

RAPP REPORTER

Fall 2010

A Newsletter of the Brookdale Foundation Group

RAPP NETWORK UPDATE

The Relatives As Parents Program (RAPP) Request for Proposals (RFP) application and guidelines are now available on our website. Non-profit organizations from around the country are welcomed to apply. State Public agencies can also apply for our State RAPP Initiative. Applications and guidelines for all programs can be found on our website, www.brookdalefoundation.org.

We are pleased to announce the release of two new resources. The first one, ***Developing Rural Relatives As Parents Programming: Promising Practices: A Collection of***

Practice Wisdom from Across Rural America was written by the University of Maine Center on Aging. The manual provides Relatives as Parents Programs (RAPPs) with a thorough review of the strengths, needs, and challenges of rural kinship caregivers, as well as practical

tips on serving rural grandfamilies.

The information in the manual is based on a combination of

help. Kinship caregivers across the country offered insight as to what makes great programming for rural grandfamilies. The result of this effort is a

collaborative and comprehensive manual showcasing many of the promising practices in use across the country. The complete publication is available for download at no charge.

Professionals in any field that work with grandparents raising grandchildren or other kinship caregivers are encouraged to utilize the manual to better support rural grandfamilies.

In this issue:

- Rural RAPP Manual: A Great Resource for RAPPs Serving Caregivers in Rural Areas
- Bullying Prevention: Tips and Strategies
- Social Security: It's for Children Too!
- The LifeSpan Respite Program:
 - Illinois' LifeSpan Respite Program Responds to Caregiver Needs
 - Grandparents Raising Grandchildren Served by the New Arizona LifeSpan Respite Program
- The Kinship Navigator Program of Lorain County, Ohio

Also inside:

- A Legislative Update!
- State RAPP Highlights
- State RAPP Websites; and
- The RAPP Funding Alert!

published research and extensive surveys and interviews with both service providers and kinship caregivers. Service providers offered input about the unique needs of their rural clients, barriers rural clients may face in accessing services, and strategies that they have used to

The second resource is ***GrandFacts: Data, Interpretation, and Implications For Caregivers***, written by Generations United. One million American children live in grandparent-headed households in which their parents are not present,

effectively skipping a generation. These little-known families face unique challenges, highlighted in this new report.

The information in *GrandFacts: Data, Interpretation, and Implications For Caregivers*, will be a vital tool for national, state and local policymakers, as well as agencies providing services to grandfamilies nationwide.

This report points to the need to learn more about the caregivers and children in skipped generation grandfamilies. Full data charts and more information about these and other grandfamilies are available at www.gu.org/GrandFacts.asp.

Key findings about skipped generation grandfamilies include:

- Most children are teens. Forty-two percent of the children are 12 to 17 years old. In parent-child families, only one-third of children are 12 to 17 (the rest fall evenly between two groups: ages six to 11 and younger than six).
- More children have physical and mental health needs than in parent-headed households.
- One-third of the children are in families with incomes below the poverty level. This is double the child

poverty rate in parent-child families.

- Nearly half struggle with housing costs –

FUNDING ALERT!

We are pleased to announce the Relatives As Parents Program (RAPP) Local, Regional and State Seed Grant Initiatives for the year 2011.

Local, Regional and State agencies will be chosen from throughout the United States through a Request for Proposals (RFP) process. Each agency will receive a \$10,000 grant [\$6,000 in the first year, the remaining \$4,000 if all grant requirements have been met], as well as training and technical assistance. Matching support in cash or in-kind will be required of all selected agencies. The sponsoring agency must be a 501(c) (3) entity or have equivalent non-profit status.

Deadlines: Local and Regional proposals: **Thursday, December 2, 2010**. State proposals: **Thursday, January 6, 2011**.

Selected applicants will be notified in April and be required to attend our National Orientation and Training Conference in Denver, Colorado April 29 – May 1, 2011.

Copies of the Local, Regional and State RFP guidelines and application forms may be downloaded directly from the Foundation's website, www.brookdalefoundation.org.

– renters as well as home owners. This is significantly more than is the case with parent-child families.

- Nearly one-third of grandparent householders have not completed high school. This compares to one-

eighth of parents in parent-child families who do not have high school diplomas. These findings – which highlight the subgroup of skipped generation grandparents – came from the U.S. Census Bureau's latest national sample, the 2005-2007 American Community Survey's three-year estimates.

For more information on these and other resources, see the "Resources" section of this newsletter or visit our website, where both publications can be downloaded free!

The next Janet Sainer RAPP Award will be presented at our annual National Orientation and Training Conference April 29 – May 1, 2011, in Denver, Colorado. RAPPs will choose the recipient of the award from our Network. More information to follow!

During these difficult economic times, when organizations are struggling to do more with less, we thank you for your work on behalf of relative caregiver families!

**Rural RAPP Manual:
A Great Resource for RAPPs
Serving Rural Areas!**

Jennifer Crittenden

Cynthia Sturm

University of Maine Center on
Aging

Rolling hills, lots of great green space, long winding country roads, and the gentle pace of rural life—all of these things conjure the image of a peaceful and idyllic setting to raise a family. For those of us who live in such areas of the country there is much to savor about our surroundings. However, it is important to understand the challenges and opportunities in rural areas, especially for those of us who work with caregivers. Rural areas of our country face numerous challenges from lack of transportation to a lack of qualified health and mental health providers. Within such areas there also exist great opportunities, particularly for building RAPP programming.

The manual, *Developing Rural Relatives As Parents Programming: Promising Practices: A Collection of Practice Wisdom from Across Rural America*, is a great tool that has been developed by the University of Maine Center on Aging in partnership with the Brookdale Foundation. This manual, the result of year-long research effort, is a practice tool that offers information on the strengths, needs, and challenges faced by rural caregivers.

Throughout the manual, practice tips are shared on how to address the challenges rural

caregivers face. The manual features “insider tip” boxes to highlight quotes and programming ideas that come directly from other RAPPs and even grandfamilies from throughout the country. A combination of research, surveys and interviews were used to determine the most helpful information and resources for caregivers and providers. Here are a few highlights from the manual:

- ✓ **REPUTATION** is KEY to success when working with families, especially families in rural areas of the country. It is critical that you build a trusting relationship.
- ✓ Don't be afraid to use **TECHNOLOGY** to reach a greater number of people. There are great options that exist for connecting to caregivers like hosting teleconference support groups, online chats for caregivers or even reaching out to youth using Facebook.
- ✓ Each town and community is different and has its own **CULTURE**. Be mindful of this challenge when approaching communities. Partner with local leaders or trusted community members to help you make in-roads.
- ✓ Develop innovative solutions to

TRANSPORTATION challenges. For example:

- Hold support groups after other events caregivers or their children are likely to attend.
 - Use technology so that caregivers do not need to leave their home to receive support.
 - Offer gas vouchers or partner with a local Community Action Program that can provide transportation.
 - Collaborate with community organizations and professionals to fill gaps. For example, invite local experts to support groups or use space at a local agency to hold your support group meetings.
- ✓ Follow up on all requests for information and assistance in order to gain support and maintain a good reputation.
- If you cannot satisfy a request for information or assistance, explain why and provide a “warm

hand-off” for the caregiver rather than a list of phone numbers to call. A “warm hand-off” means that caregivers are not just referred, but rather connected directly to another service provider either face-to-face or by phone.

IDEAS FOR SERVING IN YOUR COMMUNITY

RAPPs throughout the country have developed some innovative and low-cost options for supporting grandfamilies.

Here are some examples of how RAPPs in rural areas are working to meet the needs of grandfamilies:

- **SUPPORT GROUPS**
 - Partnerships are developed with local universities to find college students to provide respite, including child care, during support group meetings.
- **INTERGENERATIONAL SOCIAL AND RECREATIONAL EVENTS**
 - In rural areas, this means taking

advantage of the great outdoors.

- Partnerships with places like local farms and hosting a farm day.
- **EDUCATION AND TRAINING**
 - Partnering with local organizations, universities and others to co-sponsor trainings for caregivers.
 - Topics of interest to rural caregivers include information about substance abuse, mental health issues, benefit programs and legal issues as well as on how to navigate the systems.
 - Partnering with organizations that can provide counseling and mental health services, healthcare and respite, including childcare.
 - Collaborating with partners and caregivers to provide transportation assistance.

FIND OPPORTUNITIES FOR SUPPORTS AND PARTNERSHIPS

In addition to recruiting members for support groups, partner with public service representatives such as elected officials or policymakers to create opportunities to change state or federal laws that impact families. Using community service organizations or local businesses bridges the gap for families and empowers them to be self-advocates.

RAPPs collaborate with the following agencies to provide supportive services to relative caregiver families:

- Area Agencies on Aging
- Local Universities/ Cooperative Extension Offices
- Food banks
- Senior Centers
- Childcare Centers
- Churches
- Local businesses

BUILDING RELATIONSHIPS WITH RURAL FAMILIES

In order to reach out to families, it is important to establish a working relationship with them and develop a strong reputation in the community. Outreach and engagement of rural families offers a chance for caregivers to have a sense of ownership of the RAPP efforts which will empower them to problem-solve and develop unique strategies that work best for them. Here are some examples:

- Peer mentoring programs

- Caregivers as co-facilitators of groups
- Helping caregivers establish connections
- Caregivers helping with transportation by carpooling
- Encouraging families to help organize new services in their community

STARTING YOUR OWN PROGRAM

The rural manual also offers key sections on administrative issues related to starting up or sustaining your RAPP. Information is provided about staffing your own program, obtaining funding and the manual includes a comprehensive resource list that can help others assist rural kinship programs.

The rural manual is available for download at no charge at <http://www.umaine.edu/mainecenteronaging/documents/RuralRAPPManual.pdf> or on the Brookdale Foundation website, www.brookdalefoundation.org. Professionals in any field with access to relative caregivers who are primary caregivers are encouraged to utilize this manual to better support rural grandfamilies.

While the manual gives great tips for rural RAPPs, much of the information provided is also applicable to RAPPs serving in other areas as well!

For more information on the rural manual or on serving caregivers in rural areas, contact Jennifer Crittenden at jennifer.crittenden@umit.maine.edu or by phone at 207-262-7923.

Bullying Prevention: Tips and Strategies for Caregivers

Luke Yoder
The Partnership for Families & Children

As more and more tragic stories surface in which bullying plays a role, adults are realizing the importance of addressing the issue of bullying with their youth. Research demonstrates that between 30-45% of youth are involved in bullying as either a bully or a target (Melton et al., 1998; Nansel et al., 2001). Research also indicates that youth who bully and youth who are bullied experience numerous negative outcomes. Youth who are bullied are more likely to experience depression, loneliness, anxiety, low-self esteem, and suicidal thoughts (Limber, 2002; Olweus, 1993). And youth who bully are more likely to be engaged in other forms of delinquent or criminal behavior (Nansel et al., 2003; Olweus, 1993).

Tips for Parents/Caregivers

There are numerous ways that relative caregivers can help their youth deal with bullying behavior they may experience as a bully, a target or a bystander. The following tips are taken from www.stopbullyingnow.hrsa.gov

and are a great place to start with your youth.

1. Learn as much as you can about bullying among youth. The above website has numerous materials for both youth and adults. Visit it and learn more about the dynamics of bullying.
2. Talk with youth in your family about bullying and your expectations about their behavior. Youth should know that you expect that they:
 - Do not bully others
 - Are helpful and kind to youth who are bullied
 - Report bullying that they experience or witness to you or other adults.
3. Be watchful for possible signs of bullying among youth in your family.
4. Take immediate action if you suspect bullying.
5. Work with school personnel and other adults in your community to prevent and reduce bullying.

Best Practices for Bullying Prevention Program Implementation

In addition to simply being there for your child when they

experience bullying, another key role parents can play in preventing bullying in their youth's lives is advocating for bullying prevention efforts in schools and the after-school programs that their youth attend. The three-year Bullying Prevention Initiative (BPI) funded by The Colorado Trust produced a list of eight best practices that parents can help advocate for within their respective schools or after-school programs. The following list, in addition to many other resources for implementing bullying prevention efforts, can be found at www.bullyingprevention.org.

- 1) **Regularly assess the social climate in schools and other youth-centered environments.**
An anonymous questionnaire given to students is a unique tool for probing into the social climate of the school that is typically visible only to them. It can yield vital information about when, where and how often bullying occurs; how children and youth feel about reporting bullying behavior to adults, and how they feel about other kids who report such information.
- 2) **Make bullying prevention an integral and permanent component of the school environment.**

Teachers (with the support of administrators) should set aside 20-30 minutes each week, or every other week, to discuss bullying and peer relations with students. Anti-bullying messages and strategies should also be incorporated into youth-related activities in the community, including recreational activities, scouting and after-school programs.

- 3) **Establish and enforce school rules and policies related to bullying.**
Developing simple, clear rules about bullying can help ensure that students are aware of adults' expectations that they refrain from bullying and help students who are bullied. School rules should be posted and discussed with students and parents.
- 4) **Provide ongoing training for school staff, and increase adult supervision in locations identified as "hot spots" for bullying.**
Administrators, teachers, coaches, bus drivers, cafeteria workers and other adults should receive training to help them better understand the nature, dynamics and impact of bullying; how to respond when they observe

bullying or it is reported to them; and how to work with others at the school to curb and prevent bullying.

- 5) **Form a team responsible for coordinating bullying prevention efforts.**
The formation of an inclusive leadership team sends a strong message that bullying is a problem that must be addressed in partnership. The 10 to 12 member team should include a school/district administrator; a teacher from every grade level; parents and students; a counselor, school nurse or mental health professional; and community or neighborhood representatives. The group should meet regularly and be led by a committed chairperson with strong organizational skills and an ability to facilitate discussion, problem solving and decision-making.
- 6) **Garner the support of school staff, parents and other key partners.**
A defining characteristic of successful prevention and intervention strategies is a strong sense of partnership among school/district staff, families and the broader community. The

more time and energy invested in outreach, communication and partnership building over the course of a bullying prevention initiative – and particularly early on – the less likely it is to falter at some point, if not fizzle out altogether.

- 7) **Give young people an active and meaningful role in bullying prevention efforts.** Solicit and take into consideration all students’ ideas, opinions and feedback. Older students should be involved as both participants and leaders in planning, implementation, partnership building and other key activities.
- 8) **Develop cultural competency strategies, skills and programs that are inclusive and enhance communication and relationship building.** Cultural competency is an ongoing process and practice that builds the capacity of individuals and institutions to develop a climate that understands, accepts and respects the unique contributions of all people, regardless of ability, age, disability, ethnicity, gender, gender identity, geographic region, health, language, mental health, race,

religion, sexual orientation, socioeconomic status or spirituality.

The most significant impact caregivers can have in helping their youth deal with bullying is by educating themselves about the dynamics of bullying, and to talk with their youth about how to deal with bullying situations. Beyond that, caregivers can be key proponents of bullying prevention efforts in the schools and after-school programs of their youth. By taking these steps, caregivers can help set their youth up for success in their relationships in and out of school.

Grandfamilies
Social Security:
It’s for Children Too
Ana Beltran
Generations United, DC

Social Security is a vital source of income for many grandfamilies. Contrary to popular belief, it provides vital supports to all generations, not just retirees. Social Security is an intergenerational program that pays more benefits to children than any other federal program.¹ It supports more children than “welfare,” or the Temporary Assistance for Needy Families (TANF) program.² Six and a half

¹ U.S. Social Security Administration, *Survivor’s Benefits*. SSA Publication No. 05-10084, August 2009, ICN 468540.

² Lavery, Joni and Virginia P. Reno (2008). *Children’s Stake in Social Security* (Social Security Brief No. 27). Washington, D.C.: National Academy of Social Insurance.

million children in the United States received part of their family income from Social Security in 2005, with many receiving assistance from Social Security’s survivors benefits program.³ That same year, Social Security kept 1.3 million children from falling into poverty.⁴

There are four major ways that Social Security may be able to help your grandfamily or the grandfamilies you work with:

- **Benefits that caregivers may receive because of retirement or disability⁵ or as a survivor**

This is the most well known way Social Security can help grandfamilies. The caregiver may receive retirement benefits, survivors benefits as a widow or widower or other survivor and/or potentially two types of disability benefits: Social Security Disability Insurance (SSDI), which is based on the caregiver’s earnings record under Social Security, and Supplemental Security Income (SSI), which is based on financial need.

Social Security Disability Insurance (SSDI), like survivors and retirement benefits, is

³ *Ibid.*

⁴ *Ibid.*

⁵ *Definition of disability for adults:* An adult is considered disabled if he is unable to do any “substantial work” because of his or her medical condition(s); and the medical condition(s) must have lasted or be expected to last at least 1 year, or be expected to result in death.

financed with Social Security taxes paid by workers and employers. For SSDI, the worker must earn enough credits based on taxable work to be "insured", and the amount of monthly disability benefits is based on that workers' earnings record. Disability benefits may be paid to a blind or disabled worker, a widow(er) of a worker with a disability or an adult disabled since childhood.

Supplemental Security Income (SSI) is a program financed through general revenues, and is payable to those who are disabled or blind, have limited income and resources, and are otherwise eligible. The monthly payment varies depending on where a caregiver lives, because some states supplement the amount.

➤ **Benefits that children may receive because of their own disability⁶**

SSI is also available to disabled or blind children under age 18 if the child and family members in the same household have income and resources that fall within eligibility limits. SSI is paid to children regardless of

⁶ *Definition of disability for children:* A child under 18 is considered disabled if his or her physical or mental condition is so severe that it results in marked and severe functional limitations. The condition must last or be expected to last at least 1 year or be expected to result in the child's death. And, of course, the child must not be working at a job that the Social Security Administration considers to be "substantial work."

whether a parent or grandparent is retired, disabled or has died. These benefits continue into adulthood as long as the adult child meets the definition of disability for adults and only his or her income and resources (not the family members in the same household) fall within the guidelines.

SSDI is available to disabled adult children whose parents (or grandparents, see below) retire, become disabled or die. These benefits are paid based on a parent's (or grandparent's) earnings record and are for children over age 18 who have been disabled before the age of 22 and continue to be disabled. SSDI for adult children may continue as long as they meet the adult definition of disability and are unmarried.

➤ **Benefits that children may receive because of a parent's retirement, disability or death**

Children, who are not themselves disabled, may also get benefits if a parent is disabled or retired and is entitled to Social Security benefits or if a parent dies after having worked long enough to pay Social Security taxes. These benefits are available to unmarried children under age 18 (up to age 19 if attending elementary or secondary school full time).

➤ **Benefits that children may receive because of a grandparent's retirement, disability or death**

Eligibility for a child to collect on a grandparent's work record is complex and, as caregivers know all too well, these types of eligibility determinations can result in different outcomes based solely on the case worker reviewing the paperwork. To protect against this possibility, we encourage grandparents to first refer to the language of the Social Security Act itself before applying for benefits for the children in their care. The definition of "child" at Title 42 of the U.S. Code section 416(e) contains the basic requirements for a grandchild to be able to collect on the work record of a grandparent. Generally, if a child is not receiving benefits based on a parent's work record when a grandparent or step-grandparent retires, becomes disabled or dies, the grandchild may be able to qualify for benefits based on the grandparent's work record. To qualify, the birth parents must be deceased or disabled or the grandchild must be legally adopted by the grandparent. Also, the grandchild must have started living with the grandparent before age 18 and received at least half of his or her support from the grandparent for the year before the month the grandparent died or became entitled to retirement or disability insurance benefits. Finally, the birth parents must not be making regular contributions to the child's support.

For each specific grandfamily, there will undoubtedly be more questions after reading this summary. We encourage

caregivers to research as much as possible through the websites below and the Social Security Administration's toll free number before either applying online or going to their local Social Security office to review their situation.

For more information

Please refer grandfamilies or as a caregiver yourself, visit www.aarp.org/quicklink. It takes users through a series of questions and gives answers specific to them. For more information directly from the Social Security Administration or to apply for benefits online, please visit www.ssa.gov. The Social Security Administration also has a staffed toll-free number from 7 AM to 7 PM ET on Monday through Friday: 1-800-772-1213. People who are deaf or hard of hearing may call the TTY number at 1-800-325-0778 during those same times. For additional information about Social Security's importance as a program for all ages, please visit, www.gu.org/socialsecurity.asp

Lifespan Respite and RAPP in Illinois

Barbara Schwartz
Illinois State RAPP Coordinator

Those of us who have received a Brookdale grant are well aware of the importance the Foundation places on networking, collaboration and establishing partnerships. How many times have we been encouraged to "think outside of the box" and seek out partners within the aging, child welfare, educational, medical, faith-

based, social service, local, state and political sectors.

The collaborations established through the Illinois Department on Aging's RAP Program have led to many successes for kinship families and most recently resulted in the award of a \$200,000 "Lifespan Respite" grant from the Administration on Aging to establish state and local coordinated Lifespan Respite Care systems to serve family caregivers regardless of age or special need of the care recipient; recruit and train respite care workers and volunteers; assist caregivers in gaining access to needed services and improve the coordination and dissemination of service delivery between various programs.

Working on behalf of relatives raising children led the Illinois Department on Aging to collaborate with the Illinois Respite Coalition (IRC), whose mission is to increase public awareness of the importance of lifespan respite; promote education and training for caregivers and providers of respite services and advocate support for families and providers by insuring universal access to quality respite services. This relationship led to the IRC's insistence that Illinois apply for the AoA grant and that the Illinois Department on Aging be the lead agency. Much of the content of the proposal to AoA was structured using the successful template of the RAP program.

Following the Brookdale model, a task force comprised of state agencies that fund respite services and training through child welfare, human services and aging has been established. Presently, an assessment of respite programs is underway and gaps in service are being identified.

A network of local and state organizations that provide respite will be linked and the development of new respite providers established.

Criteria to determine eligibility for "emergency respite" is under development and providers are being identified. Training for volunteers and providers has been held and a public awareness campaign will be implemented.

The RAP program has provided a strong foundation for the lifespan respite initiative. The model works. The partnerships developed through the RAP program are invaluable-useful far beyond the scope of RAPP. The Lifespan Respite grant is a perfect example.

Barb Schwartz is the Coordinator of our Illinois Department on Aging State RAPP. She can be reached at Barb.Schwartz@illinois.gov

**Grandparents Raising
Grandchildren
Served By New Arizona
Lifespan Respite Program**

David Besst
Arizona State RAPP Coordinator

Back in 2006 when President George Bush signed the Lifespan Respite Care Act into law, Arizona was already gearing up by introducing very similar state-based legislation creating a Lifespan Respite Care Program (LRCP) in Arizona. That state bill passed in 2007 and \$500K in annual state funding was made available. In early 2008, development of the Arizona LRCP began in earnest. One specific element contained in the state statute, that wasn't in the federal law, required the program to serve "Caregivers of individuals who do not currently qualify for other publically funded respite services." To identify those caregivers, a public Respite Advisory Committee was convened and the University of Arizona's Center on Aging was hired to conduct a study on the need for respite care throughout the lifespan of individuals. The subsequent summary of that study was published - [Arizona Respite Care Throughout the Lifespan: Characterizing Unmet Needs](#), and is available on the website of the [Arizona Lifespan Respite Care Network](#).

Through a search of the evidence-base and state-wide interviews with caregivers, social workers and others involved in caregiver support, the study identified six groups of Arizona residents in need of

respite, but who presently did not qualify for respite under existing programs. Included in that group were grandparents and relative caregivers under the age of 55, who were caring for children 18 and younger with special needs.

As the new state-funded LRCP was implemented in 2008, one of the initial focuses was on serving this population while at the same time using Older Americans Act funding to support similar respite activities for relative caregivers of children who were over the age of 55. This allowed Arizona to serve this entire population in a meaningful way for the first time by providing respite services through traditional means such as in-home care providers and day-care, but also through activities specifically targeted for grandparents and relative caregivers such as camps, and group outings that provided both respite for the caregiver and important socialization for the children.

Unfortunately, Arizona's budget woes resulting from the current recession forced the legislature to pull back the funding for the LRCP just as the program was getting underway, and the federal program remained unfunded until competitive grant opportunities were made available in the summer of 2009.

Arizona was selected as one of the original grantees of the new federal LRCP and is using the \$200K award to further the development of the program by

completing the implementation of a caregiver assessment tool and development of a caregiver resource helpline that will target the groups identified in the study, including grandparents and relative caregivers of children with special needs. Arizona's LRCP grant project runs through 2012 and will hopefully bridge the gap until the state funding returns and the federal program is fully funded.

Much of what Arizona has accomplished in support of both lifespan respite and grandparents raising grandchildren can be attributed to the existence of strong coalitions supporting caregivers in Arizona. The Arizona Caregiver Coalition has embedded the Lifespan Respite Care Network within its structure and is currently working closely with the Central Arizona Kinship Care Coalition to develop a caregiver resource helpline, which will be staffed by caregiver volunteers. For more information, visit:

www.azcaregiver.org,
www.azrespite.org, and
www.azkincare.org.

A Legislative Update
Jaia Lent
Generations United, DC

**Guidance Released on
Fostering Connections to
Success and Increasing
Adoptions Act**

In July the Administration on Children and Families released *guidance* on the **Fostering Connections to Success and Increasing Adoptions Act of**

2008. The Fostering Connections Act was signed into law on October 7, 2008 and included several provisions to support families where children are being raised by grandparents or other relatives. Specifically some of these provisions include:

- ✓ authorization of federal reimbursement to states who offer subsidized guardianship for children to leave foster care into permanent homes with relatives
- ✓ authorization of federal reimbursement for states that opt to extend foster care for children up to age 21
- ✓ requiring notice be given to adult relatives of a child when the child is going to enter foster care; and
- ✓ requiring certain steps be taken to keep siblings together, and clarifying that states may waive non-safety related licensing standards for relative homes on a case-by-case basis.

Several of these provisions included language that may be interpreted in different ways by different states, Indian tribes, tribal organizations and tribal consortia.

When new legislation is signed into law, there are often parts of the law that may be interpreted a variety of ways. The federal government agency responsible for overseeing the

implementation of the law may choose to offer written *guidance* or *regulations* clarifying how to interpret and implement the law.

When an agency chooses to write *regulations*, it is laying out specific clarifications to which agencies must comply. Failure to comply could result in repercussions such as rescinded funds. When regulations are written, the agency generally makes them publically available and offers a period for public comment before they become official.

When an agency chooses to write *guidance* it is laying out a set of recommendations or suggestions, often pointing to best practices. Guidance is not a requirement and generally does not include a period for public comment when it is released. However, as with any policy, if you find that there are ways it can be improved, it is important to communicate those ideas with legislators or administering officials who have the authority to enact change.

The July 9th *guidance* issued by the Administration for Children and Families provided the following clarifications which may produce positive outcomes for grandfamilies:

- States⁷ that offer subsidized guardianship and who choose to extend foster care beyond age 18 must make subsidized

guardianship available for children up to the same to age that foster care is made available.

- The state has discretion to define the term “relative” for the purposes of the title IV-E subsidized guardianship program. For example states may decide to limit the term to include biological and legal familial ties or may define it more broadly to include Tribal kin, extended family and friends, or other “fictive kin”.
- States are encouraged to use a consistent definition of relatives for both the subsidized guardianship program and the requirement to notify adult relatives of a child who is to be placed in foster care.
- Agencies are encouraged to identify and work with relatives when the agency first becomes involved with a child at risk of removal. They are encouraged to develop protocols for caseworkers that describe the steps that should be taken to identify and notify relatives when a child is removed from his or her home.
- Agencies may determine the method to use to provide relative notification of a child’s

⁷ Or other Title IV-E agency

removal, as long as the notification meets the specifications in the law, however, agencies are encouraged to make the notice via several different methods, such as in writing and orally.

The guidance also included the following clarifications which many advocates are concerned will not help the law serve the best interests of many of the children and families as intended:

- The state has discretion to reasonably define sibling for the purposes of the subsidized guardianship program. This means they could: include siblings related by biological, marital or legal ties; consider as siblings only those children who were removed from the same household; or limit siblings to those children who were in foster care at the same time and placed in the guardian's home simultaneously. The more narrow definition of siblings may have the effect of limiting availability of services, connections and supports to children who would benefit.
- The state or other Title IV-E agency has the discretion to establish the conditions in the State/Tribe under which a person may qualify to

be a child's guardian or enter into a legal guardianship arrangement with the agency. Among the options listed in the guidance are targeting a certain age group for guardianship.

Advocates for relative caregiver families are concerned that broadly applying policy to narrow the population of children or relative guardians that qualify for subsidized guardianship, beyond what is described in the law, may not always serve an individual child's best interest.

The full guidance from the Administration of Children and Families can be found at http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2010/pi1011.htm

Health Care Reform

In March President Obama signed sweeping health care legislation into law. Many of the provisions of the act will have significant impact on children, youth and older adults, and will, therefore, affect relative caregiver families. The provisions in the law will create a national high risk pool for people with pre-existing conditions that cannot buy insurance on their own and will provide assistance for Medicare beneficiaries with high drug costs who fall into the "doughnut hole" and do not currently have coverage for their medications. Although the

act was signed into law in March, many of the provisions are phased in over time, with the majority of the provisions coming into effect by the end of 2014. The following is a list of some of the many beneficial things available to children, youth, families, and older adults as a result of health care reform. This list concludes with several resources with more detailed information about how the new legislation may affect you and your family.

Benefits for Children, Youth and families:

- Guarantees access to health coverage for 95% of all children.
- Prevents insurance companies from unjustly denying coverage because of pre-existing conditions or annual or lifetime limits (eliminating pre-existing conditions for children will take effect immediately).
- Allows children/youth to be covered in their parent's plan until the age of 26. The same extension is available to children/youth in relative care that are "dependents" of their relative caregivers and covered under their plans.
- Extends coverage for youth in foster care to age 26.

- Expands Medicaid for families making up to 133% of poverty.
- Raises Medicaid reimbursement for states.
- Expands the Children’s Health Insurance Program (CHIP) for children aging out of foster care.
- Maintains CHIP until it is determined whether the new “health insurance exchanges” are safe for children and provides them benefits and cost protections comparable to or better than they have now.
- Funds CHIP through 2015 – doubling the number of eligible children that can be served by CHIP from 7 to 14 million.

Benefits for Seniors:

- The law creates new regulations for insurance companies barring them from dropping the coverage of people who get sick, and from putting lifetime caps on coverage. Insurance companies cannot discriminate against children with preexisting conditions; by 2014 all ages will receive that protection.
- Those in Medicare Part D who fall into the

“doughnut hole,” and have to pay all their prescription drug costs for part of the year, will get immediate help this year from a \$250 rebate. Next year they will get a 50 percent discount on brand-name drugs, and by 2020 the doughnut hole would be closed completely.

- Medicare will cover preventive services with no co-payments, and those costs would not apply to the deductible.
- A new insurance exchange will help people who don’t have affordable insurance through their jobs. Until the exchange is set up, employers who give health care benefits for retirees ages 55 to 64 would get federal aid through a temporary reinsurance program.
- Encourages states to develop more choices of long-term care services, to enable older people to live in their own homes instead of more expensive nursing homes.
- A new long-term care insurance program, that workers could pay into, will help them if they become ill or disabled and need help with basic services in order to stay in their homes.

Additional Resources on Health Care Reform:

www.healthreform.gov : The federal government’s health care reform website managed by the Department of Health and Human Services.

healthreform.kff.org: The Henry J. Kaiser Family Foundation website dedicated to understanding health care reform.

www.familiesusa.org/health-reform-central: Health care reform resources from Families USA, a national nonprofit dedicated to achieving high quality affordable health care for all Americans.

Older Americans Act

Next year the Older Americans Act is up for reauthorization. This means there will be an opportunity for Congress to make improvements to the law. Among the provisions of the Older Americans Act is the **National Family Caregiver Support Program**. This is the federal program that helps to fund many of the services for grandfamilies through Area Agencies on Aging. Advocates are currently gathering information about what people who use the services would like to see changed to make the program better. If you have suggestions please share your ideas. You can do this by emailing your ideas to Jaia Peterson Lent at Generations United at jlent@gu.org or by participating in an online discussion hosted by the

National Council on Aging at <http://www.agingexchange.org/>.

For more information about these and other policies affecting grandfamilies contact Jaia Peterson Lent at Jlent@gu.org or 202-777-0115.

**The Lorain County
Office on Aging's
RAPP and Kinship Navigator
Programs**

Helene Stone
RAPP Coordinator

Lorain County Office on Aging (LCOOA) in Ohio received a federal grant of \$47,485 for three years to expand and enhance its Kinship Navigator Program. The grant, one of six competitive grants in the nation, was awarded by the U.S. Department of Health and Human Services Child Welfare Division as a part of the Fostering Connections to Success Act. The Public Children Services Association of Ohio (PCSAO) and seven collaborating agencies in six counties, including our office on aging (in cooperation with Lorain County Children Services and the Children Services Agencies) will provide supportive services to relative caregivers. Consultants and evaluators of the programs are members of the Human Services Research Institute based in the State of Oregon. A goal of this funding is to demonstrate the effectiveness of Kinship Navigator Programs in seven high need areas of the state. Kinship Navigator programs guide grandparents and other relatives who are

raising children in their extended families to services within the community. They provide relative caregiver families with information, referral and follow-up services by linking them to the benefits and supports that they or the children need. Each of the seven county agencies will provide Kinship Navigator services to a broad population of kinship caregivers including to families that have no involvement with the child welfare system. Partnering agencies include Ashtabula, Clark, Crawford, Harden, Portage and Richland Children Services and the Lorain County Office on Aging.

The grant was awarded just in time to assure that the Kinship Navigator Program initiated in 2001 at the Lorain County Office on Aging would survive and be enhanced. State budget cuts in mid 2009 cut over \$60,000 of Lorain County Department of Job and Family Services (LCDJFS) Temporary Assistance to Needy Families discretionary dollars which had been used each year for seven years to fund the LCOOA Kinship Navigator Program through a purchase of service contract from LCDJFS. This loss of dollars resulted in an aggressive fund raising effort by the Office on Aging to save the program, included seeking and receiving ongoing funding from the Lorain County Children Services, Nord Family Foundation, Nordson Corporate Foundation, as well as funds from the Brookdale Foundation

and the Western Reserve Area Agency on Aging.

With federal grant funding, LCOOA was able to increase the Kinship Navigator staff hours. Navigators Helene R. Stone, MSSA, LISW-S, and Michele R. Stoller, MSW, LSW, are masters level state licensed trained social workers with extensive experience working with Kinship caregivers and knowledgeable about the problems the caregivers face.

The federal grant will also increase the LCOOA Kinship Navigator Program links to the county 211 systems provided by United Way as well as promote increased community outreach efforts. The funds will supplement other resources available to assist kinship caregivers including critically needed access to legal assistance.

The Kinship Navigators will reach an increased number of Lorain County Kinship caregivers to provide increased information about access to needed services and supports including support groups, educational resources, financial assistance and respite care. It is anticipated that at least 150 new kinship caregiver families will be added to the 700 plus families and over 1,400 children presently being served by the Kinship Navigator Program within the next year. An additional strength of the federal grant is the development of strong state and local

advisory groups which will promote system level collaboration creating effective inter-agency partnerships to strengthen and sustain service delivery systems supporting kinship families.

Beyond providing enhanced services to kinship families, PCSAO Director Allen said the grant “will include rigorous process and outcomes evaluation which will also inform improvements for child and family outcomes.” Through comprehensive evaluations, the grants will further our knowledge base for ensuring children have the opportunity to grow in safe families homes.

Lorain County Office on Aging applied for a Brookdale Foundation grant to provide educational support to kinship caregivers and their school-aged relative children in the form of phonics, literacy activities and tutoring.

The Kinship Program was notified that the Brookdale Foundation award had been granted in April of 2009. Caregivers receive educational presentations on reading topics in order to assist them when helping their school-aged kin develop reading skills. Students also receive tutoring and we connect with their teachers and caregivers to provide ongoing

personalized support. The program is staffed by Education Specialist Bethany Springer, M. Ed. She has an Early Childhood Teaching License from the Ohio Department of Education and has an Early Intervention Specialist Certificate from the Ohio Department of Developmental Disabilities.

already created in a local school. Finally, we plan on utilizing the Retired Senior Volunteer Program (RSVP) to expand the current tutoring services in the schools. We have been accepted by the Stocker Foundation to submit a \$10,000 proposal in October 2010 to help to fund this expansion and provide reading resources over the next few years!

For more information about the Lorain County RAPP or Kinship Navigator Programs, contact Helene Stone, kinship@loraincounty.us.

RAPP State Highlights

The State of

Connecticut Department of Social Services, Elderly Services Division is partnering with the Chronic Disease Self Management Program (CDSMP) to provide support groups with training on how to self manage chronic health conditions in order to lessen the adverse effects of caregiver stress and anxiety. The Statewide National Caregiver Support Program (NFCSP) Coordinator has been trained as a peer leader to help co-facilitate *Living Well Workshops* in the community. Many support group leaders in the state are also planning to be trained as peer leaders. The goal is to provide outreach and

Ohio’s Kinship Navigator Program

The Ohio Kinship Navigator Program supports relative caregiver families by helping them access benefits and supports. Some of the services provided include:

- ✓ Information and referral
- ✓ Follow-up services to ensure needed services are accessed
- ✓ Links to available benefits and supports
- ✓ Legal assistance
- ✓ Kinship food bank
- ✓ Support and educational groups
- ✓ Emergency resources; and
- ✓ Special services including assistance with beds, dressers, and appliances.

In the first year of the award, 26 unduplicated children and 18 caregivers were served. The program was a great benefit to the caregivers and children served because their lives had been chaotic and interrupted by numerous school changes.

In the second year of the program we hope to collaborate with a number of agencies and expand the program by training Retired Senior Volunteers as tutors. We will be working with the Children and Family First Council which is establishing a consortium in the county that links literacy initiatives and hope to work with the Foster grandparent reader program

education to caregivers on how to self manage chronic health conditions in order to obtain, enhance and maintain optimal health for themselves and for those in their care. As part of the outreach effort, the NFCSP Statewide Coordinator plans to work with grandparent/relative caregiver groups, who are a particularly vulnerable population.

One of **Hawaii's Executive Office on Aging's** support groups, Queen Lili'uokalani Children's Center, and Child and Family Services, offered a series of presentations on ways to reduce utility expenses. Presenters gave caregivers tools such as compact fluorescent bulbs, free home inspections and free home water heaters to help reduce electrical costs. Nine families with caregivers who were 65 and older received a free refrigerator. Also offered was a training series on how to reduce, reuse, and recycle to lower our carbon footprint. As a result of the training series, several caregivers are growing more of their own food, shopping at farmers markets and composting and recycling.

Child and Family Services and the Queen Lili'uokalani Children's Center hosted, with funding from the Executive Office on Aging, the 4th Annual "Na Keiki Aloha o Na Kupuna" conference. The conference included workshops for families on Kauai who are relative caregivers. Local attorney Michael Ratcliff of the *Kauai Senior Law Center* spoke about

guardianship and adoption laws. A local recording artist and songwriter, Brother Noland Conjugation, also spoke to attendees about his personal experience growing up as a child on several of the islands with different family members.

West Virginia Department of Health and Human Resources held a RAPP legal workshop at Berkeley Springs. The morning session featured "*The Fostering Connections Act and Beyond*," by Heidi Epstein of the American Bar Association. The afternoon session featured a presentation on the rights of grandparents by Heather McClure, a librarian for the Supreme Court of Appeals of West Virginia. Caregivers, attorneys, social workers and child welfare staff attended. The **Georgia Department of Human Resources/Division of Aging Services** reports that all of Georgia's Area Agencies on Aging (AAAs) have developed one or more support groups in their regions. There are 45 support groups statewide. Ten of the twelve AAA's continue to provide kinship services despite severe budget cuts.

Oregon State University's RAPP Task Force updated the *Resource Guide for Grandparents and Other Relatives Raising Children in Oregon and Oregon's Legal Guide for Grandparents and Other Relatives Raising Children*. They have also partnered with *The Oregon Seniors and People with Disabilities* to offer an annual

Native Caregiver Conference with several sessions on relatives raising children.

The **Illinois Department on Aging** provides funding to two agencies that offer guardianship assistance to relatives raising children. A lawyer or trained advocate helps relatives complete the petition for guardianship, serve notice, pay for filing and associated fees and represents or appears with them in court. Referrals to other services are provided as needed.

The **Maryland Department of Human Resources/Social Services Administration** is one of the recipients of the Fostering Connections, Kinship Navigator Demonstration Projects. They plan to integrate its seven demonstration sites with the Kinship Care Resource Center to provide information and referral services to informal kinship caregivers.

The **Idaho Department of Health and Welfare** has five VISTA volunteers that work across the State of Idaho to serve relative caregivers. VISTAs help communities in each region accomplish the goals of the Kin-Care Project. Specific focus/goals include:

- Development/enhancement of regional kincare support groups
- Identification of resources available to kin care providers such as financial support,

medical assistance, legal services and child care

- Increasing awareness of, and access to, available resources; and
- Development of sustainable kin care leadership in each region so that the VISTA's work will continue after they are gone.

The **University of Maine Center on Aging (UMaine)** has completed a set of internet tip sheets for grandparents and other relatives. The tip sheets cover a range of basic computer topics including computer parts and terminology, how to set up an e-mail account, accessing the internet and useful websites for kinship families. The tip sheets will be disseminated via the internet, community agencies and Maine public libraries. *Families and Children Together* (a fellow RAPP), the University of Maine and other agencies partnered with the *Maine Department of Health and Human Services* (DHHS) on the Maine Kinship Connections project. The UMaine Center on Aging will conduct an evaluation of services provided to caregiver families by the partner agencies.

One of the agencies that partners with the **New Jersey Department of Human Services' (NJ DHS) Kinship Navigator Program**, the Salvation Army, has a Grand Families Center. Once a week, the Center sponsors a mobile

health outreach clinic that provides medical screenings to caregivers and vaccinations to children.

NJDHS' Office of Research and Evaluation partnered with the Kinship Navigator Program to survey 1,000 randomly selected kinship families in NJ to solicit information regarding their household composition, income, kinship services and agency satisfaction. The Kinship Navigator Program also partners with *The Children's Home Society*, the agency that received a Family Connections Grant (these grant funds are authorized by the Fostering Connections to Success and Increasing Adoptions Act to help at risk children) and staff attends quarterly meetings in D.C.

The **Kentucky Cooperative Extension Services**, via the University of Kentucky, has partnered with others on the **KIN-CARES** (**K**entucky **I**nformation **N**etwork: **C**ollaborating **A**dvocating **R**esourcing **E**ducating **S**upporting For Grandparents/Relatives Raising Children) committee to develop curriculum, tip sheets and materials for support group members across the state. This, combined with the efforts of the School of Social Work to develop a Tool Kit for support group leaders/facilitators and the continued efforts of the Family Resource and Youth Services Centers across the state (in the various school districts) to increase support groups for

relative caregiver families has proven to be a catalyst for the provision of important and beneficial services to relative caregivers.

The **North Carolina Division of Aging and Adult Services (DAAS)** and the **North Carolina Cooperative Extension** surveyed nutrition educators from the Expanded Food and Nutrition Education Program (EFNEP) that serves a significant number of relative caregivers with limited resources. Educational sessions, targeted to grandparents raising grandchildren, were reported in two counties on topics like making foods healthy and fun, trying foods new to grandparents (e.g. pizza, tacos) and new to children (e.g. broccoli, casserole, baked fish), and preparing tasty nutritious meals without using extra salt and fat. Partners for these programs included area nutrition sites, county Departments of Aging and Headstart.

The **Montana State University Extension RAPP** received \$18,000 from a private donor to expand their services to relative caregivers. Seven communities received \$1,300 each to start or re-energize support groups and teach *Parenting the Second Time Around (PASTA)*, Cornell Cooperative Extension of Orange County's parenting curriculum. Most of the groups will start this fall.

The **Florida Kinship Center** has two respite programs. One is the *Sarasota Florida Respite Program* that serves children being raised by relatives. The children come for dinner and activities while relatives go out to dinner together or enjoy three hours of free time a month. A local McDonalds offers a 50% discount on the total cost of dinners for the children. The second program is the *North Port Florida Respite Program* in partnership with *Children's First*. High school students volunteer for the program as child care providers for children in relative care.

The Kinship Center also held its 10th Annual Rally in Tally Event. Approximately 75 relative caregivers and kinship service providers from across the state traveled to Tallahassee to share their many stories with Senators and Representatives. The event helps increase awareness among legislators of the important role played by relative caregivers.

Five Grand Family Fun Days and one Kids Fun Day were held in four counties. Activities included a picnic in Lee County, a pool event in Charlotte, free bowling in Polk, a family picnic in Hillsborough, movies in Lakeland, and, for kids, a fun day that included educational talks and entertainment as well as crafts and the reading of favorite poems. The children also received applications for library cards. The Kinship Center has also collaborated with *Angel's Attic* to provide

free clothing and furniture, every other month, to RAPP families in Sarasota.

Please visit the websites of our State RAPPs to find out more about the supportive services they offer to relative caregiver families. A list of websites can be found on the last page of this newsletter.

RESOURCES

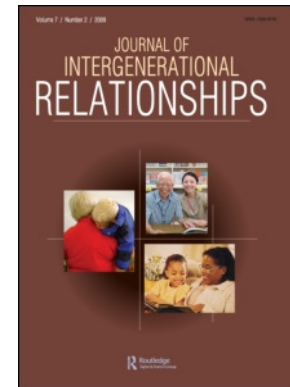
Grandmother to Grandmother: From New York to Tanzania captures the stories of grandmothers who are responsible for raising grandchildren in two very different cultures.

The film highlights two programs that support grandfamilies and brings together grandmothers from the far corners of the globe for a memorable gathering in Tanzania. As their unique stories unfold, the deep common bond that these grandmothers possess unfolds. The inspirational journey of these unsung heroes shows the love that bridges the gap between generations and across cultures. "At risk" children can thrive and their grandmothers hope again.

To view a trailer of the film, learn more about the programs highlighted and order the DVD, visit www.olddogdocumentaries.com

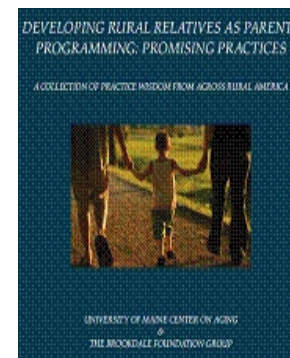
To host a screening of the film, or for more information about outreach, contact Amy Goyer algoyer@comcast.net.

Journal of Intergenerational Relationships, Special Double Issue: Volume 7, Issue 2-3, 2009, Grandparents and Other Relatives As Parents.



This special issue of the *Journal of Intergenerational Relationships* provides a wide panorama of the most relevant issues in the field of custodial grandparenting. For more information or to order, visit the Taylor & Francis website, www.tandf.co.uk/journals/spissue/wjir-si.asp.

From the Brookdale Foundation:



Developing Rural Relatives As Parents Programming: Promising Practices - A Collection of Practice Wisdom from Across Rural America was written by the University of Maine Center on Aging and funded by The Brookdale Foundation Group. The manual provides Relatives as Parents

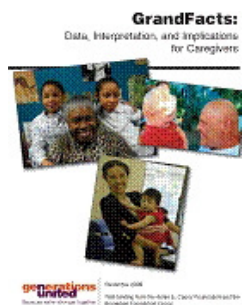
Programs (RAPPs) with a thorough review of the strengths, needs, and challenges of rural kinship caregivers, as well as practical tips on serving rural grandfamilies.

The complete publication is available for download at no charge at:

<http://www.umaine.edu/mainecenteronaging/documents/RuralRAPPManual.pdf> or on the Brookdale Foundation's website: www.brookdalefoundation.org.

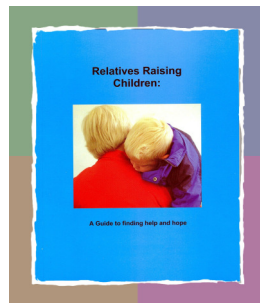
Professionals in any field that work with grandparents raising grandchildren or other kinship caregivers are encouraged to utilize this manual to better support rural grandfamilies.

For questions or more information on the manual, contact Jennifer Crittenden at jennifer.crittenden@umit.maine.edu or by phone at 207-262-7923.



GrandFacts: Data, Interpretation, and Implications For Caregivers was written by Generations United. One million American children live in grandparent-headed households in which their parents are not present, effectively skipping a generation. These little-known families face unique challenges, highlighted in this new report.

Full data charts and more information about these and other grandfamilies are available at www.gu.org/GrandFacts.asp. The complete publication is available for download at www.gu.org or on our website, www.brookdalefoundation.org.



Relatives Raising Children: A Guide to Finding Help and Hope. Marianne Takas.

This book is based upon what long-term relative caregivers (and the family service professionals who work with them) have learned about raising relative children. It is designed to provide useful information, strategies and ideas to help link relative caregivers to others who can help.

Order forms are available on our website: www.brookdalefoundation.org



Promising Practices in Encouraging and Supporting Grandparents is a collaboration of the National Association of Area Agencies on Aging (n4a) and the Brookdale Foundation

Group. It is intended to make the aging network across the nation aware of important and successful Relatives as Parents Programs (RAPPs) operated by Area Agencies on Aging. We hope this guidebook will encourage the replication of RAPP supportive services to relative caregivers by the many Area Agencies on Aging that serve older adults. Available, free, for download on the Foundation website: www.brookdalefoundation.org.

Save the Date!

Aging in America, 2011 Annual Conference of the American Society on Aging, April 26-30, 2011, San Francisco, CA. For more information, visit their website, <http://www.agingconference.org>

National Association of Area Agencies on Aging's (n4a) 36th Annual n4a Conference & Tradeshow July 16–20, 2011, Washington Marriott Wardman Park Hotel Washington, DC. For more information, visit their website, www.n4a.org.

CWLA National Conference. March 27-30, 2011, Washington, DC. For more information visit: www.cwla.org.

For Brookdale RAPPs:

The Brookdale Foundation's RAPP National Orientation and Training Conference will be held April 29th – May 1, 2011 in Denver, Colorado. This conference is exclusively for our RAPP Network.

RAPP Websites

Alabama A& M University-Cooperative Extension	www.aces.edu
Arkansas State Child Abuse and Neglect Prevention Board	www.arkansasvoices.org
Arizona DES, Division of Aging & Adult Services	www.azdes.gov/daas/
Connecticut DSS, Elderly Services Division	www.ct.gov/agingservices
University of the District of Columbia	www.udc.edu
Delaware DHSS, Division of Services for Aging	www.dhss.delaware.gov/dsaapd
Florida Kinship Center, University of South Florida School of Social Work	www.flkin.org
Georgia Division of Aging Services, DHR	www.aging.dhr.georgia.gov
Hawaii Executive Office on Aging	http://hawaii.gov/health/eoa/index.html
Idaho Commission on Aging	www.idahoAging.com
Idaho Department of Health and Welfare	www.dhw.idaho.gov
Illinois Department on Aging	www.state.il.us/aging
Kansas Department on Aging	www.agingkansas.org
Kentucky Department for Aging and Independent Living	http://chfs.ky.gov/dail
University of Maine – Center on Aging	www.mainecenteronaging.org
Maryland Dept of Human Resources/Social Services Administration	www.dhr.state.md.us/ssa/kinship
Massachusetts Executive Office of Elder Affairs	www.state.ma.us
Michigan Office of Services to the Aging	www.michigan.gov/miseniors
Michigan Kinship Care Resource Center	http://www.kinship.msu.edu
Minnesota Board on Aging	www.mkca.org
University of Missouri – ParentLink- College of Education	http://grandfamilies.missouri.edu
Montana State University Extension Service	http://www.montana.edu/wwwhd/
Nevada Aging & Disability Services Division	www.aging.state.nv.us
University of New Hampshire Cooperative Extension	http://extension.unh.edu
University of New Hampshire Cooperative Extension	www.NHRAPP.org
New York State Office for the Aging	www.aging.ny.gov
North Carolina DHHS, Division of Aging	www.dhhs.state.nc.us/aging
Ohio Department of Aging	www.goldenbuckeye.com
Oklahoma DHS, Aging Services Division	www.okdhs.org
Oregon State University - Extension Service	www.osu.orst.edu/dept/ehe
Pennsylvania Department of Aging	www.aging.state.pa.us
South Carolina DHHS, Bureau of Senior Services	www.aging.sc.gov/officeonaging
Tennessee Department of Children's Services	www.state.tn.us/youth/services/rcp.htm
Texas Department on Aging	www.dads.state.tx.us
Virginia Department for the Aging	http://www.vda.virginia.gov/
Washington DSHS, Aging and Disability Services Administration	www.dshs.wa.gov/kinshipcare
West Virginia DHHR, Office of Social Services	www.wvdhhr.org/
Wisconsin University Extension	http://www.uwex.edu/ces/flp/grandparent/
Wyoming Department of Family Services	http://dfsweb.state.wy.us/