Kinship carers' experiences during the coronavirus crisis

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Family Rights Group
Family Rights Group is a charity that works with parents in England and Wales whose children are in need, at risk or are in the care system and with members of the wider family who are raising children who are unable to remain at home. We advise parents, grandparents, other relatives and friends about their rights and options when social workers or courts make decisions about their children’s welfare.

We campaign for families to have their voice heard, be treated fairly and get help early to prevent problems from escalating. We champion policies and practices that keep children safe within their family and strengthen the family and community support networks of children in the care system.

**About CELCIS**

CELCIS is a leading improvement and innovation centre in Scotland. We improve children’s lives by supporting people and organisations to drive long-lasting change in the services they need, and the practices used by people responsible for their care. For more information about our work, see www.celcis.org

### What is kinship care?

Kinship care (also known as family and friends care) is any circumstance where a child is being raised by a friend or family member other than their parent. Kinship carers are commonly grandparents, but can be brothers and sisters, aunts and uncles, or close family friends who have stepped in to take on the care of a child, who is unable to live with their parents due to tragedy or trauma. In the UK, more than 180,000 children are raised by kinship carers; of these, 12 630 children are in Scotland.

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1 Wijedasa, D (2017) *Children growing up in the care of relatives in the UK*, Bristol: University of Bristol.
# Table of contents

## INTRODUCTION

Methodology ................................................................. 3
The legal status of the child ........................................... 3

## SUMMARY OF KEY FINDINGS

## MAIN SURVEY FINDINGS

Summary of key findings .................................................................................................................. 4
Main survey findings ....................................................................................................................... 4
The kinship carers ........................................................................................................................... 4
The impact of the coronavirus crisis ............................................................................................... 4

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Acknowledgement

Thank you to Cathy Ashley, Jessica Johnston and Jordan Hall for the first UK-wide report on which this supplementary report is based. Where possible, the authors have replicated the key findings relevant for Scotland.
Introduction

This survey was constructed and undertaken by the charity Family Rights Group on behalf of the Cross-Party Parliamentary Taskforce on Kinship Care. The survey aimed to enable the Taskforce to have a better understanding of the experiences faced by kinship care households as a result of the Coronavirus crisis, and what urgent steps could be taken by Government, local authorities and other agencies to help.

Alongside learning from published research in the field and from previous surveys that Family Rights Group has conducted, the survey questions were also informed by: calls from kinship carers to Family Rights Group’s advice line; matters raised by members of the charity’s kinship carers’ panel and by other organisations within the Kinship Care Alliance, including Grandparents Plus, Kinship Carers UK and Liverpool Kinship Carers; and by kinship carers and young people who have participated in a series of discussion events hosted on behalf of the Parliamentary Taskforce on Kinship Care.

The Family Rights Group and CELCIS are extremely grateful to all the kinship carers who took the time to complete the survey and to both the Esmée Fairbairn Foundation and the John Ellerman Foundation whose generous grant funding made the research possible.

The first report of the Family Rights Group reported on the experiences of 671 kinship carers caring for 1029 kinship children, as well as an additional 333 birth children, across the UK during the Coronavirus crisis. The report was developed to support the Family Rights Group’s services, policy and campaign work; including the work of the Parliamentary Taskforce on Kinship Care and was sent to Government ministers to urge them to take immediate additional steps to support kinship care households during the crisis. It was also considered by the Kinship Care Alliance.

This supplementary analysis provides an in-depth analysis of the kinship carers in Scotland and provides the legal context to influence national and local kinship care policies, practices and services of local authorities and other public agencies.

KINSHIP CARERS

There are more than 12,000 children in Scotland, around 200,000 children in the UK, who are not living with their parents but are being raised by relatives, such as grandparents or friends. By stepping in and keeping children within family and friends networks, kinship carers are a vital element of our children’s social care system. They are akin to foster carers and adopters although often without comparable recognition for their contribution to the welfare of children and the money they save the taxpayer.

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3 The Parliamentary Taskforce on Kinship Care is for England and Wales only.
In the present crisis, the demographic characteristics of kinship carers make them especially vulnerable. Around half of kinship carers are grandparents and a proportion are over the age of 70. Kinship carers of all ages are more likely to be suffering from chronic health conditions than the wider population. Moreover, the children they are raising are often very vulnerable, having suffered tragedy or trauma. We know from previous surveys that more than half of kinship carers have had to give up work as a result of taking on the care of kinship children. They are more likely to be poorer and already in or at risk of isolation than the wider population.

**Methodology**

The survey was designed in partnership with kinship carers, who helped focus the questions on the key concerns affecting their lives. The Survey Monkey on-line platform was used to host the survey in order to make it accessible to as many kinship carers as possible, and for ease of analysis. Respondents could choose to answer all, or some, of the questions.

The survey was open for five days between the afternoon of Thursday, 9th April until noon on Tuesday, 14th April 2020. This period was selected to coincide with some schools’ Easter holidays. Within only five days, more than 660 kinship carers responded to the survey.

The survey was promoted on Family Rights Group’s website and on the social media feeds of members of the Parliamentary Taskforce, Family Rights Group and other organisations within the Kinship Care Alliance. It was also posted on a number of kinship care Facebook groups and shared on Facebook by kinship carers. The survey consisted of more than 30 questions and Excel and Survey Monkey software were used to analyse results.

The report is laid out to enable responses to each (closed) survey question to be easily read. Where open survey questions were asked, the report provides illustrative quotes or quantifies the results. Under each question, it sets out the number and percentage of respondents who answered the question.

**The legal status of the child and the consequences of this**

The type and level of support that a kinship carer is entitled to largely depends on the legal status of the child’s placement with them. Whether or not a kinship carer has parental responsibility for the child will also depend upon the child’s legal status. Having parental responsibility enables the carer to make key decisions for the child, such as agreement to a medical operation or whether the child can go on a school trip.

Some kinship carers step in and take on the care of a family member’s child without the prior involvement of children’s services and without the matter being considered by the Sheriff Court or the Children’s Hearing System. In this scenario, even when a kinship carer has been caring for the child for some time, they do not have parental rights and responsibilities for the child and children’s services are not under any duty to provide the child or kinship carer with any specific support. The kinship carer in this situation may apply to the court for a court order that gives them parental rights and responsibility for the child. These are most likely to be courts orders under section 11 of the Children (Scotland) Act 1995, which will set out conditions of residence for the child.
and may transfer some (or all) parental rights and responsibilities. These types of formal orders can also be classified as Kinship Care Orders (KCO) for the purpose of the Children and Young People (Scotland) Act 2014, as set out in section 72(1). The 2014 Act introduces a duty on local authorities to provide assistance to kinship care families with such a Kinship Care Order or people who are seeking such a Kinship Care Order (including financial legal assistance).

A child can be ‘looked after’ in the care system as a result of the local authority obtaining a care order or a voluntary agreement between parents and the local authority. In Scotland, the majority of children in formal kinship care are legally ‘looked after’ using a voluntary agreement under section 25 of the Children (Scotland) Act 1995 or under a Compulsory Supervision Order under section 83 of the Children’s Hearings (Scotland) Act 2011 (reviewed annually). These legal orders do not provide long-term legal security for a child or carer. Despite this, children can remain on these orders in some cases for the duration of their childhood. Another option that is less frequently used is a Permanence Order under section 80 of the Adoption and Children (Scotland) Act 2007. One of the advantages of a Permanence Order is it can be tailored to best suit the needs of the individual child, with the potential for parental responsibilities and rights to be shared between the kinship carer, parents, and the local authority.

In Scotland the rate of the financial allowance provided to kinship carers and foster carers is determined by individual local authorities and independent fostering agencies, in line with Regulation 33 of the Looked after Children (Scotland) Regulations 2009. Scottish Ministers have powers under section 110 of the Adoption and Children (Scotland) Act 2007 to set the level of payments to kinship carers, but have not utilised these powers. There is currently no national statutory guidance on the allowance rate that is to be paid to carers, or thresholds indicating a minimum or maximum payment to meet the costs of caring for a child in kinship care or foster care.

Local authorities can utilise one of three legal powers to make payments to kinship carers: either section 22 of the Children (Scotland) Act 1995, section 50 of the Children Act 1975 or regulation 33 of the Looked After Children (Scotland) Regulations 2009. Which legal basis the local authority uses is important because of the potential interaction with the social security system (for more information, see CPAG (2019) Kinship care and benefits factsheet). Access to child-related social security benefits such as child benefit is an important point of difference between kinship carers and foster carers.

Local authorities can also use powers to support informal kinship carers at their discretion. The use of legislation for payments for informal kinship care is either section 50 of the Children Act 1975 or a child ‘in need’ section 22 of the Children (Scotland) Act 1995.

There is no legal requirement for the local authority to be notified when a child is being cared for in an informal kinship care arrangement with a close relative (through blood, marriage or civil partnership). This differs for a child who is being cared for by a person who is not a close relative for more than 28 days where the parent and carer have a
duty to notify local authorities, as this is a private foster care arrangement (Scottish Government, 2013).

The Scottish Government funds Citizens Advice Scotland to provide the Kinship Care Advice Service for Scotland which includes four regional Kinship care advice officers, national telephone advice line and Facebook page (Freephone telephone 0808 800 0006, email and resources -www.kinshipcarescotland.org.uk).
Many of the key findings here are similar to those within the UK wide report\(^4\), although there are some which appear to be more specific to the Scottish experience. The findings which replicate those from the UK survey are listed first, with specific Scottish findings then following below.

The survey heard from 79 Scottish respondents, who are raising 107 kinship children and a further 43 birth children. Most respondents are grandparents raising their grandchildren and just over half are single carers.

Findings from the Scottish responses which match or reflect UK wide findings:

- Half of kinship carers surveyed are self-isolating because they, or someone in their household, have an underlying health condition.
- 39% of kinship carers surveyed have a limiting long-term illness or disability.
- 37% of the kinship children have additional educational needs or disabilities.
- A quarter of kinship carers reported they faced financial hardship that had worsened as a result of the current crisis, and a further 8% remained in a similar level of hardship than pre-crisis.
- 21% of carers surveyed had been offered a school or childcare place. Two thirds had not taken up the offer, this was often down to health concerns for the child or other family members, including that they were shielding.
- 28% of kinship carers said they had not been offered a place but would appreciate such an offer, demonstrating the need for flexibility in responding to the child and household’s needs.

Key findings from the Scottish context:

1. One third of the Scottish respondents indicated that they had received no support, compared to half of the UK wide survey respondents. (Those who did not respond to this question may also have received no support but chosen not to state this explicitly).
   - When asked about steps that local authorities, public agencies or voluntary organisations could take, a quarter of carers who responded expressed a wish to receive some form of emotional support, or simply to have someone check in on them.
   - A fifth of respondents relied mainly, or only, on support from friends and family rather than professionals.

2. Kinship carers’ biggest concerns are around health, generally what would happen to the kinship child if the carer was to fall ill with, or die from, Covid-19. Their other main worries are the impact of the lockdown on their child’s mental health, emotional development, behaviour, and financial worries.

3. Around a fifth of carers stated that the most worrying or hardest thing they had to deal with were financial worries, with 44% of carers who responded to what steps the Government could take of speaking of some form of additional financial support.

4. The importance of food, and provisions around this, came through strongly in the answers to a number of the survey questions. When asked what steps the Government could take to support them, 26% of respondents specifically mentioned aspects to do with food. Other questions also prompted responses which highlighted the need for food vouchers, food hampers or free school meals, although assistance with shopping was also mentioned.

5. The recognition of the role of kinship carers was mentioned by a quarter of the respondents when asked about steps the Government could take. Some responses were related specifically to financial aspects but some were around rights and recognition more generally and the support which could come from this. These were often wider points than simply in relation to the impact of Covid-19.

Main survey findings

The questions within this survey were designed with a UK wide audience in mind. However, it is worth bearing in mind that Scotland has significantly different systems in relation to health, education, social work and tax compared to England and Wales, as these are all areas which are devolved to the Scottish Government. Some of the questions around aspects of these systems may therefore have contained terms which were unfamiliar to Scottish respondents resulting in a misunderstanding or misinterpretation of the question and led to the Scottish kinship carers answering these based on their individual understandings of what was being asked. Where this misinterpretation may have occurred it has been highlighted within the report, as have areas where a specific understanding of the different context within Scotland is necessary when considering the responses.

Comparisons between the data from the overall UK study (which included the Scottish responses) and the responses from Scottish kinship carers only have been included where relevant. Where there are sizeable differences between the two these have been highlighted within the report.
Q1 Where kinship carer lives in the UK

The responses contained in this report are from a wider piece of survey research carried out by FRG and for which the respondent replied that they resided in Scotland. This comprises of 79 responses.

Q2 Age of kinship carer

<table>
<thead>
<tr>
<th>Age</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24 years old</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>25-34 years old</td>
<td>13</td>
<td>17%</td>
</tr>
<tr>
<td>35-44 years old</td>
<td>10</td>
<td>13%</td>
</tr>
<tr>
<td>45-54 years old</td>
<td>30</td>
<td>38%</td>
</tr>
<tr>
<td>55-64 years old</td>
<td>20</td>
<td>26%</td>
</tr>
<tr>
<td>65-74 years old</td>
<td>3</td>
<td>4%</td>
</tr>
</tbody>
</table>

Total Respondents: 78

Q3 Does kinship carer have a limiting long-term illness or disability?

<table>
<thead>
<tr>
<th>Illness or Disability</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>31</td>
<td>39%</td>
</tr>
<tr>
<td>No</td>
<td>45</td>
<td>57%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>3</td>
<td>4%</td>
</tr>
</tbody>
</table>

Total Respondents: 79

In Scotland, almost two-fifths of kinship carers (39%) who responded said they have a limiting long-term illness or disability; this compares with just over a quarter (28%) of the UK kinship carers.

Q4 How many kinship children under the age of 18 years are you raising as a kinship carer? This does not include respondents’ birth children

<table>
<thead>
<tr>
<th>Number of kinship children being raised by carer</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>54</td>
<td>68%</td>
</tr>
</tbody>
</table>
No respondent from Scotland answered that they were raising more than three children under the age of 18 as a kinship carer; this compares to respondents to the UK survey overall where 3% were raising four children and 1% were raising five children as a kinship carer.

Q5 Relationship to the kinship children you are caring for?

<table>
<thead>
<tr>
<th>Relationship to kinship children</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grandmother</td>
<td>42</td>
<td>53%</td>
</tr>
<tr>
<td>Aunt</td>
<td>21</td>
<td>27%</td>
</tr>
<tr>
<td>Cousin</td>
<td>4</td>
<td>5%</td>
</tr>
<tr>
<td>Great Aunt</td>
<td>4</td>
<td>5%</td>
</tr>
<tr>
<td>Grandfather</td>
<td>3</td>
<td>4%</td>
</tr>
<tr>
<td>Sister</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Friend</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>4%</td>
</tr>
</tbody>
</table>

Total Respondents: 79

Analysis of the survey respondents who answered ‘other’ includes two step-grandmothers and a biological mother’s cousin.

Q6 Kinship carers also raising at least one birth child aged under 18

<table>
<thead>
<tr>
<th>Birth child/ren under 18</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>53</td>
<td>69%</td>
</tr>
<tr>
<td>1</td>
<td>13</td>
<td>17%</td>
</tr>
<tr>
<td>2</td>
<td>6</td>
<td>8%</td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>4%</td>
</tr>
</tbody>
</table>

Total Respondents: 77

Q7 Do you have a wife or husband/partner living with you?

<table>
<thead>
<tr>
<th>Wife or husband/partner living with kinship carer</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>36</td>
<td>46%</td>
</tr>
<tr>
<td>No</td>
<td>43</td>
<td>54%</td>
</tr>
</tbody>
</table>

Total Respondents: 79
Just over half of all Scottish kinship carers who responded are single; this compares with two-fifths of kinship carers in the UK survey.

Q8 Are there other adults in the household?

<table>
<thead>
<tr>
<th>Other adults in household</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>17</td>
<td>22%</td>
</tr>
<tr>
<td>No</td>
<td>61</td>
<td>78%</td>
</tr>
</tbody>
</table>

Total Respondents: 78

Q9 Kinship carers were asked more detail about the other adults in the household (excluding a husband/wife or partner)

Although 17 respondents indicated that there are other adults living in the household 29 respondents went on to describe their relationship to other adults living with them in more depth (some respondents had more than one adult living with them so there are more responses than respondents).

- Twenty-five kinship carer households have a total of 30 birth children aged 18 or over living with them;
- Five kinship carer households have a young adult aged 18 or over living with them who they previously cared for as a kinship carer;
- One kinship carer household has one ‘other’ adult living there (who is not the carer’s partner/wife/husband).

Q10 Do you also have caring responsibilities for anyone who is not living with you?

Eleven (14%) of the respondents to this question stated that they were also caring for someone who was not living with them. Of these 11 respondents, four were caring for more than one relative who was not living with them. This included:
• Four respondents were caring for their own parents, who were also elderly, ill, had disabilities or learning difficulties
• Four were caring for their adult children (who in one case was the kinship child’s mother)
• Three respondents were caring for other relatives (including a sister and aunt) who were elderly or had learning difficulties
• One respondent was caring for an ill husband
• One respondent noted that she usually looked after two other grandchildren after school but that this was not the case during COVID-19
The kinship children

Q11 Ages of kinship care children

This infographic represents the percentage of kinship children in each age category. 79 kinship carers answered this question. They were raising 97 kin children. No children were aged 18 years or over.

28% of the kinship children were aged under five years old, 35% were aged between 5 and 9 years old, 35% between 10-15 years of age. 2% were aged 16 or 17 years old.

<table>
<thead>
<tr>
<th>Age</th>
<th>No. of Children</th>
<th>% of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 1 years old</td>
<td>4</td>
<td>4%</td>
</tr>
<tr>
<td>1-2 years old</td>
<td>6</td>
<td>6%</td>
</tr>
<tr>
<td>2-3 years old</td>
<td>8</td>
<td>8%</td>
</tr>
<tr>
<td>3-4 years old</td>
<td>9</td>
<td>10%</td>
</tr>
<tr>
<td>5-9 years old</td>
<td>34</td>
<td>35%</td>
</tr>
<tr>
<td>10-15 years old</td>
<td>34</td>
<td>35%</td>
</tr>
<tr>
<td>16-17 years old</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td>18 or over</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>97</strong></td>
<td></td>
</tr>
</tbody>
</table>

Total Respondents: 79

Of the 42 respondents who answered regarding their child's ethnicity, all were White British.
Q12 Main reasons the kinship child/children are unable to live with their parents (carers could tick more than one reason)

The percentage figures in the table below reflect the proportion of respondents who ticked each option. Carers could tick more than one option so the total percentages add up to more than 100%.

<table>
<thead>
<tr>
<th>Reasons children unable to live with their parents</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parental alcohol or drug misuse</td>
<td>48</td>
<td>63%</td>
</tr>
<tr>
<td>Parent could not cope and/or child was neglected</td>
<td>33</td>
<td>43%</td>
</tr>
<tr>
<td>Parental mental ill health</td>
<td>22</td>
<td>29%</td>
</tr>
<tr>
<td>Parental domestic abuse</td>
<td>21</td>
<td>28%</td>
</tr>
<tr>
<td>Parental abandonment or parent relinquished child</td>
<td>12</td>
<td>16%</td>
</tr>
<tr>
<td>Child was subject to physical abuse at home</td>
<td>9</td>
<td>12%</td>
</tr>
<tr>
<td>One or both parents have died</td>
<td>7</td>
<td>9%</td>
</tr>
<tr>
<td>Parental imprisonment</td>
<td>7</td>
<td>9%</td>
</tr>
<tr>
<td>Breakdown in relationship between parent and child</td>
<td>7</td>
<td>9%</td>
</tr>
<tr>
<td>Child or adolescent behavioural difficulties</td>
<td>6</td>
<td>8%</td>
</tr>
<tr>
<td>Very young parent</td>
<td>6</td>
<td>8%</td>
</tr>
<tr>
<td>Parental illness or disability</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Exploitation of child or young person outside the home e.g. gangs, sexual exploitation or county lines</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Parents’ separation</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Parent/partner is a sex offender</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Don’t wish to answer</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Other (verbal abuse)</td>
<td>1</td>
<td>1%</td>
</tr>
</tbody>
</table>

Total Respondents: 76

The top four reasons the kinship child/children are unable to live with their parents are the same as the responses from kinship carers to the UK survey, but with slightly higher levels of drug or alcohol misuse in Scotland (63% compared to 53%) and slightly lower levels of mental ill health (29% compared to 40%) compared to the UK survey.

Q13 Do any of the kinship children have special needs or disabilities?

<table>
<thead>
<tr>
<th>Kinship child has special needs or disabilities</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>27</td>
<td>36%</td>
</tr>
<tr>
<td>No</td>
<td>47</td>
<td>64%</td>
</tr>
</tbody>
</table>

Total Respondents: 74
In Scotland, just over a third of kinship carers (37%) who responded said the kinship children had special needs or disabilities; this compares with slightly more than half (54%) of the UK kinship carers.

The three most common special needs or disabilities mentioned within the UK wide survey were the child being on the autistic spectrum, attachment issues or Attention Deficit Hyperactivity Disorder. While these were also common amongst the responses from kinship carers within Scotland only, this group also specifically mentioned Foetal Alcohol Spectrum Disorder or a drug or alcohol disorder or syndrome.

Kinship carers were asked to provide more details of the child’s additional needs.

- Seven respondents mentioned that children in their care have an attachment disorder or a possible attachment disorder. A further two respondents mentioned that the child in their care had “separation anxiety”. These children may be particularly impacted by any change in their care, for example if their carer becomes ill and they have to move in an unplanned way.
- Seven respondents spoke of at least one of the kinship children in their care having either specifically Foetal Alcohol Spectrum Disorder or a drug and alcohol disorder or syndrome.
- Six kinship carers stated that at least one of the kinship children in their care was on the autistic spectrum.
- Three respondents stated that at least one of the kinship children in their care had a diagnosis for or possible Attention Deficit Hyperactivity Disorder (ADHD).

Respondents also spoke of a range of other special needs and disabilities which the kinship children in their care had. These included: learning disabilities, mental health issues, general behavioural problems, developmental delay, hypermobility, dyspraxia, sensory issues, hydrocephalus, possible cerebral palsy and problems with vision.

Often the children had multiple issues, and where there were multiple kinship children within a household this could represent a significant aspect of caring for these children.

“Foetal alcohol spectrum disorder, oppositional defiance disorder, adhd, autism, learning difficulties, attachment disorder”

“Child 1 has ADHD, FASD, SPD. Child 2 has ADHD & Tourettes & attachment disorder. Child 3 has ADHD, attachment disorder & PTSD.”

Q14 Do any of the kinship children you are raising have an Education, Health and Care Plan (known as EHC Plan)?

Scotland does not have EHC plans and instead the planning mechanism would be in the form of a Child’s plan which each service would contribute to. Coordinated Support Plans (CSPs) are also used which may be similar to EHCs as they are statutory instruments but are not identical. Their use is also relatively low with it being more likely that a Child’s Plan is used, although in some cases children can have both a CSP and a Child’s Plan. It is also possible for children and young people in Scotland to have specific education plans such as a Personal Learning Plan, Individualised Educational Programme or Coordinated Support Plan.
Given this, it is suggested that while some Scottish respondents did answer “Yes” to the above question that they may have misinterpreted it. As it cannot be established whether they are replying to the question either in respect of any of the above named plans, or from some other understanding, this data should therefore be disregarded and has not been included within this report.
Q15 Is your household having to self-isolate during the crisis due to you or someone in your household having an underlying health condition?

<table>
<thead>
<tr>
<th>Isolating due to an underlying health condition</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>30</td>
<td>49%</td>
</tr>
<tr>
<td>No</td>
<td>31</td>
<td>51%</td>
</tr>
</tbody>
</table>

Total Respondents: 61

Q16 Are you having to self-isolate because you or a member of your household has or is suffering from Coronavirus symptoms?

<table>
<thead>
<tr>
<th>Isolating due to member of household has or is suffering from COVID-19</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>No</td>
<td>56</td>
<td>92%</td>
</tr>
</tbody>
</table>

Total Respondents: 61

Q17 Those kinship carers who were having to self-isolate, were asked about the main consequences for themselves or their household.

Twenty-nine respondents answered this open question.

- Almost half the respondents (14) raised the difficulties of shopping or managing to get other essentials such as medication. Difficulties with getting deliveries specifically was also mentioned, as was having to rely on others to get shopping for the kinship carer.

  “Not being able to get to the shops and pick prescriptions up.”

  “Can’t get to shops and can’t get delivery”
“Live in a rural setting so very isolated. Shops 60m away so long distance to travel for essential supplies. Can't take children into shops.”

“I can’t get to shops so relying on others getting stuff that’s not the normal things.”

- Around two-fifths of the respondents (12) stated that the kinship child or children’s behaviour was becoming more difficult to manage. In one case the kinship carer stated the child was regressing. Factors that were raised included the breakdown of the child’s normal routines, lack of space and the ability to go outside and exercise and difficulties in keeping the children entertained.

“Child has asthma so we are having to self isolate. The child has a very particular routine that has helped him with his separation anxiety he now attends nursery and understands we will be back to collect him. He was placed in 6 foster placements from birth to 18 months old. Since lockdown he has been unable to go to nursery and doesn’t understand why. He isn’t used to staying in the house all day and it is having an effect on his behaviour. My partner is a key worker so it is hard to get through the day with him alone.”

“Children’s behaviour as cooped up like chickens we live 15 high so no balcony or garden and no support from social work”

“Children missing their routines of school, escalating behaviours”

“Children’s behaviour, they can’t understand why we can’t go out, struggling to keep them entertained”

“Kids winding each other up. More anxiety and cooped up too long. I can’t get to shops so relying on others getting stuff that’s not the normal things. Adults more stressed due to no let up.”

Struggling to get outside and exercise, as well as finding it difficult to keep the children entertained were also mentioned as a concern by kinship carers who did not specifically note a change in the child’s behaviour in answer to this question.

- Financial aspects were also mentioned by three respondents who spoke about this generally as well as from the specific point of not being able to work during the pandemic and also the impact of using more gas, electricity and food with the child being at home during this time.

Q18 What support have you or your kinship child/children received during the crisis that you have most valued or proved most helpful? Who provided this? Please give details.

Forty-two kinship carers responded to this question.

- Almost one in three (13 respondents) said they had received no support whatsoever.
One went on to clarify that this was outside what they received from their family and one said that the child was offered a place in the school hub but this wasn’t appropriate due to trying to social distance and reduce the risk of contact.

"None at all"

"No support offered"

"We haven’t received any help at all. Our family video call each day to speak to him for some normality as he is used to seeing them but other than that we aren’t receiving any help"

"None, had 1 call from a new social worker first call in a year, not heard from again"

This is a lower figure compared to that of the UK wide survey where one in two respondents stated that they had received no support. It should be noted, however, that those who did not respond to this question, either Scottish respondents or those in the UK wide survey, may also have received no support and simply chosen not to answer this question rather than specifically state their lack of support.

- Of those 31 respondents who said they did receive support, 13 (43%) referred to support coming from the children’s school or nursery provision. For some this came in the form of check in phone calls (five respondents), for one family it consisted of specific help with the child’s school work and for seven respondents it came in the form of the provision of school lunches.

  “Primary school called once a week for a check in"

  “Phone calls from wee ones nursery”

  “Receive home delivery of free school meals.”

  “Schoolwork help from our school."

  “South Ayrshire council providing food for lunches for all children in household”

- The importance of support being provided around food is emphasised as on top of the seven kinship carers who spoke about the provision of food from the school a further three respondents also mentioned support coming from the provision of food parcels or hampers.

- Eight kinship carers (27% of those who reported receiving any support) described help they had received from the local authority.

  Where specifics were provided this was generally in the form of phone calls from social workers or kinship workers.

  “Phone call once week from social worker”

  “Support on phone from kinship team”
“Ypst [Young People’s Support and Transitions] weekly phone calls ensuring we are all ok and if we need anything”

While respondents did mention the support they received from social workers, others spoke of how they had received no, or very little, support from social workers and they had expected more.

“Emails from social worker...not much support offered”

“None, had 1 call from a new social worker first call in a year, not heard from again”

- Six (20% of those who said they had support) reported that their main or only support came from family or friends.

“Family member came from 13 miles away to provide support”

“Nephew gets our shopping and medications”

“My 19 year old daughter is still working and has been doing our shopping. She can’t live at home due to my illness.”

“Help from a friend”

- Four (13% of those who reported receiving any support) mentioned support groups, charities (e.g. Barnardo’s, Big Hearts) or volunteers as a source of support.

“Support groups with same minded people knowing what you’re going through. As there is NO help with games or toys or finance from local authority at this time”

“Big hearts kinship after school club.”

“Barnardos advocacy worker calls weekly to chat/talk over any worries”

Q19 Has your kinship child or children been offered a school place or child during the crisis?

<table>
<thead>
<tr>
<th>Has kinship child been offered a school place?</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes and they have taken up this place</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>Yes, but we have decided the child/ren should not continue to attend</td>
<td>8</td>
<td>13%</td>
</tr>
<tr>
<td>No, but I would appreciate this support</td>
<td>17</td>
<td>28%</td>
</tr>
<tr>
<td>No and I would not wish the child/ren to attend during the crisis</td>
<td>31</td>
<td>51%</td>
</tr>
</tbody>
</table>

Total Respondents: 61

Fewer respondents in Scotland compared to the UK as a whole replied that they had been offered a school place but had decided not to attend (13% compared to 30%), while more responded that they had not been offered a place but would have appreciated this (28% compared to 18%).
As part of the response to Coronavirus, the Scottish Government issued guidance stating that all schools and nurseries should close to children and young people with the exception of critical provision under the following criteria:

- Children of key workers
- Vulnerable children

For the purposes of continued attendance at educational settings, the Scottish Government stated that “vulnerable” children and young people are defined as those who are:

- at risk of significant harm, with a child protection plan
- looked after at home, or away from home
- ‘on the edge of care’, where families would benefit from additional support
- with additional support needs, where there are one or more factors which require significant or co-ordinated support
- affected by disability
- where they and/or their parents are experiencing poor physical or mental health
- experiencing adversities including domestic abuse and bereavement
- requiring support when they are involved in making transitions at critical stages in their lives
- experiencing adversity because of the impact of poverty and disadvantage (including entitlement to free school meals).

Twenty kinship carers elaborated on their response to the survey question.

Almost half of those who provided more information (nine respondents) spoke about the risks which prevented them taking up places that may have been offered. These included risks to the child, the kinship carers and others.

“8yr old has asthma”

“I don’t want to put at risk the school taxi, the minder and staff and my grandson”

“I have no immune system. So we are in shielding”

“My husband is in the shielding group as he is undergoing chemotherapy for lymphoma”

“There was no promise around the numbers attending, how social distancing or routines would be managed in the school setting”

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Other reasons they had not taken up places included: the child being unable to cope with the journey alone; children currently self-isolating due to 19 symptoms; distance to hub schools; and the wish to prioritise places for key workers.

“Local council not placing looked after children in schools/childcare even though government said they would be accommodated. As we live rural our local school is 15 miles away but it is not the local hub. The local hub is at the high school 30 miles away a good 45mins drive.”

“As I’m able to look after child & don’t work I felt our space was best utilised with someone who is a Keyworker needing childcare.”

Some respondents spoke of other reasons they were not offered a place or were unable to take this up, as well as their experiences of being offered little help previously and that the lack of offer of support in respect of school places came on top of this.

“…But was closed due to staff changes and not open since then”

“Child been removed from private childminder due to placements needed for key workers”

“When he first moved to our house we placed him within a private sector nursery close to where we both work. Social work agreed that they/council would provide so many hours as he was classed as a vulnerable child at age 2. After 6 months they declined this and went back on their word which meant we had a 6 month back log of outstanding nursery fee’s to pay. We had him in addition days to allow us both to continue to work and have a normal family life but paying the additional days and then having 6 months added on top the payment plan for the nursery became stressful and pressure we didn’t need but we couldn’t afford not to send him to nursery. We were offered zero help with this so it is no surprise we haven’t been offered help in this crisis.”

Q20 Have you received any support to maintain a relationship (e.g. indirect FaceTime contact) between the kinship child/children and the rest of the family during the crisis?

<table>
<thead>
<tr>
<th>Have you received support with contact?</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes and it was helpful</td>
<td>6</td>
<td>10%</td>
</tr>
<tr>
<td>Yes but it was not helpful</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>No</td>
<td>49</td>
<td>82%</td>
</tr>
</tbody>
</table>

Total Respondents: 60

Some kinship carers emphasised the importance to the child of maintaining relationships and that they had resorted to trying to organise this themselves but some faced practical obstacles.

“I organised it myself so wee one can understand and keep in touch”
“No broadband so couldn’t do Skype or FaceTime but social work got the grief not us for a change from bps [birth parents]”

“My granddaughter’s younger sister is now on a residency order so we are trying to sort FaceTime out ourselves just like we have always done with contact even when both girls were on cso [Compulsory Supervision Order]”

“Yes it’s important for my gs to FaceTime and speak to his parents no one supports us we initiated this. He worries about his mother so to try to ease that concern for him so he can ft [FaceTime] or phone her and his father.”

The negative aspects of these attempts to maintain relationships were also mentioned by some kinship carers who reflected on the fact the FaceTime calls were “not good”, that the birth parent had not kept up with them, or that there were issues around its supervision:

“All previous contact with BP [birth parent] is supervised by social workers as dictated by children’s panel. But due to lock down no face to face contact is allowed. SW [social work] asked me to FaceTime BP myself using my private account with no supervision. When I questioned safety issues and asked for guidelines and questioned how I was expected to go from having supervised contact to now unsupervised eventually the SW agreed to supervise the class. Found the whole process very stressful and SW were not helpful at all. Children are too young to cope with video calls. SW present but just sits silently starring. No discussion with me either prior or after to ask how we and the children are coping.”

Q21 Is there any practical information, advice or resources that you would find helpful during the crisis?

<table>
<thead>
<tr>
<th>Is there any practical information, advice or resources that you would find helpful during the crisis</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>20</td>
<td>34%</td>
</tr>
<tr>
<td>No</td>
<td>38</td>
<td>66%</td>
</tr>
</tbody>
</table>

Total Respondents: 58

The most common response within the UK survey (around 10% of respondents mentioned this) was wanting more help to support the kinship child’s education, either practically or through the provision of a nursery or school place. This was barely mentioned by respondents from Scotland, with only two respondents mentioning education when asked to provide further information (one in respect of providing laptops and one to provide funding to help with the kinship child’s education).

Slightly more respondents in Scotland were looking for practical help (e.g. with shopping) or emotional support (e.g. from social work) (22%) compared to those who responded to the UK survey as a whole (13%).

Kinship carers were asked to describe what they would find helpful.

- Seven kinship carers spoke of the practical help they wanted. The assistance they wanted varied but many described their need for support with shopping (five
respondents), either generally or with a specific mention of delivery or help with online shopping. One also spoke of looking for advice on the use of video calls and one on the provision of laptops for carrying out school work. Practical help with keeping the children entertained was also mentioned by three respondents.

“Laptops so they can do their school work. None of the boys can write properly so need to type their work”

“Support for food delivery if needed.”

- Six kinship carers wanted either a social worker specifically, or simply someone, to check in with them; someone to discuss their concerns with, someone to speak to, to provide reassurance or some emotional support if required.

“A check in for carers to discuss our concerns for our own mental health and that of the kids we are looking after”

“A weekly phone call to check in on us”

“Just someone to speak with I think would go a long way during all this. It is hard being stuck indoors 24/7 with a 3 year old child who can be extremely difficult at times.”

“The local authority has not reached out to see if there is anything as a family we require…”

- A further four kinship carers spoke of a lack of information about the COVID-19 restrictions in respect of looked after children specifically, what services were available or how they could access these as an unpaid kinship carer.

“Not sure what but something would be more helpful than nothing. Information from LA [local authority] about what services are available during this time around kinship (even though there is nothing normally) or what they are doing locally to support people as I worry about my elderly relatives and feel there’s nothing can do or who to ask for information…”

“To find out how to get stuff as am classed as unpaid kinship carer”

“Well I think initially it was very worrying as we didn’t have any proper guidance on contact during pandemic and our obligations regarding court ordered contact. I was worried we would have to send him to two different households and potentially he could have brought virus back to us as I’m unsure if parents would stick to rules. I wouldn’t have sent him no matter what and fortunately in this case his parent have been ok with this if they hadn’t it could have been a nightmare as it has in the past.”

- Four kinship carers described the help they needed financially, specifically mentioned were the need for help with rent, funding to help with education, and the purchase of toys, food and ability to heat the property.

- Two respondents spoke of the difficulties of not being able to access any respite during this time.
“I would love some respite as have not had a child free moment for 4 weeks now and the twins are very intense due to the level of support they require. I do however understand that given the current situation this may not be feasible.”

- One kinship carer also raised the issue of requiring support around the child care and protection review processes which were, or were not, happening during the pandemic.

“Conversation regarding what happens next. We have had 2 LAC [Looked After Children] meetings cancelled now have one in the calendar which will be done remotely. No explanation of how it will be done, what paperwork we will see as we usually are given 10mins to read the reports prior to the meeting.”

Q22 During the crisis have you experience of local authority processes (such as a kinship care assessment, child protection conference, looked after children review)? If yes, what processes and what has and has not worked well? Can you suggest improvements?

Of the 11 kinship carers who responded with information about their experiences of these processes there have been a range of experiences with four respondents replying Yes to this question, and two of these providing more detail:

“Yes assessment and court hearing. Not being kept informed of changes and unnecessary delays”

“We have had a lac [Looked After Children] review done by conference call”

Some panels or Looked After Children (LAC) meetings had been cancelled, rearranged, or were still sitting as overdue (four respondents), some respondents had simply had no information (two respondents) and one respondent was due to have a LAC review in a few weeks and was hopeful that it would go ahead using Skype.

“So far 2 scheduled LAC meetings have been cancelled and no reason given. One booked but other than being told it will be remotely no further information. Need communication to be clear. Simple email or phone call to ask how we are and if we need anything would be a help.”

“No we are still waiting for the overdue review that was supposed to happen in February we were told these cannot be done during the COVID-19 crisis and apparently they do not have anyone to chair these meetings… We have heard that some children are getting their reviews completed by video link etc. However we are being told that no one is available to chair ours? I would like to have an explanation from the local authority as to why some people continue to get the support and others do not. Even though we have highlighted that the children can be physically abusive to us at times we are not offered any sort of support for the domestic violence that we live with however I know if it was me being violent towards the children they would be acting on it. Why as a career do our rights not matter?”

“We have had no information from anyone”
Q23 During the crisis have you experience of legal or court processes? If yes, what processes and what has and has not worked well? Can you suggest improvements?

Few respondents had experience of the court system during the crisis. Those who had experience of court processes, expressed some frustrations and concerns around delays and lack of information.

“We are currently awaiting a court date to receive parental rights and responsible of the child and to deprive BM [birth mother] of hers this has been ongoing since September and we were hoping to have it sorted by now but our lawyer has informed us that everything is currently on hold at the moment”

“Getting pushed for residential order but not much info”

“Ensuring the court still goes ahead and allow babies to be placed with permanent homes”

“Section 11 is pending in court at the moment”

Q24 Is your current housing suitable for your household during the crisis?

<table>
<thead>
<tr>
<th>Is your current housing suitable for your household during the crisis</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>46</td>
<td>79%</td>
</tr>
<tr>
<td>No, it is overcrowded</td>
<td>11</td>
<td>19%</td>
</tr>
<tr>
<td>No, it needs refurbishment</td>
<td>1</td>
<td>2%</td>
</tr>
</tbody>
</table>

Total Respondents: 58
From the nine respondents who provided further information regarding their response, as well as mentioning the issue of overcrowding, two respondents also note the lack of outside space for the children.

“My house was originally a one bedroom bungalow that had the attic made into a further 2 bedrooms, but the living space was made for a single person or a couple, not my family of 6”

“There is no outside or access to a garden which would allow the kids to play safely and give them free access to outdoor space. A flat is too small to contain one adult and child for months.”

“We are in a small 2 bed flat 15 high in high rise when we should be in a 4 bed due to ages of kids”

One respondent also specifically mentioned the impact of the pandemic on addressing their housing issues.

“We have hold priority to be rehoused but the housing lists are closed at the moment”

Q25 Do you receive any of the following benefits or tax credits?

Respondents could tick more than one answer; hence the percentage total is greater than 100%

<table>
<thead>
<tr>
<th>Receipt of benefits or tax credits</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Benefit</td>
<td>52</td>
<td>84%</td>
</tr>
<tr>
<td>Housing Benefit</td>
<td>27</td>
<td>44%</td>
</tr>
<tr>
<td>Council Tax Benefit</td>
<td>24</td>
<td>39%</td>
</tr>
<tr>
<td>Child Tax Credit</td>
<td>22</td>
<td>36%</td>
</tr>
<tr>
<td>Disability Living Allowance/Personal Independent Payment (PIP)</td>
<td>18</td>
<td>29%</td>
</tr>
<tr>
<td>Universal Credit</td>
<td>17</td>
<td>27%</td>
</tr>
<tr>
<td>Carer’s Allowance</td>
<td>12</td>
<td>19%</td>
</tr>
<tr>
<td>Disability Living Allowance for the child you are raising</td>
<td>12</td>
<td>19%</td>
</tr>
<tr>
<td>Employment and Support Allowance</td>
<td>9</td>
<td>15%</td>
</tr>
<tr>
<td>Income Support</td>
<td>7</td>
<td>11%</td>
</tr>
<tr>
<td>Guardian’s allowance (NOT local authority special guardianship allowance)</td>
<td>4</td>
<td>7%</td>
</tr>
<tr>
<td>Working Tax Credit</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>Pension Credit</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Bereavement/widow’s benefit</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>11%</td>
</tr>
</tbody>
</table>

Total Respondents: 62

Responses under other included, one respondent who was in the process of applying for Child Benefit, one who received a state pension and three respondents who only received the Kinship Care Allowance.
Q26 Are you currently affected by the bedroom tax?

<table>
<thead>
<tr>
<th>Affected by the bedroom tax</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>No</td>
<td>57</td>
<td>93%</td>
</tr>
<tr>
<td>Not sure</td>
<td>1</td>
<td>2%</td>
</tr>
</tbody>
</table>

Total Respondents: 61

In Scotland, the bedroom tax (officially known as the Under Occupancy Charge) was mitigated against by Scottish national policies in recognition of the impact on communities. Kinship carers and foster carers are exempt from the bedroom tax. Respondents who answered “Yes” to this question may have misinterpreted it or misunderstood the question.

Q27 Have you been affected by the benefit cap?

<table>
<thead>
<tr>
<th>Affected by the benefit cap</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>4</td>
<td>7%</td>
</tr>
<tr>
<td>No</td>
<td>40</td>
<td>66%</td>
</tr>
<tr>
<td>Not sure</td>
<td>17</td>
<td>28%</td>
</tr>
</tbody>
</table>

Total Respondents: 61

Only one respondent who answered yes to the above question provided further information on the specific impact on them of the benefit cap.

“We lost out £200 last month because of it. Kinship payment makes up for it”

Q28 Have you received any extra financial help during the crisis?

The percentage figures in the table below reflects the proportion of respondents who ticked each option. Because carers could tick more than one option, the total percentages add up to more than 100%.

<table>
<thead>
<tr>
<th>Extra financial help during the crisis</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, £15 per child supermarket vouchers</td>
<td>5</td>
<td>9%</td>
</tr>
<tr>
<td>Yes, help from the local authority hardship fund</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Yes, I was furloughed from my workplace but am only receiving 80% of my salary</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>Yes, other</td>
<td>9</td>
<td>15%</td>
</tr>
<tr>
<td>No</td>
<td>42</td>
<td>71%</td>
</tr>
</tbody>
</table>

Total Respondents: 59
Over 70% of respondents said they had not received any extra financial help during the crisis.

Some expanded on their answer:

“I don’t get any help because I work 19 hrs a week”

Where “other” help had been provided this was often in respect of school meal or food provision:

“£20 per week for school meals from north Lanarkshire council”

“Food parcel in lieu of free school meals”

“My Local Authority pays £11.25 a week to any family who is in receipt of Uniform Grant & free School meals to compensate for Child not at school.”

“School lunch provided”

Q29 Are you suffering financial hardship?

<table>
<thead>
<tr>
<th>Suffering financial hardship</th>
<th>Respondents</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes but no worse than before the crisis</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>Yes and the crisis has made things much harder</td>
<td>15</td>
<td>25%</td>
</tr>
<tr>
<td>No</td>
<td>26</td>
<td>43%</td>
</tr>
<tr>
<td>Not sure</td>
<td>14</td>
<td>23%</td>
</tr>
</tbody>
</table>

Total Respondents: 60

Fewer respondents in Scotland answered that they were suffering financial hardship but were no worse off than before compared to the overall UK survey (8% compared to 18%). More, however, responded that they were unsure (23% compared to 12%).

Twelve kinship carers expanded on their answer, of whom:

- Eight described the increase in food bills and the cost of other key essentials
- Six wrote about increased utility bills
- Three stated that their household income had fallen due to the crisis
- Two described the extra costs of keeping their kinship child or children entertained or educated

“I can’t afford the extra mid-day meals, I can’t afford a lot of the materials needed for things like science projects and general learning materials.”

“I have spent more on heating the house and food. Due to us being home all day every day.”

“My partner furloughed on 80% and I’d already given up work to be full time carer to the twins.”
Q30 What is most worrying you or are you finding hardest to deal with during the crisis?

Fifty-three kinship carers responded to this open question.

- The most commonly expressed concern, raised by a quarter of the kinship carers who responded to this question (13 respondents), was in relation to health concerns. For all but one respondent this was specifically in respect of COVID-19, and was generally in terms of what would happen to the child if the kinship carer was ill, or died.

  “As a key worker I am still working so my fear would be bringing anything home to my family”

  “If I get unwell what happens to my grandson I have no idea would he go into care ???. There should have been discussion and plan of action should this happen as he’s still a looked after child”

  “Keeping my children and myself healthy.”

  “Myself becoming unwell and no one to look after my children, if I become worse.”

  “The thought of getting ill or dying and what will happen to the kids. More grief and hardship. But we are all in the same worrying position.”

- The second (jointly) most commonly expressed worry, raised by 10 kinship carers (19%), was about the impact of the crisis on the child’s behaviour, emotional development and their mental health.

  “Child’s behaviours spiralling out of control, anger outbursts, destructive, as routine and being busy is what helps his condition, we now stuck in position of no form of help at all and no distractions no clubs hobbies school, this hugely impacts on my child’s behaviours”

  “My grandson’s mental health”

  “The unknown, the child is struggling with the change and why he can’t go outside. Some days he just spends crying at the door and others he wants to stay in bed. It’s extremely hard for a 3 year old who is usually up and out by 7.30am everyday”

  “The wee one being stuck in house all day. His tempers are worse during this. My garden is like a jungle so wee man unable to play in garden. Can’t afford to get it done”

  “Loss of education and loss of friendships”

- Ten kinship carers (19%) described their financial worries.

  “Finances paying extra on gas electricity food.”

  “Not having enough to put in the cupboards as was free meals at nursery”
“Social isolation and lack of being able to afford things (no computer) that would help relieve the boredom and the extend the ability to make learning more fun”

“Struggling to balance all the bills”

- Four kinship carers (8%) described their fears that the kinship child was falling behind educationally or around their teaching of their child(ren).

“I worry about her falling behind in her education. Need more support from school as often cannot get into site”
“Loss of education…”

“Teaching the kids”

- Three kinship carers (6%) described the challenges of keeping the child or children occupied.

- Three kinship carers (6%) spoke of the difficulties of getting food, or having enough food in to make healthy meals.

- As well as health concerns around COVID-19 and what would happen to the child(ren) if they were to fall ill, a further two kinship carers (4%) were concerned about their own emotional and mental health, feeling lonely and the need to cope for their child’s sake.

- Other concerns included: a general lack of support; being unable to visit family or concerns around explaining a lack of family contact to the child; and general worries about the pandemic.

- Specifically related to their experience as kinship carers, respondents spoke of there being “no clarity for us kinship carers”, as well as issues around delays to placements and panels.

“bps [birth parents] forcing yet another panel meeting going to court and bps contesting then having to find more money to pay for it”

“I should have had baby placed with me however due to lockdown baby remains in foster care rather than being placed with us and this is frustrating. This would be the best time for us to bond while I am working from home.”

The most commonly expressed concern by Scottish respondents was in respect of what would happen to the kinship child if their carer caught COVID-19, with the next most common concern (jointly with financial worries) around the behaviour, emotional development and mental health of the child. These concerns were also the two most common responses in the UK survey overall, but were reversed.

A lack of therapeutic support was mentioned by 5% of respondents to the UK wide survey but was not mentioned at all by respondents from Scotland.
Q31 What three steps could Government take during the crisis to improve your life and that of the children you are raising?

Forty-three kinship carers responded to this open question, of which:

- Nineteen kinship carers (44%) recommended additional financial support (specifically related to COVID-19 and not more generally around the recognition of kinship carers – this is covered below)

  "give families a shopping voucher. Yes the school is still offering a free packed lunch but that’s no use when you are isolating and not wanting to go out everyday. Plus having kids at home all day everyday chews threw so much food and drinks.... so a shopping voucher would be more useful as the packed lunch option is not.”

  "More financial help"

  "Give extra money for food and utility bills"

  "Give you a tax free amount to help with extra indoor activities and food and Elec"

- Of these 19 respondents, 11 kinship carers (26% of all respondents to this question) mentioned financial aspects in relation to food specifically, for example the provision of food vouchers, school meals vouchers or money specifically for food items, as well as issues around this provision currently.

  “The extra lunch money of £11.50 goes to the parent as she still has parental rights. This money only comes to me 2 to 3 weeks later. It is expensive feeding a teenager”

  “Be able to receive school meals vouchers.”

  “Food parcels”

- Eleven kinship carers (26%) raised the importance of Government recognising the role of kinship carers generally. Some of this related specifically to financial aspects, while some are around recognition, rights, and the resulting support which could come from this.

  “I don’t qualify for any of the extra help as lost my working tax element as had drop hours at work as I am kids mother carer so I qualify for carers allowance.. ongoing the government should include the 35 hrs they pay a pittance for as wages.. they class it as income for working tax but don’t give any hrs to keep u at the 16 hrs to qualify for working tax element and I can’t claim uc [Universal Credit] as no child element as kids are classed as looked after so in turn means no work allowance for myself so any small wage I do earn would take away allowance and also as no child element then no help with the rent needed to house the kids who would be in foster care if weren’t with me.. child tax is deducted from kinship allowance so its so unfair if moved onto uc [Universal Credit] that the child element isn’t paid as if I was to get moved over to uc [Universal Credit] the impact would probably result in kids having to go into foster care as I wouldn’t be able to afford a roof over their head”

  “The government as corporate parents should act like parents and give a hoot about these kids.... Check in, reassure the kids that no matter what happens they will be
looked after- write letter or do a video or something to let them know people in power are thinking about them too.”

“They could tell us our rights as carers in order for us to know what help we are able to ask for. We have been asking for this for 4 years and still are refused this by our local authority and in a time of crisis we really require this information desperately.”

“Pay kinship cares the foster carer allowance”

“More support actually know what is available to us”

“Not just in virus situation but every kinship carer should have a social worker for them and their wellbeing so they at their best, kids with conditions are just left slipping through net there is no support for them at all with carers who never been educated in these conditions were muddling through blindly and at huge personal cost sacrifice and mental wellbeing, abandoned in the system”

“Recognise us as carers”

“To help unpaid kinship carers more and not forget about us”

- Five kinship carers (12%) mentioned the need for respite.

“There should be access to respite if required for an illness this should be in part of the care plan so if for example during the Covid-19 crisis I was requiring hospital treatment I would know the children were safe and where they were.”

“Respite now and again to give us a break. We don’t have family nearby to help us.”

- Four kinship carers (9%) recommended the Government provide additional support to help with the kinship child’s education. Some needed help with providing the technology to help the children with the school work, or easier access to the online materials while another respondent was looking for “packs with materials that make learning more fun”.

- Three kinship carers (7%) recommended steps to be taken to make it easier with shopping.

“give us a card which allows some foods which are restricted just few extras so we can meet dietary requirements and don’t need to go out as much”

“Make us a vulnerable case to receive priority slots for supermarket deliveries”

“Provide support for home delivery of shopping. Very few spots available in our area and the delivery charge has gone up.”

Other points raised by kinship carers included: support with activities for the children or the provision of an activity box for them; support for the children’s mental health; or clarification around essential travel (e.g. to collect a newborn).
Unrelated to COVID-19, one respondent spoke of legal steps they think should be in place around kinship care generally:

“Change processes of children’s hearings. Automatically remove birth parents parental rights in section”

While there was a focus in the UK wide survey responses on making shopping easier, for example through the provision of designated times within stores or of specific delivery slots for kinship carers, (24%), respondents in Scotland focused more on the provision of food (e.g. food parcels, food vouchers or school meals) with a fifth of respondents mentioning this (21%).

There was less of a focus on support with education by respondents in Scotland compared to the UK overall (9% compared to 20%).

There was a greater focus, however, on recognising the role of kinship carers by respondents in Scotland compared to the UK survey (26% compared to 8%).

The need for respite was mentioned here by respondents in Scotland (12%) specifically, however, it was more commonly mentioned to the following question by respondents to the overall UK survey. This may reflect how respondents from different parts of the UK see respite provision and whether this is in relation to the Government or to local authorities, public agencies and voluntary organisations.

Q32 What could local authorities, public agencies or voluntary organisations do during the crisis that would most help you or the children you are raising?

Thirty-five kinship carers answered this open question.

- Thirteen kinship carers (37%) proposed help with practicalities such as the provision of food parcels or school meal vouchers (seven respondents), assistance with food deliveries (two respondents) or the provision of social activity, toys, activity packs for the children (five respondents).

- Seven kinship carers (20%) highlighted the need for someone to check in on them, or someone simply to talk to. A further two kinship carers mentioned the need for emotional support, two spoke of the need to know their rights and what support was available while another one mentioned simply the need for someone “Just to help us”.

“support calls for carers to off load and to see how each child is coping”

“Check in weekly and see what needs there are and see how these can be addressed.”

“Check in with us to see how we are all coping. Support us with new issues that happen during this time instead of just ignoring us.”

“Be there for emotional support for parents raising children who are stuck in self isolation”
“Knowing again what support is actually available to us”

“Let us know what our rights are and what practical supports are available to all kinship carers and children. We got an email with suggestions of online virtual visits to places for the children but again this assumes you have internet access and/or a suitable device to let the children complete this.”

- Five kinship carers (14%) highlighted the need for support around their child(ren)’s educational needs, including the provision of school/nursery places and support with home schooling.

“Ensure vulnerable children like mine are able to access the nursery/childcare they need.”

“Give more structured activities. Glow doesn’t work properly and not sure how to use it which is leading to frustration.”

“Going to school a couple of days”

“Guidance on home schooling and activities”

- Four kinship carers (11%) stated that financial support for kinship care households was needed. Where specifics were provided, this came in the form of free access to the internet, or to an increase to the kinship carer payment and a recognition of their parity with foster carers more generally, outside of the specifics of the current crisis.

“As per government - pay us the same rates that foster carers receive and offer us parcels etc like folk on benefits are getting. It’s another slap in the face we are the forgotten carers of the country”

“Increase our kinship payment.”

Other points raised by the kinship carers, which appear to be more general, rather than specific to the current crisis included:

“All the things they promised pre covid19 and still haven’t done Communicate Provide additional resources”

“Get tougher with bps [birth parents], don’t buy into their lies, stop trying to please bps as they already been told child not getting back so just help kinship parents to process quicker”

“A greater number of kinship carers in Scotland responded to this question in respect of help with practicalities (37%), again, with a focus on food parcels/school meal vouchers, as well as activity packs and toys, when compared to the UK wide survey where 15% proposed help with practicalities such as the need for help getting food or medicines delivered.
Therapeutic support was not really mentioned by kinship carers from Scotland while 15% of respondents from the UK overall mentioned the need for support for children, including therapeutic support.