



STATE OF GRANDFAMILIES

2023

BUILDING RESILIENCE

Supporting Grandfamilies'
Mental Health & Wellness

THROUGH THE EYES OF GRANDFAMILIES



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THROUGH THE EYES OF GRANDFAMILIES: A CONVERSATION WITH FIVE GRANDFAMILY CAREGIVERS

Grandfamilies, also known as kinship families, are families in which grandparents, other relatives, or close family friends are raising children, with no parents in the home. At least 2.4 million children are growing up in grandfamilies, and 7.6 million children are living in households where another relative (not their parent) is head of the household.

Grandfamilies form out of events that separate children from their parents, such as parental death, incarceration, deportation, divorce, military deployment, or the growing concern of mental health and substance use disorders. Research shows that between 2002 and 2019, grandparents reporting parents' substance use as a reason for raising their grandchildren jumped from 21% to 40%.

Grandfamilies have many strengths, including resilience, which can mediate the effects of trauma; family connections and legacies; adaptability; and the ability to co-parent with birth parents. Research indicates that children in grandfamilies do better than when they are placed in non-relative foster care, especially when the grandfamilies have the services and support they need. However, mental health services and systems of support remain difficult to navigate and access – if not impossible – due to high costs, lack of availability of qualified mental health providers, lack of culturally appropriate services, stigma, ageism, and more.

Children and their grandfamily caregivers have many layers of trauma and mental health challenges. Children come to grandfamilies with past experiences of trauma, such as parental substance use disorder and other untreated mental health conditions, neglect, abuse, being separated from their parents, and more, which can cause significant mental health concerns even when they are safely living in a grandfamily home. Children who have experienced trauma live with learning difficulties, chronic health conditions, and mental health conditions like post-traumatic stress disorder.

Grandfamily caregivers' mental health is highly impacted when raising others' children, which directly affects their physical health and general well-being. They experience chronic stress not only from the common stressors of child-rearing and difficulty navigating relationships with the child's parents, but also from housing strains, financial pressures, social isolation, food insecurity, lack of self-care, and other issues brought on by the sudden responsibility of raising children.

It is vitally important that we listen to the voices of grandfamilies to better understand their mental health challenges. Therefore, we spoke with five grandfamily caregivers, and these are their very personal accounts of their families' mental health challenges and solutions that have helped. We are grateful for their candor and willingness to share their experiences as they strive to help other grandfamilies.

This publication is a companion to Generations United's 2023 State of Grandfamilies' Report, [*Building Resilience: Supporting Grandfamilies' Mental Health and Wellness*](#).





What role did mental health concerns play in you becoming a grandfamily caregiver?

Mercedes, age 68, San Antonio, TX: Twelve years ago, I got my son's five children when they were 1, 3, 6, 7, and 9 after they had been removed from their parents three times. They were neglected by their parents. My son has mental health conditions, and he is an alcoholic. One of their mothers has Attention Deficit Disorder (ADD) and depression; the other has bipolar disorder. They all took illegal drugs. The children didn't have enough food, some were beaten. They weren't being cared for physically—not receiving health care or dental care and they were not up to date on vaccinations. Then they were permanently separated from their parents, and even though they were better off with me, it was still traumatizing for them.

Angela, age 50, Milwaukee, WI: I'm raising my granddaughter, who is now 8 years old. She is my son's child, and her mother has severe mental health issues. My son also had some mental health issues and did not receive the support he needed. He was shot and killed and after that, my granddaughter went back and forth between her mother and maternal grandmother; they did not treat her well or meet her needs. I started fighting for custody in 2018 and I finally got it in July of 2023.

Chris, 72, Oldsmar, FL: My daughter has bipolar disorder and substance use disorder. She had two children, and they went through a lot of trauma—I'll never fully know everything they went through because they were so young. When she was 9, my granddaughter came to live with me. My grandson stayed with his father. He had been abandoned by his mother three times by the time he was 6. Eventually, the authorities removed my grandson from the home, because he was being abused, and sent him to me in Florida. Later, my daughter came to Florida and the kids went back and forth between her and me; not a lot of stability for them. I was afraid to go to court to get custody because I'm gay. Eventually, my daughter was in trouble with the law for illegal drugs; she left the children with me and left the state. After that, I fought for custody and got it. I was finally able to give the children permanency and a safe, secure home.

Bob, age 64, Buena Park, CA: Mental health disorders have run in my family. I had a tough childhood as my parents divorced and my mom had depression, anxiety, and addiction to drugs and alcohol for many years. Mom died from suicide when I was 20 years old. My brother and sister followed in my mother's path with alcohol and drug use and when my niece was born that didn't change. When my niece was 8 years old, I found two hypodermic needles loaded with illegal drugs in the bed she shared with my

sister. I called the police who arrested my sister and took my niece under protective custody to a congregate care place. Two days later CPS called me and wanted me to take my niece, as I was the only one who could, or she would go into foster care with strangers. I was given only a few minutes to decide, and I agreed to take her. She had been neglected so badly. After that, my sister was in and out of jail. My niece still had visitation with her, so it was very up and down for years with a lot of stress and anxiety for my niece. Three years ago, my sister died from an apparent drug overdose. My niece is 29 now and is currently living with me.

Kris, age 64, Bismarck, ND: My husband, Kevin, and I had cared for our son's two children most of their lives off and on because their parents neglected them. Their mother was using drugs and alcohol when she was pregnant. She and our son have substance use disorder. Our son has depression and anxiety and has had multiple driving under the influence arrests (DUIs), and he has been in treatment several times. But every time he goes back to drinking and illegal drugs. Our son lived with us off and on and was unreliable with the children. Sometimes we didn't know where he was for long periods of time. We eventually got guardianship of the children and adopted them in May of 2022. They are now ages 11 and 12.

How has the trauma that the children you are raising experienced affected them?

Mercedes: Over time they have shown more effects of the trauma. Four of the five children have Attention-Deficit / Hyperactivity Disorder (ADHD). While they were happy that I adopted them, they were angry at their parents and dealing with the trauma. My grandson who was 6 at the time had

the hardest time adjusting. He was diagnosed with post-traumatic stress disorder (PTSD), oppositional defiant disorder, and ADHD. Since he has been a teenager, he sometimes gets violent.

Angela: My granddaughter was so happy and surprised that she could eat and take a bath every day and sleep in a real bed when she came to live with me. I think that says it all. She has been diagnosed with anxiety, depression, Reactive Attachment Disorder (RAD), and PTSD. She's triggered when she sees someone yelling at their kids—she gets sick and wants to go home. She has been hoarding her food because of not having enough food to eat in the past. Her social skills are not developmentally on track. The PTSD makes her hypervigilant—she is constantly cleaning her room, so she won't have to leave, even though I tell her she never has to leave.

Chris: My granddaughter has coped pretty well because of the support I got them when they were young, although I worry that she may still have things bottled up inside her. She's happily married now with three children. My grandson was very angry when he was sent to me, and he really didn't know me—I hadn't seen him since he was a baby. When he was 13, he was bullied at school, and he reacted by taking homemade explosives to school (pop bottles filled with gasoline). I advocated to have him sent to a psychiatric facility instead of a juvenile detention facility. He got intense counseling there and was diagnosed with PTSD from what happened to him when he lived with his father. When he got out, he continued to see a psychiatrist and we thought he was doing well. He graduated from high school, everyone liked him, and he had a good job and friends. Then when he was 24 years old, we suddenly lost him to suicide. Now I know there must have been a lot he was hiding within himself.

“Obtaining official guardianship was a turning point because the children felt more safe and secure. Adopting them has been extremely significant to all of us, given them a sense of permanency; they are no longer afraid they will be taken away from us.”

— Kris, age 64, Bismarck, ND



Bob: My niece has lived through so much trauma. Abandonment, neglect, seeing her mother on drugs, living in a terrible mess, going back and forth from her mother to me; it's been a lot. She had a lot of fears, anxiety, trouble sleeping, and was always afraid to try new things. She continued to see her mother while living with me, and I don't have regrets about allowing her to continue a relationship with her mother—she wanted to; but it always bothered me that once her trauma started to heal, it was re-traumatizing her every time she saw her mother. It was hard to watch.

Kris: Our grandchildren were very traumatized by the neglect and having their parents go in and out of their lives. My grandson is still afraid of the dark at age 11; he doesn't want to go to bed alone. Our granddaughter has Oppositional Defiance Disorder (ODD) and ADHD. Our grandson was at least a year behind in development when we got him, and he has ADD. They both have anxiety, and their social skills were not developed.

What has helped the children you are raising with their mental health and well-being?

Mercedes: Equine therapy (with horses), a behavioral therapist, and counseling have been helpful—and prescription medications help them deal with their mental health issues. Creating structure for the children helped them feel more secure. Being in the band I helped motivate my middle grandchild to go to school. We got financial support through Cross Trail Outfitters of Texas Youth Hunting and Fishing Club (which was recommended by post-adoption services), and he went to camp for 8 years and had

mentors. He also went to a therapeutic boarding school for a time when he was really having trouble and getting violent with me. The other children went to church camp, and they participated in fundraisers to be able to go.

Angela: I just finally got custody of my granddaughter a few months ago and we are still on a waiting list to see a therapist or psychologist. She says she saw a therapist when she was 4 and that 'It helps to talk with people'. That therapist used coloring to help her express herself and my granddaughter still does that. She says, 'That's how I talk.' I'm giving her safety, stability, love, and security—that's the most important thing I can give her right now. I always tell her to use her voice, use her words, that they are powerful; she is powerful. She's getting better at talking with me about it. And I'm just trying to get her to be a kid again; she never got to do that.

Chris: The CPS investigator referred me to Children's Home Network and their kinship program—they were lifesavers. They helped me get custody, get the kids into school, and get medical insurance, tutoring, and more. They held dinners once a month where the children could be with other children in similar situations, which really helped them. My grandson saw a psychiatrist from the time he was in middle school, and that seemed to help him. He trusted the counselor. Unfortunately, he had to stop seeing the counselor when he was 18 because the counselor only worked with children and adolescents. Sadly, although the counselor gave him referrals, to my knowledge, my grandson never got another counselor. He did have a probation officer who became part of the family and was very supportive of him and stayed in touch.



“Caregivers need to know it’s okay to ask for and accept help. There is a lot of fear—people are afraid to tell what’s happening, afraid of failure, afraid of losing children or a home. Grandparents and parents need more support they can trust.”

— Angela, age 50, Milwaukee, WI

Bob: When I got permanent guardianship, I went to a permanency training and they said my niece would be eligible for therapy, help with college, and more. I got her into counseling when she was 12, and that helped, but they kept changing the therapists so there wasn’t consistency. The psychologist I found for her when she was in high school made the biggest difference. That psychologist truly understood the effects of the trauma my niece had been through. When my niece aged out of Medicaid, she asked if she could continue with her psychologist. So, I paid for it. I learned a lot from the psychologist too, which gave me more tools to help my niece. She needed structure and empathy. Without the mental health support, I don’t think my niece would have made it through high school. Art has also been a great outlet for her—she is an amazing artist and has a college degree in art. It has helped her express herself.

Kris: Obtaining official guardianship was a turning point because the children felt more safe and secure. Adopting them has been extremely

significant to all of us, given them a sense of permanency; they are no longer afraid they will be taken away from us. The night we adopted the children, my grandson said, ‘I feel like the weight of the world has been lifted off my shoulders. Upon early childhood intervention’s recommendation, speech therapy, occupational therapy, physical therapy, play therapy, and other interventions were brought into their lives. These therapies helped immensely, but the thing that made the biggest difference was getting them on the right medications with the help of a child psychiatrist. They have had mentors from Big Brothers, Big Sisters. Our grandson recently did the “I can bike” camp and finally learned to ride a bike which has helped his self-esteem, and singing in a children’s choir has also helped. The children now go to a smaller school, and it has been good for them to get more individual attention. They are both doing extremely well in school, well beyond their grade level. We are very matter of fact about what has happened, and we are honest and understanding of their emotions.

How have the trauma, stress, and other challenges of being a grandfamily caregiver affected you?

Mercedes: I had to go through the system four different times before I had to get an attorney and do an intervention. There was so much pressure. It was very challenging. And then I had to make the choice of adopting the five children and the challenge to raise them started. Talk about mental stress. I was 57 years old, so it was hard raising all these babies. I was overwhelmed. I had a full-time job, and I had to take a month's leave of absence to be able to adjust to what was happening and all the trauma. I developed depression. I really think I had secondary trauma. It was very overwhelming. I eventually had to quit my job due to raising the children. The chronic stress has also affected my physical health. I got shingles twice; my arthritis is bad, and I don't sleep well. I get so tired it's hard to function.

Angela: By the time I got custody of my granddaughter, I was so beaten down after years of fighting for her. I was about to give up. I was losing my hair, I gained 100 pounds. I was emotionally, mentally, and physically exhausted. I had to quit my job working with people with substance abuse, domestic violence, and human trafficking due to the mental health effects of fighting for my granddaughter—it was too much. And I kept having to relive the trauma of my son's death every time I went to court. I also experienced trauma as a child, my mother has bipolar and schizophrenia. She beat me when I was growing up. Sometimes it's overwhelming thinking about what my granddaughter has lived through; it triggers my trauma.

Chris: I've been through a lot. I had a lot of trauma as a child. I served many years in the Marine Corps. Being gay, I've been through a lot of years of being in the closet; being afraid and discriminated against. I'm not afraid anymore. I've had uterine cancer and lung cancer. I had to fight with my homeowner's association because they didn't want the children living there with us. I've had a lot of loss—my wife had cancer, hydrocephaly, and dementia and she died in 2017—we were together for 25 years and she was part of raising the children. And then my grandson died. My daughter moved in with me about ten years ago. Setting boundaries helps—she has to take her medications, stay sober, and be cooperative. She had a chronic infection in her leg from an injury, and a year after she moved in, she lost her leg. We actually get along now and have a good relationship, but it's still stressful at times and she needs to be taken care of. I do my best to handle the stress all these years. You have your moments, you gain your strength, you come back, and you take it on. I'm still processing it all; I know I need to talk about these things.

Bob: There have been times when the stress and dealing with my niece's challenges have pushed me to the brink. I realized I didn't have the skills at first; I didn't know enough about trauma. So, I started going to grandparent support groups—I was the only man and the only uncle. I was amazed that other people were going through the same things. Learning new coping skills and how to interact better with my niece helped me a lot. I've had a lot of loss—my mother, my father, my sister. I've lost friends who didn't understand why I was raising my niece. Raising my niece completely changed my life—in good ways and hard ways.

“Individual and family counseling has been very helpful. My doctor prescribed antidepressants and try to help myself cope with the situation and my anger. I went to Al-Anon and I learned how to have healthy boundaries and detach from my grandchildren's parents and accept that I can't fix them. I focus on my own situation.”

— Mercedes, age 68, San Antonio, TX



“I joined a kinship support group all those years ago and to this day I still have a group of ten of us and we get together every Friday night for dinner. The group helped me learn how to get the things my grandchildren needed and where to get help.”

— Chris, age 72, Oldsmar, FL

Kris: There has been so much stress, which triggers me because I have PTSD from my own childhood and being raised by my own grandparents. I have increased depression and anxiety because of the journey we have been on with the children. There has been a great deal of conflict—both with the children’s mother and her family and with my son. My self-esteem has been up and down. Our marital relationship isn’t what it used to be because we don’t have much time for just the two of us. I’m isolated because I’m raising children, so I’ve lost friendships. If I do try to do something social, I have to find a babysitter and that’s expensive. The financial issues are incredibly stressful. Raising the children has really affected our retirement savings and plans. My depression and anxiety have increased. Until she died at the age of 99, I was caregiving for my mother-in-law while raising my grandchildren. I’m exhausted. I sometimes feel like I’ve lost myself.

What has best supported your mental health and well-being? What helps you be resilient?

Mercedes: Individual and family counseling has been very helpful. My doctor prescribed antidepressants and try to help myself cope with the situation and my anger. I went to Al-Anon and I learned how to have healthy boundaries and detach from my grandchildren’s parents and accept that I can’t fix them. I focus on my own situation. My Al-anon sponsor required me to go to an Alcoholics Anonymous101 meeting, and I heard from people there who had addictions, and that helped me understand my son better and set healthy boundaries with him. When I was still working, I hired someone to come three times a week to help with dinner and bedtime, that allowed me to go to Al-Anon and counseling and have a little social life and respite. I couldn’t afford it after I retired though. My daughter, and my oldest grandchild, who has

moved out, come to help with the younger children sometimes. Although the pandemic was really hard being so isolated. Recently, I saw an ad for a \$39 facial—so I did that! And I try to get a massage regularly.

Angela: When my son was diagnosed through the school system with mental health problems we got wraparound mental health services—they helped us as a family, not just him. It changed my life. I had never heard anyone talk about mental health before that. That’s when I had my first psych evaluation—I never had one as a child. As I took training and got therapy and understood that I had experienced trauma, it put a lot of stuff into perspective. I learned I didn’t have to be ashamed. It helped me talk about it. Speaking up and speaking my truth helps me process it all. I learned that mental health is not who I am, I learned to just live with it. I’ve been sober—free of alcohol—for 18 years. When my mother got older, I got her a psych evaluation. Now she is the best grandmother and mother—and she’s sticking to her medication. She’s sober and healthier which has eased my stress and helped me heal. I have cognitive delays and anxiety/depression, but I’ve had help through outreach programs. I found people to help me learn about getting a job and those sorts of things—that stuff was very scary for me; none of my brothers or sisters know how to do that. I believe in God, and I definitely read the Bible. I pray a lot and I surround myself with support groups for staying sober, parenting support, and kinship support. I focus on everything that I need to work on and hold myself accountable and responsible for what I have to do. I told my granddaughter; this is our healing season. She tells me, ‘Grandma you’re my hero’ and that keeps me going.

Chris: I joined a kinship support group all those years ago and to this day I still have a group of ten of us and we get together every Friday night for

dinner (we did Zoom during the COVID shutdown). We also have a text thread we text back and forth. Technology has been very helpful because we can’t always talk on the phone when we are having a crisis or need support. The group helped me learn how to get the things my grandchildren needed and where to get help.

Bob: I started going to kinship caregiver support group meetings which really helped because not only did I realize I wasn’t the only one doing this, but I also got the support and education from the group. My niece came with emotional baggage, and I didn’t always understand that. I kept thinking about what was wrong with her. Now I look at things differently. I needed to understand why my niece wanted to go back to her mother despite the abuse, and how to deal with my niece’s difficult behaviors. My niece’s psychologist helped me understand trauma. I learned about empathy, how to communicate with my niece, and how to talk about consequences instead of punishment. I learned that when she’s mean to me, she’s testing me to see if I will leave her; in her experience, people usually split, but I never have. As I learned more, I started getting involved in advocating and standing up for myself and other relative caregivers; it helps me get through this to know that my voice is being heard.

Kris: I am a member of 4 groups on Facebook that have been really helpful to me to connect with other people going through similar situations whether in foster care or grandparents raising grandchildren. Kinship North Dakota has been very helpful. As my anxiety and depression increased with the stress, I started seeing a psychiatrist and a counselor, who is my lifesaver—he has worked in the foster care system, so he understands what we have gone through. I try to do some things for myself, such as setting aside Friday morning as my time with my plants. I water them, polish their leaves, and enjoy

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— Bob, age 64, Buena Park, CA

them. I have music playing, and it's very therapeutic for me. We all have bikes now, so we are going to start biking as a family. It's also helped me a lot to be part of the Generations United GRAND Voices program because of interacting with people in similar situations. Some of them have had it even worse than we have, and that gives me perspective. I do feel blessed.

What are your hopes and dreams for the future of the children you have raised?

Mercedes: I want them to have the mental health support they need so they can live a good life. Now I know that mental illnesses like depression, anxiety, and alcoholism run in my family. So, I have conversations with my grandchildren about that. I want to teach them that, even if they have a mental health issue, they can get treatment and understand that we have choices for how we live our lives—so they don't follow the same pattern as their parents. I want to see the kids happy, and I want them to always know that I'm here if they need me. I want them to know that I did everything I did for them because I love them.

Angela: I want her to know she's important, that there is life out there beyond trauma and pain, and that the world has a lot to offer. I want her to take the pain and turn it into power as I did. I want her school to support her and teach her to read and understand her trauma and get resources for her. I can't wait to create a good life for her and give her the things she's never had, like a birthday party and holidays—and I read to her at night; she's never had that. I want her to know what a healthy family looks like.

Chris: I hope that my granddaughter gets support to talk about all she's been through if she needs it. She's an adult now, with a family of her own and I want her to have a good life.

Bob: When my niece came to live with me, I wanted her to have normalcy—to learn to swim, go to church camp, have friends, and have slumber parties. She couldn't have that with her mother. Now, she's graduated from college with an associate degree and a bachelor's degree, and she has a good

job. I want her to know she will always have a home with me whenever she needs it. I hope she finds a man who loves her for herself. I want her to be happy, continue her art, live a long healthy life, and hopefully put her past trauma behind her. I want her to feel respected and safe.

Kris: I want my grandchildren always to feel like they can talk to us about anything at any time, day or night. I know their teenage years are coming up and may be difficult, so hopefully, we can make it easier for them with open communication. Alcoholism runs in our family, and I'm hoping these two children can break that cycle. We are honest with them; we talk with them about addiction as they age. We are working hard to give the children skills and support, so they do better than their parents have.

What would you like to be different in terms of the mental health concerns of grandfamilies? How are you involved in creating change?

Mercedes: This is very hard for grandparents; sometimes we have so much stress we need help. I wish there was someplace grandparents could reach out to in a crisis and get some immediate help. Support programs need to follow up with grandfamilies, and they should include the caregiver's perspective in everything they do. There needs to be more awareness about the caregivers' needs and more support available. When I got my grandchildren, I saw the need for this, so I became an advocate and founded Texas Grandparents Raising Grandchildren. We provide information, support groups, resources, and advocacy; we have a grant to provide counseling and equine therapy for the grandfamilies to help start a healing process. We need more programs like this that help us understand what has happened and how to help the children—and ourselves.

Angela: The focus should be on what's in the best interest of the child. The court, judge, social workers, and CPS should talk to the child who has been living in a bad situation—really listen and learn from them. Caregivers need to know it's okay to ask for and accept help. There is a lot of fear—people are afraid to tell what's happening, afraid of failure, afraid of losing children or a home. Grandparents



and parents need more support they can trust. Why did my granddaughter have to go through the same things I went through? Because nobody listened and nobody learned. Listen to the grandbabies' voices. Listen to people like me who have lived it. We are not going to be quiet anymore and we are not going to be victims.

Chris: The most important thing is that the authorities need to tell us everything these children have been through before we get them. If I'd known everything, I could have helped them better. There were probably things that my grandson should have been treated for long ago, but now it's too late. All relative caregivers should have access to programs like the Kinship Program at Children's Home Network—it helped me so much and now I work there and help other grandparents. Grandparents who are LGBTQ shouldn't be afraid to go to court for their grandchildren if they are being neglected or abused. And in my state, I talk with grandparents whose grandchildren are transgender and they are terrified the children will be taken away from them. That shouldn't happen.

Bob: I'd like more grandparents and other relative caregivers to speak up, tell their stories, and advocate for themselves to get more education, training, and counseling about the mental health concerns we all deal with, especially about trauma. All the children should have access to a therapist who really understands the effects of trauma and how to help them. I'd like the authorities to tell us about what happened before they came to us—like sexual abuse, physical trauma, etc.—so we are better equipped to help them. There should also be family urgent response systems available to kinship caregivers across the nation—a toll-free, confidential number staffed by peers and professionals.

Kris: Grandparents need some help navigating this—it's been a long time since we raised children. The court system is flawed because they are so focused on the nuclear family that they don't deal with the abuse, neglect, and trauma the children have been experiencing. They should be thinking about the children and what going back to the parents means for them. Grandfamily caregivers save the county tax dollars and ease their caseloads, but we need support. Adopting gave our grandchildren permanency, but we lost their Medicaid which has helped pay for crucial services that have really made a difference for them. I'm retired because of caring for the children, so paying for their insurance is very difficult for us. Those in the CWS get support so why shouldn't we?

What advice do you have for other grandfamilies coping with mental health concerns?

Mercedes: You have to have healthy boundaries with your grandchildren's parents. Don't discount your feelings – your feelings are your feelings and you've got to deal with them. Be aware of what triggers you. You need to love yourself too. Acknowledge that you need help; if we don't let other people know we need help, then we are going to drown, so we have to get over our pride and accept the help. If people want to bless us and our grandchildren with help, we need to accept it.

Angela: Unlearn what you thought so you can learn new things. I had to unlearn unhealthy behaviors and stigmas and statements, so I could apply what I had learned. If you don't do that, you and your family are still going to be stuck. Learn to trust and



accept help. Teach your grandkids about love and help them break the cycle of pain, abuse, trauma, and loss.

Chris: Get help. Get it as soon as you can. Build your own network of friends and people you can rely on. You can't do it alone. Make sure your children feel safe and secure and that you do too. My advice for other gay grandparent caregivers is to seek out others who are in like situations. When you go for help, find the right people you can trust to tell them you are gay. Find a network of people who support you and accept you for who you are whether they are gay or not. We are all the same, going through the same things with our grandchildren.

Bob: Know that you can have an impact. Instead of sitting there saying this is never going to change, get out there and do something. Your voice WILL count...I know because I've been working for change and some things have improved. This situation has made me continually grow, and you can too. Get respite care to take a break if you can—you need that to think straight. Your batteries need recharging once in a while and you have to step away to come back with a different perspective. Bring the kids into your home, and get them stabilized, safe,

and feeling loved. Then get out and learn about trauma. Learn what the experts know and all the proven information—even if you only take in 10% of it, you are much better off.

Kris: Being willing to be flexible. Be honest and upfront with the kids. Face the issues head-on; don't bury them or be afraid or accept the status quo—ask the questions. Do what you feel is right, find the resources, and do what you can do. Don't limit, dismiss, or lose yourself. Think about the children's mental health needs as well as yours. Counseling is critical for everyone going through something like this. You can't take care of the kids well if you don't take care of yourself. To sum it up:

Be calm,
Be brave,
Be purposeful,
Be assertive,
Be forgiving,
Be resourceful,
Be committed,
Be strong,
Be flexible,
Be loving,
Be YOU.

MENTAL HEALTH RESOURCES FOR GRANDFAMILIES FROM 2023 STATE OF GRANDFAMILIES REPORT

Tips for Finding a Mental Health Provider

Dr. Deborah Langosch, a psychotherapist who works with grandfamilies, suggests grandfamily caregivers ask the following questions when searching for a mental health care provider:

- What is the providers' background, training, and experience?
- Have they worked with other grandfamilies?
- Do they understand the unique circumstances of grandfamilies, including the relationship with the birth parents, and any specific issues in your family, such as substance use disorder and other specific mental health conditions?
- Do they have special training in the treatment of trauma and PTSD?
- Are they familiar with some of the very short-term and effective therapies that have been researched?
- Are they sensitive to your cultural background, including your values and strengths?

Resources to Help You Find Appropriate Mental Health Providers

- [FindHelp.gov](https://www.findhelp.gov)
 - » [988 Suicide and Crisis Lifeline](https://www.988lifeline.org/) – A toll-free number you can call 24/7 to talk with someone if you or someone you know is experiencing a crisis or having suicidal thoughts.
 - » [Find a Treatment Facility](https://www.samhsa.gov/treatment-facilities) – Find outpatient and inpatient treatment centers, clinics, or hospitals.
 - » [Veterans Crisis Line](https://www.veteranscrisisline.net/) – Support for our nation's veterans.
 - » [Find Support](https://www.samhsa.gov/find-support) – Tips for finding support for issues with mental health, drugs, alcohol, or healthcare.
 - » [SAMHSA's National Helpline](https://www.samhsa.gov/national-helpline) – 1-800-662-HELP(4357) – A toll-free, confidential, 24/7, 365-day-a-year treatment referral and information service line (in English and Spanish) for individuals and families facing mental health and/or substance use disorders.
 - » [Disaster Distress Helpline](https://www.disasterdistresshelpline.org/) – A toll-free, 24/7, multilingual, crisis support service for those experiencing emotional distress related to natural or human-caused disasters.
 - » [Screen4Success](https://www.screen4success.org/) – Helps parents and caregivers identify areas where children may benefit from additional support; the screener asks questions about substance use, mental and physical health, general well-being, and family life.



- [Find a Medicare Provider](#) – Find and compare Medicare providers who are clinical social workers, psychiatrists, or clinical psychologists.
- [Finding a Mental Health Professional](#) (NAMI) – Tips for finding the right mental health professional.
- [Find a Therapist Search Tool](#) – Search by location, speciality, insurance coverage, and other factors using this tool provided by Psychology Today.
- [Generations United](#)
 - » Grand Resource: Help for Grandfamilies Impacted by Opioids and Other Substance Use [Part 1](#) and [Part 2](#)
 - » [Grandfamily Tip Sheets, including Grandfamily Caregiver Self-Care Tip Sheet, and Youth Mental Health Tip Sheet](#)
 - » [Let’s Talk About It: Supporting Grandfamilies’ Mental Health and Emotional Well-Being Webinar](#)
 - » [Racial Equity Toolkits Featuring Grandfamilies](#) – helping children thrive through connection to family and culture for American Indian, Alaska Native (with National Indian Child Welfare Association), Black, African American, and Latino grandfamilies.
 - » [Connecting with Families in Black and Indigenous Communities Tip Sheet](#)
 - » [The Unique Dynamics of Shared/Co-Parenting in Kinship Families](#)

Organizations, Articles, Publications, Tools

- The [ARCH Respite Network](#) provides respite information and resources, including a fact sheet, [9 Steps to Respite Care for Grandfamilies](#), and a [National Respite Locator Service](#) search tool to find local respite care programs.
- The Black Mental Health Alliance provides information, resources and a [“Connect with a Therapist” referral service](#) to help individuals find a culturally sensitive and patient-centered licensed mental health professional.

- » [Family Dynamics in Kinship Families: Implications for Services and Programs](#)
- » [Navigating the Relationship with Your Adult Child](#)
- » [Tips to Include Kinship/Grandfamilies in Programmatic Decision-Making](#)
- [The Indian Health Service](#) provides a [Find Healthcare](#) search tool where individuals can search for Indian Health Service, Tribal, or Urban Indian Health Program behavioral health facilities.
- [Mental Health America \(MHA\)](#)
 - » [Strength in Communities](#), a toolkit that highlights alternative mental health supports created by and for BIPOC and QTBIPOC communities of color.
 - » [Youth Mental Health Resources Hub](#)
 - [For kids and youth who are trying to understand their emotions and overall mental health](#)
 - [For young adults who are navigating life's challenges and transitions](#)
 - [For parents and caregivers who want to learn more and provide support to the youth in their lives](#)
 - [For schools and educators who are dedicated to creating mental health awareness in their classroom and school communities](#)
 - » [Mental Health Screening](#) – Online screening is one of the quickest and easiest ways to determine whether an individual is experiencing symptoms of a mental health condition. Individuals can access and complete any one of 11 free, anonymous, and confidential mental health tests available from any internet-connected device. Screening can be used by the individual or caregiver.
- » [Crisis Text Line](#) – A free crisis connection available 24/7 via text message. Text MHA to 741741 to be connected to a trained crisis counselor.
- » [National Alliance for Mental Illness \(NAMI\)](#)
- » [How to Talk to Your Child About Their Mental Health](#) (NAMI)
- [National Asian American Pacific Islander Mental Health Association \(NAAPIMHA\)](#) provides a [listing of providers](#) of mental health and behavioral health care services for Asian Americans, Native Hawaiians, and Pacific Islanders in every state.
- [National Child Traumatic Stress Network \(NCTSN\)](#)
 - » [Assisting Parents/Caregivers in Coping with Collective Traumas](#)
 - » [Helping Children with Traumatic Grief: Tips for Caregivers](#)
 - » [Helping Teens with Traumatic Grief: Tips for Caregivers](#)
 - » [Tips for Families on Addressing Anniversaries](#)
- [National Native Children's Trauma Center \(NNCTC\)](#) is a Category II Treatment and Service Adaptation Center within the National Child Traumatic Stress Network whose focus is on increasing service providers' ability to respond to the trauma-related needs of American Indian/Alaska Native children and youth in culturally appropriate ways. They provide [webinars](#) and other [training programs](#) for service providers.
- [Native Wellness Institute](#) provides training, Facebook Lives, and videos to support the wellness of Native Americans.
- [One Sky Center](#) is the American Indian and Alaska Native National Resource Center for Health, Education, and Research, and provides a [Native Programs Directory](#) with a listing of effective and culturally appropriate substance abuse prevention and treatment programs for American Indian and Alaska Natives across the country.

- [SAGE](#) offers the [National LGBTQ+ Elder Hotline](#) at 877-360-LGBT (5428) which is available 24/7 in English and Spanish, with translation in 180 languages. Hotline responders are certified in crisis response, offer support without judgment, and are trained in LGBTQ+ cultural competency.
- [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#)
 - » [Mental Health Warning Signs in Children: Resource for Parents and Caregivers](#)
 - » [Understanding Child Trauma](#)
 - » [Recognizing and Treating Child Traumatic Stress](#)
 - » [Tips for Talking with and Helping Children and Youth Cope After a Disaster or Traumatic Event: A Guide for Parents, Caregivers, and Teachers](#)
- [The Trevor Project](#) provides [mental health information](#) and free, confidential, non-judgmental support from trained crisis counselors for LGBTQ young people 24/7, through [chats, texts, or calls](#) at 866-488-7386. They also offer [TrevorSpace](#), a free international online community for LGBTQ young people ages 13 to 24.



**“Be calm,
Be brave,
Be purposeful,
Be assertive,
Be forgiving,
Be resourceful,
Be committed,
Be strong,
Be flexible,
Be loving,
Be YOU.”**

— Kris, age 64, Bismarck, ND



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for the digital version of the report.

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Thank you for your contributions.

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Because we're stronger together®