DCYF

Caregiver Survey Report

2022

May 2023 | Report 7.126

Washington State Department of
CHILDREN, YOUTH & FAMILIES

This report has been prepared for

WASHINGTON STATE

Department of Children, Youth, and Families

by DSHS Research and Data Analysis Division

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INFORMATION ABOUT THIS PUBLICATION

Title: 2022 Caregiver Survey Report

Abstract: Between September 2021 and September 2022, DSHS surveyed 1,342 caregivers (710 foster and 632 kinship) who had a child in care within six months of the sampling date (August and November, 2021; February and May, 2022). These caregivers were asked about their satisfaction with support, staff, access and process, information, licensing, and training provided by the Department of Children, Youth, and Families (DCYF) and private agencies contracted by the Department. They were also asked to offer recommendations for change.

Satisfaction with support, staff, access and process, information, training, and licensing remained high in 2022, with a majority of caregivers giving positive responses to all structured items. There were significant differences between foster and kinship caregivers on two items: more foster caregivers said they were able to get help when they ask for it, and more kinship caregivers said they had adequate information about the child in their care. There were also three significant changes since 2021: more foster caregivers said they were included in meetings, and fewer kinship caregivers said that they were treated as part of the team and that caseworkers listened to their input.

Written comments identified several areas for improvement, including more consistent communication, stable staffing, respectful and inclusive treatment, additional resources, and more effective processes. Caregivers appreciated training that was trauma-informed and child-centered and continued to highlight the need for a variety of trainings and multiple ways to access them.

Keywords: Surveys, DCYF, Foster Parents, Foster Care, Caregivers, Kinship Caregivers

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2022

DCYF Caregivers Speak

Photo by William Fortunato/Pexels

PART 2

Introduction
Executive Summary

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The 2022 Caregiver Survey is a voice for Washington's foster and kinship caregivers.

"There are a lot of things that you can do in life that mean a lot and then there's a lot of things you can do in life that don't mean anything, but the one thing that I can do in this lifetime is give children opportunities to live in a safe and loving environment while they're out of their biological homes."   *- Foster Caregiver*

Between September 2021 and September 2022, the Research and Data Analysis Division (RDA) of the Department of Social and Health Services conducted 1,342 surveys with randomly selected foster and kinship caregivers in the state of Washington: 710 with foster caregivers (F) and 632 with kinship caregivers (K). Kinship caregivers are relatives or individuals with a pre-existing relationship to a child's family. The survey consisted of 11 standardized questions and five open-ended questions. Responses were comprehensively coded and analyzed for this report.

Caregivers' responses paint a portrait of the complexities, successes, and struggles of Washington's foster care system and the thousands of individuals who interact with it every year. The caregivers who contributed to this survey are a vital and valued part of the foster care system. Their responses highlight numerous strengths, as well as opportunities for improvement. Together, their voices offer valuable insights on how the system affects the lives of children, parents, and caregivers throughout the state.

Key Findings on Support for Caregivers

Quality and Helpfulness

Most caregivers said they are satisfied with the support provided by the Department of Children, Youth, and Families. Three new questions about staff support were asked in 2022, and the responses were largely positive, with 66% of caregivers responding that they felt personally supported by DCYF staff and 72% responding that staff offered resources and asked if they needed support. In addition, 83% of the caregivers who received support from the Alliance CaRES Program reported that it was helpful. There were no significant differences between foster and kinship caregivers on these questions.

"I feel very fortunate to be so supported by those working in the system."
- Kinship Caregiver

Caregivers are satisfied with the support provided by DCYF.

	All	Foster	Kinship
Do you feel personally supported by DCYF staff?	66%	66%	66%
Did DCYF staff offer you resources or ask if you needed support?	72%	70%	75%
How helpful was the support from the Alliance CaRES Progam?	83%	82%	85%
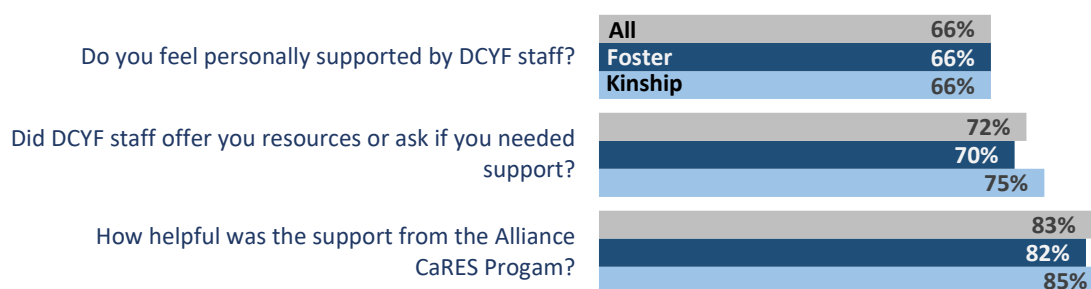
Note: First two items report percentage responding "Always or Almost Always" or "Usually." The Alliance CaRES question was answered by 244 foster and 119 kinship caregivers who received support from that program; percentage refers to those who responded "Very helpful" or "Somewhat helpful." Differences between foster and kinship caregivers are not significant.

Comments about support were mostly positive, especially among foster caregivers. Many expressed gratitude for caseworkers who offered them resources and support, praising their assistance in getting what they needed. Some caregivers offered comparisons across multiple agencies, with most preferring the support received from a private agency. Negative comments described a lack of overall support, with a few saying they felt the agency caused more harm than good.

Caseworkers and Other Staff

Caregivers felt that caseworkers listened, treated them like part of the team, and included them in meetings, with a majority giving positive responses to these questions. No significant differences between foster and kinship caregivers were found. However, these questions did show significant change between 2021 and 2022 (p < .05):

- Significantly more foster caregivers said that they were usually or always included in meetings in 2022 (83%) than in 2021 (77%).
- Significantly fewer kinship caregivers said that they were usually or always treated as part of the team in 2022 (69%) than in 2021 (75%).
- Significantly fewer kinship caregivers said that social workers usually or always listened to their input in 2022 (77%) than in 2021 (82%).

Caregivers are satisfied with caseworkers and other staff.
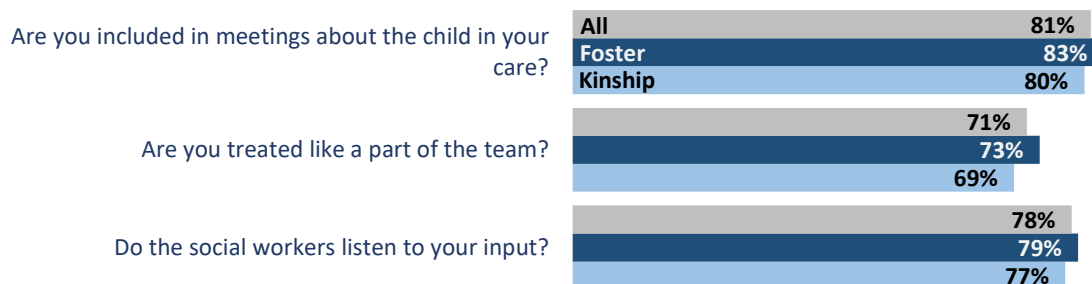
Question	All	Foster	Kinship
Are you included in meetings about the child in your care?	81%	83%	80%
Are you treated like a part of the team?	71%	73%	69%
Do the social workers listen to your input?	78%	79%	77%

Note: Percentage responding "Always or Almost Always" or "Usually." Differences between foster and kinship caregivers are not significant.

"Some social workers are just awesome about checking in with us as caregivers to help and offer support, and others we have definitely had issues with."
- Foster Caregiver

Though the answers to these structured questions about caseworkers and other staff were overwhelmingly positive, responses to open-ended questions were more mixed, with some caregivers expressing concern about lack of inclusiveness, disrespectful treatment, or inconsistent communication from their caseworker. Others commented on the negative impacts of caseworker turnover and staffing.

Access and Process

About 3 of 4 caregivers said they are able to get help when they ask for it (76%). Foster caregivers (78%) are significantly more likely than kinship caregivers (73%) to provide a positive response to this item.

Caregivers are able to get help when they ask for it.

Can you get help when you ask for it?

All	76%
Foster	78%
Kinship	73%

Note: Percentage responding "Always or Almost Always" or "Usually." Differences between foster and kinship caregivers is statistically significant (p < .05).

Although caregivers report that they are able to get help when they ask for it, over half who commented on access and process expressed challenges. Some caregivers reported issues with policy and process, with many commenting on timelines not being met. Some noted that caseworker turnover caused process inefficiencies, and they want more consistency to support the child[ren] in their care. A few caregivers commented on the department's goal of reunification and specifically mentioned HB 1227 (2021-22), which enhanced protections for families responding to allegations of abuse or neglect. Some support the policy, but others think it is at odds with focusing on the needs of the child.

Caregivers appreciate consistent contact with caseworkers, with many noting how helpful it is to have a variety of contact options (e.g., text, email, phone call). They are grateful for caseworkers who respond quickly with the requested help or information. Some also shared instances of caseworkers' extra efforts to check in and meet the caregivers' needs.

"The bureaucracy is large and it's hard to get it to move – this case is dragging on." – Kinship Caregiver

Information

Caregivers report that they receive adequate information about the children in their care. Kinship caregivers (84%) were significantly more likely than foster caregivers (71%) to give a positive response to this item.

Caregivers receive adequate information about the children in their care.

Do you get adequate information about the needs of the children placed with you?

All	77%
Foster	71%
Kinship	84%

Note: Percentage responding "Always or Almost Always" or "Usually." Differences between foster and kinship caregivers is statistically significant (p < .0001).

Nearly 4 of 10 caregivers commented on information sharing, with just over half (51%) giving negative responses. More kinship caregivers offered positive responses on this topic than foster caregivers did. While caregivers understand legal restrictions, they want caseworkers to share as much information as they can about the child. Some also felt they were not kept up to date on the case. Positive comments commonly expressed gratitude for caseworkers who provided information that helped caregivers attend meetings and make informed decisions about the child in their care.

"It is very hard when you have no clue on what to do and where to go for help."
- Foster Caregiver

Resources

Caregivers are interested in resources that are tailored to support the specific needs of each child. Although the survey did not include a structured question about resources, about one of three (34%) caregivers mentioned resources in their comments. They addressed access to a range of resources, including transportation for visits, medical/dental/mental health care, financial assistance, respite, and child care. Among those who commented, kinship caregivers offered more positive comments than foster caregivers.

Caregivers often mentioned their appreciation for medical and behavioral health services; this was a change from 2021, when comments about these services were overwhelmingly negative. Some caregivers noted challenges with the process to get these services, especially mental and behavioral health services. They identified respite and child care as areas in need of improvement, often emphasizing the importance of these resources. Many caregivers want additional financial assistance as well as better follow-though with reimbursements.

Caregivers expressed gratitude for additional sources of support, including Court Appointed Special Advocates (CASAs) and Guardians ad Litem (GALs). A few detailed positive experiences with obtaining specific resources for the child[ren] in their care. Some were unable to access resources due to their location, and others suggested resources they would find helpful, such as extracurricular supports.

"We feel like the system is making an effort to cover the holistic needs of the child in our care through mental health therapy, school system assessment for added supports, and regular meetings to discuss the case and current care needs."
- Foster Caregiver

Caregiver Licensing

Experiences with licensing staff continue to be a highlight. Over 6 of 10 foster caregivers (67%) and 5 of 10 kinship caregivers (53%) said they had contact with the Licensing Division in the past 12 months. Both groups gave overwhelmingly positive responses about licensing staff's respectful treatment and knowledge.
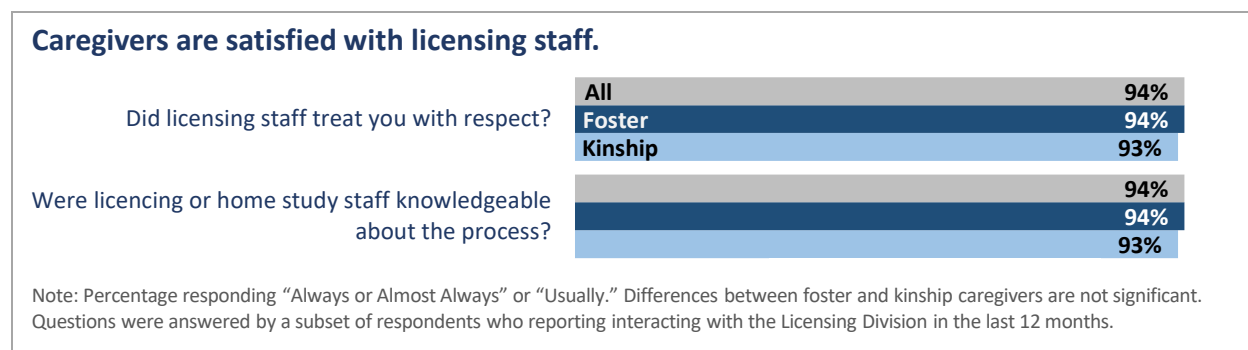
Caregivers are satisfied with licensing staff.

Did licensing staff treat you with respect?	All	94%
	Foster	94%
	Kinship	93%
Were licencing or home study staff knowledgeable about the process?		94%
		94%
		93%

Note: Percentage responding "Always or Almost Always" or "Usually." Differences between foster and kinship caregivers are not significant. Questions were answered by a subset of respondents who reporting interacting with the Licensing Division in the last 12 months.

Few caregivers mentioned licensors in their comments, but most who did (59%) expressed appreciation for licensors' assistance, often praising their responsiveness to questions. Some caregivers described a lack of communication or support in the licensing process.

Among kinship caregivers who said they were licensed, many said they wanted to ensure stability for the child or gain access to better resources. For kinship caregivers who chose not to be licensed, most were only interested in providing care for a specific child and did not want to foster other children. Others cited personal reasons or felt the licensing process was too complex.

Kinship caregivers speak about licensing. . .

Most licensed kinship caregivers got licensed to provide stable care for a specific child.

"I foster my grandchildren whom I plan to adopt and was advised this would help me reach that goal."

"We became licensed so that DCYF would take us seriously about being caregivers for our relatives."

"To make sure that my kiddos that were with me got to stay with me, so they wouldn't be moved and would feel safe."

"We have to kinship foster. Was told this would help with becoming their guardians."

"Wanted to make sure placement was stable."

"To establish permanency for my grandson."

"It offered security for the kids and financial help for us supporting them."

"I was told it would help out with my foster child's wellbeing and future."

Kinship caregivers choose not to get licensed for a variety of reasons.

"I was told you had to have a certain amount of income and have to be working. I do not work and just get social security income now."

"It was a temporary situation."

"I don't want to be available to other children, I only want to take care of my grandbabies."

"They really didn't give me any information about why this would be useful."

"I've submitted the paperwork two times and the person I was dealing with is gone and now I'm dealing with the social workers again."

"After the experience that we had with DCYF during our last placement, we decided that getting licensed was not in our best interest."

Key Findings on Training for Caregivers

Most caregivers are happy with training from DCYF, private agencies, or specific programs. About one-third of kinship caregivers (32%) report having had training in the past three years, compared to almost all (94%) foster caregivers. Both groups of caregivers were positive about their experiences, with about 9 of 10 caregivers reporting that the training has adequately prepared them to care for the basic needs of children in their home.

Caregivers are satisfied with training.

Have you had any training related to your caregiving role in the past three years?

All	65%
Foster	94%
Kinship	32%

How adequately has training in the last three years prepared you to care for the basic needs of children?

	88%
	87%
	91%

Note: Percentage responding "Always or Almost Always" or "Usually." The differences between foster and kinship caregivers on the first question is significant (p < .0001). The second question was answered only by caregivers who reported receiving training in the last three years.

Caregivers who commented on the overall quality of training gave mostly positive remarks. Many of these comments focused on general satisfaction with their training experience. Some caregivers, especially foster caregivers, identified specific agencies, providers, conferences, or programs, and nearly all of those comments were positive. Caregivers also mentioned how training enhances their awareness of the child's experience and provides opportunities to learn effective methods of connecting and parenting. Kinship caregivers were especially positive on how the training helped them care for children.

Caregivers also commented on the importance of having access to trainings and information, including class scheduling, in-person training locations, child care options, and information about community resources and upcoming training. They are also interested in learning about their role from a well-rounded perspective. They consistently praised classes that involved current or former caregivers, children in care, and parents.

Caregivers mentioned a variety of approaches to training they enjoyed, including hands-on learning, real-life examples, and small group discussion. They voiced mixed preferences about virtual or in-person training. Some praised the flexibility of self-paced online options. Others enjoyed the community building and helpful discussion that in-person training offers. Most caregivers spoke to distinct preference of one or the other.

Regardless of training format, caregivers want content that is applicable to the child[ren] in their care. Some caregivers described challenges with training requirements, citing difficulty completing the necessary hours or finding training in their area. Others requested more variety in training options.

"I've been licensed for over ten years. The training is much improved."
- Foster Caregiver

About the Survey

- 1,342 caregivers completed the survey.
- 710 of these were classified as foster-only caregivers, and 632 were classified as kinship caregivers. Classifications were based on DCYF records and caregiver answers to survey questions. The kinship caregiver group included 129 respondents who said they currently had a license to provide care.
- Surveys were completed between September 22, 2021 and September 19, 2022.
- 832 interviews were completed by telephone and 510 online.
- The survey sample included 1,963 total caregivers who had at least one child in care within six months of the sampling date (August and November, 2021; February and May, 2022). Caregivers were selected at random on a quarterly basis.
- Interpreters were available for all languages requested, and alternative methods were available for respondents who were deaf or hard of hearing.

Responses to Open-ended Questions

The survey included four open-ended questions asked to all caregivers. The following two pages summarize the themes and sentiments of their responses to those questions.

Questions about Support: Now, think about all the partners in Washington's child welfare system, including DCYF, private agencies, and your social workers and licensors.
- What do they do well to support you?
- What could they do better to support you?

NEEDS WORK — NEUTRAL/MIXED — GOOD WORK

QUALITY/HELPFULNESS

Theme	Needs Work	Neutral/Mixed	Good Work
Overall quality and helpfulness	133		164
Specific agency/area/office support	15		90

CASEWORKERS AND OTHER STAFF

Theme	Needs Work	Neutral/Mixed	Good Work
Caseworker support	125	87	297
Caseworker courtesy and respect	74		58
Caseworkers listen/understand	82		135
Caseworker inclusiveness	68		24
Caseworker communication	146		62
Caseworker responsiveness	157	40	169
Other caseworker comments	246	38	122
Need more caseworkers	97		
Foster care licensors	20		32

ACCESS AND PROCESS

Theme	Needs Work	Neutral/Mixed	Good Work
Phone/staff access	66		172
Consistency of contact	35		117
General processes	143		6
Specific processes	224		12
Paperwork processes	25		4
Coordination	58		8

INFORMATION

Theme	Needs Work	Neutral/Mixed	Good Work
Information	248	73	167

RESOURCES

Theme	Needs Work	Neutral/Mixed	Good Work
Medical, dental, mental health	30		47
Respite care	33		9
Transportation	19		23
Child care	25		18
Financial matters	46		14
Other resources (including training)	72		94
Other sources of foster parent support	37		69

Questions about Training:

- What about caregiver training has been helpful?
- How could caregiver training be improved?

NEEDS WORK   NEUTRAL/MIXED   GOOD WORK

TRAINING QUALITY AND HELPFULNESS

Overall quality and helpfulness of training | 31 | 141
Specific program or agency | 1 | 44
Taking care of foster children | 37 | 108

ACCESS AND INFORMATION

Training location and schedule | 41 | 2
Other comments about access | 40 | 8
Information about training | 31 | 21

TRAINERS AND METHODS

Trainers | 19 | 31
Approaches to training | 66 | 43
Online training | 60 | 73
Support groups | 1 | 4
Building community | 30 | 54
Training process | 69 | 21
Training content | 103 | 76

SPECIFIC TRAINING TOPICS

Trauma and behavioral health | 29 | 150
Child behavior and development | 31 | 108
Navigating the foster care system | 33 | 57
Cultural awareness and language issues | 4 | 16
Caregiver core training | 2 | 27
Other specific training topics | 33 | 61

Caregiver Support

GettyImages.com/Jordi Mora Igual

Part 1 is about the support caregivers receive in their roles as caregivers.

Caregivers interact with social workers from the state and contracted local agencies, child-support staff such as guardians ad litem (GALs) and court appointed special advocates (CASAs), caregiver licensors, and the courts. They work with their foster children's schools, medical providers, and mental health counselors. They keep records, submit reports to state and courts, and submit reimbursement requests.

The following six sections describe how foster and kinship caregivers rate and experience the following aspects of support:

- Quality and Helpfulness
- Caseworkers and Other Staff
- Access and Process
- Information
- Resources
- Caregiver Licensing

Within each section, we present caregiver responses to structured survey questions, as well as an analysis of their comments to two open-ended questions about support: *Thinking about all the partners in Washington's child welfare system, including DCYF, private agencies, and your social workers and licensors – (1) What do they do well to support you? (2) What could they do better to support you?*
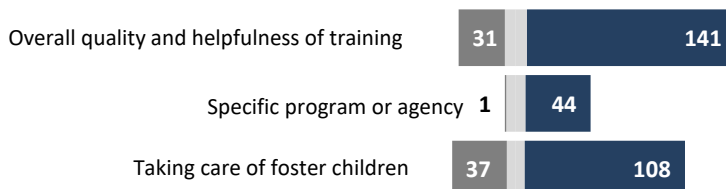
Quality and Helpfulness
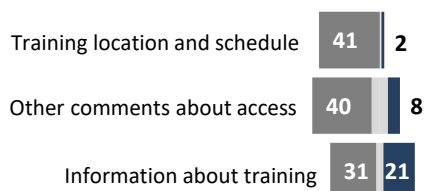

GettyImages.com/Monkeybusinessimages

Support from private agencies and DCYF strengthens caregivers.

"They all did a good job, and our direct social worker was really hands-on with us." – Foster Caregiver

Responses to three new questions show that most caregivers feel personally supported by DCYF. Caregivers also said they were offered resources or support. Those who received support from the new Alliance CaRES program found it helpful.

- *Do you feel personally supported by DCYF staff?* (All Caregivers: 66% positive. F: 66% K: 66%)
- *Did DCYF staff offer you resources or ask if you needed support?* (All Caregivers: 72% positive. F: 70% K: 75%)
- *How helpful was the support from the Alliance Caregiver Retention Education Support (CaRES) program?* (All Caregivers: 83% positive. F: 82% K: 85%)

Comments about support were mostly positive. Many expressed gratitude for caseworkers that offered them resources and support, praising their assistance in getting what they needed. Some caregivers offered comparisons across multiple agencies, with most preferring the support received from a private agency. Though few respondents commented on the new Alliance CaRES program, those who did receive this assistance were mostly satisfied.

398 respondents (32%) commented on quality and helpfulness of support.

Made comment **32%**

Did not comment **68%**

241 (61%) of these comments were positive.

19 comments (5%) were mixed or neutral.

138 comments (35%) were negative or suggestions for improvement.
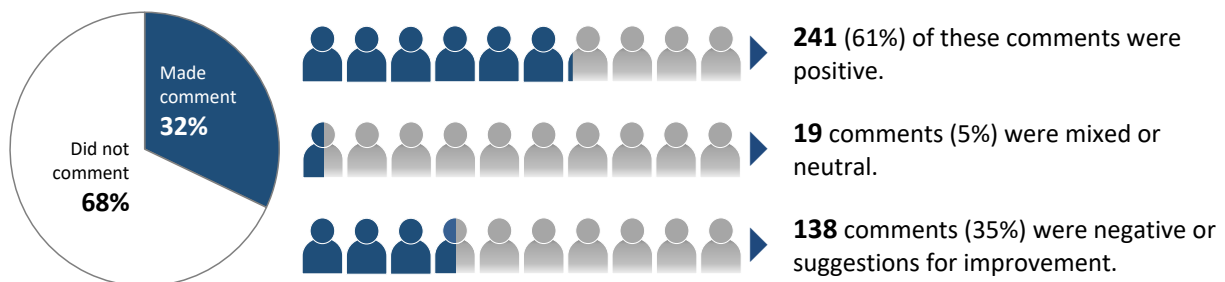
More than 6 of 10 (66%) of the 1,313 caregivers who answered this question reported that they felt personally supported by DCYF staff.

RESPONSE

66% positive

Foster Caregivers N = 695			
15%	20%	35%	31%

66% positive

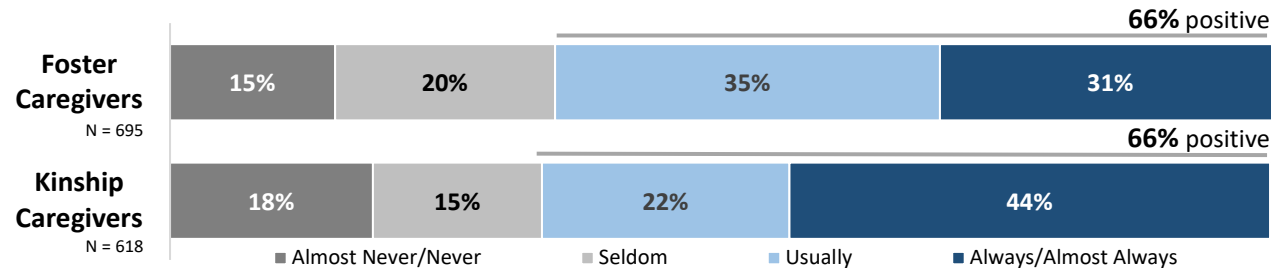| Kinship Caregivers N = 618			
18%	15%	22%	44%

■ Almost Never/Never ■ Seldom ■ Usually ■ Always/Almost Always

DETAIL

Foster and kinship caregivers were equally likely to say they feel personally supported by DCYF. Positive responses to this new question are lower than results for the former question "In the past year, did you get adequate support for your roles and responsibilities as a foster or kinship caregiver?" – suggesting "personal" support has a higher standard for satisfaction.

In the comments, caregivers said they received good support from the agency. Many said that they had good experiences. Some caregivers described challenges with obtaining support. Others said they received little to no help.

TREND

Positive Responses Over Time

Question first asked in 2022

66%

Foster Caregivers

66%

Kinship Caregivers

2019   2020   2021   2022
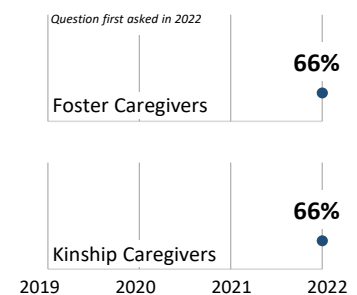
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate receiving support.

"I was really happy with how everything was handled. It went really well for me." (K)

"I don't think that there is anything that they can do better. Everything has worked out excellent." (F)

"They're right on top of everything." (F)

"They have been helpful to us." (K)

"Everyone has been very helpful and has offered community resources." (K)

"Our current DCYF team is supporting us and our foster youth." (F)

"I really had a great experience." (F)

"I feel very fortunate to be so supported by those working in the system." (K)

"I felt they did a good job and cannot think of improvements." (K)

"This year has been really good. I can't think of anything they could have done better." (F)

"I have an awesome team." (F)

"All were very helpful in this whole process." (K)

"Keep up the good work!" (K)

Some experienced varying levels of support.

"[You] have to be a strong self-advocate to get what you need." (F)

"Recently I've had my first good experience, before that [it was] not so great." (K)

"In the beginning they were helpful, but a month in it got terrible." (K)

Others felt that support was scarce or non-existent.

"The agency could show us some support. The foster parents have a lot of expectations put on them by DCYF with little support." (F)

"Since COVID things have been really difficult. We feel the least support in the last two years out of the almost nine years we've been licensed." (F)

"Nothing – it was as if they blamed us for her problems with her family." (K)

"I wasn't supported. I always had to fight them." (K)

"I have to do everything on my own." (F)

"They did nothing to help us." (K)

"I was never treated right by the agencies." (K)

"There is no support. I can't even get questions answered." (F)

Did DCYF staff offer you resources or ask if you needed support?

More than 7 of 10 (72%) of the 1,319 caregivers who answered this question said DCYF staff offered them resources or asked if they needed support.

RESPONSE

70% positive

**Foster
Caregivers**
N = 696

| 12% | 18% | 31% | 40% |

75% positive

**Kinship
Caregivers**
N = 623

| 13% | 12% | 22% | 53% |

■ Almost Never/Never ■ Seldom ■ Usually ■ Always/Almost Always
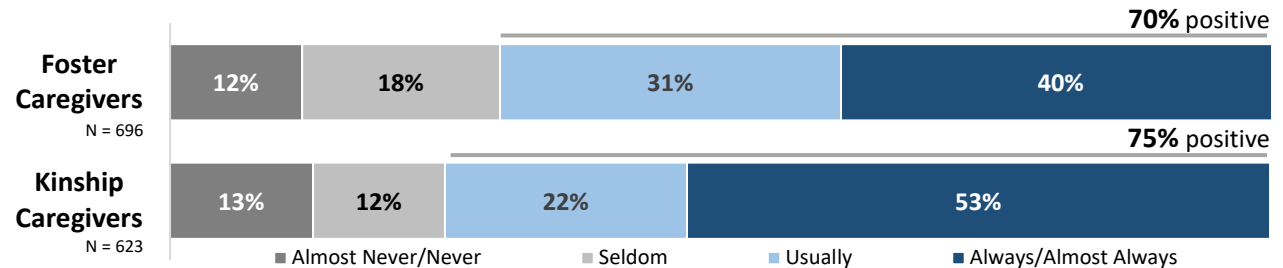
DETAIL

Responses to this new question are mostly positive for both foster and kinship caregivers. The difference in positive responses between the groups is not statistically significant.

In the comments, most caregivers said that caseworkers frequently offered support and resources. A few called out specific caseworkers who regularly offered assistance to caregivers. Others felt that caseworkers could offer more support from the beginning of placement or give more relevant resources.
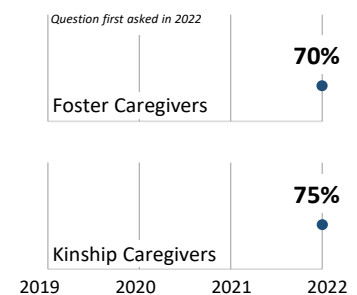
TREND

Positive Responses Over Time

Question first asked in 2022

70%

Foster Caregivers

75%

Kinship Caregivers

2019   2020   2021   2022

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate caseworkers who reach out.

"The thing they do well is offering to help get resources for the child in my care, and offering to be the sticky wheel when it comes to getting things moving." (F)

"They keep me up to date on the services offered and also new services we could use." (K)

"[I] never had to ask for anything, they would just show up with things. My social workers were fabulous." (K)

"They have offered some resources for the children, like events that have been helpful to us." (F)

"[There was] constant outreach and asking if we need support or resources." (F)

"They did everything that was asked of them, and offered a lot more than needed." (K)

"Everyone is always helpful and nice. They always ask if I need anything." (K)

"They always ask if we need help." (F)

"Our caseworker, Shellie Roush, is amazing. Every month at our home safety visit, she always asks if I need any extra resources for the child in care." (K)

"They always ask if we needed help with anything and how our granddaughter was doing." (K)

"They're always calling and seeing if we need anything. If we do, they're good at getting it for us." (F)

"They listen to what I have to say, and try to offer solutions that work." (K)

"Dani was amazing! She consistently responded quickly to our questions, asked what help we needed, and provided helpful information." (F)

"They listen and ask, 'Do you need any help,' and they offer ideas/services that can help." (F)

Some want more offers of support and resources.

"I think they could be more proactive. I think because I was an educator and worked within the system, I knew what was available. I don't think those not in the system have the skills and knowledge to know what to ask for." (K)

"Offer more resources for the children, and not just general resources." (F)

"They didn't really offer any help or information up front when the kids were placed." (K)

"It makes no sense how you will offer drug addicted parents housing and all, but as a caregiver you guys offer no housing help or anything! I literally have to beg for anything from my social worker, and I still don't get nothing." (F)

326 of the 1,256 caregivers who commented (26%) mentioned the overall quality and helpfulness of support.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 21%
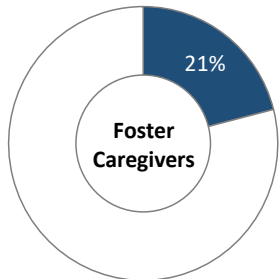
138 of 655 commented
- **67** – Satisfied
- **21** – Mixed or Neutral
- **50** – Needs Work

Kinship Caregivers — 31%

188 of 601 commented
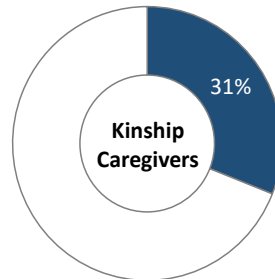- **97** – Satisfied
- **8** – Mixed or Neutral
- **83** – Needs Work

KEY FINDINGS

Approximately half of the comments from both foster (49%) and kinship (52%) caregivers were positive.

- Caregivers appreciate the support offered. Most made general comments, such as:
  o *"They are doing a good job."*
  o *"Everything is good*."
- Some noted a difference in support between private agencies or other sources of support and DCYF.
- Negative comments described a lack of overall support, with a few saying they felt the agency caused more harm than good.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many were happy with the support received.

"I did feel supported the entire case by all parties." (F)

"There is nothing they could do better as they have done very well." (K)

"I couldn't do without them. It is helping me to build my family." (K)

"We feel very supported and appreciate the responsiveness to emails." (F)

"When I had placement of my nephews, they were very supportive!" (K)

"Most of the partners seem to care about our foster child and we really appreciate that." (F)

"They make sure I have everything I need." (F)

"I feel well supported in my situation." (K)

"They have done well so far." (K)

"I've had a great experience over the past 12 months." (F)

"I think they have been great with everything." (K)

"They are helping me because I have three including a newborn. They are good, everything is good." (K)

"I was taken care of, always." (F)

"I feel they have done a good job." (F)

Some said other sources of support were more helpful.

"I honestly get more support from our CASA and private agency case manager." (F)

"The only people who have helped me are the tribal welfare people." (K)

"In some cases, my private agency has been helpful in assisting with de-escalation of BRS [Behavior Rehabilitation Services] kiddos that have been placed. But minimal support from the department." (F)

Others struggled to get support from the agency.

"The state gives very little support and didn't listen and put the adopted kids through a lot." (F)

"They did not really support us as the caregivers." (K)

"I don't feel they have supported me." (F)

"Very little [has been done well]. The system is not designed for children or caregivers, it's designed for bio parents." (F)

"The support that the system claimed to be giving us was inconsistent and condemning. One instance should not destroy a family. How are we supposed to teach children that mistakes are made, but healing can occur? Healing has come to a standstill in our family because of the actions of the system." (K)

Quality and Helpfulness of Support from Specific Agencies or Offices

114 of the 1,256 caregivers who commented (9%) focused on the quality and helpfulness of support from specific agencies or offices.

WHO COMMENTED ON THIS TOPIC?

14%

Foster Caregivers

92 of 655 commented

75 – Satisfied
6 – Mixed or Neutral
11 – Needs Work

Yes
4%

Kinship Caregivers

22 of 601 commented

15 – Satisfied
3 – Mixed or Neutral
4 – Needs Work
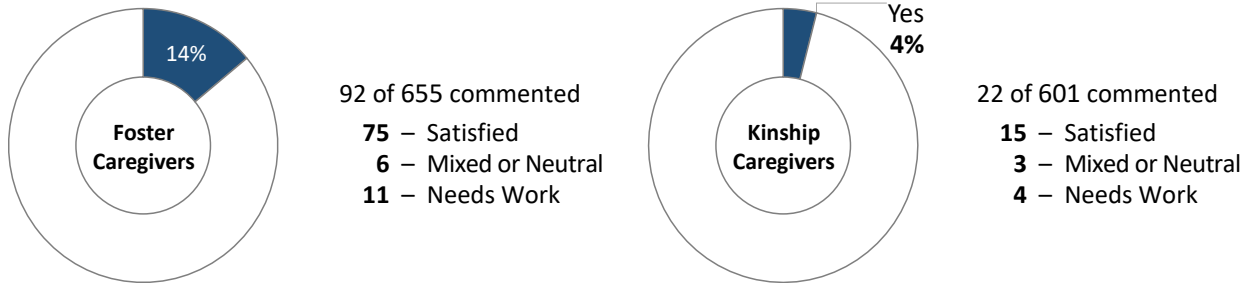
KEY FINDINGS

Caregiver comments on experiences with specific agencies or offices were mostly positive. Both foster (82%) and kinship (68%) caregivers were satisfied with the help and support received from specific agencies or offices. Foster caregivers were more likely to comment, possibly because they are more likely to work with private agencies.

- Many expressed appreciation for the overall support they received, often naming specific agencies or office locations.
- Foster caregivers often said private agencies provided more support and picked up the slack when DCYF was unavailable.
- Negative comments highlighted challenges with obtaining support from specific DCYF office locations.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers are grateful for the support of private agencies or specific offices.

"I can't emphasize how grateful I am to have worked with and gotten to know SeaView. Truly one of a kind, patient, caring, supportive, knowledgeable." (K)

"My private agency supports us above and beyond." (F)

"The YMCA does an excellent job of making us feel supported." (F)

"The supervisor in the Port Angeles office made all the difference in this case and in helping me actually have my granddaughter placed with me." (K)

"Olive Crest is available at any time." (F)

"Fostering Solutions, the private agency that works with us, have been amazing and have provided support to help us keep going through challenges that most people face with foster care." (F)

"Corrine Tipton at CFSF [Community and Family Services Foundation] does an amazing job advocating and supporting me." (K)

"My private agency always has on-call personnel even on weekends, and when needed they return calls in a timely manner." (F)

Foster caregivers found private agencies helpful when working with DCYF.

"My private agency is amazing. When I cannot get the support or info I need directly from DCYF, they assist." (F)

"I like having a middle person to go to DCYF to resolve issues and get answers." (F)

"Private agencies are more responsive and can often times help with resource the state cannot." (F)

"They [private agency] try to be the bridge between DCYF and us and get the answers we can't get from DCYF." (F)

"DCYF messes up a lot and doesn't always have the child's best interest. Went through a third party agency to serve as a buffer." (F)

A few were unhappy with private agencies or specific offices.

"Neither my private agency nor DCYF staff give me a lot of support. I feel forgotten about." (F)
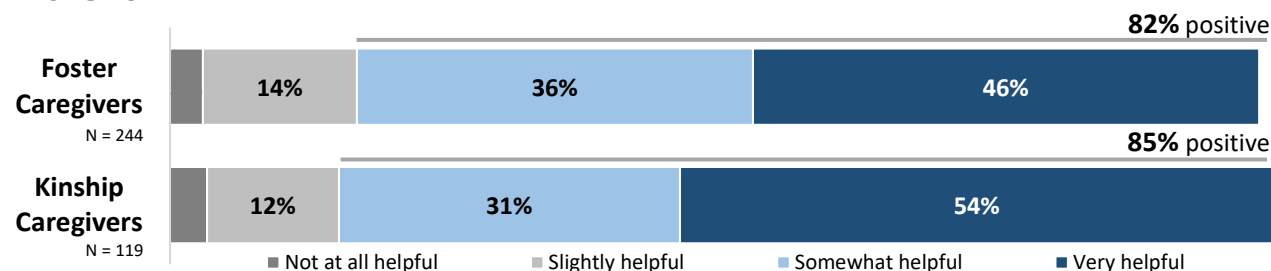
"I got no help from social workers in Yakima." (K)

"Notify us of court hearings in writing. Establish paternity and tribal status at the outset of foster care. Offer more support to the foster parents to keep them in stable placement. Jefferson County does not do these things." (F)

How helpful was the support from the Alliance Caregiver Retention Education Support (CaRES) Program?

More than 8 of 10 (83%) of the 363 caregivers who answered this question said they received helpful support from the Alliance CaRES Program.

RESPONSE

82% positive

Foster Caregivers
N = 244

| 14% | 36% | 46% |

85% positive

Kinship Caregivers
N = 119

| 12% | 31% | 54% |

■ Not at all helpful   ■ Slightly helpful   ■ Somewhat helpful   ■ Very helpful

DETAIL

Almost 3 of 10 (29%) caregivers indicated they received support from the Alliance CaRES Program. Those who did found the program helpful.

Few caregivers explicitly mentioned the CaRES Program in their comments, possibly because the program is still relatively new, having launched in March 2021. Of those who did comment, caregivers appreciated the access to information, support, and networking available through the program:

Related to the CaRES mentor program and their supported mentor group, they are great because they allow people to exchange information and advice, and they enable open communication with caregivers. It allows caregivers to stay in touch, and develop a network because support is the most important thing for caregivers. – Foster Caregiver

Alliance was very helpful to me during licensing and all around information in how to navigate through the system. – Kinship Caregiver

Others were disappointed that Fostering Together, the program that preceded Alliance CaRES, was no longer available. These caregivers felt that many of the resources they had previously relied on disappeared with the switch to CaRES.

The change from Fostering Together to Alliance CaRES caused the local support group we attended to be disbanded. – Foster Caregiver

They could have continued to have a community liaison. Once the Fostering Together was no longer there, there was nothing in place to keep things going. – Foster Caregiver

When I was first starting as a foster parent, there was a group named Fostering Together and they were so very helpful. And then there was an unexpected situation when their contracts expired, and there was a massive vacuum left during that time of knowledge and resources, and there were no people to help you navigate the system. – Foster Caregiver

TREND
Positive Responses Over Time

Question first asked in 2022

82%

Foster Caregivers

85%

Kinship Caregivers

2019   2020   2021   2022
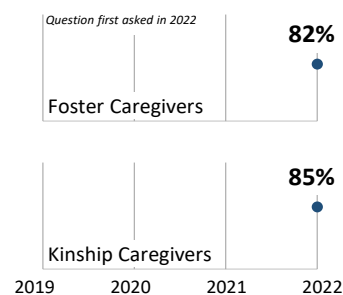
Caseworkers and Other Staff

GettyImages.com/Valeriy_G

Caregivers value collaboration with their caseworker.

"Everyone that I have dealt with has been extremely supportive." – Kinship Caregiver

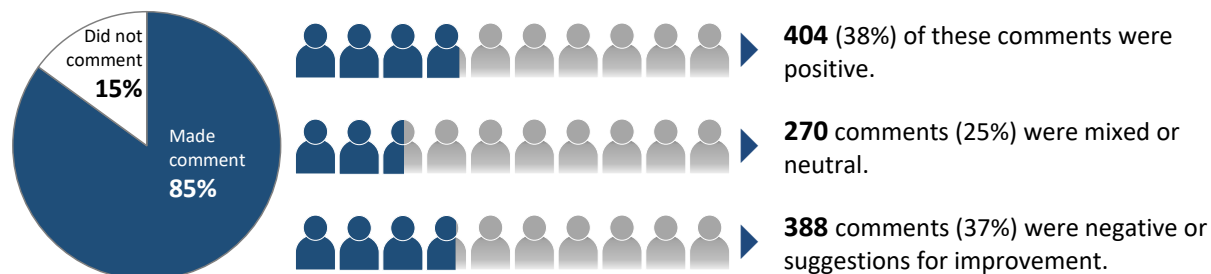Caregivers said caseworkers[1] listen, treat them as part of the team, and include them in meetings. Compared to 2021, foster caregivers were significantly more positive about being included in meetings about the child in their care (77% in 2021 to 83% in 2022, $p < .01$). Between 2021 and 2022, kinship caregivers were less satisfied with caseworkers listening to their input (82% in 2021 to 77% in 2022, $p < .05$) and treating them as part of the team (75% in 2021 to 69% in 2022, $p < .01$).

- *Do social workers listen to your input*? (All Caregivers: 78% positive. F: 79% K: 77%)
- *Are you treated like a part of the team?* (All Caregivers: 71% positive. F: 73% K: 69%)
- *Are you included in meetings about the child in your care?* (All Caregivers: 81% positive. F: 83% K: 80%)

Many caregivers said they were satisfied with caseworker support, listening, and responsiveness. Some asked for more inclusiveness, respectful treatment, or communication from their caseworker. Others expressed concerns about caseworker turnover and staffing, pointing to negative impacts on the support they received.

1,062 caregivers (85%) commented on caseworkers and other staff.

Did not comment 15%

Made comment 85%

404 (38%) of these comments were positive.

270 comments (25%) were mixed or neutral.

**388** comments (37%) were negative or suggestions for improvement.

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[1] This report uses the more inclusive term "caseworkers" to describe child welfare field staff, as not all staff are credentialed as social workers. The term "social worker" has been used in some parts of the report to be consistent with the wording of the survey questionnaire.

510 of the 1,256 caregivers who commented (41%) addressed caseworker support.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 39%
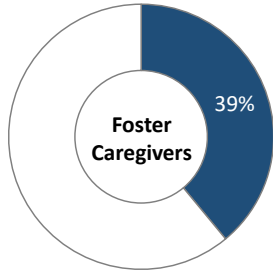
253 of 655 commented
- **139** – Satisfied
- **46** – Mixed or Neutral
- **68** – Needs Work

Kinship Caregivers — 43%
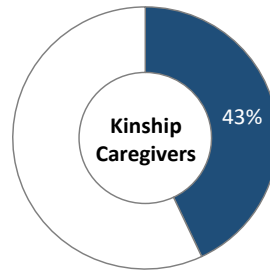
257 of 601 commented
- **158** – Satisfied
- **41** – Mixed or Neutral
- **57** – Needs Work

KEY FINDINGS

Many caregivers commented on the support they receive from caseworkers. Most who commented were satisfied, with 58% describing positive experiences.

- Caregivers value caseworkers who helped meet their needs as well as the child's.
- Many talked about caseworker helpfulness and involvement. Most comments simply mention appreciation for "support" without providing additional details.
- Some noted that support varied, and not all caseworkers gave adequate support.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers are grateful for the support they receive.

"Our CPS caseworker is awesome and always gets the boys whatever I need for them within a few days." (K)

"My agency case manager and staff are the most supportive. They ask about my needs as the caregiver and about those of the kids." (F)

"I feel they are very supportive. If I need anything they seek to be helpful." (F)

"She is always looking out for the best interest of the child. She does all she can to help the parents reunite with the child." (K)

"The social worker did her best in what was happening to reunite the kids to their home." (K)

"They try to support both children, families, and foster care providers." (F)

"They helped me get my children into school and without them I would have been lost." (F)

"The social worker was very good and gave us the support that we needed to care for our grandson." (K)

"The social worker helping with adoption walked me through it and was very communicative. She was amazing." (F)

"They do what's best for the kids." (F)

"Our social worker, Carla Lopez-Wilkerson, was amazing! She went above and beyond for us and the child." (F)

"If I ask for help, they provide it, including emotional support." (F)

"They keep the child's welfare first and foremost in their mind and ensure the child's needs come first." (K)

"They have provided me with anything that I have needed for the care of my sisters." (K)

"I had one social worker last year that was amazing. He asked what I needed help with, and he addressed all of what we needed." (F)

"I received a few different calls just asking if I needed anything for the new placement." (K)

Others said that support depended on the caseworker.

"Some social workers are just awesome about checking in with us as caregivers to help and offer support and others we have definitely had issues with." (F)

"Some caseworkers are great and some just want to pick up their paycheck." (F)

"I've had very good social workers and I've had one that didn't ever contact or call back when issues came up." (K)

"It really depends on the social worker that you get. Some are good. Some are terrible!" (F)

"The initial social worker was lacking in every way possible, but our new social worker puts us in contact with those we need to speak to and always returns calls." (K)

146 of the 1,256 caregivers who commented (12%) mentioned caseworker courtesy and respect.

WHO COMMENTED ON THIS TOPIC?

13%
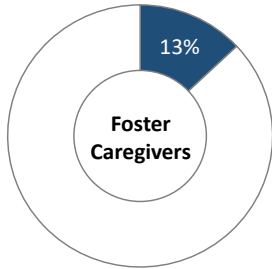
Foster Caregivers

87 of 655 commented

31 – Satisfied
7 – Mixed or Neutral
49 – Needs Work

10%

Kinship Caregivers
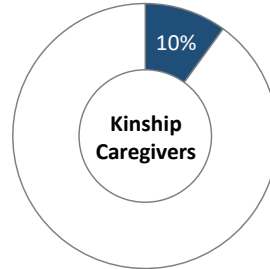
59 of 601 commented

27 – Satisfied
7 – Mixed or Neutral
25 – Needs Work

KEY FINDINGS

Comments from kinship caregivers about caseworker respect were almost evenly split between positive and needs work. Foster caregivers were more likely than kinship caregivers to give negative feedback (56%) on caseworkers courtesy and respect.

- Those who were satisfied described caseworkers who have positive attitudes, are encouraging, and are committed to supporting children and their caregivers.
- Others cited unprofessional and condescending treatment, an inattentive or uncaring attitude, or a general lack of support and sensitivity for the caregiver role.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate caseworkers who are kind, caring, and respectful.

"They are personal and treat me as a real person, not a robot." (F)

"The adoptions unit social workers have been fantastic. They are prompt, helpful in hard situations and seem to genuinely care for our entire family and not just the foster kids." (K)

"Everyone has been kind and does as much as they can to help. They are willing to explain things more than once and in different ways." (K)

"[They] listen and respond with kindness and dignity." (F)

"The positive and friendly attitudes of the social workers have been very supportive." (F)

"They have been very encouraging and sympathetic and generally positive." (F)

"I really liked the people who worked with us. They really cared and would have given us help with any problems if we had had any." (K)

"They seem to really care about my kids' well-being." (K)

"Both my children and I are treated respectfully." (F)

"My kiddo's social worker is absolutely amazing. She checks in, shares resources, she asks about all my kids, not just 'my' kiddo in care." (F)

Some were unhappy with the way caseworkers treated them.

"I have literally been cut off and interrupted during a Zoom visit." (K)

"They're often short in conversations and I don't get the feeling my thoughts or feelings matter. It's an overall negative feeling." (F)

"Working with the state has been a nightmare. I've never been treated so poorly and unprofessionally in my life." (F)

"Foster parents are treated like glorified babysitters. If we advocate for the children in our care, they accuse us of 'interfering.'" (K)

"I would like to see the case managers treat our kids like they're important and not just a foster kid." (K)

"Be professional when communicating (not yelling and hanging up on phone conversations)." (F)

"We are like a babysitter to them, and that is it." (F)

"Quit making caregivers feel like they are the ones in the wrong." (K)

"Their plates are so full. We feel very frustrated by the lack of compassion and support." (F)

"Our caseworker was not on top of it, she would sometimes call the boys by the wrong names. I just wish she would have been more caring." (F)

Nearly 8 of 10 (78%) of the 1,315 foster and kinship caregivers who answered this question said that social workers always or usually listen to their input.

RESPONSE

79% positive

Foster Caregivers
N = 694

| 7% | 14% | 38% | 42% |

77% positive

Kinship Caregivers
N = 621

| 10% | 13% | 24% | 53% |

■ Almost never/never   ■ Seldom   ■ Usually   ■ Always/almost always
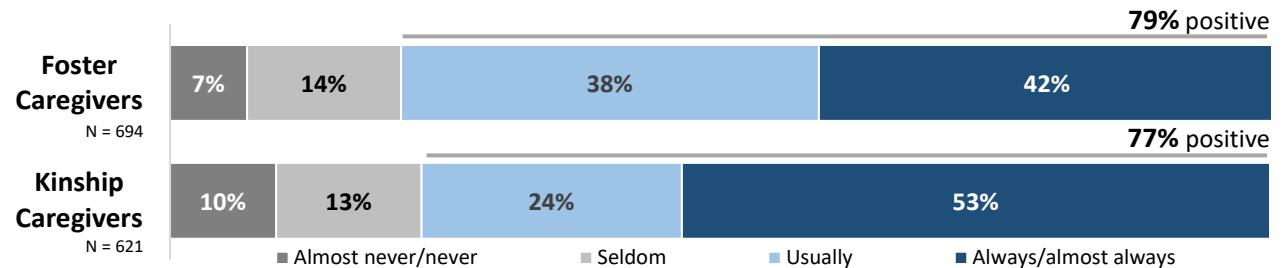
DETAIL

Foster caregiver satisfaction with caseworkers' listening remained the same compared to 2021. The decrease in positive responses from kinship caregivers from 2021 is statistically significant ($p < .05$).

Caregivers are grateful for caseworkers who listen to them, noting the positive impact of being understood and validated. While they appreciate that caseworkers listen, some caregivers want better follow-through on these conversations. Others did not feel that they were listened to when they tried to share concerns or information about the child in their care.

TREND

Positive Responses Over Time

Foster Caregivers

81%   76%   78%   79%

Kinship Caregivers

80%   79%   82%   77%

2019   2020   2021   2022
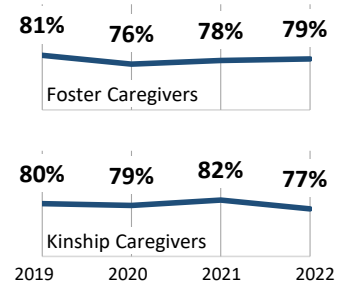
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Most caregivers said that caseworkers listen.

"The social workers listen to our concerns." (K)

"[They] listen to our opinions and what we know about child and family prior to placement." (K)

"I think they listen well and I felt like I was being listened to." (F)

"They listen, which is a big one; being open to listen to what I have to say and my thoughts." (F)

"I felt like the social worker always listened." (F)

"Our new social worker is pretty great. I feel she really tries and listens well." (K)

"[The caseworkers] listen well, agree to take action." (K)

"They listen to my input about the child in my home." (F)

"They do listen to the concerns and issues." (F)

"They listen to my requests. They take suggestions." (K)

"Most of the staff listened to what was going on and the services we requested." (F)

"[They are] available if you need to talk or if you need something." (K)

"They listened even when they can't do anything. They are always willing to listen." (F)

"Available to discuss issues as they come up." (F)

"[Caregivers are good at] active listening in regards to mental health, safety, and the natural frustrations of being a parent to someone who struggles from PTSD and beyond." (K)

"Listened to my or the child's needs and offered solutions." (F)

Some appreciate listening, but want to see action.

"I guess all I can say is that they listen, usually agree, but they don't have any clout to change anything." (F)

"They listen to my concerns but don't act on them." (F)

"Great listeners even if their follow-through sucks." (K)

Others feel that their input is ignored.

"Listen to relatives that express concern about the child and child's parents." (K)

"DCYF employees 'listen' to me but I do not think they hear me or value what I want or what I suggest." (F)

"They ask for your input but then it doesn't seem like they really listen to you or care." (F)

"The social workers need to understand that the foster parents are the sources of information and listen to them." (F)

227 of the 1,256 caregivers who commented (18%) described how well caseworkers understand and listen to them.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 20%
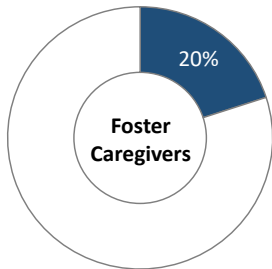
128 of 655 commented
- **79** – Satisfied
- **5** – Mixed or Neutral
- **44** – Needs Work

Kinship Caregivers — 16%

99 of 601 commented
- **56** – Satisfied
- **5** – Mixed or Neutral
- **38** – Needs Work

KEY FINDINGS

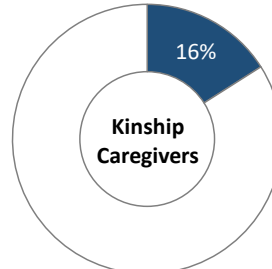More than half of foster (62%) and kinship (57%) caregivers who commented on this topic said their caseworkers listen and understand.

- Caregivers spoke about caseworkers taking the time to listen to concerns and ideas. They appreciated their feelings being validated.
- A few mentioned caseworkers who made sure to listen to the child, not just the adults.
- Others shared circumstances where they did not feel heard, especially when concerns were not taken seriously. Some want caseworkers to be more empathetic.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers value being heard.

"One time they spent extra time on the phone with me to let me talk about some of the situations that were happening." (F)

"When I expressed my doubt about having my granddaughter long term, the social worker recognized that and got right on it and sent letters out to other relatives regarding placement." (K)

"They validated my concerns about behavior." (F)

"Very supportive; they've taken my thoughts and actually listened and not dismissed me." (K)

"I really do think they take what I say into consideration. I know they hear my concerns." (F)

"In the care report for the court, they listen to what we tell them and take it all into consideration." (F)

"Our initial social worker really listened to us and helped us with our concerns. He did things that were appropriate for the child. He really heard what we had to say." (K)

"The social workers listen, and they keep pretty good track of what I tell them." (K)

"They don't dismiss my concerns as a foster care parent." (F)

They appreciate when the children are included.

"My nephew really liked to see them [caseworkers] too. They would talk to him a long time and they built a relationship with him." (K)

"Some social workers spent time talking and playing with the children." (F)

"Social worker comes and talks to the girls." (F)

"They take cues from the child." (K)

Others want their caseworkers to listen.

"It doesn't feel like our voice has been heard or taken that seriously." (K)

"They don't listen to the children in the home and most of the time upset them when they come to visit." (K)

"The kids and our family's needs are considered last. We feel like babysitters and our input seems to never be heard." (F)

"Be more empathetic and listen to foster parents and take their opinions into consideration since they're the ones raising and caring for the children." (K)

"Listen better when checking in with us. Stop looking for yes or no answers." (F)

Are you treated like a part of the team?

More than 7 of 10 (71%) of the 1,334 caregivers who answered this question said they were always or usually treated like part of the team.

RESPONSE

73% positive

Foster Caregivers N = 705	8%	19%	39%	34%

69% positive

Kinship Caregivers N = 629	12%	19%	22%	46%

■ Almost never/never ■ Seldom ■ Usually ■ Always/almost always
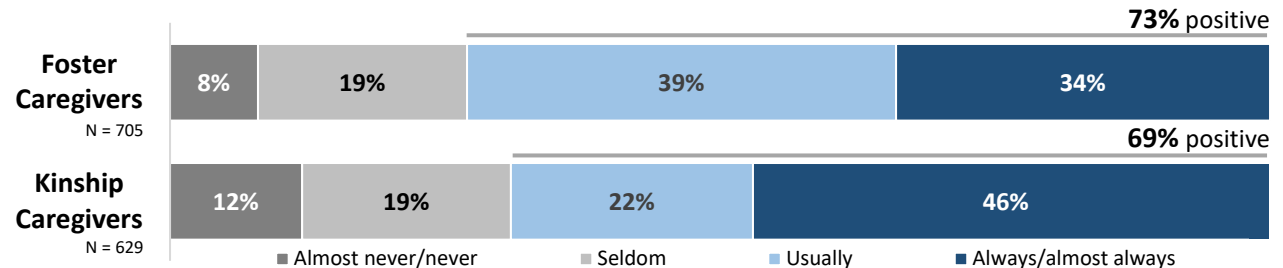
DETAIL

Among kinship caregivers, satisfaction with being treated as part of the team decreased significantly (p < .01) compared to 2021. Changes in foster caregiver satisfaction were not statistically significant.

Caregivers appreciate being included in the team and feeling that partners take their contributions seriously. Some identified the teamwork between partners as essential to addressing the child's need.

Some felt intentionally excluded, saying they were left out of meetings and not given the opportunity to share input.

TREND

Positive Responses Over Time

74%   71%   71%   73%
Foster Caregivers

72%   70%   75%   69%
Kinship Caregivers

2019   2020   2021   2022
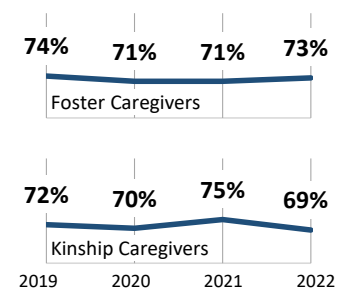
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Most caregivers feel they are a part of the team.

"The great ones [caseworkers] treat you as a team player, an expert in the child's needs, and show gratitude for what you do." (F)

"I have a lot of experience and I have a medical background, so I am a respected voice in the team." (F)

"[They] treat foster parents like a part of the team, not an enemy to the case." (F)

"[They] include me in meetings pertaining to my child and make me feel a big part of the team." (F)

"They always listen to me, and we usually agree on the same solutions to the problem." (K)

"Eager to collaborate." (F)

"[They] ask for our input in child's care and trust our skills and knowledge." (F)

"It comes down to the social workers involving us in conversations. We like to be a part of the team and when they do that, it works better for us. They have been pretty good." (F)

"We were lucky to have great social workers who worked with us. They meant well and did their best." (K)

"They listen to my concerns and actively work with me to be proactive in regard to my child's needs." (F)

"I told her that I super enjoy working with her. I feel like I'm part of a team. I feel like my kiddo gets the best possible care because of her team." (F)

"All of us are part of the team." (F)

A few had mixed experiences.

"I suppose [they] include us in meetings, though I don't think our opinions are valued." (F)

"[With] one social worker we felt like part of the team and they listened, but social worker #2 felt less collaborative and we felt less part of the team and just told what we were to do." (F)

Some mentioned challenges with teamwork.

"Social workers can treat us like we are part of the team rather than babysitters." (F)

"We were often made out to be villains and excluded from almost every meeting and follow up afterwards never happened." (K)
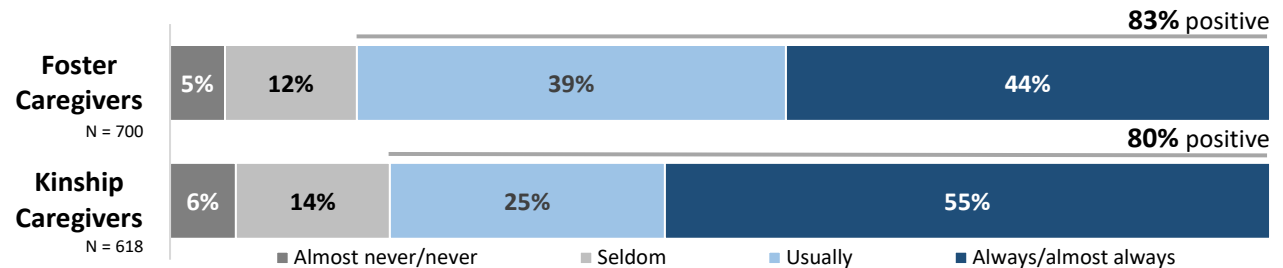
"They say we are a team. But that's not true. They don't help the children or us." (K)

"If we had been given a spot at the table from the beginning, it may have changed the trajectory of the outcome for the child." (F)

Are you included in meetings about the child in your care?

Eight of 10 (81%) of the 1,318 caregivers who answered this question reported that they were always or usually included in meetings about the child in their care.

RESPONSE

83% positive

Foster Caregivers
N = 700

| 5% | 12% | 39% | 44% |

80% positive

Kinship Caregivers
N = 618

| 6% | 14% | 25% | 55% |

■ Almost never/never   ■ Seldom   ■ Usually   ■ Always/almost always

DETAIL

Satisfaction among foster caregivers increased by six percentage points, a statistically significant change from 2021 (p < .01). Changes in satisfaction among kinship caregivers were not statistically different.

Caregivers commented on being included in regular meetings and getting information about progress on the child's legal case. Many appreciate being kept up to date and having their input seriously considered.

A few said they were not invited, and sometimes not allowed, to attend meetings. One caregiver mentioned that they were able to find out about meetings through another source.

TREND
Positive Responses Over Time

73% 76% 77% **83%**
Foster Caregivers

77% 80% 82% 80%
Kinship Caregivers

2019   2020   2021   2022
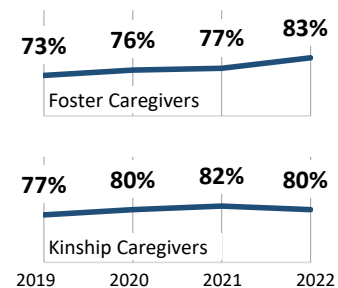
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers mentioned being included in meetings and emails.

"They include me in meetings and keep me informed." (F)

"They ask us for opinions and involve us in meetings involving our kiddos." (F)

"They did have a roundtable discussion every few months, which included the foster parents, bio parents, and the child and I think it helped our kid to build a relationship with his dad." (K)

"Every member of the team listened to me and included us as team members and took us seriously, especially about what we viewed as the child's major needs." (F)

"[We are] included in family meetings with the parents." (K)

"Social workers assigned to my foster child's case have done a pretty good job trying to include me in progression of the case and what supports are needed." (F)

"[They] tell me when meetings are." (K)

"They are consistent with meetings." (K)

"I was given ample notice of all meetings and kept well informed." (F)

"They have the team meetings, those are the most helpful." (F)

"Private agency meets every month. They are available to talk when needed." (F)

"The social workers try to work around my schedule with health and safety meetings." (F)

"They include me in emails." (K)

"In the beginning, social workers were more helpful and included me." (K)

"Before COVID, [I] had weekly meetings with others." (F)

"[I like] having meetings about scheduling and expectations for the children." (K)

Some said they do not have access to meetings.

"We are excluded from family meetings since the children were returned home." (K)

"Make sure to tell me when court dates are and include me in the meetings when possible." (F)

"The social worker and DCYF and lawyer seem to see me as the caregiver only and that my place is to not be involved in the meetings and court as far as custody." (K)

"I am never included on the emails about meetings or court dates. The only reason I found out is my child's CASA keeps me in the loop." (F)

"She [caseworker] didn't include us in any meetings." (K)

100 of the 1,256 caregivers who commented (8%) specifically mentioned caseworker inclusiveness.

WHO COMMENTED ON THIS TOPIC?

12%
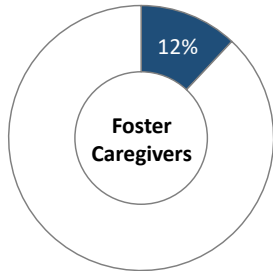
Foster Caregivers

76 of 655 commented
18 – Satisfied
6 – Mixed or Neutral
52 – Needs Work

Yes
4%

Kinship Caregivers
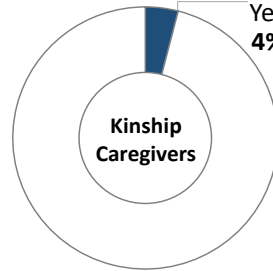
24 of 601 commented
6 – Satisfied
2 – Mixed or Neutral
16 – Needs Work

KEY FINDINGS

Foster caregivers were more likely to make comments about caseworkers making efforts to include them, but the balance of comments for both kinship (68%) and foster (67%) caregivers cited challenges.

- Caregivers appreciate involvement in decision-making and planning for the child in their care.
- Many caregivers want their input to be considered when it comes to making decisions for the child. They feel that because they know the child well, their input should be taken more seriously.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers want to participate.

"[They] include me in decision-making." (F)

"They always include us in the care of the child." (F)

"Private agency always listens and takes our concerns to better help child/children." (F)

"The social workers listen to my suggestions. They accept my input." (K)

"I really appreciated that they trusted my advice and recommendations." (F)

"They always keep me included in decisions about the child." (K)

They appreciate being included.

"We all need to be on the same team. Without this the system falls apart. The child is our center and we need to think this in order to help the child." (K)

"Give me a voice in the child's case." (F)

"They talk all the time about helping but at the end of the day we do NOT feel supported or a part of the team when making decisions." (F)

"Make the foster parents a part of the team and give us the same rights as the kinship caregivers have. The foster parents must be listened to." (F)

"They need to listen to our input because we live with the kids and are with them all the time." (K)

"Ensure that we are included in the child's long-term planning and development." (F)

"Include us more in the planning for the children." (F)

"The social workers could communicate better and keep me in the loop of everything. They could ask my opinion before they make appointments, etc." (K)

"We're always honest about what we feel a child needs, even when the social worker doesn't agree. We're then either ignored or targeted. It doesn't make us feel very good about what we are trying to do." (F)

"I had one worker that always agreed with me to my face, but her actions showed that she didn't really value my opinion." (F)

"It would be nice to be included on court cases, and the progress parents are making or not making." (K)

"Listen and work with us to advocate for the kids." (F)

"We weren't part of any meetings, and our opinion was never asked or heard." (K)

"Let the foster parents who actually are with these children 24-7 be included in decision-making." (F)

"We were totally left out of the loop. They made all the decisions without us." (F)

226 of the 1,256 caregivers who commented (18%) described caseworker communication.

WHO COMMENTED ON THIS TOPIC?

19%

Foster Caregivers
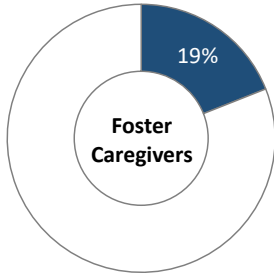
123 of 655 commented
36 – Satisfied
11 – Mixed or Neutral
76 – Needs Work

17%

Kinship Caregivers
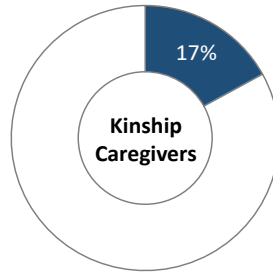
103 of 601 commented
26 – Satisfied
7 – Mixed or Neutral
70 – Needs Work

KEY FINDINGS

More than half (59%) of the caregiver comments about caseworker communication were negative.

- Those who were satisfied with communication noted the amount and consistency of communication with their caseworkers.
- Caregivers often say they want "*better*" communication, without indicating anything specific.
- Many noted the importance of timely communication and keeping caregivers up to date.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers like regular and clear communication.

"Communication was open all the time with workers regarding children in my care." (F)

"Very communicative." (K)

"Good communication, regular and consistent." (K)

"Absolutely, an abundance of communication." (F)

"They communicated with us well." (F)

"Our social worker was very good about communicating what was next." (K)

Many want better communication from their caseworker.

"They need to improve their communication. We don't hear anything on a regular basis, and they need to follow up when we try and communicate with them." (K)

"So, the team itself is great, but communication sometimes is not great." (F)

"Social worker needs better communication with the foster family." (F)

"The biggest thing is the communication. They need to do a much better job between the social worker and the placement team." (K)

"There was never any communication with the department, and they did not tell you what was going on." (K)

"I think [they could do better with] ongoing communication. I think the foster parents are always the last to know." (F)

"I've been really annoyed with the lack of communication that's been going on with the system." (K)

"Communication has been a struggle and getting support because sometimes the info comes too late to actually help with the issue." (F)

"With one of our foster children, no one communicated about the child, and no one knew the whole story about her life. She had a social worker and a counselor and there seemed to be very poor communication." (F)

"There has been a lot of miscommunication. They will tell us one thing and then it is a 180 turnaround at a staffing [meeting] or at the court hearing." (K)

"Communicate and tell us what the plan is. So many issues would have been cleared up quickly or prevented if they answered voicemail and responded to email and text. This lack of communication is why we often feel unsupported." (F)

"Better communication with the social worker. They need to update the foster parents better as to what is happening in the case." (F)

"Better communication between agencies, private and otherwise. More consistent and timely communication. It is very difficult to get a response from DCYF." (K)

366 of the 1,256 caregivers who commented (29%) noted caseworker responsiveness.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 29%
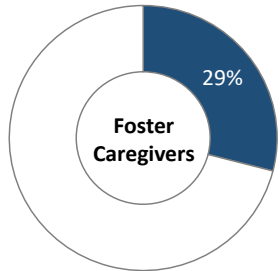
192 of 655 commented
94 – Satisfied
22 – Mixed or Neutral
76 – Needs Work

Kinship Caregivers — 29%
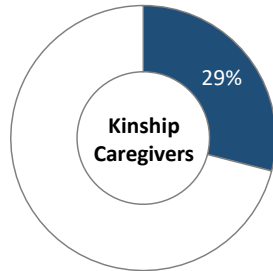
174 of 601 commented
75 – Satisfied
18 – Mixed or Neutral
81 – Needs Work

KEY FINDINGS

Caregivers have varied experiences with caseworker responsiveness. Foster caregivers are slightly more likely to give a positive response (49%) compared to kinship caregivers (43%) regarding the responsiveness of their caseworkers.

- Many caregivers praised timely caseworker responses.
- They appreciate help with specific needs, finding resources, and being creative with problem-solving.
- Caregivers were frustrated when caseworkers failed to follow through on requests.
- Foster caregivers were more likely to point out issues with timeliness.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Responsiveness is important to caregivers.

"One call is all it takes for them to step in for an emergency situation." (F)

"If there is a need the child has, our social worker is right on top of the issue. We were able to get approval to take the kids to the beach without a problem." (F)

"They listen and move as quickly as they possibly can in order to help fix the problem. They find a solution to the problem quickly." (K)

"I think in suggesting a counselor for the children and getting me a referral and getting their medical straightened out; mentioned one time and they were on it." (K)

"The social worker was very receptive in getting what I needed for the kids when I called and asked." (F)

"I like the way they jump right on dealing with kids needing help." (K)

"The Parkland office social workers were extremely responsive, supportive, and excellent communicators." (F)

"I felt like if I reached out someone always followed up." (K)

"They responded to my requests immediately." (K)

"They are very quick to respond if I have a question or need." (F)

Some detailed challenges with follow-through.

"When I did talk to them, they always listened and agreed with me. But not once was the social worker able to follow through with the discussion." (F)

"My case worker was pretty new on the job and it showed. Never followed through with things." (K)

"Social workers usually don't follow through on things." (F)

"Following through! Having solutions rather than sympathy." (K)

"They are really good about asking 'Is there anything we can do to support you?' but the follow-through has been poor." (K)

Others wanted quicker responses from caseworkers.

"I wish the system could have moved faster, getting answers to me quicker. Sometimes they let things drag and don't respond very quickly." (F)

"The social worker needs to follow through with the requests in a timely manner." (K)

"Respond to us faster. When we are having trouble with the kids, we could use more support from the social workers." (F)

"Be more prompt in responding or doing things they said they would." (F)

406 of the 1,256 caregivers who commented (32%) mentioned something about caseworkers that fell outside the existing categories.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers 33%
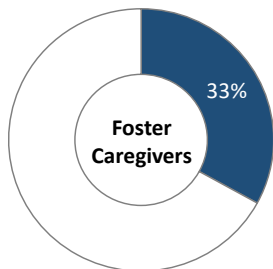
217 of 655 commented

- **62** – Satisfied
- **25** – Mixed or Neutral
- **130** – Needs Work

Kinship Caregivers 31%

189 of 601 commented
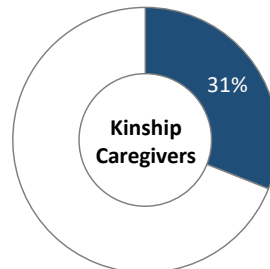
- **60** – Satisfied
- **13** – Mixed or Neutral
- **116** – Needs Work

KEY FINDINGS

Caregivers talked about topics such as scheduling, caseworker friendliness, and training. Most caregivers who provided other comments about caseworkers (53%) talked about things that could be improved.

- Caregivers appreciate caseworkers who are considerate of caregivers' schedules, make themselves available, and are approachable.
- Many shared more negative experiences, such as caseworkers not considering caregivers' needs and not sharing all information that would help take care of the child. A few said they encountered discrimination.
- A group of caregivers said that caseworkers need better training, with some pointing to inconsistencies in the information they get from different caseworkers.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers like working with caseworkers who are available, friendly, and flexible.

"The social workers were always available when I needed them." (F)

"Most work very hard and appreciate good foster parents who are truly fostering for the kids." (K)

"They worked around our schedule, they always made sure we knew what our options were at every turn during the case." (F)

"They supported me in maintaining healthy boundaries." (F)

"The caseworker and guardian [ad litem] are always readily available if we need support. They are friendly and encouraging. Care deeply about the work they do." (K)

"They worked with my schedule in planning for the kids." (F)

They want caseworkers who are honest, knowledgeable, and considerate.

"Understanding the needs and safety of the foster family could be more emphasized." (F)

"Take into consideration that we have lives and jobs. Do not schedule meetings, visits, etc. without taking our schedule into consideration." (K)

"Stop placing blame on foster parents for everything." (F)

"Tell the true story of the child coming into care, not half-truths to make the child look 'more appealing.' This only causes issues when true behaviors show up." (F)

"There are a lot of racial disparities and microaggressions in DCYF." (K)

"It would be nice if all the people on the case were real familiar with the kids and their needs. They don't get to know the kids that well." (K)

"Be honest and open." (F)

"Have better information. Be more knowledgeable." (K)

Some felt that caseworkers need better training.

"It would be good if the social workers were better trained." (F)

"They [caseworkers] have too much on their plate and it appears they lack the support and training they need to do their jobs well." (K)

"The system seems fragmented. I often get different answers to the same question from different people." (K)

"Social workers need to get more training. I feel like I've had to tell the social worker what next steps to take in a situation." (F)

97 of the 1,256 caregivers who commented (8%) said more caseworkers are needed.

WHO COMMENTED ON THIS TOPIC?

9%

Foster Caregivers
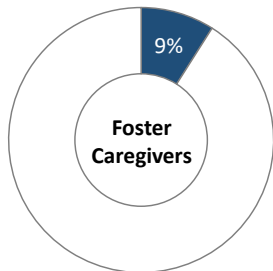
56 of 655 commented

0 – Satisfied
0 – Mixed or Neutral
56 – Needs Work

7%

Kinship Caregivers
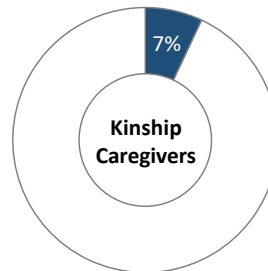
41 of 601 commented

0 – Satisfied
0 – Mixed or Neutral
41 – Needs Work

KEY FINDINGS

Fewer than 1 of 10 caregivers mentioned needing more caseworkers, but their comments describe challenging situations. They noted the difficulty, pressure, and stress of a caseworker's daily workload, with many acknowledging that caseworkers are doing their best given the circumstances. Caregivers cited three main challenges they encounter related to caseworker staffing and turnover:

- High caseworker turnover rates and lack of continuity often leads to inefficiencies.
- Some caregivers noted that turnover means many of the caseworkers are inexperienced, limiting their ability to provide adequate support.
- Large caseloads for caseworkers mean they are unable to devote enough time and attention to each case, leaving caregivers feeling unsupported.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caseworker turnover negatively impacts caregivers.

"The agency needs more social workers or fewer cases per worker. I feel sorry for the social workers and what they have to go through. I would feel better supported if I didn't feel so hesitant in asking for help." (F)

"It would be nice if the social worker that was replacing the case was informed of what was happening in the case. They should be aware of this information before making contact with the foster child or foster parent. We have had four social workers within a year." (K)

"I think that we had 10 different social workers in our two-year case. They need more consistency." (F)

"We have had four social workers in a year and each one of them has lost the home study file so we had to start over four times." (K)

"The resources are there, but can't be used, because there is not enough staffing." (F)

"We have had so many different social workers in the past six years. It makes it difficult to navigate when there is so much change." (F)

Turnover leads to a lack of experienced caseworkers.

"Treat social workers better so that caseworkers would be more experienced. The turnover of social workers hurts their productivity." (K)

"Staff are inexperienced and there is a high turnover." (F)

"DCYF has so much turnover it is hard to get a correct answer." (F)

"DCYF needs more qualified workers." (K)

Caregivers said caseworkers are overworked.

"I feel like they have too much on their plate. I'm sure there is a shortage of social workers which is why. If they have a problem with one or more of their placements frequently, it can leave others pushed to the wayside." (K)

"Over the years the social workers have been stretched so thin and we see that in their ability to dedicate time to any particular case." (K)

"It appears the caseloads are too high, so they can't cover all the bases. DCYF needs to get more social workers." (F)

"Losing so many staff has put everyone in a position of 'putting out fires' rather than have the ability to abide by timeframes or be proactive." (K)

"I don't believe it is possible for the DCYF workers that I've had to do a sufficient job when it has been a constant turnover of DCYF employees." (K)

"Due to workload, everything is an emergency, and if it's not, it falls through the cracks." (F)

Access and Process

GettyImages.com/Shironosov

Caregivers want effective processes and consistent access to caseworkers.

"All of the social workers were so supportive and cared so much about the kids. They checked in every month, and they made sure that they were getting to doctor appointments. Until the law changed, and then foster parents weren't getting any support." – Kinship Caregiver

More than three of four caregivers (76%) said they usually or always can get help when they ask. Foster caregivers were more likely than kinship caregivers to give positive responses (p < .05).

- *Can you get help when you ask for it?* (All Caregivers: 76% positive. F: 78% K: 73%)

Over half (53%) of caregivers who made comments about access or process mentioned challenges. Caregivers stated issues with policy and process, and many commented on timelines not being met. Some noted that caseworker turnover caused process inefficiencies, and they want more consistency to support the child[ren] in their care. Others feel that the system does not adequately consider the needs of children, with some citing new legislation that focuses on reunification.

Caregivers appreciate consistent contact with caseworkers, with many noting how helpful it is to have a variety of contact options (e.g., text, email, phone call). They are grateful for caseworkers who respond quickly with the requested help or information. Some also shared instances of caseworkers' extra efforts to check in and meet the caregivers' needs.

674 caregivers (54%) discussed access and process.

Did not comment **46%**

Made comment **54%**

213 (32%) of these comments were positive.

105 comments (16%) were mixed or neutral.
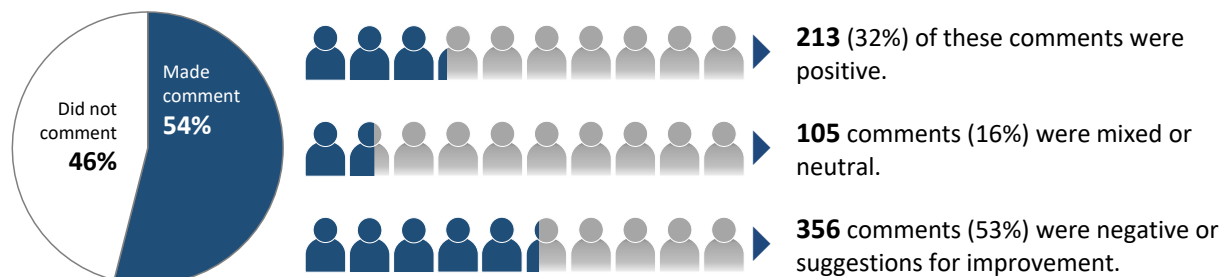
356 comments (53%) were negative or suggestions for improvement.

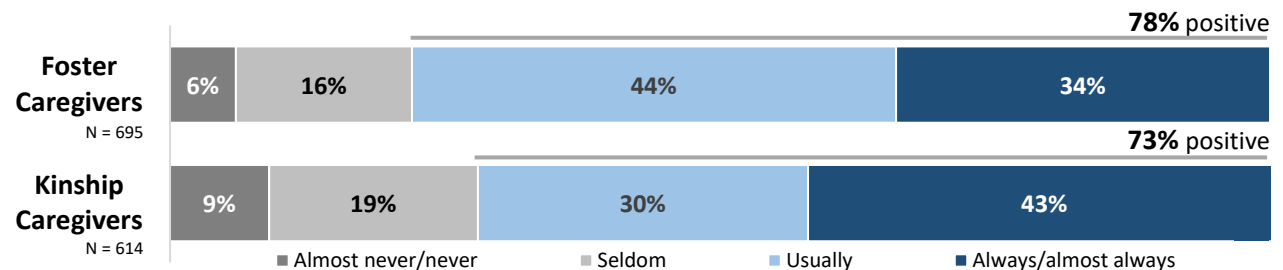**More than 3 of 4** (76%) of the 1,309 caregivers who answered this question reported that they always or usually can get help when they ask for it.

RESPONSE

78% positive

Foster Caregivers
N = 695

6%	16%	44%	34%

73% positive

Kinship Caregivers
N = 614

9%	19%	30%	43%

■ Almost never/never ■ Seldom ■ Usually ■ Always/almost always

DETAIL

At 78% positive, foster caregivers were more likely than kinship caregivers (73%) to say they could get help when they asked for it (p < .05). Differences across years were not significant for foster or kinship caregivers.

Caregivers were grateful for caseworkers who responded to calls and requests quickly. They expressed appreciation for assistance with their needs, including requests for information and resources. Others found getting in contact with their caseworkers challenging, and their ability to get help was limited.

TREND
Positive Responses Over Time

76% 79% 78% 78%
Foster Caregivers

76% 73% 77% 73%
Kinship Caregivers

2019   2020   2021   2022
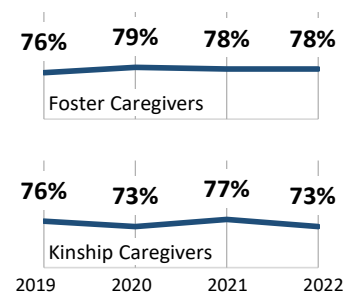
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers can get help when they need it.

"Our social worker is AMAZING. Daniel Althoff has been there to help with almost everything we asked. If he didn't have the answer, he tried to get me in touch with a person who did." (F)

"If I need help with anything the social worker helps me out a lot." (K)

"Friendly and helpful and always ready to help with any uncertainties we may have had." (K)

"They are always available to help with answers needed for care of children and getting the things children need." (F)

"Very helpful and informative. Responsive." (F)

"I really felt that especially the Guardian ad Litem we worked with and the first social worker were very attentive to our needs." (K)

"Usually they are very cooperative when asking for help, and explain why they can or why they cannot do what you ask." (K)

"If I ask for something they always get back to me and do not leave me hanging." (F)

"[Caseworkers] offer guidance and are available when I ask for assistance." (K)

"They are trouble shooters if I need help!" (F)

"The social workers helped me with the educational aspects for the child. Whenever I emailed my social worker, he got right back to me." (K)

"If I call them, they go out of their way to help me if they possibly can." (F)

"My private agency has been awesome – answers the phone every time and works hard to provide me with answers or help as I need it." (F)

"They tell me I can always call if I need anything." (K)

Some said they struggled to get assistance.

"Everything is fine as long as we don't ask for help. When help is needed, nobody is there." (F)

"They really want to help you, but they don't have resources to help with your needs. If we don't have an immediate resource in our small community, they are not able to help find the resource. I don't get any tangible resources or anything back." (K)

"[We get] the basics only. There's no support when it's actually needed." (K)

"Some workers aren't very attentive to the needs of the child. They place them and then walk away, only to come back to do the health and safety visit." (F)

249 of the 1,256 caregivers who commented (20%) mentioned access to staff.

WHO COMMENTED ON THIS TOPIC?

22%
Foster Caregivers
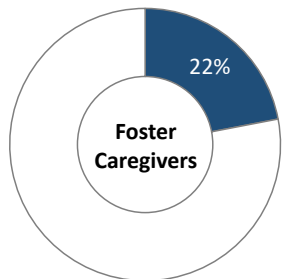
145 of 655 commented
102 – Satisfied
9 – Mixed or Neutral
34 – Needs Work

17%
Kinship Caregivers

104 of 601 commented
70 – Satisfied
2 – Mixed or Neutral
32 – Needs Work

KEY FINDINGS

Many caregivers (69%) who commented on access were satisfied with the accessibility of their caseworker, including consistent availability and prompt responses.

- Caregivers appreciate easy and quick access to caseworkers, with some mentioning the many ways in which they can get in contact (e.g., phone, text, email).
- A few shared stories of caseworkers who went above and beyond to be accessible to caregivers.
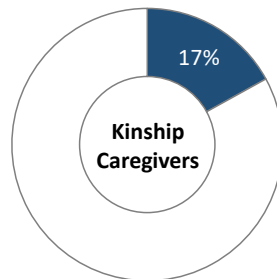- Others shared experiences of not being able to get in contact with caseworkers. Many want more timely responses to their messages.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Most had reliable contact with their caseworker.

"They return my phone calls and email in a timely manner. Being able to communicate by text is great." (F)

"The social worker was always there for us when we called and had questions. They respond to my phone calls and emails in a timely manner." (K)

"They are available whenever we need them. They return calls promptly." (F)

"They are all just a quick email/text away and knowing that I can get help with anything immediately is reassuring." (F)

"They communicate well with texting and emails." (K)

"They respond to my emails and phone calls in a timely manner even if it's something little." (K)

"I'm always able to contact them and if I leave a message, they get back to me very quickly." (F)

"The social worker does well at keeping in contact with me. If I call, she gets back to me within a few days." (K)

"Our social worker is very communicative, easy to contact. Responds quickly." (F)

"I appreciate being able to communicate via text instead of always needing to call or play phone tag." (K)

"I had several social workers that were always at their phones when I needed them." (F)

Some caseworkers made extra effort to be available.

"My social worker texts back and forth even when he's out of state on vacation." (F)

"They usually always responded to my phone calls even if they're in the middle of the night (one particular social worker)." (F)

"The supervisor takes my calls anytime, even on weekends!" (K)

Others described challenges with access and timely responses.

"The phone tag calls get old." (F)

"Although the CPS workers are kind, it is usually impossible to reach them via email or phone." (K)

"Answer emails within two business days, even if it is just a 'working on this. will get back by (insert date).'" (F)

"When I have questions to ask, the social worker could get back to me sooner. It takes seven-plus days to get a response. Sometimes I get no response to an email I have sent." (K)

"DCYF could greatly improve on communication. They place a child with me and after the first two weeks I couldn't get ahold of our worker. I had to call the supervisor and it was unreal. At one time my private agency had to go above the supervisor to even get a response." (F)

168 of the 1,256 caregivers who commented (13%) described the consistency of their contact with caseworkers.

WHO COMMENTED ON THIS TOPIC?
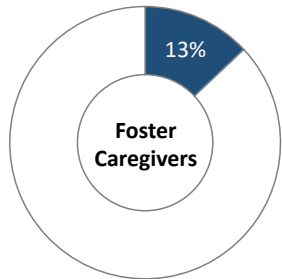
Foster Caregivers 13%	87 of 655 commented
	59 – Satisfied
	9 – Mixed or Neutral
	19 – Needs Work
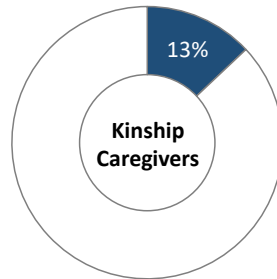
Kinship Caregivers 13%	81 of 601 commented
	58 – Satisfied
	7 – Mixed or Neutral
	16 – Needs Work

KEY FINDINGS

Most caregivers (70%) who commented on the consistency of contact with caseworkers spoke about positive experiences. Foster and kinship caregivers gave similar responses for both positive and negative comments.

- Many caregivers are grateful for consistent visits and phone calls.
- They appreciate the caseworkers who maintain regular communication and connection.
- Some caregivers want more caseworker interaction in addition to the health and safety visits.
- A few said that caseworkers did not keep in touch with them at all following placement or did not check in regularly.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate consistent contact with their caseworkers.

"I have a great team who checks in when there are changes or any potential upcoming struggles." (F)

"The providers I have worked with reach out often and check in to see if I have any needs." (F)

"[They] always check in to see if I need anything." (K)

"They do health and safety visits each month." (F)

"Our social worker, she was always willing to listen and was frequently coming to visit to check up on our little guy." (F)

"They call to ask how we are doing, call to remind of upcoming child's appointments." (K)

"Each of the many caseworkers the boys have had have been consistent about the monthly visits." (K)

"There is more communication now than in prior years. They stay in touch better than before." (F)

"They make monthly visits for me and the child. The private agency comes out weekly." (F)

"The first caseworker we had was amazing and encouraging. She always kept in contact with us, kept us informed on the things she could, and was super helpful." (K)

"Courtesy social worker has been good about coming to the monthly meeting." (F)

"Our social worker comes every month and sees the girls and they love her." (K)

Some were unhappy with the lack of caseworker contact.

"Very limited contact from social workers, lack of organization, almost no communication in regards to our case or court dates." (F)

"Basically they would come around once a month and other than that there was no contact. I'm sure that is what made it more difficult." (K)

"They haven't talked to me much." (K)

"Giving us updates would be nice." (F)

"We NEVER hear from our social worker. She was told at the last hearing to call and give us updates and she has yet to call." (F)

"I've felt supported by all partners I've interacted with, with the exception of the social worker assigned to the case. Their communication was inconsistent, incomplete. They were very uninvolved, and unresponsive." (K)

"We rarely see them." (F)

157 of the 1,256 caregivers who commented (13%) mentioned general processes.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 13%
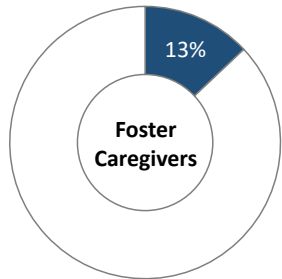
86 of 655 commented
- **1** – Satisfied
- **4** – Mixed or Neutral
- **81** – Needs Work

Kinship Caregivers — 12%
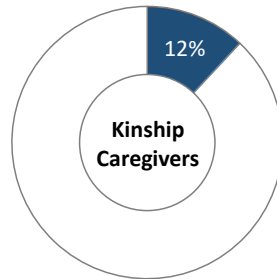
71 of 601 commented
- **5** – Satisfied
- **4** – Mixed or Neutral
- **62** – Needs Work

KEY FINDINGS

Nearly all caregivers (91%) who commented on general processes expressed dissatisfaction. Foster and kinship caregivers made similar comments about process delays and the overall focus of the child welfare system.

- Some caregivers commented on the department's goal of reunification and specifically cited HB1227 (2021-22). A few support the policy, but others think it is at odds with focusing on the needs of the child.
- Many caregivers feel the department does not adequately consider children's needs. They see the system as a whole needing to adjust their practices to make children the priority.
- Some caregivers said that general processes were too slow, citing required procedures and insufficient social worker training as barriers.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

There were mixed reactions to the Department's reunification policy.

"The best thing that they did was to return the child back to their parents." (K)

"I am all about reunification! I think the grumbling I hear about it are from people who want to parent and see these kids as theirs." (F)

"I think that the system as a whole needs to focus more on what is really in the best interest of the child and less on just getting them back to their parents. Staying connected to their parents is important, but that doesn't mean living with them is in their best interest." (F)

"Sometimes the system tries too hard to reunite the family when it truly isn't in the best interest of the child." (K)

Caregivers are concerned that the focus is not on the child's needs.

"The social worker needs to listen to the child as to their needs and not the adults." (F)

"Staff really care about the children, but the system isn't set up to always serve the best interests of the child." (K)

"Support and care about the child's safety and well-being as much as they care about parental rights. Somehow do both. Kids don't have lawyers so they have no voice in the system." (F)

"I don't care if they support me, I care that they are not supporting the children." (F)

"Put the child's well-being (emotional, physical, mental) first in all decision making." (K)

"I think as a whole what is best for the child needs to be the number one priority." (F)

"Act in the best interest of the child." (F)

"Our laws restrict us from getting the kids the help they need." (K)

Some pointed to challenges with slow processes.

"I think the timing is too slow in getting things done, most of the time." (K)

"This is so difficult because the process is confined to legalities and a painstaking timeline with milestones driven by the department/state." (K)

"The process we went through was bumpy because balls kept getting dropped along the way. We did all the paperwork and the case begins to move, but then they realize the paperwork for another section wasn't done and the workers didn't seem to know what work was required." (F)

"The bureaucracy is large and it's hard to get it to move – this case is dragging on." (K)

242 of the 1,256 caregivers who commented (19%) mentioned specific processes.

WHO COMMENTED ON THIS TOPIC?

20%

Foster Caregivers
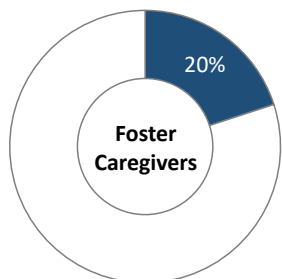
131 of 655 commented
9 – Satisfied
1 – Mixed or Neutral
121 – Needs Work

18%

Kinship Caregivers
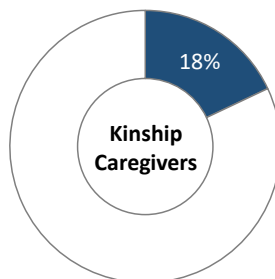
111 of 601 commented
3 – Satisfied
5 – Mixed or Neutral
103 – Needs Work

KEY FINDINGS

Most caregivers (93%) who commented on specific processes were dissatisfied. Comments covered a variety of issues, but caregivers mentioned licensing and paperwork processes most often.

- Caregivers feel that frequent caseworker turnover disrupts many processes and causes more stress for the family and child.
- Many had complaints about timeliness, from licensing to termination of rights.
- Some foster caregivers described going through disruptive investigations. A few noted that these experiences make them no longer want to foster.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers are frustrated with process challenges that occur with caseworker turnover.

"It would be great if the children were able to have consistent social workers and not be moved from caseworker to caseworker where information is lost." (F)

"[Don't] change social workers so often. I have had to fill out paperwork twice and still got nothing." (K)

"Keep the same caseworker from beginning to the end. Changing people all the time makes it harder to have a personal connection. Kids get used to a person, then it's just another person that disappears from their life." (K)

"We had four different social workers. Consistency needs to be better." (F)

Licensing and permanency processes can be lengthy.

"It took almost a year for us to get licensed to be able to have our niece and nephew placed with us." (F)

"We are finally in the last stages of adoption which took 9 years!" (F)

"It would have been helpful to get licensed faster. It took us a long time despite us having all materials filled out in advance of placement." (K)

"Paperwork for court stuff was delayed. [We] had eight social workers in two years and there was a delay in filing for guardianship." (K)

Some feel that termination of rights takes too long.

"The overall timeframe of the case of my placement has taken 4 ½ years to get to the TPR [Termination of Parental Rights] trial. This is partially due to COVID. However, I feel the process has been delayed far too many times." (K)

"I've had kiddos for three-plus years before the termination of their rights was finalized." (F)

"It took too long to get parental rights terminated." (K)

"We've had this child over four years and still no termination of rights!!" (F)

A few foster caregivers described stressful investigation processes.

"Revise the investigation process and back foster care parents." (F)

"I was accused of hurting one of the children and they did an investigation when this child didn't like me and wanted to get out of my home. They really only listened to the child and did not listen to my side of the story about what really happened… because I work with children for my employment, I wasn't able to work until the investigation was complete." (F)

"The parents could call in with any complaint and an investigation was started and you are constantly being investigated." (F)

Information
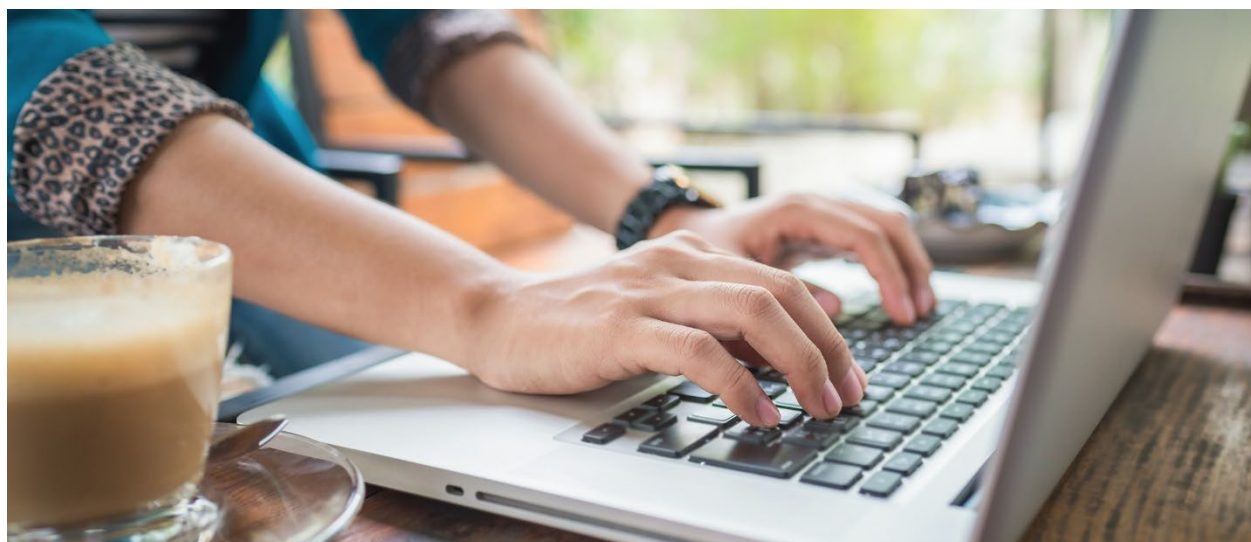
Accurate and complete information is essential.

"I think our last social worker has been the most informative one. She has been very good in providing us information about the case and keeping us informed. She is very good in returning messages and returns my calls and answers my questions. The CASA [Court Appointed Special Advocate] has been the best about giving us current information about when the court hearings are held so we can make arrangements to participate on the Zoom calls." – Foster Caregiver

Caregivers are often satisfied with the information they receive. Kinship caregivers are more likely than foster caregivers to say they usually or always get adequate information about the child placed in their home.

- *Do you get adequate information about the needs of the children placed with you, such as medical, behavioral, developmental, and educational needs?* (All Caregivers: 77% positive. F: 71% K: 84%)

Nearly 4 of 10 caregivers commented on information sharing, with just over half of those (51%) giving negative responses. While caregivers understand legal restrictions, they want caseworkers to share as much information as they can about the child. Some also felt they were not kept up to date on the case.

Positive comments commonly expressed gratitude for caseworkers who provide information that helped caregivers attend meetings and make informed decisions about the child in their care.

488 caregivers (39%) commented on information sharing.
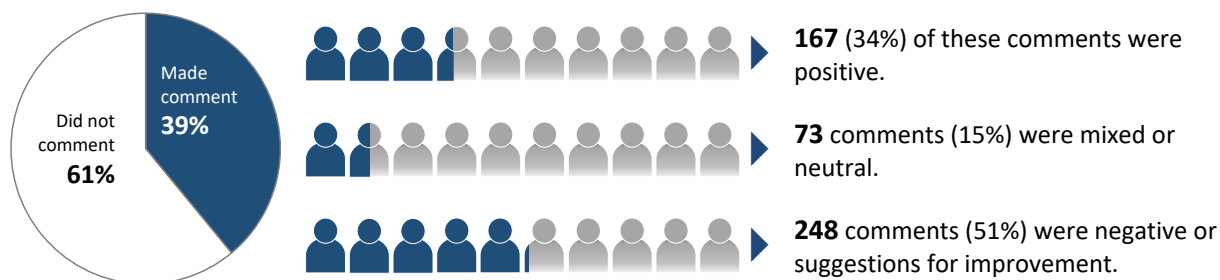
Made comment **39%**

Did not comment **61%**

167 (34%) of these comments were positive.

73 comments (15%) were mixed or neutral.

248 comments (51%) were negative or suggestions for improvement.

Do you get adequate information about the needs of the children placed with you, such as medical, behavioral, developmental, and educational needs?

More than 3 of 4 (77%) of the 1,262 caregivers who answered this question reported that they always or usually got adequate information about the needs of the children placed with them.

RESPONSE

71% positive

Foster Caregivers
N = 687

| 12% | 17% | 35% | 36% |

84% positive

Kinship Caregivers
N = 575

| 8% | 8% | 23% | 61% |

■ Almost never/never   ■ Seldom   ■ Usually   ■ Always/almost always
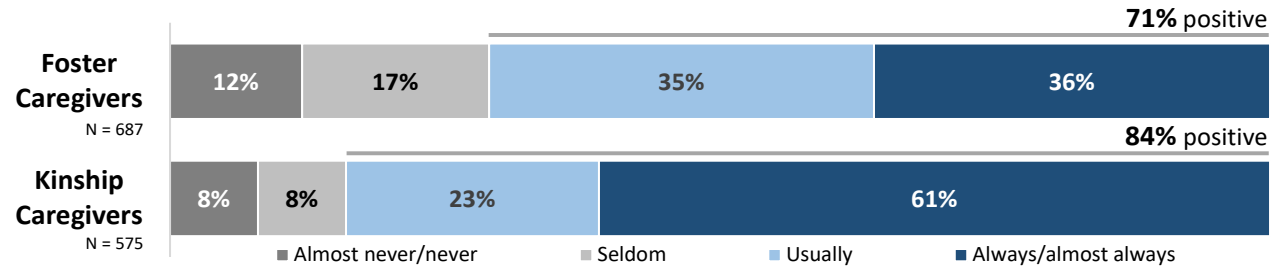
DETAIL

Kinship caregivers, who may know the children placed in their home, continue to be more likely than foster caregivers to say they got adequate information (84% kinship compared to 71% foster, p < .0001). Positive responses for both foster and kinship caregivers had non-significant increases from 2021.

In the comments, caregivers were appreciative of clear answers to their questions. Some described challenges obtaining information. Others perceived a lack of transparency.

TREND
Positive Responses Over Time

68%   68%   69%   **71%**

Foster Caregivers

79%   79%   81%   **84%**

Kinship Caregivers

2019   2020   2021   2022
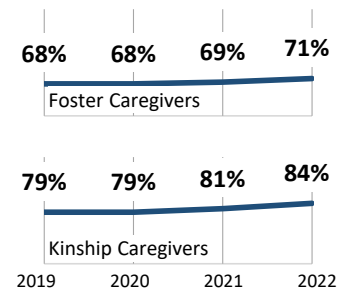
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Most caregivers feel informed and appreciate staff's willingness to answer questions.

"They always kept us informed about everything. They notified us about meetings and services." (K)

"They do a good job on informing us of the child's background and the child's needs at placement." (F)

"They gave me information about things I needed to know and what I could do or not do according to some rules." (K)

"They give answers on the rules and regulations. They help us navigate the legal aspects of it." (F)

"DCYF always told me about meetings or Zoom calls and court dates." (F)

"They keep me updated with information about mental health and new programs we could use for her." (K)

"Our CASA [court-appointed special advocate] worker has been our lifeline. She explains and offers help on anything and always follows up. If she doesn't know something – she is honest about it. She finds the answers and gets back to us." (K)

"Our long-term foster care social worker was amazing. He answered all of my questions to the best of his ability." (F)

"They were always trying to get answers if I needed something explained." (F)

"They have done a really good job in getting back with us and giving us information when we ask for it." (F)

"The supporting caseworker does great to give support with information or giving me directions of where to find the information I may need." (K)

"They always follow up on my questions." (K)

"They were always there for any questions and concerns about the baby." (K)

Some want more information.

"I've made several requests with less than adequate answers, so I have to get creative or ask tenured foster parents." (F)

"My social worker was very inexperienced and could not answer questions or refer me to services." (K)

"It is very hard when you have no clue on what to do and where to go for help." (F)

"It would be so helpful if the social worker could give me all information on the children without me having to figure out what to ask." (F)

"Honestly, the whole time I had her, I was always in the dark." (K)

"I always had to reach out and seek the information myself." (K)

488 of the 1,256 caregivers who commented (39%) mentioned information sharing.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers 42%
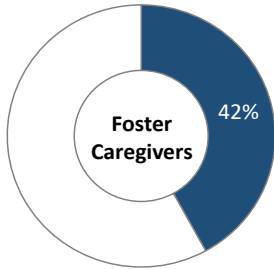
273 of 655 commented
77 − Satisfied
49 − Mixed or Neutral
147 − Needs Work

Kinship Caregivers 36%
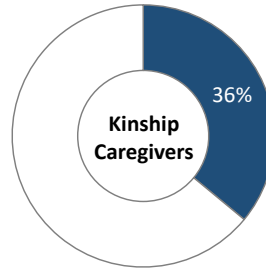
215 of 601 commented
90 − Satisfied
24 − Mixed or Neutral
101 − Needs Work

KEY FINDINGS

Access to information was a common topic among foster and kinship caregivers. For both groups, responses were more negative than positive.

- Caregivers value timely information, such as notices about how the case is progressing and Family Team Decision Making (FTDM) meetings.
- Sometimes, caregivers are not sure what to ask for. They are grateful for caseworkers who provide thorough information up front.
- Many want complete background information and consistent updates on the children in their care.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate timely, relevant information.

"If there are any issues or questions I have I get answers right away and never have to worry that I'll be left to figure things out on my own." (K)

"I am kept in the loop about upcoming court dates and planning meetings." (F)

"DCYF keeps me as up-to-date as is legally possible." (K)

"They made sure we had information about the child's medical background and his needs." (K)

"They provide us with the necessary information needed, and if they don't know they guide us to an answer." (F)

"[They] explained the rules and provided information along the way, lots of detail." (K)

"They try to keep us in the loop as much as possible." (F)

"The social workers were always in communication as to where the child's case was. They kept us in the loop as the process of becoming legally free went forward." (K)

"Our case manager has been really helpful when we ask questions." (F)

"CPS [Child Protective Services] workers have been helpful with checking in and giving me info on the case and child." (F)

They want honest answers and clear communication.

"I feel the social workers only answer the questions they want to answer." (F)

"We had no info beforehand and felt confused. It was like they were playing a game and we just didn't know the rules, you know?" (K)

"Sometimes they need to tell the whole truth about the children they are placing. We don't always get the truth, especially when they are desperate for placements." (F)

"We don't feel like the agency was honest or transparent with us." (K)

"Stop dropping kids off without sharing ALL of the info, even if it's unpleasant. It sets foster families up for disaster." (F)

"I understand that it is hard to get all information about the kiddos when they first come in but I feel that that is one thing that is always lacking. I would like to see improvement in those areas to get all that information as quickly as possible. It makes it hard for everyone to do their job if we don't have the proper amount of information about the kiddos that we serve." (F)

"They answer my questions but don't tell me everything that is going on." (K)

"Explain in simple language all the court jargon." (F)

Resources

Pexels.com/Renata Angerami
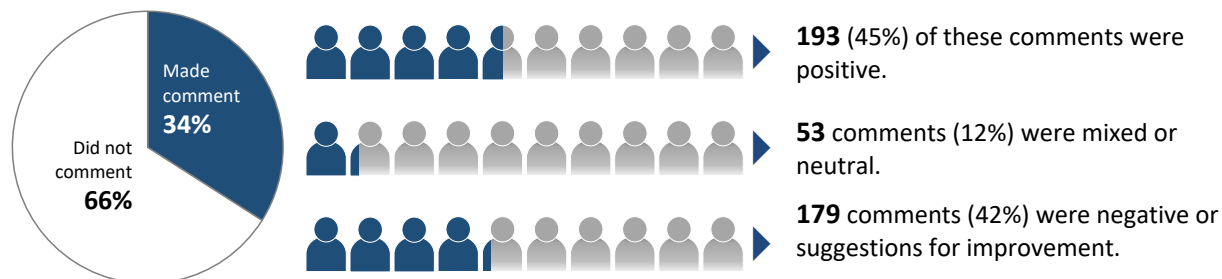
Resources provide caregivers with necessary support.

"They offered and provided needed psychological and medical services for the children, transportation to see their mother, [and] home visits." – Kinship Caregiver

Caregivers are interested in resources that are tailored to support the specific needs of each child. About one of three (34%) caregivers mentioned resources in their comments. They addressed access to a range of resources, including transportation for visits, medical/dental/mental health care, financial assistance, respite, and child care.

Caregivers often mentioned their appreciation for medical and behavioral health services, though they also noted some challenges with the process to get these services. Getting mental and behavioral health services was especially difficult for caregivers. They also identified respite and child care as areas in need of improvement, often emphasizing the importance of these resources. Many caregivers want additional financial assistance as well as better follow-though with reimbursements.

Caregivers expressed gratitude for additional sources of support, including Court Appointed Special Advocates (CASAs) and Guardians ad Litem (GALs). A few detailed positive experiences with obtaining specific resources for the child[ren] in their care. Some were unable to access resources due to their location, and others suggested resources they would find helpful.

425 caregivers (34%) commented on resources and reimbursements.

Made comment **34%**

Did not comment **66%**

193 (45%) of these comments were positive.

53 comments (12%) were mixed or neutral.

179 comments (42%) were negative or suggestions for improvement.

85 of the 1,256 caregivers who commented (7%) referenced medical, dental, or mental health resources.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 7%
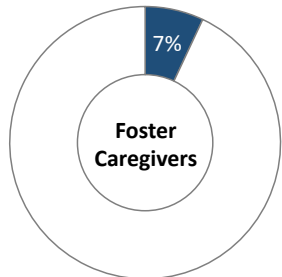
48 of 655 commented
- **27** – Satisfied
- **3** – Mixed or Neutral
- **18** – Needs Work

Kinship Caregivers — 6%
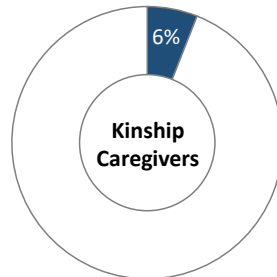
37 of 601 commented
- **20** – Satisfied
- **5** – Mixed or Neutral
- **12** – Needs Work

KEY FINDINGS

Most caregivers who commented on this topic (55%) were satisfied with medical, dental, and mental health resources. Foster and kinship caregivers gave similar responses.

- Caregivers talked about positive experiences with healthcare providers and appreciated caseworker help in accessing services.
- Mental and behavioral health services were mentioned most, though caregivers also commented on the accessibility of other health services.
- Some felt unsupported when trying to get services and requested better follow-through with referrals.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many were satisfied with the assistance they received.

"When it comes to medical, I've had no problems in getting help finding care for the kiddos as they are medically challenged." (F)

"Getting the Harborview medical evaluation was a game changer in respect to finding out the best care. Knowing we have a kid with PTSD (or just natural ADHD) has been helpful in seeking help from counselors to the school board." (K)

"They have helped with urgent behavioral and medical needs to have a child seen by a counselor or doctor." (F)

"The therapists for my nephews were so supportive and were able to engage with them." (K)

"I got help in applying for her medical expenses." (K)

"We feel like the system is making an effort to cover the holistic needs of the child in our care through mental health therapy, school system assessment for added supports, and regular meetings to discuss the case and current care needs." (F)

"When we needed more intensive counseling, they were able to help with that quickly and get it set up for us." (F)

"They send medical coupons." (K)

"We had a high-need medical baby and they made sure we were able to get what we needed." (F)

"They provide for his medical needs." (K)

Others had challenges accessing needed care and resources.

"I had to advocate for a long time to receive therapy services for the child who had major behavior and aggression issues." (F)

"After a year and a half, I am still waiting for any documentation showing he was diagnosed with ADHD." (K)

"I have had special needs kids with trauma, or some type of help needed, and I have to deal with that myself." (F)

"When a child has multiple doctors saying they need a specific aid, fight to get that aid. Don't block it based on your personal opinion. Don't challenge multiple doctors' diagnosis because you've seen trauma or because the bio parent says they don't think so." (F)

"The judges have told the social workers to have the child tested for a specific medical problem, but the social workers have refused to do so." (K)

"I think finding mental health resources for these kids was the hardest. There were waiting lists and it made my cousin just want to give up on therapy. The access to therapy is unacceptable. I think these foster kids should be a high priority." (F)

"It wasn't any fault of their own, but the wait time for the behavioral programs was really long." (K)

46 of the 1,256 caregivers who commented (4%) mentioned respite care.

WHO COMMENTED ON THIS TOPIC?

6%

Foster Caregivers
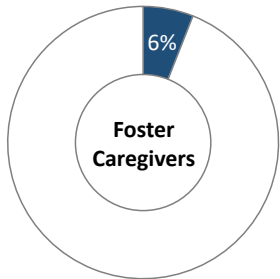
40 of 655 commented
- **8** – Satisfied
- **4** – Mixed or Neutral
- **28** – Needs Work

Yes
1%

Kinship Caregivers
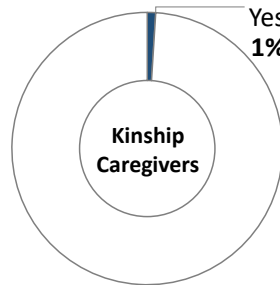
6 of 601 commented
- **1** – Satisfied
- **0** – Mixed or Neutral
- **5** – Needs Work

KEY FINDINGS

Few caregivers commented on respite care, and those who did generally described challenges. Most of the comments were from foster caregivers, who are more likely than kinship caregivers to be eligible for respite services.

- A few caregivers expressed appreciation for the respite care they received.
- Most caregivers want more and easier access to respite care. Some explained why they feel respite is important in their requests for support.
- Some explained the ways in which the lack of respite — or slow processes to get it — affected them.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

A few caregivers said they were able to get respite care.

"If I need respite, they get it for me." (F)

"When I asked for respite, they were good on that." (F)

"When we were struggling with the child's behavior, the social worker decided to remove her into long term respite care which helped." (K)

Many made requests for respite, emphasizing the importance of the service.

"Sometimes an in-home respite provider could save a placement by providing a much needed break." (F)

"Be helpful with resources, especially respite." (F)

"I couldn't get any respite when I asked." (K)

"If we had a system that regularly provided respite, that would be a great help." (F)

"Respite would have been nice." (F)

"I have a child with severe behavior problems and would like resources for trained people to provide brief breaks like date night." (F)

"Provide in-home, skilled respite to support foster parents with youth's behaviors." (F)

"More available respite care resources for tired relatives." (K)

"There needs to be more emphasis on respite. Some of the children in care are so emotionally and physically draining that it is difficult to maintain your sanity." (F)

"We need better options for respite and case aid." (F)

"I miss the respite program. I got really burnt out last year and didn't have anyone to turn to when I desperately needed a break." (F)

Some caregivers said the process of receiving respite was challenging.

"They could have provided more respite to us – foster parents sometimes need a break. They were always slow in responding to that need." (F)

"We have gotten respite, but often they don't let us know it was found until 24 to 48 hours beforehand. We had to cancel a trip out of state because we didn't know far enough in advance." (F)

"We requested monthly respites and it seemed like they waited until the last minute to get care. We could never plan a weekend away as we typically didn't get information about respite care until the 11th hour on Fridays." (K)

"If they could figure out a different or better system for respite care, that would be way more supportive than what they realize." (F)

46 of the 1,256 caregivers who commented (4%) mentioned transportation.

WHO COMMENTED ON THIS TOPIC?

5%

Foster Caregivers
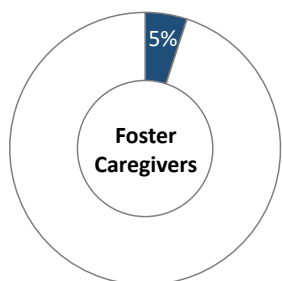
32 of 655 commented
15 – Satisfied
2 – Mixed or Neutral
15 – Needs Work

Yes
2%

Kinship Caregivers
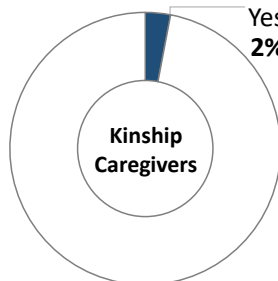
14 of 601 commented
8 – Satisfied
2 – Mixed or Neutral
4 – Needs Work

KEY FINDINGS

Caregivers described both positive and negative experiences with transportation services provided by the department.

- Half of the caregivers commenting on transportation resources had positive experiences, often citing the services' help in getting children to appointments and visits.
- Others encountered challenges with transportation services, including a lack of access to these resources.
- Some caregivers mentioned issues with mileage reimbursement, such as lengthy processing times and, in some cases, never receiving the funds.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many of the respondents are grateful for the help transportation services provide.

"Any time we have needs, staff are available. They have helped transport when I could not. They have helped with a lot of appointments." (F)

"Giving the children rides to their parents, if the parents are in a facility, back and forth to the day care sometimes." (F)

"I needed help with getting him to visitation so that was helpful; the driver was awesome." (K)

"The overall team was helpful in providing transportation with the youth." (K)

"The social workers have helped getting the kids to medical appointments that I could not take them to." (F)

"They are good about transporting the child wherever they need to go." (F)

"Also support to take the kids to school and appointments because I am a working parent." (F)

"The transportation was very good about dealing with our schedules." (F)

"Transportation services is the most supportive. They listen and are empathetic to the situation." (K)

"They coordinated the ICPC [Interstate Compact on the Placement of Children] items needed including making travel arrangements. They promptly reimbursed us for travel-related expenses." (K)

Some had issues with the services.

"There was no transportation to services from [my] area." (K)

"At first transportation for visitations had a different driver every week, increasing stress for everyone. Have a new vendor so driver is the same each time. This is much better." (F)

"Make sure the transport agency does their job. The one I have has been horrible." (K)

"As for transportation specialists, there needs to be better consistency in giving me a report on the children's visit, i.e., what they ate, etc. Plus, don't bring the kids back wet." (F)

Mileage reimbursement can be difficult to get.

"I guess our biggest complaint is how long it takes to get reimbursement for our mileage." (F)

"Turn in mileage in a timely fashion." (F)

"They could have reimbursed us for our travel. I sent them the information they required in a timely manner and we never received anything." (K)

"I never got my mileage reimbursement. No response from the worker or the supervisor. They need to be more attentive to these things." (F)

45 of the 1,256 caregivers who commented (4%) mentioned child care.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — Yes **3%**
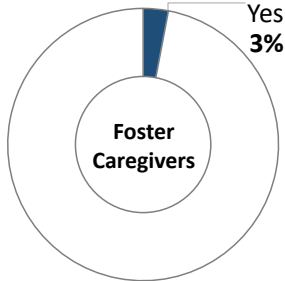
18 of 655 commented
- **6** – Satisfied
- **1** – Mixed or Neutral
- **11** – Needs Work

Kinship Caregivers — Yes **4%**
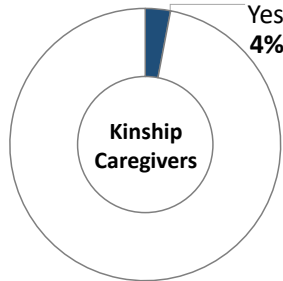
27 of 601 commented
- **12** – Satisfied
- **1** – Mixed or Neutral
- **14** – Needs Work

KEY FINDINGS

A small number of caregivers mentioned child care. Both foster and kinship caregivers were more likely to comment on areas that need work.

- Many caregivers were grateful for access to child care.
- Some indicated that they were eventually able to get child care, but the process of obtaining it was slow, which led to other challenges.
- Others talked about the financial challenges of finding child care.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers value child care assistance.

"They helped me to get day care." (K)

"They were great about both of my kids getting into day care." (F)

"We have a medically challenged child and they have done a good job with child care for us." (F)

"They help with day care for the children." (F)

"When I needed child care, they got me help with the Y." (K)

"We were worried about his socializing so they paid numerous months of day care for him to socialize and that helped him so much to develop. That was priceless." (K)

"Having day care provided is a great help." (F)

"They provided me with child care. The ECEAP [Early Childhood Education and Assistance Program] is excellent." (F)

"The tribe has provided us with day care for the children." (K)

Some caregivers had difficulty finding child care.

"They need to do a better job in helping with day care, especially when I was working and I needed child care." (F)

"Finding child care for any age child is nearly impossible in Skagit county. I am not able to find any kind of summer care and may have to quit my job." (K)

"Day care was slow to get." (K)

"I wish there was more support for child care options. I felt 'alone' in trying to solve child care needs." (F)

"Help with day care is desperately needed. I do not believe I will be able to accept placement of another child if day care is not available." (K)

"I wish we could have gotten help securing child care." (F)

"With this placement things were not coordinated correctly, so we had trouble in the beginning trying to set up school for the kids as well as day care." (K)

"It would be good if we could get day care to take care of the children when we have an appointment." (F)

A few also encountered financial challenges.

"Pay day care providers more when a child is difficult without having to jump through hoops." (F)

"I found it hard to find local child care for my children due to my unusual schedule. I ended up hiring a nanny although this was more difficult financially. If the department gave more of an allowance for child care, rather than payments to day cares, it would help foster parents with young children." (F)

"I think for both kinship caregivers and foster parents getting help with day care is vitally important. We ended up having to pay out of pocket and it was very expensive." (K)

66 of the 1,256 caregivers who commented (5%) addressed financial issues.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers

Yes
3%
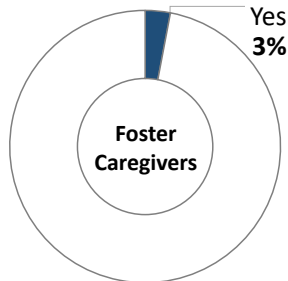
20 of 655 commented
1 – Satisfied
3 – Mixed or Neutral
16 – Needs Work

Kinship Caregivers

8%
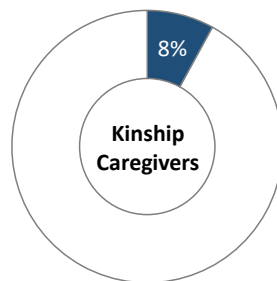
46 of 601 commented
13 – Satisfied
3 – Mixed or Neutral
30 – Needs Work

KEY FINDINGS

A small group of caregivers mentioned financial resources, with the majority of both foster (80%) and kinship caregivers (65%) expressing dissatisfaction. Kinship caregivers were more likely to comment.

- Caregivers appreciate financial assistance, whether it happens once or on a regular basis.
- Some caregivers want more financial assistance and better follow-through with reimbursements.
- A few kinship caregivers expressed frustration with the differences in access to financial resources between kinship and foster families.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate financial assistance.

"They offered to help me out whenever I needed it. They gave me financial assistance, helped with the power bill, about $200 a month." (K)

"I received my financial support regularly." (F)

"They gave me money to buy him clothes." (K)

"Emergency funding is available when a child is placed unexpectedly." (K)

"They helped us with some money when the child first came so we could get what he needed." (K)

A common complaint was late or no follow-through with promises of reimbursement.

"On a recent placement I was offered extra money due to the difficult behavior of the child, but I never received any of the extra money. When I called the social worker about this, he never returned my call." (F)

"[I] never received reimbursements for out-of-pocket expenses." (F)

"When I took my nephew in, I had $20,000 saved to buy a house, and because they didn't provide resources and help immediately, all of that is gone. The social worker knew I was low income and my situation. I took in my nephew not for the money but because he was my nephew. It took way too long to get any financial help, and now I'm in a bad financial situation." (K)

Even when they do get financial support, some caregivers say it is not sufficient.

"The amount they pay isn't enough to meet the needs of teenagers." (F)

"[I want] better financial resources." (K)

"[DCYF should] not have limits on how much they can help with utility bills." (K)

"I only got one check to help me, and the children were here for six months." (K)

"They also need to increase the reimbursement rate for foster parents. It's exceptionally expensive in feeding children now. Maybe they should be eligible for food stamps to help with increased expenses for foster parents." (F)

Some feel that the difference in financial support between kinship and foster caregivers is unfair.

"They could be more supportive of grandparents and family who do not get paid due to no licensing by the State. Stop being so supportive and handing everything out to licensed foster parents, they get paid." (K)

"A complete stranger gets ample benefits to support someone else's child, but a relative is left to fend for themselves." (K)

178 of the 1,256 caregivers who commented (14%) referenced other resource issues.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 10%
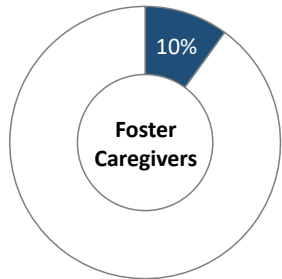
66 of 655 commented
32 – Satisfied
4 – Mixed or Neutral
30 – Needs Work

Kinship Caregivers — 19%
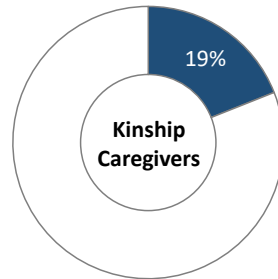
112 of 601 commented
62 – Satisfied
8 – Mixed or Neutral
42 – Needs Work

KEY FINDINGS

Many caregivers (53%) who mentioned other resources made positive comments, though many also requested more or better resources. Kinship caregivers were almost twice as likely to comment compared to foster caregivers.

- Many are grateful for the availability of vouchers that provide for necessities and assistance with caregiver-specific needs.
- Some suggested additional resources that they would like DCYF to provide, including extracurricular resources and discretionary funding.
- Others noted a lack of access to resources, often depending on their location.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate the many different resources provided to meet their needs.

"They have helped us with resources, with things that are pretty costly." (K)

"The private agency gave my daughter gifts." (F)

"They got me vouchers to make my home safe." (F)

"They've been responsive with things like clothing vouchers, a playmat, dresser, a car seat. They've been helpful providing those types of things." (K)

"There are always additional resources offered." (F)

"They have offered food, supplies, anything that I don't have, they have offered it to me. They are always helpful in coming up with resources for us." (K)

"They provided a car seat when I needed it." (K)

"They helped me with the needs of the child. They also helped me with a washer and dryer." (K)

"Tribal provides the services to me. They have given me safety packages and other items for the child. They have given me COVID care packages." (K)

"I wanted the kids to have the adequate tools for their education. I asked the social workers to help me out with the computers for the kids, and they helped me out." (K)

"My agency always makes sure I have what I need when I get a new placement." (F)

A few suggested resources they would find helpful.

"Child struggled with school and it would have been good for him to have someone to help him understand how important school is. Yes, like a counselor." (K)

"Provide foster parents with resources for the kids to have fun." (K)

"Give each social worker a budget to spend as she sees fit. Especially for emergency placements when the kid has nothing and something is needed right away and we can't wait for a voucher." (F)

"Help support with wrap around care and extracurricular support." (F)

Some caregivers were frustrated by limited resources.

"[I] feel forgotten here because of location. [We] need more resources more easily accessible given our location on the Washington/Idaho border." (F)

"The social worker acts like the money is coming out of her own pocket. We can't even get a clothing voucher. We were told to call around looking for clothing." (K)

"Offer more local resources and training." (F)

"I feel there are not enough supportive services to address behavioral needs and concerns." (F)

"They promised supplies and we never received them." (K)

119 of the 1,256 caregivers who commented (9%) referenced other sources of support.

WHO COMMENTED ON THIS TOPIC?
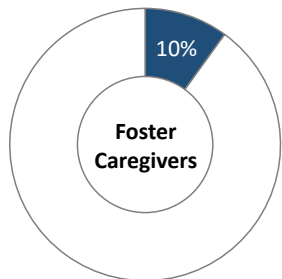
10% / **Foster Caregivers**	68 of 655 commented **31** – Satisfied **10** – Mixed or Neutral **27** – Needs Work
8% / **Kinship Caregivers**	51 of 601 commented **38** – Satisfied **3** – Mixed or Neutral **10** – Needs Work
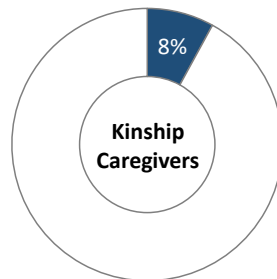
KEY FINDINGS

Most caregivers (58%) who commented on the topic were satisfied with sources of support outside of the department. Kinship caregivers (75%) especially appreciated these groups. They often talked about Court Appointed Special Advocates (CASA) and Guardians ad Litem (GAL).

- Many caregivers mentioned assistance and support from CASA, GAL, and WISe (Wraparound with Intensive Services).
- Treehouse and Mockingbird Society were also praised as supportive groups.
- Some caregivers felt that these supports could be improved.
- A few caregivers requested additional support that is not currently available.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Most caregivers appreciate the support received from other groups.

"CASA was really fantastic. They were here often to see the kids and we developed a relationship with them. They were close enough with the kids they understood what was going on with the kids." (F)

"Treehouse is amazing. Always there to support kids' needs." (F)

"The GAL takes her job seriously and genuinely cares for her charges." (K)

"They provided a lawyer for my niece." (K)

"We are also members of Mockingbird and this is a huge help." (F)

"Donna, the GAL, was wonderful to work with and kept us apprised of what was happening with the court." (K)

"The CASA and Guardian ad Litem were honest and told us forthrightly what was going to happen with the case and kept us informed." (K)

"The WISe team was the only one that was supportive to our family and the child. They spent time understanding the child's past and traumas." (F)

"The CASA workers were very good. They would make sure that the children didn't need anything and that we didn't need anything." (K)

"The Guardian ad Litem and CASAs were very good to work with us and to speak on behalf of the child. He showed up on the adoption day and personally congratulated our child we adopted. He was so caring and showed he cared about the children." (F)

"The Head Start program has been very helpful." (K)

Some described how these supports are lacking.

"I asked for WISe and it took many months and many times to ask." (F)

"CASA program is lacking resources and this has resulted in inconsistent contact." (K)

"I am really missing in-person support groups that used to exist in WA and now are exclusively online." (F)

A few asked for additional caregiver support.

"Caretakers NEED advocates. I know as a relative caretaker I don't personally want to speak up in a meeting because I'm afraid to cause issues between my family, but someone to speak on my behalf may have more luck." (K)

"COVID has been really hard on our self-care with lack of any in-person services. We NEED in-person support groups with child care and child care resources to help when schools are closed or our kids are home from school due to other difficulties." (F)

Caregiver Licensing

GettyImages.com/MangoStar_Studio

Caregivers value interaction with and support from licensors.

"The licensor is excellent in helping and responds quickly in a timely manner. She is good about following up to make sure issues [are] taken care of." – Foster Caregiver

Most caregivers who had any contact with the Licensing Division in the past year reported positive experiences. Of those who had contact with Licensing, answers were similarly positive for both kinship and foster caregivers.

- *Did licensing staff treat you with respect*? (All Caregivers: 94% positive. F: 94% K: 93%)
- *Were licensing or home study staff knowledgeable about the process?* (All Caregivers: 94% positive. F: 94% K: 94%)

Few caregivers mentioned licensors in their comments, but most who did (59%) expressed appreciation for licensors' assistance, often praising their responsiveness to questions. Some caregivers described a lack of communication or support in the licensing process.

Among kinship caregivers who said they were licensed, many said they wanted to ensure stability for the child, or gain access to better resources. For kinship caregivers who chose not to be licensed, most were only interested in providing care for a specific child and did not want to foster other children. Others cited personal reasons or felt the licensing process was too complex.

54 caregivers (4%) commented on foster care licensors.

4%
Made comment

Did not comment
96%

32 (59%) of these comments were positive.

2 comments (4%) were mixed or neutral.
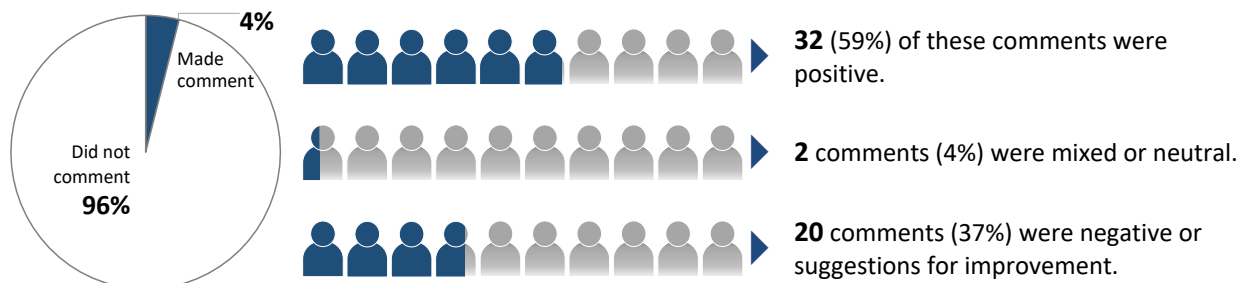
20 comments (37%) were negative or suggestions for improvement.

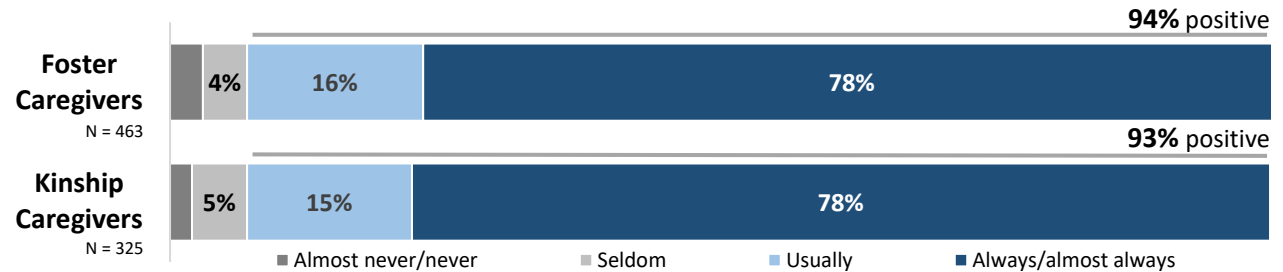**More than 9 of 10** (94%) of the 788 caregivers who had contact with the Licensing Division in the past year and answered this question said that licensing staff always or usually treated them with respect.

RESPONSE

94% positive

Foster Caregivers
N = 463

Almost never/never	Seldom	Usually	Always/almost always
	4%	16%	78%

93% positive

Kinship Caregivers
N = 325

Almost never/never	Seldom	Usually	Always/almost always
	5%	15%	78%

■ Almost never/never ■ Seldom ■ Usually ■ Always/almost always

DETAIL

Both kinship and foster caregiver responses remain highly positive, with the majority indicating they are usually or always satisfied with licensing staff. Differences across years were not statistically significant.

In the comments, caregivers praised licensor flexibility and responsiveness. They also appreciate licensors who listen and communicate clearly through the licensing process. A few caregivers reported negative experiences with licensors.

TREND

Positive Responses Over Time

97%   95%   96%   94%

Foster Caregivers

96%   94%   94%   93%

Kinship Caregivers

2019   2020   2021   2022
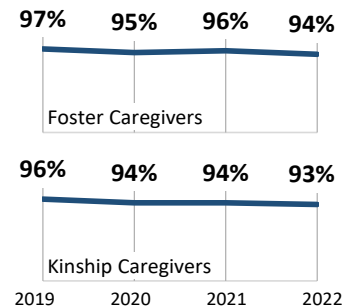
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers described positive experiences with their licensor.

"Licensor is supportive with good ideas and is a good listener." (F)

"[Licensors] would answer phone calls or return them, give advice or seek it." (F)

"Our licensor was flexible and fairly easy to schedule with." (K)

"My licensor has been amazing in the two times I've moved in the past three years. She worked around our schedule and gave us ample time to fix any licensing issues." (F)

"Our private licensing agency is quick to respond and supportive. It is nice to have them in addition to DCYF." (F)

"Our licensor was very good about truly listening to us when investigating a couple of intake calls and not making assumptions or jumping to conclusions." (F)

"Our licensor is awesome." (K)

"Our private agency and licensor is Olive Crest West Sound and they go above and beyond for support, help, listening." (F)

"Our private agency licensors were awesome. They did a great job communicating and making us feel welcome." (F)

"[Licensors] are committed to helping children placed with the department." (K)

"My first licensor was absolutely supportive." (F)

Some experienced a lack of respect from licensors.

"The licensor recently was condescending and said 'I don't care if you get re-licensed.' This is what we go through in our region." (F)

"Licensors could be more upfront with the costs surrounding license renewals, for example well tests. They are expensive and I was not prepared to pay out the extra money for them." (K)

"We got an email from licensing saying we would get our kids rehomed if we didn't have our renewal paperwork in, but I had already sent it in." (F)

"I had an awful licensing process and if it wasn't so important for me to foster, I would have given up. Our licensor was very awful at her job. I wish someone would have explained when I was starting out who all the people would be that would be contacting/coming into my home." (F)

Were licensing or home study staff knowledgeable about the process?

More than 9 of 10 (94%) of the 784 caregivers who had contact with the Licensing Division in the past year and answered this question said that licensing and home study staff were always or usually knowledgeable about the process.

RESPONSE

94% positive

Foster Caregivers
N = 461

| 17% | 77% |

94% positive

Kinship Caregivers
N = 323

| 5% | 17% | 76% |

■ Almost never/never ■ Seldom ■ Usually ■ Always/almost always

DETAIL

The majority of foster and kinship caregivers are usually or always satisfied with their licensor and home study staff's knowledge. Differences across years were not statistically significant.

Caregivers were appreciative of their licensor's ability to answer questions, provide support, and offer guidance through the licensing process. Many praised their licensor's knowledge and assistance. Some spoke of licensors who were unresponsive or did not follow up on requirements to complete the licensing process.

TREND
Positive Responses Over Time

95% 97% 96% 94%

Foster Caregivers

95% 94% 94% 93%

Kinship Caregivers

2019   2020   2021   2022
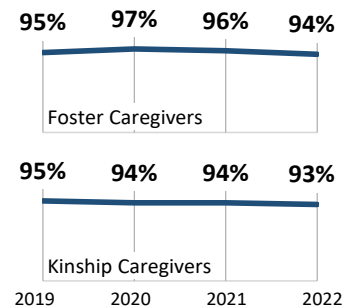
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers appreciate the support and information licensors provided.

"Licensors were great to work with and very informative. They usually respond to my phone calls and emails." (F)

"I'm very supported by my licensor and one placement desk social worker. I can call them at any time and they will help connect me with resources." (F)

"I have had good experiences with my licensor. Always getting info I need." (F)

"The licensor contacted us when there were fires in our area. Primarily they check on the health and welfare of the children in our care." (F)

"My licensor is very supportive and helpful." (K)

"Our licensor we first had was a great support." (F)

"The licensor is very good about communication and providing what I need." (F)

"Licensor – great." (F)

"Actually with this most recent case there were some issues with visitation… so the licensor and social worker helped me with the issue." (F)

"The licensing is great." (F)

"On the licensors, I felt they really had great knowledge and the home study went quickly." (K)

"The licensors communicated well with me." (F)

Some said licensing staff did not seem to understand the process.

"The second licensor has not been responsive so we decided to not apply to take more children. He has not responded to emails, etc., plus he seemed confused and not knowledgeable about the process." (F)

"I started the process to become licensed as a foster parent and went through 6-7 months of paperwork and the home study. The people from licensing never asked anything more of me and I figured I was done. But apparently they never finished my home study. They left me hanging and then because I wasn't licensed, I wasn't able to receive the foster care payment." (K)

"The licensors and social workers don't take enough training. They don't know enough of what is going on and can't answer questions." (K)

"[I] would like them to contact me and help me get licensed." (K)

54 of the 1,256 caregivers who commented (4%) mentioned foster care licensors.

WHO COMMENTED ON THIS TOPIC?

5%
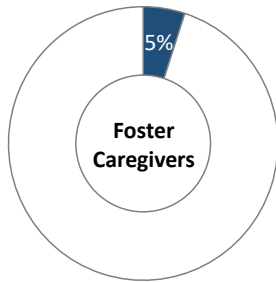
Foster Caregivers

32 of 655 commented
22 – Satisfied
1 – Mixed or Neutral
9 – Needs work

Yes
4%

Kinship Caregivers
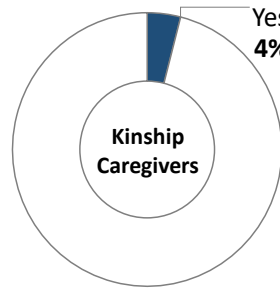
22 of 601 commented
10 – Satisfied
1 – Mixed or Neutral
11 – Needs work

KEY FINDINGS

This year, foster and kinship caregivers were equally likely to make comments about licensors, but foster caregivers (69%) were more likely than kinship caregivers (45%) to describe positive interactions.

- Many caregivers spoke positively about licensors, noting their support and responsiveness.
- Kinship caregivers in particular saw areas for improvement and made some suggestions to make the licensing process smoother.
- Caregivers had issues with communication and wanted more support throughout the process.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers voiced appreciation for their licensor.

"The lady that came to our house and helped us get the foster care license was excellent." (K)

"My social workers and licensors have been very supportive and responsive whenever I have needed to contact them." (F)

"They are great at getting things started like licensing and getting a placement settled." (F)

"I really liked my licensor." (F)

"Licensing was super easy to work with." (K)

"My private licensor, Olive Crest, offered help by answering phone calls, emails, and texts in a timely manner." (F)

"Only the person who called with questions to determine our monthly stipend was helpful." (F)

Others see room for improvement.

"The licensors are somewhat helpful." (K)

"The licensors weren't very impressive. I was licensed and then they changed their minds about whether we were qualified." (K)

"They are very responsive, social workers. Licensors, not so much." (K)

"I have never met the licensor. All contact has been through email." (K)

"I think it would be good to have more licensors." (F)

"The licensing staff does not follow through or complete things on their end, leaving us not being reimbursed as agreed." (K)

Some addressed challenges with communication and the licensing process.

"Better communication with my licensor. I really don't have any communication with them at all. Our case is from out of county, so I think there needs to be better communication between counties for resources." (K)

"The foster care licensing process is very difficult to figure out on my own." (K)

"Our licensor got us all the way through the re-licensing process (home study, paperwork, ALL of it) and then called a week later to let us know that he regretfully could not update our license because we had adopted our daughter and had seven permanent kids… We were upset and caught off guard when they wouldn't renew our license, and we could no longer provide respite to friends in our fostering community." (K)

"The licensors are sometimes more difficult to work with than others. We experienced multiple redundancies and had to resubmit many things despite already sending the documentation to licensing." (F)

Of the 129 licensed kinship caregivers who took the survey, 124 shared why they decided to become licensed.

Caregivers speak . . .

72 caregivers wanted to ensure placement, guardianship, or adoption of a particular child.

"I became licensed mainly because I was looking for [my] deceased son's children. I wanted to be sure I was seriously considered for placement."

"To establish permanency for my grandson."

"We decided to get licensed to take our grandchildren. We also wanted to be available for other children."

"Our family had been asked by a previous foster child to return, so we became relicensed after a year off."

"When they decided mom wasn't going to be able to get them back within your time frame, this was the direction that all of us felt was right for mom and the kid's circumstances."

"Because these children needed a good foster home."

"We became licensed so that DCYF would take us seriously about being caregivers for our relatives."

"I foster my grandchildren whom I plan to adopt and was advised this would help me reach that goal."

"To make sure that my kiddos that were with me got to stay with me, so they wouldn't be moved and would feel safe."

"Wanted to make sure placement was stable."

"To adopt the child we have, as he is my son's best friend."

"Because that was the best option that I was given so I can have my grandchildren with me until their case is finalized."

"To help an old friend whose children came into care."

"We have to kinship foster. Was told this would help with becoming their guardians."

5 wanted to adopt children in the future.

"We were told it would be a better option/make it easier to adopt in the end."

"I was reaching the age when I wasn't going to be having any children of my own and hoped to adopt a child."

9 were told licensing was mandated.

"The department told me that I needed a license in order for me to take care of the relatives."

"Since neither parent was living in the home when a social worker contacted me, I was told I would either have to become a licensed foster home or turn the boys over for placement elsewhere. I've been licensed since."

"Because the state made me get a license to care for my own grandchildren."

19 caregivers wanted better resources or financial support.

"I chose to be licensed to maximize benefits allowable to care for the child in my home."

"This was our second time taking care of 4 children and reimbursements are not good without a license."

"To provide the best care for the children in my care."

"I was told it would help out with my foster child's wellbeing and future."

"More resources available if licensed."

"It offered security for the kids and financial help for us supporting them."

"When I took in my nephews, I quit my job and had no income and needed the income."

20 wanted to help children who need it and their communities.

"To help children that had nowhere to go and parents who cannot take care of their kids at the time. I wanted them to be in a safe and fun environment."

"I want to be a safe place for more children."

"To fill a need for care."

"Because I was once in the system and wanted to help the youth."

"I wanted to help the family whose children I had placed with me."

"To provide a safe and loving home to children in need."

"I believe families can be successful with appropriate help."

"Because I love children and my heart is with them."

17 provided other reasons, including general interest and encouragement from social workers.

"It was recommended by the social worker when we took the child in."

"We wanted to grow our family and then learned about fostering."

"I felt I needed to be educated about the system."

"Because they guilted me into renewing my license."

"An impulse that turned into a lot of work. But once you get past level 3 you kinda wanna finish lol."

"Because there are so many kids in need. Our social worker who gave us the little girl asked us to take more kids. She said 'we need you.'"

Of the 469 unlicensed kinship caregivers who took the survey, 456 shared why they were not licensed.

Caregivers speak . . .

31 stated their license application was in progress.

"We are in the process of getting licensed."

"We are still waiting for some of the studies."

"I haven't completed the process yet."

11 felt they would not qualify.

"Our house probably wouldn't pass the licensing requirements."

"I was told you had to have a certain amount of income and have to be working. I do not work and just get social security income now."

179 were only interested in caring for their family member and did not need a license to do that.

"We just did this for family."

"I only did it because it was my niece and did not care about getting paid."

"Since I only care for kinship I decided not to become licensed."

"I don't want to be available to other children, I only want to take care of my grandbabies."

"Because we were related to the child in kinship it wasn't needed."

"Wasn't planning to do foster care. Just stepped in to care for my grandchild."

"This was related to my niece, and we didn't need a license."

"One wasn't required of us, and we didn't see a benefit, since we didn't plan to take other children."

38 were pursuing adoption or guardianship instead.

"We are adopting the children so we will not be continuing with foster care."

"I'm just doing kinship caregiving and that will be it. Waiting for adoptions to be finalized."

"We are going to be doing guardianship or adoption."

26 said their caregiving was short term.

"Our child will be transitioning to a grandparent, and we won't be fostering anymore."

"It was a temporary situation."

"I only had my granddaughter short term in my home."

6 said the training or requirements were too much.

"They did not let us become licensed because of our children's vaccination status."

"I just really didn't have time for the classes with my job."

63 said the process was too complex or they lacked support.

"With two states involved it would have been a mess."

"I was having a hard time doing the licensing because the pandemic hit and they went to online. It would have been better to do Zoom or in-person and they weren't offering it at that time."

"I've submitted the paperwork two times and the person I was dealing with is gone and now I'm dealing with the social workers again."

"I did all the paperwork, then didn't hear from my licensor for a few months. Then was told the process was cancelled months before."

32 didn't know how to become licensed or didn't get good information from caseworkers.

"No one ever talked to me about being licensed."

"They really didn't give me any information about why this would be useful."

"I asked for assistance but all they do is send me to the website."

50 cited personal reasons like their age, health, or other challenges.

"I am not a person who can take in children with my age and my job."

"Don't have time. I actually have a job."

"[We] were going to get licensed but [my] husband [was] afraid he'd get too attached and not want to give a child back."

"Have health problems that may interfere."

"I can't manage more than the two I have."

132 shared other reasons, including disinterest or not wanting to be involved with the foster system.

"I don't see myself fostering any other children at this time."

"After the experience that we had with DCYF during our last placement, we decided that getting licensed was not in our best interest."

"After having the children in my home, I decided this wasn't for me. My experiences with DCYF weren't anywhere near positive and that sealed the deal for me."

"We do not intend to take any other children."

"I just don't want to be licensed."

"We were licensed 20 years ago. The system has not changed. Support for families is not better."

Caregiver Training

Part 2 is about the training caregivers receive.

Training is required for all licensed caregivers, including both foster and kinship caregivers. They receive training from a variety of sources. The Alliance for Child Welfare Excellence, a partnership between the Department of Children, Youth and Families (DCYF) and the state's leading universities, offers training and education to child welfare staff and caregivers. Both DCYF and the Alliance use caregiver feedback from this survey and other sources to update training. Caregivers also receive training through other organizations, including but not limited to local support groups, Foster Parent Alliance of Washington State (FPAWS), Olive Crest, Catholic Community Services, and the Overlake Refresh Conference. The survey responses and comments reflect training received from all sources.

The following four sections describe how foster and kinship caregivers rate and experience the following aspects of training:

- Training Quality and Helpfulness
- Access and Information
- Trainers and Methods
- Specific Training Topics

The following sections present caregiver responses to a structured survey question about the adequacy of training, as well as an analysis of their comments to two open-ended questions about training: *What about caregiver training has been helpful? How could caregiver training be improved?*

Training Quality and Helpfulness

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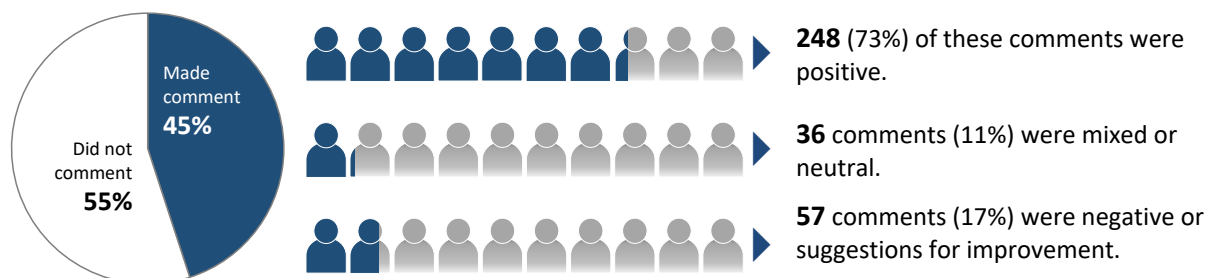
Training creates a community of informed caregivers.

"There are many aspects of fostering that we haven't been introduced to, and many life situations we haven't had to deal with yet, and the trainings have given us directions and knowledge in those areas."
– Foster Caregiver

Most of the feedback about the overall quality of training is from foster caregivers, who are required to attend training for licensure. Training is also available for kinship caregivers on a voluntary basis. Nearly 9 of 10 caregivers who had training gave positive answers on the overall adequacy of training:

- *Overall, thinking about all the training you have had in the last three years, how adequately has it prepared you to care for the basic needs of foster children placed in your home?* (All Caregivers: 88% positive. F: 87% K: 91%).

Caregivers who commented on the overall quality of training gave mostly positive remarks (73%). Many of these comments focused on general satisfaction with their training experience. Some caregivers identified specific agencies, providers, conferences, or programs, and nearly all of those comments were positive. Caregivers also mentioned how training enhances their awareness of the child's experience and provides opportunities to learn effective methods of connecting and parenting.

341 respondents (45%) commented on quality and helpfulness of training.
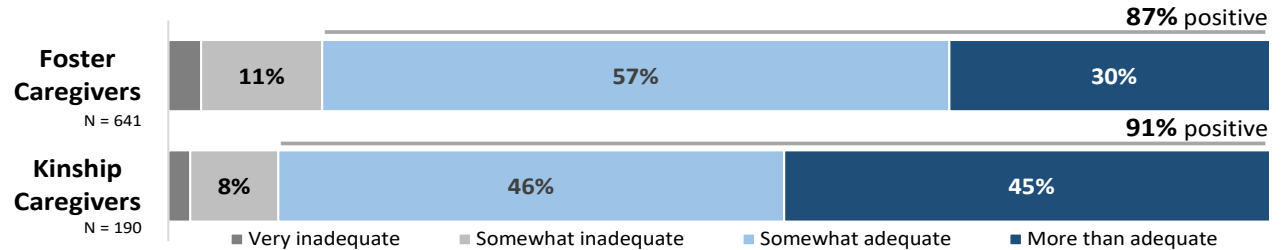

Made comment **45%**

Did not comment **55%**

248 (73%) of these comments were positive.

36 comments (11%) were mixed or neutral.

57 comments (17%) were negative or suggestions for improvement.

Overall, thinking about all the training you have had in the last three years, how adequately has it prepared you to care for the basic needs of foster children placed in your home?

Nearly 9 of 10 (88%) of the 831 caregivers who said they had training in the past three years and answered this question said training was somewhat or more than adequate.

RESPONSE

87% positive

Foster Caregivers
N = 641

	11%	57%	30%

91% positive

Kinship Caregivers
N = 190

	8%	46%	45%

■ Very inadequate   ■ Somewhat inadequate   ■ Somewhat adequate   ■ More than adequate

DETAIL

Training is required for foster caregivers, who were more likely to answer that they had received training (94%) than kinship caregivers (32%). Caregivers continue to give positive responses about how their training has prepared them to care for children, with only a slight decrease from 2021 to 2022. Differences across years were not statistically significant.

In the comments, caregivers described training that effectively prepared them for their role. Some said it contained valuable information for both new and continuing caregivers. A few asked for training to provide a more complete picture.

TREND
Positive Responses Over Time

90%   89%   88%   87%

Foster Caregivers

94%   91%   92%   91%

Kinship Caregivers

2019   2020   2021   2022
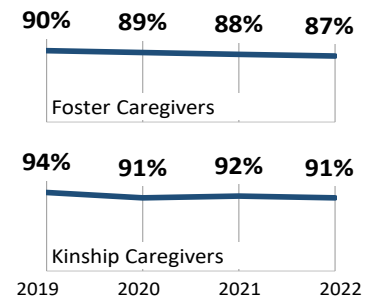
Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers expressed confidence in their preparation.

"It's given me the information I've needed to help the children in my care." (F)

"It opens your eyes to things and gives you an idea of what you are getting into." (F)

"It just gave me background on children's needs and I can tell you all the science behind it." (K)

"It was helpful with placing kids into my home so I could provide the child with what was needed as they got situated." (F)

"Helping us to be prepared for differing situations." (K)

Some gave examples of how training prepared them.

"I thought since they practically lived with me before I finally got custody that they would just transition into my home and the rainbow would just appear, but it didn't happen like that at all. This training, the trainers, it's an imperative part of the fostering process!" (K)

"How to understand things when you first get started. When you're excited about your first placement, but you have to remember the kid doesn't want to be there. You have to work with them and remember that they want to go home and they don't want to be with you." (F)

"I selected trainings that were pertinent to the children in my home. It taught me coping mechanisms." (F)

Others appreciate the new or refresher information.

"Their training provides good overviews for new caregivers." (F)

"The training was very engaging for new foster parents." (K)

"[I like] understanding the basics of foster parenting." (F)

"Gives me a refresher to look at things anew and gives me things to add to my parenting toolbox." (F)

"[It gave me] knowledge of things that I wasn't aware of before becoming a foster parent." (F)

"New ideas, strategies, research. Refresh knowledge base. Time to reflect on how I caregiver." (F)

A few didn't feel equipped by the training.

"I feel like the training focused on the worst-case scenario and I guess that with some kids that is needed. But I just needed to learn the regular stuff, so as my child grew up I wasted a lot of time watching for the triggers and expecting the worst. I could have used training on the fun parts of raising a child, it didn't have to be all negative. I would have liked to have learned about how to have fun and play games and interact with the child, the rewarding parts of caring." (K)

"Allow caregivers to be open and honest about behaviors and then design training that works in real life." (F)

Overall Quality and Helpfulness of Training

187 of the 763 caregivers who commented (25%) mentioned the overall quality and helpfulness of the training they received.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 24%
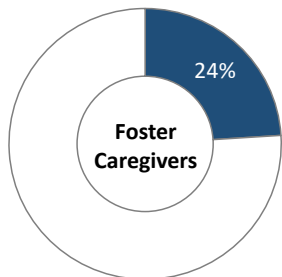
142 of 587 commented
103 – Satisfied
12 – Mixed or Neutral
27 – Needs Work

Kinship Caregivers — 26%
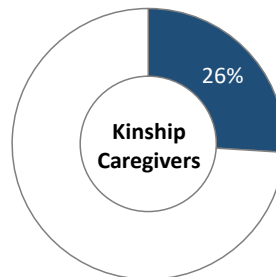
45 of 176 commented
38 – Satisfied
3 – Mixed or Neutral
4 – Needs Work

KEY FINDINGS

The majority of both foster (73%) and kinship (84%) caregivers who made comments about training quality and helpfulness expressed satisfaction.

- Caregivers noted satisfaction with training. Some cited positive experiences across many classes they attended and noted the adequacy of information provided.
- Others specifically described training as *interesting*, *helpful*, *valuable*, and *beneficial*.
- A few voiced dissatisfaction with the information presented in training, stating that the training content provided only the basics and was not helpful.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Most caregivers praised training they had attended.

"We have attended numerous trainings and have liked them all." (F)

"The whole training as a part of the process to be licensed was helpful." (K)

"I found all training I participated in valuable!" (K)

"All the training was good for caregivers. The more that you know the better." (F)

"You learn so much in the trainings. I always take a lot of training each year." (F)

"Honestly, the trainings cover everything I need." (F)

"It was very adequate." (K)

"All the trainings are helpful." (F)

"[I like] all of it! [It is] relatively not repetitive." (F)

"I always learn something from every training class." (F)

"[I like] all of it. Even if old and boring you always get something useful out of it." (F)

"I think it was well presented." (K)

"I've been licensed for over ten years. The training is much improved." (F)

"All great trainings. Made me think about things I wouldn't have ever thought about." (F)

"[I like] all of it. It's all useful." (F)

"The training was interesting." (F)

"Explains a lot, really helpful. It's very helpful now." (F)

"I've taken several caregiver classes that have been helpful." (F)

"I like the way it works so far." (K)

"All the trainings I went through were very beneficial and helpful." (F)

"The training was great and I cannot think of anything that would improve it." (K)

"Very applicable. Especially regarding trauma." (F)

"To me it feels like they are all really good trainings." (F)

"I enjoyed all the training I took to get my license." (F)

A few were not satisfied with training.

"I don't think most of the training was really that helpful, mostly done because I had to do it." (F)

"Honestly, I raised three of my own kids. I don't think it really gave me a lot more information." (K)

"I sought out my own training and I think the training is inadequate." (F)

"Most of the training is pretty basic common sense." (F)

58 of the 763 caregivers who commented (8%) mentioned quality and helpfulness of training in specific agencies or programs.
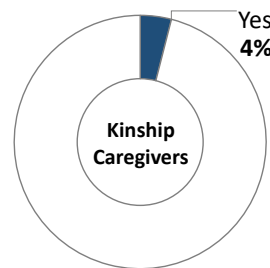
WHO COMMENTED ON THIS TOPIC?

9%
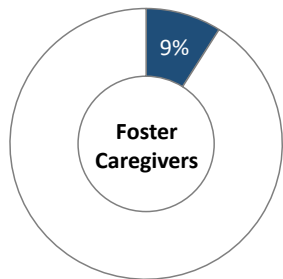
Foster Caregivers

51 of 587 commented
41 – Satisfied
10 – Mixed or Neutral
0 – Needs Work

Yes
4%

Kinship Caregivers

7 of 176 commented
3 – Satisfied
3 – Mixed or Neutral
1 – Needs Work

KEY FINDINGS

Most caregivers (76%) who commented on specific programs expressed satisfaction. Foster caregivers did not make any negative comments. Nearly all kinship caregivers (6 of 7) made positive or mixed comments.

- Caregivers mentioned many sources of training, including classes or conferences held by advocacy groups, religious organizations, hospitals, and tribes.
- Several caregivers named specific organizations, including the Refresh conference run by Overlake Christian Church, Foster Parent Alliance of Washington State (FPAWS), and Catholic Community Services.
- Others appreciate training they received in other contexts, such as work, education, or private agency, that is relevant to their caregiver role.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers referenced a variety of training options.

"I found the Refresh Conference at Great Wolf Lodge has always been helpful." (F)

"Service Alternatives has wonderful training and it helps with parenting teenagers." (F)

"The program presented by the Catholic Community Services was inclusive and well-presented." (K)

"[I like] the training that the tribe offers." (F)

"One of the classes that was the most helpful was very interactive, possibly a discipline workshop in Vancouver, WA." (F)

"[I like] the training that we received which was hands-on from the hospital." (F)

"Our training has been through the FPAWS conference and they do a good job in providing a wide variety of training topics for caregivers." (F)

"I take parenting classes with the behavioral therapist and they are helpful." (K)

"The Refresh conference was good because they had classes." (F)

"Training at conferences have been helpful." (F)

"Mockingbird Society trainings are really helpful." (F)

"I get my training with Children's Hospital." (F)

Some value work-related training.

"I have had to do caregiver training through my union and it is relatable to what we do in our home." (F)

"I'm a mental health counselor so my CEU [continuing education units] trainings are most helpful." (F)

"I was a licensed childcare provider and got my training from there." (K)

"I've been training to be a para educator, so a lot of the training required for that has helped me to better understand my own children/kids in foster care." (F)

"Trauma-informed practices was a good training through our schools, as I'm a teacher." (F)

A few mentioned the helpfulness of private agency training.

"Third party or external training we have found on our own has been very helpful to fill in the gaps of our original training." (F)

"Private agency options [are] better." (F)

"We sought out private training that we paid for to help our placement. It would have been great to have the state provide helpful training." (F)

"We get our training from our private agency and it is excellent." (F)

157 of the 763 caregivers who commented (21%) mentioned how training helps them care for the children placed with them.

WHO COMMENTED ON THIS TOPIC?

21%
Foster Caregivers
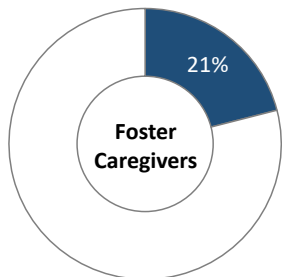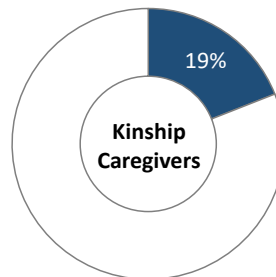
124 of 587 commented
80 – Satisfied
11 – Mixed or Neutral
33 – Needs Work

19%
Kinship Caregivers

33 of 176 commented
28 – Satisfied
1 – Mixed or Neutral
4 – Needs Work

KEY FINDINGS

Most of the caregivers (69%) who commented on how training prepares them to care for their children made positive remarks. They made a variety of comments about gaining insight and learning new methods to connect with children.

- Many caregivers noted the benefit of understanding the child's perspective.
- Others described how training prepares them to be a more effective caregiver.
- Some caregivers want more training that includes information on what to expect after children are placed and how to build a relationship with them.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate gaining insight into a child's perspective.

"One thing I remember being helpful was getting an empathetic perspective through the child's eyes." (F)

"[I like] looking at the situation through the eyes of the children." (K)

"Thinking about the emotional needs of a foster child and bringing a connection to how their family might feel as they have to be separated from their child(ren)." (F)

"Helping to understand the mental, social and emotional needs of our child." (F)

"Reinforced the different ways children in care may have additional needs." (F)

"It has opened our eyes to different scenarios that may come up with the children." (F)

"Understanding some of the times that love is just not enough to get them through. Just having that learning about what the system is. Where they are coming from." (F)

"Giving me the overall understanding of where the child is coming from and what I can do to ease the situation. Including how I, as the caregiver, should 'react' in the moment." (F)

"Just opening my eyes to what they go through and where they are coming from. More insight for me." (K)

They enjoy training that offers better understanding of the child's needs.

"[I like] the training on the kinds of support we can offer our kids when issues pop up." (F)

"How to help the kids work through and how to respond myself." (K)

"Being able to help a child that has a problem and ways to help the child understand what happened to change their life." (F)

"It has been helpful with setting up our expectations and structure within our home to support the needs of our children." (F)

Some requested additional training.

"I'd love to see a required training for even seasoned foster parents about remembering to meet children where they are, not where we'd like them to be. Their behaviors are not personal and every child in care is experiencing a loss." (F)

"State licensed families seem really unprepared for the gravity of what can happen with a child in your care." (F)

"More training in any form whatsoever on how to connect with a child on their level." (K)

"More training on what to expect after the child is placed." (F)

Access and Information

GettyImages.com/SeventyFour

## Caregivers need accessible training and clear communication.

"Some of the training help[ed] us understand the process but it isn't always easy to know where to look to find answers." – Foster Caregiver

Only 141 caregivers commented on access to training or information about training and resources. Most of these caregivers (68%) gave negative responses or made suggestions for improvement. Access includes class scheduling, in-person training locations, child care options, and information about community resources and upcoming training.

Caregivers voiced their issues with class schedules, asking for greater flexibility and evening or weekend options. Others want classes offered more frequently. A few focused on in-person training and cited distant location and lack of child care as barriers to attending training.

Caregivers are interested in information about resources. Some expressed gratitude for classes that included content about community resources. Those who did not receive this information wanted to find a mentor or source of support for questions. A few mentioned challenges with obtaining information about classes or training requirements and asked for lists and better communication.

### 141 caregivers (18%) commented on training access and information.

Made comment **18%**

Did not comment **82%**
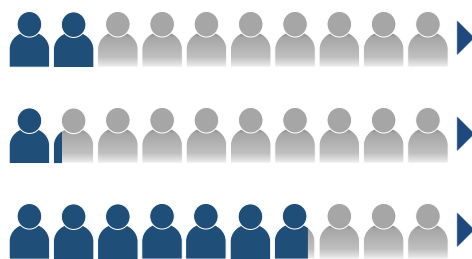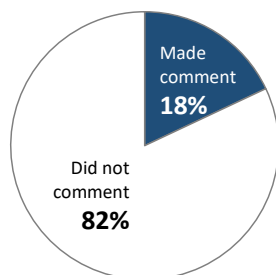
28 (20%) of these comments were positive.

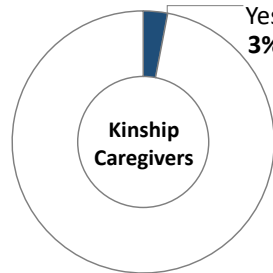**17** comments (12%) were mixed or neutral.

96 comments (68%) were negative or suggestions for improvement.

44 of the 763 caregivers who commented (6%) addressed training locations and schedules.

WHO COMMENTED ON THIS TOPIC?

6%

Foster Caregivers
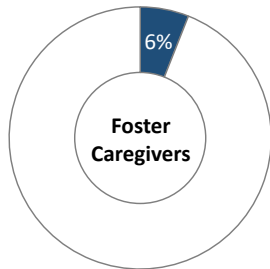
38 of 587 commented
1 – Satisfied
1 – Mixed or Neutral
36 – Needs work

Yes
3%

Kinship Caregivers

6 of 176 commented
1 – Satisfied
0 – Mixed or Neutral
5 – Needs work

KEY FINDINGS

Nearly all caregivers (41 of 44) who commented on this topic were dissatisfied or asked for improvements with training locations and schedules. Foster caregivers were more likely to comment.

- Many caregivers voiced difficulty finding training at times they could attend. Several employed caregivers said they would appreciate weekend or evening options.
- Some asked for classes to be offered more frequently.
- A few mentioned challenges finding in-person trainings where they lived.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers want alternate training schedule options.

"I would like more time slots to be offered. The trainings are always at dinnertime." (F)

"Have training at better times for working foster parents." (K)

"Make it more accessible to people employed full time." (F)

"The times for the ongoing training were not ideal for having young children (bedtimes, etc.). Weekends would be better for us." (F)

"I would enjoy having some after work and weekend classes." (K)

"Have it available on a more flexible schedule." (F)

"A lot are during working hours and both my husband and I would like to be able to attend together in the evening." (F)

"[I want training for] part of a weekend day not the whole weekend. The evening training are great but when you have kids on a schedule it makes it bad the next day, As a working parent can't do daytime training." (F)

"Make the training available on weekends and evenings for foster parents that are unable to attend during the day." (F)

"Better times available. Many foster parents work." (F)

"Offered during morning and evening hours." (F)

Some requested more class offerings.

"More classes need to be held per month at different times." (F)

"More training available. I'd even take a video over waiting 3-4 months for the training I needed specifically for my situation to come back around. Limited space is a killer when you need that help NOW. There was one course I desperately wanted to take but I kept missing the date. We made it through the situation on our own, but it was a nightmare! I don't want it now but it's so sad to see all that wonderful training and having to wait. I'm 100% on board with interacting with other people going through similar things and getting their input or views, helpful hints, etc. But when I'm dealing with a child and something I'm not equipped to handle in the moment, waiting for a class that's two months out is frustrating." (K)

"The frequency, more frequently." (F)

"There aren't always many choices for new trainings: it gets offered once and then isn't available for quite some time." (F)

A few asked for training in their local area.

"More options in my area." (F)

"More locations and options." (F)

"More in-person training available in my area." (F)

59 of the 763 caregivers who commented (8%) mentioned other issues about access to training.

WHO COMMENTED ON THIS TOPIC?

9%

Foster Caregivers
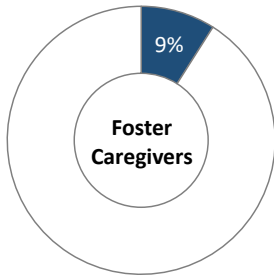
52 of 587 commented
7 – Satisfied
9 – Mixed or Neutral
36 – Needs work

Yes
4%

Kinship Caregivers

7 of 176 commented
1 – Satisfied
2 – Mixed or Neutral
4 – Needs work

KEY FINDINGS

Many (68%) caregivers who commented on access were negative.

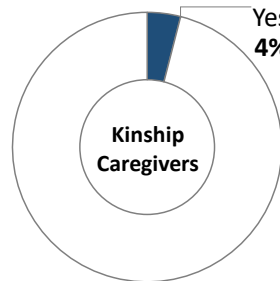- A small number of caregivers praised accessibility, including availability and ease of use.
- Over half of the comments (33 of 59) were about child care, and nearly all (28) were requests for improvement. Lack of child care at training continues to be an issue for caregiver. Some noted they are unable to fully participate in training when child care is not provided.
- Some asked for financial assistance or free training.
- Others described needing to find outside courses that were more relevant to the complex needs of their children.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

A few caregivers praised training accessibility.

"There is always training available to join if you want more training." (F)

"Easy to use and access." (F)

"Keep the offerings for education coming. Keep classes accessible." (K)

"Everyone learns differently and they make it available so we can learn the needs of the child." (F)

Child care was an issue for many caregivers.

"In-person training is difficult when caring for foster children and not having child care options." (F)

"Child care for foster children and caregivers' children to participate fully in training." (K)

"Once we can do more in person, [making] child care available would be helpful." (F)

"Make it more readily available. Provide child care during training." (F)

"When they can provide child care is the number one helpful thing." (F)

"Offer child care during training." (F)

"In-person trainings with child care would be amazing. Between work and child care, it's hard to fit it in otherwise." (F)

A few requested financial assistance.

"Make all classes free and more availability." (F)

"More incentive and financial support at caregiver conferences." (F)

"CPR, first aid, and blood born pathogen [should] be free or child care provided for these." (F)

Some lack access or find their own training.

"Easy access to training would be helpful." (F)

"Make it easier to access." (F)

"[I want] better access." (K)

"I did a lot on my own." (F)

"Training for drug-impacted babies would be very helpful. We have had to seek out training about this on our own." (F)

"I have found a couple of trainings myself that were helpful." (F)

"More in-person training needs to be made available. I live in a rural area and do not have access to internet at my house." (F)

"[I was] self-directed, [and] sought resources that are applicable while also meeting requirements for license renewal." (F)

57 of the 763 caregivers who commented (7%) addressed information about trainings and resources.

WHO COMMENTED ON THIS TOPIC?

8%

Foster Caregivers
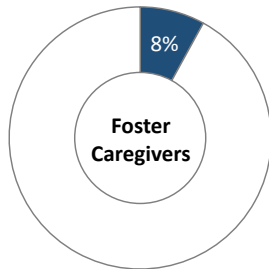
45 of 587 commented
- **16** – Satisfied
- **4** – Mixed or Neutral
- **25** – Needs work

7%

Kinship Caregivers
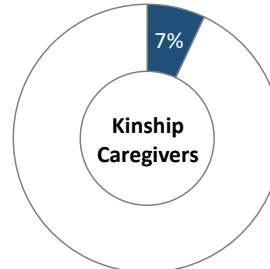
12 of 176 commented
- **5** – Satisfied
- **1** – Mixed or Neutral
- **6** – Needs work

KEY FINDINGS

Caregivers gave mixed responses about accessing training and resource information. A little more than half (54%) of caregivers who commented expressed dissatisfaction and 37% voiced satisfaction.

- Most of the positive comments expressed appreciation for training that includes information about community resources.
- Some said information about resources was lacking during training, asking for additional materials, communication, or a point of contact who is knowledgeable about the local resources.
- Many of the negative comments cited issues finding information about upcoming classes and training requirements.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers like learning about community resources.

"It just helps to know there are resources available at any given time." (F)

"[I like] the information the teachers had for us. There were lots of resources available." (F)

"[I learned] how to get support and community resources." (K)

"[I like] learning about outside resources that are available." (F)

"[I like] information about accessing resources in the rural community." (F)

"We were told about some very helpful resources to help with one of our foster children." (F)

"[I like] personal examples (i.e., 'if this happens' or 'try this' or 'contact this person')." (F)

"[I liked] the training that provided us with the resources that were available." (K)

"[I like to] learn about different programs out there to help." (F)

Many requested information about resources.

"[I want] information about community resources." (F)

"[I want] some type of graphic of how to find information and from who and what steps needs to be taken as a foster care provider." (F)

"Explain the resources and benefits that are available when a child comes into your home." (F)

"More training on how to use and get the resources needed to help a child." (F)

"Every foster family should have a mentor whom they can contact with questions. A lot of the information is hard to obtain." (F)

"Would love to see location be relevant: those familiar with the resources in the area being made more available as a resource." (F)

Some want more information about classes and training requirements.

"Send lists of available classes." (F)

"I don't even know what I am required to do." (K)

"The training can be hard to find (now that it's online) and isn't always easily accessible and not well advertised. For some of us older foster parents it can be hard to locate." (F)

"It would be nice if they sent out a monthly training schedule in my area." (K)

"Perhaps a case manager could touch base with each parent and help match classes. Certain ones are available at certain times and not for large chunks of time, so sometimes you end up taking classes to fill hours that are not the ones that are really needed." (F)

"Better communication of classes available." (F)

Trainers and Methods

GettyImages.com/Drazen Zigic

Caregivers value knowledgeable trainers and a variety of training options.

"[I'd like] more training presented by foster parents or previous foster parents to provide a more realistic, in-depth view of what foster parenting really looks like day to day." – Foster Caregiver

Over half of the respondents (62%) commented on trainers and methods. Caregivers are interested in learning about their role from a well-rounded perspective. They consistently praised classes that involved current or former caregivers, children in care, and parents.

Caregivers mentioned a variety of approaches to training they enjoyed, including hands-on learning, real-life examples, and small group discussion. They voiced mixed preferences about virtual or in-person training. Some praised the flexibility and self-paced online options. Others enjoyed the community building and helpful discussion that in-person training offers. Most caregivers had a distinct preference of one or the other.

Regardless of training format, caregivers want content that is applicable to their child[ren] in care. Some caregivers described challenges with training requirements, citing difficulty completing the necessary hours or requesting broader options to meet requirements.

475 respondents (62%) commented on trainers and methods.

Did not comment **38%**

Made comment **62%**
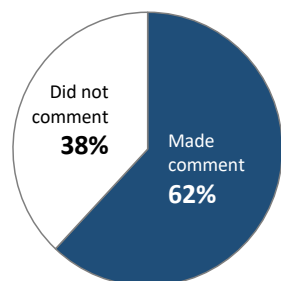
168 (35%) of these comments were positive.

114 comments (24%) were mixed or neutral.

193 comments (41%) were negative or suggestions for improvement.

54 of the 763 caregivers who commented (7%) mentioned their experiences with trainers.

WHO COMMENTED ON THIS TOPIC?

7%

Foster Caregivers

44 of 587 commented
27 – Satisfied
2 – Mixed or Neutral
15 – Needs Work

6%

Kinship Caregivers

10 of 176 commented
4 – Satisfied
2 – Mixed or Neutral
4 – Needs Work

KEY FINDINGS
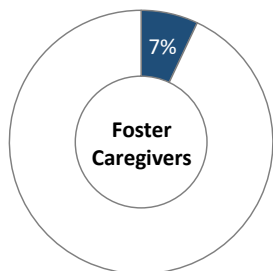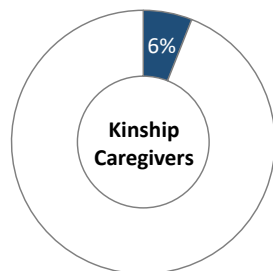
Over half of caregivers (57%) who commented on trainers described positive experiences. A few named specific trainers they liked: Nathan LaChine, Shelby Hayes, Scott Hanauer, Tif Junker, and Kebbie Green.

- Caregivers expressed appreciation for experienced and knowledgeable trainers.
- Some voiced gratitude or made requests for training that includes caregivers and children in care.
- Others said they want trainers to be better equipped and informed.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many caregivers praised their trainers.

"The teachers are very well prepared and knowledgeable." (F)

"Trainers have been very experienced." (F)

"The teachers are willing to stay online longer to answer questions and give their contact information for later. They seem to want to help you." (K)

"The trainers are all experienced, capable, supportive, and honest with situations. They do not ask for child specific information unless appropriate and all genuinely seem to feel as though they care deeply about their jobs as trainers." (F)

"I've had good trainers. It was real thorough." (F)

"The instructors are knowledgeable and open to questions." (F)

Caregivers and children in care gave helpful insight.

"Having staff who have been actual foster parents themselves, they have talked about the things that you don't read about it in books. There is so much more about fostering that doesn't get talked about." (F)

"I like the testimonials with real foster kids and foster parents." (K)

"I appreciate the input from the parents, children and long-time foster parents." (F)

"[I like] hearing other foster parents tell their experiences and also bio families." (F)

"I like it when they have the foster youth speak about their experience." (F)

"I really enjoyed a training where kids who had been in care gave their stories." (K)

"[I like] hearing from adults who have experienced foster care and from families who have had children removed from their custody." (F)

Some requested more training from peers.

"Have some peer-to-peer training, a teacher who has been foster care parents." (F)

"More personal parent experiences instead of what all the professionals say you should do but have no experience actually doing in their own homes." (F)

"Have actual foster parents do the training." (F)

Others want trainers to be more prepared and skilled.

"[I want] individuals that are more highly qualified to be teaching the topics offered." (F)

"Make sure the trainers are trained in the field they are training on." (F)

"More lively trainers. More passion from the trainers. They were sometimes monotone and didn't seem interested and they seemed burnt-out, really." (K)

Approaches to Training

135 of the 763 caregivers who commented (18%) referenced approaches to training.

WHO COMMENTED ON THIS TOPIC?

19%

Foster Caregivers
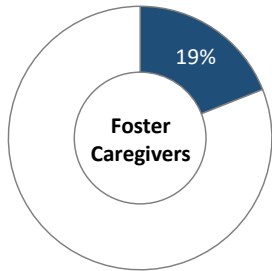
111 of 587 commented

32 – Satisfied
21 – Mixed or Neutral
58 – Needs Work

14%

Kinship Caregivers
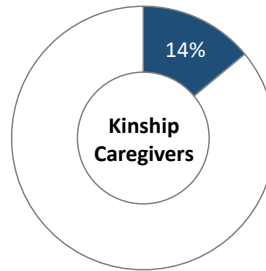
24 of 176 commented

11 – Satisfied
5 – Mixed or Neutral
8 – Needs Work

KEY FINDINGS

Nearly half (49%) of caregivers who commented suggested that training approaches could be improved. Foster caregivers were somewhat more likely to express dissatisfaction. The value of in-person training is frequently mentioned by both kinship and foster caregivers.

- Caregivers enjoy a variety of training approaches, including hands-on activities and real-life examples.
- Some mentioned the benefits of small group interaction.
- Many caregivers requested in-person training.
- Others asked for more interactive training with real-life examples.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers described training approaches they liked.

"Hands-on group exercises were great in helping us learn more." (F)

"[They] gave real-life examples of working with teens with trauma." (F)

"The role-playing during the trainings is one of my favorites." (F)

"The best training has always come in the form of storytelling and connecting with established foster families." (F)

"Their trainings go into a lot of detail, and we are allowed to ask questions if needed." (F)

"[I like] hearing real-life stories with real-life solutions to issues." (F)

"Liked [that] I could complete at my own pace and still had an opportunity to discuss with a real person." (F)

Some enjoyed small group options.

"It's helpful to be in a group with other foster parents, and some leaders have fostered so the one-on-one conversations can be helpful with a specific situation." (F)

"[I like the] smaller group and ability to have more in-depth discussions, especially for less common issues." (F)

"The initial training was good, because we had a small class (like 10) and we were able to ask questions." (F)

Many asked for in-person training.

"Face to face training is and has been the most helpful." (F)

"[I like] everything, but in person it's better." (F)

"In-person training is helpful as we can speak with other caregivers." (F)

"Offer more in person again." (F)

"I miss in-person training and the input from others." (F)

"I would prefer more in-person training. I think this way we could have class discussions, share stories and learn from each other." (K)

"Go back to in person." (F)

"In person would be better, it was a lot of information to cover on a computer." (K)

Others want more effective strategies.

"Have more example and demonstrations of situations that happen in the home, and more panels and discussions." (F)

"Trainings need to be more interactive." (K)

"Needs to be more real world and not so textbook." (F)

"More question and answer sessions." (F)

"It feels like often training could be more streamlined -- sometimes has a 'death by PowerPoint' feel." (F)

"Provide realistic training, based on real situations." (F)

156 of the 763 caregivers who commented (20%) mentioned online training.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 21%
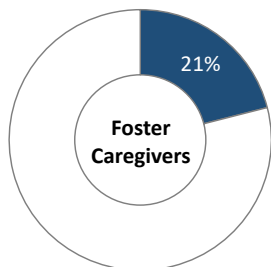
123 of 587 commented
56 – Satisfied
18 – Mixed or Neutral
49 – Needs Work

Kinship Caregivers — 19%
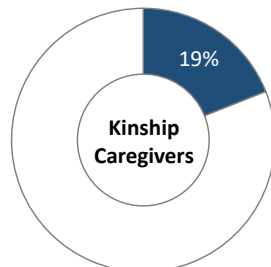
33 of 176 commented
17 – Satisfied
5 – Mixed or Neutral
11 – Needs Work

KEY FINDINGS

Nearly half (47%) of caregivers who commented on this topic were satisfied with online training. Since the COVID-19 pandemic, caregivers continue to voice interest in online training.

- Caregivers praised the convenience and accessibility of online training.
- Many wanted more online options, including expanded self-paced training and different times for live events.
- A few described challenges with websites and wanted help with technology issues.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers described the benefits of online training.

"The online training availability has helped us be able to more quickly complete our required hours." (F)

"I liked the online course as I could go at my own pace." (F)

"The fact that it is virtual is very helpful. It really helps us to feel like we are not alone." (K)

"The online is pretty convenient as I work graveyard." (F)

"I love the community feeling in the online class. I love that you can do it online." (F)

"Online was easy to do with kiddos running around the house. It was the only area you could feel support." (F)

"Being able to do it at my own speed from home has been wonderful." (K)

"We felt the training was interactive and online was way more useful than trying to find a sitter. Working through it on my own time was very beneficial." (F)

"There's a wide variety of online classes which is good, because foster parents are so busy with kiddos so being able to go online at any time night or day is very helpful." (F)

"The online ones are so nice, because it's easy to use and do." (F)

"I prefer training on webinars because I can interact and it works better with our home life." (F)

Some asked for additional online training options.

"We are so busy trying to parent, there's not a lot of opportunity to sit and be trained easily. More access to online training." (F)

"There should be more self-paced online training made available." (F)

"The remote and online learning is nice, because we're out in the distance and it's nice to have the online classes for foster parents that are not in city limits. I hope they continue with them." (F)

"More online options. I don't live close to any of the training spots and do better with online learning." (F)

"Different times for the workshops online." (K)

"More asynchronous fully online training please :)." (F)

A few asked for technical assistance.

"Fix website bugs that have been an issue for us to get all our training done." (F)

"The site seems to have some technical difficulties at times. Other times it works well." (K)

"Hard to get help with technical difficulties. I've had to start over several times -- not sure I ever did get credit for the orientation even though I went through it twice. No one to go to." (F)

Building Community in Training

87 of the 763 caregivers who commented (11%) addressed interaction with other caregivers and the sense of community developed during training.

WHO COMMENTED ON THIS TOPIC?

Foster Caregivers — 13%
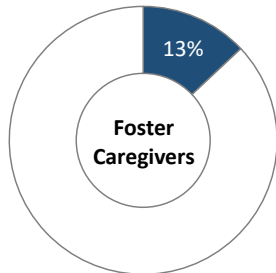
75 of 587 commented
- **46** – Satisfied
- **3** – Mixed or Neutral
- **26** – Needs Work

Kinship Caregivers — 7%
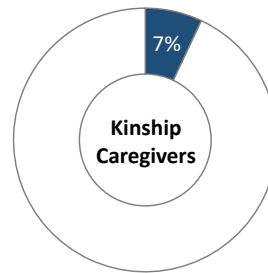
12 of 176 commented
- **8** – Satisfied
- **0** – Mixed or Neutral
- **4** – Needs Work

KEY FINDINGS

Over half (62%) of caregivers who commented about building community in training were satisfied. Foster caregivers were more likely to make comments.

- Engaging with other caregivers is a highlight of training. Many caregivers voiced appreciation for interaction with peers who could offer relevant insights and shared experiences.
- A few noted the camaraderie that occurs during in-person training.
- Some caregivers want more opportunities to hear from current and experienced caregivers.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers enjoy hearing from their peers.

"Meeting with other foster parents who were more experienced was the most helpful." (K)

"The networking that goes on at the conferences and training is the best." (F)

"It was a relief to spend time with other foster parents because they 'get it.' Sometimes it is just helpful to spend time with other adults!" (F)

"[I like] being able to talk and compare…get ideas for challenges from others." (F)

"[I like] new ideas/problem solving/socializing with others who are doing the same thing." (F)

"[I like] interaction with other foster parents some of whom have had more experience and knowledge with different types of therapies and parenting challenges. I also love having the different points of view that happen too." (F)

"[I like] the shared experiences and questions of other caregivers." (F)

"[I like] training that includes conversation with current foster parents." (F)

"The most helpful portion is sharing stories with other foster parents." (F)

"Peer collaboration is helpful." (F)

"It's training but ends up being a great support group." (F)

"Just knowing who the others are in this journey. Building the community." (F)

A few focused on the benefit of in-person training.

"On-demand training is useful but actual human interaction is so much better." (F)

"It would be nice if we could meet people who have things in common, so more in-person trainings." (F)

Some requested more interaction.

"Maybe more sharing from people who have done it." (F)

"Invest in experienced caregivers to help others. We know far more than those who have never actually dealt with these children 24/7 over months and years." (F)

"More interaction with former or past foster parents." (K)

"Have current foster parent come in and answer questions during training." (F)

"It feels a bit idealistic, and you get the real scoop if you talk with actual foster parents. New potential foster parents really need to talk with experienced foster parents." (F)

"Have more interaction with foster parents and caseworkers." (F)

"More peer-to-peer interaction." (F)

100 of the 763 caregivers who commented (13%) referenced training processes.

WHO COMMENTED ON THIS TOPIC?

14%

Foster Caregivers
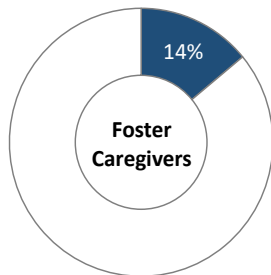
81 of 587 commented
- **16** – Satisfied
- **8** – Mixed or Neutral
- **57** – Needs Work

11%

Kinship Caregivers
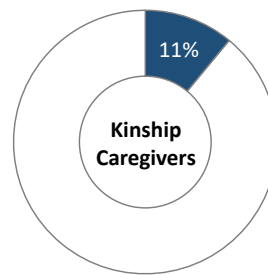
19 of 176 commented
- **5** – Satisfied
- **2** – Mixed or Neutral
- **12** – Needs Work

KEY FINDINGS

Many caregivers (69%) who commented on training processes were dissatisfied.

- Caregivers appreciate the ability to choose which training they attend. They also like courses that refresh and review information.
- Experienced caregivers were unsatisfied with repetitive training and requested more options. Even when asked what they like about training, they instead pointed to issues with sitting through the same training each year.
- Several caregivers voiced issues with the timing of training, requesting "just in time" training, or more training at initial placement.
- Some asked for more flexible training requirements, including the amount of training hours required.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Some caregivers mentioned aspects they liked.

"I got to pick and choose which classes I wanted." (F)

"I think just the repetitive nature of the training is good. It gives a refresher course." (F)

"The new forum is amazing, very approachable and with COVID, training online seems more streamlined." (F)

"Good review of common-sense stuff." (K)

"I get credit for work-related trainings as I'm an educator; that's been a big help." (F)

"It is a good reminder of the things I've learned before." (F)

"Being able to have a choice to learn certain things at certain times helped." (F)

Experienced caregivers asked for different training options.

"Need advanced-level training for those who have been fostering for five plus years." (F)

"Offer new classes so it's not so repetitive. People who have fostered a long time really have seen all of this." (F)

"The training needs to be more streamlined. There is a lot of the training that is repeated." (F)

"There needs to be more training available for experienced foster parents. At this point I could teach most classes and have more experience than the trainers." (F)

A few offered suggestions on training timing.

"Offer it sooner in the process and more often, and offer it to relative placement also." (K)

"Make trainings more available when they are actually needed." (F)

"It would have probably been best if we had done this when the child was first placed. By the time we watched it, it really wasn't applicable." (K)

Others want more flexible training requirements.

"It would be good if the training I receive through my job would transfer to my credits for foster parenting." (F)

"More consistently allowing families to receive credit for the training they receive in other ways. Some families report being able to claim hours for things like trainings with therapists, but others have difficulty accessing this." (F)

"Have a reading list that counts toward training." (F)

Caregivers expressed difficulty with training hours.

"It's hard for my husband and I each to get the required training hours in." (F)

"Trying to get in all the training hours needed to be licensed or renew your license is a major challenge for foster parents." (F)

199 of the 763 caregivers who commented (26%) referenced training content.

WHO COMMENTED ON THIS TOPIC?

28%
Foster Caregivers
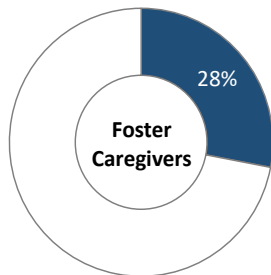
162 of 587 commented
57 – Satisfied
17 – Mixed or Neutral
88 – Needs Work

21%
Kinship Caregivers
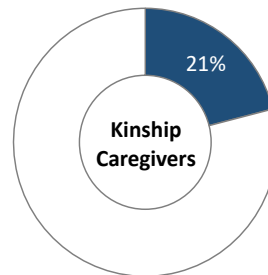
37 of 176 commented
19 – Satisfied
3 – Mixed or Neutral
15 – Needs Work

KEY FINDINGS

Slightly more than half (52%) of caregivers who commented on training content described negative experiences. Kinship caregivers were slightly less likely than foster caregivers to mention training content, but when they did, the comment was more likely to be positive.

- Caregivers appreciate choosing classes that are relevant to their child[ren] in care. They highlighted the variety of class options and helpfulness of course content.
- Some felt the course content was too broad and asked for training tailored to their needs. Of the 38%that gave positive remarks, many were focused on the importance of training that assists them with current experiences in their home.
- Others requested more current training materials and condensed classes.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers enjoy choosing classes that relate to their child in care.

"The training raised issues and perspectives that have been very helpful." (K)

"Some trainings [that] related to my child's specific issues have been helpful." (F)

"[It has] relevant information and problem solutions." (F)

"I took specific training based on the children that were placed. I appreciated the variety of classes." (F)

"I usually can use the information immediately in the care of my children." (F)

"The information was pertinent to what I was doing at the time." (F)

"I liked the specificity of topics related to our situation." (F)

They appreciate variety and topic coverage.

"There is a wide variety of topics and we appreciate that." (F)

"Great selection of classes relating to trauma and so many other classes." (F)

"It gave me some expectations from different perspectives." (K)

"[I like that] it was detailed." (F)

"It helped cover the basics of what we needed to know." (K)

Some wanted a more individualized approach.

"It's very one size fits all, so it doesn't really fit anybody too well." (F)

"We need to be more supported in our specific situation, not such a broad bunch of information that doesn't even apply to our situation." (K)

"The agency trainings weren't really helpful. I think it's because they are really generic and trying to cover too much." (F)

"[I want it] more personable and individualized." (K)

Others asked for updated training materials.

"Update their trainings, as we've seen and done the same ones over and over in the last 16 years." (F)

"It needs to be updated and re-energized." (F)

"Update their video please. They need to pay attention to how outdated they are." (F)

A few requested shorter classes.

"Shorten it; especially when you're taking care of infants." (F)

"More short classes to make it easier to keep up with training hours required." (F)

"Maybe not as long sessions, some were eight hours and that was too much." (F)

Specific Training Topics

GettyImages.com/fizkes

Caregivers identified specific training they need to support a child in care.

"It taught me so much on trauma, how it manifests itself in different ways, tools on how to handle different trauma effectively, kindly, compassionately. It literally opened my eyes to a different world."
– Kinship Caregiver

Many caregivers (57%) who made comments on training described specific training topics and over half (68%) of these comments were positive. A majority of the comments related to areas of trauma and behavioral health as well as child behavior and development.

Caregivers highlighted training that helped them recognize trauma responses, especially in the context of understanding child behavior. Trust-Based Relational Intervention (TBRI) continues to be a popular training, and caregivers seek out trauma-informed training across all topic areas. They also praised Caregiver Core Training (CCT), naming it specifically as a training they enjoyed.

Some caregivers expressed eagerness to gain cultural awareness and learn about current cultural issues relating to the child[ren] in their care. Others noted the quality of training content on working with DCYF and the foster care system. They also indicated interest in training that describes the caregiver and parent dynamic and how to communicate more effectively.

436 caregivers (57%) commented on specific training topics.

Did not comment **43%**

Made comment **57%**

298 (68%) of these comments were positive.

64 comments (15%) were mixed or neutral.

74 comments (17%) were negative or suggestions for improvement.
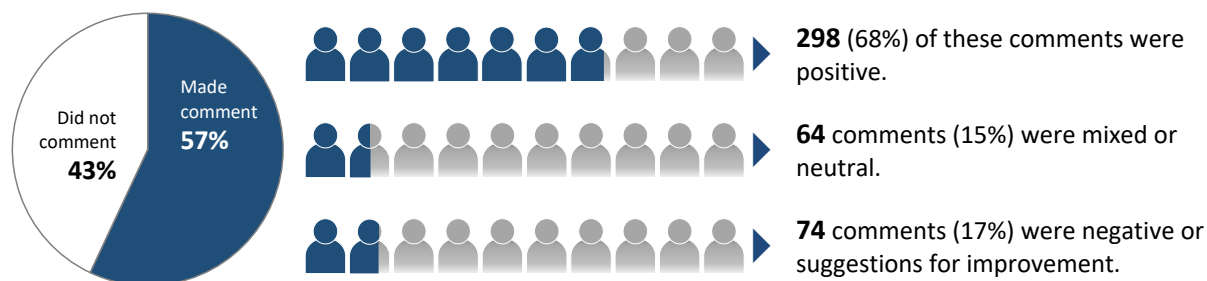
204 of the 763 caregivers who commented (27%) mentioned trauma and behavioral health training.

WHO COMMENTED ON THIS TOPIC

Foster Caregivers 30%
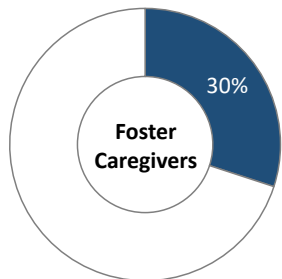
174 of 587 commented
124 – Satisfied
25 – Mixed or Neutral
25 – Needs work

Kinship Caregivers 17%
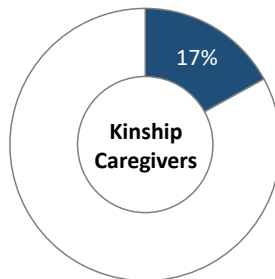
30 of 176 commented
26 – Satisfied
0 – Mixed or Neutral
4 – Needs work

KEY FINDINGS

Caregivers who commented on trauma and behavioral health training were largely positive (74%). Foster caregivers were more likely to comment than kinship caregivers, but the balance of positive and negative comments was similar across groups.

- Many caregivers said that training helped them understand the impact of trauma.
- Some named specific trainings they valued, including Trust-Based Relational Intervention (TBRI).
- A few requested more training on drug-exposed infants and children, addiction, attachment, and related behavioral health issues.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers value learning about the impacts of trauma.

"I like that the Alliance classes are focused to help trauma-impacted children." (F)

"[I like] learning about trauma. Had no clue how much it affected the brain and behavior long term." (F)

"I think it was hopeful when they had us look at trauma from a child's perspective; looking at the root of the problem instead of the behavior itself." (F)

"[I like] understanding childhood trauma and awareness of the kinds of issues we might face." (F)

"[I like] the training on trauma and behavior and how to look at things in a different way." (K)

"Anything related to trauma-informed training has been extremely helpful." (F)

Some named specific trainings they found beneficial.

"The Right Response training has been invaluable as we have two kids on the autistic spectrum." (K)

"The most helpful was the Adverse Childhood Experience (ACE) training." (F)

"[I like] any of the training on Fetal Alcohol Syndrome (FAS) and training on drug and alcohol affected children." (F)

"The class on sexually aggressive kids was so informational." (F)

"[I like] the classes dealing with some of the issues, such as ADHD and how differently the brain works. Helped me have a better understanding of the child in my care." (K)

"Training on medically fragile children is always helpful." (F)

"[I like] learning about suicide prevention and what to look for in the children." (F)

Caregivers continue to praise training in Trust-Based Relational Intervention (TBRI) specifically.

"TBRI is helpful to provide the child with building blocks of a stable loving relationship which they probably have never had before." (F)

"TBRI was, by far, the most helpful training I've ever received." (F)

"The TBRI has been remarkable to help prepare us to work with children who are placed in the foster care system." (F)

Others want more training on a variety of topics.

"There is a big need to help families with drug exposed and still detoxing infants." (F)

"[I want] education on recognizing addiction." (F)

"Focus in on higher level behavioral needs of children and youth in care. Specifically on reactive attachment, PTSD, teens with higher emotional/behavioral needs, and suicide prevention." (F)

Child Behavior and Development

153 of the 763 caregivers who commented (20%) mentioned training about child behavior and development.

WHO COMMENTED ON THIS TOPIC

21%
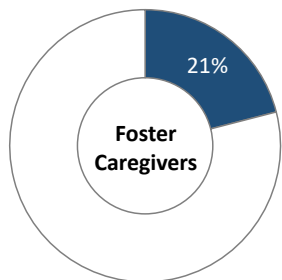
Foster Caregivers

121 of 587 commented
- **81** – Satisfied
- **13** – Mixed or Neutral
- **27** – Needs work

18%

Kinship Caregivers
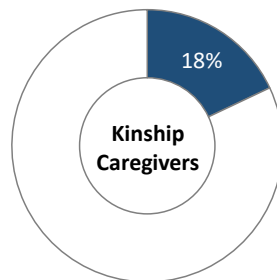
32 of 176 commented
- **27** – Satisfied
- **1** – Mixed or Neutral
- **4** – Needs work

KEY FINDINGS

Most caregivers (70%) who commented on child behavior and development training were satisfied. Foster caregivers were more likely than kinship caregivers to describe areas that need improvement.

- Caregivers mentioned meaningful takeaways from training on behavior, such as understanding emotional age, approaches to discipline and de-escalation, and identifying emotional triggers.
- Some named specific classes or course content, including Triple P Parenting and Behavioral Rehabilitation Services (BRS) training.
- A few described teen-focused training. Eleven caregivers specifically mentioned training on teenage behavior, and six made positive comments about classes they attended. Those who made suggestions for improvement (5 of 11) requested more training.
- Others asked for age-specific courses and practical application of concepts.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers benefit from training on behavior.

"It helps the caregiver identify how to care for children that express different behaviors, problems, diagnoses. Identify triggers and de-escalations. Improve communication and harmony within the family." (F)

"[Gave me] understanding that numerical age may not be the emotional age of the child." (K)

"We got training as we needed it for the particular child's needs, in light of what is going on with the child. We couldn't understand their behavior and the classes teach you." (F)

"[I liked the] information about behaviors and why they may be present in a new placement." (F)

"It definitely opened our eyes on the importance of discipline and the different approaches to discipline." (F)

Some mentioned classes they enjoy.

"I recently took a class on caregiving for teenagers and it was very good." (F)

"[I liked] the class about brain development and I was fascinated by that." (F)

"I learned about diversion training and how, as they get older, to teach consequences." (K)

"Positive Parenting was helpful." (F)

"The Period of Purple Crying was really good." (K)

"[I like] the Triple P Parenting." (K)

"Positive Discipline was the most helpful training that I found and would recommend to other caregivers." (F)

"I have taken the infant sleep training class. Reminded me what can and cannot be put into a crib with an infant." (K)

"Ways to follow up with helping with de-escalation and anger have been very appreciated." (F)

"[I like] Behavioral Rehabilitation Services training." (F)

Others requested trainings with more immediate practical application.

"We need to know the 'how' of caring for children with various needs. We do not need to have the behaviors described, we need to know what to do with the behaviors." (F)

"Most trainings spend a lot of time on why kids are struggling but still leave the caregiver with little guidance on what to do in specific situations." (F)

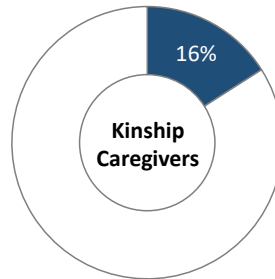"Split up training by age group. One size does not fit all." (F)

"More relevant training for the age of kids coming into our home." (F)

97 of the 763 caregivers who commented (13%) referenced training on navigating the foster care system.

WHO COMMENTED ON THIS TOPIC

12%
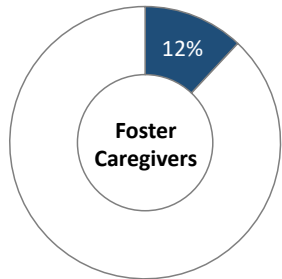
Foster Caregivers

69 of 587 commented
34 – Satisfied
7 – Mixed or Neutral
28 – Needs work

16%

Kinship Caregivers

28 of 176 commented
23 – Satisfied
0 – Mixed or Neutral
5 – Needs work

KEY FINDINGS

Caregivers who commented on navigating the foster care system had mixed responses. Most kinship caregivers (23 of 28) made positive comments. Foster caregivers were split, with nearly half (34 of 69) satisfied and slightly fewer (28 of 69) dissatisfied.

- Caregivers enjoy classes that describe the rules, regulations, and processes of working with DCYF.
- They value information on legal aspects of caregiving.
- Some appreciated the clarity they were given about the focus on reunification.
- They requested training in many areas, including updates on Washington Administrative Codes (WACs), court processes, understanding acronyms, and caregiver rights.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers appreciate learning about the foster care system, rules, and regulations.

"It gives me new insight as far as the rules and regulations." (K)

"They provide good info on working with the state and how to deal with issues that may arise." (F)

"[I like] understanding the different situations that foster care gets involved in." (K)

"'What to expect from the system-type training is nice." (F)

"It gave us a better idea of how to deal with the state." (F)

"The helpful part was learning about how the case system works and how the case will progress." (K)

Some mentioned specific content they valued.

"[I like] understanding the processes in fostering to adopt and the legal aspects of it." (F)

"Certainly, any of the legal obligations foster parents had to adhere to was helpful. Also, the processes we needed to go through with our first placement." (F)

"The record keeping and logging information classes were very helpful because I could use the information later when documenting certain issues." (F)

"[I like] knowing my rights as a caregiver." (K)

A few highlighted the focus on reunification.

"[I liked] tips for success and making it clear reunification was goal." (F)

"Makes it really clear that the goal for the child is for them to be reunited with parents or family." (K)

"The updates on strategy for return-to-home has been very helpful, and changes in visitation." (F)

"[I like] the emphasis on reunification." (K)

Others asked for more information about the process.

"Put together a training that talks more about possible allegations and what that process looks like." (F)

"More detail on the WACs. They are constantly changing so we should be sent links to have for our records." (F)

"One thing is for foster parents to have a better understanding of what to expect in court and planning meetings. Explain acronyms being used." (F)

"There should be more trainings on how the legal process works from start to finish, how to write a good caregiver report to court, the termination trial process, foster parents' legal rights, and what to do when those are violated." (F)

"Give real input about working with social workers. They are harder to work with than the kids." (F)

24 of the 763 caregivers who commented (3%) addressed cultural awareness and cultural issues.

WHO COMMENTED ON THIS TOPIC

Yes
3%

Foster Caregivers
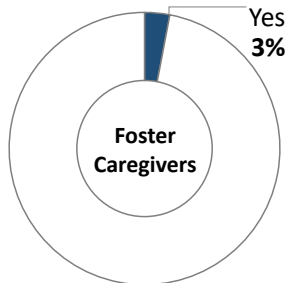
20 of 587 commented
13 – Satisfied
3 – Mixed or Neutral
4 – Needs work

Yes
2%

Kinship Caregivers
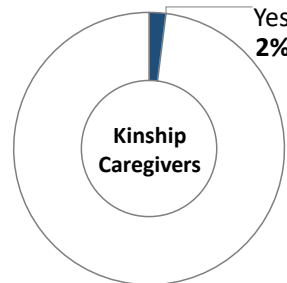
4 of 176 commented
3 – Satisfied
1 – Mixed or Neutral
0 – Needs work

KEY FINDINGS

Though relatively few caregivers commented on training about cultural awareness, over half of those who did (16 of 24) praised the training they attended. Caregivers who were dissatisfied made requests for more courses.

- Caregivers appreciated training that offered multicultural perspectives.
- Many praised classes that gave specific information, including training on Native American culture and African American hair care.
- Others were interested in additional content on cultural diversity and offered examples for future classes.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers enjoy learning about diverse cultures.

"[I like] the different techniques on how to deal with different children's multiple races and everything like that." (K)

"The classes on cultural differences were good." (F)

"[I like] learning the importance of the child's needs. Culture. Them being their own person." (K)

"I really enjoyed the one about talking to children about race. It was such a great class." (F)

Training about Native American culture was helpful.

"The training on the importance of American Indian culture really gave me insight to the history of Native children." (F)

"The Indian Act training was good." (F)

"A few of the trainings are great on fostering Native children and we have really appreciated them." (F)

They praised specific classes on hair care.

"I have two girls who are African American and I enjoyed the training about how to do their hair." (F)

"Ethnic haircare education was awesome." (F)

"[I like] the training on how to care for their hair." (F)

"To be honest with you, I'm probably the whitest woman you know and my kids are all mixed races so the training on how to take care of these kiddos of different races, (i.e., hair care and skincare) was so helpful." (F)

"Specialized content on things like caring for the hair and skin of bi-racial children was extremely helpful." (F)

"There was one training on African American hair and another one on a healthy body image that were both good trainings." (F)

Some asked for more training in a variety of areas.

"I feel like there should be more trainings about different cultures." (F)

"More thorough information on cultural differences. Seems it is addressed only on a superficial level." (F)

"Provide more resources for connecting Native children to their culture. My now adopted son is half-Native but little has been said or done for how we can foster that part of his identity." (F)

"They need to educate the non-Native caregivers what guardianship looks like." (F)

"I hope that there are more classes offered for things such as learning how to work with ethnic hair." (F)

33 of the 763 caregivers who commented (4%) mentioned the Caregiver Core Training.

WHO COMMENTED ON THIS TOPIC

Yes
4%

Foster Caregivers
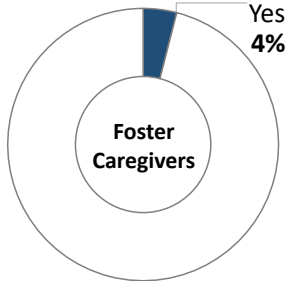
25 of 587 commented
20 – Satisfied
3 – Mixed or Neutral
2 – Needs work

5%

Kinship Caregivers
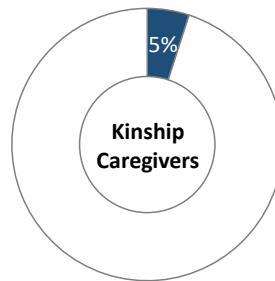
8 of 176 commented
7 – Satisfied
1 – Mixed or Neutral
0 – Needs work

KEY FINDINGS

Most caregivers (27 of 33) who commented on Caregiver Core Training were satisfied. This year, only about half as many kinship caregivers mentioned the Core training as they did last year, but comments continued to be largely positive. The majority of positive comments about Caregiver Core Training contained only the name of the training in response to the question "What about caregiver training has been helpful?"

- Most caregivers gave positive comments about Caregiver Core Training (CCT).
- Some recalled the Parent Resources for Information, Development, and Education (PRIDE) training, which was the precursor to CCT.
- A few described CCT as inadequate preparation.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Many praised Caregiver Core Training.

"I'm a social worker as a professional, and the Core was helpful in presenting different case scenarios." (F)

"The main one, like Caregiver Core Training, was great. It was helpful. Because it was a small group, we were really able to ask questions. It was a full week and intense. I think it was just great to get together with everyone." (K)

"Core training had a lot of good information." (F)

"We did the 24-hour Core class that gave a lot of insight on what a foster child might be going through and it was nice to read about different things to do to address those issues with the kids." (K)

"I think some of the Core training was helpful." (K)

"Initial Core training was really good. We discussed a lot of different scenarios with fostering that was very helpful." (F)

"I did it when it was PRIDE training, or Core training. It was helpful." (F)

"I had the Core training in Tacoma and it was good." (K)

"This was so many years ago (we have been licensed for 10 years), but I do remember that it was PRIDE back then and it was long but very good." (F)

"Core training was good." (K)

"Well, a long time ago they had the pre-PRIDE and then PRIDE classes. I believe that they've been changed and they're now called something else, but that was very helpful to me at the time that I got it and that was back in the early 2000s." (F)

"[I like] Caregiver Core Training." (F)

"The Core and first aid were helpful." (F)

"Apart from the PRIDE Training, the training is a complete disconnect from reality." (F)

"It was more like preparation in taking the kids into our home and the Core class all online." (K)
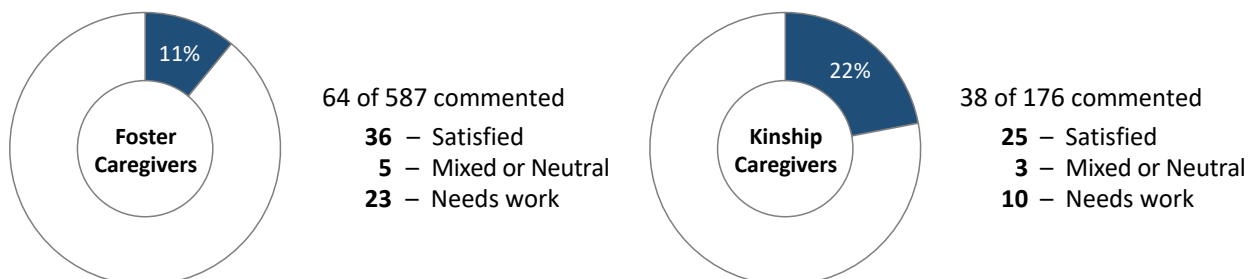
A few mentioned challenges with training.

"Core training is only as good as what you put into it. It's too easy to click through the screens without really learning anything." (F)

"The Core training does not adequately prepare foster parents for what they will be dealing with." (F)

"[There was] nothing in the foster parent orientation or Core that I didn't already know." (F)

102 of the 763 caregivers who commented (13%) described specific training topics they liked or wanted other than those covered in the previous pages.

WHO COMMENTED ON THIS TOPIC

Foster Caregivers — 11%

64 of 587 commented
36 – Satisfied
5 – Mixed or Neutral
23 – Needs work

Kinship Caregivers — 22%

38 of 176 commented
25 – Satisfied
3 – Mixed or Neutral
10 – Needs work

KEY FINDINGS

Over half (60%) of caregivers who commented on other specific training topics were satisfied. Foster caregivers were more likely than kinship caregivers to make suggestions for improvement.

- Caregivers named training topics that they enjoyed or found helpful, such as identity, social media, and LGBTQIA+.
- Many mentioned training on building relationships with parents. Some praised this content and others asked for training on the topic.
- Some requested training on specific topics, including kinship content and caring for young adults.
- Caregivers are interested in learning about emotional awareness and self-care.

Caregivers speak . . .

(K) = Kinship Caregiver   (F) = Foster Caregiver

Caregivers mentioned helpful training topics.

"I've learned a lot of medical things that I did not know." (K)

"I took one about children and their identity; helping them find their link to their identity." (F)

"[I like] Individualized Education Plan courses." (F)

"Nathan Lachine's LGBTQ+ training was great." (F)

"I just took LGBTQIA+ training and it was very helpful." (F)

"[I like] the training on social media." (F)

"I have learned a lot from the caregiver report course." (K)

"[I learned] how to talk to the schools about the kids." (F)

"The caregiver report individualized training was very helpful." (F)

"The training on CPR is very helpful." (F)

They appreciate and want more training on interacting with parents.

"Encouraging communication with bio parents was a really positive experience for our family." (F)

"I learned about parent's feelings and shame. I had never thought of it from that perspective." (K)

"[I like learning] how to interact with their bio family members." (K)

"Prepare caregivers for possible problems from bio parents." (K)

"More in-depth training on developing relationships with biological parents." (F)

"There needs to be training on building relationships with the bio family. Or training on how to build a bridge or set boundaries with the bio family." (F)

Some asked for training on specific topics.

"More specialized for high-risk population I work with." (F)

"Maybe more specific training to grandparents raising grandchildren." (K)

"I believe that offering more trainings specific to young adults would be helpful." (F)

"More on teens in transition." (F)

Caregivers want to gain emotional skills.

"Help teach the foster parents to deal with their stress." (K)

"I really wish there was a class on how to handle the grief that comes up when children leave the home." (F)

"[Talk about] the emotional side of foster parenting." (F)

"A lot of foster parents are completely unaware of the problems because of lack of self-care. It needs to be a priority and it's not talked about a lot." (F)

2022

Appendix

GettyImages.com/digitalskillet

Contents

Methodology

Population and Sampling

We completed interviews with 1,342 foster and kinship caregivers between September 22, 2021 and September 19, 2022. In August 2021, November 2021, February 2022, and May 2022, homes were selected at random from a list of all kinship and foster caregivers to meet the goal of 333 completed interviews per quarter. Excluded from the sample were caregivers who participated in the 2021 survey and those whose only placements were of fewer than four days. The sample is representative of all kinship and foster caregiver homes in Washington with a child in care within the six months preceding the quarterly sampling date.

Based on the 1,567 eligible homes selected to complete the survey, the *response rate* was 86%. Based on the 1,460 homes where we were able to speak with a caregiver, the *cooperation rate* was 92%. The 95% sampling error for the survey is ±2.4 percentage points.

Mode of Data Collection

To maximize opportunities for each sampled home to participate, the survey was available over the phone, online, or, if requested, as a printed copy sent by mail. All caregivers with email addresses were sent an email with a link to the online survey through Survey Monkey. Caregivers who did not complete the survey online were called and interviewed over the phone. In 2022, we completed 832 interviews by telephone (62%) and 510 online (38%); no caregivers completed the survey in hard copy.

Because respondents choose whether to complete the survey online or by telephone, we examined possible effects of mode of data collection on the responses. This is important for two reasons. First the characteristics of respondents who choose to complete the survey online might differ from those who complete it over the phone. Second, the survey research literature demonstrates that telephone respondents are more likely to provide socially desirable responses on sensitive items; this may affect trends in positive responses over time.

To address this, we tested for the effect of survey mode on changes in positive responses to evaluative questions between 2021 and 2022. We identified one item ("Are you treated like part of the team") on which the gap between online and telephone responses decreased significantly in 2022 relative to 2021 for foster caregivers (no significant differences were identified for kinship caregivers). In 2021, positive online responses were about 20 percentage points lower than positive telephone responses; in 2022, this gap had narrowed to about 10 percentage points. This 10-point change (20-10=10) is statistically significant at $p < .05$.

This change suggests that the gap between online and telephone respondents narrowed between 2021 and 2022, a weakening of the mode effect on this item. Mode effects for other items were not statistically significant.

Caregiver Groups

Since 2020, interviewed caregivers have been grouped according to the nature of their relationship to the child, rather than licensing status exclusively. Caregivers were classified as either foster homes or kinship homes. Because recently interviewed caregivers were removed from the sample (all of whom were licensed foster parents prior to adding kinship caregivers to the survey in 2019), the number of kinship caregivers in the survey was somewhat high in 2019 (39% foster caregivers and 61% kinship caregivers). As expected, these numbers began to equalize as previously interviewed kinship caregivers were removed from the sample. The 2022 survey consisted of 53% foster caregivers (N=710) and 47% kinship caregivers (N=632).

To classify caregivers into as foster or kinship caregivers, we cross-referenced DCYF-provided data fields (*hometype* and *relativekinflag*) from the FamLink database with caregiver-provided survey fields. This combination of information provided further detail regarding prior relationships with the child in placement, as well as caregiver licensing status. In the case of any inconsistencies in the response classifications, we examined open-ended responses for additional context.

Caregivers were classified as foster if they met one of the following sets of conditions:

- **FamLink *hometype* and *relativekinflag* both indicated foster caregiving**: In FamLink, *hometype* was coded as "foster home" or "private agency foster home" or "tribal licensed foster home" and *relativekinflag* was coded as "unrelated/non-kin placement resource"
- **FamLink *relativekinflag* indicated kinship, but *hometype* and self-reported fields indicated foster caregiving**: In FamLink, *relativekinflag* was coded as "relative/unlic placement resource" or "relative placement resource" or "unlicensed placement resource" and *hometype* was coded as "foster home" or "private agency foster home" or "tribal licensed foster home" and respondent answered on the survey that the child "had no relationship with your family before placement"
- **FamLink *hometype* indicated kinship, but *relativekinflag* and self-reported fields indicated foster caregiving**: In FamLink, *hometype* was coded as "not licensed FH" and *relativekinflag* was coded as "unrelated/non-kin placement resource" or "unlicensed placement resource" and respondent answered on the survey that the child "had no relationship with your family before placement"

Caregivers were classified as kinship if they met one of the following sets of conditions:

- **FamLink *hometype* and *relativekinflag* both indicated kinship caregiving**: In FamLink, *hometype* was coded as "not lic FH" and *relativekinflag* was coded as "relative/unlic placement resource" or "relative placement resource" or "unlicensed placement resource"
- **FamLink *relativekinflag* indicated foster, but *hometype* indicated kinship caregiving**: In FamLink, *relativekinflag* was coded as "unrelated/non-kin placement resource" and *hometype* was coded as "not lic FH"
- **FamLink *hometype* indicated foster, but *relativekinflag* and self-reported fields indicated kinship caregiving**: In FamLink, *hometype* was coded as "foster home" or "private agency foster home" or "tribal licensed foster home" and *relativekinflag* was coded as "relative/unlic placement resource" or "relative placement resource" or "unlicensed placement resource" and respondent answered on the survey that they were related to or had previous relationship with the child

Cases that do not meet any of these sets of conditions were flagged for manual review and were assessed based on all available data, including responses to open-ended questions. In 2022, three cases were flagged for review; two were classified as foster and one as kinship.

Statistical Significance Testing: Comparisons by Caregiver Group and Survey Year

For the 11 structured questions, statistical significance tests were calculated to assess differences in the percent of positive responses (More than/Somewhat Adequate or Always/Usually) between foster and kinship caregivers and between the 2021 and 2022 survey years. The criterion for statistical significance was set at $p < .05$. Differences were assessed using the chi-squared test of independence.

Rounding

Results described in the narrative report are rounded to the nearest whole number. Due to the effects of rounding, some percentages reported as whole numbers may not add to 100%.

2022 Caregiver Demographics

		All Caregivers N=1,342		Foster Caregivers N=710		Kinship Caregivers N=632	
		#	**%**	**#**	**%**	**#**	**%**
Household Income	Under $10,000	17	1.30%	3	0.43%	14	2.25%
	$10,000 to $25,000	101	7.70%	16	2.32%	85	13.69%
	$25,000 to $50,000	224	17.07%	80	11.58%	144	23.19%
	$50,000 to $75,000	252	19.21%	138	19.97%	114	18.36%
	$75,000 to $100,000	231	17.61%	143	20.69%	88	14.17%
	$100,000 to $150,000	233	17.76%	156	22.58%	77	12.40%
	More than $150,000	163	12.42%	111	16.06%	52	8.37%
	Don't know/refused	91	6.94%	44	6.37%	47	7.57%
	Total N for %	1312		691		621	
		#	**%**	**#**	**%**	**#**	**%**
Primary Caregiver Race & Ethnicity (BRAAM categories are mutually exclusive)	African American	123	9.17%	52	7.32%	71	11.23%
	Asian/PI	37	2.76%	19	2.68%	18	2.85%
	Hispanic	113	8.42 %	47	6.62%	66	10.44%
	Native American	55	4.10%	20	2.82%	35	5.54%
	White	992	73.92%	564	79.44%	428	67.72%
	Unknown	22	1.64%	8	1.13%	14	2.22%
	Total N for %	1342		710		632	
		#	**%**	**#**	**%**	**#**	**%**
Primary Caregiver Age	Age 15-19	1	0.07%	0	0.00%	1	0.16%
	Age 20-29	67	5.00%	27	7.99%	40	6.35%
	Age 30-39	281	20.99%	178	41.76%	103	16.35%
	Age 40-49	401	29.95%	249	28.62%	152	24.13%
	Age 50-59	341	25.47%	154	14.31%	187	29.68%
	Age 60-69	190	14.19%	78	5.16%	112	17.78%
	Age 70-79	50	3.73%	19	2.00%	31	4.92%
	Age 80-89	8	0.60%	4	0.17%	4	0.63%
	Total N for %	1339		709		630	
		#	**%**	**#**	**%**	**#**	**%**
Primary Caregiver Gender	Male	166	12.37%	83	11.69%	83	13.13%
	Female	1172	87.33%	625	88.03%	547	86.55%
	Unknown	4	0.30%	2	0.28%	2	0.32%
	Total N for %	1342		710		632	
		#	**%**	**#**	**%**	**#**	**%**
DCYF Region	Region 1	215	16.02%	113	15.92%	102	16.14%
	Region 2	173	12.89%	79	11.13%	94	14.87%
	Region 3	208	15.50%	99	13.94%	109	17.25%
	Region 4	198	14.75%	106	14.93%	92	14.56%
	Region 5	261	19.45%	155	21.83%	106	16.77%
	Region 6	258	19.23%	158	22.25%	100	15.82%
	Statewide/No Region	29	2.16%	0	0.00%	29	4.59%
	Total N for %	1342		710		632	

Quantitative Summary: Responses to Structured Questions

The survey included 11 structured questions. Two were originally designed to inform the Braam Settlement and Exit Agreement (a previous version of one of the "Quality and Helpfulness" questions and the "Adequacy of Training" question). The remaining questions were designed to support strategic planning for caregiver support.

QUALITY AND HELPFULNESS

Do you feel personally supported by DCYF staff?
Foster 66%
Kinship 66%

Did DCYF staff offer you resources or ask if you needed support?
Foster 70%
75%

How helpful was the support from the Alliance Caregiver Retention Education Support (CaRES) Program?
Foster 82%
85%

CASEWORKERS AND OTHER STAFF

Do the social workers listen to your input?†
Foster 79%
Kinship 77%

Are you treated like a part of the team?†
73%
69%

Are you included in meetings about the child in your care? ††
83%
80%

ACCESS AND PROCESS

Can you get help when you ask for it?*
Foster 78%
Kinship 73%

INFORMATION

Do you get adequate information about the needs of the children placed with you, such as medical, behavioral, developmental and educational needs?*
Foster 71%
Kinship 84%

CAREGIVER LICENSING

Did licensing staff treat you with respect?
Foster 94%
Kinship 93%

Were licensing or home study staff knowledgeable about the process?
94%
93%

ADEQUACY OF TRAINING

Overall, thinking about ALL the training you have had in the last three years, how adequately has it prepared you to care for the basic needs of foster children placed in your home?[1]
Foster 87%
Kinship 91%

[1] Percentage shown is the proportion who answered "More than adequate" or "Somewhat adequate." For all other questions, percentage shown is the proportion who answered "Always/almost Always" or "Usually."
†Kinship caregivers gave statistically significantly lower ratings in 2022 than in 2021, $p < .05$.
††Foster caregivers gave statistically significantly higher ratings in 2022 than in 2021, $p < .05$.
*Difference between foster and kinship caregivers is statistically significant, $p < .05$.

Narrative Comments Summary – Support: All Caregivers

1,342 Respondents (1,256 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Total		Satisfied		Mixed or Neutral		Needs Work	
		#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]
Quality and Helpfulness		398	32%	241	19%	19	2%	138	11%
DCYF Support	QS	178	14%	84	7%	30	2%	64	5%
Nothing	QN	184	15%	106	8%			78	6%
Specific Agency/Area/Office Support	QP	114	9%	90	7%	9	1%	15	1%
Caseworkers and Other Staff		1,062	85%	404	32%	270	21%	388	31%
Caseworker Support	SS	509	41%	297	24%	87	7%	125	10%
Specific Caseworker	SW	28	2%						
Caseworker Courtesy and Respect	SC	146	12%	58	5%	14	1%	74	6%
Caseworkers Listen/Understand	SL	227	18%	135	11%	10	1%	82	7%
Caseworkers Inclusiveness	SI	100	8%	24	2%	8	1%	68	5%
Caseworker Communication	SOC	226	18%	62	5%	18	1%	146	12%
Caseworker Responsiveness	SOR	366	29%	169	13%	40	3%	157	13%
Other Comments About Caseworkers	SO	406	32%	122	10%	38	3%	246	20%
Need More Caseworkers	SN	97	8%					97	8%
Foster Care Licensors	SF	54	4%	32	3%	2	0%	20	2%
Access and Process		674	54%	213	17%	105	8%	356	28%
Phone/Staff Access	AP	249	20%	172	14%	11	1%	66	5%
Consistency of Contact	AR	168	13%	117	9%	16	1%	35	3%
General Processes	PR	157	13%	6	0%	8	1%	143	11%
Specific Processes	PS	242	19%	12	1%	6	1%	224	18%
Paperwork Processes	PP	32	3%	4	0%	3	0%	25	2%
Coordination	CO	66	5%	8	1%	0	0%	58	5%
Information	IN	488	39%	167	13%	73	6%	248	20%
Resources		425	34%	193	15%	53	4%	179	14%
Medical, Dental, Mental Health	RM	85	7%	47	4%	8	1%	30	2%
Respite Care	RR	46	4%	9	1%	4	0%	33	3%
Transportation	RT	46	4%	23	2%	4	0%	19	2%
Child Care	RC	45	4%	18	1%	2	0%	25	2%
Financial Matters	RF	66	5%	14	1%	6	0%	46	4%
Other Resources (includes training)	RO	178	14%	94	7%	12	1%	72	6%
Other Sources of Support	OS	119	9%	69	5%	13	1%	37	3%
Other									
Not about support	O	37	3%	3	0%	23	2%	11	1%
Don't know	DK	88	7%			88	7%		

[1] Major themes (in blue rows) are rollups of the subthemes listed below. They are unduplicated - not the total of the numbers below, i.e., a person who made "Good Work" comments in both "Child Care" and "Respite Care" is counted only once in the "Resources" row. A person who has a "Good Work" comment in the "Child Care" row and "Needs Work" in the "Respite Care" row would be counted as a "Mixed" comment in the "Resources" row.

[2] All # columns show how many persons made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in that theme row. A person with both "Good Work" and "Needs Work" comments on the same theme is counted in the "Mixed" column.

[3] Respondents who commented on this theme as a percentage of the total number of respondents who made comments in response to support questions.

Narrative Comments Summary – Support: Foster Caregivers

710 Respondents (655 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Total		Good Work		Mixed or Neutral		Needs Work	
		#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]
Quality and Helpfulness		195	30%	133	20%	7	1%	55	8%
Overall Support	QS	85	13%	36	5%	21	3%	28	4%
Nothing	QN	72	11%	43	7%			29	4%
Specific Agency/Area/Office Support	QP	92	14%	75	11%	6	1%	11	2%
Caseworkers and Other Staff		557	85%	205	31%	157	24%	195	30%
Caseworker Support	SS	253	39%	139	21%	46	7%	68	10%
Specific Caseworker	SW	9	1%						
Caseworker Courtesy and Respect	SC	87	13%	36	5%	7	1%	49	7%
Caseworkers Listen/Understand	SL	128	20%	62	12%	5	1%	44	7%
Caseworkers Inclusiveness	SI	76	12%	25	3%	6	1%	52	8%
Caseworker Communication	SOC	123	19%	35	5%	11	2%	76	12%
Caseworker Responsiveness	SOR	192	29%	100	14%	22	3%	76	12%
Other Comments About Caseworkers	SO	217	33%	55	9%	25	4%	130	20%
Need More Caseworkers	SN	56	9%					56	9%
Foster Care Licensors	SF	32	5%	26	3%	1	0%	9	1%
Access and Process		374	57%	85	19%	53	8%	197	30%
Phone/Staff Access	AP	145	22%	69	16%	9	1%	34	5%
Consistency of Contact	AR	87	13%	44	9%	9	1%	19	3%
General Processes	PR	86	13%	2	0%	4	1%	81	12%
Specific Processes	PS	131	21%	8	1%	1	0%	121	18%
Paperwork Processes	PP	15	2%	0	0%	2	0%	11	2%
Coordination	CO	31	5%	9	1%	0	0%	25	4%
Information	IN	273	42%	80	12%	49	7%	147	22%
Resources		219	33%	81	13%	26	4%	105	16%
Medical, Dental, Mental Health	RM	48	7%	11	2%	3	0%	18	3%
Respite Care	RR	40	6%	4	1%	4	1%	28	4%
Transportation	RT	32	5%	1	0%	2	0%	15	2%
Child Care	RC	18	3%	1	0%	1	0%	11	2%
Financial Matters	RF	20	3%	6	1%	3	0%	16	2%
Other Resources (includes training)	RO	60	10%	37	7%	4	1%	30	5%
Other Sources of Support	OS	68	10%	50	9%	10	2%	27	4%
Other									
Not about support	O	21	3%	4	1%	12	2%	9	1%
Don't know	DK	30	5%			30	5%		

[1] Major themes (in blue rows) are rollups of the subthemes listed below. They are unduplicated - not the total of the numbers below, i.e., a person who made "Good Work" comments in both "Child Care" and "Respite Care" is counted only once in the "Resources" row. A person who has a "Good Work" comment in the "Child Care" row and "Needs Work" in the "Respite Care" row would be counted as a "Mixed" comment in the "Resources" row.

[2] All # columns show how many persons made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in that theme row. A person with both "Good Work" and "Needs Work" comments on the same theme is counted in the "Mixed" column.

[3] Respondents who commented on this theme as a percentage of the total number of respondents who made comments in response to support questions.

Narrative Comments Summary – Support: Kinship Caregivers

632 Respondents (601 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Total		Good Work		Mixed or Neutral		Needs Work	
		#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]
Quality and Helpfulness		203	34%	108	18%	12	2%	83	14%
Overall Support	QS	93	15%	48	8%	9	1%	36	6%
Nothing	QN	112	19%	63	10%			49	8%
Specific Agency/Area/Office Support	QP	22	4%	15	2%	3	0%	4	1%
Caseworkers and Other Staff		505	84%	199	33%	113	19%	193	32%
Caseworker Support	SS	256	43%	158	26%	41	7%	57	9%
Specific Caseworker	SW	19	3%						
Caseworker Courtesy and Respect	SC	59	10%	27	4%	7	1%	25	4%
Caseworkers Listen/Understand	SL	99	16%	56	9%	5	1%	38	6%
Caseworkers Inclusiveness	SI	24	4%	6	1%	2	0%	16	3%
Caseworker Communication	SOC	103	17%	26	4%	7	1%	70	12%
Caseworker Responsiveness	SOR	174	29%	75	12%	18	3%	81	13%
Other Comments About Caseworkers	SO	189	31%	60	10%	13	2%	116	19%
Need More Caseworkers	SN	41	7%					41	7%
Foster Care Licensors	SF	22	4%	10	2%	1	0%	11	2%
Access and Process		300	57%	89	15%	52	9%	159	26%
Phone/Staff Access	AP	104	17%	70	12%	2	0%	32	5%
Consistency of Contact	AR	81	13%	58	10%	7	1%	16	3%
General Processes	PR	71	12%	5	1%	4	1%	62	10%
Specific Processes	PS	111	18%	3	0%	5	1%	103	17%
Paperwork Processes	PP	17	3%	2	0%	1	0%	14	2%
Coordination	CO	35	6%	2	0%	0	0%	33	5%
Information	IN	215	36%	90	15%	24	4%	101	17%
Resources		206	34%	105	17%	27	4%	74	12%
Medical, Dental, Mental Health	RM	37	6%	20	3%	5	1%	12	2%
Respite Care	RR	6	1%	1	0%	0	0%	5	1%
Transportation	RT	14	2%	8	1%	2	0%	4	1%
Child Care	RC	27	4%	12	2%	1	0%	14	2%
Financial Matters	RF	46	8%	13	2%	3	0%	30	5%
Other Resources (includes training)	RO	112	19%	62	10%	8	1%	42	7%
Other Sources of Support	OS	51	8%	38	6%	3	0%	10	2%
Other									
Not about support	O	16	3%	3	0%	11	2%	2	0%
Don't know	DK	58	10%			58	10%		

[1] Major themes (in blue rows) are rollups of the subthemes listed below. They are unduplicated - not the total of the numbers below; i.e., a person who made "Good Work" comments in both "Child Care" and "Respite Care" is counted only once in the "Resources" row. A person who has a "Good Work" comment in the "Child Care" row and "Needs Work" in the "Respite Care" row would be counted as a "Mixed" comment in the "Resources" row.

[2] All # columns show how many persons made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in that theme row. A person with both "Good Work" and "Needs Work" comments on the same theme is counted in the "Mixed" column.

[3] Respondents who commented on this theme as a percentage of the total number of respondents who made comments in response to support questions.

Narrative Comments Summary – Training: All Caregivers

854 Respondents (763 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Total		Good Work		Mixed or Neutral		Needs Work	
		#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]
Training Quality and Helpfulness		**341**	**45%**	**248**	**33%**	**36**	**5%**	**57**	**7%**
Helpfulness of training	TH	122	16%	92	12%	15	2%	15	1%
Nothing	TN	82	11%	64	8%			18	2%
Specific Program or Agency	TP	58	8%	44	6%	13	2%	1	0%
Taking Care of Foster Children	TG-C	157	21%	108	14%	12	2%	37	3%
Access and Information		**141**	**18%**	**28**	**4%**	**17**	**2%**	**96**	**13%**
Training Location and Schedule	TLS	44	6%	2	0%	1	0%	41	3%
Other Comments About Access	TA-O	28	4%	6	1%	8	1%	14	9%
Child Care During Training	TA-C	33	4%	2	0%	3	0%	28	2%
Information	TI	18	2%	1	0%	1	0%	16	3%
Accessing Resources	TG-R	40	5%	20	3%	4	1%	16	3%
Trainers and Methods		**475**	**62%**	**168**	**22%**	**114**	**15%**	**193**	**25%**
Trainers	TR	54	7%	31	4%	4	1%	19	3%
Specific Trainer	TT	5	1%						
Approaches to Training	TG-A	135	18%	43	6%	26	3%	66	6%
Online Training	TF-N	156	20%	73	10%	23	3%	60	8%
Support Groups	TF-S	6	1%	4	1%	1	0%	1	0%
Building Community	TV	87	11%	54	7%	3	0%	30	2%
Training Process	TRP	100	13%	21	3%	10	1%	69	8%
Training Content	TRC	199	26%	76	10%	20	3%	103	11%
Specific Training Topics		**436**	**57%**	**198**	**39%**	**64**	**8%**	**74**	**10%**
Disorders/Issues	TS-D	204	27%	147	20%	25	3%	29	5%
Child Behavior and Development	TS-B	153	20%	122	14%	14	2%	31	5%
Navigating Foster Care System	TS-F	97	13%	67	7%	7	1%	33	4%
Cultural Awareness/Issues	TS-C	24	3%	9	2%	4	1%	4	1%
Caregiver Core Training/PRIDE	TS-P	33	4%	47	4%	4	1%	2	1%
Other Specific Trainings	TS-O	75	10%	38	5%	4	1%	31	5%
Health and Safety	TS-H	29	4%	31	3%	4	1%	2	0%
Other									
Other General Training Comments	TG-O	1	0%	1	0%	1	0%	1	0%
Response not about training	TO	42	6%	2	1%	21	3%	19	3%
Training for Unlicensed Caregivers	TUC	0	0%					3	0%
Don't know	TDK	71	10%			79	10%		

[1] Major themes (in blue rows) are rollups of the subthemes listed below. They are unduplicated - not the total of the numbers below, i.e. a person who made "Good Work" comments in both "Child Care During Training" and "Training Location" is counted only once in the "Access and Format" row. A person who has a "Satisfied" comment in the "Child Care During Training" row and "Needs Work" in the "Training Location" row would be counted as a "Mixed" response in the "Access and Format" row.

[2] All # columns show how many persons made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in that theme row. A person with both "Good Work" and "Needs Work" comments on the same theme is counted in the "Mixed" column.

[3] Respondents who commented on this theme as a percentage of the total number of respondents who made comments in response to training questions.

Narrative Comments Summary – Training: Foster Caregivers

652 Respondents (587 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Total #[2]	Total % of All[3]	Good Work #[2]	Good Work % of All[3]	Mixed or Neutral #[2]	Mixed or Neutral % of All[3]	Needs Work #[2]	Needs Work % of All[3]
Training Quality and Helpfulness		**266**	**45%**	**187**	**32%**	**31**	**5%**	**48**	**8%**
Helpfulness of training	TH	90	15%	56	11%	13	2%	11	2%
Nothing	TN	62	11%	46	8%			16	3%
Specific Program or Agency	TP	51	9%	41	7%	10	2%	0	0%
Taking Care of Foster Children	TG-C	124	21%	80	14%	11	2%	33	6%
Access and Information		**118**	**20%**	**22**	**4%**	**13**	**2%**	**83**	**14%**
Training Location and Schedule	TA-L	38	6%	1	0%	1	0%	36	6%
Other Comments About Access	TA-O	23	4%	5	1%	6	1%	12	2%
Child Care During Training	TA-C	31	5%	2	0%	3	1%	26	4%
Information	TI	13	2%	1	0%	0	0%	12	2%
Accessing Resources	TG-R	33	6%	15	3%	4	1%	14	2%
Trainers and Methods		**383**	**65%**	**130**	**22%**	**91**	**16%**	**162**	**28%**
Trainers	TR	44	7%	27	5%	2	0%	15	3%
Specific Trainer	TT	5	1%						
Approaches to Training	TG-A	111	19%	32	5%	21	4%	58	10%
Online Training	TF-N	123	21%	56	10%	18	3%	49	8%
Support Groups	TF-S	5	1%	3	1%	1	0%	1	0%
Building Community	TV	75	13%	46	8%	3	1%	26	4%
Training Process	TRP	81	14%	16	3%	8	1%	57	10%
Training Content	TRC	162	28%	57	10%	17	3%	88	15%
Specific Training Topics		**328**	**56%**	**214**	**36%**	**52**	**9%**	**62**	**11%**
Trauma and Behavioral Health	TS-D	174	30%	124	21%	25	4%	25	4%
Child Behavior and Development	TS-B	121	21%	81	14%	13	2%	27	5%
Navigating Foster Care System	TS-F	69	12%	34	6%	7	1%	28	5%
Cultural Awareness/Issues	TS-C	20	3%	13	2%	3	1%	4	1%
Caregiver Core Training/PRIDE	TS-P	25	4%	20	3%	3	1%	2	0%
Other Specific Trainings	TS-O	53	9%	28	5%	2	0%	23	4%
Health and Safety	TS-H	12	2%	9	2%	3	1%	0	0%
Other									
Other General Training Comments	TG-O	1	0%	0	0%	0	0%	1	0%
Response not about training	TO	31	5%	4	1%	11	2%	16	3%
Training for Unlicensed Caregivers	TUC	0	0%					0	0%
Don't know	TDK	50	9%			50	9%		

[1] Major themes (in blue rows) are rollups of the subthemes listed below. They are unduplicated - not the total of the numbers below, i.e. a person who made "Good Work" comments in both "Child Care During Training" and "Training Location" is counted only once in the "Access and Format" row. A person who has a "Satisfied" comment in the "Child Care During Training" row and "Needs Work" in the "Training Location" row would be counted as a "Mixed" response in the "Access and Format" row.

[2] All # columns show how many persons made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in that theme row. A person with both "Good Work" and "Needs Work" comments on the same theme is counted in the "Mixed" column.

[3] Respondents who commented on this theme as a percentage of the total number of respondents who made comments in response to training questions.

Narrative Comments Summary – Training: Kinship Caregivers

202 Respondents (176 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Total		Good Work		Mixed or Neutral		Needs Work	
		#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]	#[2]	% of All[3]
Training Quality and Helpfulness		**75**	**43%**	**61**	**35%**	**5**	**3%**	**9**	**5%**
Helpfulness of training	TH	32	18%	26	15%	2	1%	4	2%
Nothing	TN	20	11%	18	10%			2	1%
Specific Program or Agency	TP	7	4%	3	2%	3	2%	1	1%
Taking Care of Foster Children	TG-C	33	19%	28	16%	1	1%	4	2%
Access and Information		**23**	**13%**	**6**	**3%**	**4**	**2%**	**13**	**7%**
Information About Training	TI	6	3%	1	1%	0	0%	5	3%
Training Location and Schedule	TA-L	5	3%	1	1%	2	1%	2	1%
Other Comments About Access	TA-O	2	1%	0	1%	0	0%	2	1%
Child Care During Training	TA-C	5	3%	0	0%	1	1%	4	2%
Accessing Resources	TG-R	7	4%	5	3%	0	0%	2	1%
Trainers and Methods		**92**	**52%**	**38**	**22%**	**23**	**13%**	**31**	**18%**
Trainers	TR	10	6%	4	2%	2	1%	4	2%
Specific Trainer	TT	0	0%						
Approaches to Training	TG-A	24	14%	11	6%	5	3%	8	5%
Online Training	TF-N	33	19%	17	10%	5	3%	11	6%
Support Groups	TF-S	1	1%	0	1%	0	0%	0	0%
Building Community	TV	12	7%	8	5%	0	0%	4	2%
Training Process	TRP	19	11%	5	3%	2	1%	12	7%
Training Content	TRC	37	21%	19	11%	3	2%	15	9%
Specific Training Topics		**108**	**61%**	**84**	**48%**	**12**	**7%**	**12**	**7%**
Trauma and Behavioral Health	TS-D	30	17%	26	15%	0	0%	4	2%
Child Behavior and Development	TS-B	32	18%	27	15%	1	1%	4	2%
Navigating Foster Care System	TS-F	28	16%	23	13%	0	0%	5	3%
Cultural Awareness/Issues	TS-C	4	2%	3	2%	1	1%	0	0%
Caregiver Core Training/PRIDE	TS-P	8	5%	7	4%	1	1%	0	0%
Other Specific Trainings	TS-O	22	13%	12	7%	2	1%	8	5%
Health and Safety	TS-H	17	10%	14	8%	1	1%	2	1%
Other		**44**	**25%**	**1**	**1%**	**37**	**21%**	**6**	**3%**
Other General Training Comments	TG-O	1	1%	0	0%	1	1%	0	0%
Response not about training	TO	14	8%	1	1%	10	6%	3	2%
Training for Unlicensed Caregivers	TUC	3	2%					3	2%
Don't know	TDK	29	16%			29	16%		

[1] Major themes (in blue rows) are rollups of the subthemes listed below. They are unduplicated - not the total of the numbers below, i.e. a person who made "Good Work" comments in both "Child Care During Training" and "Training Location" is counted only once in the "Access and Format" row. A person who has a "Satisfied" comment in the "Child Care During Training" row and "Needs Work" in the "Training Location" row would be counted as a "Mixed" response in the "Access and Format" row.

[2] All # columns show how many persons made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in that theme row. A person with both "Good Work" and "Needs Work" comments on the same theme is counted in the "Mixed" column.

[3] Respondents who commented on this theme as a percentage of the total number of respondents who made comments in response to training questions.

Narrative Comments Summary – Kinship Caregiver Licensing

129 Kinship Caregivers Currently Licensed (124 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Why did you decide to become licensed?	
		#	% of All[2]
Placement		**78**	**63%**
Facilitate Adoption	A	5	4%
Facilitate Placement	P	72	58%
Mandated	M	9	7%
Helping Children/General Interest		**34**	**28%**
Helping Children	H	20	16%
General Interest	GI	17	14%
Resources		**19**	**15%**
Financial Matters	RF	8	7%
Other Resources	RO	11	9%
Other			
Other	O	5	4%
Don't Know	DK	0	0%

469 Kinship Caregivers Not Currently Licensed (456 made comments)

MAJOR THEMES AND SUBTHEMES[1]		Is there a reason why you haven't chosen to become licensed?	
		#	% of All[3]
Application		**44**	**10%**
Applied/In-progress	AP	31	7%
Denied	D	2	0%
Qualification Issues	Q	11	2%
Placement		**228**	**50%**
Relative	R	179	39%
Guardian	G	9	2%
Adoption	A	29	6%
Short-term	S	26	6%
Process/Requirements		**68**	**15%**
General Processes	PR	63	14%
Training Requirements	PT	3	1%
Health/Safety Requirements	PH	3	1%
Information		**32**	**7%**
Information	IN	32	7%
Personal Reasons/General Disinterest		**177**	**39%**
Personal Reasons	PP	50	11%
General Disinterest	GD	132	29%
Other			
Other	O	48	11%
Don't Know	DK	20	4%

[1] Major themes (in blue rows) are unduplicated rollups of the subthemes below. A person who identified multiple subthemes is only counted once in the theme total. Subthemes were defined in advance and not all were used.

[2] Respondents who commented on this theme as a percentage of total respondents who made comments about why they were licensed.

[3] Respondents who commented on this theme as a percentage of total respondents who made comments about why they were not licensed.

Response Glossary – Caregiver Support

Question: What do all the partners in Washington's child welfare system, including DCYF, private agencies, and your caseworkers and licensors do well to support you?

Question: What could all the partners in Washington's child welfare system, including DCYF, private agencies, and your caseworkers and licensors do better to support you?

Response Category	Description
QUALITY/ HELPFULNESS	
QS – Overall Support	DCYF has supported/not supported me and my family; good/bad service overall; grateful for help, appreciative (or not); like/don't like DCYF/everything. They help/don't help. They do/don't provide good services. General statements about DCYF/contractors "They are there when I need them" (SS if it appears to be talking about caseworker). Comments comparing private agency and DCYF, where DCYF experience is negative and private agency experience is positive (e.g., "Private agency is good but DCYF is awful") should be coded QP_P and QS_E.
QP – Specific Agency/Office Support	Named specific DCYF program/location/office that was supportive/not supportive; mentioned support/non-support of "private agency" (named or not).
QN – Nothing	"Nothing," "Can't think of anything," etc. (Negative, if about what has been supportive; Positive, if about what needs to be done better.) Check for context, some might be a better fit in DK.
CASEWORKERS AND OTHER STAFF	
SS – Caseworker Support	Caseworkers have supported/not supported me and my family (includes emotional support); good/bad service overall; grateful for their help, appreciative (or not); like/don't like caseworkers and the work they do. Caseworkers help/don't help or ask about needs. Caseworkers do/don't provide good services. *Child's best interest.*
SC – Caseworker Courtesy/Respect	Compliments/complaints regarding caseworker courtesy, respect, helpful attitude (*tries* to help), sensitivity, kindness, friendliness, niceness, caring (about both foster children and parents), compassion.
SL – Caseworker Listens/Understands	Caseworker does/doesn't listen; is – or isn't – attentive; does/doesn't understand what caregivers say, and what they (and the children) need. "They listen to our input" (only code SI as well for cases where caseworker is actively seeking input)
SI – Caseworker Inclusiveness	Caseworker gets input from caregivers; lets them help make decisions and plans; collaborates with them; invites them to participate in meetings (or fails to do these things). Use this code along with IN if a comment addresses a need for inclusion <u>and</u> information.
SOC – Caseworker General Communication	Caseworkers are good/bad at general communication (if they don't specify IN or SL). Communication mentioned without other context.
SOR – Caseworker Responsiveness	Like/don't like caseworkers' follow-through (includes "keeps promises"); responsiveness; timeliness (Does NOT include timely response to phone, text, email, which is AP. Comments about timely communication are coded SOC). Responds to requests. Solves problems. Finds needed resources. "Gets back to me."
SO – Other Caseworker Comments	Like/don't like caseworkers' commitment; professionalism; customer service; showing up for scheduled appointments; fairness; flexibility; knowledge, qualities/abilities (not covered in other codes). Specific supportive or non-supportive actions not covered in other codes, such as providing feedback/advice/direction/guidance. Caseworkers are/are not knowledgeable, honest, well-trained. "Always there/available" if context not clear (AP if in context of reaching caseworker).
SW – Specific Caseworker	Named specific caseworker. Can be combined with other caseworker (S codes) if there is additional context about what the caseworker did/didn't do well

Response Category	Description
SN – Need More Caseworkers	More caseworkers are needed to serve caregivers; workload too heavy; caseworkers too busy; caseloads too high/need smaller caseloads; turnover a problem. Does not apply if respondent just says they have had lots of caseworkers, without indicating any of the above reasons.
SF – Foster Care Licensor Support	Compliments/complaints about caregivers' experience with foster care licensors. (Comments specific to the licensing *process* are coded PS.)
ACCESS	
AP – Phone/Staff Access	Able/unable to reach caseworkers by phone/voicemail/e-mail/website/text. Caseworkers do/don't return calls and messages (or if they do/don't <u>return</u> calls and messages in a timely manner); caseworkers are available/unavailable (for contact; otherwise SO); it's easy/hard to reach caseworkers.
AR – Consistency of Contact	Caseworkers are/aren't <u>initiating</u> regular or sufficient contact via home visits, phone calls, etc., or if contact is limited (i.e. "regular" doesn't mean consistently poor).
ACCESS AND PROCESS	
PR – General Processes	Compliments or complaints about the system–efficiency, bureaucracy, continuity, consistency, errors, rules, time it takes to get services (overall, mentions of "the case" if there are no indicators of a specific service). System should care more about children and less about parent rights. "Better funding" only if context indicates it's for systems rather than caregivers.
PS – Specific Processes	Likes or dislikes/wants a specific process/way of doing things, time it takes to get specific services. Includes the time it takes to terminate rights and adopt. Change in caseworkers without indicating turnover/workload (SN). Caseworker after-hours availability.
PP – Paperwork Processes	Likes or dislikes/wants paperwork processes (general or specific). Paperwork lost.
COORDINATION	
CO – Coordination	Coordination of services for caregivers, inside or outside of DCYF (includes coordination between caregivers and biological families); communication to accomplish effective coordination. Includes caseworkers should communicate better with each other and other agencies. "One hand doesn't know what the other is doing." Inconsistencies between caseworkers or offices.
INFORMATION	
IN – Information	Get/don't get useful information from caseworkers about foster child; foster system; available resources; meeting times/court dates; training. Caseworkers do/don't answer questions; give clear explanations; give consistent responses; provide referrals/grateful for referrals. Timeliness of information. Get/don't get useful information online. Likes or dislikes/wants access to interpreters, bilingual staff, native English speakers on staff.
RESOURCES	
RM – Medical, Dental, Mental Health	Likes or dislikes/wants medical/dental/mental health services (includes speech and occupational therapy), medical supplies. Likes/grateful for medical care in general. Includes insurance/provider availability, process of authorization, getting paid for medical services, medication.
RR – Respite	Likes or dislikes/wants respite services. Doesn't get paid for respite.
RT – Transportation	Likes or dislikes/wants transportation services (includes mileage reimbursement). Difficulty getting payment for transportation.
RC – Child Care	Likes or dislikes/wants child care services.

Response Category	Description
RF – Financial Matters	Likes or dislikes/wants financial payments (ongoing or one time) to foster caregivers. "Kinship care should get more financial help." Includes references to TANF.
RO – Other Resources	Likes or dislikes/wants other resources (or just says "resources," without context). "Kinship care should get more resources."
OTHER	
OS – Other Sources of Caregiver Support	Comments about support for caregivers from sources other than caseworker inside DCYF (foster care liaisons, foster care recruiters, support staff) and outside DCYF (CASA/GAL, extended family, support groups, other community groups). Include events to say "thank you."
O – *Not* about Support	Other miscellaneous comments that don't fit elsewhere. Comments about good/bad support that occurred in the past (any time before current situation); comments about future support, general life stories.
DK – Don't Know	Don't know. Have no answer. Unsure. Too new to caregiving to answer. No contact with DCYF; no need for support.
OT – Training	General comments regarding training. Specific comments about training are moved and coded as such.

Response Glossary – Caregiver Training

Question: What about caregiver training has been helpful?

Question: How could caregiver training be improved?

Response Category	Description
WHY WE DO TRAINING	
TRAINING QUALITY & HELPFULNESS	
TH – Overall Training	Training is helpful/not helpful; training was good (great)/not good (great); did/didn't like training (without further clarification). Includes general mentions of Alliance training.
TP – Specific Agency/Program Training	Named specific program/location/office that provides training; names private agency; mentions "private agency" training (no name given). FPAWS training, Refresh conference; mentions continuing education, college classes, or classes in the community (TP_E if just a mention that they received training through one of these sources. TP_P or TP_N if they indicate whether training was good/bad).
TN – Nothing	"Nothing," "Can't think of anything," "No suggestions" etc. (Negative, if about what has been helpful; positive, if about what needs improving.) NOT "Nothing stands out" Use TH_E.
TGC – Caring for Foster Children	Dealing with/caring for foster children; parenting skills/tools. Includes communicating with children; identifying/meeting their needs; making them part of foster family; understanding situations in foster children's bio-homes "helped shift my perspective" about foster children/parenting; what to expect from foster children in foster homes; general parenting information; information for caregivers who haven't parented.
HOW WE DO TRAINING	
ACCESS	**How we get to training. Comments about what made it easier/harder for caregivers to attend training**
TLS – Location & Schedule	Location of training. Includes having training in more places; having training closer to caregivers' homes; making it easier to get to training. Scheduling of training. Includes scheduling more training sessions; having training on more–or different–days; training in the evenings, on weekends; ongoing training.
TAC – Child Care	Includes comments about child care available during training.
TAO – Other Access Comments	Other likes/dislikes, or wants/don't wants, regarding access to training (e.g. "We had to seek training ourselves." without indication of reason/other reason than above). Includes comments about transportation to training.
INFORMATION	
TI – Information	Like/want information about upcoming training; mailings; training calendars. Don't like/don't want such information in the form it is currently provided. This includes comments about wanting caseworkers to make caregivers aware of training. Comments about training certificates.
TG-R – Resources	Information about resources (what/where they are); contact information.
TRAINERS	
TR – Trainers	Trainers are good/bad; specific trainer qualities, like knowledgeability, capability; want more/less of specific categories of trainers (including foster parents/foster

Response Category	Description
	children/biological parents as trainers–use both TR and TV); includes comments about guest speakers/presenters at training.
TT – Specific Trainer	Named specific trainer. Also always coded as TR.
METHODS	
TGA – Approaches to Training (+ former TFO)	Approaches used in training. Includes small groups; roundtable discussions; brainstorming; using case scenarios, real-life examples; Q&A sessions (if caregiver involvement not specified), in-person training (comparisons to online also code TFN). Like/dislike other alternative training formats (newsletters, individual training, etc.); comments about resource libraries or training DVDs; like/want wider variety of formats. Follow-up coaching via phone call.
TFN – Online	Like/dislike, wants more/less online training options, including online videos.
TFS – Support Groups	Like/dislike training offered during support groups.
TV – Building Community	Caregiver involvement in training (including foster parents/foster children/biological parents as trainers–use both TR and TV); interactions among caregivers during training; interactions between new and experienced caregivers; sense of community/support in training; networking.
PROCESS	
TRP – Training Process	Comments about the training process, requirements, sequence. Caregivers do/don't choose which training to attend, what is addressed in training. Complaints about training requirements. Training duration too long/short or pace too fast/slow, if about sequence of trainings, not individual sessions. Comments about wanting to include foster caregiver's biological children in training. Appreciating/disliking refresher courses for long-term caregivers. Timing of training in relation to placement. Requests for training in languages other than English. Comments about training room/refreshments.
WHAT WE DO IN TRAINING	
TRAINING CONTENT	**Comments on training/training types caregivers like/want or don't like/don't want**
General Content	
TRC – Training content and materials	General comments about training content. Includes more/less training content; repetitious training; training duration too long/short or pace too fast/too slow during a training session; Variety in training, updated training content (for "kids today"). Content relevant/irrelevant to personal situation. "Every child is different." They tell the truth/don't tell the truth, if about training content (TR if about a particular trainer). General learning ("learned a lot, something new"). Quality/usefulness of materials used in training (including need to update written materials, videos, etc.); specific topics to add/delete in training materials.
Specific Content/Trainings	
TSD – Trauma and Behavioral Health	Training focused on particular disorders/disabilities/issues. Includes training on trauma (grief and loss); abuse/neglect; attachment disorder; anorexia, bulimia, hoarding; anger issues; ADD/ADHD; autism; special needs; medications for disorders/issues. Includes behavior problems outside normal developmental issues. "Medically fragile" if infants/toddlers not specified. Include TSB for combined brain development/trauma training (i.e. TBRI). Training focused on sexual abuse, youthful sex offenders, sexually aggressive or inappropriate behavior. Training focused on substance-abuse issues. Includes fetal alcohol syndrome, drug-exposed infants, and effects of bio-parents' drug use on children.

Response Category	Description
TSB – Behavior/Development	Training focused on child behavior/child development; age-specific populations and issues (toddlers, school-age, teens); includes behavior management and discipline except that which falls in TSD. Training on infants and toddlers. Includes infant care, medically fragile infant/toddler care. Not for fetal alcohol syndrome or infants exposed to drugs (TSD). "Medically fragile" with no mention of infants or toddlers is TSD. Includes references to specific discipline philosophies/classes, like Love & Logic, or "Triple P," positive parenting.
TSC – Culture	Training focused on cultures and cultural issues. (Includes Native American culture and issues; how tribes interact with DSHS; tribal courts.) Cultural sensitivity of training.
TSF – Navigating Foster System	Training on how to navigate the foster care system. Includes how to interact with caseworkers; paperwork issues; rules and regulations; court procedures; other processes/procedures; what to expect from the system.
TSP – Caregiver Core Training	Like/don't like CCT/PRIDE training (PRIDE is now Caregiver Core Training). Any mention of "Core" training should use this code.
TSH – Health & Safety	Training focused on health and safety. Includes protecting children from abuse; first aid/CPR; immunizations; car seat training.
TSO – Other Specific Training Topics	Other specific trainings. Includes dealing with biological parents; advocating for youth; children's rights; grief/loss/stress experienced by foster care *providers*; other specific training liked or disliked/wanted. Mentions taking specific classes/training/workshops, without identifying them. Mentions "first placement training" or "initial training" but NOT "Core Training" (TS-P).
Specific Topics-Future *flag under TSO*	**Specific topics caregivers <u>would like to see</u>.** Other training. Includes dealing with biological parents; advocating for youth; children's rights; grief/loss/stress experienced by foster care *providers*; other specific training wanted.
OTHER	
TGO – Other General Comments About Training	Other comments about training that don't fit elsewhere. Includes: limit socializing during training
TO – Response *not* about Training	Other miscellaneous comments that don't fit elsewhere. *"Experience as a caregiver is the best teacher."* Includes support groups for caregivers; family preservation services; early childhood education support groups; ongoing advocates or mentors for caregivers/families; crisis intervention when trauma occurs (in biological or foster families).
TUC – Training for Unlicensed Caregivers	Any comments regarding training and unlicensed caregivers. (If specific training is mentioned, code both TUC and that code) "Unlicensed caregivers need/should get/should be offered training also."
TDK – Don't Know	Don't know, not sure, can't answer, haven't attended training.

Response Glossary – Caregiver Licensing

Question: Why did you decide to become licensed?

Question: Is there a reason why you haven't chosen to become licensed?

Response Category	Description
QUESTION 5 ONLY	
A – Facilitate Adoption	Became licensed in order to facilitate adoption of children in general (not a specific child), "foster to adopt."
P – Facilitate Placement	Facilitate/ensure placement/adoption/guardianship or care in general, for specific child(ren). "*To be able to foster family members*."
M – Mandated/Required	Court ordered, mandated, no option.
RF – Financial Matters	Getting financial resources/payments (ongoing or one time) for licensed caregivers. References to Relative Guardianship Assistance Program (R-GAP). "*Licensed caregivers get better financial remuneration*."
RO – Other Resources	Getting other resources, including non-financial support (or just says "resources," not specified).
H – Helping Children	Wants to help children and/or serve community (includes references to seeing/meeting a need and general social good).
GI – General Interest	Comments about general good experience, happy with how it is, simply wants to obtain license, enjoys fostering, encouraged by caseworker, personal circumstances/stories, other reasons not covered by specific codes.
O – Other	Comments that are NOT reasons for being licensed.
DK – Don't Know	Don't know. Have no answer. Unsure. Too new to foster parenting to answer. No contact with DCYF.
QUESTION 6 ONLY	
AP – Applied/In-progress	A license is in progress.
D – Denied	Applied but denied.
Q – Qualification Issues	Would like to be licensed, but would not qualify.
R – Relative	Caregiver is a relative or close friend. They didn't need to get licensed because they were caring for a relative. Q6: "*I am a relative*." "*Just taking care of family. Don't need to be in the system*."
G – Guardian	Caregiver is a guardian. "*Not required. I have full guardianship/custody of the child as the parents agreed…*"
S – Short-term	Short-term/temporary placement. "*I only had the children for 5 days*." "*This was only going to be a temporary placement*."
A – Adoption	Pursuing adoption instead of fostering (children in general, or a specific child/children). "*I am planning to adopt the child and am not interested in fostering other children.*"
PR – General Processes	Comments about the system – efficiency, bureaucracy, continuity, consistency, errors, rules, time it takes to get services (overall). Benefits of licensing aren't worth the process. Discomfort sharing private information. Not wanting/needing benefits/what the system offers.
PT – Training Requirements	Comments about 24 hours of preservice training, 1st aid/CPR training, blood borne pathogen training and ongoing training requirements after caregiver is licensed.
PH – Health/Safety Requirements	Comments about showing proof that all household children are immunized, if caring for age 2 and under the caregivers and all household members need the flu shot, physical requirements for their home such as fire extinguishers/escape ladders, TB tests for caregivers, well test if on a well (none of these are required for unlicensed caregivers)

Response Category	Description
PP – Personal Reasons	Does not want to obtain license due to personal factors, including age, health, work schedule, time commitment, cost and that they have children of their own.
IN – Information	Unaware that licensing is an option. Get/don't get useful information from caseworkers about licensing; foster system.
GD – General Disinterest	Comments about general bad experience, simply doesn't want to obtain license. Doesn't want anything to do with the state foster system. Not interested in fostering children other than their kinship placement. "*I just took in my niece temporarily [R] and don't plan to foster any more kids [GD].*" Other reasons not covered by specific codes.
O – Other	Comments that are NOT reasons for not being licensed.
DK – Don't Know	Don't know. Have no answer. Unsure. Too new to caregiving to answer. No contact with DCYF. Includes responses "no" and "no reason."

Notes:

- "No comment," "No response," "Don't want to answer," and N/A are not coded.
- Most of the support and training codes are grouped by sentiment: positive (P), needs work (N), or neutral/mixed (E). For example, comments that fall under Caseworker Courtesy (SC) can be coded SC-P (positive comments about caseworker courtesy), SC-N (negative comments or suggestions for change about caseworker courtesy) or SC-E (neutral or mixed comments about caseworker courtesy, like "Caseworkers are friendly sometimes" or "Some caseworkers are respectful to foster caregivers, and some aren't").

All licensing codes (Q5 and Q6) and some support and training codes (Q1-4) do not include sentiment coding. For example, Nothing (QN or TN), Specific Caseworker (SW), Need More Caseworkers (SN) and Don't Know (DK or TDK) are not further dividing into positive, negative or neutral.

2022 Caregiver Survey: Survey Script and Survey Questions

INTRODUCTION

I'm calling on behalf of the Washington Department of Children Youth and Families, which is a state agency focused on the well-being of children. I'm talking with caregivers of children and young adults about the support and training they receive. We sent you a letter explaining this survey – did you get it?

- The results of this survey will help DCYF measure how well caregivers are supported and trained.
- It will help DCYF make improvements if they are needed.
- You have been randomly chosen from all licensed and unlicensed caregivers.
- Your survey answers will in no way affect your status as a caregiver.
- Your participation and answers are confidential.
- DCYF staff are not provided the names of survey participants nor are they provided information that attaches caregivers' identities to their responses. The researchers combine all the survey answers into one report, so your name will not be used.
- Your participation is completely voluntary, but is very important to us. We want to make sure the sample represents all caregivers.
- If you tell me about any abuse or neglect to a child, I am required to report it to the authorities.
- Please feel free to ask questions at any time. If I come to any question that you prefer not to answer, just let me know and I will skip over it. Please be honest. We want to know how you really feel.

Throughout the survey, I will refer to the Department of Children, Youth and Families, as DCYF.

Thank you in advance for taking this important survey. Your feedback will help the Department of Children, Youth, and Families better support caregivers.

Have you had a child or youth age 21 or younger placed by DCYF [or while working with a private agency] living in your home at any time in the past twelve months?
☐ Yes
☐ No

In the past 12 months, did you care for a child or youth placed with you who… (select all that apply)
☐ Was related to you by blood, adoption, marriage, or tribal custom?
☐ Was not a relative, but had a pre-existing relationship with someone in your family before placement?
☐ Had no relationship with your family before placement?

SUPPORT QUESTIONS

1. Questions to Facilitate Strategic Planning for Support

   Preface to Questions 1A-1G:

   Please answer the following questions about your experience with staff from DCYF [or from Private Agency]. For each of the statements below, tell us how often the statement was true in the past year.

   A. Are you treated like a part of the team?
   B. Can you get help when you ask for it?
   C. Do the social workers listen to your input?
   D. Are you included in meetings about the child in your care?
   E. Do you get adequate information about the needs of the children placed with you, such as medical, behavioral, developmental and educational needs?
   F. Did DCYF staff offer you resources or ask if you needed support?
   G. Do you feel personally supported by DCYF staff?

Response Options for Questions 1A-1G:

☐ Always or Almost Always
☐ Usually
☐ Seldom
☐ Almost Never or Never
☐ Not Applicable

2. Open-ended Questions to Facilitate Strategic Planning for Support

    A. Now think about all the partners in Washington's child welfare system, including DCYF, private agencies, and your caseworkers and licensors ... What do they do well to support you?

    B. Still thinking about the entire child welfare system, including DCYF, private agencies, and your caseworkers and licensors … What could they do better to support you?

LICENSING QUESTIONS

3. Do you currently have a license to provide foster care?

    ☐ Yes
    ☐ No

4. Open-ended Questions to Facilitate Strategic Planning for Licensing

    A. [IF YES] Why did you decide to become licensed?
    B. [IF NO] Is there a reason why you haven't chosen to become licensed?

5. Did you become a caregiver because you hoped to adopt a child?

    ☐ Yes
    ☐ No
    ☐ Unsure

6. In the past 12 months, have you had any contact with the LD Licensing Division, such as a foster care application, home study, license renewal, or licensing investigation?

    ☐ Yes
    ☐ No

7. Did licensing staff treat you with respect?

    ☐ Always or Almost Always
    ☐ Usually
    ☐ Seldom
    ☐ Almost Never or Never
    ☐ Not Applicable

8. Were licensing or home study staff knowledgeable about the process?

    ☐ Always or Almost Always
    ☐ Usually
    ☐ Seldom
    ☐ Almost Never or Never
    ☐ Not Applicable

9. As a caregiver, have you received support from the Alliance CaRES program (Caregiver Retention Education Support?
   - ☐ Yes
   - ☐ No

10. How helpful was support from CaRES?
    - ☐ Very Helpful
    - ☐ Somewhat Helpful
    - ☐ Slightly Helpful
    - ☐ Not At All Helpful
    - ☐ Not Applicable

TRAINING QUESTIONS

11. Have you had any training related to your caregiving role in the past three years?
    - ☐ Yes
    - ☐ No

12. Overall, thinking about ALL the training you have had in the last three years, how adequately has it prepared you to care for the basic needs of foster children placed in your home?
    - ☐ More than adequate
    - ☐ Somewhat adequate
    - ☐ Somewhat inadequate
    - ☐ Very inadequate
    - ☐ Otherwise not applicable
    - ☐ I haven't had training

13. Open-ended Questions to Facilitate Strategic Planning for Training
    - A. What about caregiver training has been helpful?
    - B. How could caregiver training be improved?

14. I'm going to read you a list of income levels – please let me know the amount that comes closest to your total household income last year, including everyone in your household.
    - ☐ Under $10,000
    - ☐ $10,000 to $25,000
    - ☐ $25,000 to $50,000
    - ☐ $50,000 to $75,000
    - ☐ $75,000 to $100,000
    - ☐ $100,000 to $150,000
    - ☐ More than $150,000
    - ☐ Don't know/refused

2022 DCYF Caregiver Survey Report

Prepared for Washington State
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