

**Testimony on H.B. 166: Main Operating Budget for FY 2020 - 2021 Senate Finance
Subcommittee on Health and Medicaid**

May 16, 2019

Chairman Hackett and members of the of the Finance Subcommittee on Health and Medicaid, thank you for the opportunity to speak briefly to you today;

My name is Quo Vadis Ellison. I am here representing the Northern Ohioans for Budget Legislation Equality (NOBLE), an organization that works to give a voice to low income and vulnerable residents in Ohio state budget and other issues. I began as a foster care parent in 1972 and became a kinship care parent 25 years ago. In that capacity I previously served as the chair of the Cuyahoga County Foster Care Association and the Ohio Foster Care Association for over 25 years.

It is important and beneficial to keep children within their family unit, when their biological parent or parents, for a multitude of different reasons, cannot adequately provide for them. More often than not, the parents of these children are facing incarceration, addiction and substance abuse, and even death, making it necessary to create a system where all kinship caregivers in Ohio have equitable access to vital services and resources, as they step up to care for children who may be facing some of the most traumatic, unpredictable and stressful moments of their lives. It has been estimated that there are about 125,000 children living in kinship care relationships in Ohio. That is a conservative figure, as there is no hard figure as to the number of children living in kinship care relationships in Ohio. Furthermore, with the ravage of the opioid epidemic in Ohio, the number of those living with kinship care parents is substantially increasing.

Kinship care is the preferred placement to foster care. Research has shown that the outcomes for children who stay in a kinship care relationship is noticeably better than those in foster care relationships. Children in kinship care have better physical, cognitive, emotional, and skill-based scores than those in foster care. Furthermore, Children who reunify with their birth parent(s) after kinship care are less likely to re-enter foster care than those who had been in non-relative foster placements or in group care facilities.

Consequently, we should be doing whatever we can to be promoting kinship care placements and providing support for kinship care providers. It has been my experience that the largest number of kinship care providers tend to be grandparents who are low income or on fixed income. Thus today, I ask for increased state support for kinship care providers such as monetary, child care, legal assistance, medical care and mental health and counseling. Also, there are issues with the current support available in that many of these kinship parents are not aware that any of this support exists. They frequently feel isolated and inadequate. They are not the caregivers that they wish to be nor are they providing the care that their fragile kinship children need. Thus, to alleviate this I ask the legislature to fully fund a Kinship Navigator Program in each county would serve as a one-stop shop for kinship caregivers who are seeking information, assistance, or services and benefits available to them at the state and local levels. The program would in

addition connect families to vital resources such as publicly funded childcare, respite care, training for special needs children as well as legal services. One overarching and important goal of funding A statewide Kinship Navigator Program would be to close the gaps and/or delays associated with service delivery to kinship caregivers.

I thank you for your time and consideration.