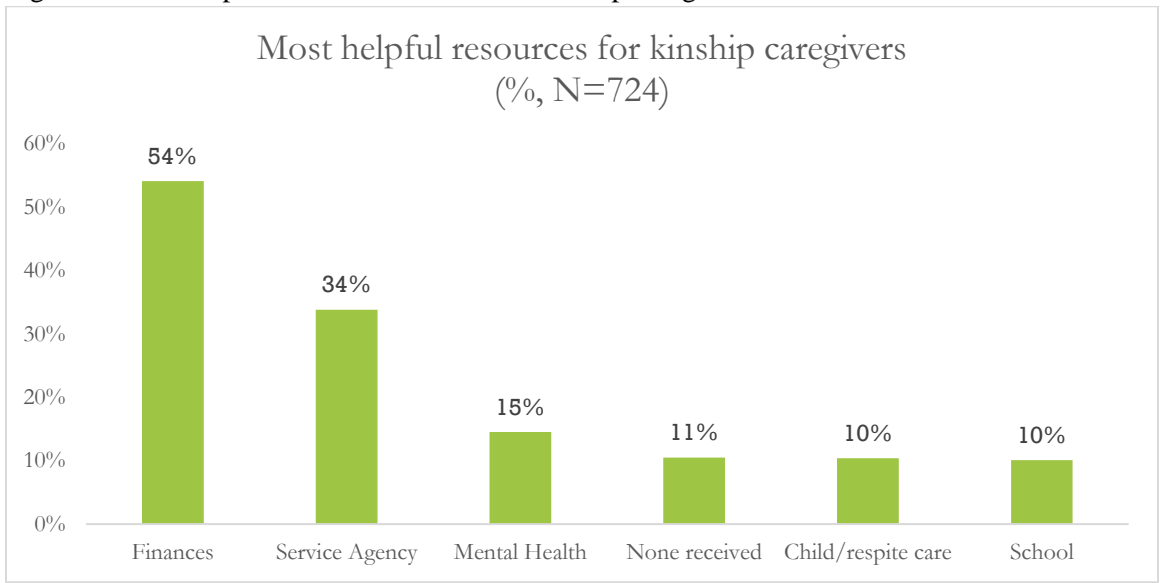


Figure 8. Qualitative responses for most helpful financial resources for kinship caregivers

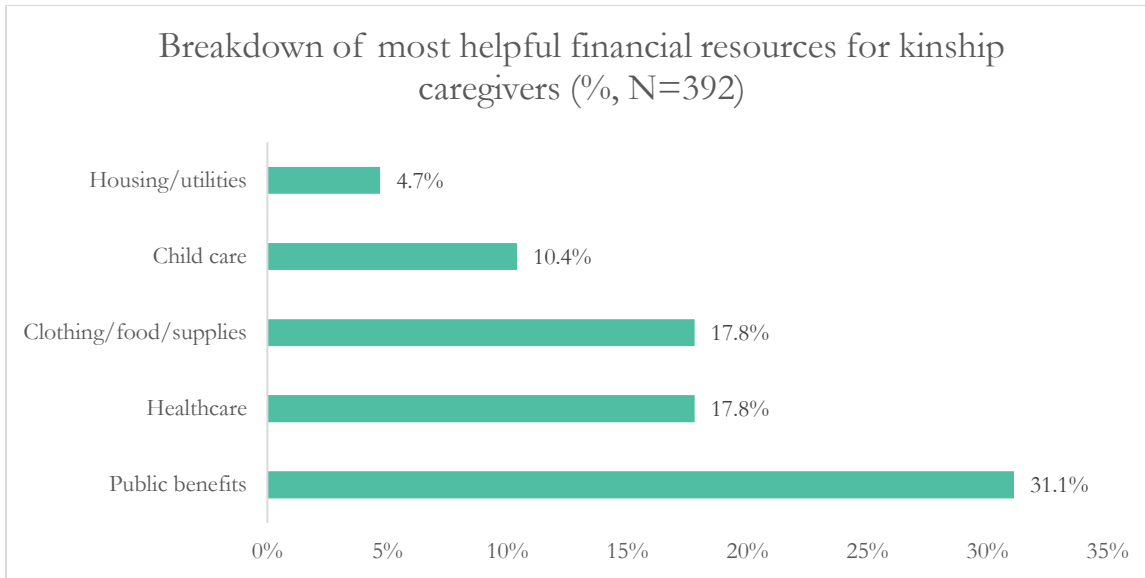


Table 5. Representative quotes from most helpful resources (N=724)

Theme	% of question respondents	Quotes
Finances	54%	“DCFS, Adoption Services support subsidy/TANF grant”
		“TANF and WIC”
		“Clothes, school supplies for schools. Also, Christmas help with clothes and shoes. Paying water bill. Kinship program to meet other grandparents.”
		“Funds for kinship resource and support group meetings and events. Free legal advice. Help with clothes, shoes, camps, school supplies”
Service agency	34%	“Definitely this kinship program has been so helpful around certain times of the year to get my granddaughter things she desperately needs. Without the kinship caregiver program, I don't know what we would do sometimes. Thank you for helping me support my grand baby girl.”
		“For us, the Family Education and Support (Kinship Navigator) Services (FESS) weekly support groups has been invaluable. Trainings, therapeutic discussions, lectures, resources, referrals, have all been hugely helpful and life-serving at times. I don't think I could have managed the past 4 years without them.”

“CPS, GAL, DSHS”

Mental health 15%

“Behavioral health services for my three granddaughters who are special needs has been life saver. Other than TANF (child only) and food stamps we have no other services”

“getting mental support for child when asked and in home therapy for the whole family which was a huge help”

None received 11%

“None - I don't know anything about the program. Have never heard of it.”

“I do not have any. I go to food banks, My trusted friends watch him so I can go to get my infusion every 28 days but they are on a teacher schedule so sometimes I go almost 3 months without medication”

Child/respite care 10%

“Receiving childcare through DCYF has offered my little guy the best educational support while I am able to participate in my regular job, without this I would have to just quit my job and care for him and just be on state assistance which is not what I want to do.”

“The respite services through kinship care was a godsend to my mental health. Those services are not available anymore as the funding was cut :(“

School 10%

“School > Treehouse advocate & school waiving sports fee”

“The @ School programs. The paid free lunches and breakfasts.”

Figure 9. Most important thing that needs to change to help kinship caregivers

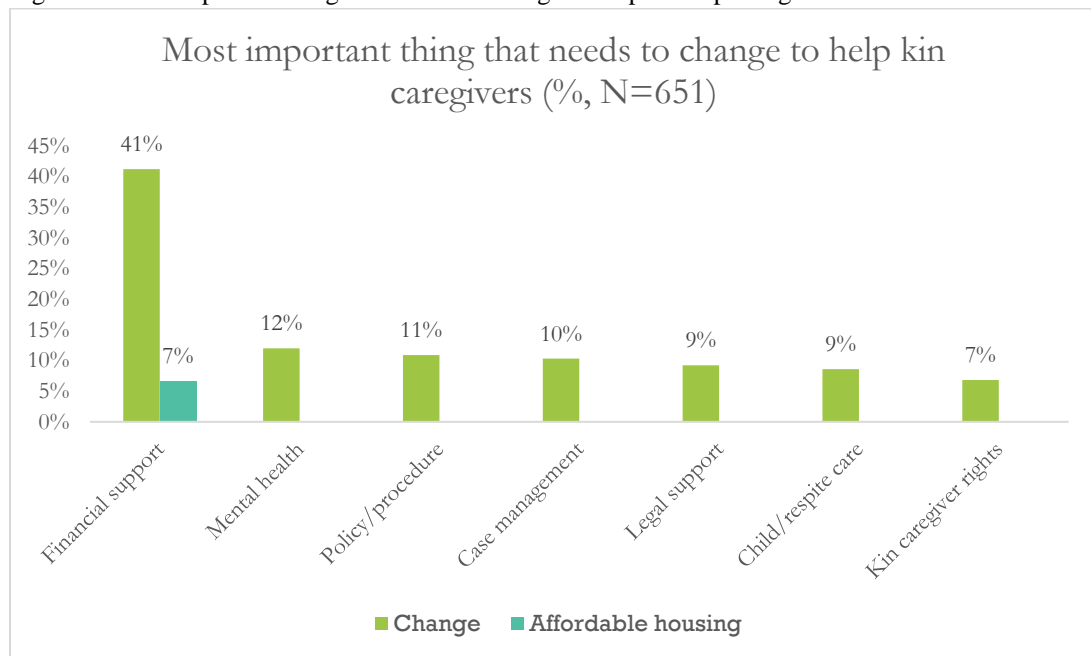


Table 6. Representative quotes: Most important thing that needs to change (N=651)

Theme	% of question respondents	Quotes
Financial support	41%	<p>“Financial assistance so I don't have to delay retirement”</p> <p>“More financial /housing/food assistance”</p> <p>“They ask us to take care of these kids, then ask us to pay a lawyer, when we are all or most of us are fixed income I feel they should pay for court cost”</p> <p>“Financial help, I would adopt but then can't afford his medical or childcare”</p> <p>“More financial help for the kids. TANF does NOT cover hobbies, skate night or nothing. Kids get to go to school and come home.”</p> <p>“More money help we get TANF of 360 a month use it for groceries - Hard to come up with money for clothes. Especially if like me I don't work. Take care of husband going blind.”</p>
Mental health	12%	<p>“Better mental health and services for the children’s parents working to get their family stabilized and reunited. I don't believe that will ever happen in our situation.”</p> <p>“Change law allowing 13-year-olds to opt out of mental health counseling.”</p> <p>“To have more help in social activities for the families, and have more support groups to help in all areas”</p> <p>“Parenting classes - Typically dealing with kids who have experienced trauma”</p> <p>“Quality counseling - the good ones don't take state aid, which one child is on.”</p>
Child welfare policy/procedure	11%	<p>“Early intervention of CPS and specific timeline for parents to cooperate with required changes. Easier 3rd party custody procedures - less time in court”</p> <p>“Realize there are people who work full time and need resources outside of mon - fri 8 – 5”</p> <p>“It shouldn't be so hard to get services”</p>

“Faster process in terminating the rights of parents. Too much time is given at the risk of the child's emotional well-being.”

Case management 10%

“Better communication - Someone able to answer questions”

“In my case, the worker for DCYF basically dumped this kid in my home and took off. I received no guidance, no information, no assistance of any kind. Rules and regulations were broken with this placement. There should be a hotline for help for parents like me.”

“More information about support services readily available and easily accessible”

“Advocates helping to gain access to resources and completion of paperwork required...Someone who can provide info on program resources you are not aware of or familiar with.

Legal assistance 9%

“Affordable legal advice”

“Help paying for legal fees and court costs”

“Able to adopt him without thousands of dollars to do the paperwork without an attorney”

Childcare/respice care 9%

“Being able to receive child care services without going through so much red tape to get it going”

“Safe quality child care other than school, so we get a break.”

Kinship caregiver rights 7%

“Easily accessible special needs child care and respice”

“kinship caregivers should have same legal & financial status as licensed foster.”

“Grandparents rights - should not have to go through CPS or hire an expensive lawyer”

“Grandparents rights to care for and make decisions for the child. If grandparent passes away they do not get a say where the child should go or who they should be with.”

Figure 10. Needs or experiences expressed by kinship caregivers

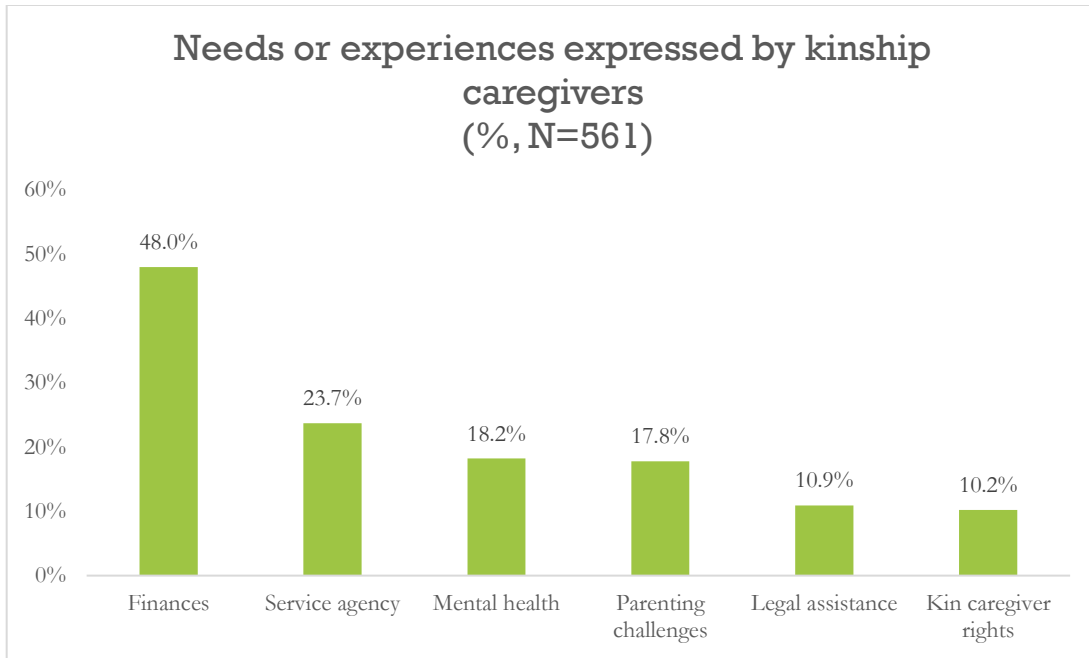


Figure 11. Financial need or experience expressed by kinship caregivers

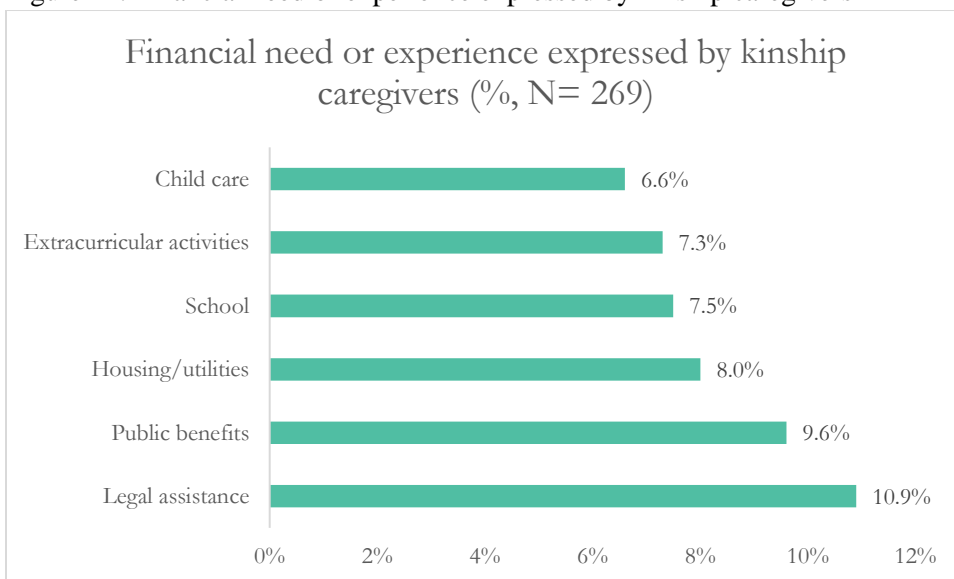


Figure 12. Service agency need or experience expressed by kinship caregiver

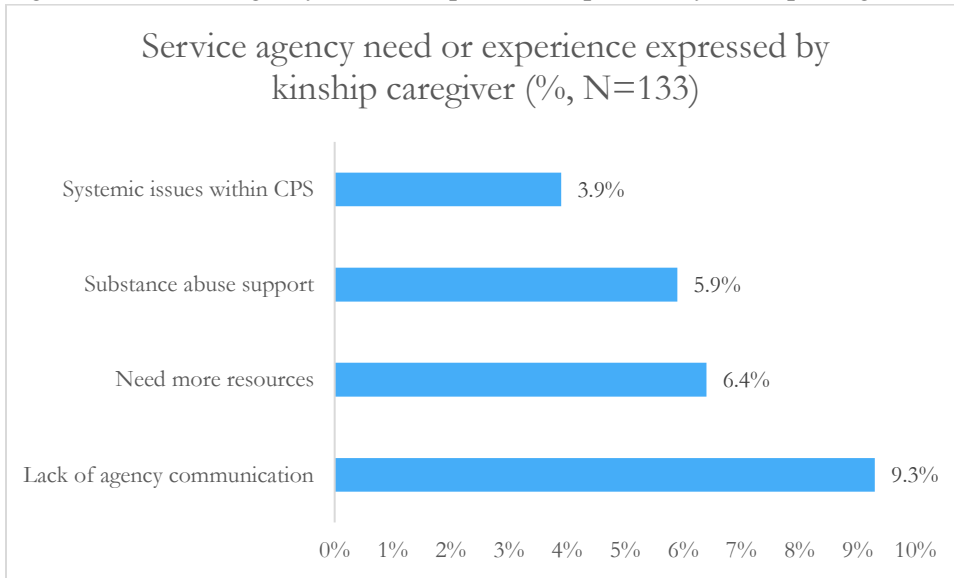


Table 7. Representative quotes: Other Challenges (N=561)

Theme	% of question respondents	Quotes
Financial support	48%	<p>“There are many things that are provided for people who are licensed vs people who are not. My house is too small and we have too many people so we cannot get licensed, which means we don’t have the financial assistance we need. We were told to apply for TANF for the boys. That only provides a total of \$455 a month for the two of them.”</p> <p>“I have had my foster daughter for over a month and the assigned Social Worker has not contacted me or visited even once. I find that a bit alarming. There was no help in finding doctors, dentist, counseling until the lady from CHET got involved. I was doing it all on my own. She assisted in getting counseling scheduled finally. I also believe that there should be</p>

up front financial assistance. This was an unexpected situation becoming a foster Mom and I spent my own money without any reimbursement on everything from furniture to personal hygiene products for her.”

“Childcare was provided by the state until we had official third-party custody in Oct 2018 and the review occurred for March 2019. The child's social support and peers' relations established since April 2016 were severed. It has been a challenge and some trauma for the child. I believe child-care should be provided as neither parent is available. I took the CPS foster care classes which were very beneficial. I didn't want to do foster care but feel the state should be more supportive for kinship caregivers both financially and with resources including legal services.”

Service agency 23.7%

“I feel like I'm on my own with this. There is very little communication from the caseworker, who rarely responds to any questions. I never know what's going on with the case. I have no help with her and have not been provided any resources to help with respite care, activities, or other resources to help provide for her. I do receive a small amount of TANF, however that does not cover anywhere near the cost of providing for a child. I don't simply give her just the bare necessities of food, she came to me with NOTHING so there has been a whole lots of expense towards clothing, books, toys, bedding, bedroom, hair supplies, bedroom decorations, fun activities, etc. Because of this, I'm unable to do this long term. My savings is disappearing, I'm over stressed, gaining weight and have absolutely no free time or social life. I am very disappointed in the lack of communication and help from the caseworker. I have had to cancel two job trainings and am now unable to promote.”

“That not all children and family circumstances fit with the laws and rules that CPS and DDA have to follow. Medically fragile children have different needs. I need extra help to care for my kinship child. We fall into a gray area that can't get respite care.”

“I often feel like I'm in the dark as to the progress of the mother, whom the children were taken from, participating in court ordered evaluations, treatments and UA's. I am always told they cannot discuss her part of the case with me. They treat the children's father as though they were removed from him, though he and the mother have not been together for 7 year; were apart nearly 4 years when taken from their mother. It's difficult to know what I can and can't do. I think I understand

things, then I find out it's not what I was originally told, and I get veiled threats if I do something again, the children could be removed. I worry about that all the time. It seems to me rules are more important than a child's well-being. How is it in the children's best interest to remove them from their home of 15 months where they are thriving, and be put in a foster home with strangers because I unwittingly broke a rule. They would be devastated and terrified and that is somehow in the children's best interest!"

Mental health

18.2%

"It felt like the system was against us, child was out of control, police refused to bring her home, child reporting abuse as a way of being vindictive when we tried to control or punish her, she lied to the school, the police, could not continue to have her in my home. She swore and physically abused my daughter and I. Could not get her into court ordered program as I was not legal guardian."

"I am very frustrated at the way the system works. The whole goal is to reunite the child with the parent despite the situation or mental state of the mother. I've been told numerous times that "I don't count, I just keep him safe." I have fed, clothed, nurtured this child and raised him with love. He thinks I am his mother. He's 18 months old and should not be jerked back and forth. His mental state is at hand and he's angry and becoming shy of any stranger"

"My grandson could use counseling to help him learn to better cope with some aspects of Aspergers', the death of his mother, and the fact that his father lives in another country and they have no contact. However, at a certain age (13?) he was allowed by law, to choose whether he wanted to continue with counseling and he chose not to. That is a stupid law, in my opinion."

Parenting challenges

17.8%

"The greatest need we have is finding a social balance for our family composition. As older "parents" of younger children it is difficult to establish friendships with younger parents and we have lost connection to our older friends who are finished raising kids. We no longer have any degree of spontaneity of movement each activity requires careful planning. The level of exhaustion of being parents at our age is incredible."

"I think it would be helpful to have training on how to help children effected by trauma and/or mental health"

"It takes a lot of time and energy. It has had a huge impact on our lives. We are not free to take vacation trips when we wish. We also have a 23 yr-old sibling living here. There are some

rewards, though. If they hadn't come to us, I don't know what would have happened to them,”

Legal support 10.9%

“The hardest part is not having the legal support when it came to fighting for custody and for the rights of my child. I feel there should be legal support for the child involved. Not a guardian a litum but a lawyer to fight for the best interest of the child. Better if they had the legal coverage from day 1 of the case until they are 18 years old. The child is the most important!”

“It would be nice if the state would be willing to help with adoption costs like they do for children in the system. A lot more families could adopt children from other family members”

Kinship caregiver rights 10.2%

“I feel there is a huge difference in the financial amount that I received per child if you are a kinship caregiver compared to someone being a foster parent. Foster parents receive much more financial aid and other benefits including food stamps. I started our 16 years ago with 5 grandchildren ages 15-13-6-1.5-6mos and had to completely change my life with very little financial help at all. The 3 parents involved that did not have the children each received a check, food stamps and medical. I had to buy diapers, formula, groceries, car seats, a different car that I could carry everyone in with NO help. I feel that is something that should be examined. I saved the state \$1000s of dollars by taking in these 5 children for 16 years.”

“We as grandparents have no rights when it comes to grandchildren, which is wrong. Do you realize how many grandparents are raising their grandkids a lot? In our community, I would say the percentage rate has to be about 49%. That's a lot. Then if the child/ren do get placed with a parent they just take them out of your home and then if the parent chooses to not let you see them then you don't get to see them. But your good enough to raise them for 2 or 4 or 6 years then they get them and you have no rights to be able to visit them if the parent chooses. Especially if its the parent that isn't your child. In our case, the father got custody and wouldn't let us see him. We had to count on our daughter to get better and follow through with what the parenting plan and CPS wanted her to do in order for us to be able to see or visit him, which we knew that wasn't going to happen. It's going on almost 3 years now that we haven't gotten to see or visit with him. Besides that child care once in a while, we need a break or to go job hunting, or just to the store grocery shopping. I don't have the

energy I used to when my kids were young. So far those are my biggest stresses other ward they have programs out there talk to your doctors they can usually refer you or give you the contact information to those places. That aren't CPS involved. Which I prefer not to have anything to do with. Because I feel they aren't always in the child's best interest.”

Table 8. Differences between informal and formal kinship caregivers in selected sources of support, challenges, and unmet needs

Variable	Informal kinship caregivers (n=728¹)	Formal kinship caregivers (n=140)	Test statistic²
<i>Sources of support</i>			
Spouse/partner	303 (41.6%)	60 (42.9%)	.07
Friends	172 (23.6%)	35 (23%)	.122
Support groups	43 (5.9%)	5 (3.6%)	1.23
Religious organizations	87 (12.0%)	12 (8.6%)	1.33
School	170 (23.3%)	28 (20%)	.75
Family support center	40 (5.5%)	4 (2.9%)	1.70
Private agency/community organizations	63 (8.7%)	9 (6.4%)	.76
Public social services	269 (37.0%)	36 (25.7%)	6.5*
Behavioral health services	108 (14.8%)	17 (12.1%)	.69
Community health clinic	54 (7.4%)	7 (5%)	1.05
Other relatives	263 (36.1%)	38 (27.1%)	4.18*
Other	97 (13.3%)	19 (13.6%)	.006
<i>Challenges</i>			
Housing	99 (13.6%)	8 (5.7%)	6.75**
Legal problems	50 (6.9%)	4 (2.9%)	3.24
Caregiver emotional health	111 (15.2%)	15 (10.7%)	1.94
Child-care arrangements	68 (9.3%)	11 (7.9%)	.31
Caregiver physical health	90 (12.4%)	13 (9.3%)	1.06
Variable	Informal kinship caregivers (n=728¹)	Formal kinship caregivers (n=140)	Test statistic²
Child's emotional health	240 (33.0%)	35 (24.3%)	3.44
Caregiver's relationship with child's birth parents	152 (20.9%)	32 (22.9%)	.28
Lack of access to respite care services	134 (18.4%)	22 (15.7%)	.58
Child's behavior	205 (28.2%)	30 (21.4%)	2.69
Finances	282 (38.7%)	33 (23.6%)	11.68**
Delaying your retirement	94 (12.9%)	22 (15.7%)	.80
Paying for child's medical care	6 (.8%)	3 (2.1%)	1.99
Child's relationship their own parents	185 (25.4%)	29 (20.7%)	1.40
Child's education	95 (13.0%)	7 (5%)	7.34**
Other	94 (12.9%)	13 (9.3%)	1.43
<i>Unmet needs</i>			

Legal services and advice	158 (21.7%)	26 (18.6%)	.69
Counseling for child	153 (21.0%)	17 (12.1%)	5.88*
Parenting classes	27 (3.7%)	7 (5%)	.52
Medical care for the child	16 (2.2%)	3 (2.1%)	.002
Services for infant and toddlers	9 (1.2%)	1 (.7%)	.28
Services for children with special health care needs	29 (4.0%)	3 (2.1%)	1.12
Transportation	70 (9.6%)	8 (5.7%)	2.18
Working with child's school/teachers	63 (8.7%)	4 (2.9%)	5.54*
Adequate special education service for child	52 (7.1%)	7 (5%)	.85
Drug or alcohol treatment services	33 (4.5%)	10 (7.1%)	1.70
Recreational and social activities for child	240 (33.0%)	31 (22.1%)	6.41*
Respite care	169 (23.2%)	32 (22.9%)	.008
Child-care	51 (7%)	12 (8.6%)	.43
Finding a support group for yourself	87 (12.0%)	8 (5.7%)	4.69
Affordable and adequate housing	127 (17.4%)	14 (10.0%)	4.78*
Financial support	272 (37.4%)	37 (26.5%)	6.12*
Other	100 (13.7%)	14 (10.0%)	1.44

*p<.05, **p<.01, *p<.001

¹ Percentages do not always add up to 100 due to rounding and participants selecting more than one option.

² For some of the questions, not all the participants responded, meaning that the total numbers in each category may not equal the participant totals.

³ Test statistic for categorical outcomes represent the Pearson's chi squared.

Table 9. Results for age-related demographic and placement type differences¹

Characteristic	Older kinship caregivers ² (n=593)	Younger caregivers (n=275)	Test statistic ³
Marital status (%)			
Married	216 (40%)	138 (51%)	5.6
Single	85 (15%)	60 (22%)	4.5
Divorced	123 (22%)	24 (8.8%)	18.6**
With a partner	25 (4.5%)	40 (14.6%)	23.8***
Widowed	89 (16%)	5 (1.8%)	32.7***
Separated	15 (2.7%)	6 (2.2%)	.2
Gender identity (%)			
Female	501 (91%)	243	.1
Male	50 (9%)	30	.7
Prefer not to say	1 (.002%)	0	2.78
Race (%)			

African American	45 (7.6%)	27 (9.8%)	1.2
American Indian/Alaskan Native	41 (6.9%)	29 (10.5%)	3.3
Caucasian (non-Hispanic)	461 (78%)	230 (84%)	4.02*
Income level (%)			
Less than \$5,000	55 (10%)	15 (5.5%)	4.9
\$5,000 to \$9,999	28 (5.3%)	15 (5.5%)	0.0
\$10,000 to \$19,999	106 (20%)	26 (9.5%)	11.9
\$20,000 to \$29,999	95 (18%)	30 (11%)	5.5
\$30,000 to \$39,999	67 (12.6%)	29 (10.6%)	.6
\$40,000 to \$49,999	54 (10%)	23 (8.5%)	.6
\$50,000 to \$59,999	35 (6.6%)	27 (9.8%)	2.6
\$60,000 to \$69,999	21 (3.9%)	26 (9.5%)	9.6
\$70,000+	69 (13%)	81 (30%)	27.0***
Number of children in home M(SD)	1.79 (1.08)	2.16 (1.26)	4.33***

*p<.05, **p<.01, *p<.001

¹ Percentages do not always add up to 100 due to rounding and participants selecting more than one option.

² For some of the questions, not all the participants responded, meaning that the total numbers in each category may not total the participant totals.

³ Test statistic for categorical outcomes (marital status, race, gender identity, income level) represents the Pearson's chi squared. Test statistic for nominal outcomes (number of children at home) represents the ttest value.

Table 10. Age related differences in selected sources of support, challenges, and unmet needs

Variable	Older kinship caregivers (n=593 ¹)	Younger caregivers (n=275)	Test statistic ²
<i>Sources of support</i>			
Spouse/partner	205 (35%)	158 (57%)	40.4***
Friends	118 (20%)	89 (32%)	16.1***
Support groups	37 (6%)	11 (4%)	1.8
Religious organizations	65 (11%)	34 (12%)	.4
School	129 (22%)	69 (25%)	1.2
Family support center	26 (4%)	18 (6.5%)	1.8
Private agency/community organizations	55 (9%)	17 (6%)	2.4
Public social services	219 (37%)	86 (31%)	2.6
Behavioral health services	91 (15%)	34 (12%)	1.3
Community health clinic	51 (8.6%)	10 (3.6%)	7.1**

Other relatives	183 (31%)	118 (43%)	12.0**
Other	77 (13%)	39 (14%)	.23
<i>Challenges</i>			
Housing	76 (12.8%)	31 (11.3%)	.41
Legal problems	36 (6.1%)	18 (6.5%)	.07
Caregiver emotional health	79 (13%)	47 (17%)	2.15
Child-care arrangements	41 (6.9%)	38 (13.8%)	10.83**
Caregiver physical health	86 (14.5%)	17 (6%)	12.44***
Child's emotional health	169 (28%)	106 (39%)	8.76**
Caregiver's relationship with child's birth parents	117 (20%)	67 (24%)	2.4
Lack of access to respite care services	107 (18%)	49 (18%)	.007
Child's behavior	151 (25%)	84 (31%)	2.46
Finances	213 (36%)	102 (37%)	.11
Delaying your retirement	92 (15.5%)	24 (8.7%)	7.47**
Paying for child's medical care	3 (1%)	6 (1%)	.01
Child's relationship their own parents	129 (22%)	85 (31%)	8.48**
Child's education	81 (13.7%)	(7.6%)	6.57*
Other	67 (11%)	40 (14.5%)	1.8
<i>Unmet needs</i>			
Legal services and advice	111 (18.7%)	73 (26.5%)	6.89**
Counseling for child	115 (20%)	55 (20%)	.04
Parenting classes	19 (3.2%)	15 (5.5%)	2.53
Medical care for the child	11 (1.9%)	8 (2.9%)	.98
Services for infant and toddlers	3 (.5%)	7 (2.5%)	6.86**
Services for children with special health care needs	19 (3.2%)	13 (4.7%)	1.23
Transportation	51 (8.6%)	27 (9.8%)	.34
Working with child's school/teachers	52 (8.8%)	15 (5.5%)	2.90
Adequate special education service for child	50 (8.4%)	9 (3.2%)	7.90**
Drug or alcohol treatment services	27 (4.6%)	16 (5.8%)	.64
Variable	Older kinship caregivers (n=593¹)	Younger caregivers (n=275)	Test statistic²
Recreational and social activities for child	183 (30.8%)	88 (32%)	.11
Respite care	131 (22%)	70 (24.45%)	1.19
Child-care	34 (5.7%)	29 (10.5%)	6.46*
Finding a support group for yourself	63 (10.6%)	32 (11.6%)	.20
Affordable and adequate housing	93 (16%)	48 (17%)	.43
Financial support	211 (.36)	98 (36%)	.0002
Other	34 (12%)	80 (13.5%)	.21

*p<.05, **p<.01, *p<.001

¹ For some of the questions, not all the participants responded, meaning that the total numbers in each category may not equal the participant totals.

² Test statistic for categorical outcomes represent the Pearson's chi squared.

Table 11. Results for racial demographic and placement type differences

Characteristic	White non-Hispanic kinship caregivers (n=638¹)	POC kinship caregivers (n=230)	Test statistic³
<i>Marital status (%)</i>			
Married	289 (45.7%)	65 (33.5%)	5.1
Single	86 (13.6%)	59 (30.4%)	23.9***
Divorced	117 (18.5%)	30 (15.5%)	.8
With a partner	52 (8.2%)	13 (6.7%)	.4
Widowed	74 (11.7%)	20 (10.3%)	.3
Separated	14 (2.2%)	7 (3.6%)	1.1
<i>Gender identity (%)</i>			
Female	571 (89.6%)	173 (92%)	.1
Male	65 (10.2%)	15 (8%)	.7
Prefer not to say	1 (.002%)	0 (0%)	.3
<i>Age, M(SD)</i>	58.42 (11.77)	57.65 (11.29)	.79
<i>Income level (%)</i>			
Less than \$5,000	36 (5.8%)	34 (18.6%)	26.4***
\$5,000 to \$9,999	33 (5.2%)	10 (5.5%)	0.0
\$10,000 to \$19,999	102 (16.5%)	30 (16.4%)	0.0
\$20,000 to \$29,999	92 (14.9%)	33 (18%)	.9
\$30,000 to \$39,999	70 (11.3%)	26 (14%)	1.0
\$40,000 to \$49,999	60 (9.7%)	17 (9.3%)	0.0
\$50,000 to \$59,999	55 (8.9%)	7 (3.8%)	4.7
\$60,000 to \$69,999	37 (6.0%)	10 (5.5%)	.1
\$70,000+	134 (21.6%)	16 (8.7%)	12.6
<i>Number of children in home M(SD)</i>	1.87 (1.22)	2.01 (1.24)	1.5

*p<.05, **p<.01, *p<.001

¹For some of the questions, not all the participants responded, meaning that the total numbers in each category may not equal the participant totals.

³Test statistic for categorical outcomes represent the Pearson’s chi squared (marital status, gender identity, income level), test statistic for nominal outcomes (age, number of children) represent the t statistic.

Table 12. Racial differences in selected sources of support, challenges, and unmet needs

Variable	White non-Hispanic kinship caregivers (n=638¹)	POC caregivers (n=230)	Test statistic²
<i>Sources of support</i>			
Spouse/partner	294 (46.1%)	69 (30%)	17.97***
Friends	171 (26.8%)	36 (15.7%)	11.57**
Support groups	36 (.2%)	12 (5.2%)	.06
Religious organizations	81 (12.7%)	18 (7.8%)	3.97*
School	164 (25.7%)	34 (14.8%)	11.45**
Family support center	33 (5.2%)	11 (4.8%)	.05
Private agency/community organizations	52 (8.2%)	20 (8.7%)	.07
Public social services	227 (35.6%)	78 (33.9%)	.21

Behavioral health services	104 (16.3%)	21 (9.1%)	7.05**
Community health clinic	41 (6.4%)	20 (8.7%)	1.33
Other relatives	225 (35.3%)	76 (33.0%)	.37
Other	87 (13.6%)	29 (12.6%)	.15
<i>Challenges</i>			
Housing	71 (11%)	36 (15.7%)	3.2
Legal problems	40 (6.3%)	14 (6.1%)	.01
Caregiver emotional health	99 (15.5%)	27 (11.7%)	1.94
Child-care arrangements	56 (10.4%)	23 (10%)	.31
Caregiver physical health	75 (11.8%)	28 (12.2%)	.03
Child emotional health	208 (32.6%)	67 (29.1%)	.94
Caregiver relationship with child's birth parents	145 (22.7%)	39 (17%)	3.37
Lack of access to respite care services	130 (20.4%)	26 (11.3%)	9.44**
Child's behavior	186 (29.2%)	49 (21.3%)	5.78*
Finances	249 (39%)	66 (28.7%)	7.81**
Delaying your retirement	99 (15.5%)	17 (7.4%)	9.64**
Paying for child's medical care	8 (1.3%)	1 (.4%)	1.11
Child's relationship their own parents	169 (26.5%)	45 (20%)	4.36*
Child's education	69 (10.8%)	33 (14.3%)	2.03
Other	78 (12.2%)	29 (12.6%)	.02
<i>Unmet needs</i>			
Legal services and advice	155 (24.3%)	29 (12.6%)	13.82***
Counseling for child	126 (19.8%)	44 (19%)	.04
Parenting classes	27 (4.2%)	7 (3%)	.63
Medical care for the child	10 (1.6%)	9 (3.9%)	4.34*
Services for infant and toddlers	7 (1.1%)	3 (1.3%)	.06
Services for children with special health care needs	24 (3.8%)	8 (3.5%)	.04
Transportation	52 (8.2%)	26 (11.3%)	2.06
Working with child's school/teachers	50 (7.8%)	17 (7.4%)	.05
Adequate special education service for child	48 (7.5%)	11 (4.8%)	2.0
Drug or alcohol treatment services	32 (5%)	11 (4.8%)	.02
Variable	White non-Hispanic kinship caregivers (n=593¹)	POC caregivers (n=275)	Test statistic²
Recreational and social activities for child	197 (30.9%)	74 (32.2%)	.13
Respite care	159 (24.9%)	42 (18.3%)	4.22*
Child-care	49 (7.68%)	14 (6%)	.64
Finding a support group for yourself	72 (11.28%)	23 (10%)	.29
Affordable and adequate housing	103 (16.9%)	38 (16.5%)	.02
Financial support	237 (27.15%)	72 (9.9%)	2.5
Other	90 (14.1%)	24 (10.4%)	2.00

*p<.05, **p<.01, *p<.001

¹ For some of the questions, not all the participants responded, meaning that the total numbers in each category may not equal the participant totals.

² Test statistic for categorical outcomes represent the Pearson's chi squared.

Table 13. Kinship caregiver demographics and placement status by rural status

Characteristic	Rural caregivers (N=286 ¹)	Non-rural caregivers (N=489)	Test statistic
Age, mean (SD)	57.9 (13.191)	59.4 (10.5)	-2.06*
Marital status (%)			
Married	127 (45.02%)	206 (42%)	.3
Single	34 (12.06%)	100 (21%)	7.4*
Divorced	55 (19.50%)	82 (17%)	.7
With a partner	20 (7.09%)	40 (8%)	.3
Widowed	37 (13.12%)	48 (10%)	1.7
Separated	9 (3.19%)	10 (2%)	.9
Gender identity (%)		0	
Female	258 (90.85%)	440 (90%)	0.0
Male	26 (9.15%)	47 (10%)	0.0
Income level			
Less than \$5,000	25 (9.06%)	37 (7.8%)	.4
\$5,000 to \$9,999	15 (5.43%)	26 (5.5%)	0.0
\$10,000 to \$19,999	50 (18.12%)	65 (13.6%)	.8
\$20,000 to \$29,999	49 (17.75%)	73 (15.3%)	.2
\$30,000 to \$39,999	41 (14.86%)	52 (10.9%)	.8
\$40,000 to \$49,999	22 (7.97%)	51 (10.7%)	.5
\$50,000 to \$59,999	30 (10.87%)	28 (5.9%)	2.1
\$60,000 to \$69,999	14 (5.07%)	33 (6.9%)	1.0
\$70,000+	30 (10.87%)	112 (23.4%)	14.7***
Informal role (%)			
Parental consent agreement	81 (28.32%)	102 (20.9%)	4.3*
Durable power of attorney	6 (2.10%)	18 (3.7%)	1.51
Informal arrangement (no paperwork)	37 (12.94%)	44 (9.0%)	2.99
Family decision	47 (16.43%)	65 (13.3%)	1.44
Health care consent waiver	6 (2.1%)	9 (1.8%)	.06
Non-parental custody	117 (40.91%)	183 (37.4%)	.92
Guardianship	68 (23.78%)	110 (22.5%)	.17
Adoption	6 (2.10%)	33 (6.7%)	8.17**
Other	35 (12.24%)	66 (13.5%)	.25
Number of children in home	1.99 (1.19)	1.88 (1.44)	.18

*p<.05, **p<.01, *p<.001

¹ For some questions, not all participants answered, meaning that the participant totals within each category do not equal the total number of participants.

Table 14. Differences between rural caregivers and non-rural kinship caregivers in selected sources of support, challenges, and unmet needs

Variable	Rural kinship caregivers (n=286 ¹)	Non-rural kinship	Test statistic ²
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	caregivers (n=489)		
<i>Sources of support</i>			
Spouse/partner	122 (42.7%)	213 (43.6%)	.06
Friends	65 (22.7%)	125 (25.6%)	.78
Support groups	9 (3.1%)	34 (7.0%)	4.99*
Religious organizations	31 (10.8%)	57 (11.7%)	.12
School	71 (24.8%)	111 (22.7%)	.45
Family support center	16 (5.6%)	27 (5.5%)	.002
Private agency/community organizations	26 (9.1%)	40 (8.2%)	.19
Public social services	105 (36.7%)	178 (36.4%)	.008
Behavioral health services	35 (12.2%)	77 (15.7%)	1.80
Community health clinic	23 (8.0%)	31 (6.3%)	.81
Other relatives	101 (35.3%)	175 (35.8%)	.02
Other	41 (14.33%)	66 (13.5%)	.11
<i>Challenges</i>			
Housing	30 (10.5%)	66 (13.5%)	1.50
Legal problems	26 (9.0%)	22 (4.5%)	6.55*
Caregiver emotional health	40 (14.0%)	74 (15.1%)	.19
Child-care arrangements	22 (7.7%)	51 (10.4%)	1.6
Caregiver physical health	36 (12.6%)	59 (12.1%)	.05
Child's emotional health	88 (30.8%)	168 (34.4%)	1.05
Caregiver's relationship with child's birth parents	53 (18.5%)	117 (23.9%)	3.07
Lack of access to respite care services	56 (19.6%)	96 (19.6%)	.0003
Child's behavior	87 (30.4%)	128 (26.2%)	1.62
Finances	109 (38.1%)	178 (36.4%)	.23
Delaying your retirement	37 (12.9%)	75 (15.3%)	.84
Paying for child's medical care	5 (1.7%)	3 (.6%)	2.27
Child's relationship their own parents	71 (24.8%)	132 (27.0%)	.44
Child's education	33 (11.5%)	58 (11.9%)	.02
Other	38 (13.3%)	56 (11.5%)	.57
<i>Unmet needs</i>			
Legal services and advice	66 (23.08%)	104 (21.3%)	3.4
Counseling for child	61 (21.3%)	96 (19.6%)	.32
Parenting classes	10 (3.5%)	21 (4.3%)	.30
Medical care for the child	9 (3.1%)	8 (1.6%)	1.92
Services for infant and toddlers	0 (0%)	8 (1.6%)	4.73*
Services for children with special health care needs	6 (2.1%)	22 (4.5%)	2.99
Transportation	26 (9.1%)	47 (9.6%)	.06
Working with child's school/teachers	28 (9.8%)	35 (7.2%)	1.77
Adequate special education service for child	22 (7.7%)	30 (6.1%)	.70
Drug or alcohol treatment services	10 (3.5%)	29 (5.9%)	2.23
Recreational and social activities for child	94 (32.9%)	151 (30.9%)	.33
Respite care	72 (12.1%)	119 (24.3%)	.07
Child-care	17 (5.9%)	43 (8.8%)	2.05
Finding a support group for yourself	36 (12.6%)	51 (10.4%)	.84
Affordable and adequate housing	38 (13.3%)	90 (18.4%)	3.43
Financial support	106 (37.1%)	180 (36.8%)	.005

Other	41 (14.3%)	68 (13.9%)	.03
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*p<.05, **p<.01, *p<.001

¹ For some of the questions, not all the participants responded, meaning that the total numbers in each category may not equal the participant totals.

² Test statistic for categorical outcomes represent the Pearson’s chi squared.

Appendix 2. Statewide Caregiver Survey

WASHINGTON STATE KINSHIP CAREGIVERS SURVEY

The information will help Washington State understand the needs and circumstances of those who have taken on the responsibility of raising a kinship child. We appreciate your time and input. The bullet points below are information to keep in mind as you take the survey. **Your answers to this survey are anonymous! We do not ask for your name.**

- For questions asking about the kinship child in your care, please answer for the kinship child that has been with you the longest. If two (or more) kinship children came into your care at the same time, please answer for the oldest.
- Child(ren) refers to kinship children of any age in your care.

PART I: Please share about the children you are currently raising.

1. How many children are you currently raising? _____

2. For each child, please tell us his/her age (write 0 if they are under one year old).

1st Child’s age _____

4th Child’s age _____

2nd Child’s age _____

5th Child’s age _____

3rd Child’s age _____

6th Child’s age _____

3. Of the children you are raising, how many are **NOT** your own birth children? _____

The next few questions ask about children you are raising for whom you are not the birth parent.

4. How many years have you been raising the child who has been with you the longest?
 _____years

5. What is your relationship with this child?

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Sibling | <input type="checkbox"/> Adoptive parent |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> Family friend (godparent, neighbor, etc.) |
| <input type="checkbox"/> Cousin | <input type="checkbox"/> Other, please explain: _____ |
| <input type="checkbox"/> Aunt/uncle | _____ |
| <input type="checkbox"/> Niece/nephew | |

6. *An informal arrangement refers to kinship care provided without involvement with CPS or the formal child welfare system.*

If you are caring for your kinship child through an informal arrangement, please indicate if any of these arrangements apply to your situation.

(Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Parental consent agreement | <input type="checkbox"/> Non-parental custody (sometimes referred to as third-party custody) |
| <input type="checkbox"/> Durable power of attorney | <input type="checkbox"/> Guardianship |
| <input type="checkbox"/> Informal arrangement (no paperwork) | <input type="checkbox"/> Adoption |
| <input type="checkbox"/> Family decision | <input type="checkbox"/> Other, please explain: _____ |
| <input type="checkbox"/> Health care consent waiver | _____ |

7. *If you are a formal kinship caregiver, your kinship child had to be placed in your home because of CPS investigation or involvement with the child welfare system.*

What is your legal or formal relationship with the child you have been raising the longest?

(Please check only one)

- Guardian
- Foster parent (kinship caregiver that is licensed as a foster parent)
- Unlicensed caregiver
- Parental custody (sometimes referred to as a third-party custody)
- Adoption
- Guardian
- Other, please explain: _____

8. What is the circumstance(s) that led to your raising the kinship child that has been with you the longest? (Please check up to two circumstances)

(Please refer to the instructions above if more than one child was placed at the same time)

- | | |
|--|---|
| <input type="checkbox"/> Age of birth parent | <input type="checkbox"/> Parental physical health |
| <input type="checkbox"/> Birth parental financial circumstance | <input type="checkbox"/> Death of birth parent / guardian |
| <input type="checkbox"/> Birth parental substance use | <input type="checkbox"/> Birth parent deportation |
| <input type="checkbox"/> Birth parent left community for work/school | <input type="checkbox"/> Birth parent military service |
| <input type="checkbox"/> Birth parent incarceration | <input type="checkbox"/> Birth parental homelessness |
| <input type="checkbox"/> Incident of child/abuse neglect | <input type="checkbox"/> Child's injury |
| <input type="checkbox"/> Birth parental behavioral health | <input type="checkbox"/> Other, please explain: _____ |
-

9. Please check **three** issues that present the greatest challenges related to raising the kinship children who are currently in your care. *(Please check **only three** items)*

- | | |
|--|--|
| <input type="checkbox"/> Housing | <input type="checkbox"/> Child's behavior |
| <input type="checkbox"/> Legal problems | <input type="checkbox"/> Finances |
| <input type="checkbox"/> Your own emotional health | <input type="checkbox"/> Delaying your retirement |
| <input type="checkbox"/> Child-care arrangements | <input type="checkbox"/> Paying for child's medical care |
| <input type="checkbox"/> Your own physical health | <input type="checkbox"/> Child's relationship with own parents |
| <input type="checkbox"/> Child's emotional health | <input type="checkbox"/> Child's education |
| <input type="checkbox"/> Your own relationship with the child's birth parents | <input type="checkbox"/> Other, please explain: _____ |
| <input type="checkbox"/> Lack of access to respite care services (someone to watch the child to allow a temporary break from caregiving) | _____ |

10. The following are services and resources for which you may have needs that are not being met. Please check the **three** services or resources for which you have the greatest unmet needs regarding the children in your care. *(Please check **only three** items)*

- | | |
|---|---|
| <input type="checkbox"/> Legal services and advice | <input type="checkbox"/> Drug or alcohol treatment services for your child, parent or yourself |
| <input type="checkbox"/> Counseling for your child | <input type="checkbox"/> Recreational and social activities for the child |
| <input type="checkbox"/> Parenting classes for you | <input type="checkbox"/> Respite care (someone to watch the child to allow a temporary break from caregiving) |
| <input type="checkbox"/> Medical care for the child | <input type="checkbox"/> Child-care |
| <input type="checkbox"/> Services for infant and toddlers | <input type="checkbox"/> Finding a support group for yourself |
| <input type="checkbox"/> Services for children with special health care needs | <input type="checkbox"/> Affordable and adequate housing |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Financial support |
| <input type="checkbox"/> Working with child's school or teachers | <input type="checkbox"/> Other, please explain: _____ |
| <input type="checkbox"/> Adequate special education service for your child | _____ |

11. Where do you currently receive help with raising your kinship children? *(Please check all that apply)*

- | | |
|---|--|
| <input type="checkbox"/> Spouse or partner | <input type="checkbox"/> Public social services (state, county, city, or tribal) |
| <input type="checkbox"/> Friends | <input type="checkbox"/> Behavioral health services |
| <input type="checkbox"/> Support groups | <input type="checkbox"/> Community health clinic |
| <input type="checkbox"/> Religious organizations | <input type="checkbox"/> Other relatives |
| <input type="checkbox"/> School | <input type="checkbox"/> Other, please explain: _____ |
| <input type="checkbox"/> Family support center | _____ |
| <input type="checkbox"/> Private agency and/or community organization | |

12. There are a number of services, resources, laws, and policies that affect your ability to care for your children. What do you believe is the **single most important** thing that needs to change to help you and others in your situation?

PART II: Please remember your name is not on this survey and the information you provide is anonymous. However, this information will be very helpful.

Please tell us about yourself.

13. Choose the category that best describes your current situation:

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Married | <input type="checkbox"/> With a Partner |
| <input type="checkbox"/> Single | <input type="checkbox"/> Widowed |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Separated |

14. Are you employed?

- Yes
 No

→ If yes, approximately how many hours do you work each week? _____/week

15. Including yourself, how many persons over age 18 currently live in your home? _____

16. How many persons under age 18 currently live in your home? _____

17. How many of these persons do you financially support? _____

18. In which county do you live? _____

19. In what year were you born? _____

20. What is your gender?

Male

Female

Other, please specify: _____

21. Are you of Hispanic, Latino, or Spanish origin?

No, not of Hispanic, Latino, or Spanish origin

Yes, Mexican, Mexican American, Chicano

Yes, Puerto Rican

Yes, Cuban

Yes, another Hispanic, Latino, or Spanish origin: _____

22. What is your race? (*Please check all that apply*)

White

Korean

Black or African American

Vietnamese

American Indian or Alaska Native

Native Hawaiian

Asian Indian

Guamanian or Chamorro

Chinese

Samoan

Filipino

Other Asian: _____

Japanese

Other Pacific Islander: _____

23. Are you, or other adults contributing to the household, currently receiving income or income assistance from any of the following sources? *(Please check all that apply)*

- | | |
|--|---|
| <input type="checkbox"/> Wages, Salary | <input type="checkbox"/> Food Stamps |
| <input type="checkbox"/> Social Security | <input type="checkbox"/> State medical assistance for your child(ren) |
| <input type="checkbox"/> Social Security Disability (SSI) Payments | <input type="checkbox"/> Child Care Assistance (Working Connections Child Care) |
| <input type="checkbox"/> Pension | <input type="checkbox"/> Support services provided by the Division of Children and Family Services/DCYF |
| <input type="checkbox"/> Child Support | <input type="checkbox"/> Tribal per capita payment |
| <input type="checkbox"/> Non-Needy Relative TANF grant ("child-only grant") | <input type="checkbox"/> Tribal treaty income |
| <input type="checkbox"/> Monthly foster care reimbursement | <input type="checkbox"/> Other, please explain: _____ |
| <input type="checkbox"/> Adoption support subsidy | _____ |
| <input type="checkbox"/> Relative Guardianship Assistance Program subsidy (RGAP) | |
| <input type="checkbox"/> TANF grant for yourself and children | |

24. What is your total annual household income from all sources?

- | | |
|---|---|
| <input type="checkbox"/> Less than \$5,000 | <input type="checkbox"/> \$40,000 to \$49,999 |
| <input type="checkbox"/> \$5,000 to \$9,999 | <input type="checkbox"/> \$50,000 to \$59,999 |
| <input type="checkbox"/> \$10,000 to \$19,999 | <input type="checkbox"/> \$60,000 to \$69,999 |
| <input type="checkbox"/> \$20,000 to \$29,999 | <input type="checkbox"/> \$70,000+ |
| <input type="checkbox"/> \$30,000 to \$39,999 | |

25. Where do you think your kinship child(ren) will be living one year (12 months) from now?

<input type="checkbox"/> With me	<input type="checkbox"/> Parent/guardian
<input type="checkbox"/> Foster parent	<input type="checkbox"/> Another relative
<input type="checkbox"/> Other, please specify: _____	

26. Are you participating in a kinship navigator program?

Yes No

27. How did you learn about this survey?

- Family/friend
- Department of Child, Youth, and Families (DCYF) or Department of Social and Health Services (DSHS)
- Local community non-profit
- Other: (please specify) _____

28. What resources and/or services have been the most helpful to you as a kinship caregiver raising a child?

29. Is there anything else you would like to share with us about your needs and/or experience as a kinship caregiver?

Thank you for participating in this survey!