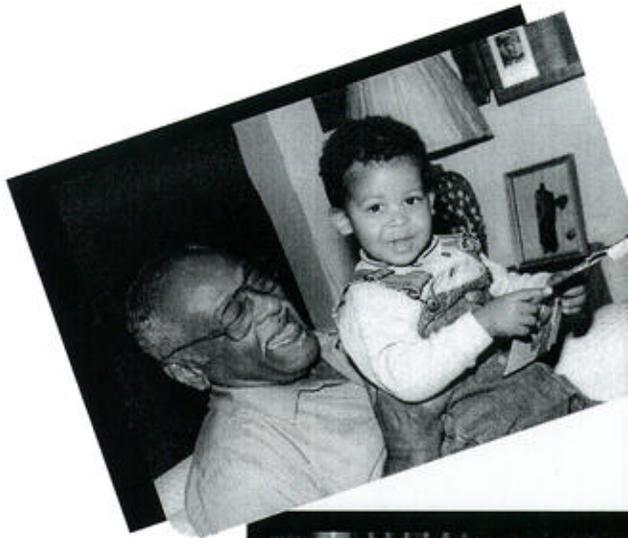


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**SECOND TIME AROUND:  
RELATIVE CAREGIVERS APPOINTED LEGAL GUARDIANS**

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## **Second Time Around: Relative Caregivers Appointed Legal Guardians**

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### **Introduction**

In Connecticut, many relatives are becoming Probate Court-appointed guardians for children whose parents can no longer provide care for them. By assuming care and legal guardianship, these relatives prevent the children from entering the state foster care system – they are the children’s “safety net.”

Many would agree that state law and policy should strongly encourage and support such care giving. However, this is not the case in Connecticut where efforts to develop more supportive policies have been hampered by a lack of state-specific information about Probate Court-appointed relative caregivers: *who* they are, *for whom* they are providing care, the *challenges* they face, and the *difference* they are making in the lives of children. This study, the *first* of its kind in Connecticut, is an initial step in developing this information.

### **Background**

Increasing numbers of Connecticut children are being raised by persons other than their parents. Illness and death due to HIV/AIDS, substance abuse, increasing family poverty and increases in child abuse and neglect all contribute to the transfer of parenting responsibility from a child’s parent to, in many instances, the child’s grandparents or other relatives. From September 1994 to June 1998, the number of foster children in Connecticut living with relatives grew by 63% (from 1,217 to 1,987) (Office of Legislative Research Rep. 98-R-0997, 1998). Thousands of other children are living with relatives, often grandparents, who have been appointed their legal guardians by the Probate Courts.

The research literature suggests that children who remain with family members, when their parents can no longer provide appropriate care, generally tend to do better than children who are placed with strangers in foster care (e.g., Brooks, 1999; Schwartz, 1993; Soloman & Marx, 1995). Less frequent placement disruptions, greater likelihood of being placed with siblings, and continued ties to extended family all reduce the trauma of family disintegration to the child and contribute to better outcomes.

Kinship care places new and often great burdens on the relative caregivers. Grandparents who have retired and moved to smaller quarters find themselves being parents a second time, often with less income, less energy, and poorer health. National research shows that only small minorities of grandparents report no difficulties in assuming the care-giving role (Burton, 1992; Kelley & Damato, 1995). Relative caregivers commonly report problems in meeting the physical and emotional demands of full-time parenting, as well as social isolation, financial difficulties, and inadequate services – including child care, respite care, parenting programs, legal counseling regarding foster care and guardianship options, job counseling, drug addiction seminars and health care (e.g., Burnette, 1999; Burton, 1992; Kelley & Damato, 1995; Minkler, M., Fuller-Thomson, E., Miller, D., & Driver, D., 1997; Woodworth, 1996; Yorker, et al., 1998).

Relatives who are called upon to assume the care of Connecticut children are faced with a particularly difficult choice if they have low income and need some financial assistance to become parents “the second time around.” Relatives can seek assistance from the Connecticut Department of Social Services (DSS) and receive \$343 per month for the first child, and between \$50-\$100 per month for each additional child they take in. If they also seek cash assistance for themselves, they become subject to the time limits and work requirements of welfare reform (unless, for example, they are age 60 or older or caring for a child under age 1).

Alternatively, relatives can call the Connecticut Department of Children and Families (DCF) and report the children as neglected or uncared for. If DCF opens a case

and takes custody, and *if* DCF decides to place the children with the relative as a “certified relative caregiver,” then the relative will receive between \$658-\$746 per month per child (depending on the child’s age), as well as additional supportive services, such as respite care (see Table 4). The “price” of greater financial support, however, is a great one for many relatives: DCF assumes legal custody of the children and the relative loses the authority to make decisions about their medical care and education, even including such mundane tasks as signing permission slips for school field trips.<sup>1</sup>

## Method

### Study Participants

The participants in the survey were 56 relative caregivers appointed by the New Haven Probate Court to be the legal guardian of at least one child in their care. The guardians had responded to an invitation from the New Haven Probate Court and the Children’s Trust Fund to apply for a monetary grant under the “Kinship Fund.” Grants ranged from \$50 to \$250 per child and up to \$500 per family. The grants were to be used for *children’s* basic needs (e.g., school clothes and supplies, coats), health needs (e.g., glasses, dental care), enrichment (e.g., sports fees and equipment, tutoring) and development (e.g., clothing to mark developmental milestones, photographs). The invited applicants were pre-selected by the Court on the basis of indigency (i.e., having been granted a waiver of Probate Court fees when they applied for guardianship). Because of this method of selection, the study sample cannot be considered representative of all Probate Court-appointed guardians in the state.

Sociodemographic data for the participants are presented in Table 1. Virtually all of the interviewed guardians (98%) were women; one male completed the survey. The guardians were predominantly African-American (79%); 16% were Latino, and 5% were Caucasian. The average (mean) age of the guardians at the time of the interview was 51.

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<sup>1</sup> Subsidized adoption, a third option for securing financial assistance, requires that the children be in foster care *and* that parental rights be terminated, and many relatives are often uncomfortable with petitioning for the termination of the parental rights of the parent (often, their own child). A fourth option, subsidized guardianship, also requires at least a 12 month stay in foster care for children to be eligible.

3 years (SD=9.6). There were 8 guardians below the age of 40 years, 11 between the ages of 40 and 49 years, 27 between the ages of 50 and 59 years, and 10 were 60 years of age and above.

### Study Procedure

All invited applicants for the Kinship Fund were required to meet with the Probate Court Judge prior to receiving a grant. Guardians were approached while waiting for their appointment with the Judge. They were informed that participation in the survey was voluntary and that a decision not to participate would not effect whether they received a grant or how much they received. Guardians were informed that participation involved answering questions about themselves and the children in their care and their financial situation. They were assured that disclosed financial information would not be shared with state or federal agencies. A few questions concerning the psychological and physical well-being of the caregiver and each child in their care were included in the survey as well. Guardians were informed that the purpose of the survey was to better educate the public about relatives appointed guardians by the Probate Court.

Ninety-five percent of the guardians approached agreed to participate in the survey (3 refused, 56 participated). *All* invited applicants received a grant. The interviews took place in the Probate Court and lasted approximately 30 minutes. Guardians were not compensated for their time. However, information about city and state resources and services that were available to relative caregivers was provided.

## **Results**

### **I. Family Composition**

One-third of the relative caregivers interviewed (18 of the 56 caregivers) were married and living with their spouses at the time of the survey. More than two-thirds

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(68%) reported that there was no one living in the household except the relative caregiver(s) and the children under their care. More than three-quarters of the relatives (77%) were the grandparent of the children in their care, while 19% were the aunt of the children in their care.

On average, the relative caregivers were caring for more than two children: 29% were caring for 1 child, 39% for two children, 12% each were caring for 3 and 4 children, and the remaining 7% were caring for 5 or more children. Together, the 56 families cared for 134 children. At the time of the survey, nearly one in five of the children (19%) were under the age of 5 years.

The relative caregivers were the legal guardians of 129 (96%) of the children. One caregiver was in the process of applying for guardianship of a child, two caregivers had temporary custody through the Department of Children and Families of a child, and one caregiver had guardianship of a teen mother who maintained guardianship of her infant. Forty percent of the children had been living with their relative caregiver since birth. Twenty percent had moved in with their guardians at school age (i.e., 5 years of age) or older. In almost all of the cases (96%), the guardians expected to have guardianship of the children until the children reached the age of 18 years.

## **II. Guardians' Financial Status**

More than one in three of the relative caregivers interviewed (34%) were working (15 full-time, 4 part-time) at the time of the survey (see Table 1). Of the 18 spouses of the relative caregivers, half were employed and all were working full-time. Overall, 24 (43%) of the 56 families had at least one employed caregiver, and 4 (7%) of the 56 families had 2 employed caregivers.

Table 2 presents information on the financial status of all but three of the relative caregivers.<sup>2</sup> If the guardian caregiver or their spouses were employed, they were asked the amount of their *earned* income. Guardians also were asked whether they or the children received a variety of government benefits (e.g., Social Security or Disability benefits, Temporary Family Assistance (TFA), Supplemental Security Income (SSI), Social Security Survivor Benefits, or foster care support from the Department of Children and Families) and, if so, in what amounts. Information on child support and food stamps also was gathered.

**Earned income.** The median annual *earned* income of the households with at least one employed caregiver was \$21,321 (SD=\$15,842; range, \$2,172 to \$65,004).

**Government benefits for relative caregivers.** Five (9%) of the relative caregivers received Social Security benefits and 15 (27%) received disability benefits. Of the 18 spouses, 4 (22%) each received Social Security benefits and Disability benefits.

**Head of household income.** Head of household income was derived by summing the total *earned* and *unearned income* (Social Security, Disability, TFA for herself and her biological children) of the *guardians only*. The median head of household income (not including three households in which the head received TFA for herself and her wards) was \$13,429 (SD=\$14,334; range, \$0 to 65,004).

**Proportion of families receiving government benefits.** Nearly all (96%) of the families received some government benefits for the children in their care. Of the 54 *families* that received government benefits for the children, 41 (76%) received TFA only, 4 (7%) received SSI only, 3 (6%) received Survivor Benefits only, and 6 (11%) received TFA and one other benefit. Of the 47 families that received TFA, 44 (94%) received

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<sup>2</sup> *Complete* financial information for three families caring for eight children was not obtained, so they are excluded from certain analyses but are included in the analyses for which there is data. In one family, the situation was in flux due to two of the three children returning to their parents. In another, the respondent guardian did not know the

child-only grants for the children for whom they were appointed guardians. The remaining 3 guardians who received TFA for themselves as well as their wards were subject to both the 21 month time limit and work requirements of TFA. Guardians of 3 of the 47 families also received TFA for themselves and their *biological* children, and also were subject to both TFA's time limits and work requirements. In addition, one guardian of a child who received only SSI received TFA for herself and her biological children. Less than half of the 56 families (27 families, or 48%) received food stamps.

**Proportion of children in relative care receiving government benefits.**

Overall, 91 (73%) of the 125 *children* on whose families we have specific financial information received TFA, 8 (6%) received SSI, 10 (8%) received Survivor Benefits, and 1 (1%) received DCF foster care support (see Table 3). Sixteen children (13%) received no government benefits for their support. Five (4%) children received child support.

**Annual household income of relative caregivers.** Annual household income was derived by adding the *earned and unearned income* of *all* members of the household. The median annual household income was \$20,925 (SD=\$12,288; range, \$8,628 to \$65,004). This is approximately one-third of the median annual income of Connecticut families with children in 1996 (the most recent year for which this figure was available).<sup>3</sup>

**Per capita income in relative caregiver households.** Per capita income was derived by dividing annual household income by the number of people who lived in the home. The median per capita income was \$5,308 (SD=\$3,202; range, \$1709 to \$16,251), which is one-sixteenth of Connecticut's median per capita income in 1996.<sup>4</sup>

**Proportion of relative caregiver families living in or near poverty.** Counting government benefits, more than half the families interviewed (29 families, or 55%) had a

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specifics about the family's financial situation; and in the third family, the guardian declined to share the information.

<sup>3</sup> The median annual income of families with children in Connecticut in 1996 was \$20,925.

<sup>4</sup> The median per capita income of families in Connecticut in 1996 was \$33,189.

household income that was either at or below the federal poverty threshold. Fully 85% (45 of the families) had income that was at or below 185% of the federal poverty threshold.

### **III. Changes in Guardians' Well-being**

Guardians were asked to rate -- on a 5-point scale from much better to much worse -- their financial situation, work situation, and health since becoming the primary caregiver of the children. Data were gathered on 55 guardians. To simplify reporting, the categories “much worse” and “worse” and “much better” and “better” were collapsed into “worse” and “better.”

**Changes in the guardians' financial situation.** Three-quarters (75%, or 41 of 55) of the relative guardians reported that their financial situation since becoming a guardian was worse. Eighteen percent (10 of 55) of the guardians believed their situation was unchanged, and 7% (4 of the 55) reported their financial situation had improved; obtaining a job was cited as a reason for an improved financial situation. Logistic regression found that relative caregivers' perception of a change in their financial situation was associated significantly with the *number of children they were caring for*, controlling for other variables such as age of caregiver, presence of spouse and annual household income. Specifically, the more children in the relative's care, the more likely the relative reported that their financial situation since becoming a guardian had grown worse (regardless of the actual income level of the guardian).

**Changes in the guardians' work situation.** Nearly 4 in 10 of the guardians (21 out of 55, or 38%) reported that their work situation had worsened since becoming a guardian. Six in 10 (33 out of 55, or 60%) reported that it was the same, while one indicated that it was better. The reasons for the change in work situation were not identified in these interviews. For example, it was unclear whether guardians, since becoming the primary caregiver, were forced to quit a job because they had to care for or could not afford child care, whether their work situation was more stressful now that they

had to juggle work and child care/school schedules, or whether they had to get a job to support the children for whom they now cared. Further study is necessary to elucidate this issue.

**Changes in the guardians' health status.** One quarter of the guardians (14 of 55, or 25%) reported that their health had deteriorated since becoming a guardian. Three-quarters (41 of 55, or 75%) indicated that their health was unchanged. Logistic regression found that relative caregivers' perception of their health status was associated significantly with the number of children they were caring for, controlling for other variables such as age of caregiver, presence of spouse, annual household income and presence of a child under 5 years of age. Specifically, the more children in the relative's care, the more likely the relative reported that their health had deteriorated since becoming a guardian.

#### **IV. Changes in the Well-being of the Children**

Guardians were asked to rate on a 5-point scale -- from much better to much worse -- each child's behavior, health and school performance since the child came to live with the caregiver. Data were gathered on 77 of the 134 children (58%) being cared for by the participating guardians. Of the 57 children for whom data were not gathered, 53 children had lived with their caregiver since birth (and thus were not included since there was no basis for comparison), and data were missing on 4 of the children.

**Behavior.** According to the guardians, behavior improved in nearly 8 in 10 of the children since coming into their care.<sup>5</sup> For 37% (26 children) behavior was reported to be *much* improved while for another 41% (29 children) behavior had improved somewhat. For 20% of the children (14 children) the children's behavior was reported to be the same, while one child's behavior was reported to have become worse.

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<sup>5</sup> Seven of the 77 children are not included in this analysis because the children were very young when the caregiver assumed the parenting responsibility; the guardian reported that it was not really possible to determine whether there had been a change in their behavior.

**Health.** According to the guardians, the health of two-thirds of the children improved since coming into their care.<sup>6</sup> For 27% (19 children) health was reported to be *much* improved while for another 39% (27 children) health had improved. For 34% of the children (24 children) health status had not changed.

**School performance.** According to the guardians, the school performance of two-thirds of the children improved since coming into their care.<sup>7</sup> For 24% (14 children) school performance was reported to be *much* improved while for another 44% (26 children) school performance had improved. For 32% of the children (19 children) school performance had not changed.

## Conclusion

This initial study demonstrates the essential role relative caregivers are playing for very at-risk children – and at what personal cost. The fifty-six relative caregivers interviewed in this study, who have assumed guardianship of children through the New Haven Probate Court, are caring for 134 children who would otherwise likely be in foster care. The facts that 40% of the guardians have cared for their wards since birth, and that 96% expect to care for the children until they reach the age of majority, strongly suggest that for many, this role involves a long-term and labor-intensive commitment.

Eighty-five percent of these relative caregivers are living in, or near, poverty, yet – despite these financial challenges – are making a significant difference in the lives of the children in their care. Since coming into relative care, the behavior of nearly 8 in 10

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<sup>6</sup> Seven of the 77 children are not included in this analysis because the children were very young when the caregiver assumed the parenting responsibility; the guardian reported that it was not really possible to determine whether there had been a change in their health.

<sup>7</sup> Eighteen of the 77 children are not included in this analysis because the children were not of school age when the caregiver assumed the parenting responsibility; the guardian reported that it was not really possible to determine whether there had been a change in their school performance.

of the children has improved and the health and school performance of two-thirds of the children has improved. The love and stability of a relative home clearly matters. Yet it is also clear that it comes at significant cost to the relative caregiver. As the number of children in the home *increases*, relatives report significant *declines* in their financial well-being and health status.

This initial study begins to illustrate why it is important to provide additional financial and other supports to relative caregivers that are comparable to those that are provided to foster parents. Our knowledge of the real parameters of their experience, however, remains sketchy. Further, and a more extensive, study of this population of caregivers is needed to fully understand how best we can support them.

### **Acknowledgments**

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