



**THE ECONOMIC WELL-BEING OF KIN AND NON-KIN CAREGIVERS:
COMPARING FINANCIAL RESOURCES, PAYMENT LEVELS, AND SERVICE SUPPORTS ***

JILL DUERR BERRICK, REIKO BOYD, AND WENDY WIEGMANN[†]

Introduction

Until recently, California was one of only two states in the nation (Oregon being the other) where children in license-approved kinship foster care, who were Title IV-E ineligible, were *not* offered a foster care subsidy. Instead, these caregivers were directed to apply on behalf of the children in their care to the TANF program for income support, if needed. In July 2014, Governor Jerry Brown established the Approved Relative Care Funding Option program (ARC), allowing counties that elected to opt-in to offer full foster care subsidies to relative caregivers previously ineligible for such payments. Over three-quarters of California counties elected to participate and in 2015 began to develop strategies for outreach to kin caregivers to offer these additional financial supports.

What were the similarities and differences between kin and non-kin caregivers in California prior to the implementation of the ARC? In 2014, it was unknown what proportion of kin were and were not receiving full foster care subsidies, and whether there were any systematic differences in the characteristics of those denied full subsidies. Little was also known about the general characteristics of kin and non-kin caregivers in California and whether some of the notable differences in socioeconomic well-being, services, and supports found in other studies over many years (Barth et al., 1998; Berrick, et al., 1994; Chipungu & Everett, 1994; Cook & Ciarico, 1998 as cited in Geen, 2003; Fox, Berrick, & Frasch, 2000; Sakai et al., 2011; U.S. Census, 2011) had converged with time.

The purpose of the present study was to examine the economic well-being of kin and non-kin caregivers in select California counties prior to the implementation of the ARC, to understand caregiver characteristics, and the characteristics of the children in their care. The study also included a follow up with caregivers who had indicated at initial contact that they were receiving no funding or TANF funding for the care of their child. We anticipated that some or all of these caregivers would be folded into the ARC over the study period and receive the higher payment rate.

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Who is in the sample?

In County A, of the 91 caregivers who were sent a survey, 58 caregivers responded, 9 declined to participate, 9 could not be reached, and 15 responded by telephone with a promise to complete the survey, but did not do so. The total response rate for Time 1 was 64%.

Among the 33 caregivers who did not complete the survey, a higher proportion included kin (58%) than non-kin (39%) and one guardian (3%). There were no other features of note among our non-respondents.

In County B, of the 83 caregivers who were sent a survey, 34 responded, 6 declined to participate, 2 could not be reached, 3 were returned unopened, and 37 were left telephone messages but did not respond. One caregiver indicated that the child had left the home. The total response rate for Time II was 41%. Kin and non-kin were evenly distributed among non-respondents.

Across the two counties we had a total of 92 respondents (53% response rate).

Among the total sample who completed the survey 60% were non-kin caregivers and 40% were kin (less than 5% of caregivers identified as a non-relative family member (NRFM), and were included with kinship caregivers). All caregivers but one identified as a U.S. citizen. Mirroring data from other large-scale surveys of kin and non-kin caregivers in the U.S., a majority of non-kin caregivers were married or co-habiting (62%); this was true for about 48% of kin caregivers. Kin and non-kin were racially and ethnically diverse. About two-fifths (38%) of caregivers were African American, one-third (31%) were Caucasian, 15% were Hispanic, 6% were Asian/Pacific Islander, and 10% were from other or multiple racial/ethnic backgrounds. Combining caregivers in both groups we find that 66% of kin were caregivers of color and 63% of non-kin were caregivers of color (27% and 33% were White in both groups respectively).

Mirroring the distribution found in other studies, almost half (46%) of kinship caregivers indicated that they were the maternal grandmother; another 23% claimed the role as maternal aunt or uncle. Fewer (17%) kinship caregivers were identified with the paternal side of the family.

Both kin and non-kin caregivers were caring for an average of 2-3 children in their households. This sample distinguished itself from other studies involving kin and non-kin caregivers in that non-kin were statistically more likely to be caring for a larger number of children (2.9 children).** † The average household size for both kin and non-kin caregivers, including adults, was about 4.1.

The majority of kin and non-kin caregivers had attended some college or had higher degrees. Roughly equal percentages of kin and non-kin caregivers worked outside the home (about two-thirds). Both kin and non-kin caregivers described their mental and/or emotional health as very good. On a five-point scale from "poor" (scored as "1") to "excellent" (scored as "5"), the average score across groups was 4.0. Similarly, caregivers described their physical health as very good. On the same five-point scale, the average score across caregivers was 3.8. There were no differences between groups. Four-fifths of caregivers described themselves as religious or spiritual; there were no differences between kin and non-kin.

† We denote statistically significant differences at $p < .01$ with two asterisks (**); significant differences at the $p < .05$ level are indicated with one asterisk (*).

Approximately one year following the initial survey, the 25 respondents who had indicated that they were receiving no funding or only TANF funding were re-contacted. These caregivers, it was assumed, were eligible for the newly established ARC payments. The purpose of the follow-up survey was to determine how or if caregivers' funding circumstances had changed during the intervening months.

As such, 18 kin and 7 non-kin were contacted by mail and by phone. A total of 11 caregivers responded (9 kin and 2 non-kin). Of the caregivers who did not respond, 3 declined to participate, 8 could not be reached, and 3 responded by telephone with a promise to complete the survey, but did not do so. Of the 3 caregivers who refused to participate, 1 caregiver indicated that she had only cared for the child for one month and a second indicated that his wife, who was responsible for primary caretaking responsibilities, had passed away. Among the 14 caregivers who did not complete the follow-up survey, 64% were kin, and 36% were non-kin. There were no other distinguishing features among our non-respondents.

What have we found?

Financial supports

As expected, some caregivers received regular foster care subsidies, others relied upon the welfare system for support (i.e., TANF/ CalWORKs), and still others reported no regular financial support for the care of their child.

Type of subsidy	Non-kin foster parent	Kinship foster parent
Foster care subsidy	93.6%	68.0%
TANF family or child-only grant	0.0 - 2.9%	12.0 - 23.8%**
No subsidy	6.4 - 9.8%	4.0 - 34.3%**
Unsure of type of subsidy	0.0%	8.0%

We learned from non-kin caregivers responding to the second survey that they had mistakenly completed the first survey indicating "no payment," when in fact, they had been receiving a foster care subsidy. This increases, slightly, the percentage of non-kin receiving a foster care subsidy to approximately 96%. This raises questions about the accuracy of the remaining non-kin surveys and whether these caregivers, too, were receiving a foster care subsidy and were unable to tell us, or misunderstood the question posed in the survey.

It is important to note that caregivers were not asked to indicate if they were Title IV-E eligible or ineligible, as we knew they would be unable to do so. County staff were equally unable to provide such information as these data are kept in separate databases and were unavailable for analysis. Although some proportion of the kin sample indicated that they were receiving TANF or CalWORKs funding, some non-kin caregivers indicated the same (although we may assume that these non-kin caregivers received TANF due to their own financially needy status). In addition, some of the kin in the sample indicated that they received zero funding from any source to help pay for the care of their relative child.

Respondents were asked about the source of their funds and the amount of their funds in two separate sections of the survey so that we might verify and/or clarify responses. Non-kin provided a narrower range of responses. Between 0 - 3% indicated that they were receiving welfare, and 6 - 10% indicated that they were receiving no-subsidy. Among kin, responses varied more significantly. Between 12 – 24% of caregivers indicated that they were receiving a welfare grant, and 4 - 34% indicated that they were receiving no funding for the child in their care. Although we cannot determine the precise number of caregivers receiving no subsidy, it is clear that a substantial proportion of kin were not receiving any financial support at Time I.

Among caregivers who reported receiving a monthly subsidy for the child's care (N=64), the average monthly payment across both types of caregivers was \$773 (SD \$190) per month. Among all kinship caregivers who reported a regular payment amount (N=20), the average monthly payment was \$675 (SD=\$175) compared to \$815 (SD=\$183) for non-kin caregivers (N=43). This difference is statistically significant.**

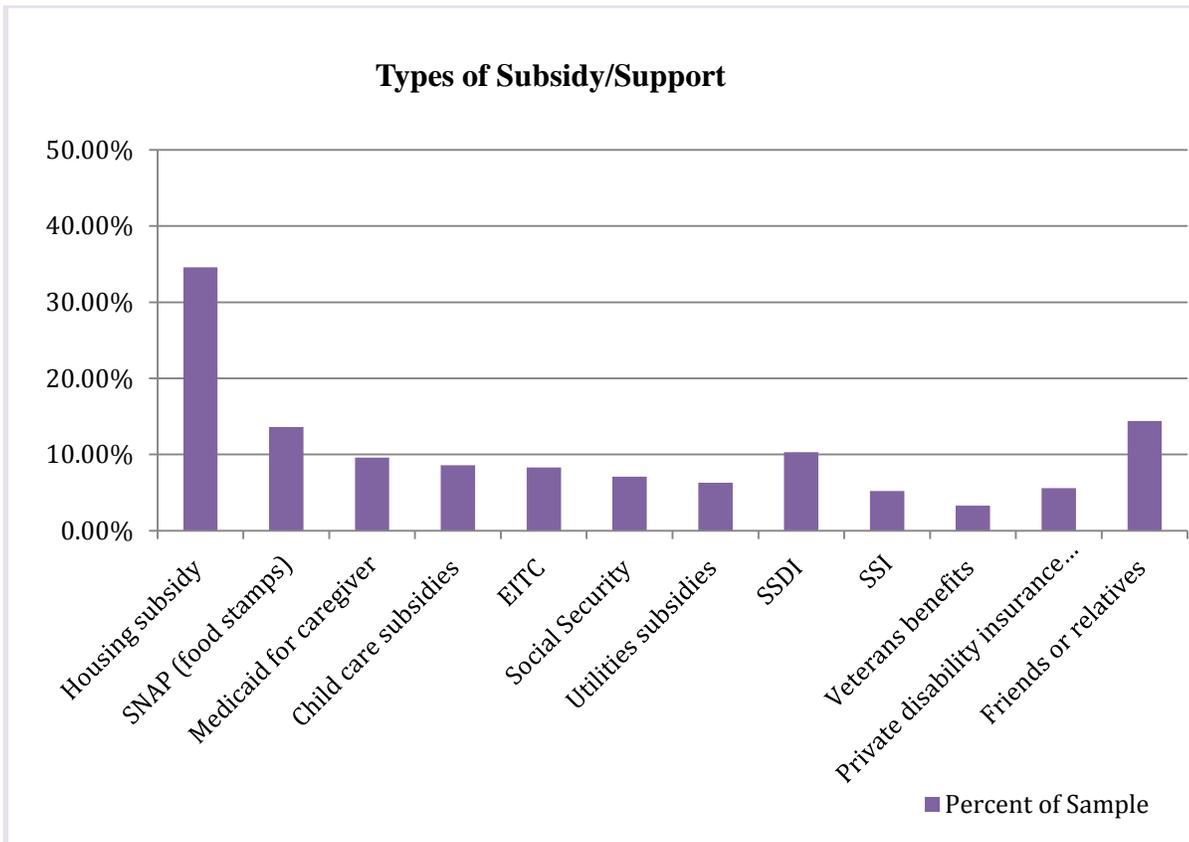
About 14% of the sample had access to a clothing allowance; none reported receiving a specialized care increment, or services from a regional center.

Information provided by kin caregivers in the follow-up survey suggests that half received an increased subsidy from zero or from a TANF grant up to a foster care subsidy. One-quarter continued to receive TANF, and one-quarter continued to receive nothing from government sources.

One of the kin caregivers who had indicated in the first survey that she was receiving no payment at all indicated in the second survey that she had since requested TANF funding ("non-needy caregiver funding") from her county. The child's birth father was subsequently served notice to pay child support to offset the cost of the welfare payment. He appealed to the caregiver to terminate the welfare payments and told her that he would pay her the amount directly instead. He has since done so, but the payments vary, usually amounting to closer to \$200, an amount much lower than the TANF child-only payment she was receiving, which was nearly \$400.

A second kin caregiver who also indicated in the first survey that she was not receiving any subsidies for the child in her care revealed in the second survey that she had been told she was ineligible for payment because she was the child's grandmother. When asked if she had been told about eligibility for "non-needy caregiver assistance" (welfare/TANF) she said, "someone told me that they would go after the parents for the child support. Both the mother and father had low wages due to the economy. I didn't want to make things more difficult." She continued to care for the child with no payment at all.

Kin and non-kin caregivers' reliance on other public aid and assistance from friends and family was roughly similar. The graph below shows caregivers' utilization of various sources of support.



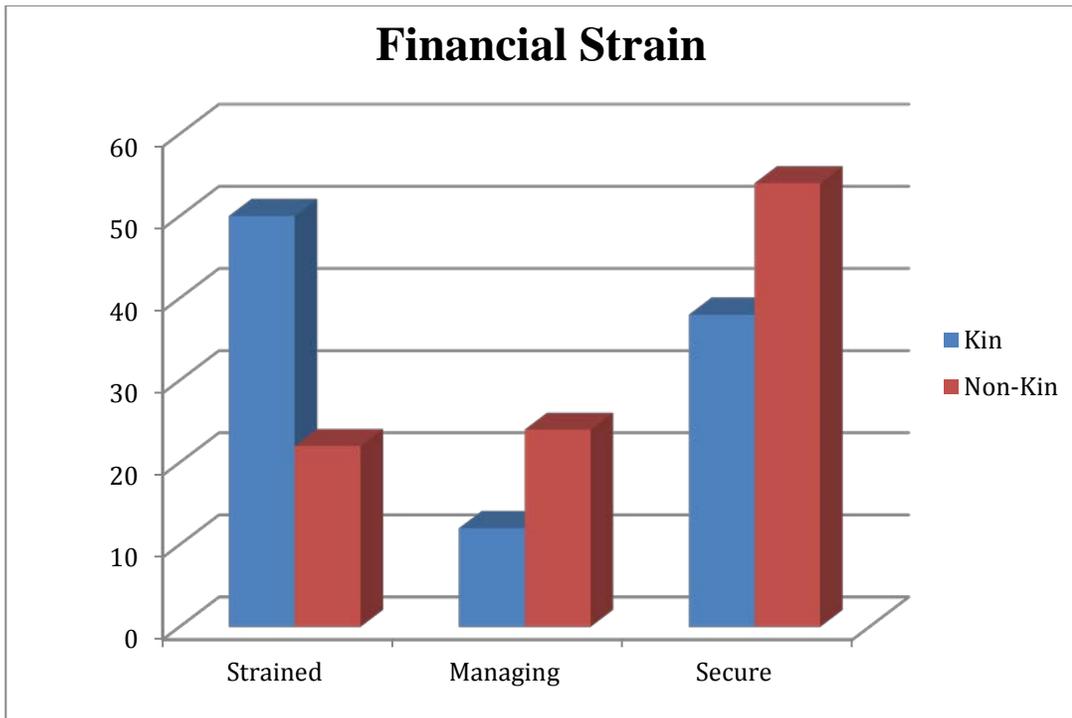
Total annual income levels among kin and non-kin were roughly similar. Approximately one-quarter of kin and non-kin stated their annual income was at or below \$25,000 per year. About one-third of caregivers had annual incomes between \$25,000 - \$50,000; and 16% had incomes between \$50,000 - \$75,000.

Financial strain

Kin were more likely to indicate that their financial circumstances were “strained” compared to non-kin, and non-kin were more likely to indicate that their situations were “secure” *(see figure below). The nature of the financial difficulties in both groups centered on “trouble paying bills.” Very few caregivers had difficulties with food insecurity, trouble paying rent, or problems with utility shut-offs.

At Time II, kin caregivers continued to feel the financial press of their circumstances. Several described “going without,” “eating out less,” “putting things we need on the credit card,” and “stretching.”

Financial Strain



Services

Kin and non-kin were almost equally likely to have participated in a child welfare service in the previous six months (about one-third). The majority of participating non-kin had attended one or more trainings; and a few had taken advantage of respite services. Kin, on the other hand, were more likely to participate in support groups (some of these were identified as kin-specific; others were not). Some kin and non-kin took advantage of legal services. Among those caregivers who did not participate in services, kin and non-kin were equally likely to indicate that they were unaware of the service availability and equally likely to indicate that they had no time available to participate.

Children in kin and non-kin homes were equally likely to participate in services (about 52%). Children in non-kin care were more likely to take advantage of summer camp, summer school, or summer work activities offered by the agency; children in kin care were more likely to participate in therapy. Both groups were equally likely to have a CASA volunteer appointed to their case.

What do caregivers need?

We asked caregivers to identify the top three things that would help make their work with children easier. Comments varied considerably, but were generally similar between kin and non-kin. Their responses centered on a few key themes including: (1) additional financial resources and/or vouchers; (2) responsive social workers; and (3) services for the child.

Financial supports: Many caregivers indicated their need for additional *resources*. This included help paying for day care/child care, transportation, clothing, recreation, tutoring, summer programs, and family vacations. Some relatives indicated it would be helpful if they were paid at the same rate as traditional foster parents; another indicated, “it would be helpful if relatives received some small compensation.”

Responsive social workers: Caregivers also noted the variable quality and quantity of communication between social workers, children, and caregivers. One caregiver stated, “we need clear instructions. They often didn’t have answers to my questions.” Several comments indicated that they were unclear about what was happening with the child in their care, or when they should expect court dates. The longstanding concern raised in many previous studies about social workers’ inability to return phone calls was again highlighted here. Some indicated that monthly meetings with social workers would be helpful.

Services for the child: Several caregivers noted the need for more services, easier access to services, and less paperwork burden associated with requesting services for children.

Caregiving Characteristics

We used three instruments from prior studies to address caregiver social support (Multidimensional Scale of Perceived Social Support), caregiver parenting practices and sense of closeness to the child (Parental Acceptance Scale), and foster parenting attitudes (The Foster Parents’ Attitude Questionnaire).

Non-kin in this sample indicated greater social support from a combination of family, friends, and significant others.* This held for each of the sub-scales as well, with non-kin reporting a greater sense of support from significant others,* from family,** and from friends.**

We found no differences in total scores between kin and non-kin on the Parental Acceptance Scale, a measure of caregivers’ acceptance of, and closeness with their child.

We also found no differences in total scores between kin and non-kin on the Foster Parents’ Attitude Questionnaire. One of the sub-scales suggested a difference in kin and non-kin perspectives about the child. Namely, non-kin were more likely to indicate that they withheld some of their attachments to foster children, and they were more likely to suggest that foster children usually need professional help for the problems they bring to care.**

Characteristics of the child

The average age of children in these caregivers’ care was 10.5. In order to assess child well-being we used the Strengths and Difficulties Questionnaire (SDQ), a brief, behavioral screening instrument. The SDQ consists of 25 items divided into 5 subscales: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, and pro-social behavior.

There were no differences between children in kin and non-kin homes in terms of their overall score. Non-kin children had statistically higher scores than children in kin homes on the *internalizing problems* scale** (a combination of the emotional problems and peer problems scale), though both groups’ scores were similar to average scores in normative samples.

Did money make a difference for caregivers?

Of course the obvious answer to this question is ‘yes;’ ample evidence suggests that money makes a tangible and intangible difference in the lives of low-income parents (Klevanov, Brooks-Gunn & Duncan, 1994). Our sample size of caregivers receiving no funding from the state was very small, however, limiting the extent to which we might detect differences in this study. Findings from this sample suggest

that caregivers receiving no funding at all, compared to caregivers receiving a foster care subsidy reported poorer health,* indicated they received fewer services,* and cared for children with more challenging peer relationships.**

Summary

Overall, we find that the sample of kin and non-kin caregivers included in this study are more similar to one another than they are different, with no differences in the characteristics of kin and non-kin for a large majority of measures. This finding is in sharp contrast to dozens of other studies over the past two decades, and may be related to the following phenomena:

- It may indicate that the two selected counties for this study draw from a different general population than what is typical in other studies.
- Adjustments in kin policy over the past two decades, including the narrowing of licensing standards for kin and non-kin, may have changed who is included among California's kinship caregivers, shifting upward on the socio-demographic ladder the characteristics of kin.
- The profile of conventional foster parents may be changing to bear greater similarities to kin, suggesting more vulnerabilities than what was found in the past and a decline in socio-demographic characteristics. We believe that the introduction of Resource Family Approval standards in California will continue the trend of making more similar kin and non-kin caregivers.

Overall, the two groups represent economically vulnerable caregivers. One-quarter of kin and non-kin had annual incomes below \$25,000 – well below the poverty rate for a family of four (the average household size in this sample). Another one-third lived on household incomes between \$25,000 - \$50,000, well under the self-sufficiency index generally acknowledged for families living in the greater Bay Area. The stark differences in average monthly payment rates between kin and non-kin at Time I (approximately \$200) are important as most kin were trying to raise their relative children below the sufficiency standards set by the federal government (Lino, 2013). At Time II we found that about half of the kin caregivers had seen their monthly subsidy rise following the implementation of the ARC. We anticipate that the average payment differences between kin and non-kin are likely to continue to diminish, though caregivers in non-ARC counties will continue to see significant payment differentials.

As recently as 2014, it was unknown what proportion of California kin caregivers were receiving foster care payments, what proportion were receiving TANF (non-needy caregiver), and what proportion were receiving nothing. Advocates highlighted the inequities in payment, but it was unclear whether these differentials were playing out for the majority or for a minority of kin. This study revealed larger-than-expected proportions of kin receiving foster care subsidies, but troubling findings regarding the proportion of kin reporting zero state support. Although a small number of caregivers indicated at Time II that they had rejected payments in order to protect their own children from child support obligations, the issue raises concerns that should be monitored – especially in non-ARC counties – as children should not be asked to bear the financial burden of these dramatic payment differentials. That some caregivers were under the impression that they could not obtain financial assistance because of their relationship to the child is also of concern; greater efforts to make all child welfare workers aware of the financial supports available to kin (in ARC and non-ARC counties) may be warranted.

In addition to the increasing similarities seen among kin and non-kin caregiver characteristics, and the now-diminishing differences in payment subsidies between the two groups, this study also revealed more similarities in service access and service needs than has been shown in previous studies. Although the nature of the services selected by kin and non-kin were somewhat different, with non-kin gravitating

to training and kin electing support groups, we view these differences as important opportunities that child welfare agencies can take advantage of. Knowledge development can take place in the context of support groups, and the work of Zinn (2012) suggests that kin could benefit from greater access to information about positive parenting strategies. Similarly, important emotional support can occur in the context of training events. Efforts to make more alike training and support opportunities for kin and non-kin (though called by a different name) will tap into the needs of caregivers at the same time that agencies use these activities to improve the overall quality of out-of-home care.

The stated needs of caregivers, to receive greater financial remuneration for their challenging work, to partner with responsive social workers, and to gain access to more services for children, are common themes we see from decades of research on foster care (see, for example, Shlonsky & Berrick, 2001). Child welfare workers are often stretched due to their large work volume. Agency level efforts to support their partnership with kin and non-kin caregivers and to ensure the provision of accurate and timely information about financial supports, the child's case, and service availability will likely have far-reaching effects in reducing caregiver stress and burden, and increasing the quality of care.

When children are taken into the custody of the state, the financial and service supports their caregivers receive should be relatively similar. Variability – if it exists – should be based on the needs of the child. In states across the country significant variation still exists between kin and non-kin, and between licensed and unlicensed kin. California has made great strides to level the playing field, ensuring that kin and non-kin are held to the *same standards*, that they are granted *similar rights*, and that they carry out the *same responsibilities* for dependent children. Gradually, California is also showing greater consistency in its policies and practices vis-à-vis kin, offering *more similar services and supports*. We see these trends as positive as they promote equality between similarly situated children. Our hope is that California will continue to show national leadership in these areas, encouraging other states to develop policies and practices that are consistent for all caregivers of vulnerable children in care.

Appendix:

This descriptive study relies upon a questionnaire distributed to kin and non-kin caregivers in two California counties in the spring and summer of 2014, and a follow-up survey in February, 2016 of kin and non-kin from the original sample who indicated at Time I that they were receiving zero subsidies or a TANF payment to help pay for the care of their foster child.

Sample

Research staff in each of the two counties identified the sample based upon the following parameters: (1) children new to care (first entries) between October 1, 2013 – December 31, 2013; (2) children ages three or older, and ages 17 or younger; (3) children who remained in care for 8 days or longer. A total of 174 (91 in County A and 83 in County B) caregivers were included in the sample – the universe of all eligible caregivers in the county.

For Time 1, research staff distributed surveys in the summer and Fall of 2014, sending out a cover letter from the county child welfare director, a letter from the Principal Investigator, the survey, and a self-addressed stamped envelope. Caregivers were offered a \$25 gift card as an incentive to participate. Over the course of the summer we conducted three mailings and two postcard reminders, removing from the sample any caregivers who had previously returned the survey. We added a lottery to our approach, offering a \$100 gift card as a bonus to up to five caregivers (selected through a raffle) who could return their survey by a specified date. Thereafter we conducted phone calls to caregivers to encourage them to complete the survey or to conduct the survey by telephone.

For Time II, research staff distributed surveys in February 2016, sending out a letter from the Principal Investigator, the survey, and a self-addressed stamped envelope. Between January – March, 2016, another survey was sent to non-respondents, and 2-3 telephone calls were made. For Time II, caregivers were also offered a \$25 gift card as an incentive to participate, and a raffle for an additional \$100 gift card was conducted.

Measures

The survey at Time I included questions developed by the researchers in collaboration with county partners, and additional standardized survey instruments (described below) that were selected to measure constructs of interest. Various sections of the questionnaire addressed (1) caregivers' financial well-being and sources of financial support; (2) caregivers' perception of financial strain (Smithgall, DeCoursey & George, 2008); (3) receipt of formal services (Berrick, Barth, & Needell, 1994); (4) caregiver informal support (Zimet, Dahlem, Zimet, & Farley, 1988); (5) foster parenting attitudes (Harden et al., 2008); (6) acceptance of a child's unique characteristics (Parenting Acceptance Scale) (Schludermann & Schludermann, 1970); (7) child well-being (using the Strengths and Difficulties questionnaire) (Goodman, 1997) and (8) caregiver views about needed services and supports.

The Foster Parent Attitudes Questionnaire (FPAQ) is a measure that can be utilized by child welfare practitioners and researchers to document parenting attitudes specific to the quality of the foster or kinship care experience (Harden et al., 2008). The questionnaire measures 7 factors including attachment, developmental expectations, motivations, views of biological parents, self-reliance, perspective taking, and negative views.

Caregiver informal support is measured using the Multidimensional Scale of Perceived Social Support, a self-report measure of subjectively assessed social support. The MSPSS was designed to assess

perceptions of social support adequacy from three specific sources: family, friends, and significant other (Canty-Mitchell & Zimet, 2000; Zimet, et al., 1988; Zimet, et al., 1990).

The Parenting Acceptance Scale is adapted from the revised short form of the Child's Report of Parental Behavior Inventory (Schludermann & Schludermann, 1970), which contains 30 self-report items assessing parental discipline practices. The Acceptance subscale is measured by 10 statements; each statement is rated as a lot like me, somewhat like me, or not like me. The Acceptance subscale assesses parental acceptance of and closeness to the child.

The Strengths and Difficulties Questionnaire (SDQ) is a brief behavioral screening questionnaire that asks about 25 attributes, some positive and others negative (Goodman, 1997; 2001, Goodman & Scott, 1999). The 25 items in the SDQ comprise 5 scales of 5 items each: Emotional problems scale, Conduct problems scale, Hyperactivity scale, Peer problems scale, and the Prosocial scale.

The survey utilized at Time II included questions developed by the researchers and focused primarily on changes to the financial support received by caregivers, the amount of communication and information received by caregivers from social works, and the impacts (if any) of financial strain on their daily living and ability to provide for the children in their care.

Analysis

For the majority of analyses we used cross-tabs and chi-square statistics of kin vs. non-kin findings. For each of the scales embedded in the survey we ran Wilcoxon-Mann-Whitney tests comparing average scores of kin to non-kin. The Wilcoxon-Mann-Whitney test is a non-parametric analog to the independent samples t-test and can be used when you do not assume that the dependent variable is a normally distributed interval variable. We also conducted t-tests comparing average scores for the caregiver groups, mainly for the purpose of comparison between statistical tests and for reporting purposes, as the t-test output displays the average scores for each caregiver group.

Limitations

Many kin and non-kin caregivers might have been included in our initial sample had we reduced the age limit on the child. We learned at a later date that almost half of the children entering care during the study time period in one of our selected counties was under the age of 3 at entry. This not only reduced the total sample available for the study, but could also limit the generalizability of the findings if caregivers of young children are systematically different from caregivers of older children. Further still, the response rate was not as strong as hoped. To the extent that we had data available to allow us analysis of the non-respondents we did not find significant differences, but there may be unmeasured characteristics of non-respondents that are not captured in the data. The study only includes two counties; though more would have been preferable, outreach to several additional counties did not yield study expansion opportunities.

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