



CHILDREN'S BUREAU GRANTEE SYNTHESIS:

Kinship Navigator Programs

The Children's Bureau awards discretionary grants for research and program development to State, Tribal, and local agencies; faith- and community-based organizations; and nonprofit and for-profit groups to help support innovation and progress in research, capacity building, and practice and program improvement efforts. This Synthesis series highlights distinguishable examples and lessons learned from grantees that may be useful for other States and jurisdictions implementing similar kinship navigator programs.

Background

In fiscal year (FY) 2012, the Children's Bureau funded seven 5-year Family Connection grants under Child Welfare/TANF¹ Collaboration in Kinship Navigation Programs (HHS-2012-ACF-ACYF-CF-0510). The purpose of this discretionary grant was to determine the effectiveness of kinship navigator programs in supporting kinship caregivers' ability to identify and access appropriate services to meet their own needs to sustain permanency and meet the needs of the children they are raising. These projects were also intended to identify effective collaborations between kinship navigator programs, child welfare agencies, and other public and private agencies, in particular the TANF program, to better serve the needs of kinship caregiver families.

¹ TANF is the Temporary Assistance for Needy Families program.

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Grantee Organizations

Listed below are the seven grantee organizations (all private, nonprofit agencies) that collaborated with their local child welfare agency to implement the kinship navigation-TANF projects:

- Arizona’s Children Association (Tucson, AZ)
- Catholic Charities of Rochester (Rochester, NY)
- Community Coalition for Substance Abuse Prevention and Treatment (Los Angeles, CA)
- Homes for Black Children (Detroit, MI)
- North Oklahoma County Mental Health Center (Oklahoma City, OK)
- The Children’s Home, Inc. (Tampa, FL)
- United Ways of California (South Pasadena, CA)

An overview of each project, including major activities and populations served, is provided in the Grantee Project Summaries section of this synthesis.

Synthesis Methodology

This synthesis was developed utilizing qualitative analysis software and thematic coding of more than 550 pages of grantees’ final reports. Thematic coding involves categorizing segments of text (or qualitative data) to facilitate content analysis. Qualitative analysis software is useful when dealing with large amounts of text and data management and helps to streamline thematic coding and reporting, improve the quality and utility of information, and increase the rigor of the analytic processes. To begin analysis, an initial set of codes were developed, and each code was assigned a specific description and definition. Backup coding was conducted on each final report to help ensure interrater reliability.

As demonstration projects, these grantees offer lessons learned about their experience implementing kinship navigator programs. The following synthesis includes cross-cutting themes and promising practices, which may be of interest to other States and jurisdictions in the process of developing similar programs for similar populations.

What Are Kinship Navigator Programs?

Across the United States, kinship caregivers play a critical role in the safety and healthy development of children and youth and help to prevent unnecessary entries into foster care. Despite this, kinship caregivers often experience significant challenges and barriers to maintaining their caretaking role, including difficulty finding affordable child care and housing, applying for public assistance, or facing challenging family dynamics.

Federal law¹ defines kinship navigator programs as services that assist kinship caregivers in learning about and accessing programs and resources to meet the needs of the children they are raising, to provide help for the family as a whole to safeguard stability, and to promote partnerships among public and private agencies. Kinship navigator programs are not intended to provide the services needed by kinship families; rather, they aim to improve caregivers’ knowledge of services and assist them in being able to identify and access the services they needed.

The Family First Prevention Services Act of 2018, enacted as part of Public Law (P.L.) 115-123, amended title IV-E of the Social Security Act to allow title IV-E agencies to receive funding for kinship navigator programs that meet certain criteria. The Children’s Bureau program instructions [ACYF-CB-PI-18-11](#) provides guidance to States and Tribes operating title IV-E programs on the requirements for participating in the title IV-E kinship navigator programs. Requirements include that kinship navigator programs operate in accordance with promising, supported, or well-supported practices (as defined in the [Title IV-E Prevention Services Clearinghouse Handbook of Standards and Procedures](#)).

¹ Section 427(a)(1) of the Social Security Act

To help title IV-E agencies prepare to participate in the new title IV-E kinship navigator funding option, Congress, through annual appropriations bills, set aside \$20 million² in funding appropriated under title IV-B, subpart 2, of the Social Security Act in both FYs 2018 and 2019 for kinship navigator grants. These funds may be used to develop, enhance, or evaluate kinship navigator programs. For more information on the FY 2019 funding, see program instructions [ACYF-CB-PI-19-01](#).

More information on kinship care can be found on [Child Welfare Information Gateway](#).

Grantees' Program Activities and Lessons Learned

While varied in the type and number of kinship services they provided, all grant projects focused on helping kinship caregivers identify, access, and maintain local resources and supports. Some of the grantees used a randomized control trial to evaluate their effectiveness. Projects relied on families' self-referral, referral by a social services agency, or direct outreach efforts to informal caregivers who may not be connected to a system. Most grantees began kinship services with an assessment of a family's needs prior to developing a tailored support plan for services.

Grantees' found the following to be the most common challenges of kinship caregivers, listed in no specific order:

- Lack of knowledge about public assistance programs and eligibility requirements, specifically TANF child-only grants
- Challenges navigating different service providers and completing eligibility applications
- Inadequate access to legal assistance when needed
- Barriers to accessing affordable child care, counseling, or educational support
- Lack of financial resources for utilities and/or household repairs
- Need for emotional support

Grantee projects developed and strengthened collaborations with relevant community service providers, including TANF and child welfare agencies, to provide more meaningful, coordinated, and effective services to caregivers. The following characteristics were identified as the most significant when implementing a successful kinship navigation program and providing meaningful services to caregivers.

Dedicated Kinship Navigator Staff

Carefully trained staff are an essential component of effective kinship care services. The role of program staff, frequently called kinship navigators, is to educate kinship families about relevant public assistance programs and to provide hands-on assistance in navigating service program requirements. Navigators may schedule and transport caregivers to appointments and/or walk them through applications in person or online. Some staff organize educational workshops for caregivers on topics such as child development and effective parenting.

² Five percent (\$1 million) of the appropriation is reserved for Federal research, evaluation, and technical assistance activities, leaving \$19 million available for kinship navigator grants.

Lesson Learned:

Peer navigators may need more supervision and support than professionals.

The Children's Home, Inc.

Collecting and analyzing data on staff revealed that peers (i.e., grandparents hired as peer navigators) often needed more supervision time and pursued less diverse tasks than professional workers with more formal training and education in social work. However, peers were also found to be the most effective in connecting kin to resources, which is evidenced by high TANF application and enrollment rates. These results suggest the need to support peer navigators within the organization through structured supervision, and perhaps triage the caseload to streamline benefit cases their way, while redirecting more complex clinical and legal cases to other staff.

—Final Report, September 20, 2012 to June 30, 2016

Several grant projects employed grandparents or other relatives with lived caregiving experience as peer navigators and mentors. These individuals are uniquely equipped to build trust with kinship caregivers and can be effective advocates in managing various systems based on their own experience. Peer-led support groups and workshops can also be a useful way to share information on accessing local services, the benefits of foster care licensure, and effective parenting strategies. Michigan's Homes for Black Children project identified kinship caregivers who had successfully completed the foster home licensing process and achieved permanency to be role models and mentors for other caregivers going through the process. Peer navigators in Florida's Children's Home, Inc., project made home visits to kinship caregivers and helped them apply for TANF benefits online, which was the most effective way of connecting caregivers to resources.

In addition to their staff, five grantees developed or expanded online web portals or websites that provided information about public assistance, such as TANF, and other local resources or services that were often needed. With services that are primarily web based, it is important to consider having staff who are able to respond to a kinship family's immediate needs and in the event of an emergency or to connect caregivers with 2-1-1 or 3-1-1 information service, where available.

Outreach to Kinship Families

Outreach to existing kinship families to inform and engage them in services is a necessary component if a program seeks to reach families who are not currently engaged in a system. Florida's Children's Home, Inc., program did this through special events, including a Grandparent's Day event, resource fairs, and community presentations. In Michigan, Homes for Black Children used interactive games, such as Family Feud, to engage kinship families and provide information about the benefits of foster care licensure and to help families better understand the processes and their rights and responsibilities as foster parents.

The project of Arizona's Children Association collaborated with the Arizona's Grandparent Association, an existing statewide advocacy and support network created by and for kinship caregivers in the State. The Arizona's Grandparent Association established local and regional kinship support groups and sponsored outreach summits to help caregivers learn more about Arizona's kinship program. The grantee created a [website](#) that included information on education and training opportunities; how to find local support groups; as well as television, radio, billboard signs, and Facebook groups to reach kinship clients. The Arizona's Children Association also received direct referrals from the child welfare agency, including unlicensed kinship caregivers raising children in foster care.

The New York State kinship navigator program directly collaborated with its local department of social services (LDSS), which houses both the TANF and child welfare programs. When a TANF or child welfare worker met with a kinship caregiver, they would request written permission to make a referral to the kinship program. The kinship program then made contact with the caregivers within 2 business days. The grantee found this service coordination with LDSS to be the most successful outreach mechanism for reaching kinship caregivers.

Lesson Learned:

Kinship caregivers will utilize online resource portals.

United Ways of California

Kinship caregivers often need to navigate multiple systems of care and have a need for current information and resources, including benefits eligibility and local mental health resources. In response to this need, one grantee implemented an online navigation portal that included resources curated by local county collaborative members, including iFoster and 2-1-1 staff, as well as public and private service providers in the communities where kinship families live. This portal, hosted by iFoster, operated as a 24/7 self-service navigation tool that coordinated both public and private resources for kinship families, including government benefits programs and local business discounts.

Cross-System Collaboration

Enhancing existing and establishing new multidisciplinary partnerships is critical to effective referral agreements and extending a program's network of resources, services, and expertise. The United Ways of California's county collaboratives formed a network of trained, kinship-informed service providers that connected families to needed resources. Florida's Children's Home, Inc., developed an interdisciplinary team that included representatives from TANF, child welfare, the legal sector, the educational system, and the health services sector, all with extensive experience working with and serving families with multiple needs. This interdisciplinary team established a collaborative infrastructure that allowed service providers to solve problems together and connect caregivers to services. These teams also provided caregivers with opportunities to speak directly with experts and service providers.

Each of the grant projects provided some form of training to their network of service providers on the needs of kinship caregivers and their eligibility for assistance. Grantees found that establishing strong community awareness and multidisciplinary partnerships were also helpful in locating free services or discounts from business providers, such as vision or physical exams, to lessen certain financial barriers for caregivers. When developing a service network for kinship caregivers, forming partnerships with a variety of providers and community groups will enable a program to meet the diverse needs of kinship families.

Challenges and Recommendations From Grantees

Grantees reported the following challenges when implementing a kinship navigation program. Recommendations and examples of ways grantees addressed those challenges are also included in this section.

Challenge: Transportation Issues in Rural Areas

- **Recommendation: Offer program meetings and foster home orientation sessions in the home.** Homes for Black Children in Michigan used this strategy and it provided more time for caregivers to develop a working relationship with project staff, which encouraged families to participate in other project interventions. In-home orientation became a standard practice delivery of the project.
- **Recommendation: Create mobile office spaces.** In Arizona, the Kinship and Adoption Resource and Education Family Center provided mobile onsite services in rural areas, allowing navigators to visit caregivers' homes to conduct intakes and provide information and referral services. Similarly, Children's Home, Inc., navigators in Florida brought along a laptop with a Wi-Fi hotspot when they visited caregivers' homes.

Challenge: Administrative and Logistical Issues

- **Recommendation: Establish case flow structure and benchmarks.** North Oklahoma County Mental Health Center's program learned they needed to require a certain number of face-to-face or phone contacts with a family based on defined stages of a case, which helped ensure consistency in programming and the establishment of program benchmarks. Additionally, creating a form for staff to complete during monthly visits created structure and provided an opportunity to ask additional questions about families' needs and engagement in services.
- **Recommendation: Maintain clear communication and information sharing.** Timely communication about new programs and resources relevant to kinship families is important to maintaining effective partnerships. County collaborative members of the United Ways of California project suggested providing information to partner agencies through presentations, written materials, and case studies. Further, kinship-serving providers utilized the online project portal as an important tool for locating updated information and resources. The Arizona Children's Association project found that establishing strong working relationships with key staff at the TANF agency meant the kinship project had staff they could contact directly for help instead of calling the assistance hotline or being sent to a local office.

Challenge: Caregivers With Multiple Challenges and Barriers to Licensure

- **Recommendation: Address kinship caregivers' immediate needs first.** Kinship caregivers may experience multiple challenges, including generational poverty, housing deficiencies, and utility shut-off notices, which must be addressed before supporting families in obtaining foster care licensure. Homes for Black Children in Michigan found a successful strategy was to assist families in determining their eligibility for resources through the State's TANF program.
- **Recommendation: Engage community partners.** Establishing relationships with a system of health clinics in the State supported the North Oklahoma County Mental Health Center's efforts to apply for a grant that would pay for medical exams for kinship families without health insurance, a requirement for licensure. This incentive also encouraged new kinship caregivers to engage in services.
- **Recommendation: Incorporate peer support.** Michigan's Homes for Black Children project identified kinship caregivers who had successfully completed the foster home licensing process and achieved permanency to be advocates or mentors. With training in licensing rules and regulations; Parent Resources for Information, Development, and Education (PRIDE) Pre-Service Training; and TANF guidelines, these peer mentors became effective role models and a source of tremendous support for caregivers throughout the licensing process.

Grantee Project Summaries

The following table presents an overview of the seven projects funded as part of the Family Connection Grants: Child Welfare/TANF Collaboration in Kinship Navigation Programs.

Table 1. Kinship Project Summary

GRANTEE	PARTNERS	PROJECT TITLE	MAJOR ACTIVITIES	POPULATION SERVED
Arizona's Children's Association (Tucson, AZ)	<ul style="list-style-type: none"> - Arizona Department of Child Safety - Arizona Department of Economic Security 	Arizona Kinship Support Services	Kinship navigators across four counties provided caregivers with information, referrals, and internal services. Services most commonly utilized by caregivers included guardianship clinics; kinship information sessions; and weekly, biweekly, or monthly peer-led support groups.	The program served 4,845 caregivers and 8,280 children in kinship care. Among adult caregivers, the average age was 50 years old, and 48 percent were Latino, 34 percent were white, 9 percent were African American, and 4 percent were American Indian. The majority of caregivers were the child's grandparents (58 percent), followed by their aunt or uncle (19 percent). The remainder of caregivers included nonrelatives, siblings/step siblings, great grandparents, cousins, step parents, foster parents, or adoptive parents.
Arizona Kinship Support Services: Final Progress Report	<ul style="list-style-type: none"> - Southern Arizona Legal Aid - Children's Law Center - Arizona Department of Economic Security, Division of Aging and Adult Services Caregiver Resources Line - Arizona Grandparent Ambassadors 			

GRANTEE	PARTNERS	PROJECT TITLE	MAJOR ACTIVITIES	POPULATION SERVED
<p>Catholic Charities of Rochester, DBA Catholic Family Center (Rochester, NY)</p> <p>Child Welfare/TANF Kinship Navigator Program Grantee, Final Evaluation Report</p>	<ul style="list-style-type: none"> - Five local county departments of social services (Orange, Dutchess, Ulster, Broome, and Tioga), including TANF and child welfare divisions 	<p>New York State Kinship Navigator County Collaboration Demonstration Project</p>	<p>The project took place in five upstate New York counties and partnered with five county local departments of social services—both their TANF and child welfare divisions—and a local kinship program with expertise in kinship care. Along with referrals and service delivery, the project also funded ancillary services and program actions designed to increase supports for kinship families.</p>	<p>The project served 935 kinship families via the kinship navigator help line and referred 653 families to local kinship services for in-person support and/or case management services. The project engaged over 4,500 professionals via educational trainings and received over 13,000 visits to the kinship navigator website from the five target counties.</p>
<p>Community Coalition for Substance Abuse Prevention and Treatment (Los Angeles, CA)</p> <p>Families Helping Families: South Los Angeles Kinship Navigator Program, Final Report</p>	<ul style="list-style-type: none"> - Alliance for Children’s Rights - The Los Angeles County Department of Children and Families - The Los Angeles County Department of Public Social Services 	<p>The South Los Angeles Kinship Navigator Program</p>	<p>Nine strategies were used to implement the South Los Angeles Kinship Navigator Program:</p> <ol style="list-style-type: none"> 1. Outreach 2. Intake and eligibility assessments 3. Service referral plans 4. Developing kinship caregivers as resource navigators 5. Developing kinship caregivers as leaders and advocates for child welfare practice and systems change 6. Creating a kinship advisory council 7. Community engagement 8. Using communications and technology to centralize referral information and services 9. Producing and disseminating resources 	<p>The program formally served 245 families. The majority of those served were Latino, whereas the rest were black or multiracial. A total of 79 adults and 17 children were included in the matched sample evaluation.</p>

GRANTEE	PARTNERS	PROJECT TITLE	MAJOR ACTIVITIES	POPULATION SERVED
<p>Homes for Black Children (Detroit, MI)</p> <p>Building Kinship Bridges Final Report</p>	<ul style="list-style-type: none"> - Wayne County Public Schools - Michigan Department of Health and Human Services 	Building Kinship Bridges	Project activities included identifying and training kinship navigator advocates/mentors, providing advocacy mentorship services to families to obtain services and resources through the Michigan Department of Health and Human Services and TANF.	The kinship navigator program was established to serve 100 urban, low-income African-American kinship families to obtain foster parent licensure.
<p>North Oklahoma County Mental Health Center (Oklahoma City, OK)</p> <p>NorthCare Family KINnections Final Report</p>	<ul style="list-style-type: none"> - Oklahoma Department of Human Services - Oklahoma City County Health Department - Metropolitan Area Projects (MAPS) Senior Health and Wellness Center - Oklahoma County Juvenile Justice Collaborative - Latino Community Development Agency - Oklahoma City Public Schools - Oklahoma County District Attorney - Eagle Ridge Institute of Logan County - Red Cross - Legal Aid Services of Oklahoma - Oklahoma Women’s Coalition 	NorthCare Family KINnections	NorthCare Family KINnections provided home-based care coordination through staff positions called community resource specialists (CRS). The CRS provided direct services to families by facilitating care coordination at whatever capacity was necessary to aid the kinship parent in providing stability and the best possible environment for the child.	<p>A total of 130 families participated in the evaluation study. Roughly 60 percent were white, 30 percent were African American, and 7 percent were Native American. About 5 percent identified as Hispanic.</p> <p>The mean age of participants was between 41 and 45 years old.</p>

GRANTEE	PARTNERS	PROJECT TITLE	MAJOR ACTIVITIES	POPULATION SERVED
<p>The Children's Home, Inc. (Tampa, FL)</p> <p>CHI CW/ TANF Kinship Interdisciplinary Navigation Technologically-Advanced Model (KIN-Tech), Final Evaluation Report</p>	<ul style="list-style-type: none"> - Eckerd Connects Community Alternatives - The Juvenile Welfare Board: Children's Services Council of Pinellas - Health and Human Services Coordinating Council - Department of Children and Families (TANF) SunCoast Region - Bay Area Legal Services - St. Anthony's Hospital Faith Community Nursing Program - Tampa Metropolitan YMCA - Big Brothers Big Sisters Pinellas - Family Enrichment Center - West Central Area Agency on Aging - Generations United - Pinellas and Hillsborough County Sheriff's Office - Florida Kinship Center 	<p>CHI CW/ TANF Kinship Interdisciplinary Navigation Technologically-Advanced Model (KIN-Tech)</p>	<p>KIN-Tech includes the standard care program for informal and formal kinship families with three innovations:</p> <ol style="list-style-type: none"> 1. Creation and implementation of a "One-e-App" to help families determine eligibility for community programs 2. Establishment of kinship navigators to help connect caregivers to community resources 3. Creation of an interdisciplinary team to provide specialized services to high-risk families 	<p>A total of 1,551 kinship caregivers participated in this project. The majority of participants were between 40 and 64 years old and were white (49 percent) or African American (43 percent). Most of the caregivers were the child's grandparents (67 percent) or an aunt or uncle (17 percent).</p>
<p>United Ways of California (South Pasadena, CA)</p> <p>United Ways of California 2-1-1-iFoster Kinship Navigator Collaborative Program Evaluation Report 2016</p>	<ul style="list-style-type: none"> - 2-1-1 California, iFoster - Members of county collaboratives in Riverside County, Monterey County, and San Bernadino, which include private and public kinship-serving entities 	<p>United Ways of California 2-1-1/iFoster Kinship Navigator Collaborative Program</p>	<p>This program included two main components: a web-based resource portal and a county collaborative. The online program portal was hosted by iFoster and operated as a self-service navigation tool that coordinated resources for kinship families. The county collaborative functioned as a cross-systems collective of members from local kinship-serving organizations.</p>	<p>The program served 3,470 kinship caregivers. The evaluation included 127 caregivers who participated in the online study and 28 qualitative interviews with caregivers. The majority of caregivers (62 percent) were between the ages of 45 and 65.</p>

Commonly Reported Evaluation Outcomes

Table 2 includes an overview of evaluation design and key findings from grantees’ most frequently cited outcome areas.

Family Needs Scale

The Family Needs Scale (Dunst, Cooper, Weeldreyer, Snyder, & Chase, 1988) is specifically developed for intervention purposes and is used to measure caregivers’ needs and access to resources. Each grant project required participating kinship families to complete an intake at baseline using the modified Family Needs Scale. A follow-up evaluation was conducted at 3 months. This enabled an analysis of a change in family’s needs over time, including the type and duration of services, to determine if changes could be associated with the kinship navigator program.

Table 2. Overview of Evaluation Designs and Key Findings by Outcome Area

GRANTEE	EVALUATION DESIGN	DATA SOURCES	EVALUATION FINDINGS
Arizona’s Children Association (Tucson, AZ)	Pre-/posttest longitudinal design Mixed quantitative/qualitative: - Process evaluation - Outcome evaluation	- Family Needs Scale - New General Self-Efficacy Scale - Administrative data	Access to health/nutrition programs - The top benefits that families reported receiving at intake were related to various nutrition/meal programs (e.g., nutrition assistance; free/reduced-priced lunches; Women, Infants, and Children program) (69 percent) and health insurance (37 percent) (n=4,845). Financial well-being - There was a decreased need to pay for utilities and travel equipment for their child (e.g., car seat); caregivers utilized basic-needs services, as referred by the kinship navigator. - Receipt of TANF-Child Only cash assistance was increased annually. - Caregivers reported that saving money was still a high need. Placement stability - Eighty-seven percent of children were still with their original kinship caregiver post assessment; - Nine percent reunified with their biological parents. Social supports - Caregivers reported decreased need for respite care following participation in the program. This decrease may be related to 19 percent of caregivers utilizing respite care and the activities available for children and families through navigation services. Well-being - Caregivers reported that their need to have more time to take care of themselves decreased; or, in other words, caregivers expanded their capacity for self-care over time.

GRANTEE	EVALUATION DESIGN	DATA SOURCES	EVALUATION FINDINGS
<p>Catholic Charities of Rochester (Rochester, NY)</p>	<p>Pre-/posttest design</p> <p>Mixed quantitative/qualitative:</p> <ul style="list-style-type: none"> - Process evaluation included focus groups, meeting notes, and training events. - Outcome evaluation included review of case-level data and a pre- and postsurvey data. 	<ul style="list-style-type: none"> - Family Needs Scale - Adverse Childhood Experience Assessment - Parenting Stress Index 	<p>Social support</p> <ul style="list-style-type: none"> - Caregivers who participated in the program reported an increase in family stability from the time they took the pretest to when they took the posttest. <p>Systems-level findings</p> <ul style="list-style-type: none"> - There was an increase in the number of kinship families served, in access and referrals to kinship services, and in collaborations between kinship services and child welfare services. <p>Well-being</p> <ul style="list-style-type: none"> - Caregivers who participated in the program reported a decrease in stress from when they took the pretest to when they took the posttest. <p>Key findings</p> <ul style="list-style-type: none"> - There was an increase of 600 percent in caregivers served from the five target counties, from 88 caregivers in 2012 to 463 caregivers in 2014. - There was an increase in access to services, including an increase in local kinship program referrals, “child-only” grants, and legal services.
<p>Community Coalition for Substance Abuse Prevention and Treatment (Los Angeles, CA)</p>	<p>Pre-/posttest design with randomized waitlist control group (receiving intervention 6 months later)</p> <p>Mixed quantitative/qualitative:</p> <ul style="list-style-type: none"> - Effect of public-private partnerships to improve system practices - Systems-level improvements: knowledge, access, and use of benefits and services to improve permanency, stability, and outcomes 	<ul style="list-style-type: none"> - Services/resources assessment - Protective Factors Survey - Family Support Scale - Multi-Group Ethnic Identity Measure - Medical Outcomes Inventory - Multidimensional Well-Being Assessment - Family Needs Scale - Strengths and Difficulties Questionnaire - Child and Adolescent Social and Adaptive Functioning Scale 	<p>Access to health/nutrition programs</p> <ul style="list-style-type: none"> - After participating in the program, the caregivers reported increased quality of services and resources related to children’s medical/dental insurance, children’s medical and dental services, and the time to take children to appointments. - Following participation, children’s dental and vision visits increased. Also, use of health services was related to improvement in general health and social functioning. - Caregivers’ need for medical insurance and specialized medical/dental services decreased. <p>Financial well-being</p> <ul style="list-style-type: none"> - Caregivers reported increased quality of services and resources related to financial needs, including medical/dental insurance and services for themselves. - Caregivers’ need for financial resources decreased after participation. <p>Placement stability</p> <ul style="list-style-type: none"> - After participating in the program, the caregivers reported increased quality of services and resources related to legal assistance for guardianship issues. <p>Well-being</p> <ul style="list-style-type: none"> - Caregivers’ individual well-being increased after participation in the program (e.g., relational, collective, and spiritual religious wellness). - Children’s well-being increased as did prosocial behaviors (e.g., empathy, sharing).

GRANTEE	EVALUATION DESIGN	DATA SOURCES	EVALUATION FINDINGS
<p>Homes for Black Children (Detroit, MI)</p>	<p>Pre-/posttest design with comparison group</p> <p>Outcome evaluation:</p> <ul style="list-style-type: none"> - Relationship between children and family members - Safety factors - Parenting skills/knowledge - Stress, family ownership, social connections, and self-sufficiency 	<ul style="list-style-type: none"> - Family Needs Scale - Parenting Stress Index-Short Form - Protective Factors Survey 	<p>Access to health/nutrition programs</p> <ul style="list-style-type: none"> - Caregivers' need for medical and dental care did not change. <p>Financial well-being</p> <ul style="list-style-type: none"> - After kinship navigation services, there was increased access to plumbing, lighting, and heat. - There was decreased need for transportation services for their child. <p>Social supports</p> <ul style="list-style-type: none"> - Kinship navigator families reported statistically significant higher posttest scores on the Social Supports subscale of the Protective Factors Survey than in the pretest. In contrast, the comparison group did not have significantly different pre-to-post social support scores. <p>Well-being</p> <ul style="list-style-type: none"> - Following kinship navigation services, caregivers reported that their need to have more time to take care of themselves decreased.
<p>North Oklahoma County Mental Health Center (Oklahoma City, OK)</p>	<p>Randomized control trial (outcome evaluation)</p> <p>Mixed quantitative/qualitative:</p> <ul style="list-style-type: none"> - Process evaluation: systems-level processes - Impact of community resource specialist on supporting kinship caregivers and reducing barriers to placement stability 	<ul style="list-style-type: none"> - Family Needs Scale - Parenting Stress Index-Short Form - Pediatric Symptom Checklist - Social Support Survey - Demographic questionnaire - Service Utilization Questionnaire - Client Satisfaction Survey - Administrative data 	<p>Access to health/nutrition programs</p> <ul style="list-style-type: none"> - Pediatric symptoms consistently decreased over time in children in the Family KINnections group, while the symptoms reported for the children in the services-as-usual group remained unchanged. <p>Caregiver satisfaction and licensure</p> <ul style="list-style-type: none"> - Caregivers reported positive experiences with their caseworker, who provided resource education, offered tickets for family activities, verbal support, and checked in with families. - Caregivers who were served by the Family KINnections group received foster parent licensure approval within 125 days, whereas those in the services-as-usual group received approval at 187 days, showing a statistically significant difference in approval times. <p>Placement stability</p> <ul style="list-style-type: none"> - Children in the Family KINnections program were less likely to move from their kinship placement, while children in the control group were 8.7 times more likely to move.

GRANTEE	EVALUATION DESIGN	DATA SOURCES	EVALUATION FINDINGS
<p>The Children's Home, Inc. (Tampa, FL)</p>	<p>Randomized controlled trial</p> <p>Two treatment groups: comparison group (standard care by program) and control group (usual care by child welfare services)</p>	<ul style="list-style-type: none"> - Administrative child welfare data - Pediatric Symptom Checklist - Protective Factors Survey - MacArthur Health and Behavior Questionnaire - Family Support Scale - Family Resource Scale - Florida Kinship Center Needs Checklist 	<p>Child safety and placement stability</p> <ul style="list-style-type: none"> - Children living with caregivers receiving KIN Tech services were the least likely to be involved in a substantiation of child abuse or neglect and most likely to remain in the home of a relative at 12, 24, and 36 months. <p>Financial well-being</p> <ul style="list-style-type: none"> - There was increased TANF application and enrollment, particularly when peer navigators were involved in the process. <p>Social supports</p> <ul style="list-style-type: none"> - After participating in the program, the caregivers reported increased quality in services and resources related to emotional support from friends and support groups. - Caregivers reported greater helpfulness with formal programs (e.g., schools, daycare centers, social groups) and professional services (e.g., social workers, therapists, teachers). - Caregivers reported increased social support (e.g., informal support from family, friends, and neighbors that helps provide for emotional needs). <p>Well-being</p> <ul style="list-style-type: none"> - KIN Tech improved child and family well-being outcomes, including family support and family resiliency.
<p>United Ways of California (South Pasadena, CA)</p>	<p>Pre-/posttest longitudinal design</p> <p>Mixed quantitative/qualitative: process evaluation</p> <ul style="list-style-type: none"> - Outcome evaluation - Individual, program, and country-level impact of intervention - Needs of kinship caregivers (formal vs. informal) - Effectiveness of online portal as a method of service delivery - Extent of program exposure with participant outcomes - Changes in caregiver needs with youths' overall well-being 	<ul style="list-style-type: none"> - Family Needs Scale (modified) - Short-Form 12 (SF-12) health survey - Short-Form 10 (SF-10) health survey for children - Strengths and Difficulties Questionnaire - Demographic survey - Qualitative interviews with kinship caregivers - Virtual focus groups with county collaborative members 	<p>Access to health/nutrition programs</p> <ul style="list-style-type: none"> - Decreased need for family dental care. <p>Financial well-being</p> <ul style="list-style-type: none"> - Caregivers using the 2-1-1 portal saved money by finding discounts on groceries, utilities, and school supplies. - Caregivers reported decreased need for assistance related to benefits (e.g., Medicaid, Social Security, child support). <p>Placement stability</p> <ul style="list-style-type: none"> - Almost all caregivers reported that their identified kinship child was still placed with them at 12 months (97 percent) (n=99). <p>Social supports</p> <ul style="list-style-type: none"> - Caregivers reported decreased need for having someone to talk to about either themselves or their child(ren). Caregivers also reported decreased need to belong to caregiver groups or clubs. <p>Well-being</p> <ul style="list-style-type: none"> - Caregivers' overall health scores showed no significant changes in overall well-being from baseline to 12 months.

Reference

Dunst, C. J., Cooper, C. S., Weeldreyer, J. C., Snyder, K. D., & Chase, J. H. (1988). Family needs scale. In C. J. Dunst, C. M. Trivette, and A. G. Deal (Eds.), *Enabling and empowering families: Principles and guidelines for practice* (p. 151). Cambridge, MA: Brookline Books.



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