A group of grandparent caregivers and service providers has been attempting to pass legislation, called The Care of a Grandchild Act, to provide a monthly subsidy to the relative caregiver families where the children have not been in foster care. Georgia has a Relative Care Subsidy Program that provides monthly payments to relatives who remove children from foster care, however, a majority of children end up in relative care through informal means, that is, the children have never been in state’s custody. While there is some support available to these children through Child Only TANF, the payments are too small to successfully raise children. The history of attempts to pass the legislation is included, along with an analysis using Jones’ Policy Process Model. The state of Florida passed similar legislation into law in 1998, called the Relative Caregiver Program. Jones’ Policy Process Model was used to analyze this law and a comparison of the Georgia bill and Florida law is included. There were two major differences between the bill and the law which might have implications for the lack of passage into law in Georgia. Attempts to assist relative caregiver families originated from a close partnership between Florida Children First, a private non-profit and the Florida Department of Children and Family Services, and a determination of abuse, neglect or abandonment, also known as deprivation, was required for eligibility. It is possible that a bill similar to the Florida law could
pass in Georgia as a method for preventing placing children into foster care, however, the needs of the population of interest, informal caregiver families, would remain unmet. Suggestions for future attempts to pass legislation to prevent placement into foster care and to assist informal caregiver families in Georgia are included, along with the relevance of this project to the field of social work.

INDEX WORDS: Relative caregivers, Legislation, Subsidized guardianship, Informal placement, Jones’ Policy Process Model, Policy analysis
GEORGIA’S CARE OF A GRANDCHILD ACT: HISTORY AND ANALYSIS

by

DEBORAH LEE PHILLIPS

B.A., Furman University, 1986
M.S., Florida State University, 1990
M.S.W., The University of Georgia, 1995

A Dissertation Submitted to the Graduate Faculty of The University of Georgia in Partial
Fulfillment of the Requirements for the Degree

DOCTOR OF PHILOSOPHY

ATHENS, GEORGIA

2009
© 2009
Deborah Lee Phillips
All Rights Reserved
GEORGIA’S CARE OF A GRANDCHILD ACT: HISTORY AND ANALYSIS

by

DEBORAH LEE PHILLIPS

Major Professor: Kevin DeWeaver
Committee: Stacey Kolomer
Betsy Vonk

Electronic Version Approved:

Maureen Grasso
Dean of the Graduate School
The University of Georgia
December 2009
DEDICATION

This dissertation is dedicated to all of the grandparent caregiver families who so generously allowed me to be a part of their journeys. To the grandparents: You are a true inspiration because of the loving support and the encouragement you give, and for the times when you have absolutely no reserves of energy left but you still find it within you to go to that meeting at school, to pack that lunch, to treat that sore throat, or to give a big hug. To the grandchildren: You have within you all that it will take to survive and excel, and when it is difficult to find it inside, know that you have only to reach out to your grandparents.

Thank you all for teaching me how to savor life, how to love, how to struggle and keep going, how to find hope when it seems to be gone, and please know that you will always have a cheerleader in me.
ACKNOWLEDGEMENTS

My thanks and deepest appreciation goes to Connie Mullan, R.N., friend and supporter extraordinaire! I couldn’t have done it without you! You are truly an inspiration for me. Thanks also to Marilyn Joaqim and Devre Brannon, both of whom provided support and valuable transportation assistance! Kristen Owens was there during a lot of my struggles and my sincerest thanks go to you.

Of course I could not have done this without the support, advice and encouragement of my committee members. Thank you so much to Dr. Kevin DeWeaver, Dr. Stacey Kolomer and Dr. Betsy Vonk! Kat Farlowe literally made it all happen and was essential to the process. Thank you!

Lizz Bernstein provided valuable and very generous assistance under crunch time at the very end! Thank you, thank you, thank you!

Dr. Elaine Nocks has been a long time friend and you have never given up on me. You, also, are an inspiration for me and you have my deepest gratitude and appreciation.

Last, and certainly not least, this is for SMC. You hung in there through the most difficult of times and I will always be grateful to you for that.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>ACKNOWLEDGEMENTS</th>
<th>vi</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIST OF TABLES</td>
<td>viii</td>
</tr>
</tbody>
</table>

## CHAPTER

1. Introduction ........................................................................................................................................ 1

2. Literature Review ................................................................................................................................. 6

   Foster Care – Early Beginnings ............................................................................................................ 6

   Child Welfare Legislation and Some Notable Events in the Child Welfare Movement ...................................... 8

   Relative Care .......................................................................................................................................... 18

   Grandparent Caregiver Families Living Below the Poverty Level in the U.S. and Georgia ............................ 20

   How Financial Instability Affects Grandparent Caregiver Families ......................................................... 21

   Benefits Available to Grandparent Caregiver Families ................................................................. 25

   Subsidized Guardianship ......................................................................................................................... 26

   Attempts to Pass Subsidized Guardianship in Georgia ......................................................................... 27

3. Method .................................................................................................................................................. 29

   The Author ............................................................................................................................................. 29

   Logic and Rationale for Qualitative Research ....................................................................................... 29

   The Design ............................................................................................................................................. 30
# Table of Contents

Data Collection ........................................................................................................32
The Selection of the Policy Analysis Mode ............................................................35
Analysis with Jones’s Policy Process Model ..........................................................37
Comparative Analysis .............................................................................................41
Validity and Reliability ...........................................................................................41

4 Results ..........................................................................................................................46
The Author ..............................................................................................................46
Historical Analysis of SB 88 ...................................................................................48
Analysis of SB 88 with Jones Policy Process Model ..............................................78
Comparative Analysis .............................................................................................93

5 Discussion ..................................................................................................................108

REFERENCES ............................................................................................................................124

APPENDICES .............................................................................................................................139

A Consent Form ...............................................................................................................140
B Interview Protocol – Georgia Participants ............................................................142
C Interview Protocol – Florida Participants ..............................................................143
D AARP Meeting Outline ........................................................................................144
E Survey ..........................................................................................................................145
F Fact Sheet .....................................................................................................................146
G Legislative Reception Invitation .............................................................................148
H Talking Points ............................................................................................................149
I SB 88 ...........................................................................................................................150
J SB 1540 .......................................................................................................................162
LIST OF TABLES

Table 3.1: Individuals Who Were Interviewed SB 1540 ..............................................................44
Table 3.2: Individuals Who Were Not Interviewed ......................................................................45
Table 4.1: Major Differences between Georgia’s SB 88 and Florida’s 1540 .............................107
CHAPTER ONE

Introduction

Children are by their very nature incapable of caring for themselves (Newman & Newman, 2006). Compared with other mammals, human children require a very long and protracted period of development until they reach maturity and need a great deal of nurturance and support throughout this time. When biological parents cannot raise their children, it is necessary for someone to step in to care for them and provide for their healthy development. Throughout most of history, this substitute care was provided by a relative, or private orphanages; it was only during the early 20th century that there began to be organized government involvement in child welfare (Hegar & Scannapieco, 1995, Holland & Gorey, 2004).

Largely because of the abundance of federal dollars to assist states with foster care, this strategy grew to be the prominent choice for providing assistance and care for abused and neglected children (McGowan, 2005). However, as the problems of impermanency and the lack of available foster care homes became increasingly apparent, a shift was made to placing an emphasis on relative care over foster care. A two-tiered system for financially supporting caregivers developed, with relatives in most states and most situations having access to less financial support than foster parents (Hegar & Scannapieco, 1995, Holland & Gorey, 2004). By law, relatives who meet foster care licensing requirements are supposed to receive payments equivalent to non-relative foster care; nevertheless, relatives are not necessarily aware that they can become foster parents, and states are not required to assist them with licensure requirements (McGowan, 2005). For many relatives, being foster parents is not an option because they don’t
want the children in state’s custody. Relatives who raise children through informal methods, the most common constellation for kinship care families (Harden, Clark & Maguire, 1997) are more likely to experience financial, legal, and health-related difficulties (Gerard, Landry-Meyer & Roe 2006; Grant, 2000; Hayslip & Kaminski, 2005, Kelch-Oliver, 2008; Letiecq, Bailey & Porterfield, 2008).

Caregiving by one subset of relative care providers, grandparents, has grown tremendously in the U.S. over the past 20 to 30 years (U.S. Census, 2000). There are many reasons, but the major contributors to the increase in these “skipped generation” families (Fuller-Thomson, Minkler, & Driver, 1997) include an increase in substance abuse, teen pregnancy, divorce and the rapid rise of single-parent households, mental and physical illness, AIDS, crime, child abuse and neglect, and incarceration of parents (American Academy of Child & Adolescent Psychiatry, 2008; Bryson & Casper, 1999). Between 1990 and 1995 there was a 25.7% increase in the number of grandchildren living with grandparents in the U.S., and this represents a 44% increase since 1980 (U.S. Census, 2000). According to the 2000 Census, there are approximately 6 million grandchildren living with their grandparents, and, in Georgia, there are an estimated 92,000 grandparent caregiver families.

Caregiving by grandparents provides a very important function for their families, including keeping children out of foster care (Minkler, Roe & Price, 1992), and some aging caregivers report this experience as positive and rewarding (Giarrusso, Feng, Silverstein & Marenco, 2000; Hayslip & Kaminski, 2005; Janicki, McCallion, Grant-Griffin, & Kolomer, 2000). Nevertheless, this caregiving is also associated with many stressors (Leder, Nicholson Grinstead & Torres, 2007). Grandparent caregivers are at an increased risk of experiencing significant physical and mental health problems (Minkler & Roe, 1993), social isolation
(Hirshorn, 1998) and a myriad of family relationship issues, including maintaining relationships with the biological parent(s) who are their children, as well as being ashamed of having children who cannot care for their own children (Wohl, Lahner, & Jooste, 2003; Shore & Hayslip, 1994). Additionally, grandparent caregivers face legal issues associated with custody of the grandchildren (Flint & Perez-Porter, 1997; Jendrek, 1994; Letiecq, Bailey & Porterfield, 2008) and finding mental health care for their grandchildren, who often experience significant emotional and behavioral disorders (Landry-Meyer & Newman, 2004; Mills, Gomez-Smith, & De Leon, 2005; Waldrop & Weber, 2001).

Many of these grandparents were living on fixed incomes before their grandchildren came to be in their care and cannot significantly increase their income through other means. Some were working but had to give up their jobs in order to care for their grandchildren. Still others are working but find it difficult to stretch their budgets to provide sufficient support for their grandchildren and themselves, while perhaps also paying for expensive child care. The grandparents’ sole aim is to provide for the healthy development of their grandchildren, and yet achieving this goal is greatly complicated by extreme financial difficulties (Goodman & Silverstein, 2001; Minkler, 1999).

There are some sources of financial assistance for grandparent caregiver families. Child-only Temporary Assistance to Needy Families (TANF) provides a small payment to these intergenerational families (Georgia Department of Human Services, 2008). Grandparents who serve as foster parents receive a larger stipend, but while they have physical custody of their grandchildren, the state has legal custody, and many grandparents are unwilling to use this option.
Some states have adopted policies and laws specifically to assist grandparent caregiver families and other kinship care families. One form of subsidized guardianship gives a monthly stipend to family members who remove relative children from foster care (AARP, 2008). However, many children come to live in multi-generational families through informal arrangements without going through state’s custody (Harden, Clark & Maguire, 1997).

The state of Georgia has a form of subsidized guardianship called the Relative Care Subsidy which, as described above, provides monthly payments for relatives who remove children from foster care (Georgia Department of Human Services, 2009). For the past four years a group of grandparents and service providers has been attempting to get the Care of a Grandchild Act passed in the state of Georgia to provide for a monthly subsidy to grandparent caregiver families where the grandchildren have not been in state custody.

The purpose of this dissertation is to tell the story of how a group of concerned citizens’ idea about solving a social problem became “The Care of a Grandchild Act” that was presented to the Georgia General Assembly. It is hoped that this will serve as an example and possible guide for others who are interested in the process of bringing attention to a social problem, building an advocacy group or public (Jones, 1984) getting support, and then shepherding a bill through the necessary steps to becoming a law. This study is significant for at least two reasons. First, as described by Becker (1999), there are very few examples documenting the process of getting a bill written and presented to the legislature; this dissertation adds to that crucial gap in the literature. Second, the reality of democracy in the U.S. is that most legislation that is considered is prompted by very influential and wealthy people (Jones, 1984), and this dissertation involves a grass roots effort to get legislation passed. This dissertation documents an example of macro social work practice for at least two reasons: 1. it is an attempt to pass legislation that
could benefit a large number of poor, oppressed, and marginalized citizens (Brueggemann, 2002) and, 2. as a part of this process, some of those poor, oppressed and marginalized citizens were empowered to act on behalf of themselves and others to improve their circumstances (Lauffer, 2009; Lowe & Hopps, 2007).

First, a literature review describes a brief history of some of the major policy milestones in child welfare and poverty. This is followed by a description of the financial circumstances facing many grandparent caregiver families and the assistance currently available to them. Then, the history of the Care of a Grandchild Act is detailed, from the first awareness of the need for such assistance up to the fall preceding the fourth legislative session, when advocates were not able to find a sponsor, and the efforts to pass the bill died, at least for the time being. Finally, the Care of a Grandchild Act is analyzed using Jones’ Policy Process Model (Jones, 1984). As a basis of comparison, the state of Florida’s Relative Caregiver Program, a program that provides a similar type of subsidy, is analyzed as well.

The research questions for this study involved the following:

1. What process was involved in the history of attempts to pass SB 88 in Georgia?
2. What process was involved in the successful passage into law of Florida’s SB 1540?
3. What differences were revealed between the Georgia bill and Florida law by examining the process involved in the attempts to pass the bill, in the case of Georgia, and the successful passage into law of the Florida law?
4. What did these differences reveal that could be useful in providing guidance and suggestions for future attempts to enact the Georgia bill?
CHAPTER TWO

Literature Review

As described in the Introduction, one of the major stressors for multigenerational families is financial difficulties (Goodman & Silverstein, 2001; Hayslip & Kaminski, 2005; Minkler, 1999). The attempts to develop and/or modify policies to assist skipped generation families with financial support are affected, to a great degree, among other things, by the reliance on foster care in the U.S. as the major avenue for dealing with child abuse and neglect. Therefore, a brief history of major pieces of child welfare legislation in the U.S. is included along with some consideration of foster care’s impact on the support available to relative caregivers, both in informal and formal situations. In addition, when developing legislation to assist grandparent caregiver families, it is important to have an accurate understanding of the financial realities faced by many of these families. The ability to meet many basic but very important needs, and to successfully raise children, is linked to income level. Therefore, it is important to examine how many children and families are affected, what degree of poverty is experienced, how this impacts their lives, and what financial resources are available to assist them.

Foster Care – Early Beginnings

One of the first examples of foster care occurred in 1676, when a young boy was placed in the home of Henry Brookens and his wife as an indentured apprentice. The family agreed to provide food and shelter, and the child served as an apprentice and learned a trade (Kadushin, 1976). While this was in many ways a different arrangement than is seen in foster care today, the contract that was put in place to provide permanence for the child is similar to what is ideally
found in a long-term foster home today. The need for indentured apprenticeships and other forms of substitute child care was recognized as resulting from a variety of causes including parents’ death, the parents’ physical or mental illness, their inability to earn a living, or in some cases the abuse, neglect or exploitation of their children (Kadushin, 1976). Also, some children were born out of wedlock, were physically handicapped, mentally retarded or delinquent, and were neglected and/or abandoned because of these circumstances and were therefore in need of substitute care. Thus, the need to provide care for children was identified as arising from poverty, as well as abuse and neglect.

Other forms of care arose in the early 1700s, including institutional care in the form of orphanages and mixed almshouses. The mixed almshouses were shelters for children and adults who could not provide for themselves, while the orphanages housed only children. Both types of institutions were seen as places that removed children from dangerous or inappropriate relationships but which also served as places of training; it was hoped that they would serve a rehabilitative function whereby the children’s characters would be transformed into socially acceptable ones and that they would become functioning members of society. During the 19th century, specialized institutions also developed to address the needs of children who were blind, mute, delinquent, or mentally ill. The orphanage gradually replaced the mixed almshouse because it was deemed more appropriate because of the possible negative influence of the adults in the almshouses (Jansson, 2008; Kadushin, 1976; McKenzie, 1999).

Indentured apprenticeships became less popular during the 19th century because of the industrial revolution and the subsequent decline in work done by individual families in the home and also because concerns about slavery made it less desirable (Kadushin, 1976). Additionally, there were concerns that the childrens’ education and morals would be severely neglected under
these circumstances. As the effects of the industrial revolution grew, a form of foster care that also involved labor, but not indentured servitude, became the strategy of choice for providing assistance and care for children without parents to care for them. This system of care first became prominent in New York City with Charles Loring Brace under the auspices of the Children’s Aid Society (Costin, Karger & Stoesz, 1996; McGowan, 2005,). Brace was a Protestant minister who questioned Catholic parents’ ability to raise their children. He was very concerned about the number of homeless immigrant children, the majority of whom were Catholic, living on the streets and was very much opposed to institutional care. He believed that these children’s needs would be best served through adoption by families in rural areas and farming communities; thus the “orphan train” movement began. Controversy exists over Brace’s motivation for child rescue and whether or not assessment and oversight were provided after the children were placed. Once the children were placed in homes, it appears that very little was done to follow up and check on their well-being. However imperfect this system of child rescue may have been, some (Kadushin, 1976; McGowan, 2005) believe that Brace and the Children’s Aid Society had a major impact on child welfare in the U.S. and on placing out children, or foster care, as the strategy of choice for dealing with children whose parents cannot care for them.

Child Welfare Legislation and Some Notable Events in the Child Welfare Movement

Prior to the 20th Century

While the need to support children and sometimes remove them from their homes had been recognized since the earliest days of the founding of the country, it was also believed that maintaining children in the home was an important goal. In the early 1700s, communities offered assistance to mothers who didn’t have the means to support their children, often because of the
father’s death. The desire to maintain children in homes with their parents, particularly when poverty was the challenge to providing appropriate care, was articulated in 1887 when the Massachusetts Society for the Prevention of Cruelty to Children stated that “we never take neglected children by law from their parents, where the neglect arises from honest poverty alone” (Bremner, 1974, p. 353). As stated previously, issues of abuse and neglect had also been recognized, but the primacy of the family for determining care as well as the issue of privacy, still took precedent. Then, events in the late 1860s and early 1870s occurred that highlighted the case of abused children. The famous case of Mary Ellen resulted in criminal action against her caretaker (Costin, Karger & Stoesz, 1996). Mary Ellen’s father was killed in the Civil War and when her mother was unable to take care of her, she ended up, at the age of 3, in the care of New York City's Department of Charities. Mary Ellen was taken in by a couple who didn’t allow her to go outside, made her do very hard manual labor, and did not provide proper clothing or a bed to sleep in. When the landlady finally reported this to a Methodist caseworker, Etta Wheeler, Mary Ellen was nine years old but was the size of a 5 year-old and had bruises and marks all over her body (Shelman & Lazoritz, 2005). Costin et al. (1996) believe that this story has been so simplified as to leave out the significance of the increase in women’s and children’s rights, as well as the importance of the press in gaining attention for the issue of child abuse and neglect. Also, it is now clear that laws to protect children from abuse and neglect were on the books in many states dating back several centuries but were seldom enforced (Pecora, Whittaker, Maluccio, Barth, & Plotnick, 2000). Nevertheless, the Mary Ellen incident was instrumental in the formation of the New York Society for the Prevention of Cruelty to Children, which was modeled after the Society for the Prevention of Cruelty to Animals. Subsequent to this, at least 150 similar agencies were developed in other states. These Societies for the Prevention of
Cruelty to Children (SPCCs) initially functioned as law enforcement agencies whose agents searched for abused children on the streets or through tips made by concerned neighbors, relatives or even the children themselves. They then investigated the families and prosecuted when necessary; the removal of the children into institutions was the most common result.

**Early 20th Century**

SPCCs became less influential during the early part of the 20th century and the responsibility for abused and neglected children shifted to the public domain at the state level as the ideas of “scientific charity” were adopted. Focus shifted to the notion of social reform, cooperation among philanthropic societies to improve the human condition, assisting families to prevent abuse and neglect and keeping children in the home (Costin et al., 1996).

In 1909, the White House held the Conference on the Care of Dependent Children (Costin et al., 1996) or the Conference on Children. Two very influential women came together in 1903 over their common concern about child labor, and their collaboration led to the development of the Conference on Children. Lillian Wald was the founder of the Henry Street Settlement in New York City, and her friend Florence Kelley was a member of the National Consumers League. At the behest of Ms. Wald and Ms. Kelley, President Theodore Roosevelt began the process that resulted in the development of the Children’s Bureau by first holding this conference at the White House. President Roosevelt summarized the need for the Bureau as follows:

> There are few things more vital to the welfare of the nation than accurate and dependable knowledge of the best methods of dealing with children, especially with those who are in one way or another handicapped by misfortune; and in the absence of such knowledge each community is left to work out its own problem without being able to learn of and
profit by the success or failure of other communities along the same lines of endeavor.

(Pecora et. al, 2000, p. 247)

Between 1909 and the 1912, national organizations of women's clubs, consumers' leagues, labor unions, college and school alumnae associations, societies for the promotion of special interests of children, and various State child labor committees gave their support and urged the Congress to act, and in 1912, Congress passed the Act and the Children’s Bureau was founded. The Bureau was charged "to investigate and report . . . upon all matters pertaining to the welfare of children.”  (Pecora et. al, 2000, p. 341).

In 1911, Illinois continued the tradition of providing assistance to children and families in the home when it enacted a Mother’s Aid law which provided “public assistance to ‘fit’ and ‘proper’ mothers to maintain dependent children in suitable homes” (Kadushin, 1976, p. 53). During the next two years, 20 other states passed similar types of legislation (McGowan, 2005), and by 1935, all but two states had passed some type of mother’s aid laws. It is estimated that in 1921, when forty states had enacted similar laws, approximately 120,000 children remained at home in their mother’s care through the support of state benefits (Kadushin, 1976).

During this time, protective services provided at the state level for children grew as public agencies began to have more responsibility for children (Costin et al., 1996). What had begun with an emphasis on law enforcement gradually gave way to providing casework to parents to allow children to stay in the home. At the same time, there was an increase in foster boarding homes and child care institutions, and the debate over foster homes versus institutionalization continued well into the 1920s. At the same time many child welfare workers were coming to the conclusion that “the best place for normal children was in their own homes” (Bremner, 1970, p. 248), an idea that conflicted with the “widespread” dislike of public relief. In
fact, noted social workers of the time, including Mary Richmond and Edward Devine, Director of the New York School of Social Work, believed that “funds to parents” would not aid in child abuse and neglect prevention efforts and would, in fact, be harmful to both children and their parents (McGowan, 2005, p. 23). However, because a number of social reformers believed that children should not be removed from their parents, by 1923, “the number of dependent children being maintained in their own homes was approaching the number of those in institutions and far in excess of those in foster homes” (Bremner, 1970, p. 248).

1920s

In 1920, The Child Welfare League of America was founded with the goal of supporting and accrediting agencies related to children and family services, along with research and the dissemination of knowledge. During the same time period, adoption was established as a child welfare service and it was recognized that investigation of non-relative homes by an established child welfare agency should be required, a law which was first put into place by Minnesota in 1917 (Child Welfare League of America, 2006).

1930s

The Great Depression saw a great increase in the placement of children into foster care, as families were faced with many challenges, including that of providing for their children. In 1935, Franklin Delano Roosevelt and the Congress enacted the Social Security Act. Title IV established Aid to Dependent Children (ADC), which encouraged the care and support of dependent children in their own homes and was clearly founded on the Mother’s Pension Laws passed by many states earlier in the 20th century (Gluck Mezey, 1996). Title V, Part 3, established assistance for Maternal and Child Welfare that was designed to assist families in their homes but also to benefit those who were in out-of-home placements. Title V placed a major
emphasis on children and families who lived in rural areas by strengthening public welfare services in those areas (Gluck Mezey, 1996). There was little controversy over Title IV-A because it was an expansion of the Mother’s Pension Laws and also because the number of primary-wage-earner deaths was quite small. Additionally, widows and their children were considered to be among the deserving poor; states had the discretion to determine eligibility rules that were generally very restrictive and ensured the undeserving poor, or those who did not conform to traditional standards of behavior, for example, or those who were minorities, were not able to receive this benefit (Gluck Mezey, 1996).

1940s

World War II had a major impact on child welfare. The Lanham Act, established in 1942, provided child care for working mothers, most of whom were part of the war effort. The Emergency Maternal and Infant Care Program (EMIC) was developed to provide preventive health care and an experimental national health care plan for the wives and children of servicemen who had been moved with them to parts of the country where they had never previously lived (Costin et al., 1996).

1950s

In the post-war era, there was a great decline in the issue of child abuse as families were allowed to regain their privacy and child rearing was considered a private matter. However, by the late 1950s, it was apparent to hospital social workers and doctors that child abuse and neglect were still very prominent, an awareness that eventually led to the Child Abuse Prevention and Treatment Act (CAPTA) in 1974 (Gluck Mezey, 1996).
1960s
In 1961, Title IV-A of the Social Security Act provided foster care payments for children eligible for AFDC (Peccora et. al, 2000). In 1962, ADC was changed to AFDC in recognition of the fact that providing support to children requires support to their families as well (Gluck Mezey, 1996). Also in 1962, Kempe’s article “The Battered Child Syndrome” was published in the Journal of the American Medical Association (Krugman, 1999). In 1967 Title V became Title IV-B and provided for social services to enhance child well-being.

During the 1960s, as a result of Kempe’s article, there was a tremendous increase in the awareness of child abuse and neglect (Pfohl, 1977; Krugman, 1999) and because the emphasis was on battered children and the desire to rescue them from their abusers, removing the children and placing them in the foster care system was the predominant strategy. In addition, because Title IV-A funds were provided as an entitlement to the states for AFDC-eligible children while Title IV-B funds were capped, it appeared that the guaranteed federal funding for foster care meant that states were unnecessarily placing children into foster care, resulting in the need for large numbers of foster care homes. However, foster care problems were observed, including impermanency, lack of monitoring, the length of stay and absence of attempts for adoption, to name a few (Holland & Gorey, 2004). Also, the increase in the number of children in need of foster care was met with a declining pool of foster care homes (American Academy of Child and Adolescent Psychology, 2005). As a result, there developed an emphasis on keeping families intact that eventually resulted in an emphasis on family preservation and which became prominent in the 1980s and 1990s. However, foster care as a major strategy for child abuse and neglect continued to exist and even grow.
1970s

Ninety seventy-four marked a major milestone in child welfare legislation with the passage of the Child Abuse Prevention and Treatment Act (CAPTA). This Act established the National Center for Child Abuse and Neglect within the Department of Health and Human Services that developed a model statute for state child protection programs (Costin et al., 1996).

In 1974, Title XX funds that supported social services were capped, while income maintenance services were separated from social services and remained an open-ended entitlement that fluctuated with the number of cases (Costin, Karger, & Stoesz, 1996). The income maintenance functions were handled by technicians, and the social services functions were handled by a separate social services division. Service providers looked to Title V, which was changed to Title IV-B in 1967 and which provided funding for any social service needs of children, to compensate for the loss of Title XX funds, but this program never expanded and accounted for 5% or less of federal funds for children’s services. Thus, while the identification and reporting of child abuse and neglect as a national problem had been highlighted by CAPTA, the significant funds for prevention and treatment were not available. Therefore, prevention and treatment were neglected because the states relied heavily on federally funded foster care.

The Indian Child Welfare Act (ICWA) was passed in 1978, which reinforced the importance of relative care even when the relatives in question were not the biological parents (Limb, Chance & Brown, 2004; Hegar and Scannapieco, 1995). In fact, some authors believe that this act “began setting the stage for an updated orientation toward family preservation in national child welfare matters” (Limb, Chance, & Brown, 2004, p. 1281). The Act included a prioritized list of placement options for children of Native American ancestry with relatives as the number one choice. In fact, it is estimated that before the ICWA was passed as many as 25 to
35 percent of Indian children were placed in non-Indian homes by state courts (Limb, Chance, & Brown, 2004) because “Non-Indian judges and social workers--failing to appreciate traditional Indian child-rearing practices--perceived day-to-day life in the children's Indian homes as contrary to the children's best interests” (Jones, 1995, p. 184).

In 1979, another policy was enacted that further promoted relative care. The U.S. Supreme Court ruled in *Miller vs. Youakim* [1979] that for purposes of federal foster care payments, relative homes meeting foster home licensing standards were eligible for the same reimbursement as nonrelative homes. By the mid 1980s, the number of children placed in formal foster care with relatives rose from 18% to 31% in the 25 states that provided this information to the U.S. Department of Health and Human Services (McGowan, 2005).

**1980s**

The Adoption Assistance and Child Welfare Act (P.L. 96-272) was passed in 1980, largely in response to the problems in the foster care system. There were two main objectives: 1. to prevent the removal of children from their biological homes, and 2. to facilitate the placement of children entering substitute care in permanent family homes. The law focused on reunification, but at the same time, there was a growing movement toward family preservation in the U.S. (Costin et. al, 1996). The practice of family preservation, which involved “organizing services around a family’s strengths and needs, in their own homes and with sufficient intensity to protect children” (Kelly & Blythe, 2000, p. 30), allowed the children to remain in the home and kept the family together. Some trace family preservation back to Mary Richmond and the 1920s, but the major modern movement began with Homebuilders in Tacoma, Washington (U. S. Department of Human Resources, 1995). This program provided short-term, time-limited services to families in their homes. The program was based, in part, on crisis intervention theory,
which posits that families would be more open to such services at those times. Eventually, programs opened across the United States with the intent of providing family preservation services; however, a number of authors assert that family preservation as a policy was never fully funded (Child Welfare League of America, 2006; Kelly & Blythe, 2000; North American Council on Adoptable Children, 2007; Thieman & Dail, 1997) and never had a chance because of the overwhelming amount of funding dedicated to foster care (Pelton, 1997) and to the persistent belief that it was too risky and ineffective. One form of family preservation that did appear to take hold is that of relative caregiving (Connealy & DeRoos, 2000), wherein a relative steps in and, either formally or informally, takes responsibility for caring for their relative children.

The Adoption Assistance and Child Welfare Act of 1980 also included Title IV-E that created the Foster Care Maintenance Payments Program. This program provides Federal matching funds of 50 to 83 percent for foster care placements, depending on the state's per capita income (U.S. Department of Health and Human Services, 2009). In order to receive maximum federal matching, the states must meet a long list of criteria stipulated by the federal government that includes such things as a state inventory of children in care, a statewide information system, preplacement preventive services, and reunification or permanency planning services, among many others (Peccora et al., 2000). This Act also contained federal funds for subsidized adoptions of special needs children who are income eligible.

1990s

The Omnibus Reconciliation Act of 1993 contained the Family Preservation and Support Act (FPSA) that amended Title IV-B of the Social Security Act. Child welfare advocates felt that efforts to aid children had fallen into disarray during the 1980s. Costs were continuing to rise,
and foster care continued to be used because of essentially unlimited funding, while less expensive preventive and reunification services had only very limited funding. FPSA provided funding for family preservation and community-based family support services (Gluck Mezey, 1996).

In 1996, Congress passed the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) that replaced AFDC with Temporary Assistance to Needy Families. This law ended welfare as an entitlement, required persons receiving it to begin work after 2 years in the program, had a lifetime maximum of 5 years, although states could adjust this downward if they chose, encouraged two-parent families and discouraged out-of-wedlock births (Peccora et al., 2000).

The Adoption and Safe Families Act was passed into law in 1997 and was designed to improve the safety of children, to promote adoption and other permanent homes for children, and to support families. The law continued the Family Preservation and Support Services Program but renamed it as Promoting Safe and Stable Families and placed an emphasis on adoption by continuing eligibility for the Federal Title IV-E Adoption Assistance Subsidy to Children Whose Adoption is Disrupted, authorized adoption incentive payments for the states, and required the states to document efforts to adopt, among other things. The law also included an emphasis on kinship care as a way of providing permanency to children.

**Relative Care**

As this brief review of child welfare laws and programs has shown, relative care has grown to be an important part of the U.S. response to abused and neglected children. However, parity has never been achieved for relative foster parents and informal relative caregivers compared to non-relative foster parents (Hegar & Scannapieco, 1995; Holland & Gorey, 2004).
A Comparison of Support to Foster Parents and Relatives as Foster Parents

One major tenet of all social welfare programs is that of funding scarcity (Almanac of Policy Issues, 2009; Callahan, 1982), and, therefore, the government has a vested interest in promoting policies that keep its expenditures down. Because of this scarcity of funds the government wants to encourage caregiving by relatives, where the financial responsibility is assumed by family members and not the government. However, there is also a very important and longstanding value in the U.S. that discourages financial support to relatives as caregivers. The extremely influential notion of rugged individualism (Hoover, 1928; Marmor, Mashaw & Harvey, 1992) that asserts individuals should take care of themselves and not rely on others or the government, when translated into the care of children, means that relatives who provide care are obligated to perform this duty and should not rely on government assistance. Therefore, both historically and in the present, foster parents, who have no moral imperative or obligation to care for children, receive more funding than relative caregivers. The 1979 court decision in Miller vs. Youakim requires that states cannot deny federal foster care benefits to relatives caring for children who meet eligibility requirements for foster care payments under Title IV-E of the Social Security Act. However, states are not mandated to assist grandparents and other relatives in qualifying for foster care rates, and, in many states, relatives are not being informed about the possibility of becoming foster grandparents or encouraged and supported in doing so (Minkler, 1999). Also, many relatives will not consider becoming foster parents because they don’t want the children to be placed in state’s custody.

The Trend toward Relative Caregiving

Relative caregiving by one subset of relative care providers, grandparents, has grown tremendously in the U.S. over the past 20 to 30 years. There are many reasons, but the major
contributors to the increase in these “skipped generation” families (Hayslip & Kaminski, 2005; Fuller-Thomson, Minkler, & Driver, 1997) include an increase in substance abuse, teen pregnancy, divorce and the rapid rise of single-parent households, mental and physical illness, AIDS, crime, child abuse and neglect, and incarceration of parents (American Academy of Child and Adolescent Psychology, 2005; Bryson & Casper, 1999). In fact, the rate of incarceration of women increased by six-fold between 1974 and 2001 (U.S. Department of Justice, 2003). Between 1990 and 1995 there was a 25.7% increase in the number of grandchildren living with grandparents in the U.S, and this represents a 44% increase since 1980 (U.S. Census, 2000).

Seventy-seven percent of grandparent caregivers are female, and 72% are under the age of 65 (Hayslip & Kaminski, 2005). Fifty-four percent of grandparent caregivers are married, and a variety of races are represented: Caucasian (51%), African American (38%) and Hispanic (13%). However, when statistics are determined as a proportion of their own race, African Americans showed the highest percentage with 4.3%, while Hispanics were at 2.9%, and Caucasians were at 1%.

Grandparent Caregiver Families Living Below the Poverty Level in the U.S. and Georgia

Census 2000 statistics support the observation that grandparent caregiver families are at increased risk of financial instability. Nineteen percent of grandparent caregivers in 1999 had incomes below the poverty level, while 14 % of families that included related children lived below the poverty level (Census 2000). Children in grandmother-only caregiver situations are more likely to live in poverty and to receive some sort of welfare assistance, and 64% are in grandmother-only situations (Simmons & Lawler Dye, 2003). Thirty-three percent of children who live with grandparents without either parent present live in poverty as compared with 14 % of children who live in two-parent households (U.S. Census Bureau, 2004). States in the South
have the highest proportion of grandparent caregivers living in poverty in the U.S. and, in Georgia, 21% are living below the poverty level (U.S. Census).

**How Financial Instability Affects Grandparent Caregiver Families**

**Income/Employment**

While there is a wide range of ages for grandparent caregivers, few, if any, ever planned on caring full time for their grandchildren. If they have retired, they are very often living on fixed incomes which don’t allow much leeway for the additional expenses related to raising grandchildren. If the grandparents are working, they can experience a tremendous strain from trying to balance the demands of a job with the needs of a grandchild. Roe and Minkler (1996) found in a study with 71 grandmothers that 30% of them had to quit their jobs to become full-time caregivers, and 17 of them, or 24%, went to work to support their grandchildren. Results from Sands and Goldberg Glen’s study (1998) revealed that 17.8% of the 123 custodial grandmothers they studied had left their jobs to raise grandchildren. Pruchno and McKenney (2006) found that the current annual income of 506 grandmothers who quit their jobs in order to raise their grandchildren was less than that of grandmothers who did not quit their jobs for this reason. Pruchno and McKenney also found that about 50% of their participants had experienced each of the following: been late for work, missed work, had to leave work for a grandchild’s medical appointment, and had to leave work suddenly because of their grandchild. These authors were not able to study the effects of quitting work when women are nearing retirement, but they speculate that this may limit their Social Security or private pension benefits, a point raised by Kingston and O’Grady-LeShane (1993). Furthermore, many working grandparents have to find and pay for child care for very young children. Some grandparents have even been forced by financial necessity to go back to work to support their grandchildren. Some grandparents work at
part-time jobs, and others become home day care providers so they can generate additional income by working at home (Waldrop & Weber, 2001).

**Housing**

Fuller-Thomson and Minkler (2003) studied a very important issue faced by grandparent caregivers, that of housing. Fuller-Thomson and Minkler chose to highlight those who were renters because

[for those] who suddenly find themselves raising their children’s children, it is likely to be particularly problematic for renters, especially those living below the poverty line. The presence of children, for example, may violate rental agreements and result in evictions based on occupancy limitations. Residents in senior housing also may face eviction if they take in grandchildren. (p. 92)

By using Census 2000 statistics and focusing on those grandparents who are renters, Fuller and Thompson (2003) found that 26% of all grandparent caregivers in the U.S are renters and that a third of these grandparents are spending more than 30% of their household income on rent; approximately 30% were also living in overcrowded conditions.

A closer look at the renters found that 23% of them were receiving some form of housing subsidy from the government, with 14% living in public housing and 11% receiving Section 8 housing subsidies (Fuller-Thomson & Minkler, 2003). One measure of economic instability is the percentage of monthly income that is spent on housing. About one-third of grandparent caregiver renters spent 30% or more of their income on rent, and for more than 17% of them, this figure increased to at least 50% or half of their income. For those living below the poverty line, 60% were spending 30% or more of their income on rent and, of these, 41.4% were spending half of their household income on rent. An important and costly expenditure that is associated
with rent is that of utilities and fuel, and the combination of rent and these other expenses is referred to as gross rent. When these figures are added, almost 60% of grandparent caregivers living below the poverty line were spending half of their income or more on gross rent.

Whether grandparent caregivers rent or own their homes, another issue involves the cost of moving when their current abode does not have the space required for the grandchildren. Also, some grandparents are living in senior housing when their grandchildren come into their care, and many such facilities do not allow children as residents (Kolomer & Lynch, 2007). The costs associated with moving can be extremely high and, of course, the costs associated with a larger home are further burdens on the grandparents’ budgets.

**Legal Costs**

One of the most important issues facing grandparent caregivers is that of the type of legal relationship, if any, that exists between them and their grandchildren. As previously mentioned, many grandchildren come to live with their grandparents through informal means, meaning that the children are in their physical custody, but legal custody remains with the biological parents (deToledo & Edler Brown, 1995). While this arrangement does not have any legal costs associated with it, it is undesirable because it does not provide necessary stability, and grandparents can be denied the right to get medical care for the children and/or to enroll them in school, for example. Power of attorney grants the right for one person to make decisions for another. With this legal arrangement, a grandparent could be given the ability to give emergency medical consent and also to enroll a child in school, although school and hospital officials are under no legal requirement to accept the power of attorney. The biological parents have to consent to it in the first place and can rescind it at any time without the need for an attorney or judge; however, forms for the power of attorney can be obtained at a fairly low cost, so this
The option for providing some permanency is often considered, however imperfect it may be. The laws regarding guardianship and custody vary from state to state. In Georgia, grandparents can apply for temporary or permanent guardianship through the probate court and do not require the services of an attorney (Yorker et al., 2009). The costs associated with guardianship achieved in this manner are quite low, although more expensive than the power of attorney; again, the biological parents must agree to guardianship and can rescind it without going before a judge. In Georgia, the only methods for achieving true stability involve permanent custody or adoption. Permanent custody has many of the benefits of adoption but does not sever the parents’ rights. Adoption is irrevocable. Both of these options require the services of an attorney, which can be extremely costly and out of the reach of many grandparents. In Georgia, Atlanta Legal Aid offers a program to help low income grandparents raising grandchildren with custody and adoption issues; however, these services are available only in the Metro Atlanta area (2009). There are also support programs in several locations across the state that can offer grandparents some assistance with the legal costs of obtaining custody or adoption, but these services are by no means available to most of the estimated 20,000 or so grandparent caregiving families in the state of Georgia who live near or below the poverty level.

**Costs Associated with Rearing Grandchildren**

The stressors faced by grandparent caregivers described in the Introduction are exacerbated by the financial hardship they experience while caring for their grandchildren (Hayslip & Kaminski, 2005; Minkler, 1999). Many grandchildren come into their grandparents’ care with only the clothes on their backs. For those who arrive with clothing, they soon grow out of it. Food for growing children is costly, and the cost of formula for infant children is extremely expensive. Many grandchildren require multiple doctor’s appointments and visits to
psychologists and psychiatrists. Even when these costs are covered by Medicaid or private insurance, there are still co-pays, and the cost of gasoline or public transportation to get them to these appointments. Medications sometimes are not covered by insurance and when they are, there is still a co-pay associated with them. School attendance has costs such as school uniforms, costs associated with extracurricular activities, costs of field trips, etc. Utility bills can increase with the use of more electricity for lighting, heating water and using additional appliances.

**Benefits Available to Grandparent Caregiver Families**

Many grandchildren in grandparent caregiver families are eligible for Child only TANF; however in, Georgia, this is equal to $155 for the first child, $80 for the second child, and less for each successive child. Grandparents themselves might be eligible for TANF but may have difficulties with the work requirements and may have already met the time limits (Mills, Gomez-Smith, & De Leon, 2005). Many grandparents, however, are not eligible for TANF because they receive Social Security or SSI payments, both of which can exceed the allowable income limits.

The Department of Human Resources Commissioner in Georgia, B.J. Walker, implemented a plan through the Department of Family and Children Services called “Grandparents Raising Grandchildren” (Georgia Department of Human Services, 2009). The program provides four benefits to grandparents who are 60 or older and/or disabled and who are raising grandchildren: 1) a $50 per month per child payment to those grandchildren who are receiving Child Only TANF, 2) a one time only emergency payment for expenses such as car repairs, home repairs and rental deposits, 3) child care and 4) special training related to raising grandchildren. While this program is undoubtedly beneficial to a number of grandparent caregiver families, there are some limitations to the program that affect both the eligibility and the actual financial assistance. As already mentioned, there is an age requirement of 60 or older.
Many grandparent caregivers are under the age of 60 and are also not disabled. The extra $50 per child for those receiving Child-Only TANF reduces the amount in food stamps that grandparents receive. The emergency payment is available only to grandparents whose grandchildren have recently come into care and does not assist those who have been caring for their grandchildren for many months or years. The child care assistance is available for grandchildren age 4 or under. Grandparent caregivers can often require child care for grandchildren who are much older than this.

**Subsidized Guardianship**

While caregivers of elderly parents and children with disabilities have some access to federal assistance (Bronstein and Admiraal, 2005), to date no such financial assistance is targeted specifically toward grandparent caregiver families. A number of states have instituted programs and laws, called “subsidized guardianship,” to assist these families. In most states, this type of subsidy is given to grandparents and other relatives who remove children from the foster care system. This subsidy helps provide a permanency option besides adoption because many grandparents do not consider adoption feasible because it permanently severs ties to the biological parents and thus does not allow for the possibility of reunification with them.

While these subsidies are very beneficial for these families, many grandparent caregiver families are not eligible to receive them because the children were never placed in foster care (never in state’s custody). Often referred to as an informal care arrangement (Flint & Perez-Porter, 1997), the children may have been abandoned by the parents, or the parents may have entrusted the child(ren) to the grandparent. In fact, a majority of children end up in a relative’s care without entering foster care (Harden, Clark & Maguire, 1997). And while this is desirable for many reasons, nevertheless, these families have now been made ineligible to receive this type
of subsidy. A few states have developed subsidies for these skipped generation families where there has been no state involvement (Generations United, 2009). Three of the states that developed this subsidy early on were Florida, Louisiana, and Missouri. In subsequent years, other states have followed suit, including Kentucky, Rhode Island, New Jersey, Minnesota and Nevada. These programs vary regarding age requirements, special needs requirements, and others but they all provide a monthly subsidy for grandparent caregiver families where foster care has not been involved. Some states have applied for TANF waivers to fund these subsidized guardianships, but in others, state funds are used. It is important to understand that this form of assistance is very appealing because it provides permanency without requiring the state to have legal liability for the children and also because it does not have the overhead costs associated with foster care. However, this form of financial support actually creates a strong disincentive for states to move children from the foster care system that has reliable federal funds to a program that may not continue to be financed. As a result, it is estimated that some 20,000 children for whom adoption and reunification are not possible remain in the foster care system; this greatly inflates foster care numbers and, in actuality, the federal government is limiting permanence options for these children and families (Generations United, 2006).

Attempts to Pass Subsidized Guardianship Legislation in Georgia

Since 2004, grandparents and service providers in Georgia have been attempting to pass a law to provide subsidized guardianship to grandparent caregiver families where the children have not been in foster care. The history and a description of this legislation, called the Care of a Grandchild Act (SB 420 during the 2006 General Assembly and SB 88 during the 2007 and 2008 General Assembly), are described in Chapter 4 of the current document.
The purpose of this dissertation is to describe how one social worker’s recognition of need gained attention and became a bill presented to the Georgia General Assembly. Or to put it another way, this document described one of the “pathways from citizen discontent to public policy,” (Jones, 1977). Particular attention was given to individuals, interest groups, and politics, and a policy analysis model was used, along with a comparison analysis of Florida’s similar law. Differences in the economy, values, and politics in the states were used as a basis for understanding differences in the outcome of the legislative processes. Perhaps this document could be used as a guide to other individuals who have aspirations of turning human needs into policies and services that address those needs. More specifically, it might be useful to those in other states who seek to obtain a subsidy for informal grandparent caregiver families.

The State of Florida had one of the earliest subsidies (SB 1540) that did not require relative children to have been in state’s custody (OLR Research, 2000). Because of this fact and also because of its close geographical proximity to the state of Georgia, it was desirable to compare the development of Florida’s law to that of Georgia’s similar bill. Also, there are important differences in the law passed in Florida and the bills presented to the Georgia General Assembly.

In the next chapter, the Method Section, a description of the process for collecting and analyzing the data is included, along with a consideration of issues related to reliability and validity.
CHAPTER THREE

Method

This study involves qualitative historical analysis of the development of SB 88 in Georgia and SB 1540 in Florida. A comparative design was also used to compare findings between the two cases via a policy analysis model.

The Author

Because the author of this dissertation was very involved in the development of The Care of Grandchild Act, it is critical that her relationship to the topic of this dissertation be described. Part of the Results included her brief biography and, specifically, her work with grandparents raising grandchildren, including her involvement in developing the legislation.

Although the development of this legislation was not a research project and was not planned or executed with the intention of being used for her dissertation topic, nevertheless, the role of participant-observer (Mason, 2002) would seem to come closest to describing the author’s involvement with this process. She was an active participant; at the same time, she was able to observe the actions and interactions of others.

Logic and Rationale for Qualitative Research

Since the purpose of the current study was to do a historical and comparative analysis of two cases, the choice of qualitative research instead of quantitative research was made. Merriam (2002a) stated that qualitative research has three major characteristics: 1. understanding “meaning people have constructed about their world,” (p. 4), 2. researchers as the primary instrument for data collection, and 3. “richly descriptive” outcomes(p. 5). The current study
meets criterion one because the study’s purpose was to document the unique history of the development of two pieces of legislation through interviews with key informants who all had their own memories, understandings and meanings attached to the events surrounding the development of the legislation and their involvement in it. Through the use of interviewees’ memories and the meanings they attached to them, the unique history of each case in the context of each state was developed. Criterion two was met because the author collected the data from the interviews, from looking at documents, and through her own recollection of the events. Finally, the outcome of the historical and comparative analyses was a rich, detailed description of the processes involved in the development of Georgia’s bill and Florida’s law, and a comparison of those two processes.

The Design

Historical Analysis

Historical analysis involves four major steps (Popple & Leighninger, 2004). First, a set of guiding questions is developed. These questions serve as a “guiding framework for approaching a mass of detail” (p. 74). The next step involves collecting evidence related to the questions. Third, as the data is gathered, it must be interpreted or evaluated in light of the questions that were developed to guide the study. Questions that can assist in this evaluation include an assessment of the authenticity of the evidence, an assessment of the condition of the witness to the events, and an inquiry about the intent of the document or the person who shared the information. For example, was the intent to report or to persuade? And finally, decisions are made about what the evidence shows in light of the guiding questions of the study. For the present study, four major research questions were developed:

1. What process was involved in the attempts to pass SB 88 in Georgia?
2. What process was involved in the successful passage into law of Florida’s SB 1540?

3. What differences were revealed between the Georgia bill and Florida law by examining the process involved in the attempts to pass the bill, in the case of Georgia, and the successful passage into law of the Florida law?

4. What did these differences reveal that could be useful in providing guidance and suggestions for future attempts to enact the Georgia bill?

Then data were collected through interviews, the study of documents and the author’s recollections of events, an assessment was made about the authenticity and purpose of the data, and then the data was analyzed in light of the four questions outlined above.

Case Studies

The historical analysis involved two case studies that described the development of two pieces of legislation as exemplified by several authors (Arbogast, 2000; Becker, 1999). Case studies are often used to “trace the development of social welfare policies and programs” (Rubin & Babbie, 2008, p. 408). According to Stake (2000), the important distinguishing feature of a case study is that “the choice of what to be studied” is more important than the process or methodology. The focus is on a “bounded system” (Smith, 1978) or a single entity or unit around which there are boundaries (Merriam, 2002a). The case has a “finite quality about it either in terms of time (the evolution or history of a particular program), space (the case is located in a particular place), and/or components comprising the case (number of participants, for example)” (Stake, 2000, p. 2). The two cases in the present study were bounded by time and space; that is, they both involved a process that occurred over time and in particular places. SB 88 in Georgia was selected by the author because of her interest in relative caregiving issues and also because
of her knowledge of, and involvement in, the development of the legislation. Florida’s SB 1540 was selected because Florida was one of the first states to have this type of subsidized guardianship and also because of its close geographical proximity to Georgia.

**Data Collection**

All of the information gathered to write the historical record came from primary sources (Rubin & Babbie, 2008), i.e., they were reported by those who were actually present at the event. In a process called “elite interviewing” (Marshall & Rossman, 2006; Mason, 2002), a small number of interviews was attempted with influential people. This technique is used with “insiders” or people who, because of their relationship to the issue at hand, are presumed to have expert knowledge and insights that are privileged and unique.

**Georgia**

The purpose of the interviews was to provide a view from both ends of the spectrum regarding the Georgia legislation because at the time this dissertation was completed, the bill had not become a law and, while there was much support for the bill, there was also very important opposition to it. Three telephone interviews were conducted with individuals in Georgia who were connected with the legislation in a supportive capacity. Melanie McNeil, the then-Executive Director of the Georgia Council on Aging and lobbyist for the Coalition of Advocates for Georgia’s Aging (CO-AGE), was instrumental in the formulation of the bills and lobbied intensively at the Capitol. Prior to the interview, Melanie read, signed and returned via fax a copy of the Consent Form developed for this project (Appendix A). The second telephone interview occurred with Robin Eschman, a grandparent caregiver who became a self-taught lobbyist through this process. She also signed and faxed a copy of the Consent Form. Please see Appendix B for a copy of the interview protocol used during the phone interviews and face-to-
face interviews described below. One brief telephone interview occurred with Georgia Representative Bobby Reese (R, 98th), who was opposed to the legislation. At some point during the 2007 General Assembly, the author had had a brief and impromptu conversation with Representative Reese wherein he shared his opposition. She then called him to arrange a longer, more formal interview, but before the date could be finalized, he stopped responding to the author’s e-mails and telephone calls. No consent form was signed by Representative Reese.

Three face-to-face interviews that varied in length from approximately 45 minutes to an hour and a half occurred. The first interview was with Georgia State Senator Renee Unterman (R, 45), who was the sponsor of the legislation; she was extremely supportive and worked very hard on behalf of its passage. The second interview was with Angie Burda who is the Program Coordinator of the Clayton County Kinship Care Center and who was responsible for supporting and mobilizing many grandparent caregivers who lobbied at the Capitol. The third interview was with Dr. Stacey Kolomer, who is an Associate Professor of Social Work at the University of Georgia and who was an advisor regarding the development of the legislation; she also took part in the CO-AGE meetings and work group meetings. E-mails were exchanged with Mary Lou Vergara of the Area Agency on Aging in Atlanta and Abby Cox (formerly Abby Griffis) with the Georgia Council on Aging. A list of individuals who were interviewed for this study is included in Table 3.1.

A request to interview Department of Human Services (DHS) Commissioner B. J. Walker was denied. Commissioner Walker was opposed to the legislation; however, as described in the “History” section, she did plan and implement a program called “Grandparents Raising Grandchildren.” To see a list of those individuals who were not available to be interviewed see Table 3.2.
Other sources of information included the Senior Issues Newsletter, which included articles about SB 88 written by Kim Raymond, Coordinator of the Senior Citizen Advocacy Project, who observed the events at the Capitol on a daily basis; newspaper articles; the Georgia General Assembly website and documents; and copies of the legislation. Finally, another primary source of information included the author’s memory of the process, any documentation she had collected throughout the process, and any notes she had taken.

Florida

Two face-to-face interviews occurred with individuals from Florida who had involvement in the development of SB 1540. The first interview occurred with Linda Radigan, who was the Assistant Director for Family Safety and Preservation at the Department of Children and Family Services (DCF). Linda originated the idea within DCF for the Relative Caregiver Program. The second interview was with Chris Zawisca, who formerly was an attorney with Children First. She, along with John Ratliffe, described below, developed the idea for the legislation outside of DCF, and then the two of them wrote it. Both Linda Radigan and Chris Zawisca read and signed consent forms for the interviews. These interviews were approximately one-and-a-half hours in length. Please see Appendix C for the interview protocol that was also used for the phone interviews described below.

There were four telephone interviews with Florida participants. The first two were with Nelson Simmons and Sallie Bond, both formerly of Florida DCF. The third telephone interview was with John Ratliffe, an attorney who worked with Legal Aid and with Florida Children First, described above. The final phone interview was with Brent Elrod, who was the Statewide Coordinator for the Kinship Care Center at the University of South Florida (USF). Brent helped to mobilize grandparents to lobby in Tallahassee after SB 1540 was passed to attempt to gain
parity with foster care payments. E-mails were exchanged with Brent Elrod as well as with Dr. Anne Strozier, the Director of the Kinship Care Center at USF. Other primary sources of information included copies of the law; amendments to the law; the Florida DCF website and documents; the Florida Legislature website; Florida Senate Staff Analysis and Economic Impact Statements and Relative Caregiver Program Handbook and Eligibility Rules. Secondary sources of information included the AARP Fact Sheet, the OLR Research Report, an Urban Institute Report, and the Florida Bar Foundation.

Attempts to contact former Florida state Senator Mandy Dawson and former Representative Rene Garcia for interviews were not successful. At the request of the author, the Florida Senate Secretary contacted Senator Dawson by phone on at least three occasions to request that she contact the author about a possible interview, but Senator Dawson never made any contact. The author called the home of former Representative Garcia on at least four occasions but never reached the Representative. Senator Dawson, when she was a state representative, was very actively involved in the development of SB 1540. Former Representative Garcia attempted to amend the legislation so that it would include relatives who have legal custody of children, in addition to those with children placed with relatives after a determination of dependency.

The Selection of the Policy Analysis Model

Before selecting a policy analysis model, it was important to decide on the type of policy analysis model to use. Ginsberg (2005) divides policy analysis models into categories based on different domains: content, process, rational, and political. The rational approach was easy to exclude because, as at least one author believes (Lindblom, 1964), it is impossible to achieve the degree of objectivity required and to obtain all of the information necessary to do such an
analysis. Content models focus exclusively on a description of the details of the policy. Since the goal of this dissertation was to tell the story of how an idea to address a social problem became a bill, an analysis that focused solely on content would not have sufficed. Process models focus on how policy comes to be and the interaction among interest groups, politicians, and advocacy groups as they work together to form the policy. The process model would seem to be the best match with the intentions of the author because of the desire to tell the story of how an idea became a bill, with the major emphasis being on the “how.”

Several process models were considered before one was selected. Bruce Janssen’s model (1994), while including the notion of a step-by-step process, does not provide a very detailed framework to guide an analysis. Prigmore and Atherton’s model (Prigmore & Atherton, 1986) includes all of the ingredients necessary to consider the values, groups, and power resources involved in the process of developing a policy but still does not include enough of the stage or story element. Flynn’s model (1973) comes closer to the story-telling concept, as it includes milestones that must be achieved in the policy process. Jones’s model was selected because, while he points out that some of the steps or functional activities involved in his model do not necessarily occur in order or at all, he still links them very deliberately to the stages involved in getting the policy to the government and to the steps involved in program development. In this sense, his model depicts the policy/program as the culmination of many different events, some of which had to precede the others. Jones is a political scientist who developed his model in the late 1960s and early 1970s, largely in response to the traditional institutional process approach that looked at law making as occurring principally inside the executive, legislative and judicial branches of government in a compartmentalized fashion (Jones, 1984). Jones believes that the policy process is much more complicated than this view,
with many competing viewpoints being presented to the government by various constituencies, and that cross-institutional and interlevel policy relationships need to be considered in addition to the “boxes” that comprise the three branches of government.

**Analysis with Jones Policy Process Model**

As a part of each case study, the policy process model (Jones, 1984) was used to analyze the process that was involved in developing the legislation. Jones’s Policy Process Model delineates 11 activities that take place in the policy process and then groups them according to their relationship to “what government does to act on public problems” (Jones, 1984, p. 30). Since at the time of the writing of this document “The Care of a Grandchild Act” had not become a law, it was impossible to do a complete analysis using Jones’s model. The “Appropriation” through “Resolution/Termination” activities were not completed as the bill did not become a law. For the Florida case study, the analysis included all of Jones’s (1984) stages except for the last one, “Resolution/Termination activities,” because the program is still running and assisting families.

**Problems to Government - Perception/Definition**

Obviously two very important issues here are how the event is perceived and defined by those experiencing the problem and how it is perceived by service providers and others looking on from the outside. Jones (1984) makes a distinction between perception and definition; perception refers to an event, while definition refers to a problem. Perception involves “the reception and registering of an event through sight, hearing, touch, taste and smell” (p. 52). When someone perceives the “social effects of events” (Jones, 2000, p. 52), or how the events are adversely affecting people, if she then defines the situation as a problem and then decides on steps that need to be taken to solve the problem, definition has occurred. For both the Georgia
bill and the Florida law, those who perceived the events and then defined them as a problem were asked to describe in detail exactly how this process occurred. As described in the results, in Georgia, a survey completed by grandparent caregivers was conducted to assist in problem definition.

**Aggregation**

Important to the concept of aggregation is the notion of the “public.” The public is “a group of concerned and organized citizens who intend to take action” (Jones, 1984, p. 17). As described by Jones, sometimes there are problems, but there is no public or group of concerned citizens who gather to do something about it. In the case of both Georgia’s SB 88 and Florida’s SB 1540, a public did form and become active in the process of developing the legislation. A great many details were used in describing the people involved, the organizations they were connected with, and their views and connection to the issue, as all of these aspects were very important to the process that resulted in the bills.

**Organization**

How the public came together, how they organized themselves, how much cohesion they exhibited, and how they divided the labor, were all important features of these bills (Jones, 1984). “The Care of a Grandchild” public was associated with a very important and well-recognized group, CO-AGE, through the Georgia Council on Aging, that definitely helped with the organizational aspects of getting the bill developed and presented to the General Assembly. A number of the members formed themselves into the Georgia Kinship Care Coalition, which had other functions and goals but which also played an important part in this legislation. In Florida, the primary members of the public were backed by the Clearinghouse for Human Services, a very large network of service providers and advocacy groups.
**Representation**

Representation involves the method or ways in which the public gets their problem linked with the government (Jones, 1984). For “The Care of a Grandchild Act,” the sponsor of the legislation, Renee Unterman, was undoubtedly one of the major reasons that the bill came into being so quickly and got put on the Senate floor. Her status as a member of the majority party and her status as a social worker, the only social worker elected to the Georgia General Assembly, were key aspects and were the subject of much examination. The values of these legislators and their ability or lack of ability to “represent poverty publics” (Jones, 1984, p. 30) are crucial to an understanding of how events played out for this bill. In Florida, Representative Mandy Dawson was crucial to the process, and although she was not available to be interviewed, some details of her life, and the perspectives of those who worked with her, are explored.

**Action in Government - Formulation**

Formulation involves planning and efforts to judge what should be done about a public problem (Jones, 1984), or, in many cases, the actual writing of a piece of legislation. Formulation was carried out by four primary groups for “The Care of a Grandchild Act.” The first group was the CO-AGE working group, which met several times prior to both the 2006 and 2007 legislative sessions. Senator Renee Unterman was also very involved in writing the legislation, and there was a lot of revision in the Senate and the House Judiciary committees. For the Relative Caregiver Program in Florida, the two primary writers of the legislation were the attorneys, Chris Zawisca and John Ratcliffe.

As Jones (1984) describes it, making a sharp distinction between formulation and legitimation can be very difficult, and, indeed, there were certainly many important
modifications made to the Georgia bill in both the Senate and House Judiciary Committees, and this part of the process was examined as, well.

**Legitimation**

Legitimation in the legislative sense involves getting a majority vote. During both Georgia legislative sessions, obtaining this majority was relatively easy in the Senate, but the House of Representatives was a major challenge and, in fact, in the first session the bill got to the floor but didn’t go to a vote, and in the second it never made it to the floor. In Florida, SB 1540 received unanimous votes in both the House and the Senate the first time it went to a vote. In both cases, some attention is paid to the possible reasons for the different legislative results in Georgia and Florida.

**Appropriation**

Getting legitimation is essential, but without funding, a program to address a social problem will not exist (Jones, 1984). Appropriation involves the process of budgeting and is concerned with the "translation of financial resources into human purposes" (Wildavsky, 1979, p. 1) or seen as a “series of goals with price tags attached” (Wildavsky, 1979, p. 2). In Florida, the availability of a Temporary Assistance to Needy Families (TANF) Waiver made the funding of SB 1540 possible.

**Implementation**

As Jones (1984) puts it, implementation involves “putting agreements into effect” (p. 165). However, Jones is careful to acknowledge that this is not a simple process at all, and that “the creation of a program is itself an event that may stimulate the emergence of a mini-policy process. Problems may have to be defined, operations identified, and agreements reached” (p. 165). In other words, just because decisions were made and translated into words written in the
law, it does not mean that enough details were included to actually develop and administer the program. As Williams (1975) puts it, “The most pressing implementation problem is that of moving from a decision to operations in such a way that what is put into place bears a reasonable resemblance to the decision” (p. 451). In Florida, there appeared to be some recognition of these issues, as a special work group was put into place to implement the Relative Caregiver Program, and this is described.

**Program to Government - Evaluation**

Jones (1984) defines evaluation as “judging the merit of government processes and programs” (p. 198). This process can take place at many different levels inside of government and outside of government. Jones distinguishes evaluation from “evaluation research,” which he says refers to “the more recent social scientific efforts at systematic data collection and analysis” (p. 199). There has yet to be any formal evaluation of Florida’s Relative Caregiver Program, either inside or outside of government; however, some participants’ opinions about the program are included.

**Comparative Analysis**

Finally, Georgia’s SB 88 was compared to Florida’s SB 1540. Given that Florida’s bill became a law, a comparison of the process through which it was developed and then enacted into law provided important insights and suggestions for the possible eventual passage into law of Georgia’s Care of a Grandchild Act.

**Validity and Reliability**

Validity has to do with the congruence between one’s findings and reality (Merriam, 2002b) or, in quantitative research, asks whether the researcher is measuring what she thinks she’s measuring. In qualitative research, there is an assumption that there “are multiple, changing
realities and that individuals have their own unique constructions of reality” (p. 25). Therefore, in qualitative research, reality is “the researcher’s interpretation of participants’ interpretations or understandings of the phenomenon of interest” (p. 25). Two strategies for enhancing the validity of the present study were used: triangulation and peer review. For triangulation, multiple sources were used to look for congruity or difference, including interviews, the author’s observations and document analysis. Lizz Bernstein with The Writing Center at The University of Georgia served as the peer reviewer. She was instructed to look at the conclusions reached by the author seemed appropriate in light of the information found in the “History” sections. Ms. Bernstein concluded that the author’s conclusions were appropriate and stated that she did not find anything significant omitted.

External validity refers to how generalizable the findings are. In quantitative research, this refers to whether one can generalize results to other populations or situations. In qualitative research, usually a small non-random sample is selected purposely to understand the “particular in depth” (Merriam, 2002b, p. 28). Therefore, qualitative research uses a different understanding of generalizability. A number of authors suggest that there can be a transfer of knowledge learned from a qualitative study to another similar situation, although in limited ways only. For example, Cronbach (1975) refers to working hypotheses that reflect situation-specific conditions in a particular context. Patton (1990) discusses “context-bound extrapolations rather than generalizations” (p. 491), and Erickson (1986) writes about concrete universals in qualitative research, as opposed to abstract universals arrived at through statistical analysis. In the present study, a thick, rich description was used to increase external validity, so that readers can determine how closely their situations match. Maximizing variation was also used, as two case
studies from two different states were presented, thus allowing for the possibility of the results being applied to a greater range of situations.

Reliability refers to the extent that the findings of a research study can be replicated (Merriam, 2002b). Again, because of the assumptions of qualitative research that reality is always changing and that people’s perspectives change as well, reliability has come to refer much more to “dependability” and “consistency” (Lincoln & Guba, 1985, p. 288). Instead of replication, reliability is found in “others concurring that given the data collected, the results make sense” (Merriam, 2002b, p. 27). Again, the strategies of triangulation and peer review, as already discussed regarding validity, were used in the present study to enhance the dependability and consistency of the data.

In Chapter 4, the Results Section, the outcome of the methods described in this chapter are given, including the historical analysis of the development of and attempts to pass SB 88 in Georgia; the development and passage of SB 1540 in Florida; an analysis of Georgia’s bill and Florida’s law using Jones’s Policy Process Model, and a comparison of the two.
Table 3.1

*Individuals Who Were Interviewed*

<table>
<thead>
<tr>
<th>Name/Agency</th>
<th>Contact Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sallie Bond/Florida DCF</td>
<td>Phone</td>
</tr>
<tr>
<td>Brent Elrod/University of South Florida</td>
<td>Phone, e-mail</td>
</tr>
<tr>
<td>Robin Eschman/Georgia grandparent</td>
<td>Phone</td>
</tr>
<tr>
<td>Dr. Stacey Kolomer/UGA School of Social Work</td>
<td>Face-to-face</td>
</tr>
<tr>
<td>Melanie McNeil/CO-AGE</td>
<td>Phone</td>
</tr>
<tr>
<td>Linda Radigan/Florida DCF</td>
<td>Face-to-face, phone</td>
</tr>
<tr>
<td>John Ratliffe/Florida’s Children First</td>
<td>Phone</td>
</tr>
<tr>
<td>Nelson Simmons/Florida DCF</td>
<td>Phone</td>
</tr>
<tr>
<td>Dr. Anne Stozier/University of South Florida</td>
<td>E-mail</td>
</tr>
<tr>
<td>Senator Renee Unterman</td>
<td>Face-to-face</td>
</tr>
<tr>
<td>Chris Zawisca/Florida’s Children First</td>
<td>Face-to-face</td>
</tr>
</tbody>
</table>
Table 3.2

*Individuals Who Were Not Interviewed*

<table>
<thead>
<tr>
<th>Name/Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Former Senator Mandy Dawson/Florida Legislature</td>
</tr>
<tr>
<td>Former Representative Rene Garcia/Florida Legislature</td>
</tr>
<tr>
<td>Representative Bobby Reese/Georgia General Assembly</td>
</tr>
<tr>
<td>Commissioner B.J. Walker/Georgia DHS</td>
</tr>
</tbody>
</table>
CHAPTER FOUR

Results

The results section is divided into four parts: 1. a description of the author’s relationship to this issue; 2. the history of the development and attempts to pass SB 88 in Georgia and the analysis of this process using Jones’s (1984) Policy Process Model; 3. a description of Florida’s SB 1540 and an analysis using Jones’s Policy Process Model; and 4. a comparison of the results for the Georgia and Florida analyses. The data comes from verifiable facts, interviews, and other forms of personal communication such as phone calls and e-mails.

As described in the Method section, the data was gleaned and analyzed to answer the following research questions:

1. What process was involved in the attempts to pass SB 88 in Georgia?
2. What process was involved in the successful passage into law of Florida’s SB 1540?
3. What differences were revealed between the Georgia bill and Florida law by examining the process involved in the attempts to pass SB 88 in Georgia, and the successful passage into law of Florida’s SB 1540?
4. What did these differences reveal that could be useful in providing guidance and suggestions for future attempts to enact the Georgia bill?

The Author

Because the author was a participant observer (Mason, 2002) throughout this process and because she helped to originate the idea for the legislation, it is important to describe who she is in relationship to this issue. She has a Masters in Social Work, and this document was written as
part of the completion requirements for obtaining her Ph.D. in Social Work. She considers herself to be an advocate for the healthy development of children and families, and she has worked with runaway and homeless adolescents, taught parenting classes at a jail, done in-home family preservation, prepared quarterly reports about trying juveniles as adults in Georgia, and, most recently, worked for 6 and a half years as the Project Coordinator for Northeast Georgia Project Healthy Grandparents (PHG). PHG is a program that provides in-home case management services and support groups for grandparent caregiver families. The author believes very strongly that it is in the best interest of the country, the state of Georgia, and communities that there be a strong safety net of social supports in place and that all people at some point in their lives will have need of them. She is an advocate for children, in particular, because of her many experiences with and on behalf of them, and because they cannot participate in the process of effecting policy changes necessary to assist with their healthy development. Children cannot be worked with in isolation from their parents/caregivers/guardians, so the researcher believes strongly in providing support to families, as well. As described elsewhere in this document, she has been privileged to be invited into the homes of grandparent caregiver families, has been to IEP meetings with them, has been to doctors’ offices and the hospital with sick grandkids and grandparents, has attended graduations, and has attended a funeral for a grandfather. Because she witnessed firsthand the love and sacrifices made by grandparents on behalf of the grandchildren’s futures, when she learned about subsidized guardianship, she began the process that eventually culminated, with much hard work on the part of many individuals, in attempts to pass this legislation. The author is a strong believer in the need for this legislation and is still hopeful that someday it will be passed into law in Georgia.
Historical Analysis of SB 88

At some time in the spring of 2004, the researcher became aware of the fact that many states in the U.S. have a form of financial assistance for grandparent caregivers called “subsidized guardianship” on the Generations United (2004) website, an organization that provides support and education for intergenerational families. In most states where this type of assistance was available, it was given to relatives who removed children from foster care. Georgia has this type of program, called the Relative Care Subsidy (DHS, 2009).

In three states – Missouri, Florida, and Louisiana – there existed special programs where receipt of a subsidy by relative caregivers did not require the children to have been in state’s custody (Generations United, 2004). The vast majority of families in PHG began as informal placements; that is, the grandchildren had never been in Georgia’s Department of Family and Children Services (DFCS) custody, and so they were not eligible for the Relative Care Subsidy. Because of their tremendous financial burdens, it was apparent that the grandparent caregiver families in PHG were in need of some kind of assistance beyond what they were already receiving, if anything; the subsidized guardianship found in Missouri, Florida, and Louisiana appeared to the author to be an appropriate type of assistance to seek on behalf of the families. Also, the fact that these three states were all located in the ‘geographic south’ was another compelling reason to believe that such a bill might pass in the state of Georgia.

The author had conversations with Dr. Stacey Kolomer, an assistant professor at that time in the School of Social Work at UGA, and they began to develop a plan to make this subsidy possible in the state of Georgia. Dr. Kolomer had written her dissertation on skipped-generation families and was still conducting research on this topic. She recommended doing research to obtain a clearer picture of what was available in each state. Generations United had developed a
table that gave information about which states had subsidized guardianship, either requiring foster care or not, and what the eligibility requirements included. A graduate assistant in the School of Social Work, Eulene Evans, gathered information about the subsidy in each state and added information to that already found in the GU table, including the source of funding, whether or not state’s custody was required, and eligibility requirements, for example.

Dr. Kolomer recommended meeting with Senator Brian Kemp (R) of District 46 where Athens is located to see if he would be interested in this type of legislation. She felt that gaining local support could be very useful in getting the legislation passed. She also recommended that eventually we attempt, through the Georgia Council on Aging, to get this topic onto the agenda of the Coalition of Advocates for Georgia’s Elderly (CO-AGE). She also recommended that we attempt to find out if any Georgia legislators had been raised by their grandparents or other family members or if they were currently raising grandchildren or had some other personal connection to this issue, believing that this personal connection to the issue might make them more receptive to supporting it.

In the fall of 2004, a meeting took place with Senator Kemp, Dr. Kolomer, four PHG interns, Rebecca Spence, Sarah Olander, Adam Braund, Tashia Jones, and the author. Senator Kemp was very cordial, expressed some interest, and agreed to have a legislative study conducted about the topic. However, he did not believe that the prospects for passage of such a law were very great because of the difficulty in getting funding. Later, the Senate Research Office sent a response with the information about the Relative Care Subsidy. As previously mentioned, Dr. Kolomer and the author were already aware of this program, but it did not provide support to the grandparent caregiver families they were primarily interested in helping.
Sometime that fall, the author received a call from Nichelle Mitchum with the National Center on Grandparents Raising Grandchildren at Georgia State University (2009). She invited her to speak at a meeting concerned with relative caregiving at the State AARP office (Georgia AARP, 2009). The previous October, the first ever GrandRally (Children’s Defense Fund, 2003) was held on the East lawn of the Capitol Building in Washington, D.C. This event was jointly sponsored by AARP, the Child Welfare League of America, the Children’s Defense Fund (CDF), Generations United, and Grandparents for Children’s Rights. There were many guest speakers, including Marion Wright Edelman, President of the CDF, and Senator Hillary Rodham Clinton. Grandparent caregivers spoke, and so did grandchildren. Afterwards, the grandparents met with their legislators to raise their awareness about the support needed by this group. Grandparents with PHG, the PHG nurse and interns and the author had attended this event, and another similar event was to occur the following year. The researcher was asked to speak at the AARP meeting to share information about the GrandRally, to talk about the desire to hold a similar event in Georgia, to conduct trainings regarding advocacy for grandparent caregivers, and also to discuss the possibility of funding assistance for the trainings and for future trips to Washington. The author developed an outline (Appendix D) about all of these issues to share with those in attendance, and at the end, she added on some brief information about subsidized guardianship.

When the author made the presentation at the meeting, there were many questions and comments from the group about the GrandRally, but there was even more interest in subsidized guardianship, and the conversation eventually focused solely on this topic. Present at this meeting were Earnest Arcineux, GA State AARP President, Judy Purdue, Project Coordinator of Georgia State Project Healthy Grandparents (2009), Cliff Burt with the Georgia Division of Aging, Mary Lou Vergara with the Area Agency on Aging (AAA), and Nichelle Mitchum. There
was much discussion about the need for assistance for grandparent caregiver families, the kinds of challenges they face, and the sacrifices they make, and there was recognition of the importance of gaining financial assistance for these families.

At the AARP meeting, it was determined that the author should attend the next Clayton County Kinship Care Alliance meeting in order to present the subsidized guardianship issue. This coalition had been developed with the assistance of the AAA because a study had determined that, of the Metro Atlanta counties, Clayton County had the third highest prevalence of grandparent caregiver families, but the greatest participation from the grandparent caregivers and the community (personal communication, Angie Burda, 2009). The author attended this meeting and made a presentation about both the GrandRally and subsidized guardianship. This meeting had an unusually large attendance, perhaps because Eldrin Bell, Georgia state representative, was there to give a speech and to get feedback from his constituents. Present at this meeting were numerous grandparent caregivers from the Clayton County area, Angie Burda, Program Coordinator of the Clayton County Kinship Care Center, Melanie McNeil, Executive Director of the Georgia Council on Aging (GCOA), and Mary Lou Vergara with the Atlanta AAA. There was a general consensus that attempts should be made to pursue subsidized guardianship in Georgia, and Melanie recommended that a survey about grandparent caregiver needs should be developed and disseminated prior to making any attempts at legislation. In this way, it could be determined if there were other significant needs that superseded financial ones. It was agreed that Melanie’s intern, Abby Griffis, would develop the survey, and then others in the group would give feedback about suggested modifications.

After this meeting, the author began attending the Clayton County Kinship Care Alliance meetings on a monthly basis. These meetings were always productive; however, at times they
were not beneficial for the author because of the travel time and cost, and also because so much of the meetings dealt with only Clayton County concerns and not more inclusive issues, such as the legislation. At some point, the author voiced this issue, as did others who attended these meetings from outside the area, and the Georgia Kinship Care Coalition (GKCC) was formed in March of 2005 (Kinship Care Services, 2009).

At the Clayton County meetings, the survey was edited and finalized, and then Mary Lou Vergara distributed it (Appendix E) by giving it to program coordinators so that they could give it to their members. The survey consisted of one open-ended question asking participants to list three things that are most difficult as they raise their grandchildren. Next, they were asked to rate how often they experience difficulties in such areas as food, clothing, financial, transportation, etc. The options included “almost always,” “often,” “sometimes,” “rarely” and “never.” Finally, respondents were asked to make any additional comments on the back side of the survey. A total of 115 surveys were completed, and the results were tallied. The results of this survey were used to develop a Georgia Grandparents Caregiving Factsheet (Appendix F) that also included statistics about the U.S. and Georgia. The overwhelming need identified was for financial assistance, and many of the other issues that occurred in high numbers also had their roots in financial insufficiency, such as the need for legal assistance, child care, food and clothing.

At some point during the Clayton County meetings, it was determined that some type of reception for legislators should be held to raise their awareness about grandparent caregivers in Georgia and the importance of gaining financial support for those living at or near the poverty level, and planning ensued for this event. On March 2, 2005, the Legislative Breakfast was held at the Capitol Building (Angie Burda, personal communication, August 10, 2009). Many grandparents attended, as did staff from service agencies. Senator Nancy Schaefer and two other
legislators attended. Before this meeting, the Fact Sheets had been distributed to all legislators, the governor, the lieutenant governor, the secretary of education, secretary of state and others, along with an invitation (Appendix G) to the Legislative Breakfast.

Preparations now began for the Coalition of Advocates for Georgia’s Elderly (CO-AGE) (Georgia Council on Aging, 2009) agenda setting meeting that would be held that summer on July 14, 2005. It was believed that getting on the CO-AGE legislative agenda would significantly increase the chances of getting a favorable response from the Georgia General Assembly. Cheryl Schramm, who was the director of the AAA, headed up this effort. She shared the history of CO-AGE with the group. Sometime in the 1960s or ‘70s, members of the General Assembly approached leaders in the aging community and told them there were too many competing agencies, groups, and advocates for aging issues and that these issues would be more effectively addressed if there were a coordinated and centralized body. CO-AGE was developed through the Georgia Council on Aging as a result of these conversations. CO-AGE functions by holding four annual meetings, the first of which determines the legislative agenda each July. The second is held in October, and its purpose is to educate members about the legislative agenda and to share the results of work groups that have met in the summer and early fall to develop ideas for the legislation. The third meeting is held in early January just before the legislative session begins and is designed to do the final preparation work. The last meeting is held in April, and the results of the lobbying efforts are provided.

In preparing for the July 2005 CO-AGE meeting, Cheryl Schramm told the group that a large turnout by grandparents and others supporting the grandparent legislation would greatly increase the likelihood of getting on the agenda. All the members of the groups agreed to attend the meeting and to get as many grandparent caregivers as possible to attend. Cheryl, with the
help of Angie Burda (personal communication, August 10, 2009), developed the one-page proposal to be submitted to CO-AGE. This proposal was put in a packet with all of the other proposals for potential legislation and sent to the attendees, so that they could study them before the meeting.

**CO-AGE Meeting**

On the day of the meeting, July 14, 2005, there were approximately 60 grandparent caregivers, staff of related agencies and others in support of the legislation in attendance. The meeting room held approximately 30 tables, and participants were assigned to a table in advance by GCOA staff. CO-AGE staff distributed attendees who belong to the same group or who work for the same agency at different tables so they were not concentrated at only a few tables; in this way there is more discussion among people who come from various organizations. In the case of the grandparents, this meant that each table had at least one, and often two, grandparents, service providers or other supporters per table. Each of the proposed agenda items was presented to the group with a 3 minute time limit. At lunch, the attendees at each table discussed the proposals and eventually voted, and the top 3 items were selected. The CO-AGE staff then tallied the results from all of the tables and announced the winners. The proposed grandparent legislation was the overwhelming number one legislative agenda item selected. Dr. Stacey Kolomer was very impressed with the grandparents’ attendance in such large numbers and their advocacy:

…and it was just amazing how they totally crushed every other issue because they were really strong advocates. It was one of those times when I wished I’d had a class with me… it was just such a great lesson…because there were very important issues, but when you only have 2 or 3 people showing up and advocating for it…it gets squashed…it doesn’t really have the opportunity to really come to the front. And here you had 45
The group selected three legislative agenda items and two budget items. The fact that the grandparent issue was presented as a legislative and not a budget item was significant because there were many questions raised about where the requested 1.2 million dollars would come from. At the end of the meeting, participants signed up to be a part of the working group for each agenda item. The working groups were charged with developing the legislation to be presented at the General Assembly.

**Working Group**

The working group met four times at 2 Peachtree Street in Atlanta, the DHR building where GCOA is located. The meetings were held on August 16, August 29, September 8, and October 12 (Abby Cox, personal communication, September 14, 2009) and were led by Melanie McNeil and Matthew Malock of the Georgia Council on Aging. Participants who were present at a majority of the meetings included Mary Lou Vergara, Angie Burda, Judy Purdue, Sherry Neal with the Grandparent/Relative Caregiver Project at Atlanta Legal Aid (2009), Cheryl Schramm, and a law student intern at the Georgia Council on Aging, Kim Raymond, Coordinator of the Senior Citizen Advocacy Project with the Georgia Gerontology Society (2009) and the author. Others who attended on a less regular basis were Dr. Stacey Kolomer, grandparents from the Atlanta grandparent groups, and interns from Northeast Georgia Project Healthy Grandparents.

The major issues that were addressed at the Work Group meetings included the following:
**DHR policy vs. legislation.** One of the issues raised involved whether or not the focus should be on trying to get legislation passed or attempting to get DHR to implement a policy. On the face of it, getting a DHR policy in place should have been the easiest method for achieving this goal because it would only require a decision and then implementation on the part of DHR, as opposed to the enactment of a law; however, as will be discussed later, this might not have been feasible at all because it would have required the backing of DHR commissioner B. J. Walker, who was opposed to the legislation and would have likely been opposed to such a policy. The obvious downside of the policy option was that undoing it would be as simple as making a decision to do so whereas a legislative change would require a vote. The obvious downside of choosing the legislative strategy was that it would take a great deal of effort to achieve, and, of course, the outcome was unknown. The legislative option was selected because it would be difficult to undo should it pass, and other strategic options flowed from that.

**Focus on grandchildren or grandparents.** The discussions began with a focus on the grandparents’ needs as much or more than on the grandchildren’s needs; however, over time, a consensus developed that the focus should be on the grandchildren. It was believed that this emphasis would somewhat reduce concerns about fraud. It was believed that legislators might be concerned that grandparents would spend the subsidy on such things as beer, cigarettes and other inappropriate items (Angie Burda, personal communication, August 10, 2009). By focusing on the grandchildren and such needs as food, shelter, clothing, and transportation, it was believed that legislators might be more favorably disposed to supporting the bill.

**Requirement of criminal background checks.** Service providers and grandparents did not want the legislation to require criminal background checks. Their argument was that the grandchildren were already in their care, and, in many instances, DFCS had facilitated their care
of the children by bringing them to the grandparents at the time of a substantiated report; DFCS did not require a background check at this time, and so the question was asked ‘why.’ Melanie and others argued that the legislation would be much more appealing to legislators with the criminal background checks because the State would have confirmation about the capacity of the grandparents to raise the grandchildren.

Requirement of legal custody. There was a lot of debate over whether to require grandparents to get legal custody of children in order to receive the subsidy. Some states do not require this, at least initially. Louisiana requires that grandparents or other relatives get custody within one year of being eligible and receiving the subsidy. Several work group members found this appealing; however, because of the concerns over how this bill would be perceived by legislators in light of possible fraud, it was decided that grandparents would need to have custody to obtain the subsidy. Several group members were concerned that legislators would believe that grandparents who were not actually caring for their grandchildren would receive the subsidy. It was believed by the group that requiring the grandparents to have legal custody of the grandchildren would allay the concerns of the legislators.

Other relative caregivers. While the issue arose out of the needs faced by grandparent caregivers, there were obviously other relative caregivers such as aunts and uncles, cousins, and siblings who could benefit from the subsidy. The conclusions that developed in response to this issue were that the request should be limited to grandparent caregivers in the hope that, hopefully, should the legislation pass, it might then be expanded at some future point to include other relative caregivers. The request was limited for two primary reasons: 1. the desire to limit the amount of money requested, as opening the bill up to other relatives would greatly increase
the cost and 2. maintain the desire to focus so that the bill would be recognized with grandparent caregivers.

**Pilot program.** At one point, Melanie recommended that the group consider proposing a pilot program, as opposed to asking for all eligible families to receive the stipend. One of the major concerns expressed by members of the work group and others familiar with the proposed legislation was about how it would be funded and the amount of money it would take to fund the legislation. It would certainly run into the millions, and it was agreed that this was probably one of the major stumbling blocks related to the legislation. Melanie shared that using a pilot program was a common way of enacting legislation that sometimes could get more funding later on and include more recipients as the effectiveness was demonstrated. This concept was immediately accepted by the group, and then details about the pilot program were developed. It was decided that 1500 families would be served and that being part of the pilot program would require participation in a program such as the Clayton County Kinship Care Center or PHG, for example.

**How to administer the program.** One of the working group’s questions involved which DHR department should administer the program. Once it was decided that the legislation would involve the pilot program, it was decided that, as a cost-saving strategy, programs such as Project Healthy Grandparents and Clayton County Kinship would be responsible for administering the program, verifying eligibility and performing monthly monitoring to ensure that the grandchildren were still in the care of the grandparents.

**Special needs children only.** In other states with this type of legislation, eligibility rules often required that the children meet special needs criteria. In Georgia, special needs children are defined as minority, sibling groups, age 8 or older, and/or with a disability. The group didn’t
spend much time deliberating this issue, and it seemed to be generally assumed that we would not include this eligibility criterion. There was concern that determining that a child is disabled could be difficult and also concern that many families that could urgently benefit from the funds did not have special needs children (Angie Burda, personal communication, August 10, 2009).

**How to monitor participants.** In several states with similar legislation, in addition to requiring proof of legal custody, evidence or proof of the fact that the grandchild(ren) currently resided in the home was required. Some states required this on a bi-annual basis, and others required it on a monthly basis. Because Melanie and others felt that the fraud potential of the legislation would be paramount in the minds of the legislators, she pushed hard for the monthly demonstration. Service providers were very strongly opposed to this because of the burden it would place upon them, but, in the end, the work group agreed to Melanie’s recommendation.

**Power of attorney.** At some point, Melanie became aware that AARP was becoming very involved in various states, including Tennessee, in pushing for a special type of power of attorney that would provide a simple and inexpensive way for relative caregivers to obtain decision-making authority they need to do such things as enroll children in school and give consent for medical care. As described in the Literature Review, other types of legal relationships in Georgia that would grant this decision-making authority are temporary guardianship, permanent custody and adoption.

While the power of attorney provides decision-making authority for grandparents, it does not require a judge to make a change in legal custody, which can be very expensive. Melanie urged the group to consider adding the power of attorney to the legislation, and there was much debate over this issue. First, the service providers in the group and Sherry Neal were opposed to the power of attorney because it is a very weak legal connection for grandparent caregivers. It
requires the consent of the parents and can be undone based on their decision alone. Most of the service providers were used to dealing with situations where it was not desirable for parents to be able to regain custody by their own choice because of such issues as substance abuse and addiction, getting the children for brief periods of time and then returning them, not providing a stable home environment for them, and, in some cases, desiring to have the children in their care for the purpose of getting welfare benefits. There was a lot of discussion/education about this issue because Melanie and others less familiar with the issue had heard the service providers express the need for legal custody, so she didn’t understand why the group would not be in favor of the power of attorney. Once the conclusion was reached that politically it would be smart to request this power of attorney, discussion turned to whether to write two separate bills or one bill with two parts. Melanie’s sense was that the power of attorney would pass more easily than the subsidy, so the decision was made to have one piece of legislation with the power of attorney (which would cost very little) and the subsidy, and to hope that perhaps the power of attorney would ‘carry’ the subsidy.

**Where should funding come from?** In a number of states, TANF waivers were being used to pay for subsidized guardianship. Melanie and Cheryl were virtually certain that TANF would not be used in Georgia because of the lack of support from DHR Commissioner B. J. Walker, who, as is described later in this section, had voiced her opposition to the bill. There was much discussion about other possibilities, and some group members kept returning to the notion of foster care money. However, this could never be an option as long as the children were not in state’s custody. Some proposed joint state and grandparent custody, but it was generally agreed upon that this was an impossible scenario. As the beginning of the legislative session
approached, no definitive ideas to arise about this issue had arisen, and so it was not specifically mentioned in the bill.

While the work group was meeting, other meetings were taking place with Melanie and other legislators to solicit support for the bill. Senator Renee Unterman (R, 45th), the only social worker holding elective office in the State of Georgia, as well as being a registered nurse, showed a strong interest, and it was determined that she would be the sponsor. Senator Unterman is a Republican, and this was important because they held the majority in the General Assembly. Melanie had decided to introduce the bill on the Senate side and not introduce it on the House side at the same time because of the limited resources available (i.e., there were not enough people to simultaneously work both sides of the General Assembly) but also because it is important, according to Melanie McNeil (personal communication, March 28, 2009), for someone to have ownership of the bill, which is difficult if it is introduced simultaneously to both sides. In the House, Representative Judy Manning (R-32), chair of the Children and Youth committee, was showing some interest and support, but rather than associating herself directly with the bill, she instead chose to support a newcomer to the House, Representative Jeff May (R-111), who initially showed strong interest in the bill. Representative Manning had been around the General Assembly for a long time and believed that she was something of a ‘lightning rod’ because she championed social causes for children and families and often garnered attacks from her more conservative colleagues (Melanie McNeil, personal communication, March 28, 2009). Judy felt that her involvement behind the scenes might be more effective, and that if Jeff May were successful in sponsoring the bill, then she would look good, he would look good, and the bill would look good, as well. She suggested that Representative May sponsor the bill in the House; however, he eventually turned against the subsidy and wanted only the power of attorney
portion in the bill. In fact, it can be said that he became somewhat hostile toward the subsidy portion, and he made comments that were very upsetting to one grandmother about the subsidy (Melanie McNeil, personal communication, March 28, 2009). The grandmother who was so distressed by Representative May’s comments was Robin Eschman (personal communication, August 28, 2009), who shared that he told her that she should not require any financial assistance to raise her grandchildren because she can walk and is not disabled. Robin identifies herself as a person with a disability because she is missing one of her hip bones. Muscles hold the joint together and she can walk only with the assistance of a cane. She cannot use a prosthetic device and fusion surgery did not work.

**Winter 2006**

The CO-AGE meeting was held on January 5, 2006. By this point, each working group had developed a one page ‘talking point’ sheet to be given to legislators. Each of the agenda items was explained to the group, and there was discussion and training about how to best support and lobby for them.

The grandparents and service providers, along with Maria Green, Director of the Division of Aging, and Lesley Sessley, met with DHR Commissioner B. J. Walker on February 6. Commissioner Walker was very open and clear about her lack of support for the subsidy. Her concerns appeared to center around two issues, fraud and how to pay for the subsidy. She said that she had been involved with similar legislation in Illinois, and there was tremendous fraud involved; in order to receive financial support grandparents would have their children bring the grandchildren to live with them. Grandparents and service providers tried to explain that this type of fraud was unlikely with this particular bill because legal custody was required, and so simply ‘dropping off’ grandkids would not make a family eligible for the subsidy; however,
these arguments did not sway her. Second, she was very concerned that families where there was little or no dysfunction would receive the funds. Specifically, she said that in the African American culture it is very common for relatives to take care of one another’s children, even when there are not issues of substance abuse, incarceration or child abuse and neglect. She was concerned that such families would be the beneficiaries of the subsidy (Angie Burda, personal communication, August 10, 2009). Third, she stated that it would be impossible to find the funding to pay for the subsidy, and, therefore, it wasn’t worthwhile to make attempts to get it. At the same time, she was greatly bothered by the fact that the request was for a pilot study that would only cover a small number of families in Georgia; however, the paradoxical nature of her arguments must be pointed out, because she had criticized the bill for asking for financial support at a time when she said there was no money available and then stated that there should not be a limit on the number of families for whom funding was requested (i.e., the pilot program), which would result in a much higher cost. Her first stated reason, fraud, appeared to be the most important reason for her resistance. A second meeting was held where she shared plans for a new DHR initiative called Grandparents Raising Grandchildren (GRG) (Georgia Department of Human Resources, 2009). While she had not agreed to the subsidy, she evidently felt that DHR could do more to support grandparent caregiver families. Most of the attendees were not pleased with the initiative, as it did not adequately address the identified needs and concerns. She proposed a plan that included special training for foster grandparents, free childcare for grandparent caregivers, a $50 per month addition to child only TANF payments, a one time only emergency assistance fund for grandparents who had recently taken on the care of their grandchild(ren), and child support recovery assistance. To be eligible for GRG, grandparent
caregivers would have to be 60 and older and/or disabled and have an income at or below 180% of the poverty level.

At a press conference on July 10, 2006, at the Cascade United Methodist Church in Atlanta (Angie Burda, personal communication, August 10, 2009) Commissioner Walker announced the new DHR initiative, GRG. Present at the meeting were staff members who had been directly involved in writing the new policies. Commissioner Walker invited the audience members to talk with her staff following the press conference if there were specific concerns about the policy. The author joined a line of attendees, and when she got to one of the staff members, she expressed her concerns about the requirement that the emergency assistance fund would only be available to grandparents whose grandchildren had recently come into their care. She explained that there were many grandparents who had been caring for the grandchildren for many years but who still had unexpected and difficult-to-pay-for bills arise, such as car repairs and rental deposits. The staff member said that she didn’t believe that had been the intent of the emergency assistance fund and that she would see about changing the wording. It should be noted that this wording was never changed, and grandparents with grandchildren in their care for more than a few months are not eligible for this assistance; furthermore, the “$50 increase” in child-only TANF affected eligibility for food stamps such that grandparents had to choose between the cash and getting a reduced amount in food stamps or continuing to get their current amount in food stamps.

On February 2, 2006, a grandfather with the Clayton County Kinship Care Center arranged for a meeting with Governor Sonny Perdue (Angie Burda, personal communication, August 10, 2009). The grandfather had intended for this to be sit down meeting with the governor and several grandparents so that they could share their stories and support for the
legislation. Governor Purdue was unable to attend this meeting because his office had understood
the meeting to be for a photo shoot only, and he had another meeting to attend immediately
afterwards. Instead, his assistant, Abel Ortiz, attended. Present at this meeting were grandparent
caregivers from Clayton County, Project Healthy Grandparents at Georgia State and PHG. A
number of grandparents spoke about the need for financial assistance, including Brenda
Simmons, a grandparent from PHG. One grandparent from the Atlanta area, referred to as “Mrs.
X” in this document, had a very combative and militant demeanor (personal communication,
Angie Burda, September 9, 2009) and demanded, rather than requested, the passage of the
legislation. Mr. Ortiz stated that he did not think there would be money available in the budget to
accommodate such legislation that could cost millions of dollars. He shared that, just prior to
joining the group, he had been at a meeting where shortfalls in the budget were the topic. After
the meeting, in referring to the Mrs. X, Abel Ortiz told a small group of people including
Melanie McNeil and Angie Burda that “if you don’t get that one under control you’ll never get
anywhere” and “you need to find someone to reel her in or this will never happen” (Melanie
McNeil, personal communication, February 2, 2006; Angie Burda, personal communication,
August 10, 2009). This grandmother had a great deal of passion, on numerous occasions had
very helpful and innovative suggestions, and yet was a continual source of disruption in the
group, who worried about her effect on the passing of the legislation. Angie Burda stated that the
group “had to overcome many obstacles we wouldn’t have had to overcome because of what she
(AFL CIO grandmother) was doing.”

All legislators were invited to a Legislative Breakfast intended to inform them about the
bill. This event was held at the Presbyterian Church across from the Capitol Building on
Thursday, March 1, 2006 (Angie Burda, personal communication, August 10, 2009). Senators
Untermann and Seay spoke, along with DHR Commissioner B.J. Walker. Many grandparents and service providers were in attendance.

**Georgia General Assembly 2006**

Senate Bill 420 (SB 420), called the Care of a Grandchild Act, sponsored by Senators Renee Unterman, Nancy Schaefer, Eric Johnson, Regina Thomas, Seth Harp, and David Shafer, was read on the Senate floor on January 12, 2006 (General Assembly, 2006). At that time, it was referred to the Senate Judiciary Committee. There was much amending, and it was favorably reported out of committee on March 8, 2006. At this committee meeting, the members were not paying much attention as members of the audience gave testimony about the bill; however, at one point, a grandfather from the Atlanta area spoke about his experiences as a caregiver, and the members became quiet and listened attentively.

Throughout February and March, grandparents from the Metro Atlanta area were coming to the capitol every Thursday and were also attending committee hearings (Angie Burda, personal communication, August 10, 2009). In fact, one grandmother, Robin Eschman, stands out because she was at the capitol every day they were in session throughout the entire legislative session that year (Angie Burda, personal communication, August 10, 2009; Renee Unterman, personal communication, August 12, 2009). She became a self-trained lobbyist and remained active throughout this process over the next several years. Angie Burda mobilized the grandparents and helped to prepare them to be legislative advocates. (Please see Appendix H for a training sheet she provided for the grandparents.) Important also was the support of Carl Johnson from the Georgia Center for Marriage and Family Therapists, who attended and testified at numerous committee hearings over the years, the Georgia Chapter of the National Association of Social Workers (NASW), which highlighted the issue at their Student Lobby Days, and the
probate court judges, who initially were opposed to the legislation but who later became supportive (Melanie McNeil, personal communication, March 28, 2009).

SB 420 was read for the second time on the Senate floor on March 8 and then for a third time on March 9. It was put to a vote on the floor of the senate on March 9 and received a unanimous vote, with every senator voting (Georgia General Assembly, 2006; Kim Raymond, personal communication, March 30, 2006). It had been some years since this had occurred.

It was read for the first time on the House floor on March 13, 2006, and for the second time on March 14. It was favorably reported from the House Judiciary Committee on March 22 and then went to the floor of the House on March 27, where it was read for the third time (Georgia General Assembly, 2006). Angie Burda recalls that when legislators were called out of session that morning by the grandparents, they were saying that legislation was not needed because of B.J. Walker’s program, GRG, and that this “would take care of it” (Angie Burda, personal communication, August 10, 2009). The grandparents were very disheartened to hear this because they believed that GRG did not adequately address their needs, and they continued to call out more legislators.

There was much debate on the floor of the House, and the bill received a majority vote (122 to 39) to be recommitted to the Rules Committee (General Assembly, 2009; Kim Raymond, personal communication, March 30, 2006). The debate centered around one issue in particular. Democrats and Republicans were upset and concerned about having to explain to their constituents that not all grandparent caregivers would be able to receive the subsidy because the pilot study aspect greatly minimized the number of families that could receive it. Also, there was the requirement that recipients be connected with a grandparent caregiver support program, and all of those listed in the bill were from the Metro and North Georgia areas, so it appeared to
many Democratic representatives that the bill was targeted toward affluent grandparents because the bill had a Republican sponsor who resided in North Georgia (Melanie McNeil, personal communication, March 28, 2009). Sue Burmeister (R-119), the House sponsor of the bill, was unprepared for these arguments and was not very persuasive against them (Melanie McNeil, personal communication, March 28, 2009). It should also be noted that politics were possibly at play in the death of this bill. It was said by numerous observers that the Senate was holding hostage a piece of very popular House legislation (possibly having to do with a gas/light bill) and refusing to vote on it (Atlanta Journal Constitution, 2006). Since SB 420 had received a unanimous result, with all Senators voting, then holding it hostage would be an ideal method of returning the favor, so to speak. This was the last day of the legislative session, and because this was the end of the 2-year cycle for the Georgia General Assembly, this would mean that attempts to get this legislation passed would have to begin all over again during the 2007 legislative session. The group decided to attempt to get the legislation passed again and also decided to have CO-AGE support, if possible, so the process began all over again. This last day of the legislative session, called “sign and die,” resonated particularly with Senator Renee Unterman, who wanted her memories of the grandparents’ commitment to be included in this document:

…the night we were in session on sign and die when we literally had 60-, 70-, 80-yr-old people…with politicians running them back and forth and back and forth, and them on the rope line and them sitting in the hall and standing on a marble floor which is terrible on their legs and they were so committed and they were so heartbroken and that’s what made me come back the next year… (personal communication, August 12, 2009).
Many grandparents from the Clayton County Kinship Care Center, including Robin Eschmen, stayed at the Capitol until after 11 p.m., hoping that the bill would be put to a vote and pass, but this did not happen.

**Summer 2006**

Angie wrote/edited the one page handout to be given to CO-AGE and included in their packet (personal communication, Angie Burda, August 10, 2009). At the CO-AGE Agenda setting meeting, grandparents, service providers and others in support of the Care of a Grandchild Act showed up in large numbers for a second time, and the proposed legislation was the number one budget item. Those interested signed up for the work groups at the end of the meeting.

**Fall 2006**

The work group met twice on August 17 and August 30 (Abby Cox, personal communication, September 14, 2009) because there were very few changes from the previous year. One major change involved specifically stating that the subsidy would be available across the entire state of Georgia. This happened in response to the perception by a number of representatives during the 2006 General Assembly that the bill had been written to benefit those in the Metro Atlanta area and other parts of North Georgia. To address this concern, the subsidy would be made available in each of the 12 regions through the AAA’s.

The amount requested was increased from 1.2 million to 7.6 million dollars in order to pay for the additional families. Melanie suggested that the subsidy be given in the format of an Electronic Balance Transfer (EBT) card similar to how food stamps are given. Dr. Stacey Kolomer and the P. I. proposed that a study be done that would compare the EBT card to cash. They were particularly concerned that an EBT card might be of more limited use in rural areas.
Dr. Kolomer and the author developed a short proposal for this study and submitted it to Melanie; they then met to discuss it. However, Renee Unterman informed Melanie that such a study cannot be legislated. Also, Melanie discovered that EBT cards do not have a chip with the information about products that can be purchased on it, but rather, each store has to do the programming in their system. Small stores rely on the employees to determine if purchases are appropriate. Melanie ended up recommending that the subsidy be made available through the use of a card, which is used at automatic teller machines, similar to the system used by TANF. Using this system solves the problem that can be created by checks not arriving or being lost in the mail.

On November 9, there was a Grand Advocacy Training held at the Adamsville Recreation Center in Atlanta. This event was sponsored by the Georgia Council on Aging, the National Association of Social Workers (NASW), AARP, the Atlanta Regional Commission, and Project Healthy Grandparents at Georgia State University. The purpose of the meeting was to provide training in effective advocacy to assist with the passage of the legislation. Approximately 35 grandparent caregivers, service providers and other interested individuals were in attendance.

**The 2007 Georgia General Assembly**

**The Senate.** The Care of a Grandchild Act, this year designated Senate Bill 88, sponsored by Senators Renee Unterman, Valencia Seay, Tommie Williams, Nancy Schaefer, and Eric Johnson, was read for the first time in the Senate on January 31, 2007, and referred to the Senate Judiciary Committee (Georgia General Assembly, 2007a). Senate Bill 88 was considered by the Senate Judiciary Committee on February 27, 2007, and was the last bill to be discussed. By the time SB 88 was up for debate, at least one or two committee members had left the
meeting. There was some discussion among the committee members and Bill Cowsert (R-46) asked for clarification and an amendment. He had found a contradiction between the power of attorney portion of the bill and the subsidy; that is, power of attorney was not recognized in the legislation as a legal relationship that would allow for receipt of the subsidy. It was agreed that the bill would be amended to allow grandparents with power of attorney for their grandchild(ren) to obtain the subsidy if they met the other criteria. Then the chair of the committee, Preston Smith (R-52), said that he knew that there were audience members who had signed up to testify, but that they were losing committee members and could lose a quorum; he said that the committee wanted to vote in favor and suggested that the audience not interfere with this. Of course, those in attendance to support the bill were pleased to hear this and made eye contact around the room, indicating that no one needed to testify; however, Mrs. X raised her hand and in a very strident voice said that the 200% poverty line cutoff was not fair because and questioned how it would help those below that line (she didn’t understand that it was 200% and below who would be eligible). She also was upset because she believed that only those served by the Metro Atlanta AAA would be eligible for services. The chair of the committee tried to explain these points to her, but it was not clear that she understood him. He, nevertheless, moved and asked for a motion to put the bill to a vote, and it was unanimously reported out of the committee (personal communication, Angie Burda, August 10, 2009).

While the bill was working its way through the Senate, grandparent caregivers and service providers were calling senators out of session to ask for their support. Angie Burda and the grandparents had worked out a great system the previous year, and this was followed again, with Angie keeping track of which senators had been approached and whether they were favorably disposed to the bill.
Several grandparents from Northeast Georgia PHG and one intern, Tammy Merck, visited the General Assembly several times during this period and assisted with calling out senators. Most were favorably disposed; one was not familiar with the bill but said that he thought a great deal of Renee Unterman and would likely vote in favor. The most memorable senator was Bill Heath (R-31). He was strongly opposed to the legislation; he believed that it would support and reward grandparents who had made serious mistakes the first time around with their own children. One of the grandparents with PHG shared her own story with him, but he was not moved to change his opinion. The author shared that often grandparents have successfully raised children who are now raising their own children, but none of the adult children’s has gone “off track,” and thus calling these grandparents failures is very inaccurate. Nothing that was said moved him to change his mind. When this conversation was reported to Angie Burda, she stated that she had spoken earlier with him because he represents the district where she lives (personal communication, August 10, 2009). He had also told her that he was opposed to the legislation. She reminded him that he had voted in favor of it during the 2006 General Assembly; he adamantly denied this, but she told him that it had been a unanimous vote with all senators voting, so he had to have voted in favor.

SB 88 was read for the second time on the Senate floor on February 28. It was read for the third time March 1 and was voted on, passing with a 55 to 1 majority. Only Senator Heath voted against it. Before the vote he asked to be recognized and spoke for a time about his opposition to it, focusing mostly on the “rewarding failed parents” aspect (Georgia General Assembly, 2007b). A number of legislators spoke in response to his comments. Senator Unterman said that this is a “family preservation bill” and that grandparents would also be getting assistance from groups like the Clayton County Kinship Care in terms of parenting skills,
etc. Senator Seay spoke about the issue of parents with multiple children, most of whom turn out successfully, while one “goes off track.” See Appendix I for a copy of SB 88.

**The House.** SB 88 was read for the first time on March 19 and for the second time on March 20 and referred to the House Judiciary Committee. On February 27, it was presented to the Judiciary Committee (Georgia General Assembly, 2007; Kim Raymond, personal communication, February 28, 2007). There were many supporters in attendance, including grandparents, service providers, and Maria Green, the Director for the Georgia Division of Aging.

Not long after this, the House sponsor, Representative Wendell Willard (R- 49) decided he did not want SB 88 to go to the floor of the House because he did not believe there was enough support to get a majority vote. Evidently, Renee Unterman felt differently and approached him about taking it to the floor, but he refused to do so. When the legislative session ended, because this was the middle of the 2-year legislative cycle, SB 88 would remain in the House Judiciary Committee, where it would begin its journey during the 2008 legislative session. There was no need to return to CO-AGE for support because this would continue into the next session, as well.

**The 2008 Georgia General Assembly**

On January 29, 2008, the House Judiciary Committee held a hearing on SB 88 (Georgia General Assembly, 2008). Senator Unterman presented SB 88 and stated that, although some believed this bill was big government getting bigger, it was not true because the Georgia government already had the Relative Care Subsidy, which gives a subsidy to relatives who remove children from foster care (personal communication, August 12, 2009). Shirley Hitchcock, a grandparent with Northeast Georgia Project Healthy Grandparents in Athens,
Georgia, and Robin Eschman, a grandmother with the Clayton County Kinship Care program, both provided testimony in support of the bill, and it passed out of the committee unanimously. The bill was sent to the House Rules Committee. Grandparents from Fulton, Clayton and Athens-Clarke County spent all morning on January 31 calling out and speaking to members of the Rules Committee.

At some point in late February or early March, Melanie McNeil made the decision to pull the subsidy from SB 88 and to continue with only the power of attorney portion. She felt that the bill had no hope of passage that year with the subsidy included, and that it was important for the hard work of its supporters to get some reward. Service providers and grandparents were very disappointed by the removal of the subsidy but understood and respected Melanie’s reasoning. SB 88 passed the House (139 in favor and 3 opposed) and was signed into law on May 13, 2008, by Governor Purdue (Robin Eschman, personal communication, August 28, 2009; Georgia General Assembly, 2008; Kim Raymond, personal communication, May 30, 2008).

**Summer 2008**

For the third year, the grandparent caregiver subsidy legislation became a CO-AGE agenda item at the summer meeting, and then a work group was formed.

**First CO-AGE Workgroup Meeting**

The workgroup met in Atlanta at DHR on July 17. Present were Libby Griffis, who replaced Matthew Malok at the Georgia Council on Aging; Mary Lou Vergara; the GCA intern; Robin Eschman; Melanie McNeil; Dr. Stacey, UGA School of Social Work faculty and President of the Board of Directors for the Athens Community Council on Aging, and the author (Abby Cox, personal communication, September 11, 2009). Melanie began the meeting by summarizing the situation with the House and the fact that she believed that it will be impossible to get a cash
subsidy for the grandparents, suggesting it might be better to attempt to get an in-kind benefit. She suggested three different possibilities: (a). trying to get Georgia Lottery money, because it needs to go for educational purposes, to use it for grandkids’ school outfits, field trips, and other school related items, (b). partnering with the Board of Education to provide the grandkids with school uniforms, etc., particularly for those children with special needs, or (c). trying to work with housing groups to get some sort of housing benefit.

Before discussion of the three options there was general agreement that obtaining a subsidy would probably be impossible. The representative from Legal Aid also raised the idea that the effort should be broadened to include other relative caregivers because of the stigma attached to grandparents as failed parents. There was much agreement to this suggestion. At one point, the author made the suggestion that an attempt be made to get the subsidy but greatly reduce the requested amount to $1 million, but the consensus was that that obtaining cash assistance for the grandparent caregivers is not possible in the foreseeable future, and the discussion turned to Melanie’s ideas. A number of the group members agreed that the Georgia Lottery suggestion was interesting, and Robin agreed to look into that before the next meeting. There was no discussion regarding specifics such as how much to request. There was a lot of discussion about housing and there was a lot of support among the group members. The Legal Aid person was very interested in this possibility and suggested that because of issues facing the country regarding housing, obtaining housing benefits this might be feasible. One possibility that was discussed at length included the possibility of grandparent caregivers being given special priority so that they could be placed high on the Housing Authority waiting list.
2nd Workgroup Meeting

The second work group meeting occurred on July 31, and the following persons were in attendance: Abby Griffis; Tanisha Foster, GCA intern; the author of this document; Sandra Muckle and Denna Scott with the Achor Center; Deborah Whitley with Georgia State Project Healthy Grandparents and the National Center on Grandparents Raising Grandchildren at Georgia State; Robin Eschman; Angie Burda; Lindsay Verity; Diana Rusk; Mary Lou Vergara and Ann Williams (Abby Cox, personal communication, September 11, 2009). The group introduced themselves, and then Abby gave a brief history of CO-AGE. The author stated that she felt very strongly about continuing to pursue the subsidy rather than the strategies proposed at the previous meeting. She also suggested that the group revisit the idea of a “debit card” similar to that given for food stamps and to teachers to purchase school supplies. The debit card could be used to purchase only certain items for the grandchildren.

The group then got reports from those who had researched the strategies proposed at the previous meeting. Lindsay Verity and Diana Rusk researched states that have implemented Section 8 preferences, such as New Jersey. However, Lindsay felt that giving priority to grandparent caregivers for Section 8 housing would still require long wait times, and she believed that a better use of time would be to explore a pool of money that could be used for utilities, deposits, and paying property taxes. The money would be sent directly to the landlord or billing agency. Lindsay suggested that the funds might come from the Department of Community Housing.

Sandra Muckle and Denna Scott gave an overview of the Achor Center, which is a private agency that provides housing for homeless single grandmothers, homeless persons 55 and older, and single homeless women who are 62 and older. The agency provides a variety of social
services, including linking residents to resources, independent life skills training, health and wellness workshops and stress management skills. While the agency provides an excellent model of housing for grandparent caregivers, it is private and is located only in the Metro Atlanta area, so there did not appear to be much that was useful for assisting us with our proposed legislation.

Next, Deborah Whitley stated that the housing initiative might be a good strategy because this issue has garnered so much momentum recently. She also agreed that a pool of money might be a good strategy because it might be used to prevent foreclosures.

Tanisha reviewed an email that she received from the Georgia Lottery that outlined the Georgia Lottery Act. The Act outlines four specific uses for the lottery money, which did not appear to apply to our concerns. Robin stated that she had attempted to get in touch with the Georgia Lottery Corporation but had received no response.

Abby reported that she had attempted to contact an official with the Department of Education via email and phone but had not received a response.

The group returned to the subject of the subsidy, and there was general agreement that it was important to pursue this option. Kim Raymond raised the point that CO-AGE had actually voted on the subsidy as their agenda item, and it probably should not be changed. There was discussion of the possibility of combining the housing legislation with the subsidy, but it was felt that the subsidy would again be excluded, so this was rejected.

3rd Workgroup Meeting

At the third workgroup meeting on November 4, Abby shared that she and several others had met with Senator Unterman on October 27, and Senator Unterman would not be sponsoring the legislation this year. Senator Unterman had warned them about the budget crisis and said that they would be lucky to hang onto the money they had and should not expect any expenditures for
new items (Abby Cox, personal communication, September 11, 2009; Renee Unterman, personal communication, August 12, 2009).

By the time the General Assembly began the 2009 session, a sponsor for the bill had not been found. Angie Burda (personal communication, August 10, 2009) has stated that the Clayton County grandparents are ready and willing to pursue the legislation again next year. Robin Eschman also believes that the grandparents will come back and continue to advocate for a grandparent caregiver subsidy; although she is mindful of the current economic situation, she believes that “they should take the time and do the planning while the economy is bad to fight, so they’re ready when the economy turns around” (personal communication, August 27, 2009). Dr. Stacey Kolomer shared similar views about the need to continue to attempt to get this legislation passed:

Because it’s still a need…I mean the grandparents are still struggling probably even more so now…the issue continues to be there…it’s not going away…it’s not like all of sudden there are less people raising their grandchildren…there’s even more….we know there’s going to be even more…and it’s something that should be funded…I really believe these families need help…why would you help people who take in strangers more than their own family members? (personal communication, September 1, 2009)

**Analysis of SB 88 with Jones Policy Process Model**

As described in the Literature Review, Jones’s Policy Process Model (1984) was selected to analyze the development of the Georgia bill and the development, passage, and implementation of the Florida law. Jones provided the most complete process model of all of those investigated for this study. In 2004, Charles O. Jones was named the Non-Resident Senior Fellow at the Presidential Oral History Program at the Miller Center of Public Affairs. He is the
Hawkins Professor Emeritus of Political Science at the University of Wisconsin-Madison and a non-resident fellow in the Governmental Studies Program at the Brookings Institution. He developed the Policy Process Model in the 1960s and early 1970s, largely in response to the “institutional process approach” (p. 3) that essentially used a black box approach to policy analysis, that is, that policies come solely from within one branch of government, the legislative, executive or judicial. Instead, he believed that “cross-institutional and interlevel policy relationships” (p. 3), or interactions between many people and groups both inside and outside of government lead to policy development. With this approach he highlights how the problem is defined, how groups develop and organize to address the problem, and then how government acts on the problem. The policy process model has been used to study the re-structuring of the Arkansas financial system (Ledbetter, 1979) and school desegregation in Portland, Oregon (Heflin & Douglas, 1980).

Jones’s Policy Process Model was used because of all of the process models considered, it was the most thorough, and addresses the most obvious process aspect, i.e., stages, all of which must occur, but which don’t always occur in order.

**Problems to Government – Perception/Definition**

Jones’s Model (1984) requires that a problem first be perceived and defined. As the Project Coordinator for PHG, the author had observed firsthand the circumstances under which the families in this program were living. If the major goal for the grandparents was to provide stable living circumstances for the grandchildren, it became readily apparent that for many families this was a desirable and yet very difficult objective to achieve. From eviction notices to not having food on the table; from not having enough clothing for growing children, to having utilities cut off; from not having enough gasoline in the car to get to important events such as
school meetings or doctor’s appointments to the grandparents foregoing their own essential medications, these financial challenges were the source of much stress and instability for the families in the program. Of course, these families were also experiencing the emotional stress of dealing with grandchildren who had been neglected, abused and/or abandoned and the financial problems only served to heighten the emotional stress. Project Healthy Grandparents has available a small legal fund to pay for name changes, wills, custody changes and adoptions; however, if this pool of money ran out, then the grandparents were on their own with this very important strategy for providing legal stability for the grandchildren. Additionally, if the custody change or adoption were contested by the biological parents, the program could not always assume responsibility for legal fees, as they increase dramatically when the parents do not voluntarily consent to a custody change or adoption.

What were the sources of the financial problems, and therefore the definition of the problem? Grandparent caregivers included grandmothers in their 70s and 80s, who had long since retired and were living on Social Security, which simply did not provide enough to cover for all of the costs associated with raising the grandchildren. Some families had one grandmother who was working, but whose income was not sufficient to provide for the family. Often it was the case that the grandmother had not graduated from high school and had not completed a GED, and the kinds of employment available to her could not provide an income sufficient to meet her needs and those of her grandchildren. There were grandmothers living on Social Security disability or SSI disability, funds that could barely cover their own needs, let alone that of their grandchildren. Complicating all of this was the fact that in many families, the biological parents were providing little or no child support or irregular child support. And, of course, these
families’ circumstances were further complicated by the availability of very few resources to help them

Prior to actually defining the problem, Jones (1976) stated that perceptions have to occur. Perceptions include the “reception and registering of an event through sight, hearing, touch, and smell” (p. 52). In this case, observations were made about grandparents raising grandchildren on very low incomes and all of the complications that occur as a result. Definition relates to a problem, i.e., “something happens; someone perceives it in a particular way and defines it as a problem” (p. 52). Thus the problem in Georgia was not defined until the decision was made to attempt to get legislation similar to that found in Florida, Louisiana and Missouri. The definition involved low income intergenerational families who did not have the ability to increase their income significantly, as well as a lack of sufficient welfare or other programs to assist them with the costs associated with rearing children. Additionally, assistance was not readily available for this population because of the long-standing tradition in this country of considering children being raised by relatives as a private concern rather than a public one, with the resulting disparity in funding for children in foster care as opposed to relative care (Hegar & Scannapeico, 1995).

As the author attended meetings and shared the concerns and observations that had led to the idea of subsidized guardianship without prior foster care, these same observations and concerns were echoed by service providers and grandparents in other parts of Georgia. Also, Census 2000 statistics and the literature related to grandparent caregiving both substantiated the notion that financial instability was a problem for a significant portion of this population. Additionally, the attention given to this issue had attained national prominence as demonstrated by the GrandRallies in Washington, D.C., attempts by Hillary Rodham Clinton and others to pass

Although there was a general awareness of the financial problems faced by skipped generation families, Melanie McNeil, Executive Director of the Georgia Council on Aging and lobbyist for CO-AGE, recommended that, prior to developing legislation a survey be conducted about the needs faced by grandparent caregivers. The results of the survey overwhelmingly supported the fact that the most important need was for financial assistance.

Was this definition of the problem maintained throughout the writing and lobbying for the policy? For those involved in the legislation, the subsidy was the most important part of the bill; however, for many, the power of attorney was the deciding feature. When the bill went to the Senate floor during the 2006 session, many legislators were asked to be recognized and spoke in support of the bill, mentioning only the power of attorney portion. There was much mention made of the Iraq war and how this legislation would support children whose parents were deployed overseas. Only one senator made passing reference to the subsidy portion when he spoke of “providing support” to families. During the 2007 session, when the bill came to the floor, there was little or no mention of the power of attorney, and all of the focus was on the subsidy. Many senators were recognized and spoke in support of the bill, and many of them were responding to Senator Heath’s rather passionate stance against the bill. The addition of the power of attorney to the bill, while it did not change the definition of the problem, did serve as a distraction at some points.
Aggregation

The public formed with a few members who were consistently involved in most aspects of the development of the bill, others who were involved during some parts of the process and others who were involved more briefly. Those who were consistently involved included Melanie McNeill, Mary Lou Vergara, Angie Burda, Sherry Neal, Kim Raymond, Cheryl Schramm, and Robin Eschman. Those who were very involved at some points but not consistently throughout the whole process were Cliff Burt, Lesley Sessley (then known as Leslie Green), and many grandparent caregivers living predominantly in the Metro Atlanta area, but some coming from Northeast Georgia and other parts of Georgia. The author was very actively involved but, because of geographic constraints, not as much as she would have liked. All of the very active members of the public mentioned above either work and/or live in the Metro Atlanta area, and the author lives and works in Athens, and thus location seemed to be an important determinant for very active participation in this project. Participants in this process represented service organizations, the aging community, grandparent caregivers, and legal services that were directly involved in providing legal services to grandparent caregivers.

As was the case all over country, the cause of grandparent caregiving was represented in Georgia by those in the aging community, but not anyone with a family or child focus. This was important for several reasons. During the initial meetings of the CO-AGE work group, the primary focus was on support for the grandparents and/or the family as a whole. Over time, the group became more and more aware that issues of fraud were going to be extremely important to legislators, and because of this, the focus of the proposed legislation shifted to the grandchildren and the bill was named “The Care of a Grandchild Act.” This switch moved the bill closer to the realm of public concerns and away from private ones; thus, it was hoped providing more
legitimacy for the problem. Second, there was a lot of contact with the Division of Aging, which was supportive from the very beginning. Georgia state and local politics regarding the Department of Family and Children Services (DFCS) contrast sharply with those relating to the Department of Aging, making Department of Aging staff much more amenable to and supportive of the legislative effort.

There appeared to be very little personal involvement on the part of the primary stakeholders, that is, very little personal ambition to improve their careers or their reputations. The one major exception to this was a grandmother referred to elsewhere as “Mrs. X.” She appeared to have two issues with the legislation that could have significantly hampered the efforts of the group and at times appeared to seriously damage the cause. This grandmother appeared to feel that one of the primary movers behind the legislation, Angie Burda, was attracting all of the attention to herself. Angie early on jumped in and mobilized the grandparents in her program, contacted legislators, developed materials to give to grandparents to aid them in their lobbying, and in general was a mover and a shaker. Mrs. X stated numerous times that Angie was seeking to gain attention for herself and to be a “glory hogger.” Second, race was a central issue for this grandmother, who is African American. She felt that most of the people involved in the push for the legislation were Caucasian and also that most program coordinators of programs across the state that supported grandparents were also Caucasian across the state and that they were not fairly or accurately representing the needs of African American grandparent caregivers. At one point, she stated this openly in a meeting, and at other times she performed more passive/aggressive actions, such as using large meetings to make thinly veiled comments that were directed at Angie but which many observers would not have understood. As described in the history section, there were several points when her actions were obstructive and had the
potential of harming the lobbying efforts for this legislation. In the end, much credit is owed to Mary Lou Vergara and Cheryl Schramm, who were able to rise above the more petty and irrelevant aspects of Mrs. X’s behavior and effect a greater level of analysis that gave them to the ability to negotiate effectively with her. Essentially, they observed that she felt powerless as an individual and also powerless to represent the grandfamilies she was most concerned with and which she felt might be marginalized, and they used this to negotiate with her. They offered the support of the Atlanta AAA in starting her own group if she would not undermine the legislation, and she agreed to this. It should also be noted that Mrs. X’s passion was often useful to the effort, and that she had many creative ideas about garnering attention for the issue of the grandparent caregiver subsidy.

It is important to note that the grandparent caregiver subsidy issue was brought to the attention of already existing groups; that is, the public did not form “out of” the issue of subsidized guardianship.’ Rather, the issue was identified as a result of working with these families; it was then it was brought to the attention of groups (publics) that already existed, either to assist grandparent caregivers, or then, in the case of organization, a group that already existed to advocate on behalf of the aging population in Georgia. Therefore the public formed very quickly; had this not been the case, the very quick advancement to the legislative process (approximately 1 ½ years from the first recognition to the first bill, SB 420) would not have been possible

The existence of the Clayton County Kinship Care Alliance and the Clayton Co. Kinship Care Center cannot be understated. When the Atlanta Regional Commission (ARC), where the Area Agency on Aging (AAA) was located, decided to do something about grandparent caregiving in the Metro Area, they conducted a study and determined that Clayton County had
the third highest incidence of grandparent caregiving families in that area but also the most active participation from grandparent caregivers and the community. Support and money were directed to this county, and the alliance was developed, and out of this, the Kinship Care Center was developed. This organization serves large numbers of grandparent caregiver families (relative to PHG, a more rural organization) and out of this a pool of very active and engaged grandparents developed. Likewise, Georgia State’s Project Healthy Grandparents also serves a fairly large number of families, and there was much support from staff and some grandparents. Of course, both of these programs were geographically located to have much easier access to the Capitol. When the Georgia GrandRally was held, large numbers of grandparent caregivers came from around the state, but, in general, it was difficult for those in outlying areas to have a physical presence at the Capitol. It was also harder to ensure that these groups were active locally. Numerous trips were made by PHG staff, interns and grandparents to the Capitol, particularly during the second year when SB 88 was being considered. This rural versus metro dynamic was important because it had a huge impact on the members of the public who are most actively engaged in the process (Please see the section on “Representation” below). This dynamic was also a complication during the first year as representatives from more rural and southern parts of Georgia “felt slighted” and that this legislation was a conservative piece of legislation (sponsored by a Republican Senator) that would benefit “affluent” grandparents in the metro area. Of course, this ignored the eligibility requirement that grandparent caregiver families live at 200% of the poverty level or below. A careful reading of the bill showed the requirement that grandparents have an affiliation with a “current grandparent raising grandchildren programs including, but not limited to: Kinship Resource Center in Clayton County, St. Joseph’s Mercy Care Center for Grandparents Raising Grandchildren in Rome,
Project Healthy Grandparents at Athens Community Council on Aging, Grandparents Raising Grandchildren in Augusta, and Project Healthy Grandparents at Georgia State University in Atlanta.” The phrase “but not limited to” might have easily been overlooked, and by explicitly mentioning programs in the Metro/North Georgia area, the bill could have been misleading; as mentioned by Melanie McNeil (personal communication, March 28, 2009), this provision might have made legislators concerned about defending their votes to their constituents in their home district if their area was not explicitly mentioned and it appeared that they had been excluded from possible eligibility for the program. Also, the likelihood that legislators gave a very careful reading to any legislation other than the ones they sponsored, or were for some reason particularly interested in, is slim. Likewise, most of the active lobbyists were from the metro area and so this too drew attention to this part of Georgia

Organization

Jones (1984) described four group attributes that can significantly impact the group’s survival and effectiveness: the degree of cohesion, expectations of permanence, the internal division of labor, and formalized values. The degree of cohesion experienced by the SB 88 public was pretty high, with members having a very strong commitment to the process and to each other, a respect for differing viewpoints and the ability to deal with these differences through a process that sometimes involved a majority vote but which much more often occurred as a result of consensus building. When it came to dealing with Mrs. X, there was no leader to make a decision. Instead, there was much phone calling, e-mailing and discussion at various meetings where she was not present, trying to determine a strategy to best deal with her. At various points there was talk of enlisting Judy Perdue’s assistance because Mrs. X had formerly been a member of Georgia State’s Project Healthy Grandparents. The group seemed to often turn
to Melanie McNeil to get advice. Hindsight would seem to indicate that this loose organization might have been beneficial; it is possible, given the highly passionate and volatile nature of Mrs. X, that had a decision been made to formally confront her, even if in a supportive fashion, she might have taken more bold and drastic measures to lobby against the bill. Allowing things to move along without any systematic decisions resulted in a positive outcome.

The expectations of permanence issue did not seem to be at play with regard to SB 88. The group members were very committed to the process, which continued for approximately five years. The internal division of labor occurred through an informal process whereby members volunteered for tasks according to their time constraints and the particular skills they brought to the task. The values of the group were formalized in the actual bill that was arrived at through a process of consensus and professional expertise from Melanie McNeil and legislators.

**Representation**

Representation involves the method or ways in which the public gets their problem linked with the government, or as Jones puts it, representation is the “linkage between problem and action” (1984, p. 30). For The Care of a Grandchild Act, the sponsor of the legislation, Senator Renee Unterman, was undoubtedly one of the major reasons that the bill came into being so quickly and got to the Senate floor. According to Project Vote-Smart.Org (2009), Senator Unterman appears to have a mixed record concerning her support for conservative vs. liberal issues, but leans toward supporting conservative issues. She supported the interests of the Georgia Rural Urban Summit 40 % of the time during each of the legislative sessions in 1999, 2000, and 2001-2002. During the 1999-2000 legislative sessions, she supported the interests of the Georgia Christian Alliance, formerly known as the Christian Coalition of Georgia, 70 %, and during the 2001-2002 session she supported their interests 80 %. She has a very strong pro-
business record and a very mixed record regarding environmental conservation. Much of her financial backing comes from health related interests, followed by finance, insurance and real estate.

Melanie McNeil (personal communication, March 28, 2009) said that she chose to approach Senator Unterman to support and possibly sponsor the legislation because the two had previously worked together when Senator Unterman of the minority party in the Georgia House of Representatives. They worked together on an elder abuse bill, so Melanie felt confident of Senator Unterman’s commitment to aging issues. Melanie also believed that Senator Unterman was effective at working in a bi-partisan manner that is key to the successful passage of legislation. Senator Unterman’s professional experience as a social worker and nurse had given her the experience of seeing human need face-to-face. Likewise, she had many other experiences, including being a county commissioner and mayor, as well as being involved with a private non-profit for seniors, all experiences that would more easily allow her to empathize with those being represented by this bill, an ability that Jones (1984) considers to be essential to the act of representation. If the representative cannot have a clear understanding of the thoughts, feelings and needs of those she represents, then how can she act on behalf them? Clearly, Senator Unterman’s education and training and her many experiences prior to being elected to the Senate have allowed her to empathize fairly easily with her constituents and therefore represent with a fair degree of accuracy their “feelings, thoughts, and behavior” (Jones, 1984, p. 30). Her reputation in the Senate was also another important factor. At least one senator shared with me that he didn’t know much about SB 88, but that he would give it serious consideration and most likely vote in favor because of his respect for Senator Unterman.
Melanie McNeil stated that it was crucial to have Senator Don Balfour’s support as the chair of the Rules Committee because the bill would never have gotten to the Senate floor without him, and Renee Unterman was obviously skillful at gaining his backing. During both the 2006 and 2007 legislative sessions, the bill passed the senate by a huge margin. In fact, in 2006 the vote was unanimous with all senators voting, and there was a 55 to 1 vote in 2007 with only Senator Heath dissenting. Senator Heath believed that the bill “supported failed parenting,” that is, the grandparents had raised a child who had then failed his or her child(ren) through abuse, neglect or abandonment. The sponsor on the House side in 2006, Representative Sue Bermeister (R), was a less-than-ideal advocate, and when the comments were made during debate on the House Floor about the pilot study leaving out many of the Representative’s constituents because it appeared to serve only Metro Atlanta residents, Representative Burmeister did not know how to successfully rebut this argument or any others that were used against it. In hindsight, Melanie McNeil believes that it would have been better to have spent more time with Representative Burmeister, making sure that she understood the bill and could successfully answer questions and challenges to it. Also important were the House sponsors who changed between the 2006 and 2007 legislative sessions. The makeup of both the Senate and House Judiciary committees was significant. The values of these legislators and their ability or lack of ability to “represent poverty publics” (Jones, 1984, p. 30) are crucial to an understanding of how events played out for this bill.

**Action in Government - Formulation**

Jones believed formulation involves much more than the actual writing of the bill. He believes that there is a great deal of overlap with legitimation because of the decision-making that revolves around how support will be attained for the bill, and the content of the legislation is
thus greatly influenced by these considerations (1984). In the case of SB 88, the power of attorney section was added specifically because Melanie McNeal believed that it could help “carry” the subsidy. Additionally, Jones believed that there is an extremely important need for “a knowledge and understanding of the intricate realities of decision making in government” (p. 50). Melanie McNeil, Renee Unterman, Preston Smith and others clearly brought this kind of expertise to the formulation of SB 88, another reason for its rapid development and presentation to the General Assembly.

The formulation/legitimation process is further complicated by the type of formulation being undertaken: (a) routine formulation that involves “reformulating similar proposals within an issue area that has a well-established place on the agenda of government” (p. 56); (b) analogous formulation where proposals used for similar problems from the past are used, and (c) creative formulation that involves a new approach. SB 88 would seem to involve a combination of analogous and creative formulation in that laws from other states that had subsidized guardianship at the time were used to create the legislation. However, this was also an example of creative formulation because this kind of support for informal relative caregiver families had not previously been considered in Georgia and also because of the strongly-held belief that individuals and families should not look to the government for assistance in the U.S. (Lens, 2002; Gilens, 1999). As Jones puts it, “building support for the ordinary is demanding – building support for the unusual is downright taxing” (p. 56), and the uphill battle that ensued every year in the House would seem to support Jones’s observation. Essentially, this is another way of looking at the issue of radical policy change versus incrementalism (Lindblom, 1964), which was considered elsewhere in this document.
Formulation was carried out by four individuals and groups for “The Care of a Grandchild Act.” The first was the CO-AGE working group that met prior to the 2006, 2007, 2008, and 2009 legislative sessions. When the bill was sent to the Senate Judiciary committee in 2006, the chair, Senator Preston Smith, worked closely with Senator Unterman to make extensive revisions; he pointed out some weaknesses in the bill and she asked for his help in re-writing it. In particular, there were concerns about part 1 of the bill, or the power of attorney, where the potential legal consequences of this legal authority being granted had to be considered. When the CO-AGE working group met in the fall of 2006, it incorporated the concerns about recipients being limited to certain parts of Georgia, and a change was made to include grandparent caregivers from all 12 regions in the state.

**Legitimation**

Legitimation in the legislative sense involves getting a majority vote. During both legislative sessions, obtaining this majority was relatively easy in the Senate, but the House of Representatives was a major challenge and, in fact, in the first session (2006) the bill got to the floor but didn’t go to a vote; in the second (2007), it never made it to the floor. During the third session (2008) the subsidy portion was actually pulled from the bill, and the power of attorney portion was passed out of the House and was signed into law. During the 2006 session the House members opposed to the bill included both Republicans and Democrats who were upset that a pilot program was not located in their area, and Representative Sue Bermeister was unable to successfully counter their arguments. The money to fund the bill was always an issue because, in the absence of a TANF waiver, the advocates could never find an alternative to state funds. The opportunity to use a TANF waiver would have had to come from Commissioner B.J. Walker, who was vehemently opposed to this legislation. Finally, it is Melanie McNeil’s belief that the
difficulty in passing the bill in the House relative to the Senate relates to the fact that the House is responsible for the budget, and that it is possible that the Senate so overwhelmingly supported it because they knew it would never pass in the House (personal communication, March 28, 2009).

**Comparative Analysis**

**SB 1540 History**

At least two different groups of actors and processes came together in Florida in the late 1990s to culminate in the eventual passage of the Relative Caregiver Program, which was designated Senate Bill 1540. A companion bill in the House was HB 4007. At the same time, a third group was developing that would become prominent in raising awareness of kinship care issues across the state of Florida and in attempts to amend the Relative Care Program to get subsidy payments on a par with foster care. First and in no particular order, two attorneys, Chris Zawisca and John Ratliffe, who worked on behalf of children in foster care for Legal Aid and who also worked on legal advocacy and reform through Florida Children First, began to formalize observations they had been making about the circumstances of children who were removed from their parents’ custody (personal communication, Chris Zawisca, August 7, 2009; personal communication, John Ratliffe, April 12, 2009). They believed that it was in the best interests of children to remain with their parents whenever possible, and in the absence of that, to be placed with relatives, as opposed to being placed with non-relative foster parents. One major problem was that many of these families, while willing to take children into their care, lacked the financial resources as well as the ability to provide adequate health care, among other things. Second, Linda Radigan, who was the Assistant Secretary of Family Safety and Preservation for the Florida Department of Children and Family Services (DCF), was concerned about these same
families (personal communication, July 17, 2009). It was a priority of DCF to place children with other family members if they had to be removed from their parents, but, up to this point in time it had been difficult to provide them with financial support except for child only TANF. Linda was also concerned because many relatives were becoming foster parents for these children, but the foster care licensure requirements could be onerous for many of them. The legislation had the very important backing of the Clearinghouse for Human Services (2009) (Chris Zawisca, personal communication, August 7, 2009), an advocacy coalition that had been founded by social worker Bud Bell in 1974. It began with only seven member organizations and now has over 200 members, including the American Civil Liberties Union (ACLU), Florida Trial Lawyers, DCF, and the United Way.

Third, Dr. Aaron Smith, a faculty member in the School of Social Work at the University of South Florida (USF) joined with Dr. Anne Strozier, also with the USF School of Social Work, to form a task force to work on relative care issues (personal communication, Dr. Anne Strozier, August 29, 2009; personal communication, Brent Elrod, August 27, 2009). In 1998, Aaron and Anne teamed with an adjunct faculty member, Judy Hall, to write a grant to USF to start a community board regarding kinship care. Judy was lead on this grant, with Aaron and Anne as CO-PIs. After that grant, they applied for a grant from the Children's Board of Hillsborough County to conduct focus groups about the needs of kinship caregivers in their county. In 1998, the Kinship Care Center was established with a mission to serve kinship care families living in Florida, engage the resources of the Center in partnerships that respond to kinship care needs and issues, and conduct research that advances knowledge and understanding of kinship care. This group has since been active in bringing grandparents to the Rallies in Tally (Brent Elrod, personal communication, August 27, 2009) to advocate for foster care rates for the Relative
Caregiver Program, as well as in trying to get legislation passed to achieve the same goal (Anne Strozier, personal communication, August 29, 2009). Brent Elrod worked for the Florida Kinship Care Center until 2004 and was responsible for taking groups of relatives to Tallahassee.

In the time leading up to the work on SB 1540, John Ratliffe recalls being actively involved in supporting the Homebuilder Program, a family preservation program, that in his opinion was never funded to the extent needed. At the time, Florida was losing “a whole generation” of children to the crack cocaine epidemic, and communities and DCF were overwhelmed. John referred to this time and these events as “a production line into foster care” and said that he felt they should try their best to prevent this placement into foster care of so many children. He believed that the Relative Caregiver Program was a logical extension of the family preservation movement and that it “made perfect sense” (personal communication, April 12, 2009).

Chris attended a conference held in Birmingham, Alabama, by the Children’s Defense Fund. This conference was held in response to the passage of PRWORA of 1996, which was seen as a possible threat to children and families because of the time limitations that were included with TANF. Also in attendance were child welfare officials and advocates from Florida and the other southern states. Florida’s Secretary of DCF, Ed Feaver, was the only high ranking official to attend the meeting (personal communication, Chris Zawisca, August 7, 2009). Mandy Dawson, a Florida state representative and the most avid sponsor of the legislation, also attended, and she asked Chris and John to draft the legislation.

Eventually, John Ratliff (personal communication, April 12, 2009) and Chris Zawisca (personal communication, August 7, 2009), in consultation with Linda Radigan and Mandy Dawson, drafted the legislation that became the Relative Caregiver Program. It was John
Ratliff’s recollection that they initially wanted to provide assistance to informal relative caregiver families, but that this attempt was dropped in the face of opposition because of the possibility of fraud and the opinion of some that these families were “dysfunctional” and that it was not in the children’s best interest to be placed with relatives. Chris remembered including families that had legal custody, but this was dropped because it would open the grant to too many people. She also recalls that initially they asked for a subsidy in the same amount as foster care, but this was changed to 80% of the foster care rate. Currently, recipients of the Relative Caregiver Program get 55% of the foster care rate (Anne Strozier, personal communication, August 29, 2009). Don Winstead, who was the Deputy Secretary for DCF and the “TANF guru,” was responsible for getting funding for SB 1540 through a TANF waiver because there happened to be a surplus of TANF funds at that time (Linda Radigan, personal communication, July 17, 2009). The later drafts, which required a dependency determination by a juvenile court judge, went through many revisions, but at some point the provision of Medicaid was added, along with a clothing allowance. The desire was to provide resources similar to those available to children in foster care.

At the time they went to the Florida legislature, it was undergoing a change from a predominantly Democratic body to a Republican one. On the House side, which still had a Democratic majority, Mandy Dawson carried HB 1540.

SB 1540 enjoyed a lot of support because of its “family values concept”; however, there were some real believers in foster care who talked about “dysfunctional” families and the inappropriateness of placing the children with relatives in these situations. These detractors were primarily Republicans. While there was much support within DCF, agreement was not universal. In addition, starting a new program is always a politically sensitive issue, and balancing debates
within the organization with the needs and views of Governor Lawton Chiles (D) was a difficult task for DCF employees.

SB 1540 was prefilled in the Senate on March 2, 1998, and then introduced on the Senate Floor on March 5; and it was referred to the Children, Families and Seniors Committee and to the Ways and Means Committee. It was passed successfully out of the Children, Families and Seniors Committee on April 6 and out of the Ways and Means Committee on April 15. It was placed on the Senate Calendar on that day and received a unanimous vote in favor on April 24, 1998. SB 1540 went to the House on April 24 and then received a unanimous vote on the April 29 and was signed into law by the governor on May 21, 1998 (Florida Legislature, 2009). Appendix J includes a copy of SB 1540.

The Relative Caretaker Program allows for relatives who are within the fifth degree by blood or marriage to the parent or stepparent of a child to act as substitute parents. A home study must be performed to determine that they are capable of providing a physically safe environment and a stable and supportive home for the children, and that such things as immunizations, education, and mental health services are provided appropriately. The relatives are exempt from foster care licensing requirements and receive a monthly subsidy in the amount of $242 per month for children aged 0 through 5; $249 for children 6–12; and $298 for children 12–18. This subsidy can be reduced or eliminated if a child has an income through SSI payments or Social Security benefits. Medicaid is available to the children, along with family support services and child care. The cases remain under the supervision of DCF for six months, at which time the judge can put the children in long-term custody where there is no ongoing investigation (Florida Kinship Center, 2009; Florida DCF, 2009; personal communication, John Ratliffe, April 12, 2009).
The program is funded by a TANF waiver. It has been in effect for approximately 10 years, and all indications are that it will continue into the future. According to Linda Radigan, there may have been some attempts from DCF to put the program “on the chopping block,” presumably to direct the waiver funds elsewhere; however, they have never been successful. The overall opinion of those interviewed was that it was a very successful program.

**Analysis of Florida’s SB 1540 with Jones’s Policy Process Model**

**Perception/Definition.** Two groups made the same observations and collaborated to work on this legislation. John Ratliffe and Chris Zawisza, two attorneys who did Legal Aid work on behalf of children in foster care, and who also worked with Florida Children First, located at the Law Center at Nova Southeastern University, became concerned about the number of children being adjudicated deprived by the Juvenile Court and then being placed in relative caregivers’ custody. While keeping children with family was an important goal, they realized that a number of these families were having great difficulty in raising the children because of their financial situations. Linda Radigan, the Director of Family Safety at Florida DCF, shared some of the same concerns about these families. Linda and other DCF employees working on the project received a great deal of support from Ed Feaver, the then Secretary of DCF.

**Aggregation/Organization.** The individuals and organizations listed above became the public for this process, with Chris Zawisca (personal communication, August 7, 2009) and John Ratliffe (personal communication, April 12, 2009) working on the drafting of the legislation while Linda worked on the details at DCF. Don Winstead of DCF worked on the financing of the bill with a TANF waiver. Also very important was the Clearinghouse for Human Services, which includes a very large network of service and advocacy organizations. Chris Zawisca remembers meeting with this group at least weekly, or more often, during the legislative session, with group
members dividing up responsibilities for their lobbying efforts (personal communication, August 7, 2009). Representative Mandy Dawson (D-29) was the most involved legislator and she is still closely identified with SB 1540 (Linda Radigan, personal communication, July 17, 2009; John Ratliffe, personal communication, April 12, 2009; Chris Zawisca, personal communication, August 7, 2009).

**Representation.** As stated above, the most passionate supporter in the Florida legislature was Mandy Dawson (D-29) (Linda Radigan, personal communication, July 17, 2009; John Ratliffe, personal communication, April 12, 2009; Chris Zawisca, personal communication, August 7, 2009). She did not raise any relative children, but she had been on welfare at some point, and presumably this heightened her sense of empathy, which Jones (1984) considers to be essential for legislators. She also attended the Children’s Defense Fund conference in Birmingham that was held in response to PRWORA and there talked to Chris and about drafting the legislation (Chris Zawisca, personal communication, August 7, 2009). Another legislator, Rene Garcia (R-110) was noted for his attempt, although unsuccessful, to pass legislation to amend SB 1540 so that the payments would be equal to those received by foster parents (John Ratliffe, personal communication, March 31, 2009; Chris Zawisca, personal communication, August 7, 2009).

**Formulation.** As previously described, Chris and John were the principal authors of the legislation. As attorneys who worked with Florida Children First, both Chris and John had a great deal of experience in issues related to foster care and deprivation, etc. They also worked in concert with Linda Radigan and others at DCF. This would appear to be an example of creative formulation as they were starting from scratch without other legislation to model theirs after. They were evidently aware of similar legislation that was in the works in Missouri and Louisiana
and may have looked at some of those documents, but it is not clear how much they were
influenced by them. Because the legislation was new and quite unique to the state of Florida, it
was pointed out by John Ratliff that it called for careful handling by Linda Radigan, both inside
DCF and with the governor’s office. Likewise, as discussed below under Implementation, very
careful and detailed procedures were used to develop and begin the program.

**Legitimation.** SB 1540 not only received a majority in both houses, but it also received a
unanimous vote in both houses of the Florida legislature (Florida Legislature, 1998). With
experienced advocates in Chris Zawisca and John Ratliffe walking the halls and going to
subcommittee hearings, with the Clearinghouse for Human Services behind them, with
agreement from DCF and funding from a TANF Waiver, and perhaps, as discussed below, with a
state with a high proportion of the aging in its population, the legislators all agreed to pass this
program. As Chris Zawisca stated, “it was just that everything came together that year” (personal
communication, August 7, 2009).

**Appropriation.** A TANF waiver was used to fund the Relative Caregiver Program.
Linda Radigan (personal communication, April 6, 2009) made the observation that the country as
a whole, and Florida in particular, were doing well economically after experiencing a great
downturn on 9/11. She said that there was a TANF surplus, which made these funds available for
this law.

**Implementation.** According to Sallie Bond (personal communication, April 2, 2009), a
unique process was brought into play once SB 1540 was signed into law; that is, a statewide
work group consisting of district administrators, senior leaders, and supervisors, all from Florida
DCF, was brought together to develop the operating procedure for the program. This was highly
unusual for Florida at the time, although now the state is using this process more and more. The participants in the work group represented child welfare and public assistance.

Nelson Simmons (personal communication, March 31, 2009) and Sallie Bond (personal communication, April 2, 2009) both were of the opinion that the implementation went well and that frontline DCF staff were aware of the Relative Caregiver Program and were therefore effective at alerting eligible recipients and signing them up for the program. While agreeing that the implementation had gone fairly well, both Linda Radigan (personal communication, July 12, 2009) and Chris Zawisca (personal communication, August 7, 2009) felt that staff could have done a better job at informing those who were eligible for the program. Linda attributed this problem to the privatization of Florida’s child welfare services (Paulson, et. al, 2003) because of the lack of coordination between the administrative offices and the service providers in the field.

**Evaluation/Appraisal.** According to Anne Strozier (personal communication, August 29, 2009), there has been no formal evaluation of the Relative Caregiver Program. However, a number of those interviewed believed that the program was running very well (John Ratcliffe, personal communication, April 12, 2009; Chris Zawisca, personal communication, August 7, 2009; Linda Radigan, July 17, 2009; Sallie Bond, personal communication, April 2, 2009; Nelson Simmons, personal communication, March 31, 2009). It has served approximately 8,000 families to date (Sallie Bond, personal communication, April 2, 2009). Linda’s only regret (personal communication, July 17, 2009), mentioned by others as well (Chris Zawisza, personal communication, August 7, 2009; Brent Elrod, personal communication, August 27, 2009), was that the subsidy does not equal foster care payments. Anne Stozier reported that the Kinship Center has made repeated attempts to get the subsidy to be equal to that of foster care, but so far they have been unsuccessful (personal communication, August 29, 2009).
Comparison of Georgia’s SB 88 and Florida’s SB 1540

There were several differences between Georgia’s SB 88 and Florida’s SB 1540 (Table 4.1). First, Florida DCF staff were involved and very supportive from the beginning of the process, unlike in Georgia where DHR Commissioner B. J. Walker was strongly opposed and whose staff followed her direction in this matter. Second, although the children were not in DCF custody, there had been investigations with a determination of dependency and therefore the state of Florida would appear to have a more vested interest in the children’s well-being even though they went into their relatives’ custody. The state saved money by placing them in relative care, did not have to locate often difficult to find foster care homes, and did not have legal custody of the children. The state followed up with the families for six months with home visits and phone contact but, at that point, if the families were functioning fairly well, then essentially the cases were closed. In Georgia, the goal was to provide a monthly subsidy where there had been no state involvement whatsoever and no determination of deprivation. A state determination of deprivation and any initial oversight of the families might have appeased somewhat the concerns of any legislators who believed that families were going to receive handouts without a reason. Of course, legislators always have their eyes on the budget, which is related to the third major difference between these two pieces of legislation. As mentioned above, the country and the state of Florida were experiencing a time of relative prosperity in the late 1990s, and surplus TANF funds were available for use by the Relative Caregiver Program in Florida. By early 2000, the economy had started to take a turn for the worse, and it is possible that, even if Commissioner Walker had been supportive of SB 88, there might not have been any funds available. Indeed, Commissioner Walker did state that economic reasons were one of her concerns regarding the legislation and Abel Ortiz, Governor Purdue’s assistant, had shared the same opinion. It should
be noted here that, in 2008, Melanie McNeil became aware of a small surplus of TANF funds that would have been very appropriate for use in funding SB 88; however, she was told by DHR staff that such funds were not available (personal communication, March 28, 2009).

The fourth major difference was that, in Florida, very reliable and strong support was established on both sides of the legislature whereas in Georgia, this kind of support was only found in the Senate, which twice overwhelmingly voted in favor of the bill. Support was never truly established in the House, where the bill never got to a vote. Melanie McNeil (personal communication, March 28, 2009) speculated that the reason the bill passed so easily in the Senate was because Senators don’t have to deal with budget issues, while the House does. And, in fact, Senator Renee Unterman, in speaking about her interactions with House members referred to this very issue:

I remember going to all the different Rules committee meetings…and they just chastised me to death about this being some big bureaucratic program like food stamps…that it was going to be everybody sucking out of the pot of money, and everybody applying for it. (Renee Unterman, personal communication, August 12, 2009).

Senator Unterman also referred to the issue of rewarding bad parenting as being an important reason for lack of support in the House when she referred to comments made by House members:

What we’re doing is…those grandparents that raised the children who are creating the disposable children, the throw away children they don’t want because of a drug habit, because they’re living on the streets, they don’t want, they didn’t have an abortion…we’re rewarding those grandparents…by saying, yeah, you kind of did a bad
job with your kid but now you can take care of their kids and get paid for it and that was
a big thing…yeah, that was a big thing… (personal communication, August 12, 2009).

There was only one senator who voiced similar opinions, and he was the only senator not to
support the bill when it went to the Senate floor (Georgia General Assembly, 2007). He also
made similar comments to grandparents, the author, and Angie Burda (personal communication,
August 10, 2009). Thus, the differences between the Georgia Senate and House regarding to this
bill appeared to be both financial and value-laden in nature.

A final difference to note is that, according to 1990 Census statistics, 28% of Florida’s
population was aged 55 and older, which is more than one quarter of that state’s citizens.
Georgia’s citizens 55 and older comprised only 18% of the population (Census Bureau, 2000). It
is possible Florida legislators are more inclined to pass legislation that will benefit the aging
population and their families because of their large concentration in Florida, which was what
Chris Zawisca speculated (personal communication, August 7, 2009).

One of the similarities between the Florida law and the Georgia bill included the new and
unique aspect of the legislation (Jones, 1984). That is, in both cases, those who formulated the
bills were not amending existing legislation but were instead writing new policies. Also, while
Florida’s bill did change over time, it initially began with the premise of assisting two different
groups of relative caregiver families. The first group included children who had been determined
to be dependent and were then placed with relatives. The second included families in which the
relative had legal custody of the child(ren) but where dependency had not been determined by
the juvenile court. This second group, which was dropped from the Florida legislation, was the
same group that was intended for receipt of the subsidy in Georgia, although only grandparents
and great grandparents were included and not other relatives.
The results have shown: (a) the story of the attempt to pass a piece of legislation to provide a subsidy for informal grandparent caregiver families in Georgia. Given that the phenomenon of grandparent caregiving and other relative caregiving is likely to continue to grow (Fuller-Thomson, 2009; Stacey Kolomer, personal communication, September 1, 2009), and that, therefore, more states are likely to attempt to pass similar legislation, this study could serve as a useful guide to advocates in those states for the kinds of steps needed to get support from concerned citizens (the public), get political support, and get the issue written into the form of a bill. The importance of getting advocacy support from an established, knowledgeable and experienced group like CO-AGE cannot be overstated, and the importance of mobilizing the constituents (or potential recipients of the program) in large numbers, both to get the support of CO-AGE, and also to gain the attention of legislators, were both crucial pieces in moving the legislation so quickly, and (b) a comparison of the Georgia legislation and the Florida law, using the Jones Policy Process Model, found a number of similarities and differences in the process and resulting content of the bill and law; some of these differences appear to account for the fact that the Florida bill became a law and the Georgia bill did not. Some of these things were out of the control of the advocates (e.g., the economy), while others show the impact of choices and decisions made by lobbyists and others during the attempts to pass the legislation (i.e., the reliance in Georgia on the Senate sponsor and the lack of concentrated effort given to House support, as compared to the support obtained in both houses in Florida).

In the Discussion that follows, the major findings of this study are considered, and suggestions that might be useful for passage of Georgia’s subsidy for informal caregiver families are included. Next, the strengths and weaknesses of the research design are detailed. Finally, the issue of children in grandparent care is set within the context of child abuse and neglect, poverty,
and foster care in the U.S., and some thought is given to the importance of supporting the healthy development of children and families in the U.S.
Table 4.1

*Major Differences between Georgia’s SB 88 and Florida’s 1540*

<table>
<thead>
<tr>
<th></th>
<th>GA</th>
<th>FL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support from state welfare agency</td>
<td>no</td>
<td>yes</td>
</tr>
<tr>
<td>Funding available</td>
<td>no</td>
<td>yes</td>
</tr>
<tr>
<td>Financial climate</td>
<td>not good</td>
<td>good</td>
</tr>
<tr>
<td>Court/Child Protective Services Involvement required</td>
<td>no</td>
<td>yes</td>
</tr>
<tr>
<td>Support from both House and Senate</td>
<td>no</td>
<td>yes</td>
</tr>
</tbody>
</table>
CHAPTER FIVE

Discussion

Major Findings

The Care of a Grandchild Act went to the Georgia Senate floor in 2006 for the first time and received a unanimous vote in the Senate less than two years after the problem was first identified and defined and the public was organized. This rapid and successful attempt was the result of a number of factors, the five most important of which are mentioned here. First, the support of CO-AGE and the skillful leadership and lobbying of Melanie McNeil were crucial because of the pre-established connection and reputation for aging issues in the Georgia General Assembly. Second, Senator Renee Unterman not only had the personal characteristics and background to give her the ability to empathize with this issue and the constituents who deal with it, but she also was a member of the majority party, had the ability to do bi-partisan work and has the political savvy to achieve valuable support for the bill. Third, Mary Lou Vergara’s organizing and outreach cannot be overstated, and fourth, Angie Burda’s mobilization and training of grandparent advocates were essential. Fifth, the intensive lobbying efforts of the grandparents, particularly in the first year, demonstrated the commitment of these caregivers to their grandchildren and helped tremendously by educating lawmakers and raising awareness for the issue. Finally, these efforts were made despite the caregivers’ many responsibilities and the sheer exhaustion associated with rearing children. While the participation in lobbying might not have been quite as strong in the ensuing years, nevertheless, there was a strong identification between these grandparents and their cause. When legislators can’t go anywhere in the capitol or
surrounding neighborhood without running into a grandparent, sometimes with a grandchild in
tow, lawmakers must at least have some awareness of the issue; simply gaining attention is one
of the most difficult hurdles for lobbyists to jump.

The major obstacles to the passage of SB 88 included the DHR Commissioner’s
opposition, which also meant the inability to use a TANF waiver, the negative financial climate
in the state of Georgia plus the opposition to using state funds to support it, the newness of the
legislation, and the belief that the legislation’s supported failed parenting. Also, it is worth
speculating about the concern over fraud in light of Melanie McNeil’s observations about the
Georgia General Assembly (personal communication, March 28, 2009). She has observed that
the General Assembly is much more interested in, and open to, business legislation than to social
welfare legislation. Also, she commented that Glen Richardson (R-19), the Speaker of the
House, is usually not inclined to add new laws to the Georgis statutes. It is possible that the
strong interest in business over social welfare policy and the disinclination to develop a new law
were equally important, if not more important, than concerns about fraud or rewarding failed
parenting. Senator Renee Unterman (personal communication, August 12, 2009) spoke to this
when she discussed the disparity that occurs when well-financed pieces of legislation arrive at
the Capitol as compared to more humanitarian social service pieces of legislation. The former are
often essentially rubber stamped because they have been well researched, because there’s a great
deal of money behind them, and because of the numbers of highly paid, highly educated
lobbyists working on their behalf. This is in contrast to a piece of legislation such as the Care of
a Grandchild Act where the majority of the lobbyists were not highly experienced or educated
and where there was no money.
It is impossible to know whether SB 88 would have passed if Commissioner Walker had supported it, but if she had and if she had offered a TANF waiver to fund it, then the major obstacle of opposition to the use of state funds would have been removed.

**Possible Recommendations for Georgia from Florida’s Experience**

Florida’s Relative Care Program is substantially different than Georgia’s SB 88 because of the determination of deprivation required for eligibility. However, this difference provides some food for thought about future steps for Georgia and a relative care subsidy. In an ideal world, laws would exist in all states, including Georgia and Florida, to prevent children identified by CPS as being deprived from going into foster care and, instead, living with relatives when possible. Additionally, children currently in foster care would be removed into the custody of relatives, and financial assistance would be provided to these families, as well as to the many families with informal caregiving relationships, whenever appropriate.

Florida does not have the traditional form of subsidized guardianship, that is, a subsidy to relative families that remove children from foster care. Senate Bill 1540 can be seen as an example of a “half step” between traditional subsidized guardianship and the subsidy to provide support for caregiving families in Georgia. While SB 88 required that grandparents have legal custody, the state did not have to determine deprivation for eligibility. If biological parents contested the custody agreement then a judge had to determine if placing the child(ren) in the custody of the grandparents was in their best interest. If issues of fraud (i.e., biological parents “dropping off” their kids to be with grandparents in large numbers) are a major concern, as suggested by some legislators and expressed numerous times in the working groups for the Care of a Grandchild Act, then perhaps Georgia’s advocates should consider pursuing legislation to that of Florida. Placing children in foster care has become far less desirable over the years as
issues of foster care drift, the negative consequences of separating children from families, and the decline of available foster care homes have become ever more apparent. Also, the state saves money when children are placed with relatives even when a monthly subsidy is provided to them because of the reduced overhead associated with this arrangement. It is in no way to be suggested that informal caregiver situations should be ignored, far from it, but the realities of the difficulties of passing such legislation in Georgia need to be addressed. Perhaps future legislation in Georgia could have two parts, one that addresses those children who have just been determined to be deprived and those who have had no involvement with the state. It can be possible to predict that the former would pass much more easily than the latter and yet, even if this were to occur, at least two things would have happened: (a) some financial stability would be provided for deprived children in relative care, and (b) continued attention to the issue of informal caregivers and their economic needs would be addressed. And, of course, nothing then prevents attempts at future passage of legislation similar to that of SB 88. As suggested by Jones (1984), and also by Melanie McNeil (personal communication, March 28, 2009), there is a need to be pragmatic about what types of bills can pass and about taking a long view about laying the groundwork for the future passage of legislation.

On a more practical note, it is suggested that should such legislation ever get passed in Georgia, it would be wise for officials in the state to contact those involved in the work group that developed the Relative Caregiver Program in Florida. Their goal was to implement the program correctly, and because it represented such a sweeping change for them, they felt the need to take special measures to ensure this. According to Sallie Bond (personal communication, April 2, 2009) and Nelson Simmons (personal communication, March 31, 2009), they succeeded. Although there were a few problems, for the most part, training and oversight were ensuring that
frontline staff was correctly administering the program. Georgia officials could learn a great deal from the Florida work group and the outcome of their endeavors, both for any future subsidized guardianship legislation and also for the development and implementation of any other program.

**More Suggestions for Future Attempts to Gain Support for Grandparent Caregiver Families**

Melanie McNeil, reflecting back on the attempts to pass SB 88 (personal communication, March 28, 2009), wishes that more of an attempt had been made to get the Democratic leadership of the House on board, and also that there could have been a better job of selling the pilot study aspect of the legislation. She believes that it’s important to re-evaluate at some point when multiple attempts to pass legislation have failed because “you can lose your fresh eyes and creativity”; to keep building the momentum of the legislation it is important to continue to try new tactics and angles. For future efforts at passing similar legislation, Melanie suggests that Department of Education funding be looked into. She asked who has a stake in children’s performing well and posits that schools and the educational system as a whole have a vested interest in kids coming to school and not acting out, and that support of grandparents raising grandchildren might be perceived as an important investment, particularly if the numbers of children in relative and grandparent care continue to grow. There are already programs in place at schools to try to improve educational and other outcomes for children in kinship care. For example, Rogers and Henkin (2000) describe “Grandma’s Kids,” a model school-based program that seeks to increase students’ academic performance and to increase the social supports for the caregivers, among other things. Other authors (Mauderer, 2008; Rittner & Sacks, 1995) have explored the ways in which school systems and school social workers can seek to improve the educational experiences and outcomes for children in kinship care. Melanie also suggested some
other groups that might be interested in partnering in the attempts to pass this legislation, including the Girl Scouts and Boy Scouts, Big Brothers and Big Sisters, as well as pediatricians. She suggested that while pediatricians are not the big income earners in the medical profession, nevertheless, legislators are often willing to listen to members of this group. Most of all, Melanie seems to be encouraging the idea of tapping into creative methods of finding additional sources of support that could be very beneficial to this cause.

When asked about the likelihood of future passage of a law that provides for a subsidy for informal grandparent caregiver families, Melanie’s first reaction was not very positive. In fact, she noted that Georgia is one of two states that does not allow the mailing of prescription drugs within the state. She brought this up as an example of how, in her opinion, Georgia can lag behind significantly in what would seem to be a relatively non-controversial issue, at least in most other states, and one that could be very helpful to Georgia’s citizens; however, she then speculated about the possibility of the election of a different Governor and a subsequent new DHR Commissioner, and said that, while not exactly optimistic, she would have reason to be more hopeful if these events then resulted in a different attitude about the use of the TANF waiver.

Finally, if future efforts are made to pass similar legislation, Dr. Betsy Vonk (personal communication, November 30, 2009) has pointed out that more effort needs to be put into having empirical evidence available about the need for financial support for grandparent caregiver families. The survey was important in showing the grandparents’ perspective about their needs, but, as demonstrated in the literature review, there is much scientific evidence available to demonstrate the financial circumstances of many grandparent caregiver families, and this information could be useful in potentially swaying the opinions of legislators. Additionally, any
studies that could demonstrate the potential of financial savings to the government and citizens, such as through increased high school graduation and better ability to obtain jobs, could also be useful in persuading legislators of the value of the grandparent caregiver subsidy.

The Design

**Strengths.** The writing of the developmental history of SB 88 was very useful in later analysis with Jones’s Policy Process Model (1984). Some information that was not necessarily important for the analysis provided interesting insights about the thoughts and motivations of some supporters of the legislation and the importance of the politics that were in play at the time. Jones’s model was helpful in the reminder about not being rigid concerning where and when in the process various activities took place. For example, formulation of the bill began before the issue was brought to the government and continued after it reached the government. And considerations of how to get the bill legitimated were at work during the formulation. Jones’s model was very useful in showing the progression of events and how issues of problem identification, agenda setting and attempts at legitimation occurred fairly sequentially, as well as where they took place, that is, outside or inside the government.

Jones’ description of the different types of bills (i.e., routine, analogous or creative) was extremely important. The fact that this was a “creative” bill, that is, one that was not an amendment or re-creation of older legislation, was probably one of the most important aspects that legislators brought up over and over again. Nevertheless, as the years went by, Senator Unterman’s attention to this issue and how she framed the legislation as analogous or incremental, as opposed to creative or radical, demonstrated her awareness of the Georgia legislators’ wariness about creating new legislation.
The interviews were extremely helpful and essential because they provided first-hand, detailed information and data, and also because they provided the chance to verify information and to look for discrepancies and points of congruence. Also, in the case of the Georgia bill, Melanie McNeil’s information enhanced the author’s own recollection and corrected it when necessary. The author’s involvement can be seen as a strength because she was a witness to many of the events and this perhaps made the description and subsequent analysis richer and more detailed than might have been otherwise possible. The conclusions regarding similarities and differences in the Florida law and the Georgia bill emerged in a very obvious way and were all verified by her observations, the interviews or general information regarding the economy, for example.

**Weaknesses.** Once a model for analysis is selected, by definition, the issues highlighted by other analysis models are necessarily left out. For example, Jones’s model did not focus on values and ethics (e.g., Popple & Leighninger, 2004), which are important considerations in social work. Likewise, Jones’s analysis also did not specifically focus on an analysis of the economy, which was a very important difference between Florida and Georgia, especially given the timing of the attempts to legitimate in each state. Because the specific details of the Florida law were different in very important ways from the Georgia bill, an analysis that focused more on content could have been beneficial. Finally, since the issue of who would benefit from the legislation had such a profound impact during the first legislative session, and this resulted in changes to the bill, an analysis of the bases of allocation such as that included in the Gilbert, Specht, and Terrell policy analysis framework (2000) could have been very illuminating.

While the interviews with the participants from Florida were extremely helpful, it is unfortunate that no one had written records that could have helped to enhance their memories.
Ideally, a person who had kept such notes and retained them could have been found, but such was not the case here. Alternatively, a state with similar legislation that was passed more recently could have possibly been used as a basis of comparison. In this way, participants’ memories might have been somewhat better, and they might have retained documentation with dates and names. As Commissioner Walker’s involvement had a stunning and decisive negative impact on the potential passage of this legislation, obtaining a candid interview with her could have provided extremely useful information for people in Georgia as they seek to pass similar legislation in the future, but also for readers of this document from other states who attempt to get similar laws for informal caregivers in their state.

Because circumstances are always changing, it is important to note that caution is needed when using this study as a possible “template” in other states. For example, the political climate in the state interacts with the economic climate, and the precise nature of this interaction will never be repeated. Therefore, care must be taken in drawing lessons from this study. Although previously described as a strength, the author’s involvement can also be seen as a weakness. She can make no claims about objectivity, and her writing of this document, and the analysis and conclusions she has drawn, have all been shaped by her personal involvement with those who would benefit from the passage of this legislation and by the attitudes she had coming into the process plus the ways in which she has been affected by her participation in it.

Another weakness of the study involved the peer reviewer. Because of time constraints, a peer reviewer in social work and who had familiarity with this legislation and/or grandparent caregivers was not found. Such a peer reviewer might have had additional insights that would have strengthened the study.
Finally, another weakness involved the lack of a comparison of outcomes in child well-being between kinship care and foster care. There have been many studies done and the results are mixed. For example, Ober (2009) discovered no significant differences in the adult mental health functioning of children who had been in kinship foster care as compared to traditional foster care. Leslie et al. (2002) found significant developmental delays in infants placed in foster care, but no difference if placement was with relatives or non-relatives. Winokur et al. (2008) found that children in kinship care had significantly fewer placements than children in foster care and were less likely to still be in foster care, were less likely to have a new allegation of institutional abuse or neglect, and were less likely to be involved with the juvenile justice system.

In conclusion, the results of this study can serve as a useful guide to others for passing similar legislation, but care needs to be taken when drawing conclusions. The historical events, as they occurred in Georgia and Florida, will never be replicated and because the inclusion of some very important information, most notably from Commissioner B. J. Walker, could change, somewhat, the lessons to be learned from this legislative process and this study, must be considered with care. However, it is also the case that some valuable lessons might be learned from studying this document if the goal is to continue to attempt to pass legislation to provide subsidies to informal grandparent caregiver families in Georgia. Likewise, advocates in other states who attempt to pass similar legislation could get some valuable tips to aid in their legislative efforts. The things that stand as being the most beneficial include: the grass roots mobilization of the grandparents, the organizational skills of people such as Mary Lou Vergara, the support of an established advocacy group with an experienced and skilled lobbyist, the skills
and political savvy of the sponsoring legislator(s), and the importance of gaining the support of the state agency, if possible.

**Children in Grandparent Care in the Context of Child Abuse and Neglect, and Poverty**

Because this study was completed as part of the degree requirements to obtain a Ph.D. in social work, it is imperative that the author situate this attempt to pass legislation within the context of issues that are the subject of much intervention and research by social workers. As described in the literature review and as seen in reality, the U.S. has a two-tiered system for giving care to children whose parents cannot or will not provide for them. That is, grandparents and other relatives, either in formal or informal caregiver situations, are usually given less financial support to raise their relative children than foster parents who are not related to the children. While this discrepancy is indicative of a strongly held value in the U.S., that of rugged individualism (Lens, 2002; Gilens, 1999) that states that individuals and families should not need support from the government, a study of the development and change in policies dealing with children in poverty and abuse and neglect would suggest that the strong reliance on foster care, and therefore the devaluing of relative care, is much more an artifact of a very haphazard and disorganized evolution in policy rather than any specific attempt to arrive at policies that differentiate so dramatically between relative and foster care. Additionally, the recognition and the definition of child abuse and neglect involved its own long and torturous and complicated path. This observation was made by me and shared by at least one other author (Krugman, 1999). In fact, the U.S. Advisory Board on Child Abuse and Neglect labeled the situation as a “national emergency” in 1990, and a more recent quantification showed that there over 3 million reports made concerning the maltreatment of 6 million children each year, with confirmed reports involving almost 900,000 children in 2005 (NASW Encyclopedia, 2007). However, it is
important to note “that fewer than 30% of children known to professionals in the community (for example, teachers, physicians in emergency rooms, day care providers) as maltreated are investigated by child protective services” (p. 236). Also, in 2007, a UNICEF report ranked the U.S. 20th in child well-being out of the top 21 wealthiest countries in the world. So, what does this say about attempts to gain subsidized guardianship for grandfamilies with informally placed children in Georgia and elsewhere? To consider this matter, it is important to look at some more general issues that impact child welfare in the U.S.

First, there has never been a concerted effort to distinguish between children living in poverty and those who experience neglect and abuse (Besharov & Laumann, 1997; Pelton, 1980), and it is known that children who live in families with annual incomes less than $15,000 are 22 times more likely to be abused or neglected than children living in families with annual incomes of $30,000 or more (Children’s Defense Fund, 2005). And while part of the explanation for this difference lies in the likelihood of greater detection in lower income homes because of the scrutiny of social services workers and law enforcement agencies, it is still believed that the stress of poverty plays an important role in child abuse and neglect (Shipler, 2004). To deal more effectively with these issues, it should be determined whether the wisest use of welfare funding in many cases should be targeted toward supporting and empowering low income families or responding with child abuse and neglect responses. Second, the characteristics associated with effective family preservation and family reunification have yet to be successfully enumerated, yet there is general agreement in their importance (John Ratliff, personal communication, April 12, 2009). Serious efforts to fund research on family preservation and developing firm guidelines about how and when to use it could decrease somewhat the need for kinship care. Third, the separation of income maintenance and social welfare at the federal level,
and the capping of social welfare, have had a dramatic impact on the use of foster care as the prevailing strategy for dealing with children, as well as a dramatic impact on state versus federal support for such children. Instead of defending the use of kinship care as opposed to foster care, advocates need to understand that, while foster care is very powerful because of federal funding and a long held reliance on this strategy, and the need for it in some instances, they should be prepared to educate legislators and the public about the over reliance on foster care as an artifact of history and NOT as the best strategy by any means. And, fourth, at the time this dissertation was completed, the U.S. as a whole, individual states within the U.S., and the entire world were experiencing an economic climate that has not been observed since the time of the Great Depression (Romer, 2009; Johnson, 2009). Although between the years of 1998 and 2004, eight states developed subsidized guardianships for informal kinship care families, it is likely that any efforts to pass such legislation or enact policies to provide subsidies in other states could be set aside for the foreseeable future as the country attempts to regain its financial footing, even when times such as this highlight even more powerfully the need for such types of assistance. It is possible with the powerful lobbying force of such groups as AARP that lobbyists on behalf of kinship care families will prevail and the number of states that support informal caregiver families will increase, but, of course, this still remains to be seen.

The Need to Support Healthy Child Development in the U.S.

While the thought is perhaps somewhat whimsical in nature, it would seem that a much greater awareness of the importance of child development for the future of the country could only improve the motivation and willingness of legislators to empathize and understand, albeit allowing for budgetary constraints, the need to provide much more funding in the areas of child poverty and early childhood intervention. It is possible that, over the long haul, the money could
be found for these expenditures if a true emphasis were placed on early intervention for child
development that has been demonstrated to be very successful (National Early Childhood
Technical Assistance Center, 2009; Anderson et. al, 2003), and this could result in tremendous
savings in such arenas as teen pregnancy, juvenile delinquency and later adult crime, and school
dropout, for example. These net savings, could, in turn, be spent on supporting children and
families. And, indeed, such an emphasis on prevention could obviate the need for at least some
of the need for kinship care, although this issue will never completely go away.

Finally, the issue of grandchildren and grandparents is also interesting because of the
tension that developed, particularly during the 1980s, between providing assistance to the “rich
and well old” (Binstock, 1983, p. 20) as opposed to helping low-income children (children’s
health, etc.). As Smith (2000) put it:

The advocates of young and old were, in effect, invited to participate in a divisive zero-
sum game, trading - off the interests of children and the old. Comparisons were
increasingly made - in the press, by the advocates of welfare state cut-backs, and by some
researchers and children’s advocates-between the declining fortunes of low income
children and the improved economic status of the old (p. 85).

Of course, this portrayal of the elderly as having improved economic status, while true to some
degree, in no way captured the experience of all the elderly, yet it did provide the rationale for
cutbacks to the elderly (Smith, 2000). However, the increased numbers of skipped generation
families and the increased awareness of the challenges they face has resulted in the development
of national, state and local agencies and coalitions that seek to find support for children and the
elderly. Generations United is one example, and AARP has done much to support this population
and to educate the public about these families. The issue of grandparent caregiving made it
necessary to bridge the gap between children and the aging population and more difficult to become hooked into the old debate about funding for the young vs. the old. In the 1960s, 30% of elderly people in the U.S. were living in poverty. Today, primarily as a result of Social Security and SSI, but also because of the Older Americans Act and Medicare and Medicaid, that figure is now one in ten (Herd, House, & Shoeni, 2006). Of course it is desirable to continue to reduce these numbers, but this represents a dramatic decline in poverty as a result of federal legislation and regional and local programming. Today, 18% of children, or approximately one in five, are growing up in poverty in the U.S. Surely, the time has come to put aside old, unhelpful debates, to promote and expand the use of early intervention strategies with children and families, to reduce the numbers of children growing up in poverty, to do all that is necessary to fund social welfare programs to educate about, and prevent, child abuse and neglect, and to provide the necessary assistance to support the healthy development of the country’s future: our children.

Next Steps

If legislation similar to SB 88 ever passes in Georgia, it would be very beneficial to analyze the process through which this occurs. Also, because the participation of the grandparents was such an important part of this story, it would be interesting to see how their efforts in advocacy have affected their lives (Stacey Kolomer, personal communication, September 1, 2009). For example, are they more likely to become involved in future similar efforts to pass this legislation? Will they be inclined to join other efforts to pass legislation? How does this experience translate into other areas of their lives? For example, if they need help, will they pick up the phone and call a legislator? Or will they be stronger advocates in the school system on behalf of their grandchildren? These and other such questions could serve to
illuminate much about the impact becoming involved in legislative advocacy has on citizen’s lives.
REFERENCES


http://iml.jou.ufl.edu/projects/Spring01/Benjamin/


Florida Kinship Center (2009b). http://www.cas.usf.edu/~krisman/

Relativecaregiverfactsheet.htm


http://www.flsenate.gov/session/index.cfm?BI_Mode=ViewBillInfo&Mode=Bills&Elem entID=JumpToBox&SubMenu=1&Year=1998&billnum=1540


Georgia Department of Human Resources (2009). Retrieved September 11, 2009 from
http://dhr.georgia.gov/portal/site/DHR/menuitem.3d43c0fad7b3111b50c8798dd03036a0/
?vgnextoid=4bf28bfa3ba02110VgnVCM100000bf01010aRCRD&vgnextchannel=d0fe8
bfa3ba02110VgnVCM100000bf01010aRCRD


http://www.georgia.gov/00/article/0,2086,4802_6107103_47120020,00.html


http://www.georgia.gov/00/article/0,2086,4802_6107103_72682316,00.html.

http://www.georgiagerontologysociety.org/about_us.htm

http://www2.gsu.edu/~wwwalh/

Georgia Department of Human Resources (2007). Georgia Statewide Assessment for Child and
Family Services Review, Section 1.

of social support in coping with caregiving challenges. International Journal of Aging &


Letiecq, B. L.; Bailey, S. J., & Porterfield, F. (2008). 'We have no rights, we get no help': The legal and policy dilemmas facing grandparent caregivers. *Journal of Family Issues*, 29(8), 995-1012.


Retrieved on September 20, 2009 from

http://search.cga.state.ct.us/dtsearch.asp?cmd=getdoc&DocId=16706&Index=I%3A\zind
ex\2000&HitCount=0&hits=&hc=0&req=&Item=884


_Dissertation Abstracts International: Section B: The Sciences and Engineering, 69_(2-B), 1339._


and Families Community-Based Care Initiative. Paper submitted to the Florida


E. D. Barry (Eds.), _Protecting Children from Abuse and Neglect: Foundations for a New


_American Journal of Orthopsychiatry, 67_(4), 545-553._


APPENDICES
APPENDIX A

Consent Form

Georgia's Care of a Grandchild Act: History and Analysis

I, ____________________________, agree to take part in a research study titled ‘Georgia’s Care of a Grandchild Act: History and Analysis’, which is being conducted by Deborah Phillips, M.S.W. from the School of Social Work at the University of Georgia (706-207-4557) under the direction of Dr. DeWeaver, School of Social Work, University of Georgia (706-542-5473). I understand that my participation is voluntary. I can refuse to participate or stop taking part at any time without giving any reason, and without penalty or loss of benefits to which I am otherwise entitled. I can ask to have all of the information about me returned to me, removed from the research records, or destroyed.

The purpose of this study is to document the history of the development of Georgia’s SB 88 (The Care of a Grandchild Act) and to do an analysis of the process involved in its development, using a policy analysis model called the Policy Process Model, developed by Charles O. Jones. To provide further insights into Georgia’s bill, an analysis of a similar piece of legislation in Florida (SB 1540) will be done and then a comparison will be made between the two.

I will not benefit directly from this research. However, the ability to sit and to reflect on my attitudes toward the legislation and/or my involvement in its development, may allow me to gain some additional insights. If I am supportive of this legislation, these insights might result in possible strategy changes or perhaps minor changes to the actual legislation that could be beneficial to its possible future passage. If I am opposed to the legislation, participation in this study might allow me to consider additional aspects of the legislation and my arguments against it that I had not previously considered and which might be beneficial in advocating against its passage.

This research study could benefit society because it could serve as a guide to others who are seeking to better living conditions for humankind through the passage of legislation into law.

The procedures are as follows:

- I will take part in an audiotaped face-to-face interview or audiotaped over-the-phone interview that will last approximately one to one and a half hours in length. I understand that there may be follow-up questions that will require subsequent phone conversations. The total length of time, including possible follow-up phone conversations, that I might be asked to participate is approximately 3 months.
- I understand that I will be asked questions about either my participation in the development of legislation involving a subsidy for grandparent caregiver families and/or my attitudes and opinions related to this legislation as well the process involved in the development of the legislation.
- I understand that the audiotapes will not be transcribed, but will be used only as a backup to notes taken by the researcher during the interview. The only persons having access to the audiotapes will be the researcher and her major professor, Dr. DeWeaver. The audiotapes and all documentation related to the research will be retained for three years after completion of the study and will be kept in a locked filing cabinet in the office of Kat Farlowe, Administrative Specialist for the Ph.D. Program. At the end of the three years the audiotapes and documentation will be destroyed.

No discomforts or stresses are expected.

No risks are expected.

My identity and the results of this participation will be made public.

The researcher will answer any further questions about the research, now or during the course of the project, and can be reached by telephone at 706-207-4557.

My signature below indicates that the researchers have answered all of my questions to my satisfaction and that I consent to volunteer for this study. I have been given a copy of this form.
Deborah Phillips, M.S.W.
Telephone: 706-207-4557
Email: dphillps@uga.edu

Name of Participant

Signature

Date

Additional questions or problems regarding your rights as a research participant should be addressed to The Chairperson, Institutional Review Board, University of Georgia, 612 Boyd Graduate Studies Research Center, Athens, Georgia 30602-7411; Telephone (706) 542-3199; E-mail address: IRB@uga.edu.
APPENDIX B

Interview Protocol – Georgia Participants

1. How did you become aware of the issue of grandparent caregiving?

2. Do you have any personal relationship to the issue of grandparent caregiving?

3. What are your thoughts about this legislation?

4. Are these attitudes affected by your personal involvement? If yes, how?

5. What did you see as the major obstacles to this legislation?

6. Who was the most supportive in the House and the Senate?

7. Who presented the most opposition in the House and Senate?

8. What groups and individuals outside of the General Assembly were most involved in supporting this legislation? Where there any groups of individuals that you’re aware who were opposed to it other than the DHR Commissioner?

9. As you reflect back on your involvement with this bill, is there anything you would have done differently?

10. In 2004 there were 3 states in the U.S. with similar types of legislation. Now there are 8. Economic times will make coming up with funds for any new legislation difficult to find, but, presumable, if economic times turn around more states will develop similar policies or legislation to assist these families. If this happens in more states, do you think Georgia will eventually join this movement? Why or why not?

11. Many grandparents have observed that the state will pay foster parents to raise their grandchildren but will offer very little support to them, the grandparents. What are your thoughts about this?

12. What do you think should be done differently for the 2009 legislative session?
APPENDIX C

Interview Protocol – Florida Participants

13. Did you have any involvement with the development of SB 1540?

14. Do you have any personal relationship to the issue of grandparent caregiving?

15. What are your attitudes toward this legislation?

16. Are these attitudes affected by your personal involvement? If yes, how?

17. Do you recollect what political party was in the majority when this legislation was passed? How did this affect its passage?

18. Do you know who sponsored this legislation?

19. Were there differences in reaction between the House and Senate in their reactions to the legislation?

20. Which part was in the majority in the House and Senate and how was this important?

21. What other groups and individuals helped support the passage of this legislation?

22. The idea for SB 1540 originated within DHR. How did this impact its development and the likelihood of its passage?

23. Do you know any families personally that are receiving this subsidy?

24. What is your impression of opinions in the state of FL regarding this legislation over the years it’s been in effect? The public? DHR officials and employees? Legislators?

25. Do you know who within DHR originated the idea for SB 1540? Do you know what prompted them to do this?

26. In 2004 there were 3 states in the U.S. with similar types of legislation. Now there are 8. Do you think more states will develop this type of legislation or similar policies if it’s economically feasible?

27. In Georgia we are trying to pass legislation that would not require a juvenile court determination of deprivation, but would require grandparents to have legal custody of their grandkids. Do you think this type of legislation would have passed in Florida? Why or why not?

28. Do you have any recommendations for those who support the legislation in Georgia that might help in getting it enacted into law?
APPENDIX D
AARP Meeting Outline

Georgia GrandRally

   Sponsored by AARP, Child Welfare League of America, Children’s Defense Fund,

   A. Northeast GA Project Healthy Grandparents flew 11 grandparents, 4
      interns and our nurse to Washington
   B. Next GrandRally in Washington will be held in 2005

II. Georgia GrandRally? – replicate the grandrally at the state level

   A. will have the potential to include grandparent caregivers from across
      the state, many of whom cannot get to Washington
   B. PLAN

      1. To have a training/agenda setting day this fall — include
         grandparent caregivers and providers.
         a. include training in advocacy
         b. decide on priorities for the spring 2005 Legislative
            session, including expanding Georgia’s Relative
            Caregiver Subsidy Program (see below)
         c. Have lobbyists speak, perhaps a legislator as well.
         d. Make this event interactive where the grandparents do
            role plays, etc. — practicing advocacy
      2. Join an existing Lobby Day (such as Children’s Lobby Day)
         during the spring 2005 General Assembly session, and have
         grandparents advocate for programming, funding, assistance
         with state legislators.

   C. NEEDS

      1. Free location for training/agenda day in Atlanta, or perhaps more
         centralized location
      2. Sponsor to pay for snacks and lunch
      4. Determine appropriate day during the legislative session for the
         Georgia GrandRally
      5. Sponsors for the GrandRally

III. Expanding Georgia’s Relative Care Subsidy Program

   A. Currently, only grandparents and other relatives are eligible for this
      subsidy if the grandchildren have been in foster care.
   B. Providing a subsidy for grandparents and others, even when the
      children have not been in foster care, would be extremely beneficial to
      these families, most of whom are very poor.
   C. What’s available in other states
   D. Kinship Caregiver Support Act – currently unfunded
APPENDIX E

Survey

ZIP CODE: _____________________

GRANDPARENT FEEDBACK (January 2005)

Are you raising your grandchildren instead of their parents?
The purpose of this questionnaire is to learn from you, the grandparents who are raising grandchildren, what your needs are. The plan is to present all the information we collect from the grandparents to the Georgia legislature so that the people that influence the laws can begin to look for ways to help grandparents raising grandchildren.

Please list three things that are most difficult for you as you raise your grandchild(ren).
1.
2.
3.

Please share how often you experience difficulties in raising your grandchildren in each of the areas below.

<table>
<thead>
<tr>
<th></th>
<th>Almost Always</th>
<th>Often</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Money</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal Issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children's Education/School</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your Physical Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children's Physical Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Person to Listen</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discipline</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recreation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time for Myself</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Children's Role Model</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please make additional comments on the other side of the paper. THANK YOU.
APPENDIX F

Fact Sheet

Georgia Grandparents Raising Grandchildren

FACT SHEET

THE ISSUE

The phenomenon of grandparents providing sole care to their grandchildren (grandparent caregiving) has increased dramatically over the past decade. This increase is attributed to the biological parents' struggle with substance abuse, mental illness, incarceration, economic hardship, divorce, domestic violence, and other serious problems.

SCOPE OF THE ISSUE

The 2000 U.S. Census revealed that:

Nationally

- there was a 30% increase from 1990 to 2000 in the number of grandparent-headed households
- 2.4 million grandparents report they are responsible for their grandchildren living with them; this represents 4.5 million children who are living in grandparent-headed households
- 19 percent of grandparent caregivers, on average, had incomes below the poverty level, and the proportion of grandparent caregivers living in poverty was highest in the South (21 percent)

In Georgia

- 92,265 grandparents report that they are responsible for their grandchildren living with them.
- 7.6% of the children live in grandparent-headed households. Georgia ranks sixth in the U.S. for the percentage of its children who are living in grandparent-headed households
- 164,423 children are living in grandparent-headed households. Georgia ranks sixth in the U.S. for having extremely high numbers of children living in grandparent-headed households

GEORGIA SURVEY

Grandparent caregivers in Georgia were recently asked to give feedback about the most urgent and pressing needs they face in caring for their grandchildren. Results from 115 grandparents are included.

When grandparents were asked to write in the things that were most difficult as they raise their grandchildren, the top 5 responses included:

1. Money
2. Time
3. Childcare
4. Problems with biological parents
5. Grandchildren's psychological problems

When grandparents were asked to check how often they experienced difficulties from a list of 17 items, the top 5 responses included:

1. Money
2. Time
3. Recreation
4. Family issues
5. Person to Listen

For breakdowns according to county and urban vs. rural, please see the reverse side.
GEORGIA SURVEY, continued

**WRITE-IN**

Grandparents were asked to list three things that are most difficult for them as they raise their grandchildren. Listed below are the 5 most common responses. The number in parentheses indicates the percentage of grandparents from that county who wrote in that particular response. The number 1 represents most common and 5 represents least common. The number in parentheses besides the county name represents the number of grandparents who filled out surveys from that county.

<table>
<thead>
<tr>
<th>County</th>
<th>Response 1</th>
<th>Response 2</th>
<th>Response 3</th>
<th>Response 4</th>
<th>Response 5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CHECK-OFF BOX**

Grandparents were asked to indicate how often they experience difficulties in raising their grandchildren in each of 17 areas by placing a mark in a box corresponding to 'almost always', 'often', 'sometimes', 'rarely', or 'never'. Listed are the 5 most common responses. The number 1 represents most common while 5 represents least common. The percentage in parentheses represents the selection of 'almost always' and/or 'often'; responses to 'sometimes', 'rarely', or 'never' were not included. The number in parentheses besides the county name represents the number of grandparents who filled out surveys from that county.

<table>
<thead>
<tr>
<th>County</th>
<th>Response 1</th>
<th>Response 2</th>
<th>Response 3</th>
<th>Response 4</th>
<th>Response 5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*There was only one response for this county, these grandparents’ responses are included but are representative of only one grandparent’s opinion and not a majority response from that county.*

Metropolitan Statistical Area (MSA) was used to determine if a county is designated as urban or rural. Information from the ‘Federal Information Processing Standards Publication’ website was used. In the tables above showing the individual counties, those in bold and italicized are urban counties.
APPENDIX G

Legislative Reception Invitation

You are cordially invited to a Legislative Reception

Hosted by:
Georgia Grandparents Raising Grandchildren
Sponsored by:
Grandparents Raising Grandchildren
AARP Georgia

When: Wed., March 2, 2005
Where: Rm.123, Capitol Bldg.
Time: 10:00 am - 12:00 pm

Come and meet grandparents from across Georgia who are raising their grandchildren. Learn about their needs as they provide a safe and stable home for their families. Hear their stories of courage and love.

Questions? Please contact Deborah Phillips @ 706-542-9317 or dphillps@uga.edu

*Refreshments provided*
APPENDIX H

Talking Points

CO-AGE MEETING
July 14, 2005
Kennesaw State University

TALKING POINTS Re: Subsidized custody for Georgia Grandparent Caregivers

1. Grandparents raising children do not receive enough financial help from the government when they do not have enough money themselves to care for their grandchildren.

2. Grandparents often have to use money from their retirement, social security or disability to care for their grandchildren.

3. Grandparents are not legally responsible for their grandchildren (until they decide to make it legal). They choose to raise them out of their love because they do not want to see them in foster care.

4. The financial help grandparents receive needs to be more in line with foster care payments. Look at the difference between TANF and foster care per day.

   There are 92,265 grandparents are raising grandchildren in Georgia, according to the 2000 census. Currently, there are four (4) ways grandparents can receive limited financial assistance. Each option has serious drawbacks.

   1) TANF provides only $155 per month for one child and $235 for two children, not nearly enough to cover the basic needs for food, clothing and shelter;

   2) Relative Care Subsidy pays $10 day per child, however the child must have been in the custody of DFCS. (For most grandparents, the children do not come to them through DFCS);

   3) Foster Care pays between $14.75 and $15.25 per day per child depending on the age of the child, but the state must assume custody when the grandparent becomes a foster parent or

   4) Adoption pays between $12.90 and $14.43 per day per child but parental rights must be terminated, a step that not all grandparents are comfortable making.

<table>
<thead>
<tr>
<th>Per Day</th>
<th>TANF</th>
<th>Relative Care Subsidy</th>
<th>Foster Care</th>
<th>Adoption</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 child</td>
<td>5.16</td>
<td>10.00*</td>
<td>15.50</td>
<td>13.70</td>
</tr>
<tr>
<td>2 children</td>
<td>7.83</td>
<td>20.00*</td>
<td>31.00</td>
<td>27.40</td>
</tr>
<tr>
<td>3 children</td>
<td>9.33</td>
<td>30.00*</td>
<td>46.50</td>
<td>41.10</td>
</tr>
</tbody>
</table>

5. We are proposing that Georgia develop Subsidized Custody which would offer grandparents the same financial help that foster care parents have but would not require that the children have been in DFCS’ custody.
APPENDIX I

SB88

07 SB88/CAFA/1

Senate Bill 88

By: Senators Unterman of the 45th, Seay of the 34th, Williams of the 19th, Schaefer of the 50th and Johnson of the 1st

AS PASSED SENATE

A BILL TO BE ENTITLED
AN ACT

To amend Chapter 9 of Title 19 of the Official Code of Georgia Annotated, relating to child custody proceedings, so as to provide for the creation, authorization, procedure, revocation, and termination of a power of attorney from a parent to a grandparent for the care of a grandchild; to provide for short titles; to provide definitions; to provide for the creation of a program to provide a subsidy to certain grandparents raising grandchildren under certain circumstances; to provide for an assessment and evaluation of certain aspects of the program; to provide for other related matters; to provide effective dates; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

This Act shall be known and may be cited as the "Care of a Grandchild Act."

SECTION 2.

The General Assembly finds that:
(1) An increasing number of relatives in Georgia, including grandparents and great-grandparents, are providing care to children who cannot reside with their parents due to the parent’s incapacity or inability to perform the regular and expected functions to provide such care and support;
(2) Parents need a means to confer to grandparents or great-grandparents the authority to act on behalf of grandchildren without the time and expense of a court proceeding;
(3) Grandparents and great-grandparents caring for their grandchildren under these circumstances often do not have sufficient financial resources to provide for such children; and
(4) Providing both a statutory mechanism for granting authority and limited financial support under certain circumstances to provide for children enhances family preservation and stability.

SECTION 3.

Chapter 9 of Title 19 of the Official Code of Georgia Annotated, relating to child custody proceedings, is amended by adding a new Article 4 to read as follows:

"ARTICLE 4

Part 1

19-9-120.

This part shall be known and may be cited as the 'Power of Attorney for the Care of a Minor Child Act.'

19-9-121.

(a) As used in this part, the term:
   (1) 'Grandchild' means the minor child of a grandparent.
   (2) 'Grandparent' shall have the same meaning as provided in subsection (a) of Code Section 19-7-3 and shall include the biological great-grandparent or stepgreat-grandparent who is the parent or stepparent of a grandparent of a minor child.
   (3) 'Parent' shall have the same meaning as provided in Code Section 19-3-37. Such term used in the singular shall mean both parents if both parents share joint legal custody of the child, unless otherwise clearly indicated.
   (4) 'Reasonable evidence' means evidence that a reasonable person would find sufficient to determine whether one conclusion is more likely than another.
   (5) 'School' means:
      (A) Any county or independent school system as defined in Code Section 20-1-9;
      (B) Any private school as such term is defined in Code Section 20-2-690;
      (C) A home study program meeting the requirements set forth in subsection (c) of Code Section 20-2-690;
      (D) Pre-kindergarten programs; or
      (E) Early care and education programs as such term is defined in paragraph (6) of Code Section 20-1A-2.
   (6) 'School term' means the part of the year in which school is in session.
(7) 'Serious illness' means a physical or mental illness as determined by a licensed health care professional, including a psychiatrist or psychologist that causes the parent to be unable to care for the minor child due to the physical or mental condition or health of the parent, including a condition created by medical treatment.
(8) 'Terminal illness' has the same meaning as the term 'terminal condition' as provided in paragraph (13) of Code Section 31-32-2.

19-9-122.
(a) A parent of a minor child may delegate to any grandparent residing in this state caregiving authority regarding the minor child when hardship prevents the parent from caring for the child. This authority may be delegated without the approval of a court by executing in writing a power of attorney for the care of a minor child in a form substantially complying with the provisions of this part.
(b) Hardships may include, but are not limited to:
(1) A parent being unable to provide care due to the death of the other parent;
(2) A serious illness or terminal illness of a parent;
(3) The physical or mental condition of the parent or the child such that proper care and supervision of the child cannot be provided by the parent;
(4) The incarceration of a parent;
(5) The loss or uninhabitability of the child’s home as the result of a natural disaster; or
(6) A period of active military duty of a parent exceeding 24 months.
(c) Hardship shall not include the granting of a power of attorney for the care of a minor child for the purpose of subverting an investigation of the child’s welfare initiated by the Department of Human Resources or other agency responsible for such investigations.

19-9-123.
Through the power of attorney for the care of a minor child, the parent may authorize the agent grandparent to perform the following functions:
(1) Enroll the child in school and in extracurricular activities;
(2) Provide access to school records and may disclose the contents to others;
(3) Arrange for and consent to medical, dental, and mental health treatment for the child;
(4) Provide access to medical, dental, and mental health records and may disclose the contents thereof to others;
(5) Provide for the child’s food, lodging, housing, recreation, and travel; and
(6) Any additional powers as specified by the parent.

19-9-124.
(a) An agent grandparent under a power of attorney for the care of a minor child shall act in the best interests of the minor child. Such agent grandparent shall not be liable for consenting or refusing to consent to medical, dental, or mental health care for a minor child when such decision is made in good faith and is exercised in the best interests of the minor child.
(b)(1) The agent grandparent shall have the right to enroll the minor child in a public school serving the area where the agent grandparent resides and may enroll the minor child in a private school, pre-kindergarten program, or home study program.
(2) The public school shall allow such agent grandparent with a properly executed power of attorney for the care of a minor child to enroll the minor child.
(3) At the time of enrollment the grandparent shall provide to the school such residency documentation as is customary in that school district.
(4) The school may request reasonable evidence of the stated hardship.
(5) If a public school denies enrollment of a minor child under this Code section, such denial may be appealed and shall be treated as any other denial of enrollment of a child in that school district, including all of the remedies otherwise available when enrollment is denied to a child.
(6) Except where limited by federal law, the agent grandparent shall have the same rights, duties, and responsibilities that would otherwise be exercised by the parent pursuant to the laws of this state.
(7) An agent great-grandparent shall be obligated to comply with any existing court order relative to the child, including, but not limited to, any visitation order.

19-9-125.

No person, school official, or health care provider who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.

19-9-126.

Nothing in this article shall preclude a parent or agent grandparent from granting temporary written permission to seek emergency medical treatment or other services for a minor child while in the custody of an adult who is not the parent or agent grandparent and who is temporarily supervising the child at the parent’s or agent grandparent’s request.

19-9-127.

(a) Except as may be permitted by the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. and Section 7801, et seq., a parent executing the power of attorney for the care of a minor child shall certify that such action is not for the primary purpose of enrolling the child in a school for the sole purpose of participating in the academic or interscholastic athletic programs provided by that school or for any other unlawful purpose. Violation of this subsection shall be punishable in accordance with Georgia law and may require, in addition to any other remedies, repayment by such parent or grandparent of all costs incurred by the school as a result of the violation.
154

(b)(1) The instrument providing for the power of attorney shall be executed by both parents, if both parents are living and have joint legal custody of the minor child, and shall specify which hardship prevents the parent or parents from caring for the child. If the parents do not have joint legal custody, the parent having sole legal custody shall have authority to grant the power of attorney.

(2) The power of attorney for the care of a minor child shall be signed and acknowledged before a notary public by the parent executing the power of attorney. Any noncustodial parent shall be notified in writing of the name and address of the grandparent who has been appointed the agent grandparent under the power of attorney. The executing parent shall send the notification by certified mail or statutory overnight delivery, return receipt requested, to the noncustodial parent at the noncustodial parent’s last known address within five days of the execution of the power of attorney. A noncustodial parent who has joint legal custody shall have the same authority to execute a revocation of the power of attorney as granted to the custodial parent.

(c) If only one parent has sole legal custody of the minor child, then that parent shall have authority to execute the power of attorney and to revoke the power of attorney.

19-9-128.

(a)(1) The agent grandparent shall have the authority to act on behalf of the minor child until each parent who executed the power of attorney for the care of a minor child revokes the power of attorney in writing and provides notice of the revocation to the agent grandparent as provided in this Code section

(2) The agent grandparent shall have the authority to act on behalf of the child until a copy of the revocation of the power of attorney is received by certified mail or statutory overnight delivery, return receipt requested, and upon receipt of the revocation the agent grandparent shall cease to act as agent.

(3) The parent shall send a copy of the revocation of the power of attorney to the agent grandparent within five days of the execution of the revocation by certified mail or statutory overnight delivery, return receipt requested.

(4) The revoking parent shall notify the school, health care providers, and others known to the parent to have relied upon such power of attorney.

(b) The power of attorney for the care of a minor child may also be terminated by any order of a court of competent jurisdiction.

(c)(1) The agent grandparent shall notify the school in which the agent grandparent had enrolled the child whenever a change in circumstances results in a change in residence for such child that is expected to last more than six weeks during a school term and such change in residence is not due to hospitalization, vacation, study abroad, or some reason otherwise acceptable to the school.

(2) The agent grandparent may resign by notifying the parent in writing by certified mail or statutory overnight delivery, return receipt requested and, if the grandparent agent is aware that the parent’s hardship still exists, such agent grandparent shall also notify child
protective services or such government authority that is charged with assuring proper care of such minor child.

(3) Upon the death of the authorizing parent, the agent grandparent shall notify the surviving parent as soon as practicable. With consent of the surviving parent or if the whereabouts of the surviving parent are unknown, the power of attorney may continue for up to six months so that the child may receive consistent care until more permanent custody arrangements are made.

(d) The authority to designate an agent to act on behalf of a minor child is in addition to any other lawful action a parent may take for the benefit of such minor child, and the parent shall continue to have the right to medical, dental, mental health, and school records pertaining to the minor child.

19-9-129.

(a) The statutory power of attorney for the care of a minor child form contained in this Code section may be used to grant an agent grandparent powers with respect to the minor child’s enrollment in school, medical, dental, and mental health care, food, lodging, recreation, travel, and any additional powers as specified by the parent. This power of attorney is not intended to be exclusive. No provision of this part shall be construed to bar use by the parent of any other or different form of power of attorney for the care of a minor child which complies with this part.

(b) The power of attorney for the care of a minor child shall be in substantially the following form:

'GEORGIA POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

NOTICE:

(1) THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE GRANDPARENT THAT YOU DESIGNATE (THE AGENT GRANDPARENT) POWERS TO CARE FOR YOUR MINOR CHILD INCLUDING THE POWER TO: ENROLL THE CHILD IN SCHOOL AND IN EXTRACURRICULAR SCHOOL ACTIVITIES; HAVE ACCESS TO SCHOOL RECORDS AND DISCLOSE THE CONTENTS TO OTHERS; ARRANGE FOR AND CONSENT TO MEDICAL, DENTAL, AND MENTAL HEALTH TREATMENT FOR THE CHILD; HAVE ACCESS TO SUCH RECORDS RELATED TO TREATMENT OF THE CHILD AND DISCLOSE THE CONTENTS THEREOF TO OTHERS; PROVIDE FOR THE CHILD’S FOOD, LODGING, RECREATION, AND TRAVEL; AND HAVE ANY ADDITIONAL POWERS AS SPECIFIED BY THE PARENT.
(2) The agent grandparent is required to exercise due care to act in the child’s best interest and in accordance with the grant of authority specified in this form.

(3) A court of competent jurisdiction may revoke the powers of the agent grandparent if it finds that the agent grandparent is not acting properly.

(4) The agent grandparent may exercise the powers given in this power of attorney for the care of a minor child throughout the child’s minority unless the parent revokes this power of attorney and provides notice of the revocation to the agent grandparent or until a court of competent jurisdiction terminates this power.

(5) The agent grandparent may resign as agent and must immediately communicate such resignation to the parent, and if communication with such parent is not possible, the agent grandparent shall notify child protective services or such government authority that is charged with assuring proper care of such minor child.

(6) This power of attorney may be revoked in writing by any authorizing parent. If the power of attorney is revoked, the revoking parent shall notify the agent grandparent, school, health care providers, and others known to the parent to have relied upon such power of attorney.

(7) If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

Power of Attorney for the Care of a Minor Child

made this ____ day of ______________, ____.

(A) I, ___________________________ (insert name and address of parent or parents), hereby appoint _________________________________________________ (insert name and address of grandparent to be named as agent) as attorney in fact (the agent grandparent) for my child ____________________________________________ (insert name of child) to act for me and in my name in any way that I could act in person.

(B) I hereby certify that the agent grandparent named herein is the (place a check mark beside the appropriate description):

___ Biological grandparent;
___ Stepgrandparent;
___ Biological great-grandparent; or
___ Stepgreat-grandparent.

(2) The agent grandparent may:

(A) Enroll the child in school and in extracurricular activities, have access to school records, and may disclose the contents to others;
(B) Arrange for and consent to medical, dental, and mental health treatment of the child, have access to such records related to treatment of the child, and disclose the contents of such records to others;
(C) Provide for the child’s food, lodging, recreation, and travel; and
(D) Carry out any additional powers specified by the parent as follows:

________________________________________________________________________

(3) The powers granted above shall not include the following powers or shall be subject to the following rules or limitations (here you may include any specific limitations that you deem appropriate):

________________________________________________________________________

(4) This power of attorney for the care of a minor child is being executed because of the following hardship:
   ____ (A) The death, serious illness, or terminal illness of a parent;
   ____ (B) The physical or mental condition of the parent or the child such that proper care and supervision of the child cannot be provided by the parent;
   ____ (C) The loss or uninhabitability of the child’s home as the result of a natural disaster;
   ____ (D) The incarceration of a parent; or
   ____ (E) A period of active military duty of a parent.
(5) (Optional) If a guardian of my minor child is to be appointed, I nominate the following person to serve as such guardian: ____________________________________
(insert name and address of person nominated to be guardian of the minor child).
(6) I am fully informed as to all of the contents of this form and I understand the full import of this grant of powers to the agent grandparent.
(7) I certify that the minor child is not emancipated, and, if the minor child becomes emancipated, this power of attorney shall no longer be valid.
(8) Except as may be permitted by the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. and Section 7801, et seq., I hereby certify that this power of attorney is not executed for the primary purpose of unlawfully enrolling the child in a school so that the child may participate in the academic or interscholastic athletic programs provided by that school.
(9) I certify that, to my knowledge, the minor child’s welfare is not the subject of an investigation by the Department of Human Resources.
(10) I declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: ______________________________________________________
(Seal)
Parent Signature: ______________________________________________________
(Seal)

Signed and sealed in the presence of: ______________________________________
Notary public
My commission expires_________________

(c) The following notice shall be attached to the power of attorney:

ADDITIONAL INFORMATION:

To the grandparent designated as attorney in fact:
(1) If a change in circumstances results in the child not living with you for more than six weeks during a school term and such change is not due to hospitalization, vacation, study abroad, or some reason otherwise acceptable to the school, you should notify in writing the school in which you have enrolled the child and to which you have given this power of attorney.
(2) You have the authority to act on behalf of the minor child until each parent who executed the power of attorney for the care of the minor child revokes the power of attorney in writing and provides notice of revocation to you as provided in Code Section 19-9-128.
(3) If you are made aware of the death of the parent who executed the power of attorney, you must notify the surviving parent as soon as practicable. With the consent of the surviving parent, or if the whereabouts of the surviving parent are unknown, the power of attorney may continue for up to six months so that the child may receive consistent care until more permanent custody arrangements are made.
(4) You may resign as agent by notifying each parent in writing by certified mail or statutory overnight delivery, return receipt requested, and if you become unable to care for the child, you shall cause such resignation to be communicated to the parent. If communication with such parent is not possible, you must notify child protective services or such government authority that is charged with assuring proper care of such minor child.

To school officials:
(1) Except as provided in the policies and regulations of the county school board and the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. and Section 7801, et seq., this power of attorney, properly completed and notarized, authorizes the agent grandparent named therein to enroll the child named therein in school in the district in which the agent grandparent resides. That agent grandparent is authorized to provide consent in all school related matters and to obtain from the school district educational and behavioral information about the child. Furthermore, this power of attorney shall not prohibit the parent of the child from having access to all school records pertinent to the child.
(2) The school district may require such residency documentation as is customary in that school district.
(3) No school official who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.

To health care providers:
(1) No health care provider who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.
(2) The parent continues to have the right to all medical, dental, and mental health records pertaining to the minor child.'

Part 2

19-9-140.

This part shall be known and may be cited as the 'Grandchildren’s Caregiver Subsidy Act.'

19-9-141.

As used in this part, the term:
(1) 'Area agency on aging' shall have the same meaning as provided in paragraph (2) of Code Section 49-6-72.
(2) 'Department' means the Department of Human Resources.
(3) 'Division' means the Division of Aging Services of the Department of Human Resources.
(4) 'Electronic funds transfer card' means a process of providing financial support through the use of a card to which funds may be regularly added by electronic means and for which restrictions on the use of such funds apply.
(5) 'Grandchild caregiver subsidy' means the aid provided on behalf of children under the terms of this part.
(6) 'Grandparent' shall have the same meaning as provided in subsection (a) of Code Section 19-7-3 and shall also mean the biological great-grandparent or stepgreat-grandparent who is the parent or stepparent of a grandparent of a minor child.
(7) 'Parent' shall have the same meaning as provided in Code Section 19-3-37.

19-9-142.

(a) The department shall establish a program for providing a grandchild caregiver subsidy to eligible persons pursuant to this part.
(b) Upon funds being appropriated by the General Assembly, the grandchild caregiver subsidy shall be provided on behalf of any minor child:
(1) Who is in the legal custody or under temporary or permanent guardianship of a grandparent or great-grandparent who resides in Georgia;
(2) Whose grandparent has an annual income less than 200 percent of the federal poverty level for the number of dependents including grandchildren and great-grandchildren living in the household;
(3) Whose grandchild or great grandchild receiving care has experienced hardship as defined in Code Section 19-9-122 (B); and
(4) Who is participating in a grandparent raising grandchildren support program sponsored by the area agency on aging for the regional area in which that grandparent resides.
(c) Such grandparent meeting the criteria in subsection (b) of this Code section shall receive a monthly grandchild caregiver subsidy equal to 80 percent of the state-wide average foster care rate for each minor grandchild who is in the legal custody or under temporary or permanent guardianship of such grandparent. Such grandparent shall remain eligible for the grandchild caregiver subsidy for each month that such grandchild or great-grandchild continues to live with the grandparent, provided that the other criteria under this part are met.
(d) Any grandchild caregiver subsidy shall be provided to a grandparent for the benefit of the grandchild or great-grandchild through use of an electronic funds transfer card or such other means as the department shall determine appropriate if the electronic funds transfer card is not a viable option for a grandparent and shall not affect the eligibility of the grandchild or great-grandchild to receive Medicaid or PeachCare for Kids benefits or benefits from any other state or federal program for which the grandchild or great-grandchild would otherwise be eligible.
(e)(1) Grandparents in every area agency on aging region in this state may request participation in this program.
(2) The department shall provide for the implementation of the program and shall ensure that:
(A) No more than 1,500 families at any given time shall be participating in the program;
(B) No later than the fifth day of each month the grandparent shall provide written affirmation that the grandchild or great-grandchild continues to live in the grandparent’s household;
(C) Each area agency on aging confirms that the grandparent and grandchild are continuing to participate in the grandparent support program;
(D) A periodic verification of eligibility to remain in the program shall be completed at least annually for each family participating in the program;
(E) Each grandparent receiving the subsidy periodically affirms that the grandchild caregiver subsidy funds are being used for the following permitted purposes:
(i) The purchase of goods, including categories of items such as clothing, food, toiletries, diapers, school supplies, and other educational materials such as books and other
supplements, car seats, prescription drugs and over the counter medicines, and such other items as the department may determine appropriate; and
(ii) The purchase of services, including categories such as medical copayments, dental care, child care, school expenses, and activities fees, rent or housing related expenses, transportation expenses such as public transportation fares, car repairs, gasoline, or other transportation costs, and such other services as the department may determine appropriate; and
(F) The grandchild caregiver subsidy funds shall not be used for the purchase of tobacco products, liquor, beer, wine, lottery tickets, firearms, or any item or substance which is illegal for a minor to possess, receive, or consume.
(f) Any grandparent participating in the grandchild caregiver subsidy program who knowingly fails to comply with the requirements of the program or who knowingly fails to notify the department when the grandparent no longer meets the eligibility requirements for the grandchild caregiver subsidy program under subsection (c) of this Code section shall be punished in accordance with Georgia law and shall, in addition to all other remedies, repay all grandchild caregiver subsidy amounts paid during the period of ineligibility and all costs associated with any action taken by the department in connection with such ineligibility.
(g) A yearly status report shall be submitted from each area agency on aging grandparent support program to the department’s division.
(h) The department shall provide for evaluation of the grandchild caregiver subsidy program during the first two years of the program if sufficient funding is appropriated for that purpose as a part of the grandchild caregiver subsidy program. The results of such evaluation shall be published to the General Assembly during the session following the second year of the evaluation."

SECTION 4.

Part 1 of Article 4 of Chapter 9 of Title 19 enacted by Section 3 of this Act shall be effective upon its approval by the Governor or its becoming law without the approval of the Governor. The remaining provisions of this Act shall become effective July 1, 2007.

SECTION 5.

All laws and parts of laws in conflict with this Act are repealed.

Retrieved from:
http://www.legis.state.ga.us/legis/2007_08 versions/sb88 As_passed_Senate 5.htm
APPENDIX J

SB 1540

Florida Senate - 2009

By Senator Wise

5-01412-09

A bill to be entitled
An act relating to zero-tolerance policies; amending
ss. 1002.20 and 1006.09, F.S.; conforming cross-
references; amending s. 1006.13, F.S.; providing
legislative intent and findings; revising the
requirements for zero-tolerance policies; deleting
provisions relating to agreements with the county
sheriff’s office and local police departments;
requiring that such agreements specify guidelines for
addressing acts that pose a serious threat to school
safety; prohibiting zero-tolerance policies from
requiring the reporting of petty acts of misconduct
and misdemeanors to a law enforcement agency;
requiring that any disciplinary or prosecutorial
action taken against a student who violates a zero-
tolerance policy be based on the individual student
and the particular circumstances surrounding the
student’s misconduct; encouraging school districts to
use alternatives to expulsion or referral to law
enforcement agencies unless using such alternatives
will pose a threat to school safety; providing an
effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (5) of section 1002.20, Florida
Statutes, is amended to read:
1002.20 K-12 student and parent rights.—Parents of public
school students must receive accurate and timely information

CODING: Words stricken are deletions; words underlined are additions.
regarding their child's academic progress and must be informed of ways they can help their child to succeed in school. K-12 students and their parents are afforded numerous statutory rights including, but not limited to, the following:

(5) SAFETY.—In accordance with the provisions of s. 1006.13(6), s. 1006.13(5), students who have been victims of certain felony offenses by other students, as well as the siblings of the student victims, have the right to be kept separated from the student offender both at school and during school transportation.

Section 2. Subsection (4) of section 1006.09, Florida Statutes, is amended to read:

1006.09 Duties of school principal relating to student discipline and school safety.—

(4) When a student has been the victim of a violent crime perpetrated by another student who attends the same school, the school principal shall make full and effective use of the provisions of subsection (2) and s. 1006.13(6) ... 1006.13(5). A school principal who fails to comply with this subsection shall be ineligible for any portion of the performance pay policy incentive or the differentiated pay under s. 1012.22. However, if any party responsible for notification fails to properly notify the school, the school principal shall be eligible for the incentive or differentiated pay.

Section 3. Section 1006.13, Florida Statutes, is amended to read:

1006.13 Policy of zero tolerance for crime and victimization.—

(1) It is the intent of the Legislature to promote a safe
and supportive learning environment in schools, to protect students and staff from conduct that poses a serious threat to school safety, and to encourage schools to use alternatives to expulsion or referral to law enforcement agencies by addressing disruptive behavior through restitution, civil citation, teen court, neighborhood restorative justice, or similar programs. The Legislature finds that zero-tolerance policies are not intended to be rigorously applied to petty acts of misconduct and misdemeanors, including, but not limited to, minor fights or disturbances. The Legislature finds that zero-tolerance policies must apply equally to all students regardless of their economic status, race, or disability.

(2) Each district school board shall adopt a policy of zero tolerance that:

(a) Defines criteria for reporting any act that occurs whenever or wherever students are within the jurisdiction of the district school board.

(b) Defines acts that pose a serious threat to school safety.

(c) Defines petty acts of misconduct. Crime and substance abuse, including the reporting of delinquent acts and crimes occurring whenever and wherever students are under the jurisdiction of the district school board.

(d) Minimizes the victimization of students or staff, including taking all steps necessary to protect the victim of any violent crime from any further victimization.

(e) Establishes a procedure that ensures each student the opportunity to appeal disciplinary action.

(3) Zero-tolerance policies must be zero tolerance
policy shall require students found to have committed one of the following offenses to be expelled, with or without continuing educational services, from the student's regular school for a period of not less than 1 full year, and to be referred to the criminal justice or juvenile justice system.

(a) Bringing a firearm or weapon, as defined in chapter 790, to school, to any school function, or onto any school-sponsored transportation or possessing a firearm at school.

(b) Making a threat or false report, as defined by ss. 790.162 and 790.163, respectively, involving school or school personnel's property, school transportation, or a school-sponsored activity.

District school boards may assign the student to a disciplinary program for the purpose of continuing educational services during the period of expulsion. District school superintendents may consider the 1-year expulsion requirement on a case-by-case basis and request the district school board to modify the requirement by assigning the student to a disciplinary program or second chance school if the request for modification is in writing and it is determined to be in the best interest of the student and the school system. If a student committing any of the offenses in this subsection is a student who has a disability, the district school board shall comply with applicable State Board of Education rules.

(4)(a) Each district school board shall enter into agreements with the county sheriff's office and local police department specifying guidelines for ensuring that acts that pose a serious threat to school safety felonies and violent
misdemeanors, whether committed by a student or adult, and
delinquent acts that would be felonies or violent misdemeanors
if committed by an adult, are reported to a law enforcement
agency. Each district school board shall adopt a cooperative
agreement, pursuant to s. 1003.82(13) with the Department of
Juvenile Justice, that specifies guidelines for ensuring that
all no contact orders entered by the court are reported and
enforced and that all steps necessary are taken to protect the
victim of any such crime. Each

(b) The agreements shall include the role of school
resource officers, if applicable, in handling reported
incidents, special circumstances in which school officials may
handle incidents without filing a report with a law
enforcement agency, and a procedure for ensuring that school
personnel properly report appropriate delinquent acts and
crimes.

(c) Zero-tolerance policies may not require the reporting
of petty acts of misconduct and misdemeanors to a law
enforcement agency, including, but not limited to, disorderly
conduct, disrupting a school function, simple assault or
battery, affray, theft of less than $300, trespassing, and
vandalism of less than $1,000.

(d) The school principal shall ensure that all school personnel are properly informed as to
their responsibilities regarding crime reporting, that
appropriate delinquent acts and crimes are properly reported,
and that actions taken in cases with special circumstances are
properly taken and documented.

(3) Notwithstanding any other provision of law, each
district school board shall adopt rules providing that any
student found to have committed any offense in violation of s.
784.091(1), (2), or (3) shall be expelled or placed in an
alternative school setting or other program, as appropriate.
Upon being charged with the offense, the student shall be
removed from the classroom immediately and placed in an
alternative school setting pending disposition.

(a) Notwithstanding any provision of law prohibiting
the disclosure of the identity of a minor, whenever any student
who is attending a public school is adjudicated guilty of or
delinquent for, or is found to have committed, regardless of
whether adjudication is withheld, or pleads guilty or nolo
contendere to, a felony violation of:

1. Chapter 782, relating to homicide;
2. Chapter 784, relating to assault, battery, and culpable
   negligence;
3. Chapter 787, relating to kidnapping, false imprisonment,
   luring or enticing a child, and custody offenses;
4. Chapter 794, relating to sexual battery;
5. Chapter 800, relating to lewdness and indecent exposure;
6. Chapter 827, relating to abuse of children;
7. Section 812.13, relating to robbery;
8. Section 812.131, relating to robbery by sudden
   snatching;
9. Section 812.133, relating to carjacking; or
10. Section 812.135, relating to home-invasion robbery,
and, before or at the time of such adjudication, withholding of
adjudication, or plea, the offender was attending a school
attended by the victim or a sibling of the victim of the
offense, the Department of Juvenile Justice shall notify the
appropriate district school board of the adjudication or plea,
the requirements in this paragraph, and whether the offender
is prohibited from attending that school or riding on a school
bus whenever the victim or a sibling of the victim is attending
the same school or riding on the same school bus, except as
provided pursuant to a written disposition order under s.
985.455(2). Upon receipt of such notice, the district school
board shall take appropriate action to effectuate the provisions
in this paragraph (b).

(b) Each district school board shall adopt a cooperative
agreement with the Department of Juvenile Justice which
establishes guidelines for ensuring that any no contact order
entered by a court is reported and enforced and that all of the
necessary steps are taken to protect the victim of the offense.
Any offender described in paragraph (a), who is not exempted as
provided in paragraph (a), may not attend any school
attended by the victim or a sibling of the victim of the offense
or ride on a school bus on which the victim or a sibling of the
victim is riding. The offender shall be permitted by the
district school board to attend another school within the
district in which the offender resides, only if the
other school is not attended by the victim or sibling of the
victim of the offense; or the offender may be permitted by
another district school board to attend a school in that
district if the offender is unable to attend any school in the
district in which the offender resides.

(c) If the offender is unable to attend any other school in
the district in which the offender resides and is prohibited from attending a school in another school district, the district school board in the school district in which the offender resides shall take every reasonable precaution to keep the offender separated from the victim while on school grounds or on school transportation. The steps to be taken by a district school board to keep the offender separated from the victim must shall include, but are not limited to, in-school suspension of the offender and the scheduling of classes, lunch, or other school activities of the victim and the offender so as not to coincide.

(d) The offender, or the parents of the offender if the offender is a juvenile, shall arrange to responsible for arranging and pay paying for transportation associated with or required by the offender's attending another school or that would be required as a consequence of the prohibition against riding on a school bus on which the victim or a sibling of the victim is riding. However, the offender or the parents of the offender may shall not be charged for existing modes of transportation that can be used by the offender at no additional cost to the district school board.

(7) Any disciplinary or prosecutorial action taken against a student who violates a zero-tolerance policy must be based on the individual student and the particular circumstances of the student's misconduct.

(8) School districts are encouraged to use alternatives to expulsion or referral to law enforcement agencies unless the use of such alternatives will pose a threat to school safety.

Section 4. This act shall take effect July 1, 2009.