# A Guide to the National Family Caregiver Support Program and Its Inclusion of Grandparents and Other Relatives Raising Children









Generations United Revised September 2003



#### **Generations United**

Mission: To improve the lives of children, youth, and older people through intergenerational collaboration, public policies, and programs.

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> Generations United's National Center Grandparents and Other Relatives Raising Children

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# **Generations United**

Generations United (GU) is the national membership organization focused solely on promoting intergenerational strategies, programs, and policies. GU represents more than 100 national, state, and local organizations representing more than 70 million Americans. It is the only national organization advocating for the mutual well-being of children, youth, and older adults. GU serves as a resource for educating policymakers and the public about the economic, social, and personal imperatives of intergenerational cooperation. GU provides a forum for those working with children, youth, and older adults to explore areas of common ground while celebrating the richness of each generation.

# **Generations United Mission**

To improve the lives of children, youth and older people through intergenerational collaboration, public policies and programs.

# Vision:

A society that values all generations.

# **Core Beliefs:**

We believe the time has come for advocates for children, youth, and older persons to work together to build and support a common agenda. Each generation has unique strengths to help meet the need of another. Efforts to create more decent societies rest on the interdependence of generations – past, living, and still to come. Further we believe:

- Intergenerational collaboration will unite and improve our communities;
- Every person, younger and older, is a resource and adds value;
- Public policy should meet the needs of all generations;
- Resources are more wisely used when they connect the generations rather than separate them;
- Discrimination in any form limits a person's potential to contribute to the development of their community; and
- Grandparents and other relatives who step forward to raise children are providing an invaluable service to their families and our country.

# **Executive Summary**

The National Family Caregiver Support Program (NFCSP) was enacted into law on November 13, 2000, and is designed to provide five categories of supportive services to two types of caregivers: family caregivers of individuals aged 60 or older, and grandparents and older relatives aged 60 and older who raise children. This guide is intended to provide information to State Units on Aging (SUAs), Area Agencies on Aging (AAAs), and the caregivers themselves about the NFCSP's inclusion of the second category of caregiver.

#### Background Concerning Grandparents and Other Relatives Raising Children

Nearly 5.8 million grandparents are living in households with one or more of their own grandchildren under the age of 18. More than 2.5 million of these grandparents have primary responsibility for meeting the basic needs of these children (U.S. Census Bureau, 2002). Six million children – one in twelve under age 18 –live in homes headed by grandparents or other relatives (U.S. Census Bureau, 2000). These numbers have grown in the last twenty five years. Reasons include parental drug and alcohol abuse, incarceration, death, teenage pregnancy, poverty, HIV/AIDS, and even military deployments. Because of the omnipresence of these factors, anyone can find him or herself raising related children. Many relative caregivers are raising children informally, meaning outside of the formal foster care system and without a legal relationship, like legal custody or guardianship. These caregivers have difficulty accessing services, such as school enrollment and health insurance on behalf of the children. The NFCSP has responded to these needs by including informal caregivers among those eligible for the five categories of supportive services.

# National Family Caregiver Support Program Provisions

Congress appropriated \$155.2 million in fiscal year 2003 for the NFCSP. This is a \$30 million increase from the NFCSP's first year in 2001. According to the law, the money is distributed each year to the states and the states, in turn, allocate funds to the AAAs based on intrastate funding formulas. The AAAs actually provide the support services to the caregivers or contract for their provision. States are required to match 25% of their allocation with nonfederal dollars.

Up to 10% of the funds appropriated for the NFCSP can be used to provide support services to relative caregivers. Other than that, funds under the NFCSP are not earmarked. AAAs may use the funds to provide any and all of the five categories of support services authorized by the NFCSP to relative caregivers.

DEFINITION OF GRANDPARENT OR OLDER RELATIVE WHO IS A RELATIVE CAREGIVER The NFCSP defines "grandparent or older relative who is a relative caregiver" to mean: a grandparent or stepgrandparent of a child, or a relative of a child by blood or marriage, who is 60 years of age or older and –

- (A) lives with the child;
- (B) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and
- (C) has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally.

When GU submitted language to include relative caregivers in the NFCSP, it specifically included the "informal" caregivers. Although no national studies exist on the issue, anecdotal evidence suggests that the majority of relative caregivers are "informal," i.e., raising children without a legal relationship such as guardianship or legal custody. As a result, GU thought it very important that they be included.

There are currently 5.4 million children living in grandparent- or other relative-maintained households, 2.1 million of whom are being raised solely by their grandparents or other relatives with no parents present (U.S. Bureau of the Census, 1998). Many of these relative caregivers are raising children informally, meaning outside of the formal foster care system and without a legal relationship, like legal custody or guardianship.

#### SUPPORT SERVICES

The following are the five categories of support services delineated in the NFCSP:

- (1) information to caregivers about available services;
- (2) assistance to caregivers in gaining access to the services;
- (3) individual counseling, organization of support groups, and training caregivers to assist them in making decisions and solving problems relating to their caregiving roles;
  - (4) respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
  - (5) supplemental services, on a limited basis, to complement the care provided by caregivers.

#### PRIORITY LANGUAGE

The NFCSP includes a provision stating that states must give priority for services to older individuals with greatest social and economic need, and to older individuals providing care and support to persons with mental retardation and related developmental disabilities. According to the AoA, children living with grandparents or other relative caregivers are not required to have mental retardation or related developmental disabilities in order for the caregiver to receive services. However, the children must be no more than 18 years of age, regardless of whether or not they have mental retardation or related developmental disabilities (AoA, FAQ, 2003).

#### Survey Results

In 2003, GU completed its survey of the aging network, Native American Tribes, and primary health care centers. Survey results, which are summarized in this guide, indicate that the aging network significantly lacks education and training concerning grandparents and other relatives raising children. Data show that probably because of this limited education and training, these caregivers are not receiving proportionate services. Limited funding and the age restriction in the NFCSP are also fundamental reasons why services are often unavailable.

#### **Program Examples**

One effective technical assistance tool is to provide concrete information about successful programs administered by AAAs. This guide contains profiles of programs in each of the five categories of supportive services funded through the NFCSP. For instance, under the category of *Information to Caregivers About Available Services*, the Southwest Kansas AAA's initiative to help these families is described. That AAA reaches its rural caregivers by disseminating folders to area school districts that contain information about helpful services available throughout its 28 county area. Under Supplemental Services, the Northwest AAA in Illinois is highlighted. That AAA contracts for the provision of free legal services to grandparents and other relative caregivers.

#### Conclusion

The NFCSP is an important Federal program that provides much needed funding to AAAs wanting to support grandparents and other relatives raising children. In order to be more effective, the program will need increased funding and a younger age restriction. However, the NFCSP is a significant first step in providing money to AAAs that want to expand or offer new services to help these families.

In order for us to keep this publication current, it is important that we hear about developments in your state. Please share with GU information about your own programs, including plans, progress, and accomplishments.



# I. Introduction

he National Family Caregiver Support Program (NFCSP) was enacted into law on November 13, 2000 as a part of the Reauthorization of the Older Americans Act. It is designed to provide five categories of supportive services to two types of caregivers: family caregivers of individuals aged 60 and older, and grandparents and older relatives aged 60 and older who raise children. This guide is intended to provide guidance to State Units on Aging (SUAs), Area Agencies on Aging (AAAs), and the caregivers themselves about the NFCSP's inclusion of the second category of caregiver. The guide includes background information about grandparents and other relatives raising children, guidance concerning the provisions of the NFCSP itself, results from a national survey GU conducted of the aging network, and program models from SUAs and AAAs around the country. It is hoped that the information provided in this guide will assist other SUAs and AAAs to replicate successful models and help support these families.

#### About Generations United:

Generations United (GU) is the only national nonprofit membership organization whose mission is to promote intergenerational public policies, strategies, and programs. GU was founded in 1986 by the Child Welfare League of America, the National Council on the Aging, the Children's Defense Fund, and AARP and now includes over 100 national, state, and local organizations representing more than 70 million Americans.

One of GU's core initiatives is its National Center on Grandparents and Other Relatives Raising Children. GU's National Center publishes and disseminates publications, tracks state laws and programs, educates federal policy makers, and, provides technical assistance and training to the aging network and other professionals working with the families through its National Network of Expert Trainers (NNET). GU is one of 11 national organizations to receive an innovative grant from AoA as a project of national significance to support the implementation of the NFCSP with respect to its inclusion of grandparents and other relatives raising children. As a part of its cooperative agreement with AoA, GU conducted a survey of aging network service providers and has published this guide which includes those results.

GU also partnered with the Brookdale Foundation Group to establish KinNET, a national network of support groups for relatives caring for kin in foster care, and to replicate Brookdale's Relatives As Parents Program in ten mental health agencies around the country. GU received funding from the Children's Bureau of the U.S. Department of Health and Human Services (DHHS) for KinNET, and from the Center for Mental Health Services at DHHS for the replication program.

#### Generations United and the National Family Caregiver Support Program

In spring 1999, when the NFCSP was originally introduced in Congress, it did not include grandparents and other relatives raising children. Instead, it was designed solely to provide services to family caregivers of individuals aged 60 and older. GU was supportive of the NFCSP and thought it was important to help these caregivers. However, GU also thought it was important to acknowledge older individuals not only as the receivers of care, but also as the givers of care, which they so often are. As a result, GU met with several Members of Congress about including grandparents and other relatives in the NFCSP. In June 1999, Senator DeWine (R-OH) invited GU to testify regarding the inclusion of these caregivers. Generations United testified before the Subcommittee on Aging of the Senate Health, Education, Labor, and Pensions Committee. The testimony was well received and resulted in an invitation to GU to provide draft language for inclusion in the legislation. GU provided the language to Senator DeWine's staff and worked with them to include it in the NFCSP. GU also continued to educate other Members about the need for its inclusion. As a result of the efforts of GU and others, grandparents and other relatives raising children were included in the version of the NFCSP that became law.

# Background Concerning Grandparents and Other Relatives Raising Children

Nearly 5.8 million grandparents are living in households with one or more of their own grandchildren under the age of 18. More than 2.4 million of these grandparents have the primary responsibility for meeting the basic needs of these children (U.S. Bureau of the Census, 2000). More than 6 million children – about one in twelve children live in homes headed by grandparents or other relatives (U.S. Bureau of the Census, 2000). Approximately 2.1 million of these children are being cared for without any parents present (U.S. Bureau of the Census, 1998). The majority of these children are being raised by their grandparents. In the last twenty-five years, there has been dramatic growth in the number of grandchildren being raised by grandparents in all types of grandparent-maintained households (Casper & Bryson, 1998).

Of the 2.1 million children living with grandparents or other relatives with no parents present, approximately 130,869 of them are in the formal foster care system. The 130,869 children make up almost a fourth of the entire foster care population of 542,000 children (U.S. Department of Health and Human Services, AFCARS, March 2003 estimates). The remaining 2 million children are being cared for outside of the system, and their caregivers often do not have access to any support services or financial assistance. If even half of these

2 million children were to enter the foster care system, it would cost taxpayers \$6.5 billion a year and completely overwhelm the system. Alternative support services, such as those provided through the NFCSP, need to be available in each community where these families live to support caregivers and children.

#### • Causal Factors

Factors causing the increase in the number of grandparents and other relative raising children include parental drug and alcohol abuse, incarceration, death, teenage pregnancy, poverty, HIV/AIDS and even military deployments. Because of the omnipresence of these factors,

anyone can find him or herself raising related children.

• Characteristics

U.S. Census Bureau statistics prove the diversity of these families. Seventy-two percent of the grandparents raising grandchildren are married couples. Twenty percent are living in poverty and 58% are in the workforce (U.S. Census Bureau, 2001). Forty-nine percent of the caregivers are white, 28% are black or African-American, and 16% are Hispanic or Latino (U.S. Census Bureau, 2000).

Census data also demonstrates that these grandparent caregivers are raising children for long periods of time. Thirty-seven percent are responsible for five years or more, 15% for three or four years, 26% for one or two years, and 22% for less than one year (U.S. Census Bureau, 2001).

The majority of grandparent caregivers – seventy one percent – are under age 60 (U.S. Bureau of the Census, 2000). Although the NFCSP is an important program, given its age restriction to relative caregivers aged 60 and older, the majority of grandparents and other relative raising children cannot be targeted through its funding. Often AAAs collaborate with other human resource providers and use additional sources of funding in order to reach younger caregivers as well.

# • Formal and Informal Relationships

Many of the relative caregivers are raising children informally, meaning outside of the formal foster care system and without a legal relationship, like legal custody or guardianship. They do not want to sue their adult children or other relatives, the parents, in court for legal custody or guardianship. To do so, relatives must prove that parents are unfit, which often tears families apart, rather than keeping them together. Furthermore, to adopt the children, parental



rights and responsibilities must be severed and the relative becomes the parent in the eyes of the law. This is a step that many grandparents and other relatives are unwilling to take. However, access to services on behalf of the children can be severely limited if the relatives have not adopted the children or lack legal custody or guardianship. Informal caregivers are among those eligible for services under the NFCSP. In other words, caregivers are not required to prove a legal relationship in order to access supportive services. Many existing services, however, still pose a problem and cause challenges for the informal relative caregivers.

#### • Access to Services

These access limitations often arise with respect to obtaining medical treatment and public health insurance policies on behalf of the children. Even for relative caregivers who have well-paying jobs and comprehensive private insurance policies, including children on them is often prohibited unless the relatives have adopted them. Relative caregivers may also be unable to access school enrollment and/or special education services on behalf of the children. Obtaining suitable housing, affordable legal assistance, and financial assistance are additional issues that many of the families face, regardless of their legal relationship to the children.

#### • Financial Challenges

The challenges faced by these families also vary depending on the families' needs. Some relative caregivers, for example, may require only a support group, whereas another family may need all types of financial and support

services in order to raise the children successfully. U.S. Census Bureau statistics, however, confirm that many families headed by grandparents need help. One in five children living in homes maintained by their parents live in poverty, whereas one in four are impoverished in grandparent-maintained homes. One in five children in homes maintained by their parents have no health insurance, whereas one in three in grandparent-maintained homes lack health insurance (Bryson & Casper, 1999).

# • Affordable Housing

Grandparents and other relatives raising children frequently face difficulties obtaining affordable housing. For relative caregivers who reside in public housing, the addition of children may precipitate eviction. Certain public housing units are set-aside for older individuals and those with disabilities. Generally, children are not permitted in these complexes and it is a violation of the lease to let them live there. Moving children into a public housing unit may also violate occupancy limits. In some areas, it may not be possible to add a grandchild to a lease without obtaining legal custody. Housing officials may also erroneously tell caregivers that they are required to have legal custody of the children in order to qualify for housing assistance. Even in private housing, landlords may attempt to evict tenants when a family's composition changes, despite the fact that eviction on this basis is illegal.

# • Physical and Mental Health Issues

In addition to greater incidences of poverty and lack of health insurance, both the grandparents and grandchildren in these families face physical and mental health issues to a greater degree than the general population. According to the U.S. Census Bureau, many of the caregivers self-rate their health quite low. Grandmothers in all grandparent-maintained families self-reported their general state of health as follows: a sizeable 33.6% rated themselves poor or fair, 31.2% rated good, 21.9% rated very good, and only 13.3% rated excellent. 28.7% of grandfathers in all-grandparent maintained families self-reported their health as fair or poor, 33.9% as good, 22% as very good, and 15.4% as excellent (Bryson & Casper, 1999).

Grandparents and other relatives raising children are often unable to attend to their own health needs due to a lack of childcare, respite care, or adequate medical insurance. A survey conducted by GU in 1998 of practitioners working with relatives raising children elicited many responses concerning the need for respite care (Generations United, 2000). Grandparent caregivers are frequently stressed because they are caring for children at a time in their lives they did not expect to be and they are often socially isolated from their peers. They may feel a sense of shame and guilt about their own adult children who are unable or unwilling to parent. These grandparents have been found to frequently suffer health problems like depression, diabetes, hypertension, insomnia, and gastric distress (Minkler, 1999).

Unlike the several studies concerning grandparent caregivers, there have been very few about the overall well being of children in grandparent care. The existing findings show that these children exhibit a variety of physical, behavioral, and emotional problems to a greater degree than the general population of children, often due to the difficult situations that caused them to be placed in a grandparent's care. They have frequently been exposed to drugs or alcohol in utero and many of the children have special needs (Altshuler, 1998, Pruchno, 1999). In part because of the children's needs, many caregivers need and benefit from supportive services.

# • Supportive Services

Supportive services have been shown to help alleviate caregivers' stress and improve their health. There is a lack of national studies showing how these services help relatives raising children, but anecdotally it is known that support groups, respite, and counseling help these families tremendously. GU has been working with the Brookdale Foundation Group to replicate Brookdale's Relatives As Parents Program in ten mental health centers around the country. Through this partnership, counseling, support groups, and respite have been provided to the caregivers. GU has been told repeatedly that the support groups reduce caregiver's stress through the sharing of resources, joys, and problems. Many caregivers express the thought that "just knowing that there are others in the same situation is helpful." A great-grandmother who is raising five grandchildren summed it up when she said, respite care "makes me a better person and a nicer person to be around."

# II. National Family Caregiver Support Program Provisions

The NFCSP calls for five categories of supportive services to grandparents and older individuals aged 60 and older who are relative caregivers of children, in addition to family caregivers of individuals aged 60 and older. A copy of the law creating the NFCSP

can be found in the Appendix. Congress appropriated \$125 million in fiscal year 2001, \$141.5 million in fiscal year 2002, and \$155.2 million in fiscal year 2003 for the NFCSP. According to the law, the money is distributed to the states and the states, in turn, allocate funds to the AAAs based on intrastate funding formulas. The AAAs actually provide the support services to the caregivers or contract for their provision.

Up to ten percent of the funds appropriated for the NFCSP can be used to provide support services to relative caregivers. This limitation is in the law. Other than that, funds under the NFCSP

are not earmarked. AAAs may use the funds to provide any and all of the five categories of support services authorized by the NFCSP to relative caregivers.

# Definition of Grandparent or Older Relative Who is A Relative Caregiver

The NFCSP defines "grandparent or older relative who is a relative caregiver" to mean:

a grandparent or step-grandparent of a child, or a relative of a child by blood or marriage, who is 60 years of age or older and -

- (A) lives with the child;
- (B) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and
- (C) has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally.

When GU submitted draft language to include relative caregivers in the NFCSP, it specifically included the "informal" caregivers.

Although no national data exists, anecdotal evidence suggests that the majority of relative caregivers are raising children without a legal relationship such as guardianship or legal custody. As a result, GU thought it very important that these caregivers be included.

#### Support Services

The following are the five categories of support services delineated in the NFCSP:

- (1) information to caregivers about available services;
- (2) assistance to caregivers in gaining access to the services;
- (3) individual counseling, organization of support groups, and training caregivers to assist them in making decisions and solving problems relating to their caregiving roles;
- (4) respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
- (5) supplemental services, on a limited basis, to complement the care provided by caregivers.

These categories are written to be flexible and respond to the needs of the caregivers in the area being served. For example,

respite care could include home services, providers taking the children on outings, or day or residential camps for the children. The fifth category, supplemental services, is particularly broad. It is not defined in the law and the AoA will not be defining it. The intent is that it be an extremely flexible category.

Services under any of the five categories may be provided to grandparents and other relative caregivers of children. Soon after passage of the NFCSP, there was some confusion that respite care could not be made available to grandparents and other relative caregivers of children. That was an incorrect interpretation and if your state or AAA is still operating under that interpretation, please have them contact the AoA or GU.

The NFCSP requires AAAs to coordinate their provision of support services (or of the agency it contracts with) with the activities of community agencies and voluntary organizations that are also providing supportive services like those described in the program. Some of the most successful AAAs that currently serve these families



are those that have collaborations with a broad range of community based organizations, including those serving children, such as schools and Head Start programs.

Some states and advocates have asked whether direct payments can be made to relative caregivers for the five categories of support services. The AoA has responded by stating that it is a state option to allow direct payments, e.g., cash or vouchers, to caregivers for the purchase of services provided through the NFCSP (AoA, FAQ, 2003).

#### Priority Language

The NFCSP includes a provision stating that states must give priority for services to older individuals with greatest social and economic need, and to older individuals providing care and support to persons with mental retardation and related developmental disabilities. According to the AoA, children living with grandparents or other relative caregivers are not required to have mental retardation or related developmental disabilities in order for the caregiver to receive services. However, the children must be no more than 18 years of age, regardless of whether or not they have mental retardation or related developmental disabilities (AoA, FAQ, 2003).

#### Funding

Using an intrastate funding formula, each state is to allocate the funds it receives among the AAAs. According to the AoA, states may

design intrastate funding formula allocations that vary the proportion of funding among AAAs. Such a formula could be designed that would allocate the majority of funding to certain AAAs within the state. However, states cannot reserve funds to conduct a caregiver demonstration in only one area of the state, they must use an intrastate funding formula (AoA, FAQ, 2003).

# Matching and Maintenance of Effort Requirements

The NFCSP has a requirement that each state match 25% of its federal allocation. According to the AoA, a state may use other funds currently used for related programs to match the federal share. However, those funds cannot be from other federal sources, e.g., Medicaid, and cannot be used to match other programs (AoA, FAQ, 2003).

The NFCSP also includes a maintenance of effort requirement, which provides that funds made available under the NFCSP must supplement, not replace, any federal, state or local funds spent by a state or local government to provide similar services. According to AoA, the maintenance of effort requirements are met if the overall amount of state and local funding remains at or above what was previously allocated to existing caregiver programs (AoA, FAQ, 2003).

# III. GU Survey of the Aging Network

# Background

In 2003, GU completed a survey of aging network service providers. The purpose of the survey was to determine the greatest training and technical assistance needs of State Units on Aging (SUAs), AAAs, Native American Tribes, and primary health care centers in the area of grandparents and other relatives raising children. Specifically, the survey asked about the NFCSP's five categories of support services. Prior to this survey, the only information available about the needs of agencies providing services to kinship care families was anecdotal. GU and its National Network of Expert Trainers is using the survey results to more effectively tailor training and technical assistance it provides to the aging network.

GU conducted the survey with the support of the AoA. GU's partners in this effort were the National Association of Area Agencies on Aging (n4a), the Brookdale Foundation Group, and the National Association of State Units on Aging (NASUA). This section of the NFCSP guide provides an overview of the survey methodology, results of the AAA and SUA survey data analyses, qualitative responses from open-ended survey questions, next steps, and technical assistance provided by GU.

#### Method

GU developed and administered an initial survey (Survey 1) to service providers at the local level including AAAs, Native American Tribes and primary health care centers to assess their greatest training and technical assistance needs in the area of grandparents and other relatives raising children. Survey 1 contained eleven questions on the agency's use of and need for resources to provide services for kinship caregivers.

Survey 2 was adapted from the initial survey and administered to SUAs to examine the statewide use of NFCSP funds in the provision of services for grandparents and other relatives raising children, as well as the perceived needs of kinship care programs at the state level. This four-question survey was created to supplement the findings of Survey 1, with questions geared toward the broad statewide knowledge that SUAs possess.

Survey 1 was mailed to a total of 1,236 agencies, which included AAAs, Native American Tribes and primary health care centers. Survey 2 was mailed to 57 SUAs.

#### Results

- Survey 1—AAAs, Native American Tribes, & Primary Health Care Centers:
  - Of the 1,236 surveys distributed to AAAs, Native Tribes, and primary health care centers, 230 were returned for a 20% response rate.
  - Agencies from all 10 Federal Regions responded to the survey.
  - Federal Regions III, IV, and V had the highest number of responses and consequently reported the greatest provision of direct services to grandparents or other relatives raising children.
  - Numbers responding by organization type:
    - ♦ 173 AAAs
    - ♦ 14 Native Tribes
    - ♦ 8 Primary Health Care Centers
    - ♦ 34 Other (agency affiliation indeterminate)
  - 57% of agencies overall reported providing some services to grandparents or other relatives raising children.
  - Of those agencies providing services, the most prevalent services provided were Information to Caregivers (54%) and Assistance to Caregivers (46%). The remaining services include: Support Groups (28%), Training Caregivers (26%), Respite (25%), Supplemental Services (23%), Individual Counseling (21%), and Other (12%).
  - The percentage of agency services funded or to be funded with NFCSP funds:

Information to Caregivers	74%
Assistance to Caregivers	69%
Individual Counseling	43%
Support Groups	40%
Training Caregivers	55%
Respite	53%
Supplemental Services	46%

Other (such as outreach or quarterly workshop activities) 13%

- Thirty-eight percent of the agencies indicated that they contract with direct service providers in their community who specifically assist grandparents and other relatives raising children.
- Forty-Four Percent refer caregivers to outside agencies for assistance.
- Seventy-eight percent of the agencies felt they would benefit from expert training regarding issues and services for grandparents and other relatives raising children.

• Percentage of agencies stating that they would benefit by training area:

Mental Health Issues Facing Caregivers and Children	54%	
Model Information and Referral Programs From Around the Country	53%	
Legal Issues Faced by the Families	50%	
Training Caregivers to Make Decisions and Solve Problems 46%		
Background Issues Issues Concerning the Caregivers and Children	44%	
Physical Health Issues	44%	
Model Respite Programs From Around the Country	43%	
Organization of Support Groups	38%	
Other (such as working with children with disabilities)	13%	

# • Survey 2—State Units on Aging:

Of the 57 surveys distributed to SUAs, 26 were returned for a 47% response rate. Of the agencies responding, all Federal Regions except one were represented. Twenty-four states, one territory, and the District of Columbia were represented in the survey responses.

- Of the agencies responding:
  - ◇ 73% indicated that it is not a requirement in their state to use up to 10% of NFCSP funds for grandparents and other relatives raising children. (This does not, however, mean that services are not being provided.)
  - 92% indicated that they would benefit from expert training, or they knew of an agency that would.

SUAs participating in the survey ranked training categories that would benefit their service providers as follows:

- 1. Legal Issues Faced by the Families
- 2. Model Respite Programs From Around the Country
- 3. Training Caregivers to Make Decisions and Solve Problems
- 4. Organization of Support Groups
- 5. Model Information and Referral Programs From Around the Country
- 6. Mental Health Issues Facing Caregivers and Children
- 7. Background Issues Concerning the Caregivers and Children
- 8. Physical Health Issues

Other beneficial trainings suggested by survey participants:

- Fundraising
- Financial support
- Assessment-measuring outcomes
- Education/working with schools

- Individual counseling for caregivers & children
- Working with Social Service agencies
- Changing systems

# Other Considerations

• Survey 1—AAAs, Native American Tribes, & Primary Health Care Centers:

In an open-ended question, survey participants were asked if there was other information they would like GU to consider as a part of the survey. Sixty-one participants responded to this question. They were most concerned about funding issues and serving those relative caregivers under age 60.



# Funding

Many survey respondents specifically addressed funding concerns. Respondents reported that they were, "looking forward to developing a program, ... but were concerned about serving the population on limited funds." One concern related to funding personnel dedicated to grandparenting programs was stated as follows:

"We are operating the services ourselves as an AAA, and limited funding does not allow contracting or hiring personnel."

There are limited and shrinking state budgets, and overburdened service populations. The data reflected an interest in ways to fund successful quality programs, or better stated in a survey response, "bow to get the biggest bang for our buck."

Some respondents indicated that, "grandparents as parents is the most difficult issue to obtain funding for." Additional respondents said they expected, "other family caregivers will get the money available." -Survey Respondent

#### THE CONSTITUENT POPULATION UNDER 60 YEARS OLD

The second largest issue area among these respondents was difficulty in serving grandparents who are under 60 years old. "Restrictions on using NFCSP funds to only relatives 60 and over (results) in low utilization." Several respondents echoed this sentiment stating "many are under the age of 60 and don't qualify" (for services.) -Survey Respondent

#### **OTHER CONCERNS**

Additional Survey responses to the open-ended question can be organized into four main categories:

- (1) General knowledge on the issues
  - Information and referral, specifically related to grandparents raising children, is a problem area for surveyed populations. They need "better information and (ideas of) outreach methods, and feel that getting information out (to grandparents) is a problem."
  - Any organizations and groups serving the senior population expressed feeling: "overwhelmed with other services, therefore (unable to focus) on this 'new population'. (We) have enough to do to serve our mandated client base."
- (2) Reaching out to constituent populations
  - The challenge of serving grandparents raising children is compounded because few grandparents self-identify or seek services, and therefore providers must make an effort to recruit program/service participants. "Grandparent and Kinship caregivers are difficult to reach and seem to not want to be found." As another provider commented, "(We are) certain the issues exist in the community, although (we) hear very little of it and (we) have problems finding the grandparents." Another respondent requested, "please give us ideas on how to identity this group, and how to influence grandparents that respite care and workshops are helpful to them."

- Specific populations are especially difficult to reach and to serve because of their physical location or culturally specific needs. "There is a lack of resources related to issues in rural areas."
- "Please help with rural (program) models, including information on (coalition building) between aging and educations systems and children's' services."
- There is a significant lack of information on needs and solutions related to tribal grandparents raising children.
   "Tribal needs vary, such as the level of technological abilities and protocols."
- (3) Ways to effectively handle complex issues involved
  - ♦ Grandparents raising grandchildren experience a spectrum of serious issues and needs, especially regarding health issues, housing issues and legal issues. There is a significant amount of technical information and training needed to equip program and service providers to serve grandparents. Respondents requested information and training on "psychological issues related to dysfunctional parents; school issues, such as learning disabilities and medication management and developmental disabilities; and housing issues, such as senior housing and accommodating an 'instant family'."
  - "The legal issues are too extensive to be addressed in typical support group sessions."
- (4) How to design and run a program
  - Overall, respondents requested information on training, best practices and templates and suggestions on collaboration and coalition building. "We have little expertise in assisting grandparents... any information would be helpful, and an in-service in our county (would be helpful.)"
  - The surveyed population requested "guidelines for program operation including allowable expenses and asked for examples of what's useful in other parts of the country?"
  - Driven by the need for creative funding, the diverse needs of both children and grandparents in kinship care situations and the developing awareness of issues, many respondents requested information on "making contact with other appropriate organizations to see how they can assist, or how to develop resources and collaborative partnerships." It is also important to consider the partnership role of government agencies in developing effective programs.

Survey respondents consistently expressed need for more information. Only a few respondents gave reports on their programs or work in the area.

#### • Survey 2 - State Units on Aging:

Survey 2 participants were also asked in an open-ended question if there was other information they would like GU to consider as a part of the survey. Four participants responded to this question with the following comments:

"We are in the early stages of establishing data collection & reporting systems on caregiver populations. At this point in time, we do not have significant activity or data. We expect to see a rise in this area in the future. Your training and survey results will help to increase our ability to address these needs properly."

"We are interested in any training materials you have."

"We would be interested in coordinating these trainings into a statewide family caregiver support conference."

"As we progress in this area the need for information will expand. At this time facilitators and organizers are beginning to inquire about each other and actively move toward creating a network for caregivers throughout the state. When common goals are established, presentations by Generations United will be extremely helpful."

# Discussion

• Survey 1—AAAs, Native American Tribes, & Primary Health Care Centers:

Survey results show that the aging network needs support, education, and training on issues concerning grandparents and other relatives raising children. Data show that due to the need for support, education, and training, caregivers are not receiving proportionate services. Limited funding and the age restriction in the NFCSP are also fundamental reasons why there are limited services. The over age 60 limitation makes it difficult for the NFCSP program to directly reach 71% of grandparents raising grandchildren, and survey respondents are clearly concerned about this limitation. Because the system is already overburdened with the needs of the senior population and because federal and state funding is limited, creating new services can be a daunting task for the aging network.

#### • Survey 2—State Units on Aging:

Seventy-three percent of the SUAs, (while they may provide service) indicate that it is not a requirement to use any of the 10% of available NFCSP funds. Ninety-two percent say they are aware of agencies that would benefit from expert training on the issues facing grandparents and other relatives raising children. Therefore, the challenge becomes educating agencies and creating greater awareness so they will invest up to 10% of NFCSP funds in programs and training to benefit these caregivers.

#### Next Steps

#### TARGETED TRAINING

Based on the results of the survey, GU will target its 2003-2004 training and technical assistance efforts in those Federal Regions where training has been requested most: Regions IV, V, III, II and IX. GU will work in conjunction with area government and non-profit agency partners, and use the NNET to conduct the regional trainings. In addition to being able to reach more participants, consolidating requests will also provide greater networking and learning opportunities for SUA and AAA staff who can hear from their neighboring colleagues' experiences.

#### EXPERT TRAINING NETWORK

In response to the survey results, GU has already expanded its Network of Expert Trainers to include trainers who specialize in tribal culture, rural area resources, substance abuse, welfare and child welfare issues, children's therapeutic services, and coalition building. In addition to training at the regional level, GU's network of experts will continue to provide web-based chats for the aging network, and will contribute to GU's quarterly newsletter that is widely distributed among children and aging groups. These experts will also contribute to GU's technical assistance tools and help create fact sheets, publications, training manuals, and tool kits that most effectively respond to the needs of service providers and professionals helping grandparents and other relatives raising children. GU will also dedicate a secure webpage where expert trainers can share resources and ideas in order to maximize their effectiveness in assisting agencies to meet the needs of kinship caregivers. Organizations and individuals with expertise on the challenges faced by grandparents and other relatives raising children are encouraged to share information concerning programs and issues with GU. These resources will be posted on GU's expert trainer webpage.

# **IV. Program Examples**

Survey results and follow-up with the SUAs and AAAs highlighted in the first edition of this guide show that the NFCSP has allowed many AAAs to start or expand services for grandparents and other relatives raising children. These successful programs can provide models to other AAAs who want to support the families. Below, according to each of the five categories of supportive services funded through the NFCSP, are some AAA programs from around the country. The programs are briefly described and contact information is provided for each.

As you will read, many AAAs supplement their critical NFCSP funds with a creative mix of funding sources to increase their outreach and serve those caregivers under age 60. Several AAAs have been recipients of Brookdale Foundation's Relatives As Parents Program (RAPP) funds. RAPP began in the mid-1990s and awards seed grants of \$10,000 over a two-year period to either local agencies or state agencies. If your SUA, AAA, or another state or local agency is interested in applying for a RAPP grant, please see the contact information provided at the end of this guide.

Both AoA and Brookdale encourage its funding recipients to collaborate with other community agencies. These collaborations have contributed to the programs' success and continuity by providing additional services and funding support. State dollars and local foundation and business support are also significant sources of funds and services. Local businesses often provide free space, food, and household gifts and services.

# (1) Information to Caregivers About Available Services

#### Delaware

The Delaware Department of Health and Social Services' Division of Services for Aging and Adults with Physical Disabilities is a State Unit on Aging. It is not a designated AAA, but assumes the functions of such, and has been taking the leadership role in Delaware to support grandparents and other relatives raising children.

Delaware's State Unit on Aging has dedicated its intergenerational program, Joining Generations, to advocate, coordinate, and develop programs for kinship care families throughout the state. Joining Generations partnered with many different service providers to develop *GRAND: Grandparents Raising And Nurturing Dependent Children*, a resource directory for Delaware kinship care families. GRAND is a 130-page book that is organized under the following topics: Childcare, Counseling, Education, Financial Assistance, Health, and Legal. For each of these categories specific topical and contact information is provided by the many state and local agencies that contributed to the book. Topics within the categories are also

cross-referenced to other categories where those particular topics are addressed. There is a compendium of emergency phone numbers listed on bright orange paper at the beginning of the book and a glossary of definitions at the end. The majority of the text is structured in a question and answer format, which is easy to follow.

GRAND is a one-stop resource guide for relative caregivers in Delaware. You can access it in the Joining Generations section of the Delaware State Unit on Aging website at *www.dsaapd.com*. In November 2003, Delaware's new *Legal Guide for Grandparents and Other Relative Caregivers* will also be available on this website. If you would like additional information, contact Carol Boyer, Joining Generations, (302) 255-9390 or carol.boyer@state.de.us.

#### Illinois

The Illinois Department of Aging, which is its State Unit on Aging, has been doing an exemplary job of supporting relatives raising children for several years through various initiatives including helping to establish 81 support groups throughout the state. Among its many projects, it published and disseminated a resource guide for grandparents and other relatives raising children entitled *Starting Points for Grandparents Raising Grandchildren*. It is a 45-page guide that covers child development, health and safety needs; child care, schools, and educational needs; challenges facing today's children; obtaining documents and general assistance; custody and legal issues; and coping strategies. The guide contains resource and contact information. The Illinois Department of Aging has also created one page "tip sheets" on various issues faced by these relative caregivers and programs available to assist them.

Most of Illinois's 13 AAAs are serving under age 60 relative caregivers through support groups, gap-filling services, and respite. The AAAs use state funds available from the Illinois Department of Aging. Those funds have no age restriction on their use. The AAAs also use NFCSP funds have no age costriction on their use. The AAAs also use NFCSP monies to fund their support groups, which any relative caregiver, regardless of age, is permitted to attend. For more information about this State Unit on Aging's work, contact Barbara Schwartz, Coordinator, Grandparents Raising Grandchildren Program, (217) 524-5327 or Barb.Schwartz@aging.state.il.us.

# Kansas

The Southwest Kansas AAA covers 28 rural counties. The largest community it serves contains only 20,000 residents. As a result, providing services is a challenge. In response, the AAA used NFCSP funds to develop an information folder for relative caregivers, which contains specific information about the variety of services available to them. The folder includes flyers about local support groups; information about available NFCSP services, including counseling; a kinship care newsletter; information on public benefits; a government brochure on the earned income tax credit; an application for HealthWave, which is Kansas' Children's Health Insurance program; and a state program which helps pay for energy bills. In order to effectively disseminate this useful folder, the AAA sent letters to each school district asking them if they wanted folders for the families headed by relative caregivers in their district. The folders have also been distributed through "community service advisors" who visit the towns the AAA serve. The response to the folders has been positive. Of the 300 compiled, 202 have been disseminated. For more information, contact Kathy McGee, Information and Assistance Director (620) 225-8230 or *mcgee@starrtech.net* 

# Michigan

Michigan's largest AAA (AAA 1-B) has been very successful in coordinating the provision of several types of support services to grandparents and other relatives raising children. AAA 1-B's commitment to grandparents and other relatives raising children started in 1993. That year, the AAA 1-B Advisory Council Ad-Hoc Study Committee on Grandparents Raising Grandchildren issued a report recommending several actions to support grandparents raising grandchildren. A few years later, in 1998, the AAA published Grandparents As Parents: A Survey of Incidence and Need. This 30-page report satisfied the Council's recommendation to gather, analyze, and publish available information about the caregivers. The report was intended as a resource to help local programmers implement responsive services for this population. It contains a breakdown of how many grandparents and other relatives are raising children in each of the six counties covered by the AAA and how many grandparents have one of the two types of guardianships allowed under Michigan law.

Prior to passage of the NFCSP, AAA 1-B assisted in publishing and disseminating two resource guides for Oakland and St. Clair Counties entitled *Grandparents' Guide to Raising Grandchildren*. Adult-Well Being Services, a local nonprofit mental health agency in Detroit, prepared the guides. Each covers public benefits, legal issues, and relevant resources. Like the Delaware guide, they are mostly in an easy to follow question and answer format and include specific contact information. The AAA 1-B used NFCSP funding to reproduce thousands of additional copies, and develop new guides for the four remaining counties in the region. For copies of the guides or information on how they were compiled, contact Tina Abbate Marzolf, Director Contract and Purchased Services, AAA 1-B, (248) 262-9217 or *TAbbateMarzolf@aaa1b.com* 

# Tennessee

In Tennessee, the Upper Cumberland Relative Caregiver Program partners and is co-located with the Upper Cumberland AAA and Disabilities. One of the many services the program provides to relative caregiver families in the 14 rural counties it covers is a comprehensive *Resource Handbook for Grandparents and Other Family Members Raising Relatives' Children*. This 180-page book, which was prepared with the assistance of a local university, is divided into 7 resource areas: health and well-being, financial, legal, educational, childcare, recreation, and support groups. Most of the guide is a listing of resources with a description of what each provides, along with contact information. Unlike the other resource guides mentioned here, the majority of the book is not in a question and answer format. There is not much narrative. The narrative that exists is at the end of the book and centers around a child's developmental stages and how to care for him or her.

NFCSP funds did not pay for the Resource Handbook. Instead, it was made possible through a combination of state and local funds. The state funds are part of pilot program to help relative headed families in three areas in Tennessee. Only those caregivers whose income is at or below 200% of the federal poverty guidelines and who have temporary legal custody of the children qualify for various forms of assistance provided through this program. Local funds are used to help those families not meeting the income restrictions. For a copy of the guide or more information, contact Patty Jones, Program Director (931) 432-4111 or *pjones@ucdd.org*.

# Washington State

In Washington State, the AAAs have three relative caregiver guides that they can use. The first two described here were funded through the Washington State Unit on Aging, specifically the Department of Social and Health Services' Aging and Adult Services Administration, using NFCSP and other Older American Act funds. The first guide is entitled *Grandparents Raising Grandchildren: A Legal Guide for Washington State.* It was written by the Northwest Women's Law Center and is directed towards grandparents and other relatives who want to establish a legal relationship with the children they are raising. The guide is written in simple English that is understandable to non-lawyers. The third edition will be completed in early 2004.

The Washington State Unit on Aging in conjunction with the RAPP (Relatives as Parents Program) State Coalition developed a comprehensive resource guide entitled *Relatives As Parents: A Resource Guide for Relatives Raising Children in Washington State.* This guide was produced in collaboration with Casey Family Programs and AARP Washington. The guide is separated into 8 sections that cover child development; health and safety needs; child care and educational needs; common issues facing children; financial assistance; legal and custody issues; coping strategies; special issues facing children in kinship care and national resources. This guide is full of contact information and practical hands-on guidance. As of January 2004, the publication can be accessed on the Internet at the RAPP website http://parenting.wsu.edu/relative/index.htm.

A Relatives Guide to Child Welfare Services was developed by staff and stakeholders at Children's Administration of the Department of Social and Health Services to help relatives understand the reasons children come into out-of-home or into the formal child welfare system, the responsibility of the state, the role of the court, the importance of relatives, and the options available to relatives. This State Unit on Aging, through its RAPP State Initiative funded with a seed grant from the Brookdale Foundation, joined with the Washington State University Cooperative Extension to create a website that maintains the statewide relative support group database; shares legal resources; kinship legislation; reports and links with many other related websites; and announces conferences and other special events. The RAPP website is at www.parenting.wsu.edu/relative/index.btm. Other resources available to the public include a resource library with videos, books, and support group and professional curricula available for free loan; and workshops on the issues facing relative caregivers.

For additional information about the State Unit's initiatives, contact Hilari Hauptman, Program Manager, Washington State Unit on Aging (360) 725-2556 or *haupthp@dshs.wa.gov.* 

The Northwest Washington AAA is using NFCSP funds for its tribal kinship care program, which covers all six federally recognized tribes in the area the AAA serves. This program has developed a Grandparents Raising Grandchildren manual, which addresses the particular needs of tribal relative caregivers, including sections concerning the Indian Child Welfare Act. For more information, please contact either Sharon Wolf, Tribal Outreach Coordinator, at (360) 676-6749 or at *wolfsl@dsbs.wa.gov* or Kim Boon, Planner (360) 676-6749 or at *boonkk@dsbs.wa.gov*.

It is important to note that not all types of resources are appropriate for all relative caregivers. Some caregivers cannot read. Others may not be fluent in English. Some may be more comfortable with audio or video tapes. There are many ways to impart information. It is important to know one's community and to take into account special circumstances. GU recommends getting input from the caregivers themselves when developing technical assistance tools.

# (2) Assistance To Caregivers In Gaining Access to Services

# Delaware

The Delaware State Unit on Aging's education and support group program for grandparents and other relative caregivers —known as *Family Circles*— assisted with the development of the Grandparent Resource Center (GRC) at the Wilmington Senior Center. The GRC has a full-time staff person who provides individual assistance to grandparents and other relatives raising children who need access to healthcare, financial assistance, educational, and mental health services. Center staff helps the caregivers gather the necessary information and will make appointments for the caregivers at the appropriate agency. Furthermore, for those caregivers who have had difficulty accessing services, GRC staff may accompany them to appointments. To learn more about this initiative, contact Carol Boyer, Joining Generations (302) 255-9390 or *carol.boyer@state.de.us* or Patricia Anderson-Rice, GRC Director 302) 651-3420 or *Pla\_anderson@botmail.com*.

#### Michigan

The Region IV AAA in Southwest Michigan works to support grandparents and other relatives raising children through Senior Volunteer Programs, a sub-unit of the AAA. The AAA serves three counties, as does Senior Volunteer Programs, and both share the same Board of Directors. Among the services provided to relatives raising children, The AAA has a Grandparents Raising Grandchildren and Relatives as Parents Program (GRG & RAPP) that provides many services through a variety of funding sources, including the NFCSP, Michigan's Strong Families/Safe Children program, and a local foundation, and service club dollars. Among the services offered to the caregivers is information and referral assistance. For this aspect of the program, the GRG & RAPP works particularly closely with the Information and Assistance Program provided through the AAA. GRG & RAPP also produces a newsletter six times a year, which is sent to 160 relative-headed families, legislators, agencies, and every preschool through high school in the three counties the AAA serves. These newsletters contain resource and other concrete information for the caregivers. For more information about this program, contact Camellia Pisegna, Director, Senior Volunteer Programs (269) 983-7058 or camelliapisegna@areaagencyonaging.org

# Virginia

Mountain Empire Older Citizens (MEOC), the AAA in Big Stone Gap, Virginia, has a program for grandparents and other relatives raising children, known as KinCare. MEOC is located in the midst of the Appalachian Mountains in Southwest Virginia and covers three counties and the City of Norton. KinCare provides various supports, including assistance and referral, to about 114 families headed by grandparents or other relatives. Any relative-headed family can contact KinCare for supportive or referral services. Families are also referred from the local departments of social services and mental health, public schools, and Head Start agencies.

After a family contacts KinCare or a referral is made, a home or office visit is scheduled to complete a comprehensive assessment of the family. The process is very thorough and can take up to three hours. During the intake interview, KinCare staff identifies services to help the caregiver and the children and referrals may be made to other community resources. The caregiver may also sign a release, which allows KinCare staff to contact an agency or make referrals to assist the family.

Each family is given a community resource directory; a variety of community brochures; a resource directory from the Virginia Department on Aging on services for grandparents raising grandchildren; resources from AARP's grandparent information center; child development information; an application for the Children's Health Insurance Program (known in Virginia as the Children's Medical Security Insurance Program (CMSIP)); and information about the 35 different programs at MEOC. MEOC, community agencies, AARP, faith based groups and individuals also donate children's books, toys, and other gifts to the families.

In addition to direct assistance, MEOC publishes a monthly newsletter called KinCare Connections, which is distributed to about 270 addresses, including relative-headed families, human service agencies, and other community collaborators.

MEOC uses NFCSP funds for the support group aspect of its program, which is described in the next section. Other funds, including federal Temporary Assistance for Needy Families (TANF), state, and Brookdale Foundation RAPP funds are used to pay for the intake and resource directory services. All services are provided by MEOC regardless of age or income. Some caregivers are in their mid-40s and many are under age 60. For more information about the KinCare program, contact Carol Moore, KinCare Director (276) 523-4202 or *cmoore@meoc.org* 

# Washington State

The Pierce County, Washington Aging and Long Term Care AAA contracts with a local mental health agency, Child and Family Guidance Center, to provide various supportive services for grandparents and other relatives raising children. The AAA serves 1,790 square miles with a mix of urban and rural communities and one major tribe. Among the services provided is individualized resource information and referral. The AAA started providing these services prior to passage of the NFCSP using Older American Act, Title III-B funding. It continues to use this funding source, rather than NFCSP monies, for this aspect of its program. The contracting agency also publishes and disseminates a monthly newsletter to a database of over 900 names. Included among those who receive the newsletter are the local mayors, law enforcement officers, community agencies, and schools. A grant source other than NFCSP is used to fund the newsletter. For more information about this program, contact Connie Kline, Program Specialist (253) 798-3782 or ckline@co.pierce.wa.us

#### (3) Individual Counseling, Organization of Support Groups, and Training Caregivers to Assist Them in Making Decisions and Solving Problems Relating To Their Caregiving Roles

#### Delaware

The Delaware State Unit on Aging's intergenerational program, Joining Generations, is the home for the *Family Circles* education and support group program for grandparent and other relative caregivers. Starting with a grant in 1997 from the Brookdale Foundation, *Family Circles* has grown to five support groups throughout the state. A Head Start program hosts one of the groups. To learn more, contact Carol Boyer, Joining Generations, at (302) 577-4791, extension 15 or *cboyer@state.de.us*.

#### Michigan

In 2004, the largest AAA in Michigan (AAA 1-B) will focus its efforts on its Grandparents As Parents Empowerment Program, which builds skills in the areas of self-advocacy, communication, and parenting. The AAA will use NFCSP funds for this new model, which encourages agencies that work with grandparents to assist them by empowering them with resources and ideas. For more information, please contact Tina Abbate Marzolf, Director Contract and Purchased Services, (248) 262-9217 or *TAbbateMarzolf@aaa1b.com* 

The Region IV AAA in Southwest Michigan, through its Senior Volunteer program, provides telephone support groups known as "The Party Line" twice a month. Senior Volunteers used to sponsor traditional support groups, but found attendance a challenge. Transportation was a primary reason for low attendance. Southwestern Michigan is mostly rural and many caregivers do not have vehicles and/or have health problems that make it difficult to travel. Furthermore, public transportation is inadequate or non-existent. Free childcare was offered, but many caregivers found it overwhelming to travel with children, especially those with disabilities. Time constraints also played a significant role in preventing attendance. Many caregivers work outside the home.

In response to these problems, "The Party Line" began in April 2002. Participants register for the support group meeting in advance and receive a reminder postcard every month. At meeting time, an operator calls each home and connects everyone to the group. Every other month a professional speaker joins the call to present information on topics requested by the caregivers. For example, a school social worker recently explained the legal rights of special education students.

Caregiver response has been overwhelmingly positive. Attendance has increased significantly. On-site meetings averaged 3–4 participants. Phone support meetings average 10–15. The most common concern was not being able to meet each month in person. In response, the program organized "The Breakfast Bunch," an opportunity six times a year to meet for breakfast, and quarterly family fun events involving the children.

Conference call fees (approximately \$20 per person for one hour) are paid for with program funds, which include NFCSP monies. These fees are comparable with previous mileage reimbursements, staff travel time, and travel expenses. For more information, contact Camellia Pisegna, Director, Senior Volunteer Programs (269) 983-7058 or Toll free: 1-877-660-2725 or camelliapisegna@areaagencyonaging.org.

#### Oregon

The Mid-Willamette Valley Senior Services Agency serves three counties in Oregon, including the city of Salem. This AAA plans to use NFCSP funds to pay for a counselor from a local mental health agency to professionally facilitate its new caregiver support group. The AAA also has its own local advisory group to help establish this group. For more information, contact Debbie Waring, Family Caregiver Support Program Coordinator (800) 469-8772 x491 or *debbie.waring@state.or.us* 

#### Virginia

The KinCare program of Mountain Empire Older Citizens, the AAA in Big Stone Gap, Virginia, works closely with other agencies, including the Lee County Head Start. Once a month, the director of the KinCare program, who is a child development specialist, and the mental health counselor at Head Start provide information to Head Start parents and KinCare families on a children's issue. The meetings are held at the Head Start offices and Head Start provides lunch and childcare.

The KinCare program also hosts three support groups. Its monthly therapeutic caregiver support group is facilitated by a licensed social worker who provides specific suggestions as treatment to the caregivers. The other two groups are social in nature and are called "Grandparent Meetings," because the caregivers do not like the term "support group." These meetings are held at two local elementary schools and are facilitated by the KinCare Director, who also provides resources to help the families, such as publications from GU and CWLA. NFCSP funds are used to pay for the support groups. For more information about this program, contact Carol Moore, KinCare Director, at (276) 523-4202 or *cmoore@meoc.org*.

#### Washington State

Pierce County, Washington Aging and Long Term Care AAA offers eight support groups for the caregivers. The support groups are not limited to those caregivers over age 60. NFCSP funds are not directly used to fund the groups, but are used to pay part of the program coordinator's salary. Some of her responsibilities include implementation and coordination of the groups. The support group facilitators are primarily volunteers.

While two of the support groups meet, childcare is provided. One of the groups provides childcare through a collaborating agency, while the other relies on an adult daughter of a grandparent who attends the support group (not the daughter who is unable to parent). Two other support groups are affiliated with school districts. The districts provide the staff, family support worker and a behavioral therapist, facilitate the support groups. The districts also provide the meeting facilities. Collaborations with schools and agencies that serve children are useful for recruiting caregivers, who may be reluctant to step forward, but can be reached through the children they raise.

For the last two years, thanks to NFCSP funding, the AAA has also been providing individual and family counseling through the mental health agency with which it subcontracts, Child and Family Guidance Center. These counseling services are limited to those caregivers over age 60. However, because the counseling is offered through a mental health agency that serves youth and families, younger relative caregivers may be referred to other programs within the agency and community. The counseling services are promoted in the program newsletter, in addition to through a variety of community education events and connections with schools and various service agencies. For more information about this program, contact Connie Kline, Program Specialist (253) 798-3782 or *ckline@co.pierce.wa.us* 

# (4) Respite Care to Enable Caregivers to be Temporarily Relieved from Their Caregiving Responsibilities

#### Delaware

With funding from the NFCSP and the state of Delaware, the Delaware State Unit on Aging's Joining Generations program offers the following respite programs for relative caregivers: summer camp respite, holiday camp respite, and Grand Time Off.

Through a partnership with the YMCA of Delaware, Joining Generations offers two weeks of summer or holiday camp to children of eligible caregivers. Children attending "Camp Respite" are actually participating in the regular YMCA camp program.

Joining Generations is also partnering with The Family & Workplace Connection to offer the Grand Time Off program. Grand Time Off is a respite program for eligible grandparents and relative caregivers. The program offers childcare services for children ages 13 and younger and is available to eligible relative caregivers 60 years of age or older who provide the majority of care for the children. The relative caregivers contact staff at The Family & Workplace Connection, who determine their eligibility and help them decide on three available childcare providers throughout the state. The caregivers can receive childcare during the day, in the evening or at night.

State funding is being utilized to extend the services of the Grand Time Off program to eligible relative caregivers who are ages 50 to 59. For additional information, please contact Kathy Hyde at The Family & Workplace Connection, (302) 479-1696 or (800) 537-5557.

#### Michigan

Respite care for grandparents and other relatives raising children is available through Senior Volunteer Programs and the Region IV AAA in Southwest Michigan. One of the programs within Senior Volunteer Programs is Family Friends, a national intergenerational program administered through the National Council on the Aging. Volunteers provide between 4 to 12 hours of in-home respite for those relatives raising children in high stress situations. The volunteers also often take the children to library programs or other planned activities outside the homes in order to give the caregivers a break. For more information, contact Camellia Pisegna, Director, Senior Volunteer Programs (269) 983-7058 or (877) 660-2725 or *camelliapisegna@areaagencyonaging.org* 

# Oklahoma

Oklahoma's Department of Human Services, Aging Services Division is the State Unit on Aging. It helped develop the Oklahoma Respite Resource Network, which, since March 2000, has been providing lifespan respite care to various categories of caregivers, including grandparents and other relatives raising children. The program is centrally administered through the Department of Human Services (DHS). This central management has kept the program's administrative costs down.

The program has a simple application process and relatively few guidelines. For those relative caregivers age 60 and older, they do not have to meet any income guidelines and NFCSP funds are used to pay for the respite. For those under age 60, state funds are used to finance the program and the caregiver must have an annual income of \$60,000 or less to qualify for services. Once a caregiver is approved for respite, DHS issues a voucher to that person. The voucher can be used to purchase respite service from any provider the caregiver chooses. The only limitation is that the respite provider must be 18 years or older and not be living in the same home with the caregiver. The program also publishes and makes available a Respite Guide for Families and Providers, which provides assistance on selecting providers. After the caregiver and respite provider complete the voucher form, DHS sends payment directly to the respite provider.

All eleven of Oklahoma's AAAs are funding partners, which means if an eligible relative caregiver lives within the region a particular AAA serves, that AAA's account will be charged by DHS. The NFCSP funds allowed this existing program to expand and serve even more caregivers. For additional information about this statewide respite program, contact Diana Everett, Respite Coordinator (405) 522-6241 or diana.everett@okdhs.org.

#### Washington State

Using NFCSP funds, the Pierce County, Washington Aging and Long Term Care AAA offered 2003 summer respite opportunities to these caregivers. The local mental health agency, Child and Family Guidance, with which the AAA subcontracts collaborated with local parks and recreation providers, and other organizations such as the YMCA, Easter Seals and Camp Fire, to pay for day and residential camp opportunities for school-age children of relative caregivers over age 60. The respite service was very well received and the AAA will likely continue designated funding for this service. For more information, contact Connie Kline, Program Specialist (253) 798-3782 or *ckline@co.pierce.wa.us.* 

#### (5) Supplemental Services, on a Limited Basis, To Complement the Care Provided By Caregivers

# Illinois

Seven of Illinois' 13 AAAs are providing legal services to grandparents and other relatives raising children through NFCSP funds. The Northwest Illinois AAA serves nine counties. Using NFCSP funds, it contracted with its legal service provider, Prarie State Legal Services, to provide free individual legal services to grandparents and other relatives raising children who are over age 60. The caregivers are helped with the various issues that impact them, including housing discrimination, accessing educational enrollment and medical treatment for the children, and help obtaining public benefits. Many of the caregivers who have approached Prairie State for assistance are under age 60 and therefore ineligible for services unless they meet Prairie State's income restrictions.

In addition to individual legal services, the AAA has provided legal training workshops at its annual conference for relative caregivers. Sixty to seventy relative caregivers typically attend this conference. This AAA is also funding a local Hispanic agency and Prairie State to train local Hispanic kinship families on legal issues, public benefits, and educational services. For more information, contact Melinda Trier, Director of Services (815) 226-4901 or *niaaa@nwilaaa.org* 

Using NFCSP funds, the Northeast Illinois AAA also makes legal services available to grandparents and other relative caregivers of children in the eight counties it serves. This AAA has contracted with Prairie State Legal Services, in addition to Legal Assistance of Will County. These legal service providers provide free one on one assistance to relative caregivers over age 60 on the many issues facing the families. For more information, contact Pamela Gurney, Community Planner (815) 939-0727 or *neilaaoa@sbcglobal.net*.

# Michigan

The largest AAA in Michigan – AAA 1-B – uses NFCSP funds to provide financial assistance up to \$300 per household to relative caregivers who have unmet financial needs. Under this program, the AAA has sent children to camp, purchased new washing machines, bought school clothes and supplies, and developed and distributed emergency preparedness kits. For additional information, contact Tina Abbate

Marzolf, Director Contract and Purchased Services (248) 262-9217 or *TAbbateMarzolf@aaa1b.com* 

The Region IV AAA in Southwest Michigan provides Family Fun events during which caregivers and children from all three AAA counties participate. The events vary, often depending on the season. Examples include visits to nature centers, hayrides and pumpkin gatherings, back to school picnics, and backpack/school supply giveaways. Each event includes a meal or refreshments, door prizes and gifts of educational books and gift certificates, and mileage reimbursement. Local businesses provide support for these events through food and gift donations, and free use of space. For more information, contact Camellia Pisegna, Director, Senior Volunteer Programs (269) 983-7058 or toll free (877) 660-2725 or *camelliapisegna@ areaagencyonaging.org* 

#### Oregon

Using NFCSP funds, the Mid-Willamette Valley Senior Services Agency has been providing supplemental services, as needed, to the grandparent caregivers it serves. For example, the AAA repaired a washer and dryer for one caregiver, and provided another with a child's booster seat. It also paid for a caregiver's medications for a month and another's phone bill. AAA staff refers under age 60 caregivers to community partners who can provide services to them. For more information, contact Debbie Waring, Family Caregiver Support Program Coordinator (800) 469-8772 x491 or *debbie.waring@state.or.us* 

#### Tennessee

The Upper Cumberland Relative Caregiver Program contracts with the attorney funded through Title III of the Older Americans Act to provide legal workshops to relative-headed families. The attorney travels each month to two of the fourteen counties the AAA serves and provides caregivers with legal education workshops covering issues, such as custody options and public benefits. For more information, contact Patty Jones, Program Director (931) 432-4111 or *pjones@ucdd.org*.

# Virginia

The KinCare program of Mountain Empire Older Citizens, the AAA in Big Stone Gap, Virginia uses Retired Senior Volunteers from the Retired Senior Volunteer Program (RSVP) to assist with its monthly social program. This program involves a Family Fun Night for both the caregivers and the children. Pizza is served and gifts are provided to the families. Among the gifts are back to school supplies and clothing vouchers, which are made possible through community collaborations. For more information, contact Carol Moore, KinCare Director (276) 523-4202 or *cmoore@meoc.org*.

#### Washington State

The Northwest Washington AAA tribal kinship care program focuses on providing individualized referrals to attorneys familiar with tribal law and kinship issues. The AAA has a Tribal Outreach Coordinator on staff who has worked with the tribes since 1994 and has become knowledgeable about the relative caregivers' needs. She visits all of the tribes, and provides individual referrals and assistance. For more information about this program, please contact either Sharon Wolf, Tribal Outreach Coordinator (360) 676-6749 or *wolfsl@dshs.wa.gov* or Kim Boon, Planner (360) 676-6749 or *boonkk@dshs.wa.gov*.

# V. Conclusion

The NFCSP is an important federal program that provides much needed funding to AAAs wanting to support grandparents and other relatives raising children. In order to be more effective, the program will need increased funding and a younger age restriction. However, the NFCSP is a significant first step in providing money to AAAs that want to expand or offer new services to help these families.

For questions concerning this guide and the inclusion of grandparents and other relatives raising children in the NFCSP, please contact Generations United (202) 638-1263 or *gu@gu.org*. Also visit the GU web site at *www.gu.org* for additional information and resources about grandparents and other relatives raising children, including a general fact sheet concerning these families. The fact sheet is a useful educational tool and can be downloaded from the web site, copied, and distributed.

Finally, in order for us to keep this publication current, it is important that we hear from you about developments in your state. Please share with GU information about your own programs, including plans, progress, and accomplishments.

# VI. NATIONAL RESOURCES

# Administration on Aging

The Administration on Aging (AoA) within the U.S. Department of Health and Human Services has responsibility for implementing the NFCSP. As part of that responsibility, the AoA is engaged in a number of initiatives to help promote and explain the program. The AoA website at *www.aoa.gov* has several resources that are helpful, including frequently asked questions.

For more information on the implementation of the NFCSP in a particular state, contact the state unit on aging. Contact information for state unit on aging staff is available at *http://www.aoa.gov/eldfam/How\_To\_Find/Agencies/Agencies.asp* 

Administration on Aging One Massachusetts Ave. NW Suites 4100 and 5100 Washington, DC 20201

Call (202) 619-0724 to speak with AoA staff. Email *AoAInfo@aoa.gov* with requests for information about aging issues and AoA programs. Call (800) 677-1116 the Eldercare Locator from 9 AM to 8 PM (EST) – to find services for a person aged 60 and older in his or her locality. *www.aoa.gov* 

The following are national nonprofit organizations that work to help support grandparents and other relatives raising children. Please feel free to contact any or all of them for assistance:

# **Generations United**

GU's National Center on Grandparents and Other Relatives Raising Children publishes and disseminates publications, tracks state laws and programs, educates federal policy makers, and provides technical assistance and training to the aging network and other professionals working with the families through its National Network of Expert Trainers (NNET). GU is one of eleven national organizations to receive an innovative grant from AoA as a project of national significance to support the implementation of the NFCSP with respect to its inclusion of grandparents and other relatives raising children. GU has also partnered with the Brookdale Foundation Group to establish KinNET, a national network of support groups for relatives caring for kin in foster care, and to replicate Brookdale's Relatives As Parents Program in ten mental health agencies around the country. GU receives funding from the Children's Bureau of the U.S. Department of Health and Human Services (DHHS) for KinNET, and from the Center for Mental Health Services at DHHS for the replication program.

Generations United Washington, DC gu@gu.org www.gu.org

# AARP

The AARP Grandparent Information Center (GIC) provides information and referral to a database of grandparent support groups and agencies that support grandparents and other relatives raising children. The GIC also provides free newsletters, print publications, technical assistance and training.

#### AARP

Grandparent Information Center 601 E Street, NW Washington, DC 20049 (202) 434-2296 gic@aarp.org www.aarp.org

# The Brookdale Foundation

The Brookdale Foundation has a Relatives as Parents Program (RAPP) that began in 1996 and focuses on informal caregivers, i.e., those caring for related children outside of the formal foster care system. The program awards seed grants of \$10,000 over a two-year period to local agencies and state agencies. There are currently 90 local programs and 32 different State agencies that participate in the RAPP Network and provide extensive services to relative caregivers in 41 states. To apply for a Brookdale Foundation RAPP grant, contact them at the address or phone number provided below. Brookdale's requests for funding are available in the late fall (October 2003) and are due in the late winter (January or February 2004).

Brookdale Foundation 950 Third Avenue, 19th Floor New York, NY 10022 (212) 308-7355 www.brookdalefoundation.org

# Child Welfare League of America

The Child Welfare League of America (CWLA) Kinship Care Program provides consultation and training to kinship foster care programs around the country, and conducts a biennial National Kinship Care Conference. Child Welfare League of America 440 First Street, NW, Third Floor Washington, DC 20001 (202) 638-2952 *www.cwla.org* 

# Children's Defense Fund

Children's Defense Fund (CDF) provides information and resources on issues facing children raised by kin inside and outside of the child welfare system with special emphasis on how community and faithbased organizations can support kinship care families. CDF's kinship care publications are available on its website.

Children's Defense Fund 25 E Street, NW Washington, DC 20001 (202) 628-8787 www.childrensdefense.org

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# Appendix A: NFCSP Law—P.L. 106-501

Nov. 13

OLDER AMERICANS ACT

P.L. 106--501

"(D) where feasible, encourages arrangements with schools and other facilities serving meals to children in order to promote intergenerational meal programs,

"(E) provides that meals, other than in-home meals, are provided in settings in as close proximity to the majority of eligible older individuals' residences as feasible,

"(F) comply with applicable provisions of State or local laws regarding the safe and sanitary handling of food, equipment, and supplies used in the storage, preparation, service, and delivery of meals to an older individual,

"(G) ensures that meal providers carry out such project with the advice of dietitians (or individuals with comparable expertise), meal participants, and other individuals knowledgeable with regard to the needs of older individuals,

"(H) ensures that each participating area agency on aging establishes procedures that allow nutrition project administrators the option to offer a meal, on the same basis as meals provided to participating older individuals, to individuals providing volunteer services during the meal hours, and to individuals with disabilities who reside at home with and accompany older individuals eligible under this chapter,

"(I) ensures that nutrition services will be available to older individuals and to their spouses, and may be made available to individuals with disabilities who are not older individuals but who reside in housing facilities occupied primarily by older individuals at which congregate nutrition services are provided, and

"(J) provide for nutrition screening and, where appropriate, for nutrition education and counseling."

#### SEC. 314. IN-HOME SERVICES AND ADDITIONAL ASSISTANCE.

Title III of the Older Americans Act of 1965 (42 U.S.C. 3021 et seq.) is amended---

(1) by repealing parts D and E; and

(2) by redesignating part F as part D.

42 USC 3030h-3030/.

42 USC

National Family Caregiver

Support Act. 42 USC 3001

note.

#### SEC. 315. DEFINITION.

Section 363 of the Older Americans Act of 1965 (42 U.S.C. 3030o) is repealed.

#### SEC. 316. NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM.

Title III of the Older Americans Act of 1965 (42 U.S.C. 3021 et seq.) is amended-

(1) by repealing part G; and

(2) by inserting after part D (as redesignated by section 313(2)) the following: 3030p-3030r.

#### "PART E—NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

114 STAT. 2253

#### "SEC. 371. SHORT TITLE.

"This part may be cited as the 'National Family Caregiver Support Act'.

#### P.L. 106–501 LAWS OF 106th CONG.—2nd SESS.

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#### "Subpart 1—Caregiver Support Program

#### 42 USC 3030s. "SEC. 372. DEFINITIONS.

"In this subpart:

"(1) CHILD.—The term 'child' means an individual who is not more than 18 years of age.

"(2) FAMILY CAREGIVER.—The term 'family caregiver' means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual.

"(3) GRANDPARENT OR OLDER INDIVIDUAL WHO IS A RELATIVE CAREGIVER.—The term 'grandparent or older individual who is a relative caregiver' means a grandparent or stepgrandparent of a child, or a relative of a child by blood or marriage, who is 60 years of age or older and—

"(A) lives with the child;

"(B) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and

"(C) has a legal relationship to the child, as such legal custody or guardianship, or is raising the child informally.

42 USC 3030s--1.

#### "SEC. 373. PROGRAM AUTHORIZED.

"(a) IN GENERAL.—The Assistant Secretary shall carry out a program for making grants to States with State plans approved under section 307. to pay for the Federal share of the cost of carrying out State programs, to enable area agencies on aging, or entities that such area agencies on aging contract with, to provide multifaceted systems of support services—

"(1) for family caregivers; and

"(2) for grandparents or older individuals who are relative caregivers.

"(b) SUPPORT SERVICES.—The services provided, in a State program under subsection (a), by an area agency on aging, or entity that such agency has contracted with, shall include—

"(1) information to caregivers about available services;

"(2) assistance to caregivers in gaining access to the services;

"(3) individual counseling, organization of support groups, and caregiver training to caregivers to assist the caregivers in making decisions and solving problems relating to their caregiving roles;

"(4) respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and

"(5) supplemental services, on a limited basis, to complement the care provided by caregivers.

"(c) POPULATION SERVED; PRIORITY .----

"(1) POPULATION SERVED.—Services under a State program under this subpart shall be provided to family caregivers, and grandparents and older individuals who are relative caregivers, and who—

"(A) are described in paragraph (1) or (2) of subsection (a); and

"(B) with regard to the services specified in paragraphs (4) and (5) of subsection (b), in the case of a caregiver described in paragraph (1), is providing care to an older

114 STAT. 2254

#### P.L. 106–501 LAW

LAWS OF 106th CONG.—2nd SESS.

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"(A) The amounts allotted under paragraph (1) shall be reduced proportionately to the extent necessary to increase other allotments under such paragraph to achieve the amounts described in subparagraph (B).

"(B)(i) Each State shall be allotted  $\frac{1}{2}$  of 1 percent of the amount appropriated for the fiscal year for which the determination is made.

"(ii) Guam and the Virgin Islands of the United States shall each be allotted  $\frac{1}{4}$  of 1 percent of the amount appropriated for the fiscal year for which the determination is made.

"(iii) American Samoa and the Commonwealth of the Northern Mariana Islands shall each be allotted  $\frac{1}{16}$  of 1 percent of the amount appropriated for the fiscal year for which the determination is made.

"(C) For the purposes of subparagraph (B)(i), the term 'State' does not include Guam, American Samoa, the Virgin Islands of the United States, and the Commonwealth of the Northern Mariana Islands.

"(g) AVAILABILITY OF FUNDS.--

"(1) USE OF FUNDS FOR ADMINISTRATION OF AREA PLANS.—Amounts made available to a State to carry out the State program under this subpart may be used, in addition to amounts available in accordance with section 303(c)(1), for costs of administration of area plans.

"(2) FEDERAL SHARE .---

"(A) IN GENERAL.—Notwithstanding section 304(d)(1)(D), the Federal share of the cost of carrying out a State program under this subpart shall be 75 percent.

"(B) NON-FEDERAL SHARE.—The non-Federal share of the cost shall be provided from State and local sources.

"(C) LIMITATION.—A State may use not more than 10 percent of the total Federal and non-Federal share available to the State to provide support services to grandparents and older individuals who are relative caregivers.

"SEC. 374. MAINTENANCE OF EFFORT.

"Funds made available under this subpart shall supplement, and not supplant, any Federal, State, or local funds expended by a State or unit of general purpose local government (including an area agency on aging) to provide services described in section 373.

"Subpart 2—National Innovation Programs

42 USC 3030s-11.

42 USC 3030s-2.

#### "SEC. 375. INNOVATION GRANT PROGRAM.

"(a) IN GENERAL.—The Assistant Secretary shall carry out a program for making grants on a competitive basis to foster the development and testing of new approaches to sustaining the efforts of families and other informal caregivers of older individuals, and to serving particular groups of caregivers of older individuals, including low-income caregivers and geographically distant caregivers and linking family support programs with the State entity or agency that administers or funds programs for persons with mental retardation or related developmental disabilities and their families.

#### P.L. 106-501 LAWS OF 106th CONG.—2nd SESS. N

Nov. 13

"(A) The amounts allotted under paragraph (1) shall be reduced proportionately to the extent necessary to increase other allotments under such paragraph to achieve the amounts described in subparagraph (B).

"(B)(i) Each State shall be allotted  $\frac{1}{2}$  of 1 percent of the amount appropriated for the fiscal year for which the determination is made.

"(ii) Guam and the Virgin Islands of the United States shall each be allotted  $\frac{1}{4}$  of 1 percent of the amount appropriated for the fiscal year for which the determination is made.

"(iii) American Samoa and the Commonwealth of the Northern Mariana Islands shall each be allotted  $\frac{1}{16}$  of 1 percent of the amount appropriated for the fiscal year for which the determination is made.

"(C) For the purposes of subparagraph (B)(i), the term 'State' does not include Guam, American Samoa, the Virgin Islands of the United States, and the Commonwealth of the Northern Mariana Islands.

#### 

"(1) USE OF FUNDS FOR ADMINISTRATION OF AREA PLANS.—Amounts made available to a State to carry out the State program under this subpart may be used, in addition to amounts available in accordance with section 303(c)(1), for costs of administration of area plans.

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"(B) NON-FEDERAL SHARE.—The non-Federal share of the cost shall be provided from State and local sources.

"(C) LIMITATION.—A State may use not more than 10 percent of the total Federal and non-Federal share available to the State to provide support services to grandparents and older individuals who are relative caregivers.

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"Funds made available under this subpart shall supplement, and not supplant, any Federal, State, or local funds expended by a State or unit of general purpose local government (including an area agency on aging) to provide services described in section 373.

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"(b) EVALUATION AND DISSEMINATION OF RESULTS.—The Assistant Secretary shall provide for evaluation of the effectiveness of programs and activities funded with grants made under this section, and for dissemination to States of descriptions and evaluations of such programs and activities, to enable States to incorporate successful approaches into their programs carried out under this part.

"(c) SUNSET PROVISION.—This section shall be effective for 3 fiscal years after the date of the enactment of the Older Americans Act Amendments of 2000.

#### "SEC. 376. ACTIVITIES OF NATIONAL SIGNIFICANCE.

"(a) IN GENERAL.—The Assistant Secretary shall, directly or by grant or contract, carry out activities of national significance to promote quality and continuous improvement in the support provided to family and other informal caregivers of older individuals through program evaluation, training, technical assistance, and research.

"(b) SUNSET PROVISION.—This section shall be effective for 3 fiscal years after the date of the enactment of the Older Americans Act Amendments of 2000.".

#### TITLE IV—TRAINING, RESEARCH, AND DISCRETIONARY PROJECTS AND PROGRAMS

#### SEC. 401. PROJECTS AND PROGRAMS.

Title IV of the Older Americans Act of 1965 (42 U.S.C. 3030aa et seq.) is amended to read as follows:

#### "SEC. 401. PURPOSES.

"The purposes of this title are----

"(1) to expand the Nation's knowledge and understanding of the older population and the aging process;

"(2) to design, test, and promote the use of innovative ideas and best practices in programs and services for older individuals;

"(3) to help meet the needs for trained personnel in the field of aging; and

"(4) to increase awareness of citizens of all ages of the need to assume personal responsibility for their own longevity.

#### **"PART A---GRANT PROGRAMS**

#### "SEC. 411. PROGRAM AUTHORIZED.

"(a) IN GENERAL.—For the purpose of carrying out this section, the Assistant Secretary may make grants to and enter into contracts with States, public agencies, private nonprofit agencies, institutions of higher education, and organizations, including tribal organizations, for—

"(1) education and training to develop an adequately trained workforce to work with and on behalf of older individuals;

"(2) applied social research and analysis to improve access to and delivery of services for older individuals;

42 USC 3032.

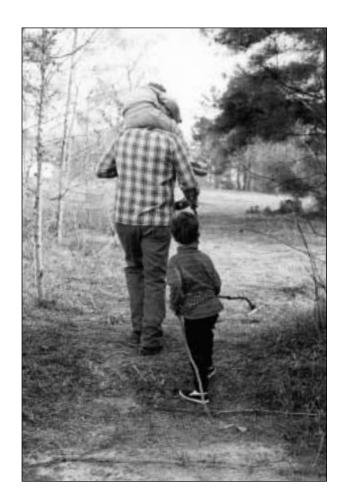
3030s-12.

**42 USC** 

42 USC 3031.

# Appendix B: Funding Distribution for NFCSA

Alabama	\$1,739,242	Nevada	603,803
Alaska	564,300	New Hampshire	564,300
Arizona	1,956,318	New Jersey	3,496,629
Arkansas	1,125,177	New Mexico	594,433
California	11,359,851	New York	7,612,334
Colorado	1,245,978	North Carolina	2,916,628
Connecticut	1,509,874	North Dakota	564,300
Delaware	564,300	Ohio	4,739,721
District of Columbia	564,300	Oklahoma	1,388,901
Florida	8,721,584	Oregon	1,396,517
Georgia	2,305,333	Pennsylvania	6,097,763
Hawaii	564,300	Rhode Island	564,300
Idaho	564,300	South Carolina	1,421,896
Illinois	4,732,281	South Dakota	564,300
Indiana	2,331,599	Tennessee	2,083,754
Iowa	1,391,731	Texas	6,147,379
Kansas	1,139,251	Utah	573,563
Kentucky	1,516,043	Vermont	564,300
Louisiana	1,535,025	Virginia	2,354,500
Maine	564,300	Washington	2,083,944
Maryland	1,843,229	West Virginia	854,259
Massachusetts	2,766,510	Wisconsin	2,203,655
Michigan	3,848,418	Wyoming	564,300
Minnesota	1,875,522	American Samoa	70,538
Mississippi	1.031,878	Guam	282,150
Missouri	2,337,876	Northern Marianas	70,538
Montana	564,300	Puerto Rico	1,203,867
Nebraska	732,458	Virgin Islands	282,150





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