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# Barriers to Services for Grandparent Caregivers

A study of the barriers encountered by grandparent caregivers as they seek access  
to services on behalf of their grandchildren

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in Social Work (Applied) at Massey University, Albany Campus

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## **Abstract**

Grandparent caregivers must seek support and assistance from social service agencies but frequently encounter barriers as they engage with those agencies. This qualitative study drew on the experience of seven grandparent caregivers whose grandchildren presented a range of behavioral, psychological and physical ailments. Semi-structured interviews elicited information about their experiences and then, through the application of phenomenological analysis and ecological theory commonalities in their experiences were highlighted. Findings described five categories of barriers: (1) barriers encountered at a systemic level, (2) a lack of services, (3) agency related barriers, (4) legal barriers and (5) financial barriers. Ecological theory revealed that these barriers had their genesis in the promulgation of an ideology that favored family care over state care. Consideration is given to the differential between the levels of support offered to foster caregivers and grandparent caregivers. The study concludes by offering suggestions for social policy formulators and social service practitioners that would address this differential.

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Most of all I would like to thank the respondents who participated in this research project by opening up their lives and sharing their stories with me. I hope my use of your stories lives up to your expectations and that this research in some way may contribute to changes that will make your task easier.

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## CHAPTER 1

### Introduction

*The primary role in caring for and protecting a child or young person lies with the child or young person's family, whanau, hapu, iwi and family group and that accordingly (i) that family should be supported and assisted and protected as much as possible and (ii) intervention into that family's life should be the minimum to ensure the child or young persons safety (Children and Young Persons and Their Families Act, 1989. Section 13b).*

Section 13b of the Children and Young Persons and Their Families Act 1989 (CYF Act 1989) asserts that care and protection of needy children should first be sought among that child's extended family. Once placed with that family the state will support, assist and protect as necessary to ensure that child's safety and welfare. The following table presents the financial, material and agency support offered to foster caregivers by Child Youth and Family (CYF) and must surely be representative of what the agency considers to be the realistic support requirements for children placed into extra-family care.

**Table One – Financial and material support offered to foster caregivers**

*CYF want to do [their] best for you, so that you can do the best for the children in your care. [CYF] will make sure you are,*

- *Included as a valued team member.*
- *Well matched to the child in your care.*
- *Given ongoing training and regular support.*
- *Able to say 'no' to a placement.*
- *Consulted about when and where the children in your care visit their family.*
- *Able to ask for respite care if you need time out.*
- *Given full information about a child before they come into your care.*
- *Given relevant details of the child's needs, behaviours and background.*

*[CYF] provide financial help to meet the day to day care of your child. A caregiver allowance is paid fortnightly which covers board, personal items and pocket money for your child. [CYF] also provide a quarterly clothing allowance and an allowance for Christmas and birthday presents. Health and educational costs are met and [CYF] may be able to assist towards recreational items.*

<i>Age of child.</i>	<i>Weekly rate</i>	<i>Pocket money</i>	<i>Birthday and Christmas allowance</i>	<i>Clothing allowance quarterly rate</i>
<i>0-4 years</i>	<i>\$134.91</i>	<i>\$1.97</i>	<i>\$67.46</i>	<i>\$236.03</i>
<i>5-9 years</i>	<i>\$156.56</i>	<i>\$5.95</i>	<i>\$78.28</i>	<i>\$267.47</i>
<i>10-13 years</i>	<i>\$172.77</i>	<i>\$8.91</i>	<i>\$86.39</i>	<i>\$330.30</i>
<i>14+ years</i>	<i>\$188.88</i>	<i>\$13.70</i>	<i>\$94.45</i>	<i>\$396.49</i>
<i>Family home care-givers</i>	<i>\$176.12</i>	<i>Rates as above in addition to board rates.</i>	<i>\$88.06</i>	<i>Rates as above</i>

*(Adapted from the CYF webpage <http://www.cyf.govt.nz/info-for-carers/becoming-a-caregiver/what-help-will-i-get>. As at August 2010).*

**Table Two – Eligibility and assessment criteria for prospective foster caregivers**

*To be eligible as a foster caregiver you will need to undergo the following:*

- 1. Completion of an application form.*
- 2. Police checks on all occupants aged 17 years and over (family violence reports from police that did not result in prosecutions are also assessed).*
- 3. Medical assessments of prospective care-givers including mental health issues. (Information from applicants maybe insufficient and CYF might require documentation from a GP.*
- 4. References from two reputable referees.*
- 5. CYRAS and TRIM checks of all occupants. [A search on CYF's data base for historic notifications].*
- 6. An interview with a social worker.*
- 7. A home visit by a supervisor.*
- 8. The completion of an assessment detailing the above information and concluded with a recommendation from a social worker regarding approval.*

*Where a carer has been approved to care for a specific child, placement of any other child cannot occur until a further assessment is completed.*

*Once approved a carer must attend induction training.*

(Adapted from the CYF webpage <http://www.cyf.govt.nz/policy/caregiver-assessment-and-approval>. As at August 2010).

This thesis describes the experience of seven grandparent caregivers as they sought to access social services on behalf of the grandchildren to whom they provided full time care. The grandchildren of the respondents presented one or more of the following morbidities – global delay, autism, fetal alcohol syndrome, post-traumatic stress disorder, hyper-activity, brain damage, respiratory illnesses, Attention Deficit / Hyper Activity Disorder (ADHD) and learning disabilities. Attention seeking, aggression, violent, self-harming, destructive and inappropriate sexual behaviour were also present.

The experience of the seven respondents will be evaluated in light of Section 13b of the Children and Younger Persons and their Families Act 1989 (CYF Act 1989) and the question asked, how effective has this legislation been in providing grandparent caregivers with support and assistance?

### **Locating myself in the research**

My interest in this topic emanated from the experience of my own parents who were required to seek custody of one of their grandchildren. In trying to secure custody my parents faced barriers within the legal system with a Family Court judge who failed to believe their assertions, expressed doubt over their motives and disappointment the matter could not be resolved within our family. The judge seemed more concerned with restoring harmonious family relations than ensuring the safety of the grandchild. There was a failure to realize that litigation was the last resort after considerable efforts to appeal to the child's parent had been exhausted. Because my father was employed and owned his own house my parents were ineligible for legal aid. Despite home ownership and employment my parents were far from wealthy and the cost of pursuing custody drained already meagre funds which took a long time to restore. Having gained custody my parents were then faced with the expense of raising another child. While my mother was only aged in her fifties, she suffered from a chronic back ailment that drastically reduced her strength, stamina and range of movement. Caring for a highly active infant exacerbated her already diminished health prospects. Within

the Family Court, with government agencies, physically and financially my parents faced struggles that curtailed the quality of their later years. They were not seeking to use the Family Court as a stick with which to beat the parent and were not motivated from selfish desire. They would have preferred nothing better than returning the child to his mother but for the fact it was not, at that time, safe to do so. I was interested to discover why my parents faced so many impediments when all they sought was the safety and welfare of their grandchild. I was also interested to ascertain whether their experience was peculiar or indicative of a wider problem.

## **Overview of chapters**

### **Chapter 2 - Literature review**

The literature review traverses the local and international literature pertaining to the barriers grandparent caregivers encounter when seeking access to services. In brief, and discussed more fully in Chapter 2, these are the desire on the part of the state to reduce its role, responsibility and expenditure on welfare services.

A review of the literature shows there are multiple forces acting upon grandparent caregivers at different levels of the social system. Because grandparent caregivers do not comprise the traditional client group of social service agencies, a lack of training and practice guide lines for social workers and case managers when dealing with grandparent caregivers was noted. Grandparent caregivers were seen by staff to be too labour intensive and difficult to work with and there was reluctance on the part of staff to engage with them. Grandparent caregivers found they were ineligible for the standard range of benefits and services that were available to biological parents or foster caregivers. Agency staff also impressed as unwilling or unable to understand the range of stressors experienced by grandparent caregivers.

Furthermore, the literature noted that grandparent caregivers found agency staff reluctant to inform them of the range of entitlements available to them and many

grandparents only discovered these entitlements through happen-chance conversations with other grandparent caregivers. Operational issues within agencies (high case loads, high staff turn-over, a lack of training, poor record keeping and miscommunication) were also barriers to accessing services. Grandparent caregivers found themselves struggling against ever increasing legal costs, delays in obtaining hearing dates and an apparent unwillingness on the part of the judiciary to give credence to their assertion concerning abuse or neglect. The experience of the seven respondents in the current study bore a remarkable similarity to the respondents who comprised the sample groups of the studies undertaken in the United Kingdom, United States and Australia on which this literature review is based.

### **Chapter 3 - Research design**

#### **Methodology**

Chapter 3 explains why phenomenology was the chosen methodology. Phenomenology is concerned with the lived experiences of people and is particularly useful when,

*seeking to describe the world as experienced by the subjects...to grasp the qualities of their experiences and explicate their essential meanings...to make visible the invisible (Kvale, 1996, pp.52-53).*

Ultimately I wanted the sense of frustration, anger, abandonment and being overwhelmed experienced by the respondents to be as real for the readers as possible and phenomenology provided a means of interpretation and analysis that enabled me to adequately explore their experiences.

## **Methods**

This section describes the process of thesis construction from identifying, engaging and recruiting respondents, sample selection, formulation of interview questions, interview structure and methods of data capture and analysis. Data analysis identified interactions with agency staff, government policies, a paucity of services for children with special needs, legal and financial issues as common themes and the major barriers to accessing services.

## **Limitations**

Due to the small sample group (n=7) it was clear there would be limitations in regard to the validity of results of this study. This section of the thesis details how those limitations were acknowledged and addressed and how validity was achieved despite the small sample group.

## **Ethical Considerations**

Given this thesis entailed the eliciting of personal and sensitive information I was aware from the outset that ethical issues would need to be addressed. This section details the ethical issues that were encountered and how they were negotiated. Prior to the commencement of any data gathering approval was sought and secured from the Massey University Ethics Committee. The letter of approval from the Ethics Committee is attached in the Appendices as Appendix Five.

## **Chapter 4 - The Respondent's Experience**

Chapter 4 presents the data gathered from interviews as it related to institutional barriers, agency barriers, financial and legal barriers to accessing services. Direct

quotes from respondents are used as much as possible with a narrative linking the commonalities of their experiences.

### **Chapter 5 - Discussion**

Chapter 5 correlates material from the literature review and interview data and considers the implications of this material against the intentions and implementation of Section 13b of the CFY Act 1989. Comparisons are made between the disparity of support and services available to foster caregivers and grandparent caregivers and reasons for this difference are explored.

### **Chapter 6 - Conclusion and Recommendations**

This chapter provides a summary of findings and recommendations are suggested how agencies might alter their practice to better accommodate grandparent caregivers.