Strengthening Grandfamilies through Respite Care
Policy Brief No. 20

Children do well when raised by grandparents and other relatives, especially when these caregivers can receive temporary relief, or respite services. Respite care is an essential part of strengthening “grandfamilies.” Together with other support services, respite contributes to the long-term stability and wellbeing of all members of grandfamilies.

Overview

The word itself – “respite” – begins to tell the story, but only in its barest outline. Individuals with the unremitting responsibility of providing total care for another person require relief. Because of the emotional and physical drain of constantly meeting another person’s needs, caregivers of all kinds – parents with newborns, seniors whose spouses have dementia, relatives caring for a family member with a serious disability, grandparents raising grandchildren – benefit from respite services.

This policy brief focuses on children who are in the care of a grandparent or other relative because a parent is unable to serve as the primary caregiver. As the textbox on page 2 indicates, this brief uses the Generations United definition of “grandfamilies,” which refers to families in which grandparents and other relatives have primary responsibility for caring for children who live with them.

Nurturing grandfamilies allow children to flourish. Grandfamilies tend to enable siblings to stay together and maintain contact with family members, reduce additional traumatic transitions, and provide stability of care. To maintain these advantages, relative-caregivers need time out from the physical, mental, and emotional demands of childrearing.

High-quality, accessible respite care is essential to the well-being of all family members and to the long-term sustainability of the grandfamily arrangement. While respite providers engage children in positive social and educational activities, the grandparent or relative has time to participate in support groups, obtain services so the family can function effectively, or secure health services that protect their ability to raise children.
Respite helps preserve families and is an essential family support service, according to ARCH National Respite Network and Resource Center. Yet gaps persist in the availability of respite services to meet the needs of grandfamilies.

At the state level, government agencies can develop or expand services to grandparents and other relatives raising children and their families. Community respite providers would benefit from federal or state programs that provide technical assistance and training to build capacity for effective services. Some recent progress has been made: in December 2006, policy makers passed and the president signed the Lifespan Respite Care Act (Public Law 109-442), creating a new federal kinship navigator program. It will be the responsibility of the new Congress to provide funding for this program.

The Facts: Grandfamilies

A Quick Profile of Grandfamilies

Census data indicate about 6 million children in the United States are living in a household headed by a grandparent or other relative. In many cases, the parent may actually still be in the home but cannot function as the primary caretaker, so the grandparent or relative assumes a major role in raising the children and providing for their basic needs. In 42 percent of grandfamily homes, the parent is not present at all. In the 1999 National Survey of America’s Children, 78 percent of children living with a relative or grandparent were “placed” without a child welfare agency intervening.

According to the 2000 Census, three fourths of children being raised by any relative (4.4 million) are in a grandparent-headed household. In some disadvantaged neighborhoods, the Annie E. Casey Foundation reports that up to 20 percent of children...
have a grandparent or relative as their primary caregiver.\textsuperscript{11}

The development of the grandfamily arrangement without child welfare involvement means that the children, and their caregivers as well, lack access to important family-strengthening resources – such as health insurance – that children in parent-headed families or in the child-welfare system can obtain.\textsuperscript{9, 10}

Grandfamily arrangements tend to be long term, with more than 50 percent of the children remaining with the grandparents for three or more years (see Figure 1). Almost a fourth are in care for less than a year.\textsuperscript{2}

For these children, temporary care arrangements represent a huge portion of their young lives.

**Who Are the Children?**

Children find themselves in grandfamilies for many, and often multiple, reasons. Their parents may be unable to care for them because of substance abuse, incarceration, poverty, serious physical and mental health conditions, or, more frequently in recent years, military deployment.\textsuperscript{12-14} In situations where there is child abuse or neglect, a change in living arrangements is not optional. Many of these children face multiple risk because of exposure to substance abuse, experience with neglect, and the effect of other traumas.\textsuperscript{15}

Compared to their peers in parent-headed families, children in grandfamilies are at greater risk of being poor, being uninsured, and/or living in apartments or houses not set up for children. These children are in all parts of the United States, and about half are from racial or ethnic minority groups.\textsuperscript{2, 9}

The largest percentage of children in grandfamilies comes from those who are in the youngest and most formative years (five years of age or less). Slightly more than a quarter of the children are teenagers (see Figure 2).\textsuperscript{8}

**Why Support Grandfamilies?**

One of the particular reasons that children tend to thrive when raised by relatives is due to prior knowledge of the familial environment. Also, the caring child/caregiver relationship most likely began before the relative assumed primary caregiving responsibilities.\textsuperscript{1, 6}

Generations United and the Annie E. Casey Foundation have detailed other reasons why children do well in grandfamilies. With grandfamilies, the cultural context remains constant. Often, children may be able to continue at the same

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**FIGURE 1. Duration of Primary Responsibility for Grandchildren by Percent of Grandparent Caregivers, 2000\textsuperscript{2}**

![Pie chart showing duration of primary responsibility for grandchildren by percent of grandparent caregivers, 2000.](image-url)
schools, live in the same community, and retain the same playmates, thus escaping additional upheavals. Family stability is also enhanced when siblings remain together in the same home – which is less likely in foster-home placements. In addition, grandfamilies tend to stay in touch with birth parents and other family members which, when appropriate and safe, benefits the children. Studies show that grandfamilies’ homes have an advantage over foster homes because the children remain with them longer and the grandfamilies’ homes offer greater stability of care. Living in grandfamilies contributes positively to children’s success in school, protects their physical and mental health, and promotes overall well-being.¹,⁵

From a societal perspective, grandfamily arrangements avert at least $6.5 billion per year in costs for every 1 million children who are not in the foster-care system.²

Risks for Grandfamilies
When grandparents assume responsibility for young children, often unexpectedly, they may face an increased strain because of low or limited incomes. For example, with 70 percent of grandparents under 60 years, many are too young to qualify for Medicare, Social Security, and other public benefits available to seniors.¹⁶ Already living on limited or fixed incomes, the added expense of raising children without financial assistance³ will impede their ability to afford essential respite care.² As a result, 27 percent of children in grandparent-headed families live in poverty – compared to 17 percent of all children.¹⁷ Grandparents may also lack connections with human services agencies and informal support networks that could help meet basic needs.¹⁸

Poverty is not the only risk that children confront in their new circumstances. Other factors include the adjustment – by all members of the household – when the caregiver faces the demands of childrearing after years of an empty nest. The stability of the grandfamily arrangement also can be threatened by caregiver stress and health problems.

- Grandparents may experience frustration and even shame or guilt about their own child’s inability to care for the grandchild. Stress-related conditions such as depression and

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¹ Potential payments that children in other placements receive include foster care, child-only Temporary Assistance from Needy Families (TANF), Social Security, and Supplemental Security (Macomber, 2006).
hypertension are not uncommon. Family relationships can be strained and custody disputes may exacerbate the situation.

- Because risk for chronic diseases increases with age, grandparents may have medical conditions, yet delay seeking needed care due to caregiving responsibilities. If, as a result, the grandparents’ health suffers, it may affect their long-term ability to effectively nurture children in their care.

Respite Care: A Necessary Support for Grandfamilies

What Is Respite Care?

Respite care is not child care. The Lifespan Respite Task Force offers this definition: “Respite care, which includes crisis care, provides temporary relief for caregivers from the ongoing responsibility of caring for an individual of any age with special needs, or who may be at risk of abuse or neglect.” Grandfamilies with at-risk children or “special needs” are a priority for respite-care providers. In this context, special needs may include children with disabilities, fair or poor health, risks related to abuse and neglect, and other limiting conditions. Census 2000 data indicate about 10 percent of children ages 5-17 years living in a non-parent grandfamily household have a disability.

Respite helps preserve families and is a family support service, according to ARCH National Respite Network and Resource Center. It differs from child care in that the purpose is to provide temporary relief, not to take care of children while the caregiver is working. Instead, the goal of respite care is to strengthen grandfamilies’ ability to function effectively and to minimize out-of-home placements. Thus, respite care is an essential part of a comprehensive set of family-centered supports.

Among grandfamilies, circumstances vary. Even within a single family, respite needs change over time, making it crucial that multiple types of respite care be available.

- **Regular respite care** offers brief but regularly scheduled care. A few hours each week can allow caregivers to attend to practical needs such as shopping, keeping medical appointments, or participating in support groups for grandparent-caregivers. Intergenerational activities that enable caregivers and children to relax and have fun together or in parallel activities – such as a support group paired with child care to enable participation in the meeting – make important contributions to the health of both caregivers and children.

- **Planned respite care** may range from hours to several days. Caregivers will ordinarily anticipate need for relief for a longer period of time in order to have a medical procedure, take a business trip, or visit an out-of-town relative.

- The need for **emergency respite care** occurs unexpectedly when the caregiver needs time off to deal with an urgent situation. Many state family caregiver programs enable relative-caregivers to choose their caregiver and the

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b The recently enacted Lifespan Respite Care Act of 2006 defines “child with a special need” as “an individual less than 18 years of age who requires care or supervision beyond that required of children generally to a) meet the child’s basic needs or b) prevent physical injury, self-injury, or injury to others.”
Some respite care providers offer in-home services, while others are based in community settings. Services may be organized in multiple ways through special activities for children at community centers, respite cooperatives, and summer or vacation camps. To enable low-income grandfamilies to access respite care, states offer vouchers, reimbursement, and subsidies to reduce the costs.

The Brookdale Foundation recommends community partnerships as a strategy for providing grandfamilies with a menu of respite options. For example, schools, 4-H, faith-based organizations, Big Brothers Big Sisters, family resource centers, YMCAs and YWCAs, Boys and Girls Clubs, Cooperative Extension offices, and other community agencies serving families can expand the choices available to caregivers.

Why Does Respite Care Matter?
Typically, grandparents have little advance notice that they will be expected to care for grandchildren. Further, because many assumed that their days of raising children were over, they are often unprepared for the challenges that the responsibility brings. The care of young children is particularly intense and physically demanding, and children five years and younger comprise more than 40 percent of those living in grandfamilies. Children's behavioral or emotional problems may result from abrupt or multiple transitions in their young lives – adding additional pressure on the grandfamilies.

Even the care of older children may disrupt almost all aspects of caregivers’ personal lives. The resulting stress takes its toll and may lead caregivers to feel quickly overwhelmed, isolated, or exhausted; physical and mental health may deteriorate. By providing them with a break from caregiving, respite care enables caregivers to attend to their own physical, mental, and emotional needs. By tending to their personal needs, caregivers will be enabled to continue providing a nurturing, stable family life for the children.

Research and practice reveals that respite care also can strengthen children in grandfamilies. Specifically, children directly benefit when respite care creates a new relationship with a caring adult, offers positive social experiences, or enables them to participate in organized educational or recreational activities. Indirectly, children benefit because respite care:

- Enhances the long-term stability of grandfamilies’ homes by keeping siblings together;
- Relieves caregivers’ stress and helps them maintain close family relationships; and
- Enables caregivers to pursue supports for the individual child or family.

“Respite care can provide a much-needed hiatus from the stress associated with raising children under challenging and often very difficult circumstances.”

– Generations United
Linking Respite Care to Other Grandfamily Supports

Children and their caregivers have many needs – needs that change over time. Besides limited incomes, some of the other challenges facing grandparents and their “new” family are as follows:

- Fifty-six percent of grandparents raising children have jobs or work that conflict with their new responsibilities.²
- Children may require services for needs relating to disruptions in their family arrangements, disabilities, or emotional or behavioral problems; however, navigating unfamiliar systems to secure family support services can be time-consuming and difficult.¹⁰,¹⁵

Obtaining respite care, relief from the financial burden of raising children, and information and referral about community resources are priorities for caregivers.⁶,¹¹ While no two grandfamilies are alike, other typical needs include legal services, mental health and health care for all family members, case management, referral for supportive services, child care, affordable and suitable housing, parent education, learning how to navigate human services systems, and support groups.⁵,¹¹,¹⁸,²⁵,²⁶

For these reasons, respite care ought to be part of a coordinated and flexible package of family-centered services that addresses multiple challenges.²²

Existing Respite Care Systems and Gaps

Policy makers and the private non-profit sector increasingly support the expansion of respite care for grandfamilies.²³,²⁷,²⁸ Typical goals are reducing caregiving stresses experienced by families and delaying or averting the placement of children in the foster-care system.

Despite very real advances, gaps in respite care persist. One concerns the availability (or lack thereof) of free or subsidized respite so that grandfamilies on limited incomes can access services. Another is the limited range of respite services to meet dynamic family needs. A third common gap has to do with age restrictions in publicly-funded respite services.

National Family Caregiver Support Program (NFCSP)

The primary federal support for grandfamilies – the National Family Caregiver Support Program (NFCSP) – is administered by the Administration on Aging. Area agencies on aging use NFCSP funds to directly provide or contract for respite care and also to provide information; assist caregivers in accessing services; arrange for counseling, training, and support groups; and offer limited supplemental services.²⁹ Through NFCSP-funded programs, grandparents and other relatives who are 55 years and older may obtain temporary relief from caring for a child 18 years and younger.¹²,³⁰ For relative-caregivers in Native American/American Indian communities, the Native American Family Caregiver Support Program provides comparable supports.²⁹

Although NFCSP provides critical resources at the community level, it falls short of reaching many grandfamilies that have a need for respite care and other supports. Reasons include:

- Age limitations: only 53 percent of grandparent-caregivers are 55 and older; others are unable to qualify for NFCSP supports.³¹
“Aging” disconnect: younger caregivers needing assistance may not think of aging-services providers or networks as resources.

Inadequate funding: current federal appropriations fall short of needs, especially in respite care. The Administration on Aging allocates NFCSP funding to states via a population-based formula. Because of a limitation in the Older Americans Act, states may use up to 10 percent of NFCSP funding for support services for eligible relatives raising children. The 10 percent is optional, however, resulting in some states devoting less than that share to grandfamily supports.

State and Local Policy Leadership
To develop systems of lifespan respite care, some states and localities are creating programs to improve access to respite. ARCH defines lifespan respite programs as “coordinated systems of accessible, community-based respite services for family caregivers and individuals regardless of age, race, ethnicity, special need or situation.”

Michigan, Nebraska, Oregon, and Wisconsin enacted lifespan respite care legislation, and the Oklahoma Department of Human Services used existing authorities to develop a lifespan respite program. Lifespan respite recognizes that all age groups have both caregivers and care recipients that need a temporary break.

Senior Volunteers Provide Respite to Grandparents Raising Children

Southwest Michigan Region IV Area Agency on Aging
http://www.areaagencyonaging.org/SVP.html
http://www.family-friends.org
http://www.brookdalefoundation.org

Drawing on two successful program model programs, the Southwest Michigan Area Agency on Aging (AAA) offers respite care to grandparent-caregivers through trained senior volunteers. The agency developed its respite services by following the National Council on Aging’s Family Friends Program model, which engages older adult volunteers in strengthening families who have children with disabilities and chronic illness. Hence, Southwest Michigan AAA carefully matches volunteers and families, trains volunteers, has regular contact with families and volunteers, and evaluates program impact on all involved. During their weekly visits, the family-friend volunteers engage children and youth in educational and recreational activities while relieving grandparents of caregiving responsibilities.

Respite services are one part of the Southwest Michigan AAA’s Grandparents Raising Grandchildren and Relatives as Parents Program (RAPP). In accordance with the Brookdale Foundation’s RAPP model, Southwest Michigan AAA also delivers a range of other services, including in-person and telephone support groups, family events, information, resource directories, and referrals.
In general, state-level lifespan respite programs encourage the development of local initiatives by:

- Providing start-up and operational funding to local partnerships.
- Coordinating funding from other federal and state programs.
- Serving as an intermediary to help coordinate programs and create networks of service providers.
- Providing outreach to caregivers.
- Conducting or sponsoring education and training for caregivers and respite providers.
- Helping to connect caregivers with other needed services.
- Identifying gaps in the availability of supports, especially respite, and mobilizing community partnerships to close them.4,12

Some state lifespan programs also subsidize respite care, such as through vouchers and reimbursements.4 One study of respite care for families with children with serious emotional disorders indicates that underwriting respite services is less costly than other types of out-of-home placements.32

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**Nebraska’s Lifespan Program Opens Doors to Respite Care**

**Nebraska Health and Human Services System**

[http://www.hhs.state.ne.us/chd/rspindex.htm](http://www.hhs.state.ne.us/chd/rspindex.htm)

Responding to the need of caregivers and care recipients of all ages for respite, Nebraska policy makers adopted lifespan respite care legislation in 1999 and 2001. The resulting Lifespan Respite Subsidy Program offers each eligible family up to $125 each month to subsidize respite care. To be eligible, the family must meet an income-level test and the care recipients must have special needs, a standard met by many children in grandfamilies. Because family circumstances vary, Nebraska’s program is client-driven. Caregivers can select both the respite provider and the setting: in the home, the individual provider's home, or a facility. In addition, caregivers may choose to have the state directly pay the provider or reimburse the family. The subsidy is not available for what is usually considered crisis care for well children.

The legislation also created the Nebraska Respite Network to coordinate lifespan respite resources. Each of the six regions in the network is responsible for outreach and public education, referrals, provider recruitment and training, quality assurance programs, and evaluation. In a survey, a majority of caregivers of children under 21 years who accessed subsidies reported reductions in both stress and isolation.24 The Lifespan Respite Subsidy Program is just one of many ways Nebraska is working to strengthen grandfamilies (see Generation United’s state fact sheet about Nebraska at [http://ipath.gu.org/State921334.asp](http://ipath.gu.org/State921334.asp)).
RAPP Program Brings Supports to Grandfamilies

Catholic Charities Caregivers Support Services
Albany, NY
http://www.ccccaregivers.org

With a RAPP seed grant from the Brookdale Foundation in 1997 – and support from many other sources, Catholic Charities of the Diocese of Albany has created a wide-ranging set of services to strengthen grandfamilies. Nearly 10 years later, Catholic Charities Caregivers Support Services (CCCSS) offers school and vacation activities, occasional weekend camping trips for families, and summer camp scholarships for youth in grandfamilies. To expand and enhance youth programming, CCCSS recently hired a youth program coordinator and formed a partnership with the community center. While the youth are engaged in these programs, their grandparents and relatives receive a break from caregiving and can use the time to participate in support groups or obtain assistance from CCCSS staff. In particular, CCCSS offers family assessments and service coordination, information, legal services, counseling, support groups, linkages to mentoring programs, and a variety of social and recreational activities. With help from volunteers, the agency served 60 families with 87 relatives raising an estimated 134 children in 2005.

A case study of the four states’ programs by ARCH indicates the lifespan respite model is effective because:

- The programs assure respite care is connected to a broader system of supports for grandfamilies.
- A single-entry point makes it easier for families to access and use supports.
- Lifespan respite programs reduce administrative costs in state government by streamlining activities formerly undertaken by separate respite programs.4

Both respite coalitions and kinship navigator programs are additional foci for state and local leaders. Establishing respite coalitions is another way both states and localities provide leadership. Coalitions help caregivers connect with respite care in their communities. Some may concentrate on a specific population, such as the elderly or persons with disabilities, and others have a lifespan approach.19, 33

Kinship navigator programs help relative-caregivers gain access to information, support services – including respite care, and available benefits. In 2005, New Jersey, Ohio, and Washington created such kinship navigator programs.27 Other kinship navigator programs operate at the local level. Such programs are a response to surveys and studies indicating that one of relative-caregivers’ greatest challenges in raising children is getting accurate information about the benefits and services that are available to their families.34
Private Sector Leadership

Many regional foundations and not-for-profit organizations support respite care (see Resources section). One of the early leaders was the Brookdale Foundation, which works to enhance the quality of life for America's senior citizens and to further the fields of gerontology and geriatrics. In 1996, Brookdale initiated the Relatives as Parents Program (RAPP) to stimulate the development of services for grandparents and other relatives who have taken on the responsibility of surrogate parenting. Community-based organizations can use RAPP seed grants to offer direct services or enhance program sustainability. State government agencies use their seed grants to create statewide grandfamily networks and build local capacity to serve grandparent-caregivers. Grantees attend an annual RAPP training conference and receive ongoing technical assistance. Today, RAPP is the largest network of kinship-caregiver support programs in the United States.

Other Barriers to Respite Care

ARCH reports that some grandparent-caregivers hesitate to access respite care, worrying that accepting this assistance signals an inadequate ability to raise children. A similar lesson was learned in the RAPP network: caregivers want, but are not always ready to accept, help. Many have trouble at first enjoying the time off.

Respite Care as a Family Strengthening Strategy: Promising Practices

Because circumstances of grandfamilies vary, they need a menu of respite options. Based on a literature review and case study research, Paulin Jivanjee, at the Research and Training Center on Family Support and Children’s Mental Health, identified promising respite care practices for families that have children with serious emotional disorders (see Promising Respite Care Practices).

Although developed for another population needing respite care, the Jivanjee promising practices are generally consistent with national respite guidelines developed by ARCH and guidelines for grandfamily support programs by Child Welfare League of America, Children’s Defense Fund, and others. The guidelines for wider-ranging programs recognize that vulnerable grandfamilies need a range of supports, one of which is respite. Family strengthening practices in this latter set of guidelines include the following.

- The family-centered assessment drives the development and continuous updating of service plans for children and their families. A whole-family assessment conducted by a social worker – and including available birth parents – identifies family strengths and needs.

- Case management services develop a service plan for the family, then arranges and advocates for services, monitors and evaluates, and makes necessary adjustments.

- Community partnerships engage a broad range of local organizations that serve families and children.

- Outreach efforts frame respite as necessary for grandparents and other relatives to sustain caregiving. For example, messages emphasize that effective, responsible caregivers use respite. Support groups are a natural way to communicate this message. Ensuring children enjoy respite programs and activities indirectly reinforces caregivers’ use of this service.
Promising Respite Care Practices

Adapted from the Research and Training Center on Family Support and Children’s Mental Health

• Families directly participate in the design and implementation of respite services (family-driven).
• Families help train respite providers, along with leading practitioners, agency administrators, and other professionals.
• Flexible-funding policies allow choices of amounts and types of respite care that meet families’ unique needs.
• Families select which service in a menu of options best suits their needs and preferences.
• Respite services build on family strengths and support what families are already doing well.
• Respite activities are age-appropriate, foster the development of social skills, and give children opportunities for fun.
• Respite care is outcome-oriented and focuses on relief for families.
• Respite care is part of customized service plans and case management.
• Respite care is community-based and uses local community resources, which helps ensure long-term sustainability and community-responsive programming.

Policy Recommendations

Although there are promising beginnings that provide a foundation, much work remains. Many relative-caregivers cannot find or access the respite care they need to provide healthy, nurturing homes for children. Now is the time, and this is the opportunity, that federal, state, and private organizations have to further advance the availability and accessibility of respite care.

Federal Policy Makers

The following recommendations are offered for consideration and action as legislators convene in the new Congress. They build on important federal leadership in respite care established during the 109th Congress.

• Fully fund the new national lifespan respite care program. The recently enacted Lifespan Respite Care Act (LRCA), Public Law 109-442, authorizes a new program to assist relative-caregivers to access affordable and high-quality respite care. A core component is grants (or cooperative agreements) to individual states to:
  o Expand and enhance access to respite care services for family caregivers.
  o Improve the statewide dissemination of information about and coordination of respite care services.
o Improve the quality of respite care services to family caregivers that will reduce family caregiver strain.39

The authorized level for fiscal year 2007 is $30 million, increasing to $94.8 million in 2011. Full funding is necessary, not only to initiate the state-grants programs, but also to establish the National Resource Center on Lifespan Respite Care. This center, authorized in the LRCA, provides for three major functions:

o Public outreach.

o A national database of programs providing lifespan respite care.

o Training and technical assistance to respite-care programs operated by states, communities, and nonprofits.

The resource center will be of greatest benefit to consumers if it engages the community of respite-care providers serving grandfamilies as well as the spectrum of caregivers in other critical life situations. Accordingly, it is essential that the resource center provide assistance to any program that provides respite care.

• Create a new federal kinship navigator program. The new program would support the development of navigator programs at the state and regional level and expand the availability of technical assistance and training to improve these services. One example was the bipartisan effort in the 109th Congress to pass the Kinship Caregiver Support Act. Title I of the act creates a Kinship Navigator Program to include:

o Providing grants for kinship navigator programs to state agencies, metropolitan agencies, or tribal organizations to support activities that assist relative-caregivers in 1) navigating their way through programs and services, including respite care, and 2) learning about and gaining access to assistance (including respite care) to meet their own needs and the needs of the children they are raising.

o Promoting partnerships between public and not-for-profit agencies that result in more effective and efficient services for grandfamilies.

• To better meet grandfamilies’ need for respite care and other supportive services, amend the Older Americans Act and, in tandem, increase National Family Caregiver Support Program (NFCSP) appropriations. NFCSP is the primary federal program offering resources that states can use to provide or contract for respite care and other caregiver supports. NFCSP gives priority to caregivers, such as spouses and neighbors, who are informally providing care to an older person, but states have the option of spending up to 10 percent of their NFCSP allocations on grandparents and other relatives who are primary caregivers of children. As noted on page 8, some states spend less than 10 percent of their funding. By amending the Older Americans Act (Public Law 109-365) so that it requires states to spend 10 percent on support services, the federal government would assure that some basic level of services is available to grandfamilies across the nation.

Without a parallel increase in total NFCSP appropriations, funding for NFCSP-funded services for caregivers of older persons would decline as states shift resources to support
services for grandfamilies to meet the new requirement. Thus, an increase in total appropriations for NFSCP is essential to assure that NFCSFP-funded services for other caregivers continue to receive the support upon which they depend.19

- **As authorized in the Older Americans Act of 2006, fund innovative programs to engage volunteers in supporting grandfamilies.** The act authorizes demonstration grants for programs that engage older volunteers in providing support to relative-caregivers and the children in their care.

- **Examine and adopt policies and legislation to address the other challenges facing relatives who are raising children.** As noted in prior sections, some of the most significant impediments to the long-term stability and well-being of grandfamilies are financial difficulties, the lack of a legal relationship to the child, lack of health insurance, problems accessing the education system, obtaining appropriate housing, and the need for mental health services.10, 19

State Policy Makers
In the last decade, states made important strides in increasing the range of support services available to grandfamilies.4, 23, 27, 28 Yet, gaps remain. Three primary opportunities to strengthen grandfamilies through respite care are: participating in the RAPP network, building the capacity of respite care providers, and creating lifespan respite care programs.

- States that have yet to **join the Relatives as Parents Program (RAPP) state network** will benefit by doing so. Currently, 40 states participate in the RAPP network. Eligible states4 have the opportunity to **(re-)examine needs and apply for RAPP grants, technical assistance, and training supports** for their efforts to strengthen grandfamilies. RAPP supports from the Brookdale Foundation enable state government agencies to:
  - Develop statewide networks that serve as a central resource for information on programs and policies for grandfamilies that connect local services into a statewide network.
  - Facilitate the creation of local networks that provide supportive services for grandfamilies.
  - Conduct outreach to grandfamilies.
  - Create task forces with representatives from state government agencies and statewide organizations involved in programs and policies concerning grandfamilies.35, 40

- **Provide training, technical assistance, centralized services, and capacity-building grants to help community-based**

“Translated to dollars, if even one million children being raised by relatives were to enter foster care, it would cost taxpayers more than $6.5 billion per year.”

--Generations United2

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d Each year, the Brookdale Foundation’s request for proposals names eligible states, some of which are former grantees.
**organizations and coalitions strengthen respite care for grandfamilies.** State agencies serving children, families, and older adults can fund and promote the use of a range of technical supports. To increase capacity to serve grandfamilies of all types, respite providers would benefit from training and technical assistance in delivering culturally and linguistically sensitive services; capacity-building grants would help communities meet the diverse needs of grandfamilies. Other ways states can encourage field development is by disseminating best practices and program models; delivering in-kind assistance (such as Web site hosting and outreach materials that can be customized); and facilitating collaborative partnerships.

- ARCH recommends that states create lifespan respite programs. In written surveys and interviews, state agencies report that lifespan respite programs directly generate savings by lowering administrative overhead, leveraging funding, and reducing program expenditures through improved program continuity and focus. Further, families benefit because coordination improves the ease with which they can find and access respite services. If Congress appropriates funding, the new LRCA will offer competitive grants to states to help them initiate new or strengthen existing lifespan respite programs. States, either directly or through public/private partnerships would then provide ongoing funding for the lifespan respite programs.

**Recommendations for the Human Services Community**

The human services community plays a significant role in strengthening grandfamilies through advocacy, program development, quality assurance, and through its special expertise – particularly on the local level – in assessing community needs. Human services organizations are uniquely positioned to play a coordination role or link between the federal, state, and local players in this area. Some recommendations for consideration are:

- Reach out to caregivers raising children to inform and connect them to available supports.
- Assure that staff working with older adults or with families with children receives training. Generations United’s National Center on Grandparents and Other Relatives Raising Children offers a number of training opportunities.
- Establish respite care programs for grandfamilies as part of a larger framework of supports. The Children’s Defense Fund offers a step-by-step guide for respite care programs in its Kinship Care Resource Kit. New and existing programs will want to take advantage of already-
identified promising practices (see the Respite Care as a Family Strengthening Strategy: Promising Practices section, beginning page 11). Seed grants from the Brookdale RAPP can be used to develop or expand services to grandparents. Agencies offering only respite care can link their services with other community supports for grandfamilies.

- Create networks of agencies that offer supports to grandfamilies. Innovative program design and delivery can maximize use of respite services.\(^{19}\)

- Educate the public, professionals, national organizations, and policymakers about the benefits of strengthening grandfamilies as well as the need for multiple types of respite care.\(^{19,37}\)

- Support public policy initiatives that will strengthen grandfamilies by building on their assets and providing assistance in overcoming the challenges they face.

To help state and local agencies obtain funding for respite care, ARCH National Respite Network and Resource Center offers Guide to Federal Funding for Respite and Crisis Care Programs.

**Resources**

AARP Grandparent Information Center  
[http://www.aarp.org/families/grandparents/gic/](http://www.aarp.org/families/grandparents/gic/)

The center offers resources for grandparents: those with grandchildren who live close by or long distance, grandparents raising grandchildren, step parents, and those with visitation issues. The Web site offers articles, fact sheets, and message board as well as a searchable, online database of local supports for grandparents raising grandchildren.

Annie E. Casey Foundation  
[http://www.aecf.org](http://www.aecf.org)

With 55+ years of experience in investing in child and family well-being, the foundation offers extensive resources on strengthening low-income families with children and their neighborhoods from both practice- and research-based perspectives.

ARCH National Respite Network and Resource Center  

ARCH (Access to Respite Care and Help) is a National Network and Resource Center designed to create a nationwide system of respite options that provide temporary relief and support to families and caregivers. ARCH provides information, training, technical assistance, evaluation, and research activities to serve providers, families, and states in developing and maintaining respite services.

Brookdale Foundation Group  

The Foundation's mission "is to enhance the quality of life for America's senior citizens and to further the fields of gerontology and geriatrics." Initiated in 1996, the foundation's Relatives as Parents Program (RAPP) encourages and promotes services for grandparents and other relatives who have taken on the responsibility of surrogate parenting. RAPP accepts local and state proposals for annual grants. The third edition of the foundation's Relatives Raising Children: A Guide to Finding Help and Hope was published in 2005.

Child Welfare League of America  
[http://www.cwla.org](http://www.cwla.org)

CWLA's Kinship Care program focuses on the "major growth in the number of children in state custody who are living with their relatives." *Standards of Excellence*, a publication of CWLA, presents goals related to achieving quality supports and services for children and families in kinship care.
Children’s Defense Fund
http://www.childrensdefense.org

This site contains a wealth of information for caregivers and others concerned with respite care, particularly of note is the Kinship Care Resource Kit. The kit offers an introduction to the experiences of grandparents and other caregivers, "how-to" guides, and a list of resources on issues affecting grandfamilies. Fact sheets provide information and resources for the grandparents and other relatives raising children in individual states.

Cooperative State Research, Education and Extension Service (CSREES), U.S. Department of Agriculture
http://www.csrees.usda.gov

In cooperation with public and private sector partners and the Land-Grant University System, CSREES programs help families meet their basic needs, provide a safe and healthy home environment, and make wise choices that are integral to a successful and productive life. The system has approximately 2,900 extension offices nationwide. For example, the University of Arizona-Pima County Cooperative Extension is a collaborative partner in the Kinship and Adoption Resource and Education (KARE) Family Center in Tucson, Arizona, which offers one-stop support and services.

Family Strengthening Policy Center (FSPC), National Human Services Assembly
http://www.nassembly.org/fsqc/practice/practices.html

With support from the Annie E. Casey Foundation, FSPC seeks to describe practice-based approaches to strengthening families raising children in low-income communities and policy implications.

Generations United
http://www.gu.org

Generations United is a resource for policymakers and the public about intergenerational cooperation and grandfamilies. The grandfamilies section of their Web site includes many related fact sheets and guides, including several in Spanish.

GrandFamilies of America
http://www.grandfamiliesofamerica.com

GrandFamilies of America brings grandparents and relative caregivers together to provide them with education and tools that enable them to provide for the safety and permanency of the children in their care. The site includes a comprehensive question and answer section on the Kinship Caregiver Support Act.

Grandparents Raising Grandchildren
http://www.firstgov.gov/Topics/Grandparents.shtml

This is the federal government's official web portal. This section of the site contains information on benefits and assistance, health and safety resources, and state resources, as well as citations for reports and publications concerning all aspects related to grandparents raising grandchildren.

National Council on the Aging (NCOA)
http://www.ncoa.org

NCOA is dedicated to improving the health and independence of older persons and increasing their continuing contributions to communities, society, and future generations. The NCOA Family Friends Program (http://www.family-friends.org) is an intergenerational program that matches older adults with families who have children with disabilities or chronic illnesses.

National Family Caregiver Support Program (NFCSP) – Resource Room

The resource room presents information on providing respite services to families, caregivers, and professionals. The site includes links to the Administration on Aging's (AoA) fact sheets for caregivers. Of special interest may be the Caregiver Tip Sheet. Managed by AoA, the program provides funds to aging service provider networks in all states and territories.
National Committee of Grandparents for Children
http://www.grandparentsforchildren.org/

This group of grandparents and other relatives advocates for legislative and policy changes. The site includes links to listservs, sponsored by the National Coalition for Children Rights, to which interested individuals or groups may subscribe.

National Foster Parent Association
http://www.nfpainc.org

The mission of this association is to support foster parents in achieving safety, permanence, and well-being for children and youth in their care.

Endnotes


This series of policy briefs produced by the Family Strengthening Policy Center seeks to describe a new way of thinking about how to strengthen families raising children in low-income communities and how this approach can and should influence policy. The premise of "family strengthening" in this context, and as championed by the Annie E. Casey Foundation, is that children do well when cared for by supportive families, which, in turn, do better when they live in vital and supportive communities. The series describes ways in which enhancing connections within families and between families and the institutions that affect them result in better outcomes for children and their families.

The Family Strengthening Policy Center is funded by the Annie E. Casey Foundation and is an initiative of the National Human Services Assembly, an association of leading national nonprofit health, human service, human and community development agencies. The center benefits from the guidance and involvement of the Family Strengthening Peer Network, which provides opportunities for its members to share knowledge on family strengthening strategies, learn what other organizations are doing, and find synergies and potential areas of collaboration.

This brief reflects the findings and views of the Family Strengthening Policy Center, which is solely responsible for its content. For more information or to access other family strengthening policy briefs, visit www.nassembly.org/fspc.