

Abstract

Older adult kinship caregivers, defined as individuals aged 50 and above caring for related children, face unique challenges, including chronic health conditions, financial instability, and limited access to formal support systems. This study aimed to identify the age range at which these caregivers require the most assistance, evaluate when social support begins to decline, and assess how caregiving impacts their mental and physical health. Data were collected from 20 participants across Florida using quantitative surveying methods. Although the sample size limits broader conclusions, findings revealed that caregivers are predominantly female, racially diverse, and frequently managing chronic health conditions.

More than 60% of participants earned \$50,000 or less annually, and nearly 25% reported no access to any formal or informal support services. These results emphasize the need for targeted interventions to address the health, financial, and support gaps faced by older adult kinship caregivers. In future research, qualitative interviews will be conducted to explore these trends further and gain in-depth knowledge of the experience of older adult kinship caregivers to better inform policy and program development.

Research Aims

This study explores the experiences of kinship caregivers aged 50+ in Florida, focusing on:

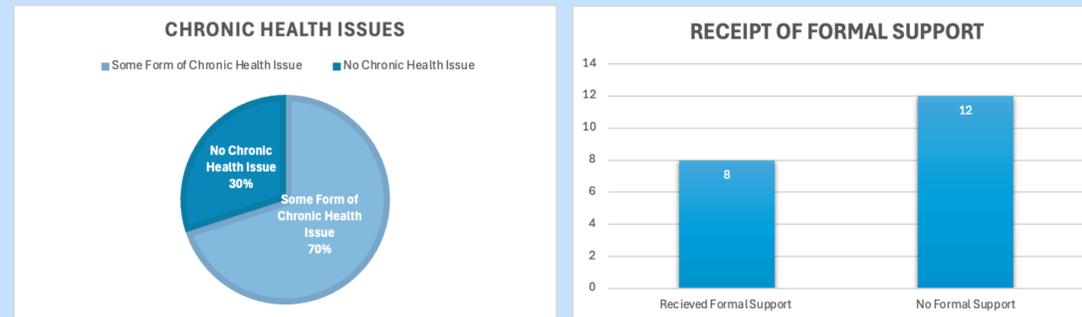
- When they require the most assistance
- How caregiving impacts their mental and physical health
- What formal (e.g., government programs) and informal (e.g., family, community) support systems influence their well-being

Methods

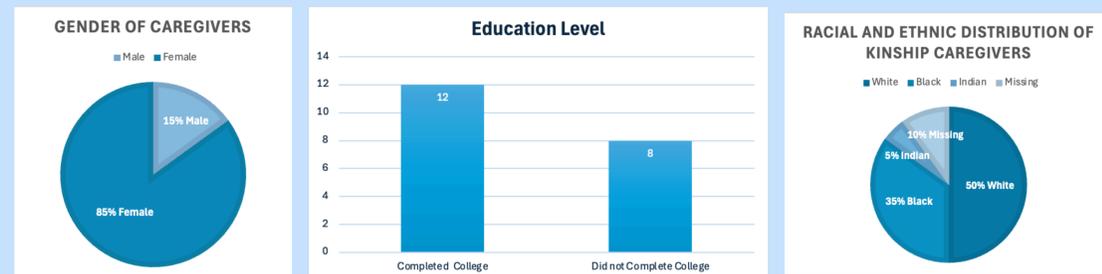
This quantitative study surveyed kinship caregivers aged 50+ in Florida to understand their support needs and health outcomes.

- Participants: Recruited through community organizations (e.g., Grandparents as Parents groups) and online kinship care networks.
- Data Collection: Online survey (Qualtrics) and online or over-the-phone interviews (CATI), covering demographics, caregiving context, health, well-being and support systems.
- Key Measures:
 - Support: Family Support Scale (formal & informal support)
 - Mental Health: PHQ-4 (depression/anxiety) & UCLA Loneliness Scale
 - Physical Health: Checklist of chronic illnesses & Activities of Daily Living (ADL) scale
- Analysis: Descriptive statistics to summarize caregiver demographics and support access. Preliminary analysis was completed through the use of SPSS software.

Caregiver Health and Support



Caregiver Demographics



Preliminary analysis based on findings from quantitative survey data. The sample size is too small to generalize findings. Future research will focus on qualitative interview data to better inform these preliminary findings.

Results

Caregiver Demographics (N = 20)

- Age Range: 51–72 years (Average: 59 years)
- Gender: 85% female (n=17), 15% male (n=3)
- Race/Ethnicity:
 - 50% White (n=10)
 - 35% Black (n=7)
 - 5% Indian (n=1)
 - 10% Hispanic or Latino (n=2)
- Education: 60% completed some college or higher
- Employment Status:
 - 40% employed full-time
 - 20% underemployed (part-time or seeking work)
 - 25% retired

- Income Levels: 61% earned ≤ \$50,000 annually
- Health Conditions: 70% reported at least one chronic illness (e.g., heart disease, cancer, diabetes)

Service Access

- 60% never received formal support from the Department of Children and Families (DCF)
- 30% previously received DCF services, but only 6 caregivers (30%) still receive support
- 25% never received any formal or informal support

Conclusion

Disparities in Service Access:

- Black caregivers (35%) and Hispanic caregivers (10%) were less likely to receive formal support.
- More than half of the older adult caregivers were college-educated, but over 60% reported an income of \$50,000 or less, highlighting a disparity between education and financial stress.

Health & Financial Burdens:

- 70% of caregivers reported chronic health conditions, making caregiving physically demanding.
- Caregivers earning ≤ \$50,000 annually reported greater financial stress, which may impact their caregiving experience.

Social Isolation & Mental Health Risks:

- Those who had never received services (25%) may be at even greater risk for social and mental health challenges.

Future Considerations

Policy Implications

- Expand kinship navigator programs to better serve underserved racial and income groups.
- Increase outreach efforts to ensure lower-income and minority caregivers are aware of and can access available services.
- Improve financial assistance for caregivers facing economic strain, particularly those earning ≤ \$50,000 annually.
- Enhance mental health and social support programs to address social isolation and well-being.

Next Steps

- Conduct qualitative interviews with caregivers to gain deeper insight into their experiences and needs.
- Explore barriers to accessing formal and informal support from caregivers' perspectives.
- Use findings to develop targeted interventions that address both health and financial challenges for older kinship caregivers.
- Create a central source for all resources available to older adult caregivers and make these resources easily accessible in the form of a flyer, helping caregivers find the support they need more efficiently.

Acknowledgements

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