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### Children and Youth Services Review

journal homepage: www.elsevier.com/locate/childyouth

# Kinship Services Network Program: Five year evaluation of family support and case management for informal kinship families $\stackrel{\leftrightarrow}{\approx}$



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#### ARTICLE INFO

#### ABSTRACT

Article history: Received 14 July 2014 Received in revised form 13 October 2014 Accepted 15 October 2014 Available online 22 October 2014

Keywords: Kinship Services Network Informal Evaluation Family support Case management The purpose of the present study is to seek to better understand if a community-based family support program, Kinship Services Network (KSN), can improve the social support and family resource needs for kinship families and promote safety and permanence for children in informal kinship placements at a low cost. During the five year evaluation period, KSN served 2956 participants in one urban southeastern county. A stratified random sample of participants completed pre- and post-assessments of their perceived social support and adequacy of family resource needs. Administrative data was used to determine whether children of all participants remained in the care of a relative twelve months after program completion. Cost estimates were used to compare the costs for several placement options for children. Additionally, a case example is used to illustrate program implementation. Participants in the program improved their adequacy of social support and improved family resource needs (p < .001). Ninety-nine percent of participants' children did not enter the child welfare system at twelve month follow-up, showing placement stability and child safety. KSN cost of service is less than half the costs associated with adjudicating a child dependent. Non-relative foster care is  $6 \times$  (six times) and residential group care is more than  $21 \times$  (twenty-one times) as expensive as the KSN Program. Recommendations are provided to help community based organizations promote case management and family support services in their own communities.

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#### 1. Introduction

There are many circumstances that result in the decision of nonparental relatives to care for their younger kin. Social problems such as: child maltreatment; parental substance abuse, incarceration, and mental illness; teenage pregnancies; and extreme poverty are major contributors to kin care. The impact of these social problems on the family system is often devastating and in turn forces families into making difficult decisions, such as living in multigenerational homes or taking on the responsibility of raising a relative's child.

A variety of custody options exists for kinship families, including formal and informal. Formal kinship care, or public kinship care, often refers to families whose children are placed with relatives by a child welfare agency because of child abuse, neglect or abandonment. Formal kinship care can depend on how caregivers are publically supported and the way they are monitored by a child welfare agency. Informal, or private kinship care, is usually a relationship initiated by the family because of a crisis or other family problem.

Of the 400,540 children currently involved in the formal child welfare system, 27% or 107,955 of them have been placed with kinship caregivers (U.S. Department of Health and Human Services, Administration on Children, Youth & Families, Children's Bureau, 2012). This number grossly underestimates the actual number of kinship caregivers because of their "informal" status, caring for relatives without involvement in child welfare services (Annie E. Casey Foundation, 2012; Geen, 2004; Ehrle & Geen, 2002). Kinship care has been on the rise for the past decade and this growth is most dramatic among families with the least financial resources and the highest social service needs (Gleeson, 2007).

The National Survey of American Families (Murray, Ehrle-Macomber, & Geen, 2004) estimates that 77–78% of kinship care occurs informally, without the involvement of the child welfare system, 13% have had some type of involvement with the child welfare system but have been diverted from further child welfare involvement, and 8% (AFCARS estimate) of the children raised by relatives are in the legal custody of the child welfare system and placed with a relative in formal kinship care. Although much research and literature is available about the 5% to 9% of kinship care that occurs formally, very little is known about the 77–78% of kinship care that occurs informally, particularly programs designed to provide case

<sup>&</sup>lt;sup>†</sup> The author acknowledges the generous financial support of the Juvenile Welfare Board, Children's Service Council of Pinellas County (JWB) that funded this study. The author also acknowledges the substantial contributions of the Children's Home, Inc. for their commitment to providing innovative, high quality services to kinship families.

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management and family support (Strozier & Krisman, 2007). Little is known about which interventions work with families not involved in the child welfare system. Kinship families are different than traditional foster care families, especially concerning how these families are treated by the child welfare system and the State.

For the purpose of this study, the state of Florida will be used as an example of how states can provide differing support to relative caregivers. In Florida, some kinship families become licensed foster parents, thus receiving a foster care maintenance payment versus other kinship families who are approved but do not receive the same level of support. Relatives licensed as foster parents in Florida must meet the same requirements and standards for licensure and receive the same foster care subsidies as non-relatives (Golden & Hawkins, 2011). Another program, the Florida Relative Caregiver Program, provides monthly financial support to relatives who have custody of a child under age 18 placed in their home by the Department of Children and Families and meets the eligibility requirements. Additionally, Florida provides support to kinship families through a TANF child only grant instead of a foster care payment. The monthly payment is more than the Temporary Cash Assistance for one child, but less than the amount paid for a foster care child. Payments are based on the child's age and any countable income. Relative caregivers receive on average about 60% of the financial assistance that non-relative foster parents receive (Casey Foundation, 2012).

There is also limited evidence that kinship homes are less likely to maltreat than non-kinship homes and children placed in the homes of relatives may be safer from further maltreatment compared with those children left in their birth homes (Cuddebach, 2004). Investing in prevention programs for informal kinship families such as case management and family support prior to involvement with the child welfare system, could potentially improve child and family outcomes while producing cost savings. Few family support programs are specifically designed to serve informal kinship families (Littlewood, 2014). Family resources are especially important to informal kinship families and over time are related to corresponding changes in children's competence levels (Washington, Gleeson, & Rulison, 2013). Implementing family support and case management programs could also benefit those kinship families involved with the child welfare system, as kinship foster families receive less training and support than non relative foster parents (Cuddebach, 2004).

This study will seek to better understand if a community-based family support program can improve the social support and family resource needs for kinship families and promote safety and permanence for children in informal kinship placements at a low cost.

#### 1.1 . Kinship Services Network Program model

Several national and regional models were reviewed to inform the program design of the Kinship Services Network model. Consultation with the Edgewood Center for Children and Families in San Francisco, California; Cornell University Cooperative Extension in New York, NY; Joseph Crumbley from Temple University in Philadelphia, PA; and the Florida Kinship Center at the University of South Florida School of Social Work in Tampa; helped to identify program components which would best meet the needs of informal kinship families. The following program components were identified to build support for kinship families.

#### 1.1.1. Offer a wide variety of supportive, easy-to-access services

Kinship caregivers most in need of support and services are those who are receiving it the least, and to ensure positive outcomes family needs must be addressed by practitioners and policy-makers (Hong, Algood, Chiu, & Lee, 2011). There are also many forms of diversity within relative caregiver families and flexible programming based on an understanding that "one size" cannot and should not "fit all" is critical to program success (Smith & Monahan, 2007). With this in mind, KSN offers a wide variety of services and supports to participants that are based on available resources in the community, the evidence-base for what works for these families, and the experiences of the provider agency. Services include: case management, family support services, advocacy, information and referral, counseling, coordinated child care, health assessment, educational workshops, follow-up, mentoring, navigation, psychosocial/historical assessment, respite services, support groups for youth and adults, and tutoring. These services are available to all families and based on need. Services are provided at home, at a community-based agency, or contracted out to a local community partner.

### 1.1.2. Develop an inclusive community collaborative to support dynamic needs of kin families

Coordinating services for the families of kinship caregivers can improve child and family outcomes and the caregiver's ability to access needed services (Child Information Gateway, 2014). In order to establish a wide variety of services and supports, a community collaborative was developed to inform KSN Program design, respond to changing and diverse needs of families, promote the program, and identify community-based services to wrap around the family. Membership includes an interdisciplinary mix of professionals serving kinship families, including: senior centers, area agencies on aging, legal aid, respite providers, coordinated child care, substance abuse treatment centers, universities/community college, school social workers and others engage in resource and information sharing at monthly meetings held in the community. This collaborative is a useful vehicle for information sharing and breaking down service silos since 2003. The community collaborative helps KSN coordinate services to kinship families. At monthly meetings, kinship family needs that are not addressed within KSN are solicited to the collaborative for community support. Community partners coordinate services during the meetings and share valuable resources.

## 1.1.3. Partner with highly regarded community service provider agencies to implement the program

As noted with interdisciplinary participation in the community collaborative, kinship families' needs extend beyond the scope of traditional child welfare. To respond to diverse needs and promote the program in the community, KSN engages well-reputable agencies who have a proven track record and good reputation. Gibson (2005) noted that kinship families expressed fear about seeking out services due to the stigma, particularly counseling and psychological services. Using a multitude of reputable community based agencies to provide a wide variety of services for families enrolled in the Kinship Services Network could lessen the stigma, facilitate trust and promote partnership with families. Three agencies involved with the implementation of the program include: The Children's Home, Inc. (lead agency), Catholic Charities of St. Petersburg, FL, and Big Brothers Big Sisters of Pinellas County.

## 1.1.4. Evaluate the program with valid and reliable measures to promote successful outcomes and develop a replicable model

KSN was designed with sustainability in mind. Too many good programs have come and gone based on the limited funds and resources in the community. KSN's priority was to build an evaluation that was rigorous enough to showcase program outcomes and cost benefit to potential and existing investors. Evaluation results inform the program design, implementation and dissemination.

#### 2. Method

The purpose of this study is to test a theory of change regarding the effectiveness of expanded family support services and case management in improving social support and family resources, permanency and safety outcomes for children at risk of entering out-of-home placement, and cost effectiveness for program administration.

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