

fostering perspectives

Nov. 2019 • Vol. 24, No. 1

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Sponsored by the NC Division of Social Services and the Family and Children's Resource Program

Kinship caregivers play a vital role in North Carolina

In a crisis, most of us turn instinctively to the people we know we can count on, no matter what the problem is. We turn to family.

This is something child welfare agencies in North Carolina understand. When a child or youth enters foster care, family members and "like-family" friends are often the first ones agencies approach to care for the youth until they can safely return home.

Families often say yes. Of the more than 11,600 children in DSS custody at the end of July 2019, 2,636 (22.7%) were being cared for by a relative.

Kin caregivers are often grateful for the chance to help. Yet there are also challenges. Many wrestle with changing family dynamics and are unclear about their role with the courts, schools, and therapists. They struggle with questions such as, *What happens if the children can't return home? Where can I turn if I need help?*

We hope this issue of *Fostering Perspectives* is informative to all of our readers. By learning more about kinship care, we hope you will be better positioned to provide the encouragement, information, and support kin caregivers so richly deserve.

In this Issue

Lessons from my kinship care journey	2
NC's child welfare system: An intro for kin caregivers.....	3
How kinship care made me stronger	4
Self-care is a must for kinship caregivers.....	5
Support for permanence through kinship care	6
Holiday tips for kinship caregivers.....	7
NC's Kinship Care Navigator Program	7
An American Indian perspective on kinship care.....	9
Overcoming kinship care obstacles	10
Providing kinship care outside the child welfare system	11
Parenting a child with complex trauma.....	12
Where can kinship caregivers find support?.....	13
Youth awaiting adoption.....	14

21-year-old steps up for his siblings

by Jonathan Rockoff

When Tyson Robertson was growing up, he and his mother spent time in a homeless shelter while she struggled with substance use disorder. Soon after he was out on his own, it became clear his mother was heading down the same path. Only this time, it would be his siblings, Tyshawn and Tyanna, who'd be staying in a homeless shelter with her.

Tyson decided he couldn't let that happen. Although the county department of social services (DSS) had some concerns—he was only 21 and just getting started financially—he was able to take Tyshawn and Tyanna in.

A Big Change

Suddenly there he was, a 21-year-old raising two 9-year-olds. He had always been somewhat of a father figure to them, but now he was the sole parental figure.

Tyson smiled when I asked him about that transition. "They've always been good kids," he said. "They never gave me any real trouble."

The hard part was making ends meet. Tyson made many sacrifices and at first received only minimal financial assistance. Although he laughs about it now, he says one of the toughest parts for him was having to sell his video game collection.

Tyson says things got a lot better when he became licensed as a foster parent. Once he was licensed, he received training, adequate financial support, and assistance in any other way he needed to provide a safe and loving home. Eventually he was able to adopt Tyshawn and Tyanna.

Trayvon

Eight years later, when Tyson was 29, things were fine. He was working and parenting, and Tyshawn and Tyanna were doing well at home and in school.

The same was not true for their brother, Trayvon. At age 9, Trayvon was bouncing from one foster home to another. The bright spot was that he spent every other weekend with Tyson, Tyshawn, and Tyanna. But at the end of the weekend he would always cry about having to leave his siblings.

At that point, Tyson decided he wanted to adopt Trayvon. As before, DSS was not wholly on board with this idea. After all, Trayvon was still in his 20's and raising two 17-year-olds. But Tyson fought for his brother and won. In the end he was able to adopt Trayvon, too.

Tyson is incredibly strong, but he admits he

Suddenly there he was, a 21-year-old raising two 9-year-olds.

couldn't have done it alone. His aunt was a huge support, always offering encouraging words and assistance. He also made a point to tell me Tyshawn and Tyanna were and remain a huge help with Trayvon.

Looking Forward

This story isn't over, but it has all the components of a happy ending. Tyson has a great career managing data for a large computer company. His relationship with his mother has been strained in the past, but it's improving.

Tyshawn and Tyanna are 21, the same age Tyson was when he made his historic decision. Tyshawn has a job and works hard. He doesn't hesitate to take care of Trayvon when Tyson has to work late or travel. Tyanna is working her way through college and is set to graduate from East Carolina University in 2020. Trayvon is a teenager, and Tyson says it's going about as well as raising a teenager can go.

Oh, and don't worry. Tyson got his video games back. He told me proudly they are an important part of his self-care, and self-care is something every kinship caregiver needs.

Jonathan Rockoff is a Training Specialist with the Family and Children's Resource Program at the UNC School of Social Work.



Lessons from my kinship care journey by Jeanne Preisler

My niece was born when I was 12. I remember whispering in her ear that I would always take care of her. It is a promise I try to keep even today, nearly 40 years later.

My mother served as her primary caregiver on and off for most of my teenage years. I remember playing baby doll and teaching her the alphabet on an old chalkboard. I remember driving her to daycare on my way to high school, looking in the rearview mirror as we sang “Five Little Speckled Frogs” at the top of our lungs.

As with many kinship placements, there were pockets of time when my niece lived with her biological parent(s). My mother and I hoped for the best each time, but we also prepared for her return if necessary. The fact that my brother couldn’t raise his daughter broke his heart. I never once doubted his love for her. But addiction and bad choices put him on a path that prevented him from being her parent. My brother keeps a picture of her with him at all times and he and I know that she is “his” daughter.

But she is also my daughter. She came to live with me full time when she was 14. And, for a while, she called me “Aunt Jeanne.” I don’t remember the first time she called me “Mom,” but I have been “Mom” for almost two decades now. She has grown into a remarkable woman and is now a mother herself—a beautiful one at that. I find great joy in watching her raise her daughter, my granddaughter.

Navigating Family Dynamics

I am one of millions of people in the nation who have raised family members—grandchildren, nieces, nephews, cousins, siblings. Many more raise children who are not related by blood, but “kin” nonetheless. We are an army of caregivers who, out of love and hope for the future, do what needs to be done. It is a difficult journey at times. We grieve for what could have been for ourselves, for our loved ones, for those we are raising. Also, we must forever navigate complex emotions, shifting roles, and challenging family dynamics.

For me, this meant not only working through my relationship with my brother, but also navigating a contentious relationship with my former sister-in-law while balancing the feelings of my mother (who felt guilty) and my friends (who discouraged me from taking on such a big responsibility).

Most kinship caregivers don’t have advance notice that they will be needed. Often, the phone rings, there is a crisis of some kind, and you have a young person with you that

night. Lives are turned sideways in a flash. Everything is complicated by pre-existing family relationships. Additionally, kinship caregivers often have no training and no financial support. At the time I got my phone call, I was 26 years old, working a temporary job, and barely making ends meet. I think I was in shock for the first couple months.

Overnight it seemed, I changed from being “cool” Aunt Jeanne to an authority figure who had to reprimand poor choices. I was hyper-vigilant for any behavior I thought would lead her down the same path as her biological parents. I didn’t know anything about “strategic sharing” back then; while I was embarrassed to talk about my brother’s situation, I felt I had to share when people asked why I was raising my niece, which was emotionally draining. These emotions were mixed with all the positive, proud moments, which further complicated my experience.

I didn’t know how important my own wellness was to raising a child. In hindsight, I should have immediately started therapy to better equip myself for the emotional roller coaster I was on.

Complex emotions are particularly frequent among kinship caregivers. You might blame the relative whose child you are raising—whether they are incarcerated, have died, or are otherwise not able to raise their child. You might harbor anger at the youth’s ungratefulness. You might experience shock and profound worry at behaviors you see in your kin or the child you are raising. You might feel resentment and just want your life back.

Two Key Questions

Dr. Joseph Crumbley has a training series where he asks kinship caregivers to ask themselves two questions: (1) “Should I and can I be a caregiver?” and (2) “Should I and can I continue to be a caregiver?” (AECF, 2017). These are important questions, even if you feel you have no choice but to be the caregiver. Given emerging adults are now leaving home around age 25, consider how old you will be when they turn 25. To step up when a crisis happens is one thing; to continue to be the caregiver long-term is quite another. We must prepare ourselves in case the journey is longer than we initially thought.

I had to ask myself the second question again recently. My daughter and grandchild are living with me, and while I am no longer the primary caregiver, it is still an applicable question. Should I and can I continue to be a

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caregiver? My daughter and I have had difficult conversations about my ability and willingness to continue to provide such support.

Reflect and Talk about What Hurts

What hurt might you and your child be experiencing today that you need to talk about? (I am a big fan of the “Name It To Tame It” principle.)

From the child or youth’s perspective, it hurts to be different than other families. It hurts that they are not with their mom or dad. It hurts that they may be separated from siblings, from friends, from pets. It hurts to think (erroneously) that they caused their parent’s crisis. It hurts to fear for your parents’ safety and well-being.

From the caregiver’s perspective, it hurts to carry resentment for what “could have been.” It hurts to worry about money, about parenting skills, about school issues. It hurts not to be able to do the things with your friends you used to do. It hurts to fear for your relatives’ safety and well-being.

Talking about what hurts us is hard. However, talking about grief and loss issues can help the healing process, build trust, and support attachment. In his 2013 book *Brainstorm: The Power and Purpose of the Teenage Brain*, Dr. Daniel Siegel suggests some helpful ways for us to reflect on attachment. Here are some questions you and your child or youth can discuss together. While these are framed from the youth’s perspective, kinship caregivers can reflect on them as well, given they also know the youth’s parents.

- What is your relationship like now with your parents?
- Why do you think your parents act (acted) the way they do (did)?
- Do you try to not do things because of how your parents treat (treated) you?
- As you reflect on all of these experiences, how do you think they influence the ways you related to other people?
- How do you feel all of these things we have been exploring have influenced who you are now and how you have come to be the way you are?

Introspection and self-reflection on all of these complex emotions may be the strongest tool in the kinship caregiver’s toolbox. Healing begins when we have both the courage to tolerate discomfort and a deep willingness to feel. Be brave my fellow kinship caregivers, be brave.

Jeanne Preisler works for the Center for Family and Community Engagement at NC State University as an Engagement Specialist.

NC's child welfare system: An intro for kin caregivers

Because the child welfare system is complex, it can be frustrating even for those who work in it. For kinship caregivers, who often find themselves involved in the system with little or no time to prepare, it can be confusing and even intimidating.

To help, following is a brief overview of some basic things every kinship caregiver should know about North Carolina's system, along with suggestions for how to learn more.

The System's Purpose

The goal of the child welfare system is to ensure children and youth have safe, permanent, nurturing families. It exists to protect children from abuse and neglect and to preserve the family unit whenever possible.

NC Child Welfare Agencies

In North Carolina a state-level agency, the Division of Social Services within the NC Department of Health and Human Resources, oversees the child welfare system. There are 100 county-level agencies—typically a department of social services (DSS)—responsible for providing direct services to protect children and serve families. This arrangement is known as “state-supervised, county administered.”

Kinship caregivers, who have physical custody of the children in their homes, usually interact most with county DSS agencies. This is because when children enter foster care they are typically placed in the legal custody of the DSS in the county where they live.

Although kinship caregivers work with them less often, there are also 73 private agencies that provide placements for some of the children in foster care in North Carolina.

Key Players

CPS social workers are responsible for assessing suspected cases of abuse and neglect. If they conclude maltreatment has occurred, they provide in-home counseling and supportive services to help children stay at home safely with their families. If necessary, they petition the court to remove the child from the home until it is safe to return.

Permanency Planning social workers (also called Foster Care workers) serve children in foster care and their families. They ensure children are safe and well until they can return home. They also offer support to parents so that reunification can happen. If a court decides children cannot be reunified with their families, these workers help them achieve permanence through adoption or other means. (*For more on this, see p. 6.*)

Licensing social workers recruit, train, license, support, and relicense relative and nonrelative foster care providers.

Guardians ad litem (GALs) are volunteers from the community appointed by a judge to represent children in court. They do not work for DSS. Their role is to focus on children's rights and needs, and to make a written report to the judge stating what they think is best for the children they represent. To read more about GALs, visit <http://bit.ly/2kXh2mO>.

Judges. In North Carolina, Juvenile Court judges play a central role for children and youth involved with the child welfare system. Among other things, judges decide whether children can safely remain at home. If not,



they decide where (with whom) they should live and preside over hearings in which they monitor children's well-being and the progress of their parents.

Much More to Learn

The information above is just a start. To get a solid understanding of the child welfare system, kinship caregivers are strongly encouraged to consult the following resources.

- *Kinship Caregivers and the Child Welfare System* (<http://bit.ly/2OYnrg4>)
- *How the Child Welfare System Works* (<http://bit.ly/2mHKkqF>)
- *Understanding Child Welfare and the Courts* (<http://bit.ly/2nybjVS>)
- *Child Welfare Services: Overview, Key Terms, and Resources* (<http://bit.ly/2p4CCrj>)

If you have specific questions about kinship care in North Carolina, start by speaking with your child's social worker. NC Kids, a part of the NC Division of Social Services, is also a great resource. They can be reached via their hotline (877-625-4371) or email: nc.kids@dhhs.nc.gov.

Licensed Kinship Care in NC

Licensed kinship care resembles nonrelative foster care. In both, the county DSS has legal custody of the children. Like all states, NC has requirements (e.g., training, background checks, etc.) that non-kin foster parents must meet before they can care for children in foster care. In NC, kinship caregivers must meet these same requirements to be licensed as a foster parent. However, they may be given more time than non-kin to do this because placement of the children is often unexpected.

Compared to those who are unlicensed, licensed kin caregivers have more structured involvement with the child welfare agency and access to more services. This can be helpful in working with the children's parents, schools, or medical care arrangements. On the other hand, licensed caregivers may have less flexibility than unlicensed caregivers to make independent decisions about the children.

In licensed kinship care, agencies conduct criminal background checks and child abuse registry checks on all adult household members in the home. Agencies must consider the home's size and condition, the caregiver's income, others who live in the home, and available transportation. Some licensing requirements may be waived if they do not affect the child's health or safety. To be licensed, kinship caregivers must also complete 30 hours of training. Once licensed, they receive financial support from the agency in the form of monthly board payments.

Both licensed and unlicensed kin caregivers can expect child welfare agencies to be involved in the following ways when children are in foster care:

Supervision/support. Agencies will support all family members to help

ensure the children are safe and doing well. As part of this, the worker makes phone calls and periodic visits to the home. The worker may also provide referrals for services, such as counseling. Typically, kin caregivers will take the children to medical appointments and work with children's schools. In some situations, workers have more responsibility for these services. The worker and family members, including the kinship caregivers, should work together to ensure children's needs are met.

Visits. In most situations, the court will encourage parents to visit their children. The child welfare worker will work with the parents and kinship caregivers to make arrangements for the visits. In some cases, kinship caregivers may be responsible for providing transportation for the children or for supervising the visits in their own home. For siblings who are not living together, maintaining

contact through visits and other means is also important.

Service planning. With input from the parents and often from the children, relatives, and others, the child welfare agency will develop a service plan (sometimes called a “case plan” or “permanency plan”). The service plan covers two major issues:

1. *A permanency goal for each child.* The permanency goal states where that child will grow up. In most situations, this goal is reunification.

2. *Actions the parent and agency need to take* so children can be allowed to return to their parent or so that another permanency goal can be achieved.

Next Steps. If you are a kinship caregiver in North Carolina and you are interested in exploring becoming licensed, contact your child's social worker. Or, to learn more about the licensing process, visit <http://bit.ly/2ksiUns>.

How kinship care made me stronger by Emily

I was 12 years old when the department of social services first entered my family's life. My siblings and I were placed in my grandmother's home. The term was called "kinship care."

As a result of the things I went through with my mom, I was very angry. Looking back, I can say that I was a little hard to deal with, but I felt that no one in my family really tried to help me cope with what I had to undergo.

No One Tried to Help

When I moved in with my grandmother and aunt, they already had a preconceived idea of me. They treated me differently than they treated my siblings.

I absolutely hated it there. I felt like a burden. I would cry, I would act out. I felt so lonely and even angrier. No one took the time to try to help me.

Instead, they would show me that they did not want me there. One thing that sticks in my mind to this day is when I had to have surgery on my shoulder. No one gave me a bed to sleep on. I had to sleep on a pallet on the ground while my grandmother, sister, and aunt all slept comfortably on beds. I felt my grandmother only took us in because she wanted people to think she was this loving woman.

It Made Me Stronger

Being placed in kinship care made me so

much stronger, though. I decided that I was going to go to college and make something of myself. I told myself I was going to be successful and that my family would regret treating me the way they did.

Kinship care did not last very long for me. I asked to be placed in foster care. Asking to be placed in foster care was very crazy for me, because I had watched so many movies and heard about so many horrible things that happened in foster care. But anything was better than what I was dealing with at my grandmother's house.

Foster Care Was Different

In the end, I am so glad I asked to be placed in a foster home. It was the BEST thing that has ever happened to me. I felt a sense of stability with my foster mom. She made sure I had a nice room to myself, with a warm bed. Her family treated me way better than my own family.

As a result, I was able to let my guard down and just be a happy kid. I noticed that I was actually smiling and laughing, something that I rarely did before being placed in her home. I had always thought I was just an angry, aggressive, bad kid and that how I felt and acted had nothing to do with the circumstances I was in. But when my circumstances

When my circumstances changed, I realized how happy I was. My anger went away.

changed, I realized how happy I was. My anger went away.

My Advice for Adults

My advice to kinship care providers is to not take children in if you're not going to make sure they are fine mentally and emotionally. Treat them like you would want someone to treat you. Think about the fact that they are being taken out of their element, away from their parents, and put into your home where they already feel uncomfortable to some extent.

My advice to social workers is to be sure you are not trying to force or plead with family members to take in youth, because it could be just as damaging to them as the environment they were taken out of. If a family member is hesitant to take in the youth, do not force it.

Lastly, my advice to foster parents. When a youth comes into your home, please welcome them with an open mind. Have some empathy for them. They are already going to feel uncomfortable being placed in an unfamiliar environment, so make them as comfortable as possible.

Emily is a foster care alumna and a member of SaySo (Strong Able Youth Speaking Out).

Starting a local SaySo chapter

The Mission of SaySo

Is to work to improve the substitute care system by educating the community, speaking out about needed changes, and providing support to youth who are or have been in substitute care.

Membership

Youth and Young Adults:

Those who have been in any level of substitute* care and are between the ages of 14-24 years of age.

Adult Supporters:

Any adult who has a vested interest in improving outcomes for youth who have been in substitute care.

**Foster care, kinship care, group homes, etc.*

Local SaySo Activities

Examples include:

- In-service training for social workers & GALS
- Work to remove decals from county cars
- Make A Difference Day events such as visiting nursing homes, putting together care packages for homeless shelters, and helping out at animal shelters

Contact Info

- Carmelita Coleman
Program Director
(ccoleman@chsnc.org)
- LeAnn McKoy
Program Coordinator
(lmckoy@chsnc.org)
- 800.632.1400
- www.saysoinc.org



SaySo's Impact on Policy

- Youth involvement in child and family (CFT) meetings and court hearings
- Foster care board payment increase
- Normalcy Act
- Siblings' Bill of Rights
- TRIP (Transportation Really is Possible)
- Foster Care 18-21 Program
- Family First Prevention Services Act
- Medicaid Expansion

Local Impact of Having a SaySo Chapter

- Empowers youth to lead and advocate
- Can assist in recruitment and retention of foster and adoptive parents
- Capable of providing training to LINKS programs, GALS, social workers, DSS board members, and other community partners to improve outcomes

SaySo is a program of Children's Home Society of NC



Support from SaySo's Young Adult Leadership Council & Headquarters Staff

For New Chapters:

- Up to 3 in-person site visits during the first 12 months
- Telephone and email technical assistance, as needed
- Connection to a statewide organization with other local SaySo chapters across the state

For Existing Chapters:

- 1 site visit per 12-month period
- Telephone and email technical assistance, as needed
- Connection to a statewide organization with other local SaySo chapters across the state



Self-care is a must for kinship caregivers by Jonathan Rockoff

If you provide kinship care, what I'm about to say will not be surprising: your circumstances and daily experiences are likely much different than "traditional," non-relative foster parents.

In this article I want to do more than provide tips on how to care for yourself as a kinship caregiver. After all, you're likely aware of what you would **like** to do to care for yourself. Instead, I hope to persuade you to put your self-care needs on the same level with the needs of the children in your care.

You Make Such a Difference

First, I hope you recognize how invaluable you are. Your selflessness means that your young relatives can stay within the family, even if they can't be with their parents right now. This really makes a difference to children's well-being. Studies have shown that compared to children in non-relative foster care, children in kinship care have fewer behavioral problems, lower rates of mental health disorders, better overall well-being, and fewer placements (Winokur, Holtan, & Batchelder, 2014).

But while outcomes for youth are positive, other studies have shown kinship care providers themselves have higher rates of depression and struggle more with guilt than non-relative foster parents (AECF, 2018a, 2018b).

This fits with my experience. Despite the challenges they faced, kin caregivers I have known were less likely than foster parents to ask for help or follow through with plans of self-care.

Acknowledging the Impact

I think one of the reasons for this is that unlike traditional foster parents, kinship caregivers are more likely to have trouble acknowledging the impact their situation has on them.

Typically, when people become foster parents they think about it for months or years beforehand. They prepare their home and bedrooms. They speak with their place of employment and make sure their schedule is flexible enough to accommodate children with many meetings, needs, and appointments. There are many crucial acts of preparation before becoming a licensed foster parent, and one of the most important is securing a consistent and reliable support system.

As a kinship caregiver, you were

likely not afforded the same luxury of preparation. Kinship care often happens quickly and in a crisis. The children may be family, but that doesn't mean the need to prepare is any less. This a disruption to your lifestyle, period.

Working in foster care, I had many kinship care providers either allude to or come right out and say they didn't feel they were entitled to a break for self-care or respite. They would say things like, "It's family, I don't need a break" or "I'm not comfortable sending the kids somewhere else."

I always understood. After all, it's family, and family is unconditional.

You Deserve a Break

However, I would always then respectfully encourage them to seek out self-care—to consider other relatives that could care for the kids for a weekend, or even take advantage of the fact they are licensed within an agency with many other safe and experienced foster homes that could provide temporary respite.

In some ways, kinship care can be more stressful than traditional foster care. Take the second-hand stress, for example. Instead of just getting information at monthly team meetings, you may get frequent updates from family members about the parent's recovery efforts or other struggles. Kinship care may also cause stress as family dynamics shift and responsibilities change. Guilt, ambivalence, and conflict are all common among kinship caregivers.

If you're providing kinship care, I encourage you to take care of yourself with the same enthusiasm and devotion you use to care for the children in your home. Take a moment and think back to your own childhood. There were likely many times you spent a night, a weekend, or longer with a relative or friend. That gave your caregivers a break. Just as importantly, it gave you a break.

Refresh and recharge. After all, you're a kinship provider. You have important work to do.

Jonathan Rockoff is a Training Specialist with the Family and Children's Resource Program at the UNC School of Social Work.

Despite the challenges they faced, the kin I knew were less likely than foster parents to ask for help or follow through with plans of self-care.

Related Resources

- **Coping with the Unique Challenges of Kinship Care.** This training series from the Annie E. Casey Foundation features therapist and trainer Joseph Crumbley as he explores how kinship care changes and affects family dynamics; how these changes can result in challenges that may affect a caregiver's ability to provide safety and permanence for the youth in their care; and approaches and strategies to cope with these challenges. <https://www.aecf.org/blog/training-series-coping-with-the-unique-challenges-of-kinship-care/>
- **Self-care issue of *Fostering Perspectives*** (vol. 19, no. 2). Featured articles include "Self-Care for Relative Caregivers: One Family's Story," "Self-Care and Secondary Traumatic Stress," and "Caring for Children Whose Parents Struggle with Drugs or Alcohol." <http://fosteringperspectives.org/fpv19n2/v19n2.htm>



Dr. Crumbley

fostering perspectives (Nov. 2019)

Sponsors. NC Division of Social Services, SaySo, and the Family and Children's Resource Program, part of the UNC School of Social Work.

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Mission. *Fostering Perspectives* exists to promote the professional development of North Carolina's child welfare professionals and foster and adoptive parents and kinship caregivers and to provide a forum where the people involved in the child welfare system in our state can exchange ideas.

Disclaimer. The opinions and beliefs expressed herein are not necessarily those of the NC Division of Social Services or the UNC School of Social Work.

Printing Information. The NC Department of Health and Human Services does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of services. 10,800 copies printed at a cost of \$1,009.09, or \$0.09 per copy.

Frequency and Distribution. Issues appear every May and November. Printed copies are sent directly to all NC county DSS agencies and to all foster parents and child-placing agencies licensed through the NC Division of Social Services. If you think you should be receiving a printed copy but are not, please contact us at the address above.

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References. See the online version of this issue for references cited in this issue.

Support for permanence through kinship care in NC by Selena Childs

Children and youth entering foster care in North Carolina are often placed with relatives. This arrangement is intended to be temporary, because the goal is almost always to return the child to their parent's home. This is called reunification.

If the court determines that reunification is not in the youth's best interests, the system seeks a permanent home for them. For youth in kinship care, this is sometimes achieved through adoption or legal guardianship by the relatives caring for them.

Adoption

"Adoption is the social, emotional, and legal process in which children who will not be raised by their birth parents become full and permanent legal members of another family while maintaining genetic and psychological connections to their birth family" (CWIG, 2019a). The birth parents' rights are legally terminated (called termination of parental rights, or TPR), after which the child is "free" for adop-

tion. Relatives can adopt their kin; for example, a grandmother may adopt her grandchild, or an uncle may adopt his nephew. Although these role changes can be confusing, adoption is the most legally binding permanency option. Adoptive parents have all the legal rights and responsibilities of a birth parent.

Guardianship

Legal guardianship, another permanency option, does not require TPR. Guardians are responsible for the day-to-day care and supervision of the children placed with them. They make all decisions related to the children's health, education, discipline, and upbringing. Once a relative becomes the permanent legal guardian, social services no longer has legal custody of the child.

Guardianship is most often used when relatives wish to provide a permanent home for the child and maintain the child's relationships with extended family without TPR (CWIG, 2019b).

Financial Assistance

Many kin who adopt or become guardians are eligible for financial assistance. The level of monthly support is the same, but as the box below shows, the eligibility criteria differ. In general, eligibility for adoption assistance is broader. For example, in guardianship arrangements, financial assistance is available only for youth age 14 and older, or for siblings placed with youth who are at least 14.

Deciding

Ultimately, youth and kinship caregivers need to work with their social workers and the courts to make the permanency decision that is in the best interest of the youth, and also meets the families' needs for support and assistance. If a kinship caregiver needs financial assistance to provide a permanent home, the age of the child is an important consideration. Kinship caregivers and youth should talk with their social workers about which option is best for them.

For children and youth in DSS custody, permanence occurs when they have a lasting, nurturing, legally secure relationship with at least one adult that is characterized by mutual commitment. A "legally secure placement" is one in which the direct caretaker has the legal authority to make parental decisions on behalf of the child.

— NC Child Welfare Policy

To help with that decision, the NC Division of Social Services is working with the UNC School of Social Work to develop educational materials for relatives, youth, social workers, and others who work with the child welfare system. These materials will be available by June 2020. Kinship caregivers and youth will be able to access these materials by visiting <http://www.nccare360.org>.

Selena Childs is a Clinical Associate Professor at the UNC School of Social Work.

Eligibility Criteria for Adoption Assistance and KinGAP

Adoption Assistance

For a child to be eligible, one or more of the following conditions must exist and be documented:

- The child is six years of age or older;
- The child is two years of age or older and a member of a minority race or ethnic group;
- The child is a member of a sibling group of three or more children to be placed in the same adoptive home;
- The child is a member of a sibling group of two children to be placed in the same adoptive home, in which one or more of the siblings meet at least one of the other criteria for special needs;
- The child has a medically diagnosed disability which substantially limits one or more major life activity, requires professional treatment, assistance in self-care, or the purchase of special equipment;
- The child is diagnosed by a qualified professional to have a psychiatric condition which impairs the child's mental, intellectual, or social functioning, and for which the child requires professional services;
- The child is diagnosed by a qualified professional to have a behavioral or emotional disorder characterized by inappropriate behavior which deviates substantially from behavior appropriate to the child's age or significantly interferes with child's intellectual, social and personal functioning;
- The child is diagnosed to be mentally retarded by a qualified professional;
- The child is at risk for a diagnosis described above in items e through h, due to prenatal exposure to toxins, a history of abuse or serious neglect, or genetic history;
- The child meets all of the medical and disability requirements for Supplemental Security Income (SSI).

Kinship Guardianship Assistance Program (KinGAP)

The following criteria must be met in order to receive Guardianship Assistance:

- A determination by the Court that reunification and adoption are not appropriate permanency options for the child;
- The child was placed in the licensed home for a minimum of six months;
- The child is under the placement responsibility of a North Carolina county department of social services at the time of entry into the Guardianship Assistance Program;
- The child is at least age 14 but not older than age 18 and demonstrates a strong attachment to the prospective guardian and has been consulted regarding the guardianship arrangement (younger siblings of youth age 14+ are also eligible if placed in the same guardianship arrangement);
- The prospective legal guardian has a strong commitment to caring permanently for the child and has entered into a guardianship assistance agreement with the county department of social services who holds custody of the child prior to the order granting legal guardianship; and
- If the child was placed in a legal guardianship arrangement at the age of 16 years or 17 years, he or she remains eligible to receive Guardianship Assistance until 21 years of age if, upon turning 18 years of age, he or she meets any of the following conditions: (a) Completing secondary education or a program leading to an equivalent credential; (b) Enrolled in an institution that provides post-secondary or vocational education; (c) Participating in a program or activity designed to promote or remove barriers to employment; (d) Employed for at least 80 hours per month; or (e) Is incapable of doing any of the previously described educational or employment activities due to a medical condition or disability.



Holiday tips for kinship caregivers by Gina Brown

Be it Christmas, Kwanzaa, Hanukkah, or whatever your family holiday tradition is, your first year as a kinship care provider may not feel very traditional. Please have trust it can get better. To help, here are a few pointers that apply to almost any holiday scenario you might face as a relative caregiver.

Be Honest. Be honest with the youth, honest with the youth's parents, and honest with extended family. If you have tried to keep the youth's new living arrangement a secret from some family members, it may be time to let the "Grinch out of the bag," so to speak. Do this before Thanksgiving, if possible! For example, your third cousin—who has never really been invited to the festivities—may show up. Is the middle of family dinner the right time to hear their opinions?

You don't have to go overboard. Really, you don't! Holidays are great, but the youth and your last nerve are too important to upset over a tradition. If the way you ALWAYS did a holiday activity no longer fits with your new family dynamics, try a new and different approach. You can always revisit things again next year. There shouldn't be anything carved in stone—things can shift to benefit how the youth feels and how you feel.

Be prepared to fall back and punt. Just like all the football games on TV Thanksgiving Day, your backup plan will need its own backup plan. This isn't so much for the younger kids, but when dealing with pre-teens and teenagers, the holidays can be worse than any other time. One minute they're fine—everything is great and agreeable. The next, you're dealing with a meltdown. Take it in stride, attend to their needs, and give yourself a moment for self-care.

No one wants a side of grief or anxiety with their Kwanzaa sweet potatoes, or a side of guilt with the Christmas turkey. Keep in mind those unwanted, emotionally stressful casseroles may show up on your holiday menu. If they do, don't pass them around. Instead, take them back to the kitchen, smile, and bring out dessert.

Communication is not overrated. If they are old enough, talk to your youth. Ask them to share how they really feel about the holiday. Ask multiple times, way in advance. If needed, you can also let them know that it is everyone's holiday and though you'll try your best, their every request might not work out perfect.

HELP is a four-letter word. But unlike some other four-letter words, you should use this one

Ask youth how they really feel about the holiday. Ask multiple times, way in advance!

often: ask for help not just during the holidays, but all year long. You are not WonderKin or SuperRelative, even though you do wonderful and super things every single day.

Ask for help. Ask your youth's child welfare worker and GAL if there are nonprofits in your county that can assist with holiday gifts for youth in care. (Have a list ready!) Ask other family members to help with holiday planning. Use your support network. If you don't have one, get one. Give yourself the gift of self-care. Give yourself permission to take a break.

Gina Brown, a kinship caregiver, serves on NC's Child Welfare Family Advisory Council.

North Carolina's Child Welfare Family Advisory Council
The NC Division of Social Services now has a state-level council comprised of six parents who have received child protective services, one foster parent, one adoptive parent, two kinship caregivers, and two foster care alumni. To learn more, visit <http://bit.ly/2IWRxCg>.

NC's Kinship Navigator Program and NCCARE360 by Janet Drake

When a child is at risk of out-of-home placement or enters the custody of a North Carolina county department of social services, family members often step up to care for the child. Although these families have unique needs and challenges, they typically do not have professionals available to help them navigate the complex systems they face or make service referrals on their behalf. To help meet this need, North Carolina is developing a Kinship Navigator Program.

NC's Kinship Navigator Program

In 2018, the NC Department of Health and Human Services received a federal grant to build a program to bring additional support to kinship families. When it is complete, North Carolina's Kinship Navigator Program will feature a website and call center, both of which will be served by an integrated resource database. To ensure the database houses the most up-to-date information, data coordinators will continually research community resources and confirm each one listed in the database is current and correct.

North Carolina's Kinship Navigator Program will feature a wide range of resources

for kinship families, including resources related to food, housing, transportation, employment, interpersonal safety, mental health, childcare, and healthcare. Once they find a resource they are interested in, families will be able to self-refer (i.e., contact the resource directly themselves) or request a referral through the Navigator. The goal is to provide a "no wrong door" approach that makes it easy for families find the support they need.

To guarantee it meets the needs of the people it is being created to serve, the Kinship Navigator Program will be built in partnership with and with input from kinship caregivers, organizations representing them, youth raised by kinship caregivers, and other stakeholders. To ensure it is effective, the program will use a model approved by the California Evidence-Based Clearinghouse for Child Welfare.

Timeline

North Carolina's Kinship Navigator Program will be developed alongside NCCARE360, a new statewide website currently under construction. Like the Kinship Navigator, NCCARE360



will serve all 100 counties via a website and a call center. Listings in the NCCARE360 resource directory will be translated into the top five languages spoken in our

state. To learn more about NCCARE360, visit <http://www.nccare360.org/>.

North Carolina's Kinship Navigator Program will not be implemented until NCCARE360 has been rolled out statewide. Currently NCCARE360 is being implemented in phases: 50 counties will be on board by the end of 2019 and the remaining 50 will onboard by the close of 2020. The Kinship Navigator Program will be available sometime in 2021.

Both NCCARE360 and the Kinship Navigator Program will support families and give agencies and the state an opportunity to see what resources are being utilized, where resources are lacking, and the funding that is needed.

Janet Drake is a Program Consultant with the NC Division of Social Services.



Writing Contest

Staying connected to the important people in my life

We asked young people in foster care, "Who are the most important people in your life? How do you maintain connections with them?" Here's what they had to say.

Faith, age 14

The most important person in my life is my twin sister, Angel. She has always been there whether I would like her to be or not. She always has my best interest at heart. I am currently about to move foster homes due to problems in the house, and Angel has been doing what our social worker hasn't—she has been looking on adoption sites and has found multiple places. Unfortunately, nothing has worked out yet. But the point I'm trying to make is how much she means to me. We try to maintain a good connection by not saying what comes to mind, and it is very hard when you have to live with each other. We argue a lot, and fight 24/7. But through thick and thin, we have each other's back. We are sisters by chance and friends by choice. We are each other's rocks. We might act like we hate each other, but every night we always say we love each other.

FAITH RECEIVED \$100 FOR TAKING TOP PRIZE IN THE WRITING CONTEST.

We have each other's back. We are sisters by chance and friends by choice. We are each other's rocks.

1

Lennon, age 17

I was separated from my siblings when each of us was born. None of us stayed together. However, they are the most important thing in the world to me. They have impacted me in so many ways. I am the oldest of six on my mother's side and the youngest of two on my father's side. All but one of us on my mother's side entered foster care . . .

Just because we have been separated does not mean the love is not there. We still keep in contact through social media and even visit each other. If my siblings were not here, I would not be the person I am today. My oldest brother, the one that came after me, actually goes to my church, so that is how we keep in contact. We are a family, and family never forgets each other. I think about all of my siblings almost every day and I am so grateful for the way things have turned out for all of us. We are all in a loving home and we are doing great things with our lives.

LENNON RECEIVED \$50 FOR TAKING SECOND PRIZE IN THE WRITING CONTEST.

If my siblings were not here, I would not be the person I am today.

2

Amber, age 19

An odd answer to the question would be my social worker, Melanie. . . I've known her since I was either 14 or 15. She introduced me to my parents and even held my hand when I didn't want to hold it up myself. She's been with me even when she wasn't on my case anymore. I look up to her and hope I am a wonderful and caring social worker, just like her. Even once I turn 21, she will still be in my life because she is part of my family. Making these connections and maintaining my relationship with Melanie isn't about constant communication. It's about being around when I need her as a friend, support, or guide. My whole relationship with her stays strong with trust and love. And the occasional cup of coffee.

AMBER RECEIVED \$25 FOR TAKING THIRD PRIZE IN THE WRITING CONTEST.

Even once I turn 21, my social worker will still be in my life because she is part of my family.

3

I Keep My Connections Strong

The most important people in my life are my older sister Mackenzie, my older brother Kamryn, and my younger sister Kylie. When it comes to my siblings, I will always remember to keep good memories of them and laugh.

My Mackenzie memories are when I was playing with her two baby boys. One time I was holding one. It was hard because the baby was crying. One day we went to a lake and he was playing in the water and it made me laugh a lot. Kendrick was so happy.

My Kamryn memory is when he and I were playing with Ray the cat. Ray the cat is black and white and he loves to play a lot. Ray got on a box and was trying to eat the box. Kam and I laughed so hard.

My Kylie memory story is when we got together on the trampoline. She makes me laugh a lot and we like to play outside and have so much fun.

These memories are all about laughter and getting together. It doesn't matter how much older or younger my siblings are, it is about the memories we make.

—Kaydin, age 11

I maintain connections with the people I care about through communication and bonding. I think every relationship should have open communication and strong bonding. If I didn't talk to

the people I care about, then I wonder—do I really care about them? For example, if I didn't talk to my family, would I really consider them as family? Yes, I know my siblings are blood, but that's not all that family means. Blood is one thing, but love is another. I have a lot of people who love and care about me. They show their love to me by talking to me no matter what, and I do the same for them. Another way I show them I care about them is by bonding with them. If every time I hung out with the people I cared about and we only did what I wanted to do, they wouldn't want to hang out with me. I want to make sure we do something we both want to do so we can truly bond.

—Sofia, age 11

KAYDIN AND SOFIA RECEIVED \$20 FOR HAVING THEIR ESSAYS PUBLISHED.

When it comes to my siblings, I will always remember to keep good memories of them and laugh.

I maintain connections through communication and bonding.



Shelia Epps Wilson

An American Indian grandparent's perspective on kinship care

by Tonia Jacobs Deese

In many cultures, caring for the children of relatives is an honored practice that goes back thousands of years.

DSS from two different counties were involved, because we and their other grandparents wanted the children. We had to fight the system a bit because we have a two-bedroom home, and DSS wanted each child to have their own room. Eventually we got primary custody, but there was a court battle. DSS was good to work with once they realized the children were doing well with us.

more important than basketball to their well-being. That's one of the reasons I became a Guardian ad Litem. I didn't want a Native American child to come into the system in my county and have no one to support them.

For this article, I spoke with Sappony Tribe member Shelia Wilson about her experience as an American Indian kinship caregiver. The Sappony people live in the Piedmont region along the North Carolina and Virginia border.

Please tell us about your transition to caring for your grandchildren.

Our grandchildren initially came into our home seven years ago due to a tragic car accident. My husband and I were very involved in the children's lives before the accident. They spent every summer with us, we knew their doctors, etc. That made the transition easier.

One struggle we had was the change in roles. We went from being grandparents spoiling our grandchildren to having to say no and be strict. We worried they would notice the difference when the other grandchildren came to visit. We try our best to give love and attention to everyone equally.

The good news is that we know a lot more about raising children now than when we were parents ourselves. We are grateful for this time with our grandchildren. They are 11 and 17 years old now.

What was your interaction with the child welfare system like?

Our people have taken in children for generations, before kinship care and DSS even existed. American Indian people take care of each other, especially our youth and elders, whenever the need arises. It's just something we do. We aren't used to the system being involved to assess us, or even help us.

Are there barriers to American Indian kin working with the child welfare system?

There is a long history of mistreatment of American Indian people by the system. In the past our children were taken from us and put in boarding schools across the country. We weren't allowed to visit each other. Our children couldn't speak their language. Their culture and traditions were stripped from them. They were made to assimilate. The goal was to "Kill the Indian to save the child." [The Sappony] have people who live in Pennsylvania to this day because their children were sent to boarding schools there. They lost their connection to their community and tribe. Then, there was a mass effort to place American Indian children in foster care across the country to be adopted by white families. This was in the 1970s, and it wasn't based on abuse and neglect. It was based on the idea that Indian children would be better off with a white family.

To this day, there is a lot of mistrust of the child welfare system. We are afraid people will misunderstand our culture or won't ensure our children learn about our culture. We have experienced this directly. We have seen the system place priority over our grandchildren attending a basketball game than holding onto their cultural connections. Being involved in tribal activities is much

How is caring for an American Indian child different? What are the unique supports your family has because of your culture?

We are traditionally a matriarchal society. Our women don't have to be the boss, but we are the ones who get things done. We truly have a village to help us raise our grandchildren. The women are careful to include them in the daily things we do, so they learn about their culture. My grandson has been volunteering in the tribe's youth camp for two years, so he's able to step into a leadership role for our younger youth now.

What advice do you have for social workers and kinship caregivers?

To social workers I would say be careful when making custody or visitation arrangements. The schedule shouldn't create barriers for youth to be involved in their culture, such as NCNAYO events (the NC Native American Youth Organization). American Indian youth need to feel included, to feel connected to their people—not just their immediate brothers and sisters, but to their full community. This extends their family and the amount of support they have. It places them in something bigger than they are.

We (caregivers) need that support and connection to our tribe, too. Reach out to get your own support, to take care of you. Don't rush your time with the child or youth, because it will go by fast!

Tonia Jacobs Deese is a clinical instructor with the UNC School of Social Work.

Questions for New Kinship Caregivers to Ask

Questions to ask the child welfare worker about taking responsibility for the children:

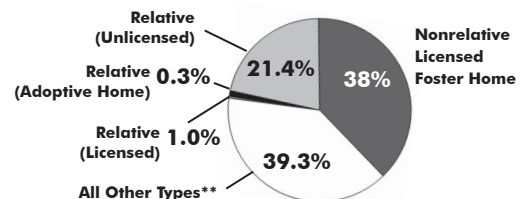
- Who has legal custody of the children?
- What rights and responsibilities does legal custody give? Physical custody?
- May I receive a copy of the signed voluntary placement agreement? (when applicable)
- May I be involved in developing the service plan and receive a copy of the plan?
- Will the children or I have to go to court?
- Who is responsible for enrolling the children in school, obtaining health insurance, granting permission for and obtaining medical care and prescriptions, signing school permission forms, etc.?
- Will someone from child welfare services visit my home on a regular basis?
- What are the requirements for me and my home if I want the children to live with me?
- Are the requirements different if the children are with me just temporarily?
- What services are available for me and for the children, and how do I access them?
- Are there restrictions on the discipline I can use (such as spanking) with the children?
- What subsidies or financial assistance is available? What do I need to do to apply?
- Am I eligible to become a licensed foster parent and receive a foster care subsidy?
- Will the child welfare agency or social services provide support for child care?
- Will I receive transportation help to take the children to medical appointments?

Source: CWIC, 2016

Kinship Care in North Carolina

Kinship care plays an essential role in North Carolina. Of the 11,646 children in DSS custody in our state on July 31, 2019, 2,636 (22.7%) were placed with relatives, most of whom were unlicensed.

Placements for NC Children in DSS Custody on July 31, 2019*



* This figure does not reflect the many people in North Carolina who act as temporary safety providers for their young relatives.

** Includes group home, hospital, jail, runaway, and other placement categories
Source: NC FAST and legacy data systems queried by Management Assistance (<http://ssw.unc.edu/ma/>) project team under contract with NC DHHS, 9/18/19



Overcoming kinship care obstacles by educating yourself and asking for help

by Jamie Bazemore

Lack of knowledge regarding what services and supports are available can be an enormous barrier for kinship caregivers. How can you advocate for what you need when you don't know what's out there?

The first step is simply learning to ask for more knowledge and information. Following are some ways to learn about available services.

Sit down with your child's child welfare worker. Explain to them what supports you need and what questions you have.

Create a list of items to discuss with the social worker when they visit to help you keep track of your questions and needs.

Seek out a support group for kinship/foster parents in your area.

Find a mentor. Ask the child welfare agency to link you with an experienced kinship caregiver in your community.

Learn about becoming a licensed foster parent.

Use resources such as:

- Benefits Checklist (<http://bit.ly/2OZ4ucZ>)
- *Children's Services Practice Notes* volume 16, no. 1 (<http://bit.ly/2Z0ciz2>)
- Kinship Caregivers and the Child Welfare System (<http://bit.ly/2OYnrg4>)
- For Relative/Kinship Caregivers (<http://bit.ly/2TCSa0L>)
- Grandfacts NC (<http://bit.ly/2YQyDj7>)

Services and referrals may be more widely available to children who are in the custody of a county DSS, but there are also community resources available to children in informal kinship situations.

Financial Support

Adding children to your family is both an emotional and financial transition. There are financial support options that children living with kin may be eligible for:

Foster Care Board Payments. If the children are in foster care, you may be able to become a

licensed foster parent and access the monthly foster care board payments. Talk to your social worker as soon as possible about this option, because becoming licensed involves training, home visits, background checks, and time for completing other requirements.

Adoption Assistance and KinGAP. If you are a kinship caregiver moving towards guardianship or adoption, discuss with your social worker the possibilities and eligibility requirements for Adoption Assistance and Guardianship Assistance (KinGAP).

Temporary Assistance to Needy Families (TANF). TANF is a monthly assistance program designed to help low income families become self-sufficient. You can apply for TANF as a family based on your household's income. Even if your family is ineligible, the relative children in your care may still qualify for TANF. To apply for TANF, visit your county department of social services (<http://bit.ly/2Nperhy>).

SNAP (Supplemental Nutrition Assistance Program). SNAP is the federal food assistance program commonly known as food stamps. It is available to families with incomes below a certain level. Your entire household's income is evaluated for eligibility. To apply, visit your county DSS.

WIC. This is the Special Supplemental Nutrition Program for Women, Infants, and Children. WIC provides basic nutritious food and formula to pregnant, postpartum, and nursing women and children up to age 5. To find the WIC program in your county visit <http://bit.ly/2Mwd4hh>.

SSI. Supplemental Security Income may be available to caregivers or children who are disabled and individuals over age 65. To learn more, visit <http://bit.ly/2MwtCt>.

Don't forget, there are often community support programs through your county DSS, faith community, or other agencies that can assist with additional

expenses for caring for relative children such as clothing vouchers/closets, food banks, school supply drives, and Christmas Angel/Wish programs.

Counseling, Therapy, and Behavioral Healthcare

Children who have experienced big transitions, including removal from their parents, often benefit from therapy and counseling. Seeking out a therapist in your community who accepts your child's health insurance is a first step in accessing the support they need. As a parallel process, consider whether your transition to parenting a child who may have experienced trauma is affecting your day to day life as well. You may want to seek out therapy or counseling for yourself. In North Carolina, behavioral health services are managed by Local Management Entities/Managed Care Organizations (LME/MCOs). To find the LME/MCO that serves your county visit <http://bit.ly/2ZgoQCB>. From there you can contact the LME/MCO to explore counseling and therapy providers in your area.

Health Insurance

Many children being raised by relatives are eligible for Medicaid. You can apply for Medicaid at your County DSS, by mail, or online. Learn more at <http://bit.ly/2Myrbmu>. Make sure to discuss with the children's social worker how any permanency decisions could affect the child's eligibility for Medicaid.

Court Advocacy

Attending court as a kinship care provider can be overwhelming. What is the dress code? Where is the courthouse? Should the children attend? Will you or the children be required to speak to a judge? All of these and more may be questions that you have.

It is important as a kinship care provider that you be engaged in any court actions that affect the children in your care. Try to attend court and understand what decisions are being

made for the children and their/your family. Create a list of questions for the social worker in advance of court and make sure to address them during a home visit. Some additional questions you may wish to consider are:

- What decisions may be made at the court hearing?
- What is the permanent plan for the children?
- Will the birth parents be present?
- Who will have an attorney?
- Is there anything else I should know to prepare myself and/or the children for court?

School Advocacy

Your role as the kinship caregiver and how that applies to educational advocacy and decision making varies based on the legal status of the children in your care. Regardless, you are parenting the child and should advocate on behalf of their educational needs. Discuss with the school—and DSS, if applicable—what educational needs, challenges, or successes you are observing. Ask to be present at meeting with the school, stay in touch with the school staff, and request assessment for an Individualized Education Plan (IEP), if you believe the child has a physical, emotional, or learning disability that impairs their school performance.

This is not an exhaustive list: there may be other areas where you as a kinship caregiver desire or require support services. Remember, don't ever be afraid to ask for and advocate for what you need for your family and the children in your care. By maintaining an open dialogue about your strengths and challenges with the professionals involved with your family, you can begin to access the services and supports you require.

Jamie Bazemore, BSW, MSW is the Adoption Facilitator for Stephenson & Fleming, LLP and a Child Welfare Program Consultant for Cansler Collaborative Resources.



Providing kinship care outside the child welfare system? You are not alone

by Glenda Clare

Grandparents and other relatives (often referred to as kinship caregivers or heads of grandfamilies) often assume custody after receiving a call from a concerned neighbor or visiting and finding dirty, unfed children alone in a messy home.

In times of crisis, relatives step in to care for the children. Parental abuse of alcohol and other drugs, death, illness, domestic violence, or incarceration are often the trigger for kinship care arrangements. Even when the child welfare system isn't involved, families often take care of their own.

You Are Not Alone

If you are caring for a relative's child and child welfare is not involved, you are not alone. Today in North Carolina more than 225,000 children live in homes headed by a grandparent or other relative (Grandfamilies, 2018). Of these children, just over 2,600 (1.2%) are in DSS custody (Duncan, et al., 2019).

Kinship Caregiver Needs

Unlike foster and adoptive parents, family members who bring children into their homes during a crisis have no time to plan. This can leave them with unmet needs. In addition, many services and resources are available only to those who obtain foster care licensing.

Following are areas of support needed by children and the members of their grandfamilies who are not involved with the child welfare system:

- **Legal Support.** Custody is a requirement to enroll a child in school and receive medical, dental, financial, and other services. Families need legal counsel to formalize custody status.
- **Financial Assistance.** Kinship care brings many unexpected expenses. Children are expensive. Many grandfamilies need assistance to defray costs associated with parenting.
- **Health, Dental, and Mental Health Care Insurance.** Growing children, especially those who have experienced abuse and/or neglect, require dental, health, and mental health services. Insurance is needed to secure adequate services.
- **Housing Assistance.** Space is needed to include children in the household. Old space may need to be altered or there may be a need to acquire new space. Relative caregivers often need housing assistance.
- **Education Services.** Children may require special education services.

Help Does Exist

As the box below shows, a limited number of programs are available for children in and outside the child welfare system. Eligibility for most is based on family income. Contact your county department of social services for more information.

FFPSA: Help is on the Way!

Under the age of 60 and part of the workforce, most grandfamilies are ineligible for services based on family income. They have significant need but are eligible for only a few resources and services. The federal Family First Prevention Services Act (FFPSA), enacted in February 2018, will bring additional help to families. Services that FFPSA will bring to North Carolina in the near future include:

- **Prevention Services for Kin.** Up to 12 months of prevention services for children at risk of entering foster care.

- **Prevention Services for Children, Parents, and Kin.** Prevention services to help the entire kinship triad simultaneously (child, parent, and kin).
- **Foster Care Licensing.** Assistance to help kin overcome barriers to foster home licensure.
- **Kinship Navigation.** Assistance to connect grandfamilies with services and resources. For more on this, see page 7.

Programs for grandfamilies in and outside the child welfare system are being developed. A more extensive list of existing programs can be found on the North Carolina Grandfamilies Fact Sheet created by Generations United: <http://bit.ly/2KXNQoU>

Glenda Clare is the North Carolina representative to the Generations United National GRAND Voices Network. She is a Family Partner Specialist at the Center for Family and Community Engagement at North Carolina State University and a former kinship caregiver.

Potential Resources for those Caring for Relative Children Not Involved with Child Welfare

CASH BENEFITS	
Temporary Assistance for Needy Families (TANF)	Child-only TANF: Nearly all children in kinship care are eligible for child-only grants. Considers only the needs & income of the child. Almost all relative caregivers can receive a child-only grant on behalf of the children in their care.
Adoption Subsidy	May be available to relative caregivers who adopt children in their care.
Supplemental Security Income (SSI)	May be available to children or caregivers who are disabled. This is also available to anyone over 65.
Social Security	If a child's parent(s) are deceased & were insured through the social security system at the time of death, the kin caregiver is eligible to receive a social security payment on the child's behalf.
TAX BENEFITS	
Earned Income Tax Credit	May be available for certain low or moderate income relative caregivers who are working. This tax credit is refundable, so even workers who do not earn enough to pay taxes can get cash from the IRS. Credit amount depends on income earned and number of qualifying children in the family.
Child Tax Credit	May be available to some grandparents and relatives raising children. There are age limits for dependents.
Child & Dependent Care Tax Credit	May be available to kinship caregivers who incur child care expenditures in order to work.
SUBSIDIZED CHILD CARE	
Infants & Pre-School Age Children	North Carolina's Division of Child Development uses a combination of state and federal funds to provide subsidized child care services.
Before & After School Care	Many school districts offer reduced program rates that depend on a family's income and need.
HEALTH CARE	
Medicaid or Other Health Coverage	Medicaid serves low income parents, children, seniors, and people with disabilities.
Mental Health Services	Relative caregivers and the children they care for are eligible for publicly funded services for mental health, developmental disabilities, and substance abuse services.



It's complicated: Parenting a child with complex trauma as a kinship caregiver

by Kate Murray

Many children in kinship care have experienced complex trauma. The National Child Traumatic Stress Network (NCTSN) defines complex trauma as children's exposure to multiple traumatic events (such as physical and sexual abuse) from a young age. These traumatic events often occur within their caregiving relationship and have long-term effects on a child's behavior and development. When children are focused on survival, they often miss out on important developmental experiences, such as learning skills they will need to succeed in school, learning to regulate their emotions and behaviors, and forming safe relationships with adults.

Unique Challenges

Parenting a child with complex trauma can be challenging for anyone, but there are some unique aspects of being a kinship caregiver that can be stressors or strengths in a child's recovery.

One unique challenge is that unlike many other resource parents, kinship caregivers may not have been planning to be full-time caregivers for their children and they may have experience grief and loss related to their unexpected role change. For example, they may have planned to enjoy their role as a grandparent, aunt, or uncle to the child, but instead find themselves dealing with not only the day-to-day demands of parenting, but also with the behavioral and emotional effects of complex trauma.

Another unique challenge is that some kinship caregivers may have complicated feelings about the child's history. They might feel guilty, thinking things like, "if only I had intervened earlier, things might not have been so bad for this child."

Relationships with the birth family can also be more complicated for kinship caregivers. On one hand, children in kinship care may be able to maintain more connections to members of their birth family, which can help them develop a strong sense of where they came from, their identity, and culture of origin. On the other hand, kinship caregivers may have to work harder to maintain boundaries and ensure ongoing safety, especially if birth parents have histories of drug abuse or violent behavior.

Finally, the child's trauma and grief may be shared with kinship caregivers' own trauma and grief. For example, if a child comes into the care of a grandparent because their parent died, that grandparent is grieving the loss

of their child at the same time the child is grieving the loss of their parent.

Similarly, when there are patterns of intergenerational trauma, some kinship providers may have experienced trauma very similar to what children have experienced, such as sexual abuse or witnessing domestic violence. Again, this is complicated: on one hand, this experience puts them in a unique position to understand and empathize with a child's experience. On the other hand, it can also be a stressor on their relationship with the child if the wounds from their own trauma have not yet healed.

Mental Health Services Can Be Key

Finding mental health services that address the effects of complex trauma can help kinship caregivers navigate these complexities. Evidence-based trauma treatments, such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), are increasingly available across the state. For help finding a therapist for their child, kin caregivers can visit the NC Child Treatment Program at www.ncchildtreatmentprogram.org. For more on how to ensure children receive effective mental health treatment, please read this article by my colleague Donna Potter: <http://bit.ly/2TxjyO>.

However, evidence-based trauma treatments on their own may not be enough to help caregivers deal with the multiple ways complex trauma impact's a child's mental health. For example, additional treatment may be needed for the effects complex trauma is having on the child's self-image or ability to establish a trusting relationship with their caregiver. Treatments for the unique impact of complex trauma, such as the Attachment, Regulation, and Competency (ARC) model, can be very helpful, although providers trained in these models can be hard to find. (For more on ARC, visit <https://arcframework.org>.)

Some kinship caregivers may benefit from mental health treatment for themselves to resolve their own trauma and loss or grieve the changes of the unexpected parenthood. For adults who have experienced trauma and are suffering from symptoms of post-traumatic stress, providers who offer models such as Cognitive Processing Therapy (CPT) may be helpful. Although there is no registry for providers trained in the unique issues of being a kinship caregiver, caregivers can

Complex trauma occurs when children are exposed to multiple traumatic events (such as physical and sexual abuse) from a young age.

ask questions of potential therapists to see their experience, such as those in this document from Child Welfare Information Gateway: <http://bit.ly/2KU6GNC>. If they hear unhelpful perspectives, such as, "Why don't you just give them back?" kinship caregivers should consider seeing a different provider.

Other Supports Also Help

Kinship caregivers may also benefit from support groups where they can connect with others with similar experiences. They may also need training, especially if they have not had the same training opportunities provided to foster parents. Specifically, they may benefit from educational workshops about how trauma impacts children, such as NCTSN's course *Caring for Children Who Have Experienced Trauma*. To find a provider of this course near you, go to the NC Child Treatment Program's provider roster and select "Resource Parent Curriculum" as the treatment model (<https://www.ncchildtreatmentprogram.org/program-roster/>).

Also, since complex trauma can interfere with a child's healthy development, kinship caregivers may need support in identifying resources such as occupational therapy, financial assistance, and support in managing multiple weekly appointments with different providers. If they need support in one or more of these areas, kinship caregivers for a child involved with the child welfare system should start by asking the child's social worker. For resources available to kin caring for children who are not involved with child welfare, see the article on page 11.

Conclusion

When children are hurt through relationships, as is the case with complex trauma, relationships have the power to heal. Helping children heal from complex trauma, however, can be a daunting job. With access to the right supports, kinship caregivers are in a unique position to provide healing for children within their family network. Finding resources is not always easy, but with help from dedicated professionals who understand complex trauma, the journey of parenting as a kinship caregiver can be much more manageable and rewarding.

Kate Murray, PhD, is a licensed psychologist and director of the Center for Child and Family Health's Post Adoption Support Services.



A reader asks ...

Where can kinship caregivers find support?

We are struggling with raising our nephew, who is placed in our home. The child welfare agency has made some effort to support us, but it is not helping. We are completely overwhelmed and thinking about giving up. Help!

It shows great strength to reach out for help. It sounds like you've made it through some milestones but need additional assistance. Realizing you need more support is the first step towards getting it. I commend you for taking the initiative to maintain the placement and exploring ways to keep the youth connected to his family, friends, and community.

It's important that kinship caregivers know where to get help when they need it. Reaching out to your agency is a great place to start, and I am happy to provide you with additional tips and suggestions for ways that you can address the immediate crisis and recover your strength so you can preserve your family and maintain this placement.

Advocate for Yourself

Kinship caregivers often feel they are under a microscope, afraid to say or do the wrong thing in the agency's eyes. These feelings can keep kinship caregivers from speaking up when things are hard or asking for things they need. Please be honest and forthright about what is missing from your supports. You are the expert on your family. Many times, the agency doesn't know what your needs are unless you voice them.

Respite

Respite is critical to maintaining a healthy placement, even when providing kinship care. No one can expend all the mental and emotional energy a placement requires without taking occasional breaks. While respite is not always immediately available, it is important to always tell your agency when you feel you need respite. Your agency can assist in accessing available resources and making appropriate arrangements.

In addition to allowing time for recharging, respite can also present you with an opportunity to grow your knowledge, so you are better prepared for when the child returns to your home. Perhaps a specific training would help you maintain this placement.

Make a Plan

Knowing exactly what action to take in a crisis can make all the difference. The next time you feel your stress level start to rise, what will you do to relieve that stress in a safe way? If one intervention doesn't work, what's the next one you will try? Taking the guess work out of crisis management can save valuable mental energy and make you more resilient in the moment.

Time Management

Even when you're not actively in crisis, raising a child involved with the child welfare system involves many different meetings and activities. This can make even the simple act of planning your week overwhelming. Last minute additions can cause the whole schedule to come crashing down. That's added stress you don't need.

Be sure to advocate for yourself if your agency or the child's agency is putting too much on your plate or is not informing you about important events until the last minute. Also, consider identifying some items on your schedule that aren't as necessary as you once thought. Letting go of the less important things will give you more energy to manage the things that must get done and can result in lower stress levels.

Informal Supports

As it turns out, kinship caregivers are just people like everyone else! It's important for you to take time out from the daily grind to get a coffee with a friend or have your neighbors over for dinner. Fellow foster parents and other kinship caregivers are an especially important source of support, as they know how this experience can feel. Use the community you've built for yourself to help prop you up when you are feeling low; ask for help when you need it. These people can often point you toward your own strengths and see solutions that you cannot.

Resources

We all want to do whatever we can to prevent children from experiencing a disruption in their living arrangement. Strengthening and supporting a child's current placement is always important. Any change in placement will be traumatic, so any resources that can be provided as a preventive method and promote success are high priority.

Children's Home Society of North Carolina offers educational programs and training through the **Permanency Innovation Initiative (PII)**. Through this initiative, education and support are provided to families who are permanent placements or are likely to become permanent placements. These services provide families with a greater understanding of children and youth needs and behaviors and teach trauma-informed parenting strategies. To learn more about PII, please visit <https://www.chsnc.org/educational-programs-and-training/>.



It's important that kinship caregivers know where to get help when they need it.

Triple P (Positive Parenting Program) is offered in many ways, through a variety of providers. This program provides tools and strategies to assist families with caring for their own children, relative children, and children who are currently in the custody of a county child welfare agency. Triple P is offered to anyone providing care for children in their home. Triple P can be offered in group sessions, individually, or with a partner. Speak with your local Triple P provider to help determine which approach will work best for your family. Triple P serves youth of all ages.

To find a Triple P provider close to you, please visit <https://www.triplep-parenting.com/nc-en/find-help/find-a-provider/>. If you are unable to find a provider nearby, call 919/707-5601 for assistance. There are also online resources available to assist caregivers with additional supports. In addition, Triple P is offered to North Carolina parents as a free self-directed, online course (<https://www.triplep-parenting.com/nc-en/find-help/triple-p-online/>).

Online Resources

Other free online resources for caregivers include:

- Promoting First Relationships (<https://pfrprogram.org>)
- Active Parenting (<https://www.activeparenting.com/>)
- Nurturing Parenting (<https://www.nurturingparenting.com>)
- Grandfamilies.org (<https://www.grandfamilies.org>)
- Courses on FosteringNC.org

Please contact the child's social worker for more information.

Response by the NC Division of Social Services. Have a question about foster care or adoption you'd like answered in "A Reader Asks"? Send it to us using the contact information on page 5.



Help us find families for these children and youth

For more information on these children or adoption in general, contact the NC Kids Adoption and Foster Care Network (tel: 877-625-4371; email: nc.kids@dhhs.nc.gov; web: <https://www.ncdhhs.gov/divisions/social-services/child-welfare-services/adoption-and-foster-care>)

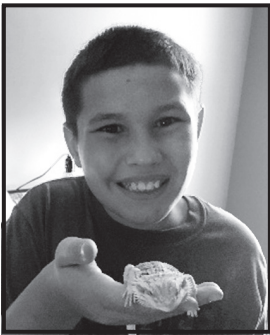


Alexis, age 14

There is something that attracts others to be around this beautiful young lady. It may be her engaging personality or that stunning smile. Alexis is a pleasure to be around and she never meets a stranger. Alexis dreams of joining a family she will be able to connect with, that will love her unconditionally, and provide her with opportunity to grow and develop as a person. This young lady has a strong capacity to love and she would love nothing more than to share this love with her forever family. Alexis is a healthy teenager who enjoys being around others. She loves

singing, shopping, and reading a book that will captivate her attention.

Alexis desires a family where she will be able to feel safe and secure. Alexis needs a family she can depend on to be there no matter the circumstances. She would flourish in a family who is committed, provides structure, and is supportive in her achieving her goals. Her forever family will need to understand and accept her birth family connections.



Connor, 12

Connor is described as a happy, energetic, caring, curious, diligent young man. He enjoys baseball, playing Legos, and Minecraft video games. Connor's favorite outdoor activities are hiking, fishing, camping, and swimming. He is very knowledgeable of animals and one of his favorite hobbies is catching lizards and caring for them. Connor's dream career is to care for animals.

Those who know Connor say he will be open to adoption when he feels he can trust the adults in his new home. He will blossom in a family that provides him with a loving and structured environment.



Dakota, age 12

Dakota is a handsome young man often described by others as caring, energetic, and creative. He has a warm, bright smile that lights up the room. He loves to talk and engage in conversation. Dakota relishes in being the center of attention. He has a sense of humor and tends to be the comedian of the group. Dakota loves to be affectionate and appreciates when his affection is reciprocated. Dakota enjoys an array of activities, such as basketball,

video games, swimming, climbing, and being outdoors. He would love nothing more than a family who is willing and able to share in fun activities.

Dakota has shared his dreams of a forever family. He simply wants to know he is loved and treasured as an individual and part of a family unit. Dakota does desire a two-parent home and is open to other children in the home. His forever family will need to support and encourage Dakota's family bonds.



Yesica, age 12

Yesica is spunky and full of love! This adorable little girl would make the perfect addition to the right forever family. She is described by those who know her best as a friendly, talkative young girl with a bright smile. Curious by nature, she will ask questions to satisfy her curiosity. Full of youthful vibrance, she loves to be playful and engage with those around her. She loves to dance and listen to music.

This beautiful, lively little girl deserves all the love, stability, and permanence a forever family offers. Yesica has shared she wants a family who will accept her into their home, hearts, and family unit. She will blossom in

the right family and will bring an abundance of love, laughter, and joy to the family dynamics.



Alicia, age 15, and Asia, age 13

Alicia and Asia are two tightly bonded sisters who are seeking their forever family, a family who will love them unconditionally. Alicia is the older of these two young ladies. As many young teens her age, Alicia takes great pride in her appearance and loves to shop and venture out to the movies and sports. Described as outgoing and intelligent, Alicia is comfortable advocating for herself.

Asia is the artistic one. She loves to draw and sing. She is an avid reader and has been described as a gifted writer. Like her sister, Asia enjoys sports. She wants to be active in football, soccer, and basketball. Asia is depicted as a "smart girl who is very capable of making As and Bs" when she applies herself to her assignments. Asia has the goal of one day attending Harvard University.

Alicia and Asia deserve the love and devotion of a forever family. Their forever family should be committed, loving, and patient. Alicia and Asia deserve a family that will meet them where they are and encourage them with unconditional commitment, patience, and understanding.



Foster Family Alliance of NC: Together we can!

The Foster Family Alliance of North Carolina is excited to announce its Summit series, *Together We Can!*

Our first summit was held Sept 21, 2019 in Gaston County and was a great success. Thank you Gaston County DHHS for all of your hard work and dedication in leading and holding this event. We are currently scheduling two summits for spring 2020, locations to be announced.

Together We Can summits are geared toward families interested in fostering, current foster/adopt/kinship families, and any agency or person serving our foster community. We have an energy packed day, guaranteed to ignite the fire in each person attending. The tracks being offered during *Together We Can* summits include:



- **Potential Foster Families.** This track is geared toward families interested in fostering and is a great opportunity for agencies to send families who are interested or in the process of becoming licensed. We will have current families in the community as well as trainers talking about the process and answering questions.
- **Shared Parenting.** Come hear about the changes to the timeframe for shared parenting visits (from 7 days to 14 days) and success stories of families who have worked together to reunify children and youth with their birth families.
- **Fostering Teens.** We have partnered with LINKS and SaySo to have teens and current foster parents talk about fostering teenagers and current initiatives in our state to help young adults as they transition from foster care.
- **Behavior/Trauma.** We will have trainers from the community to help us understand our children's behavior and provide tools to support our children. We will also have families who have faced challenges explain how they helped children manage their behaviors.
- **Navigating the System.** Learn more about the various systems foster parents face. This track will help you understand your rights as a foster parent when it comes to navigating the legal system, schools, and medical care.

Benefits for attending a *Together We Can* summit include 6+ hours of training, all meals included, door prizes, awards, and a celebration banquet! We will also have agencies from your community, who serve you and your kids, as vendors with tables so you can get information, ask questions, and connect to services.

For more information, visit ffa-nc.org or call 800/578-7770.

About FFA-NC

Our organization began more than 40 years ago (in 1975) as the North Carolina Foster Parent Association and changed its name in 2006 to the North Carolina Foster and Adoptive Parent Association (NCFAPA). Now, as FFA-NC, we have recommitted to bringing together parents and agencies across the state to better serve our children. We are grateful for the continued support of the NC Division of Social Services and other funding agencies.

FFA-NC Welcomes New Board Members

Pete Smith, Vice President. Pete has been a foster parent since 2013. In 2018 he and his wife, Ginger, received the Adoption Excellence Award from AdoptUSKids for their efforts in the foster and adoptive community in Wake County, NC. He has an undergraduate degree in Business Administration and has been in the Information Technology field for the last 18 years in operations and program management roles. Pete currently resides in Raleigh with his wife and their three kids.



Thy Toeung, Treasurer. Thy, his wife Jamaica, and their two children have been a licensed foster family for about three years. Thy is currently a director of Pre-Sales for Information Governance and Digital Solutions at Iron Mountain. Thy is also part owner of Seeds and Sprouts Kids Consignment Sale, a biannual event that helps families find and sell gently used children's items. Donated items from the consignors, as well as a portion of the sales, go directly to foster families and charities that support them. To relax, Thy enjoys playing sand volleyball, building Minecraft worlds, and improving his karate skills.



Alex Williams, Advisory Board Member and director of Foster Care & Adoptions, Crossnore School & Children's Home. Originally from England, Alex has spent the last 16 years working in child welfare fields in various capacities - including work in Canada, West Africa, and now the U.S. For the last seven years, Alex has directed foster care and adoption programs in Asheville area - working to increase access and resources for families and children, as well as improve outcomes for children in care. Alex's passion for foster and adoptive care stems from his personal faith walk, as well as the appreciation of the power of families who open their homes to children in need through his own mother's childhood story.



FFA-NC Board Members

Maurita McCorkle, *Executive Director*

Shane Lunsford, *President*

Pete Smith, *Vice President*

Thy Toeung, *Treasurer*

Kate Norwalk, *Secretary*

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Kimberlee Grier, *Advisory Board*

Alex Williams, *Advisory Board*

Robyn Kelly, *Advisory Board – Marketing and Communications*

Tanya Sloan, *Advisory Board – Marketing and Communications*

If you are interested in a board position, please contact Maurita McCorkle (mccorkle@ffa-nc.org).

Writing Contest

First Prize: \$100 • Second Prize: \$50 • Third Prize: \$25

If you are under 18 and are or have been in foster care, please send us a letter or short essay in response to the following question:



We all have times when, even though we are physically safe, we don't feel safe. When this happens to you, what are some of the things that help you create a feeling of safety?

(Responses should be 200 words or less.)

DEADLINE: Feb. 4, 2020

E-mail submissions to jdmcmaho@unc.edu or mail them to: Fostering Perspectives, Family & Children's Resource Program, 100 Europa Dr., Suite 571, CB# 5220, Chapel Hill, NC 27517. Include your name, age, address, and phone number. In addition to receiving the awards listed above, winners will have their work published in the next issue. Runners-up may also have their work published, for which they will also receive an award.

Seeking Other Writing Submissions

Submissions can be on any theme. There is no deadline for non-contest submissions: submit your work at any time.



Join the Fostering Perspectives List!

To be notified by email when new issues appear online, go to <http://eepurl.com/brPe9b> and sign up.

Get in-service training credit for reading this newsletter!

Enjoy *Fostering Perspectives* and earn credit toward your relicensure. Just write down the answers to the questions below and present them to your licensing social worker. If your answers are satisfactory, you'll receive 30 minutes of training credit. If you have questions about this method of gaining in-service training credit, ask your worker.

In-Service Quiz, FP v24 n1

1. How many of his siblings did Tyson Robertson adopt?
2. What are two questions Dr. Joseph Crumbley says kinship caregivers must ask themselves?
3. Name one benefit licensed kinship caregivers receive that unlicensed caregivers do not.
4. What advice does Emily have for social workers, kin, and foster parents?
5. Describe two important differences between adoption and guardianship.
6. Which of Gina Brown's holiday tips for kinship caregivers resonates with you most?
7. What was one struggle Shelia Wilson and her husband had as they transitioned from being grandparents to primary caregivers for their grandchildren?
8. Name three potential resources for kinship caregivers looking after children who are not involved with child welfare.
9. According to Kate Murray, what unique challenges do kinship caregivers face?
10. How many vacant board positions does FFA-NC have right now, and who should you contact to learn more?

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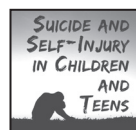
A learning site for North Carolina's foster and adoptive parents and kinship caregivers

The NC Division of Social Services is proud to offer fosteringNC.org, a learning site for our state's resource parents. This site features online courses, webinar recordings, videos and podcasts, and answers to frequently asked questions.

Free Online Courses Include:



Supporting the Transition into Adulthood. This 1-hour course teaches strategies resource parents can use—including North Carolina's LINKS goals and Transitional Living Plan—to help youth in foster care successfully transition into adulthood. Includes candid, practical suggestions from an experienced foster parent.



Suicide and Self-Injury in Children and Teens. This 1-hour course helps foster and adoptive parents and kinship caregivers understand suicide and non-suicidal self-injury in children and adolescents and teaches them how to respond.

Foster parents are encouraged to talk in advance to their supervising agency about obtaining training credit through fosteringNC.org.

Join the fosteringNC.org List

To sign up to receive news and updates go to:
<http://eepurl.com/cEiAYP>

Scan this QR code to go directly to the site



References

Fostering Perspectives, vol. 24, no. 1 (www.fosteringperspectives.org)

Annie E. Casey Foundation [AECF]. (2017, Oct. 24). *Engaging kinship caregivers with Joseph Crumbley*. Retrieved from <https://www.aecf.org/blog/engaging-kinship-caregivers-with-joseph-crumbley/>

Annie E. Casey Foundation [AECF]. (2018a). Loss and ambivalence (module 1). *Training Series: Coping with the Unique Challenges of Kinship Care*. Retrieved from <https://youtu.be/dncR5NUv3so>

Annie E. Casey Foundation [AECF]. (2018b). Guilt (module 2). *Training Series: Coping with the Unique Challenges of Kinship Care*. Retrieved from <https://youtu.be/wUUGz8py-gg>

Child Welfare Information Gateway [CWIG]. (2019a). *Introduction to adoption*. Retrieved from <https://www.childwelfare.gov/topics/adoption/intro/>

Child Welfare Information Gateway [CWIG]. (2019b). *Guardianship*. Retrieved from <https://www.childwelfare.gov/topics/permanency/guardianship/>

Child Welfare Information Gateway [CWIG]. (2016, May). *Kinship caregivers and the child welfare system*. Retrieved from https://www.childwelfare.gov/pubPDFs/f_kinshi.pdf

Duncan, D. F., Flair, K. A., Stewart, C. J., Vaughn, J. S., Guest, S., Rose, R. A., & Malley, K. M. D. (2019). *Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina* (v3.2). Retrieved from <http://ssw.unc.edu/ma/>

Grandfamilies. (2018). *Grandfacts: North Carolina*. Retrieved from <http://grandfamilies.org/Portals/0/State%20Fact%20Sheets/Grandfamilies-Fact-Sheet-North-Carolina.pdf>

NC Division of Social Services. (2019, July). *NC child welfare policy manual, permanency planning section*. Retrieved from <https://policies.ncdhhs.gov/divisional/social-services/child-welfare/policy-manuals/modified-manual-1/permanency-planning-1.pdf>

Siegel, D. J. (2013). *Brainstorm: The power and purpose of the teenage brain*. New York: Tarcher/Penguin Books.