

## Sample Op-Eds

### From 2014 at Start of Advocacy for National Kinship Care Month

The below articles were part of advocacy in New York State at the start of the effort. They are provided here as samples.

#### **Kinship Care Growing**

**Written by Rachel Glaser, Program Administrator NYS Navigator**

**(Published in the Democrat and Chronicle – Rochester, NY, on 9/13/14)**

New York has between 150,000 and 250,000 children living full time with kin. As many as 7,900 of these families reside in Monroe County. Kinship care, as it's commonly termed, refers to caregiver grandparents, aunts, uncles, cousins, adult siblings and even family friends. Nationally, more than 2.7 million children live with relatives. Most of these children are not in foster care; they are being cared for by non-parents outside the "formal" system. Almost all have suffered the loss of parents and homes.

This is the first year that New York will celebrate September as Kinship Care Month. The Legislature and the governor have issued proclamations marking September as the time to praise the virtues of kinship families and recognize their importance to New York's vulnerable children.

September is also the month when National Grandparents Day is celebrated. Since about 60 percent of kinship caregivers are grandparents, the month is now a double celebration for many families with grandparent caregivers.

Kinship care isn't a picnic. It's a loving chore. Children live with their kin because of unfortunate circumstances. At the NYS Kinship Navigator, which is based in Rochester but serves the entire state, we hear from caregivers in New York City, Plattsburgh, Buffalo, and all points in between. Their stories are remarkably similar. Parents cannot parent, often because of drugs and alcohol, and family must step in quickly.

But the families are remarkably successful. A result that we credit to the determination and unconditional love of caregivers.

To meet kinship caregivers and to hear their stories is an altogether different thing, an incredible experience. The best of human nature is on display. Kinship advocates constantly talk about the near sainthood of care-givers. Just imagine a distressed and hurt child, who has been abused and neglected, coming suddenly into your home. And no special resources or help. Would you have the courage and perseverance to accept the challenge?

Well, if it was your kin, I'm confident you would. That's the story of kinship care. And it's a great story, filled with love and sacrifice. This month we can all remember someone who has volunteered to be a child's caregiver and go thank them. That's a common cause worth celebrating.

### **Support of Kinship Care Vital**

Written by Gerard Wallace, Esq. Director, NYS Kinship Navigator  
(Published in the Times Union – Albany, NY, on 9/25/14)

Imagine getting a call from the local social services department asking you to immediately become the caregiver for your 4-year-old granddaughter. Her mother's been arrested, or the parent's on drugs, or worse. What would you do? You would say, "Yes. I want my grandchild." Because that's what families do — care for their own.

Often the family makes the placement with no contact from social services. Contact or no contact, the circumstances are similar. Children who've suffered loss, who are injured in body, mind, or spirit, now need their kin to act as their parents.

Kinship care refers to the more than 150,000 New York children who live full time with grandparents, relatives and family friends. Their caregivers, who are frequently at or near income poverty levels, have multiple challenges — the additional costs of bringing children into their homes, the endless search for services, the fight to keep a family together, their own health needs, and planning a future for their children.

As shown by the well-known Adverse Childhood Experience (ACE) Study, multiple stressors in childhood can lead to crippling lifetime social, health and economic problems. Many kinship children, like most foster children, have experienced multiple stressors. They need special supports that reduce stress and address mental health needs. While kinship caregivers are determined and resilient, they shouldn't have to do the job alone.

More than 95 percent of New York's kinship children are not in foster care, although the reasons for their care are frequently similar to the reasons children enter foster care — parental abuse, neglect, abandonment, incarceration, death, alcohol and substance abuse, mental illness, and similar unfortunate circumstances. Yet despite the obstacles, child welfare experts agree that kinship homes offer the best resource for vulnerable children, providing resilience, continuity, and unconditional love — qualities of care that can help even severely traumatized children overcome their fears. Kinship care is indeed an indispensable part of the child welfare system.

In a happy development for Kinship Care Month, the U.S. Senate finally came together on the last day of session in September and passed H. R. 4980, which contains third year of funding for seven kinship navigator demonstration projects, including one in New York. Passage avoids ceasing operation of the projects — a bipartisan gift for New York's Kinship Care Month.

Kinship caregivers will continue to go on, as they've always done, determined that children will have loving homes, persevering in overcoming all obstacles.

In late August, Gov. Andrew Cuomo issued a proclamation, and last March both the Assembly and Senate issued resolutions that proclaimed September as Kinship Care Month. By recognizing kinship families, New York's leaders are doing the right thing and honoring both an American tradition and a valuable ally to its child welfare system.

New York, too, will continue its commitment to kinship families. The state's Office for Children and Family Services and Office for the Aging will continue to provide specialized kinship services, including the statewide kinship navigator and local programs, as will other agencies and organizations. It's a fact that kinship care is part of how we care for children — always has and always will be.

This month, take the time to celebrate an American tradition and thank a grandparent, a relative, a family friend. They are a national treasure and deserve our appreciation.

### **Our Nation's Father and Our Foremost Kinship Caregiver**

Written by Gerard Wallace, Esq. Director, NYS Kinship Navigator (unpublished)

Kinship care isn't new. It's as American as apple pie. And there's a good reason to make a commitment to recognizing kinship caregivers now, in conjunction with our first president's birthday: because George Washington was a kinship caregiver.

The Father of our Nation had no children of his own. A fact interpreted in his lifetime as divine intervention, saving the young nation from a hereditary monarchy. However, he and Martha were not childless. George and Martha were caregivers to many orphaned nieces and nephews, and most notably to Martha's grandchildren (and George's step-grandchildren), Eleanor Parke "Nellie" Custis and George Washington Parke "Washy" Custis.

Martha's first marriage to Daniel Parke Custis, a wealthy Virginian plantation owner, ended with his death in 1757, leaving Martha to raise their two children. Martha soon remarried to George Washington. Martha's son John Parke Custis later became a Virginia state legislator and an officer in the Continental Army. At Yorktown, he died of "camp disease" (probably typhus) just after British General Cornwallis surrendered.

John Parke left behind four children. The two youngest, Nellie, two years, and Washy, seven months, were informally adopted and raised by George and Martha. George doted over Nellie, a vivacious and bright child but worried about Washy, who seemed to favor his undisciplined and spoiled father's habits (Incidentally, years later Washy's daughter, Mary Anna Custis, married General Robert E. Lee).

In 1789, both children came with the Washington's to New York City, the nation's first capitol, and lived in the first presidential manors on Cherry Street and then on Broadway near Trinity Church. When the capitol moved to Philadelphia, the kinship family lived in a mansion on Hill Street.

George and Martha were our first "first family" and foremost kinship family. Like other kinship families, then and now, they became caregivers because of tragedy - not uncommon in their times when so many now curable diseases cut short the lives of so many.

Today, kinship care is an indispensable ally of our child welfare system. Yet, these families face daunting obstacles, with very little supports. Their children have many of the same problems faced by foster children, including developmental disabilities, maltreatment, trauma, and loss. Additionally, the caregivers are older and poorer, and they must manage the intergenerational issues associated with the parents' failure to parent successfully. Despite these obstacles, studies conclude that kinship homes provide as good if not better outcomes for children than foster care placements in the homes of strangers.

Additionally, as the Adverse Childhood Experience study translates into increased policy attention on the destructive lifetime consequence of multiple childhood stressors, policy makers must pay greater attention to kinship children, who are quantitatively among the largest populations of children who've experienced multiple stress factors. Particular attention must be paid to their mental health needs and to assisting caregivers in reducing stress factors.

The New York State Kinship Navigator in partnership with local kinship programs provides support that helps to reduce these adverse factors. Local kinship programs provide a variety of direct services, focusing on advocacy, case management, support groups, and education, while the Navigator provides legal referral, information, virtual advocacy, and agency collaborations.

This year in recognition of our first "first family" and our foremost kinship caregiver, it's time to support these families with the help that they deserve, first by having the state recognize them, and then through reform and practical support.

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