

MAKING A DIFFERENCE: THE ROLE OF FAMILY SERVICES WORKING WITH FAMILIES WHERE GRANDPARENTS ARE RAISING GRANDCHILDREN

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INTRODUCTION

Grandparents have always played an important part in the lives of children – as child minders, role models, keepers of family wisdom and traditions, as providers of fun, presents and outings, as a buffer between children and their parents, to name just a few. In the age of the nuclear family and increasing social mobility, it could be said that for many grandparents this presence has lessened. However for increasing numbers of grandparents a new role – that of primary carer for their grandchildren – is taking over and subsuming traditional family relationships. For these grandparents the whole world can be turned upside down, and while governments and policy makers, and the families themselves, may consider it only natural that children should be cared for by family members, there is still relatively little understanding of the impact this has, on all concerned, and the level of support that may be needed to make it work. Big questions still remain about not just the unique kinds of supports needed by grandparents who are carers, but their entitlement to existing supports that would routinely be offered to others caring for children – to foster carers, for example, and to parents themselves.

Children come in to the care of their grandparents under different circumstances but they all end in crisis and involve trauma to children and grandparents alike – the death of the parents; mental illness of a parent; child abuse and neglect; and the big one, parental drug abuse. Sometimes these crises overlap, for example a child may have been removed by the statutory authority because of neglect due to drug abuse or mental illness. One of the problems we face in addressing this new social scenario is the lack of available data to define its scope. We simply do not know how many grandparents are caring for their grandchildren on a regular, full or part-time basis.

In 2003 the Council on the Ageing (COTA) produced an extended report called *Grandparents Raising Grandchildren*, the end result of a project funded by the Commonwealth Government's Child Abuse Prevention Program.² It was a timely, possibly overdue, look at the role played by grandparents as carers of their grandchildren, either permanently or for extended periods of time, which examined the impact of the caring role on the lives and well being of both the children and the grandparents; the kinds of supports available or needing to be provided; and the financial and legal issues that arise.

ABS statistics from the same year had estimated that there were 22,500 grandparent headed families supporting 31,100 children aged 0-17. Around two thirds of the grandparents relied on government benefits or pensions as their primary source of income, 47% were lone grandparents (93% of these were female), and most were over the age of 55. The total numbers of grandparent households are likely to be seriously under reported.³ Around 46% of grandparent households are in regional areas such as the Central Coast.⁴ At the launch of the Grandparents Raising Grandchildren website in 2006, the estimated number was put at around 30,000 households across Australia.⁵

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² *Grandparents Raising Grandchildren*, A Report of the project commissioned by The Hon. Larry Anthony, Minister for Children & Youth Affairs and carried out by COTA National Seniors July 2003

³ Cass, Bettina, Presentation to the Grandparents Forum held by COTA, September 2008

⁴ Ibid

⁵ Sydney Children's Foundation, Media Release re launching of the raisinggrandchildren website <<http://www.raisinggrandchildren.com.au>>, July 19, 2006

One of the things we do know is that, in New South Wales, the number of children coming to the attention of the child protection system is increasing at a dramatic rate and the numbers of children entering, and staying in, out of home care, is escalating dramatically. Moreover, in NSW more children in the out of home care system are placed in relative or kinship care than in any other state. As at June 2008 there was a total of 14,667 children and young people in the NSW Out of Home Care system (a 58.2% increase over the figure for 2002) and 51.2% were placed with relative or kin carers. For Aboriginal children and young people, who make up around a third of the children in care, the percentage placed in kinship care is much higher at 62.8%. Two thirds of the children placed in kinship care are on care orders.⁶ Alarming, the New South Wales Budget Papers for 2009-10 give a revised estimate of 16,700 children in out of home care for 2008-09, rising to 18,700 in 2009-10.⁷ This is despite the recent Inquiry into Child Protection in this state under Justice James Wood and the allocation of new funding to implement his recommendations under the banner of "Keep Them Safe".

Of course many children never come to the attention of child protection system because grandparents step in voluntarily; hence we will never really know the full extent of grandparent care.

The COTA report identified six areas that can have huge impact on grandparent households. These were financial impacts; legal issues, including custody disputes; parenting issues; health and well being of the grandparents; health and well being of the children; and the overall lack of support to undertake this new role.⁸

When the staff and management committee of Gosford Family Support Service read the COTA report, it immediately resonated. They saw many families every year in which grandparents were struggling with their newfound responsibilities as carers - the dramatic impact on their own lives, new and often difficult relationships with both their grandchildren and their own children, the financial strain and the all consuming nature of dealing with the legal system and government agencies at such a stressful time. Workers also recognised that the numbers were growing - they work in the region of NSW with the second highest number of children in out of home care, 2316 children as at June 2007. At the time of the COTA report, Gosford Family Support Service had 60 grandparent headed families on their books. This had almost doubled to 115 by the end of 2008, with referrals coming at the rate of two per fortnight.

WHY FAMILY SUPPORT?

What family workers at Gosford recognised was the complexity of the issues faced by grandparents now parenting for the second time around, and the fact that they did not have a place in the care system that offered them information, support and advocacy to negotiate the minefield of legal and bureaucratic mechanisms they are required to deal with on a regular basis. While the care system in NSW is heavily predicated on family placement, it also takes it very much for granted and there is little understanding of the severe emotional turmoil attached to care by grandparents. For most community services case workers finding a placement with a grandparent is the happy end, where for the grandparent it is just the beginning of what can be a very rocky road. Few would dispute that family is a preferred placement option and that the outcomes for children are likely to be improved when cared for by those who already love and know them. It is also often the only alternative to institutionalisation where large groups of siblings are involved if the children are to be able to stay together.⁹ However it is not necessarily an easy option, or a secure and stable one, if left unsupported.

The following case studies have been included to demonstrate the difficulties faced by grandparents who either have, or seek to have, the care of their grandchildren. In particular, the case studies highlight the stress of battling the legal system, in a range of court settings, and the financial strain this places on carers at the end of, or past the end of, their working lives.

⁶ The Hon James Wood AO, QC, Report of the Special Commission of Inquiry into Child Protection Services in NSW, Vol 2, November 2008, pp597-606

⁷ New South Wales, Budget Papers 2009-10, Volume 3, 6-14

⁸ Grandparents Raising Grandchildren, Executive Summary This report provides an excellent summary of these issues and is available on the website: <<http://www.raisinggrandchildren.com.au>>

⁹ Institutional care has been almost phased out in NSW with only 309 children in this form of care at June 2007.

RHONDA AND TONY'S STORY

Rhonda and Tony's daughter, Kelly, was an addict whom they had tried to help without success. The drugs and an abusive partner had always intervened. At the age of 30 Kelly gave birth to a daughter, Amber, and Rhonda and Tony realised they needed to build in as many protections for Amber as they could, minding her whenever and for as long as they could.

Eventually DoCS intervened threatening Kelly with the removal of Amber unless she entered rehab, a refuge, or moved in with her parents. At this point no-one had consulted Rhonda and Tony about these options. After agreeing to the last option, Kelly moved in with her parents, and out again with Amber, before 24 hours was up. At this point DoCS removed Amber from Kelly's care and began court proceedings. Kelly decided to contest the care application and was able to access Legal Aid to do so. This left Rhonda and Tony with no option but to go to court with legal representation but finding someone appropriate was not easy.

The court process was not only confusing – they often felt that their presence was superfluous and they were only there to bolster the numbers for DoCS – but expensive, and they were the only ones paying. After many hearings Amber was placed in Rhonda and Tony's care on an 18 year order but in the meantime Kelly had given birth to another daughter, Jodi. Jodi was removed at four months and placed in her grandparents care but the two cases went through court separately, requiring Rhonda and Tony to pay two sets of legal counsel and two sets of legal expenses.

In subsequent years Kelly gave birth to two sons Harry and Sam, but it took 54 reports and two more years for the children to be removed. Rhonda and Tony were back in court and it took numerous hearings to have all four cases joined together. When their daughter sought to increase contact, the tortuous legal process continued.

What concerned Rhonda and Tony most in all this was the failure of the system - one that wanted, indeed expected, them to take the children - to support them, and the children, through the process. DoCS behaved inconsistently in its removal processes putting Harry and Sam at risk, the legal system drained them of their financial resources, and they felt they had not been treated with respect by any of the agencies involved.

CHERYL, SARAH AND CONNOR'S STORY

Cheryl is a lone grandmother caring for her two much loved grandchildren, Sarah and Connor. However in rescuing the children from her daughter, a drug addict who has spent time in jail, and their two fathers, both of whom have also spent time in jail, Cheryl has lost all of her superannuation and her shares – she just managed to hang on to her family home.

After several years of intermittent care as the parents went in and out of jail, Cheryl was forced to resort to the Family Court to gain care of Sarah but was opposed by her father from jail. The father was supported by Legal Aid. Cheryl finally gained custody of Sarah in 2003.

When her daughter was released from jail she again became pregnant in a new relationship but this time DoCS intervened and Connor was removed at birth, needing detox for addiction to amphetamines.

Connor's father is currently in home detention and Cheryl facilitates his contact with Connor who adores him. Cheryl and the father's mother support weekend access between them, providing meals and support.

However, Cheryl has faced so much uncertainty because the Family Court acts as an open door and she has had to fight for Sarah on a regular basis.

Cheryl has returned to part-time work to support the two children and to be able to pay for Sarah's school fees. She is determined to ensure that Sarah has that continuity in her life. Cheryl now has cancer and is receiving treatment.

DES AND CATE'S STORY

Des and Cate, whose daughter has a mental illness, have spent \$100,000 on legal fees and hearings (they even tried self-representation when their legal representation let them down) over almost four years to secure guardianship of their granddaughter. Des and Cate could not sit around and do nothing while their granddaughter suffered neglect and abuse, but the process of fighting for Sophie became a fight with their daughter and with a judicial system that cannot function without the correct forms and experienced lawyers. The time lost in getting it right was time Sophie spent experiencing further neglect. The drawn out nature of the proceedings, exacerbated by poor legal advice, ignorance of the system, and the ability of their daughter to postpone proceedings seemingly at will, have all contributed to ongoing trauma for Sophie. They have spent their retirement savings – retirement is no longer an option – but what is worse for them is the damage that has been done to their granddaughter while they fought their way through a legal system that seemed stacked against them.

The issue of the Family Court revolving door and the cost to carers seeking the best outcomes for their grandchildren is of huge concern.

Court can become a regular part of life for grandparents, affects every day routines for children and acts, albeit unwittingly, against their best interests. In all of these case studies, the grandparents could have been financially assisted, at least once the findings went in their favour, and proceedings expedited to ensure the wellbeing of the children involved. All proceeded with the encouragement of child welfare departments and/or police, yet in none of these cases were the grandparents able to access Legal Aid and the likelihood is that in the future this will be the norm. The Legal Aid Commission and the Attorney-General in NSW have announced that in 2009, due to poor levels of Commonwealth funding, "Grandparents seeking legal aid, for example for custody disputes, were also affected by a tightening of funding rules which took into account assets such as the family home, meaning many income poor but asset rich people missed out on funding."¹⁰ The fact that jeopardising the assets of grandparent carers also jeopardises security for the children seems not to count.

Once they have children in their care, grandparents still face numerous and complex battles to gain financial support for them, with counsellors and healthcare workers, with Education Departments. This is particularly difficult for those who do not have full parental responsibility for the children.¹¹ The children they are caring for can be difficult – they have suffered abuse or neglect, may have untreated medical conditions, have difficulty adjusting to new surroundings and new schools and must now enter a very different relationship with their grandparents. Many also miss their parents despite the history, and grandparents often struggle to ensure that there is some contact without it damaging the new stability they have brought to the children's lives. After all, the parents are their own children.

In 2005 Gosford Family Support Service was successful in applying for Area Assistance Scheme funding for a two year project to better support families where grandchildren had been placed in the care of their grandparents. They knew that they could offer the kind of professional case work support that was not being offered by government caseworkers, or was not available to children in voluntary care arrangements.

A steering committee was set up with representation from some existing peer support groups and grandparents known to the service. The project aimed to provide coverage across the region – both Wyong and Gosford LGAs – and to allow the existing groups to take some ownership of the project. The steering committee was able to advise on activities for the project that would most benefit the target group. This led to the establishment of parenting groups, and support groups, the running of issue specific workshops (financial issues, "where to go for help") with the family worker also able to provide one on one support as needed.

The role of the family worker has been particularly important, recognising as it does the very real emotional stress faced by families where grandparents and grandchildren have had their lives turned

¹⁰ Sydney Morning Herald, November 5, 2009

¹¹ Where the parents have an intellectual disability, for example, and also reside with the grandparents, or where court cases and parenting orders have not yet been finalised.

upside down. For the grandparents, relationships with their own children are usually fraught and sometimes destroyed, and the children who come in to the grandparents care often need a variety of services that are difficult to organise and access. Having a worker who can guide them through the legal, health or social services system, advocate for the families with schools and other services, make the links for them with government agencies, all has a huge impact on the family's ability to cope.

Through this project, Gosford Family Support Service has also been able to recognise the high level of disconnection and isolation faced by grandparents when they take on their caring role. Friends fall by the wayside, they don't have much time for social activities or anyone to mind the children for time out, health is often a casualty, and they can feel very alone. For these reasons, respite and social events for families have become an integral part of the project.

One of the best and most appreciated activities is the camp. This has been run as a means of bringing grandparent families on the Central Coast together, to provide respite for the carers over a weekend, and to provide fun activities (both separately and together) for grandparents and children. The camp is expensive to run because it aims to give the grandparents as much respite as possible and this means providing a lot of child care. Workers are also needed so that grandparents can come and debrief and be supported if they feel the need. It is clear that they also come to rely on each other – they get to know each other's stories and can provide a willing ear or friendly advice based on their own experiences. Just being able to talk to someone else who understands their situation is a huge relief for grandparents and for the children.

At the camp held in November 2008, grandparents made the following comments about what the camp meant to them:

"The biggest thing the children get is a sense that they are not the only ones." (Sandra)

"I have freedom". (Cheryl is grandmother of a child with a disability. Respite for the granddaughter is organised six months in advance so Cheryl can attend camp)

"When you hear the other stories – and there are some terrible ones – you don't feel so bad."

"The biggest thing is that so much care, commitment and love have gone in to making this happen."

"Not having to cook a meal for seven people for a whole weekend!"

Many of the grandparents who attended the 2008 camp were looking after three, four and five children. They desperately needed respite from their routines of ferrying children around to different activities and sporting venues; cooking healthy meals for large households at a time in life when they were starting to feel like not cooking much at all; dealing with the day to day relationships in complicated family situations, including disputes between half-siblings and disputes with their own children; and worrying about the children who are still in their parents' care.

One family at the camp, though, was extraordinary – the grandparents were caring for seven children, one of whom was not their grandchild but a half-sibling of the younger three.

RICHARD AND SANDRA'S STORY

Richard and Sandra's son became a drug addict at around the age of 16 and by 21 was the father of two children. By the time he went to jail he had three boys who lived with their mother, also an addict. When their mother overdosed, Richard and Sandra took the boys voluntarily for three months to allow their son to sort things out. When this failed and DoCS moved in, Richard and Sandra were given custody within 24 hours.

They tried to keep in touch with their son to maintain contact for the children, but a loss of trust resulted in contact being broken. They lost touch for around six years, only to discover that their son had fathered another two children with a new partner and the new partner had a son by a previous relationship. These three younger boys had been taken in to foster care when the parents went in to rehab. Richard and Sandra decided to take on the three younger boys as well so that all of the children could be together and with their family. They have always made it clear to their son that they would support him to get the children back if he could hold down a job and provide a home for them. During this time another baby was born, highly methadone dependent. She was immediately

removed and placed with the grandparents. Richard and Sandra, now well in to their fifties, were suddenly raising seven young children.

Richard and Sandra are adamant that they are financially okay – they receive the foster care allowance and Centrelink payments and still have a small investment income. However, Richard has had to stop work in order to help Sandra parent the children, Sandra makes most of their clothes, the house they built to accommodate the older three boys is no longer the roomy abode they intended, and they have not been out together without the children for two years.

They have had to deal with the resentment by the older children of the younger ones (the father wants only the younger ones back), some bullying of the child who is not their grandson, school suspensions for one of the older three children and the emotional drain that all this implies. However, this is a loving family and the adoration everyone feels for the baby, also the only girl, is palpable.

Richard and Sandra have never thought that they cannot do this – they have to. They believe things are getting better as the children get older and are able to help more. However they have no time to themselves, no access to child-minding, no respite. Seriously for this family, both Richard and Sandra have major health problems which have seen them both hospitalised in recent years. When asked what they would like for the future, they reply that all they want is another fifteen years so they can know that all of the children are all right.

At this time, the camp was the only respite available to Richard and Sandra but it is clear to workers at Gosford Family Support service that more is needed for grandparent carers caring for large numbers of children. Many carers have health conditions that come with age – they need an occasional break, they need reliable options when they are hospitalised, they need to know that the children's security is not threatened by things that are beyond their control. One of the traditional roles played by grandparents is to provide respite to the parents in the form of child minding or taking the children in school holidays. There is no-one to play this role for the grandparents. It is estimated that around thirty families in the current group would benefit from monthly respite. The project worker has looked at models currently being developed in Western Australia based on foster care respite. These models aim to ensure that respite carers are well trained and look at developing ongoing relationships between carers and respite carers that promote consistency, develop a rapport between the families and can act as support mechanisms in times of crisis.

Gosford Family Support Service is finding it hard to keep up with the demand for case work with one part-time unfunded worker. These families face complex problems and constant crises across a range of service systems. Their situation always comes as a shock, the transition to their new role and new family relationships are difficult and they experience grief and sadness for what has happened to their children as well as to their grandchildren. This is time consuming but invaluable work.

As noted earlier, from an initial base of 60 families, the grandparents' project is now working with 115 Central Coast families in which grandparents are the primary carers for their grandchildren. This growth in numbers reflects both the growing numbers of children in out of home care and the trend to placement of children with relatives, and the value placed on what the project can offer.

The major impacts of the project run across the health and well being of both the children and the grandparents:

- Placements are stabilised and supported
- Children's development is enhanced within a loving and less stressful environment
- Grandparents receive some respite support which impacts on their health and well being
- Grandparents and grandchildren are less isolated and more socially connected
- Systems are more easily negotiated to provide better and more timely supports to families.

Without the Gosford Family Support Service project many grandparents would find it impossible to get the detailed and intensive case work support they need. The counselling, advocacy, referral and networking skills of trained family workers are essential to supporting the amazing task that so many

grandparents are now being asked to take on. Without that level of support, it is inevitable that some placements will fall over and that the health and well being of the children, the majority of whom are on care orders, would be adversely affected. Equally, the strain of coping on their own would adversely affect the health and well being of the grandparents.

Funding from the Area Assistance Scheme ran out some years ago and the project has kept going on the strength of one off grants, assistance from local community organisations and a lot of voluntary input from family support staff. Many of the staff who turned up at the camp in 2008 were not being paid for the weekend and some had even left the service but returned just for this event. Workers know just how much the camp means to their clients.

The most important thing for this project is to gain some additional recurrent funding that would ensure the project can continue and allow the family worker to spend less time on fundraising and more time with families. Funding is needed to support a full-time family worker and to allow the camp to continue to offer some much needed respite to grandparent carers.

Government policy in NSW on out of home care, including the Aboriginal Placement Principle¹², is highly dependent on families stepping in to take on the care of children at risk. While there have been some improvements in financial assistance to grandparents in recent years, this has not been universal, and is not the only answer. Grandparents should not have to fight for every piece of help or service they need. All of the grandparents who take on raising their grandchildren do so at great personal cost. Their lives are changed forever, often completely unexpectedly and after (often with continuing) great trauma. They love their grandchildren and want to support them as best they can – they just need more help to do it.

NOTE

This article is heavily based on a paper produced for the peak organisation, NSW Family Services Inc. That paper was one of a series of reports on innovative services provided by member organisations designed to illustrate both the breadth and depth of the professional services offered by family services workers, and the ways in which they make a difference in people's lives. The series was launched in Families Week 2009. The paper and the article draw on the professional expertise of the Gosford Family Support Service Grandparents Project worker, Anne Charlton, and interviews with grandparents who participated in the November 2008 camp provided under the project.

¹² The Aboriginal Placement principle states that in the first instance "an Aboriginal or Torres Strait Islander child or young person who needs to be placed in out-of-home care is to be placed with: (a) a member of the child's or young person's extended family or kinship group, as recognised by the Aboriginal or Torres Strait Islander community to which the child or young person belongs". The principle then sets out a hierarchy of desirable placements if this cannot be achieved.