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Executive Summary

In the Texas child welfare system, “kinship care” (relatives and fictive kin acting as caretaker) has become an important option for children and youth in the state’s conservatorship. Over the span of eight years, Texas has more than doubled the percentage of children and youth in kinship care and expanded payments to kinship caregivers. Research has shown that kinship placements better serve children and youth because kin are better able to promote a sense of identity and ensure connections to extended family. However, a lack of financial resources to support kinship placements can frequently lead to breakdowns in the placement, causing children to enter into non-kinship placements. The Relative and Other Designated Caregiver Assistance Program, established by the 79th Legislature, Senate Bill 6, seeks to ensure the availability of kinship placements that may not otherwise be sustainable due to lack of finances. The federal Fostering Connections to Success and Increasing Adoptions Act of 2008 further expands upon kinship placements and payments, which may impact this program in the future. Supporting state legislation was passed during the 81st legislative session to implement the federal requirements.

Of children and youth in substitute care[^1] in Fiscal Years 2005 - 2008, 50 percent have had at least one kinship placement, and 77 percent of those received payment. From the start of the program in March 2006 to September 2008, $11.9 million had been distributed in 19,397 payments.

Experiencing a kinship placement impacts how quickly children and youth exit from substitute care; those that have had a kinship placement exit more quickly than those that have not had a kinship placement. Compared to reunification, having had a placement with kin significantly increases the likelihood that a child will exit the child welfare system to kin.

Children and youth who benefit from payments exit slightly more slowly than those that do not benefit from payments. Payment can also influence the chance of certain exits. For example, compared to children and youth that are reunified with parents, those that receive a payment are slightly more likely to exit to a kinship placement (transfer of conservatorship to the relative), and much more likely to be adopted. Although reunification seems to be less likely for those that benefit from payments, these children and youth are more likely to find permanency through kinship care and adoption than are those that do not benefit from payments.

Future analysis will:

- Examine the length of kinship placements and outcomes for children and youth that have had at least one kinship placement.
- Account for individual characteristics that may impact both the likelihood of placement with kin as well as child outcomes.
- Examine whether offering payments affects kin's willingness to care for children.

[^1]: Substitute care consists of care provided to a child in DFPS managing conservatorship who has been placed outside the child's own home in order to protect the child from abuse or neglect. Substitute care includes Residential Treatment Centers, Emergency Shelters, Child Placing Agency Foster Homes, Basic Child Care, DFPS Foster Homes, Kinship Care, and CPA/DFPS Adoptive Homes. Foster care, a subset of substitute care, includes all of the above except for kinship care and CPA/DFPS Adoptive Homes.
• Assess cost-savings resulting from the Relative and Other Designated Caregiver Assistance Program.
Progress Report of the Relative and Other Designated Caregiver Assistance Program

Within the Texas child welfare system, kinship care has become an important option for children and youth in substitute care. “Kinship care” is the term used to describe those situations in which children and youth who are no longer able to live with their own parents are cared for by grandparents or other relatives. According to the Department of Family and Protective Services (DFPS) definitions, “kin caregiver” is an inclusive term that refers to relatives, close family friends, and others who have a long-standing relationship with the child or youth. These non-biologically related caregivers are sometimes referred to as "fictive kin" or "designated caregivers." Over the span of eight years, Texas has more than doubled the percentage of children and youth in kinship care. In Fiscal Year 2000, 3,494 children and youth in state custody—representing 14 percent of that population—were in an unpaid kinship placement. In Fiscal Year 2008 Texas had 8,490 children in kinship care, representing 31 percent of all children and youth in substitute care. Unlike children and youth placed in Fiscal Year 2000, many recent placements benefited from financial assistance through the Relative and Other Designated Caregiver Assistance Program.

Several DFPS actions have contributed to the substantial increase in kinship care, particularly during Fiscal Years 2005 - 2006. The Family Focus Initiative of Child Protective Services (Senate Bill 6, 79th Texas Legislature) provided for an increased emphasis on Family Group Decision-Making conferences, expanded the Relative and Other Designated Caregiver (Kinship) Assistance Program statewide, and implemented a support process to allow financial assistance for kinship caregivers. From the start of the Relative and Other Designated Caregiver Assistance Program in March 2006 to the end of Fiscal Year 2008, 12,809 children and youth had been in placements that have benefited from $11.9 million of assistance.

This report examines the following characteristics of the statewide kinship program:

1) background of kinship programs in Texas,
2) types and frequency of payments,
3) impact of kinship placements on exits, and
4) impact of payments on exits.

Background

Kinship Programs in Texas

In recent years, there has been a nationwide trend toward placement with kinship caregivers for children and youth in substitute care. Research has shown that kinship placements better serve children and youth because kin are able to:

- reinforce the child’s or youth's sense of identity,
- help maintain connections with extended families,
- continue family traditions, and
- provide more stable placements.3

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3 Dubowitz, 1994; Gleeson and Craig, 1994; Berris, Barth and Needell, 1994; Geen and Berrick, 2002; Ehrle and Geen, 2002; Cuddlebak, 2004.
However, the lack of financial resources to support these kinship placements has frequently led to breakdowns in the placements, resulting in children and youth entering non-kinship placements. The Relative and Other Designated Caregiver Assistance Program provides support to kinship placements that otherwise might not be sustainable due to lack of financial resources.

Texas has long recognized the value of kinship care. The first pilot of a kinship care program in Texas began in Bexar County in Fiscal Year 1997 through the support of a three-year federal grant. Known as the Comprehensive Relative Enhancement Support and Training Project (CREST), the program was continued after the third year through the support of Casey Family Programs. Paid caregiver assistance expanded to four additional South Texas counties in Fiscal Year 2003 through a rider enacted by the 78th Texas Legislature and was known as the Supporting and Educating Relatives as Placements (SERAPE) program.

The Family Focus Initiative of Child Protective Services (CPS) was created in Fiscal Year 2005 as part of the DFPS renewal effort implemented through Senate Bill 6, 79th Texas Legislature, and has had a substantial impact on kinship programs in Texas. The Family Focus Initiative has expanded the Relative Caregiver Program statewide to provide support and services to kinship caregivers and implemented a financial support process (Relative and Other Designated Caregiver Assistance Program) to allow payments for kinship caregivers.

Before a kinship placement can be made, the caseworker must complete a written assessment of the home and the kin’s ability to care for the child's or youth's needs. Kin may be eligible for financial assistance if the placement is approved by DFPS, no other caregiver has been reimbursed on behalf of the child(ren) or youth, and the family income does not exceed income guidelines (300 percent of the Federal Poverty Level). The services, which were made available beginning in March 2006, include

- the funding of one-time, per sibling-cohort integration payments ($1,000),
- annual reimbursement or “flexible” payments available per child (up to $500), and
- day care services.

Kinship caregivers who legally accept permanent managing conservatorship of a child or youth are eligible to continue receiving the flexible payment for up to three years or until the child or youth turns 18. However, the Fostering Connections legislation, which provides for the further expansion of payments to relatives, may spur changes to payments to relatives and fictive kin.

Since the implementation of the Relative and Other Designated Caregiver Assistance Program, 12,809 children and youth have been in placements that benefited from a payment. Seventy-seven percent of children and youth who have had a kinship placement have benefited from some form of payment.

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4 Terling-Watt, 2001; Testa and Slack, 2002
5 The proposed plan for the Permanency Care Assistance payments will begin in FY 2010. If a child's relative or fictive kin has been verified as a foster home as serves as such for the child for at least six months, the family can enter into a Permanency Care Assistance agreement with the department. This will allow them to receive foster care payments at the same rate as a foster home once they have accepted permanent managing conservatorship of the youth or child.
When comparing children and youth in kinship placements with the general substitute care population, the most striking differences are those regarding the age and characteristics of the children and youth (see Appendix A). Children in kinship placements are typically younger and are less likely to have special needs characteristics (physical, medical, emotional, learning, drug/alcohol). These differences are somewhat similar to those found for children who are adopted compared to those that stay in our substitute care system.

Analyses

Fifty percent of children and youth in substitute care for Fiscal Years 2005 - 2008 have had at least one kinship placement, 77 percent of whom received payment. $11.9 million has been distributed from the start of the program (March 2006) in 13,641 flexible payments (benefiting one child) and 5,756 integration payments (benefiting a sibling cohort). Figure 1 below shows the type of payments from which children and youth in kinship placements have benefited.

Outcomes for Kinship and Non-Kinship Placements

The focus of the Progress Report is to examine how both kinship placements and payments affect exits from substitute care. The optimal objective of Child Protective Services is to achieve safe permanency for the children and youth who enter the child welfare system. However, there are some permanent outcomes that are considered more favorable than others. The primary permanency goal for children and youth is reunification with their parents when this option will ensure the safety and well-being of the child. When reunification is not achievable, the next-best option for many children and youth is to be placed permanently with kin, meaning conservatorship is transferred to a relative or fictive kin. This is considered preferential to placement with non-kin because kin are better able to promote identity, the continuation of traditions, and relationships with extended family than a non-kin caregiver. If an appropriate kinship placement is not found, the third preferred

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6 Data for this report reflects payments issued prior to September 1, 2008. It can be assumed that additional payments were received by this cohort after September due to payment processing time. These payments will be accounted for in subsequent reports.

7 The numbers of children and youth benefiting from integration payments is underestimated due to the lag time in data entry into Texas SACWIS system (IMPACT) and to variations in how caseworkers enter data. However, the count of actual integration payments issued is accurate.
permanency goal is adoption. Other options include children remaining in substitute care until they age out. Aging out of substitute care is the least desirable option for youth.

Sixty-three percent of children and youth that were in substitute care between 2005 and 2008 had exited at the start of Fiscal Year 2009. This is roughly 10 percentage points higher than for those children and youth who had never been in a kinship placement. Figure 2 below shows how the proportion of children and youth exiting substitute care varies over time depending upon whether the child had a kinship placement. In the first months of entering substitute care, those without a kinship placement exit more quickly than those with a kinship placement. This reverses at about the one year mark. Subsequently, those with a kinship placement exit more quickly.

As shown in Table 1 below, 30 percent of children and youth with kinship placements exit to reunification, while fifty-six percent of those without kinship placements do the same. Compared to reunification, having had a kinship placement significantly increases the chances of exiting to kinship care. Similarly, those with a kinship placement are slightly less likely to exit to adoption. These differences may not be due exclusively to the kinship placement; child characteristics may also play a role in types of exits.

<table>
<thead>
<tr>
<th>Types</th>
<th>Without Kinship Placement</th>
<th>With Kinship Placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td>56%</td>
<td>30%</td>
</tr>
<tr>
<td>Kinship Care</td>
<td>6%</td>
<td>49%</td>
</tr>
<tr>
<td>Adoption</td>
<td>23%</td>
<td>17%</td>
</tr>
<tr>
<td>Other</td>
<td>15%</td>
<td>4%</td>
</tr>
</tbody>
</table>

In addition to exiting more quickly, children and youth who have been in a kinship placement are less likely to re-enter substitute care. In the population of children in substitute care during Fiscal Years 2005 - 2008, seven percent had previously been in state custody. Roughly two-thirds of those re-entering state custody had never experienced a kinship placement. About 50 percent of the general substitute care population has

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8 Adoption to a relative is preferable to adoption to a non-relative, however, this distinction was excluded from this description (and later analysis) because the data did not differentiate between these types of adoptions.
experienced a kinship placement. This indicates that experiencing a kinship placement guards against re-entry.

Outcomes for Kinship Placements With and Without Financial Assistance

To continue emphasizing the importance of kinship placements and prevent their breakdown due to lack of resources, in March 2006 Child Protective Services initiated the Relative and Other Designated Caregiver Assistance Program, established by the 79th Legislature. Although experiencing a kinship placement facilitates quicker exits for children and youth, the same is not true for receiving financial support. Figure 3 below shows how the proportion of children and youth exiting substitute care varies over time according to whether the kinship placement received payment. At each time marker, fewer of those receiving payments have exited.

![Figure 3: Kinship Payments: Proportion Exiting Over Time](image)

This trend is not necessarily due to the payments themselves, but is more likely a reflection of differences between children and youth in placements that do and do not receive payments. For example, the payment processing time may prohibit shorter kinship stays from receiving payments and so children and youth with immediate prospects of returning home may leave substitute care before a payment can be made. Also, in order to be eligible for some payments, the recipient must have a low income. This suggests that children and youth in placements receiving payments are placed with (and may come from) families in poverty. Finding a permanent placement for these children may be more difficult than for those that earn too much to meet the income criteria.9

Among children and youth that have had a kinship placement, payment influences the chance of certain exits. For example, compared to reunification, children and youth who benefit from a payment are slightly more likely to exit to kinship care, and much more likely to be adopted (see Table 2). Although reunification seems to be less likely for children and youth that benefit from payments, more of these children and youth find permanency through kinship care and adoption.

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9 Income data was not available at the time of publication of this report. The Family Focus Evaluation, due in November 2009, will include analyses to test these hypotheses.
Table 2: Percent Exiting

<table>
<thead>
<tr>
<th>Types</th>
<th>Without Payment</th>
<th>With Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td>45%</td>
<td>23%</td>
</tr>
<tr>
<td>Kinship Care</td>
<td>26%</td>
<td>48%</td>
</tr>
<tr>
<td>Adoption</td>
<td>18%</td>
<td>27%</td>
</tr>
<tr>
<td>Other</td>
<td>10%</td>
<td>2%</td>
</tr>
</tbody>
</table>

Research has shown that kinship placements have failed due to lack of financial resources; therefore, prevention of breakdown of many of these preferred placements should be considered in addition to rates of exit. Permanency is found for many of these children and youth; twenty-nine percent of children and youth benefiting from payments have had conservatorship transferred to their kinship caregiver.

Additionally, the payment program appears to provide a cost savings for the state, even when the children and youth remain in substitute care longer than those who do not benefit from payments. Between Fiscal Year 2007 and Fiscal Year 2008, there was an 8.7 percent drop in paid foster care days. The exact relationship between the Relative and Other Designated Caregiver Assistance Program and foster care days will be tested in an upcoming Family Focus project.

Summary

As kinship care has become a more frequent occurrence in recent years, issues regarding lack of funds have also arisen. The 79th Texas Legislature established the Relative and Other Designated Caregiver Assistance Program to secure and sustain more kinship placements.

Fifty percent of children and youth in substitute care have had at least one kinship placement. This analysis of the kinship program indicates that children and youth placed with kinship caregivers exit the state’s conservatorship more quickly and have better outcomes than children and youth who experience only non-kinship placements.

Of children and youth who have had a kinship placement, 77 percent benefited from a relative payment. Though it is too soon to be definitive, data comparing those kinship placements receiving financial assistance to those without generally suggest a slight difference in exits, with children and youth in kinship placements without payments slightly more likely to have exited from substitute care and to have been reunified. However, placements benefiting from payments are more likely to result in an exit to relatives or adoptions.

Next Steps

Future analysis will:
- Examine the length of kinship placements and outcomes for children and youth that have had at least one kinship placement.
- Account for individual characteristics that may impact both the likelihood of placement with kin as well as child outcomes.
• Examine whether offering payments affects kin's willingness to care for children.
• Assess cost-savings resulting from the Relative and Other Designated Caregiver Assistance Program.
### Appendix A

Demographics of Children in Kinship Care and Children in the General CPS Substitute Care Population: Point in Time: August 2008

Table 1: Demographics of Children in Kinship Care and Children in the General CPS Substitute Care Population: Point in Time: August 2008

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>32.0</td>
<td>30.4</td>
</tr>
<tr>
<td>Hispanic</td>
<td>37.0</td>
<td>37.9</td>
</tr>
<tr>
<td>Anglo</td>
<td>28.5</td>
<td>29.2</td>
</tr>
<tr>
<td>Other*</td>
<td>2.5</td>
<td>2.5</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 to 2 years</td>
<td>32.7</td>
<td>24.8</td>
</tr>
<tr>
<td>3 to 5 years</td>
<td>24.3</td>
<td>18.2</td>
</tr>
<tr>
<td>6 to 9 years</td>
<td>21.3</td>
<td>19.4</td>
</tr>
<tr>
<td>10 to 13 years</td>
<td>13.0</td>
<td>16.5</td>
</tr>
<tr>
<td>14 to 17 years</td>
<td>8.8</td>
<td>21.1</td>
</tr>
<tr>
<td><strong>Type Relative</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aunt / Uncle</td>
<td>33.5</td>
<td>N/A</td>
</tr>
<tr>
<td>Grandparent</td>
<td>43.5</td>
<td>N/A</td>
</tr>
<tr>
<td>Other Relative</td>
<td>23.0</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Gender of Child</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>51.7</td>
<td>49.8</td>
</tr>
<tr>
<td>Male</td>
<td>49.3</td>
<td>50.2</td>
</tr>
<tr>
<td>Unknown</td>
<td>&lt;0.1</td>
<td>&lt;0.1</td>
</tr>
<tr>
<td><strong>Special Characteristics</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td>0.4</td>
<td>1.3</td>
</tr>
<tr>
<td>Medical</td>
<td>3.3</td>
<td>6.5</td>
</tr>
<tr>
<td>Drug/Alcohol</td>
<td>11.3</td>
<td>10.9</td>
</tr>
<tr>
<td>Emotional</td>
<td>6.6</td>
<td>22.0</td>
</tr>
</tbody>
</table>

* “Other” race/ethnicity category includes American Indian, Asian, multiple, and undetermined.
** Some children have more than one characteristic or may have no characteristics. The percentages do not sum to 100%.
Prepared by Nissa Brown,  
Brock Boudreau, Janess Sheets, and Amber Hardaway

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