Generations United is pleased to provide testimony to the Senate Special Committee on Aging. We applaud Chairwoman Collins, Ranking Member Casey, and members of the committee for your leadership in holding this hearing on the important role of grandparents and other relatives in providing safe and stable homes to children who cannot remain in the care of their parents, and the sharp increase in this trend attributed to the opioid crisis.

Today’s grandparents provide a continuum of care from part- or full-time child care to raising a grandchild due to the parent’s death, disability, addiction or military deployment. This testimony will focus on grandparents and other relatives raising children, also known as grandfamilies.

According to the U.S. Census, more than 2.6 million grandparents report they are responsible for their grandchildren. About 7.8 million children live in households headed by kin—a grandparent, uncle, aunt or other relatives. About 2.5 million children are living with grandparents, relatives or close family friends without either of their parents in the home.

There are many kinds of grandfamilies. In some grandparents are raising children inside the formal foster care system as licensed or unlicensed kinship foster parents. Some have legal custody but no connection or support from the child welfare system. Still others are raising the children informally without legal custody or guardianship. While the challenges these families face are varied and complex, they are united by one common factor: they believe beyond a shadow of a doubt in the importance of family. They believe children fare better when they are raised in a family, not a system, and they are right. Yet we cannot ignore the fact that they often step in at great personal sacrifice, impacting their own health, family relationships, retirement plans and financial well-being. These caregivers, and the children they are protecting and nurturing, deserve our respect and support.

My testimony today will focus on four key points:

- One, the impact of the opioid epidemic on grandparents and other relatives
- Two, the critical role of grandparents and other relative caregivers in helping children thrive when their parents are no longer able to care for them
- Three, the importance of supportive services to help grandfamilies succeed
• And four, the valuable role that the National Family Caregiver Support Program and Area Agencies on Aging can play in helping respond to the crisis

First, a little about Generations United—Generations United is the only national membership organization focused solely on improving the lives of children, youth and older people through intergenerational strategies, programs and public policies. Since 1986, Generations United has been the catalyst for policies and practices stimulating cooperation and collaboration among generations. We believe that we can only be successful in the face of our complex future if generational diversity is regarded as a national asset and fully leveraged. For almost twenty years, Generations United's National Center on Grandfamilies has been a leading voice for issues affecting families headed by grandparents or other relatives and the need for evidence-based practices to support them.

**Impact of the Opioid Epidemic on Grandparents and Other Relatives**

Number one, the impact of the opioid epidemic on grandparents and other relatives.

Who are the grandparent caregivers? They are diverse in terms of race, culture, income and geography. Thirty-nine percent are over the age of 60 and approximately 58 percent are currently in the workforce. They are more likely to live below the poverty line than their peers—21 percent—and 26 percent have a disability. They face unique challenges that impact their well-being and their ability to fully support and parent their grandchildren.

Unlike parents or foster parents who plan for months or years to care for a child, these grandparents or other relatives usually step into their role unexpectedly. Some may have received a call in the middle of the night telling them to come and pick up their grandchildren or they will end up in foster care. Suddenly, they are forced to navigate complex systems to help meet the physical and cognitive health challenges of the children who come into their care, often after experiencing significant trauma.

Caregivers may struggle with their own mental health issues stemming from feelings of shame, loss or guilt about their adult child’s inability to parent. They may suffer from social isolation and depression because they do not want their peers to know about their situation or because their peers are no longer parenting. Caregivers of children whose parents are using drugs may have their stress exacerbated by trying to maintain or navigate an ongoing relationship between the child and parent, often unaware if the parents are currently using drugs or alcohol and how their behavior will impact the child. Relative caregivers are often grieving a host of losses, including that of the treasured traditional grandparent role, control over their future, financial security or even the ability to go on vacation.

Taking on the unexpected expense of a child can be especially devastating to caregivers living on fixed incomes. Countless grandfamilies report spending down their retirement savings to address the health, mental health, food and clothing needs of the children, or to pay legal expenses from seeking legal custody of the children. Others turn their retirement savings into...
college tuition payments. Many older caregivers live in one bedroom apartments or senior housing where children are not welcomed and need to move to larger, more expensive housing.

While grandparents have been called upon to raise children for many reasons over the years, the current opioid and heroin epidemic is overwhelming many families and child welfare systems.

Grandparent Pamela Livengood shined a light on impact when she said, “For my 50th birthday, I got a two-year-old. My story isn’t unique. The [opioid] epidemic has devastated communities all over the country. It doesn’t discriminate against age, race or gender. It affects all of us.”

After years of decline, the overall numbers of children in foster care are on the rise. From state to state, experts say the current opioid and heroin epidemic is the number one reason for this increase.iv Recent data show the percentage of children entering foster care due to parental drug and alcohol use rose from 22 percent to nearly 30 percent in just five years.v This was the largest increase in any reason for removal. Some pockets of the country report as high as a 33 percent increase in the numbers of children in state custody.vi

The current epidemic is hurting our country’s families and stressing many state’s child welfare systems. Child welfare systems are increasingly looking to grandparents and other relatives to care for the children as they face shortages of foster parents to meet the growing need. In 2014, more than a third of all children who were removed from their homes because of parental alcohol and drug use were placed with relatives.vii

This is not just a child welfare system issue. As one grandmother said, “Grandparents are doing whatever it takes to bring their grandchildren to safety.”

Although the child welfare system relies heavily on relatives, the number of grandparents, uncles, aunts and others who step in to care for children and keep them out of foster care far exceeds those raising children inside the system. In fact, for every child being raised in foster care (often referred to as “formal care”) with a relative, there are 20 children living with grandparents or other relatives outside of the foster care system, in “informal care.” Often thrown into this caregiving role with little or no warning, caregivers frequently do not know about supports and services for which they may be eligible. Those raising children outside the system usually struggle with even less support. They save our country’s taxpayers more than $4 billion a year by raising and keeping children out of foster care. These families deserve our respect and support.

Impact of Grandparent and Other Relative Caregiving on Child Well-being

Second, the critical role of grandparents and other relative caregivers in helping children thrive when their parents are no longer able to care for them.
Despite the challenges facing grandparents and other relatives raising children, children fare well in the care of relatives. Compared to children in non-relative care, they have more stability, are less likely to run away and are more likely to report feeling loved. When children cannot remain with their parents, research shows placing children with grandparents or other relatives:

- Reinforces safety, stability and well-being
- Reduces trauma
- Reinforces child’s sense of identity
- Helps keep brothers and sisters together
- Honors family and cultural ties
- Increases the likelihood of having a permanent home

When explaining why it was so important that he had been raised by his grandparents, Ray Krise, a member of the Skokomish Tribe near Shelton, Washington, said, “If not for being raised by my grandparents, I would not have a cultural identity. I wouldn’t know my family lineage and my son would not bear the name Tcha-LQad—a name that is 17 generations old... [They] helped me develop a real sense of pride and belonging.”

Grandfamilies are also more likely to continue to provide a safe haven for a child long after they have turned 18 or transitioned out of the foster care system. A young person may age out of a system; they never age out of a family.

**Importance of Supportive Services to Help Grandfamilies Succeed**

Third, the importance of supportive services to help grandfamilies succeed.

While many strengths, challenges and needs are shared by these diverse families, the level, length and type of supports they need vary. Unfortunately, the degree to which these families receive supports and services from the child welfare system is often tied largely to the way in which they happen to come into their grandparent, aunt, uncle, or other relative’s care, not the needs of the family.

Grandparents who are able to step in to protect and care for their grandchildren and keep them out of the child welfare system are, in a sense, punished for this critical and loving act. While services are often still inadequate for caregivers who become licensed as foster parents, they are far more likely to receive crucial supports and benefits than those raising children outside foster care. Child welfare programs should do more to prioritize supports for caregivers who keep children out of foster care and address barriers to licensing relatives as foster parents when it is the best option for the family. Networks of aging services agencies and other community supports can play a critical role in helping these families by coordinating with child welfare agencies to provide seamless supportive services to families with older caregivers of
children who are not getting the full range of supports and services they need from the child welfare system.

Families commonly face challenges that can be addressed through the provision of key supports and services such as:

**Information and Referral Services** such as kinship navigator programs that provide a single point of entry for learning about housing, household resources, physical and mental health services and financial and legal assistance.

**Physical and Mental Health Care and Services** for older caregivers and children including Medicaid and Medicare, which have proven to be critical resources to grandfamilies. Quality counseling and trauma-informed mental health services have been shown to improve outcomes for the caregivers and children.

**Affordable Legal Services** so grandfamilies impacted by parental substance use disorders, whether inside or outside the foster care system, can access a continuum of legal relationship options and understand the differences—both legal and practical—of adoption, guardianship and legal custody.

**Lifespan Respite** provides coordinated, community-based respite for family caregivers caring for individuals with special needs of all ages.

**Financial Supports**, including access to Temporary Assistance for Needy Families (TANF)—one of the three primary purposes of which is to support children in the care of relatives, Social Security retirement, disability and survivor benefits for both the caregivers and for the children, and Supplemental Security Income for low-income caregivers and children who are disabled.

**Valuable Role that the National Family Caregiver Support Program and Area Agencies on Aging Can Play in Helping Respond to the Crisis**

And finally fourth, the valuable role that the National Family Caregiver Support Program and Area Agencies on Aging can play in helping respond to the crisis.

When the National Family Caregiver Support Program (NFCSP) was signed into law as part of the Older Americans Act in 2000, Generations United successfully advocated that grandparents and other relatives raising children be included to support older Americans not only as those receiving care but also as those giving care. Current law gives states the option to use up to 10 percent of state NFCSP dollars to serve grandfamilies in which the caregiver is age 55 or older. According to the Administration for Community Living’s Aging Integrated Database (AGID), only seven states use nearly the full 10 percent of funds to serve the families.

Those who do use the funds to serve grandfamilies report significant impact. But they are stretching scarce resources elevating the urgency for additional investments to adequately
meet the needs of grandfamilies. Examples of successful uses of funds range from information and referral services to support groups to legal guides and clinics. Families benefiting from services through the aging network report positive experiences and outcomes. They are often more receptive to services provided through the aging network, because they have a higher level of comfort with those agencies than the child welfare system, which many may fear or distrust.

Policy Recommendations

- **Protect the Social Services Block Grant (SSBG)**
  SSBG provides critical support to states to serve children and older adults in communities, many of whom are in grandfamilies, through a range of community-based supportive services such as home-based meals, child care and child protective services. This flexible resource allows states to use the funds to meet local needs where they are greatest.

- **Ensure Access to Quality Health and Medical Care:** Ensure that health care reform efforts recognize the critical role of Medicaid in providing health care coverage to grandfamilies and that efforts do no harm to the ability of the children and caregivers in grandfamilies to access quality health and mental health care and to the ability of parents to access substance abuse treatment and prevention services.

- **Promote Services to Grandfamilies through the Network of Organizations Serving Older Americans:** Urge states to maximize use of the National Family Caregiver Support Program (NFCSP) to serve grandfamilies. NFCSP funds may be used to provide supportive services to caregivers and children in grandfamilies regardless of whether they are involved with the child welfare system or have legal custody of the child. Although up to 10 percent of the program’s funds can be used for grandfamilies, most states do not make full use of the program to help support these families. Policy should support national experts and other resources to help educate the aging network about grandfamilies and the most effective services to support them.

- **Address Barriers to Licensing Grandparents and Other Relatives as Foster Parents:** Adopt the Model Family Foster Home Licensing Standards, which Generations United developed in partnership with the National Association for Regulatory Administration and the American Bar Association Center on Children and the Law and with support from the Annie E. Casey Foundation, to eliminate unnecessary barriers that prevent suitable relatives and non-relatives from becoming licensed foster parents.

- **Reform Federal Child Welfare Financing to Encourage a Continuum of Tailored Services and Supports for Children, Parents and Caregivers in Grandfamilies:** Allow states to use federal child welfare funds for prevention services for caregivers, parents and children, such as kinship navigator programs, substance abuse treatment and prevention services, mental health services and in-home supports.
• **Encourage Coordination of Services and Supports among Temporary Assistance for Needy Families (TANF), Child Welfare and Aging Services Agencies:** Through coordination, leveraging and braiding dollars among these agencies, more children and caregivers can be served.

• **Ensure Grandfamilies Can Access Financial Resources to Help Them Meet the Children’s Needs such as TANF, Social Security, and Tax Relief:** Access to TANF must be improved through a number of concrete policy and program steps including eliminating asset tests for caregivers over age 60 so that they can have savings for retirement; Social Security retirement, disability and survivor benefits and Supplemental Security Income must be protected and strengthened; and tax reform efforts should preserve the ability of grandfamilies to qualify for the Earned Income Tax Credit.

• **Provide an Array of Legal Options to Grandfamilies:** Ensure that grandfamilies have access to a continuum of legal relationship options and understand the differences –both legal and practical - of adoption, guardianship and legal custody. As part of this effort, grandfamilies’ access to legal representation and assistance should be improved and expanded. Furthermore, all states should enact educational and health care consent laws so that children outside the foster care system and without a legal relationship to their caregivers can access education and health care services.

• **Elevate and Promote Best Practices through a National Technical Assistance Center on Grandfamilies:** Create a National Technical Assistance Center on Grandfamilies that engages experienced experts to provide a clearinghouse of best or promising practices and programs for serving children, parents and caregivers in grandfamilies. This includes guidelines for states to encourage best practices to support grandfamilies impacted by parental substance use, including ways to help caregivers meet the children’s needs and support birth parents’ access, engagement and success in treatment. The Center can facilitate learning across states and provide technical assistance and resources to those who directly work with all three generations in grandfamilies.

**Conclusion**

Stacey Walker, who along with his sister was raised by his grandmother, said, “My grandmother already lived in a government housing project, and although her salary was enough to keep her afloat, she now had all sorts of expenses...any young child needs, multiplied by two.” Stacey’s grandmother sacrificed, scrounged and succeeded in raising her grandchildren. Stacey is what we at Generations United call a “grand success.” This past November, Stacey was elected the first African American supervisor of the Linn County Iowa Board of Supervisors. After his election, Stacey said, “It’s an honor to be an example of the value of being raised in an intergenerational home!”

No matter the circumstances, every child deserves the roots and connection to the rich soil of family that nourish their growth and prosperity.
Thank you for this opportunity to speak. Please direct follow up questions regarding this testimony to Jaia Peterson Lent at jlent@gu.org or 202-289-3979, or Ana Beltran at abeltran@gu.org.

\[\text{i U.S. Census Bureau, 2015 American Community Survey} \]
\[\text{ii U.S. Census Bureau, 2010 Census} \]
\[\text{vii Analysis conducted by Children and Family Futures (CFF) on the public use 2014 Adoption and Foster Care Analysis and Reporting System dataset. Estimates based on all children in out of home care at some point during Fiscal Year 2014.} \]