

# Hidden victims: Opioid use sends more kids to foster care

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(Photo: Moussa81, Getty Images/iStockphoto)

The news offers daily reminders of the complex challenges our communities, state and country face in the opioid crisis. Governor Eric Holcomb made attacking the drug epidemic a pillar of his inaugural policy agenda. Indiana University has announced its Grand Challenge to respond to the addictions crisis, committing \$50 million to finding solutions.

Indiana's social service, emergency service, criminal justice, health care, and public health providers are working to respond to the relentless array of ongoing, interconnected needs arising from the crisis.

Collaborations among local, state and federal agencies are developing new cross-cutting partnerships and interventions. At the Indiana Youth Institute, we are concentrating on identifying and addressing the short- and long-term consequences of the opioid crisis on Hoosier children.

For the past three years the number of children in Indiana's foster care system has increased steadily. Experts, including Mary Beth Bonaventura, the former director of the Indiana Department of Child services, agree these increases are directly linked to the opioid problem.



Tami Silverman (Photo: Submitted)

"We have more children in care than we've ever had in history, nationwide and in Indiana, Bonventura said. "With all cases counted, (we have) close to 29,000 kids in care in some way shape or form."

In 2016, 52 percent of children DCS removed from a home were removed due to parental substance abuse. When substance abuse is included as a secondary cause, that rate rises to nearly 80 percent.

Who cares for the kids caught in this crisis? In Delaware County, 2.1 percent of children live with foster parents, and 8.3 percent of children live with their grandparents. Bonaventura states in Indiana nearly 51 percent of all DCS foster care placements are with relatives. A September 2017 Pew Charitable Trusts study shows parents of adult children who either struggle with substance use disorder, or have died from an overdose, are raising an increasing number of their grandchildren.

Child placements with relatives, also called kinship care, can be a formal placement from the state or an informal arrangement between the parents and the relative caregivers. In fact, the Pew research estimates that for every foster child formally placed with a relative as a primary caregiver, there are 20 more in informal kinship arrangements. Tina Cloer, president and CEO of Children's Bureau Inc., says "I get calls all the time from people all over the city and state who have now inherited their nieces and nephews, their grandchildren, their friends' kids, because they're struggling with addiction."

About 39 percent of grandparents caring for grandchildren are older than 60, 21 percent live below the poverty line and 26 percent have a disability. Like all children in care, children in kinship care have been found to lack adequate access to primary care, immunization, vision, hearing and dental care services. Despite these challenges, the American Academy of Pediatrics stresses the benefits of kinship care, including increased stability and well-being, reduced trauma, and an increased likelihood that siblings will stay together.

We can help grandparents and family members caring for these young victims of our state's addiction crisis. Kinship care is often unexpected and unplanned. Many families are unaware of available help. For instance, grandparents and families who become licensed foster families can access services and financial supports. Organizations such as [Grandfamilies.org](http://grandfamilies.org/) (<http://grandfamilies.org/>) provide valuable information on applicable laws and resources. Cloer works with many faith-based and community groups that are reaching out to grandparents caring for their grandchildren with basic needs items such as diapers, formula and clothing. As employers, we can offer flexible schedules for those suddenly faced with caring for these children. Schools and youth organizations also need to be sensitive to kinship care arrangements.

Any comprehensive solution to Indiana's opioid crisis must include the impacted children and family members. Most child welfare experts agree that an increased focus on the impacts on the youngest victims is warranted. While we look for policy and systems change at the state level, at the local level we can immediately step in to help families providing kinship care. Actions taken now can help prevent this crisis from lasting into the next generation.

For more information on the impact of opioids on children, see IYI's Issue Brief at [www.iyi.org](http://www.iyi.org/) (<http://www.iyi.org/>).

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