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A SATISFACTION SURVEY OF RELATIVE CARETAKERS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work


by
Teri Lynn Elliott
Sandra Medina
June 2002

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Approved by:


Dr. Rosemary McCaslin, Faculty Supervisor
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5/25/02
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Dr. Rosemary McCaslin,
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ABSTRACT

It is assumed that a parenting role by a grandparent or grandparents has been tied to life events, such as divorce or the death of their own children. The parent was no longer in the picture and the grandparent stepped in to care for the children. Although this pattern has by no means disappeared, society is now seeing more and more cases of dysfunctional parents who are unable or unwilling to raise their own children who are therefore, being raised by the grandparent. This study evaluated the effectiveness of services offered by San Bernardino County, Department of Children's Services to relative caregivers such as grandparents. The researchers mailed 300, 14-question client satisfaction surveys. Of those 300 surveys mailed, 85 surveys (24%) were completed and returned. The researchers provided a 23-day period for the relative caregivers to return the surveys. The results indicated that the majority of respondents are satisfied with the services they are receiving from San Bernardino County, Department of Children's Services. The results also indicated that most of the respondents are raising grandchildren, which was not surprising to the researchers. However, unexpected results indicated that next to grandchildren, relative caregivers are raising a nephew, a niece, or both.

ACKNOWLEDGMENTS

This project would not have been possible without the assistance from several dedicated individuals. First and foremost, we must thank San Bernardino County, Department of Children's Services, who provided us with the list of relative caregivers. We especially thank Dr. Rosemary McCaslin, our research advisor, for her confidence, support, and guidance in our work. We also thank Mary Frazier, Director of Grandparents-R-Us, for her suggestions and consultations that assisted us in the participant selection process. Finally, we are very appreciative to Timothy Thelander, graduate lab assistant, for helping us complete those tasks that arose throughout the project.

DEDICATION

To my mother, Kathryn Edwards, thank you for your love and support. Thank you for those "everlasting arms" that have provided care and continue to provide care for your grandchildren. They will be a great success in life because of your love and support.

I Love You

Teri

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CHAPTER ONE

INTRODUCTION

Problem Statement

It has been assumed that a parenting role by a grandparent or grandparents has been tied to life events, such as divorce or the death of their own children. The parent was no longer in the picture and the grandparent stepped in to care for the children. Although this pattern has by no means disappeared, society is now seeing more cases of dysfunctional parents who are unable or unwilling to raise their own children who are, therefore, being raised by the grandparent (Germain & Bloom, 1999).

The prevalence of grandparent-headed households has increased. From 1980 to 1990, reports have shown a 44% increase in these households and 1994 revealed a 27% increase from 1993 (Heywood, 1999). It is estimated that 2.4 million children are being raised in homes in which the grandparent(s), parent(s) and the child(ren) are present. Another 1.35 million children, in 841,000 households, are being raised in grandparent-headed households in which the biological parent is not present (Heywood, 1999).

The majority of grandchildren in the care of grandparents have been abandoned, abused, or neglected by their birth parents. Additionally, many birth parents are substance abusers or are incarcerated (Kelley, Yorker, Whitley, & Sipe, 2001). Reasons given by grandparents for the formation of the grandparent headed household are substance abuse by parents [44%], child neglect [28%], teenage pregnancy or parent failure to handle children [11%], death of parent [5%], unemployment of parent [4%], divorce [4%], and HIV/AIDS [4%] (Pinson-Millburn & Fabian, 1996).

Furthermore, according to Kelley, Yorker, Whitley, and Sipe (2001), 12% of all African American children live with grandparents, 6% of Hispanic children live with grandparents, and 4% of White children live with grandparents. The age of grandparents ranges from 40 years old to 80 years old. Some middle-aged grandparents are still raising their own children. There is not a single pattern of household arrangement. Approximately one million households are headed by single grandparents with a median income of \$18,000 a year (Pinson-Millburn & Fabian, 1996).

Policy Context

The idea of grandparent's rights is not a new concept. As early as the 1800s grandparents have fought for rights concerning their grandchildren. In 1894, a Louisiana grandmother petitioned the courts for the right to visit her grandchildren (Toledo & Brown, 1995). What is new is how the fight to visit grandchildren has promulgated. The first generation of grandparent activists appeared in the mid-1960s. By the middle of the 1980s, every state except the District of Columbia had a grandparent visitation statute (Toledo & Brown, 1995).

Moreover, in the late 1980s, a new generation of grandparents surfaced. That is, the grandparents not only visited with their grandchild(ren), but found themselves raising them. Several factors led to the increase of grandparent caregivers. One of the main reasons was the crack cocaine epidemic (Heywood, 1999). Unfortunately, when a parent's life became ravaged by or ended due to the involvement in crack cocaine, responsibility for the child(ren) was taken over by the grandparent (Heywood, 1999).

The landmark Supreme Court case, *Youakim vs. Miller* (1979), upheld a lower court's decision that federal foster care benefits could not be denied to relative

caretakers (Minkler, 1999). This case ruling served as a catalyst for relative placement. At a time when the foster care system was on the verge of collapse this case ruling eased the burden of foster care placements (Minkler, 1999).

According to Stephen D. Cunnison, a Superior Court-Probate Division Judge, the Constitution affords parents exclusive authority when it comes to their child(ren). In contrast, grandparents have no constitutional rights with regard to their grandchild(ren) (Riverside County Office of Education, 2001). Due to the lack of constitutional rights, grandparents may face problems when attempting to enroll a grandchild(ren) in school, seeking medical care, or applying for government assistance. Moreover, without legal custody, the grandparent has no control over whether their grandchild(ren) is mandated back to an abusive, neglectful, or substance abuser parent (Toledo & Brown, 1995).

Practice Context

The issue of grandparents raising grandchildren is of great concern to researchers, social workers, lawmakers, and the caregivers themselves (Minkler, 1999). Grandparents who raise their grandchildren have many

concerns. There are legal, financial, and emotional issues that social workers and the general public need to be aware of and sensitive to. As more and more children are removed from their homes and placed with grandparents for support, it is imperative for social workers to have a knowledge base that includes this special group of people.

Both Riverside County and San Bernardino County have designed programs to assist grandparent caregivers and there are over 400 support groups nationwide (Roe & Minkler, 1998). Riverside County Department of Public Social Services in partnership with the Kinship Support Services program offers the following services: support groups, counseling, warmline, and advocacy groups. The warmline is an informational service, which connects grandparent caregivers to areas of service, such as, food and clothing assistance, transportation providers, and childcare providers. The information given by grandparents to warmline staff is confidential. All services are provided by staff and volunteers (Family Service Association of Western Riverside County, 2001).

San Bernardino County's Kinship Initiative Support Services (KISS) issues a newsletter every other month to grandparent caregivers in San Bernardino County with educational information and a list of informal support

groups. The KISS program has designed an advisory council that consists of members from the community and employees from the Department of Social Services. The purpose of the advisory council is to form support groups and open a grandparent resource center. The goal is to have the resource center open in the early part of 2002 (San Bernardino County Kinship Advisory Council, 2001).

Purpose of the Study

The purpose of this study was to evaluate the effectiveness of social support services that are available to relative caregivers such as grandparents raising grandchild(ren). This study is important because relative caregivers are raising some of America's most vulnerable children. These children are at greater risk for developing behavioral problems such as Attention Deficit Hyperactive Disorder (ADHD) and attachment disorder (Pinson-Millburn & Fabian, 1996). Moreover, these children have a higher incidence of teenage pregnancy and abuse of drugs and/or alcohol (Pinson-Millburn & Fabian, 1996). These children are more likely to do poorly in school and have a higher incidence of school dropout (Pinson-Millburn & Fabian, 1996).

This study also addressed the numerous problems that relative caregivers face. The problems ranged from stress-related illness such as hypertension, social isolation such as loss of friendship, and economic difficulties such as quitting a job or cutting back on employment hours. This phenomenon is not only a concern for mental health agencies, Child Protective Services (CPS), family service agencies, gerontologists, and social workers in general, but it is equally important to all members of society. These children are the future generation.

This study intended to evaluate the effectiveness of services offered by San Bernardino County, Department Children's Services to relative caregivers. Are the services that are offered by the agency meeting the needs of the relative caregivers?

Significance of the Project for Social Work Practice

Currently, social work practice in this arena is limited due to the lack of research and understanding of this new type of household. Research on relative caregivers such as grandparents raising grandchildren has been mainly descriptive (Pinson-Millburn & Fabian, 1996).

However, because social workers are trained to be supportive, great helpers, and resource finders, they can link relative caregivers to resources and information. The more thoroughly social workers can understand the plight of relative caregivers in general, outside of their individual caseload, the better chance they have of being sensitized to relative caregiver issues. If properly informed and trained, social workers could let the relative caregivers know what kind of financial assistance is available for their relative, how to apply for the assistance, and refer them to relative caregiver support groups (Toledo & Brown, 1995).

Social workers can help change current policies by becoming advocates for relative caregivers, thus, helping to make an impact for improvement. Further, the more informed social workers are concerning the plight of relative caregivers, the better equipped they will be to fight for policy change (Toledo & Brown, 1995) and act as a link to support services for relative caregivers.

This study is important because research showed that support programs and services for relative caregivers are in great demand (Pinson-Milburn & Fabian, 1996). Some areas in the United States where there are support

programs and services for relative caregivers are reporting great success (Pinson-Milburn & Fabian, 1996).

It is clear that households headed by relative caregivers represent a growing trend in American society. Social workers need to be aware of the challenges relative caregivers face while raising these children. Findings that were generated from this study will help social workers better understand the support services needed by relative caregiver headed households. Finally, a better understanding of the lack of services may lead to a greater advocacy for these families (Pinson-Millburn & Fabian, 1996).

CHAPTER TWO
LITERATURE REVIEW

Introduction

This chapter discussed the literature on grandparents as parents. Major studies, legal issues and theoretical perspectives were discussed as they related to grandparents as parents. Demographics, definitions of terms and a typical profile of a grandparent as a parent were also discussed.

Grandparents as Parents

The phenomenon of grandparents raising grandchildren is not new. Grandparents have always served as "the second line of defense" (Roe & Minkler, 1998, p. 1) for children in times of emergencies. However, what is new is the rapid growth in this situation. It is important to remember that grandparents face special challenges and need support services (Roe & Minkler, 1998). Pinson-Millburn and Fabian (1996) reported that there are direct and indirect supportive services to assist grandparent caregivers. Direct services refers to outreach services such as school counselors, mental health counselors, legal services, teaching new coping strategies, teaching new skills, grandparent support groups, and family support groups.

Pinson-Millburn and Fabian (1996) indicated that indirect services are activities that counselors can implement that do not require direct delivery of service. One example is sponsoring a Grandparent Day at school, during which all grandparents are invited to visit their grandchildren's classroom. According to the researchers, direct and indirect services are beneficial to the families.

Minkler (1999) indicated that grandparents tend to delay seeking or fail to seek formal help for themselves; particularly with mental health or emotional health problems because of lack of insurance coverage. Moreover, access to health services for the grandchildren was impeded due to lack of insurance. This is a chronic problem in skipped-generation households. Further research is needed in order to determine the reasons why these families lack insurance.

Roe and Minkler (1998) reported that social isolation and alienation are concerns for grandparents. Decreased socialization with friends and family as a consequence of caregiving responsibilities has been widely reported among grandparents. Moreover, feelings of alienation stem from communities and churches not reaching out to families that have been touched by AIDS or drug addiction, especially,

among ethnic groups. For example, African-American and Hispanic grandparents reported these feelings of alienation (Roe & Minkler, 1998). Previous research has been limited to only a few studies that have focused on social isolation and alienation of grandparents. Therefore, further studies are needed.

Custodial grandparenting, surrogate grandparenting, second time around parenting, intergenerational households and kinship care are just a few terms that researchers use to describe grandparents who are raising their grandchildren. The term intergenerational household means that there is at least one biological parent in the home, however the main caregiver is the grandparent (Minkler, 1999). The term kinship caregiver encompasses any relative providing care (Minkler, 1999). Still some researchers have separated grandparents into categories based on legal authority and time providing care for the child, such as, those that are the primary caregivers, those that provide only part time care as in the case of a teen mother, those with legal authority over the child(ren) and those with no legal authority over the child(ren) (Minkler, 1999).

The profile of a typical grandparent raising grandchildren consists of a "White (68%), female (60%), and married (76%) and had a median age of 57" (Sands,

2000, p. 2). In Erickson's stages of development, between the ages of 50 and 60 most people are in the generativity stage. Grandparents who find themselves in a parental role at this time in their lives face the possibility of role conflict. This new role can hinder their support system, social life, physical well-being and their emotional well-being (Heywood, 1999). No longer are grandparents in the traditional role of grandparenting but they find themselves in a more serious role of parenting. In a Ohio state study, 70% of grandparents who were raising their grandchildren reported wanting or needing support as a parent, not as a grandparent (Landry, 1999).

In addition to this new transition in their lives, grandparents face new challenges in the community, with schools and even with social service agencies. Some researchers have suggested that grandparents do not receive the same services from social service agencies that parents or non-kinship caregivers receive (Landry, 2000). Grandparents are caring for their grandchildren at a time when they are either entering retirement or saving for their retirement. This places many grandparent caregivers in a state of financial hardship. Not all states have adopted a policy that provides financial assistance to grandparent caregivers (Landry, 1999).

Historically Americans have believed that it is the family's responsibility to provide for abused and/or neglected children (Landry, 1999). This fundamental belief has infested our financial assistance program and in turn many states do not offer financial assistance to kinship care providers (Minkler, 1999). In a study conducted by the Ohio State Grandparents Raising Grandchildren Task Force, 86% of grandparents reported not receiving financial assistance (Landry, 1999).

Problems that grandparents face include social isolation and alienation, economic hardships, child-care, (Minkler, 1999), and stress and psychological anxiety (Sands, 2000). Physical health problems have also been reported by some grandparents (Pinson-Milburn & Fabian, 1996). Some researchers suggest that lack of support/resources contribute to high stress and in some cases depression among grandparents raising grandchildren.

Major Studies

With the rapid growth of neglected and/or abused children being placed with grandparents, researchers from various fields have conducted studies and probed this growing issue. The Ohio State Grandparents Raising Grandchildren Task Force conducted a study of over 200

grandparents who were providing the primary care for their grandchildren. The purpose of the study was to identify the needs of the grandparents and to make intervention recommendations based on those needs. This study suggested the following interventions for the needs identified by the grandparents in their study: intergenerational recreational and social activities, health insurance for the child(ren) regardless who has parental authority, child care, respite care, legal rights and legal services (Landry, 1999). Landry (1999) also suggested that role based and not age based interventions are needed for grandparent caregivers. In another study researchers found that grandparents experienced "heightened anxiety" when there was a lack of support and/or resources (Sands & Goldberg-Glen, 2000). Studies have also suggested that support groups for grandparents raising grandchildren can be very effective (Pinson-Milburn, 1996). Issues from how to help with homework to advice on legal issues are addressed in support groups (Pinson-Milburn & Fabian, 1996). Although some researchers report that grandparents often feel stressed or depressed about the transition in their lives, some studies have reported feeling good about grandparenting, feeling useful and needed (Pinson-Milburn & Fabian, 1996).

Most of the literature looks to the federal and state governments to make changes in existing social service policy to include grandparents, allowing them to be eligible for financial assistance, child care and help with transportation cost (Minkler 1999; Landry 1999).

Roe and Minkler (1998) reported that a national study revealed that households headed by grandparents demonstrate many strengths with many of the grandparents who assuming responsibility of their grandchildren willingly. The children in the families often appear to thrive. The results of the study suggest that in terms of health and school adjustment, children raised solely by grandparents fared better than children in families with one biological parent present.

In contrast, in another national study, Roe and Minkler (1998) reported that significant health and related problems have been observed, especially among those children who came into the grandparents' care having been prenatally exposed to drugs and alcohol or having suffered parental abuse or neglect. Further observations showed high rates of asthma, weakened immune systems, poor eating and sleeping patterns, physical disabilities, and hyperactivity. Additionally, behavioral problems were prevalent, especially among males (Roe & Minkler, 1998).

A major exploratory study described the results of a Home-Based intervention. This model was designed to reduce psychological stress, improve physical and mental health, and strengthen the social support and resources of grandparents raising grandchildren. The six-month intervention included home visits by social workers, public health nurses, services of an attorney, and monthly support group meetings (Kelley, Yorker, Whitley, & Sipe, 2001).

The sample consisted of 25 participants raising 64 grandchildren. The participants were recruited from two pediatric primary care clinics. One scale used was the Brief Symptom Inventory (BSI). A pretest and posttest quasi-experimental one-group design was used to test the feasibility and efficacy of the program. The major findings suggested that a multimodal intervention is an effective strategy for affecting emotional and social stressors grandparents encounter when raising their grandchildren (Kelley, Yorker, Whitley, & Sipe, 2001).

Further areas of study that are needed include: 1) grandparents in an aging society, for example, economic research, 2) grandparents in the family unit, for example, family relationships, 3) grandparents in the network of community and social affiliations, for example, churches,

4) grandparents as aging individuals, for example, identity, and 5) special populations and grandparents in special circumstances, for example, great-grandparents (Pruchino & Johnson, 1996).

Unfortunately there is limited information in the literature regarding evaluations of services offered to relative caregivers. This is another reason why this study is so important.

Legal Issues

The rapid growth in the number of children formally placed with relatives can be traced in part to a landmark Supreme Court case, *Youakim vs. Miller*, 1979. The Supreme Court upheld a lower court's decision that federal foster care benefits could not be denied to relatives who were otherwise eligible. Foster care payments are significantly higher than Temporary Assistance to Needy Families (TANF) or Social Security Insurance (SSI) rates. *Youakim vs. Miller* set a precedent for grandparent caregivers to receive increased financial assistance.

One of the more important aspects of grandparents raising grandchildren is associated with increased kinship care policies that began in the 1980s. The states that had the most liberal and inclusive policies toward kinship

care saw the most rapid growth in such placements (Roe & Minkler, 1998). For example, kinship care as a percentage of all foster care went up from 22% to 45% in California and from 23% to 36% in New York (Minkler, 1999). By the 1990s, 29 states required that preference be given to relatives in the placement of foster children (Minkler, 1999).

Legal interventions for grandparent caregivers include custody, guardianship, and adoption. According to California law, if a child is removed from a home because of neglect and or abuse, the natural parent has 18 months to reunify with that child (S. Richter, Personal Communication, October, 23, 2001). If the parent does not comply with the case plan set forth by the social worker and the court the child remains in foster care. The natural parent retains their parental rights (S. Richter, Personal Communication, October 23, 2000). Only in the case of adoption will the court terminate parental rights. For many grandparent caregivers this could mean that non-custodial caregiving is the only choice, as they may only want to provide assistance in the time of need not wanting to legally adopt their grandchild(ren). Some states have adopted legal remedies to assist grandparent caregivers who are in these situations. "Consent"

legislation allows parents to authorize grandparents to provide "medical care, surgical, dental or mental health services for children in their care" without court involvement (Karp, 1996).

Efforts to improve legal services to grandparent caregivers are in the beginning stages. Some studies have suggested "kinship adoption." This would terminate custodial rights of the natural parents but other rights, like the right to school records and visitation would remain (Karp, 1996).

Human Behavior in the Social Environment Theories Guiding Conceptualization

Since intergenerational research has been a topic for studies in psychology, sociology, social work, medicine, and law, researchers should look to theoretical frameworks to assist them in understanding intergenerational households. Although studies indicate that grandparents are under stress, researchers have not used Stress Theory as framework through which to analyze the situation of grandparents. Stress is defined as the nonspecific response of the body to any demand and a stressor as an agent or event that generates the stress (Sands & Goldberg-Glen, 2000). Moreover, stress is apparent in the

arena of transactions between the environment, which makes demands on person, who responds. Stress Theory encompasses physiological, social, and psychological levels of stress.

Landry (1999) reported that Role Theory is crucial because the theory provides a theoretical basis by offering insight into the complexity of the grandparent caregiver's role as a second-time-around parent. The increase in the incidence of grandparents raising grandchildren has prompted researchers to focus on the grandparent-grandchild family structure. This theory looks at the social roles that link the individual and society. Furthermore, social roles and developmental tasks have become disconnected from chronological age. The emphasis on this theory looks at the parental role as a grandparent.

Strength-Based Theory concentrates on the strengths of the intergenerational family constellation. Focusing on the strengths will lead to empowerment so that grandparents can confidently make decisions regarding their grandchildren. In addition, family strengths can be found in any environment, regardless of socioeconomic status. The emphasis is on the client as the expert, not the worker (Landry, 1999).

Family Systems Theory looks at relationships with family members and how members work together to maintain homeostasis or balance (Landry, 1999). A change in the system, such as grandparents in the primary caregiving role, effects all members of the family system. Family Systems Theory does not look at the problem in isolation but with how the members interact and respond to the problem (Landry, 1999). Grandparent caregivers attempt to maintain homeostasis when they step in as caregivers for their grandchildren.

Use of the Intergenerational Congruence Model can help identify strengths and potential developmental conflicts of the intergenerational household (McCaslin, 1995). Use of this model allows researchers to see if certain roles and functions can be carried out by substitute members. The model also considers the developmental needs of the grandparent and the child as well as the resources of each (McCaslin, 1995).

Sands and Goldberg-Glen (2000) reported that most of the research on grandparent caregivers is descriptive. Furthermore, additional studies are needed in the development of appropriate theory and to generate empirical findings to test the theory. Present research is tentative, incomplete, and contradictory. Methodological

flaws limit how much studies can tell us about grandparents today because the demographic picture is not clear. Finally, Family Systems Theory guided this study because it looked at the characteristics and the roles of relative caregivers.

Summary

The literature presented in Chapter Two is important to this study. Given the realities that grandparents face, such as, legal, financial, and medical, social workers and other human service workers need to realize the importance of these dilemmas.

CHAPTER THREE

METHODS

Introduction

The chapter discussed the study design, sampling, data collection and type of instrument that was used. Also discussed are the procedures by which the data was collected, followed by protection of human subjects and data analysis.

Study Design

Evaluations are necessary in social work practice because they increase our knowledge base, guide decision-making, demonstrate accountability and assure that client objectives are being achieved (Grinnell, 2001). The study design used in this research was a survey. The proposed research was an evaluation study assessing the outcome of program objectives and the degree to which the services offered are effective. Are social support services effective for relative caregivers?

Strengths of evaluating a social service agency include easy access to the group committee meetings and focus groups and the fact that normally there is no cost involved.

Weaknesses of evaluating a social service agency include that relative caregivers are not always given adequate information and there are time restraints.

Sampling

The sample (N = 300) was drawn from a list of relative caregivers who are clients of San Bernardino County, Department of Children's Services (DCS). DCS is a government agency that protects abused and/or neglected children. Once a child is taken into protective custody under DCS, relative caregivers are assessed first for out of home placement for the child. DCS offers various services to relative caretakers (S. Richter, Personal Communication, October 23, 2000). A systemic random sampling method was used to select study participants who are relative caregivers under the jurisdiction of San Bernardino County DCS. The sampling criteria for participants included being a biological relative caregiver and a custodial (legal or non-legal status) relative caregiver. Participation was strictly on a voluntary basis.

Data Collection and Instruments

The data collected were responses from relative caregivers using a 14-item scale self-administered

questionnaire (Corcoran & Fisher, 1987) (See Appendix E) that provided an overall social service satisfaction score. The dependent variable was satisfaction with using social support services, operationalizing as responses to 14 questions. Questionnaire-type scales combine the responses of all the questions within the instrument to form a single overall score for the variable being measured (Corcoran & Fisher, 1987). This score determined the level of satisfaction.

The independent variables included age, gender, ethnicity/race, and marital status. The following are the levels of measurement for the independent variables. The level of measurement for age was continuous or ratio. The level of measurement for gender, ethnicity/race, marital status, were nominal.

The social satisfaction scale used in this study was guided by questions in the Client Satisfaction Questionnaire (CSQ-8) (Corcoran & Fisher, 1987). The level of measurement for items in the CSQ-8 scale is ordinal (Corcoran & Fisher, 1987). The scale items were summed to create a continuous measure from an ordinal level of measurement. While the scale does not necessarily measure the client's perceptions of gain from treatment, or

outcome, it does elicit the client's perspective on the value of services received (Corcoran & Fisher, 1987).

The questionnaire used in this study has a good concurrent validity. Concurrent validity means that the instrument has been compared to an already existing criterion such as the results of another measuring device and its correspondence to the criterion that is known concurrently. Test-retest correlations were not reported (Corcoran & Fisher, 1987). The questions from the scale are based on middle-class ideologies. White middle-class persons are more likely to seek social support services from public agencies as opposed to ethnic families who seek help from extended family or community-based services such as a church (Corcoran & Fisher 1987).

Since this study involved evaluating a support service, the researchers had to consider instrument limitations, including the possibility that all the participants may be White. Another limitation may include a lack of understanding of the survey by non-White participants due to cultural differences.

The strengths of the data collection include the fact that all participants were relative caregivers, each participant received the same survey, and gender, age, and ethnicity/race have no barring on the outcome.

Furthermore, the instrument was designed for use with a wide range of social services. Another strength of the instrument is that it does not require much time for scoring (Corcoran & Fisher, 1987).

Limitations of the collection of data include the fact that the respondents answered by using a number and there was no space for written responses. A second limitation is that participants may distort the truth to provide socially desirable responses (Corcoran & Fisher, 1987). One way the limitation of lack of written responses was addressed, by providing a question that allowed a write in response.

Procedures

The researchers mailed the questionnaires. Each envelope included the informed consent, debriefing statement, the survey, and a pre-addressed/stamped envelope. Each participant was asked to return the survey and informed consent in a pre-addressed envelope by April 1, 2002. The surveys were mailed on March 7, 2002. Thus, a 23-day period was provided.

Protection of Human Subjects

For sake of protecting the participants' anonymity, a numbering system was utilized. No participant names were

used. The researchers informed the participants that, in order to assure confidentiality, the identifying information included on the questionnaires in the form of a numerical code can only be interpreted from a master list retained by the researchers who administered the survey. This master list was kept in a locked file cabinet at the home of one of the researchers. As the surveys were returned they were also kept in the locked file cabinet. The only people who had access to the master list and surveys were the researchers. After the data was inputted into a data file, the master list was shredded. The participants were informed that after the study has been completed, the surveys would be destroyed.

Study participants were asked to sign informed consents before they participated in the study and were told that they could stop at any time during the study (See Appendix B). The participants were given debriefing statements with the name and phone number of the research advisor, if they had any questions concerning the study, along with a phone number to contact Mary Frazier, Director of Grandparents-R-US (See Appendix C).

Data Analysis

This study used was a quantitative approach. The researchers relied on the scores of the instrument used in order to analyze the data produced by the participants (Grinnell, 1987). Since the study surveyed 300 participants, the results can be generalized.

Analyzing the data began with frequency distributions which showed how many times each value appeared.

Next, in order to determine if there was an association between the independent variables (demographics) and the dependent variable (effectiveness or satisfaction) cross-tabulations were tested using chi-square. The chi-square association does not actually claim that the independent variables caused the effectiveness or satisfaction of those respondents that utilized the services offered by DCS. The chi-square only determined if there was a strong pattern between the variables (Weinbach & Grinnell, 2001).

Summary

The methods used in the study were presented in Chapter Three. A satisfaction scale was used in this study to evaluate a support service. Sampling methods,

procedures and data collection were also discussed in this chapter.

CHAPTER FOUR

RESULTS

Introduction

Included in Chapter Four is a presentation of the results of this study that included demographics of the participants, services offered by DCS, and overall satisfaction.

Presentation of the Findings

The researchers systemically selected and mailed 300 14-question client satisfaction questionnaires. Out of that 300, 85 (24%) were completed and returned. The results of this study are based on those 85 questionnaires.

As shown in Appendix D, the sample consisted of 86% females and 10% males. Their ethnicity was 22% Black/African-American; 35% White/Caucasian; 41% Latino/Hispanic, and 4% Other. Over 60% of the sample reported being married while 35% were unmarried. Unmarried included single, divorce, widow/widower and separated. Eighty-one percent of the participants were under 60 years old and 18% were over 60 years old. The average age of the participant was between 50 and 59 years old.

In response to a question asking whether their legal rights were explained, 74% of the respondents reported "Yes" as opposed to 20% "No". (See Appendix E, Figure 1.) In response to the question of whether their social worker provided emotional support, 65% reported "Yes" (See Appendix E, Figure 2.)

When asked if they had been referred to a support group, 57% said "No" and 44% said "Yes". (See Appendix E, Figure 3.) A majority (71%) of the respondents reported "Yes" to being satisfied with services offered by San Bernardino County, Department of Children's Services. (See Appendix E, Figure 4.)

Findings on relationship to the child were that 48% were nieces and nephews and 52% were grandchildren. Over 90% of the sample reported receiving dental, vision, and medical insurance.

Cross-tabulations and chi-square were used to determine if there was a significant relation between the demographics and opinions about service effectiveness. There was no association between any of the variables.

Summary

Chapter Four reviewed the results extracted from the project. The findings indicated that most relative

caregivers were Latino/Hispanic, female and married, under 60 years old, raising grandchildren, and most of the participants were satisfied with services offered by DCS.

CHAPTER FIVE

DISCUSSION

Introduction

Included in Chapter Five is a presentation of the conclusions gleaned as a result of completing the project. Further, the limitations extracted from the project are presented followed by recommendations and summary.

Discussion

This study evaluated the effectiveness of services offered by San Bernardino County, Department of Children's Services to relative caregivers. The research question was, Are the services that are offered by the agency meeting the needs of the relative caregivers?

The services offered by DCS for which satisfaction was assessed included medical, vision, dental, emotional support provided by social worker, referrals to a support group, social worker provided school guidance, and explanation of legal rights. The demographics reported included age, ethnicity/race, marital status, and gender.

As indicated by the results of this study, 71% of the respondents overall were satisfied with services offered by the agency.

The results of this study are parallel to the results of a major study conducted in Ohio. The purpose of that study was to identify the needs of grandparent caregivers. The Ohio State Grandparents Raising Grandchildren Task Force found that legal rights and health insurance are vital to relative caregivers, which is parallel to the results of this study.

As cited in the literature, a national study, found that grandparents experienced heightened anxiety when there was a lack of support. Landry (1999) suggested that emotional support was an important factor for grandparent caregivers. In this study, one question asked if the social worker was providing emotional support. The majority of respondents answered "Yes".

Support groups are essential to relative caregivers because support groups address issues such as help with homework and legal advice. The findings in a study done by Pinson-Milburn and Fabian, (1996) suggested that support groups are effective for grandparent caregivers. In this study, when asked if the relative caregiver had been referred to a support group, over half (57%) of the respondents answered "No".

Finally, the last result reported that was supported by the literature was the typical profile of a grandparent

raising grandchildren with the exception of ethnicity. In most studies, the grandparent is White, female, and married with a median age of 57. In this study, the typical respondent was a Latino/Hispanic, female, married, and between the ages of 50 to 59 years.

As expected by the researchers, the majority of the respondents are raising grandchildren. What was surprising to the researchers was the finding, that next to grandchildren (52%), relative caregivers are raising nieces, nephews or both (48%). One reason why relative caregivers are raising their sibling's children may be attributed to having aging parents who are unable to care for their grandchildren. Another possible reason may be a relative caregiver sibling's death.

Noteworthy to mention are the comments made by respondents. Question 10 provided a space to list additional services that are needed. The comments included "orthopedic services," "tutoring services," "understanding our justice system," "financial support should be equal (foster amount versus relative amount)," "dental care that would include braces," "better access to child care," "attorney" services, and the last one, "more support in terms of child behavior/behavior, problems in school."

Limitations

A number of limitations of the present study should be recognized. First, due to time constraints, the researchers did not mail out follow up postcards after the initial questionnaires were mailed.

Another limitation was the low return rate (n=85). Additionally, 10 surveys were returned due to incorrect addresses. The researchers were not able to procure the correct addresses due to confidentiality. Further, the researchers were unable to do a comparison between demographics and client satisfaction due to the sample size.

Recommendations for Social Work Practice, Policy and Research

A recommendation by the researchers is that San Bernardino County, Department of Children's Services, needs to establish a Relative Caregiver Placement Unit in all regions. This unit would concentrate solely on issues, concerns, and problems that relative caregivers face, such as legal matters, financial concerns, and respite care. Social workers that would work in this unit would have to be knowledgeable in Family Systems Theory due to the uniqueness of these families.

Another recommendation by the researchers is that support groups for relative caregivers be established in the Rancho Cucamonga region, the San Bernardino region, and in the upper desert region. Support groups need to be implemented in these surrounding areas because this would allow easier access due to their locations for relative caregivers who are clients of San Bernardino County.

It is critical that social workers do a careful assessment of relative caregiver's needs when working with these families. Social workers should advocate for the way policy is formulated in this area so that the well being of children and their families is the main goal. An example is the Relative Placement Unit that would be designed to enhance services for helping these families by addressing their specific needs.

Conclusions

In summary, the responses from the surveys indicated that relative caregivers are satisfied with the services offered by San Bernardino County, Department of Children's Services. These services included medical, dental, vision, emotional support, and support groups.

The services that were identified from the surveys were supported with other previous studies as the most critical needs and concerns of relative caregivers.

Now that the study has been completed, San Bernardino County's Kinship Initiative Social Service Program can utilize these findings to better serve their clients.

APPENDIX A
QUESTIONNAIRE

Client Satisfaction Questionnaire

The following questions apply to services offered by San Bernardino County, Department of Children's Services (DCS). For purposes of this questionnaire, the term "relative" means the child placed in your care by the Department of Children's Services. "DCS" means San Bernardino County Department of Children's Services.

Circle your answer:

1. Are you raising your?

Niece Nephew Cousin Grandchild Sibling

Questions 2-8 apply to the answer given in question #1.

2. What type of medical insurance is the relative(s) you are raising receiving?

Medi-Cal Private Insurance Other None

If none, have you been offered Medi-Cal benefits by DCS?

Yes No

3. What type of dental insurance is the relative(s) you are raising receiving?

If none, have you been offered dental insurance by DCS?

Yes No

4. What type of vision insurance is the relative(s) you are raising receiving?

Medi-Cal Private Insurance Other None

If none, have you been offered vision insurance by DCS?

5. Has your social worker explained your legal rights as a relative caregiver?

Yes No

6. Has your social worker referred you to a support group for relative caregivers?

Yes No

7. Has your social worker provided you and your family with emotional support?

Yes No

8. When my relative is having difficulties in school my social worker gives me guidance on how to handle the situation?

Yes No

My relative has had no problems at school.

9. As a relative caregiver are you satisfied with the services you are receiving from DSC?

Yes No

10. Please list any additional services that you feel are needed for relative caregivers.

11. What is your marital status?

Domestic Partner	Single	Married
Divorced	Separated	Widow/Widower

12. What is your age?

18-24	25-29	30-39	40-49	50-59
60-69	70-79	80-89	90+	

13. What is your gender?

Male Female

14. What is your race/ethnicity?

Black/African American	Latino/Hispanic	White/Caucasian
Native American	Pacific Islander	Filipino
Asian	Unknown	Other

APPENDIX B
INFORMED CONSENT

Dear Participant,

You are being asked to participate in a study that will determine your satisfaction in using a social support service offered by San Bernardino County, Department of Children's Services. The study is being conducted by Teri Lynn Elliott, MSW student, and Sandra Medina, MSW student, under the supervision of Dr. Rosemary McCaslin, Coordinator of MSW Research. This project has been approved by the Department of Social Work Sub Committee of California State University, San Bernardino Institutional Review Board.

All that is asked of you is 20 minutes of your time and willingness to share your opinions by answering series of questions. All responses will be kept confidential as your name will never appear on or be associated with this survey.

There may be benefits and are no foreseeable risks from participating in this study. Your participating in this study is voluntary and you may withdraw at any time. There will be no penalty should you choose not to participate in this study; the agency will not know whether or not you participated.

Thank you for your time. If you have any questions or concerns regarding this study, please contact Dr. Rosemary McCaslin at (909) 880-5507.

By the mark below I indicate that I am at least 18 years or older participating voluntarily.

Place an "X" Here: _____

Date: _____

***Please return this form with the completed questionnaire in the pre-paid envelope no later than April 1, 2002.**

APPENDIX C
DEBRIEFING STATEMENT

DEBRIEFING STATEMENT

You have just participated in a study to determine your satisfaction in using a social support service offered by San Bernardino County, Department of Children's Services. The study is being conducted by Teri Lynn Elliott, MSW student, and Sandra Medina, MSW student, under the supervision of Dr. Rosemary McCaslin, Coordinator of MSW Research at California State University, San Bernardino.

The survey you have completed is crucial in providing insight into support services that are vital to relative caregivers. The results will help not only social workers, but all human service workers to increase awareness of the importance relative caregivers support groups. If while completing this survey, or after, you feel the need to talk with someone regarding your thoughts or feelings you may contact Mary Frazier, Director of Grandparents-R-US at (909) 885-1324.

Your participation has been voluntary. The researchers appreciate your time and willingness to fill out the survey. Thank you.

If you have any questions or concerns regarding this study, please contact Dr. Rosemary McCaslin at (909) 880-5507. The results of the study will be available at PFau Library, California State University, San Bernardino after July 1, 2002.

*** Please keep this letter for your records!**

APPENDIX D
DEMOGRAPHIC CHARACTERISTICS

Gender of Respondent

		Percent
Valid	Male	9.4
	Female	85.9
	Total	95.3
Missing	Missing	4.7
Total		100.0

Marital Status in 2 Categories

		Percent
Valid	Married	64.7
	Not Married	35.3
	Total	100.0

Age in 2 Categories

		Percent
Valid	Under 60 yrs of age	81.2
	Over 60 yrs of age	18.8
	Total	100.0

Ethnicity

		Percent
Valid	Black/African-American	22.4
	White/Caucasian	32.9
	Other	3.5
	Latino/Hispanic	41.2
	Total	100.0

APPENDIX E
FREQUENCY DISTRIBUTION FIGURES

Figure 1. Legal Rights Explained to Relative Caregiver



Figure 2. Emotional Support

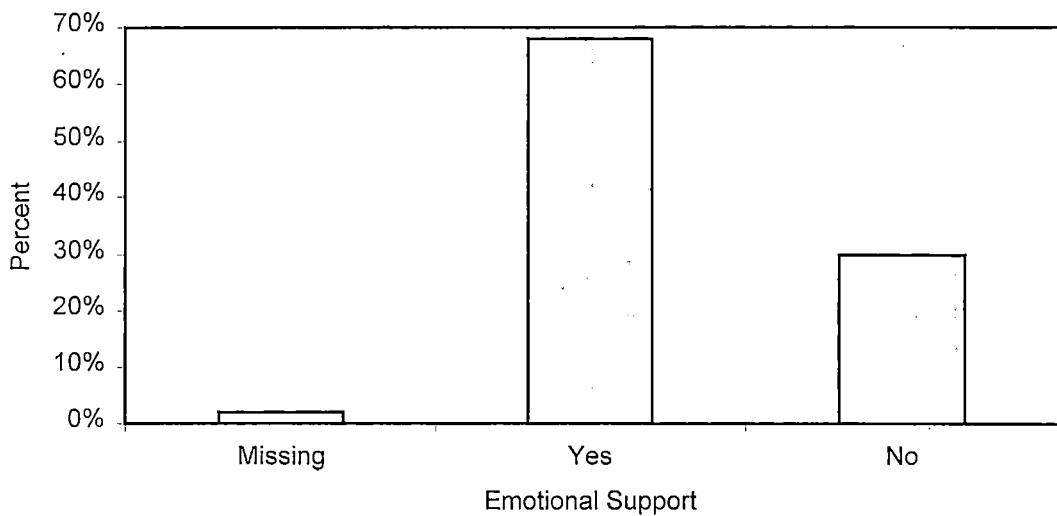


Figure 3. Referral to a Support Group

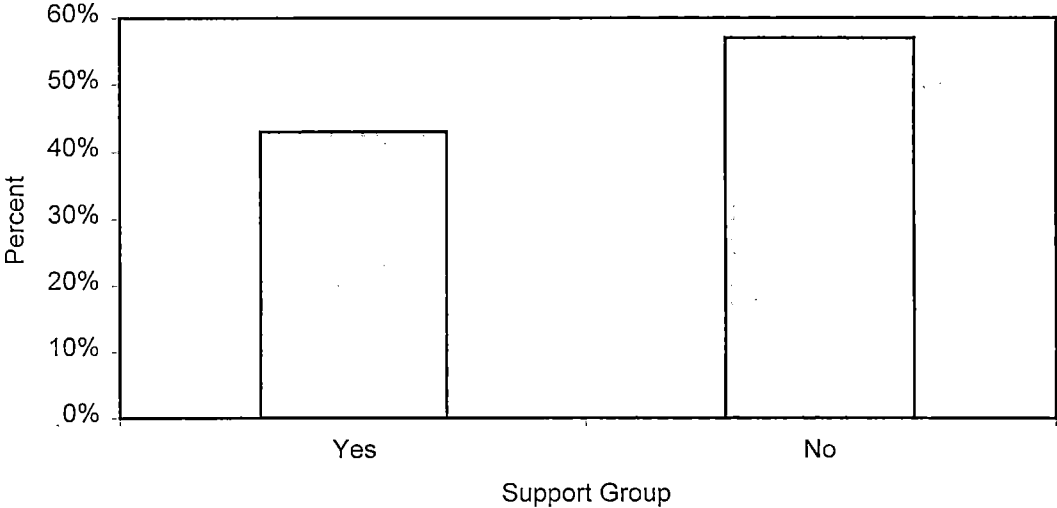
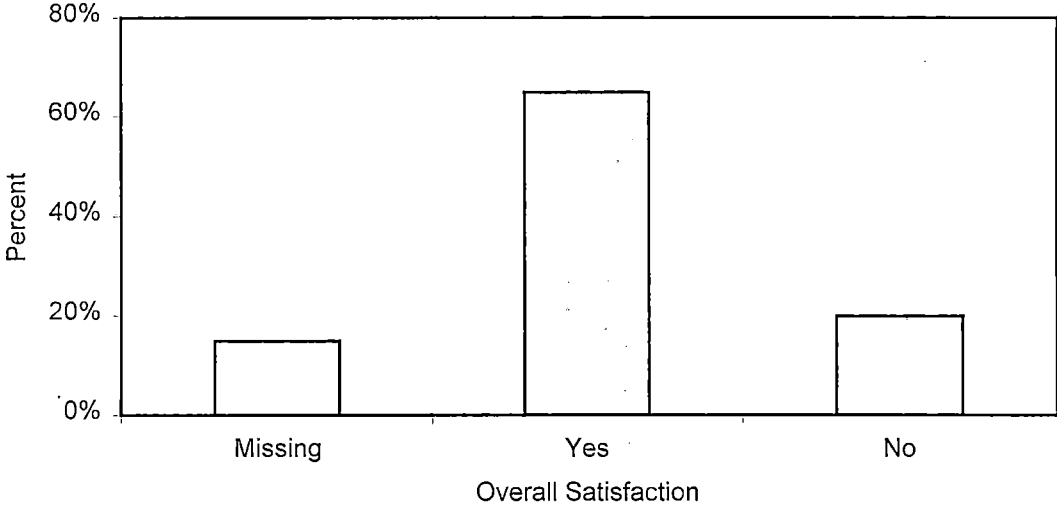


Figure 4. Overall Satisfaction



APPENDIX F
PERMISSION LETTER



March 7, 2002

DR. ROSEMARY McCASLIN
DEPARTMENT OF SOCIAL WORK
CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
5500 UNIVERSITY PARKWAY
SAN BERNARDINO CA 92407-2397

Dr. McCaslin:

This letter serves as notification to the Department of Social Work at California State University, San Bernardino, that Teri Elliot and Sandra Meelina have obtained consent from the Department of Children's Services, San Bernardino County, to conduct the research project entitled, "A Satisfaction Survey of Relative Caretakers."

Sincerely,

CATHY CIMBALO
Director

CC: CB:lh (Mar02:6.doc)

cc: File
Chron

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ASSIGNED RESPONSIBILITIES PAGE

This was a two-person project where authors collaborated throughout. However, for each phase of the project, certain authors took primary responsibility. These responsibilities were assigned in the manner listed below.

1. Data Collection:

Assigned Leader: Teri Elliott

Assisted By: Sandra Medina

2. Data Entry and Analysis:

Team Effort: Teri Elliott and
Sandra Medina

3. Writing Report and Presentation of Findings:

a. Introduction and Literature

Team Effort: Teri Elliott and
Sandra Medina

b. Methods

Team Effort: Teri Elliott and
Sandra Medina

c. Results

Team Effort: Teri Elliott and
Sandra Medina

d. Discussion

Team Effort: Teri Elliott and
Sandra Medina