

A Resource Guide for Relatives as Parents

In Washington State



ADSA Aging & Disability
Services Administration

Acknowledgments

The *Relatives as Parents Resource Guide, Fifth Edition*, is a project of the Washington State Relatives as Parents Program (RAPP) and the DSHS Kinship Task Force. The printing of this booklet was made possible from the generous support of the Washington State Children's Administration and Aging and Disability Services Administration.

This fifth edition would not have been possible without the tremendous assistance from: Galen Main who worked tirelessly updating every website address and phone number; Debbie Bennett, Tom Berry, and Jody McInturff who provided critical help in editing; and Miriam Bearse, Kathy Blodgett, Sonja Dordal, Nancy Dufraine, Amy Ellings, Sandy Jsames, Nancy Koptur, Lonnie Locke, Claire Phinney, and Phoebe Sade Anderson who provided new and updated materials.

We also thank the many contributors to this *Resource Guide* including: Pam Grigsby Jones who compiled the information and Christine Parke who edited the first edition; *Starting Point Resources for Children with Special Health Care Needs in Washington State* by Children's Hospital and Regional Medical Center; *Relatives Raising Children* by Marianne Takas; *Grandparents Raising Grandchildren – A Legal Guide for Washington State* (1998) and *Mediation: Should I Use It?* by the Northwest Women's Law Center; *Help for Grandparents Raising Grandchildren with Developmental Disabilities* by the New York State Office for the Aging; *Kinship Care Solutions (KCS) Project Manual*, King County Bar Association, and *First Steps, Getting Started Raising Relatives' Children* by the Minnesota Kinship Givers Association.

And finally, this *Resource Guide* is dedicated to Janet Sainer, a passionate leader and champion who initiated the Relatives as Parents Program through the Brookdale Foundation. She deeply inspired a huge number of individuals, local communities, and states to step up to the plate to do better to support relatives who are raising children. Although Janet passed on in June 2007, her legacy will always live on.

This publication is dedicated to the tens of thousands of courageous and deeply committed grandparents and other relatives in Washington State – who give so much of themselves so that the children they raise may live safely and with a sense of belonging and family.

Hilari Hauptman, *Coordinator*
Relatives As Parents Program
Aging and Disability Services Administration
Washington State Department of Social and Health Services (DSHS)

Fifth Edition
June 2008

Introduction

If you are a relative raising a family member's child, you are not alone! Over the past 25 years, the number of children being raised by someone other than a parent has increased dramatically. These children are being raised by their grandparents or other relatives such as aunts, uncles, older siblings, or persons who have close ties to the children, such as tribal members and godparents. The 2000 census indicated that 35,341 grandparents in Washington State were the primary caregivers for their grandchildren.



Kinship caregiving is the full-time nurturing and protection provided for children who must be temporarily or permanently separated from their parents. Kinship caregivers (also referred to by other names, such as Grandfamilies or Relatives as Parents) come from all walks of life, income levels, and races.

While each family's situation is unique, kinship care families share the critical need for information, services, and resources. You may feel overwhelmed if this is a new role. The financial, emotional, health, and legal concerns can be challenging. Finding answers to questions, attempting to locate services, and dealing with social service agencies and the legal system can be a long and frustrating process.

We hope the information in the Relatives as Parents Resource Guide provides you with the answers you are seeking.

Throughout the Resource Guide, we use the term "child" to mean your grandchild, niece, nephew, sibling or other relative. We use the term "parent" to mean the person who is raising this child as the grandparent, aunt, uncle, sibling, or other relative.

Additional Printed Resources Available to Help You

In addition to this Resource Guide, a number of other printed and web-based resources can provide you with useful information.

- *Consent to Health Care for the Child in Your Care: A Kinship Caregiver's Guide* (DSHS 22-1119x) This brochure explains a new law passed by the 2005 WA State Legislature which spells out a relative's rights and responsibilities.
- *Did You Know about the Following Services and Supports for Grandparents and Relatives Raising Children* (DSHS 22-1120x). This four page pamphlet provides a selective list of various resources, benefits, and support services available to relatives raising children. Available in English and Spanish.
- *Education Advocacy Guide for Caregivers-Supporting School Success for Children and Youth in Care* (DSHS 22-1192) This guide can help caregivers better understand what education advocacy is and what is expected of students from preschool to high school.
- *A Guide to Child Support Services for Relative Caregivers* (DSHS 22-1143) describes what services the DSHS Division of Child Support (DCS) can provide to you if you are taking care of a relative's child. Available in English and Spanish.
- *Relatives Guide to Child Welfare Services* (DSHS 22-492x) provides valuable information to relative who are working with child protective services or child welfare services and discusses services children and their caregivers may be eligible to receive. Available in English, Cambodian, Chinese, Hmong, Laotian, Russian, Spanish, Tagalog, and Vietnamese.

If you would like printed copies of any of these publications, **go to the Washington State Department of Printing website at www.prt.wa.gov and click on "General Store" (look under booklets or brochures) or e-mail at fulfillment@prt.wa.gov, phone at (360) 586-570-3062, or fax at (360) 586-6361.** You will need the publication number which is on the back page of a publication in the format DSHS 22-###(X) and listed above. Make sure to include your mailing address. You can also read and download any of these publications (many available in multiple languages) on the **Kinship Care in Washington State website at www.dshs.wa.gov/kinshipcare.** Click on "Publications/Links."

We wish you and your family the very best!

TABLE of Contents

Acknowledgments	i
Introduction	ii
Section I: Child Development, Health and Safety Needs	1
Child Development	1
Parenting Information	2
Special Needs and At-Risk Children	3
Washington’s Guide to Immunization	8
Nutrition and Healthy Eating Tips	9
Medical Check Ups.....	11
Safety: Car, Home and Personal Safety	13
Staying Informed.....	16
Section II: Child Care and Educational Needs	17
Child Care – Determining What is Right for You and Your Child	17
Enrolling in Public School	19
Supporting Your Child’s School Experience	20
Interactions with Teachers, Counselors, and School Staff.....	21
Section III: Common Issues Facing Older Children	25
Alcohol and Drug Abuse	25
Coping with Parent Visits	28
Internet Safety Tips.....	30
Gangs and Violence.....	31
Sex and Youth.....	32
Communication Tips	32
Culture and Tradition	33
Section IV: Special Issues Facing Children in Kinship Care	34
Understanding Children’s Issues	34
Communicating with Children about Their Parents	36
Relationships with Incarcerated Parents.....	37
Children and Grief	40

Section V: Financial Assistance	43
DSHS Services and Support	43
TANF “Child Only” (Non-Needy) Grant	44
Child Support Services	45
Other Financial Assistance for Kinship and Relative Caregivers	48
Insurance and Medical Coverage	50
Federal Benefits	52
Housing Assistance	54
Benefits Checkup	55
Dealing with Social Service Agencies – A Few Tips	55
Kinship Navigators	56
Section VI: Native American Community Resources	57
Section VII: Legal and Custody Issues	60
Legal Resources	60
Paternity Establishment	62
Negotiation and Mediation	63
Obtaining Needed Papers and Documents	65
Consent to Health Care for the Child in Your Care	66
Keeping Documentation	68
Legal Options in Washington State	69
Section VIII: Coping Strategies	71
Taking Care of You	71
Relatives as Parents Support Groups	72
Respite Services	73
Coping with Challenging Emotions	74
Appendices	76
A. Community Services in Washington State	76
B. National Resources for Relatives as Parents	78
C. Selected Bibliography	80

SECTION I

Child Development, Health and Safety Needs

It's been 26 years since Susan and Tom had a young child in their home and now they're caring for their 3-year-old grand child.

Mary and Jim made a decision not to have children of their own, and now they have a 7-year-old to raise.

Helen is a single, 36-year-old, career-minded woman, who is now planning a future for an 11-year-old nephew.



Many relatives raising children are concerned that they lack the knowledge and ability to raise a child. Some are raising a child for the first time. For others, it has been so long since they parented that they simply don't know current parenting issues. A lot has changed. New practices and new research may affect the way we raise and care for children.

Child Development

Every child is a unique individual, who thinks, looks, acts, and grows in a different way. Helping to raise a child to his/her potential as a human being is a very difficult and rewarding experience in the best of circumstances. Raising another's child may pose more challenges and extra worries. Children may have experienced traumatic events, frequent moves, and little or no stability in their lives. Physical and emotional traumas or a mother's substance abuse during pregnancy will impact developmental stages for children. Because of these and other factors, children frequently experience developmental delays and need special parenting to be successful in life.

Parenting Information

A parenting class or support group can make a real difference, even if you have raised children before. Sharing ideas, talking with others about raising children, and finding the support you need to do the best job possible is helpful. See Section VIII about how to find a support group in your area.

ParentHelp123 is a program of WithinReach that helps Washington State families connect to food and health resources and locate resources such as parenting classes, child care, in their local communities. **ParentHelp123** also contains health information on topics including childhood immunizations and child development. **Visit www.parenthelp123.org/.**

The **Family Help Line**, sponsored by Parent Trust for Washington Children, provides a safe place for people to talk about their parenting concerns and to receive the support they need to become better parents. Anyone can call the Family Help Line and speak with a trained family support coach. Service is immediate, confidential, and free. **Call the Family Help Line at 1-800-932-4673** (Statewide) or **visit their website at <http://www.parenttrust.org>.**

WSU Cooperative Extension has a parenting website with extensive resources for parents and caregivers at **<http://parenting.wsu.edu/>**. Click on “Resources” button in the gray column at the left of every page to access resources.

Another particularly helpful resource is the **National Network for Child Care**. It is part of the Children, Youth, and Families Education and Research Network sponsored by the National Cooperative Extension System and the United States Department of Agriculture. Go to the “Articles & Resources” button at **www.nncc.org** and find many resources on all aspects of child rearing.

Resource Family Training Institute provides training opportunities to relative and kinship caregivers and foster parents. Children who experience abuse and/or neglect or whose parents cannot care for them can be a challenge to caregivers. The Division of Licensed Resources (DLR) within the DSHS Children’s Administration (CA) has extended its training to relative and kinship caregivers. You can find out more information by **contacting your assigned Division of Children and Family Services (DCFS), the DLR Regional Training Coordinator, or at <http://fosterparent.dshs.wa.gov/>.**



Special Needs and At-Risk Children

James was very anxious as he waited for the report from the doctor on his grandson. Dean was only 5 years old and had already been exposed to more than any child should be. His father was in jail for selling and using drugs and his mother had disappeared. James wanted to do everything he could for Dean, but if Dean didn't "settle down", he knew he would need to find some professional help for them both.

Children with special needs include those with physical or mental disabilities, emotional/behavioral problems or are considered at-risk for developing disabilities. Children who may have been exposed to drugs and alcohol are considered at-risk and often develop symptoms that require further assessment and treatment.

There are many programs that can help families who are concerned about their child's walking, talking, crawling, vision, speech, hearing, or comprehension skills. Early intervention services exist for infants, toddlers, and preschool age children.

Dealing with Emotional or Behavioral Problems

Every child has problems at some time. How do you know whether your child's problems are serious enough to warrant help? When evaluating your child's emotional or behavioral problems, you and the professionals working with your child should concentrate on two questions:

1. Is this behavior normal for my child's stage of development?
2. Are any of his/her main life areas affected including family and home, community and neighborhood, school, peers, and learning behavior?

Warning Signs

If your child exhibits any of the following warning signs, you will want to get help from a professional in evaluating and treating him/her.

- Marked personality change over time
- Confused thinking
- Prolonged severe depression, apathy, or extreme highs and lows
- Excessive anxieties, fears, suspiciousness, or blaming others
- Withdrawal from society, unfriendliness; abnormal self-centeredness
- Denial of obvious problems; strong resistance to help
- Thinking or talking about suicide
- Numerous unexplained physical ailments, marked changes in eating or sleeping patterns

- Anger or hostility out of proportion to the situation
- Use of alcohol or drugs
- Hoarding behavior, involving food, clothing, etc.
- Change in school performance
- Growing inability to cope with problems and daily activities such as school, job, or personal needs

Mental Health Services

For crisis mental health services, look in the telephone book (usually inside the front cover) for a Crisis Clinic or Crisis Line. You can also ask the telephone information operator or call **1-800-446-0259 (the Mental Health Division/ DSHS-Consumer Affairs Line)** and ask for help in locating services. You can also **visit their website at www.dshs.wa.gov/mentalhealth/.**

Community Connectors are parents and caregivers raising children with emotional, behavioral, or mental disorders. They provide support; share information; and assistance with problem-solving issues and information on local community resources. For more information, **call 1-800-446-0259 extension 3.** **A Parent’s Guide to the Public Mental Health System** is a booklet written by parents for parents. To order, **call 1-800-446-0259, extension 3.**

To make an appointment for community-based out-patient mental health services, look in the Yellow Pages under “mental health” or “counseling”. Fees are often on a sliding scale basis and Medical Coupons may be accepted.

Families affected by mental illnesses can receive support from two organizations in our state that provide family support, educational events, web site information, recommended reading, and much more. **Advocates for the Mentally Ill-NAMI Greater Seattle** is a Seattle-based group that addresses unmet needs of mentally ill individuals and their families. **Contact Nami Greater Seattle at 206-783-9264 or 1-800-782-9264 or visit their website at www.nami-greaterseattle.org.**

Where to Get Help

Pediatricians can do a thorough medical examination and can talk with you about whether your child’s behavior is appropriate for his/her current age.

Schools: Anyone can request, in writing, that your child’s school complete an evaluation on your child’s need for special education services.

Mental Health Professionals: psychiatrists, psychologists, and other certified professionals can do a comprehensive evaluation of your child. This kind of evaluation may also be helpful to have in addition to other evaluations. Contact your local mental health center, or seek referrals from your child’s school counselor, your clergy, or a friend or relative who has had counseling.

Statewide Action for Family Empowerment of Washington (SAFE WA) is a consortium of 12 organizations that provide information, support groups, advocacy, assistance with systems navigation, and training to parents and caregivers raising minor children with emotional, behavioral, or mental disorders. Most will provide a Parent Partner to attend meetings with parents and caregivers. **Contact SAFE WA at 1-866-300-1998.**

The **Division of Developmental Disabilities (DDD)** is part of DSHS. Individuals who meet DDD eligibility criteria may qualify for a variety of services and supports offered through the division. DDD assists individuals with developmental disabilities and their families to obtain services and supports based on the individuals' preferences, capabilities, and needs.

DDD believes that services and supports should promote everyday activities, routines, and relationships common to most citizens. DDD uses state and federal funds to provide or purchase supports and services for eligible persons and their families. Services include case management and may include the Infant Toddler Early Intervention Program (ITEIP) (see below), family support, respite, home and community support, medical services, employment, and community access. Resources are limited and needed services may not always be available. Services may vary from area to area. To receive direct information from DDD, call your local region or the **DDD state office at 360-725-3413 (or 360-902-8455 TTY) or visit the DDD website at www.dshs.wa.gov/DDD/services.shtml.**

Infant Toddler Early Intervention program (ITEIP) – ITEIP is a program within DDD. Anyone who has a concern about their child's development (ages birth to 3 years) may request a screening/evaluation to see if the child is eligible for ITEIP services. ITEIP can be accessed through referral to a local Family Resources Coordinator in the county where the child lives. A Family Resources Coordinator (FRC) will help the family with concerns about their child's development, coordinate screening/evaluation services, and if eligible, assist the family to access early intervention services. They can also provide the family with information about early childhood development and connections to other community services. The FRC will coordinate early intervention services for an eligible child and family while they are in ITEIP. For program information and to locate the Family Resources Coordinator in your county, **contact the Family Health Hotline at 1-800-322-2588 for the name of the local FRC or visit the ITEIP program website at www.dshs.wa.gov/ITEIP/.**

Children with Special Health Care Needs Program (CSHCN) is a federal and state program for children who have a chronic illness or developmental concerns. CSHCN offers referrals, service coordination, information, and financial help for some medical care.

There are CSHCN coordinators in county public health departments. Eligibility depends on family income and child's health status. **Call the Children with Special Health Care Needs Program at 1-800-322-2588** (ASK – Answers for Special Kids Line) to find your local CSHCN coordinator or **go to the website at <http://www.doh.wa.gov/cfh/mch/CSHCNhome2.htm>**.

You can also call your county public health department. Look in the Government section of the White Pages in your phone book under “County listings” or “Health Services/Centers.”

The Arc of Washington State is a non-profit organization that promotes the education, health, self-sufficiency, self-advocacy, inclusion, and choices of individuals with developmental disabilities and their families. The Arc supports the following programs: Parent to Parent, the Family Educator Partnership Project, and community Advocacy Coalitions. **Contact The Arc of Washington State at 360-357-5596, from within Washington State only 1-888-754-8798, or visit their web site at www.arcwa.org**.

Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effect (FAE)

FAS is a birth defect syndrome caused by the child's mother consuming alcohol during pregnancy. FAE children have some of the complications associated with maternal alcohol consumption. Not all children exposed to alcohol in utero are born with FAS/FAE, but these children are at-risk for FAS or other physical, cognitive, or behavior problems. Early FAS/FAE diagnosis can protect against secondary disabilities such as mental health problems, dropping out of school, trouble with the law, and substance abuse.

Five satellite clinics around Washington State and a core clinic site at the University of Washington in Seattle provide diagnostic and referral services through the **Fetal Alcohol Syndrome Diagnostic and Prevention Network (FAS DPN)**. The Network serves people of all ages (toddlers to adults) who have been parentally exposed to alcohol and have concerns about their learning or behavior. **Call the Fetal Alcohol Syndrome Diagnostic and Prevention Network hotline at 206-598-7666** and your request will be forwarded to the clinic closest to you. You can learn more about them **on the web at <http://depts.washington.edu/fasdpn/>**.

Fetal Alcohol Syndrome Community Resource Center located at **www.come-over.to/FASCRC/** links to an on-line support group, books for children and adults, and other helpful information.

The National Organization on Fetal Alcohol Syndrome (NOFAS) publishes several valuable guides for caregivers raising children with FAS, entitled *Living with Fetal Alcohol Syndrome: A Guidebook for Families and Caregivers*. It can be **ordered on their website at www.nofas.org or by calling 202-785-4585**.

Journey Through the Healing Circle is a video series that helps parents and families deal with fetal alcohol syndrome. This award winning series is presented using traditional Native American storytelling techniques. Developed by DSHS the series is available from local libraries across the state. It is also available from the **Foster Parent Training Institute at 1-800-662-9111**. Books accompanying the video, as well as an order form for the video, can be **downloaded from the website at <http://fosterparent.dshs.wa.gov/>**.

Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD)

ADHD is a diagnosis applied to children and adults who consistently display certain characteristic behaviors over a period of time. The most common behaviors fall into three categories: inattention, hyperactivity, and impulsivity. ADHD is the most commonly diagnosed behavior disorder in young persons, affecting an estimated three to five percent of school-age children.

For more information and resources related to ADHD and ADD, visit the **National Alliance for the Mentally Ill (NAMI) website at www.nami.org/helpline/adhd.htm**, the **National Resource Center on ADHD website at www.help4adhd.org**, or the **National Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) at 1-800-233-4050 or go to their website at www.chadd.org**. For local resources, including local chapter and support group listings, **go to the Northwest CHADD website at www.nwchadd.org**.

Children and Domestic Violence

Even after an abusive parent has left, children may still be profoundly affected by the domestic violence they have witnessed or been the victim of. Children who experience violence in their homes may display a range of emotional and behavioral problems, physical disorders, and academic problems.

If a kinship caregiver believes that they or the children in their care are in immediate danger of violence, they should call 911 immediately. If a caregiver believes that domestic violence is likely to occur, they should **contact the Washington State Coalition Against Domestic Violence (WSCADV) for assistance at 1-800-562-6025 or online at www.wscadv.org**.

In some situations, the caregiver may want to consider asking a local court for a “protective” or “restraining” order, which makes it illegal for the person named in the order to come near the caregiver and/or the child. WSCADV can provide referrals to qualified domestic violence attorneys and free legal service providers.

For additional information and resources on the impact of domestic violence on children, **contact the Family Violence Prevention Fund at 415-252-8900 or www.endabuse.org**.

Children with HIV/AIDS

HIV/AIDS may affect children differently than it affects adults. It is essential that a relative caregiver raising a child with HIV/AIDS have current, accurate information about effective treatment options, services, and new techniques for daily care. Caregivers may also want help in talking to child care providers or teachers about their child's illness. **Contact the National Pediatric and Family HIV Resource Center at www.thebody.com/treat/children.html or the Elizabeth Glaser Pediatric AIDS Foundation at 1-888-499-4673 or www.pedaids.org.**

Family Support

There are many family support services that help parents and relatives who have a special needs child in their life. The following are just a few:

Parent-to-Parent Support Program provides emotional support and resource information about disabilities and community resources to parents when they learn that their child has a disability, illness, or chronic health condition, through a statewide network of Parent-to-Parent coordinators. **Call Parent to Parent at 1-800-821-5927 or visit their website at www.arcwa.org/parent_to_parent.htm.**

Sibling Support Project is a national project for brothers and sisters of persons with special needs. SibShops are workshops that provide peer support for sibling's ages six to thirteen. Workshops are also available for grandparents of children with special needs. For more information, **call Sibling Support Project at 206-297-6368 or visit their website at www.siblingsupport.org.**

Washington's Guide to Immunization

(Source: Washington Department of Health)

It is important to make sure all your child's immunizations are up-to-date. The following table provides guidelines from the Washington State Department of Health about the immunization needs of children, birth through 18 years. The vaccine is listed at the age or age range (colored bar) it should be given. If a dose is missed, get it as soon as possible. Talk with your doctor, nurse, or clinic if you have questions about immunizations.

For more information on immunizations, **visit the Washington State Department of Health Immunization Program CHILD Profile website at www.doh.wa.gov/cfh/Immunize**

For the most current recommended immunization schedule for children, adolescents and adults, **visit the Centers for Disease Control and Prevention website at www.cdc.gov/vaccines/recs/schedules/default.htm.**

Immunization On Time For The best Protection From 16 Diseases

For more details on childhood (0-6 yrs) and adolescent (7-18 yrs) schedules, visit <http://www.cdc.gov/vaccines/recs/schedules/default.htm>.

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19-23 months	2-3 years	4-6 years	7-10 years	11-12 years	13-18 years
Hepatitis B	Hep B		Hep B	Hep B*	Hep B										
Rotavirus			Rota	Rota	Rota										
Diphtheria, Tetanus, Pertussus (whooping cough)			DTaP	DTaP	DTaP	DTaP♦	DTaP					DTaP		Tdap	
Haemophilus influenzae type b			Hib	Hib	Hib*	Hib									
Pneumococcal			PCV	PCV	PCV	PCV					PPV*				
Inactivated Poliovirus			IPV	IPV	IPV							IPV			
Influenza (flu)					Influenza (Yearly)* <small>Children under 9 and receiving flu vaccine for the first time should get 2 doses.</small>										
Measles, Mumps, Rubella							MMR						MMR		
Varicella							Var						Var		
Hepatitis A							Hep A (2 doses)					Hep A (series)*			
Meningococcal												MCV4*		MCV4	
Human Papillomavirus															HPV (girls 3 doses)

How to read this chart:

The vaccine is listed at the age or age range (gray bar) it should be given. If a dose is missed, get it as soon as possible.

* This dose is optional, depending on the vaccine used. Ask your doctor, nurse, or clinic for more information.

♦ The 4th dose of DTaP may be given as early as 12 months. Ask your doctor, nurse, or clinic for more information.

* These vaccines are for certain high risk groups. Ask your doctor, nurse, or clinic for more information.

* Provisional recommendation for children 6 months through the 18th birthday was made in March 2008; expected date of publication for this recommendation is June 2008. Previous recommendation was for children 6 months through the 5th birthday.

Nutrition and Healthy Eating Tips

Children learn from watching adults. If you practice good, healthy eating habits, it will be much easier for your child to do so as well. Establish a consistent eating routine. Keep healthy snacks on hand for your child and limit the amount of junk food and sweets. Read food labels carefully. The following tips are taken from The Dietary Guidelines, developed by the United States Department of Health and Human Services and the United States Department of Agriculture.

Food groups to encourage each day

- **Focus on fruits.** Eat a variety of fruits – whether fresh, frozen, canned, or dried – rather than fruit juice for most of your fruit choices.
- **Vary your veggies.** Eat more dark green veggies, such as broccoli, kale, and other dark leafy greens; orange veggies, such as carrots, sweet potatoes, pumpkin, and winter squash; and beans and peas, such as pinto beans, kidney beans, black beans, garbanzo beans, split peas, and lentils.

- **Get your calcium-rich foods.** For kids aged 2 to 8, the recommendation is 2 cups of milk or an equivalent amount of low-fat yogurt and/or low-fat cheese (1½ ounces of cheese equals 1 cup of milk) per day. If you or your children don't or can't consume milk, choose lactose-free milk products and/or calcium-fortified foods and beverages.
- **Make half your grains whole.** Eat at least 3 ounces of whole-grain cereals, breads, crackers, rice, or pasta every day. One ounce is about 1 slice of bread, 1 cup of breakfast cereal, or ½ cup of cooked rice or pasta. Look to see that grains such as wheat, rice, oats, or corn are referred to as “whole” in the list of ingredients.
- **Go lean with protein.** Choose lean meats and poultry. Bake it, broil it, or grill it. And vary your protein choices – with more fish, beans, peas, nuts, and seeds.
- **Choose healthful fats.** Fats are high in calories but necessary in our diets. Limit saturated and trans fats which are linked to heart disease. Avoid foods containing hydrogenated or partially hydrogenated fats. Choose fats that are high in monounsaturated and polyunsaturated fats such as: olive and canola oil, olives, nuts and seeds, fish, and avocados.
- **Sodium and Potassium.** Choose and prepare foods with little salt and consume potassium rich foods such as fruits and vegetables.

Find your balance between food and physical activity. Regular physical activity is important for your overall health and fitness. It also helps you control body weight by balancing the calories you take in as food with the calories you expend each day. Children and teenagers should be physically active for 60 minutes every day, or most every day.

For more information about the Dietary Guidelines for Americans link to www.health.gov/dietaryguidelines/ or to www.mypyramid.gov. And for parents to learn more about how-to add more fruits and vegetables in their child's diets, go to www.fruitsandveggiesmorematters.org.

Food and Nutrition Resources

Special Supplemental Nutrition Program for Women, Infants and Children (WIC) accepts children under the age of five who are income eligible and have a nutritional risk. WIC provides nutrition education, counseling, and food vouchers to pregnant mothers and eligible children. During the summer months, WIC participants have access to locally grown fresh fruits and vegetables through local farmers markets (see below). Relative caregivers can apply for this service for their children. For more information **call Women, Infants, and Children (WIC) at 1-800-841-1410 or visit the WIC website at www.doh.wa.gov/cfh/WIC/Public.htm.**

The Child Nutrition Program of the U.S. Department of Agriculture (USDA) provides free, or at a reduced price, healthy, nutritious meals through the National School Lunch and School Breakfast Programs. **Contact your local school or the Office of Superintendent of Instruction at 360-725-6200, or visit their website at www.k12.wa.us/childnutrition** to find out if your school participates in the USDA school meals programs.

The Farmers Market Nutrition Program (FMNP) provides locally grown fresh fruits and vegetables for WIC families and lower-income seniors and strengthens local economies and communities through the promotion of Washington State agriculture. WIC FMNP is part of the WIC Program. To be eligible for the FMNP, a family must be participating in the WIC program. The Senior FMNP is part of the Senior Nutrition Program which provides nutrition to lower income adults over age 60. To be eligible for the FMNP, seniors must be 60 or older and have an annual income at or below 185% of the Federal Poverty Income. **Contact WIC FMNP at 800-841-1410, Senior FMNP: at 800-422-3263, or visit the FMNP website at <http://nutrition.wsu.edu/markets>.**

For **information about food resources**, contact the statewide **Family Food Line at 1-888-436-6392**. The Family Food Line can provide information about the state's Basic Food program, free summer meals for kids, local food banks, and the Senior Farmers Market Nutrition Program.

Other helpful resources for information regarding food, special diets, and eating healthy include your local county extension office, hospitals, schools, and local public health departments.

Washington State University has publications on nutrition that can be **ordered through your county extension office or on-line at <http://pubs.wsu.edu/>**. You will find the on-line catalog under the Educational Materials button. You can also reach the **WSU Publications Center at 1-800-723-1623**. Local extension offices can be found in the government pages of the phone book under "county offices". Look for Cooperative Extension in the listing.

Medical Check-ups

It is important for babies and children to have regular medical check-ups to make sure they are growing right and are healthy. These visits are a good way for your grandchildren to be screened for hearing or vision problems. Infants up to 18 months should have frequent check-ups, children from 18 months to school age should have a check-up once a year, and children of school age should have a check-up every other year. The following are some useful pointers:

- make sure your children know to tell you about any pains, even in his/her teeth and gums.
- teach children good health habits like brushing their teeth, and remember that they learn from you – so take care of yourself as well!

- to help your children understand why healthcare is important, read books about going to the doctor or dentist.
- make sure that vision and hearing tests are done during your children's regular medical check-ups.
- if you notice that your child is having trouble seeing or hearing, make an appointment with a healthcare provider.

A new Washington State law, Substitute House Bill 1281, enacted in 2005 allows kinship caregivers to provide informed consent for the children they are raising to health care providers. For more information, go to page 60.

Oral Health – Keeping Your Children's Teeth Healthy

Did you know that good dental care begins before you can even see the child's first tooth? Infants need to have their gums wiped with a soft, damp cloth after each feeding. Never put a baby to bed with a bottle – the sugar in milk, formula, and juices can cause tooth decay before a tooth appears.

Teething. Children begin getting their first tooth sometime between four to nine months. Drooling, fussiness, and the need to chew on everything are usually signs of a baby who is teething. Pay close attention to what your child puts in his/her mouth while they are infants, and be sure to have lots of appropriate toys for them to chew on.

Arrange an appointment with a dental professional by the time your child is one year old. This helps your child have a good first experience, find problems early and start dental visits early.

The children's health care plans offered by the State of Washington, including the **State Children's Health Insurance Program (SCHIP), Medicaid, and the Basic Health Plan**, all cover dental services. Check with your dental professional to confirm he or she is a provider under the particular health plan you have.

The State Health Care Authority (HCA) maintains a website that provides a list of all the **Community Clinics** in Washington that provide dental (and medical) care for anyone covered by Medicaid. **Visit www.chs.hca.wa.gov/clinics.html**, select your county, and you can get the address of the clinic nearest to you. The entry will indicate if the clinic accepts Medicaid patients for dental or medical or both.

Access to Baby and Child Dentistry Program (ABCD) provides dental care for children from birth to age six who receives Medicaid. Ask the County Health Department if there is an ABCD program where you live. **Contact 1-800-322-2588 (Ask Line) or visit www.abcd-dental.org/.**

If your child needs more complicated dental services that the clinic listed for your area can not perform, such as root canals, oral surgery, endodontic, or orthodontic work, **contact Connie Mix-Clark at 360-923-2753/360-725-3455 or e-mail her at clarkcl@dshs.wa.gov**. Connie may also be able to tell you about which private practice dentists in your area accept Medicaid patients.

Safety: Car, Home, and Personal Safety

Karen and Bill are on their way to pick up the grandchildren at the police station. As they are leaving, Karen looks around the house. It is in no way “childproof”. All her decorating accents and her comfortable living area now seem like accidents waiting to happen.

Keeping children safe may seem like a full time job, and often it is. Here are some tips.

Car Safety

- If your car has a passenger air bag, avoid carrying a child in the front unless the vehicle has an air bag shut-off switch that has been turned off.
- Never leave young children alone in a car, even for a few minutes.
- Always replace a child’s car seat that has been involved in a car crash.

Washington Child Restraint Law

On July 1, 2002, Washington’s new Child Restraint Law went into effect. This law, also known as the Anton Skeen Act, is one of the strongest child restraint laws in the nation. It requires the use of booster seats for older children.

Key provisions of the law:

Children under the age of 16 years must be restrained in a vehicle according to the following steps:

- 1 year of age or under or weighing less than 20 pounds – a rear facing infant seat.
- 1 - 4 years old or 20 - 40 pounds or 4 - 6 years old or 40 - 60 pounds – a booster seat with a lap and shoulder belt.
- 6 years old or 60 pounds and greater – a seatbelt or a booster seat with a lap and shoulder belt.

Doctors and safety experts recommend that children ride in booster seats until the lap and shoulder belt fit right, usually when they are at least 4’9” tall, or around 8 years old or 80 pounds.

As of July 27, 2003, tickets cost \$101.00 for each improperly restrained child, including if the child safety seat harness is not buckled, or if the older child has put the shoulder belt behind his back. Shoulder belts must be used with booster seats. If you do not have shoulder belts in your car, you are exempt from the requirements of the new law.

For information about choosing or correctly using a child care seat or booster, **visit www.800bucklup.org/** or **<http://depts.washington.edu/booster>** or **call the Safety Restraint Coalition at 1-800-282-5587.**

Home Safety

- Never let children play with plastic bags.
- Prevent poisoning by keeping all cleaning supplies, chemicals, medicines, and cosmetics out of reach or in childproof cabinets.
- Install smoke and carbon monoxide detectors and check the batteries twice a year.
- Hold a mock fire drill with your child – plan escape routes and arrange for a safe meeting place outside in case of fire.
- Never leave small children alone in or near water, including a bathtub.
- Make sure there are always life jackets to use in and around water.
- Keep all important numbers by every phone in the house including: ambulance, fire, your doctors, the nearest hospital's emergency room, and the nearest poison control center.
- Simmer food on the front burners and boil on the back ones. Turn all pot handles inward.
- Plug all electrical outlets with outlet covers when small children are around.
- Take a class in CPR, so you'll be better able to handle a situation if a child is choking or not breathing. Contact your local Red Cross for more information on classes.
- Bathrooms must have a lock that can be opened from the outside, in case a child locks him/herself in by accident.

If poisoning occurs or if you need information **call the Washington Poison Center at 1-800-732-6985 or 206-526-2121 or TDD 206-517-2394 or go to www.wapc.org.**

For tips on child proofing or more information on poisoning in children see the **Poison Prevention website at www.safebaby.net/childproofers/poisoning/.**



Personal Safety

Teach your children the following personal safety rules:

- memorize his/her full name, address, and telephone number, including area code and state.
- how to use the telephone, how to make calls to the operator, and how to dial emergency numbers.
- never to enter a stranger's car or home.
- to keep the doors locked and only admit people approved by you into your home.
- how to use a code word. A code word is a special word that only you and your children know. It is used if you need to have another person pick up your children so that they can verify that the person is safe.
- he/she is safer playing and walking with friends.
- never to wander away from you or your yard unless they tell you and receive permission.
- to tell you if something strange or uncomfortable happened to them.
- never to give information about themselves (including home telephone number) to anyone except those people approved by you.

*Pamela Wilson, a grandmother in Seattle who is raising a granddaughter developed a handbook called SECURE A KID™ Safety Education Fingerprinting Activity Handbook, to provide the information and tools that can help keep kids safe. The booklet is designed and personalized for each child in times of emergencies or crises. **Phone Outskirts Press at 888-672-6657 or visit www.outskirtspress.com/secureakid for more information.***

Reporting Abuse or Neglect

In Washington, anyone suspecting abuse or neglect of a child (or vulnerable adult) can **call the DSHS toll-free line 1-866-END-HARM (1-866-363-4276) at any time of day or night.** For more information, **go to the End Harm website at www.dshs.wa.gov/geninfo/endharm.html.**

The **Office of Family and Children Ombudsman (OFCO)** is an independent agency located in the Governor's Office. The agency's mission is to handle grievances and complaints regarding any state agency responsible for children in state care or regarding any agency that provides services to children and families due to allegations of abuse or neglect.

This office assesses whether the state agency action or failure to act violates state law or agency policy and whether the action was unreasonable and leaves a child at risk of harm. It does not advocate on behalf of the complainant. It does intervene, and presents recommendations to the agency. **Call 1-800-571-7321, or 206-439-3789 (TTY), or visit the OFCO web site at www.governor.wa.gov/ofco.**

Staying Informed

Child Advocacy Central is a website for caregivers and professionals in Washington State. Here you will find information to help you navigate the child welfare system with confidence. You will learn how the system works for Washington's children, how to learn more, what to do if you are concerned about a child, and how to secure financial assistance for those in need.

Visit www.childadcentral.org.

Legislative Hotline will help you stay informed on laws affecting your child's care and education. It is available for you to keep current on these and other issues. Hotline operators will pass on messages to the governor and to your legislators. They can also tell you what legislative district you live in and who your legislators are, help you locate legislative bills, tell you the status of a bill and send you a copy, and provide other information. **Call the Legislative Hotline at 1-800-562-6000 or visit their website at www.leg.wa.gov/wsladm/default.htm.**

Finding DSHS services is a quick and easy web navigation tool for people needing information about social and health services in Washington State, including those which can benefit relatives raising children and their families.

Visit www.dshs.wa.gov/basicneeds.

Kinship Care in Washington State (DSHS) website provides information for relatives raising children on services, resources, legislation, support groups, legal resources, online applications and related readings.

Visit www.dshs.wa.gov/kinshipcare/.

SECTION II

Child Care and Educational Needs

Finding childcare wasn't how Bev had planned to spend her lunch hours. She knew her sister Susan was having difficulty with the children after their father died but she didn't think the situation was that bad.

When she received a call from Child Protective Services saying that the children had been abandoned, she knew she

had to act fast. There was so much to do...and she couldn't take time away from her job. Bev needed to find a place for the children to stay while she worked, and she needed that place by Monday morning.



Child Care – Determining What is Right for You and Your Child

Finding child care is a concern for parents and caregivers. There are several different types of child care:

- **In-Home care** – a child care provider provides care in your home.
- **Family childcare** – care is being provided in a caregiver's home. You will want to be sure the provider is licensed.
- **Child care centers** – care is provided in a facility that is licensed by the State.

Finding the Right Type of Care

There are many pros and cons to the different types of child care. You may find it helpful to make a list of your child care needs (do you need care on a regular basis, drop in, during regular working hours, at odd times) and what is offered by available child care providers (hours open, individualized attention, trained workers, planned activities, etc.) to help you decide which is best for your family. Talk to other parents, grand-parents, co-workers, etc. Ask them if they know

the place you are considering. Ask lots of questions. You may want to visit prospective child care providers unannounced.

You Have A Choice was recently created as a special website for caregivers seeking child care in Washington State. A consumer information guide is available which gives parents tips on choosing child care as well as other relevant information at

<http://www.del.wa.gov/publications/licensing/docs/YouHaveAChoice.pdf>.

Washington State Child Care Resource and Referral Network is a network of 17 community-based, private, nonprofit, child care resource and referral agencies across the state. Contact them to find licensed child care in your community that matches your needs. For more information on child care and other family support resources, including financial assistance, **call the Washington State Child Care Resource and Referral Agency at 1-800-446-1114, or visit their website at <http://childcarenet.org/>.**

For additional guidance on choosing the right care situation for your child, **contact Child Care Aware at 1-800-424-2246 or www.childcareaware.org, or the National Child Care Information Center at 1-800-616-2242, or www.nccic.org.**

Working Connections Child Care (WCCC)

This program helps families pay for child care expenses while the parent/caregiver in the family is working, looking for work, or working and going to school. Some rules of the program are different for relatives raising children. For example, even if only one adult of a relative caregiver couple is working, they are eligible for a WCCC subsidy. Note that WCCC is not designed to provide respite for caregivers, nor is WCCC subject to time-limits – it is not a “welfare” program. To find the specific program rules, **visit the website at www.del.wa.gov/care/help/connections.aspx or <https://fortress.wa.gov/dshs/f2ws03esaapps/onlinecso/WCCC.asp>.**

The WCCC subsidy is available for eligible children from infant to twelve years of age and up to eighteen years if the child has special care needs. An enhanced rate may be available to a child care provider if a child of any age has special needs. All families must pay a portion of the child care cost, called a “co-payment.” The minimum co-payment is \$15 per month. Generally, only the income of the child is counted when the child is residing with a non-parent adult; exceptions are when the adult has court documents to indicate financial responsibility or the child has been adopted.

Parents or caregivers choose their own child care provider. WCCC pays providers in licensed family child care homes or child care centers. Even if your provider is unlicensed, a WCCC subsidy may be available.

Early Childhood Education

Early childhood education programs offer a range of activities to help pre-school children develop physically, socially, emotionally, and mentally. Activities are based on the children's age and change as children get older. Head Start is a popular, federally-funded program for children ages three to five in lower-income families. Early Head Start offers care for infants and toddlers.

Contact the Early Head Start National Resource Center at 202-638-1144 or www.ehsnrc.org for information about Early Head Start and links to local programs.

Enrolling in Public School

Call your local school district office (listed in the white pages of your phone book) to get the name and address of the school your child will attend. The district office will tell you how to register your child. Schools have forms for requesting past school records and immunizations. School personnel can help you fill out the necessary forms and get documents. Be sure to tell the school staff of your role in the child's life and your commitment to the child.

Enrollment Tips

1. Enroll as soon as possible – a child should not be out of school for more than three days.
2. Contact the school district or your local school for an enrollment packet. You can also request written enrollment/admission policies.
3. A school district may request paperwork like the birth certificate and immunization history. Keeping these handy makes enrollment easier.
4. Enroll even if you are missing some of the paperwork. The student is allowed to enroll and complete the paperwork as quickly as possible after they have started school.

Schools are required by state and federal law to take steps to help enroll out-of-home students, including students in relative care. These steps may include:

- Waiving the requirement for parental signatures
- Arranging for vaccinations at a local clinic instead of requiring a written record of immunization
- Providing a homeless liaison to work with families to work out enrollment issues

The Department of Health Immunization Program can help you get proof of immunization. **Call them at 360-236-3595, or go to www.doh.wa.gov/cfh/immunize.**

The Office of Superintendent of Public Instruction (OSPI) is the state agency that oversees schools. To locate contact information for your local school district, visit **www.k12.wa.us/maps/sdmainmap.aspx** or call **360-725-6000 or 360-664-3631 TTY.**

The McKinney-Vento Homeless Assistance Act Allows youth experiencing homelessness to stay in their original school when they have to move and provides transportation to make this possible. Youth qualify if they live in short-term relative care or short-term foster homes. They also qualify if they are in a temporary group home, receiving home, residential center or shelter and, in some situations, respite care. If you know your child is with you temporarily this act applies to you; not all youth qualify.

The first step is to speak with your local school district's Homeless "McKinney-Vento" Liaison. Call your district to find out who the liaison is there, and give the liaison the name and birth date of your child, as well as the details of the situation, so they can determine whether your child qualifies for protection under this Act. If they qualify, they should start school immediately. If your child's situation is determined not to be eligible, there is a process for appealing that decision. For more information go to www.k12.wa.us/HomelessEd/.

For a list of Homeless Liaisons by School District go to:

www.k12.wa.us/HomelessEd/pubdocs/HomelessLiaisonContactList.doc.

Supporting Your Child's School Experience

Being in school is not easy these days for any youngster. Think of all the new kinds of information kids have to learn now that you did not when you were in school. And there are so many more ways to learn. Life, in general, is more stressful now and this stress filters down to the classroom and schoolyard.

You are probably aware that most families, even in the most ideal settings, experience problems as their children go through school. You may face these as well. Knowing what to expect as your child enters or goes through school, and knowing what resources are available, will help you work through any school-related issues. Be a strong advocate for you and your child.

- Talk positively about the school experience.
- Show interest in what your children are learning.
- Help your children apply learning to everyday life – let them teach you!
- Avoid the "grade trap" – learning is what's important, not just grades.
- Develop realistic expectations.
- Provide a quiet place and time for homework.
- Offer to help with homework but don't do it for them.
- Read with your children.
- Develop a consistent and effective discipline plan.



Interactions with Teachers, Counselors, and School Staff

Sylvia kept postponing the visit with her nephew's fifth grade teacher. How could she tell the teacher that the reason she is not involved in Marty's homework is because she doesn't understand it? Sylvia was not only intimidated by the schoolwork, but she also feared embarrassing her nephew at school.

Here are some tips for working with school staff:

Get to know your child's teachers. Inform teachers that you are raising your relative. Teachers can be more helpful when they are aware of family situations. Let the teacher know you want to be informed of your child's progress and set up a system of documentation for this. Keep the lines of communication open between you, your child, and the teacher.

Attend open houses and meetings. Try to attend all parent-teacher conferences. Schedule personal meetings with teachers and counselors to talk about your child, even when there is not a problem. If you cannot make face-to-face contact, arrange for a telephone conference.

Get help with homework if needed. Teachers may be able to get your child extra help with homework or tutoring. This may take place at the school or in the community. Let them know if you are having trouble finding time or simply do not understand the homework well enough to help your child.

Do not be embarrassed or ashamed if you do not understand your child's homework. Many adults have trouble with reading, writing, math, computer work, and other subjects. Remember, it is in the best interest of your child to ask for, and receive, help.

Individual Education Plan (IEP)

An IEP is created for children and youth ages three to twenty one with special needs. The written plan spells out the kinds of services, therapies, and/or accommodations that will be made to help your child in an educational setting. Every child receiving special education services has an IEP. Parents or guardians should be involved in the process and should receive their own copy of the IEP in order to track progress and to maintain home records. If you need records regarding your child's special education services, **contact the Special Education Coordinator for your school or the school district's Special Education Department.**

The IEP meeting must occur within 30 days of the child's evaluation and be held at a mutually agreed upon time and place, but could be a conference call.

The IEP team

A variety of people must be a part of the IEP Team and should be present at all IEP meetings.

- The student, if old enough to understand what is going on in the meetings, should participate in the discussion and planning for their educational goals and services.
- Parent, guardian, or surrogate parent.
- At least one of the student's regular education teachers.
- A district representative with knowledge of resources and disabilities.
- An individual who can interpret evaluation data.
- Others as appropriate, including transition services.

The IEP team will talk about:

- Results of evaluations or tests taken by the child.
- Strengths of the child.
- Services needed and how they will be provided.
- The current level in school.
- The child's placement, whether in a self-contained setting, part-time in a resource room, or in-class.

An IEP includes:

- The child's current level of educational performance.
- Specific one-year educational goals for both general and special education classes.
- Documentation of how progress will be measured and reported.
- Description of the services, accommodations, assistive technology and modifications to be provided and dates when services will begin.
- Any modifications the child will have for taking state or district tests like the WASL.

Education Advocacy Programs

The Office of the Education Ombudsman (OEO) for Washington State is located within the Governor's Office and provides the following services to students, families and communities.

- Information about Washington's public education system.
- Referrals to education-related services from other agencies and organizations available to students from kindergarten to high school.

- Training for families and communities on how to get involved in education and understand the public school system. Workshops about conflict resolution strategies, and culturally relevant ways to involve families and communities in school, student and families' education-related rights, and more are available.
- Support to Resolve Conflicts. OEO helps families and school staff work out disagreements that affect student learning, either by informal coaching or mediation when further help is needed.
- Free publications designed to help families understand and navigate the K-12 education system are available in multiple languages from the below website or by calling their office to have publications mailed to you.

You can find out more by calling toll free 1-866-297-2597 (interpreters available) or at www.waparentslearn.org.

The Children's Administration (CA) contracted with Treehouse to provide the statewide **Education Advocacy Program**, which assists children and youth, social workers, and caregivers with difficult education issues. Education Advocacy Coordinators are stationed in CA offices in each region to provide advocacy interventions for eligible children and youth who have been identified as having educational challenges or barriers to school success to overcome. Types of advocacy offered.

Consultation is available for state-involved (DCFS) children in out of home care. If the youth in your care has a DCFS caseworker, contact them to make a referral for direct (on-site) advocacy from your local advocate.

Information and Referral Assistance for children living with relative caregivers and who do not have a DCFS social worker. Education advocates are available to remotely, via telephone, mail, and/or email consultation, provide educational information, local resources, or referrals to an appropriate agency or service. Examples include resources on alternative education programs, community tutoring services, and Special Education laws and protections.

Education Advocacy Resource Guides

Education Advocacy Guide for Caregivers – Supporting School Success for Children and Youth in Care (DSHS 22-1192)

This guide can help caregivers better understand what education advocacy is and what is expected of students from preschool to high school. See page iii for ordering information.

Special Education and the Law – A Legal Guide for Families and Educators published in 1998 is available by contacting **the Office for the Superintendent of Public Instruction at 360-725-6000 or TTY 360-664-3631 or at www.k12.wa.us/SpecialEd/pubdocs/special_education_law_guide.pdf**.

Another valuable resource is the handbook *Make a Difference in a Child's Life: Educational Advocacy – A Manual for Helping Children and Youth Get What They Need in School – Advocating for Children and Youth Who are Out of Home or In Foster Care*. **To register for a free advocacy workshop and receive the manual free, call Team Child** (a legal advocacy program for youth) **at 206-322-2444**. You can also access the manual on the website: **<http://teamchild.org>**. The manual was made in partnership between Team Child and Casey Family Programs.

Mediation in Special Education

When parents and school personnel disagree about the education program for a student (age 3-21) in special education, either party may request mediation. Mediation helps parents and school personnel resolve conflicts and clarify issues. If your child has disabilities and you need assistance with mediation, **call the state sponsored Mediation in Special Education at 1-800-692-2540 or 206-842-2298**.

Washington Parents Are Vital in Education (PAVE) provides parent training and information, including one-on-one support, training, and resources for parents of children with special learning needs, and workshops (for groups of five or more) on issues related to services in school for children of all ages with special needs. **Contact PAVE at 1-800-572-7368 or 253-565-2266 (voice/TTY) or visit their website at www.washingtonpave.org**.

The Learning Disabilities Association of Washington provides services and support for children and adults with learning disabilities and their families. **Contact 1-800-536-2343 outside of King county or at 425-882-0792 or online at www.ldawa.org**.

REMEMBER ...Schools are providing services to you and your child. They are there to help. Use these resources often!

SECTION III

Common Issues Facing Older Children

Ana and her friends were good children. They did well in school and never got into trouble. Les and Cathy were proud of their child, but still they didn't understand why she needed to dress the way she did – baggy pants, stomach showing and, of all things, a tattoo. This wasn't the way things were when they were younger.

Things are different today. Children are exposed to drugs, alcohol, sex, gangs, and violence at early ages. Your child's history might include some of these experiences. As a result, she/he may not see certain activities or language as inappropriate.

Many relatives are raising children who are developmentally deprived, but socially advanced. For example, a child may have trouble reading on a third grade level but have the survival instincts or "street-smarts" of an older teenager. The events that led up to your child being placed in your home may warrant a special approach.

We encourage you to talk to a counselor or family therapist. Check with your children's school for additional information and for referrals on getting help. Talking with a professional can be very helpful in dealing with children.

Alcohol and Drug Abuse

Today young people are exposed to alcohol, tobacco and drugs early – often in elementary school. The younger someone starts to use alcohol and drugs, the more likely she/he is to develop problem behaviors associated with such use.

The number one reason children give for not taking drugs is that a caring adult does not want them to!



You are in an ideal position to make a difference in your child's life.

- Help your child deal with peer pressure. Be willing to listen and talk about their need to belong and fit in.
- Help your child build positive social relationships. Friendships are very important. Know your child's friends. Be aware of unsupervised situations.
- Help your child learn coping skills to deal with disappointments. Talk with them about sad and angry feelings that arise when things do not work out as planned.
- Help your child build self-esteem. Success achieved through social, academic, or extracurricular activities is helpful. Address learning problems with the child's teacher.
- Identify activities that help them relax and feel good. Music, art, or sports activities can help a child let off "steam" in a healthy way.
- Have honest and open discussions about drugs. Get informed! Let your child know he or she can come to you for help and information.

If your child does make a mistake, help them get back on track. Get help from a well-regarded children's drug treatment program in your area. Early treatment can nip destructive patterns in the bud.

Your continued belief in their ability to make the right choices in the long run will help them internalize the values you are giving them.

Five Reasons Young People Give for Using Alcohol, Tobacco, and Illicit Drugs:

- 1) To feel grownup.
- 2) To satisfy curiosity.
- 3) To fit in and belong.
- 4) To relax and feel good.
- 5) To take risks and rebel.

For more information about drug/alcohol abuse and prevention **call the Alcohol/Drug 24 Hour Helpline at 1-800-562-1240 or visit their website at www.adhl.org/**. Young adults who are experiencing a personal crisis in their lives may contact the **Washington State TeenLine at the same number or at 1-800-722-4222** (for Seattle residents only).

The At-Risk/Runaway Youth Program at the Division of Alcohol and Substance Abuse (DASA) within DSHS provides information and referral to parents or caregivers and youth needing chemical dependency services. DASA's services can be paid for with medical coupons and DASA has "hardship funds" that can help caregivers with travel and lodging expenses while a youth is in treatment. **Contact Ruth Leonard at DASA at 360-725-3742 or at Leonamr@dshs.wa.gov**.

ALA-TEEN for teens and ALA-NON for family and friends are self-help groups based on the Alcoholics Anonymous model. Meetings facilitate connection with others who have similar problems and issues. **Call the 24-hour help line for more information at 1-800-454-8966 or go to www.wa-al-anon.org.**

The Substance Abuse and Mental Health Services Administration (SAMHSA) of the federal Department of Health and Human Services offers a number of resources that would be helpful for relatives caring for at-risk or chemically-dependent youth. **Visit SAMHSA's Alcohol and Drug Information website at <http://ncadi.samhsa.gov> or call 1-800-729-6686.** Check out the *Family Guide to Keeping Youth Mentally Healthy and Drug-Free* found at **www.family.samhsa.gov**.

The Children of Alcoholics Foundation (COAF) is a national non-profit foundation that provides a range of educational materials and services to help professionals, children, and adults break the intergenerational cycle of parental substance abuse. COAF has a special initiative, *The Ties that Bind Parental Substance Abuse and Kinship Care* aimed at kinship caregivers, with fact sheets **posted on their website at www.coaf.org/family/caregivers/kinmain.htm**.

Substance-Abusing Parents

Although there are many paths that lead to children being cared for by relatives, no single issue is nearly as pervasive as birth parents' chemical dependency issues.

First, chemical dependency is a disease, a behavioral health issue, and is treatable. It is not a moral failing and does not make the chemically dependent person a "bad person." In your own thoughts, and in your conversations with your child, focus on the parents' behavior, leaving your own moral/ethical views out of it. Although this may be hard to swallow at times, it is helpful to maintain this stance in your role as alternate caretaker for your child.

Second, in almost all cases, your child will continue to love his/her birth parent(s) and want to be with them, at least for frequent visits. Support your child's love for his/her parent(s). To do anything else would be cruel and could damage that child's relationship with you. It could also have serious long-term effects for the child, such as reducing the child's ability to form intimate, loving relationships. Again, focus upon the parents' behaviors and the way those behaviors affect their ability to provide the best possible care for the child. And your children always deserve the best!

Third, chemical dependency is treatable, but it commonly takes multiple attempts at treatment to be successful. Support the parents' efforts to achieve sobriety, but remember to protect your child as well. Hold strictly to all conditions the court or treatment provider may impose upon the parent. This includes not allowing a visit if the parent arrives with alcohol on his/her breath or is apparently "under the influence" – even if it is a "special day" such as a child's birthday.

Most treatment programs require clients to abide strictly by such orders. To let the parents “slide” only defeats the parents’ efforts to achieve sobriety and in the end works against the best interests of the child.

And, *fourth*, be sure to deal appropriately with your own and the child’s feelings about the parents’ chemical dependency. The breadth of feelings, which may arise, is nearly endless – including anger, guilt, envy, suspicion, hurt, sorrow. Seek help in exploring these feelings and finding where they come from so that you can work to resolve the internal and external conflicts, which these feelings may create or inflame.

Consult the resources listed in this *Resource Guide* for help with these issues, including **COA (Children of Alcoholics)** groups, Al-Anon, relatives as parents support groups, and individual treatment providers. Many of these resources can work well with older children. For younger (pre-teen) children, whose abilities to identify and give voice to their feelings may be quite limited, peer groups or private therapists working with such methods as “play therapy” may be the best resources.

Here are some specific suggestions about how to relate to substance-abusing parents:

- *Always* treat them with as much respect as you can muster (you’re not a saint, but do your best).
- Do *not* lay “guilt trips” on them. It won’t work to stop their substance abuse and in fact could push them toward relapse, which they then will blame on *you*.
- Love them, despite their substance abuse.
- Be firm with them while communicating to them that you care about their recovery – allow *no* “sliding” on their treatment or court rules.
- *Always* present them to your child as doing the best they can to be loving parents, but who have an illness to conquer.
- Do all you can to communicate openly with the parents no matter how often your efforts to do so are turned aside.
- And always remember that the parents surely are hurting in many ways – guaranteed – no matter what façade they may present.

Coping with Parent Visits

Kevin’s mom said she was coming on Saturday, and that the two of them would go out for pizza and to a movie. He passed up a birthday party for her; and his mom did not even show up.

Last week, Kevin’s mom came to visit but all she wanted to do was use his grandmother’s washing machine and take a nap. Kevin suspected that his mom may have had too much to drink. He said his mom smelled bad. Kevin is tired of waiting for her and he knows she does not act like a mom anyway.

It is important to establish clear rules for the parents. Firmly communicate that they:

- Make arrangements for a visit with only you, not with the children.
- Arrive on time or call to explain their delay.
- Arrive sober. If not, they will not be allowed in the house or to see the children.
- Are to spend time with their children – that is the purpose of the visit.

Tips for Dealing with Parental Visits

- Do not tell the children about the planned visit until a sober parent shows up at the door.
- Have some of the children's favorite games, toys, or books ready for the visit.
- Do not leave the children alone with the parent unless you are sure it is safe to do so.
- If the visit goes well, encourage the parent to visit again and thank them for spending time with the children.
- Record in a journal the date, time, place, and content of the visit.
- Consider using a visitation center or alternative location if you are seeing that the parent's visits produce conflict or stress.



Preparing Children for Unsupervised Visits with Parents

Each year, 350,000 kids are victims of abduction by non-custodial parents. There are a number of things you can do now to help reduce the risk of abduction or, if it should occur, to help get your child safely back home. Practical suggestions include:

- Teach her/him your telephone number complete with area code.
- Practice making long-distance, collect calls.
- Encourage your child to call you anytime they are uncomfortable, day or night.
- Teach her/him how to dial 911, and when to use it.
- Make sure he/she knows your first and last name.
- Have her/him memorize your address.
- Tell her/him you would never agree to their parent or a stranger taking them.
- Let her/him know that you will always keep looking for them if they disappear.
- Pick a code word known only to you and the child.
- Advise her/him never to go with their parents unless you've told them about the visit.
- Designate someone else the child can call if you aren't available.

- Tell her/him if it feels wrong, do not go.
- If the non-custodial parent is not rooted in the community, try to get supervised visits.
- Write down the parents' car license number, color, make, and year.
- Keep names and numbers of the parents' family, friends, and employers.

If you have legal custody, you may:

- Specify in custody orders, "No out-of-state travel without written permission and police or the FBI will be involved if violated."
- File for a denial of passport, if you are concerned the parents may leave the country with the children. **Contact Passport and Advisory Services at 111 19th St, N.W., Suite 260, Washington D.C.** You need to include the court order and case number.
- If your child is taken, call police and your family law attorney immediately!
- Have current photos of the children and both parents to give to the police.
- Write down physical descriptions of children and parents for the police.

Internet Safety Tips

Teaching children how to stay safe while using the Internet is critical. The Washington State Attorney General's Office provided the following tips offered by a variety of experts.

- 1. Communicate.** Talk to your child about the potential hazards of the Internet. Regularly ask them to show you the web sites they visit. Get to know their on-line friends just as you would their regular friends.
- 2. Keep the computer in a central room.** It's harder to keep a secret when parents can regularly see what their child is doing online.
- 3. Use parental controls and/or blocking software.** Most Internet Service Providers (ISP) provide graduated levels of parental controls that block access to certain adult-oriented sites. Many software packages on the market are also effective.
- 4. Maintain access to your child's account and randomly check e-mail.** At first, many parents think this type of access is invading their child's privacy. Think of it another way. If your child received mail from a stranger, would you ask who they were? Would you allow your child to block access to their bedroom 24/7?
- 5. Become computer literate.** Books, classes, and software are available that teach you how to navigate the files on your computer's hard drive. Learning a few simple techniques can show you where your child has been on-line recently.

- 6. Never provide personal information on the “Member Profiles” forms.** Many Internet sites encourage visitors to fill out a profile that contains personal information. Steer away from these profiles. Pedophiles and scam artists often use profiles as a means to find victims.
- 7. Never send family pictures to an unfamiliar location.** If sent to the wrong location, the photos could be used to target your child.
- 8. Report inappropriate on-line activities.** Contact the police immediately if an adult tries to set up a meeting with your child. Report any on-line child pornography to your on-line service and to the **National Center for Missing and Exploited Children at 1-800-843-5678.**

For more information visit the Washington State Attorney General’s website www.atg.wa.gov/internetsafety/kids.aspx or go to www.netsmartz.org.

Gangs and Violence

Tips for Preventing a Child’s Involvement in a Gang

- Make sure your child does not feel they “need” a gang.
- Show your love of the child through hugs, reassurance, etc.
- TALK and LISTEN to your child.
- Supervise her/his activities. Help get them involved in positive activities.
- Get to know the child’s friends and their families.
- Place a high value on EDUCATION. Help them do their best. Do everything possible to prevent them from dropping out of school.
- Talk about values and why you think gangs are dangerous. Discuss the violence, drug dealing, hatred, and the likelihood of law enforcement action that is the result of these activities. Make sure you listen, not just lecture.
- Make sure you are a parent first, not necessarily a buddy.

Warning signs that your child might be involved in a gang or gang activity

- Changes in types of friends.
- Changes in dress habits, such as wearing the same color combination (example: red for Piro/Bloods; blue for Crips; black for Latin Kings, etc.)
- Gang symbols on books or clothing.
- Being secretive about their activities and whereabouts.
- Having extra cash from an unknown source.
- Carrying a weapon (they might say it is for “protection.”)
- Declining interest in school and family.
- Problems with law enforcement.

If you notice these patterns, get help. Intervention may prevent the situation from getting more serious. Contact the school counselor or the police department. Most police departments have juvenile gang specialists. When a child gets into trouble with the law, DO NOT make excuses for their behavior!!!

The National Youth Violence Prevention Resource Center provides information for parents and other caregivers on violence in schools, youth violence prevention programs, teen suicide, and strategies to foster healthy youth development.

Contact the Center at 1-866-723-3968, or 1-800-243-7012 (TTY), or visit www.safeyouth.org.

Sex and Youth

You may have difficulty talking to your child about sexuality. Most parents do. However, kids learn about sex early in their lives. They may get information at school, from their friends, or through television or music. It is important that they get accurate, timely, and appropriate information from you.

Tips to help you talk to your child about sexuality

- Find out your child's questions and concerns.
- Know the facts about sexually transmitted diseases, AIDS, birth control, and pregnancy, or refer your child to someone you trust who does.
- Talk about the things you see on TV or in the community that deal with sexuality. Ask your child how he/she feels about certain topics.

For further information on talking to your children about sexuality issues, **contact Planned Parenthood at 1-800-230-7526 or visit their website at www.ppww.org/index.html**. They have useful booklets such as *Talking with Your Children about Sexuality*. Local health and family planning clinics and counselors at your children's school may offer additional information and resources.

Communication Tips

Good communication creates a win-win situation for both children and their caretakers. Learning good communication skills helps children (and adults) develop confidence, feelings of self-worth, and good relationships with others.

- Demonstrate good listening skills when you speak with your child. Give your undivided attention when your children want to talk to you – don't read, watch TV, fall asleep, or make yourself busy with other tasks.
- Practice listening and talking – talk with your children about school, friends, and how they feel about things.
- Respect your children. If you talk to your children as you do your peers, they will be more likely to tell you when things are right or wrong in their lives.
- Praise your children for doing things right. Praise builds a child's confidence and reinforces communication. Unkind words tear children down and teach them that they just aren't good enough.

- Children are never too old to be told they are loved. Saying and hearing “I love you” is important at any age.
- Remind them of your rules. Just saying “no” is not good enough. Younger children often need reminders.

Culture and Tradition

Family rituals and traditions provide a sense of security and predictability in a child’s life, especially when there has been a great deal of instability in a child’s family. The child may enjoy creating their own ritual or giving ideas for family rituals. Rituals help family members develop an identity and a sense of belonging. These traditions develop memories that can last a lifetime. Special foods on certain nights, bedtime and wake up routines, birthdays and holidays, all lend themselves to family rituals and traditions. The hairstyles, dress, and language of today’s children and teenagers might try the patience of adults for whom cultural traditions are important. Grandparents and other relatives need to be sensitive to their children’s need to look, dress, and act like others their age.

SECTION IV

Special Issues Facing Children in Kinship Care

Ann says her grandchildren seem to have many emotions that her now adult children never experienced when they were growing up. Ann is trying to sort out and identify their feeling so she can do the best job she can to help them.



Understanding Children's Issues

Because of what has happened in their lives, children not being raised by their biological parents and being cared for by kin or friends of the family may experience a variety of emotions.

Abandonment

Young Scott was left at the neighbors, and his mom never returned. Scott's grandma came to get him, and brought him to her house. Scott was very scared that he would lose his grandma and grandpa, too. At first, he would not let them out of his sight. Scott even became very nervous when they went into the bathroom. He thought his grandma and grandpa might disappear down the drain. He does not know where his mom is, and he has heard nothing from her. Scott does not know if she will ever come back for him.

Grief and Loss

Billy had just made a new friend in his neighborhood when Billy had to move to his aunt's house. He was even on a soccer team, and now he cannot play. Billy's mom just packed him up one night and left him at her sister's house. She forgot to pack Billy's favorite bear and his pillow. To make it worse for Billy, at least in his eyes, his aunt, who used to let him get away with stuff before he lived with her, makes Billy go to bed on time and complete his homework before he is allowed to watch TV.

Low Self-Esteem

Little Andrea wonders what she did wrong. She thinks she must be really bad if her own mom does not want her. Andrea wonders if she is stupid or if something else is wrong with her. What particularly upsets Andrea is that her mom is keeping her new baby, but not Andrea.

Fear and Insecurity

Marcus lays awake at night, worrying that his mom will not ever come back for him. At the same time, Marcus worries that she will return for him. What will happen then? Marcus is getting used to not being hungry, and he does not miss the beatings. He also worries about what will happen to him if his aunt gets sick or goes away. Where will he go?

Anger

Sam punched his grandma today. He cannot explain what came over him. Sam said he felt like he would burst if he did not punch someone. His grandma was there, and it was easy to take out his anger on her. Marcus feels terrible about what he did. He loves his grandma, and knows she did not deserve it. Marcus is really mad at his mom; but he cannot show his anger to her because she is not there.

Confused Feelings

Jenny says she hates her mom but, at the same time, she misses her very much. Jenny wants to go home, but she does not want to leave where she is now living. Jenny wonders if her mom could move in with her grandparents and her. Sometimes, Jenny questions if they are keeping her from her mom. But, Jenny knows her grandparents are very good to her and love her a great deal.

Jenny also gets confused by other feelings, because her mom's boyfriend used to touch her in ways she did not like. When Jenny thinks about that, she gets real mixed up inside. She wishes she could get those thoughts out of her head.

Common Behaviors of Children in Kinship Care

- School difficulties (poor grades, difficult behavior).
- Does not pay attention for long, cannot concentrate.
- Will not let the caregiver out of sight, clings to the caregiver.
- Reverts to babyish behavior like thumb sucking and bed wetting.
- Will not sleep alone or with the light off.
- Eats too fast, too much, or hides food.
- Takes care of brothers and sisters like a parent should.
- Behaviors are often worse after a parent's visit.
- Exhibits inappropriate sexual behavior.

Tips for Helping Children

- Give them affection the child can count on.
- Provide regular meals.
- Have a set bedtime routine.
- Give the child structure so they know what to plan on.
- Reassure the child you will not leave him/her.
- Let the child know they are safe.
- Allow the child to talk about their feelings.
- Help the child understand they are not to blame for the situation.
- Give positive reinforcement and praise.
- Let the child know all feelings are okay, even mixed-up feelings.
- Let the child know you, too, have confused feelings sometimes.
- Reward the behaviors you want to see again.
- Be clear about what is expected.
- Catch the child being good and praise that behavior.
- Let them know you will always love them, even when they are mad or angry.

Through the Eyes of a Child is a useful series of nine fact sheets for grandparents raising grandchildren (birth to age eight) on child development, family relationships, communication, and the importance of contact with birth parents. For free copies or to read or download, **visit the University of Wisconsin Cooperative Extension website at www.uwex.edu/relationships/index.html.**

Communicating with Children about Their Parents

Joe is at a loss with what to tell his grandchildren about their parents. The children seem to idolize their parents, despite what the children have suffered at their parents' hands. Joe does not want to badmouth the children's mom and dad, but neither does he want to lie to them.

Children who live with grandparents or relatives usually have strong feelings about their parents. Grandparents/relatives who build a good relationship with the children's parent(s) will have more success in getting the child to open up about their feelings.

Children love to play and often can play out their feelings. Activities that can help a child to open up about their feelings including: walks in the park, board games, baking together, playing with a doll house, building with blocks, play dough projects, and drawing.

Reading together is another activity that can draw a child and an adult closer together and build trust and a sense of belonging so the child will share feelings. There are many excellent award-winning books.

Ask a librarian to suggest a few books on your child’s reading level that you can read to and with the child. Ask for books that address the feelings of loss, separation, anxiety and fear.

Older children and youth like to watch movies. Movies that you preview for appropriate content can be good discussion starters. Look for wholesome movies that deal with parent-child relationships, loss, or separation. Make some popcorn and watch the movie together. After the movie spend some time discussing the movie, talk about how it made them feel, and how it made you feel.

When talking to the children, consider the following guidelines:

- Do not lie to children.
- Tell the truth, but tell only as much as the child really wants to know and can understand.
- Never bad-mouth the parent when the child is around.
- Explain the parents’ problems as kindly as you can.
- When children ask those tough questions, it is okay to make such statements as, “I don’t know”; “I don’t know where your mommy is”; or “I don’t know when Dad is coming back.”
- If a parent is a drug user, talk about it by making such statements as, “Your dad uses drugs, and that makes him too sick to take care of a little girl.”
- If a parent does not show up for a promised visit, nurture that child with comments, such as, “I know you feel bad because Mommy didn’t come, but you’re safe with me” or “Sometimes Daddy’s sickness makes it hard for him to remember.”
- Find something – anything – good you can truthfully say about the parent.
- Always reassure the children that the situation is not their fault.

Relationships with Incarcerated Parents

Many grandparents and other relatives are raising children because their parents are in prison or jail (incarcerated). Incarceration presents many challenges for kinship families. In addition to the daily tasks of raising children, caregivers also find themselves responsible for making sure the children maintain a healthy relationship with their incarcerated parent(s). Because the isolation of incarceration can make this relationship very difficult, kinship caregivers may need support from organizations that have a special understanding of this situation. Children with incarcerated parents often also need specialized support, and may benefit from mentoring.

There are services available at DSHS and from other agencies and groups to provide support and help families meet their needs. **To learn more, go to www.dshs.wa.gov/incarcerated.**

Supportive Programs from Washington State Agencies

The Department of Corrections (DOC) has a “Friends and Family” program that plans family events and activities at DOC prisons. Information and a copy of “**The DOC Guide for Family and Friends of Incarcerated Offenders**” may be found on their website at www.doc.wa.gov/family. They also have family services available when you have a relative under community supervision. For more information about those services call the family services specialist in the region in which your family member is incarcerated: Liz Weinandt (southwest Washington and peninsula) **360-725-8761**; Michelle Kaiser (central and northern western Washington) **206-516-7625** and Kathy Lamb (eastern Washington) **509-363-2737**.

The Office of the Superintendent of Public Instruction (OSPI) has a project that helps address the needs of children of incarcerated parents in the school systems. For more information on that project, **call Greg Williamson at 360-725-6251 or visit their website at www.k12.wa.us/Incarceratedparents**.

Washington State’s Department of Veteran’s Affairs works with some incarcerated parents who are veterans. They also have a project to help children of veteran’s obtain counseling for trauma-related concerns. Children of incarcerated veterans may also be eligible for additional benefits, depending on the discharge status of the veteran. **For benefits information call 1-800-562-2308**. For information on the counseling program, **call the Veteran’s Affairs Crisis Hotline at 1-800-273-TALK (8255)**.

Organizations that Provide Support or Informational Resources

The Family and Corrections Network is a national organization that offers resources and referrals for kinship caregivers and others with incarcerated family members, including a directory of programs in each state. **Contact the Network at 215-576-1110 or at www.fcnetwork.org**.

Center for Children of Incarcerated Parents provides counseling and support services for prisoners and their families, training for incarcerated parents, caregivers of prisoners’ children and professionals working with offenders. **The Center can be reached at 626-449-2470 or at www.e-ccip.org**.

The National Institute of Corrections (NIC) offers extensive information and resources for prison inmates, including a website with a list of state and local programs for female offenders and their children. **The list and other resources are available at 1-800-877-1461 or at www.nicic.org**.

The Offender Preparation and Education Network, Inc (OPEN) provides self-help books and other parent and family resources for offenders and families of offenders. For more information **call 800-966-1966 or visit their website at www.openinc.org**.

The San Francisco Children of Incarcerated Parents Partnership offers training, information and resources. **More information can be found on their website: www.sfcipp.org. Or contact Nell Bernstein at nellbernstein@att.net or PO Box 293, 1563 Solano Avenue, Berkeley, CA 94707.**

Programs that Mentor Children or Assist in Maintaining Contact with Parents

The Girl Scouts Beyond Bars program helps facilitate regular visitation for girls whose mothers are in prison. For more information about this program, which is available in 22 states including Washington, **call 1-800-478-7248 or visit the Girl Scouts website at www.girlscouts.org.**

The Department of Social and Health Services works with the Statewide Mentoring Partnership to help provide mentoring supports to children of incarcerated parents. Mentoring has shown promise in helping children maintain stability and make positive choices in their lives. More information on this partnership can be found at **www.dshs.wa.gov/youthmentoring or call the DSHS Mentoring Administrator at 360-902-7797.**

Big Brothers Big Sisters (BB/BS) has a program to mentor children of incarcerated parents. More information may be found at **www.bbbs.org or call 1-877-700-BIGS (2447).**

Volunteers of America (VOA) also has a state-wide program to mentor children of incarcerated parents. Their program is called Mentoring Children of Promise. More information can be found at **www.voaww.org or call 425-259-3191 x2312 or x2486.**

The Children's Home Society (CHS) has a program providing mentoring to children of incarcerated parents in King, Chelan and Douglas counties, called the Leave No Child Waiting mentoring project. More information can be found at **www.chs-wa.org/2_familysupport.html or call 206-695-3200.**

Mentoring Children of Promise provides mentors for youth ages 4-18 in the Spokane area whose parents are currently incarcerated. For more information, go to their website at **<http://mcp.esd101.net> or call 509-789-3535.**

The Mentoring Children of Incarcerated Parents (MCIP) project in Walla Walla, WA, provides mentoring to children of incarcerated parents. It is operated by the Friends of Children of Walla Walla. More information can be found at **www.wallawallafriends.org/MCIP, or call 509-527-4745.**

The IWASIL Boys and Girls Club provides mentoring to Native American children with incarcerated parents in the King County area, for more information **call the program coordinator at 206-436-1857.**

Rebuilding Families, Inc. helps bring children and families to visit loved ones in the prisons they work in. They also work with incarcerated mothers to help them transition out of prison successfully. **They can be reached at PO Box 2182, Gig Harbor WA 98335 or visit their website for more information at www.rebuildingfamilies.org.**

Matthew House helps provide some transportation to prisons for visitation, and has a hospitality and visitation support house in Monroe, WA. **They can be reached at 360-794-8720.** Their website can be found at **www.matthewhousemonroe.org**.

COMPASS provides mentoring, support groups, video/web visiting, support for communication between prison and home, parent education, re-entry support, information and referrals. **Call 509-527-3077 or write c/o Green Park School, Walla Walla, WA 99362.**

Children and Grief

No parent can protect children from losing someone they love or shield them from mourning that loss. For some children, the loss is caused by the death of a loved one. In other cases, especially for many of the children being raised by kin, that special someone is lost to an illness, prison, or to the streets. No matter what caused the loss, children grieve. Although their feelings may be similar to those of adults, how children express their grief depends on their age, their relationship to the person who is gone, and the part that person played in their lives. How others around them grieve is important as well. Understanding how children grieve can help you to help them.

What Kinship Caregivers Should Know

Grief is more than the feeling of loss. It brings with it disruption and change in the child's life. As a result, children have to cope with: a sense of unreality – which may stay with them for a long time – and a sense of feeling unsafe. Nothing is the same as it was before.

Not only have they lost that special person, but they may also have to go to a different school, move to a different place to live, or take on new responsibilities. Suddenly they are faced with unfamiliar feelings, like fear, anger, and sadness, with which they have little experience. You can meet your grandchildren's needs by remembering the three C's – **Care, Continuity, and Connection.**

Care – your children need to know that someone will support them, feed them, and give them a home.

Continuity – your children need to know that they can trust the person taking care of them, that others around them will not leave, and that there is some stability through these changes in their lives.

Connection – your children need to have their loss acknowledged. They need to be part of the giving and receiving of comfort within the family. They need to talk about the relationship with the person they have lost, both the good and the bad.

Children experience loss differently, depending on their age and stage of development.

Pre-schoolers (ages 1-5) feel the loss but do not have the words to say what they feel. They usually express only one feeling at a time; they can be happy or they can be sad, but not at the same time. They may have lost someone who held them together, directed them in the world, gave them things, and made them feel safe.

Primary school children (ages 5-10) recognize the extent of their loss and are fearful of the changes they see associated with it. For them to feel safe and whole they need to learn that there is some continuity between the past and the present. They lost someone who may have done things for them and with them. Children in this age group can begin to talk about their own needs and feelings, but often they do not think before they act.

Pre-adolescents (ages 10-13) understand more about what they lost, have words for their feelings, and can recognize what the person who is gone did for them and the difference he or she made in their lives. They may try to be more grown up than they really are.

Adolescents (ages 13-18) can reflect on their own behavior and the meaning that the loss has on their lives and the lives of others in the family. They may try to take over the roles and responsibilities of the person they have lost. They can see the person they lost as someone with his or her own needs and who has, in some way, lost something too. They can talk about how their own personal history will be different because of the loss.



How Caregivers Can Help

Most adults feel uncomfortable talking about death or loss, especially with children. We know we can't "fix" their pain, and because we are afraid of saying the wrong thing, we often say nothing. But children often find that the silence of adults deepens their confusion. The availability of a loving parent or other caring adult can be very helpful to children who have suffered a loss. The following tips may help you assist your child cope with a loss:

- **Be honest** – Their lives have been shaken and your honesty will help rebuild their sense of trust.

- ***Be open about your own sorrow*** – Your grief lets your children know that it’s okay for them to cry and be sad. Let them comfort you as you comfort them. Help them find outlets for their feelings, perhaps through sports, arts, or talking.
- ***Encourage questions*** – Understand that children often need to ask the same questions over again as they reach different ages and stages. They may need to hear over and over again what is happening, how you will manage, and the nature of the changes taking place.
- ***Consider an activity that helps children remember and honor the person they have lost*** – They might want to make a scrapbook, a photo album, or a memory box, or tell or write a story. The activities children find helpful change over time as children grow. Let them decide what they want to do and what works for them.
- ***When the loss is through death, use the words “death,” “dead,” and “dying”*** – Using concrete words allow adults as well as children to be open and honest and avoids disguising the truth.
- ***Allow, but don’t force, children to attend funeral services or viewings.*** If they do wish to attend, prepare them for what they will see and hear. If they are primary school age or younger, have someone they trust stay with them during the service to explain what is happening, to comfort them, and to answer questions. Older children and adolescents may be able to take a more active role in these rituals.

Grief is a process, not a single event. The best thing caregivers can do for grieving grandchildren is to give them the tools to cope. Being there for them provides the support they need as they work out new ways to deal with the major and permanent changes in their lives caused by loss.

The National Center for Grieving Children and Families at the Dougy Center in Portland, Oregon, offers useful resources including a directory to locate services in your area and a variety of publications. **The Dougy Center can be reached at 503-775-5683, toll free at 1-866-775-5683, or on-line at www.dougy.org.**

The American Academy of Child and Adolescent Psychiatry offers fact sheets on a variety of issues related to grief and loss **through their website at www.aacap.org/publications/factsfam/index.htm.**

Ann Marie made a modest living, but only enough for herself. Anything left over at the end of the month was used to help cover her mother's care in the nursing home. How could she possibly financially care for her granddaughter who was now living in her home? Her savings were depleted yet she knew others were counting on her.



DSHS Services and Support

DSHS provides services through county offices and may provide cash grants, food assistance, medical coverage, child protective services, respite or therapeutic day care, family reconciliation services, and help with housing costs, and child support services.

Look in the Government section of the White Pages in your phone book under “State”, then under “Social and Health Services”, **or call Constituent Services at 1-800-737-0617 or visit their website at www.dshs.wa.gov**. This number and website will direct you to information about all DSHS programs. DSHS information is available in several languages besides English.

Temporary Assistance for Needy Families (TANF) Cash Assistance

TANF provides financial assistance in the form of a monthly grant to help families care for children. You may be able to get benefits through TANF while you care for a child until they reach age 18 if you are a “relative of specified degree”. You can get TANF for either just the child’s needs (a “child-only” or “non-needy” grant) or for your needs and the child’s needs together (a family or “needy” grant).

A “relative of specified degree” includes parents and the following relatives by blood, marriage, or adoption: siblings, first cousins (including first cousins once removed), nephews, nieces, and persons of earlier generations (including aunts, uncles, and grandparents) as shown by the prefixes of great, great-great, or great-great-great. Half relatives of the above listed relationships can also be considered “relatives of a specified degree”.

If you are not related to the child, but are a court-ordered guardian or custodian, you can get benefits for the child only. Non-related adults acting “in place of the parent” (in loco parentis) may also be eligible.

To apply for benefits, you must complete an application (in-person or on-line), sign over child support rights to DSHS (see Child Support section), and complete an interview (in-person or by phone). To apply in-person, **locate your local Community Service Office (CSO) by calling 1-800-865-7801 or on-line at <https://fortress.wa.gov/dshs/f2ws03esaapps/onlinecso/findservice.asp>**.

To apply on-line, go to https://fortress.wa.gov/dshs/f2ws03esaapps/onlinecso/introduction_1.asp. Whether you apply in-person or on-line, you can apply for cash, medical, food assistance, and child care at the same time, individually, or in any combination.

TANF “Child-Only” (Non-Needy) Grant

If a child’s parents do not live in the home and the child lives with a “relative of specified degree”, court ordered guardian, or custodian, or other non-related adult, the person caring for the child may apply for TANF benefits for the child only. DSHS counts the income and resources of just the child when they determine if the child is eligible for benefits. There are no “WorkFirst” participation requirements or time-limits for child-only grants. In order to be eligible, children between the ages of 16 and 18 must be in school.

For information specifically about TANF child-only grants, **visit https://fortress.wa.gov/dshs/f2ws03esaapps/onlinecso/Non_Needy_Relative_Grant.asp**.

Relatives applying for child-only TANF grants should expect to be asked for the following information. If you need assistance getting any of these documents, let your caseworker know.

- Proof of the child’s age, such as a birth certificate, baptismal record, or school document.
- Proof of the relative’s relationship to the child – in many cases, the caseworker can get this information from public records, but it is advisable to bring in any documentation you have. For example, if you have a birth certificate for the child showing their parents’ names, then you just need to establish your relation to one of the parents.

- Social Security Number for the child.
- If the child has any income or resources of their own, these must be reported and documented as well. (Remember that for child-only grants, the caregiver's income or resources are irrelevant, and you should not be required to report or document this information.)

TANF Family (Needy) Grant

The TANF family grant is available for a “relative of specified degree” who wants financial help for the child and themselves. DSHS counts the income and resources of the relative and the child when they determine if the family is eligible for benefits.

When a relative gets TANF with the child, the relative must participate in the WorkFirst program and the family is generally limited to 60 months of cash benefits in their lifetime. Extensions beyond 60 months are available in some cases. This lifetime limit does not apply to food assistance or medical benefits.

Child Support Services

Even though you may be caring for your relative's child in your home, the child's parents are still financially responsible unless or until their parental rights are terminated by a court. This means that if you receive public assistance (in the form of a TANF grant, medical assistance, or foster care assistance) on the child's behalf, the Division of Child Support (DCS) will automatically provide services. If you are afraid that pursuing child support might be harmful for you or the child in your care, you can claim “good cause.”

Division of Child Support Services (DCS)

DCS can provide the following child support services.

- ***Establishing paternity*** so that the child has a legal father. This process can help develop the child's medical and family history, and help the child qualify for public or private programs such as Social Security or other dependent benefits. For more on Paternity Establishment see Chapter VII.
- ***Establishing and collecting child support.*** DCS will locate an existing order (divorce decree) or enter a support order if none exists. DCS sets support obligations based on a parent's ability to pay. If circumstances have changed, the child support order may need to be modified. DCS then works to collect child support.
- ***Providing medical support.*** DCS will attempt to have the parents cover the child on their own medical insurance.

For information on all DCS services, **call 1-800-442-KIDS or visit the DCS website at www.dshs.wa.gov/dcs.**

Public Assistance Cases

When you get a public assistance grant and/or medical assistance for a child in your care, you assign your right to receive child support and medical support to the state. “Assigning your support rights” means that you give the state the right to collect and keep support owing for the child, subject to certain limitations.

Starting October 1, 2007, DCS began passing through to the family a certain amount of child support collected, which is not counted as income for purposes of determining the grant amount. DCS will pass through up to \$100 per month for a family with one child on TANF, and up to \$200 per month for a family with two or more children on TANF. If the child still lives with you after you terminate public assistance, DCS will send you the child support collected for that period.

You must cooperate with the child support process to be eligible to receive most public benefits. When you apply for TANF or Medical Assistance, you can request “good cause” not to collect child support if you believe DCS services will cause harm to you or to the child in your care. Talk to your TANF/medical worker about claiming “good cause”. If the CSO determines that the risk of harm is too great, DCS will not even open a child support case.

The CSO may ask you for, or help you obtain, supporting evidence, such as:

- birth records, medical records, police records, or other records about the safety claim;
- information about adoption proceedings;
- your sworn statement if no other proof is available.

Nonassistance Cases

You may find that taking care of a child presents not only an emotional and living-arrangement impact, but a financial one as well. You may decide not to apply for TANF or Medical Assistance or to become a foster parent. You can still apply for and receive DCS services. DCS calls this a “nonassistance case.” In a non-assistance case, you receive the child support payments while the child is in your household. You may request that DCS close your case at any time, and may also ask to reopen the case later. If you have never received AFDC, TANF or Tribal TANF on behalf of a child, your case may be subject to a \$25 annual fee. **Visit the DCS web site at www.dshs.wa.gov/dcs/** to learn more about the annual fee.

Foster Care Cases

When DSHS Children’s Administration places a relative child (grandchild, nephew/niece, etc) with you, it is referred to as a “relative placement”. Whenever a child is placed in foster care, federal law requires that a referral be sent to DCS, to begin enforcing the parents’ child support and/or medical support obligations.

A foster parent may request that the Children’s Administration find “good cause” not to refer the case to DCS, if it is in the best interests of the child not to pursue child support. Good cause reasons in foster care cases include, but are not limited to, domestic abuse, the child was conceived as a result of incest or rape, the child is developmentally disabled, adoption proceedings are pending in court, or financial hardship by paying child support would delay or prevent family reunification. In foster care cases, DCS provides the same services described on page 45 for TANF or medical assistance cases.

If you are licensed as a foster home, you will receive financial and medical help from Children’s Administration for the child placed in your care. In that case, you are not eligible for TANF or TANF-related Medical assistance for that child. Child support collected while a child is in foster care does not go to the licensed foster parent directly, but to the State to reimburse foster care money expended for the child. If child support exceeds the monthly costs of care, the excess is put in a trust fund to be used in the best interests of the child as determined by the Children’s Administration. To find out more, **ask your Child Welfare Worker about the Office of Accounting Services (OAS) Trust Fund.**

DCS Can Help the Child’s Parents

If the child’s parents cannot afford to pay the child support they owe, they should contact their DCS worker. Child support amounts and payment plans can usually be modified to reflect the parent’s circumstances, but the parents must work with DCS and provide the information needed to make that decision. Situations such as being unemployed or working full-time but at low wages may be reason to adjust amounts owed or the schedule of payments. If the parent’s child support debt seems unreasonable or overwhelming, a DCS Conference Board may help to write off part or all of the debt due to hardship and/or inability to pay.

In addition, if the parent is receiving disability benefits, sometimes there are dependent benefits available for the child. These dependent benefits, when paid to the child’s caretaker (or to the state in TANF cases), are treated as payments on the parent’s child support obligation. Let DCS know if the child’s parents receive any kind of benefits.



Other Financial Assistance for Kinship and Relative Caregivers

Foster Care Reimbursements

To receive foster care reimbursements, the relative needs to become a licensed foster parent. When DCFS determines that a child can not remain in his/her home due to abuse, neglect, or risk of harm, it may be necessary to remove the child from their home or make the child a “dependent” of the State of Washington.

When a child is placed with a “relative of specified degree”, the relative can apply to become a licensed foster parent for that child. This means meeting health, safety, space, training, and other licensing requirements. Once licensed, the relative will receive foster care reimbursements and medical benefits for the child. Additional services, such as childcare, respite, and therapies may be available. To begin the foster home licensing process, call **Families for Kids Recruitment Resources at 1-888-794-1794**, or **contact the child’s DCFS social worker**.

Special Needs Adoption Support

The Adoption Support Program assists families adopting children with special needs by providing on-going financial and medical benefits to qualified children based on state and federal regulations. To qualify for Adoption Support, DSHS must have made the determination that adoption is in the child’s best interest. The child must:

- be less than 18 years of age when DSHS and the adoptive parent sign the Adoption Support agreement; and
- be legally free (birth parents’ rights have been terminated); and
- have special needs (see definition below); and
- be in state-funded foster care (or eligible for and likely to be placed in foster care), or be eligible for federally-funded adoption assistance.

Special Needs Children

To be considered a child with “special needs” each of the following statements must be true.

1. One or more of the following factors or conditions must exist. The child is:
 - Of an minority ethnic background.
 - Six years of age or older at the time of application for adoption support.
 - A member of a sibling group of three or more or of a sibling group in which one or more siblings meet the definition of special needs.
 - Diagnosed with a physical, mental, developmental, cognitive or emotional disability.
 - At risk for a diagnosis of a physical, mental, developmental, cognitive, or emotional disability due to prenatal exposure to toxins, a history of serious abuse or neglect, or genetic history.

2. The state has determined that the child cannot or should not be returned to parent's home.
3. A reasonable but unsuccessful effort was made to place the child for adoption without adoption support. Other unique conditions may exist in which a child would qualify. Almost every child in the state's Foster Care program qualifies for Adoption Support.

For more information, call **DSHS Children's Administration Adoption Support Program at 1-800-562-5682**.

Relative Support Services

Relative Support Services may be available if the child in your care has been placed with you by DCFS. You may be eligible for assistance for emergency, short term supports which can include respite. This assistance can be used to help pay for emergent, extraordinary costs incurred at the time of placement, or after placement if the lack of immediate support would lead to disruption of the child's placement in your home. For more information **contact your DCFS worker**.

Kinship Caregivers Support Program (KCSP)

Kinship caregivers who are not involved with the formal child welfare system, may be eligible for a new **Kinship Caregivers Support Program (KCSP)**. The program is designed to help grandparents and other relatives (of any age) who are raising children with costs for items like car seats and clothes. The program also helps to link these caregivers with other sources of financial support such as utility discounts and food stamps. To find out your local contact point for the KCSP, **call Aging and Disability Services Administration at 1-800-422-3263** or **go to the Washington State Kinship Care website at www.dshs.wa.gov/kinshipcare** and go to **Financial Help** under the **Benefits/Services** section.

Food Assistance (Basic Food)

The Basic Food program can help you stretch your family's food dollars. Eligibility for this program depends on the size of your household and your total household income. You don't have to get a TANF cash grant to get Basic Food, and there are no time limits for working families to receive this help. Basic Food customers now use a card that works like a debit card for buying food. This card is quick and easy to use! For information about the Basic Food program, **contact your local DSHS Community Service Office or visit https://fortress.wa.gov/dshs/f2ws03esaapps/onlinecso/food_assistance_program.asp**.

Unlike with TANF and Medicaid, there is no assignment of rights associated with either food benefits or daycare assistance. These types of benefits do not give rise to an automatic Division of Child Support case.

The Basic Food program has detailed rules about what income is counted and what expenses can be deducted. When you apply, check with the worker to make sure you get any allowable deductions.

Insurance and Medical Coverage

Betty was already worried about her own medical bills before taking on her grandchildren. After all, Medicare only covers so much. She knew she couldn't afford private insurance for her grandson living with her. A grandparent in a similar situation told her that medical coupons were often available to children. Betty was embarrassed at the thought of applying for assistance, but there wasn't anything else she could do – the children needed medical care.

Private Insurance

Many relative caregivers have difficulty obtaining health insurance for their children. Relative caregivers that are retired are often on Medicare. Caregivers who are still working may find it difficult (if not impossible) to add relative children to their employer-based policy. If you have employer-based health insurance, ask about dependent coverage for children in your custody. If private coverage is not available, Medicaid is an option.

Medical Assistance (Medicaid)

Children being raised by relatives are almost always eligible for Medical Assistance (Medicaid or Medical ID cards) even if they are not receiving a TANF child-only grant. The child in your care is automatically eligible for Medical Assistance if:

- The child is receiving a Child-Only (Non-Needy) TANF grant.
- The child is a “dependent of the State.”

To apply for Medical Assistance for your child, you will need to identify yourself as their primary caregiver. Be prepared to show proof of your child's age (such as a birth certificate) and Social Security number. As with applying for a TANF child-only grant, you will be asked about your child's income and resources **but not about your own**. You do not need to have legal custody for them to receive Medical Assistance. Even if you are not sure the child will qualify, you should apply anyway. Your child may receive much-needed services like regular check-ups and immunizations, prescription drugs, dental care, vision and hearing care, outpatient and hospital services, and more.

In some cases, relative caregivers may be eligible to receive Medical Assistance for themselves. If you also need medical coverage for yourself, be sure to ask at the time you apply for your child. Your eligibility will be based on different criteria, including your own income and resources.

If your child is eligible for Medical Assistance, you will be mailed a medical identification card every month. The card is sometimes called a “coupon.” You need to take this card with you whenever they have a medical visit. Medical providers are **not** required to accept Medical Assistance (Medicaid) as a payment source. Therefore before the appointment, call the doctor's office or clinic to make sure they accept Medicaid.

For information on Medical Assistance and eligibility requirements in Washington State, **contact your local Community Service Office** (see TANF section on page 44) or **call the Medical Assistance Customer Support Center at 1-800-562-3022**. To apply online, **go to http://fortress.wa.gov/dshs/f2ws03esaapps/onlineapp/introduction_1.asp**.

If you receive Medical Assistance for your child, a referral is automatically sent to the Child Support Division to enforce any medical insurance available for the child through the parent's medical insurance policy. At the same time, you may also request full child support services from DCS. If you are afraid that enforcing medical support or child support may be harmful for either you or the child in your care, talk to your DSHS worker about claiming "good cause." For more about child support see the Child Support section page 45.

State Children's Health

The State Children's Health Insurance Program (SCHIP) may be available to your child if they are not eligible for Medical Assistance. SCHIP has a low monthly premium at \$15 for one child and no more than \$45 for three or more children (no premiums if your children are American Indian or Alaskan Native). Covered services are the same as for regular Medical Assistance. **Contact Healthy Kids Now at 1-877-543-7669 or visit the SCHIP website at <http://fortress.wa.gov/dshs/maa/chip>**.

Basic Health Plan

The Basic Health Plan of Washington is offered through the State of Washington's Health Care Authority. It offers affordable, comprehensive health care coverage. You pay for coverage through monthly premiums and co-pays at the time of service. The amount of co-pay depends on the type of service you receive.



The amount you pay monthly depends on your age, family size, income, and the health plan you choose. **Call 1-800-660-9840, 1-360-923-2701 (TTY in Olympia) or 1-888-923-5622 (TTY Statewide) for more information on the Basic Health Plan and to request an application or visit the website at www.basichealth.hca.wa.gov**.

Statewide Health Insurance Benefits Advisors (SHIBA) is a free health insurance information resource for all Washington residents including those who need to make decisions about individual insurance, government programs (Medicare, Medicaid, Basic Health Plan, State Children’s Health Insurance Program, etc.), Medigap, employment related benefits, managed care, long-term care, medical billings, fraud or abuse, and more. Trained volunteers counsel about rights and options as health insurance consumers. Services are confidential and convenient. **Contact SHIBA at 1-800-397-4422 or visit the Insurance Commissioner’s website at www.insurance.wa.gov/shiba/index.shtml.**

Federal Benefits

Social Security Benefits

You may be eligible for additional Social Security benefits if you have adopted your child prior to activating your own Social Security benefits. In addition, if you have custody of your child and the parents of the child are disabled or deceased, the child may be eligible for Social Security benefits. Social Security, and some other dependent benefits, may qualify as payments on the parent’s child support obligation, as well.

Contact the Social Security Administration at 1-800-772-1213 or TTY 1-800-325-0778 for further information or **visit their website at www.ssa.gov.**

Supplemental Security Income (SSI)

If your child has a disability, he/she may qualify for Supplemental Security Income (SSI). When deciding if a child is disabled, the Social Security Administration looks at whether the child has serious limits on his/her ability to function. Parents or guardians can apply for children under the age of 18 who are blind or who have a disability.

You will need to provide the following information when applying for SSI:

- Your child’s social security card or a record of their social security number.
- Your child’s birth certificate or other proof of age.
- The names, addresses, and telephone numbers of doctors, hospitals, and clinics that have seen your child.
- Proof of your child’s U.S. citizenship or eligible non-citizen status.

For more information or to apply for SSI, **go to your local Social Security Office, or call Social Security Administration at the numbers listed above.**

Family Leave to Care for a Child

Under the federal Family and Medical leave Act (FMLA), you may be entitled to take up to twelve weeks of unpaid leave per year if your child needs care due to a serious health condition. This law applies if your employer has at least 50 employees and you have been employed there for at least twelve months.

Income Tax Benefits

You may also be eligible for certain income tax benefits. Be sure to check with the Internal Revenue Service (IRS) or a tax advisor if you have any questions.

Dependency Exemption

If a relative provides over half of a child's support during the year, the relative may be able to take the exemption for dependents on that year's income taxes. The IRS may ask for proof that you are supporting the child, so make sure to keep receipts and a list of expenses.

Earned Income Tax Credit (EITC)

Another income tax benefit that may be available to you is the "earned income tax credit." The EITC is a special benefit for low and moderate income working people who are raising children. The EITC is a tax credit program administered by the IRS. You file for the EITC when you file your tax return. There are also Advance Earned Income Tax Credit (Advance EITC) payments available that allow those who qualify to get part of their EITC in advance instead of waiting until after the end of the year.

The EITC program provides qualified working relatives with assistance by:

- Reducing the amount you owe or giving you money back if you owe taxes.
- Giving you a cash allotment if you owe no taxes.

To obtain forms, assistance, and qualifying information on the Earned Income Tax Credit **contact the IRS at 1-800-829-1040 or visit their website at www.irs.gov/individuals/index.html** (click on "More Topics" then "EITC").

Child and Dependent Care Tax Credit

The Child and Dependent Care Tax Credit may offer credit for childcare expenses. The amount claimed depends on your personal income and the amount paid for childcare in a calendar year. Use IRS Form 4221, "Credit for Child Care and Dependent Care Expenses".

The AARP Tax Aide Program is a useful resource for relative caregivers. This program is a free, high quality service provided by IRS-trained and certified volunteers. Volunteer counselors provide individual tax-preparation to people of all ages with middle and low incomes (with special attention given to those ages 60 and older). It is a useful program if your tax burden has changed after a change in the status of a dependent. AARP Tax-Aide sites are located in places convenient for taxpayers to get to, such as libraries, senior centers, and malls. Volunteers can also visit taxpayers in their homes if they are physically unable to visit a site. The program is available from February 1 – April 15 each year. For more information, **contact AARP at 1-888-227-7669 or visit their website at www.aarp.org/taxaide/**.

Housing Assistance

One of the most common challenges facing relative caregivers is finding and staying in appropriate housing. Some may be threatened with eviction from senior public housing when they take in young children. Others live in apartments that are simply too small to accommodate children safely. Few relative caregivers have the financial resources to afford larger homes that can accommodate additional family members, and most affordable family housing is designed for younger, more physically fit parents. The following groups provide housing information or services that should be helpful for kinship caregivers.

The Fair Housing Information Clearinghouse provides national and local information and links to fair housing resources. For more information, **call 1-800-669-97772 or 206-220-5701 or visit their website at www.hud.gov/offices/fheo/index.cfm**.

Generations United (GU) has information on innovative Grand Families Housing Replication Projects in several states, including Tacoma, Washington. **Contact GU at 202-638-1263 or go to their website at www.gu.org** and click on “Kinship Care,” then on “Fact Sheet.”

The National Low Income Housing Coalition provides advocacy and information. The Coalition can be reached at **202-662-1530 or on-line at www.nlihc.org**.

The U.S. Department of Housing and Urban Development (HUD) provides information on who qualifies and how to apply for federally subsidized housing programs. **Contact HUD at 202-708-1112 or visit their website at www.hud.gov**.

If you are a recipient of TANF cash assistance, whether a child-only or a family grant, you may be eligible for additional financial assistance for your housing needs. The **Additional Requirements for Emergent Needs (AREN) program** provides up to \$750 in a twelve month period to help with emergency housing needs, such as to prevent eviction or a utilities shut-off. To find out more about the AREN program, **contact your local DSHS Community Service Office**.

Know Your Housing Rights

- Federal law does not require grandparents and other relatives to have legal custody or guardianship of the children they are raising to qualify for federal housing programs.
- Children are allowed in Section 202 (“Senior”) housing.
- Although HUD regulations limit senior housing units to two bedrooms, families cannot be evicted until an appropriate alternative has been found.
- The Fair Housing Amendments Act of 1988 prohibits discrimination based on “family status” in the private housing market. “Family status” includes the presence of a minor child. Seniors-only housing is allowed under special circumstances.

Benefits CheckUp for Federal, State, and Local Programs

BenefitsCheckUp (BCU) is the nation's most comprehensive online service to screen for federal, state and some local public and private benefits for adults ages 55 and over. For example, BCU helps thousands of people every day to connect to programs that can help them pay for prescription drugs, health care, utilities, and other needs. In addition, BCU also provides a detailed description of the programs, contacts for additional information and materials to help successfully apply for each service.

To use this program, go to the **Kinship Care in Washington State website** www.dshs.wa.gov/kinshipcare and go to **Benefits and Services**. You will find the state version of this program.

Dealing with Social Service Agencies - A Few Tips

- Be patient. You may encounter long waits on the phone or in person. Many agencies do not have the staff to take your calls immediately. You may call programs that have automated answering systems or answering machines.
- Save time when applying for any type of benefits by calling first and getting a list of all the information and papers you'll need. Ask how long you may have to wait, so you can schedule your time.
- Call during low volume phone times. Agencies differ by the volume and type of calls they receive. It is often easier to get through to agency help lines during the early morning hours on Tuesday through Thursday. The busiest phone times appear to be during lunch hours (11:00 am – 1:00 pm) and on Mondays and Fridays.
- Keep a log. Always write down the name, title, and phone number of the person, to whom you speak, and the name, address, and business hours of the agency. Record the time and date of your call or visit and important details of your conversation for future reference (see below).
- If you make an appointment with an agency, plan to arrive 15 minutes before your meeting to fill out any forms they might need. Once the appointment is over, ask what the next step in the process will be and how soon you can expect a decision.
- It's hard to get into some services. Keep trying or ask for another place to try for a similar service.
- Work cooperatively with your caseworker. If difficulties arise that you cannot settle with your caseworker, ask to speak with the worker's supervisor.
- If need be, file a grievance. Most agencies have a grievance (complaint) procedure for handling difficult situations.
- Navigating the system can be exhausting and time consuming. Take a break to recharge yourself or ask for help.

Each social service agency you deal with will likely have different requirements and processes, so you should expect to provide various kinds of information when you first apply. To make the process as smooth as possible, prepare a list of questions before you contact an organization. A sample list is shown below. Record the questions and the information you receive in a notebook so you can refer to it in the future.

A typical conversation might begin something like this:

“Hello, I would like some information about programs that can help me provide my child with some assistance with X.” Replace the “X” with the types of assistance you need, such as help with meals, medical care, or transportation, etc. “Can you please answer some questions for me?”

Sample Questions When Contacting a Social Service Agency

- What types of services do you provide?
- How can I receive an application?
- If I cannot complete the application by myself, can someone at your agency help me?
- What documents will you need to verify my identity? (Driver’s License, Social Security Card, etc.)
- What documents will you need to verify my level of income? (Paycheck stubs, pension forms, Social Security check stubs, etc.)
- If I don’t have the proof I need to verify my identity or income, can I provide them to you later?
- If I don’t have the documents, can someone at your agency help me get them?
- What documents will you need to verify my child’s identity? (Birth certificate, social Security card, etc.)
- Once I have completed the application, will I need to schedule an appointment to meet with someone so they can review it?

Kinship Navigators

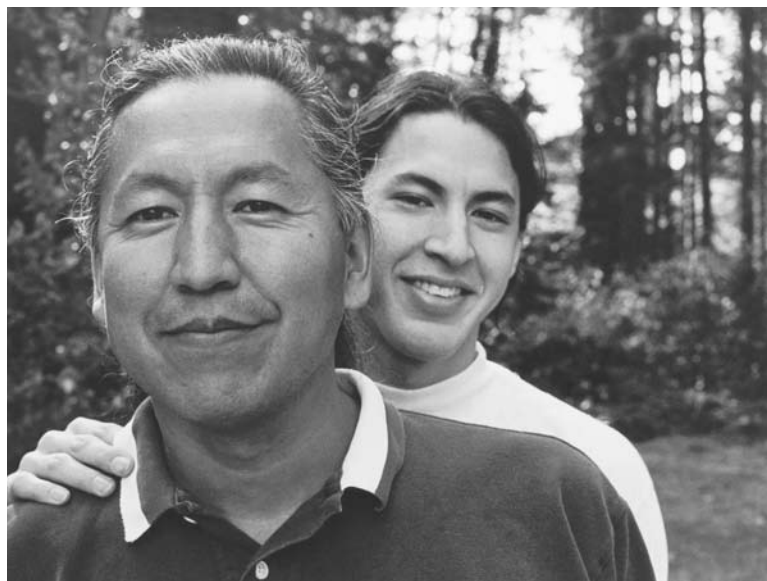
Sometimes relatives feel overwhelmed by the array of service providers, the complexity of agencies or just don’t know where to start. Washington State is fortunate to have a growing network of local kinship care navigators whose job it is to help relatives “navigate” their way through the system.

To find a Kinship Navigator who can help direct you to resources in your area, **call 1-800-422-3263 or visit the Washington State Kinship Care in Washington State website at www.dshs.wa.gov/kinshipcare/**. Click on “Benefits/Services” to find out if there is a Kinship Navigator in your county. At this time, kinship navigators do not serve all areas of the state.

SECTION VI

Native American Community Resources

This is a general resource guide for all relative caregivers in Washington State. We have not attempted to address the specific needs of particular racial, ethnic, or other groups. However, because of the special legal status of Native American tribes, and for compliance with the Federal Indian Child Welfare Act, and the prevalence of relative care within Native American communities, the following information is included.



If the child in your care is of Indian descent, they may be eligible for services from their tribe or tribal organizations in addition to services provided through the state. Services may include Indian Health care, Indian Child Welfare services, tribal court services, and other referrals that may help meet the needs of the caregiver or child.

Tribes are sovereign governments and have the same protections and structure as other state and federal government programs. Tribal programs may include law enforcement, social or family services, tribal court, health clinics, and tribal schools. Tribal courts may have different capacities, depending on the individual family and youth codes within their jurisdiction. In addition to your state case worker, Tribal social services programs are also resources for children and their caregivers, depending on the structure of their programs and the amount of resources available. They can also be contacts for information and referral.

The Governor's Office of Indian Affairs (GOIA) publishes a Washington State Tribal Directory that includes a listing of all federally-recognized and non-recognized tribes in Washington State, including programs, locations, phone numbers, and contact names. The Directory also includes Washington State Tribal Liaison Contact lists, Indian organizations, tribal schools, and tribal clinics. **GOIA can be contacted by phone at 360-902-8827 or by email at goia@goia.wa.gov.** The Washington State Tribal Directory is **available on-line through the GOIA website at www.goia.wa.gov.**

Tribal TANF Programs

Several federally recognized tribes in Washington operate their own federally funded TANF programs offering services to tribal members, Native Americans and other eligible participants in their regions. If a member of your household is a Native American or Alaska Native, and your residence is within the program service area of a Tribal TANF Program, you may be eligible for services from one of these programs. For more information, you can contact tribes in your area, the DSHS State Tribal Relations Unit at 360-725-4659 or visit the DCS Tribal Relations Team website at **www.dshs.wa.gov/dcs/tribal/tanf.asp** for a list of Tribal TANF programs and contact information.

Tribal Child Support Programs

Several Tribes in Washington and around the country operate federally funded Tribal Child Support Programs that you and your child may benefit from. These programs provide similar child support services as those of State child support programs but are often based on tribal culture, policies, and laws. To obtain more information about these programs, **contact the DSHS Division of Child Support (DCS) Tribal Relations Team at 360-664-5031 or visit their website at www.dshs.wa.gov/dcs/tribal.** For Tribal issues on DCS cases, **contact the DCS Tribal Liaison** in your area. You can find their contact information by clicking on "Contact" on the Website.

Indian Health Service (IHS)

The Indian Health Service (IHS), an agency within the federal Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives. These services grew out of the special relationship the federal government has with Indian Tribes. The goal of IHS is to raise the health status of all Indian people to the highest possible level. If the child you are caring for is a member of an Indian Tribe or may be eligible for membership, he or she may also be eligible for medical care through an IHS clinic. To find a clinic, **call the Portland Area Office at 503-326-2020 or check the HIS website at www.ihs.gov/FacilitiesServices/AreaOffices/Portland.**

The National Indian Child Welfare Association provides technical assistance, a library, conference, workshops, laws and information. **Contact them at 1-503-222-4044 or visit the website at www.nicwa.org.**

Urban Indian Centers That Offer Supports to Families

United Indians of All Tribes Foundation (UIATF) in Seattle offers head start and early head start, family social services, and counseling and cultural programs for children and families. **Call 206-285-4425 or go to www.uiatf.org.**

Seattle Indian Health Board offers medical and dental care to children and adults, accepting medical coupons and Indian Health Services (IHS) medical. Also offers counseling and related resources. **Call 206-324-9360 or go to www.sihb.org.**

In Spokane, **The N.A.T.I.V.E. Project** offers family support services, counseling, treatment, and cultural connections to children and families. **Call 509-325-5502.**

“What are my legal rights as a grandparent raising my grandchild?” “Can I adopt my niece?” “Can I keep my brother from seeing his son?” “Do I really need a lawyer?”

These and many other questions may be running through your head. For many people, the legal issues are the most difficult of all the challenges

relatives face. Legal and court systems are expensive, can often be difficult to understand, and take an emotional toll on everyone involved.



Legal Resources

We could not do justice to the multitude of legal issues involving relatives as caregivers in a few pages. The **Northwest Women’s Law Center** has developed a guide, *Grandparents and Other Non-parental Caregivers: Adoption, Dependency Guardianship, Non-Parental Custody and Temporary Agreement*. It was updated in 2004. This resource can provide invaluable information.

If you are a relative involved in a legal situation regarding raising a child, you may be able to obtain a complimentary copy of their legal guide. **Call the Northwest Women’s Law Center’s Information and Referral at 206-621-7691 to request your copy.**

If you are not involved in related legal matters would like to purchase a copy of the *Guide*, **call 206-682-9552**. The Northwest Women’s Law Center also offers free memos and self-help packets on a variety of legal issues facing people with limited income. **If you would like to borrow a copy of the Legal Guide, contact the RAPP Resource Library at 1-800-422-3263 or by e-mailing hauptp@dshs.wa.gov.**

Family Court Facilitators

Most county superior courts have instituted a program using Family Court Facilitators who assist individuals who have no attorney to represent them in completing form documents and filing papers in family court actions in that county. These cases are called “pro se”. Contact your County’s Superior Court or the Court Clerk’s office to request information. The facilitators do not give legal advice but simply explain the forms and procedures to be followed.

Some of the services the Family Court Facilitators provide include:

- Referral to legal, social service or alternative dispute resolution services.
- Assisting in calculating child support amounts based on financial information from both parties.
- Processing requests for interpreters.
- Explanation of legal terms.
- Information on basic court procedures.
- Reviewing completed forms and pleadings.
- Attending “pro se” hearings to assist court with pro se matters.
- Offering “do it yourself” family law kits for sale with forms and instructions.

You can **find a listing of the court facilitators at www.courts.wa.gov/court_dir/**.

Finding a Lawyer

Decisions you make about legal issues are very important and a lawyer can help you understand what your options and risks are and how your choices will affect your family.

Look for a family law attorney who has experience in guardianship and adoption. Ask for recommendations from friends. If you are in a support group, they may have names of attorneys who regularly work with kinship care legal issues. It’s important that you find someone you can talk to and who seems right for your situation in order for you to work as a team. If you are struggling with other legal problems, such as drafting a will to protect your assets for your grandchild, or receiving TANF, Social Security, or other public benefits, **call the Northwest Women’s Law Center or CLEAR** (see below).

The **Northwest Women’s Law Center** provides free legal information and referral services. The Center has a current list of attorneys in many areas of practice and in many counties in Washington. The Center can give you a general idea of the attorney’s fees, but each client will need to negotiate specific fees with the attorney. You can reach the **Northwest Women’s Law Center at 206-621-7691 or at their website at www.nwwlc.org**.

Coordinated Legal Education Advice and Referral (CLEAR) and CLEAR Senior are programs of the Northwest Justice Project, which help low-income people in Washington with legal information and referrals. CLEAR Senior is a similar service for anyone who is 60 years or older regardless of income level. CLEAR and CLEAR Senior staff will listen to your story, glean the underlying legal issues, and offer self-help advice with informational brochures such as *Filing a Non-parental Custody Action*. In limited cases, staff will refer you to an attorney for further assistance. CLEAR Senior staff may also be able to refer seniors to local social service agencies for other resources in their communities.

All CLEAR services are available in any county in Washington, except King County. King County residents may only receive CLEAR services for mobile home and public assistance fair hearing matters. **Call CLEAR at 1-888-201-1014 or 1-888-201-9737 (TTY). CLEAR Senior can be accessed at 1-888-387-7111.** Both programs operate between 9:30 am and 12:30 pm Monday through Friday and Tuesdays from 4 pm to 6:30 pm.

There may be long waits to reach a staff person by phone. If you get a busy signal, you should call back. Once your call is answered and you are put on hold, they will talk to you, so don't give up. The attorney answering the telephone will ask questions about your income, assets, and expenses (not for CLEAR Senior) and other personal information before beginning the consultation. You can also **visit the Northwest Justice Project website at www.nwjustice.org.**

For other King County legal problems, **call Northwest Justice Project at 206-464-1519 or Columbia Legal Services at 206-464-5911.**

The Attorney Referral Service at 1-800-759-4357 and the **County Bar Association Lawyer Referral Services** can also refer you to an appropriate attorney in your area. Look in your phone book for the nearest Bar Association.

The National Academy of Elder Law Attorneys (NAELA) is a nonprofit association that assists lawyers and others who work with older clients and their families. The NAELA website offers a national directory of member attorneys. **Contact them at 520-881-4005 or visit the website at www.naela.org.**

Kinship Care Solutions is a program where volunteer attorneys assist low-income caregivers who want to file nonparental custody actions. You must be a King County case or resident. Contact the **King County Bar Association Lawyer Referral at 206-267-7010 or email cls@kcba.org.**

Paternity Establishment

Emotional and financial support from both parents gives a child the foundation for a good life. The child you are caring for is entitled to financial support from his/her father when legal paternity has been established. Every child has a father, but not every father is a legal father. When the parents aren't married, the "father" has limited rights and responsibilities. To become a legal father with all of the rights and responsibilities, the man must establish paternity.

Below are some good reasons for establishing paternity.

- The child has a right to know and to be loved by both parents as well as all of his grandparents.
- The child can get child support money when legal paternity is established.
- The child may need medical information and medical history from the father's family to have a better chance at a health life.
- Establishing paternity makes it possible for the child to claim Social Security, pensions, Veteran's benefits, life insurance and inheritance rights.
- Though the child's father may not be able to pay child support currently, someday he may be able to provide support.

Washington State has laws and procedures for establishing "parentage" which is what paternity is called in Washington law. Sometimes County Prosecuting Attorneys will initiate an action for parentage at no cost to you on behalf of your child when the child is receiving public benefits. The Northwest Women's Law Center is another good source of information and referrals for establishing parentage. You can reach the **Northwest Women's Law Center at 206-621-7691 or at their website at www.nwwlc.org.**

Washington also has a process for acknowledging paternity voluntarily by signing a paternity affidavit. This is frequently done at the hospital shortly after the birth of a child. However paternity affidavits can be signed at anytime. You can apply to DCS for paternity establishment services for the child in your care. DCS can facilitate the signing of a paternity affidavit, or can refer the case to the appropriate prosecuting attorney to bring a court action for paternity."

To learn more about acknowledging paternity or paternity establishment contact the **Child Support Help Line at 1-800-457-6202 or visit the DCS website at www.dshs.wa.gov/dcs/services/paternity.asp.**

Negotiation and Mediation

Thinking about a court order makes many people imagine nasty courtroom battles and lots of yelling and blaming. While this is a common fear, in most cases the parents and the relative find a way to agree. It's always better to work out a plan that is in the best interest of the child, through:

- Negotiation – your lawyer can talk to the parents' lawyers, or you can all sit down together with the lawyers and work out a plan.
- Mediation – you and the parents sit down together with a person trained to help people, such as a family mediator or therapist, and work out an agreement to resolve the conflict.

Mediation

Mediation is a way to negotiate solutions to disputes. A trained mediator creates a safe place and helps with communication among the people involved. The mediator makes sure each person has a chance to be heard, shows respect for each person's feelings and values, and explores workable solutions to the disagreements. Both parties need to be willing to prepare and actively participate in the mediation. If the parties reach an agreement, the mediator will put that



agreement in writing. The parties may then have their own attorneys review the agreement and put it in a legal form.

Mediation is voluntary. Both parties must agree to mediation and both must be satisfied for agreement to be reached. Mediation is also confidential. Information shared during the mediation cannot be used later in court or in an administrative hearing (exceptions are threats of violence and unreported abuse).

You can mediate at any time – before going to court, during a court case, or even after a court case is over. For example, you can mediate to clarify a final parenting plan. If no agreement is reached, you can still use the courts. If part of the disagreement is solved, you will have that much less to take to court.

Mediation is less costly than going to court – in terms of money, time, and emotions.

Many Washington State counties have Dispute Resolution Centers that provide mediation at no or low cost. Mediators in private practice generally charge \$50 to \$180 an hour, depending on the type of case and the family income. Sometimes there is an additional administrative fee.

To find the nearest **Dispute Resolution Center (DRC)**, call the **Snohomish/Island County DRC at 1-800-280-4770**. Staff can direct you to one of the DRCs that offer mediation services. You can also find a list of all the DRCs at **www.resolutionwa.org**. You can also look in the White Pages of your phone directory under “mediator” or “mediation service”.

Just as with attorneys, it is best to use a referral service to find a private mediator trained in family law, if possible. Call the **Northwest Women's Law Center Information and Referral Line at 206-621-7691** for a referral to mediators in some areas of the state.

To learn more about mediation, a 10 minute video “*Mediation for Kinship Caregivers: An Alternative to the Courtroom*” shows how mediation can be a win-win situation for all parties. To borrow a free loan copy or to purchase the video, **contact 360-725-2556 or visit the website at www.dshs.wa.gov/kinshipcare** and click on “**Legal Issues**”.

Obtaining Needed Papers and Documents

Sam didn't have any records for his nephew. Kyle came to him with one suitcase, two pairs of jeans, three tee shirts, some underwear, and a pair of tennis shoes. How was he going to enroll him in school without a birth certificate, social security card, or immunization records?

You are going to need certain documents and papers in order to apply for certain services.

Birth Certificates

Birth certificates can be obtained by contacting the **Washington State Department of Health, Center for Health Statistics at 360-236-4300** or **visiting their website at www.doh.wa.gov**. You can also contact the Vital Records office or similar office in the state where the child was born. The following information is usually needed.

- Name of the child.
- Fate of birth.
- Place of birth – city, county, and hospital.
- Parents' names as they appear on the birth certificate.
- Mother's maiden name.
- Tequest signed by the person making the request.
- Your name, address, and phone number.

There are usually fees to obtain birth certificates and most other documents. Check with the Health Statistics office for any fees and for which forms of payment are accepted.

Social Security Cards

It is not necessary to be the child's legal guardian in order to obtain a Social Security card for them. Use Form SS-5 (Application for Social Security Card) to request either an original Social Security number or a replacement card. The form includes instructions for completing the application and discusses the documents

that must be submitted with it. U.S. citizens need an original or a certified copy of their birth certificate or a baptismal record.



For information on obtaining a Social Security card, **call the Social Security Administration General Information Line at 1-800-772-1213**. You can also access Form SS-5 on **their website at www.ssa.gov/online/ss-5.html** or **visit your local Social Security office**.

Medical Records

If you haven't been a primary caregiver for your child since birth, you may not have all the medical records. Try to get them from the birth parents. If they don't have them, ask them to sign a medical consent to have the records released to the doctor or clinic that now provides health care to your child. You might also want to ask the pediatrician's office, your primary physician, or health clinic to help you get the records. If your child has been enrolled in school, they may be able to provide you with a copy of the immunization record in their files.

To help a doctor "reconstruct" your child's medical history, start by making a list of all the illnesses and conditions you can verify that your child has had. Also, list any information regarding the medical history of the birth parents, including any medical conditions, substance abuse, or mental health problems the mother may have experienced during pregnancy.

Consent to Health Care for the Child in Your Care

Laws passed in 2005 and 2006 by the Washington State legislature allows kinship caregivers to consent to health care (including mental health care) for a child when the parents are not available – even if he/she does not have legal custody. As a kinship caregiver, you may consent to health care for a minor child if you:

- Have a signed authorization from the child's parent to make health care decisions for the child.
- Are a relative responsible for the health care of the child.
- Are a relative caregiver who has signed and dated a declaration (RCW 7.70.065).

Information about a declaration

A declaration is a dated and signed written document that states certain information is true. As an adult kinship caregiver, you can sign a declaration saying you are a relative responsible for the health care of the minor child.

Although a signed declaration is not required under the law, health/mental health care providers may require it. A sample declaration is listed on the next page or can be downloaded off the internet at **www.washingtonlawhelp.org**. You may use this sample form or write a declaration of your own.

Keep in mind a declaration is "under the penalty of perjury under the laws of the state of Washington". Signing a declaration that you know to be false is a Class B felony.

A declaration is only good for six months from the date that signed. After six months, the declaration expires. You must then fill out and sign another declaration.

Signing the declaration only allows you to consent to health care for the child. The declaration has no affect on legal custody of the child or the legal rights of the parents.

Other documentation may be needed

Under the new law, a provider may ask for proof that shows you are responsible for the child's health care. If this happens, the following items may be useful:

1. A will that lists your relationship to the child.
2. A letter from a social worker, school personnel, a lawyer, religious leader, or a licensed medical, mental health, or behavioral professional that shows your relationship to the child.
3. Records from a school, hospital, clinic, or other public health or social service agency that shows your relationship to the child.
4. Proof that you receive a public benefit, such as TANF, SSI, medical coupons, food stamps, or free/reduced school lunch on behalf of the child.
5. Records from the Department of Social and Health Services that show that you are the contact for the child.
6. Proof that a child lives in your apartment or other housing and is related to you.
7. Insurance for you or the child that states your relationship.
8. Your Federal Income Tax return in which the child was listed.
9. Any other documents that show your relationship with the child and indicate that you are the caregiver for that child.



Where you can go for more information

There are several organizations that offer free information and referrals over the phone and/or information on the internet. Contact:

- **The Coordinated Legal Education, Advice and Referral (CLEAR).** If you are under 60 and low-income, **call 1-888-201-1014****. If you are over 60 at any income level, **call CLEAR*Sr toll-free at 1-888-387-7111. Or visit their website at www.nwjustice.org/about_njp/clear.html.**
*** not available in King County. Call 206-464-1519 for information and referral.*
- **The Northwest Women's Law Center at 206-621-7692** (for both women and men) **or visit the website at www.nwwlc.org/.**

SAMPLE

Kinship Caregiver's Declaration of Responsibility for a Minor's Health Care

I Declare That:

Minor's Information:

1. I consent to health care for the child: _____.
(print name of the child)
2. The child's date of birth is: _____.

Caregiver's Information:

3. My name is: _____.(print your name)
4. My home address is: _____
5. I am 18 years of age or older and I am a relative responsible for the health care of the minor.
6. My date of birth is: _____.
7. I am the _____ of the minor.
(print your relationship to the child, e.g. grandparent, aunt/uncle, etc.)

I declare under penalty of perjury under the laws of the State of Washington that the above is true and correct.

Date: _____ City and State: _____

Signature of Caregiver: _____

Keeping Documentation

For a variety of reasons, it is advisable to keep records on issues related to the children in your care.

What to Document

- Have the children's doctor and dentist make notes in the medical file, such as, "Child brought in by grandparent."
- Keep a file with bills and receipts for medical expenses you pay.
- Ask the child's teacher to note in the education file such information as, "School conference attended by grandparent."
- Keep a file with receipts for school clothes and educational expenses you incur.

- Document all lessons (piano, karate, ballet, etc.) for which you pay.
- Keep receipts for groceries, rent, and anything that contributes to the child's care.
- Keep a journal of the parents' involvement, or lack thereof, with the child.
- Record important events.
- You may wish to keep a journal on a tape recorder.

Journaling Tips

- Use a bound journal rather than a loose-leaf notebook.
- Write the date of each entry.
- Note when parents visit and what happens during each visit.
- Log when parents telephone their children and comment on the children's reaction.
- Log phone calls by the parent to you. Does the parent ask about the child?
- Record the parent's behavior when they visit or call.
- Note the parents' broken promises.
- Include photographs of family events and list who participates.
- Write about the child's behavior before, during, and after a parental visit.
- Document what the parent doesn't do; for example, when they don't remember a birthday or holiday.
- Attach receipts of everything you buy for the child.
- Write what you observe when a child comes back from a parental visit; i.e., any bruises, resumption of bed-wetting or thumb sucking, etc.
- Record what the child says about a visit with the parent.

Legal Options in Washington State

On the following page is a chart that briefly outlines formal and informal placement arrangements for children being raised by relatives in Washington State. This chart was designed for information purposes only. Before you decide to pursue any given option, we recommend that you seek the council of a family law attorney. Refer to the section on legal representation earlier in this chapter.

A video and DVD, *Legal Options for Grandparents and Relatives Raising Children in Washington State*, showcases a presentation by Rebecca Morrow, former Kinship Legal Fellow with Columbia Legal Services. The program lasts for 1 hour 25 minutes and can be viewed online at www.dshs.wa.gov/kinshipcare/ look under the "Legal Issues" section. The video or DVD can be obtained by contacting the Relatives as Parents Program. **Call 1-800-422-3263 (360-725-2556 in Olympia) or e-mail hauptp@dshs.wa.gov.**

LEGAL OPTIONS FOR RELATIVES RAISING CHILDREN IN WASHINGTON STATE

Parental Consent Agreement

Voluntary – requires consent by parents
No court action required
Arrangements can be flexible
Parents can cancel agreement at any time
May receive DSHS and tax benefits
May be adequate for obtaining medical, childcare, & education needs for child in care
May receive child-only grant through TANF

Legal Guardianship

Takes place in Superior Court or Family Court
Gives an authorized adult authority over the finances & personal care of a minor
Guardian is granted similar authority as parent with some exceptions
Unless parents consent, court may appoint guardian ad Litem to investigate & determine if guardian is suitable
Does not terminate parental rights
May be changed or ended by court order
Does not interfere with inheritance of parents' or grandparents' assets
Requires brief reports to court
May receive child – Only grant through TANF

Dependency Guardianship

Used only in Dependency proceeding
Legal arrangement (DSHS Placement) can continue to age 18
Grants the same rights of parents to the guardian, with some exceptions
Only initiated by a party to Dependency Proceedings
Court may include ongoing DSHS services
If no ongoing DSHS services = less oversight by agency & court
May or may not terminate parental rights
Does not interfere with inheritance of parents' or grandparents' assets
TANF, Foster Care & tax benefits may be available

Non-Parental or Third Party

Takes place in Family Court or Superior Court
May include a temporary order while case is pending.
Gives an authorized adult authority over the finances & personal care of a minor. Also establishes placement/ custody
Must prove living with parents is detrimental to child, or by mutual agreement
Guardian ad Litem may be appointed
Must be approved by Juvenile Court if Dependency case, but is not part of a Dependency action
May establish parenting plan for child to include visitation and service requirements for parents
TANF and tax benefits may be available

Adoption

Takes place in Family Court or Superior Court
Must prove parents are unfit or they must relinquish parental rights
Parental rights are terminated but if open adoption, contact may continue with parents, siblings, extended family
Child no longer eligible for birth parents' inheritance or SS, but can receive from adoptive parents
Attorney representation strongly recommended. Adoption support may be available.
Foster care & child-only TANF benefits end
Adoptive tax benefits and adoption subsidies may be available to adoptive parents

Taking Care of You

One of the best ways you can help yourself and your child through tough times is to take care of yourself, both physically and mentally. Eat right, get plenty of rest and regular exercise, and see your doctor regularly. Talk to your doctor about any physical, mental, or emotional problems you are experiencing.



Perhaps you, your spouse, or another family member is experiencing a health condition that requires long-term care services. If you are in need of information regarding what is available, you can contact one or more of the following resources.

- **Aging and Disability Services/DSHS at 1-800-422-3263 or www.adsa.dshs.wa.gov to locate the Senior Information and Assistance (I&A) Office** or the **Home and Community Services Office (HCS)** nearest to you. Senior I&A staff are knowledgeable about in-home, community, and residential services, Family Caregiver Support Programs, the cost of services, and who to contact about them. HCS offices have staff that can complete an assessment of service needs and can assist in the decision about appropriate services.
- **The Family Help Line at 1-800-932-4673** is a statewide, toll-free phone service for parents and caregivers. The Family Help Line provides information about parenting, child development and positive discipline, coaching for parents who need help to deal with their children's negative behaviors, a safe place to talk about parenting concerns and receive immediate support, printed materials that can be mailed to parents free of charge, and referrals to community services in all 39 counties of Washington State.
- The **Eldercare Locator at 1-800-677-1116** will put you in touch with aging and long-term care services around the country.
- The **National Alliance for Caregiving at www.caregiving.org** connects families with information on caregiver resources and local services.

Relatives as Parents Support Groups

Rosemarie was nervous about going to her first support group meeting. Shy at first about speaking up in the group, she just sat and listened. Within the first five minutes she began to hear that others were in similar situations. Finally, she had found a place where people understood what she was going through.

Relative caregivers commonly report that they feel alone in their struggles. They may lose touch with old friends who don't have the same caregiving responsibilities. They may no longer have the time and energy to stay active in their community. This sense of isolation can become overwhelming for some kinship caregivers, making it even more difficult to care properly for themselves and for the children they are raising.

A support group allows participants to share their personal experiences with others who are in similar situations and are experiencing the same types of issues. A support group can provide a productive way to accept and “work through” problems as a group and make the participants feel less alone in their struggles. In a sense, a support group can serve as a kind of “extended family” for kinship caregivers, sometimes leading to friendships that may outlast the group itself.

The number of support groups for relatives raising children is increasing. Most counties in Washington State now have one or more such groups. Many of them offer childcare so that both the relative and their child have a chance to socialize. For many, support groups offer relatives the only respite from their parenting duties.

Support Groups Can:

- Offer emotional support to caregivers who feel alone and isolated.
- Create a network of caregivers who are in the same situation.
- Offer guidance, assistance, and feedback to relatives in their efforts to care for their child.
- Give ideas on creative, positive solutions to difficult and challenging problems.
- Serve as a connection to resources and information.
- Offer a safe, understanding place to discuss the emotional ups and downs of raising a relative.
- Provide tools for advocacy on the issues one faces raising a relative's child.

To locate the nearest support group in your area, visit the **Kinship Care in Washington State website at www.dshs.wa.gov/kinshipcare** and click on **“Support Groups”**, **contact your local Kinship Navigator**, or **call the Family Help Line at 800-932-4673**.

If there is no support group in your area, **contact 360-725-2556 or email hauptp@dshs.wa.gov** for advice on how to start one.

Respite Services

Respite is temporary, short-term care for a person or persons with a disability or a chronic or terminal illness. Respite provides relief to caregivers from the demands of on-going care for individuals with special needs. You, or someone you know, may need respite if he or she is caring for adults or children with a physical or developmental disability, a chronic or terminal condition requiring ongoing care and supervision, Alzheimer's disease or related disorders, medical fragility, or individuals at risk for abuse or neglect.

To help you find respite, **call the National Respite Locator Service at 919-490-5577** or **visit their website at www.respitelocator.org**. If you live in King County you can obtain information about county-wide resources in the *Respite and Crisis Care Coalition of Washington (RCCCWA) Resource Guide*. The *RCCCWA Guide* is available to download at The Arc of King County **website at www.arcofkingcounty.org/respite**.

Respite Care Services are sometimes available to unpaid primary caregivers who provide care and/or supervision to adults age eighteen and over with a functional disability, through Washington State's Area Agencies on Aging. In several areas around the state, grandparents and other relatives who are 55 years and older can access respite care services through a program called the Family Caregiver Support Program. Contact the nearest Senior I&A office to learn more about eligibility and services available through the Family Caregiver Support Program. **To find the local office call 1-800-422-3263 or go to www.adsa.dshs.wa.gov/** and click on "Caregiver Resources."



For respite care services for caregivers of children with disabilities, you can also call **Easter Seal Society of Washington at 253-884-2722 in Tacoma** or at **509-326-8292 in Spokane** or **visit their website at www.seals.org** and click on "Camping and Respite." They provide respite weekends twice monthly and a residential camp during summer months.

You can also **call the Family Health Hotline toll-free at 1-800-322-2588**, for other resources. Other people, including your doctor, church or synagogue, employer, neighbors, and family may be able to assist you in finding respite care. You can also call **Children's Resource Line** for summer camps and programs for children with special needs at **1-866-987-2500, press 4**.

Coping With Challenging Emotions

It's natural to feel sad and angry. You're watching a child you love struggle with loss and pain, and it hurts you to see it. Your life has changed drastically too, and you may miss having time for your own friends and interests. "I was always the hardworking one, with goals for my life," said one woman angrily, "while my sister was out partying. Now she's still living the high life, and I'm changing her kids' diapers."

You may also worry a lot. A grandfather, raising the children of his crack-addicted daughter, spoke with sadness in his voice: "Sometimes at night, I hear a siren or a woman screaming. I wonder if it is my daughter in trouble out there. I try to do my best for the little ones, but I'm scared for them, too."

At times, you hurt so much it seems you just can't bear it. Yet even the most painful feelings fade with time. You can talk them out with others. You can pray or take quiet moments to relax. You may find comfort from a support group, counseling, or other services discussed in this book.

Much as they hurt, painful feelings won't break you. Try to be patient, and remember that the worst of the pain will pass with time. You may also start feeling better when you see progress. As the children do better in your care, you'll feel pride and relief.

Stress Busters

Whatever you do, don't forget to take care of yourself! When new children enter a household, it's common for apprehension to mount. Stress-related health problems may start or get worse. You can help keep it from happening to you and stay strong for your family by taking care of yourself now using the tips below.

- Make your health your first priority. See your doctor regularly and follow his/her advice.
- Create a regular "quiet hour" in your household, whether it's naptime for infants or stereo (with earphones) for teens.
- Take time to nurture yourself.
- Take the child places that are restful for you. A library, park, or public pool can be nice, as long as they're not too crowded.
- Practice patience. Let others in your family do as much for themselves as possible.
- Look for local activities where the children will be safe and you can enjoy time apart. Libraries, community centers, 4-H Clubs, YMCA, YWCA, Boys and Girls Clubs, Big Brothers and Sisters, Mentoring Programs, Girl Scouts and Boy Scouts, all may have programs, many of them free or low cost.
- Do something you enjoy.

- Since you probably have not had to “parent” for a while, you may find it useful to look into parenting classes to learn different methods for helping children develop self-esteem, confidence, accountability, and responsibility.
- Start a co-op with other parents or caregivers and trade watching each other’s children for a couple of hours weekly.
- Keep a sense of humor.
- Join a support group.
- Lower your standards (for a clean house, for perfect manners).
- Talk with friends, family members, or a counselor.
- Consider your religious community and personal faith for strength and assistance. Contact your church, synagogue, or tribe for help its members can provide.
- Learn to say NO.
- Reward yourself.

Know Your Limits

We all have times when we wish we could fix everything that’s causing pain to those we love. You may wish you could provide the perfect loving home, which would make all the children’s problems magically disappear. The truth is that you can’t, and neither can anyone else. You can, however, help a lot, by remembering:

- You can’t keep a child in your family from feeling sad or acting angry. You can offer care and understanding, and help find counseling if needed.
- You can’t erase a history of pain and abuse for a child. You can provide a safe, nurturing home for them to heal.
- You can’t make a child a better student overnight. You can help with homework, read together, limit television, and work with the child’s school to discover other learning opportunities.
- You can’t make the child’s parents get better. You can suggest drug treatment or other services you think might help, and encourage them if they go.
- You can’t do everything right, any more than any parent can. You can get services and support to help you do your best with all the challenges.
- You can’t assume you will always be able to cope, and sometimes you may need professional help to remain healthy and supported. You can contact mental health professionals in your community if you feel you need extra support.

Appendices

A. Community Services in Washington State

The numbers listed below are for general information and may refer you to a local resource:

AARP Grandparent Information Center	888-687-2277
AARP Tax Aide Program	888-227-7669
Access to Baby & Child Dentistry Program (ABCD).....	800-562-3022
Adoption Support Program/DSHS.....	800-562-5682
Aging and Disability Services Administration/DSHS	800-422-3263
Alcohol/Drug 24 Hour Helpline (Teen Line).....	800-562-1240
ARC of Washington State	888-754-8798
ASK (Answers for Special Kids) Line	800-322-2588
At Risk/Runaway Youth Program/Drug and Alcohol/DSHS	360-438-8079
Basic Health Plan for Washington	800-826-2444
Birth Certificates, WA State Dept. of Health	360-236-4300
Child Abuse and Neglect (End Harm)	866-363-4276
Child Care Resource and Referral Services (WA State)	800-446-1114
Child Nutrition Program/OSPI	360-725-6200
Child Support Help Line	800-457-6202
Children’s Resource Line	866-987-2500 #4
Children with Special Health Care Needs	800-322-2588
CLEAR Legal Education, Advice, and Referral Line (Washington)	888-201-1014
CLEAR Senior	888-387-7111
Community Service Offices (CSO)/DSHS.....	800-865-7801
DSHS Constituent Line - Information and Referral.....	800-737-0617
Division of Developmental Disabilities/DSHS.....	360-902-8444
Early Head Start National Resource Center	202-638-1144
Easter Seal Society of Washington/Tacoma office.....	253-884-2722
Spokane office	509-326-8292
Eldercare Locator.....	800-677-1116
Emergency Services	911
Families for Kids Recruitment Resources	888-794-1794
Family Food Hotline	888-436-6392

Family Health Hotline	800-322-2588
Family Help Line.....	800-932-4673
Fetal Alcohol Syndrome Diagnostic and Prevention Network	206-598-7666
Infant Toddler Early Intervention Program (ITEIP)	800-322-2588
Internal Revenue Service (IRS)	800-829-1040
Kinship Caregivers Support Program (for local AAA number).....	800-422-3263
Kinship Navigators (for local numbers).....	800-422-3263
Learning Disabilities Association of WA State	425-882-0792
Legislative Hotline.....	800-562-6000
Mediation in Special Education/Sound Options Group	800-692-2540
Medical Assistance Customer Service Center/DSHS	800-562-3022
Mental Health Division/ADSA/DSHS, Office of Consumer Affairs.....	800-446-0259
Mental Health Division Parenting Advocate	800-446-0259 #3
Mental Health Helpline-NAMI Greater Seattle.....	800-782-9264
National Center for Grieving Children & Families	503-775-5683
National Indian Child Welfare Association	503-222-4044
National Youth Violence Prevention Resource Center.....	866-723-3968
Northwest Justice Project	206-464-1519
Northwest Women’s Law Center Information & Referral.....	206-621-7691
Office of the Education Ombudsman (OEO)	866-297-2597
Office of the Family and Children’s Ombudsman (OFCO)	800-571-7321
Office of the Superintendent of Public Instruction (OSPI).....	360-725-6000
Parent 123.....	800-322-2588
Parent to Parent Support Program	800-821-5927
Parents are Vital In Education (PAVE)	800-572-7368
Planned Parenthood.....	800-230-7526
Poison Information Center	800-732-6985
Safety Restraint Coalition	800-282-5587
Social Security Administration/General Information Line.....	800-772-1213
State Children’s Health Insurance Program (SCHIP).....	877-543-7669
Statewide Action for Family Empowerment (SAFE)	866-300-1998
Statewide Health Insurance Benefits Advisors (SHIBA).....	800-397-4422
Team Child	206-322-2444
Washington Information Network.....	211
Washington Poison Center	800-222-1222
Washington State Operator	800-321-2808
Women, Infants, and Children Nutrition Program (WIC)	800-841-1410

B. National Resources for Relatives as Parents

AARP Foundation – Grandparent Information Center

601 “E” Street NW, Washington, DC 20049

Phone: 1-888-687-2277, Email: gic@aarp.org

Website: <http://www.aarp.org/families/grandparents/gic>

The Grandparent Information Center (GIC) offers a variety of information about being a good grandparent, visitation rights, and raising grandchildren. Grandparents can access tip sheets and a free newsletter on topics including raising grandchildren, starting support groups, and addressing their educational needs.

The Brookdale Foundation Group

950 Third Avenue, 19th Floor, New York, NY 10022

Phone: (212) 308-7355, FAX: (212) 750-0132

Website: www.brookdalefoundation.org

The Brookdale Relatives As Parents Program (RAPP) provides seed grants to support local and state agencies serving grandparents and other relatives who are raising children.

Children of Alcoholics Foundation (COAF) – Ties That Bind Project

164 West 74th Street, New York, NY 10023

Phone: (646) 505-2060

Website: www.coaf.org/family/caregivers/kinmain.htm

COAF provides tips for relatives who have taken over the care of a child when parents’ drug or alcohol use has left them unable to care for their children. Suggestions, tips and strategies are available in the following areas: talking about alcohol and drugs with children, dealing with the substance abusing parent, coping with children’s behavioral problems, dealing with caregiver’s own feelings, and facts/myths about substance abuse.

Children’s Defense Fund (CDF)

25 “E” Street NW, Washington, DC 20001

Phone: (202) 628-8787 or 1-800-233-1200, Email: cdinfo@childrensdefense.org

Website: www.childrensdefense.org

The Children’s Defense Fund (CDF) provides a voice for all children of America who cannot vote, lobby, or speak for themselves. CDF provides information on the latest issues facing grandparents and other relatives’ caregivers. A list of CDF’s publications for kinship caregivers and those professionals who work with them can be found at the end of this guide. All publications are accessible on CDF’s website.

Child Welfare League of America

2345 Crystal Drive, Suite 250, Arlington, VA 22202

Phone: (703) 412-2400

Website: <http://www.cwla.org/programs/kinship/default.htm>

The Child Welfare League of America (CWLA) is an association of public and nonprofit child welfare agencies. CWLA offers tips on parenting, discipline, and child development. In addition to advocating for kinship care families on the national level, CWLA offers a bi-annual national conference that focuses exclusively on kinship care issues.

Generations United

1333 H Street, N.W., Suite 500 W Washington, DC 20005

Phone: (202) 289-3979, Email: gu@gu.org

Website: www.gu.org

Generations United (GU) supports a National Center on Grandparents and Other Relatives Raising Children, which seeks to improve the quality of life of these caregivers and the children they are raising. The website provides information including overviews of current innovative kinship care programs, updates on federal and state legislation, legal options, housing, public benefits, and links to additional kinship care resources.

GrandFamilies of America

6525 Fish Hatchery Road Thurmont, Maryland 21788

Phone: 1-301- 898-8023 Direct; Toll Free: 1-866-203-8926, ext. 8103

Website: <http://grandfamiliesofamerica.com>

GrandFamilies of America's goal is to bring together grandparents/relative caregivers, to provide them 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 their family ties and heritage for future generations.

National Aging Information Center – U.S. Administration on Aging

U.S. Health & Human Services

330 Independence Avenue, S.W. Washington, DC 20201

Phone: (202) 619-0724

Website: www.aoa.dhhs.gov

The center offers a listing of helpful books and resources for grandparents and other older individuals raising grandchildren. The website also provides contact information for each state's Department on Aging, so kinship caregivers can find support programs and services near them. Information also may be requested by phone.

National Committee of Grandparents for Children's Rights (NCGCR)

Phone/Fax (866) 624-9900, Email: bcastellano@grandparentsforchildren.org

Website: www.grandparentsforchildren.org

The NCGCR is a coalition of concerned grandparents, citizens and agencies united to create one powerful voice and to network with groups throughout the nation. The mission is to protect the rights of grandparents to secure their grandchildren's health, happiness and well-being.

C. Selected Bibliography

- Callender, J. *Second Time Around: Help for Grandparents Who Raise Their Children's Kids*. Wilsonville, OR: Book Partners. 1999
- Coloroso, B. *Parenting with Wit and Wisdom in Times of Chaos and Loss*. New York, N.Y.: Penguin Books. 1999
- Comer, J.P., M.D. and Poussaint, A.F., M.D. *Raising Black Children*. New York: Penguin Books. 1992
- DeToledo, S. and Brown, D.E. *Grandparents as Parents: A Survival Guide for Raising Second Family*. New York, N.Y.: Guilford Press. 1995
- Dudman-Doucette, D. *Raising our Children's Children*. Minneapolis: Fairview Press. 1996
- Faber, A and Mazlish, E. *How to Talk So Kids Will Listen & Listen So Kids Will Talk*. New York: Avon Books. 1980
- Hickman, M.W. *Robert Lives with His Grandparents*. Morton Grove, Ill.: Albert Whitman and Company. 1995
- Houtman, S. *To Grandma's House, We Stay*. Northridge, CA.: Studio 4 Productions. 1999
- Kent, S. *Let's Talk About Living with Grandparents*. Powerkids Press, 2001
- Kornhaber, A. *The Grandparent Guide: The Definitive Guide to Coping with the Challenges of Modern Grandparenting*. New York.: McGraw Hill/Contemporary Books. 2002
- Minkler, M. and Roe, K.M. *Grandmothers as Caregivers: Raising Children of the Crack Cocaine Epidemic*. Newbury Park, CA.: Sage Publications. 1993
- Sederman, M., Epstein, S., and Brooks, K. *The Magic Box: When Parents Can't Be There to Tuck You In*. Washington, D.C.: American Psychological Association Publications. 2002
- Silvas, Linda. *Mama Bear, Baby Bear: A Native American Lore*. Bloomington, IN: Authorhouse, April, 2005
- Takas, M. *Relatives Raising Children – A Guide to Finding Help and Hope*. Brookdale Foundation Group, Inc. 1998

Kinship Navigators

Sometimes relatives who are raising children feel overwhelmed by the array of service providers, the complexity of agencies, or just don't know where to start. Washington State is fortunate to have a growing network of local Kinship Navigators whose job it is to help relatives "navigate" their way through the system.

To find a Kinship Navigator who can help direct you to resources in your area, **call 1-800-422-3263 or visit the Kinship Care in Washington State website at www.dshs.wa.gov/kinshipcare**. Click on "Benefits and Services."

To order additional copies of this publication, **visit the Department of Printing website at www.prt.wa.gov, click on General Store, phone 360-570-3062, or email fulfillment@prt.wa.gov**. Requests must include the DSHS publication number (DSHS 22-996X), the quantity you want to order, your name, street address, and phone number.

**Now Available on
the Internet!**

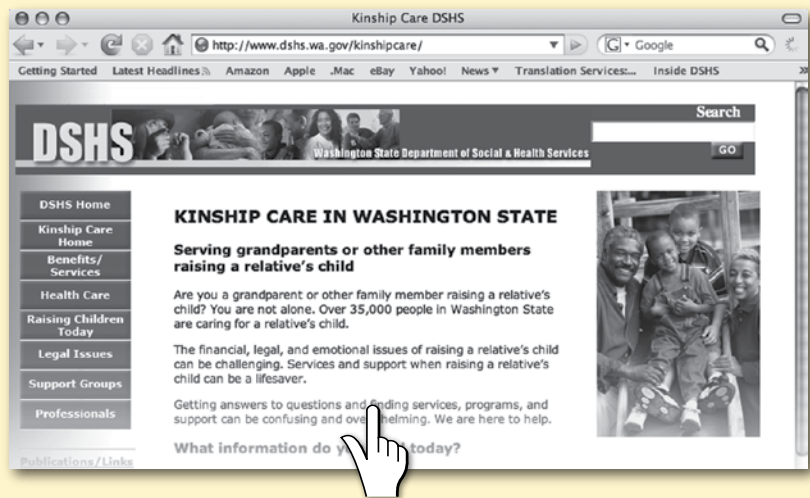
Resources for Grandparents and Other Relatives Raising Children

Learn More About

- Financial Assistance
- Health Care
- Mental Health
- Drug and Alcohol
- Child Care
- Food Assistance
- Child Support
- Children with Disabilities
- Foster Care
- Kinship Navigators
- Support Groups
- Free Publications
- Additional Reading
- National Websites
- Benefits CheckUp
- Legislative Documents

Visit...

www.dshs.wa.gov/kinshipcare



For more information, contact:

Tom Berry, Economic Services
Administration at berrytj@dshs.wa.gov
or 360-725-4617

Hilari Hauptman, Aging and Disability
Services Administration at
haupthp@dshs.wa.gov or 1-800-422-3263

Michael Luque, Children's Administration at
lumi300@dshs.wa.gov or 360-902-7986

A joint project of Aging and Disability Services Administration, Economic Services Administration, and Children's Administration.