

Kinship Care: A Family Centred Approach

CHILDREN 1ST believes that the possibility of kinship care should be explored for every child who cannot live with their parent or parents, and that children have a right to have their wider families involved in making decisions about their future care and wellbeing.

This briefing gives an overview of kinship care as an alternative to the removal of children and young people from their families into the 'care system', explains the benefits of a family centred approach to looked-after children and young people, and highlights what steps are needed to strengthen kinship care in Scotland.

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What is kinship care?

A kinship carer is the term often used to describe any relatives or friends from within a child's wider family network with whom a child lives. Sometimes such arrangements are made privately by the family, with no social work or other agency involvement. Kinship care may be necessary for a number of reasons, but usually it is because of the unwillingness, incapacity or unsuitability of the parent(s) to care for their child safely and well.

Kinship care in Scotland

- It is estimated that there are at least 10,454 kinship families in Scotland
- Approximately 1736 children who are "looked after" by their local authority are living with their kin
- The UK has a significantly lower proportion of children 'in care' or 'looked after' in kinship care than in other countries, with approximately 12 per cent, as compared to New Zealand's 75 per cent, and Belgium's 33 per cent

Why kinship care?

CHILDREN 1ST firmly believes that children should live with their families wherever possible. It is widely accepted that children looked after away from home experience poorer outcomes than those who can be safely cared for within their wider families.

Many children who have been removed from their families and placed with foster carers or in residential care are left to fend for themselves at 16 years old in temporary or unsuitable housing and not in education or employment and with no qualifications to help them escape benefits or low wage drudgery. Not surprisingly, many end up homeless or in prison, experience mental illness and drug and alcohol abuse, and face difficulties in turn in caring for their own children.¹

By contrast, there is strong evidence to suggest that children placed in kinship care arrangements find calm and stability in their placements, have frequent experiences of

¹ Koprowska, J. & Stein, M. The Mental Health of 'Looked After' Young People in *Young People and Mental Health* pp. 165-182, 2000

fun and achievement, report good physical health, and feel that they are doing well at school.² Young people say that kinship care is about being cared for, belonging somewhere and feeling safe.

Involving the whole family: family group conferencing

Despite the benefits of kinship care, recent research has shown that only 4 per cent of kinship care placements were initiated by social workers. It is CHILDREN 1ST's experience that kinship care options are only seriously explored by professionals where there are obvious carers, such as grandparents, who are closely involved in a child's life and may already be the main carers. Often grandparents and others feel that they are discouraged from caring, and are expected to do so with no financial or social supports if they insist on caring.

However, through family group conferencing CHILDREN 1ST has found that in many families, there are those who would willingly offer to care for a family member in need. Often these family members only become apparent when asked or involved in decision making. Moreover, involving vulnerable children and their families in decisions about their future helps to strengthen and empower them. It is for this reason that CHILDREN 1ST has pioneered the use of family group conferences (FGCs) across Scotland.

FGCs bring the wider family group together at the point of decision making, and ask the family to come up with a working plan for the safe care of the children. Currently just under half of all local authorities are working with CHILDREN 1ST to use FGCs to improve decision making and outcomes for children and young people who need help.

Conclusions: strengthening kinship care

CHILDREN 1ST firmly believes it is time for a co-ordinated approach from central and local government to strengthen the provision of kinship care in Scotland. In particular five main changes are needed to improve outcomes for children and young people and for their families:

1. **Public policy** that enshrines the right of children to live with their family network whenever this is in their best interests
2. **Financial Allowances** including a national non-means tested benefit for kinship carers, because kinship care can have a negative impact upon the finances of carers, many of whom are retired
3. **Greater use of family group conferences** to inform decisions about support and care for a child
4. **Support for kinship carers**, such as provision of emotional and practical support, an assigned social worker, the strengthening of local support groups, voluntary training, advice and information, and respite opportunities
5. **Research** into how best to support children in kinship care placements, including research into the benefits of peer support groups, training for teachers and social workers, and befriending



² Aldgate, J. & McIntosh, M Looking After the Family: a study of children looked after in kinship care in Scotland, 2006