Interim Report:

Current State & Best Practices of Supplemental Caregiver Supports

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PolicyWise for Children & Families

Table of Contents

Introduction

The child intervention system depends on the ability of foster and kinship caregivers to provide safe, nurturing homes to children and youth in care over the long term. Many children and youth in care have experienced trauma and live with mental and behavioural health challenges which can be exacerbated by inadequate care and placement instability. Caregiver satisfaction and wellbeing are key factors contributing to retention and placement stability and are needed to optimize outcomes for children and youth (Randle et al., 2018). As such, caregivers must be provided with an array of supports to help increase their capacity to overcome challenges and provide quality care.

The purpose of this project is to consider if supplemental supports offered in Alberta are effective; that is, evidence-based and appropriate for the context. As part of the project, we examined the area of caregiver supplemental supports for two main purposes, to understand:

1) the evidence base and leading practices for foster and kinship caregiver supplemental supports and
2) the current state of supplemental caregiver supports

This interim report reviews the evidence for supplemental caregiver supports and provides a description of leading practices in other jurisdictions. Included in this report as well is an early understanding of the current state of supplemental support offerings in Alberta. The findings from this review will directly inform next steps in this project.

A note on terminology

We define supplemental supports as supports and services outside of what is "core" or mandatory to provide foster and kinship caregivers in the child intervention system. Six supplemental support types were identified by Children Services as a starting point: training, mentorship, networking, advocacy, recognition, and dispute resolution. Other supports emerged through the review and are discussed below. These are: respite care and childcare, mental health supports and services, system navigation, and legal supports.

Foster & Kinship
Caregiver Supports

Core Services

Supplemental
Services

The boundaries of what is considered a supplemental support is not clear cut. Many of the categories of supports mentioned in this report are both core and supplemental. For example, under the broad umbrella of trainings there are both mandatory and non-mandatory trainings available to caregivers. Supplemental supports may also be thought of as supports
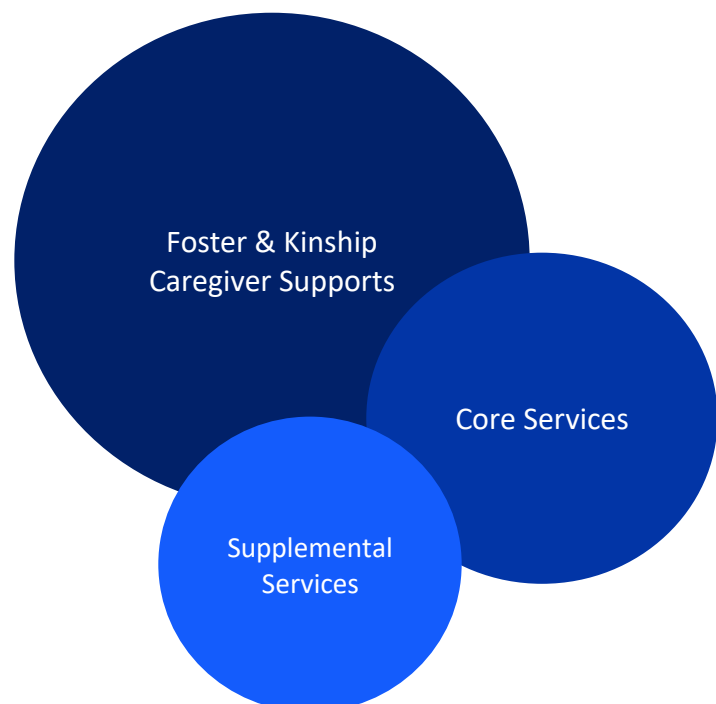
provided to caregivers by people other than the caseworker such as agency staff, trainers, and people with lived experience. However, this is also not definitive as supports such as advocacy and system navigation are provided both by caseworkers and by other types of service providers. Caseworkers also play a key role in connecting caregivers to supplemental supports. What is mandatory and not mandatory also varies by jurisdiction and is not always clear in the literature, which makes comparison challenging.

Supplemental supports are provided in both formal and informal ways. For example, peer support may be provided informally through a conversation between caregivers during training or through a structured mentorship program. Informal aspects of supports are not always captured in the literature but may be no less important.

Approach

Rapid Literature Review

The purpose of the rapid literature review was to examine evidence-based practices including best, leading, promising, and emerging practices for supplemental caregiver supports in foster and kinship care. The literature review involved searching academic databases for peer-reviewed journals as well as grey literature for documents, reports, and other publicly available information. Search terms used to identify articles included "foster" and/or "kinship" along with variations of "caregiver", "carer", "family", and "parent". Intervention terms used included the six supplemental support types identified by Children's Services ("training", "mentorship", "advocacy", "networking", "dispute resolution", and "recognition") as well as general terms such as "support", "service", "program", and "intervention" to capture other types of supports. See Appendix A for the literature search strategy used. Targeted sources were sought from specific organizations known to publish literature on foster and kinship care or were hand-picked from reference lists of papers that met inclusion criteria. Given the timeframe available and defined scope (i.e., supplemental supports), a rapid review style methodology was used to ensure both quality evidence and timely completion of the review. As such, the review was not exhaustive. Articles were first selected for inclusion based on title and abstract. Some sources initially identified were subsequently eliminated as they did not meet inclusion criteria upon thorough review. Additional literature searches were conducted where needed. A total of 46 articles were selected for inclusion. The qualitative data collected from these sources were analyzed through an iterative approach using qualitative data analysis software NVivo 12. An initial deductive coding structure was developed based on the objectives and support types and underwent iterative revisions to include emergent codes.

Limitations:

- · To maintain manageable scope for the timeline, only the most recent evidence (published between 2017-2022) was included. There are other, older studies outside of this timeframe that are relevant. However, the literature included builds on what is already known, and some older studies are captured through systematic reviews and meta-analyses.
- · Research is often more focused on supports for foster caregivers than kinship caregivers and there are a lack of articles comparing the effectiveness of supports for each.

Jurisdictional Scan

The purpose of the jurisdictional scan was to assess what supplemental supports offered in other jurisdictions could inform Alberta's offerings. In the scan, fellow provincial and territorial government websites, and foster and kinship associations were examined to identify which supplemental supports were offered and whether the offerings could inform Alberta's supplemental supports. When information about supplemental supports was not available, where needed, additional content was hand pulled from specific agencies. sites. While examining websites, information about the six supplemental supports was reviewed, and if any other supports were included they were noted (see Emerging Supports section). To determine which supports could inform Alberta's supplemental supports, the content from the websites were compared to the results from the current state survey as well as to contracts with Albertan agencies. Information related to supports considered core supports was not included in the jurisdictional scan. In total, 10 provinces, three territories, and the federal government websites of Australia and the United States were analyzed as part of the jurisdictional scan.
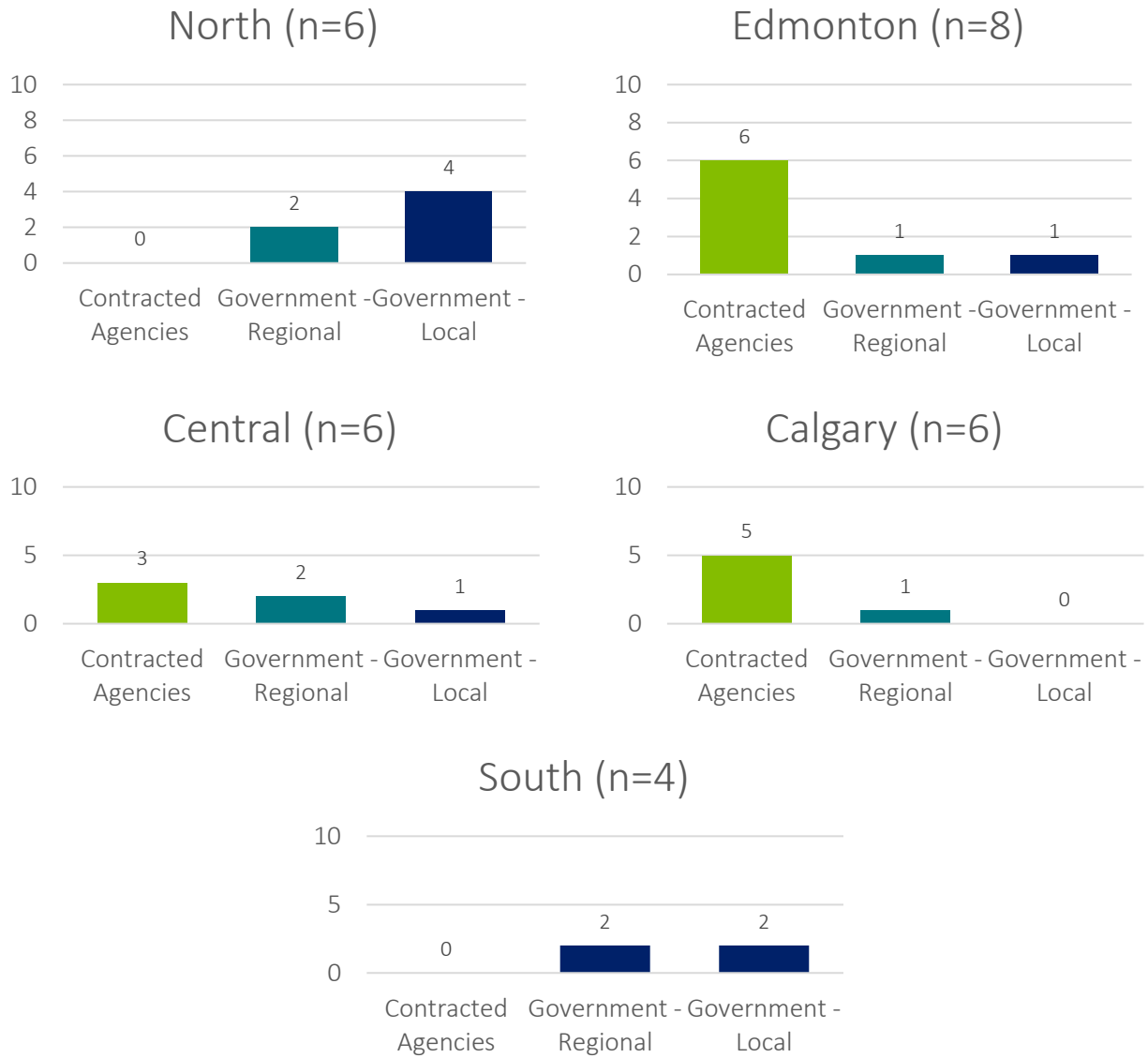
Limitations:

- It was not possible to assess the timeframe of material or the date of information available
- There was limited information on how each support was implemented. It was only possible to determine whether a support was offered or not
- It was not within scope or project timelines to look at the various sectors in which caregiver supports are provided, such as from within First Nations, and by all social-serving agencies
- According to the comparison table found in Appendix B, Alberta offers a wide range of supports compared to other jurisdictions. However, this is not to be interpreted as Alberta offering more services than other provinces. It was not within the scope of the jurisdictional scan to examine each type of support in depth or to verify each support with a follow-up interview.
- There were very few provinces in which information was available about government offerings for supplemental supports for caregivers. Most provinces in Canada offered some form of supplemental training, networking opportunities, and advocacy. It was less clear if provinces offered recognition and dispute resolution, and this could be because it was not publicly available and was therefore not obtained during the jurisdictional scan. In the territories, less information was obtained from Yukon and Nunavut.

Current State Survey

The purpose of the current state survey was to better understand what supplemental supports service providers in Alberta, including government, contracted agencies, and Delegated First Nation Agencies offer to foster and kinship caregivers. The survey was developed in collaboration with Children's Services, a foster and kinship agency, as well as contracts from agencies that receive funding from Children's Services. Recruitment of participants for the survey was through Children's Services as well as a foster and kinship agency. The survey was administered on Survey Monkey and consisted of demographic questions and open-ended questions about supplemental services. The full survey can be found in Appendix C. The survey was open for a total of 16 days.

A total of 28 responses were obtained, with a breakdown of 50% (14/28) contracted agencies, 29% (8/28) government regional offices, 18% (5/28) government local offices, and <1% (1/28) DFNAs. Out of the 28 respondents, 96% (27/28) completed the survey in full and 4% (1/28) completed only the demographic questions in the survey. The respondents represented all five Children's Services Regions (see graphs below; the DFNA response is not represented due to low n size). The open-ended questions were compiled and qualitatively coded for patterns and themes. Comparisons between foster, kinship, and foster and kinship service providers was not feasible given the majority of service providers (64%) indicated that they provided services to both foster and kinship caregivers.

North (n=6)

Contracted Agencies	Government - Regional	Government - Local
0	2	4

Edmonton (n=8)

Contracted Agencies	Government - Regional	Government - Local
6	1	1

Central (n=6)

Contracted Agencies	Government - Regional	Government - Local
3	2	1

Calgary (n=6)

Contracted Agencies	Government - Regional	Government - Local
5	1	0

South (n=4)

Contracted Agencies	Government - Regional	Government - Local
0	2	2

How to interpret the findings

The literature review, jurisdictional scan, and current state survey are incorporated throughout the findings. We use symbols to indicate where findings overlap across the sources. For example, in some sections, three symbols will appear, whereas in other sections, there could be only two.

Legend

Literature Review

Jurisdictional Scan

Current State Survey

Findings

Building capacity, strengthening social supports, and providing practical assistance to foster and kinship caregivers are three critical pillars for supporting caregiver wellbeing, retention, and ultimately, placement stability and positive outcomes for children and youth in the child intervention system. There are supplemental supports to support these pillars, including but not limited to: training, advocacy, dispute resolution, mentorship, networking and recognition. It is important to note that no single type of caregiver support is sufficient on its own. A combination of supports is needed to achieve desired outcomes.

The following section summarizes recent evidence on the effectiveness of various supports and services for foster and kinship caregivers, setting the stage for evaluation. There are two main sections: supplemental supports and emerging supports.

Of note in the literature is that authors consistently remark on the limited evidence for effective interventions for foster and kinship caregivers. There are also methodological challenges noted such as heterogeneity in intervention aims, implementation, and outcomes that makes generalizing and comparing results challenging (Dickes et al., 2018).

At a high level, there is preliminary evidence around caregiver needs and evidence correlating supports to caregiver and child outcomes. However, based on the literature reviewed, there is insufficient evidence to determine "best practices" within each type of support. Notably, there are gaps in the literature with regards to three of the six main supplemental supports: dispute resolution, advocacy, and recognition. However, a lack of literature on these topics does not necessarily indicate unimportance.

Supplemental Supports

TRAINING

Training for caregivers is an opportunity to support capacity building, address emerging issues, and, in the longer term, retain caregivers. Further investigation, through the evaluation, is needed to better understand which formats work best for caregivers and whether training is specific enough for caregivers in local contexts.

The literature shows effectiveness of various training programs for foster and kinship caregivers that go beyond the foundational trainings typically offered. The literature on the effectiveness of training programs is varied and not always empirically supported (Mallette et al., 2020; Solomon et al., 2017; Wu et al., 2020). Despite this, there are common outcomes around training programs. Those which aim to build parenting capacity[1] have been shown to:

- · increase caregiver knowledge and skills (Maaskant et al., 2017; Schoemaker et al., 2020; Solomon et al., 2017; Wu et al., 2020)
- · decrease caregiver stress (Schoemaker et al., 2020; Wu et al., 2020)
- · increase caregiver self-efficacy (Wu et al., 2020)
- · improve problematic child behaviours (Price et al., 2019; Schoemaker et al., 2020;Solomon et al., 2017; Uretsky & Hoffman, 2017; Wu et al., 2020)
- · improve parent-child relationships (Kemmis-Riggs et al., 2018)
- · support placement stability/permanency (Kemmis-Riggs et al., 2018; Wu et al., 2020)
- · improve caregiver retention and satisfaction (Randle et al., 2018).

The literature review parallels findings from the current state survey of service providers in Alberta. Contracted agency respondents broadly indicated that training aims to fulfill the need of building capacity within caregivers, such as their skills and knowledge to care for the child or youth in their care. Commonly referenced training topics included: trauma-informed care, child development, attachment, and cultural needs. Topics uniquely mentioned in Alberta were: sexual and gender diversity, addictions, suicide awareness, medication, relationships, and emergency response (e.g., first aid, fire). Many provinces and territories in Canada offer supplemental training for caregivers on an ongoing basis. Examples of additional topics that emerged were: FASD and Autism Spectrum Disorder. As well, other jurisdictions offer caregivers opportunities to speak with a child development expert or clinician.

There is a growing body of literature supporting training for foster and kinship caregivers on child development, trauma, and attachment. Given the prevalence of trauma among children and youth in the child welfare system, trauma is recognized as an essential training topic and is widely recommended (Generations United, 2017; Redlich Horwitz Foundation, 2018). Trauma-informed training programs have been shown to: increase caregiver knowledge, skills, and attitudes (Bartlett & Rushovich, 2018; Konjin et al., 2020; Lotty et al., 2020; Murray et al., 2019; Strolin-Goltzman et al., 2018); increase trauma-informed parenting skills, including greater tolerance for misbehaviour (Bartlett & Rushovich,

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[1] Program topic examples include problem solving, discipline, and behaviour management.

2018; Lotty et al., 2020; Murray et al., 2019); increase caregiver self-efficacy (Bartlett & Rushovich, 2018; Lotty et al., 2020; Murray et al., 2019; Strolin-Goltzman et al., 2018); reduce caregiver stress (Konjin et al., 2020; Pasalich et al., 2021); and improve child behaviours (Lotty et al., 2020; Strolin-Goltzman et al., 2018). This aligns with Foundations of Caregiver Support which has child development, trauma, and grief and loss as foundational pillars for knowledge and practice.

Training and supports to help caregivers understand their children's cultural needs and support their children's connection to culture have been given very limited attention in the literature. This is surprising given the importance of cultural connection to children's wellbeing and "the overrepresentation of the Western universe in Indigenous child welfare" (Makokis et al., 2020). However, this lack of literature may be due to the contexts in which many of the studies took place. One study from British Columbia identifies cultural training for caregivers as an important element of an overall inclusive foster care approach (Oliver, 2020). This study suggests "foster parent training should fully address shared stories like the impact of residential schools and colonization" (Oliver, 2020, p. 591). In addition, it suggests supporting caregivers and children in their care visit their traditional territory and engage in individualized cultural opportunities related to the child's specific culture (Oliver, 2020).

Implementation of Training Programs

There is some evidence around what components make training more or less effective. Studies suggest trainings with opportunities to practice skill development are more effective than those without (Kaasbøll et al., 2019; Kemmis-Riggs et al., 2018). Schoemaker et al. (2020) found that group-based parenting interventions, which have the advantage of providing social support, were more effective than other formats (I.e., individual or combination) for increasing parenting sensitivity. However, group, individual or combination interventions were equally effective at reducing caregiver stress. Trauma-informed trainings should be offered as one piece of a trauma-informed systems change approach (Annie E. Casey Foundation, 2017; Generations United, 2017; Leake et al., 2019). Longer trainings may not necessarily be better than shorter trainings, as they may be a barrier to some caregivers (Solomon et al., 2017). Some literature suggests offering 'flexible' training formats (e.g., Kaasbøll et al., 2019); however, there appears to be a lack of literature comparing the effectiveness of different formats such as in-person vs. virtual training. To enable caregivers to take part in trainings, it is important to provide practical supports such as childcare, transportation, mileage reimbursement, and meals (Annie E. Casey Foundation, 2017; Generations United, 2017; Redlich Horwitz Foundation, 2018).

Novel approaches to foster and kinship caregiver trainings are also being trialled. For example, one study found a trauma-informed training program that supplemented training with the use of a smartphone application to reinforce learning. This approach showed greater increases in foster caregivers' trauma knowledge and self-efficacy and helped mitigate caregiver strain compared to training alone (Sullivan et al., 2019). Novel training topics also emerged. For example, a training program called AFFIRM Caregiver for foster caregivers caring for youth who identify as LGBTQ2S+. This program was found to increase affirmative caregiving attitudes, behaviours, and self-efficacy among caregivers, leading to better outcomes for the youth (Austin et al., 2021). This training topic may be an important need given that LGBTQS2+ youth are often overrepresented in the foster care system and face unique challenges (Austin et al., 2021; Salazar et al., 2018). It is important for caregivers to understand how to

create safe, accepting environments, build relationships with youth, use appropriate language and terminology, and learn to advocate for LGBTQ2S+ youth in their care (Salazar et al., 2018).

In addition to being evidence-based, is important for trainings offered to meet the needs of the foster and kinship caregivers within their particular context. While not necessarily generalizable, as needs will vary, some training topics identified by caregivers as needs in the literature include grief and loss (Mallette et al., 2020), familial relationship/healthy relationship education (Mallette et al., 2020; Richardson et al., 2018), how to navigate relationships with birth families (Child Welfare Information Gateway, 2018; Lewis, 2022; Oliver, 2020; Redlich Horwitz Foundation, 2018), how to build a support network (Mallette et al., 2020), how to communicate needs (Richardson et al., 2018), child mental health (Kaasbøll et al., 2019), advanced training on parenting children with special needs (Kaasbøll et al., 2019), and more training in real-life situations (Mallette et al., 2020; Kaasbøll et al., 2019).

MENTORSHIP AND PEER SUPPORT

Mentorship supports the emotional, social, information, and capacity building needs of caregivers. Mentor support combined with caseworker support has a reinforcing effect on caregivers. A potential evaluation area is to understand how mentorship is used by service providers and caregivers as well as how it can enhance other service offerings.

There are many variations in how mentorship and peer support programs are conceptualized and structured. For example, there are more formalized programs that involve intentional matching of an experienced mentor with a novice caregiver, in-person or online support groups, informal peer-to-peer structures such as Facebook groups, and others. In addition, there is often a lack of organizational capacity for evaluation of such programs (Miller et al., 2017). This makes drawing conclusions about their effectiveness and of which particular components are most important challenging.

A small but growing evidence base shows mentorship and peer support programs are valued and shows statistically significant associations with certain caregiver and child/youth outcomes. Mentorship programs have been shown to enhance foster caregiver wellbeing and resilience and increase knowledge and skills (Pope et al., 2020). They have also been shown to increase protective factors among grandmother caregivers in kinship programs (Pandey et al., 2019). Caregivers report that mentors and peers help meet their emotional needs through the sharing of lived experience. They appreciate support from someone who can relate to what they are going through, validate their feelings, and help reduce isolation (Fergeus et al., 2018; Lewis et al., 2022; Mallette et al., 2020). Mentorship and peer support can mitigate a range of challenges faced by caregivers such as coping with grief and loss, setting boundaries, and dealing with changing family dynamics (Pope et al., 2020). Mentors and peers also help to navigate the child welfare system or relationship with the agency, act as role models, and may provide tangible supports such as childcare (Lewis et al., 2022; Pope et al., 2020). They offer caregivers support for needs such as language barriers, emotional support, goal setting, knowing one's rights, and parenting skills.

Mentorship and peer support programs can complement and fill gaps in other services (Pope et al., 2020). Caregivers may feel more comfortable asking questions of a mentor or peer than a caseworker,

as those with first-hand experience are seen as more likely to truly understand the challenges of caregiving and provide non-judgemental support (Mallette et al., 2020). Mentors may also be more readily available than caseworkers (Pope et al., 2022). These supports provide a way to build caregiver capacity outside of trainings, which cannot prepare caregivers for every challenge they will face.

A variety of communication methods may be used in mentorship and peer support programs such as face-to-face meetings, phone calls, texting, and email exchanges. There are advantages and disadvantages to each, with some being more appropriate for certain issues and circumstances than others. What is most effective depends on the needs, comfort, and schedules of the mentee and mentor (Pope et al., 2022). As well, having both routine (e.g., regular contact times) and flexibility in mentorship programs is important (Pope et al., 2022). This reinforces the importance of ensuring there is room for supports to be individualized.

Due to the COVID-19 pandemic, virtual forms of mentorship were provided for caregivers in Alberta, for example phone lines are used as a form of mentorship support for caregivers. In Australia, a service called the Grandparent Adviser Phone Line exists to support caregivers based on their emerging needs. According to a survey of caregivers in Australia, many caregivers were unaware of this service (72% of those surveyed) and only 7% of those surveyed used the service. It was also found that kinship caregivers were more aware of the service than foster caregivers (Qu, Lahausse, & Carson, 2018). Similar programs exist in the United States and across Canada. For example, in California, a foster parent advice line exists to assist foster caregivers with their needs as well as translation services (Family Paths, 2022).

Miller et al. (2017) identified the following components for formal mentorship programs to be successful:

- Intentional recruitment of seasoned caregivers to be mentors
- Pay or incentives for mentors
- Intentional matching of mentors and mentees
- Program structures conducive to building strong relationships between mentor and mentee. For example, having initial introductions facilitated by program staff and opportunities to interact before being formally matched.
- Effective communication between mentors and mentees
- Training and supports for mentors
- Program evaluation

NETWORKING

Networking supports caregivers' social, emotional, and basic needs. It can be useful to understand what conditions are needed to create supportive community networks.

Networking involves hosting events or activities that provide opportunities for kinship and foster caregivers to engage and connect with one another and to connect with cultural and natural supports. According to the current state survey, some of the benefits of providing supports for networking include:

- · Connecting caregivers to cultural events as well as specific members within communities
- · Helping caregivers access resources
- · Finding individuals to help with basic needs such as transportation
- · Finding peers and informal supports

The ways in which networking occurs can be through organized events, as part of a caseworker's involvement, informal gatherings, or can even organically occur during another organized activity such as respite.

While there is a lack of evidence from the literature around outcomes of networking activities and events, there is evidence for social support in general, which networking aims to strengthen. Having a support network has been shown to: reduce caregiver stress (Lin, 2018; Sharda et al., 2019; Richardson et al. 2018); enhance wellbeing and resiliency (Sharda et al., 2019); increase confidence and satisfaction, and in turn, support placement stability (Cooley et al., 2019).

Having both strong informal social supports (e.g., family, friends, relatives, neighbours, other caregivers) and formal supports is considered essential for foster and kinship caregivers. Familial involvement, understanding, and support is an important need. Many caregivers rank their spouses and families as their biggest supports (Barnett et al., 2018; Mallette et al., 2020; Miller & Donohue-Dioh, 2017). Kinship caregivers in particular may rely on social supports more than foster caregivers (Lin, 2018). Foster mothers who experience high levels of helpfulness from their support systems are more likely to report lower levels of parenting stress and higher coparenting relationship quality (Richardson et al., 2018). In turn, a strong coparenting relationship can enhance placement stability and foster caregiver retention (Richardson et al., 2018).

There are ways formal systems can help bolster informal social supports. For example, helping parents identify informal social supports in their lives (Cooley et al., 2019; Mallette et al., 2020), providing training on healthy relationships (Child Welfare Information Gateway, 2018; Lewis, 2022; Oliver, 2020; Redlich Horwitz Foundation, 2018), and training on how to build a support network (Mallette et al., 2020). The Redlich Horwitz Foundation (2018) highlights creating supportive community networks around caregivers as a 'best practice'. Such networks can help to provide caregivers with emotional support as well as resource needs (Redlich Horwitz Foundation, 2018).

RECOGNITION

Formal and informal recognition fulfills the need to demonstrate appreciation for caregivers. Yet it is difficult to know whether recognition activities have a positive impact on caregivers.

Recognition involves hosting events or activities that demonstrate appreciation for foster and kinship caregivers. Supports related to recognition were found only in jurisdictional scan and current state survey results. The lack of evidence from the literature review signals that this activity might be highly specific to the priorities of government and agencies. As well, recognition is an activity that is typically found in business research, and perhaps it has not yet been studied in the foster and kinship caregiver domain.

According to respondents of the current state survey, the purpose of recognition for caregivers was not clearly stated. This was also the case across the agencies in the jurisdictional scan. There were details about how recognition was implemented, which included:

- Annual appreciation events
- Service awards
- Informal appreciation (phone calls, messages)
- Gifts
- Citation events

Recognition was difficult to achieve due to the COVID-19 pandemic and re-allocation of funds. It was expressed that recognition is also not balanced across foster and kinship caregiver, with emphasis placed more on recognizing foster caregivers. It may be that this is the case because of retention rates and could be further explored using administrative data collected by agencies and government. Another opportunity within recognition is to better understand how recognition meets the needs of caregivers, and how caregivers prefer to be recognized.

DISPUTE RESOLUTION

Dispute resolution provides caregivers a safe and fair process to resolve conflicts. Next steps will be to gather information about dispute resolution from caregivers and service providers in order to better plan where supports can be put in place to prevent conflicts.

Supports for dispute resolution were also only found in the current state survey and the jurisdictional scan. It is common for organizations and government to have specific procedures outlined to resolve conflicts, and this may be a reason why there was a lack of literature on dispute resolution for foster and kinship caregivers.

The needs of caregivers are not well known when it comes to dispute resolution, other than the need for conflict management. It can be inferred however, that a conflict does not always require just administrative support, it also can be emotionally distressing for the family, and require crisis services such as respite or counselling. This is evident from the types of services listed by providers under dispute resolution, which included:

- Crisis response
- Family supports
- 24/7 phone lines
- Children's Services Handbook
- Elder supports

There is more clarity on how dispute resolution is implemented in Alberta. The process starts with a conflict or issue identified, and the options to address the conflict are typically informal and formal. There are also resources available for caregivers to help them navigate the dispute resolution process. Usually, the caseworker or an agency staff provides guidance and support to the caregiver during this process. The dispute resolution services offered in Alberta for caregivers are:

- Mediation

- Appeals
- Third-party reviews
- Referrals to the Office of the Child and Youth Advocate
- Informal dispute resolution
- Administrative review

An example of note from the jurisdictional scan comes from the province of Quebec. Foster families have access to legal and judicious services such as legal advice, representation of members during any administrative review processes or contract negotiations, and assistance by a lawyer or union representative when an incident involves another (Fédération des familles d'accueil et ressources intermédiaires du Québec, 2017). It is unknown whether the services are still offered to foster or kinship caregivers residing in Quebec.

ADVOCACY

Advocacy supports target the individual-, family-, and system-levels of foster and kinship caregiving. It will be important to understand how service providers use existing structures and how they can be leveraged to better anticipate the needs of caregivers.

Among service providers, the goals of advocacy are to better the experiences of caregivers, such as connecting them with cultural needs as well as basic and emotional needs. For example, organizations will advocate for more visits with biological parents and siblings, permanency planning, and setting healthy boundaries. Among contracted agencies, a goal of advocacy is also to ensure that policies and priorities for foster and kinship caregivers are in the best interest of the children, youth, and families involved. For example, agencies will promote increased access for foster and kinship caregivers for cultural connections for the child or youth. As well, agencies provide advocacy for system-level change such as consistency between agency and regional supports, compensation reviews, and transparency of communication to agencies and caregivers.

Regarding implementation, it is apparent that caseworkers and support workers are the first point of contact if a caregiver has a particular need. The caseworker can then refer a caregiver to services and resources according to the need. Based on the jurisdictional scan as well as respondents from the current state survey, caregivers typically access advocacy supports for:

- Assistance with grief and loss
- Trauma response support
- Counselling
- Legal support
- System navigation (e.g., understanding policies, resources available)

Emerging Supports

MENTAL HEALTH

There are a range of mental health concerns that are unique to foster and kinship caregivers. Although individualized mental health supports are available to foster and

kinship caregivers, there is a need for more integrated, family-focused mental health supports. Moving forward, we will ask questions about how best to serve both individual and family mental health needs of foster and kinship caregivers.

The literature suggests there is need among foster and kinship caregivers and families for mental health supports and services such as counselling (Child Welfare Information Gateway, 2018; Fergeus et al., 2018; Generations United, 2017; Jordan et al., 2020; Leake et al., 2019; Mallette et al., 2020; Riehl & Shuman, 2019), and crisis intervention (Redlich Horwitz Foundation, 2018). Foster and kinship caregivers experience emotional and mental challenges unique from other parents and caregivers. For example, foster caregivers may experience emotional distress, grief, loss, depression, or trauma after placement or reunification of a foster child (Mallette et al., 2020; Pope et al., 2020; Riehl & Shuman, 2019). Kinship caregivers may experience anger, fear, guilt, or shame at taking on responsibility for a family relative's child (Riehl & Shuman, 2019). They may also experience loyalty conflicts (Generations United, 2017). While mental health services are identified as an important need, there is a lack of literature on their effectiveness.

The mental health and wellbeing of the caregiver is related to that of the child (Fergeus et al., 2018; Leake et al., 2019). One study found caregivers who have children with mental health needs have significantly higher levels of caregiver strain than caregivers of children without, and that having a child with mental health needs was the strongest predictor of caregiver strain (Leake et al., 2019). Mental health challenges and trauma are prevalent among children and youth in the child intervention system; however, caregivers report a lack of mental health service providers who understand the needs of children in care (Barnett et al., 2018).

According to a survey completed in Australia, *counselling and psychologist services* were the most commonly reported service need of foster and kinship caregivers, followed by support staff from government, respite care, and support teams from non-government agencies (Qu, Lahausse, & Carson, 2018). The survey completed in Australia likely has parallels with the needs of caregivers in Canada as well as Alberta, but further research is needed to validate these findings.

An exemplar model for mental health supports for caregivers is Alberta-based service program that provides brief intervention supports for caregivers by helping them to practice developmentally responsive caregiving and responding to trauma, loss, and grief. Some of the short-term outcomes identified as part of the program are:

- · Caregivers are more attuned in their relationship with their child
- · Caregivers have increased understanding of trauma, grief, and loss
- · Caregivers have a better understanding of their own response to a challenging situation
- · Caregivers have increased problem solving skills

There are also challenges and barriers in accessing the services that do exist (Barnett et al., 2018; Fergeus et al., 2018; Jordan et al., 2020). Access to quality, trauma-informed mental health services by providers competent in specific mental health challenges faced by foster and kinship families can mitigate caregiver strain and burnout and may help improve retention (Leake et al., 2019). Mental

health promotion and early intervention approaches including support in identifying mental health concerns for children may also be needed (Fergeus et al., 2018).

SYSTEM NAVIGATION

System navigation supports have the potential to enhance the caregiver experience and help caregivers to feel better supported by service providers. To further understand the benefits and challenges of system navigation, we will try to examine processes that work best for caregivers. We will also look at the degree to which collaboration is happening among sectors, to further eliminate caregiver needs and create efficiency.

Information, connection to resources, and support with navigating the child welfare system are key needs of caregivers. While these may be part of the caseworker's role, in some contexts, additional support is needed. In the United States, kinship navigator programs emerged in response to a lack of supports specifically for kinship caregivers. Such programs provide a single entry point to connect caregivers to a comprehensive array of flexible supports and services based on the family's needs. Supports may include information about navigating the child welfare system, connection to resources, assistance accessing basic needs items and benefits, referrals, and other kinds of practical supports beyond what is provided by the caseworker (Child Welfare Information Gateway, 2018; Generations United, 2017). These programs may also include peer support groups, legal services, and others. Kinship navigator programs have been shown to reduce caregiver needs, enhance placement stability and permanence, and increase safety (Schmidt & Treinan, 2017). For kinship navigator programs to be considered a "promising practice" by the Family First Prevention Services Act, they must include a combination of: training; support groups; referral to social, behavioural, or health services; and case management.

In **British Columbia**, Hollyburn Family Services provides a unique coordinated service delivery program that allows a caregiver to have a team consisting of a resource worker, a social worker, and in-home support worker (Hollyburn Family Services 2022).

These types of collaborative opportunities can help to reduce the need for service navigation within other supplementary services such as advocacy and training.

LEGAL SUPPORT

Foster and kinship caregivers can face legal challenges. Discussion with the project team will be required to decide whether this is an area of further exploration.

Legal support is identified as a common need and an important support in the literature (Miller & Donohue-Dioh, 2017). However, there are limited studies on its actual effectiveness. One study found formal kinship caregivers ranked legal supports as the highest need (Miller & Donohue-Dioh, 2017). Specific needs include the need to be heard in court, copies of legal documents about the

Some agencies in Ontario offer foster caregivers the opportunity to be enrolled in the employee and family assistance program, with 100% coverage of fees.

Family & Children's Services of the Waterloo Region (2022)

child or youth, and access to affordable legal representation (Miller & Donohue-Dioh, 2017).

Comparing Supports for Foster vs. Kinship Caregivers

There are differences between foster and kinship caregivers, such as socioeconomic status, ethnicity, education, mental health needs, and age. What is not clear is whether there are different support needs between foster and kinship caregivers, and if the effectiveness of supports differ.

Foster and kinship caregivers typically have different demographic characteristics, encounter different kinds of caregiving challenges, and have different needs (Kaasbøll et al., 2019; Mallette et al., 2020; Riehl et al., 2019; Schmidt et al., 2017 Schoemaker, 2020; Wu et al., 2020). For example, kinship caregivers often have lower socioeconomic status and lower education (Cuddeback, 2004 as cited in Wu et al., 2020). They report greater stress and mental health challenges (Harding et al., 2020). Since caregiving responsibilities are often unanticipated, they feel less prepared (Child Welfare Information Gateway, 2018; Fergeus et al., 2018). Yet kinship caregivers typically receive less training and other supports than foster caregivers (Harding et al., 2020; Jordan et al., 2020). The literature suggests it is important to have trainings specific to kinship caregiving to address their unique circumstances (Child Welfare Information Gateway, 2018; Miller & Donohue-Dioh, 2017; Wu et al., 2020). Supports may also need to be further tailored to meet the needs of different kinds of kinship caregivers, such as older grandparents (Pandey et al., 2019). However, no strong conclusions could be made about whether certain types of supports are more effective for foster or kinship caregivers.

Key characteristics of effective supports services include being trauma-informed, competent in foster and kinship care, family-focused, relationship-based, strengths-based, culturally responsive, flexible and accessible (AdoptUSKids, 2015). Involving community members and caregivers in planning, implementation, and evaluation of support programs can help to ensure they meet caregivers' needs (Annie E. Casey Foundation, 2022; Generations United, 2017). Supports can be made multi-purpose, for example, providing opportunities for education and resources during support groups (Generations United, 2017). To enable caregivers to take advantage of supports such as training and support groups, it is important to offer childcare and facilitated programming for children and youth, transportation, and meals (Generations United, 2017; Riehl & Shuman, 2019). It is also important for programs to be facilitated by those with social service experience and lived experience (Generations United, 2017).

Which caregivers do Alberta service providers offer supplemental supports to?
· **11%** Kinship caregivers
· **21%** Foster caregivers
· **64%** Both

For supports to be effective, it is essential for caregivers to be informed about what services are offered and how to utilize them (Mallette et al., 2020; Randle et al., 2018). A study found whether resources were considered by caregivers as supportive depended on how knowledgeable the service providers were about caregiving (Mallette et al., 2020). Supports must also be adequately funded.

Implications and Considerations for Evaluation

Based on the findings presented, there are implications and considerations for the evaluation phase of the project. The implications and considerations below are at a broader level than the individual findings above.

1. There is a large array of potential supports for caregivers beyond the six identified as a starting point in the initial proposal. As such, when evaluating the needs of caregivers, it will be important to give caregivers an opportunity to consider supports beyond the initial six identified.

2. Given that the needs of foster and kinship caregivers can vary widely, it's important to understand what their needs are and what they consider to be the most impactful supports. If certain supports aren't seen as valuable, why? What is it about them? What barriers exist? For example, are there issues with the way they were implemented? Has there been a lack of communication around how to use them? Are caregivers not supported enough to be able to take advantage of them (e.g., lack of childcare)? Do supports lack relevance/specificity to foster and kinship challenges? Or are the supports inherently not useful?

3. There is a lack of research on the *implementation of supports* by agencies and government directed services. Clarifying how the need for a particular support type is determined, the role that collaboration plays, and the barriers and facilitators in providing these supports will help determine what overall needs exist and lead to recommendations.

4. Although the purpose the current state survey was to better understand supplemental services beyond delegated caregiver roles, it was apparent from the results that supplemental services overlap with caseworker services for foster and kinship caregivers in Alberta. It is encouraged to evaluate caregiver satisfaction with support workers/caseworkers regarding supplemental supports. Consider asking a question about this and asking about where the caseworker is most supportive vs. where they are the least supportive.

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Appendix A: Literature Search Strategy

Purpose: To examine evidence-based practices, including best, leading, promising, and emerging practices for caregiver support in foster and kinship care.

A portion of the literature review will build on ALIGN's kinship redesign literature review completed in October 2021. It will include handpicking of academic articles specifically referenced in grey literature.

Guiding Questions

1. What supplemental supports do foster and kinship caregivers need?
2. Of those types, what are the best, leading, emerging practices?
3. Are there gaps in the literature around what the best practices are, or lack of evaluation?

A rapid review style methodology will be used to ensure quality evidence and timely completion of the literature review.

Search Strategy for Academic and Grey Literature

The search strategy scope focuses on outlining the evidence behind best, leading, promising, and emerging practices for caregiver support in foster and kinship care. The search term combinations will be used in Google to retrieve leading grey literature as well as in a database search for academic literature in the following academic databases:

- Google Scholar
- Academic Search Complete

Care term	Population	Intervention	Sector	Study Type
Kinship	Caregiver	Support	Child intervention	Evaluation
Foster	Carer	Service	Child welfare	
	Family	Program		
	Families	Resource		
	Parent	Intervention		
		Training		
		Mentorship		
		Advocacy		
		Dispute Resolution		
		Recognition		
		Networking		

Search Combinations

- Care term + population + intervention
- Care term + population + intervention + sector
- Care term + population + intervention + sector + study type

Search combinations will be used until saturation in the literature retrieved is reached

Search Limitations

- Review first 4 pages of database results
- Scholarly peer-reviewed
- Grey literature
- English language only
- Articles from 2017-2022

Inclusion/Exclusion Criteria

Inclusion Criteria:

- Supports and services for foster and kinship caregivers

Exclusion Criteria:

- Outside of foster and kinship care
- Informal kinship
- Supports for children and youth in foster and kinship care
- Therapeutic foster care

Appendix B: Jurisdictional Scan Results

Table 1. Comparison of Supplemental Supports across Canadian, American, and Australian Jurisdictions.

	AB	BC	YT	NT	SK	NU	MB	ON	QC	NL	NB	PEI	NS	USA	AUS
Training	X	X		X	X	X	X	X	X	X	X			X	X
Advocacy	X	X		X	X		X		X	X				X	X
Dispute Resolution	X	X			X				X						
Mentorship	X				X		X	X		X				X	X
Networking	X	X		X	X		X	X	X			X	X	X	X
Recognition	X	X		X			X	X						X	X
Financial Support	X			X											
Respite Care	X							X							X
System Navigation	X							X	X					X	X
Legal Support	X			X			X		X						
Cultural Connections	X	X	X					X							X
24-7 Supports	X							X						X	
Mental Health Supports	X	X						X						X	X

Appendix C: Survey

About this Survey

This survey is for organizations providing supplemental services for foster and/or kinship caregivers across Alberta. Organizations include *government offices, contracted or grant receiving agencies, and Delegated First Nation Agency (DFNA)*.

PolicyWise for Children & Families is conducting this survey on behalf of Children's Services. The purpose of this survey is to know more about supplemental services (beyond delegated caseworker roles) offered to foster and kinship caregivers across Alberta.

Individual responses will remain confidential and will only be shared with the project team which is comprised of: PolicyWise for Children & Families and Children's Services. The summarized responses will be used to establish the current state of supplemental services for foster and kinship caregivers in Alberta.

Instructions:

Please fill out one survey per government office, agency, or DFNA. If you would like to get input from your staff, please ask for their input while you are filling out the survey.

Who should complete this survey?

Please respond to this survey if you:

- represent a government office, agency, or DFNA that directly provides supplemental services foster and/or kinship caregivers, and
- are familiar with all of the programs offered by your government office, agency, or DFNA.

If you have any questions about the survey, please contact info@policywise.com

The first six questions are to help PolicyWise staff organize survey responses.
- Questions 1-4 are to ensure that eligible government offices, agencies, and DFNAs are considered
– Question 5 allows us to sort responses by region.
- Questions 6 allow us to sort responses by kinship and foster caregiver supplemental services

* 1. What is your name?

☐

2. Are you responding as a...

☐ Children's Services contracted or grant receiving agency

☐ Delegated First Nation Agency

☐ Government regional office

☐ Government local office

Other (please specify)

☐

3. What is the name of your **government office or agency**?

☐

4. If applicable, what is the name of your **DFNA** (select from list)?
   A. Akamihk Child and Family Services Society (Montana First Nation)
   B. Asikiw Mostos O'Pikinawasiwin Society (Louis Bull Tribe)
   C. Athabasca Tribal Council Child and Family Services
   D. Bigstone Cree Social Services Society
   E. Blood Tribe Child Protection Services
   F. Kasohkowew Child Wellness Society
   G. KTC Child and Family Services
   H. Lesser Slave Indian Regional Council
   I. Little Red River Cree Nation Mamawi Awasis Society
   J. Mamowe Opikihawasowin Tribal Chief Child and Family Services West Society
   K. North Peace Tribal Council
   L. Piikani Child and Family Services
   M. Saddle Lake – Wah-Koh-To-Win Child Care Society
   N. Siksika Family Services Corporation
   O. Siksika Family Services Corporation off-reserve office
   P. Stoney Nakoda Child and Family Services Society
   Q. Tribal Chief Child and Family Services (East)
   R. Tsuut'ina Nation Child and Family Services (Isgak'a K'anano-na Nanitin-na) Society
   S. Western Cree Tribal Council Child, Youth and Family Enhancement

Agency
T.   Whitefish Lake First Nation #459 Child and Family Services Society

Other (please specify)

[   ]

* 5. Where is your government office, agency, or DFNA located? Please provide the first 3 digits of your postal code.

[   ]

6. Does your government office, agency, or DFNA provide support services to:

☐ Foster caregivers

☐ Kinship caregivers

☐ Both

☐ Not applicable (please specify)

[   ]

What caregiver supplemental services do you offer?
The following questions ask about the various supplemental services that you offer to foster and/or kinship caregivers (beyond delegated caseworker roles). Examples of supplemental services include: mentorship, advocacy, caregiver training, recognition, networking opportunities, and dispute or conflict resolution. Where applicable, please provide some details about your services, programs, or activities. If your government office, agency, or DFNA does not have a supplemental service listed in the survey, please tell us about which government offices, agencies, or DFNAs you may refer caregivers to for that service.

At the end of the survey, you will have an opportunity to tell us about any foster/kinship caregiver supplemental services you provide that were not already listed in the survey.

Caregiver Training & Advocacy
Please tell us about your **caregiver training and advocacy** services for caregivers.

Caregiver Training involves self-guided or instructor-guided resources and activities that help caregivers increase their skills, confidence, and knowledge in caring for children and youth. Specifically, we are interested in supplemental training **beyond** provincial training for caregivers (pre-service & in service). For example, Indigenous Awareness training for caregivers.

7. If you provide additional **caregiver training** for foster and kinship caregivers, please provide the names of each caregiver training program.

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8. For the **caregiver training** programs offered, please describe the purpose of each training program.

For example, what are the learning outcomes of each program?

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9. If you **do not provide caregiver training**, please list the government offices, agencies, or DFNAs that you refer caregivers to for caregiver training support (e.g., AFKA Indigenous Cultural Teachings, ALIGN training, etc..)

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Advocacy involves promoting the rights and needs of caregivers on behalf of caregivers. It can happen in the form of one-to-one support, formal programs, reports, or campaigns. For example, supporting a caregiver to access specific supports for their child, or releasing a statement on behalf of foster and kinship caregivers.

10. If you provide **advocacy** for foster and kinship caregivers**,** please tell us about the activities you do related to advocacy.

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11. If you **do not provide advocacy**, please list the government offices, agencies, and DFNAs that you refer caregivers to for advocacy support (e.g., Office of the Child and Youth Advocate, etc..)

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Dispute or Conflict Resolution and Mentorship

Please tell us about your dispute or conflict resolution and mentorship supplemental services for caregivers.

Dispute or conflict resolution involves working with foster and kinship caregivers to resolve issues related to individuals involved in the caregiver-child relationship.

12. If you provide **dispute or conflict resolution** for foster and kinship caregivers**,** please provide the name(s) of the dispute or conflict resolution program(s) or activities.

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13. Please describe the **dispute or conflict resolution** programs or activities offered to foster and kinship caregivers.

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14. If you **do not provide dispute or conflict resolution**, please list the government offices, agencies, or DFNAs that you refer caregivers to for dispute resolution support (e.g., AFKA

conflict resolution support, etc..)

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Mentorship can be a program or opportunity that offers peer support, relationship building, & connection to other caregivers.

15. If you provide **mentorship** for foster and kinship caregivers, please provide the name(s) of the mentorship programs you provide.

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16. For the **mentorship** programs offered, please describe the purpose of each of the programs. *For example, what are your hopes or expectations for caregivers who participate in your mentorship programs?*

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17. If you **do not provide mentorship,** please list the government offices, agencies, and DFNAs that you refer caregivers to for mentorship support (e.g., AFKA Mentorship Program, etc..)

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Recognition and Networking

Please tell us about your recognition and networking services for caregivers.

Networking involves hosting events or activities that provide opportunities for foster and kinship caregivers to engage and connect with one another and to connect with cultural and natural supports. For example, hosting a virtual 'get to know you' event for caregivers, or the

Mahmawi-atoskiwin program, which connects caregivers to cultural and natural supports.

18. If you provide **networking opportunities** for foster and kinship caregivers, please tell us about the activities you do related to networking

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19. If you **do not provide networking opportunities**, please list the government offices, agencies, or DFNAs that you refer caregivers to for networking opportunities (e.g., Central Alberta Caregiver Council networking events, etc..)

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Recognition involves hosting events or activities that demonstrate appreciation for foster and kinship caregivers. For example, hosting an appreciation week event for caregivers.

20. If you provide **recognition** for foster and kinship caregivers, please tell us about the activities you do related to recognition.

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21. If you **do not have caregiver recognition opportunities**, please list the government offices, agencies, or DFNAs that you would typically consult to ensure caregivers have recognition (e.g., AFKA, etc..)

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22. ***We would like to hear from you!*** What foster/kinship caregiver support services do you provide that were not already mentioned?