## **Just the Story of the Healthy Grandfamilies Program.mp3**

**Introduction** [00:00:05] Now, this is recording, RTI International Center for Forensic Science presents Just Science.

Voiceover [00:00:20] Welcome to Just Science, a podcast for justice professionals and anyone interested in learning more about forensic science, innovative technology, current research, and actionable strategies to improve the criminal justice system. In episode four, Just Science sat down with Bonnie Dunn, co-director of the West Virginia Healthy Grandfamilies Project, to discuss a free initiative that provides information and resources to grandparents who are raising one or more of their grandchildren. Although they aren't a regular topic in the conversation surrounding the opioid epidemic, children are a population that are often impacted by substance abuse. Incarcerated, addicted, or deceased parents can force children into foster care or alternative family structures. As a product of a grandparent-led household, Bonnie Dunn is keenly aware of the needs and value of these alternative family structures. Now, she serves as the co-director of the West Virginia Healthy Grandfamilies Project. Listen along as she discusses the Healthy Grandfamilies Project, kinship care, and the need for similar programs in this episode of Just Science. This season is in collaboration with the Bureau of Justice Assistance Comprehensive Opioid, Stimulant, and Substance Abuse Program funding to respond to illicit substance use and misuse in order to reduce overdose deaths, promote public safety, and support access to services. This season is funded by the National Institute of Justice's Forensic Technology Center of Excellence. Here is your host, Paige Presler-Jur.

Paige Presler-Jur [00:01:58] Hello and welcome to Just Science. I'm your host, Paige Presler-Jur with the Forensic Technology Center of Excellence, a program of the National Institute of Justice. Our topic today is alternative family structures, specifically kinship care and how programs can be built to enhance the support of these families, such as those affected by substance use disorder. We hope this discussion will provide ideas and guidance for communities such as those with the Bureau of Justice Assistance Comprehensive Opioid, Stimulant, and Substance Abuse Program funding to enhance their efforts to support children and youth affected by the substance abuse epidemic. Here to help us with the discussion is Bonnie Dunn, the West Virginia Healthy Grandfamilies Project, co-director of West Virginia State University. The Healthy Grandfamilies Program is a free initiative that provides information and resources to grandparents who are raising one or more of their grandchildren. The program is funded by the West Virginia Legislature, grant funding, and several of the state's health insurance companies. Welcome, Bonnie.

**Bonnie Dunn** [00:03:13] Thank you, Paige. It's such a pleasure to be here. I'm looking forward to our discussion.

**Paige Presier-Jur** [00:03:19] I took a review at your bio, which is really interesting because you yourself are a product of a grandparent-led home. How has that impacted your career and becoming such an advocate for your community?

**Bonnie Dunn** [00:03:34] Well, Paige, it's quite known to everyone that I'm not a young person. I just had a 72nd birthday and I'm still working full time, and that I gain, that work ethic, from my grandparents who raised me. Certainly I did not set out in 1972 when I graduated from then West Virginia State College, and I obviously have gone full circle and I'm back finishing my career with the institution who trained me. It wasn't until almost six years ago that the Department of Social Work on our campus, the chair came to me and

said, "Before I retire, I'd like to do one more program with you. I would like for you and I to co-write a grant to work with kinship families." And I was all-in because she and I had worked so well together. And as we are writing, we're mentioning grandfamilies, grandparent head of household raising grandchildren. We wrote the grant to the USDA and they came back and said we would be happy to fund you, but we want you to focus solely on grandparents raising grandchildren. When that came back, I got emotional and broke into tears and my co-worker, Dr. Brenda Wamsley, said, "What in the world is wrong? Do you not want to do this?" And I said, "You don't know. I was raised by my maternal grandparents." And I said, "So let's do it, let's go." And I had no idea that the next going on six years of my life would place me in a position where I could truly give back to a household, designated household that I grew up in and was a product of. And I think I'm living proof that it can work. You may not have all the resources that you need, but my primary focus is that you give these grandchildren all of the love and all of the security that you can give them and everything else falls into place. And I just have prayed daily. My grandparents are watching and even my mother and saying, wow, you know, we did it right.

**Paige Presler-Jur** [00:05:58] Absolutely. I hope our listeners are inspired by the passion that you have to help those that are in need in West Virginia. And I'm really excited to share with you about how the West Virginia Healthy Grandfamilies Program at the West Virginia State University Extension Service was launched. First, I'd like to help orient our conversation by asking for you to give us an introduction to what is meant by alternative family structures, specifically kinship care, in terms of this conversation and your program.

**Bonnie Dunn** [00:06:36] The old definition of a family structure was a mom, a dad, two kids, a dog, and a house. That has changed. As a matter of fact, I believe as our society progresses, someday soon we're going to see the number one type of household, definitely in West Virginia if not the nation, will be grandparent head of household or kinship care, meaning aunts, uncles, cousins, whatever, who are raising children that are not their own. And so that's that alternative style. And of course, we have foster care. We do not want to leave that out where there typically is no biological relationship. However, in some cases it is and they become foster parents. But that alternative family life, we don't see much of the standard what was called, quote-unquote, "normal" family structures anymore. So this is what we're endeavoring to address. But in our program, because USDA started the process of asking us to focus solely on grandparents raising grandchildren, we don't specifically address kinship care and these other situations. However, our program model is a great model to use for any of these alternative styles and structures for family living and family life.

**Paige Presier-Jur** [00:08:06] Can you tell us a little bit about how you and your co-creator identified the need for a program like this in West Virginia?

**Bonnie Dunn** [00:08:14] Well, Dr. Wamsley has this wonderful PhD in social work, and she's, her specialty was gerontology. And she is one of these individuals, even though she's now retired, who loves statistics and data. And I think the marriage between the two of us on many things that we did together until she retired, and then particularly this program, was the fact that she was on that side of the fence and I am a community program based kind of person. So where I know I have to count on and speak of data and statistics, that's not my favorite part of this. I'm community development. I am about getting out into the grass roots and providing the education. So when we started researching and getting things together for the grant, the grant was written in 2015, West Virginia was fourth in the nation in the percentage of children being raised by grandparents. And so

that's certainly demonstrated the need. By 2017, if you can imagine this, Paige, West Virginia climbed to second in the nation of the percentage of children being raised by grandparents in almost less than two years. And, boy, when that statistic came out, that was a real eye opener. And, you know, numbers, numbers are one thing, but I'm going to tell you what really is a situation where the rubber hits the road, is when you get out in the communities and these families start surfacing and you start working with them. And then you're working with the Board of Education, county by county, and they're telling you, well, this school has seventy-five percent of its students are being raised by grandparents. This school has got sixty-eight percent. This school has nine hundred and some students in the high school are in kinship care, and most of them are primarily grandparents raising the grandchildren. That's when the reality sets in. It's one thing to say we're second in the nation, but it's another thing when you get out there and our census data does not demonstrate the reality. And for what we are now getting in, data from all fifty-five counties, this program and this need is far greater than any data you can find because we're getting real numbers. I call it counting noses, and the Boards of Education, I think look at me like I've lost my mind, but also count the noses. I need to know how many children in your county school system are being raised by their grandparents. And that's not hard for them to find out. As a matter of fact, they may be sitting on it. They just aren't publicizing. But they are, actually, they started giving us those numbers. And what I'm hoping for in order to identify this need in its purest form, that within maybe the next two years because West Virginia State University Healthy Grandfamilies Program and we are now a center for healthy grandfamilies, is collecting this data. And at some point, I'm going to be able to go to the legislature and say, the last time I talked to you, it looked like, according to the census, there were twenty-eight thousand children in this state. Well, guess what? There's over one hundred thousand. We know that numbers drive money. And so this need and how we identified it, we only had what we could go on in terms of census and kids count. But we since then have found out that that does not begin to touch the numbers. So that's how it came about.

Paige Presler-Jur [00:12:05] Before we move on to hear more about what your program is addressing and how all you are helping these grandparents, I would like to just note that our listeners of the Just Science podcast probably are the data and statistics listeners. And so I just really want to highlight what you said about how you had someone that was focused on that, working with someone that was focused on understanding more what's happening on the ground in the community and how that marriage has brought such a successful program. So I just I really felt the need to call that out because I think that is so critical, especially in this conversation around assisting substance use disorder impacted families.

**Bonnie Dunn** [00:12:55] Well, and Paige, if I could just interject at this point, I have been in the world of education for almost 50 years, and I appreciate research, more than anyone, probably. But research by itself is just research. Statistics and data by itself is just that. It's just numbers on a piece of paper. And I would encourage anyone in those arenas to find someone who you can partner with and translate all of that knowledge, that wonderful knowledge that you come up with, into programs that can bring reality to the numbers. And you're exactly right and thank you for bringing that to everyone's attention.

**Paige Presier-Jur** [00:13:41] Wonderful. Now, let's get to the meat of it. Tell us about the Healthy Grandfamilies Program -what you're offering, your resources. We would love to hear about how you are impacting your community with this.

**Bonnie Dunn** [00:13:56] It's simple, but it has broadened in scope since its infancy. It is a six-month intervention model, first of all. Yes, it gives support, but we always make it very clear, this is not by definition a traditional support group where you meet once a month, have coffee and donuts and have some discussion and you go home. This is a support system that is a six-month intervention. That's how the grandparents enter into it. And then from there, I'll expand on that a little bit later. So the clock starts ticking when you advertise about this program - you advertise, you recruit, you enroll grandparents into this process. For instance, if I have 10 grandfamilies who have contacted our office and they want to participate in this and they're all in the same zip code area, and so we look at that area, the geographics, well, where can we go into that community and hold this program? Because in the context of the six months, there is an eight week, in-person, face-to-face program. And in that there are ten topics that are highly relevant to the stressors and challenges that these families are facing. It's grandparent driven. We say, do you want this at lunch time or do you want it at dinner time? And the reason we identify it by meals is because we provide a really nice meal for them. They don't have to cook that time. We provide childcare, bring the grandchildren. We'll have someone to take care of them. It's a little respite for them as well. And by the way, while you're there, you're going to be in a room with other grandparents who are raising their grandchildren. Because we discovered early on that most of our grandparents are feeling isolated. They think they're the only ones that's doing this.

**Bonnie Dunn** [00:16:04] So for those eight weeks, we cover ten topics and those topics are parenting in the 21st century. My goodness, it is nothing like it used to be to parent a child. I've got two grown children. I would not want to be parenting a child in this century with the challenges that they face. And I'm going to get into some of those challenges in a minute from topics. But we talk about that parent-child relationship, that interaction, and we discovered our very first session, I was, I'm a woman of faith, and I was saying, you know, Lord, what do I need to say to these people about parenting? Because I parented two children and by all accounts, by our social measures, my children turned out, were very well-rounded people with fantastic jobs and they are sensitive to people's needs and everything else. My son tells me I just got lucky. I mean, he always brings me into reality. But these parents, what's bothering them? And here was what came out of that. We must have not gotten it right the first time or we wouldn't be here doing it again. And when I made that statement to them, the tears flowed.

**Bonnie Dunn** [00:17:23] Then we talk about family relationships, and that's when the tears really started, because this is why USDA said work with grandparents. It's a totally different family structure and dynamic because of the biological connection. You know, for so many people, you might have memories of going to grandma and grandpa's. And it was fun. Grandma would sugar you up, would let you stay up late. Would let you play games, would not make you eat your vegetables. And what happened at grandma's house stayed at grandma's house. All of a sudden, these children are thrust into grandma's house and they're thinking, yay, this is going to be fun. And suddenly grandma has rules. You have to go to bed early, you have to do your homework. You have to eat your vegetables. What happened to my grandparents? Where did they go? Because now they have taken on the role as mom and dad. And you talk about mass confusion in the child's mind, also in the mind and hearts of the grandparents, because they're having to transition as well. And so we talk about family relationships and the family dynamics, and also the grandparents are caught between the biological child who has either relinquished the children or they've been taken away from them or that biological child is in addiction to the point that they just drop the kids off at grandma's. And most cases that we, as we had anecdotal notes from these grandparents, the children would come with no clothing. Maybe they will have a T-

shirt and a diaper on. They might have a bottle. The different scenarios that we got from these families was absolutely heart wrenching. And no grandparent is prepared for that. I mean, we had a story where they were dropped off at eleven o'clock at night. No bedding, not enough bedding for three or four grandchildren. I had no bottles. I had no formula. I had no diapers. I have nothing. I was not prepared.

Bonnie Dunn [00:19:31] So family relationships and the next thing we talk about is selfcare, health literacy. In our pilot project out of the grant, we had one hundred and twenty five cohorts, every one of them presented with at least one professionally diagnosed chronic illness. Our grandparents are not well. So we needed to address them taking better care of themselves if we want them to be around to finish raising these grandchildren because we need them. Our foster care system cannot hold what is out there. There are not enough foster families. So we need our grandparents to be well. Stress was another topic. I had a grandpa, he was the funniest thing, and he and his wife were there. They are great grandparents raising a little great-granddaughter. And he informed me, he wasn't stressed. I'm not stressed. But he had also been telling me how he had had several aneurysms and he had had open heart surgery and he had all these things and he was overweight. And I'm thinking this man is stressed, he just hasn't taken time to figure it out. So finally, we have this little stress test numerical and he said that I am staying even though I am not stressed, I don't need this, I'm staying. And I said, well, grandpa, I know you will because you're going to want to have lunch with us. So he took the stress test. I should have called 911. His score, he blew it off the map, and I said, so grandpa, what does this say to you? And he said, you know, I'm so busy about chasing this three year old great-granddaughter that I haven't even thought about myself. And I said, you need to get your fishing pole and go fishing.

**Bonnie Dunn** [00:21:16] And so we address stress and we address nutrition. Many of our grandparents are actually cooking for one or two. We have an awful lot of grandmothers who are raising grandchildren by themselves, without a spouse, grandpa has died or whatever. We had a significant number of grandfathers raising grandchildren by themselves, which was an interesting dynamic. And so we needed to address nutrition, how to start preparing better meals for these children, how to get the children involved.

Bonnie Dunn [00:21:49] And then we talk about social media and cyber bullying. And this is another one of those parenting in the 21st century issues where now we're dealing with this. Well grandparents, by and large, aren't tech savvy, aren't social media savvy, and that was proven when a grandmother leaned over to me while the police officer was teaching this subject and she said, what's an app? And as funny, I see you kind of smiling because you and I can see each other, as funny as that sort of hits us, that grandmother didn't know what an app was. And I said, you're going to find out. She had a cell phone, but she only used it as a telephone. Some weeks after that program ended, she called the social worker and she was screaming and she said the FBI's at my front door. How fast can you get to my house? I need help. I don't know what to do. As it was, the social worker lived pretty close. She went over to her home only to find out one of the three grandchildren that she was raising, the daughter, granddaughter, she's raising these three because mom's in prison on drug charges for 30 years, had posted nude pictures of herself on social media. Grandma did not know what an app was. How can grandma protect grandchildren from the ills of social media, cyber bullying and all that goes with it?

**Bonnie Dunn** [00:23:14] Next, we talk about navigating the school system. We bring a person in from the County Board of Education to address to these grandparents how they can become involved. Because the school system is not structured the way it was when

grandma and grandpa were raising their children, much less great-grandparents or great-great.

**Bonnie Dunn** [00:23:36] Then we talk about navigating the legal system. Many of these grandparents need legal counsel, if not legal representation. And so one of our big partners from the get-go was Legal Aid of West Virginia. The grandparents can get free help and grandparents can afford an attorney. This is where one of my personal stories came out and it forced me to go back to when my biological dad was a police officer, came to our home in uniform with a gun drawn and said, I want her. I'm going to take her. My grandfather being the wonderful man he was, a godly man, but he had a double barrel shotgun and he was a hunter. He was from Pocahontas County, West Virginia, and he said, get off our property. We'll see you in court. My question to this day that I will not get answered unless these kinds of discussions take place in heaven is how did they afford this? Because in 1952, I know there had to be charges, there had to be lawyers fees, there had to be. How did my grandparents afford to fight him in court? Of course we know what the outcome was. So this is why Legal Aid of West Virginia and this problem has gotten so big and Legal Aid has, is so embedded in it, they had to designate one attorney to help manage this whole state issue for these grandparents.

Bonnie Dunn [00:25:09] We also talk about family response to addiction because the families are struggling. They don't understand addiction. And we get a guest speaker in who talks about substance use disorders and recovery and family dynamics. And that particular topic rendered a lot of tears as well. So during that eight weeks, we have ten topics. At the end of it, they graduate, they get a certificate of completion, an official certificate of completion, that they've been able to use within the context of court systems and that kind of thing. And then when that ends, the social worker let me speak to that. So this-six month intervention has a social worker component to it, that from the very beginning, the grandparent enrolls, the social worker begins getting to know these families. They do an assessment for them, they find out what their needs are. They find out what their struggles are. They find out how many grandchildren, their ages, what's the situation, why do you have them? And it's not about us getting into their business. And we are not connected to DHHR, the Division of Health and Human Services or CPS, Child Protective Services. However, if we saw a situation that needed to be given some attention to, we certainly would be bound to do that. But we are there to advocate and intervene and help them find resources. And that's what the social worker primarily does.

**Bonnie Dunn** [00:26:43] So at the end of the eight-week program and by the way, at the end of it, the grandparents who seemed skeptical in the beginning said, "when are you going to be doing this again?" And I said, "well, I've got tons of programs scheduled." "Well, I'd like to come to one of them," and I said, "you really don't want to do that, you don't want to come and listen to me and all these presenters again." But what that demonstrated was that connectivity, that ability to get support from other grandparents, that thing of being in the room where somebody understood - they loved it. So out of this, we have seen the traditional support groups pop up and are doing very well. So the social worker at the end of the eight weeks develops an action plan. How can I help you the next three months? What can I do? We have to prioritize our needs. What are your top needs that I need to help you with? That I need to help you navigate the bureaucracy and find resources for you to make your life easier. Then at the end of that three-month period, there's some final assessments. So that's the six-month intervention. So it's not actually grandparents having to be committed to come into a program every week for six solid months. The intervention works very well. We did a two-year post assessment and collected data and it came into my office and I literally sat and bawled, cried. I couldn't help it because it was supposed to be totally anonymous. But some of them didn't want to protect their anonymity. They wrote letters on the backs of the assessment form. You'll never know what this program and what your support has meant. And it was overwhelming. Of the one hundred and twenty five we sent out, we got a little over 50 percent return, which in the world of research is almost unheard of that you get 20, you get 50 percent response after a program has ended two years ago because most people say what program? Well, not in this case.

Bonnie Dunn [00:28:54] So with that, we know the program works. We know the intervention has worked. And so at the end of the three years of the USDA funding, there we sat. We had written two other grants. We had not gotten them. And I tell you, Dr. Wamsley's one of the best grant writers on the face of this Earth. We had a team put these things together, it just didn't happen. But you know what? I don't think it was supposed to because the word got out that the Healthy Grandfamilies Program looked like it might have to end and somehow it got into the ears of one of our legislators. Next thing I knew, I was testifying before the West Virginia state legislature. The next thing I knew, we had money. They said somehow you all have captured, and have gotten the ability to implement a program and pull together all of the county resources, social service resources, faithbased, businesses, everything. To do this now, we're not sure how you did it, but we know you did it, so now we want you to go forth and do it in all fifty-five counties in West Virginia. And I was like, yeah, OK, we can do this, but I wasn't quite sure what it was going to look like. Well, I'm happy to report that at the end of the twelfth month of that year, all fifty-five counties had been trained, every county had a West Virginia State University Healthy Grandfamilies Coalition. And today, the majority of our counties are endeavoring and are serving grandparents in their counties. The Board of Education is one of the more important partners because they know where these families are. We had a hard time finding the families until one day the light bulb went on. The school system knows these families. So that is how this program works. It cannot operate without a social worker. That's an important component to it, that it also cannot operate without the communitybased approach.

**Paige Presler-Jur** [00:31:12] It's really fabulous to hear. Number one, you walked through so much it - you talked about how you got started. You talked about all of the greatest needs that the grandparents are having. And you followed through with how you all are creating sustainability, which is so important. And as I said earlier, I'm always really happy when people highlight partnerships, which you are obviously showing and indicated how important that was to the state of West Virginia. If you were going to give guidance or support to other states or communities that could be interested in a program like this, do you have any thoughts on what would be beneficial for them?

**Bonnie Dunn** [00:31:52] Well, we already have trained the Kentucky State University. I just conducted a training in the Virginia Beach area. I've been talking with folks in Texas. I actually got, was blessed, I got to go to Guam and train extension staff there because on that small island, they have an enormous problem of grandparent head of household. I would say to folks who are listening, go to healthygrandfamilies.com and you will find anything and everything that you need to know and didn't know you needed to know on that website. We train, and I know people are going to ask, well, what's that cost? I don't know. Call me, talk to me. We'll negotiate. Because the most important thing is for us to get this program model out there because it works and all the contact information is there to get a hold of me or any of our staff, and our staff is small. I'm the only full time person. But the most important thing that I can say to communities - that this program has the ability to get agencies to erase the line in the sand that so many draw. To get rid of the

turf. As I trained all fifty-five counties, I would say, come on over and join us. We'll make you look good. Because this program is already in your plan of work and this just gives you a platform to make your job actually easier. And so I think that's one of the reasons it's been so successful. And then the outpouring of support from businesses and counties, I've never seen anything quite like this and how it has been supported.

**Bonnie Dunn** [00:33:45] So I think that anyone who is interested in addressing this initiative in their state and by the way, this isn't a West Virginia problem. This is nationwide. Just look it up. As I said earlier, we're number two and we thank God for Mississippi because they always keep us out of that number one spot and limelight. Now for Mississippi, I'm here to tell you that I think that we probably are sharing that with you right now. And so it's something that needs to be addressed nationwide. We've got to do something about this. Foster care families get a decent check, I'm not going to say it's all they need, per child. In West Virginia, a grandfamily can apply for what was, under West Virginia works, the child only check. It's two hundred and eighty eight dollars a month for the first child. Somebody decided to prorate beyond one child to forty dollars for each additional child. And I just, I keep saying this, I don't know if I'm going get in trouble someday for it, but I want to meet the person who created that formula because you cannot do anything at all for a child with forty dollars a month. I tell you what, you can't even buy formula if you're not getting WIC. I went with my cousin one day to purchase formula for her granddaughter and I couldn't believe the cost. And that's when it really kind of brought home to me. Hey, wait a minute, a) the grandparents are thankful for any penny or dime they get, but we've got to do better. We have got to do better for these families.

Paige Presler-Jur [00:35:27] You have really touched on all the ways that we can do better as communities to support children and families impacted by substance use disorder. Thank you for highlighting all of the ways that other areas might be able to put in programs such as the Healthy Grandfamilies Program and identifying that this is a true need, that we should be coming together as partners to work. I'd like to hear what's next for the Healthy Grandfamilies program. I'm glad to hear that you are sustainable with your funding and that you're growing this to other states. But what would you like to see next?

Bonnie Dunn [00:36:09] I am concerned about our program in West Virginia because I don't believe that it is on solid ground yet. I believe it's working on it. The state legislature has provided support for two years. And of course, we never know what the next legislative session will do. We need to make this a permanent program under the auspices of that legislative umbrella. But in terms of funding and full sustainability, because Paige, this problem's not going to go away. If we got rid of the drug problem today, we've got twenty-five more years of raising the children who are products of it. One of our partners is the Bureau of Senior Services. These families are senior citizens, and so maybe it will end up being a part of their budget line. But right now it concerns me because every year, I'm going back to the legislature. I'm pleading the case, if you will, but to try to get this sustainable for time and eternity, just like so many other programs that fall under the umbrella of DHHR which are many, and by the way, the DHHR, the Division of Health and Human Services or Health and Human Resources in West Virginia, is one of our big partners. Without them. I don't know what we would have done because we have to refer our grandparents to them. But my biggest concern is the longevity of the program, that I know when I walk away, that grandparents are going to continue to receive the support that they need to have healthy families. We've become the point of contact for grandparents who are raising grandchildren. And prior to this program, they had nothing. You know, if you go to the doctor, you're diagnosed with diabetes, the doctor can give you a list as long as your arm of support services for a diabetic. But if somebody drops children off at your house at midnight, there is no 1-800 call granny, "help, I've just got my grandchildren and I'm going to have to raise them. What do I do," kind of thing. And they also are afraid, we've got to mention this before we end, they are concerned that if they put themselves out there, all they can think of is CPS, Child Protective Services. Well, they're not going to let me keep these grandchildren. They have no idea we have a Family First act that says try to find a family member to take these children before you put them in foster care. So we have got to have points of contact, state by state by state, that when a grandparent takes this on, they know there's help out there and they don't feel so isolated and unsupported.

**Paige Presier-Jur** [00:39:08] I feel like you've highlighted so much about the importance of the Healthy Grandfamilies Program, but also supporting grandparents, raising one or more of their grandchildren. In your final thoughts, I'd like for you to share with our listeners what positive impacts kinship care as a whole can provide children that are impacted by the substance use disorder crisis that is facing our nation?

Bonnie Dunn [00:39:33] Well, I draw from my own experiences as a child and a product of this type of household. You cannot put a price on security. If you're feeling insecure, whether it's food insecure, housing insecure, supervision insecure, and the list could go on; as a child growing up in that situation, my mom was a wonderful woman, and she had no other choice but to turn me over to my grandparents because she had a job. And that job was long hours, and she was away from the home, and she eventually remarried. And of course, my grandparents had taken over anyway. But I can recall a situation where, plus my mom had six other siblings, that one of the aunts by marriage informed my grandparents that, "listen, you should be retired, you should be living in our big, nice home on the lake. And we want to move you up here." And I was in elementary school and I overheard this conversation. Well, I disappeared out by the lake because we were at the lake house and it was very dark. And I heard my grandfather yelling for me and I couldn't even hardly respond because I was sobbing. And he finally came down and found me and he said, "Bonnie, what is wrong?" And I said, "you and granny are going to move. What's gonna happen to me?" Well, he hugged me and he said, "I'm going to tell something. As long as I have a roof over my head, you're going to be there with me. And your grandmother and I are not going to move up here to this lake. We will come visit and you will be with us. We are staying right where we are in Rand, West Virginia" - and before anybody jumps and says the home of Randy Moss, yeah, but it's also Bonnie Dunn's home - "and we are going to finish raising you." What it means to these children is security and safety and protection. A roof over their heads, a little, even though it's not the best meals in the world, but some food on the table. We have so many grandchildren that have been in this program with their grandparents who when the grandparents got them, we had one little girl that all the baby teeth had to be extracted because the mother had never given that child from birth anything but sodas and snacks and candy. It means a stable home life. They have stability, you know, and we don't know what we're missing unless somebody tells us. So if they've got food, clothing, shelter, and tons of love and feel safe and secure, that's what it means, and everything else is fluff and stuff. So that's my final word on this one. Paige, I must say, before we end, Bill and Lolly Bathurst from Pocahontas County, moved to Rand, West Virginia. I was born in 1948. I was the second grandchild. My mom was their oldest child. Had it not been for them, you would not be talking Bonnie Dunn right now. They had an eighth grade education. We were poor, but I had all I needed. I had love, I had security, and God knows if anybody sees a picture of me, I certainly had enough to eat. And that's all that mattered.

**Paige Presier-Jur** [00:42:54] This is so, so touching and so wonderful. And I just really want to thank you, Bonnie, for being our guest today so that we could sit down with Just Science to discuss how designing programs to support strong alternative family structures will enhance efforts to improve the lives of children and youth affected by the substance abuse epidemic. And I want to highlight again how much partnerships have made all of this possible in the states that the Healthy Grandfamilies program is being implemented. Partnerships are so important in order to be able to tackle these very important problems. Thank you so much, Bonnie.

**Bonnie Dunn** [00:43:38] Thank you, Paige, for having me. I've counted it a privilege to be with you, and I am available at any time, for any reason, when it comes to talking about grandfamilies.

**Paige Presler-Jur** [00:43:51] If you enjoyed today's conversation, be sure to like and follow Just Science on your podcast platform of choice. For more information on today's topic and resources in both the forensic field, but also those tackling the substance abuse epidemic in your communities, visit forensiccoe.org. I'm Paige Presler-Jur and this has been another episode of Just Science.

**Voiceover** [00:44:21] Next week, Just Science interviews, Dr. Mallory O'Brien, Assistant Professor at the Medical College of Wisconsin, to discuss how partnerships can enhance overdose fatality reviews. Opinions or points of views expressed in this podcast represent a consensus of the authors and do not necessarily represent the official position or policies of its funding.