

# Kinship Care Tribal Summit – Fall 2020

Who are Kinship Caregivers?

**Kinship Caregivers:** Grandparents,  
Aunts/Uncles, Siblings, Cousins, Steps....

# Types of Kinship Families

## Formal Kinship Families

- Children that have an open case or dependency with Children's Services through the Tribal Court/ Indian Child Welfare (ICW) or Department of Children, Youth, and Families (DCYF).
- These children are removed from the parents' custody and placed with a family member or suitable other.
- The goal here is to reunite the child with their birth parent when possible or to establish permanency with the family member or suitable other when reunification is not deemed appropriate for the child well being.

## Informal Kinship Families

- Children that live with a relative without any formal child welfare system involvement.
- Often times, the family member has taken the child into their home to avoid any formal interventions from the child welfare system.
- These caregivers may or may not have pursued formal legal custody arrangements through the courts.
- You may say taking care of your grandchildren or nieces/nephews we call that informal kinship care.

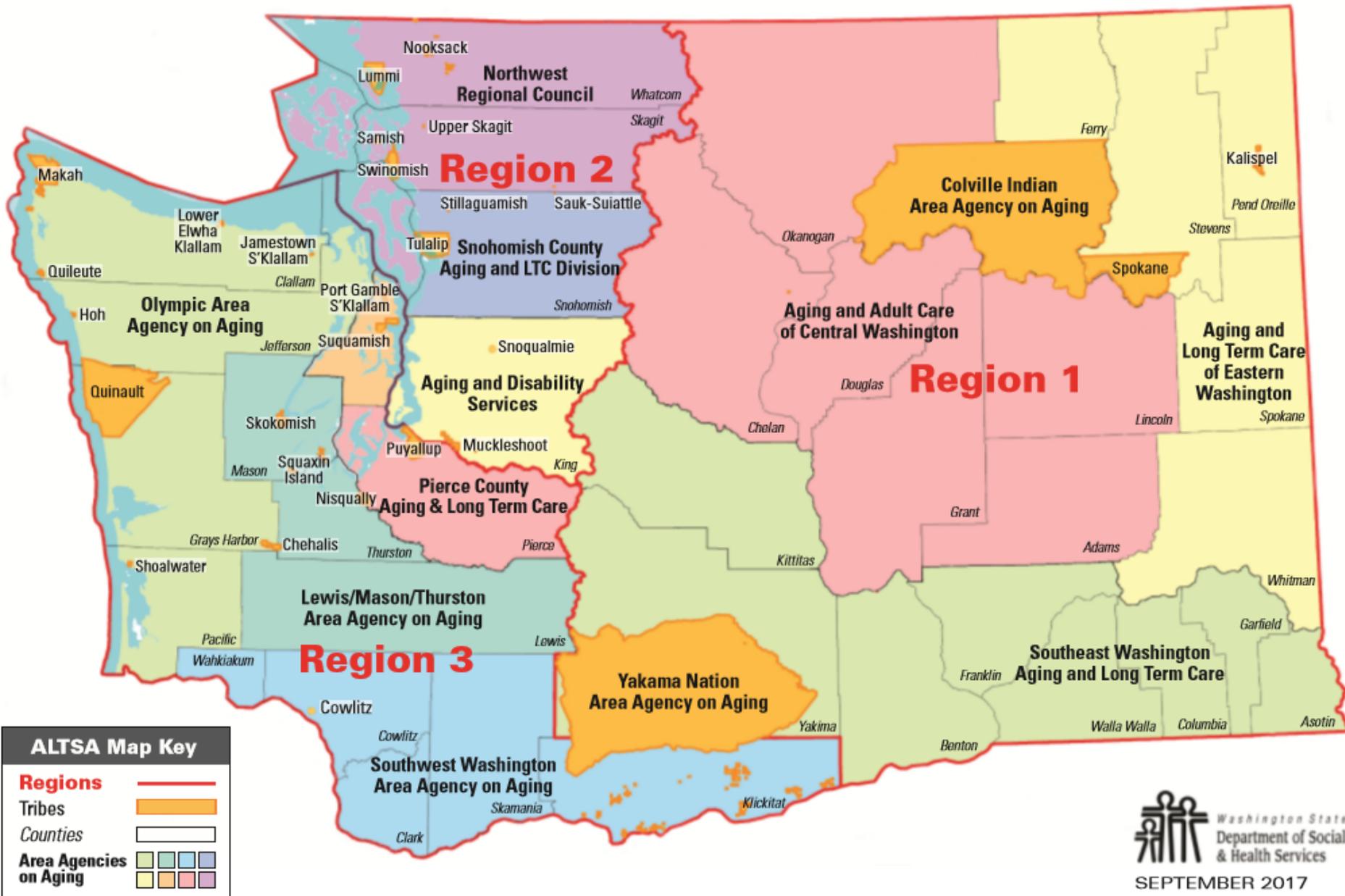
# What is a Kinship Navigator?

- **Listen, support and advocate for Kinship families**
- **Collaborate with multiple agencies (tribal, state, community agencies)**
- **Provide information, referral, education and advocacy**
- **Kinship is Prevention**
- **Families that are served by KN are made stronger**
- **Community Involvement**

# Tribal Kinship Navigators

- Confederated Tribes of the Colville Reservation
- Lummi Tribe
- Makah Tribe
- Port Gamble/S'kallam Tribe
- Quileute Tribe
- Samish Tribe
- Yakama Nation

# AL TSA: Regions, Tribes, and AAAs (2017)



# Tribal Kinship Navigators

## **Families served through the Tribal KNP:**

- 663 kinship caregivers received services
- 1321 different types of information and referrals to various services
- 950 children living with a tribal caregiver

# Voices of Children Contest

**16th Annual**  
**VOICES OF CHILDREN**



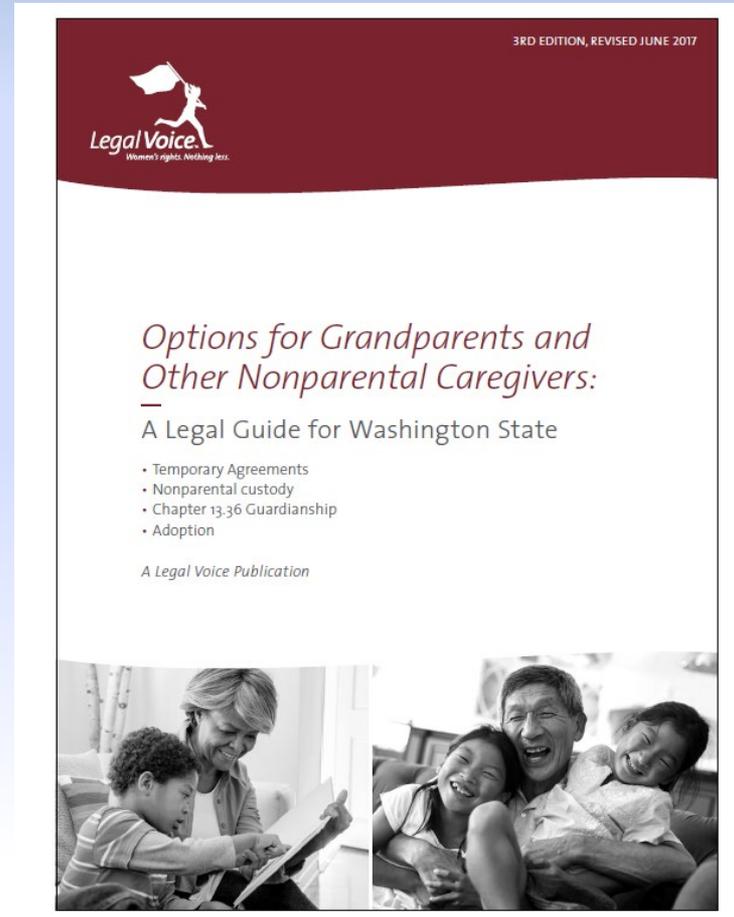
**Raised by  
Grandparents and Other Relatives  
2019**

## Annual Voices of Children Contest

- For children and youth, ages 5 – 19 years of age being raised now or in the past by a relative, other than their parents
- Submit a short essay, poem, or drawing that depicts how living with their kinship caregivers has made a positive difference in their life
- Each submission will be included in a booklet called “Voices Of Children” (without their last name or location identified)
- Prizes awarded in three different age groups: 5-7, 8-12 and 13-19 years old.

# Legal Information

- “Options for Grandparents and Other Nonparental Caregivers: A Legal Guide for Washington State”
  - The handbook is available in English and Spanish at <https://www.legalvoice.org/options-grandparents>

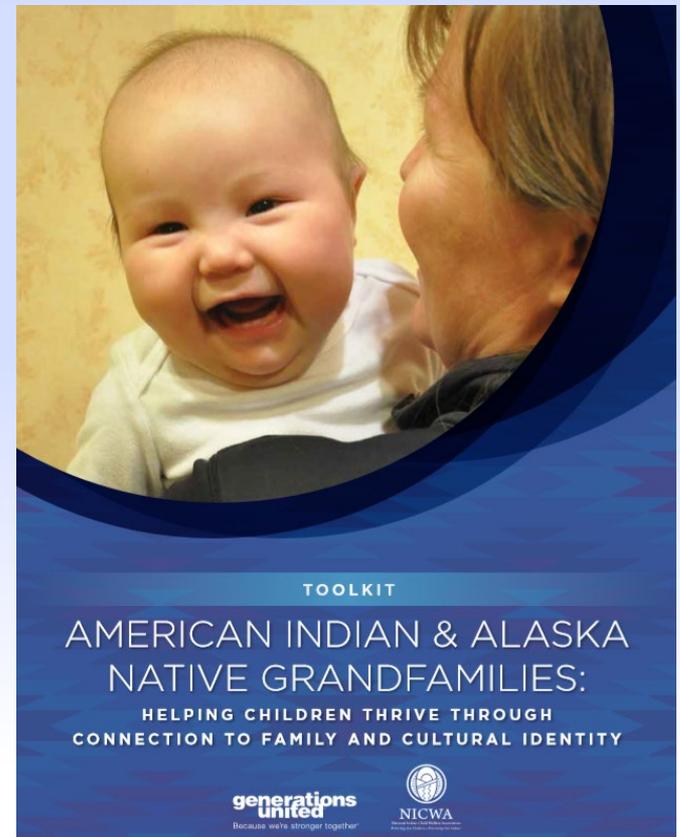


# Kinship Tool Kit

## Generations United and NICWA

American Indian & Alaska Native Grandfamilies: Helping Children Thrive Through Connection to Family and Cultural Identity

<https://www.gu.org/resources/american-indian-alaska-native-grandfamilies-helping-children-thrive-through-connection-to-family-and-cultural-identity/>



# Helpful Websites and General Information

## “Do You Know” brochure (DSHS 22-1120)

- <https://www.dshs.wa.gov/sites/default/files/SESA/publications/documents/22-1120.pdf>

## DSHS — ALTA Kinship Care Webpage

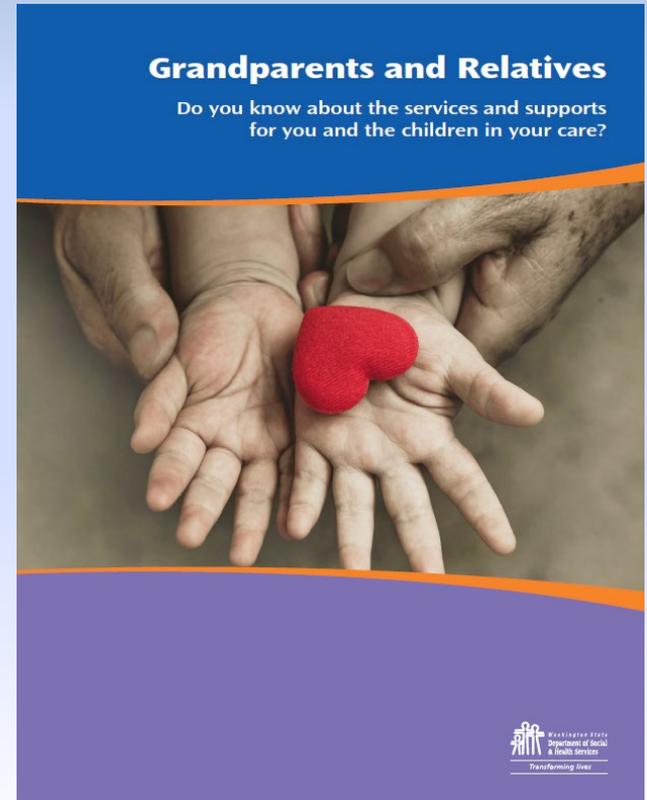
- <https://www.dshs.wa.gov/altsa/home-and-community-services-kinship-care/kinship-care>

## 211 Washington

- <https://wa211.org/>

## Apply for public food, cash and child care benefits

- Washington Connection--  
<https://www.washingtonconnection.org>



# Thank you!

- **We appreciate all the work you do on behalf of children and families.**

## Contact Information

- Kinship and Lifespan Respite Program Manager
  - Geene Delaplane 360-584-3666
- Kinship Navigator Project Manager
  - Rosalyn Alber 360-584-2450

# Grandparents and Relatives

Do you know about the services and supports  
for you and the children in your care?



There are more than  
43,000 grandparents and  
other relatives raising children  
in Washington State.  
Here are various resources,  
benefits and support services  
available to you.

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# Financial Help

## Temporary Assistance for Needy Families (TANF) Child-Only Grant

Monthly cash grants may be available for relatives who are the primary caregivers raising children. Only the child's income is considered when determining eligibility. Caregivers may also be eligible for a TANF grant for themselves if they meet the eligibility criteria.

- Recipients of Child-Only TANF may be eligible for additional, time-limited cash payments for help with emergency housing or utility needs through the Additional Requirements for Emergent Needs (AREN) program. Ask your local Community Services Office (CSO) about these funds.
- To see if you qualify for assistance, visit [www.washingtonconnection.org](http://www.washingtonconnection.org)

### Find your local Community Services Office

Phone: 1-877-501-2233

Web: [www.dshs.wa.gov/esa/esa-find-office](http://www.dshs.wa.gov/esa/esa-find-office)

## Kinship Caregivers Support Program (KCSP)

Short-term funds may be available for relatives caring for children who are not involved with the formal foster care system to help pay for basic needs (food, housing, clothing, etc).

### How to Apply

Phone: 1-800-422-3263 or  
360-725-3543

### Locate a local KCSP Office (Aging and Long-Term Support Administration)

Phone: 360-725-3544

Web: [www.dshs.wa.gov/kinship-care](http://www.dshs.wa.gov/kinship-care) (Click on "Financial Help")

# Department of Children, Youth and Families (DCYF) Resources

## Supports for Kinship Caregivers Involved with the Formal Child Welfare System

- Relative Support Service Funds: provide short-term support to unlicensed relatives and suitable others parenting a child that has been placed in their care by DCYF.
- Concrete Goods: Funds to help support or maintain a child's placement with their family member. May be available for unlicensed kinship caregivers or those in the process of becoming licensed.
- Additional Resources: Kinship caregivers may be eligible for additional supports such as a one-time clothing voucher or mileage reimbursement for transportation to activities such as counseling and medical appointments. Please talk with your child's caseworker for more information.



William, age-5. One of the winners in the 5-7 year-old category.

# Health Resources

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## Health Insurance for Children in Kinship Care

Children living with a relative caregiver may be eligible for free Washington Apple Health coverage. An application must be filled out online or by calling the customer service center.

- Caregivers: May be eligible for free or low-cost health insurance coverage for themselves and may apply at the same time they apply for the child in their care.

### Apply for Washington Apple Health

Phone: 1-855-923-4633

Web: [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org)

## Health Insurance for Children in Foster Care – Apple Health Core Connections

Statewide program operated by the managed care contractor, Coordinated Care of Washington.

- This program is for children and youth who are in foster care, Adoption Support, Extended Foster Care and alumni of foster care until age 26.
- Tribal children remain in the Apple Health fee for service program unless their tribe or the Department of Children Youth and Families (DCYF) caseworker chooses to enroll the child into Apple Health Core Connections.
- Children who are dependents of the State are automatically eligible for Washington Apple Health (managed care or fee for service) and no application is needed. DCYF electronically informs Health Care Authority when a child is taken into foster care and eligibility is rapidly established.
- For more information, contact your child's case worker or call Coordinated Care of Washington.

### Contact Coordinated Care of Washington

Phone: 1-844-354-9876

Web: [www.coordinatedcarehealth.com/members/foster-care.html](http://www.coordinatedcarehealth.com/members/foster-care.html)

## Washington Poison Control Centers

Provides immediate, 24/7 free expert treatment advice and assistance by phone in case of exposure. All calls are confidential.

### Contact the Washington Poison Control Center

Phone: 1-800-222-1222

Web: [www.wapc.org](http://www.wapc.org)

## Take-Back Your Meds

Safely dispose of unused medication at a take-back location.

### Find a Take-Back Your Meds location

Web: [www.takebackyourmeds.org](http://www.takebackyourmeds.org)

## Child Health Promotion

Materials for children ages birth to six years. Materials are age specific and include information about immunizations, growth, development, safety, nutrition and other parenting topics.

### Information about Child Health Promotion

Phone: 1-866-397-0337

Web: [www.childprofile.org](http://www.childprofile.org)

## Washington State Department of Health

Publications available about hundreds of health related topics.

Web: [www.doh.wa.gov/publications](http://www.doh.wa.gov/publications)

# Health Care Providers

## Accessing health care while enrolled in Washington Apple Health

Children and adults eligible for Washington Apple Health coverage are enrolled in a managed care plan that can help identify providers for their physical and behavioral healthcare needs.

- Tribe members are not automatically assigned to a managed care plan, but instead are enrolled in fee for service coverage. Tribe members can choose to enroll in one of the managed care plans listed below. Contact your managed care plan for help.

Amerigroup Washington (AMG) . . . 1-800-600-4441

Community Health Plan of Washington (CHPW) . . . . . 1-800-440-1561

Coordinated Care of Washington (CCW). . . . . 1-877-644-4613

Molina Healthcare of Washington (MHW) . . . . . 1-800-869-7165

United Healthcare Community Plan (UHC). . . . . 1-877-542-8997

**Contact the Health Care Authority to find out which plan you're enrolled in or to request a change**

Phone: 1-800-562-3022

## Consent to Health Care for the Child in Your Care (Consent for Medical Care form)

State law allows relative caregivers to give informed consent for medical care for the child in their care (including dental and mental health care), even if they do not have a court order.

- Caring for a child in State custody? Talk with the social worker to understand the court's role in approving medical care.

### Information about Health Care Consent

**Web:** [www.dshs.wa.gov/kinshipcare](http://www.dshs.wa.gov/kinshipcare) (\*click on Publications and search for the brochure titled Consent to Health Care for the Child in Your Care: A Kinship Caregivers Guide).

**Phone:** 1-800-422-3263 or 360-725-3543

Request a legal packet from the Aging and Long-Term Support Administration: 360-725-3544

For more in-depth information about healthcare consent, visit [www.washingtonlawhelp.org/issues/family-law/non-parents-caring-for-children](http://www.washingtonlawhelp.org/issues/family-law/non-parents-caring-for-children)

### Suicide Prevention Lifeline

**Phone:** 1-800-273-8255

**Web:** [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

### Emergency Assistance

Call 911 if someone needs help right away or if there is an immediate danger.

# Dental Services for Children and Adults

## Washington Apple Health

Dental coverage moved to managed care as of July 1, 2019.

### For more information

**Web:** <https://www.hca.wa.gov/about-hca/apple-health-medicare/apple-health-dental-moving-managed-care>

## Locate-Low Cost Dental Clinics by County

**Web:** [www.theMightyMouth.org](http://www.theMightyMouth.org)

## WA State Dental Association

Find a dentist, reduced cost dentistry and special needs dentistry.

**Web:** [www.wsda.org](http://www.wsda.org)

## 2-1-1 Washington Information Network (WIN)

Speak with an information and referral specialist for assistance finding local dentists. Translators available.

**Phone:** 2-1-1

## Washington State Department of Health Dental Resources

**Web:** [www.doh.wa.gov/YouandYourFamily/OralHealth/FindingDentalCare](http://www.doh.wa.gov/YouandYourFamily/OralHealth/FindingDentalCare)

## The Center for Pediatric Dentistry (CPD)

A collaboration between the University of Washington and Seattle Children's Hospital that provides specialty dental care to children of all ages, including children with special needs. Apple Health is accepted.

### Contact the Center for Pediatric Dentistry

**Phone:** 206-543-5800

**Web:** [www.thecenterforpediatricdentistry.com](http://www.thecenterforpediatricdentistry.com)

# Help with Behavioral Health and Substance Use Disorders

## Local Agencies Providing Substance Abuse Disorder Services

**Phone:** 1-866-789-1511 Washington Recovery Help Line

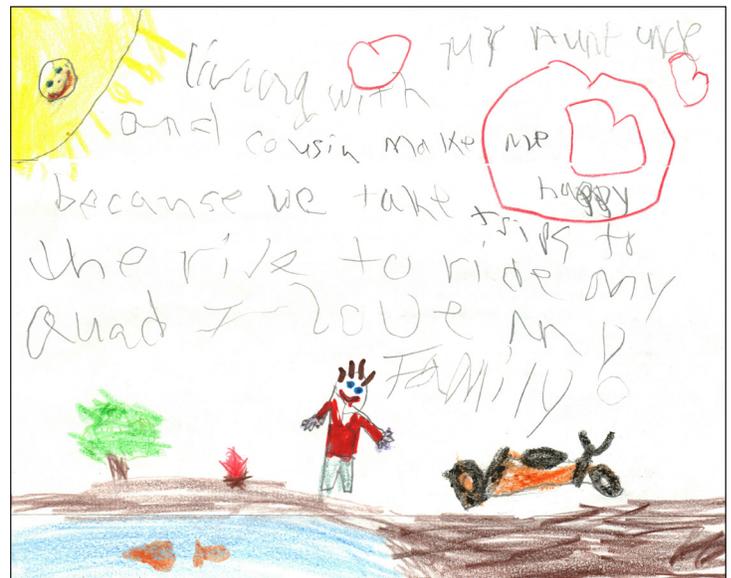
**Web:** [www.warecoveryhelpline.org](http://www.warecoveryhelpline.org)

*For local agencies providing substance use disorder services to individuals enrolled in Apple Health coverage, contact your managed care plan.*

## StartTalkingNow.org

Sponsored by the Washington Healthy Youth Coalition (WHYC). The mission is to prevent and reduce under age alcohol and marijuana use.

**Web:** [www.StartTalkingNow.org](http://www.StartTalkingNow.org)



Kaden, Age-5. Second winner in the 5-7 year-old category

## Washington State's Wraparound with Intensive Services (WISE)

Comprehensive behavioral health services for Medicaid eligible youth from birth to age 21 with complex behavioral health needs and their families.

**Web:** <https://www.hca.wa.gov/billers-providers-partners/behavioral-health-recovery/wraparound-intensive-services-wise>

## Resources for locating Behavioral Health services: Washington State Health care Authority

**Phone:** 1-360-725-1500

**Web:** [www.hca.wa.gov/contact-hca](http://www.hca.wa.gov/contact-hca)

## Teen Link

A confidential and non-judgmental help line for teens. Trained peer volunteers answer phone calls every evening from 6 – 10 pm. The volunteers listen to concerns and provide information about agencies serving youth in Washington State. Teen Link is a program of Crisis Connections.

**Web:** [www.warecoveryhelpline.org/resources](http://www.warecoveryhelpline.org/resources)



*Sevon, Age-11. Participant could not be judged in the contest because he is in the care of an agency employee.*

## Children with Special Needs

### Washington State Early Support for Infants and Toddlers (ESIT)

Provides intervention services for children aged birth to three.

If you care for a child with a disability or have a concern about a child's development, contact the Family Health Hotline and ask for your local Family Resource Coordinator.

**Phone:** 1-800-322-2558 (TTY 711)

**Web:** [www.dcyf.wa.gov/services/child-development-supports/esit](http://www.dcyf.wa.gov/services/child-development-supports/esit)

### Office of Superintendent of Public Instruction (OSPI)

Information about Special Education in Washington State.

**Web:** [www.k12.wa.us/SpecialEd/Fam](http://www.k12.wa.us/SpecialEd/Fam)

### DSHS Developmental Disabilities Administration (DDA)

Services for people diagnosed with an intellectual or developmental disability or delay. Services depend on need and funding. Services include individual and family support, personal care, employment support, day programs and residential care.

**Web:** [www.dshs.wa.gov/dda](http://www.dshs.wa.gov/dda) (Information listed under "Eligibility")

## Informing Families

News and information for families and individuals to promote active participation in planning and building a network of support and opportunities. This resource is provided by the Washington State Developmental Disabilities Council in collaboration with the DDA and other statewide partners.

**Web:** [www.informingfamilies.org](http://www.informingfamilies.org)

## Children with Special Health Care Needs

Program that promotes an integrated system of services for infants, children and youth up to 18 years of age who have are at high risk for chronic physical, developmental, behavioral or emotional conditions and require special services.

**Web:** [www.doh.wa.gov/YouandYourFamily/InfantsandChildren/HealthandSafety/ChildrenwithSpecialHealthCareNeeds](http://www.doh.wa.gov/YouandYourFamily/InfantsandChildren/HealthandSafety/ChildrenwithSpecialHealthCareNeeds)

## PAVE

Support, training, information and resources to empower individuals, youth and families impacted by disabilities.

**Phone:** 1-800-5-PARENT

**Web:** [www.wapave.org](http://www.wapave.org)

# Child Care, Early Learning and Respite

Relative caregivers may qualify for one of Washington State's funded child care programs, including:

## Working Connections Child Care (WCC) for employed caregivers

## Seasonal Child Care for seasonal agriculture workers

Caregivers may qualify even if only one person in a couple is working. If both are legal guardians of the child and listed in court documents, both must be working to qualify.

## Homeless Child Care for families who are temporarily homeless (limited to certain counties):

Caregivers must not be eligible for any other state funded child care program and must be engaged in an approved activity, such as looking for work or housing.

## Contact the Washington State Customer Service Center

**Phone:** 1-844-626-8687

**Web:** [www.dcyf.wa.gov](http://www.dcyf.wa.gov)

## Child Care Aware

Offers child care and early learning programs information and referral.

**Phone:** 1-866-416-4321

**Web:** [www.childcarenet.org](http://www.childcarenet.org)

## Child Find

An IDEA mandate that seeks to identify all children with disabilities who would benefit from public services.

## If you suspect your child under the age of three may have a disability, contact Within Reach of Washington State

**Phone:** 1-800-322-2588

**Or:** Contact your local school district to locate the Child Find program for children over the age of three.

## Early Childhood Education and Assistance Program (ECEAP) and Head Start

Free services for three and four year olds who have risk factors that could interfere with school activities, including children in Kinship Care.

### Contact Early Child Education and Assistance Program and Head Start

Phone: 425-453-1227

Web: [www.wsaheadstarteceap.com](http://www.wsaheadstarteceap.com)

## Lifespan Respite

Provides temporary caregiving relief through planned or emergency respite for family caregivers that care for a child or adult with special needs. Respite care is provided in home and other settings, such as camps.

### Contact Lifespan Respite, WA sponsored by PAVE

Phone: 1-800-572-7368

Web: [www.lifespanrespitewa.org](http://www.lifespanrespitewa.org)

## Department of Children, Youth and Families (DCYF) Respite

Available services for licensed and unlicensed caregivers with the placement of children in DCYF or tribal custody. Caregivers are encouraged to access respite care services in emergency situations and to support the child's placement stability with caregiving family. Contact the child's caseworker with more information.

# Educational Advocacy

## Office of the Education Ombuds (OEO)

Resolves complaints, disputes and problems between families and public schools in all areas that effect student learning.

The OEO operates independently from the public school system. Free services are available for students from kindergarten to 12th grade and are confidential.

### Contact OEO with questions about the public education system

Phone: 1-866-297-2597

Web: [www.oeo.wa.gov](http://www.oeo.wa.gov)

## McKinney Vento

Education of Homeless Children and Youth Assistance Act is a federal law that ensures immediate enrollment and educational stability for homeless children and youth. McKinney Vento provides federal funding to states for the purpose of supporting district programs that serve homeless students.

### Learn more about McKinney Vento

Phone: 360-725-6000 (Office of Superintendent of Public Instruction)

Web: [www.k12.wa.us/HomelessEd](http://www.k12.wa.us/HomelessEd)



Angelia, Age-15. Artwork for the Cover of the 2019 booklet.

# Food Assistance

## Washington's Basic Food Program

Monthly food benefits.

### See if you qualify and apply for assistance

Web: [www.washingtonconnection.org](http://www.washingtonconnection.org)

### Find your local Community Services Office (CSO)

Phone: 1-877-501-2233

Web: [www.dshs.wa.gov/esa/esa-find-officeorg](http://www.dshs.wa.gov/esa/esa-find-officeorg)

## Free and Reduced School Breakfast and Lunch

If a child is eligible for Temporary Assistance for Needy Families (TANF), foster care, McKinney Vento or Basic food, he/she may also be eligible for free or reduced school meals.

### Contact your child's school for more information.

## Women, Infants and Children (WIC) Nutrition Program

A supplemental food program for children ages 0-5 and new or pregnant mothers. Relatives and foster parents that are primary caregivers of children may also receive WIC services for the children in their care. WIC provides monthly checks to help purchase healthy food, nutrition education and health screenings and referrals.

### Find your local WIC office

Phone: 1-800-322-2588

Web: [www.doh.wa.gov/YouandYourFamily/WIC](http://www.doh.wa.gov/YouandYourFamily/WIC)

## Summer Meal Program

All children 18 years or younger, regardless of household income, are eligible for free meals from organizations that serve meals during summer.

Phone: 1-866-3-HUNGRY

Web: [www.fns.usda.gov/summerfoodrocks](http://www.fns.usda.gov/summerfoodrocks)

### Find your local Food Bank

Phone: 211

Web: [www.211.org](http://www.211.org)

# Child Support

## Division of Child Support (DCS)

You can apply for DCS services even if you don't receive any public assistance. Receiving benefits from Temporary Assistance for Needy Families (TANF) will automatically result in DCS establishing a case.

- DCS establishing paternity can help the family access benefits the child may be eligible for such as Social Security and also help provide a family medical history.
- If you are afraid that establishing paternity or enforcing child support may be dangerous for you or the child, contact your local Community Services Office to discuss "good cause" which is a waiver of child support enforcement.
- DCS will enforce an existing child support order, such as a divorce decree, or will establish a support order is needed. DCS sets support obligations based on a parent's ability to pay. DCS will also attempt to have the parents cover the child on their own medical insurance, if available.

### Contact the Division of Child Support

Phone: 1-800-422-KIDS

Web: [www.childsupportonline.wa.gov](http://www.childsupportonline.wa.gov)

# Kinship Services

## Kinship Navigators

Experts that serve as a one-stop-shop providing information and assistance for people caring for their relative's child(ren). They can help connect you with lots of services in the community. Kinship Navigators serve most areas of the state. Tribal Navigators serve a limited number of tribes.

### Contact a Kinship Navigator

Phone: 1-800-422-3263 or 360-725-3543 or 360-725-3544

Web: [www.dshs.wa.gov/kinship-care](http://www.dshs.wa.gov/kinship-care) (click on "Kinship Navigator")

## Local Relatives Raising Children Support Groups

Phone: 1-800-422-3263 or 360-725-3543 or 360-725-3544

Web: [www.dshs.wa.gov/kinshipcare](http://www.dshs.wa.gov/kinshipcare) (Click on "Support Groups" and select your county or city)

## Alliance for Child Welfare Excellence

Offer free training for both kinship caregivers (licensed and unlicensed) and foster parents. Classes are offered during the evenings, weekends and online.

Web: [www.allianceforchildwelfare.org/caregivers](http://www.allianceforchildwelfare.org/caregivers)

## Department of Children, Youth and Families

Information about kinship care, foster care and the child welfare system.

Web: [www.dcyf.wa.gov](http://www.dcyf.wa.gov)  
[www.dcyf.wa.gov/services/foster-parenting](http://www.dcyf.wa.gov/services/foster-parenting)

# Printed Kinship Care Materials

## Grandparents and Relatives – Do You Know about Services and Supports for You and the Children in Your Care?

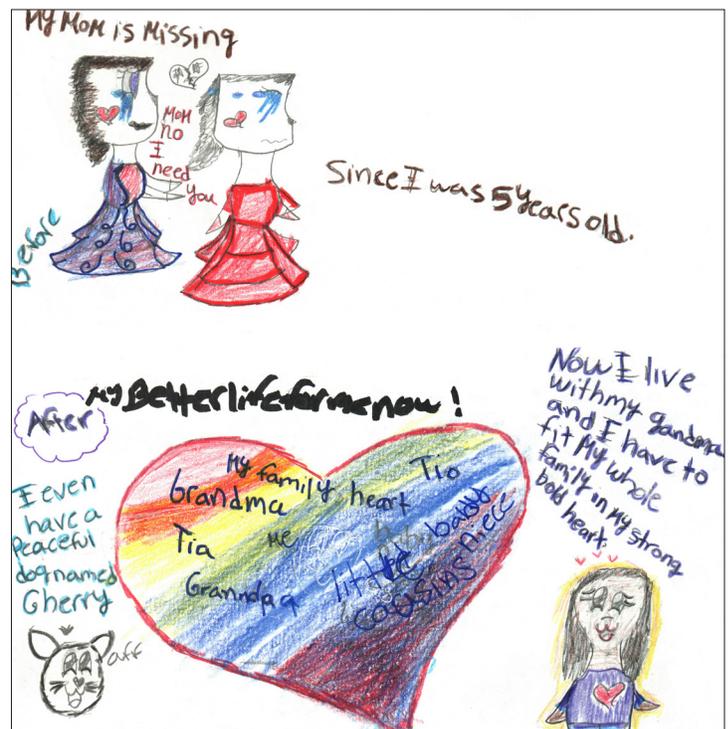
(DSHS 22-1120)

A list of resources, benefits and support services available to relatives raising children.

### Download online or request a print copy at

Web: <https://www.dshs.wa.gov/os/publications-library>

Available in English, Cambodian, Chinese, Korean, Laotian, Russian, Somali, Spanish and Vietnamese.



Magdalena, Age-11. One of the winners in the 8-12 year-old category.

## **A Guide to Child Support Services for Relative Caregivers (DSHS 22-1143)**

An explanation of services provided by the Division of Child Support (DCS) for people caring for a relative's child.

### **Download online or request a print copy at**

**Web:** <https://www.dshs.wa.gov/os/publications-library>

*Available in English*

## **Kinship Care: Relative and Suitable Other Placement (DSHS 22-1765)**

Department of Children, Youth and Families (DCYF) publication providing basic information about what kinship caregivers can expect if DCYF places a child in kinship care.

## **Understanding the Dependency Court Process for Caregivers**

A DCYF publication explaining the complex dependency court process and how it impacts family.

## **Additional Materials**

Contact the Aging and Long-Term Support Administration for a packet of information, Legal Voice's Guide for Washington State, a legal options DVD and related brochures.

**Phone:** 1-800-422-3263 or 360-725-3543 or 360-725-3544

# **Legal Resources**

## **Northwest Justice Project (NJP)**

Free self-help information, including a website and toll-free hotline. NJP's Coordinated Legal Education, Advice and Referral (CLEAR) program provides free legal assistance with civil legal problems for eligible low-income people.

### **Contact information for people under age 60 and low income**

**Phone:** 1-888-201-1014

**Phone:** (King County): 206-464-1519

### **Contact information for people over the age 60 at any income level**

**Phone:** 1-888-387-7111

## **Washington Law Help**

Free legal services for low income people in Washington, including legal education materials and basic information about legal problems. Legal forms with detailed instructions are available to help you represent yourself in court. Locate information about free legal aid programs, basic eligibility and contact information.

**Web:** [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org)

## **Options for Grandparents and Other Non-Parental Caregivers**

A legal guide for Washington State developed by Legal Voice for relatives raising children.

**Web:** <https://www.legalvoice.org/tools-family>

*Print copies are available through ALISA or Kinship Navigators.*

## Consent to Health Care for the Child in Your Care: A Kinship Caregiver's Guide

(DSHS 22-1119)

A publication describing a relative's rights and responsibilities

### Download online or request a print copy at

**Web:** <https://www.dshs.wa.gov/os/publications-library>

*Available in English, Cambodian, Russian, Somali, Spanish and Vietnamese.*

## Contacts for Receiving Legal Assistance

**Phone:** 1-800-422-3263 or 360-725-3543 for a legal packet from the Aging and Long-Term Support Administration

**Web:** [www.washingtonlawhelp.org/issues/family-law/non-parents-caring-for-children](http://www.washingtonlawhelp.org/issues/family-law/non-parents-caring-for-children)

# General Resources

## Kinship Care in Washington State

Offers information about resources and services such as benefits, health care, legal issues and more.

**Phone:** 1-800-422-3263

**Web:** [www.dshs.wa.gov/kinshipcare](http://www.dshs.wa.gov/kinshipcare)

## WithinReach Hotline

Provides information and referrals about health and social services related to raising children of all ages, including health insurance, nutrition, immunization, child care, child development and children with special needs.

**Phone:** 1-800-322-2588 (TTY 771)

**Web:** [www.parenthelp123.org](http://www.parenthelp123.org)

## Community Living Connections

Learn about services and support options in your community for older adults, persons with disabilities and caregivers.

**Phone:** 1-855-567-0252

**Web:** [www.washingtoncommunitylivingconnections.org](http://www.washingtoncommunitylivingconnections.org)

# Questions and Additional Information

## Department of Children, Youth and Families (DCYF)

Holly Luna: 360-902-8035 or 360-870-1423

## Economic Service Administration (ESA)

Sarah Garcia: 360-522-2214 or

Patrick Budde: 360-725-4769

## Health Care Authority (HCA)

Kevin Cornell: 360-725-1423

## Aging and Long-Term Support Administration (AL TSA)

Rosalyn Alber: 360-725-3543







# Lifespan Respite WA

**In partnership with caregivers,  
families, friends, and neighbors being supported,  
and respite providers.**

# Land Acknowledgement



**We acknowledge we are on indigenous lands. The traditional territory of the Coast Salish People, specifically the Puyallup People,\* known for generous and welcoming behavior to all people who enter their lands" Living off the waters of the Puyallup River fed by Mount Rainier, the Puyallup People fished, hunted, and traveled by these waters. They and many other indigenous peoples are still here, surviving and Since Time Immemorial. We give thanks to the elders, our Native and Indigenous colleagues, and the land itself. I honor their strength and resilience.**

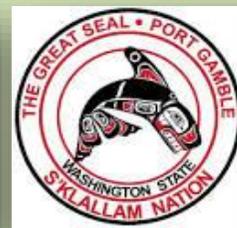
\* Our main office is located on the Tacoma Community College campus.

# Welcome to Lifespan Respite WA!

Being a caregiver is hectic,  
here are some ideas of what respite could look like...



- ✓ Shop and run errands
- ✓ Self-Care, meditation, exercise
- ✓ Volunteer
- ✓ Attend Council meetings and events
- ✓ Gathering for Fall harvest and medicines
- ✓ Connecting with a friend
- ✓ Learn a new hobby; cook, bead, dance



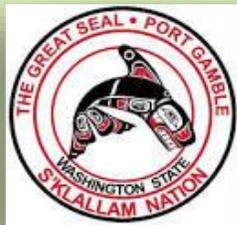
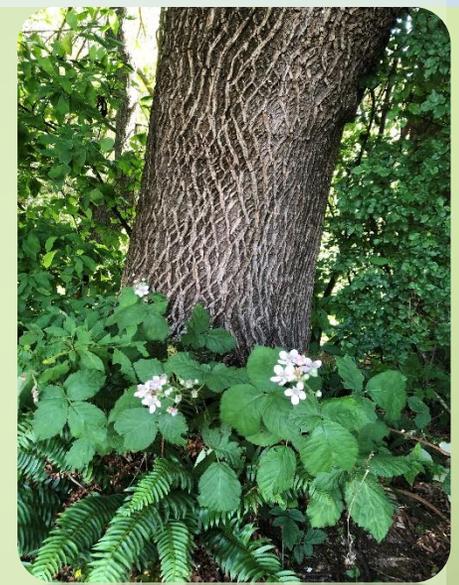
# Welcome to Lifespan Respite WA!

## What types of respite is provided?

- ✓ Support in your home/in-home services
- ✓ Camp
- ✓ Adult Day Services

*Coming soon with the new grant...*

- ✓ Recruiting respite providers that offer...
  - ✓ Classes – online and in-person
  - ✓ Memberships in gyms, YMCAs, 4-H



# Funds for Lifespan Respite WA



## Respite vouchers available for unpaid family caregivers

**Release Date:** Mar 20 2018  
DSHS Office of Communications

The Department of Social and Health Services has announced the continuation of vouchers for unpaid family caregivers to receive respite through a federal grant from the Administration for Community Living. Respite services provide caregivers access to another trained professional so they can have some time away from caregiving. One of the goals of the grant is to increase respite service options tailored to the needs of survivors of Traumatic Brain Injury (TBI) and their caregivers and to the needs of American Indians and Alaskan Natives (AI/AN).

With more than 830,000 people in Washington taking care of their loved one at home, unpaid family caregivers play an important role. While caring for a loved one can be rewarding, there are times when respite can be beneficial for both the caregiver and care-receiver.

"Caregiver support, such as respite, helps family caregivers continue to perform this vital role in society," said Bill Moss, Assistant Secretary for the Aging and Long-Term Support Administration. "Providing care for your loved one is only possible if you take care of yourself as well."



“ An idea begins with an individual and they share the idea with more individuals. Eventually it becomes a movement. ”

- Christopher Reeve

In less than five minutes you can take meaningful actions and help bring about positive change.

You can influence powerful policymakers and legislators through tools you use everyday, like email and your favorite social media. Join us and make a difference right now.

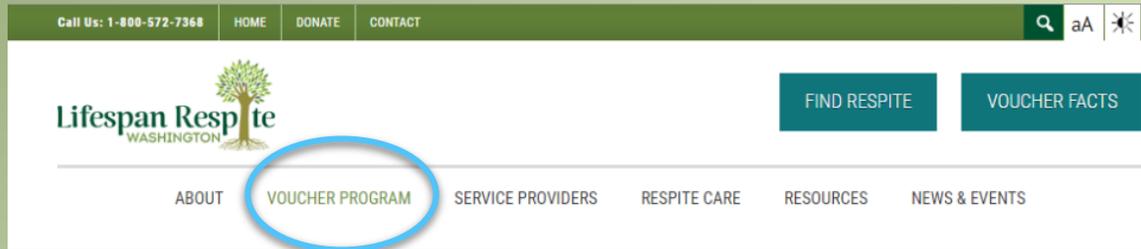


## Additional source of funds...

- ✓ Focused on paralysis of your family, friend, neighbor

- ✓ You select the respite provider, and
- ✓ They send the invoices to Lifespan Respite.

# Applying for Respite: In 2 steps...



## 1. Check Eligibility:

- ✓ Be an unpaid caregiver;
- ✓ Provide 40 or more hours per week of care/support to an individual of any age that has a special need or condition;
- ✓ Live in Washington State;
- ✓ Not enrolled in a Medicaid or other program that provides respite service, unless on a wait list and not scheduled to receive services within 30 days of application;
- ✓ Unable to afford to pay privately for respite on your own.
- ✓ Website Link: <https://www.lifespanrespitewa.org/>



## 2. Apply!

- ✓ The first link in the Application Info box **“Application if you are seeking respite”**
- ✓ It will open the application, fill it out and hit the Submit button at the end.
- ✓ If you have additional questions and/or will be sending us further documents, contact [getrespite@wapave.org](mailto:getrespite@wapave.org)

# Search and Select your respite provider!

Call Us: 1-800-572-7368 | HOME | DONATE | CONTACT |  aA

**FIND RESPITE** | **VOUCHER FACTS**

ABOUT | VOUCHER PROGRAM | SERVICE PROVIDERS | RESPITE CARE | RESOURCES | NEWS & EVENTS

## Current Registered Providers

All of our current registered respite providers are listed below. To have a more specific list of providers based on your needs, you can use the search criteria. To open the search criteria click on the plus sign next to the section. You can select search criteria by county, type of respite service, and ages served and so on.

Tips in selecting a respite provider:

- If you reside in a larger county area such as King, Pierce, Snohomish or Spokane, you may want to start with the respite providers from your main county.
- If you reside outside of these larger counties, you may want to include neighboring counties to offer more respite provider choices.
- If your list becomes too narrow, you can always unselect to widen and contact us to help you in your selection of a respite provider.
- We also offer under the Resource tab "[Potential Questions to Ask a Respite Provider](#)"

+ Counties Served

+ Respite Type

+ Ages Served

+ SN, Disabilities, Conditions Served

+ Respite Services Provided

[Registered Respite Providers](#)

Organization Name	Respite Client Access Call In number	Counties Served	Website	Respite Type	Ages Served
Addus HealthCare, Inc.	(630) 296-3400	Asotin Benton Clark Columbia Cowlitz Franklin Garfield King Kittitas Klickitat Pend Oreille Pierce Skamania Spokane Stevens Wahkiakum Walla Walla Yakima	<a href="http://www.addus.com">www.addus.com</a>	In-home Services	Children/Youth (Birth through 17 years) Adults (18 through 59 years) Older Persons (60 plus)
Advanced Health Care, Inc.	(253) 475-7744	Pierce Thurston	<a href="http://www.advanced-healthcare.com">www.advanced-healthcare.com</a>	In-home Services	Children/Youth (Birth through 17 years) Adults (18 through 59 years)

## Current Registered Providers

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- If your list becomes too narrow, you can always unselect to widen and contact us to help you in your selection of a respite provider.
- We also offer under the Resource tab "[Potential Questions to Ask a Respite Provider](#)"

+ Counties Served

+ Respite Type

+ Ages Served

+ SN, Disabilities, Conditions Served

+ Respite Services Provided

[Registered Respite Providers](#)

**Counties Served**

<input type="checkbox"/> Adams	<input type="checkbox"/> Asotin	<input type="checkbox"/> Benton	<input type="checkbox"/> Chelan	<input type="checkbox"/> Clallam	<input type="checkbox"/> Clark
<input type="checkbox"/> Columbia	<input type="checkbox"/> Cowlitz	<input type="checkbox"/> Douglas	<input type="checkbox"/> Ferry	<input type="checkbox"/> Franklin	<input type="checkbox"/> Garfield
<input type="checkbox"/> Grant	<input type="checkbox"/> Grays Harbor	<input type="checkbox"/> Island	<input type="checkbox"/> Jefferson	<input type="checkbox"/> King	<input type="checkbox"/> Kitsap
<input type="checkbox"/> Kittitas	<input type="checkbox"/> Klickitat	<input type="checkbox"/> Lewis	<input type="checkbox"/> Lincoln	<input type="checkbox"/> Mason	<input type="checkbox"/> Okanogan
<input type="checkbox"/> Pacific	<input type="checkbox"/> Pend Oreille	<input type="checkbox"/> Pierce	<input type="checkbox"/> San Juan	<input type="checkbox"/> Skagit	<input type="checkbox"/> Skamania
<input type="checkbox"/> Snohomish	<input type="checkbox"/> Spokane	<input type="checkbox"/> Stevens	<input type="checkbox"/> Thurston	<input type="checkbox"/> Wahkiakum	<input type="checkbox"/> Walla Walla
<input type="checkbox"/> Whatcom	<input type="checkbox"/> Whitman	<input type="checkbox"/> Yakima			

**Respite Type**

<input type="checkbox"/> Day Camp	<input type="checkbox"/> Overnight Camp	<input type="checkbox"/> In-home Services	<input type="checkbox"/> Adult Day Services	<input type="checkbox"/> Educational Services/Facility
-----------------------------------	---	---	---	--

**Ages Served**

<input type="checkbox"/> Children/Youth (Birth through 17 years)	<input type="checkbox"/> Adults (18 through 59 years)	<input type="checkbox"/> Older Persons (60 plus)
--	---	--

**SN, Disabilities, Conditions Served**

<input type="checkbox"/> Brain Injury	<input type="checkbox"/> Emotional/Behavioral	<input type="checkbox"/> Intellectual/Developmental Disability (autism, Down Syndrome, etc.)	<input type="checkbox"/> Memory Condition (Alzheimer's/Dementia, etc.)	<input type="checkbox"/> Mental Health Disorder	<input type="checkbox"/> Neurological (Parkinson's Disease, ALS, Multiple Sclerosis, etc.)
<input type="checkbox"/> Physical Disability (hip surgery, stroke, etc.)	<input type="checkbox"/> Other				

Link to Search: [Find a Provider](#)

# You can...print & download



## Lifespan Respite WA

Thank you for all the care and support you provide! These search results are intended to help you find a currently registered respite provider for the services you decide are best for you and the person(s) you support. This is not an endorsement by the program, its funder(s) or PAVE regarding any respite providers and/or their services.

Date Searched : 09/03/2020

Organization Name	Warm Beach Camp
Organization Phone	(360) 652-7575
Website	<a href="https://www.warmbeach.com/">https://www.warmbeach.com/</a>
Counties Served	Island, King, San Juan, Skagit, Snohomish, Thurston, Whatcom
Respite Services Provided	

Organization Name	Korean Women's Association
Organization Phone	(253) 535-4202
Website	<a href="http://www.kwacares.org">www.kwacares.org</a>
Counties Served	Clallam, Grays Harbor, Jefferson, King, Kitsap, Lewis, Mason, Pacific, Pierce, Snohomish, Thurston
Respite Services Provided	1:1 Supervision, Light housekeeping/laundry, Light meal preparation

For assistance please contact us by:  
Phone: 1.800.572.7368, ext. 110  
Email: [getrespitew@wapave.org](mailto:getrespitew@wapave.org)

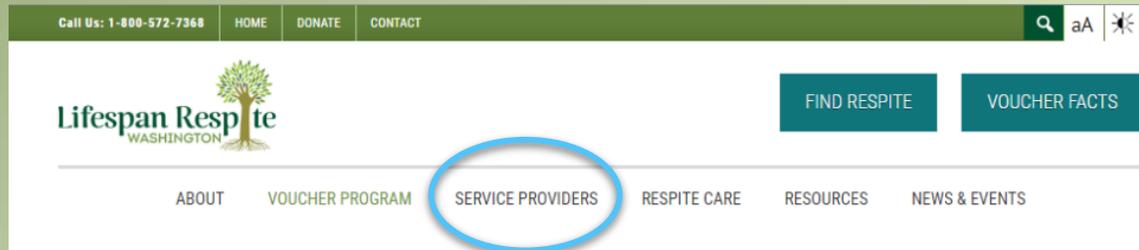
<https://www.lifespanrespitewa.org/voucher-program/current-registered-providers/>



## Welcome **NEW** RPAs!

- Brightstar Care of Puyallup
- Cascade Park Communities
- CDM Caregiving Services
- Central Stage Theater (CSTOCK), Kitsap
- City of Spokane Parks & Recreation Therapeutic Recreation Services
- Home Instead, Bellevue
- Homewatch Caregivers of Tacoma
- Needs of the Community Society
- Quiceda Community Services
- Right at Home, Seattle
- Sound Options
- Therapeutic Riding of Tri-Cities
- Visiting Angels of Tacoma
- YMCA Camp Dudley, Yakima

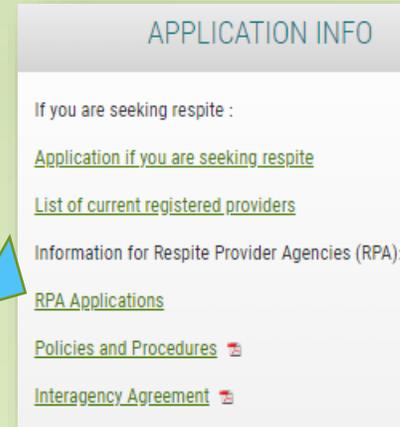
# Interested in becoming a respite provider?



1. Review [the Policies and Procedures](#) and the [Interagency Agreement](#) for Respite Provider Agencies (RPAs).

## 2. Apply!

- ✓ The first link in the Application Info box under Information for Respite Provider Agencies (RPAs):  
[“RPA Applications”](#)



**To become a registered respite provider and start serving Lifespan Respite WA voucher recipients:**

- ✓ Complete and submit your RPA application,
- ✓ Submit Proof of Insurance; and
- ✓ Submit an executed Inter-Agency Agreement
- ✓ If you have additional questions and/or will be sending us further documents, contact [giverespite@wapave.org](mailto:giverespite@wapave.org)



# Join our next conversations! Save the Dates!

Email: [getrespite@wapave.org](mailto:getrespite@wapave.org)

✓ September 23rd @ 1:30 pm

✓ November 25<sup>th</sup> @ 1:30 pm





**We appreciate  
you joining us!**

Email: [getrespite@wapave.org](mailto:getrespite@wapave.org)

Phone: (425) 740 - 3788





# *Options for Grandparents and Other Nonparental Caregivers:*

## A Legal Guide for Washington State

- Temporary Agreements
- Nonparental custody
- Chapter 13.36 Guardianship
- Adoption

*A Legal Voice Publication*





Legal Voice envisions a world where every woman and girl enjoys economic, social, and legal equality. We work toward this world by pursuing justice for all women and girls in the Northwest, through ground-breaking litigation, legislative advocacy, and educational tools to help individuals understand their rights and the legal system.

We work to ensure that all women and girls  
have these fundamental rights:

To equal treatment and to be free from discrimination;  
To decide when and how to form and maintain their families;  
To be safe wherever they are;  
To economic equality and independence; and  
To be healthy and active.

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Legal Voice  
Seattle, Washington

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Design by Tarsha Rockowitz



## ERRATA:

### *Options for Grandparents and Other Nonparental Caregivers 3<sup>rd</sup> Ed.*

#### Corrections and Updates

#### **May 2017**

Pg. 66

- **DSHS publications** listing:  
*Remove text:* “back page. For example, this publication is DSHS 22-1120. Publications requests may be placed” [This publication does not have a DSHS publication number.]

Pg. 70

- **WISe** listing:  
*Update web link:* [www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/wraparound-intensive-services-wise-implementation](http://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/wraparound-intensive-services-wise-implementation)  
*Add email:* [WISupport@dshs.wa.gov](mailto:WISupport@dshs.wa.gov)

Pg. 74

- **Economic Services Administration** contact:  
*Update contact:* Sarah Garcia, 206-725-4949, [roddisl@dshs.wa.gov](mailto:roddisl@dshs.wa.gov)

Pg. 76

- **Grandfamilies of America** listing:  
*Update web link:* [www.grandfamiliesofamerica.org](http://www.grandfamiliesofamerica.org)
- **National Family Caregiver Support Program** listing:  
*Update web link:* [www.acl.gov/programs/support-caregivers/national-family-caregiver-support-program](http://www.acl.gov/programs/support-caregivers/national-family-caregiver-support-program)

#### **April 2018**

- **Update ALL explanations of TANF benefits income guidelines.** For example:
  - **“TANF:** To apply for TANF benefits, you need to contact the Department of Social and Health Services (DSHS). For both [Depending on the] type of grant, DSHS will consider certain income of all adults and children...” (Pg. 12)

- **Update ALL references to the TANF Child-Only Grant:** The income guidelines for the TANF Child-Only Grant have changed. DSHS will now consider *only the income of the child* when determining eligibility. For example:
  - **“TANF CHILD-ONLY GRANT:** A TANF grant in which the government provides grant funds to the child based on the income of the child ~~and all adults and children in the household~~ (eligibility is different for certain child welfare cases). The Child-Only grant has no time limit.” (Pg. 62)

Pg. 54

- **Update to “Non-Parents’ Visitation Rights”**

*Replace ALL text with:*

“Beginning July 2018: Certain non-parent relatives and step-relatives have the right to ask the court for visitation with a child. Extended family members of a Native American child also have this right – *see the “Indian Child Welfare Act” section of this chapter.*

If a court has jurisdiction over the child, you must file the request with that court. If not, your request must be filed in the county where the child lives most of the time. You may not petition the court for visitation more than once.

You must show the court clear and convincing evidence that

- you have a significant, ongoing relationship with the child;
- that relationship has lasted at least two years (or at least half the child’s life, if under two years old);
- visits with you are in the child’s best interest; and
- the child will or likely will suffer harm if visitation is not granted.

The court will presume that a fit parent or guardian’s decision to deny visitation is in the best interest of the child. If the court accepts review, it will consider a variety of factors along with your evidence, such as the child’s relationship with the parent(s) or legal guardian; why there is an objection to your visitation; the effect visitation may have on the child; and other factors related to the child’s best interest.

You may have to pay the attorney fees and costs of anyone who responds to your request, even if your request is granted.

If you are interested in asking the court for this visitation, you should talk to a lawyer. *See “Preparing to See a Lawyer” later in this chapter.”*

Pg. 75

- **AARP listing:**  
*Add: “Use the search function to find the Guide.”*  
*Remove mailing address.*

Pg. 76

- **National Kinship Alliance for Children listing:**  
*Update web link: [www.kinshipalliance.org](http://www.kinshipalliance.org)*

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## Caution

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This booklet is not intended to be and should not be used as a substitute for legal advice regarding specific factual situations. This booklet cannot analyze your individual needs and concerns. If legal advice is required, the services of a lawyer should be sought. The information in this booklet is current as of February, 2017. Laws can change and readers should consult a lawyer if they need to be sure that specific legal information is current.

# 3rd Edition Preface

Throughout history, extended family has helped with child rearing. But in recent years they are increasingly becoming primary caregivers. Nationwide, millions of children are being raised by their grandparents, other relatives, or non-relatives. This can happen when a child has been abused, neglected, or abandoned because one or both parents struggle with addiction, are imprisoned, develop mental illness, or are dealing with other issues that keep them from safely caring for a child. Nonparental caregivers from every community and at every income level are facing the difficult challenges this situation can create. One of those challenges is establishing a legal relationship with the child.

*Options for Grandparents and Other Nonparental Caregivers* is a practical guide for caregivers who want to establish a legal relationship with the children in their care. Written in plain language, it is designed to be used by grandparents, other caregivers, and the social service providers who work with them.

Legal Voice is pleased to offer the 3rd edition of this booklet both in print and online at [www.legalvoice.org](http://www.legalvoice.org).

Legal Voice gratefully acknowledges the assistance of Hilarie Hauptman and the Washington State Department of Social and Health Services for providing funds to help print and distribute this booklet.

We would like to extend a very special “thank you” to: volunteer lawyers Anne Bradly Counts and Laurel Simonsen, and to Judy Lin at the King County Bar Association for updating the text; and Hilarie Hauptman at DSHS for updating the resources and coordinating the printing. We gratefully acknowledge Amy Stephson, June Krumpotick, Nancy Sapiro, Lisa K. Barton, Lori-Kay Smith, Rebecca Morrow, Shelly Willis, and Tom Berry for their work on previous editions of this booklet.

We also thank Tarsha Rockowitz for contributing her talents as a graphic designer, and Chloë Phalan, Program Coordinator at Legal Voice, for coordinating and reviewing the update.

Legal Voice hopes that the readers of this booklet find the information useful. We wish all caregivers raising children success in their difficult but immeasurably important task.

*Lisa M. Stone*  
*Executive Director*

# Introduction

---

## **Is this Booklet for Me?**

This booklet is for anyone caring for a child who is not legally their own – “nonparental caregivers” – and the social service providers who work with them. While this booklet focuses on grandparents, it can also be used by anyone raising a child for whom they are not the legal parent. Where the law applies only to grandparents or relatives, this will be noted.

## **What Will I Learn from this Booklet?**

The purpose of this booklet is to give a basic understanding of the legal options available to you in Washington State when you are (or wish to become) a long-term caregiver of children. It will help you decide how to choose among those options.

This booklet aims to answer many nonparental caregiver questions:

- What is the difference between nonparental custody (often called third-party custody) and adoption?
- When is guardianship appropriate?
- Do I qualify as a foster parent?
- How does the dependency process work?
- Will I be able to receive public assistance?
- Do I need a lawyer?
- And many others.

This booklet is not a substitute for legal advice from a lawyer. We hope the information, glossary, and resources in this booklet are helpful whether or not you are working with a lawyer.

## **Why Do I Need a Legal Relationship with the Child In My Care?**

- To consent to medical or dental treatment for the child;
- To get health insurance benefits for the child;
- To authorize what decisions you can make without having to consult the child’s parents;
- To know exactly what responsibilities you have to the child;
- To set up child care or enroll the child in school;
- And other reasons.

## How Do I Use this Booklet?

This booklet is divided into three chapters.

- **Chapter 1** is for people caring for children who are not involved in a state dependency action. It includes information on temporary parental consent agreements, nonparental custody, adoption, and an explanation of how these legal options work when there is no dependency action.
- **Chapter 2** is for people caring for children who ARE involved in a dependency action (when the state has removed a child from his or her home because of parental abuse or neglect). It explains how the dependency process works, plus details on legal options once dependency has been established. The legal options are placement with a relative, Chapter 13.36 guardianship, permanent custody, and adoption.
- **Chapter 3** gives information about visitation rights of people who are not legal parents, the Indian Child Welfare Act, the Child in Need and At-Risk Youth procedures, considerations for immigrant families, plus social service and legal resources available to provide assistance.

It is unlikely you will need all the information included in this booklet. See the table of contents on page 3 to find the information relevant to your situation.





## *Chapter 1*

# Legal Options When There Is No State Abuse or Neglect Case

---

- Temporary Parental Consent Agreements
- Nonparental custody
- Adoption

# Temporary Parental Consent Agreements

## Basic Information about Temporary Parental Consent Agreements

### What Is a Temporary Parental Consent Agreement?

A temporary parental consent agreement is a document in which a child's parent or parents ("parent(s)") give another person the temporary authority to care for the child and make decisions regarding the child.

- It can be used only if both sides agree that they want this arrangement.
- It gives the nonparental caregiver important authority over a child.
- It is only a written agreement between the child's parent(s) and the caregiver(s). It is not issued or signed by a court. It does not give the caregiver(s) any legal right to custody of the child.
- It is helpful only as long as both sides abide by it and third parties (schools, physicians, insurance companies, etc.) recognize it.

### When and Why Should I Get a Temporary Parental Consent Agreement?

A temporary parental consent agreement is appropriate when:

1. A child is living with you,
2. Both you and the child's parent(s) agree that you should have temporary custody of the child, **and**
3. The state has not removed the child from his/her home because of parental abuse or neglect.

It is useful for you to have this type of agreement because it demonstrates that the parent(s) have given you authority to make necessary decisions regarding the child. With this agreement, schools, doctors, and others are more likely to accept your legal authority to act on the child's behalf.

For the parent(s), a parental consent agreement helps to show that they have not abandoned the child. It does not take away any parental rights, because parent(s) can cancel or change the agreement at any time.

If you do not want the child's parent(s) to be able to take the child back, do not rely on a temporary parental consent agreement. Instead, you will need to obtain a custody order through a court.

*See the "Nonparental Custody" section on page 17.*

### What Is Included in a Temporary Parental Consent Agreement?

You and the parent(s) will decide exactly what the agreement should say. Typically, a temporary parental consent agreement may include the following:

- **The parent(s) agree that you have temporary residential care of the child.**  
The agreement can specify a period of time ("from September 1, 2016 until the end of the school year") or it can state that you have custody "indefinitely." Choosing "indefinitely" will be helpful if you worry that you may lose contact with the parent(s), which will make it difficult or impossible

to renew an expired agreement. Remember, the parent(s) have a right to take the child back at any time, regardless of what your agreement says. Only a court order can allow you to keep the child. *See the “Nonparental Custody” section on page 17.*

- **You are to provide all necessary care, and to make medical and dental decisions, child care arrangements, educational decisions, etc.**

The agreement can be specific or general – whatever you and the parent(s) agree to. For example, it can authorize you to make most medical decisions but say that the parent(s) will make decisions about surgery. It can set out parent visitation and child support. (*See “Informed Consent to Medical Care” in Resources at the end of this booklet.*)

- **Written notice will be given to you if the parent(s) decide to cancel the agreement.**

Parent(s) can legally cancel the agreement at any time, even without giving you notice. But you can include in the agreement a stipulation that the parent(s) will give you advance notice in writing if they want to cancel the agreement and take the child back. Because this clearly sets expectations and is in a signed contract, parent(s) may be more likely to give you written notice. To be clear, the parent(s) can simply take the child back at any time, without notice.

*See the sample Temporary Parental Consent Agreement on page 15.*

### **How Long Does the Agreement Last?**

A temporary parental consent agreement lasts as long as both you and the parent(s) want it to last. A temporary parental consent agreement may be enough to meet your needs depending on your circumstances. As noted above, a parent can take the child back at any time regardless of how long the child has lived with you. If there is concern that a parent will expose the child to harm, consider seeking a nonparental custody order from the court. *See the “Nonparental Custody” section on page 17.*

### **Should Both of the Child’s Parents Sign the Agreement?**

Yes. If one parent is absent or unknown, however, only the other parent needs to sign. In that case, the agreement should state that the one parent is absent or unknown.

### **How Do I Get a Temporary Parental Consent Agreement? Do I Need a Lawyer?**

You do not need a lawyer to draft a temporary parental consent agreement for you. There is a sample form at the end of this chapter. You can use it as is or you can change it to cover your specific needs. Your agreement should be signed in front of a notary public if possible. However, a handwritten letter signed by the child’s parent(s) is better than nothing. Keep the original agreement in a safe place and make copies for schools, doctors, etc. as needed.

If you can afford it, consider asking a lawyer to draft your agreement or review what you and the parent(s) have written. A lawyer can help you and the child’s parent(s) identify all your issues and draft an agreement that states how they will be handled. A lawyer who deals with family law issues is the best person to help you. *See listings under “Legal Help” in the resource section on page 68.*

### **What If I Am or the Child or Parent Is an Immigrant?**

*See the “Special Information for Immigrant Families” section in Chapter 3.*

## When You Have a Temporary Parental Consent Agreement

### Can the Child or I Receive Public Assistance or Similar Benefits?

Yes. If you have a temporary parental consent agreement to care for a child, this may entitle the child and you to:

- Temporary Assistance for Needy Families (TANF);
- Food benefits;
- Medical assistance;
- Child care subsidy; and
- Child support.

If you are related to the child and you qualify, you may all be eligible for a TANF “Needy Family” Grant, as well as food benefits. If only the child qualifies, he or she may be eligible for a TANF “Child-Only” Grant (sometimes called a “Non-Needy” grant).

**TANF:** To apply for TANF benefits, you need to contact the Department of Social and Health Services (DSHS). For both types of grants, DSHS will consider certain income of all adults and children in your household, as well as the income of the child who is the subject of your temporary parental consent agreement. You may be required to sign over your right to receive child support to DSHS.

Things to know about the Child-Only Grant:

- When the child has been placed in your home by a state or tribal child welfare agency and the child welfare case is still open, your income will not be considered in determining eligibility. In that situation, only the child’s income is considered.
- In all other cases, your income must be below a certain amount based on the Federal Poverty Level to be eligible for a Child-Only Grant. (As of this printing, the Washington legislature is considering raising the TANF income limit on non-parent caregivers to 400% FPL.) See “*Federal Poverty Guidelines*” listed in *Resources at the end of this booklet*.
- Your assets (home, savings, etc.) are not considered in determining eligibility for a Child-Only Grant.
- Non-relatives and some more distant relatives must undergo a Washington State Patrol background check in order to receive a Child-Only Grant.
- A Child-Only Grant has no time limit.

Things to know about the Needy Family Grant:

- The Needy Family Grant is limited to a 60-month lifetime maximum.

In general, all TANF eligibility expires when the oldest child in your household reaches age 18.

**Food benefits:** See *Resources at the end of this booklet for information about food benefits*.

**Medical assistance:** See *Resources at the end of this booklet for information about medical assistance*.

**Child care subsidy:** See *Resources at the end of this booklet for information about child care subsidy*.

**Child support:** You may be able to collect child support from the parents by contacting the Division of Child Support (DCS) who can start a child support case. If you are receiving TANF benefits for the child,

then the state will start this process on its own to reimburse the state for the payments being made to the child. *See Resources at the end of this booklet for DCS contact information.*

### Can We Get Foster Parent Payments from the State?

No. Having parental consent to care for a child does not qualify you to receive foster parent payments. To receive such payments, you need to go through a separate licensing process under a dependency placement.

### Can I Get Income Tax Benefits?

Maybe. It is best to talk to a tax professional about your specific situation. Here are two tax benefits relevant to caregivers:

**Dependency Exemption:** If you provide over half of a child's support during the year, you may be able to take the exemption for dependents on your income taxes that year. The Internal Revenue Service (IRS) may ask for proof that you are supporting the child, so it is helpful for you to keep receipts and a list of expenses.

**Earned Income Credit:** If you qualify, this credit reduces the amount of taxes you owe. If you don't owe taxes, the IRS will send you a refund check. For the 2016 tax year, the credit amount is between \$3,373 and \$6,269, depending on the number of children in your care. You may be eligible if:

1. You earned less than \$39,296 (\$44,846 if married filing jointly) in adjusted gross income during that year (if you have passive income such as interest earnings or dividend income you may not qualify for the earned income credit), **and**
2. You have at least one qualifying child living with you for more than half of a tax year. The child must be:
  - Under age 19,
  - A full-time student under age 24, or
  - Any age and permanently and totally disabled.

If you have more than one child in your care, the amount you may earn changes. Check with the Internal Revenue Service. The figures given here are for the 2016 tax year; they may change in future years.

*For more information, go to [WashingtonLawHelp.org](http://WashingtonLawHelp.org) and click on "Money & Debt," then "Income taxes."*

### Can I Consent to Health Care for the Child?

A caregiver for a child may be able to consent to health care for the child even if he or she does not have a court order or if the parents are not available. *See "Informed Consent to Medical Care" in Resources at the end of this booklet.*

### Can I Get Health Insurance for the Child Through My Employer?

Note that the child may qualify for medical benefits from the state. *See Resources at the end of this booklet.*

If coverage through the child's parent(s) or state medical benefits are not an option, you may be able to include the child on your employer's health insurance policy. Even if you can include the child on your employer's plan, you may have to pay the monthly premium. Check with your employer.

## Can I Take Family Leave to Care for the Child?

Maybe. Under the federal Family and Medical Leave Act, you may be entitled to take up to 12 weeks of unpaid leave per year if:

1. The child who receives your day-to-day care or financial support under a temporary parental consent agreement needs your care due to a serious health condition; and
2. You have worked for the same employer for a total of at least 12 months (does not have to be 12 months in a row); and
3. You have worked at least 1,250 hours in the 12 months before taking leave (these 12 months *do* have to be in a row); and
4. You work for:
  - A private employer with 50 or more employees; or
  - A federal/state/local public agency.

*For more information, see the Legal Voice publication “Family Leave Laws” listed in Resources at the end of this booklet.*

## Will The Child Have Inheritance Rights to My Estate?

Having a temporary parental consent agreement for a child does not affect that child’s right to inherit your property. If you want a child in your care to receive all or a particular part of your property when you die, the best way to guarantee this is to say so in a Will. If you die without a valid Will, state laws determine how your property will be distributed. Under those laws, such a child must be a blood or adopted relative to inherit from you, and may have lower priority than other family members such as your spouse or your children. *For more information about Wills and estate planning, see the Legal Voice publication “Handbook for Washington Seniors: Legal Rights and Resources, 2nd Edition” listed in Resources at the end of this booklet.*

Sample

TEMPORARY PARENTAL CONSENT AGREEMENT\*

I am the legal parent and sole custodian of \_\_\_\_\_ [child's name] who was born to me on \_\_\_\_\_ [date]. I am 18 years old or older.

I hereby give my consent for my child to remain for an indefinite period of time in the residential care of his/her grandparent(s)/aunt/uncle/caregiver ("caregiver"), \_\_\_\_\_ [name(s)] who live(s) at \_\_\_\_\_ [street, city, state].

I hereby authorize the named caregiver to have the care and control of my child, to have the authority to provide all necessary care, medical care, dental care, and evaluations, and to make all necessary childcare and educational arrangements for my child while the child is in the caregiver's care. I authorize the caregiver to make decisions on the other issues regarding the child [e.g., religious decisions, decisions about the child's social life, decisions about the child's school activities, and personal care decisions (e.g. haircuts, pierced ears, etc.)] with the following restriction‡ \_\_\_\_\_.

I hereby authorize the caregiver to take the child out of state for vacations under the following conditions: \_\_\_\_\_.

I may revoke this consent and terminate this agreement at any time by delivering to the caregiver a signed, written notice at least a week in advance. §

\_\_\_\_\_  
Parent Print Name

\_\_\_\_\_  
Parent Signature

SUBSCRIBED AND SWORN TO before me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of Washington, residing at

\_\_\_\_\_  
My commission expires: \_\_\_\_\_.

AGREED:

\_\_\_\_\_  
Caregiver 1 Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Caregiver 2 Signature Date: \_\_\_\_\_

**\*Note:** See Resources at the end of this booklet for links to two versions of temporary parental consent agreement forms: a simple two-page form, and a more comprehensive three-page form.

**† Note:** If both parents have been caring for the child, both must sign this agreement. The wording should be changed accordingly. See page 11.

**‡ Note:** Be careful about reserving decisions to the parent(s) if you are worried that you and the child might lose contact with the parent(s). If a power is specifically reserved to the parent(s) and you cannot find them, no available adult will be authorized to make the decision.

**§Note:** As discussed in this section, the child's parent(s) may change this agreement or end it at any time.

# Nonparental (Third-Party) Custody

## Basic Information about Nonparental Custody

### What Is Nonparental Custody?

“Nonparental custody” (also called “third-party custody”) means someone other than a child’s birth parents (a “non-parent”) has legal custody of the child. Having legal custody gives you the right to physically care for a child and to make decisions about that child’s welfare. It does not mean, however, that the birth parents’ rights have been permanently terminated. Therefore, it is different from an adoption, where the birth parents have no legal rights regarding a child. Nonparental custody requires a court order and is legally binding.

### Who Can Ask for Nonparental Custody of a Child?

Any person with a close, significant relationship to a child may ask for nonparental custody. Most cases are brought by grandparents or other close relatives. A court generally will grant nonparental custody only to someone with significant ties to a child.

### When Is Nonparental Custody an Appropriate Option?

Nonparental custody of a child can be a good option if you want legal authority to care for the child without having to adopt the child. Nonparental custody can provide clear, enforceable guidelines regarding where a child will live, visitation by the parents, child support, etc. Many kinship caregivers do not want to adopt because they hope that the child can one day return to the care of the parents. *See “Can My Non-Parental Custody Decree Later Be Changed?” on page 19.*

In many cases, nonparental custody will be your only choice even if you want a more permanent arrangement, like adoption. You can adopt a child only if the parents agree, or if their parental rights are terminated by a court. These may not be options in your situation. Further, since nonparental custody does not terminate the parent(s)’ rights, a child’s parent(s) may be more willing to consent to custody than to an adoption.

### What About Seeking Legal Guardianship Instead of Nonparental Custody?

There are two types of guardianship in Washington State:

- **Guardianship of the person:** A person is appointed by the court to make daily-needs and health-care decisions for another person who is “incapacitated.” Guardianship of the person is commonly used when an adult is unable to handle her or his own affairs because of mental deterioration, mental illness, physical incapacity, or developmental disability. But the law also considers children to be “incapacitated” simply due to their age. Therefore, people under age 18 are also eligible for guardianship. Note this is different than Chapter 13.36 Guardianship in a dependency case (*see page 41*).
- **Guardianship of the estate:** A person is appointed by the court to manage another person’s financial affairs, such as money and property..

In Washington State, you cannot limit a parent's rights to custody or visitation through a legal guardianship of the person. A legal guardianship of the estate may be appropriate in some situations, such as when the parents are deceased. Financial institutions may require the caregiver to obtain guardianship of the estate in order to manage the child's money, such as proceeds from a parent's life insurance policy.

It is possible for a caregiver to seek both nonparental custody to address custody issues and guardianship of the estate to manage the child's finances. This is a complex legal situation. Working with a lawyer is strongly recommended.

*For families involved in the dependency system, see instead the section on Chapter 13.36 Guardianship on page 41 as different laws and court procedures apply.*

*For more information about this type of guardianship, see "Handbook for Washington Seniors: Legal Rights and Resources," listed in Resources at the end of this booklet.*

### How Can I Get Nonparental Custody of a Child?

You must receive an order from superior court granting you nonparental custody. There are two situations when this can happen:

- Because you file a lawsuit in superior court asking for nonparental custody of a child, or
- Because you are granted a permanent custody order custody order in a dependency proceeding.  
*For more information about dependency proceedings see Chapter 2 of this booklet.*

If one of the child's parents is absent from the scene, you still have to give that parent notice that you have filed a petition for nonparental custody. If you don't know where that parent is, the court may allow you to give notice by publication in a newspaper or by mail at their last known address. You will need to get a court order allowing you to do this.

Once notified, the parent(s) can either

- **Agree to your petition:** If both biological parents consent and you do not have a troubling criminal or CPS history, the court is likely to grant you nonparental custody. Note that you do not have to allege that the parent is unfit or that it would be detrimental to the child to be in their care. If you leave this out, it will be easier for the parent(s) to change the custody order later. The court then will look only at whether the change is in the child's best interests. *See "Can My Non-Parental Custody Decree Later Be Changed?" on the next page.*
- **Fight your petition:** If one or both of the child's parents fight your petition, you will have to go to trial and prove either that the parent(s) are unfit to care for the child, or that placing or leaving the child with the parent(s) would be "detrimental" (significantly harmful) to the child's growth and development. It is not enough to prove that it is in the child's best interest to be in your care.
- **Fail to respond:** If either parent fails to respond, the court will issue a "default" judgment against him or her. A default judgment is a court order issued against someone who does not appear in court, usually in favor of the party that has appeared.

### What If a Dependency Action Is Pending in Court?

Dependency actions are court proceedings in which the court is asked to determine if a child:

- Has been abandoned, abused, or neglected;

- Has no parent, guardian, or custodian capable of adequately caring for the child; or
- Is in danger of substantial psychological or physical damage.

If a dependency action has been started for the child, you must get permission from that court to proceed with a separate nonparental custody action. *For more discussion of dependency, see Chapter 2 of this booklet.*

### What Does a Nonparental Custody Order Include?

If a court grants you nonparental custody, it will issue a written order outlining each party's responsibilities. The order can include a number of provisions:

- It will grant you "custody" of the child. This means you have the legal responsibility to provide primary care and have primary responsibility for the child. The child will live with you, and you will have the right to make decisions about the child's upbringing, including education, health care, and religious practices. The court may in some instances place some limitations if the parties agree, or if the court determines that the child's physical, mental, or emotional health would be in danger without the limitation. It can require one or both of the child's biological parents to pay child support and/or provide health coverage for the child.
- It can set up a visitation schedule that allows one or both parents to visit the child. It can also set conditions on visitation, such as requiring that another person be present to supervise. If a parent wants visitation, the court will generally allow it unless it would be harmful for the child.
- If needed, the court can include a restraining order or a domestic violence protection order that prohibits a parent from visiting, contacting, or harassing you or the child.

### How Long Can I Have Nonparental Custody of a Child?

At the start of a nonparental custody case, the court can issue a temporary custody order that places the child with you until a final custody decision is made. Once that decision is made, the court will enter a final "judgment" (or "decree"), which is an order that awards long-term custody with no end date. It is not easy to make changes to a final judgement on custody. Nonparental custody is considered a permanent plan in a dependency action.

### Can My Nonparental Custody Decree Later Be Changed?

Yes, the nonparental custody decree can be "modified" (changed). However, unless the custodian agrees, it is difficult for a biological parent to change a nonparental custody decree.

If the parties **all agree** to the change, you may proceed under the new agreement with or without court approval. But it is important to note that the changes will be legally enforceable only if approved by the court.

If the parties **do not agree** on the change, the decree can be modified only if the person who wants the change gets court approval.

**Changing Custody/Residential Provisions:** A court will modify the residential custody provisions of a nonparental custody decree only if:

1. The child's or non-parent custodian's circumstances have changed since the judgment was entered, **and**
2. Modification of custody is necessary to serve the child's best interests.

If your nonparental custody case was based on parental unfitness or detriment to the child, then the court generally is not likely to change custody unless

- You agree to the modification,
- The child has returned to his or her parents with your consent, **or**
- Living with you is harmful to the child.

**Changing Visitation Provisions:** It can be easier for you or the parent(s) to ask the court to make minor changes to the visitation provisions that don't change the child's primary residence if

1. There has been a substantial change in circumstances of the parent(s),
2. There has been a substantial change in circumstances of the non-parent custodian or the child, **and**
3. The change to the visitation provision would be in the child's best interests.

**Changing Child Support Provisions:** Either you, the child's parents, or the Division of Child Support can request modification of child support provisions. In deciding whether to change child support, a court will consider:

1. A change in your financial situation,
2. A change in the parents' financial situation,
3. The length of time since the previous order, **and**
4. A change in the child's needs or age.

The Division of Child Support may be able to assist you in requesting modification of the child support provision. If the agency cannot assist you, and/or the parent(s) do not agree to the change, then you will need to go to court.

### **Do I Need a Lawyer to Get Nonparental Custody?**

Though it is possible to do this without a lawyer, the legal process is complicated. Consider meeting with a lawyer to discuss your situation, especially if the child's parents are fighting your petition. Feel free to ask a lawyer about the possibility of a payment plan or a reduced fee, or about using mediation to try to reach agreement with the child's parents without having an expensive trial. In mediation, a skilled mediator works with both sides to try to help them come up with their own solution to the problem. Additionally, ask your lawyer whether he or she will provide unbundled legal services (also known as limited representation) for you. In unbundled legal services, you keep costs lower by doing some of the legal work and research yourself. For example, you could complete all the documents to file the custody case but have the lawyer review them to make sure they are complete, or you could have the lawyer complete all the documents and you go to court on your own, or you could hire the lawyer to represent you for one or more court hearings.

*For more information about finding legal help as well as forms and instructions for how to file the petition yourself, see listings under "Free Publications" and "Legal Help" in Resources at the end of this booklet.*

### **What Kind of Information Will the Court Require in Order to Grant Me Nonparental Custody?**

If the parents do not agree to give you custody, then you will need evidence that supports your case that the parents are unfit, or that it would be detrimental for the child's growth and development to be in their parents' care. It is not enough to show that you are better at parenting the child or that you

can provide a better environment. The court will decide if you have enough evidence to go forward with your custody case at an initial hearing, called an Adequate Cause hearing. At this hearing, you can present evidence such as declarations (sworn statements from witnesses) and written reports or records (e.g. medical, school, or CPS records, parenting evaluations, etc.). The parents can provide evidence to challenge your case. If the court decides you do not have enough evidence, it will dismiss your case and the case is over. If the court decides that you do have enough evidence, there will be a trial where you and the parents will be able to have witnesses testify and present evidence.

Before the court will issue a custody decree:

1. You must get a copy of your criminal record and that of any other adult living in your household from the Washington State Patrol, and file them with the court.
2. You must get an order from the court authorizing Child Protective Services (CPS) to file any records it has regarding you and any other adult living in your household with the court. The CPS records are sealed, but the judge deciding whether to enter the decree will review them. The court will also review its database to determine if there are any criminal or other cases involving you or other adults in your household before it enters any temporary custody orders.
3. Some counties also require you to attend a Parenting Seminar, which is a class that talks about topics such as how children are affected by family conflict and how to focus on the child's needs in a custody case.
4. The court must determine whether the Indian Child Welfare Act (ICWA) applies to your case. *See page 52 for more information about this federal law.* If the ICWA applies, the superior court may decline to hear your case, in favor of the appropriate juvenile court or tribal court. If the matter is transferred to juvenile court, you will need to file a private dependency action. The ICWA is complicated, so consider hiring a lawyer.

### What Is a Guardian Ad Litem (GAL)?

A guardian ad litem (GAL) is a person appointed by the court to represent the best interests of a child in court proceedings. The GAL is not the general caregiver for the child.

There are two types of GAL: a Court Appointed Special Advocate (CASA), who is a volunteer, and a private GAL, who is often (but not always) a lawyer paid for by the person seeking custody. GALs are trained to review cases thoroughly and make reports to the court. The court may also appoint a Parenting Evaluator, usually a psychologist or social worker, who provides a neutral assessment of what custody arrangements would be in the child's best interests.

Any party who thinks the child's interests are not being represented in court may ask the court to appoint a GAL, or the court may appoint one on its own. You may submit names of appropriate GALs to the court. If you have filed the lawsuit or are directly involved in the case, you have a right to know the training and background of the appointed GAL and may request this information.

### What If I Am or the Child or Parent Is an Immigrant?

*See the "Special Information for Immigrant Families" section in Chapter 3.*

## When You Have Nonparental Custody

### Can the Child or I Receive Public Assistance or Similar Benefits?

Yes. If you have nonparental custody of a child, this may entitle the child and you to:

- Temporary Assistance for Needy Families (TANF);
- Medical assistance;
- Food benefits;
- Child care subsidy;
- Child support; and
- Social Security benefits.

If you are related to the child and you qualify, you may all be eligible for a TANF “Needy Family” Grant, as well as food benefits. If only the child qualifies, he or she may be eligible for a TANF “Child-Only” Grant (sometimes called a “Non-Needy” grant).

**TANF:** To apply for TANF benefits, you need to contact the Department of Social and Health Services (DSHS). For both types of grants, DSHS will consider certain income of all adults and children in your household, as well as the income of the child who is the subject of your temporary parental consent agreement. You may be required to sign over your right to receive child support to DSHS.

Things to know about the Child-Only Grant:

- When the child has been placed in your home by a state or tribal child welfare agency and the child welfare case is still open, your income will not be considered in determining eligibility. In that situation, only the child’s income is considered.
- In all other cases, your income must be below a certain amount based on the Federal Poverty Level to be eligible for a Child-Only Grant. (As of this printing, the Washington legislature is considering raising the TANF income limit on non-parent caregivers to 400% FPL.) *See “Federal Poverty Guidelines” listed in Resources at the end of this booklet.*
- Your assets (home, savings, etc.) are not considered in determining eligibility for a Child-Only Grant.
- Non-relatives and some more distant relatives must undergo a Washington State Patrol background check in order to receive a Child-Only Grant.
- A Child-Only Grant has no time limit.

Things to know about the Needy Family Grant:

- The Needy Family Grant is limited to a 60-month lifetime maximum.

In general, all TANF eligibility expires when the oldest child in your household reaches age 18.

**Food benefits:** *See Resources at the end of this booklet for information about food benefits.*

**Medical assistance:** *See Resources at the end of this booklet for information about medical assistance.*

**Child care subsidy:** *See Resources at the end of this booklet for information about child care subsidy.*

**Child support:** Parents may be required to provide some amount of child support for a child in nonparental custody, depending on the parents’ income and the child’s age. The court may attribute

income to a parent for the purposes of determining child support, even if that parent is unemployed. In addition, the parent will be required to provide the child's medical coverage if it is available through the parent's employer at low or moderate cost. The court will not consider the caregiver's income when calculating child support.

**Social Security benefits:** The child may be eligible to receive Social Security benefits (such as survivor, disability, or retirement benefits) through their parents' or grandparents' work record. As the non-parent caregiver, you can apply for these benefits on behalf of the child. *See Resources at the end of this booklet.*

### Can We Get Foster Parent Payments from the State?

No. Having nonparental custody does not qualify you to receive foster parent payments. To receive such payments, you need to go through a separate licensing process under a dependency placement.

### Can I Get Income Tax Benefits?

Maybe. It is best to talk to a tax professional about your specific situation. Here are two tax benefits relevant to caregivers with nonparental custody:

**Dependency Exemption:** The court can award the income tax exemption for dependents to a non-parent as part of a nonparental custody decree. If you are providing over half of the child's support, your nonparental custody court decree should specifically state that you are entitled to this exemption. Even without such a provision, if you provide over half of the child's support during the year, you may be able to take the exemption for dependents on your income taxes for that year. The Internal Revenue Service may ask for proof that you are supporting the child, so it is helpful for you to keep receipts and a list of expenses.

**Earned Income Credit:** If you qualify, this credit reduces the amount of taxes you owe. If you don't owe taxes, the IRS will send you a refund check. For the 2016 tax year, the credit amount is between \$3,373 and \$6,269, depending on the number of children in your care. You may be eligible if:

1. You earned less than \$39,296 (\$44,846 if married filing jointly) in adjusted gross income during that year (if you have passive income such as interest earnings or dividend income you may not qualify for the earned income credit), and
2. You have at least one qualifying child living with you for more than half of a tax year. The child must be:
  - Under age 19,
  - A full-time student under age 24, or
  - Any age and permanently and totally disabled.

If you have more than one child in your care, the amount you may earn changes. Check with the Internal Revenue Service. The figures given here are for the 2016 tax year; they may change in future years.

*For more information, go to [WashingtonLawHelp.org](http://WashingtonLawHelp.org) and click on "Money & Debt," then "Income taxes."*

### Will The Child Have Inheritance Rights to My Estate?

Having a nonparental custody order for a child does not affect that child's right to inherit your property. If you want a child in your care to receive all or a particular part of your property when you die, the best way to guarantee this is to say so in a Will. If you die without a valid Will, state laws determine how your property will be distributed. Under those laws, such a child must be a blood or adopted relative to inherit from you, and may have a lower priority than other family members such as your spouse or

your children. *For more information about Wills and estate planning, see the Legal Voice publication “Handbook for Washington Seniors: Legal Rights and Resources, 2nd Edition” listed in Resources at the end of this booklet.*

### **Can I Get Health Insurance for the Child Through My Employer?**

If there is a child support order, the parent(s) may be required to provide medical insurance for the child. If insurance is available through the parent(s), you may request that the parent(s) or the Division of Child Support buy coverage for the child.

Note that the child may qualify for medical benefits from the state. *See Resources at the end of this booklet.*

If coverage through the child’s parent(s) or state medical benefits are not an option, you may be able to include the child on your employer’s health insurance policy. Even if you can include the child on your employer’s plan, you may have to pay the monthly premium. Check with your employer.

### **Can I Take Family Leave to Care for the Child?**

Maybe. Under the federal Family and Medical Leave Act, you may be entitled to take up to 12 weeks of unpaid leave per year if:

1. The child of whom you have nonparental custody needs your care due to a serious health condition; **and**
2. You have worked for the same employer for a total of at least 12 months (does not have to be 12 months in a row); **and**
3. You have worked at least 1,250 hours in the 12 months before taking leave (these 12 months *do* have to be in a row); **and**
4. You work for:
  - A private employer with 50 or more employees; **or**
  - A federal/state/local public agency.

*For more information, see the Legal Voice publication “Family Leave Laws” listed in Resources at the end of this booklet.*

# Adoption

## Basic Information about Adoption

### What Is an Adoption?

Adoption is a legal process that creates a parent-child relationship between people who are not parent and child by birth. Once a child is adopted, that child has the same legal rights as a birth child – the right to support, inheritance, etc. Likewise, an adoptive parent has the same legal duties as a birth parent to care for and raise the child.

Adoption also usually involves the final and complete termination (ending) of the parental rights and duties of the child's birth parents (except in some cases of "open adoption" discussed later in this section). Although all legal rights and duties between the child and birth parents end, it is possible for a relationship between the birth parents and child to continue. Arrangements can be made between the adoptive parent(s), birth parent(s), and child to continue a relationship if they choose.

### Who May Adopt?

Any person who is legally competent (sane) and who is 18 years of age or older may be an adoptive parent. Both single individuals and married couples can seek to adopt. If a couple is married, both spouses must agree to the adoption – one member of a married couple may not adopt alone.

### Who May Be Adopted?

Any person may be adopted at any age. If you are adopting across national borders, special rules may apply depending on the countries involved. If you are seeking to adopt a Native American child, special rules will apply. *See the "Indian Child Welfare Act" section of the Other Information chapter in this booklet.*

### What If I Am or the Child or Parent Is an Immigrant?

*See the "Special Information for Immigrant Families" section in Chapter 3.*

### How Does an Adoption Work?

Adoption is a complex legal process. Here are the basic steps.

- The adoptive parent(s) must be investigated and must show that they will be fit parent(s). A social worker, approved court employee, or DSHS staff member handles the investigation and files a report with the court. This report is called a "home study" or "pre-placement report." A second report called a "post-placement report" is required after the child has been placed in the adoptive home.
- The parental rights of the child's birth parents must be terminated. The usual method is to have the birth parents consent to the adoption in writing. The court must then decide if the consent is valid. If the court finds that the consent is valid and that termination is in the best interest of the child, it will terminate the birth parents' rights. If one or both parents do not consent, the person

seeking to adopt will have to get the court to order termination of parental rights (discussed later in this section). If the child is involved in a dependency case because of parental neglect or abuse, the parent(s)' rights may be terminated in that proceeding with or without their consent.

- If the court determines that the parental consents are valid, then the court must determine that the adoption is in the child's best interest. The court considers the investigative reports and information presented at a hearing. If the court finds that the adoption is in the child's best interest, it will issue a decree of adoption. The decree makes the adoption final.
- If the child is (or may be) a Native American, the Indian Child Welfare Act may apply. If you have any information that the child is or may be eligible for membership in a tribe, you should immediately notify your lawyer, DSHS, or the case investigator. *See the "Indian Child Welfare Act" section of the Other Information chapter in this booklet.*

### When Is Adoption an Appropriate Choice?

Adopting a child is a permanent, lifetime commitment. Consider carefully whether you *want to* and are *able to* make such a commitment to a child. It is your choice – the state cannot force you to adopt any child, not even your grandchild.

Adoption is your best option if

- You want to take complete and permanent responsibility for the child.
- You do not want the child's birth parent(s) to be able to legally interfere. (You may choose to allow the child's birth parents to stay involved in the child's life through visits or letters, but you do not have to do so.)
- You want the child to be entitled to all the benefits of a birth child, such as the right to acquire health insurance through your employer, if possible (discussed later in this section); the right to your Social Security and pension benefits if you die; and inheritance rights if you die without a valid Will.

Adoption is not your best option if

- You hope that the child will, at some point, be reunited with his or her birth parent(s).
- You feel willing and able to care for the child only temporarily.
- You are not willing or able to financially support the child. Know that, once adopted, many government benefits you and the child may receive, including the TANF Non-Needy Relative Grant and foster care payments, will end (discussed later in this section).

### What Is an "Open Adoption"?

In some cases, the parties in an adoption want the child's birth parent(s) to retain the legal right to have visitation or other contact (telephone calls, letters, etc.) with the child after the adoption. They may then seek an "open adoption." An open adoption can occur only if both the birth parent(s) and adoptive parent(s) voluntarily enter into a written agreement. If the child has a lawyer or guardian ad litem, that person must also approve the agreement. DSHS must also approve the agreement if the state has custody of the child. And finally, the agreement is enforceable only if it is approved by the court, which will do so only if it finds that the agreement is in the child's best interest.

### What If One or Both of the Child's Parents Will Not Consent to an Adoption?

If one or both parents will not consent to an adoption, there can be no "open adoption." In rare circumstances, however, you can ask the court to terminate the rights of the parent who does not consent. To do so, you must prove

1. It is in the child’s best interest to terminate the relationship between the parent and child;
2. The parent has shown a “substantial lack of regard” for his or her parental obligations; **and**
3. The parent is withholding consent to the adoption against the child’s best interests.

For private adoptions (adoptions that do not involve a dependency case), it is not clear under Washington law whether it is possible to terminate the parental rights of both parents who do not consent to the adoption. Generally, private adoptions are done with at least one parent consenting. An adoption lawyer can advise you if you need to terminate the parental rights of one or both parents.

### Do I Need a Lawyer for an Adoption?

Yes. It is best to get a lawyer with experience handling adoptions. The adoption process is complicated and technical requirements must be strictly followed. If you want to adopt a child and the parents consent to the adoption, the lawyer’s fees and costs (home evaluation fees, filing fees, etc.) may range from \$1,000 to \$4,000 or more. If only one parent consents and you must prove that the other parent’s rights should be terminated, the fees and costs will be substantially higher. Feel free to ask a lawyer about the possibility of a payment plan, a reduced fee, or unbundled legal assistance. *See “Preparing to See a Lawyer” on page 57.*

If DSHS is providing some of the adoption services (e.g. a pre-placement report), you may be able to get them on a reduced-fee basis. If the child has special needs, as defined by the state, you may also be eligible for reimbursement from DSHS of some adoption expenses, including legal fees, court costs, and travel costs. You must apply for adoption assistance before you adopt the child.

## When You Have Adopted the Child

### Can the Child or I Receive Public Assistance and Similar Benefits?

**State benefits:** Once you adopt a child, your eligibility for state benefits may change:

- You may be able to receive a Temporary Assistance for Needy Families (TANF) “Needy Family” Grant, plus food benefits and other benefits, if your family is financially eligible. TANF “Needy Family” Grants are usually given for a maximum lifetime period of 60 months (5 years).
- If you were caring for the child before the adoption and were receiving a TANF “Child-Only” Grant, foster care payments, or child support payments, these will end when the adoption is final. (Time spent receiving a TANF “Child-Only” Grant will not count against the 60 months of “Needy Family” TANF benefits.)
- With few exceptions, medical benefits and other benefits from the government will also end unless your family continues to be financially eligible.

**Social Security benefits:** If you and your spouse, or you alone, adopt your grandchild, that child may qualify for Social Security benefits as a “dependent child” based on your individual work records if:

1. The child is not receiving Social Security benefits from the parents, **and**
2. You have already adopted the child at the time one of you dies or becomes disabled, **and**
3. When that death or disability occurs, the child’s birth parent was not living in the same household and contributing regularly to the support of the child.

## Can I Get Income Tax Benefits?

Yes.

**Dependency Exemption:** As the adoptive parent(s), you are entitled to claim the child as a dependent and take the dependency exemption on your income taxes.

**Earned Income Credit:** If you qualify, this credit reduces the amount of taxes you owe. If you don't owe taxes, the IRS will send you a refund check. For the 2016 tax year, the credit amount is between \$3,373 and \$6,269, depending on the number of children in your care. You may be eligible if:

1. You earned less than \$39,296 (\$44,846 if married filing jointly) in adjusted gross income during that year (if you have passive income such as interest earnings or dividend income you may not qualify for the earned income credit), and
2. You have at least one qualifying child living with you for more than half of a tax year. The child must be:
  - Under age 19,
  - A full-time student under age 24, or
  - Any age and permanently and totally disabled.

If you have more than one child in your care, the amount you may earn changes. Check with the Internal Revenue Service. The figures given here are for the 2016 tax year; they may change in future years.

*For more information, go to [WashingtonLawHelp.org](http://WashingtonLawHelp.org) and click on "Money & Debt," then "Income taxes."*

## Will The Child Have Inheritance Rights to My Estate?

Once a child is adopted, he or she has the same inheritance rights as a biological child. If you want your adopted child to receive all or a particular part of your property when you die, the best way to guarantee this is to say so in a Will. If you die without a Will, state laws determine how your property will be distributed. Under those laws, your adopted child will have lower priority than your spouse. In addition to inheriting property from you, an adopted child may also be able to receive federal Social Security or pension benefits if you die or become disabled while the child is a minor. *For more information about Wills and estate planning, see the Legal Voice publication "Handbook for Washington Seniors: Legal Rights and Resources, 2nd Edition" listed in Resources at the end of this booklet.*

## Can I Get Health Insurance for the Child Through My Employer?

Note that the child may qualify for medical benefits from the state. *See Resources at the end of this booklet.*

If coverage through the child's parent(s) or state medical benefits are not an option, you may be able to include the child on your employer's health insurance policy. Even if you can include the child on your employer's plan, you may have to pay the monthly premium. Check with your employer.

## Can I Take Family Leave to Care for the Child?

Maybe. Under the federal Family and Medical Leave Act, you may be entitled to take up to 12 weeks of unpaid leave per year – including the first year the child is placed with you – if:

1. The child you have adopted needs your care due to a serious health condition; and
2. You have worked for the same employer for a total of at least 12 months (does not have to be 12 months in a row); and
3. You have worked at least 1,250 hours in the 12 months before taking leave (these 12 months *do* have to be in a row); and
4. You work for:
  - A private employer with 50 or more employees; or
  - A federal/state/local public agency.

*For more information, see the Legal Voice publication “Family Leave Laws” listed in Resources at the end of this booklet.*





## Chapter 2

# Legal Options When the State Has Filed a Dependency Action

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- A Brief Summary of Dependency Actions
- Relative Care in a Dependency Case
- Chapter 13.36 Guardianship
- Adoption and Nonparental Custody in Dependency Actions
- Juvenile Court Dependency Proceedings Chart

# A Brief Summary of Dependency Actions

## Introduction

Generally, the government does not interfere in family matters. However, the law does allow the state to step in to protect a child from harm or neglect within the family in a procedure known as a “dependency action.” Here’s how the dependency process works.

## What Is a “Dependent Child”?

A “dependent child” is a child who:

- Has been abandoned by his or her parent, guardian, or other custodian;
- Has been abused or neglected by a person legally responsible for the care of the child;
- Has no parent, guardian or custodian able to adequately care for the child, creating a danger of substantial damage to the child’s psychological or physical development; or
- Is receiving extended foster care services.

## Who Can File a Dependency Action?

Anyone with information proving that a child meets the definition of “dependent child” may file a dependency action in Juvenile Court. If the child is found to be a “dependent child,” the court may order DSHS to provide the parents with services to address their parenting problems and the child may be removed from the parent(s)’ home. This is a complicated action. If you file such an action you will need a lawyer. Most dependency cases, however, are filed by DSHS.

A dependency petition can be filed by a DSHS social worker when the child is still in the parent’s home. In cases where the child is in danger, DSHS may obtain a court order allowing it to remove the child from the parent(s)’ home, take the child into custody, and place the child in temporary “shelter” care. This can be in state foster care, with a relative (any blood or half-blood relative in the extended family, including those related by adoption or step-relationships, but excluding step-grandparents), or another “suitable” person (someone with a tie to either the parent(s) or the child).

Any person who is named to provide care for the child, whether a relative or suitable other, must pass required background checks and be competent to care for the child. At this stage in the process, DSHS will only consider placing the child with relatives or suitable others who live in Washington State. Non-parent relatives who live out of state who wish to be considered as a potential placement must go through an application process known as the Interstate Compact on the Placement of Children (ICPC), which can take several months to complete. If you are a non-parent relative living out of state, contact the DSHS social worker and/or the lawyer for the parent(s) *immediately* and ask about starting the ICPC process.

## Are There Other Ways a Child Can Be Removed from the Parent(s)?

A child can also be removed from his or her parent(s) in other ways without court action. Law enforcement officers may take a child into custody without a court order if they believe that a child is abused or neglected and that the child will be injured if he or she is not immediately removed. If this happens, a court hearing must be held within 72 hours of removal, not counting weekends and holidays. Hospitals and health care providers also have the ability to “hold” a child against the parent’s

wishes if they think a child has been abused or neglected. This happens most frequently with newborn babies, when doctors don't believe the child should go home with the parent(s). They then place an administrative hold on the baby. If a dependency action is filed, a series of court hearings will then be held. These are explained in this section and in the chart on page 49.

### Do I Have the Right to a Lawyer?

The child's parent(s), legal guardian or custodian has the right to a lawyer at the hearing and throughout the dependency process. If that person cannot afford a lawyer, the court will appoint a public defender free of charge.

However, a non-parent, such as a foster parent or other relative who is not a legal custodian, is not considered a party to the case and does not have the right to a lawyer. Foster parents, pre-adoptive parents, or other current caregivers do have a right to be heard before each court hearing and are allowed to provide reports about the child to the court. DSHS is required to give notice of this right.

### Does the Child Have the Right to a Lawyer?

The court will appoint a guardian ad litem (GAL) for the child unless it finds there is good cause not to do so, such as the fact that the child is already represented by a lawyer. The GAL's role is to represent the child's best interests. The GAL is usually not a lawyer. *For more information about GALs, see page 21 of this booklet.*

State law requires that a child age 12 or older must be notified of their right to request a lawyer if they don't have one. There are certain situations where the court is required to appoint a lawyer for the child (such as six months after parental rights have terminated for both parents). In most other cases, whether or not the court will appoint a lawyer for the child depends on the county. Some counties appoint a lawyer when a child reaches a certain age.

### What Happens Once the Dependency Process Has Begun?

The dependency process includes a series of hearings before a judge, as well as at least one meeting regarding the placement plan for the child. Most are in-court hearings, which are described here. *See also the Juvenile Court Dependency Proceedings chart on page 49.*

If you have an interest in the case and wish to testify at any meeting or hearing, inform your lawyer (if you have one), contact DSHS in writing if possible, and contact the parent(s)' lawyer and the child's GAL; clearly inform them of your wish. The court may or may not grant your request. *See "What Is My Role During the Court Dependency Process?" at the end of this section for information on the right to testify.*

**72-Hour Shelter Care Hearing:** Once a child is removed from the home, a "shelter care hearing" must be held within 72 hours of the removal (not counting weekends and holidays). If the child is not removed from the home, the hearing must be held within 72 hours of filing the dependency petition.

At the 72-hour shelter care hearing, the court decides whether the child should be removed from the parent(s)' home. If the child has already been removed, the court will decide whether he or she should have been removed from the parent(s)' home and whether it is safe for the child to return to (or stay in) the home. The court may also dismiss the case.

If the child is to remain out of his or her parent(s)' home, the court decides where the child should live until a later, more in-depth hearing is held. The options the court will consider are relative care or the

care of a “suitable person.” The court also decides what, if any, limitations should be placed on visitation with the parent(s). The parties may discuss what services could be provided to the parent(s) in order to address the problem(s) that led to the removal of the child(ren), and if medical, mental health, or drug or alcohol evaluations are appropriate. However, at this stage in the process, the court cannot order the parent(s) to participate in any services or evaluations unless the parents agree to participate. The focus of the shelter care hearing is on protecting the child, on identifying and offering appropriate services to help the parent(s), and on reuniting the child and parent(s). Until dependency is established or the denied, anything the parent(s) say or do, including during any agreed-upon services, can be used against them in the dependency fact finding hearing.

**30-Day Shelter Care Hearing:** A second shelter care hearing may be held within 30 days of the first hearing to determine if any changes have occurred. At this hearing the court may order that the child be returned to the parent(s) or remain in placement. If the parties agree, the court may also order additional services for the parent(s) and the child. Not every county requires this in-court “30-day shelter care hearing.” The parties can forego the hearing and agree to ongoing DSHS involvement, continued shelter care, and participation in agreed-to services. However, the court still must sign a written order authorizing that agreement within the 30-day period.

**Case Conference:** If the shelter care order requires it, a “case conference” (mediation) must be held no later than 30 days before the fact-finding hearing. At the case conference, the parents, DSHS, the GAL, lawyers for the parties, and others meet to discuss what services DSHS wants to see in place. The parent(s) can agree to accept these services or not. The discussions held during the case conference are strictly confidential, and statements and offers made cannot be used against any party if the case proceeds to a fact-finding hearing.

**Fact-Finding Hearing:** A fact-finding hearing, also called the dependency trial, is generally held within 75 days of filing the petition. At this hearing, the parties can present testimony and other evidence to a judge, who will decide whether or not the child is dependent. To establish dependency, the judge needs only to find that it is more likely than not that the allegations in the dependency petition are true. Instead of going through with this hearing, the parent(s) can agree to establish dependency, permit ongoing DSHS involvement and to participate in services. Once dependency is established, the court can order the parent(s) to participate in services without their agreement. The permanency plan must be distributed to all parties before the fact-finding hearing (*see next paragraphs to learn about permanency plans*).

**Disposition Hearing:** If the court finds the child is dependent, it will, either immediately or within two weeks, hold a disposition hearing to determine what happens next. Based on facts proven at that hearing, the court then will either place the child with a relative or other “suitable person”, or will leave it up to DSHS to choose placement for the child. DSHS can decide to place the child in the home of another “suitable person,” or in foster care or a group home. The court will also order what services the parent(s) must complete, as well as what DSHS must do to help the parent(s) complete the services. The goal at this stage is to have the child reunited with his or her parent(s). If the child is staying in the home, the goal is to eliminate risks to the child’s safety and well-being. In a disposition order that removes a child from parental custody, the court will allow the parent(s) to visit the child regularly unless the child is harmed by the visitation. Visitation may be supervised or unsupervised, and relatives may be chosen as supervisors. The court may also require parent(s) to pay child support if they are able to do so.

As part of this disposition process, DSHS must propose a “permanency plan”. This plan sets one or more goals for the child:

- Either
  - Returning to his or her parent, guardian, or legal custodian; **or**
  - Adoption (which requires terminating parental rights); **or**
  - Other long-term arrangements such as Chapter 13.36 guardianship, nonparental custody, or long-term relative or foster care for children close to 18 who are “aging out” of the system;
- The permanency plan will identify steps necessary to achieve the proposed plan.

**Review Hearings:** Once dependency is established, the court must hold a review hearing at least once every six months to determine if the state is making reasonable efforts to eliminate the need for out-of-home placement; the parent(s)’ compliance with court-ordered services and progress toward remedying any identified parental deficiencies; and any proposed changes to the dispositional plan or to the child’s placement. Proposed revisions to the permanency plan must be distributed to all parties before each hearing to review the plan.

**Permanency Planning Hearing:** Within 9-12 months after the child has been placed out of the parent(s) home, there will be a hearing to finalize the permanency plan.

**Native American Children:** Under federal law and state agreements with tribal governments, special rules apply to placement of Native American children in dependency cases. *See the “Indian Child Welfare Act” section in Chapter 3 of this booklet for more information.*

### When Would the Court Terminate Parental Rights?

If the parties and/or the court believe that the child will not be able to return to the parent(s)’ care, DSHS may file a petition asking the court to terminate parental rights. This is a separate proceeding from the dependency case, though it will be based on the record established during the dependency. The court will terminate parental rights only in cases where it is in the best interest of the child to terminate the parent-child relationship, and at least one of the following has been shown:

- The child was seriously abused and/or neglected while in the care of the parent(s);
- The parent(s) will not or cannot remedy the parental issues that led to the removal of the child; or
- The parent(s) agree to termination of their rights.
- If the parent(s) oppose termination of parental rights, the court must set a separate trial (another fact-finding hearing) date at which the parties have the right to introduce evidence, give testimony and question witnesses.

### What Is My Role During the Court Dependency Process?

If a child becomes dependent, then as the child’s non-parent caregiver (which can include a grandparent, other relative, or another “suitable person”) you may attend the disposition hearing and other hearings and proceedings about the child, unless for some reason the court decides not to allow it.

DSHS or another appropriate agency has a duty to inform the individual(s) caring for a dependent child about the dates and locations of any dependency, review, and permanency planning hearings that affect the child. If you are a non-parent caregiver, you can provide information about the child’s welfare to the court in writing (or orally, if permitted). As a non-parent caregiver, you may or may not be allowed by the court to testify or to provide information at the hearing.

If you are not caring for the child, you will not receive notice of these hearings unless you inform DSHS, the child’s GAL, the parent’s lawyer, and your own lawyer (if you have one) of your wish to attend.

# Relative Placement in a Dependency Case

## Basic Information about Relative Placement in a Dependency Case

### What Is Relative Placement in a Dependency Case?

When the court has ruled that a child is dependent (*see previous section*), has removed the child from the parent(s)' home, and DSHS has developed a "permanency plan" for the child (defined in the Glossary), the state places the child in a new home. The state may choose to place the child either with a relative or other responsible adult, in a foster home, or in group care.

The law states a strong preference for placing the child with a relative or other "suitable person" for this period, if certain requirements are met. This is called "relative placement," also called "long-term relative care." It applies primarily to children between the ages of sixteen and eighteen, but can include younger children if such long-term placement is appropriate. It requires a written agreement between the parties and the caregiver.

The person who cares for a child in such a placement has the duty to care for, feed, clothe, shelter, educate, and provide routine medical care for the child. If the court gives the child's parents the right to visit the child, the relative must see that the child is made available for visits. The person is not responsible, however, for making major decisions regarding the child, because the child remains legally in the custody of the state.

### What Requirements Must I Meet to Gain Relative Placement of a Child?

DSHS will conduct an investigation to determine whether placement with you is appropriate and will then make a recommendation to the court. The investigation will usually include a home study and a criminal history background check, as well as a CPS background check to verify that there is no previous history of child abuse by any adult in your household. The law requires that you have a relationship with the child and be willing and available to care for the child. The child must be comfortable with you. In addition, placement with you must not jeopardize the child's welfare or harm efforts to reunite the child with his or her parent(s). You must cooperate with the agency case plan and follow all court orders.

Non-parent relatives who live out of state who wish to be considered as a potential placement must go through an application process known as the Interstate Compact on the Placement of Children (ICPC), which can take several months to complete. If you are a non-parent relative living out of state, contact the DSHS social worker and/or the lawyer for the parent(s) immediately and ask about starting the ICPC process.

### How Long Does a Relative Placement Last?

It depends on the case. A placement may last for only a few days, weeks, or months if the parent(s) become able to care for the child once again. Typically, placements last between two weeks and two years. If the child cannot be reunited with his or her parent(s), the relative placement may last for several years, possibly until the child reaches age 18. That said, if the child cannot be returned to the parent(s), DSHS will usually seek out a more permanent placement, such as a Chapter 13.36 Guardianship, adoption, or other permanent custody/nonparental custody arrangement.

## How Do I Have a Dependent Child Placed with Me for Relative Care?

Any relative or “suitable person” can work with the child’s DSHS case worker to seek placement of the child in his or her home. In some cases, it may also be helpful to work with the child’s parent(s), with the parent(s)’ lawyer, or with the child’s guardian ad litem.

### Is a Lawyer Needed?

You do not need your own lawyer to do this unless DSHS is unwilling to place the child with you and you want to fight for the placement. It is difficult, however, to have a child placed with you over DSHS’ objection because the courts do not usually allow relatives or other concerned individuals to legally intervene or become parties in a dependency case filed by DSHS.

### What If I Am or the Child or Parent Is an Immigrant?

See the “Special Information for Immigrant Families” section in Chapter 3.

## Once You Have Relative Placement

### Can the Dependent Child or I Receive Public Assistance or Similar Benefits?

If a dependent child is placed with you, you and the child may be entitled to:

- Temporary Assistance For Needy Families (TANF) or foster care payments;
- Food benefits;
- Medical assistance;
- Child care subsidy; and
- Social Security benefits.

If your entire family is needy and you are related to the child for whom you have dependency placement, you may all be eligible for a TANF “Needy Family” Grant, including that child, as well as food benefits, and possibly a child care subsidy. If only the child is needy, he or she may qualify for a TANF “Non-Needy” or “Child-Only” Grant, whether or not you are related.

**TANF:** To apply for TANF benefits, you need to contact the Department of Social and Health Services (DSHS). For both types of grants, DSHS will consider certain income of all adults and children in your household, as well as the income of the dependent child. You may be required to sign over your right to receive child support to DSHS.

Things to know about the Child-Only Grant:

- When the child has been placed in your home by a state or tribal child welfare agency and the child welfare case is still open, your income will not be considered in determining eligibility. In that situation, only the child’s income is considered.
- In all other cases, your income must be below a certain amount based on the Federal Poverty Level to be eligible for a Child-Only Grant. (As of this printing, the Washington legislature is considering raising the TANF income limit on non-parent caregivers to 400% FPL.) See “Federal Poverty Guidelines” listed in Resources at the end of this booklet.
- Your assets (home, savings, etc.) are not considered in determining eligibility for a Child-Only Grant.

- Non-relatives and some more distant relatives must undergo a Washington State Patrol background check in order to receive a Child-Only Grant.
- A Child-Only Grant has no time limit.

Things to know about the Needy Family Grant:

- The Needy Family Grant is limited to a 60-month lifetime maximum.

In general, all TANF eligibility expires when the oldest child in your household reaches age 18.

**Foster care payments:** To receive foster care payments, you need to become a licensed foster care home. To become licensed, you must meet a variety of health and safety, space, training, and other requirements. Once you are licensed, you will receive foster care payments, medical benefits, subsidized child care, and additional benefits such as respite care if the child has very special needs.

Note: Consult with DSHS about whether TANF or foster care payments make the most sense for you. Whether foster care or TANF payments will benefit you the most will depend on your situation. For example, additional payments for special needs children are available to foster parents. Talk to an experienced lawyer or a TANF caseworker about public benefits and eligibility, what work requirements exist, and what the financial support amount will likely be.

**Food benefits:** *See Resources at the end of this booklet for information about food benefits.*

**Medical assistance:** *See Resources at the end of this booklet for information about medical assistance.*

**Child care subsidy:** *See Resources at the end of this booklet for information about child care subsidy.*

**Social Security benefits:** The child may be eligible to receive Social Security benefits (such as survivor, disability, or retirement benefits) through their parents' or grandparents' work record. As a relative caregiver, you can apply for these benefits on behalf of the child. *See Resources at the end of this booklet.*

## Can I Receive Child Support?

The child is eligible for child support and medical insurance coverage from both parents. The court can order the child's parent(s) to pay child support to the relative based on the parent(s)' income and to provide insurance coverage if it is available through the parent(s)'s work or at low cost. If you are receiving TANF or medical benefits, the state Division of Child Support will try to collect support from the parent(s) to reimburse the state for those benefits. The Division of Child Support can seek support through an administrative hearing or through a court action. You must cooperate with the state in the child support process to be eligible to receive benefits.

## Can I Get Income Tax Benefits?

Maybe. It is best to talk to a tax professional about your specific situation. Here are two tax benefits relevant to relative caregivers:

**Dependency Exemption:** If you provide over half of a child's support during the year, you may be able to take the exemption for dependents on your income taxes that year. The Internal Revenue Service (IRS) may ask for proof that you are supporting the child, so it is helpful for you to keep receipts and a list of expenses.

**Earned Income Credit:** If you qualify, this credit reduces the amount of taxes you owe. If you don't owe taxes, the IRS will send you a refund check. For the 2016 tax year, the credit amount is between \$3,373 and \$6,269, depending on the number of children in your care. You may be eligible if:

1. You earned less than \$39,296 (\$44,846 if married filing jointly) in adjusted gross income during that year (if you have passive income such as interest earnings or dividend income you may not qualify for the earned income credit), **and**
2. You have at least one qualifying child living with you for more than half of a tax year. The child must be:
  - Under age 19,
  - A full-time student under age 24, or
  - Any age and permanently and totally disabled.

If you have more than one child in your care, the amount you may earn changes. Check with the Internal Revenue Service. The figures given here are for the 2016 tax year; they may change in future years.

*For more information, go to [WashingtonLawHelp.org](http://WashingtonLawHelp.org) and click on "Money & Debt," then "Income taxes."*

### **Will The Child Have Inheritance Rights to My Estate?**

Having relative placement for a dependent child does not affect the child's right to inherit your property. If you want a child for whom you have such a dependency placement to receive all or a particular part of your property when you die, the best way to guarantee this is to say so in a Will. If you die without a valid Will, state laws determine how your property will be distributed. Under those laws, such a child must be a blood or adopted relative to inherit from you, and may have lower priority than other family members such as your spouse or your children. *For more information about Wills and estate planning, see the Legal Voice publication "Handbook for Washington Seniors: Legal Rights and Resources, 2nd Edition" listed in Resources at the end of this booklet.*

### **Can I Get Health Insurance for the Child Through My Employer?**

If there is a child support order, the parent(s) may be required to provide medical insurance for the child. If insurance is available through the parent(s), you may request that the parent(s) or the Division of Child Support buy coverage for the child.

Note that the child may qualify for medical benefits from the state. *See Resources at the end of this booklet.*

If coverage through the child's parent(s) or state medical benefits are not an option, you may be able to include the child on your employer's health insurance policy. Even if you can include the child on your employer's plan, you may have to pay the monthly premium. Check with your employer.

### **Can I Take Family Leave to Care for the Child?**

Maybe. Under the federal Family and Medical Leave Act, you may be entitled to take up to 12 weeks of unpaid leave per year – including the first year the child is placed with you – if:

1. The child who receives your day-to-day care or financial support needs your care due to a serious health condition; **and**
2. You have worked for the same employer for a total of at least 12 months (does not have to be 12 months in a row); **and**

3. You have worked at least 1,250 hours in the 12 months before taking leave (these 12 months *do* have to be in a row); **and**
4. You work for:
  - A private employer with 50 or more employees; or
  - A federal/state/local public agency.

*For more information, see the Legal Voice publication “Family Leave Laws” listed in Resources at the end of this booklet.*

# Chapter 13.36 Guardianship

## Basic Information about Chapter 13.36 Guardianship

### What Is a “Chapter 13.36 Guardianship”?

A “Chapter 13.36 Guardianship,” also called a “Minor Guardianship,” is a legal arrangement in which the Juvenile Court appoints someone other than the parent to care for the dependent child and manage the child’s affairs. Prior to 2010, the law was slightly different and these were called “dependency guardianships” (R.C.W. 13.34.232-.237). A few dependency guardianships may still exist, but that old statute does not affect Chapter 13.36 Guardianships.

Chapter 13.36 guardianship is established, following a formal hearing, if the court decides that it is in the child’s best interests – better than adoption, and better than continuing to try to return the child to the parent(s). All parties must agree to guardianship and agree that the proposed guardian is qualified and capable. If the parties cannot agree, a series of other requirements must be met.

A Chapter 13.36 Guardianship continues until the child turns 18 unless the court orders it terminated earlier. Establishing a Chapter 13.36 Guardianship also terminates the child’s dependency and the responsibilities of DSHS, unless the court orders otherwise.

### How Can I Become a Chapter 13.36 Guardian?

To qualify for consideration to become a Chapter 13.36 Guardian:

1. You must be over age 21, **and**
2. You must meet the same minimum requirements for people licensed to care for a child outside the child’s home; **and**
3. You must be either
  - a licensed foster parent; or
  - a relative of the child, or
  - a non-relative who meets stringent requirements and has had custody of the child following the dependency fact-finding hearing;**and**
4. All adults living in your home must pass a criminal background check.

Unless you are a party to a dependency action (i.e., parent, child, guardian ad litem, or child’s legal custodian) you cannot file a Chapter 13.36 Guardianship petition. However, a party can seek to have you appointed as a Chapter 13.36 Guardian. If the parties to the dependency action, including DSHS and the parent(s), agree that you should be the Chapter 13.36 Guardian, the state will prepare necessary documents and ask the court to appoint you to this position. In this case, you won’t need to hire a lawyer or file a petition yourself. It’s possible, though not likely, that you could “intervene” (join) in a Chapter 13.36 Guardianship action to raise issues you think are important. For this, working with a lawyer is strongly recommended. See “*Preparing to See a Lawyer*” on page 57.

If either DSHS or the parent(s) object to you as the child's Chapter 13.36 Guardian, it will be more difficult for you to be appointed. If you have DSHS support but not the parent(s)', DSHS can still petition the court to have you appointed as guardian. The court will decide. Likewise, if you have the parent(s)' support but not DSHS's, the parent(s)' lawyer (usually a public defender) can petition the court on your behalf. Your likelihood of being appointed despite DSHS objections will depend on the particular facts of the case, and whether the child is already living with you.

If both DSHS and the child's parent(s)' oppose your appointment, you are unlikely to be appointed the child's Chapter 13.36 Guardian. In all cases, you should figure out who among the parties to the dependency supports you as guardian and work with them. You should realize, though, that none of these parties represents you. Therefore, consider hiring your own lawyer with experience in dependency issues. See *"Preparing to See a Lawyer"* on page 57.

### What Are My Rights and Duties as a Chapter 13.36 Guardian?

The Juvenile Court will set out your specific rights and responsibilities as a Chapter 13.36 Guardian in a court order. Generally, you'll have most of the rights and duties of a parent, including

1. The duty to protect, nurture, discipline and educate the child;
2. The duty to provide food, clothing, shelter, the education required by law, and health care (including, for instance, medical, dental, mental health, psychological, and psychiatric care and treatment);
3. The right to consent to health care and sign a release authorizing the sharing of health care information with appropriate authorities, according to state law;
4. The right to consent to the child's participation in social and school activities;
5. The duty to notify the court of a change of address; **and**
6. If the child has independent funds or other valuable property under your control, the duty to provide the court with an annual written accounting, with appropriate support, regarding receipts and expenditures.

The court order will also specify

1. Whether and how often the child may have contact with his or her parent(s) or any siblings (though DSHS will make no further attempts to reunify the parent(s) and child), **and**
2. Whether and what sort of continuing oversight of this dependency the court will have.

Though you'll have most of the rights and responsibilities of a parent, it's important to remember that the parent(s)' rights are not terminated by a Chapter 13.36 Guardianship order, and that they can move to modify the guardianship order at any time.

### Why Should I Consider Becoming a Chapter 13.36 Guardian?

If you think you may be caring for a dependent child indefinitely, but can't or don't want to adopt the child, then you may want to consider Chapter 13.36 Guardianship.

While Chapter 13.36 Guardianship is considered a "permanent" plan for dependent children, the parent(s) will still have parental rights to the child and could petition to terminate your guardianship. DSHS and other caregivers are often reluctant to support Chapter 13.36 Guardianships for younger children because of this. They do, however, see it as a useful tool for older children who want both a relationship with parent(s) and a stable placement with the person who will become guardian.

Again, Chapter 13.36 Guardianship is not necessarily a permanent solution like adoption. *See the next section of this chapter for more information about adoption in a dependency case.*

### Can the Chapter 13.36 Guardianship Be Terminated?

Yes. There are two ways to do this:

**By petition:** The parent(s) can petition the court to terminate the guardianship. The parent(s) would have to prove that a substantial change has occurred in your circumstances or the child's, and that termination is necessary to serve the child's best interests. Depending on the circumstances, the child may be returned to the parent(s) or put in a new placement.

**By agreement:** The court may terminate the guardianship and return the child to the parent(s) if

1. All the parties (including the child if she or he is 12 years old or older) agree, **and**
2. The court finds:
  - a. The parent(s) successfully corrected parenting deficiencies, **and**
  - b. That returning the child to the parent(s) is no longer a risk to the child's health, safety, or welfare, **and**
  - c. That returning the child to the parent(s) is in the child's best interests.

### What If I Am or the Child or Parent Is an Immigrant?

*See the "Special Information for Immigrant Families" section in Chapter 3.*

## When You Are a Chapter 13.36 Guardian

### Can the Child or I Receive Public Assistance or Similar Benefits?

If you are a Chapter 13.36 Guardian, this may entitle you and the child to:

- Relative Guardianship Assistance Program (R-GAP) subsidy or Temporary Assistance for Needy Families (TANF);
- Food benefits;
- Medical assistance;
- Child care subsidy; and
- Social Security benefits.

**R-GAP:** The Children's Administration of DSHS provides ongoing monthly cash payments and Medicaid for dependent youth through R-GAP. To qualify, you must be a relative of the child and a licensed foster care provider, and the child must have been living with you as a foster child for at least six months when the court entered your Chapter 13.36 Guardianship order. The R-GAP benefit can be up to 90 percent of what you were receiving in foster care payments.

**TANF:** If you do not qualify for R-GAP subsidies, you and the child may still be entitled to Temporary Assistance for Needy Families (TANF), and to medical assistance. If your entire family is needy and you are related to the child, you may all be eligible for a TANF "Needy Family" Grant, including that child, as well as food benefits and possibly a child care subsidy. If only the child is needy, he or she may qualify for a TANF "Non-Needy" or "Child-Only" Grant.

To apply for TANF benefits, you need to contact the Department of Social and Health Services (DSHS). For both types of grants, DSHS will consider certain income of all adults and children in your household, as well as the income of the child who is the subject of your temporary parental consent agreement. You may be required to sign over your right to receive child support to DSHS.

Things to know about the Child-Only Grant:

- When the child has been placed in your home by a state or tribal child welfare agency and the child welfare case is still open, your income will not be considered in determining eligibility. In that situation, only the child's income is considered.
- In all other cases, your income must be below a certain amount based on the Federal Poverty Level to be eligible for a Child-Only Grant. (As of this printing, the Washington legislature is considering raising the TANF income limit on non-parent caregivers to 400% FPL.) See *"Federal Poverty Guidelines" listed in Resources at the end of this booklet.*
- Your assets (home, savings, etc.) are not considered in determining eligibility for a Child-Only Grant.
- Non-relatives and some more distant relatives must undergo a Washington State Patrol background check in order to receive a Child-Only Grant.
- A Child-Only Grant has no time limit.

Things to know about the Needy Family Grant:

- The Needy Family Grant is limited to a 60-month lifetime maximum.

In general, all TANF eligibility expires when the oldest child in your household reaches age 18.

**Food benefits:** See *Resources at the end of this booklet for information about food benefits.*

**Medical assistance:** See *Resources at the end of this booklet for information about medical assistance.*

**Child care subsidy:** See *Resources at the end of this booklet for information about child care subsidy.*

**Social Security benefits:** The child may be eligible to receive Social Security benefits (such as survivor, disability, or retirement benefits) through their parents' or grandparents' work record. As a non-parent caregiver, you can apply for these benefits on behalf of the child. See *Resources at the end of this booklet.*

### Can I Receive Child Support?

The court can order the child's parents to pay child support to you, as guardian, based on both parents' income. The court can attribute income to a parent who is not employed. If you are receiving R-GAP subsidies, TANF, or medical coupons, the state Division of Child Support will try to collect support from the parents to reimburse the state for those benefits. The Division of Child Support can seek support through an administrative hearing or through a court action.

### Can I Get Income Tax Benefits?

Maybe. It is best to talk to a tax professional about your specific situation. Here are two tax benefits relevant to Chapter 13.36 Guardians:

**Dependency Exemption:** If you provide over half of a child's support during the year, you may be able to take the exemption for dependents on your income taxes that year. The Internal Revenue Service (IRS)

may ask for proof that you are supporting the child, so it is helpful for you to keep receipts and a list of expenses. You can request that the Juvenile Court award you the exemption in its guardianship order.

**Earned Income Credit:** If you qualify, this credit reduces the amount of taxes you owe. If you don't owe taxes, the IRS will send you a refund check. For the 2016 tax year, the credit amount is between \$3,373 and \$6,269, depending on the number of children in your care. You may be eligible if:

1. You earned less than \$39,296 (\$44,846 if married filing jointly) in adjusted gross income during that year (if you have passive income such as interest earnings or dividend income you may not qualify for the earned income credit), **and**
2. You have at least one qualifying child living with you for more than half of a tax year. The child must be:
  - Under age 19,
  - A full-time student under age 24, or
  - Any age and permanently and totally disabled.

If you have more than one child in your care, the amount you may earn changes. Check with the Internal Revenue Service. The figures given here are for the 2016 tax year; they may change in future years.

*For more information, go to [WashingtonLawHelp.org](http://WashingtonLawHelp.org) and click on "Money & Debt," then "Income taxes."*

### Will The Child Have Inheritance Rights to My Estate?

Being a child's Chapter 13.36 Guardian does not affect the child's right to inherit your property. If you want a child in your care to receive all or a particular part of your property when you die, the best way to guarantee this is to say so in a Will. If you die without a valid Will, state laws determine how your property will be distributed. Under those laws, such a child must be a blood or adopted relative to inherit from you, and may have a lower priority than other family members such as your spouse or your children. *For more information about Wills and estate planning, see the Legal Voice publication "Handbook for Washington Seniors: Legal Rights and Resources, 2nd Edition" listed in Resources at the end of this booklet.*

### Can I Get Health Insurance for the Child Through My Employer?

If there is a child support order, the parent(s) may be required to provide medical insurance for the child. If insurance is available through the parent(s), you may request that the parent(s) or the Division of Child Support buy coverage for the child.

Note that the child may qualify for medical benefits from the state. *See Resources at the end of this booklet.*

If coverage through the child's parent(s) or state medical benefits are not an option, you may be able to include the child on your employer's health insurance policy. Even if you can include the child on your employer's plan, you may have to pay the monthly premium. Check with your employer.

### Can I Take Family Leave to Care for the Child?

Maybe. Under the federal Family and Medical Leave Act, you may be entitled to take up to 12 weeks of unpaid leave per year – including the first year the child is placed with you – if:

1. The child who receives your day-to-day care or financial support under a Chapter 13.36 Guardianship needs your care due to a serious health condition; **and**

2. You have worked for the same employer for a total of at least 12 months (does not have to be 12 months in a row); **and**
3. You have worked at least 1,250 hours in the 12 months before taking leave (these 12 months *do* have to be in a row); **and**
4. You work for:
  - A private employer with 50 or more employees; **or**
  - A federal/state/local public agency.

*For more information, see the Legal Voice publication “Family Leave Laws” listed in Resources at the end of this booklet.*

### **What Is the Difference Between a Chapter 13.36 Guardianship and Long-Term Relative Placement of a Dependent?**

A Chapter 13.36 Guardianship and Long-Term Relative Placement are similar approaches to dealing with a dependent child on a long-term basis.

One major difference is that under the guardianship the child is no longer considered a dependent, under the ongoing supervision of DSHS. DSHS continues to play a role in a long-term relative placement arrangement. Both arrangements are subject to court oversight until the child turns 18 or the court terminates the arrangement.

Another difference is that if a relative with long-term placement is also a foster parent, the maximum subsidy available through DSHS is greater than that available to a relative with a Chapter 13.36 Guardianship. The rights and responsibilities of a guardian may, by court order, be broader than those granted to a relative with long-term placement.

# Adoption or Nonparental Custody in a Dependency Case

In addition to relative placement and Chapter 13.36 Guardianship – discussed earlier in this booklet – there are two other options that may be available to you if a dependency case is pending: adoption and nonparental custody. These options were discussed earlier in this booklet in some detail and you should refer to those sections. Following is some additional information that applies specifically in dependency cases.

## How Does Adoption Work in a Dependency Case?

The adoption process is basically the same whether a dependency case is pending or not. The main difference is that in a dependency, the DSHS social worker is the one who files a petition for termination of parental rights. No child can be adopted until he or she is legally free, meaning the parental rights of both parents' have been voluntarily given up or terminated by the court.

**Open Adoption:** A parent who voluntarily gives up parental rights may also have the option of entering an open adoption agreement. The details of the agreement are worked out between the birth parents, the DSHS social worker, the guardian ad litem for the child, and the prospective adoptive parents. If you are the DSHS-designated adoptive parent, you should talk to a lawyer before signing an open adoption agreement. These agreements must be approved by Juvenile Court. *For more on “open adoption agreements”, see page 26.*

**When DSHS Disagrees:** If you are not the DSHS-designated adoptive parent, it is still possible for you to file an adoption petition and ask the court to disagree with DSHS's designation. However, it can be difficult to win if DSHS decides to contest (fight) your adoption petition. You must prove to the court “by clear, cogent and convincing evidence” that your proposed adoption is in the best interest of the child over DSHS's objections. Again, working with a lawyer is strongly advised.

**Subsidized Adoption:** You may be eligible for federal and/or state-funded adoption support through DSHS if you decide to adopt a child as part of a dependency case. Adoption support is cash support payments and medical coverage for special needs children provided on an ongoing basis after the adoption. This is called a “subsidized adoption.” You should look into this before the adoption is finalized because eligibility must be determined beforehand. Once the subsidy is approved, adjustments can be made as the child gets older and as the child's needs change. Subsidies can be increased to cover the cost of counseling, or even the need for residential treatment if necessary.

## How Does a Nonparental Custody Action Work in a Dependency Case?

In dependency cases when neither reuniting a child with the parents nor terminating parental rights are appropriate, nonparental custody is one option. *See page 17.* A nonparental custody order grants custody on a permanent basis. It allows the person with custody to act as a parent for the child. Since the order is permanent, the dependency action is dismissed and there is no further juvenile court or DSHS involvement.

### **Where Is the Nonparental Custody Action Heard?**

If you file a nonparental custody action while the family is involved in a dependency action, you will need to seek concurrent jurisdiction in family court. “Concurrent jurisdiction” is essentially permission from the juvenile court (where the dependency action is taking place) allowing the family court (the court that hears the nonparental custody action) to make a decision about whether nonparental custody is in the child’s best interest. This process may vary depending on which county you are in; some counties may refer you to “Unified Family Court,” which allows the dependency and the nonparental custody actions to be addressed at the same time and by the same court. In most cases, once the nonparental custody order is granted, then the dependency is dismissed and DSHS no longer supervises the placement.

### **What If I Am or the Child or Parent Is an Immigrant?**

*See the “Special Information for Immigrant Families” section in Chapter 3.*

# Juvenile Court Dependency Proceedings

What:	72-Hour Shelter Care Hearing	30-Day Shelter Care Hearing	Fact-Finding Hearing	Disposition Hearing	Review Hearing	Permanency Planning Hearing
<b>When:</b>	Within 72 hours of placement.	30 days from entry of shelter care order. (Not an in-court hearing)	Within 75 days of filing of petition.	At the Fact-Finding hearing or within 14 days of the Fact-Finding hearing.	At least once every 6 months after dependency is established.	Between 9-12 months after child's out-of-home placement.
<b>Issues to Address:</b>	<input type="checkbox"/> Placement: <ul style="list-style-type: none"> <li>• Home</li> <li>• Relative</li> <li>• Responsible adult</li> <li>• Foster care</li> <li>• Group Care</li> </ul> <input type="checkbox"/> Visitation: <ul style="list-style-type: none"> <li>• Supervised</li> <li>• Unsupervised</li> <li>• Frequency</li> <li>• Time/Place</li> </ul>	<input type="checkbox"/> Shelter Care <ul style="list-style-type: none"> <li>• Whether current shelter care order is still appropriate while parties await the fact finding hearing.</li> </ul>	<input type="checkbox"/> Determine facts as alleged in petition <input type="checkbox"/> Determine legal sufficiency of the case <input type="checkbox"/> Determine type of dependency: <ul style="list-style-type: none"> <li>• In-home with services</li> <li>• Out-of-home with services</li> </ul>	<input type="checkbox"/> Placement: <ul style="list-style-type: none"> <li>• Home</li> <li>• Relative</li> <li>• Responsible adult</li> <li>• Foster care</li> <li>• Group Care</li> </ul> <input type="checkbox"/> Services* <input type="checkbox"/> Visitation: <ul style="list-style-type: none"> <li>• Supervised</li> <li>• Unsupervised</li> <li>• Frequency</li> <li>• Time/Place</li> </ul>	<input type="checkbox"/> Progress and compliance with court order <input type="checkbox"/> Services* <input type="checkbox"/> Placement <input type="checkbox"/> Visitation (if not returned home)	Permanent Plan (determined by Court)
<b>Parent Choices:</b>	<ul style="list-style-type: none"> <li>• Agree/cooperate</li> <li>• Compromise/negotiate</li> <li>• Disagree: Judge decides placement and visitation issues</li> </ul>	<ul style="list-style-type: none"> <li>• Agree to current order</li> <li>• Disagree – See Options below</li> </ul>	<ul style="list-style-type: none"> <li>• Agree/cooperate</li> <li>• Compromise/negotiate</li> <li>• Disagree/contest dependency</li> </ul>	<ul style="list-style-type: none"> <li>• Agree/cooperate</li> <li>• Disagree/contest placement, services, and visitation proposed by DSHS</li> </ul>	<ul style="list-style-type: none"> <li>• Agree/cooperate</li> <li>• Disagree/contest findings, placement, services, and visitation proposed by DSHS</li> </ul>	<ul style="list-style-type: none"> <li>• Agree/cooperate</li> <li>• Disagree/contest proposed permanent plan</li> </ul>
<b>Options:</b>	<ul style="list-style-type: none"> <li>• Child returns home</li> <li>• Child placed in out-of-home care</li> <li>• Court determines whether there is a basis for shelter care</li> </ul>	<ul style="list-style-type: none"> <li>• Continue current order</li> <li>• Change order (To change the current shelter care order, parents must file a motion and demonstrate a substantial change in circumstances. Motion can be noted at any time between 72-hour shelter care hearing and fact-finding hearing.)</li> </ul>	<ul style="list-style-type: none"> <li>• Court establishes dependency</li> <li>• Court denies dependency</li> </ul>	<ul style="list-style-type: none"> <li>• Child returns/stays home</li> <li>• Child placed/stays in out-of-home care</li> </ul>	<ul style="list-style-type: none"> <li>• Continue dependency</li> <li>• Change placement/return home</li> <li>• Dismissal</li> </ul>	<ul style="list-style-type: none"> <li>• Continue</li> <li>• Dependency</li> <li>• Dismissal</li> <li>• Return home</li> <li>• Long-term foster care</li> <li>• Permanent custody order</li> <li>• Proceed with Chapter 13-36 Guardianship</li> <li>• Proceed with termination of parental rights</li> </ul>

\* Examples of services to be ordered: evaluations, parenting classes, counseling, substance abuse counseling, anger management classes, domestic violence classes, sexual offender treatment, victim/survivor treatment, etc.





## Chapter 3

# Other Information

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- Indian Child Welfare Act
- Non-parents' Visitation Rights
- Child In Need of Services (CHINS) and At-Risk Youth (ARY) Procedures
- Preparing to See a Lawyer

# Indian Child Welfare Act

## A Brief Summary:

If a child is Native American, special rules apply in dependency, nonparental custody, and adoption proceedings in state court. This is because of the Indian Child Welfare Act (“ICWA”), a federal law passed in 1978 that protects Native American children from being arbitrarily removed from their families and tribes. Congress passed the law because Native American children for many years had been removed from and placed outside their families, tribes, and native culture in disproportionately high numbers.

The ICWA is complex and this booklet cannot give detailed information about its provisions. If you know or have any reason to suspect that the child whose welfare concerns you may be all or part Native American, it is very important to tell this to your lawyer, DSHS worker, the guardian ad litem or the parent’s lawyer immediately so that he or she can comply with the law’s requirements. This will avoid potentially serious problems later. In Washington, the state and the tribal governments have legal agreements that further detail the processes and circumstances that govern the placement of a Native American child.

The ICWA defines an “Indian child” as

1. An unmarried person under age 18 who is
  - a member of a Native American tribe, **or**
  - eligible for membership in a Native American tribe,**and**
2. Is the biological child of a member of a Native American tribe.

The law defines “Indian tribes” as those tribes recognized by the federal Bureau of Indian Affairs. This definition also includes Alaska Natives who are members of an Alaska Native Corporation. Under Washington state law, children who are not members of federally-recognized tribes but who are members of other tribes (Canadian First Nation children) and Native American children who are not enrolled in a tribe also receive special treatment in certain types of cases.

The ICWA affects dependency, nonparental custody, and adoptive cases in a variety of ways. If a Native American child resides within a tribal reservation or has been made a ward of tribal court, the state court normally must transfer the case to that tribal court. If the child resides off the reservation and is not a ward of the tribal court, the law requires the state court to transfer the case to the appropriate tribal court unless there is good reason not to or an objection is raised by either parent.

Many custody proceedings subject to ICWA start in state court, and are transferred to tribal court only if the tribe or one of the parties files a motion to transfer the case to tribal court. In any case involving a Native American child, the child’s tribe must be given notice of the case and may have the right to “intervene” (join) in the case. The ICWA does not apply to custody, adoption, guardianship or dependency actions in tribal court.

The ICWA makes it more difficult to remove a Native American child from his or her home and also makes it more difficult to take custody away from the child’s parent(s) or to terminate their parental rights. There is a higher burden of proof in ICWA cases, which must include testimony from a qualified

expert witness. In dependencies, the law requires that a child be placed with extended family members or in Native American foster care approved by the child's tribe rather than non-Native-American foster care (unless there is a good reason not to do so).

The law says "extended family members" are those defined by the law or custom of the Native American child's tribe. If there is no law or custom, an "extended family member" is a person who is at least eighteen and who is the child's grandparent, aunt or uncle, brother or sister, brother-in-law or sister-in-law, niece or nephew, first or second cousin, or step-parent who provides care in the family home on a twenty-four-hour basis to the child.

In adoption cases, the ICWA (and related state laws) sets out special timetables and rules governing the parents' consent to the adoption and their right to revoke the consent. The child's tribe must be given notice of the adoption proceeding. The law also requires that the child be placed for adoption with a member of the child's extended family, other members of the child's tribe or other Native American families (unless there is a good reason not to do so).

For further information or advice, talk to a legal expert on the Indian Child Welfare Act and its procedures.

## Non-Parents' Visitation Rights

As of this writing, there is no law in Washington State that gives non-parents – including grandparents – the legal right to visit a child. Prior Washington State laws that granted non-parental visitation were declared unconstitutional. The Court reasoned that parents have a constitutionally protected right to the care and control of their children. Therefore, at present, visits with children must be approved by the parents.

# Child in Need of Services (CHINS) and At-Risk Youth (ARY) Procedures

What to do when a child refuses to accept fixed curfew hours and stays out all night? When he or she won't go to school or is smoking so much marijuana it seriously affects his or her behavior? When he or she threatens suicide and has, several times, cut him or herself? Or when he or she runs away from home and moves in with a friend? None of these children should be prosecuted as criminals. None of them qualify for help as "dependent" children. But help is available.

Washington law helps these children and their families through two separate but similar court-based programs, one for "at risk youth" and the other for "children in need of services." The purpose of both procedures is family reconciliation.

The first is aimed at children with difficult behavior problems; the process may be started by a child's parent(s). The second is aimed at children with more serious problems, including sexual abuse; the process may be started by DSHS, the parent(s) (including legal custodians or guardians), or the child. Under both programs the court may order out-of-home placement, and can provide psychiatric and medical care, mental health, drug or alcohol treatment, and other social services to meet the needs of the child, the parent(s), and the family.

The court's power to commit young people with substance abuse or mental health problems has significant impacts on adolescents (teenagers). The law and related procedures change often. Talk to an experienced lawyer if you have any questions or need legal advice.

As a grandparent or other non-parental caregiver, you *do not* have the legal right to initiate either of these actions unless you are the legal custodian or guardian. However, you may participate in the process of helping the court determine placement options and services for the child.

## At-Risk Youth (ARY) Petitions

### What Makes a Child an "At-Risk Youth"?

An "at-risk youth" is any unemancipated person under age 18 who

- Is absent from home for at least 72 hours without parental consent; **or**
- Is beyond parental control, therefore causing a danger to him/herself or others; **or**
- Has a substance abuse problem for which there are no pending criminal charges.

### How Do I Start the Process?

To have the court rule that a child is an at-risk youth, you (the child's parent, legal guardian or custodian) must file an ARY petition in your home county court. DSHS will be involved. This petition cannot be filed if the child is the subject of an active dependency action.

Among other things, the ARY petition must

1. State that court intervention and supervision are necessary to assist the parent in the care, custody, and control of the child;
2. Identify any alternatives to court intervention that have been tried, **and**
3. Identify the reasons why any other alternatives have not been tried.

No petition will be accepted unless a family assessment has been completed by DSHS. Depending on claims made in the petition, the court will decide whether to consider the issues at a fact-finding hearing, or to dismiss the case.

### **Can I Stop the ARY Process Once It Has Begun?**

Yes. You may dismiss the petition at any time unless extenuating circumstances prevent it.

### **Do I Have the Right to a Lawyer?**

In ARY petition proceedings, only the child has the right to a lawyer. The court will appoint a public defender for the child, or the child can hire a private lawyer. You do not have a right to a lawyer, but may hire a lawyer at your own expense.

### **What Will an ARY Court Order Require?**

Under an ARY petition, the child must live with you unless you have approved an out-of-home placement. At the disposition hearing the court will hear recommendations from all parties and will enter an order intended to help you maintain the “care, custody and control” of the child. Possible conditions include school attendance; counseling for the child and/or you; substance abuse or mental health outpatient treatment; and periodic reporting to DSHS or another designated person or agency. You are financially responsible for all costs related to the plan, unless you or the child is eligible for cost coverage through public benefits.

### **What If the Child Is a Serious Danger to Her/Himself?**

The court can order the child be placed in a staff-secure facility (such as a mental health treatment facility) if

1. State funds are available,
2. The court finds that the child has serious mental health or substance abuse issues, **and**
3. A less restrictive environment cannot provide appropriate protections.

This order will be reviewed after 30 days. Generally, such placement or other court oversight won't continue more than 180 days.

### **What If the Child Does Not Follow the Court Order?**

The court can impose up to seven days detention and a \$100 fine for *any* party found in contempt of the court order. A contempt ruling requires the judge to find that the party willfully violated the court order.

### **What If I Am or the Child or Parent Is an Immigrant?**

*See the “Special Information for Immigrant Families” section in Chapter 3.*

## Child in Need of Services (CHINS) Petitions

The Child in Need of Services (“CHINS”) petition, like the ARY petition, is a civil proceeding, filed in the Juvenile Division of a State Superior Court.

A CHINS petition is one way a child can get legal permission for an out-of-home placement which the parent(s) oppose. The child must show good cause for the change. A CHINS is used only for situations where the child’s residence is in dispute. As with ARY, the CHINS petitioner must obtain a DSHS family assessment before filing the petition.

### What Makes a Child a “Child In Need of Services”?

Although the CHINS petition is similar to the ARY petition, the requirements that need to be satisfied are different. Before the court will grant a CHINS petition involving an unemancipated child under age 18, at least one of the following conditions must be met:

- The child is beyond parental control, and this makes the child a danger to him/herself or others; **or**
- The child has been reported as a runaway, gone from his/her proper residence for more than 24 hours on two or more occasions, and either has a serious substance abuse problem or acts in ways that create risks to him/herself or others; **or**
- The child needs special services and the parent(s) have been unsuccessful, or unwilling, to create and maintain a functioning family situation; **or**
- The child is sexually exploited (the victim of commercial sexual abuse).

### How Does the Process Start?

A child, a parent, legal custodian or guardian, or DSHS may file a CHINS petition asking for a court order to allow a child to reside outside his or her legal residence.

### Do I Have the Right to a Lawyer?

The law includes a right to a lawyer for all parties involved. A lawyer will be appointed for a party who cannot afford one. If you are not a party to the case, you do not have the right to a lawyer, but you may hire a lawyer at your own expense.

### What Will a CHINS Court Order Require?

The conditions the court can order under a CHINS disposition are the same as for an ARY disposition. However, more ongoing case management and counseling services are available to parties in a CHINS case than in an ARY case. The court may order a temporary out-of-home placement for up to fourteen days, without a dispositional hearing. An out-of-home placement must be reviewed every ninety days and may last up to 180 days. The court may order the parent(s) to pay child support unless the parent objects to the placement and is actively working on reuniting with the child.

### What If the Child Does Not Follow the Court Order?

Contempt of a CHINS order can result in a fine, up to seven days detention, or both, for *any* party. A contempt ruling requires the judge to find that the party willfully violated the court order.

### What If I Am or the Child or Parent Is an Immigrant?

See the “Special Information for Immigrant Families” section in Chapter 3.

# Preparing to See a Lawyer

It is always best to talk to a lawyer if you decide to pursue a court action on behalf of a child in your care. *For information on finding, interviewing, retaining, and working with lawyers, see the Legal Voice publications “How to Find a Lawyer and Other Legal Resources in Washington State” and “Working with a Lawyer,” listed in Resources at the end of this booklet.*

Your first meeting with a lawyer is called an “initial consultation.” During this meeting, the lawyer will decide whether she or he wants to take your case, and you will decide whether you want to hire this lawyer. Note: Initial consultations are confidential, meaning everything said and written between you and the lawyer at this meeting cannot be shared without your permission.

It is helpful to have a list of questions written out and space to write notes. This will help you remember the lawyer’s answers and your thoughts. Your notes will be helpful if you are comparing lawyers.

Gather documents related to the child and bring copies to the initial consultation. This may include court orders, medical records, police reports, the child’s birth certificate, or other records related to the care and well-being of the child. Also bring information regarding daycare providers and school information.

Prepare a timeline that shows where and with whom the child has lived since birth.

Bring the names, addresses, and telephone numbers of the parents, foster parents, and/or DSHS staff who have been responsible for the child.

Feel free to ask a lawyer about the possibility of a payment plan or a reduced fee, or about using mediation to try to reach agreement with the child’s parents without having an expensive trial. In mediation, a skilled mediator works with all sides to try to help them come up with their own solution to the problem. Additionally, ask the lawyer whether he or she will provide unbundled legal services (also known as limited representation) for you. In unbundled legal services, you keep costs lower by doing some of the legal work and research yourself. For example, you could complete all the documents to file a custody case but have the lawyer review them to make sure they are complete, or, you could have the lawyer complete all the documents and you go to court on your own, or you could hire the lawyer to represent you for one or more court hearings.

*For more information about finding legal help as well as forms and instructions for how to file the petition yourself, see listings under “Free Publications” and “Legal Help” in Resources at the end of this booklet.*

# Special Information for Immigrant Families

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If you, the parent, or child is an undocumented immigrant, you may have questions about:

- Whether it is safe for you to go to court or file a court case;
- Whether the court will ask about the immigration status of you, the child, or the parents;
- What may happen to the child if you or a parent is deported; and
- What immigration relief might be available for the child if you get custody, guardianship, or adopt the child?

For answers to these questions, it is strongly recommended that you consult with a family law lawyer and immigration lawyer to determine how the immigration status may impact your specific family situation. There may be important immigration relief available for children who have been abused, neglected, or abandoned by a parent. Consult with an immigration lawyer about possible options. *See listings under “Legal Help” and “Immigrants” in Resources at the end of this booklet.*

# Glossary

**ADOPTION:** The legal creation of a parent-child relationship. Adopted children are treated as natural children of the adoptive parents for all legal purposes, including inheritance rights. *See also “Open Adoption” and “Subsidized Adoption.”*

**AT RISK YOUTH (“ARY”):** An unemancipated person under the age of 18 who is absent from home for at least 72 hours without parental consent; or is beyond parental control, therefore causing a danger to himself or others; or has a substance abuse problem for which there are no pending criminal charges.

**CAREGIVER:** A general term describing a non-parent who cares for a child.

**CHAPTER 13.36 GUARDIAN:** A person age 21 or over who meets the minimum requirements to care for children under R.C.W. 74.15.030, including, but not limited to a licensed foster parent, relative or “suitable person,” whom the court makes the guardian of a dependent child under R.C.W. Ch. 13.34 and Ch. 13.36. The Chapter 13.36 Guardian is responsible for the care, custody, control, and nurturing of the child. (A “suitable person” is someone with ties to the child or family, who has completed required criminal background checks and appear able to care for the child.) Sometimes called “Minor Guardian.”

**CHILD IN NEED OF SERVICES (“CHINS”):** An unemancipated child under age 18, who is beyond parental control, making him or her a danger to himself/herself or others; **or** who has been reported as a runaway (gone from his or her proper residence for more than 24 hours on two or more occasions) **and** who either has a serious substance abuse problem or acts in ways that create risks to himself, herself or others; **or** who needs special services **and** whose parent(s) have been unsuccessful, or unwilling, to create and maintain a functioning family situation; or who is sexually exploited (the victim of commercial sexual abuse).

**COURT APPOINTED SPECIAL ADVOCATE (CASA):** A volunteer appointed by the court to act as guardian ad litem for children in dependency and/or family court matters.

**DEPENDENT CHILD:** A child who has been abandoned; or who is abused or neglected by someone responsible for the child’s care; or who has no parent, guardian or custodian capable of adequately caring for the child, thus creating a danger of substantial psychological or physical damage.

**DEPENDENCY:** A legal proceeding in which the court determines whether a child is a dependent child and if so, orders appropriate remedies to end the situation.

**FOSTER PARENT:** A person who meets the legal requirements to be a foster parent, is licensed by the state to have foster children placed in his/her home, and is eligible for foster care pay.

**GRANDPARENT:** The parent of the mother or father of a child, including adoptive children. Step-grandparents are not considered grandparents for most legal purposes.

**GUARDIAN:** A person or agency given decision-making authority for a child who is not dependent. These rights may be limited by the court, but can include the authority to make medical decisions, decisions about education and financial decisions. A legal guardianship order (different from Chapter 13.36 Guardianship, defined above) does not address physical custody of the child.

**GUARDIAN AD LITEM (GAL):** A person who is appointed by the court to represent the best interests of a child in legal proceedings.

**ICWA:** The Indian Child Welfare Act, a federal law passed in 1978 that protects Native American children from being arbitrarily removed from their families and tribes.

**LONG-TERM RELATIVE CARE:** The court's placement of a dependent child with a relative or other responsible adult, in a foster home, or in group care. This type of placement is used primarily with children between the ages of sixteen and eighteen, but can include younger children if such long-term placement is appropriate. The law states a strong preference for placing the child with a relative or other "suitable person" for this period, if certain requirements are met. It requires a written agreement between the parties and the care provider.

**MEDIATION:** An alternative to a court hearing, available in visitation disputes, which allows both parties to the dispute to work out an acceptable resolution of disputed issues with the aid of a trained mediator, outside of court.

**MINOR GUARDIAN:** See "*Chapter 13.36 Guardian*"

**NONPARENTAL CUSTODY:** A circumstance when someone other than a child's birth parents ("non-parents), with significant ties to the child, has legal custody of the child, including the responsibility for meeting the child's physical, medical and emotional needs; also called "third party custody."

**OPEN ADOPTION:** An arrangement agreed to in writing by the child's birth parents and adoptive parents, in which the birth parents retain the legal right to have visitation or other contacts (telephone calls, letters, etc.) with the child after the adoption; the agreement must be approved by the court, the child's lawyer and/or guardian ad litem and DSHS, if it has custody of the child.

**OUT-OF-HOME CARE:** Placement of a child away from her/his home, usually in relative care, a foster home, group care home or with another responsible adult who is not the child's parent or guardian.

**PARENT(S):** One parent or both parents; either by birth or adoption.

**PERMANENT CUSTODY:** This term is used in the dependency statutes to refer to nonparental custody. It is a placement option that allows a child to be placed permanently and grants the custodian rights to make decisions on behalf of the child. Once the court orders permanent custody, the dependency is dismissed and juvenile court hearings are no longer needed.

**PERMANENCY PLAN:** In dependency actions, this is the long-term plan for the care of the child. It is a plan of care that identifies end goals for the child, services to be provided and visitation rights, until the child is reunited with the parent(s), turns 18 years old, or becomes emancipated. The permanency plan may include return of the child to the parent, guardian or legal custodian; termination of parental rights and adoption; Chapter 13.36 guardianship; entry of an order of permanent legal custody (nonparental custody); or long-term relative or foster care. The plan is usually formed by DSHS with input from others involved in the case.

**PETITION:** A request for relief. In a legal action petitions are usually written and filed with the court, requesting the court to take, or not to take, some action.

**PREVENTIVE SERVICES:** Services offered to a family to prevent out-of-home placement while still protecting the child.

**PRO SE:** A Latin term used to describe someone who is representing themselves in court, without a lawyer.

**SUBSIDIZED ADOPTION:** A program that allows adoptive parents of a special needs child who was previously deemed to be a dependent child to receive payments to help meet the special needs of the child.

**RELATIVE CARE:** See “*Long-Term Relative Care.*”

**TANF:** Temporary Assistance to Needy Families, a state financial benefit program.

**TANF CHILD-ONLY GRANT:** A TANF grant in which the government provides grant funds to the child based on the income of the child and all adults and children in the household (eligibility is different for certain child welfare cases). The Child-Only grant has no time limit.

**TANF NEEDY FAMILY GRANT:** A TANF grant in which the government provides funds to both the child and the caregiver’s family, based on the income of the child and all adults and children in the household. A household may get TANF Needy Family grant for 60 months maximum and employable household members must enroll in a work program.

**TEMPORARY PARENTAL CONSENT AGREEMENT:** A document in which a child’s parent(s) give another person the temporary authority to care for the child and make decisions regarding the child.

**TERMINATION OF PARENTAL RIGHTS:** A legal procedure that ends the legal relationship between a child and parent(s). Parental rights are legally protected rights and are terminated by court order only when the court has sufficient reason to do so and after notice and hearing are given to the parent(s). After all parental rights are terminated, a child is available for adoption.

**UNBUNDLED LEGAL SERVICES:** An arrangement between a lawyer and a client in which the lawyer helps the client represent himself or herself. The client pays the lawyer only for the hours that the lawyer actually worked on the matter, preparing or reviewing documents, giving legal advice, or appearing at a hearing.

# Resources

## Statewide Resources

Below are various resources, benefits, and support services available to relatives through the Department of Social and Health Services (DSHS) and other public and private agencies.

## Adoption

- Check your local court website for information on filing an adoption case as well as accessing adoption information from the county clerk's office.
- **King County Adoption Services:** Assists pro se litigants in limited types of adoptions. Litigants may purchase adoption legal forms and schedule adoption facilitation appointments with the Adoption Paralegal. Adoption Services also conducts file review for adoption termination, finalization, and review hearings.  
Online: [www.kingcounty.gov/courts/superior-court/family/adoption-services.aspx](http://www.kingcounty.gov/courts/superior-court/family/adoption-services.aspx)
- **Post Adoption Questions and Answers**, by DSHS: See listing under “Free Publications” on page 64.

## Child Care and Early Learning

- **Child Care Aware:** For other child care information, including Homeless Child Care.  
By phone: 1-866-416-4321  
Online: <http://wa.childcareaware.org/families>
- **ECEAP (Early Childhood Education and Assistance Program) and Head Start:** Provide free services and support to 3 and 4 year olds who have risk factors that could interfere with school success, including children in kinship care.  
By phone: 1-866-482-4325  
Online: [www.del.wa.gov/parents-family/eceap-and-head-start](http://www.del.wa.gov/parents-family/eceap-and-head-start)
- **Washington State Child Care Programs:** Relative caregivers may qualify for one of the state's subsidized child care programs. These include:
  - **Child Care Subsidies:** Relatives who are employed and caring for state-dependent children may also be eligible for subsidized child care and should contact their social worker.
  - **Homeless Child Care:** For families who are temporarily homeless (limited to certain counties). Caregivers must not be eligible for any other child care subsidy program and must be engaged in an approved activity, such as looking for work or for housing.  
By phone: 1-877-501-2233 for the Washington State Customer Service Center  
Online: [www.del.wa.gov/parents-family/getting-help-paying-child-care](http://www.del.wa.gov/parents-family/getting-help-paying-child-care)

- **Seasonal Child Care:** For seasonal agricultural workers. In most cases, caregivers may qualify even if only one person in a couple is working. If both are legal guardians to the child and listed in the court documents, both must be working to qualify.  
By phone: 1-877-501-2233 for the Washington State Customer Service Center  
Online: [www.del.wa.gov/parents-family/getting-help-paying-child-care](http://www.del.wa.gov/parents-family/getting-help-paying-child-care)
- **Working Connections Child Care (WCCC)** for employed caregivers:  
In most cases, caregivers may qualify even if only one person in a couple is working. If both are legal guardians to the child and listed in the court documents, both must be working to qualify.  
By phone: 1-877-501-2233 for the Washington State Customer Service Center  
Online: [www.del.wa.gov/parents-family/getting-help-paying-child-care](http://www.del.wa.gov/parents-family/getting-help-paying-child-care)

## Child Support

- **Division of Child Support (DCS):** You can apply for DCS services even if you don't receive any public assistance. Receiving TANF or some kinds of medical assistance will automatically result in DCS opening a paternity case. DCS establishing paternity can help the family access benefits for which the child may be eligible, such as Social Security, and also help provide a family medical history. If you are afraid that establishing paternity or enforcing child support may be dangerous for you or the child, contact your local Community Services Office to discuss "good cause," which is a waiver of child support enforcement. DCS will enforce an existing child support order, such as a divorce decree, or will establish a support order if needed. DCS sets child support obligations based on a parent's ability to pay. DCS will also attempt to have the parents cover the child on their own medical insurance, if available.  
By phone: 1-800-442-KIDS  
Online: [www.childsupportonline.wa.gov](http://www.childsupportonline.wa.gov)

## Dental Services

- **2-1-1 Washington Information Network (WIN):** Call from anywhere in Washington to speak to an Information & Referral Specialist for assistance to find local dental contacts (translators available).  
By phone: 2-1-1 or 1-877-211-9274 (toll-free)
- **The Center for Pediatric Dentistry (CPD):** A collaboration of the University of Washington and Seattle Children's Hospital, provides comprehensive and specialty dental care to children of all ages, including children with special needs. Apple Health accepted.  
By phone: 206-543-5800  
Online: [www.thecenterforpediatricdentistry.com](http://www.thecenterforpediatricdentistry.com)
- **Consent for Medical Care:** State law allows relative caregivers to give informed consent for medical care for the child in their care (including dental and mental health care) even if they do not have a court order. When caring for a child in state custody, you must talk with the social worker to understand medical care the court must approve. For more information, see listings under "Free Publications" on page 64.
- **The Mighty Mouth:** Lists low-cost community dental clinics by county.  
Online: [www.themightymouth.org](http://www.themightymouth.org)
- **Washington State Department of Health:** A list of resources for finding dental care.  
Online: [www.doh.wa.gov/YouandYourFamily/OralHealth/FindingDentalCare](http://www.doh.wa.gov/YouandYourFamily/OralHealth/FindingDentalCare)

## Educational Advocacy

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- **The Office of the Education Ombuds (OEO):** Resolves complaints, disputes, and problems between families and public schools in all areas that affect student learning. The OEO functions independently from the public school system. Services are available to students from Kindergarten to 12th grade and are free and confidential. Contact OEO when you have an unresolved problem with a public school that impacts your student’s education; you want an independent assessment of the situation; or you have other questions about the education system.  
By phone: 1-866-297-2597  
Online: [www.oeo.wa.gov](http://www.oeo.wa.gov)

## Financial Help

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- **Kinship Caregivers Support Program (KCSP):** Short-term funds to help pay for basic needs (food, housing, clothing, school supplies, etc.) are available for relatives whose children are not involved in the child welfare system.  
By phone: Aging and Long-Term Support Administration at 1-800-422-3263 or 360-725-2556 to locate a local KCSP office  
Online: [www.dshs.wa.gov/altsa/hcs/kinship-care/benefits](http://www.dshs.wa.gov/altsa/hcs/kinship-care/benefits); click on “Financial Help.”
- **TANF (Temporary Assistance for Needy Families) Child-Only Grant:** Monthly cash grants may be available for relatives who are the primary caregivers raising children. Both the child’s and caregiver’s income are considered, but only the child’s resources figure in determining eligibility (caregiver’s income is not considered if the child was placed by a child welfare agency and the case is open). Caregivers may also be eligible for a TANF grant for themselves if they meet eligibility criteria. Recipients of child-only TANF can get additional one-time cash payments for help with emergency housing or utility needs through the Additional Requirements for Emergent Needs (AREN) program. Ask your local CSO about these funds.  
By phone: 1-877-501-2233 to find your local Community Service Office  
In person: Visit your local Community Service Office; to find it, call the number below or go to [www.dshs.wa.gov/esa/esa-find-office](http://www.dshs.wa.gov/esa/esa-find-office)  
Online: [www.washingtonconnection.org](http://www.washingtonconnection.org)
- **Relative Support Service Funds:** Provide emergency short-term funds to unlicensed relatives and other approved caregivers with a state-dependent child (state-dependent children are in the legal custody of the state, have an open case with the Children’s Administration and an assigned social worker). Funds can pay for furniture, clothing, gas, deposits, school supplies, etc. Contact the child’s social worker to access these funds or for more information. Foster parents are not eligible.

## Food Assistance

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- **Child Nutrition Programs:** If the children meet federal income guidelines or receive TANF or Basic Food, they are eligible for free or reduced-price breakfast and lunch at public or private schools. To find out more information, contact the school your children attend.

- **Child and Adult Care Food Program (CACFP):** Offers meals at no charge to children in care at organizations participating in the program. Many CACFP sites offer breakfast, lunch, and snacks. Some public and private schools offer snacks and/or meals after the regular school day. To find out more information, contact the child care provider where your children are in care.  
Online: [www.fns.usda.gov/cacfp/child-and-adult-care-food-program](http://www.fns.usda.gov/cacfp/child-and-adult-care-food-program)
- **The Statewide Family Food Line:** Provides additional information about food resources, including the state's Basic Food program, free summer meals for kids, local food banks, and the Senior Farmers Market Nutrition Program.  
By phone: 1-888-436-6392
- **Summer Meal Programs:** All children, 18 years and younger, regardless of household income, are eligible for free meals at organizations that serve meals during the summer months.  
By phone: 1-866-3-HUNGRY  
Online: [www.fns.usda.gov/summerfoodrocks](http://www.fns.usda.gov/summerfoodrocks)
- **The Women, Infants and Children (WIC) Nutrition Program:** Helps young children under five, pregnant women, and new mothers eat well, learn about nutrition, and stay healthy. Relatives and foster parents who are primary caregivers of children (ages 0-5) may receive WIC services for the child(ren) in their care. Besides monthly checks to help purchase healthy food, WIC provides nutrition education and health screenings and referrals. To find a WIC clinic or learn if you may be eligible:  
By phone: Family Health Hotline: 1-800-322-2588  
Online: [www.doh.wa.gov/YouandYourFamily/WIC/Eligibility](http://www.doh.wa.gov/YouandYourFamily/WIC/Eligibility)
- **Washington's Basic Food program:** Offers monthly food benefits to those who qualify. Call or visit your local Community Service Office, or apply online.
  - Community Service Office (CSO):  
By phone: 1-877-501-2233  
Online: [www.dshs.wa.gov/esa/esa-find-office](http://www.dshs.wa.gov/esa/esa-find-office)
  - To see if you qualify and to apply for Basic Food and other types of assistance:  
Online: [www.washingtonconnection.org](http://www.washingtonconnection.org)

## Free Publications

- **A Kinship Caregiver's Guide to Consenting to Health Care**, by Columbia Legal Services:  
Online: [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org)
- **DSHS publications:** You can order publications that have a DSHS publication number from the Washington State Department of Printing. When ordering publications, please include publication name, number, your name, and street mailing address. The publication number is normally on the back page. Publication requests may be placed:  
By phone: 360-570-5555  
Fax: 360-664-2048  
Email: [Fulfillment@des.wa.gov](mailto:Fulfillment@des.wa.gov)  
To order online: <https://prtonline.myprintdesk.net/DSF/SmartStore.aspx>; enter publication number into search bar at the top of the page  
To view online: [www.dshs.wa.gov/altsa/kinship-care/dshs-kinship-publications](http://www.dshs.wa.gov/altsa/kinship-care/dshs-kinship-publications)

- *Consent to Health Care for the Child in Your Care: A Kinship Caregiver’s Guide* (DSHS 22-1119)  
Explains the laws passed by the 2005-2006 WA State Legislature which describe a relative’s rights and responsibilities. Available in English, Cambodian, Russian, Somali, Spanish, and Vietnamese (PDF)
  - *Education Advocacy Guide for Caregivers – Supporting School Success for Children and Youth in Care* (DSHS 22-1192)  
Helps caregivers understand what education advocacy is and what is expected of students from preschool to high school. Available in English (PDF)
  - *Grandparents and Relatives: Do You Know about the Services and Supports for You and the Children in Your Care?* (DSHS 22-1120)  
A list of resources, benefits, and support services available to relatives raising children. Available in English, Cambodian, Chinese, Korean, Laotian, Russian, Somali, Spanish, and Vietnamese (PDF) (English and Spanish copies can be ordered)
  - *A Guide to Child Support Services for Relative Caregivers* (DSHS 22-1143)  
What services DSHS Division of Child Support (DCS) can provide if you are taking care of a relative’s child. Available in English (PDF)
  - *Options for Grandparents and Other Nonparental Caregivers: A Legal Guide for Washington State*, by Legal Voice (DSHS 22-1120)  
This is the booklet you are now reading. It is available for free online (see next listing). A print copy of this booklet, plus a legal options DVD and related brochures, is available for free from DSHS. Contact the Aging and Long-Term Support Administration, listed under “Questions?” later in this resource list. Available in English.
  - *Post Adoption Questions and Answers* (DSHS 22-1211X)  
Information about the adoption support program, and resources that may be available to assist you in raising your child. Available in English, Korean, and Spanish (PDF).
  - *Relatives as Parents: A Resource Guide for Relatives Raising Children in Washington State* (DSHS 22-996)  
This 75-page booklet is an extensive resource guide for relative caregivers. Available in English (PDF)
- **Legal Voice publications:**  
By phone: 206-682-9552, ext. 102  
Email: [info@legalvoice.org](mailto:info@legalvoice.org)  
Online: [www.legalvoice.org](http://www.legalvoice.org); click “Tools & Resources”
    - *Family Leave Laws*  
Describes Washington state and federal family leave laws. Available in English and Russian.
    - *Options for Grandparents and Other Nonparental Caregivers: A Legal Guide for Washington State*  
This is the booklet you are now reading. It is available for free online and in print for \$10 (includes shipping). A print copy of this booklet, plus a legal options DVD and related brochures, is available for free from DSHS. Contact the Aging and Long-Term Support Administration, listed under “Questions?” later in this resource list. Available in English.
    - See also listings under “Legal Help” later in this resource list.
  - **Northwest Justice Project publications:**  
Online: [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org)
    - *How to Work with GALs and Parenting Evaluators*  
Tips to help you work successfully with a guardian ad litem. Available in English.
    - *Filing a Non-Parent Custody Case*  
Instructions and forms needed for this case. Available in English.

- *Filing for Non-Parent Custody of an Indian Child in State Court*  
Information about the Indian Child Welfare Act and how it affects non-parent custody cases. Available in English.
- *Filing for Temporary Non-Parent Custody Orders*  
Instructions and forms needed for this case. Available in English.
- *Non-Parent Custody: Frequently Asked Questions and Answers*  
General information about two ways under Washington law to get legal custody of a child who is not yours: a non-parent custody petition filed in court, or a Temporary Parental Consent Agreement. Instructions and a sample agreement are included. Available in English.
- *Temporary Parental Consent Agreement Fill-In Form*  
This form is a part of the publication *Filing a Nonparent Custody Case* listed above. Note that it is a basic, two-page form, and is different from the form below.
- *Temporary Custody/Parental Consent Agreement Fill-In Form*  
This form was created specifically to address the needs of immigrant families, but can be used by anyone. Note that this form does not give the non-parent caregiver legal custody. Available in English and Spanish.

## General Services and Supports

- **Alliance for Child Welfare Excellence:** Offers free training classes for both relatives and foster parents. Classes are often held on weeknights and weekends and some on-line trainings are available.  
Online: [www.allianceforchildwelfare.org/resources](http://www.allianceforchildwelfare.org/resources)
- **DSHS Children’s Administration:** Information about kinship care, foster care and the child welfare system:  
Online: [www.dshs.wa.gov/CA/fos/relatives-caring-for-kids](http://www.dshs.wa.gov/CA/fos/relatives-caring-for-kids)
- **Federal Poverty Guidelines:**  
Online: <https://aspe.hhs.gov/poverty-guidelines>
- **Kinship Navigators:** A one-stop shop providing information and assistance to relatives who may not know where to apply for benefits and services in their community. Kinship Navigators serve most areas of the state. Tribal Navigators serve selected Tribes:  
By phone: 1-800-422-3263 or 360-725-2556  
Online: [www.dshs.wa.gov/altsa/kinship-care-support-services](http://www.dshs.wa.gov/altsa/kinship-care-support-services)
- **Local support groups for relatives raising children:**  
By phone: 1-800-422-3263 or 360-725-2556  
Online: [www.dshs.wa.gov/kinshipcare](http://www.dshs.wa.gov/kinshipcare) (click on “... Support Groups” and select your county or city)
- **Social Security:** Information on Social Security Retirement and Disability benefits, Social Security Numbers, and related topics:  
By phone: 1-800-772-1213 (TTY 1-800-325-0778)  
Online: [www.ssa.gov](http://www.ssa.gov)
- **Washington Connection:** Provides information and help with applying for DSHS services, including TANF grants and food assistance:  
Online: [www.washingtonconnection.org](http://www.washingtonconnection.org)

- **Washington Poison Control Center (WAPC):** Provides immediate, 24/7, free, and expert treatment advice and assistance by phone in case of exposure. All calls are confidential.  
By phone: 1-800-222-1222  
Online: [www.wapc.org](http://www.wapc.org)
- **WithinReach:** Provides information and referrals on many health and social services related to raising children of all ages including health insurance, nutrition, immunization, child care, child development, and children with special needs:  
By phone: 1-800-322-2588 (TTY 711)  
Online: [www.parenthelp123.org](http://www.parenthelp123.org) (Families can find and apply for programs using a benefit finder)

## Health Care

- **Apple Health Core Connections (AHCC):** Addresses the health care needs of state-dependent children in out-of-home placement. AHCC can help identify what services or providers your child needs, previous health problems for newly placed children, answer questions about children’s health problems, and assist in navigating Washington Apple Health and the greater health care system. Children are eligible for AHCC if they are under age 21 and in placement through tribal or state dependency. For more information, contact your child’s social worker or call:  
By phone: 1-844-354-9876  
Online: [www.coordinatedcarehealth.com/members/foster-care.html](http://www.coordinatedcarehealth.com/members/foster-care.html)
- **Child Profile Health Promotion:** Age specific materials for children from birth to six years old, including information on immunizations, growth, development, safety, nutrition, and other parenting issues.  
By phone: 1-866-397-0337  
Online: [www.childprofile.org](http://www.childprofile.org)
- **Consent for Medical Care:** State law allows relative caregivers to give informed consent for medical care for the child in their care (including dental and mental health care) even if they do not have a court order. When caring for a child in state custody, you must talk with the social worker to understand medical care the court must approve. For more information, see listings under “Free Publications” previously in this section.
- **Health Care Providers:** Find health care providers that accept Washington Apple Health coverage for medical and dental care:  
By phone: 1-800-562-3022  
Online: <https://fortress.wa.gov/hca/pfindaprovider/>; caregivers must contact the provider to find out if they are accepting new Apple Health patients
- **Health Insurance for Children in Kinship Care:** Children living with a relative caregiver may be eligible for free Washington Apple Health coverage. An application must be filed online or by calling the customer service center. Caregivers may also be eligible for free or low-cost health insurance coverage for themselves and may apply at the same time they apply for the child in their care.  
By phone: 1-855-923-4633  
Online: [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org)
- **Health Insurance for Children in Foster Care:** Children who are dependents of the state are automatically eligible for Washington Apple Health and no application is needed. Children’s Administration reports a child taken into care to the Health Care Authority directly.

- **Plain Talk About Childhood Immunization** (Department of Health Publication #348-080): Detailed information to help parents and caregivers make informed decisions about immunizing their children. To order this booklet and other free immunization materials:  
By phone: 1-866-397-0337  
Online: <http://here.doh.wa.gov/materials/plaintalk>

## Help with Mental Health and Substance Use Disorders

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- **Prevention and services information:**  
Online: [www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/substance-abuse-prevention-and-mental-health-promotion](http://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/substance-abuse-prevention-and-mental-health-promotion)
- **Preventing underage substance use:**  
Online: [www.StartTalkingNow.org](http://www.StartTalkingNow.org)
- **Local services and agencies that serve children, youth, and families enrolled in Apple Health coverage:**  
By phone: 1-866-789-1511 (Washington Recovery Help Line, for emotional support and referrals)  
Online: [www.dshs.wa.gov/bha/division-behavioral-health-and-recovery](http://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery)
- **Washington State's Wraparound with Intensive Services (WiSe):** Provides comprehensive behavioral health services in many areas of the state with full implementation slated for 2018. WiSe supports Apple Health eligible youth, up to 21 years of age, with complex behavioral health needs, and their families:  
By email: [WiSeSupport@dshs.wa.gov](mailto:WiSeSupport@dshs.wa.gov)  
Online: [www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/wraparound-intensive-services-wise-implementation](http://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/wraparound-intensive-services-wise-implementation)

## Help with Special Needs

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- **DSHS' Developmental Disabilities Administration (DDA):** Provides services for those diagnosed with an intellectual or developmental disability or delay. Services depend on need and funding. Services include individual and family support, personal care, employment supports, day programs, and residential care. To contact your local DDA office:  
Online: [www.dshs.wa.gov/dda](http://www.dshs.wa.gov/dda) and look under "Eligibility"
- **Washington State Early Support for Infants and Toddlers (ESIT):** Provides intervention services for children age birth to three. If you care for a child with a disability or have a concern about a child's development, call the Family Health Hotline. Ask for the name of a Family Resources Coordinator (FRC) in your local community to see if your child is eligible for ESIT services.  
By phone: Family Health Hotline: 1-800-322-2588 (TTY: 7-1-1)  
Online: [www.del.wa.gov/esit](http://www.del.wa.gov/esit)

## Immigrants

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- **King County Bar Association Immigration Legal Clinic:** Wednesdays, 5:30-7:30 PM.  
By appointment only.  
Location: Senior Services, 2208 2nd Ave, Seattle, WA 98121

By phone: To make an appointment, call (206) 587-4009; press 9 for the receptionist

- **KIND (Kids in Need of Defense):** Legal services for children who are facing deportation or have been deported.  
Online: [www.supportkind.org/reintegration-referral-form/](http://www.supportkind.org/reintegration-referral-form/)
- **Northwest Immigrant Rights Project:** Free immigration legal services for qualifying immigrants. Also maintains a lawyer referral list.  
By phone: See website below for local office contact information; ask for the Children & Juvenile Unit  
Online: [www.nwirp.org/get-help/](http://www.nwirp.org/get-help/)
- **Safety Plan for Youth and Children**, by Legal Counsel for Youth and Children: To help families who are facing potential detainment or deportation of parents with children (children with or without status). Available in English, Spanish, and Somali.  
Online: [www.nwirp.org/resources/know-your-rights/](http://www.nwirp.org/resources/know-your-rights/)
- **Temporary Custody/Parental Consent Agreement Fill-In Form**, by Northwest Justice Project: This form was created specifically to address the needs of immigrant families, but can be used by anyone. Note that this form does not give the non-parent caregiver legal custody. Available in English and Spanish.  
Online: [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org)

## Legal Help

- See also listings under “Free Publications” earlier in this resource list.
- **Legal Voice:** Here are additional Legal Voice publications that may be helpful.  
Online: [www.legalvoice.org](http://www.legalvoice.org); click on “Tools & Resources:

Under “Lawyers & the Legal System”:

- *How to Find a Lawyer and Other Legal Resources in Washington State*
- *Working with a Lawyer*

Under “Handbook for Washington Seniors”:

- *Handbook for Washington Seniors: Legal Rights and Resources, 2nd Edition*

- **Northwest Justice Project (NJP):** Offers free self-help information including a website and a toll-free hotline. NJP’s Coordinated Legal Education, Advice, and Referral (CLEAR) program provides free legal assistance with civil legal problems to eligible low-income people.  
By phone: King County residents should call 2-1-1, or 206-464-1519  
Other counties call 1-888-201-1014  
If you are over 60 at any income level call 1-888-387-7111  
Online: [www.nwjustice.org/apply-online](http://www.nwjustice.org/apply-online) (complete this online intake form to apply for a call back)
- **Washington Law Help:** Provides free legal information for low-income persons and seniors in Washington. The website provides legal education materials and tools that give basic information on legal problems and detailed instructions and forms to help you represent yourself in court. You can also locate information on free legal aid programs, basic eligibility, and contact information.  
Online: [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org)

## Family Law Court Facilitators

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For a current list and other information about facilitators, go to [www.courts.wa.gov](http://www.courts.wa.gov), click on "Court Directory," then "Courthouse Facilitators" under "Other Directories."

### **Benton County**

Family Law Courthouse Facilitator  
Benton County Superior Court  
7320 W. Quinault Ave.  
Kennewick, WA 99336  
*Walk-ins Only*

### **Chelan County**

Family Law Court Facilitator  
Chelan County Courthouse  
P.O. Box 3025  
Orondo St.  
Wenatchee, WA 98807  
Contact: Elizabeth Hayes  
509-667-6380

### **Clallam County**

Family Court Facilitator  
223 E. 4th St., Rm. 213  
Port Angeles, WA 98362  
Contact: Naomi Mitchell  
360-417-2588

### **Clark County**

Family Law Courthouse Facilitator  
P.O. Box 5000  
1200 Franklin St.  
Vancouver, WA 98666-5000  
Contact: Pamela Clark Fisher  
360-397-2292

### **Columbia/Walla Walla Counties**

Volunteer Attorney Program  
Blue Mountain Action Council  
342 Catherine St.  
Walla Walla, WA 99362  
Contact: Cheri Cospers, Pro Bono Coordinator &  
Family Law Court Facilitator  
509-529-4980 ext. 122  
[www.bmacww.org](http://www.bmacww.org)

### **Douglas County**

Court Facilitator  
620 Lewis St.  
Wenatchee, WA 98801  
Contact: Jeanne Everhart  
509-662-6156

### **Ferry County**

Legal Aid Coordinator  
N.E. Washington Rural Resources  
956 S. Main, Ste. A  
Colville, WA 99914  
Contact: Shirley Schrawyer  
509-684-8421

### **Franklin County**

Family Law Facilitator  
Franklin County Superior Court  
1016 N. 4th Ave.  
Pasco, WA 99301  
*Walk-ins only*

### **Grant County**

Family Law Facilitator  
Grant County Clerk's Office  
35 "C" St. N.W.  
Ephrata, WA 98823  
Contact: Shea Larkin  
509-765-2160  
509-754-2011, ask for Clerk's Office  
1-800-572-0119

### **Grays Harbor County**

Family Law Courthouse Facilitator  
Superior Court of Grays Harbor County  
102 West Broadway Rm. 203  
Montesano, WA 98563  
Contact: Julie Wade  
360-249-4472 Direct Line  
360-249-3842 Clerk's Office

**Jefferson County**

Family Law Facilitator  
Jefferson County Superior Court Office  
1820 Jefferson  
Port Townsend, WA 98368  
Contact: Tammi Rubert  
360-385-9125

**King County**

Family Law Courthouse Facilitator  
Superior Court of King County  
King County Courthouse, Room W280  
516 Third Avenue  
Seattle, WA 98104-2312  
Contact: Don Medlin  
206-296-9092

**Kitsap County**

Kitsap County Courthouse Facilitator  
614 Division St., Rm. 216  
Port Orchard, WA 98366-4692  
Contact: Lillian R. Schauer  
360-337-7260 or 888-460-7586  
[www.kitsapgov.com/clerk/FamilyLaw/facilitat.htm](http://www.kitsapgov.com/clerk/FamilyLaw/facilitat.htm)

**Klickitat County**

Family Law Facilitator  
Klickitat County Clerk  
Klickitat County Courthouse  
205 S. Columbus  
Goldendale, WA 98620  
Contact: Laura Bradley  
509-773-5744

**Lewis County**

Lewis County Bar Legal Aid  
P.O. Box 117  
462 N.W. Park  
Chehalis, WA 98532  
Contact: Patricia M. Davis, Ex. Dir.  
360-748-0430

**Mason County**

Family Law Courthouse Facilitator  
Superior Court of Mason County  
P.O. Box "X"  
419 N. 4th St., Floor 2  
Shelton, WA 98584  
Contact: Robyn Lockwood, Courthouse  
Facilitator  
360-427-7775

**Okanogan County**

Family Law Courthouse Facilitator  
Superior Court of Okanogan County  
P.O. Box 112  
149 3rd N.  
Okanogan, WA 98840  
Contact: Jeannie K. Watson  
509-422-7132

**Pierce County**

Family Law Facilitator  
Superior Court of Pierce County  
County-City Bldg., Room 104  
930 Tacoma Ave. S.  
Tacoma, WA 98402  
Contact: Cindy Leeder  
253-798-3382 (information line)  
253-798-3627 (appointment line)

**San Juan County**

Family Law Night  
San Juan County Superior Court  
350 Court St., #7  
Friday Harbor, WA 98250  
Contact: Mary Jean Cahail, Clerk  
360-378-2163

**Skagit County**

Family Law Facilitator  
Skagit County Superior Court  
205 West Kincaid Street, Room #204  
Mt. Vernon, WA, 98273  
Contact: Melody Lane  
360-336-9469  
360-336-9440 (appointments or inquiries)

**Skamania County**

Courthouse Facilitator  
 P.O. Box 790  
 240 Vancouver Ave.  
 Stevenson, WA 98648  
 Contact: Beth  
 509-427-9443

**Snohomish County**

Family Law Courthouse Facilitator  
 Snohomish County Superior Court  
 3000 Rockefeller Avenue, MS 605  
 Everett, WA 98201  
 Contact: Sonya Kraski, Facilitator  
 425-388-3795 to make appointments  
 425-388-3294 to sign up for class  
[www.courts.wa.gov/directory/facilitators.cfm](http://www.courts.wa.gov/directory/facilitators.cfm)

**Spokane County**

Court Facilitator  
 Superior Court of Spokane County  
 1116 W. Broadway, Rm. 101  
 Spokane, WA 99260-0350  
 Contact: Joan Griffith  
 509-477-7612  
[www.spokanecounty.org/superiorcourt](http://www.spokanecounty.org/superiorcourt)

**Thurston County**

Family Court Facilitator  
 Thurston County Superior Court  
 2000 Lakeridge Dr. S.W., Bldg. 2  
 Olympia, WA 98502  
 (MAIL ONLY)  
 Contact: Angela Gregg  
 360-709-3269

**Whatcom County**

Family Law Courthouse Facilitator  
 Superior Court of Whatcom County  
 P.O. Box 1144  
 311 Grand Avenue, Rm. 507  
 Bellingham, WA 98227-1144  
 Contact: Patty Link  
 360-738-2459

**Yakima County**

Family Court Facilitator  
 Yakima Health Center Bldg.  
 104 N. 1st St.  
 Yakima, WA 98901  
 Contact: Carla Urlacher-Martinez  
 509-574-2695

## Questions

**Aging and Long-Term Support Administration**

Hilarie Hauptman  
 1-800-422-3263 or 360-725-2556  
[hilarie.hauptman@dshs.wa.gov](mailto:hilarie.hauptman@dshs.wa.gov)

**Children's Administration**

Shelley Arneson  
 360-902-8109  
[shelley.arneson@dshs.wa.gov](mailto:shelley.arneson@dshs.wa.gov)

**Division of Child Care**

Kellye Monahan  
 360-725-4608  
[Kellye.monahan@dshs.wa.gov](mailto:Kellye.monahan@dshs.wa.gov)

**Division of Child Support**

Nancy Koptur  
 360-664-5065  
[nancy.koptur@dshs.wa.gov](mailto:nancy.koptur@dshs.wa.gov)

**Economic Services Administration**

Sarah Garcia  
 360-725-4949  
[roddisl@dshs.wa.gov](mailto:roddisl@dshs.wa.gov)  
 - or -  
 Jage Curl  
 360-725-4589  
[jage.curl@dshs.wa.gov](mailto:jage.curl@dshs.wa.gov)

**Food Programs**

Shavana Howard  
 360-725-4338  
[Shavana.howard@dshs.wa.gov](mailto:Shavana.howard@dshs.wa.gov)

**Health Care Authority**

Kevin Cornell  
 360-725-1423  
[kevin.cornell@hca.wa.gov](mailto:kevin.cornell@hca.wa.gov)

## National Resources

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- **AARP:** Offers articles on a variety of grandparent caregiver topics, including the *Grand Families Guide*.  
Online only.  
By mail: 601 E. Street, N.W., Washington, DC 20049  
Online: [www.aarp.org/home-family/friends-family/your-family/](http://www.aarp.org/home-family/friends-family/your-family/)
- **American Bar Association, Center on Children and the Law:** Offers information, advocacy, resource lists, and publications for lawyers and the public on a wide range of legal issues facing children.  
By mail: 1050 Connecticut Ave., Suite 400, Washington, DC 20036  
By phone: 202-662-1720  
Online: [www.americanbar.org/groups/child\\_law.html](http://www.americanbar.org/groups/child_law.html)
- **The Brookdale Foundation Group, Relatives As Parents Program:** Promotes the creation and expansion of services for grandparents and other relatives. Offers free information and publications, including *Relatives Raising Children: A Guide to Finding Help and Hope*.  
By mail: 300 Frank W. Burr Blvd, Suite 13, Teaneck, NJ 07666  
By phone: 201-836-4602  
Online: [www.brookdalefoundation.org](http://www.brookdalefoundation.org)
- **Center on Addiction and the Family** (formerly known as the Children of Alcoholics Foundation): Focuses on the overlap of family issues with addiction, treatment, and recovery. Offers information, support, and referrals.  
By phone: 1-888-671-9392  
Online: [www.phoenixhouse.org/family/center-on-addiction-and-the-family/](http://www.phoenixhouse.org/family/center-on-addiction-and-the-family/)
- **Child Welfare Information Gateway** (formerly known as the National Adoption information Clearinghouse): Resources on all aspects of domestic and intercountry adoption, with a focus on adoption from the U.S. foster care system. A service of the U.S. Department of Health & Human Services, Children's Bureau.  
By mail: 330 "C" St. S.W., Washington, D.C. 20447  
By phone: 1-800-394-3366  
By email: [info@childwelfare.gov](mailto:info@childwelfare.gov) (for general questions) or [library@childwelfare.gov](mailto:library@childwelfare.gov) (for publications)  
Online: [www.childwelfare.gov/topics/adoption/](http://www.childwelfare.gov/topics/adoption/)
- **Child Welfare League of America:** Offers online trainings and publications relevant to non-parent caregivers.  
By mail: 727 15th St. N.W., 12th Floor, Washington, DC 20005  
Online: [www.cwla.org/our-work/](http://www.cwla.org/our-work/)
- **Children's Defense Fund:** Serves children through a variety of programs and initiatives that empower communities and advocates to create change through political action and leadership.  
By mail: 25 "E" St. N.W. Washington, D.C. 20001  
By phone: 1-800-CDF-1200  
By email: [cdinfo@childrensdefense.org](mailto:cdinfo@childrensdefense.org)  
Online: [www.childrensdefense.org/programs/](http://www.childrensdefense.org/programs/)
- **Generations United's National Center on Grandfamilies:** Offers broad range of guides, fact sheets, trainings, and tools for grandfamilies, which cover issues from educational and health care access to financial and legal supports. Publications include *Raising the Children of the Opioid Epidemic*,

*Relative's Guide to Raising Children with Disabilities*, and many more. Some publications also available in Spanish.

By mail: 122 "C" St. N.W., Ste. 820, Washington, D.C. 20001-2085

By phone: 202-638-2085

Online: [www.gu.org/OURWORK/Grandfamilies.aspx](http://www.gu.org/OURWORK/Grandfamilies.aspx)

- **Grandfamilies of America:** A national membership organization run by relative caregivers. Provides grandparents/relative caregivers with the education and tools to enable them to provide 24/7 safety and permanency for the children in their care, while at the same time preserving family ties and heritage for future generations.

By mail: 6525 Fish Hatchery Road, Thurmont, MD 21788

By phone: 301-358-3911

Online: [www.grandfamiliesofamerica.org](http://www.grandfamiliesofamerica.org)

- **Grandfamilies State Law and Policy Resource Center:** Free legal resources, publications, and information on a wide range of legal issues facing non-parent caregivers.

Online: [www.grandfamilies.org](http://www.grandfamilies.org)

- **Grandparenting Today, a University of Wisconsin Cooperative Extension:** A series of fact sheets, especially for grandparents raising young children, developed by specialists with feedback from grandparents.

Online: <http://fyi.uwex.edu/grandparenting/through-the-eyes-of-a-child/>

- **National Council on Aging Benefits Checkup:** Online screening tool designed for seniors. A confidential questionnaire determines eligibility for 1300 different federal, state, and private benefit programs that assist with the cost of prescription medications, health care, housing, energy, and other essentials.

Online: [www.benefitscheckup.org](http://www.benefitscheckup.org)

- **National Family Caregiver Support Program:** Offers information, counseling, training, respite care, and supplemental services to family caregivers. A service of the U.S. Administration on Aging, Administration for Community Living.

By mail: 330 Independence Ave. S.W., Washington, D.C. 20201

By phone: 202-619-0724; 1-800-677-1116 (to find local resources)

Online: [www.acl.gov/programs/support-caregivers/national-family-caregiver-support-program](http://www.acl.gov/programs/support-caregivers/national-family-caregiver-support-program)

- **National Indian Child Welfare Association:** Offers technical assistance, information, and resources.

By mail: 5100 SW Macadam Avenue, Suite 300, Portland, OR 97239

By phone: 503-222-4044

By email: [info@nicwa.org](mailto:info@nicwa.org)

Online: [www.nicwa.org](http://www.nicwa.org)

- **National Kinship Alliance for Children:** Offers education, support, advocacy, and leadership for kinship families. Programs include maintaining the publication *Grandkin Guide: Frequently Asked Questions and Answers for Relatives Raising Children*.

By mail: P.O. Box 85, Ashland, VA 23005

By phone: 1-888-659-3745

By email: [info@kinshipalliance.org](mailto:info@kinshipalliance.org)

Online: [www.kinshipalliance.org/our-programs/](http://www.kinshipalliance.org/our-programs/)

# Chart of Legal Options

Type of Arrangement:	Temporary Parental Consent Agreement	Title 13-36 Guardianship	Nonparental (Third-Party) Custody	Adoption
Where do you get it?	No court action is required.	Juvenile Court (available only if there is a pending dependency action in Juvenile Court)	Superior or Family Court	Superior or Family Court
What must you prove to get it?	This is an agreement between the parents and the caregiver. To prove the parents' consent (to doctors, schools, etc.), have them sign a written agreement. If possible, have it notarized.	Can only be initiated by a party to a dependency proceeding. Must prove: <ul style="list-style-type: none"> <li>Guardianship is in child's best interest (rather than adoption or reunification with parent) <b>and</b></li> <li>The guardian is suitable</li> </ul>	Must prove that parents are unfit or that it would be detrimental to the child to live with the parents.	Must prove that parents are unfit.
What are its effects?	The written agreement specifies the effects of the arrangement. It can include authorization to make medical, education, travel, and child care decisions, etc., for the child.  Parents can cancel/revoke the agreement at any time in any manner.	Guardian has full responsibility for the care and custody of the child.  Dependency is dismissed.	Gives the custodian legal and physical custody of the child.  Order may provide for visitation and child support.  Parental rights are not terminated.	Biological parents' rights are terminated.  Adoptive parent has same authority as a biological parent.  Child gains inheritance status in her/his adoptive family.  Child loses inheritance status in her/his biological family.
Will there be procedural issues in court?	None required.	GAL or lawyer is appointed for the child.  DSHS has right to notice of any motion to terminate guardianship.	If the child is the subject of a dependency action, the Juvenile Court must grant concurrent jurisdiction for an action to be filed in Superior Court.	Termination of parental rights proceedings.  Adoption proceedings.
What government benefits are available?	TANF, medical assistance, subsidized child care, and tax benefits may be available.	RGAP: Monthly subsidy for qualified relative guardians.  Unsubsidized guardianships: TANF, medical assistance, subsidized child care, and tax benefits may be available.	TANF, medical assistance, subsidized child care, and tax benefits may be available.	Foster care & TANF Non-Needy Relative benefits end.  Adoption support may be available if the child has special needs.



# Options for Grandparents and Other Nonparental Caregivers:

A Legal Guide for Washington State

## EVALUATION FORM

Please complete this form and return by: Mail: Legal Voice, 907 Pine St., Suite 500, Seattle, WA 98101  
Email: [info@LegalVoice.org](mailto:info@LegalVoice.org)  
Fax: 206-682-9556

This will help us to make changes in this booklet to make it more useful for people.

1. Where did you get this booklet? \_\_\_\_\_  
\_\_\_\_\_

2. Which sections have you used? \_\_\_\_\_  
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3. Did you find any sections difficult to understand? Which ones? \_\_\_\_\_  
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4. Did you use any of the resources listed? Which ones? \_\_\_\_\_  
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5. Was this booklet useful for you? \_\_\_\_\_  
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Address: \_\_\_\_\_

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THANK YOU!





TOOLKIT

# AMERICAN INDIAN & ALASKA NATIVE GRANDFAMILIES:

HELPING CHILDREN THRIVE THROUGH  
CONNECTION TO FAMILY AND CULTURAL IDENTITY

**generations  
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# Toolkit Introduction

Both inside and outside the foster care system, American Indian and Alaska Native children are more likely to live in grandfamilies – families in which grandparents, other adult family members or close family friends are raising children with no parents in the home – than any other racial or ethnic group.<sup>1</sup>

Over the last few decades, drug epidemics, natural disasters and other tragedies have both created grandfamilies and challenged existing ones. The COVID-19 pandemic is the latest crisis to have elevated the needs of these families, and in particular the needs of American Indian and Alaska Native families, who are being disproportionately

impacted by the pandemic. The rates of infection and death are staggering. For example, as of early May 2020 in the Navajo Nation, the mortality and infection rates are higher than the vast majority of states.<sup>2</sup>

This latest crisis is highlighting the challenges faced by American Indian and Alaska Native grandfamilies, including the complex service systems they must navigate as citizens of two nations – the United States and their sovereign tribe. Supports and services also vary depending on whether the children are in the legal custody of a child welfare system with their kin providing the care or whether they are not at all involved with that system.

**Grandfamilies and Kinship Families:** In this toolkit, we use the terms “grandfamilies” and “kinship families” interchangeably to mean families in which grandparents, other adult family members or close family friends are raising children with no parents in the home. These families can be either inside or outside the child welfare system, and the toolkit will distinguish the level of child welfare involvement where it is relevant.



**Grandfamily Caregiver or Kin Caregiver:** These terms are also used interchangeably in this toolkit. They are used to capture the spectrum of these caregiving relationships, which include close family friends, godparents and other adults who are not technically “related” to the child.

**Alaska Native (AN):** Any person who is a member of an Alaska Native tribe recognized by the federal government.

**American Indian (AI):** Any person who is a member of an American Indian tribe recognized by the federal government.

**Helper:** An individual who is known by the community as someone to rely on for help, counsel, advice, or ceremonial intervention in times of adversity.

**Mainstream or Western:** The culture of white individuals of European ancestry.

**Native:** This term encompasses all American Indian and Alaska Native people and is used interchangeably with both those terms.

This toolkit is designed to give resources and tips to child welfare agencies, other government agencies and nonprofit organizations, so they can better serve all American Indian and Alaska Native grandfamilies regardless of child welfare involvement. It will explore some of the unique strengths and challenges of these grandfamilies, which agencies and organizations need to recognize in order to provide culturally appropriate supportive services.

There is a long and proud tradition of kinship care in Native cultures. In almost all Native cultures, extended family kinship structures prevail. Cousins may refer to one another as brother and sister. Aunts and uncles may be called mom and dad. A grandmother's first cousin might be called uncle. Within this kinship structure, there are many potential caregivers and many natural supports. In this environment, a grandparent might be able to care for a child with special needs even if he or she is elderly. This can happen when the extended family is a nurturing network that shares the responsibility for child rearing.<sup>3</sup>

Over two hundred years of federal policies have threatened the existence of this natural kinship structure. The U.S. government has tried to exterminate and assimilate American Indians and Alaska Natives into white culture. The U.S. government has removed children from their Native families to place them with white families and forced children to attend mandatory boarding schools where the use of tribal language, religion, and cultural practices was banned. The effects of these efforts are felt today by all generations. Many Native peoples have unresolved grief called historical trauma.

This generational loss and trauma contribute to many of the factors that generally cause American Indian and Alaska Native grandfamilies to come together. Whether it be parental mental health issues, substance use, or unemployment, all of these factors are experienced in Native communities in much larger degrees than mainstream culture. Historical trauma and these causal factors all have an impact on the overrepresentation of American Indian and Alaska Native grandfamilies in the child welfare system.

**Grandbabies are a whole new level of love. Being more mature brings a whole new perspective of what it means to be well and safe. My understanding of the importance of keeping kids connected to culture and connected to family is so much deeper. My father was raised by his grandparents who were a product of boarding schools. As a result, I wasn't raised as culturally connected to my Muscogee (Creek)/Cherokee heritage. I really tried to turn that around with my boys, and I continue that with my grandson. Kids who are connected with their culture will have better outcomes. They are the future of our tribal Nations.**

**Robyn Wind, GRAND Voice and citizen of Muscogee (Creek) Nation**

This toolkit will provide the reader with some historical background, a review of the current data, and an overview of resources that helpers and Native grandfamilies might find useful in supporting their families. Throughout this toolkit, the authors will highlight various issues regarding cultural differences, including kinship patterns, concepts of family, identity, and belonging and the importance of a positive cultural identity. It will also note the diversity of experiences by different nations and tribes. Each tribe or nation's history is distinct based on region, history, and the degree of assimilation of its members. Historical trauma and distrust of helpers will vary based on this diversity. Relevant Native behaviors and values will be compared and contrasted with mainstream behaviors and values.

Language and communication patterns, for example, can impact helpers when the helper expects a family to simply answer a question and the Native family begins to tell a story. The toolkit attempts to address the most common circumstances in which mainstream helpers and Native families, especially elders, miss one another. Views of time, work, money, and spirituality are just a few examples.

With its content, the toolkit seeks to assist mainstream helpers in understanding Native grandfamilies, their historical and current context, and the service systems that may be helpful to them. In turn, the toolkit can also help Native grandfamilies better understand mainstream helpers and the complexity of the systems that exist to help them. The fundamental goal of this resource is to better understand, appreciate and serve Native grandfamilies.



Photo courtesy of Robyn Wind.



# Chapter 1

## Overview of Culturally Appropriate Services

“Navigating the child welfare system...was really harrowing. I was placed in a position where I didn’t know where my grandkids were taken, I just knew they were in custody and that was the end of the story...When I arrived, I saw that they cut my grandson’s hair. He’s never had his hair cut since the day he was born. I was furious. I asked, “Why would you do that?” They answered, ‘It was in his eyes.’ They had no understanding of how culturally inappropriate it was to cut his hair...I knew they should be with me, so I brought up the Indian Child Welfare Act (ICWA).

Sonya Begay, GRAND Voice and citizen of Navajo Nation

### Introduction

Culturally appropriate services are essential for supporting Native grandfamilies. A social worker providing culturally appropriate services would never have cut the hair of Ms. Begay’s grandson.

One saying from social work education is “start where the client is at.” This teaching holds true in every community in every culture. However, if one does not know the culture and how the culture shapes and influences the family’s behavior, knowing where to start is difficult. There are many terms that are used to describe working successfully in a culturally based way or across cultural boundaries. This toolkit relies on the concepts of “cultural competence” as described by Terry Cross in several articles and in *Towards a Culturally Competent System of Care*.<sup>4</sup>

These concepts as defined by Cross:

- **Culture:** The integrated pattern of human knowledge, belief, and behavior that depends upon a capacity for learning and transmitting knowledge to succeeding generations. The customary beliefs, social norms, and material traits of a racial, religious, or social group.
- **Cultural Competence:** The capacity to work effectively in the context of cultural differences.
- **Cultural Identity:** The degree of identification with one or more cultures.
- **Cultural Loss:** The feeling of grief and loss that comes from the passing out of existence of lifeways, language, healing practices, spiritual helpers, or the loss of people, land, resources, material traits, customs, social forms of a racial religious or social group.
- **Historical Trauma:** Emotions and dynamics that are evident when the oppressive experience

of a cultural group occurs repeatedly over several generations and/or is so traumatic and pervasive (e.g. genocide) that, as a people, it is impossible to resolve the trauma during the lifetime of those subjected to the trauma and the resulting social-emotional impact and dynamics are passed on to and experienced by future generations.

### **Culturally Appropriate Services<sup>5</sup>**

In this model, helpers first need to understand that people are different and complex and that culture shapes human behavior along with many other factors. Culture influences behavior, it does not determine it. Those influences inform how to best help people from different cultures.

Second, the model teaches that self-awareness and humility are foundations of effective helping. If people do not understand how their culture shapes their behavior, it will be hard for them to see the influences at play on others. A helper cannot understand how culture operates in someone else's life if they have not looked inward to see how culture influences their own behavior, thinking, family structure, or problem solving.

Third, successful work in a cultural setting requires that the helper understand the dynamics between people and groups that are different. Racism, oppression, prejudice, bias, ethnocentrism, fear, or just plain misunderstanding each other are powerful influences on helping. These dynamics are at play in all cross-cultural interactions to various degrees and the helper must understand and compensate for negative influence where they can.

Fourth, the helper needs to learn as much about a culture as possible; but more importantly, the helper has to learn how culture functions in people's lives so that they can understand what influences are at play. Complexity is universal in human behavior. Understanding complexity is part of understanding how culture influences behavior.

Finally, a helper has to change their helping behavior to fit the context of the culture if they are to be successful. This is what sets "competence" apart from sensitivity, awareness, or anti-racism.

Competence is about having the skill to do something well. In this case, the skills to help someone from another culture.

### **Native Grandfamilies**

Let's look at an example for Native culture and grandfamilies. In almost all Native cultures, extended family is seen as just as important as what the mainstream considers the nuclear family. A helper who does not know about this type of family structure may not recognize its value and may not know that a family meeting, for example, should include the whole nurturing network. Planning for the safe care of a child may look very different than the usual process and supporting the nurturing network will require knowledge and skills that fit the family. Culturally appropriate services are culturally competent services. Starting "where the client is," is made possible by knowing how that family interacts with their own cultural context.

### **Worldview Differences**

Worldview differences are one of the greatest sources of differences between people of Indigenous culture and Western or mainstream Americans. American culture has a linear worldview. Most thinking is based in cause and effect. Linear thinking is time-oriented and tends to understand the world by breaking it down into smaller parts. Services and helping practices are in silos and coordination is a challenge. Knowledge and dominance over the earth are important, and individualism is valued. Experts and agencies are trusted as helpers.

Indigenous worldviews are relational, cyclic, and understand the world as based on complex patterns. Peoples with this worldview value wisdom, interdependence, and connectedness with place, culture, and kin. People may trust elders and healers more than agencies or experts. People speak more slowly and carefully, interrupt each other less, and communicate via story and metaphor versus back and forth question and answer. The helper may mistake these cultural patterns and influences as resistance or lack of interest in problem solving.<sup>6</sup>

## Conclusion

Helpers are encouraged to remember that the key is not only being aware and sensitive but being able to adapt helping behavior to fit the cultural context

of the family. When Native families adjust to the mainstream culture, it's called "code switching."<sup>7</sup> When helpers do it successfully, it is called "cultural competence."

**Culture Card: A Guide to Build Cultural Awareness: American Indian and Alaska Native** by the Substance Abuse and Mental Health Services Administration (SAMHSA), DHHS Publication No. SMA08-4354. <https://store.samhsa.gov/product/American-Indian-and-Alaska-Native-Culture-Card/sma08-4354>

**Cultural Competence, The Encyclopedia of Social Work** by Terry Cross, In T. Mizrahi & L.E. Davis, (Eds). , 20th Ed. Vol. 1, (pp. 487–49). New York: National Association of Social Workers and Oxford University Press, Inc. <https://oxfordre.com/socialwork>

**Working with American Indian and Alaska Native Individuals, Couples, and Families: A Toolkit for Stakeholders** by Terry Cross and Cross-Hemmer, A. L. National Resource Center for Healthy Marriage and Families, ICF International with funding from the United States Department of Health and Human Services, Administration for Children and Families. <https://www.healthymarriageandfamilies.org>



Photo courtesy  
of Sonya Begay.



## Chapter 2

# Overview of Grandfamilies

### Introduction

Approximately 2.7 million children in the United States live in grandfamilies or kinship families, meaning families in which grandparents, other adult family members or close family friends are raising children with no parents in the home.<sup>8</sup> An additional 139,000 children, almost a third of all children in the foster care system, are in the legal custody of the system with their kin providing the care.<sup>9</sup>

American Indian and Alaska Native children are represented in grandfamilies in larger percentages than any other racial, cultural or ethnic group. While American Indian and Alaska Native children make up one percent of all children in the United States, they comprise over eight percent of all children in grandfamilies and two percent of all children in state foster care systems.<sup>10</sup> National databases do not include American Indian and Alaska Native children in tribal foster care systems, but NICWA estimates that approximately 61 percent of American Indian and Alaska Native children in foster care are in state systems and 39 percent are in tribal systems.<sup>11</sup> With those percentages in mind, the overrepresentation of American Indian and Alaska Native children in grandfamilies is even more dramatic.

This overrepresentation in the foster care system is likely a result of the centuries-long shameful treatment of this community by the United States. Rather than allowing tribes to build on their many cultural strengths of extended family and informal support networks, the federal government has relocated American Indian and Alaska Native people from their traditional lands and resources, forced their assimilation through mandatory boarding schools and adoptions to white families, and banned the use of tribal language, religion, and cultural practices.<sup>12</sup>

In general, grandfamilies, whether inside or outside the foster care system, form because of parental substance use, incarceration, death, teenage pregnancy, poverty, mental illness, cognitive or physical disability, and employment outside the community. Many of these factors impact American Indians and Alaska Natives at higher rates than whites:

- **Parental mental health issues:** American Indian and Alaska Native parents are more likely to struggle with mental health issues and distress related to unresolved trauma. Among U.S. adults ages 18 and over who reported only one race, American Indians and Alaska Natives had the highest rate of serious psychological distress within the last year (30 percent), and the highest rate of a major depressive episode within the last year (12 percent).<sup>13</sup>
- **Parental substance use:** American Indian and Alaska Native parents are more likely to struggle with substance use. Eighteen percent of American Indian and Alaska Native adults needed treatment for an alcohol or illicit drug use problem in the past year compared to the national average of ten percent.<sup>14</sup>
- **Parental unemployment:** American Indian and Alaska Native children are more likely to live in families in which no parent has full-time, year-round employment than the national average. Forty-nine percent of American Indian and Alaska Native children are in homes where no parent has full-time, year-round employment compared to 25 percent of children in white homes.<sup>15</sup>

The dramatically disproportionate numbers of American Indian and Alaska Native children in kinship care do not even include the 7.9 million children in multigenerational households where grandparents and other relatives are the heads of

the household, and the child's parents may also be present in the home or use the home periodically.<sup>16</sup> For some multigenerational households, every family member plays an important role. For other multigenerational families, the parents are not able to parent the child due to one or more of the many factors causing grandfamilies to form.

While the overrepresentation of American Indian and Alaska Native children in grandfamilies is likely a product of the many inequities this community continues to face, it is also a reflection of their cultural strengths and resilience.

### **Grandfamilies' Strengths**

American Indian and Alaska Native grandfamilies have a long and proud cultural tradition of caring for extended family. This strength, along with many others, is well documented in research and shows that children thrive in grandfamilies. Decades of research comparing the outcomes of children in foster care with relatives to those in foster care with non-relatives demonstrate just how well children fare in kin care. Children in foster care with kin have more stable and safe childhoods with a greater likelihood of having a permanent home.<sup>17</sup> About 36 percent of all children adopted from foster care are adopted by relatives and 11 percent of children who exit foster care, exit into guardianships.<sup>18</sup> Moreover, children in foster care with kin are less likely to re-enter the foster care system after returning to birth parents.<sup>19</sup> These children also experience fewer school changes, have better behavioral and mental health outcomes, and are more likely to report that they "always feel loved."<sup>20</sup> Children living with kin keep their connections to brothers, sisters, extended family and community and their cultural identity.<sup>21</sup>

### **Grandfamilies' Challenges**

As with their many strengths, American Indian and Alaska Native grandfamilies also share challenges that are similar to other grandfamilies. However, unique injustices make their kinship caregiving that much more difficult.

**Child Trauma and Juvenile Justice:** The children in grandfamilies are more likely than the general

population of children to have social, emotional, physical and behavioral challenges. This is often due to the many traumatic and difficult reasons parents are unable to raise their children. They have frequently been exposed to drugs or alcohol in utero and many of the children have special needs.<sup>22</sup>

American Indian and Alaska Native children are more likely to have special needs than other children. American Indian and Alaska Native children are served by the Individuals with Disabilities Education Act (IDEA) at a higher percentage than any other group of children. Approximately 14 percent of American Indian and Alaska Native children received services under IDEA, compared to nine percent of the general student population.<sup>23</sup>

In comparison to white youth, American Indian youth with behavioral or other challenges are much more likely to end up residing in juvenile justice facilities. For American Indian youth, 235 live in juvenile justice facilities per 100,000 youth, whereas the same rate for white youth is significantly less, at 83 youth per 100,000.<sup>24</sup> This racial disparity has been remarkably persistent. In every count since 1997, the rate of American Indian youth living in juvenile justice facilities has been more than twice as high as the rate for white youth.<sup>25</sup>

**Caregiver Stress:** In addition to the children's trauma and greater likelihood of residing in a juvenile justice facility, kin caregivers may be stressed because they are caring for children at a time in their lives they did not expect to be, and they are often socially isolated from their peers.<sup>26</sup> They may feel a sense of shame and guilt about their own adult children who are unable to parent.<sup>27</sup>

**Grandfamily Poverty:** Children in grandfamilies are more likely to be poor than other children. About 18.4 percent of children in the general population live in poverty, as compared to 30.5 percent of children whose grandparents are responsible for them and have no parent in the home.<sup>28</sup> This poverty data concerns the overall population of grandchildren whose grandparents are responsible for them. No specific federal poverty data exists for American Indian and Alaska Native grandchildren raised by grandparents.

Despite this lack of data, it is known that American Indian and Alaska Native children are more likely than other children to live in areas of high poverty. About 24 percent of American Indian and Alaska Native children live in areas of highly concentrated poverty, compared to the national average of 11 percent.<sup>29</sup>

**Limited Services and Supports:** Despite heroically stepping up to raise children that they did not expect or plan to raise, kin caregivers often face challenges accessing critical services for the children. The degree of challenge frequently differs depending on whether or not the child is part of the child welfare system.

- **Children with kin in the child welfare system:** For those children in the child welfare system and living with kin, access to services and supports can be easier than for those not in the formal system. The state or tribe generally has legal custody of the children in kinship foster care, so caseworkers and judges can facilitate entry into services, like educational enrollment, and benefits such as nutrition assistance. However, the foster care system is not supporting the kin caregivers or the children as they should, despite relying on kin more than ever with a 10-percentage point increase in the last decade. The system often places children with kin as “kinship foster parents” without licensing them or providing the children in their care anywhere near the same level of assistance as children in non-relative foster care. Newly released data compiled and analyzed by *The Chronicle of Social Change* show that the number of children living in a home without a foster care maintenance payment increased by 32 percent between 2011 and 2017, from 81,838 to 108,426 children.<sup>30</sup> *The Chronicle* analysts believe these children are primarily, if not exclusively, in kinship foster care with grandparents, other relatives or close family friends who are not licensed as foster parents.<sup>31</sup> If kin are fully licensed and the homes from which children are removed meet low-income guidelines, long-standing federal law requires that these children receive monthly foster care

maintenance payments and services.<sup>32</sup> If fully licensed and income eligible, these children would also have a pathway to supported permanency through Guardianship Assistance Programs and adoption subsidies.

- **Children raised by kin outside the child welfare system:** Children raised by kin outside of the foster care system also face access and equity issues. A major factor impacting their access is that many of these children do not have a legal relationship, such as legal custody or guardianship, with their caregivers. They may lack such a relationship for many reasons. Often their caregivers may have difficulty finding an affordable lawyer or they may not want to go through the expense, delay, and trauma of suing the birth parents for such a relationship. Without a legal relationship to the children or a foster care placement of them, caregivers can have trouble enrolling the children in school, accessing special education services, consenting to vaccinations and health care, obtaining health insurance coverage, and finding affordable housing suitable for the children.

A legal relationship is not required under federal law to access the array of public benefits and income supports that may be available. However, access can be challenging for other reasons. For example, to obtain a Temporary Assistance for Needy Family (TANF) child-only grant, which is often the only source of potential ongoing support for the children, caregivers typically have to assign to the state or tribe their right to collect child support from the parents. Caregivers often do not want to pose another problem for the parents who are trying to re-parent or the caregivers may fear retaliation from the parents. The federal government allows states and tribes to waive that assignment for good cause, but few jurisdictions actually have a clear practice that allows caregivers to access that exemption. TANF and Medicaid for the child are often linked, so restricting access to one can impact the other. Other federal supports, like the Supplemental Nutrition Assistance Program (SNAP) or “food stamps,” require caregivers to share a lot of information, including their income. In many

cases, it may be retirement income that is too high to qualify for SNAP, even though the children are at risk of food insecurity. Grandfamilies in general, and American Indian and Alaska Native grandfamilies specifically, have often not been considered in the design and implementation of these supports, and consequently their unique needs are not met.

## Conclusion

These challenges, in addition to grandfamilies' many strengths, must be considered when striving to

support the families. Because American Indian and Alaska Native kinship families are further impacted by their own unique set of strengths and challenges, this toolkit seeks to help agencies and organizations better understand and support them. To access general resources that may be helpful, please visit the websites listed below.

**The Adoption and Foster Care Analysis and Reporting System (AFCARS)** is the national reporting system for children in foster care. Each year, a report is issued on the numbers of children in foster care, including those in foster care with relatives, and the numbers of children exiting the system to guardianships and adoptions. [www.acf.hhs.gov/cb/research-data-technology/statistics-research/afcars](http://www.acf.hhs.gov/cb/research-data-technology/statistics-research/afcars)



**The Brookdale Foundation Group, Relatives As Parents (RAPP)** is a national network of support groups and services for grandfamilies. [www.brookdalefoundation.net/RAPP/rapp.html](http://www.brookdalefoundation.net/RAPP/rapp.html)

**www.grandfamilies.org** is a comprehensive one-stop national website for publications, materials, and laws impacting grandfamilies both inside and outside the foster care system for all 50 states and the District of Columbia.

**www.grandfactsheets.org** has fact sheets for each state and the District of Columbia containing specific state information related to grandfamilies, including a comprehensive list of resources and services, including kinship navigator programs.

**www.gu.org** is Generations United's website containing resources and publications on grandfamilies, including Generations United's annual State of Grandfamilies reports.

**The Kids Count project - The Annie E. Casey Foundation** contains national and state level data on children in kinship care. By kinship care, they mean children outside of the formal foster care system being raised by grandparents, other family members and close family friends with no parents in the home. Children in kinship foster care are reported through AFCARS. <https://datacenter.kidscount.org/>

**Racial Disproportionality and Disparity in Child Welfare** Issue Brief by the Child Welfare Information Gateway. [https://www.childwelfare.gov/pubpdfs/racial\\_disproportionality.pdf](https://www.childwelfare.gov/pubpdfs/racial_disproportionality.pdf)

**The U.S. Census Bureau Data Website** contains tables with the numbers of children in the United State and some of their demographic characteristics (Table S0901); the numbers of children and some of their characteristics who are raised by grandparents who are responsible for them (Table S1001), and the same information for these grandparents (Table S1002). The data on other relatives are limited, but the general number of "other relatives" responsible for children is available in Table S0901. [Data.census.gov](http://Data.census.gov)

## Chapter 3

# Impact of Family Separation on Family and Culture

### Introduction

Cultural knowledge is a cornerstone of working successfully with Native peoples. Understanding the painful history is one essential aspect of understanding contemporary Native culture. Family systems, the legal system, and the challenging social conditions that most Native families face can be traced, in part, to the past. This chapter examines the influences of the past but also discusses the resilience of the culture and the strengths of families in the face of these challenges.

### Historical Trauma

American Indian and Alaska Natives (AI/AN) endured over two hundred years of policies intended to exterminate, remove, or assimilate them. These policies brought a great deal of trauma to many tribes and Native peoples by attempting to determine how Native people should live. Many of these policies persist and the effects are felt today in unresolved grief called historical trauma. Today, unresolved grief and loss are handed down to the next generations through adverse childhood experiences or ACEs, which are traumatic events taking place in childhood that have negative effects on health and wellness in adulthood.<sup>33</sup> As grandfamilies or service providers, it is important to understand the history and the impacts of historical trauma on families today.

In the pre-colonial times, American Indian and Alaska Native tribes had their own government structures, individual cultures, and ways of being. With colonization came an era of removal and genocide. War, removal from traditional homelands, destruction of food sources, and disease killed nearly 10 million Native people.<sup>34</sup> This era was followed by forced assimilation to deal with the

“Indian problem.” The stated goal of the U.S. government was to “civilize” Natives.

### Boarding Schools and Assimilation

During this time of assimilation, starting in the late 1870s, the U.S. government’s goal was to “kill the Indian, save the man.”<sup>35</sup> Military style boarding schools were created. Hundreds of thousands of Native children were forced to leave or taken from their homes and sent to these boarding schools. Children experienced harsh and punitive treatment. They were punished for speaking their language, practicing their religion, and participating in any cultural practices. Both physical and sexual abuse were widespread in the boarding schools. Generations of children grew up separated from their families who loved and cared for them.<sup>36</sup> Children who survived returned to homes where they did not know the basic skills to survive. This policy persisted through the 1970s affecting about half of all Native people alive today. Through removal of many generations of children from their families, parenting skills were diminished, and many experiences damaged their very ability to attach to others.

The U.S. government continued the efforts to assimilate Native people with the termination of federal recognition of hundreds of tribes in the 1950s. Under the Bureau of Indian Affairs (BIA) Relocation Programs, people were moved from reservations to cities. Those relocated to cities were given a brief training in a trade and then left on their own.<sup>37</sup>

In yet another attempt at assimilation, the BIA partnered with the Child Welfare League of America to remove Native children from their homes again, this time placing them for adoption. This continued

into the 1970s as state and private agencies continued to remove Native children and place them outside of their homes. Eighty-five percent of these children were placed in non-Native homes.<sup>38</sup>

Traditional ways of living for Native people were undermined by practices and policies that were in direct contrast with their ways of life. Children and youth were taught to be ashamed of their culture and shamed in to believing that their families' way of life was backward or primitive. Generations and generations of Native peoples experienced many different traumas that have affected whole communities and continue to have impacts today.

## Impact of Trauma

The history of U.S. policies discussed above shaped not only families but also the relationships between tribes and states and the federal government. Many Native families today may not want to get help from helping systems because they do not trust them. Distrust is a survival strategy when you know the history of how negatively your people were treated by the federal and state governments. Historic distrust<sup>39</sup> may be a barrier to families seeking help, especially grandfamilies. Older caregivers who likely directly experienced boarding schools, relocations or adoptions by non-Native peoples may need support, but younger generations also feel the impact of these events and policies on their own lives.

The family's distrust in helping systems may also be seen from a helper's view as a sign of risk or resistance. The helper may see a family's caution as unwillingness to engage with the system and make inaccurate or negative assumptions about why.<sup>40</sup> Even families who did not have direct contact with destructive services and systems knew families that did. Knowing this history when entering a Native home can help the helper be prepared to work through this issue without making assumptions.

The impact of boarding schools on American Indians and Alaska Natives also damaged traditional roles of Native peoples. The role of men was especially damaged when they returned home and did not know how to do basic things like hunt for

their families, construct homes, prepare for seasonal changes, perform rituals or ceremonies, or govern.<sup>41</sup> Women's roles were damaged when they did not learn to nurture, gather, grow, or prepare food, parent, or provide for family basics.

Children raised in the boarding schools grew up with their needs unmet. These children with unmet needs became parents with unmet needs. These generations of children raised without their parents and families became parents and grandparents themselves without the skills of how to be a parent according to their culture and traditions. It was not until the 1980s when the scope of boarding schools began to diminish.<sup>42</sup>

The impact of boarding schools was deep and damaging, and for decades the relocation program and widespread adoptions of Native children to White families also hurt traditional Native roles and parenting. These continued attempts at assimilation left families separated from one another and from their culture.

## Disproportionate Removals

The U.S. government continued its goal to assimilate Native people with the Indian Adoption Project of the 1950s–1960s. Native children were removed from their families, often by means of coercion, and placed in “good White families.” This led to 25 to 35 percent of Native children being removed from their homes.<sup>43</sup> The Indian Child Welfare Act of 1978 (ICWA) was passed by Congress in response to this history of separation and family destruction.

The intent of ICWA has not entirely changed the biases that are built into child welfare system. ICWA has greatly improved the picture for Native families but disproportionate placement persists to this day. Nationally, American Indian and Alaska Native children are placed outside their homes about 3 times more often than all other children. In at least one state the rate is 12 times higher.<sup>44</sup>

Systems that, for years, trained workers to remove Native children are not easily changed. Those biases against Native families remain because they are built into that system. Cultural differences are often

seen as reasons for removals today. For instance, multigenerational homes that mainstream standards view as overcrowded may come to the attention of a child welfare agency.

A child may be provided with love and support and have their basic needs met, yet the family could be at risk of their child/ren being removed.

Although ICWA was passed into law, the intent of ICWA is frequently missing from child welfare practice. ICWA is too often seen as “more work” by child welfare workers. Contrary to this attitude, ICWA remains judged by national standard-setting organizations as the gold standard of good social work practice. In fact, when ICWA is followed there are better outcomes for Native children. ICWA is discussed in detail in later chapters.

## **Acknowledgement of Historic and Current Discrimination**

Helpers and workers who acknowledge the history and understand how current discrimination is a problem for Native families are taking an important first step towards practicing in a culturally competent way. Service providers who address their own beliefs about Native peoples can uncover where they may have gaps in their knowledge.<sup>45</sup>

Stereotypes about Native people are not a thing of the past. And helpers should seek to understand that their views of Native peoples and culture may be based on stereotypes they picked up throughout their lives. Indian Country is extremely diverse and, while many tribal people share some values, culture can be very different from tribe to tribe.

While almost all tribal communities felt the effects of U.S. policies, many were able to maintain some—if not most—of their culture, language, and traditions. For decades, people practiced their culture in secret because Native spiritual practices were illegal under federal law. Practicing their ceremonies, continuing to eat traditional foods, and speaking their languages was not easy. Fortunately, much of the culture survived the worst attempts

of extermination. This resilience of tribal culture lives on today and, in fact, is thriving in many communities.

Movements to reclaim traditional culture have spread across Indian Country, as Native people know that the key to healing lies in the communities themselves. Tribal culture and traditions are valued as strengths that will keep families healthy and contribute to the overall well-being of tribal communities.

Helpers should also be aware that many tribes have a variety of different services, often rooted in tribal culture, that they offer their members and community. While each tribe’s capacity to provide services may differ, it is always a good idea to reach out to tribes as partners and resources.

## **Resilience**

Some non-Natives believe that traditional Native culture is a thing of the past. Others believe that Native communities are so damaged that every family is dysfunctional. Neither is even close to the truth. Today, the majority of Native families are healthy and vibrant. Since healthy families are rarely in contact with service providers, it is easy for providers to get a negative picture based on their limited contacts with only those most negatively impacted by historical trauma, adverse childhood experiences, and challenging social conditions. Helpers and grandfamilies alike should remember that challenges are normal and serious problems can be overcome with help and support. Native families are resilient, especially when supported culturally. Grandfamilies are a prime example of these strengths.

## **Conclusion**

A painful past can be handed down from generation to generation as unresolved grief and loss. This historical trauma can have a lasting intergenerational impact especially when transmitted generation after generation through adverse childhood experiences. Learning about this history will help service

providers better understand the people they serve. Fortunately, Native culture and Native families are resilient, and the strengths of both the culture and families have persisted over time despite a horrible past. Trauma is something that happens to people.

It does not define them. Service providers will be better helpers when they understand that today's Native grandfamilies are defined by their cultural and family strengths as well as the traumas of the past.

**Boarding School Healing** website has additional information on the boarding school era. <https://boardingschoolhealing.org/>

**Culture Card: A Guide to Build Cultural Awareness: American Indian and Alaska Native** by the Substance Abuse and Mental Health Services Administration (SAMHSA), DHHS Publication No. SMA08-4354. <https://store.samhsa.gov/product/American-Indian-and-Alaska-Native-Culture-Card/sma08-4354>

**Healthy Native Youth** website has more resources related to culturally based education and health information visit <https://www.healthynativeyouth.org/>

**National Indian Child Welfare Association (NICWA)** website has additional resources for Native families and services providers. <https://www.nicwa.org/families-service-providers/>



## Chapter 4

# Benefits and Strengths of Preserving and Restoring Cultural Identity

### Introduction

The most important reason to provide culturally appropriate services is the Native child's need for a positive sense of self, or identity. This chapter discusses the importance of identity and the need to address two critical and related aspects of identity: first, the sense of self that comes with belonging to family, and second, the sense of self that comes with connectedness to culture. For Native grandfamilies, these are deeply intertwined concepts. Fortunately, identity is something grandfamilies can do something about if they understand why it is important and what they can do that is easy and practical.<sup>46</sup> This chapter is about being intentional in helping children build a positive view of who they are and where they belong.

### What is Identity and Why is it Important?

Simply put, personal identity refers to the characteristics, traits, ideas, beliefs, and actions that people use to define who they are. Identity provides a sense of meaning, belonging, and personhood (knowing who you are as a unique individual).<sup>47</sup> It helps us understand ourselves in relation to others, including family, friends, neighbors, culture, and those beyond our immediate community. Personal identity helps us find our place in the world. It also provides a sense of continuity over time as it links our past, present, and anticipated future. How we view ourselves colors our understanding of virtually everything we experience. When we grow up with trauma, grief, loss, or social isolation, our identity can be impacted. Relationships with extended family and a sense of connectedness with culture, tribe, and ancestors are strong antidotes for adverse experiences.<sup>48</sup>

### Many Faces of Identity

Identity formation is a complex process. It is the process by which a child develops ideas and beliefs about their place in life. We all develop beliefs about our physical being, roles, and relationships. Although we work to fit different aspects of ourselves into one "self", we all have many intersections with the world around us that affect our identity. The views that the society around us holds about us can make the process confusing and difficult. For example, where society holds negative stereotypes or implicit bias about race or culture, a child can wonder if they fit in anywhere. Children in relative care can also be stereotyped negatively simply for their status. In an environment that can make negative judgements, grandfamilies can help their children by intentionally building a positive cultural and family identity.

One approach to building a positive identity is learning about culture, especially learning a tribal language. Research shows that a positive cultural identity is associated with more positive outcomes for youth. While Native cultures are diverse regionally, each tribe's language is unique to that group. Learning greetings, how to introduce yourself, and words for showing respect to elders are effective ways to develop the unique sense of connectedness to culture, place, ancestors, and kin.

### Identity and Kinship Care

Identity for children in relative care requires that families actively work on developing positive cultural associations that emphasize that identity is influenced by many different factors.<sup>49</sup> Grandfamilies who support a positive identity are more likely to be proactive in the process of family formation. They talk about being a family and are inclusive of the child. Grandfamilies that

honor a child's birth parents and heritage create an open communicative environment in relation to placement issues. Openness and respect are more likely to foster positive self-esteem in the child. Children who have positive peer and school experiences in relation to placement issues are also more likely to feel positive about being in relative care.

Identity formation is important for all children and many things influence the process. When children struggle with identity because of what has happened to them, their mental health can suffer. Understanding how to overcome the challenges is very important.

### **Overcoming the Barriers**

There are several barriers to forming a positive identity. Children who experience abuse or neglect, or who have witnessed violence or experienced fears related to parental substance use, may develop feelings of not being worthy very early in life. This is especially true if they have not been able to attach to caring adults when they are young. When children experience trauma and insecure attachments, caregivers need to fill the empty spaces with time, affection, understanding, patience, and consistency. Basically, this means building trust, following through, and understanding that negative behaviors most often come from fear and unresolved loss and grief. Grandfamilies need education, support, and preparation to do this well because it is emotionally demanding.

In addition to understanding the role trauma plays as a barrier to identity formation, Grandfamilies and the helpers who support them need to know that

relative care, guardianship, and adoption come with stigma, shame, and stereotypes.<sup>50</sup> In addition, there may be gaps in the information about the child's life before coming into care. Caregivers can help children feel positive about their care by showing that they are part of their extended family who want and love them. Grandfamilies can help fill in the gaps by teaching the child who they are related to and by teaching them what is polite or how respect is shown in their family. Teaching norms and values with simple expressions such as, "in this family we show respect to our ancestors," can be powerful ways to build identity. Including children in spiritual activities and ceremonies as are practiced in their tribe is another powerful way to contribute to a positive identity. Inclusion and connection build a sense of trust over time. That sense of belonging is life long and is the true meaning of permanency.

There are other barriers for Native American children in general—negative stereotypes, racial discrimination, micro-aggressions, and bullying. Micro-aggressions are insults or mean statements that may seem small but hurt as they add up over time. Native children experience these conditions in many areas along with a failure of schools to provide culturally sensitive curriculum. Racial bias and denial of the importance of culture is common, and in many places, there may be few positive role models available. Grandfamilies need to talk with their children about the negative attitudes in the world and engage in positive cultural socialization activities with their children.

The intentional building of positive cultural experience helps balance the negative impacts of growing up in a negative environment. Grandfamilies can help their children become more self-aware

**On Chippewa Cree tribal lands in Montana, GRAND Voice Wilma Tyner and other grandfamilies are practicing their culture to respond to health challenges during the COVID-19 pandemic. The grandparents and grandchildren are building up their immune systems in a sweat lodge once a week, inhaling traditional medicinal herbs and flowers. As of late May 2020, the tribe has no cases of COVID-19 and feel blessed to have cultural awareness of these helpful remedies.**

as Native people by teaching them about history, the sovereign status of tribal governments, and how their heritage is similar or different from other Native peoples.

## Identity and Cultural Strengths

Too often people are familiar with the stereotypes about Native peoples, both positive and negative. The list of misunderstandings about Native peoples and tribes is long. Grandfamilies, and the people who support them, need to have a clear picture of common cultural strengths. The following examples highlight a few of those strengths.

Native cultures are full of natural support systems. Kinship networks, extended families, clans, and self-help groups all enable people to support one another. Social relations among friends are informal while dance groups or sports clubs are more formal. Culturally based groups like healing societies or ceremonial societies exist in many places.

Native people everywhere have a sense of shared community responsibility and turn to each other in times of need. In many places, trade and barter are important parts of community life. Physical

resources such as traditional foods—game meats, fish, edible plants and roots, etc.—are shared informally as well as ceremonially. Resources of the land and water are regarded as important and families learn to live in a respectful relationship with the environment where traditional teachings are held. Cultural pride gives Native people the strength to walk in different worlds and to live with curiosity and courage even when life is a challenge or when outsiders misjudge. The Indigenous knowledge children acquire through the intentional teaching of grandfamilies can be critical to developing the survival skills and resilience needed in the face of multiple challenges.

## Conclusion

Forming a strong positive identity early is the best defense against identity confusion that can, later on, turn into acting out behavior. The stronger the child's identity, the more likely they are to overcome the barriers to positive outcomes. A positive identity does not have to be left to chance. Being intentional and active are the keys to building a healthy identity. Culture and kinship relationships are strong resources that grandfamilies can use to support their children.

**Identity Formation in Adolescence** by ACT for Youth Upstate Center of Excellence; A collaboration of Cornell University, University of Rochester, and the New York State Center for School Safety. [http://www.actforyouth.net/resources/rf/rf\\_identityformation\\_1102.pdf](http://www.actforyouth.net/resources/rf/rf_identityformation_1102.pdf)

**National Adoption Competency Mental Health Training Initiative** offered by Center for Adoption Support and Education C.A.S.E. <https://adoptionsupport.org/nti/>



## Chapter 5

### Key Considerations for Providing Culturally Appropriate Services

**The agency wouldn't release the kids to me at one point for the Mongolian blue spots on my granddaughter. They claimed her birth marks were bruises from physical abuse from me, and I had to get a doctor to verify that these birthmarks common to Native American infants were not bruises. We had to go to court for that. This was another instance where service providers caused more harm by prolonging the process unnecessarily. Tribal social service agencies know about these culturally specific norms for infants and children. Social workers need to be educated to provide culturally appropriate services, so people do not experience what happened to my grandkids and me.**

Sonya Begay, GRAND Voice and Citizen of the Navajo Nation

#### Introduction

There are many things that set Native peoples apart from the mainstream society. History, political status, culture, place, laws, and services are all addressed in this toolkit. In this chapter, we summarize political status as well as a few critical elements of culture and place that can be very helpful to understanding how to work with American Indian and Alaska Native grandfamilies like Sonya Begay's.

#### Tribal Sovereignty and Child Welfare

In pre-colonial times, tribes governed themselves to make and enforce laws, conduct trade, recognize

marriages, determine child custody, and punish wrongs.<sup>51</sup> Following the establishment of the United States and the inclusion of tribes in the constitution, tribes became "dependent domestic nations,"<sup>52</sup> nations within a nation that retain the right to govern themselves.

Tribal governments in the United States, under their retained powers of self-governance, still provide child welfare services and decide custody matters regarding children. Today's tribal child welfare services exercise their pre-colonial powers. Those sovereign powers are recognized and enforced by the Indian Child Welfare Act (ICWA). Under ICWA

states have to recognize the authority of tribes over their own child welfare and work with them on a government-to-government basis.

The Indian Child Welfare Act does several very important things. As mentioned above it recognizes the tribe's rights regarding the safety and custody of their children. It also sets up rules that states and counties must follow when working with eligible Native families, for example, provisions for relative placement of Native children. Under ICWA, only enrolled tribal citizens or the biological children of enrolled citizens who are eligible to become citizens are covered. States must notify tribes of any custody proceeding. The tribe can come to court and offer testimony and evidence, and can even petition to transfer the case to tribal court. These policies are all based on the inherent sovereignty of tribes and the government-to-government relationship set up by the constitution and federal laws.<sup>53</sup> ICWA and other federal policies are discussed further in Chapter 8 of this toolkit.

## **Diversity Among Native Cultures, Nations, and People**

Understanding the cultures of Native peoples in the United States can be challenging due to the vast diversity of experiences by different nations. That diversity comes from distinct regional variations, each tribe's or nation's history, and the degree of assimilation of its members. Every tribe has individuals who still adhere to the ancient traditions of their tribe, others who are quite assimilated, and every variation in between. Some speak their own language, and some languages have been lost. In addition to assimilation differences, Native peoples have historically intermarried with each other and with other races. Native people of any tribe can present or appear White, African American, Asian, Latinx, or any range of many differing Native. These differences can be seen in the same family and are often a source of confusion for helpers, including educators and health care providers.<sup>54</sup>

One of the greatest sources of diversity is regional tribal differences. Because of media images,

most Americans associate Native culture with the stereotypical Plains Indians. In fact, as of this writing, there are 574 federally recognized tribes and fewer than 10 percent could be considered of the Plains culture. The Southwest is home to the Pueblo and desert cultures, the West is home to the Plateau and the Coastal cultures and Alaska is home to several distinct cultural groups. The physical traits, beliefs, traditional practices, and languages of the various groups are distinctly based on place, natural resources, climate, geography, and their historic relationships with each other and the timing of colonization.

## **Common Shared Indigenous Cultural Traits**

Despite the vast diversity of cultures, nations, and individuals, there are several common characteristics or behaviors that are held by people from Indigenous cultures. In this section we are using the term "Indigenous" to refer to Native peoples collectively. Indigenous means belonging to a place or the original people of a place. The characteristics discussed below are related to being of cultures that are connected to the land and/or who are interdependent groups. While these characteristics appear differently today due to assimilation and the regional differences discussed above, it is useful to learn a few of the more common culturally based behaviors so as to not misjudge Native people. When a behavior in one culture means something different to another culture, that behavior may be considered rude, ignorant, or even evident of mental illness.<sup>55</sup>

### **Communication**

- People whose first language is an Indigenous language may have to translate mentally before responding in English. Many Indigenous languages have words of emotions and relationships that are hard to translate into English and people may struggle to express themselves.
- Most mainstream Americans speak quickly and directly. Indigenous people tend to speak more slowly and indirectly. They are likely to tell a

story in response to a question because context is as important as facts.

- Unlike many mainstream Americans, indigenous cultures find interrupting someone to be rude and usually defer to elders to speak first.
- Mainstream Americans tend to give advice and comment on what people should do, buy, read, or try. Indigenous people tend to see this as rude.
- Indigenous peoples tend to be modest and reserved with giving praise, whereas mainstream Americans often are less reserved in this respect.

## Values

- **Respect for Elders** - Indigenous peoples tend to revere elders and treat them with respect, while mainstream Americans tend to treat elders as having little value. Indigenous elders are usually served first at any event and youth will nearly always fill a plate for an elder before themselves.
- **Facts versus Wisdom** - Mainstream American society tends to value facts, data, experts, and degrees. Indigenous cultures tend to value wisdom, patterns, cycles, and experience.<sup>56</sup> One culture focuses on breaking the world into its smallest parts to understand how things work, and the latter looks more holistically while observing complex relationships to understand how things work.
- **Time** - Mainstream American culture values clock time, punctuality, and efficiency. The expression “Time is money” sums up this perception. Indigenous cultures tend to understand time in terms of cycles and understand that things happen in their own time. For example, Native peoples know that you fish when the fish are running, you pick berries when the berries are ready, and you conduct ceremonies when the time is designated by the season or position of the stars. In reality, Indigenous people do value time, just in a different way than Mainstream Western society.
- **Family and Kinship Networks** - Several Native peoples have clan systems that track

relationships far more broadly than in American society. Clans do not intermarry, they often have specific roles in helping others in times of crisis, and they may support one another in times of loss and grief. Grandfamilies are common and may be permanent or temporary depending on the needs of the children and the cultural roles of grandparents or other relatives. Indigenous cultures tend to value and prioritize family and kinship networks above work obligations or service provider expectations. Whereas mainstream Americans will prioritize work commitments and appointments over non-emergency family needs, Indigenous cultures typically will not. For example, if a helper gets a last-minute appointment cancellation from a Native due to an extended family need, the helper should understand that priority.

It is easy to stereotype different cultures when we try to compare and contrast in the way that we have just done. Helpers should remember that these are things they might see. Knowing these are tendencies, not hard and fast rules, will help people approach cultural difference with curiosity and humility. It is important to know that each individual expresses cultural values, beliefs, behaviors, and manners differently in different situations. In addition, local communities may have customs, traditions, and etiquette that are particular to that area, such as a greeting or gesture. Curiosity and observation are the helper’s best tools for learning these things with respect and humility. It is also important to recognize that the painful collective past presents a real barrier to helping cross culturally.

## Overcoming Historic Distrust

Trust must be earned when outsiders work with Native populations. In earlier chapters we discussed the painful past that led to historical trauma and unresolved grief. That past also led to historic distrust of helpers.<sup>57</sup> Native peoples expect to be treated badly by outsiders offering help. It is a survival strategy.<sup>58</sup> Native peoples tend to trust people who relate to them with respect

and dignity. Having degrees, titles, or a license to practice has little meaning if the helper does not also work to establish basic trust and credibility. Helpers earn trust by keeping confidentiality and sharing who they are as people and building a mutually respectful relationship. Active listening is key. Pay attention to the Native person's narrative and appreciate the person's expertise on their own experience. Few things will sour a helping relationship faster than the helper acting like the expert and discounting the Native person's perspective.

## Conclusion

It is impossible in the scope of this brief toolkit to review all of the cultural differences that are important to the helper and to grandfamilies themselves. However, it is important to learn enough to be a good observer and to ask good questions. Cultural differences influence the dynamics between various peoples, but each of us has a choice of how we handle the differences and the dynamics that are normal when people from diverse cultures meet in a helping relationship. Successful work across cultures requires life-long learning and the willingness to embrace the complexity of cross-cultural helping.



**Culture Card: A Guide to Build Cultural Awareness: American Indian and Alaska Native** by the Substance Abuse and Mental Health Services Administration (SAMHSA), DHHS Publication No. SMA08-4354. <https://store.samhsa.gov/product/American-Indian-and-Alaska-Native-Culture-Card/sma08-4354>

**TIP 59: Improving Cultural Competence/** SAMHSA Publications and Digital Products is a guide that helps professional care providers and administrators understand the role of culture in the delivery of mental health and substance use services. It describes cultural competence and discusses racial, ethnic, and cultural considerations. <https://store.samhsa.gov/product/TIP-59-Improving-Cultural-Competence/SMA15-4849>

**Working with American Indian and Alaska Native Individuals, Couples, and Families: A Toolkit for Stakeholders** by Terry Cross and Cross-Hemmer, A. L. National Resource Center for Healthy Marriage and Families, ICF International with funding from the United States Department of Health and Human Services, Administration for Children and Families. <https://www.healthymarriageandfamilies.org>

## Chapter 6

### Helpful Services



**I was never offered culturally appropriate services. The only thing remotely culturally appropriate was counseling through the Muscogee (Creek) Nation, which I had to set up myself. I had to ask permission to take my grandson to ceremonial activities and answer rather humiliating questions about why it was appropriate for him to attend. At times, permission was denied. It was important for me to access tribal services every chance we got because they keep mom and dad and children connected to the tribe. Tribal service practitioners know what it's like to be Muscogee (Creek) or Native as opposed to someone coming from a different outlook and background. As a child welfare professional myself, that process opened my eyes to what other grandfamilies go through. It's got to be very confusing and frustrating.**

**Robyn Wind, GRAND Voice and citizen of Muscogee (Creek) Nation**



#### **Introduction**

Knowing where to turn for help is not easy, even for Robyn Wind who knows the child welfare system well. The service systems that should respond to the needs of American Indian and Alaska Native families are complex and inconsistent. This chapter is intended to give Native grandfamilies and their service providers basic information and an idea of some of the services that may be available and how to access them.

Because of historic policy issues, service systems look different from state to state and from tribe to tribe within the same state.

Those who wish to learn more about how service systems work, how grandfamilies can access services, or how service providers can collaborate with tribes will have to learn through dialog with local tribal leaders and managers. Taking the initiative to set up a meeting and approaching tribal leaders and managers with curiosity and informed questions will usually be well received.

## Federal Trust Responsibility

Tribes that entered treaties with the United States agreed to give up large expanses of land and natural resources in exchange for a commitment that the United States would provide for the health, education, and welfare of the tribal members for time immemorial. In some treaties, the language was “as long as the grass shall grow.” Additionally, the federal government agreed, in most treaties, to hold the tribe’s land in trust, provide protection to the tribe and stewardship of the natural resources. This arrangement is referred to as the federal trust responsibility. Like any “trustee,” the federal government is responsible for the competent management of resources on behalf of the tribes. Under this arrangement, the federal government is responsible for schools, health care, and the social service safety net for American Indians and Alaska Natives living on reservations or in designated service areas (commonly referred to as Indian Country). While all federal agencies have an obligation to fulfill the trust responsibility with tribes there are three federal agencies specifically designated to meet trust obligations: the Bureau of Indian Affairs (BIA), the Bureau of Indian Education (BIE), and the Indian Health Service (IHS). The first two are under the Department of the Interior. The latter is under the Department of Health and Human Services. However, these agencies can only fulfill their obligations to the extent that Congress appropriates funds for that purpose. Unfortunately, appropriations fall far short of need and the federal government has never competently fulfilled its trust responsibility.

In recent years, more and more legislation has created set-asides or direct funding for tribes under mainstream programs. This trend began with the War on Poverty, during which Indian tribes became eligible for community action funds and housing funds. Later, tribes gained access to childcare funding, Temporary Assistance to Needy Families, and child welfare funding, among others. Even with access to these programs, the funding formulas fall far short of the known needs. Funding disparities are well documented and most tribes are actively

seeking resources to meet the needs of their citizens.<sup>59</sup>

When the BIA, BIE, or IHS directly provides the services, which is still the case in many locations, the employees are federal employees. If the tribe receives grants or contracts or fund services through their own resources, the employees are tribal employees and the programs are tribally administered. Additionally, many tribes are small or under-resourced to the point that they are not able to provide adequate services. Grandfamilies need to remember that Native Americans are citizens of the US, the state, and the county and are thus eligible for services in all jurisdictions. In fact, many BIA services are called services of last resort. That means the Native Americans in need must exhaust all other resources before the BIA will help. This is discussed in more detail below.

## Citizenship and Eligibility

If the trust responsibility were upheld, then the service system would be fairly simple. If most American Indian and Alaska Native people lived in “Indian Country,” it would be less complicated. However, given layer after layer of federal policy and programs created over hundreds of years to divest the “Indian Problem,” it is anything but simple.

Beginning in 1924, when Indian people were made citizens of the United States by an act of Congress, American Indian and Alaska Native individuals became eligible for services in any off-reservation jurisdiction in the country. As citizens, American Indian and Alaska Native people are, supposedly, covered by Social Security and other government programs and are entitled to equal protection under the law. Theoretically, as residents of states, American Indian and Alaska Native people are eligible for all services for which any other resident of the state in the same circumstances is eligible, regardless of where they live. In practice, American Indians and Alaska Natives have been turned down for services in the state, county, and local service systems under the mistaken belief that they are the sole responsibility of the federal government. This pattern of discrimination has created a norm in

which American Indians and Alaska Natives believe they are not eligible and may not even try to get local or state safety net services.

Additionally, under Public Law 280 11 states assumed at least partial civil jurisdiction over Indian lands.<sup>60</sup> They are Alaska, California, Florida, Idaho, Iowa, Minnesota, Nebraska, Nevada, Oregon, Washington, and Wisconsin. In PL 280 states, the federal government agencies like the BIA or IHS provides services of last resort. Only after state resources are exhausted is the American Indian and Alaska Native person eligible for federal assistance. In these states, the state government is responsible for safety net services on and off the reservation, unless a) an individual tribe was exempt from PL 280 (which occurred in some state legislation, such as in Oregon where the Warm Springs reservation was exempted) or b) a tribe was restored to federal recognition after termination. In addition, there is a process by which a tribe can reassert its jurisdiction in a PL 280 state following a Supreme Court decision that found that PL 280 was a wrongful taking of an inherent tribal right. In partial PL 280 states, the state legislature took jurisdiction over some things and not others. Idaho is an example, where the state took jurisdiction only over the following: compulsory school attendance; juvenile delinquency and youth rehabilitation; dependent, neglected, and abused children; mental illness; domestic relations; and operation of motor vehicles on public roads. As a result of the complexity created by PL 280, many American Indian and Alaska Native people who need services fall between the cracks.

Many tribes and states in recent years have developed robust and positive relationships through state legislation, tribal-state agreements, and contractual arrangements. In these states, there are usually strong opportunities for collaboration with tribes and good examples of established relationships.

State services are predominantly located away from tribal communities, employ primarily non-Indians, and thus may not be culturally appropriate and make little contribution to the tribal economy overall.

## **Indian Self-Determination and Self-Governance**

When official federal policy shifted from assimilation to self-determination in the 1970s, a new tribal service system emerged. Under the Indian Self-Determination and Education Assistance Act of 1975 (P.L.93-638<sup>61</sup>), a tribe may contract with the federal government for any service that would be provided under the federal trust responsibility. Because these arrangements are authorized under Public Law 93-638, these are known as 638 contracts. However, under these contracts, the federal government has oversight, determines the deliverables and budget, sometimes provides technical assistance, and monitors performance. If tribes fail to meet performance measures, the federal government can and does step in and run the program. Tribes can contract to run distinct programs and may take on some programs but not others.

In the 1990s, a shift toward even greater tribal control occurred with the enactment by Congress of the Tribal Self-Governance Act of 1994. Under self-governance, a tribe negotiates a compact. This is essentially a block grant. All trust responsibility functions are bundled into a package, and the tribal government decides how to allocate the resources to meet local needs. There is no technical assistance from the federal government. Tribes have greater autonomy but may agree to meet outcome measures instead of contract deliverables. In these scenarios, tribes are frequently augmenting the federal dollars with funding through state contracts or tribal-state agreements. They are also often allocating tribal revenue if it is available.

Both self-determination and self-governance tend to support communities more broadly than direct services from federal agencies. Employees are much more likely to be local, know and live in the community, and participate in building a local economy by spending payroll dollars locally.

## **Tribally Funded Programs**

In the last 30 years, many tribes have developed successful economic enterprises. While gaming has been central to many, tribes have worked hard

to build diversified economies. For many, self-governance is central to an economic development strategy. Today, many tribes are providing health services under self-governance compacts with IHS. These tribes are collecting revenue from third-party payers such as private insurance, Medicaid, and Medicare, and some are serving individuals beyond the tribal population on a fee for service basis. Increasingly, tribal health services are the only or best source of health care for rural Americans living near Indian Country.

Many tribes are producing revenue from their enterprises and funneling that revenue back into capacity building by augmenting federal and state funding to enhance services and to heal and empower their citizens. They are creating not only jobs but entire economies.

While these situations are still emerging, these tribes are in a process of recovery from historical trauma and continue to need safety net services for many of their members.

### **Access to Federal Programs**

The War on Poverty and the Self-Determination Era started a new chapter in the way that tribal governments funded various services. Starting with the U.S. Department of Housing and Urban Development (HUD), tribes gained access to programs that all other local and state governments could access. Many tribes now operate housing authorities that build and manage HUD housing. Head Start followed, and many tribes or tribal consortia operate their own Head Start Programs. Nearly every tribe in the nation has a childcare program since gaining access to the Child Care and Development Block Grants. Increasingly, tribes are running their own TANF programs, child support enforcement programs, employment, and child welfare programs using federal dollars that have become available to tribes through set-asides in mainstream program legislation. Most tribes have active planning departments that seek out discretionary funding from federal programs, states, and private funders.

While this is a growing trend, access does not mean entitlement. Tribes must build infrastructure, apply for, and be accountable for the resources that they receive. Often the amount of funding available is minimal and running a program is only feasible if other funding sources can be secured. Almost all federal funding for tribal governments is discretionary, meaning Congress must appropriate the funds each year. There is no guarantee that the funding will be available or how much might be appropriated. This contrasts with state governments who routinely receive entitlement funding in many program areas. Entitlement funding is guaranteed and does not require Congress to appropriate the funds each year.

### **Private Sector (charities, churches, and private education)**

One little known gap in tribal services is the nonprofit sector. While churches fill some of this gap, there are few relationships with major providers of emergency services such as the Red Cross, food banks, emergency shelters, or transportation services. Few nonprofits exist or work in Indian Country.<sup>62</sup>

### **What Does the Service System Look Like?**

It depends. Understanding the history, policies, and diverse service possibilities can help grandfamilies and service providers understand the potential complications in the system so that they can sort out strategies for effective support or collaborative efforts.

The services listed below are ones that some grandfamilies are likely to need at one point or another. The information is intended to help give direction to understand and access needed services. It is not a comprehensive list, but rather is intended to provide information on programs specifically helping the American Indian and Alaska Native communities and additional critical programs, such as Social Security, Medicare and Medicaid.

The services section begins with general information about kinship navigator programs

and tribal enrollment. Services are next organized alphabetically into the following categories:

- I. Child Welfare
- II. Education
- III. Financial Assistance and Income Supports
- IV. Health and Nutrition Supports
- V. Housing
- VI. Legal and Crime Victim Assistance
- VII. Other Supportive Services

The services below do not exist universally, but it is always worth checking every possibility when needs arise.

### Kinship Navigator Programs in General

Kinship navigator programs assist kinship caregivers in learning about, finding, and using programs

and services to meet the needs of the children they are raising and their own needs. They also promote effective partnerships among public and private agencies to ensure grandfamilies are served. Kinship navigator programs have existed for almost twenty years, and have been proven successful in connecting the families to the services and support they need. However, not enough jurisdictions have them. Since 2018, federal funds are available to all states, tribes, and territories interested in these programs, and ongoing federal reimbursement is possible for evidence-based kinship navigator programs, thanks to the Family First Prevention Services Act.

For more information, visit: <https://www.grandfamilies.org/Resources/Kinship-Navigator-Programs>

There are seven **tribal kinship navigator programs** in Washington that serve tribal kinship families. Tribal kinship navigators know the culture and practices of the tribe as well as the culturally appropriate services and resources that are available. These programs are able to respond to the needs of Native grandfamilies in ways that keep them connected to their tribal culture and traditions. Tribal navigator programs address the need to maintain these strong connections to culture as a way to enhance safety and stability for families.<sup>63</sup>

For contact information, visit: <https://www.dshs.wa.gov/altsa/kinship-care-support-services>



## Tribal Enrollment

American Indian and Alaska Native children can face barriers accessing tribal services if they are not enrolled in their tribe. Tribes establish membership criteria based on shared customs, traditions, language, and tribal blood. Defining tribal citizenship is a sovereign right retained by tribes, which means that only a tribe can determine who its members are. Tribal enrollment criteria are set forth in tribal constitutions, articles of incorporation, or ordinances. The criteria vary from tribe to tribe, so uniform membership requirements do not exist. Two common requirements for membership are lineal descentance from someone named on the tribe's base roll or relationship to a tribal member who descended from someone named on the base roll. (A "base roll" is the original list of members as designated in a tribal constitution or other document specifying enrollment criteria.) Other conditions such as tribal blood quantum, tribal residency, or continued contact with the tribe are common.

Grandfamilies may want to seek enrollment for the children they are raising. Tribal enrollment can be difficult for American Indian and Alaska Native children being raised in grandfamilies unless the children's parents are available to help during that process.

First, complete a genealogical search, document the child's ancestry, and determine the tribe with which the child is affiliated. Then contact the tribe directly to obtain the criteria for membership.

The [Tribal Leaders Directory](#) that is published by the Bureau of Indian Affairs lists all 574 federally recognized American Indian Tribes and Alaska Native governments. It also lists all the regions, agencies and offices within the BIA. While the BIA does not participate in determining eligibility for membership, they are a resource for finding contact information.

For more information, visit: <https://www.doi.gov/tribes/enrollment>

For the tribal leaders directory, visit: <https://www.bia.gov/tribal-leaders-directory>

**The advice that I would give to grandfamilies is to access all the resources that the tribes have to offer. Not all tribes have a lot of resources, some don't have behavioral health or the capacity to run those types of programs, but they may have strong community programs such as support groups or other informal groups that can offer support. As a relative caregiver, remember what an important service you are doing, not only for your family, but also to the tribe and community as a whole. Children are the future of our tribes and we are giving them a strong base to build on.**

Robyn Wind, GRAND Voice and citizen of Muscogee (Creek) Nation

## I. Child Welfare

**The Children’s Bureau:** The Children’s Bureau, within the U.S. Department of Health and Human Services, Administration for Children and Families, provides matching funds to states, tribes, and communities to help them operate every aspect of their child welfare systems—from the prevention of child abuse and neglect to the support of permanent placements through adoption and subsidized guardianship.

For more information, visit: <https://www.acf.hhs.gov/cb/programs/state-tribal-funding>

**Tribal Child Welfare and ICWA:** The Indian Child Welfare Act of 1978 (ICWA) affirms the sovereignty of tribes in child welfare and recognizes a framework of tribal courts, codes, and programs. Beginning with ICWA, tribes began in earnest to reclaim their responsibility for the protection of tribal children. There are 574 Native American tribes and Native Alaskan villages recognized by the federal government. Today, over 80 percent of tribes in the United States provide child welfare services such as child protective (CPS), foster care, and adoption, which are similar to those offered in mainstream communities; it is almost certain that all tribes provide some form of child welfare services to their children, youth, and families. Often tribal child welfare programs also help youth who commit status offenses<sup>64</sup> such as problems related to truancy from school, under-age drinking, and incorrigibility. The tribal child welfare program may be able to help youth and their families secure needed services. Some only monitor state or county provided services under ICWA but most provide a range of services to citizens of their tribe. Tribal child welfare systems consist of a group of related service providers. Tribes, states, and the Federal government all have a role in supporting the delivery of services. Because of this complexity, it is helpful to contact a tribe directly to determine the nature and scope of its child welfare services.

For more information, visit: [www.nicwa.org/](http://www.nicwa.org/)

**National and State Child Welfare Organizations and Agencies:** Each state operates a child welfare agency, which are known by an array of names. They work to prevent child abuse and neglect, oversee foster care, and support permanent placements for children in foster care.

For a link to each state’s child welfare agency website, and national organizations and other child welfare resources, visit: [www.childwelfare.gov/organizations/](http://www.childwelfare.gov/organizations/)

## II. Education

**Bureau of Indian Education (BIE):** The Bureau of Indian Education (BIE) is charged with providing quality education opportunities from early childhood through adulthood in accordance with the federal trust responsibility. The BIE funds and operates a total of 183 elementary, secondary, and residential schools across 23 states. Currently housed within the Department of Interior, the BIE was originally located in the Bureau of Indian Affairs created by the Department of War in the mid-19<sup>th</sup> century. Since that time, the BIE has overseen the nation’s legacy of Indian boarding schools and federally funded schools, which now serve approximately 8 percent of American Indian students.

BIE maintains a directory of schools and personnel available at: [https://bie.edu/cs/groups/xbie/documents/site\\_assets/idc2-093308.pdf](https://bie.edu/cs/groups/xbie/documents/site_assets/idc2-093308.pdf)

For more information visit: <https://bie.edu/Schools/index.htm>

**Center for Parent Information & Resources:** A hub of information and products created for the network of Parent Centers serving families of children with disabilities. Early intervention and special education services are available to all children in the United States age birth to 18. To access a parent center, do not be discouraged by their name. “Parent” includes other adult family members.

To find a local parent center: <https://www.parentcenterhub.org/find-your-center/>

### **Child Care and Early Childhood Programs:**

Currently, 268 tribal Child Care and Development Fund grants serve nearly all tribes. More than 30,000 children are served in these programs. The grants support both childcare and early childhood programs across Indian Country.

A list of tribal grants is available at ACF's website: [www.acf.hhs.gov/occ/resource/ccdf-tribal-grantees-listed-by-state](http://www.acf.hhs.gov/occ/resource/ccdf-tribal-grantees-listed-by-state)

Information about tribal childcare is also available from the National Indian Child Care Association: [www.nicca.us/](http://www.nicca.us/)

**Head Start:** The US department of Health and Human Services, Administration for Children and Families Head Start Bureau serves American Indian/Alaska Native Children through Region XI. At the time of this writing, it provides funding to 153 tribal grantees in 27 states. Tribal Head Start serves more than 25,000 American Indian and Alaska Native children.

The National Indian Head Start Director's Association maintains a website with an interactive map showing the current tribal grantees: [www.nihгда.org/aian-centers](http://www.nihгда.org/aian-centers)

Additional information is available from the Head Start Bureau at the Department of Health and Human Services: [www.acf.hhs.gov/site\\_search/%22head%20start%20bureau%22%20+%20%22Region%20XI%22](http://www.acf.hhs.gov/site_search/%22head%20start%20bureau%22%20+%20%22Region%20XI%22)

### **Indian Education Programs in Public Schools (Indian Education Formula Grant Programs):**

The US Department of Education program is designed to address the unique cultural, language, and education related academic needs of American Indian and Alaska Native students, including preschool children. The programs funded are meant to ensure that all students meet challenging state academic standards. The program is the Department's principal vehicle for addressing the needs of Indian children. A minimum of 10 Indian students enrolled in the local education agency (public school) is required for a school to apply for the funds. Grandfamilies can check with their school

to see if there is an Indian Education Office in the school and what services they offer.

For more information, visit: [www2.ed.gov/programs/indianformula/index.html](http://www2.ed.gov/programs/indianformula/index.html)

**State Indian Education Offices:** Twenty-six states maintain Indian Education offices. These offices offer a range of services that may include administering scholarships, information, or curriculum development. The National Indian Education office maintains a directory of state Indian education offices.

To view the directory visit: <http://www.niea.org/get-involved/state-indian-education-offices/>

## **III. Financial Assistance and Income Supports**

### **Bureau of Indian Affairs (BIA), Financial Assistance & Social Services:**

BIA Financial Assistance and Social Services consist of direct funding and activities related to financial assistance, including general assistance, child assistance, burial assistance, emergency assistance, and adult care assistance as well as social services, including services to children, the elderly and families, and child and adult protection services. Not all tribal governments are eligible to receive these funds. Tribes where P.L. 280 is in effect are often not eligible to receive these funds.

The programs that provide assistance under BIA Financial Assistance and Social Services typically are available when AI/AN people have no access to or are not eligible for similar state programs, such as TANF. The services under this section are designed to be secondary in nature. They are also known as "last resort" services. They may be administered federally or by the tribe.

For more information, visit: <https://www.bia.gov/bia/ois/dhs/financial-assistance>

### **Low Income Home Energy Assistance Program (LIHEAP):**

LIHEAP is a federal program designed to assist households with low incomes meet their

immediate home energy needs. There are three main ways tribal citizens may access help:

- Tribal households may apply at local Low-Income Home Energy Assistance Program (LIHEAP) offices to receive LIHEAP benefits from the state (if the tribe does not receive a direct grant from the federal government);
- Tribes may wish to be a contractor of the state LIHEAP Program and run the state program on their reservations (the tribe will need to negotiate this arrangement with the state);
- Tribes that are federally or state recognized may apply directly to the federal government to administer a tribal LIHEAP program and deliver LIHEAP benefits directly to their tribal households.

For more information, visit: <https://www.acf.hhs.gov/ocs/resource/liheap-fact-sheet-0>

**Social Security:** Children may be eligible for Social Security if their parent is collecting retirement or disability insurance benefits. If one of the child's parents has died and was fully insured when he or she died, children may be eligible for survivor's benefits. Kinship providers can apply for benefits on behalf of the child based on the work record of the child's parent. Grandchildren may also qualify based on their grandparents' (but not other kinship caregivers) work record.

For more information, visit: <https://www.ssa.gov/people/parents/>

**Supplemental Security Income (SSI):** SSI provides cash benefits to eligible adults and children with disabilities that seriously limit their activities.

To see if a caregiver or specific child may qualify, visit the disability planner on the Social Security Administration website: [www.ssa.gov/planners/disability/](http://www.ssa.gov/planners/disability/)

**Tribal Temporary Assistance for Needy Families (TANF):** Federally recognized Indian tribes can apply for funding to administer and operate their own TANF program. Currently, 284 federally recognized Tribes and Alaska Native Villages are

served by Tribal TANF programs. TANF gives flexibility to federally recognized Indian tribes in the design of welfare programs. Similar to states, they receive block grants to design and operate programs that accomplish one of the four purposes of the TANF program:

- Provide assistance to needy families so that children can be cared for in their own homes **or in the homes of relatives**
- Reduce the dependency of needy parents by promoting job preparation, work, and marriage
- Prevent and reduce the incidence of out-of-wedlock pregnancies
- Encourage the formation and maintenance of two-parent families

TANF is critical to supporting grandfamilies through both family and child-only grants. These monthly grants are often the only source of ongoing financial assistance for grandfamily caregivers to help meet the needs of children they did not plan or expect to raise.

For more information, visit: [www.acf.hhs.gov/ofa/programs/tribal/tribal-tanf](http://www.acf.hhs.gov/ofa/programs/tribal/tribal-tanf)

For state TANF, Generations United has a fact sheet containing contact information for TANF in each state, which may be known by a different name depending on the state: [www.gu.org/resources/grand-resources-tanf/](http://www.gu.org/resources/grand-resources-tanf/)

An extensive policy brief by Generations United explores the importance of the TANF program to grandfamilies and how states, tribes, and localities can make this vital program more accessible: [www.gu.org/app/uploads/2018/05/Grandfamilies-Report-TANF-Assistance-Policy-Brief.pdf](http://www.gu.org/app/uploads/2018/05/Grandfamilies-Report-TANF-Assistance-Policy-Brief.pdf)

## IV. Health and Nutrition Supports

**Center for American Indian Health:** This center, at John Hopkins University, contains COVID-19 resources for tribal use.

To see the resources, visit: <http://caih.jhu.edu/news/covid19>

## Grandfamilies Strengths: Children Thrive



## Children in All Grandfamilies



**7.9 million**

Number of children who live with a relative who is the head of the household

**2.7 million**

Number of children who are being raised by a relative or close family friend and do not have a parent living in the household

**139,004**

Number of children in foster care being raised by relatives

# American Indian and Alaska Native Children Disproportionately Live in Grandfamilies



Children in the U.S. who are American Indian and Alaska Native

1%

Children in grandfamilies who are American Indian and Alaska Native

8%

Children in foster care who are American Indian and Alaska Native

2%

## Heightened Challenges for American Indian and Alaska Native Children in Grandfamilies



### Child Poverty

About 24% of American Indian and Alaska Native children live in areas of highly concentrated poverty, compared to the national average of 11%



### Special Needs

About 14% of American Indian and Alaska Native children received services under the Individuals with Disabilities Education Act (IDEA), compared to 9% of the general student population



### Juvenile Justice

For American Indian youth, 235 live in juvenile justice facilities per 100,000 youth, whereas the same rate for white youth is significantly less, at 83 youth per 100,000.

## American Indian and Alaska Native Parents Are More Impacted By Several Factors Causing Grandfamilies to Form



### Parental Mental Health Issues

American Indians and Alaska Natives had the highest rate of serious psychological distress (30%), and the highest rate of a major depressive episode (12%) among adults in the U.S.



### Parental Substance Use

18% of American Indian and Alaska Native adults needed treatment for an alcohol or illicit drug use problem compared to the national average of 10%



### Parental Unemployment

49% of American Indian and Alaska Native children are in homes where no parent has full-time, year-round employment compared to 25% of children in white homes



### COVID-19

Native Americans are disproportionately impacted by the pandemic. As of early May 2020, the mortality and infection rates in the Navajo Nation are higher than the vast majority of states

**Centers for Medicare & Medicaid Services:** Health insurance coverage is available to eligible children being raised by grandparents and other relatives.

For additional information, visit: <https://www.insurekidsnow.gov/>

**Indian Health Service (IHS):** The Indian Health Service (IHS), an agency within the U.S. Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives. The IHS is the principal federal health care provider and health advocate for Native people. Actual services may be provided or funded by IHS through contracts or compacts with tribes or Native American organizations.

For more information about IHS, visit: <https://www.ihs.gov/aboutihs/overview/>

For information on finding health care, visit: <https://www.ihs.gov/findhealthcare/>

**National Indian Health Board (NIHB):** Because of the variety of ways that health services may be funded and because the federal government underfunds health care for AI/AN, the National Indian Health Board (NIHB) exists to provide information and advocacy on behalf of all tribal governments and AI/AN people in their efforts to provide quality health care. According to NIHB, throughout the United States, the IHS directly operates hospitals, health centers, school health centers, and health stations, and operates additional health care centers (including over a 150 Alaska Native village clinics) through contracts and compacts under the Indian Self-Determination and Education Assistance Act (P.L. 93.638).<sup>65</sup> Moreover, The IHS or tribes/tribal organizations also operate regional youth substance use treatment centers and the IHS provides funding for Indian health centers located in over 30 urban areas.

For more information visit: <https://www.nihb.org/>

### **Nutrition Supports**

- **The National School Breakfast and Lunch Programs** provide free or low-cost meals to eligible students. The child's school teacher or principal should have an application.

- **The Summer Food Service Program (SFSP)** provides low-income children with nutritious meals when school is not in session. Free meals are provided to all children 18 years old and under at approved SFSP sites. visit [www.whyhunger.org/findfood](http://www.whyhunger.org/findfood) to locate sites using an online map.
- **The Supplemental Nutrition Assistance Program (SNAP)** formerly known as “Food Stamps” provides vital nutrition support. To find local offices, the state hotline, and each state's application, visit [www.fns.usda.gov/snap/applicant\\_recipients/apply.htm](http://www.fns.usda.gov/snap/applicant_recipients/apply.htm)
- The **Special Supplemental Nutrition Program for Women, Infants and Children (WIC)** is a public health nutrition program providing nutrition education, nutritious foods, breastfeeding support, and healthcare referrals for income-eligible women who are pregnant or post-partum, infants, and children up to age five. Relative care providers can contact their own tribe or state office regarding eligibility. Information is available at the following two websites: [www.fns.usda.gov/wic/wic-eligibility-requirements](http://www.fns.usda.gov/wic/wic-eligibility-requirements) and [www.nwica.org/wic-basics#row-states](http://www.nwica.org/wic-basics#row-states)

### **Mental Health and Substance Use Treatment and Prevention**

- **Tribal behavioral health programs** - mental health and substance use treatment may be in separate tribal departments or be combined in a “behavioral health” program. Such programs are usually administered under the broader health department. See the section on accessing health services above.
- **Native Connections (Tribal Behavioral Health Grant Program)** is intended to reduce the impact of mental and substance use disorders, foster culturally responsive models that reduce and respond to the impact of trauma in AI/AN communities and allow AI/AN communities to facilitate collaboration among agencies to support youth as they transition into adulthood. It is expected that recipients will develop and implement an array of integrated services and supports to prevent suicide. Youth engagement is required. Grandfamilies can become involved

in these programs as participants but also as volunteers. <https://www.samhsa.gov/native-connections>

- **System of Care (SOC) Grants** – the purpose of this program is to improve the mental health outcomes for children and youth, birth through age 21, with serious emotional disturbance (SED), and their families. This program supports the implementation, expansion, and integration of the SOC approach by creating sustainable infrastructure and services that are required as part of the Comprehensive Community Mental Health Services for Children and their Families Program (also known as the Children’s Mental Health Initiative or CMHI). While few tribes have these grants, those that do can offer good resources to grandfamilies. <https://www.samhsa.gov/about-us/who-we-are/offices-center/cmhs>

**The Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV):** The Affordable Care Act authorized grants to Indian tribes (or a consortium of Indian tribes), tribal organizations, or urban Indian organizations to conduct an early childhood home visiting program. The Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program strengthens tribal capacity to support and promote the health and well-being of American Indian and Alaska Native (AI/AN) families, expands the evidence base around home visiting in tribal communities, and supports cooperation and linkages between programs that serve Native children and their families. There is a total of 23 Tribal MIECHV Program awardees. Home visitors support care providers with information about child development, parenting, attachment, and other health and wellness services.

For more information visit: <https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview>

**U.S. Department of Health and Human Services, Office of Minority Health:** The U.S. Department of Health and Human Services, Office of Minority Health improves the health of racial and ethnic minority populations through the development of health policies and programs.

For more information, visit: <https://minorityhealth.hhs.gov/>

## V. Housing

**Bureau of Indian Affairs (BIA) Housing Improvement Program:** Some tribal governments may operate the BIA Housing Improvement Program, which is offered through the U.S. Department of the Interior. This program provides funding for home improvement and renovation to address safety concerns and bring housing up to code for AI/AN people in tribal communities. The program also provides housing grants for replacement or new housing when other resources are not available (resource of last resort).

BIA Housing Improvement Program: <https://www.bia.gov/bia/ois/dhs/housing-improvement-program>

**Generations United:** Grandfamilies have many housing needs and challenges. Responses include almost twenty specially designed housing programs for grandfamilies with services on site, including one developed by the Confederated Tribes of Grand Ronde. Generations United has been working for twenty years on grandfamilies’ housing needs and they focused their 2019 State of Grandfamilies Report on these issues.

For information about grandfamilies’ housing needs and responses, including tribal housing issues and responses, visit: [www.gu.org/resources/a-place-to-call-home-building-affordable-housing-for-grandfamilies/](http://www.gu.org/resources/a-place-to-call-home-building-affordable-housing-for-grandfamilies/) and <https://www.grandfamilies.org/Topics/Housing>

**The Confederated Tribes of Grand Ronde** has three grandfamily units within their Ilip Tilixam Elder Housing complex. Each unit was built specifically for tribal elders who are raising their grandchildren, after recognizing this need in the Native community. Since they were built in 2012, the units have been very beneficial to the families in need of this type of assistance and continue to serve grandfamilies today.

The HUD funded housing units each have three bedrooms and two bathrooms with the capacity to house six to seven people. An outdoor play structure can be seen from inside of all the units, allowing grandparents to keep an eye on their grandchildren. Income-based rental rates mean that a low income grandfamily can pay zero to 20 percent of their income on rent. The tribe continues to make sure that their members know about this resource that is available to them. <sup>66 67</sup>

**U.S. Department of Housing and Urban Development (HUD):** Grandfamilies may suddenly find that they do not have enough room in their homes to house everyone. Fortunately, some programs can help. Unfortunately, there may be waiting lists. Several types of help may be of interest.

- **Tribal Housing and Urban Development (HUD)** housing is owned by tribal housing authorities. The funding comes from HUD. Local housing authorities set policies and submit plans for programs and services. Since each is different, it is necessary to contact the local housing authority for assistance. HUD maintains a directory on its website. [https://www.hud.gov/program\\_offices/public\\_indian\\_housing/ih/codetalk/onap/map/nationalmap](https://www.hud.gov/program_offices/public_indian_housing/ih/codetalk/onap/map/nationalmap)
- **Homeowner Programs** – Indian Home Loan Guarantee Program (Section 184<sup>68</sup>) gives Native Americans access to sources of private mortgage financing by providing loan guarantees to lenders. Section 184 covers one-to-four family homes located in an Indian or Alaska Native area where the land may be tribal trust, allotted individual trust or fee simple. Of high importance to grandfamilies, 184 loans can be used, both on and off native lands, for new construction, rehabilitation, purchase of an existing home, or refinance. [https://www.hud.gov/program\\_offices/public\\_indian\\_housing/ih/homeownership/184](https://www.hud.gov/program_offices/public_indian_housing/ih/homeownership/184)

- **Homebuyer Services** – Native Americans can obtain information and access homebuyer education and counseling programs that are critical components for homeownership. [https://www.hud.gov/program\\_offices/housing/sfh.hcc](https://www.hud.gov/program_offices/housing/sfh.hcc)

## VI. Legal and Crime Victim Assistance

**Family Violence Prevention Services:** Over 100 tribes operate family violence prevention services often supporting these services with Family Violence Prevention Services Act grants. Services provided can include helping victims of domestic violence find safe shelter, community outreach and education, crisis counseling, victim advocacy, legal aid, transportation and support groups. Tribes with these funds often collaborate with state programs to help American Indian and Alaska Native victims both in and outside of tribal communities.

Family Violence Prevention Services Act Tribal Grants: [www.acf.hhs.gov/fysb/programs/family-violence-prevention-services/programs/tribes](http://www.acf.hhs.gov/fysb/programs/family-violence-prevention-services/programs/tribes) [www.acf.hhs.gov/sites/default/files/fysb/fvpsa\\_tribaldvservices\\_071818\\_508.pdf](http://www.acf.hhs.gov/sites/default/files/fysb/fvpsa_tribaldvservices_071818_508.pdf)

**Indian Law Clinics:** Some law schools operate Indian Law Clinics designed to give law students legal experience regarding Native American law issues. Some examples include: [UCLA American](#)

[Indian Studies Center](#), [Southwest Indian Law Clinic](#), [Northern Plains Indian Law Center](#), and the [Great Lakes Indigenous Law Center](#).

**Justia:** General legal questions can be posted free on this website for attorneys to answer. Visit the Justia site to post a question. This site is not specific to Indian law so they may not be able to help in some cases.

For more information, visit: <https://www.justia.com>

**Legal Aid:** Native Americans may be able to receive free legal advice by contacting the Legal Aid organization in their state. Several regions also have Native specific legal aid offices.

For more information, visit: <https://www.lsc.gov/what-legal-aid/find-legal-aid>

**Native American Disability Law Center:** This organization provides free legal guidance and provides people with information regarding their disability rights. Some issues addressed include special education rights and child abuse and neglect.

For more information, visit: [www.nativedisabilitylaw.org/](http://www.nativedisabilitylaw.org/)

**State Bar Association:** Every state in the country has a State Bar, which is an organization that can provide information about attorneys and legal resources in the state. Some attorneys provide free services (called Pro bono services) for nonprofit organizations or people who cannot afford typical legal fees.

The American Bar Association website lists state bar associations: [https://www.americanbar.org/groups/legal\\_services/flh-home/flh-bar-directories-and-lawyer-finders/](https://www.americanbar.org/groups/legal_services/flh-home/flh-bar-directories-and-lawyer-finders/)

Much of the information in this legal assistance section is summarized and adapted from: <https://grantsfornativeamericans.org/free-legal-assistance-for-native-americans/>

**Victim Assistance Program (VAP) - BIA:** While not a legal service, victim assistance can be an important

resource for American Indian and Alaska Native crime victims who have been abused or neglected, who witness violence, or who experience illicit drug activities in their homes. Relative care providers may be able to receive help for children in their care.

The BIA Victim Assistance Program offers direct services to victims including crisis intervention, referrals, information for mental and emotional health and other types of specialized responses, emergency services, transportation, and follow up for additional assistance.

Information is available at: <https://www.bia.gov/bia/ojs/victim-assistance>

## VII. Other Supportive Services

**The Brookdale Foundation Group, Relatives As Parents Program (RAPP):** The Brookdale Foundation Group has had a national network of support groups and services for Relatives As Parents (RAPP) since the 1990s. Its robust network offers extensive technical assistance to nonprofit organizations interested in providing supportive services for grandfamilies.

For more information, visit: [www.brookdalefoundation.net/RAPP/rapp.html](http://www.brookdalefoundation.net/RAPP/rapp.html)

**Cooperative Extension Services in Indian Country:** Currently, 44 tribes and/or tribal colleges operate cooperative extension services. In addition, several states have developed partnerships with tribes. Cooperative Extension is funded through the U.S. Department of Agriculture under a 1914 law supporting agricultural and rural living. While most people associate Cooperative Extension with 4-H, it also supports childcare, budgeting, nutrition, gardening, food storage, and youth and family support. Family strengths are encouraged, and positive youth development is a priority. Even where specific tribal programs are not in place, American Indian and Alaska Native families can benefit from Extension resources.

For more information, contact Indian Country Extension: <https://indiancountryextension.org/>

**Native Americans and Aging Services:** The Administration for Community Living (ACL) within the U.S. Department of Health and Human Services funds programs that support American Indians and Alaska Natives in the areas of nutrition, supportive services for older adults, and caregiver services. The nutrition and supportive services grants include congregate and home-delivered meals, information and referral, transportation, personal care, chores, health promotion, disease prevention, and other supportive services.

In 2000, the program expanded to include caregiver support services. Eligible tribal organizations receive grants in support of the delivery of home and community-based supportive services for their elders, including support for family and informal caregivers. The caregiver services grants include assisting families in caring for older relatives with chronic illness or disability and grandparents and other relatives age 55+ raising children.

Services can include:

- information to caregivers about available services;
- assistance to caregivers in gaining access to the services;
- individual counseling, organization of support groups, and caregiver training to assist the caregivers in the areas of health, nutrition, and financial literacy and in making decisions and solving problems relating to their caregiving roles;
- respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
- supplemental services, on a limited basis, to complement the care provided by caregivers.

These categories are written in law to be flexible and respond to the needs of the caregivers in the area being served. The fifth category, supplemental services, is particularly broad and has been used for legal assistance and direct payments.

According to the ACL, tribal organizations often coordinate with other programs when providing

these services, including the Volunteers In Service To America (VISTA) program.<sup>69</sup>

State aging departments receive similar funds, through the National Family Caregiver Support Program, to provide these same categories of services through their Area Agencies on Aging (AAAs) or nonprofit organizations with whom they contract. AAAs are not required to serve the grandfamilies population and may instead focus on other family caregivers, but many do provide an array of supportive services to grandfamilies.

For more information visit: Administration for Community Living <https://acl.gov/programs/services-native-americans-oaa-title-vi> and <https://acl.gov/programs/support-caregivers/national-family-caregiver-support-program>

National Resource Center for Native American Aging has a curriculum of care providers and an interactive map to locate services: <https://www.nrcnaa.org/about>

**Respite:** Whether it is Lifespan Respite or another program, the National Respite Locator Service can help you find services in your area. Many of these respite programs are aimed at providing respite to caregivers of older individuals, but many also serve grandfamilies.

To find a local program, visit <https://archrespite.org/respitelocator>

**Spiritual Supports:** Across Indian Country, fundamental supports in communities are the spiritual resources. These resources may be found in churches or traditional, ceremonial activities or both. Faith communities of all types exist in tribal communities and provide opportunities for social support, emergency assistance, coping with grief and loss, and access to healing practices.

**Urban Indian Organizations: Cultural and Community Center:** Urban Indian organizations that serve youth and families are a vital resource for grandfamilies in urban areas. These organizations provide cultural supports, but many go far beyond

cultural activities and provide a broad array of services. The National Urban Indian Family Coalition (NUIFC) is a membership organization that maintains a list of its 40 members on its website. One of the primary intentions of the NUIFC is to ensure access to traditionally excluded organizations and families and to focus attention on the needs of urban Indians.

For more information visit: <https://www.nuifu.org/members>

### **Additional Website Resources**

[www.grandfamilies.org](http://www.grandfamilies.org) - A comprehensive one-stop national website for publications, materials, and laws impacting grandfamilies both inside and outside the foster care system.

[www.grandfactsheets.org](http://www.grandfactsheets.org) - Fact sheets for each state and the District of Columbia containing specific state information related to grandfamilies, including a comprehensive list of resources and services, including kinship navigator programs.

[www.gu.org](http://www.gu.org) - Generations United's website containing resources and publications on grandfamilies, including Generations United's annual State of Grandfamilies reports.

### **Conclusion**

Service systems for Native Americans are complex, uneven, and somewhat different everywhere you go. It is very hard to give reliable information in such a complicated area. This is one reason that kinship navigators can be very helpful to American Indian and Alaska Native grandfamilies. Local knowledge is invaluable and sometimes that knowledge has to be combined with advocacy in order to access available services. This chapter will hopefully help grandfamilies, and the people who serve them, access support.



## Chapter 7

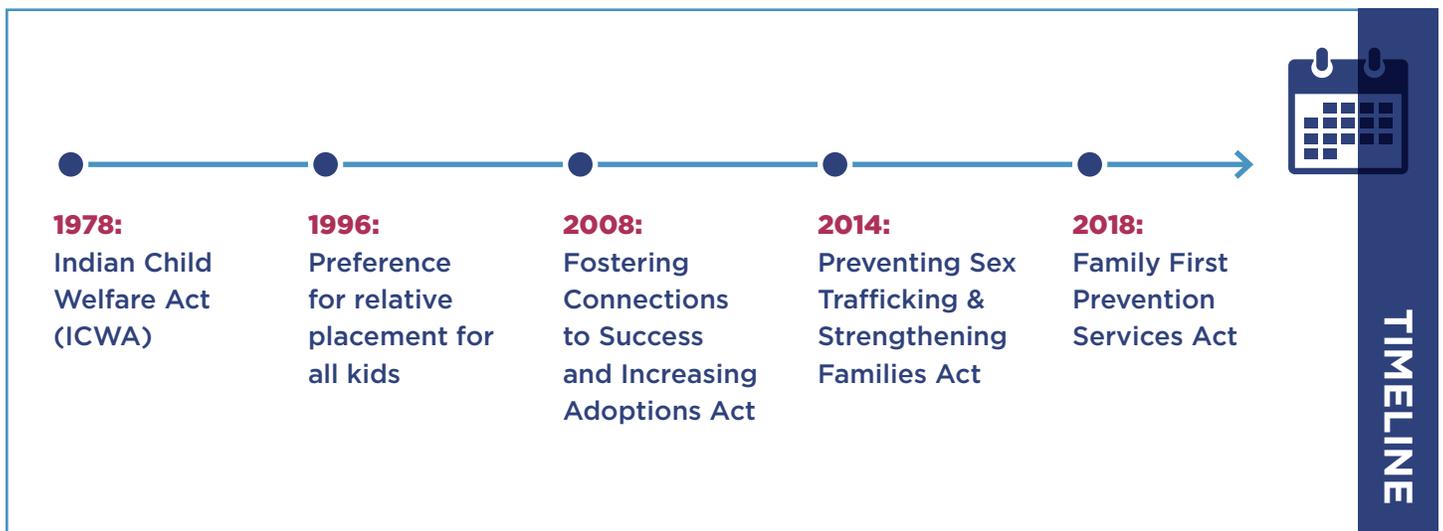
# Federal Child Welfare Policies to Prioritize and Support Family and Tribal Connections for American Indian and Alaska Native Children

### Introduction

The integrity of American Indian and Alaska Native families is directly related to their ability to practice their cultural ways of protecting children and supporting families and their ability to access necessary services and supports. This includes the ability to utilize extended family networks to help support and heal American Indian and Alaska Native children who have experienced trauma such as child abuse or neglect. The history of federal policies toward American Indian and Alaska Native people has challenged tribal communities' ability to use cultural practices that support children and families. Federal policies have relocated American Indian and Alaska Native people from their traditional lands and resources, forced assimilation that banned the use of tribal language, religion, and cultural practices, and disrupted tribal governance structures that diminished the ability of tribes to self-determine and govern their affairs.<sup>70</sup>

The impacts on American Indian and Alaska Native families from these federal policies include:

- (1) historical trauma that has occurred over several generations and the residual effects for current generations,
- (2) gaps in access to tribal cultural knowledge and practices that help American Indian and Alaska Native people develop positive self-images and learn to parent,
- (3) forced dependency on federal and state services and programs that lack cultural knowledge and skills to effectively serve American Indian and Alaska Native people, and
- (4) inequitable distribution of federal resources that hampers tribal governments' efforts to establish effective services and programs for their communities.



While efforts to colonize American Indian and Alaska Native people have been pervasive through the last two hundred years, American Indian and Alaska Native people have continued to demonstrate their resilience in the face of these challenges and pursue policies, both in and outside of tribal communities, that address the wrongs of the past and decolonize their tribal governmental, community, and social structures.

Recent federal child welfare law makes a number of inroads in addressing these past wrongs to help ensure that American Indian and Alaska Native children remain with their tribe, community, and family.

### **The Indian Child Welfare Act**

The Indian Child Welfare Act (ICWA) was enacted into law in 1978 in response to the troubling practices of public and private child welfare agencies. At the time of enactment, unnecessary removal of large numbers of American Indian and Alaska Native children from their homes was commonplace. This frequently resulted in the placement of these children in non-family, non-Indian homes far from their tribal communities.

A study by the Association on American Indian Affairs conducted prior to the passage of ICWA sampled the states with the largest American Indian and Alaska Native populations. The study found that in the 1970s, 25-35 percent of American Indian and Alaska Native children nationwide were removed from their homes by the child welfare system.<sup>71</sup> The same study found that 85 percent of these foster care placements were in non-Indian foster homes, and 90 percent of adoptions were to non-Indian parents.<sup>72</sup> The disparity between the removal rates of American Indian and Alaska Native children and non-Indian children in several states was even more striking than the national average. For example, in South Dakota, the number of American Indian and Alaska Native children in foster care was 16 times the number for other children.<sup>73</sup> In Washington, the number of American Indian and Alaska Native children who were adopted out was 19 times that of other children.<sup>74</sup> The decision to

remove children from their families was often not based on perceived threat or harm to the child but lack of understanding or bias by state child welfare systems, private adoption systems, and courts of American Indian and Alaska Native child-rearing practices and culture.<sup>75,76</sup>

The consequences of this high rate of removal and the bias toward American Indian and Alaska Native families were also cause for concern. Psychologists and other professionals testified before Congress that American Indian and Alaska Native children brought up in non-Indian homes suffered from a variety of adjustment and emotional disorders due to the removal and isolation from their families and culture.<sup>77</sup>

After years of congressional hearings and a substantial record documenting these practices, Congress intervened and passed the Indian Child Welfare Act. ICWA created procedures that must be followed by public and private agencies. The law was designed to ensure additional protections for tribal children and families and to curb bias. It does this by replacing state practices that place American Indian and Alaska Native children outside their communities with “minimum federal standards” that strive to keep American Indian and Alaska Native children in their homes, families, and communities.<sup>78</sup> ICWA applies to American Indian and Alaska Native children and families who are in state child custody proceedings. It does not apply to tribal child custody proceedings where tribal law applies. ICWA strives to right the wrongs of the past and ensures that American Indian and Alaska Native children and families are treated fairly and equitably within state child welfare systems with consideration for their political and cultural differences. Some of ICWA's requirements:

- Require notice to the child's tribe and parents/Indian custodian regarding state foster care and termination of parental rights proceedings<sup>79</sup>
- Allow the child's tribe to intervene in state child custody proceedings involving a child who is a member of or eligible for membership in a federally-recognized tribe<sup>80</sup>
- Allow the child's tribe or parent(s)/Indian

custodian to petition a state court to transfer child custody proceedings to tribal court<sup>81</sup>

- Require active efforts to prevent the removal of American Indian and Alaska Native children from their families and provide rehabilitative services to families so children may be safely returned home after their removal<sup>82</sup>
- Provide preferences and criteria for the placement of an American Indian and Alaska Native child in foster care, adoptive or institutional care<sup>83</sup>
- Encourage agreements between states and tribes regarding the provision of child welfare services to American Indian and Alaska Native children and families and support state use of tribally licensed or approved foster care and adoptive homes by state child welfare agencies<sup>84</sup>

It is important to note that ICWA does not apply to all children who racially identify as American Indian and Alaska Native. ICWA applies only to those children who are members of, or whose parents are members and are themselves eligible for membership in, a federally recognized tribe.<sup>85</sup> This is because “[t]he Supreme Court has recognized that Congress can treat [American Indian and Alaska Native people] differently from other racially distinct groups and not run afoul of traditional equal protection notions because of the unique relationship between tribes and the government.”<sup>86</sup> American Indian and Alaska Native

tribal governments are acknowledged as distinct political entities in the US Constitution, as well as hundreds of treaties, federal laws, and court cases. American Indian and Alaska Native children who are members of a federally recognized nation are therefore protected under ICWA, and other similar laws, due to their political status, not their racial identification.<sup>87</sup>

ICWA’s protections for American Indian and Alaska Native children and families are recognized as best practice in child welfare for all children by 31 leading child welfare practice setting and advocacy organizations.<sup>88</sup> ICWA provisions support engagement with extended family members, emphasize placing children in their community whenever possible, nurture cultural connections, and provide a framework of structured decision-making. These provisions are all in alignment with principles of trauma-informed care and best social work practice. Following ICWA’s enactment in 1978, federal child welfare law and administrative policy have become increasingly more aligned with ICWA’s policy framework providing further evidence that ICWA is a model statute in child welfare.

In 2016, the Bureau of Indian Affairs published the first comprehensive regulations for state courts and revised guidelines for state courts and agencies on the implementation of ICWA.<sup>89,90</sup> These new regulations and revised guidelines for ICWA were the first since the initial guidelines were published

**It took weeks on end to get to court. When we did finally go to court, everyone there had an attorney except for me. They said that I would need to retain an attorney privately, and that was going to take so much money having to deal with the commonwealth and just the idea of finding a legal representative who knew about ICWA was overwhelming. I just couldn’t find anybody. I felt like I had such little communication during this time. The judge didn’t know anything about ICWA. The only attorney appointed in the courtroom didn’t know anything about ICWA. That put us in a situation where we had to come back for another session so people could know what was going on.**

**Sonya Begay, GRAND Voice and citizen of Navajo Nation**

in 1979.<sup>91</sup> While the new information provided much needed assistance to state agencies and courts, long time challenges to implementing ICWA have continued in many areas. Many state and private agency social workers, court judges, attorneys representing children and parents, Guardians Ad Litem and Court Appointed Special Advocates are not fully trained or knowledgeable in how ICWA works. In addition, state and private agency social workers are often not equipped to develop collaborative relationships with tribal agencies, which are necessary to implement ICWA's requirements effectively or address critical case management and service delivery issues within the unique political and cultural context of American Indian and Alaska Native children and families. Tribal social workers, attorneys, and family members often must help educate and guide state and private agency social workers and court personnel on how to implement ICWA correctly and on culturally appropriate methods for engaging American Indian and Alaska Native children, families, and tribes.

American Indian and Alaska Native grandfamily caregivers like Ms. Begay may find themselves in situations where state, private agencies, or courts are not familiar with ICWA's requirements or how to work effectively with the child's tribe. Many grandfamilies may not feel prepared for this additional work and may need assistance. However, resources for family members and other care givers are available. The child's tribe and the National Indian Child Welfare Association ([www.nicwa.org](http://www.nicwa.org)) may be resources to provide assistance to help grandfamilies advocate for themselves and the children they are caring for. In many cases, the child's tribe may also have programs or services that can aid grandfamilies and may be able to help them secure the support they need to continue caring for relative children in state systems as well.

The next sections discuss other federal child welfare laws that contain protections and support for Native grandfamilies besides those contained within ICWA. The provisions in these laws complement ICWA protections and can improve supports for Native grandfamilies.

## **Fostering Connections to Success and Increasing Adoptions Act**

In October 2008, The Fostering Connections to Success and Increasing Adoptions Act of 2008 (Fostering Connections Act) unanimously became federal law. It acknowledges the important role grandparents and other relatives play in the lives of children. Among the many ways it “fosters connections” to family, it requires that child welfare agencies identify and notify all adult relatives when a child is removed from their parents, and further requires that those agencies work to place siblings together.

The Fostering Connections Act also contains specific benefits for Native children and their grandfamilies. The Act authorizes tribal nations to become eligible to receive Title IV-E Foster Care and Adoption Assistance program funding directly from the federal government (now called the Title IV-E Foster Care, Prevention and Permanency program). This allows tribal nations to apply for and receive reimbursement for eligible services they provide such as foster care and adoption assistance payments, related case management, and training of care providers and child welfare staff. For the first time, all states, tribes and territories have the option to use funds through Title IV-E to finance guardianship assistance programs (GAP) that enable children in the care of grandparents and other relatives to exit foster care into permanent homes. Over 40 states and 14 tribes or tribal consortia have taken this option, as of spring 2020. This gives a permanency option to children for whom reunification with the parents or adoption is not appropriate. GAP is an option that responds to cultural considerations and changes in family dynamics that may not be appropriate or desirable for some kinship families.

The Fostering Connections Act also extends eligibility to tribal nations to receive John H. Chafee Foster Care Independence Program (Chafee) funds directly or through an agreement with a state. Chafee funds support youth aging out of the foster care system and transitioning into adulthood. These funds help older youth who are leaving the

foster care system and do not have a permanent placement. The program supports assistance with education, housing, employment, financial management, and mental health. Chafee has been a program that benefits historically underserved Native youth who had been in foster care, especially those living in tribal areas.

The law also established additional technical assistance for tribal nations to enhance their child welfare programs.

For Native grandfamilies, the Fostering Connections Act provides new supports and resources to help them care for relative children. Some Native grandfamilies may find their tribe has Chafee funding for youth aging out of the foster care system and transitioning into adulthood, or Title IV-E funding to help provide foster care or relative guardianship services. In other cases, the new requirements for state child welfare systems under the Fostering Connections Act will provide additional support for ICWA's protections for Native children and families, such as notifying adult relatives when their relative children have been removed from their parents. Providing more emphasis and resources on the needs of grandfamilies is a good fit for tribal families and communities that highly value extended families as critical sources for the care and healing of Native children.

### **Preventing Sex Trafficking and Strengthening Families Act**

This 2014 Act makes a number of reforms to child welfare law, including calling for the implementation of a "reasonable and prudent parent" standard that allows caregivers to make daily decisions for children in their care, so children in foster care can have typical growing-up experiences. Thoughtful and culturally appropriate implementation of this standard helps children remain better connected to their communities by allowing them to take part in cultural activities, sleepovers, and the like without getting the approval of the child welfare agency.

This law also builds on the Fostering Connections Act, by containing an important provision allowing "successor guardians" to be named in the GAP agreement. If named, the successor is able to step into the guardian's shoes upon their death and continue to receive the monthly assistance for the care of the child. Unlike the original guardian, the successor does not have to be related to the child or be a licensed foster parent. Until this reform, a child who was receiving Title IV-E guardianship assistance would lose eligibility and revert to the foster care system when their guardian passed away or was otherwise unable to care for them.

### **Family First Prevention Services Act**

The Family First Prevention Services Act (Family First) became federal law in February 2018. Family First is a landmark child welfare law that aligns with the principle that children do best in families. For the first time, Family First allows federal child welfare funding to be used to prevent children from entering foster care by providing evidence-based services and programs to parents, children and kinship caregivers. The law also provides for ongoing federal reimbursement for evidence-based kinship navigator programs that link caregivers and children to services and support.

The Family First Act has potential benefits for Native children, parents, and caregivers who are either in tribal or state child welfare systems. For Native children in tribal child welfare systems, the availability of prevention services under the law will depend upon whether the tribe is approved to operate the Title IV-E Foster Care, Prevention, and Permanency Program. If the child's tribe is approved to operate the Title IV-E program directly from the federal government, they will have additional funding and latitude to provide culturally-based services to eligible children, parents, and caregivers. The federal guidance allows tribes that operate the Title IV-E program directly to define what trauma-informed services are for their community and the appropriate culturally-based prevention services that reflect the unique needs and context of the community. This provides tribes in this category

additional flexibility to define what services will best serve the community and they will not be subject to more restrictive evidence-based requirements for prevention services that apply to states.

For Native children, parents, and caregivers that are either in a tribal child welfare system where the tribe is not operating a Title IV-E program directly or are in a state child welfare system, the more restrictive evidence-based requirements for what prevention services can be funded will apply. Prevention services can still be available to Native children, parents, and caregivers in these situations, but the list of approved prevention services will likely be narrower and less likely to be designed specifically for Native populations. Tribes and states can still use other federal, state, or tribal funds to support prevention services, such as culturally-based services, that are not approved under Title IV-E.

Parents and grandfamilies should not be denied prevention services simply because the appropriate services they need are not currently eligible under the Title IV-E program. Furthermore, grandfamilies should not feel they have to accept services that are not culturally appropriate, especially if they have concerns that the prevention services being offered will either be ineffective or possibly harmful. ICWA requirements may be helpful in this situation. ICWA requires that state agencies must make active efforts to provide services that can prevent the removal of Native children from their homes and help reunify them with their parents or relative caregivers after removal. Prevention services are often used to meet ICWA's active efforts requirements. As discussed in the federal regulations for the Indian Child Welfare Act (25 CFR § 23.2) active efforts should include the following:

- Identifying, notifying, and inviting representatives of the Indian child's tribe to participate in providing support and services to the Indian child's family and in family team

meetings, permanency planning, and resolution of placement issues;

- Offering and employing all available and culturally appropriate family preservation strategies and facilitating the use of remedial and rehabilitative services provided by the child's tribe;
- Identifying community resources including housing, financial, transportation, mental health, substance use, and peer support services and actively assisting the Indian child's parents or, when appropriate, the child's family, in utilizing and accessing those resources; and
- Considering alternative ways to address the needs of the Indian child's parents and, where appropriate, the family, if the optimum services do not exist or are not available.

These criteria for what constitute active efforts can assist Native grandfamilies as they advocate for prevention services to help support relative children in their care and for efforts to strengthen birth parents of Native children, so children may be safely returned to parents' homes when appropriate.

In addition to prevention services, the Family First Act provides for ongoing federal reimbursement for all evidence-based kinship navigator programs. Kinship navigator programs are critical to linking caregivers to services and supports that they and the children they raise need. While no program, as of spring 2020, has yet been found by the federal government to meet these evidence-based standards, three separate pots of federal money have been appropriated to help states and tribes develop, enhance or evaluate a kinship navigator program and work towards the ongoing federal reimbursement. Currently, ten tribes have received grants to operate kinship navigator programs in their communities and several of the states that received grants coordinate their activities with tribes in their area.<sup>92</sup>



## RESOURCES ON THE INDIAN CHILD WELFARE ACT

- **ICWA Online Training** - NICWA provides an online training course that provides basic information on the requirements of ICWA and tips on how to implement the requirements in practice. The ICWA Online Training is designed for social workers, attorneys, family members, and students. The training uses non-legal language to make the training more accessible and is designed so the participant can go at their own pace. Simulated case examples are used to help guide the participants learning and provide more real-life examples of how ICWA may be applied. You can find more information about the training at <https://www.nicwa.org/online-icwa-course/>.
- NICWA also offers other types of training, such as *Cross Cultural Skills in Indian Child Welfare* and *Positive Indian Parenting*. You can find a description of many of these trainings at <https://www.nicwa.org/training-institutes/> and how to request or participate in a training.
- **NICWA Publications** - NICWA's website at [www.nicwa.org](http://www.nicwa.org) contains publications geared toward child welfare and family members. Examples of publications are (1) *How to Find Free and Low Cost Legal Services*, (2) *The Indian Child Welfare Act: A Family's Guide*, (3) *Frequently Asked Questions*, (4) *List of Designated Tribal ICWA Agents* (contacts for tribal child welfare programs), (5) *A Family's Guide to the Child Welfare System*, and (6) *Tracing Native Ancestry: A Guide to Responding to Inquiries*. NICWA publications also include policy and practice issues in child welfare.

## RESOURCES ON THE FOSTERING CONNECTIONS ACT

- *Detailed Summary of the Fostering Connections to Success and Increasing Adoption Act AND Short Summary of the Fostering Connections to Success and Increasing Adoption Act*, in addition to other resources. [www.grandfamilies.org/Resources/Federal-Laws/Fostering-Connections](http://www.grandfamilies.org/Resources/Federal-Laws/Fostering-Connections)

## RESOURCES ON THE STRENGTHENING FAMILIES ACT

- *Implementing the Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183) to Benefit Children and Youth*, in addition to other resources. [www.grandfamilies.org/Resources/Federal-Laws/Strengthening-Families](http://www.grandfamilies.org/Resources/Federal-Laws/Strengthening-Families)

## RESOURCES ON THE FAMILY FIRST ACT

- **The Family First Messaging Toolkit** - This toolkit by the Annie E. Casey Foundation is designed to help child welfare leaders and advocates talk about how the Family First Act can improve outcomes for children and families. The toolkit offers talking points on the benefits of the law and tips for media interviews. <https://familyfirstact.org/resources/communication-toolkit>



- **Implementing the Family First Prevention Services Act: Technical Guide** - Created by the Children’s Defense Fund in partnership with the American Academy of Pediatrics, ChildFocus, FosterClub, Generations United, Juvenile Law Center, and NICWA. The guide is a question-and-answer-style resource containing commonly asked questions about the many important provisions in Family First. [www.childrensdefense.org/policy/policy-priorities/child-welfare/family-first/implementing-the-family-first-prevention-services-act/](http://www.childrensdefense.org/policy/policy-priorities/child-welfare/family-first/implementing-the-family-first-prevention-services-act/)
- **New Opportunities for Kinship Families: Action Steps to Implement the Family First Prevention Services Act in our Community and Leveraging the Family First Prevention Services Act to Improve Use of Title IV-E GAP** - Two publications addressing the Family First Act, developed by the ABA Center on Children and the Law, Children’s Defense Fund, Generations United, with support from Casey Family Programs - [www.grandfamilies.org/Publications](http://www.grandfamilies.org/Publications)
- **Model Family Foster Home Licensing Standards** - Resources concerning the licensing of relatives as foster parents, including links to the NARA and National Model Family Foster Home Licensing Standards. [www.grandfamilies.org/Resources/Foster-Care-Licensing](http://www.grandfamilies.org/Resources/Foster-Care-Licensing)
- **Title IV-E Prevention Services Clearinghouse** - contains a list of prevention services and programs, and kinship navigator programs that they have reviewed for inclusion, along with their rating of promising, supported, well-supported or currently does not meet criteria for evidence-based standards. <https://preventionservices.abtsites.com/>
- **Additional resources on Family First** available at [www.grandfamilies.org/Resources/Federal-Laws/Family-First](http://www.grandfamilies.org/Resources/Federal-Laws/Family-First)



# Chapter 8

## Advocacy

### Introduction

Advocacy means supporting a cause or issue to bring about change and help others. You are an advocate when you support a cause or speak in favor of an issue. Anyone can be an advocate. You do not have to be an expert. Your personal experience is invaluable. It may be your experience as a member of kinship family and/or your experience as a professional serving kinship families. The challenge is how to get your issues heard.

For advocacy to be effective, it is important to learn how to identify issues of concern and issues that can prevent your advocacy efforts from being successful. Change is more likely to occur if individual or community needs are expressed in a clear way to the people or organizations that make decisions.<sup>93</sup> Later, after issues of concern have been identified and communicated, you will need to engage in a process to identify potential solutions.

### The why, what, who, where, when, and how of advocacy:

In advocacy, it is important to know:

- Why your voice matters
- What you want to achieve or change
- Who you need to educate or ask for support
- Where to get helpful information and resources to make your case
- When and how to advocate

### Why does your voice matter?

- Your experiences are valuable and can be used to improve things! No one knows as much about your lived and/or professional experience.
- You know when something is or is not working. If you do not tell people who have the authority to make decisions about a situation that you

are unhappy with, they will assume everything is all right or possibly make changes that do not address your concerns or may make things worse.

- You have ideas on how to make things better! By speaking out, you may find that you are not alone.

### What do you want to achieve or change?

Advocacy is aimed at bringing change. Advocacy challenges services, systems, and the broader community to respond genuinely to meet the needs of people. Effective advocacy will inevitably empower people in their everyday lives.

Advocacy and promoting the needs of your community can:

- Open doors to participation
- Right the wrongs of the past and present
- Change the balance of power
- Address injustice
- Improve services
- Alter attitudes and values<sup>94</sup>

Question: What do I/we want to achieve/change for American Indian/Alaska Native grandfamilies?

### Whom should you educate or ask for support?

Whom to educate is determined by first discovering how aware the public in your community is about grandfamilies. Right now, there are probably a few people in your community who know the challenges that grandfamilies face. Few people know how to do something about it. Public awareness, then, is creating an environment for educating the members of your community about the needs of grandfamilies. Once people are aware of the challenges and want to address them, they can work together to make reform.

## Key audiences:

- Advocates determine who needs to become aware
- People who can bring change are leaders
- Leaders can be informal, formal, appointed, or inherited
- Specific key leaders who may need to become aware include:
  - » Media
  - » Tribal leaders, including tribal councils
  - » Federal lawmakers
  - » State and local legislators
  - » Judges/court systems
  - » Federal, state and local government agencies and their leaders - e.g., aging services, child welfare, education, health care, housing and income support
  - » Community-based organizations and leaders
  - » Faith-based organizations and leaders
  - » Universities and others in the research community
  - » Foundations and other funding sources
  - » Additional influencers- consider who are other major voices in your community. Law enforcement? The business community?

In order to communicate your message to key audiences, your first step must be to build trusted relationships with that audience. When the audience is new, how do you go about building those relationships?

## Building Relationships:

- Work your existing connections to be introduced to new audiences.
- Present yourself as a resource to that new audience.
- Be responsive and helpful. If you do not have what you need on hand, never guess or invent. Those actions will lose your credibility. It is much better to follow-up later with the correct piece of information.
- Affirm the positive and emphasize points of commonality.
- Confront and manage conflicting opinions.

- Use honey, rather than vinegar, in conveying your points.
- Manage unresponsive relationships through persistence and strategic approaches, which can include leveraging media attention.

**Media:** Probably the single most important audience for any advocacy work is the media. Public policy reform requires getting broad attention from the communities most affected and stories that stir policymakers and decisionmakers.

Media relations can be described as interactions with editors, reporters, and journalists, and it is a strategy that many organizations and people use to advance their cause.

## Making a Pitch and Responding to Reporters:

- When you make a pitch for a story, do it by email and then follow up with a phone call. Include why the story is timely and relevant. Try to make a connection to other current events - e.g., the opioid epidemic, the COVID-19 crisis.
- When a reporter calls you, interview them:
  - » Find out their purpose and deadline.
  - » Ask to take 30 minutes to gather information and call them back.
  - » Get the correct spelling of their name, phone number, and media organization they represent.
  - » Call the reporter back—honor your commitment.
  - » Try to have all information on hand.
  - » Ensure you follow-up as promised.

## Being a Resource to the Media:

- Introduce yourself to target media.
- Develop a sense of the kind of stories that interest your contacts.
- Make yourself readily available and follow-up promptly.
- Be dependable.
- Share helpful resources.
- Contact the reporter and/or submit a letter to the editor to correct stereotypes or misinformation.

## How Social Media Can Elevate your Profile for Traditional Media:

- Most reporters are now required to be on social media for work.
- You can use social media, especially platforms like Twitter and LinkedIn, to highlight the work you are doing and connect with other people.
- You can find reporters' Twitter profiles linked in many articles and retweet, like, or tweet at them.
- Often reporters and editors will have the direct messages open to everyone or their emails in their bios to easily connect with them.

Once positive media stories are in your community, advocacy for policy or programmatic reform is much easier. The key audiences will be aware and open to hearing your advocacy.

**Federal, State and Local Policymakers:** Like working with the media, many of the same principles apply to federal, state and local policymakers. These leaders and their staff are often on tight deadlines, and one of the most effective things you can do is be seen as a helpful resource to them. Be readily available and follow-up promptly. Many federal and state staff to policymakers have “go to” local program leaders, caregivers and families whom they rely on for direct, practical feedback. Become one of those experts. They need to hear from the people who live these experiences and work directly with grandfamilies. You do not need to ask policymakers for specific public policy or program changes, rather you can let them know what works and does not work in the communities they represent.

When approaching a U.S. Representative or Senator's office, remember that they each have local offices nearer to where you live or work. You do not have to directly approach the Washington, DC office if you do not want to, as staff in the local offices will share your stories, strengths and challenges with their “boss.” You can reach out to the local or DC office in the way you feel most comfortable – phone call, email or in-person. If you set up a meeting, do not feel short changed if the Member of Congress

does not meet directly with you as they rely heavily on their staff. Be prepared for your meeting with short talking points you want to address and leave them with a way to contact you, along with any written information you wish to share. Do not hesitate to reach out to the Member of Congress' “scheduler” to invite the Member to an important community event where many caregivers will be present and can share their stories. Policymakers love these stories and rely heavily on them when advocating for reform.

Your governor, large city mayor, relevant federal and state child welfare, aging, child welfare, education, health, housing and income support leaders operate in much the same way as federal policymakers. However, other state and local policymakers, including state legislators and mayors, city and county council members representing smaller cities and rural areas, often have few, if any, staff. Do not let that stop you from approaching these policymakers in a way that is comfortable to you.

Contact information for many federal, state and local leaders can be found in the resource section of this chapter.

Remember you are an expert and you have great value in the advocacy process.

**Tribal Leaders:** Similar to federal, state and local policymakers, tribal leaders are government officials. They set policies, pass laws, approve a budget, approve applications for grants and contracts, and decide what programs and services the tribe will operate. Understanding their role will help in approaching them during advocacy work.

Being an elected tribal official is one of the most demanding jobs in the country. A tribal leader has to know something about a vast array of topics from governance and natural resources to fiscal policy and human services. They have to be concerned about their citizens, the sovereignty of the tribal government and the integrity of their services. It is a big job that can be overwhelming. In order for tribal leaders to make good decisions they need good information. That is where advocates come in.

Advocates who approach tribal councils as helpful resources rather than upset constituents will usually be received positively.

Learn when the tribe's budget cycle is. When department heads are submitting their budget requests make sure that you have made your concerns clear to the department head. Let them know the needs by giving facts about the role of grandfamilies and the services that will help the tribe better serve its children. Send a letter to the department head and copy the tribal council. That way when the time comes for the council to consider the department budget request your ask will not be a surprise. If your request is in the department budget request, send a letter of thanks and copy the tribal council. If it is not, send your request to the tribal council and copy the department head. Ask for a chance to testify or to get on the tribal council agenda.

Always stay informed about resources that the tribe may be able to apply for at the state or federal level. When funding announcements are published send them to the tribal planning office, the department head, and the tribal council urging them to apply and emphasizing the application deadline. Whenever possible, offer to help. You might offer to be an advisor, to write a support letter, or to review and comment on proposal drafts. Being part of organizations like Generations United and NICWA can help you be informed about funding opportunities.

Always vote in tribal elections. Becoming an elected tribal official is a democratic process. If your community has candidate forums, go and present your case. If not, you might be able to organize one. Regardless of whether you go to a forum or just have a one-on-one conversation, ask candidates how they intend to support grandfamilies. When candidates ask for your support, ask for theirs.

Finally, do not forget to thank tribal leaders and to always be the best resource you can be for good information. When you learn something new, have a success in your family, or get attention or resources for your cause, send a letter of thanks. Better yet, get on the tribal council agenda, take five minutes to say thanks and perhaps give a token of your appreciation to members of the council. Tribal leaders hear complaints nearly every day. They are seldom thanked, given good news or clear information and data that they can rely on. Establishing and maintaining positive relationships will go a long way toward gaining support for grandfamilies.

### **Where do you get helpful information and resources to make your case?**

Knowing where to get information to share with key audiences to make advocacy points is critical. We hope this toolkit and its resources provide you with those sources of information. Remember that you are an expert either as a professional serving the families and/or as a member of a kinship family.

One of the most important resources is lived experience. If you do not have that experience yourself, you have ready access to it. Grandfamilies themselves are vitally important to making reform. Knowing specific law or putting forth detailed policy change is not as important as understanding the community's needs, strengths, and ideas of what will help. Sharing personal stories from grandfamilies will move the dial of reform.





## SHARING YOUR PERSONAL STORY

*While this chapter of the toolkit also generally applies to grandfamily-members who act as advocates, the following is exclusively tailored to grandfamily-members who share their own personal lived experiences as part of their powerful advocacy.*

Sharing your life experience and your strengths and challenges is the single most effective way to make change. Policymakers want to hear directly from you, the grandfamily members. Your stories are the ones they repeat to the media and other policymakers when trying to achieve reform. So, how do you do this effectively and safely?

When sharing your story to make public policy or program reform, you must do it strategically. “Strategic Sharing” is a concept on which Casey Family Programs has written and trained. It essentially means making strategic choices about how to tell our life stories so that our voices can be heard, our message is effective, and our well-being is protected. Although focused on those who have had involvement with the child welfare system, the principles of “strategic sharing” are equally applicable to children and families outside the system.

As a family member who is about to engage in advocacy work, you should first consider a few questions and then develop rough talking points about what you want to cover:

What is the purpose of sharing your personal story?

What do you want the audience to take away?

Which parts of your story do you not want to share? Protect yourself from what may harm you emotionally.

This last point is very important. You do not have to share everything. Prepare yourself for how to answer questions that you do not want to answer. The most difficult kind of public speaking is the kind you are about to embark on. Sharing your story takes courage, strength and preparation. Remember your objective - *“I am doing this because I want to help others like me.”*

All advocates - whether a grandfamily-caregiver, an adult raised by a grandfamily-caregiver, a youth in a grandfamily-member’s care or a birth parent - should consider that your story is also the story of other members of your family. Be mindful of how much you share about other family members and, if possible, ask their permission and feedback on what you plan to share.

For caregivers and parents speaking about children, remember that the information you may be sharing about the children you are raising could follow them. If developmentally appropriate, discuss it with them beforehand to make sure it is alright with them.



In very general terms, when sharing your story, you will want to discuss:

- The very basics of why you are raising your grandchildren or other kin children; why you were raised in relative care; and/or why you were not able to raise your own children
- How the situation impacted you and your family
- Challenges you have faced
- Services or programs that helped
- Services or programs that would have helped
- How the family is doing now

You do not need to ask for specific public policy or program changes, rather you should let your audience know what would have helped so they can develop solutions with your invaluable input. You are not expected to be a public policy expert, you are an expert in your family. That expertise is truly yours and yours alone. It is invaluable.

### **SOCIAL MEDIA, STORYTELLING, AND LIVED EXPERIENCE**



A specific way to engage tribal youth is through social media. Social media is an invaluable tool in tribal youth engagement in advocacy for grandfamilies. While there are unique considerations regarding youth privacy—not to mention trying to keep pace with new platforms—grandfamily advocates can harness the instant nature of communicating via social media to keep youth and families informed and engaged.

While not synonymous with social marketing, encouraging youth social media can help with social marketing efforts. Further, having youth develop their own video content or tweets about their stories and lived experience in grandfamilies can go far in lessening stigma associated with experience in relative placements. Ownership of storytelling also signals that youth are not merely tokens in advocacy but truly valued to signal what is needed in their own care. This emphasis on valuing lived experience is essential to connecting with Native youth.

The type of social media platforms you use and how they are used should reflect community values and be accessible to the greatest number of youth and families. Pay attention to tribal or agency policies regarding the use of social media for youth in out of home care and care providers and be willing to accommodate different types of users and platforms they use. Social media is powerful and persuasive so be careful about how you message. Do not be afraid to ask questions about the strategies being used in social media to advance your advocacy.

## When and how should you advocate?

Advocates start by asking a few important questions:

- What are the barriers (things that make it harder to communicate with others or advocate for change) and benefits (incentives) to your audience thinking, feeling, or acting on your issue?
- What changes in attitude and behavior do you want to motivate in your audience to meet your goal?
- Based on what you know about what your audience needs to hear to think, feel, or act, what are the three most compelling sentences you could use to motivate the audience? (These are your messages or talking points.)

An advocate has vision to see beyond the problem and can give this vision away to others (letting others take ownership and responsibility for pursuing change). Creating a feeling of ownership with allies will make or break a grassroots advocacy effort.

### Successful advocates must:

- Respect the community
- Respect the traditions of the tribe
- Not blame, shame or negatively criticize the community
- Be able to enlist the help of others
- Know the struggle of grandfamilies and translate that for others

### Successful advocates should:

- Know the community history and beliefs
- Create an atmosphere of mutual learning
- Have patience
- Be good listeners

- Carry the vision for a better future
- Identify mutual values
- Develop an outline of the issues you are seeking to change—create the vision
- Add key supporters like yourself
- Identify and network with community resources (programs, people, funders, etc.)
- Define the challenges of grandfamilies and how to decrease them
- Determine objectives:
  - » Plan
  - » Identify what success is and evaluate results
  - » Refocus on new goals when ready
- Count on change:
  - » Be flexible—it will take time
  - » Take care of self
  - » Know that building longevity takes perseverance
  - » Regroup as needed
  - » Praise allies who help and celebrate success
- Follow-through:
  - » Leave a legacy for others to learn from
  - » Recognize the efforts of all
  - » Know that there will be new advocates and new challenges
  - » Remember that grassroots advocacy is from the people - let the people decide how to use what was learned

## Conclusion

By considering and implementing the five advocacy steps in this chapter, and effectively and thoughtfully leveraging the powerful stories of grandfamilies themselves, you will make change. It may take time, but it will eventually happen.



**Boulder Advocacy, a program of the Alliance for Justice.** This organization provides nonprofits with the knowledge they need to become confident advocates. They offer webinars, trainings, resources and one-on-one technical assistance to nonprofit organizations. <https://bolderadvocacy.org/> or 1-866-NP-LOBBY.

**Designing Health Communication Campaigns: What Works?** Thomas E. Backer, Everett M. Rogers, Pradeep Sopory, Sage Publications, Newbury Park, CA, 1992.

#### **Examples of Child Welfare and Aging Advocacy Toolkits:**

- **North American Council on Adoptable Children. Adoption Assistance Advocacy Toolkit**  
This resource outlines a plan of action to advocate for adoption subsidies. It provides guidelines for talking to legislators in person, over the phone, and through the mail as well as holding events and building coalitions. The toolkit is divided into sections on *Responding to a Proposed Cut* and *Planning for the Future* so advocacy efforts can be short- and long-term. It includes factual talking points, as well as emotional testimonies from families that show the personal impact of receiving help. <https://www.nacac.org/wp-content/uploads/2017/04/advocacytoolkit.pdf>
- **Kentucky Youth Advocates. Family First Act Communications and Advocacy Toolkit**  
This toolkit provides an overview of the Family First Act, describes how it will affect each specific community, and provides tips for communicating its purpose and impact to others. Specific sections show how to tailor messaging to different audiences such as legislators and child welfare agencies and how to highlight Family First's connections to the opioid crisis and kinship care. It has sample social media posts and hashtags that can be customized for different stakeholders to use. <https://kyyouth.org/family-first/>
- **Foster Coalition. Be a Foster Care Social Advocate**  
While this is not a full advocacy toolkit, it is a detailed list of ready-to-use social media posts that advocates can share. Most posts include links to other resources with statistics and testimonies. <http://www.fostercoalition.com/be-a-social-advocate-for-foster-care>
- **National Council on Aging. Advocacy Toolkit: Recess 2020**  
One of NCOA's many toolkits, this resource provides guidance on effectively contacting legislators during House and Senate recesses. It includes a list of 5 ways to connect with lawmakers with links to guides on hosting site visits or attending town halls. The toolkit outlines talking points on key pieces of legislation and a sample thank you letter to send after a visit. <https://www.ncoa.org/public-policy-action/advocacy-toolkit/toolkits-by-topic/advocacy-toolkit-recess-2020/>

**Find your Governor.** The National Governors Association has contact information for each governor: [www.nga.org/governors/addresses/](http://www.nga.org/governors/addresses/)

**Find your Mayor.** The U.S. Conference on Mayors has contact information for many mayors around the country. [www.usmayors.org/mayors/](http://www.usmayors.org/mayors/)



**Find your State Legislator.** The Library of Congress has a clickable map with links to each state legislature's website. On those sites, you should be able to locate contact information for your legislator. [www.congress.gov/state-legislature-websites](http://www.congress.gov/state-legislature-websites)

**Find your U.S. Representative and U.S. Senators.** To find the U.S. Representative who represents where you live or the location of the program where you work, type your zip code into the box on this website [www.house.gov/representatives/find-your-representative](http://www.house.gov/representatives/find-your-representative). It will give you the contact information you need. The same information is available for the two Senators representing your state at [www.senate.gov/general/contact\\_information/senators\\_cfm.cfm](http://www.senate.gov/general/contact_information/senators_cfm.cfm)

**Hands-on Social Marketing: A Step-by-Step Guide** by Nedra Kline Weinreich, Sage Publications. <https://sk.sagepub.com/books/hands-on-social-marketing-2e>

**Generations United's GRAND Voices Network.** This national network of kinship caregiver advocates raises their voices in support of all grandfamilies around the country. The network is supported by Casey Family Programs and the W.K. Kellogg Foundation. The W.K. Kellogg Foundation invested funds specifically to elevate and strengthen the voices of American Indian, Alaska Native, and African American grandfamilies as part of the network. Generations United is working on this initiative in partnership with the [National Indian Child Welfare Association \(NICWA\)](#) and [A Second Chance, Inc. \(ASCI\)](#). GRAND Voices has 70 current members in 44 states, the District of Columbia and 11 tribes. To see the members, visit [www.gu.org/explore-our-topics/grandfamilies/grand-network/](http://www.gu.org/explore-our-topics/grandfamilies/grand-network/).

**Promoting Health in Multicultural Populations: A Handbook for Practitioners** by Robert M. Huff and Michael V. Kline, Sage Publications. <https://us.sagepub.com/en-us/nam/health-promotion-in-multicultural-populations/book237727>

**Strategic Sharing** guide by Casey Family programs and Foster Care Alumni of America. [http://www.hunter.cuny.edu/socwork/nrcfcpp/info\\_services/download/StrategicSharing.pdf](http://www.hunter.cuny.edu/socwork/nrcfcpp/info_services/download/StrategicSharing.pdf)



# Recommendations

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The recommendations in this section are intended as suggestions for reforms that will support American Indian and Alaska Native grandfamilies.

The recommendations fall into three categories:

- Practices that agencies and organizations can implement immediately
- Policies and practices that American Indian and Alaska Native grandfamilies and advocates who work on their behalf can encourage policymakers to implement
- Data collection recommendations for agencies and advocates

Some of these recommendations may not fit the needs of your community and tribe. Always let your own local needs, as informed by the grandfamilies themselves, guide any effective advocacy and reform work.

Generations United and its national partners will also pursue these recommendations as they aim to support a broad array of American Indian and Alaska Native grandfamilies throughout the country.

## Practice Recommendations for Child Welfare and Other Service Providers:

- **Authentically engage American Indian and Alaska Native kinship caregivers, birth parents, and young people** in the design and implementation of services that impact them. Ensure they are engaged early and prior to critical decisions being made. This includes hiring and training caregivers, birth parents, and youth to provide services and supports to peers.
- **Conduct an interagency, community-wide assessment using data as recommended below to identify racial disparities in serving all families, including grandfamilies.** As part of the assessment, consult with tribal nations and Indian nonprofit organizations to consider and address the practices and policies that could contribute to the racial disparities.
- **Create and implement an interagency, community-wide plan with the help of tribal nations and Indian nonprofit organizations to address racial disparities and their causes as identified in the assessment.**
- **Provide training and tools for staff to identify and address their own implicit and explicit racial biases.** Work with tribal nations and Indian non-profit organizations to provide this training and tools.
- **Provide comprehensive training and written information on ICWA's requirements to state and private child welfare workers, supervisors and program managers, and relevant legal stakeholders.**
- **Hire and train ICWA liaisons at the state levels to ensure ICWA cases are well- managed and coordinated, and court proceedings follow ICWA's requirements.**
- **Ensure that services are based in tribal cultural beliefs, teachings, customs, and traditions of the child and grandfamily's tribe and are aligned with trauma-informed care** for American Indian and Alaska Native grandfamilies.
- **Use proven tools that are culturally based or adapted to provide training and direction to child welfare workers so they can better serve American Indian and Alaska Native grandfamilies.** Train front-line helpers on the importance of extended familial connections and access to tribal culture as protective factors for American Indian and Alaska Native children.
- **Expand access and availability of child welfare services within American Indian and Alaska Native communities.** Community-based services should be accessible, tailored to the needs of children and families, and incorporate tribal culture.

- **Develop lists of culturally competent American Indian and Alaska Native therapists, counselors, and other service providers** so agencies and organizations can readily refer families to them.
- **Advocate that child welfare agencies be required to ask and report on whether adult relatives are members or eligible for membership in an American Indian or Alaska Native tribe as part of the process of identifying and notifying relatives** when children are removed from their parents. These questions will assist in determining early in the process if the child is an Indian child as defined under ICWA.
- **Implement fully the reasonable and prudent parent standard** established by the Preventing Sex Trafficking and Strengthening Families Act and raise cultural identity and tribal affiliation during court and case planning. Ensure that the child’s cultural and religious traditions are honored, and the child’s tribe is included in any case planning or permanency decisions.
- **Organize support groups for caregivers in American Indian and Alaska Native communities** and ensure that they are led by peers who have first-hand experience with the caregivers’ strengths and challenges.
- **Establish robust tribal kinship navigator programs** that link American Indian and Alaska Native caregivers and the children they raise whether inside or outside the foster care system with much-needed culturally appropriate services. Federal funding now exists for these kinship navigator programs, but many tribes and states are struggling to develop programs that meet the criteria for ongoing funding.
- **Provide prevention services and post-permanency supports to American Indian and Alaska Native** grandfamilies by leveraging Title IV-E federal funding available through the Family First Prevention Services Act. Both tribes and states are eligible for the funding.
- **Do not deny prevention services to American Indian and Alaska Native grandfamilies**

simply because the appropriate services they need are not currently eligible under the Title IV-E program. If the child being cared for is in a state child welfare system and ICWA applies, active efforts are required to prevent removal and/or prevent the breakup of the family. Active efforts require agencies to provide culturally appropriate services whenever possible and engage the child’s tribe in case planning. Also, **do not require American Indian and Alaska Native caregivers, birth parents, and children to accept services that are not culturally appropriate**, especially if they have concerns that the prevention services being offered will either be ineffective or possibly harmful.

- **License more relatives as foster parents** by addressing barriers in state licensing standards; providing tailored training to grandfamilies; using federal authority to grant variances and waive non-safety related licensing standards for relatives; and providing needed items such as beds or fire extinguishers.
- **Use inclusive language and images in outreach materials.** Do not limit materials to “parents” when other caregivers are included too. Use images of American Indian and Alaska Native grandfamilies in materials and reach out through trusted tribal leaders.

### **Policy and Practice Recommendations for Advocates:**

- **Hold the child welfare agency accountable to implement the practice recommendations above.** Ask if the agency has been accredited through a standard setting body and inquire how the accreditation incorporates the practice recommendations above. If the child in care is involved in a state child welfare system, ask how the agency is meeting ICWA requirements and incorporating the practice recommendations.
- **Advocate for tribal inclusion in the Social Services Block Grant.** This federal block grant provides funding for a range of services including child welfare and senior services. Tribal governments receive disproportionately lower amounts of funding for these types of

services than do states. Less funding impacts the ability of tribal grandfamilies to receive culturally appropriate services.

- **Work to ensure that the Title IV-E Prevention Services Clearinghouse includes a tribal kinship navigator model** that serves grandfamilies regardless of child welfare involvement.
- **Advocate that evaluations for prevention services, post-permanency supports, and kinship navigator programs consider American Indian and Alaska Native culture and needs.**
- **Encourage the Title IV-E Clearinghouse to take these cultural considerations into account** when reviewing services and supports and determining whether they meet evidence-based standards. While culturally based prevention programs and services are preferred, ask the state child welfare agency and federal agency with oversight of the Clearinghouse to make cultural adaptations of mainstream prevention services eligible for reimbursement.
- **Ask the federal agency with oversight of the Family First Prevention Services Act to extend the application of cultural guidance for tribes directly funded to operate Title IV-E to tribes operating Title IV-E through an agreement with a state.** This will expand the number of tribes that can access funding for prevention services for grandfamilies and others.
- **Educate the ten states that have not yet taken the federal option to offer a Guardianship Assistance Program (GAP)** about the many benefits of doing so, including its importance as a permanency path for American Indian and Alaska Native children for whom adoption and reunification with their parents are not options. Tribes that operate Title IV-E through an agreement with a state can only offer GAP if the state does. As of May 2020, the ten states without GAP are Arizona, Georgia, Kansas, Kentucky, Ohio, Mississippi, North Dakota, South Carolina, Utah, and Wyoming.
- **Advocate to improve access to tribal and state Temporary Assistance for Needy Family (TANF) child-only grants and to increase their**

**dollar amounts** so grandfamily caregivers can better meet the needs of the children they did not plan or expect to raise. Access may be improved through simplified TANF child-only application forms; more community outreach and education; and use of the good cause exemption allowing caregivers not to assign child support collection to the state.

### **Data Collection Recommendations for Agencies and Advocates:**

- **To ensure proper ICWA implementation, develop a more detailed understanding of the trends in out-of-home placement and barriers to permanency for American Indian and Alaska Native children.** Collect and compile the following information for each child:
  - » Were active efforts made to prevent removal of the child from their parents and to determine the child's tribal affiliation?
  - » What percentage of Native children exit the child welfare system to their birth parents or a relative?
  - » When was the child's tribe first contacted by the state/county?
  - » Did the child's tribe receive legal notice of all child custody proceedings? Did notices contain the required information?
  - » Was placement in foster care made in compliance with ICWA's order of placement preferences: (1) relative (Native or non-Native); (2) home licensed or specified by child's tribe; (3) an Indian foster home licensed by the state/county; and (4) a group care or institution approved by the child's tribe?
  - » What active efforts were made to promote reunification of the child with their birth parents or relatives? Did those efforts meet ICWA active efforts requirements? Was the child's tribe engaged in making decisions about what services should be provided?
  - » Is placement a pre-adoptive placement with an Indian or non-Indian family?
  - » Was transfer to tribal court petitioned from state court? What is the status of the petition (approved or denied)?

- » Are ICWA termination of parental rights legal requirements met using the evidentiary standard of beyond a reasonable doubt? Legal requirements include provision of active efforts to the parents to prevent the breakup of the family; expert witness testimony on the needs of the Indian child; and a finding that continued custody of the child by the parent will result in serious physical or emotional damage to the child.
- **Collect more data on grandfamilies who are not involved with the child welfare system**, including data on their race and tribal affiliation, to inform services and supports. Currently, only limited data exist. The U.S. Census Bureau collects data on grandparents who self-identify as responsible for grandchildren. Similar data are available for the grandchildren of grandparents who are responsible for them. Both data sets include a broad racial breakdown, but do not include racial or tribal affiliation information within categories such as poverty and disability. This data is critical to informing services and supports and identifying disparities based on race and tribal affiliation. Absolutely no demographic data are publicly available for other relatives, such as aunts or uncles, or the children they raise.
- **Collect additional data on children in foster care with relatives and determine the following for each category:**
- **Children who are diverted from the child welfare system** - many state child welfare agencies are removing children from homes, finding relatives or kin, and then diverting those children with little or no supports. No federal data are collected from states or tribes on these children. Agencies “divert,” despite the fact that they have placement and care responsibility. We need to capture these large numbers of diverted children to better understand this population, and whether they

eventually enter foster care. Disparities will likely emerge when we identify the race and tribal affiliation of these children who are not supported by the system.

- » **Children who exit foster care to guardianship or adoption** – AFCARS data exist on the percentage of children exiting foster care who achieve these permanency goals, but not on their race or tribal affiliation. Information on race and tribal affiliation will inform policy and program responses to possible disparities.
- » **Children who are reunified with their parents** – AFCARS data are reported for this category, but it is not reported by race or tribal affiliation. Again, information on race and tribal affiliation will inform policy and program responses to possible disparities.
- » **Children who are in the legal custody of the child welfare system with unlicensed kin and receive no foster care maintenance payments** – AFCARS does not report how many children are with unlicensed kin or their race or tribal affiliation. Disparities will likely emerge when we identify the race and tribal affiliation of these children who are not supported by the system.
  - \* **Note:** tribal affiliation denotes a political status a person has as a citizen of a federally recognized tribe. Racial classification is different and not synonymous with tribal affiliation.
- » **Analyze the racial data of grandfamilies both inside and outside the foster care systems to inform the assessment and plan noted above to address racial inequities.**



For over twenty years, **Generations United's National Center on Grandfamilies** has been a leading voice for families headed by grandparents, other relatives and close family friends. Through the Center, Generations United leads an advisory group of organizations, caregivers and youth that sets the national agenda to advance public will in support of these families. Center staff conduct federal advocacy, provide technical assistance to state-level practitioners and advocates, and train grandfamilies to advocate for themselves. The Center raises awareness about the strengths and needs of the families through media outreach, weekly communications and awareness-raising events. It offers a broad range of guides, fact sheets and tools for grandfamilies, which cover issues from educational and health care access to financial and legal supports and can be found at [www.gu.org](http://www.gu.org) and [www.grandfamilies.org](http://www.grandfamilies.org).

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The **National Indian Child Welfare Association (NICWA)** works to support the safety, health, and spiritual strength of American Indian and Alaska Native children along the broad continuum of their lives. It supports tribes in building the capacity to prevent child abuse and neglect through positive systems change at the state, federal, and tribal levels. NICWA is the most comprehensive source of information on American Indian and Alaska Native child welfare. NICWA is a private, nonprofit, membership organization based in Portland, Oregon. Its members include tribes, individuals—both Native and non-Native—and private organizations from around the United States concerned with Native child and family issues. Together, its partners, board, and staff work to protect Native children and keep them connected to their family, community, and culture.

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*Pottery figure of the legend of the Story Teller, also called Singing Mother. Photo by Greg Betts.*

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# Endnotes

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