



**Family**  
for every child

How to support  
**KINSHIP**  
**care** Lessons learnt from  
around the world

**SUMMARY**



This guidance has been endorsed by the following Family members:



The guidance has also been endorsed by the following organisations:



## Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

Conclusions



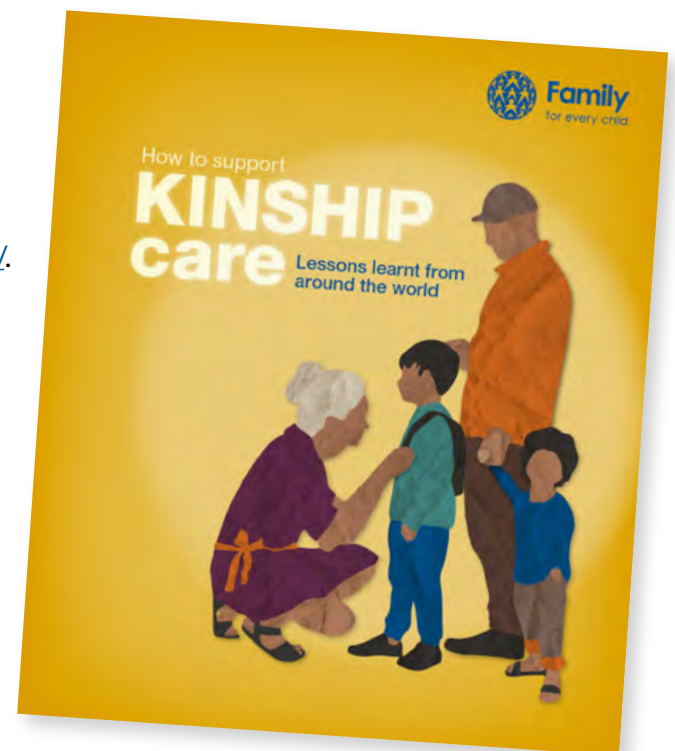
# Introduction

Children who cannot be looked after by their parents often live with relatives or friends of the family. This care is known as kinship care. Kinship care is acknowledged in global guidance as the first form of care that should be explored for children outside of parental care.<sup>1</sup> It is widely used across the world.<sup>2</sup> However, it is poorly supported in many countries.<sup>3</sup>

This guidance explains why supporting kinship care is so important and provides principles of good practice and lessons learnt from across the world. The guidance is aimed at policymakers and programme managers working to improve the care of children. It was developed from a review of the literature, 28 key informant interviews, online and face-to face workshops with policymakers and practitioners in multiple countries, and consultations with 215 kinship carers and 196 children across seven countries.<sup>4</sup>

This is a summary of a more detailed version of the guidance, which also includes over 40 examples of promising practice from across the world.

For a full version of the guidance, please visit <https://familyforeverychild.org/>.



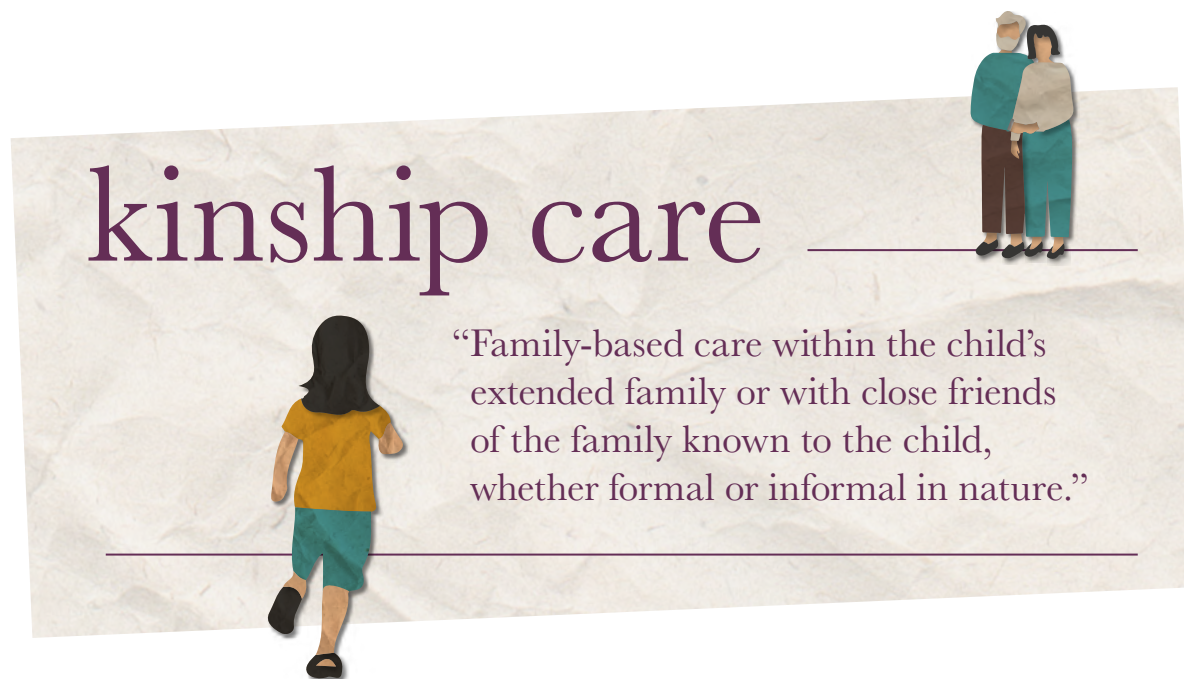


## Types of kinship care

The term kinship care encompasses a wide variety of caring arrangements. **It includes:**

- care by elderly grandparents, adult siblings, and other relatives or friends of the family,
- informal arrangements made by the family, and placements formalised by the courts, and
- care lasting anything from a few days to entire childhoods.

The challenges and benefits of kinship care can vary by type of care.<sup>5</sup> Recognising that kinship care involves multiple forms of care is essential for developing appropriate responses.<sup>6</sup>



“Family-based care within the child’s extended family or with close friends of the family known to the child, whether formal or informal in nature.”

Introduction

Types of kinship care

**Why support kinship care?**

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

Conclusions



## Why support kinship care?

**Supporting kinship care is important because:**<sup>7</sup>

- Kinship care has multiple benefits for children. Evidence shows that it is often their preferred form of care, and many children in kinship care are loved and well cared for. Compared to other forms of alternative care, such as foster or residential care, kinship care often offers greater continuity, stability, sense of identity and belonging, and social networks. Kinship care can also lead to better outcomes in areas such as health, education, and emotional wellbeing than other forms of alternative care. Kinship care can be used as part of strategies to remove children from harmful institutional care.
- Both the United Nations (UN) Convention on the Rights of the Child and the Guidelines for the alternative care of children recognise the value of kinship care. The Guidelines state that if children can't be cared for by their parents, maximum efforts must be made to support kinship care arrangements, as long as this is in children's best interests.
- Kinship care can benefit carers too, providing companionship and support to carers and a sense of satisfaction in caring for a vulnerable child.
- Kinship care is often culturally acceptable, making it easier to support than some other forms of care. After parental care it is the most common form of care for children globally.
- Kinship care is cost-effective compared to residential or foster care.
- Kinship care families need assistance and are not currently being supported.

## Benefits

Kinship care has multiple benefits for children. **Evidence shows that it is often their preferred form of care**, and many children in kinship care are loved and well cared for.



Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

Conclusions



“

**Grandmothers** will always look for food for you and share it equally. They will allow you to rest when you are tired. Grandmothers will try and care for you as they would their own children.

”

(Child in kinship care, **Malawi**)<sup>8</sup>



“

**I love it** when my aunt calls me using lovely words and makes me feel that I didn't lose my parents...

”

(17-year-old Syrian girl, living with an aunt in a refugee camp, **Jordan**)<sup>9</sup>



“

**We are so happy** and blessed in our role as grandparents and carers. This is a joy words cannot fully express.... We are much richer for having them in our lives; even with the challenges that come with it, I wouldn't change a thing.

”

(Grandmother, **Australia**)<sup>10</sup>

Introduction

Types of kinship care

Why support kinship care?

## Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

Conclusions



# Principles of good practice in supporting kinship care

- Base all responses to kinship care on a contextual understanding of kinship care; there are no one-size-fits-all solutions.
- Enable the active participation of children in kinship care, young people who have grown up in kinship care, parents, and kinship carers in the design and delivery of interventions on kinship care.
- Take a kin-first, best interests focused approach. This means that kinship care is always considered first when children cannot be cared for by their parents, and used where possible, provided it is in the best interests of the child.
- Recognise and build on the strengths in kinship care families; don't just focus on the problems they have.
- Ensure sufficiently nuanced responses to kinship care that respond to different needs according to the form of kinship care and the characteristics and experiences of the child and carer. Don't exclude less common forms of kinship care, such as care by older siblings or friends of the family.
- Recognise that groups that are discriminated against are often over-represented in kinship care, or may require particular support. This includes children with disabilities and children from indigenous communities. Ensure that programmes and policies that support kinship care are inclusive and address diverse needs.
- Recognise the fundamental differences between kinship and parental or foster care, but don't treat kinship care arrangements as somehow abnormal.

I never thought it was a form of care-... I just thought that it was going to stay with Nanna or Grandad for this long time and that's it. It didn't seem weird or strange to me anyway.

(21-year-old man who spent part of his childhood in kinship care, Australia)<sup>11</sup>



Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

## Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

Conclusions



# Creating an enabling environment for kinship care

To create an environment where all of the necessary services and support can be offered to kinship care families, the following are vital.

- **Collect evidence** on the reasons for entry into kinship care, the scale of kinship care, support needs, the strengths and weaknesses in the existing care and protection system, effective strategies for supporting kinship care, and outcomes from kinship care. This requires a combination of quantitative and qualitative data, and must include gaining an understanding of the experiences of kinship carers, parents, and children.<sup>12</sup>
- **Promote kinship care.** Promoting kinship care may involve highlighting the scale of kinship care, sharing the experiences of kinship care families, setting up kinship carer associations, and lobbying and campaigning to raise political interest and encourage policy change. Strategies should be based on an understanding of why kinship care is currently neglected by governments.
- **Develop policies, strategies, and guidance on kinship care** that define kinship care, promote a kin-first approach and other principles of good practice, outline a package of support for kinship carers and children, and explain when kinship care needs to be formalised.<sup>13</sup> These policies should be underpinned by a child rights approach.
- **Strengthen the social services workforce to support kinship care.** Social service workers can include professionals, paraprofessionals, and community volunteers. Ensure that there are enough social service workers based in communities and with insights into kinship care.<sup>14</sup> Give social service workers the time and skills to work directly with families in strength-based and participatory ways.<sup>15</sup> Make sure that social service workers understand the needs of kinship care families and work to build their trust.<sup>16</sup> Recognise the role of community volunteers and paraprofessionals but ensure that they are supervised by and linked to professional social workers.<sup>17</sup>
- **Work across sectors and coordinate responses to kinship care.** Ensure that those working in key sectors such as child protection, education, health, social protection/financial support, housing, and justice understand and try to meet the needs of kinship care families.<sup>18</sup>
- **Ensure that services and support for kinship care are properly financed.** Estimate how much is already being spent on kinship care and what needs to be spent, and lobby for increased investments.<sup>19</sup>
- **Ensure social norms support kinship care.** Celebrate norms that are supportive of kinship care and challenge those that may place children and carers at risk.<sup>20</sup>



## Pathways to services and support and the formalisation of kinship care

There are two main ways in which kinship care ceases to be an informal arrangement made within families and becomes a more formal arrangement involving the courts or social service workers.

- An assessment by social service workers to determine the suitability of kinship care arrangements, often involving the courts, and followed by monitoring and support by social service workers. In some countries, this includes kinship carers becoming kinship foster carers, and in many high-income contexts there are range of formal kinship care arrangements.
- Legal registration of kinship care arrangements that recognises the rights and responsibilities of kinship carers, but does not involve social work or court assessments, endorsement, or on-going engagement.

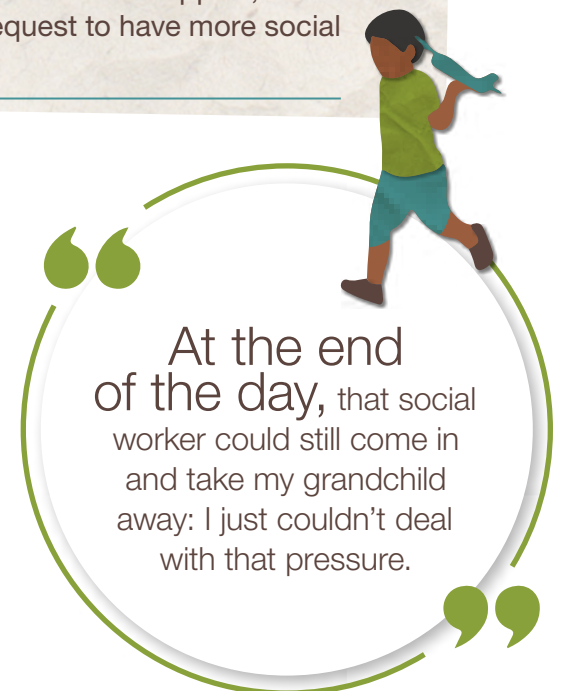


Social service workers do not automatically need to assess, monitor, or support all kinship care arrangements. Social work intervention in kinship care families should be determined by the same criteria which guide social work involvement in any family. These vary by context, but may include, for example, children having complex needs that require intensive and coordinated support, or/and being at risk of harm.<sup>21</sup> Families may also request to have more social service worker involvement and support.

Although there are many benefits to social work engagement, the overuse of social work intervention in kinship care can bring difficulties. The involvement of social service workers in family life may be resisted by families who mistrust social services or the state.<sup>22</sup> Social work engagement with the family could prevent potential kinship carers from coming forward to care for the child.<sup>23</sup> Requirements that social service workers regularly monitor all kinship care families can also overwhelm child protection systems.<sup>24</sup>

Legal registration of kinship care is valuable for providing clarity in terms of who is responsible for children's care, allowing carers to make key decisions about the child's life.<sup>26</sup> Although there are many advantages to this recognition, it can also be resisted by kinship carers if they are mistrustful of the state.<sup>27</sup>

Overall, support should always be made available to kinship carers based on their needs, and regardless of legal recognition or social services intervention. This means that access to financial support or other services should not be dependent on the type of kinship care arrangement. Kinship care families should have some choice in selecting the form of care most suitable to meet their needs. This means having information about the different kinship care arrangements available in their context.



At the end of the day, that social worker could still come in and take my grandchild away: I just couldn't deal with that pressure.

(Grandparent carer, USA)<sup>25</sup>

Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

**Services and support for kinship care**

Variations in support to kinship care

Conclusions



# Services and support for kinship care

## Social services and case management support

Where social work intervention is needed in kinship carer families, case management can be valuable. Approaches and tools must be adjusted to reflect the needs of kinship care families, which are often different from parental<sup>28</sup> or foster care<sup>29</sup> households. High levels of child and carer participation are vital for understanding and addressing the unique needs of these families. Social service workers should focus on strengths and work to build the family's trust.<sup>30</sup>

## Supporting better informal decision making about kinship care

In many countries, the available evidence suggests that it is more common for decisions on kinship care to be made informally, with a relatively small proportion of kinship care arrangements formalised by courts or social welfare systems.<sup>31</sup> Supporting decision-making within families and communities is therefore vital.



Families should be encouraged to consider the perspectives of all family members, including children, and to focus on the best interests of the child. Families should also have access to information to help inform decisions.

## Providing information about services and support

Kinship care families need information about where they can get services and support,<sup>32</sup> legal advice,<sup>33</sup> and help navigating child protection systems.<sup>34</sup> In some countries, kinship carers require information on processes for legal documentation/registration of children, as such processes can be harder for kinship carers than parents.<sup>35</sup>

# Unique needs

High levels of child and carer participation **are vital for understanding and addressing** the unique needs of these families. Social service workers should focus on strengths and work to build the family's trust.



Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

**Services and support for kinship care**

Variations in support to kinship care

Conclusions

## Protecting children in kinship care and ensuring they are part of a loving family

In the consultations carried out for this guidance, children in kinship care emphasised the importance of being loved, valued, respected, and accepted, and feeling they belonged to their new family. Although many children in kinship care are loved and well cared for, like children in any family, some are at risk of harm.<sup>36</sup> Children may experience violence in the family, be discriminated against and treated differently from other children in the household<sup>37</sup> or be exploited by carers.<sup>38</sup> In some countries, evidence shows that risks are greater when children are living with more distant relatives.<sup>39</sup> Strategies to mitigate the risk of harm include: reducing poverty, which is often linked to stress and violence in the home; providing additional supports to stressed carers; community monitoring and support of families; social work intervention; and challenging discriminatory social norms.



## Protecting kinship carers from violence

In some high-income contexts, evidence shows that children's traumatic experiences can result in violence towards kinship carers.<sup>42</sup> Similar challenges may exist in lower income settings, though evidence is limited on this topic. Social service workers must build trust with carers so that they can honestly share such difficulties. Children in kinship care should be provided with support to process trauma and address challenging behaviours.

Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

**Services and support for kinship care**

Variations in support to kinship care

Conclusions

## Addressing poverty in kinship care families

Evidence from across the world shows that kinship care families are poorer than other households.<sup>43</sup> Efforts must be made to ensure kinship carers can access financial support aimed at vulnerable families, or to create social protection programmes specifically for kinship carers.<sup>44</sup> Financial support should be inclusive so that families in less common kinship care arrangements are eligible for assistance. Support should be assigned based on the needs of the family rather than the form of kinship care. Programmes which combine cash with other forms of assistance, such as referrals to social workers are more likely to be beneficial than cash alone. Financial support must be carefully designed to avoid any unintended negative consequences, such as a creating perverse incentives for placing children in kinship care or jealousy between children in the family.<sup>45</sup>

## Meeting emotional and mental health needs

Kinship care is often associated with bereavement, trauma and loss,<sup>46</sup> and both children in kinship care and their carers are more likely to experience mental health problems than their peers.<sup>47</sup> Kinship carer families need a range of mental health supports including access to respite care, life-skills training, referrals for counselling or other mental health services, and peer-to-peer support groups.<sup>48</sup>

**I miss my parents very much.** Especially in these days when the school just started, it feels like everything I see reminds me of the time I spent with them. Then I sometimes cry a little.

(11-year-old girl living with her aunt as her parents have migrated for work, **China**)<sup>49</sup>

**I am permanently tired,** always anxious. ... I am often very, very sad about life and worry about the boys and my other grandchildren.

(Kinship carer, **UK**)<sup>50</sup>

Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

**Services and support for kinship care**

Variations in support to kinship care

Conclusions

## Meeting physical health care needs

As with mental health, both children in kinship care and their carers are more likely to suffer from physical health problems than children in parental care or parents.<sup>51</sup> Children and carers often face barriers to health care as a result of factors such as lack of clarity over parental responsibility or not being targeted by health care programmes.<sup>52</sup>



Strategies to improve health care for kinship care families include better referrals between social service workers and health care providers, and educating health care professionals on the particular needs of kinship care families.<sup>53</sup>

## Improving education for children in kinship care

Research demonstrates that children in kinship care do less well in school than those in parental care.<sup>54</sup> Strategies to improve educational outcomes for children in kinship care include training teachers to be aware of the challenges faced by kinship carers, giving children in kinship care additional educational supports, and ensuring kinship carers have access to information about school systems.<sup>55</sup>

## Caregiving support

Caregiving support involves building the capacity of carers in relation to childrearing.<sup>56</sup> Kinship carers often face challenges which necessitate this form of support. For example, they may not have cared for a child before, or not for a long time, and are often looking after children with challenging behaviours due to trauma.<sup>57</sup> Carers can be supported in multiple ways including through building their family and community support networks, respite care, or peer support groups.<sup>58</sup> Structured caregiver programmes (often referred to as parenting programmes) may help,<sup>59</sup> but need to be led by carers and reflect their needs.<sup>60</sup> It is vital to recognise the structural causes of many of the challenges faced by kinship carers.



Caregiving support should not be offered in isolation and must be combined with other strategies such as poverty alleviation, social norm change, and increased access to services.

Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

**Services and support for kinship care**

Variations in support to kinship care

Conclusions

## Supporting other children in the household

The inclusion of new children into the family can have an impact on the existing biological children of kinship carers, who may feel jealous or resentful.<sup>61</sup> Caregiver support programmes can be used to help carers to navigate these challenges.



Service providers must also consider these dynamics in the targeting of services, with support given to the whole family and not directed only at the child in kinship care.<sup>62</sup>

## Building connections with the wider family and community

In many contexts, especially where services are limited, kinship care families rely on support from the wider extended family and community. Extended family and community support to kinship carer families can be boosted in several ways. For example, by consulting communities in programme design, incorporating network building into care plans, and identifying community organisations that already support vulnerable groups to make sure they are aware of the needs of kinship care families.<sup>63</sup> Family finding and family group conferencing methodologies can be of value in identifying family supports.<sup>64</sup>

## Supporting contact with parents and siblings

If parents are still alive, it is important that children in kinship care maintain contact, providing this is in their best interests.<sup>65</sup> Maintaining contact with parents can be challenging, especially where kinship care is the result of parental harm.<sup>66</sup> Parents and kinship carers may also disagree about how the child should be raised. It is important to understand the perspectives of children, kinship carers and parents about contact, promote open and honest communication, set clear expectations and boundaries, and provide mediation and counselling where necessary.<sup>67</sup> Children often highly value contact with siblings,<sup>68</sup> and efforts must be made to maintain these relationships.



Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

**Services and support for kinship care**

Variations in support to kinship care

Conclusions



(Kinship carer, **Australia**)<sup>69</sup>

## Enabling a return to parental care

Global guidance suggests that children in kinship care should be reintegrated with parents where possible and in children's best interests.<sup>70</sup> The primacy of parental care is not shared in all cultures or legal systems, some of which view kinship care as of equal value to parental care.<sup>71</sup> This is an area that requires further debate and clarification.

Once a decision has been made for a child in kinship care to return to their parents, it is vital that both parents and children are properly prepared.<sup>72</sup> Follow-up support after children are reunified with their parents is also key. Support needs vary, but are likely to include practical or financial assistance, emotional support and help re-building relationships.<sup>73</sup>

## Supporting young people leaving kinship care to live independently

Young people that have grown up in kinship care sometimes have more problems than their peers in relation to mental health, education, training, employment, offending, and substance misuse.<sup>74</sup> Ways to assist these young people include peer-to-peer support groups, social services interventions, information provision, and a support package covering areas such as housing, finances, emotional well-being, and sexual and reproductive health.

## Return

**Global guidance** suggests that children in kinship care should be reintegrated with parents where possible and in children's best interests.



## Support

**Ways to assist** these young people include peer-to-peer support groups, social services interventions, information provision, and a support package...

Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

**Variations in support to kinship care**

Conclusions



## Variations in support to kinship care

The support needs for kinship care families vary by a range of factors, including the following.

- **Context.** For example, both reliance on kinship care and the vulnerability of kinship care households increases during conflict and disasters.<sup>75</sup> Such emergencies are increasing in the countries worst affected by climate change.
- **Disability.** There are often a disproportionate number of both kinship carers and children in kinship care with disabilities.<sup>76</sup> Kinship care families affected by disability need targeted, tailored assistance.
- **Race and ethnicity.** In some settings, rates of kinship care vary by race and ethnicity, with rates of kinship carer higher amongst discriminated against groups.<sup>77</sup> Responses to kinship care must reflect cultural diversity and acknowledge and work to address discrimination.
- **Characteristics of the kinship carer.** Care by grandparents, older sibling, and distant relative carers are each associated with specific support needs.<sup>78</sup>
- **Age of the child.** For example, adolescents in kinship care have very different needs to young children.<sup>79</sup>
- **Reasons for entry into kinship care and social norms around kinship care.** In many lower income contexts, kinship care is widely used and socially acceptable. It may be the result of violence in the family, but is more commonly a response to parental migration, poverty or lack of access to services. The focus of services and support in these settings is often different from those in higher income countries where kinship care is not socially normative and most usually represents a painful rupture in the family because of violence, abuse or parental death.



Kinship care arrangements across borders and placements involving refugee and asylum-seeking children are also associated with specific support needs.<sup>80</sup> Children and families are increasingly crossing borders, and require support to stay together.



Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

**Conclusions**

## Conclusions

- Kinship care makes a crucial contribution to the well-being, development, and survival of millions of children around the world. Kinship care is the first option that should be explored when children cannot be cared for by their parents.
- Kinship care remains widely neglected by governments and care systems across the world.
- Kinship care is a complex form of care, requiring a sophisticated response. Responses to kinship care must also vary by context.
- Children in kinship care, young people that have grown up in kinship care, parents, and kinship carers know best about their needs and have much to contribute to meeting these needs.
- Kinship care has wide community support in most (possibly all) cultures. As well as the strengths within kinship care households, there are also huge, and sometimes untapped, pools of support in wider families and communities.
- Some kinship care arrangements need to be regulated by social services and/or registered to clarify parental responsibilities. However, this formalisation is not always necessary. Families should have a say in determining the type of kinship care which best meets their needs. Formalisation of any kind should never be a prerequisite for support.
- Kinship care families have multifaceted support needs. Chronic poverty lies at the core of many of the problems that they face. Challenges caused by stress and mental health issues should not be underestimated. Families also need access to information, education, health care and housing services, and caregiving supports.

# KINSHIP care

Prioritising and effectively supporting kinship care necessitates a family-focused, strengths-based reorientation of systems of care. It is hoped that this will be to the benefit of all children whose parents are unable to care for them.



Introduction

Types of kinship care

Why support kinship care?

Principles of good practice in supporting kinship care

Creating an enabling environment for kinship care

Pathways to services and support and the formalisation of kinship care

Services and support for kinship care

Variations in support to kinship care

Conclusions

## Endnotes

- <sup>1</sup> UN General Assembly (2010) [Guidelines for the alternative care of children](#), GA Res 142, UNGAOR, Sixty-Fourth Session, Supplement No. 49, Vol.1 (A/64/49 (2010)) 376. New York: United Nations.
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## Introduction

## Types of kinship care

## Why support kinship care?

## Principles of good practice in supporting kinship care

## Creating an enabling environment for kinship care

## Pathways to services and support and the formalisation of kinship care

## Services and support for kinship care

## Variations in support to kinship care

## Conclusions

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## Introduction

## Types of kinship care

## Why support kinship care?

## Principles of good practice in supporting kinship care

## Creating an enabling environment for kinship care

## Pathways to services and support and the formalisation of kinship care

## Services and support for kinship care

## Variations in support to kinship care

## Conclusions

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## Introduction

## Types of kinship care

## Why support kinship care?

## Principles of good practice in supporting kinship care

## Creating an enabling environment for kinship care

## Pathways to services and support and the formalisation of kinship care

## Services and support for kinship care

## Variations in support to kinship care

## Conclusions

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## Introduction

## Types of kinship care

## Why support kinship care?

## Principles of good practice in supporting kinship care

## Creating an enabling environment for kinship care

## Pathways to services and support and the formalisation of kinship care

## Services and support for kinship care

## Variations in support to kinship care

## Conclusions

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