

# Rethinking Kinship Care in Thailand: A Dual Imperative for Protection and Reform

Institutionalised Children Explorations  
and Beyond  
1–18

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## Abstract

Kinship care is widely promoted as a culturally appropriate and protective form of family-based alternative care and is endorsed by global policy frameworks that prioritise family-based over institutional provision. However, evidence increasingly highlights that kinship care requires adequate support, oversight and investment to ensure children's safety and well-being. In Thailand, kinship care presents a complex paradox. Formal kinship care remains rare and under-resourced, while informal arrangements are widespread, involving an estimated 3 million children. These arrangements frequently arise not from assessed child protection need, but from poverty, migration and limited public investment in parental and social protection systems. In this context, widespread unsupported informal kinship care contributes to continued reliance on residential provision, helping to explain why deinstitutionalisation efforts stall despite policy commitment. Drawing on national mapping exercises, child protection investment analysis and population-level survey data, this article examines the scale, drivers and implications of kinship care in Thailand. It argues that while kinship care remains a valued family-based option, its protective potential is compromised when separation is structurally driven, and placements are unregulated and unsupported. The article advances a dual reform agenda: strengthening formal kinship care within the child protection system, while reducing reliance on large-scale informal arrangements by addressing the structural and socioeconomic factors that separate children from their parents. Thailand's experience offers lessons for other middle-income countries seeking to align family-based care reform with sustainable deinstitutionalisation.

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**Introduction**

In recent years, international child protection efforts have increasingly focused on reducing reliance on institutional care and expanding access to family and community-based alternatives. These reforms are grounded in an established evidence base demonstrating that institutional care can significantly impair children's physical, emotional, cognitive, and social development (Boyce et al., 2020). The care reform agenda is also supported by global policy frameworks such as the United Nations Guidelines for the Alternative Care of Children (United Nations General Assembly [UNGA], 2009), which advocate for family-based care whenever possible. Central to this shift is the principle that all alternative care must be both *necessary*, used only when a child genuinely needs alternative care, and *suitable*, ensuring the care provided is in line with the child's individual needs and best interests. This principle is enshrined in the United Nations Guidelines for the Alternative Care of Children (UNGA, 2009, para. 11), which call for systematic assessments to determine both necessity and appropriateness prior to any placement.

In this context, kinship care has gained particular prominence globally. Defined as the care of children by relatives or close family friends when parental care is unavailable, kinship care is often promoted as the most culturally appropriate and least disruptive form of alternative care. It is viewed as a cost-effective and relationally grounded model that aligns with traditions of collective child-rearing and community responsibility, especially in low- and middle-income countries (LMICs). When adequately supported, kinship care can offer children emotional continuity, preservation of identity, and a sense of belonging (Hassall et al., 2021). However, global guidance increasingly recognises that kinship care must be adequately resourced and monitored to meet these outcomes (Family for Every Child, 2022). When kinship care is under-resourced and lacks both training and oversight, caregivers, who often face financial, emotional, and physical stress, are at greater risk of burnout, while children can experience elevated rates of neglect, which impacts their development (Delap & Mann, 2019).

Much of the global evidence supporting kinship care is drawn from high-income settings where such arrangements are often formalised, regulated, and resourced (Hunt, 2020). Throughout this article, we distinguish formal and informal kinship care. Formal kinship care refers to placements authorised by the state under the Child Protection Act, typically by order of a provincial child protection committee and registration in DCY systems. Receiving a monthly kinship grant does not make a placement formal; an arrangement is formal only when a state order has been issued, and the placement is recorded in the child protection case management system. Informal kinship care refers to arrangements made privately

by families without a state order, even if caregivers later access welfare benefits. In many LMICs, kinship care often occurs informally, outside of legal and welfare systems, and in the absence of financial support, case management, or protective oversight. In these circumstances, kinship care may reflect broader structural inequalities, particularly poverty, migration, and weak social protection, more than deliberate child protection planning. It is important to recognise that some LMICs are primarily countries of immigration, while others are characterised by high levels of emigration. Internal and cross-border migration should also be considered when exploring varying vulnerabilities for children in kinship care. For example, children of migrant workers may be excluded from policy frameworks and public services, while in the same country, more stable kinship arrangements can exist where extended family networks remain intact with strong community-based caregiving traditions. These variations highlight the importance of contextually grounded understandings of kinship care within national settings.

This article examines one such context: Thailand. While kinship care is widely practiced and often seen as culturally normative, it is rarely supported through formal systems. The Thai case, therefore, offers an important opportunity to interrogate global assumptions about kinship care and to consider how informal arrangements emerge and persist within policy and welfare gaps. It also raises critical questions about the limits of current care reform frameworks when applied in under-resourced settings.

Theoretically, this article draws on feminist and critical welfare scholarship, particularly the concept of care informalisation. Haubner (2020) discusses this in the context of elder care in Germany and refers to the policy tendency, especially under neoliberal governance, to shift caregiving responsibilities from formal state systems to families, often without accompanying investment or support. While the original focus was on elder care, the concept offers a useful analytical lens for understanding how caregiving responsibilities for children are similarly placed on families in under-resourced welfare systems such as Thailand's. Research from the UK also highlights how grandmother kinship carers often shoulder the burden of caregiving in contexts of poverty, austerity, and limited state support (Birchall & Holt, 2023). While not Thailand-specific, this analysis underscores the gendered dynamics of informal care, which may have parallels in Southeast Asia, particularly given the predominance of older female caregivers in informal Thai kinship arrangements (Department of Children and Youth et al., 2021). The analysis is also informed by developmental perspectives that stress the importance of stable attachments and nurturing relationships in early childhood (Bowlby, 1969), conditions that may be compromised in kinship care settings with minimal support (Hassall et al., 2021).

The article pursues three interrelated aims. First, it explores the scale and drivers of kinship care in Thailand, distinguishing between formal and informal arrangements. Second, it assesses the developmental and safeguarding implications of kinship placements in Thailand, particularly for younger children. Third, it evaluates policy and practice responses, arguing for a dual strategy: strengthening formal kinship care within the child protection system, while reducing reliance on informal care through broader social and economic reforms.

Through this analysis, the article contributes to ongoing debates about care reform in LMICs, advocating for more contextually grounded and nuanced approaches to kinship care. Rather than treating Thailand as an exception, it is presented as a case that sheds light on the challenges of applying global frameworks in settings where formal support systems are limited or absent. Understanding the dynamics of informal kinship care is therefore central not only to family-based care reform, but to explaining why institutionalisation persists in settings where deinstitutionalisation is often endorsed by governments.

## **Methodology**

This article adopts a structured documentary and policy analysis to examine the scale, drivers and implications of kinship care in Thailand. It draws on publicly available national mapping exercises, child protection investment analysis, Multiple Indicator Cluster Survey (MICS) findings, rapid district-level assessments, and a review of Thailand's legal and policy framework.

The article does not involve new primary data collection or formal statistical re-analysis. Rather, it synthesises existing administrative data, household survey findings and policy documents to explore patterns of child–parent separation, the distribution of formal and informal kinship arrangements, and the relationship between kinship care, poverty and migration. Where appropriate, peer-reviewed international literature is used to situate the Thai case within broader debates on kinship care and care informalisation.

The analysis is informed by the authors' involvement in national alternative care mapping and policy dialogue processes in Thailand, which provides contextual understanding of how kinship care data are produced and interpreted within the child protection system. The aim is to provide a contextualised case study of kinship care in a middle-income Southeast Asian setting, rather than a comprehensive systematic review.

### *Thai Context: Scale and Drivers of Kinship Care*

While global policy frameworks often position kinship care as a protective and culturally appropriate alternative to institutional care, the Thai context reveals a more complex reality. In Thailand, kinship care is widespread but almost entirely informal, emerging less from deliberate child protection planning and more from socioeconomic necessity and gaps in welfare provision. Thailand's caregiving landscape reflects what Razavi (2007) calls the 'care diamond', where the provision of care is shared among four key sectors: the family or household, the state, the market, and the not-for-profit sector. In Thailand, the family has historically borne the greatest share of this responsibility, with minimal state or market support and relatively limited involvement from non-profit actors. This imbalance has led to an over-reliance on informal caregiving, particularly by extended family members, without adequate investment in public systems that could share the load or provide oversight. Notably, types of care vary regionally:

institutionalisation is more common in the borders with Myanmar, or the tourist and missionary hub of Chiang Mai, where non-profit actors have historically influenced the expansion of residential facilities. In contrast, kinship care is more prevalent in the Northeast (Isaan), where extended families often reside in close proximity, and caregiving is shaped by longstanding cultural traditions of familial responsibility. Recent mapping reflects this with higher rates of kinship care in Isaan than in the border district of Sangkhlaburi, where children from migrant families are overrepresented in residential care (Department of Children and Youth et al., 2021). This underlines the uneven contexts in which kinship care occurs, with some regions offering stability through extended family ties while others expose children to greater fragility.

Current estimates suggest that more than 2.9 million children live apart from one or both of their parents in Thailand, yet very few are placed in formal kinship care through the state child protection system (UNICEF & DCY, 2024). Globally, it is estimated that around 1 in 10 children live apart from their biological parents, with most in kinship arrangements of some kind, often informal and unsupported (Delap & Mann, 2019). This suggests that, even where kinship care is widespread, formal recognition and support are often limited. Thailand's near-complete absence of formal kinship care, despite the large scale of parental separation, is therefore especially striking. In the Thai context, approximately 78% of children living with neither biological parent are cared for by grandparents, particularly maternal grandmothers, with another 18% cared for by other extended family members (UNICEF, 2022a). This occurs most often without legal arrangements, social work case oversight, or practical or financial support. Around 62% of these children are in the lowest 40% in household wealth (UNICEF, 2022b). Therefore, caregivers, many of whom are grandmothers, elderly and under financial strain, are expected to meet children's emotional and developmental needs without professional guidance or practical support. Children, in turn, may then experience reduced parental contact as parents are often living far away, with visits home requiring both financial resources and time off from precarious employment. These prolonged absences can lead to disrupted attachments, with limited access to external support, which may compromise children's cognitive, emotional, and social development.

In 2021, MICS data indicate 37% of children in kinship care in Thailand were also living in the poorest quintile of the population. This represents almost a million children facing the increased vulnerability caused by these two factors. In these circumstances, children are at heightened risk of dropping out of school and entering exploitative and unsafe working conditions.

When families experience financial problems, they may turn to relatives and friends for support, but for children already in kinship care, these safety nets are limited. Evidence from Sangkhlaburi district illustrates this dynamic: children previously in kinship care were found to be overrepresented in local children's homes (Department of Children and Youth et al., 2021). None of these children had lost their parents; rather, their kinship carers could no longer cope when remittances from parents stopped. In several cases, the monthly expenditure of local children's homes per child exceeded the total income of kinship families

living in the same area (Department of Children and Youth et al., 2021), underlining the financial pressures that make kinship care precarious (Department of Children and Youth et al., 2021). This dynamic helps explain the coexistence of widespread informal kinship care and high levels of residential provision in Thailand.

Another underexplored dimension is disability. UNICEF (2022b) estimates that around 1.3% of children in Thailand live with a disability. School attendance among adolescents with disabilities is significantly lower than that of their peers, and many families report little or no assistance. In practice, this often shifts daily care to grandparents or other relatives, especially when parents migrate for work. Where carers are elderly or have their own health needs, the capacity to meet the developmental and health requirements of children with disabilities is highly constrained. In such cases, informal kinship care intersects with disability and ageing, compounding vulnerability in ways that formal systems are currently ill-equipped to monitor or support.

Thailand has a large number of unregistered and unregulated private children's homes. In two northern provinces alone, almost 400 children's homes have now been documented (UNICEF & One Sky Foundation, 2025). The lack of government oversight means that these homes operate with widely varying standards and procedures. Some are actively involved in recruiting children from families experiencing poverty. This creates a pull factor that combines with the push factors described above for kinship families under financial strain. The Sangkhlaburi study on the border with Myanmar found that kinship care often takes place in cramped and poorly maintained housing, with several children of mixed ages living in limited space. Such overcrowding increases health risks and reduces privacy and supervision, adding to the pressures on kinship carers (Department of Children and Youth et al., 2021). When compared to what residential care facilities offer, notably better living conditions and access to education, many grandparents place their grandchildren in residential care.

Thailand has made progress in reducing adolescent births, yet rates remain high compared with most high-income countries. Earlier national data showed the adolescent birth rate peaking at around 54 per 1,000 women aged 15–19 in 2012 (UNICEF, 2015). By 2022, this had fallen to 18 per 1,000 (UNICEF, 2022a). However, rates remain especially high among poorer families, with the 2022 MICS reporting around 30 per 1,000 in the lowest income quintile compared with only 2 per 1,000 in the richest (UNICEF, 2022a). A lack of comprehensive sex education in schools and restrictive abortion laws are likely contributing factors. Outcomes for the children of teenage mothers often depend on family resources. Wealthier families may be able to support young mothers to remain in school, while poorer families may require them to leave education. In rural areas, concerns about family reputation can also shape responses, with some young mothers moving to cities for work while their babies are raised by grandparents, who are themselves often still young.

These examples highlight that not all kinship arrangements are rooted in strong or voluntary ties. Where connections are fragile and parental contact is irregular, placements may slide into neglect or even institutionalisation when resources or

relationships break down. <https://worldpopulationreview.com/country-rankings/teenage-pregnancy-rates-by-country>

### *The Developmental and Safeguarding Implications of Kinship Placements in Thailand*

Separation from parents can have deep emotional and developmental consequences for children. This is true even when prompted by economic necessity or framed as a protective measure. For example, research on children left behind by migrating parents highlights increased risks of psychosocial distress, disrupted school attendance, and limited parental communication (UNICEF East Asia and Pacific, 2021). These effects are not confined to extreme cases but reflect a broader emotional toll experienced by many children growing up without a consistent parental presence. As Bowlby's attachment theory emphasises, disrupted or inconsistent caregiving in early childhood can impair the formation of secure attachments, which are essential for emotional regulation, social competence, and psychological resilience (Bowlby, 1969). The psychosocial impact of separation is further compounded when children are placed in caregiving arrangements without adequate emotional support or communication from parents. As the UNGA guidelines for alternative care recognise, these challenges are particularly acute for children under three, whose developmental pathways are most sensitive to relational instability.

In Thailand, children in kinship care may experience irregular or infrequent contact with their parents, particularly when migration is long-term and communication is sporadic. While evidence on emotional well-being in kinship settings is limited, practitioners report that some caregivers, particularly elderly grandparents, struggle to meet young children's emotional needs due to their own health or economic challenges. Where kinship arrangements remain informal and outside routine oversight, children may also be less visible to safeguarding systems. Emerging research on violence against children in alternative and informal care settings suggests that when placements fall outside formal monitoring structures, risks of neglect, exploitation or abuse may go undetected, particularly in contexts of poverty and limited service reach (Rogers et al., 2023, 2026). These impacts can be further exacerbated if breakdowns in kinship placements result in children entering institutions. While it is not the most common outcome overall, it seems to occur in Thailand more frequently than in most other countries (Desmond et al., 2020; Ladaphongphatthana et al., 2022). This remains a significant risk for some children when no other support options are available. Such patterns illustrate how economic and geographic factors shape Thailand's reliance on informal kinship care, even when the arrangements are under-resourced or lack adequate oversight. Recognising the lived experience of children growing up apart from their parents, sometimes for years, must be central to assessing the suitability of kinship care arrangements.

Kinship caregiving arrangements are often shaped by structural pressures, including unequal economic growth, leading to growing inequality and stark urban and rural disparities. These pressures often lead to internal labour

migration, especially in rural areas, where many parents move to urban centres for precarious work while leaving children with relatives (UNICEF East Asia and Pacific, 2021). Whilst the evidence on the types of jobs people migrate for is limited, practitioners report that it is often precarious, with many heading from rural areas to urban centres to work for ride-hailing companies and delivery services. With the limited data, it is also important to acknowledge that people may also be migrating between urban centres for work.

Social protection systems remain limited, with minimal and absent parental leave, scarce childcare provision, and insufficient financial assistance. The lack of public support for working parents reinforces reliance on extended family care, even when relatives may be elderly, financially strained, or living far from essential services.

While migration-related kinship care is often described as a consequence of rural poverty and limited services in ‘sending’ areas, barriers in urban destinations are equally influential. Migrant parents who move to cities for work face high living costs, limited availability of affordable childcare, and, in some cases, difficulties enrolling their children in schools if they are not registered locally through the household registration system (*tabien baan*). For those in informal or low-wage employment, these barriers make it economically unfeasible to bring children to the city, even when the children are Thai citizens. As a result, leaving children with grandparents or other relatives in rural areas becomes the only viable arrangement, reinforcing the prevalence of informal kinship care. At the same time, informal kinship care also occurs within urban families themselves. Low-income households in Bangkok and other cities may rely on relatives, often in the same extended household or neighbourhood, to care for children while parents work long or irregular hours. These cases highlight that urban poverty and limited childcare provision can generate informal kinship care independently of rural-to-urban migration dynamics.

Internal migration is not unique to LMICs, yet Thailand appears to have a particularly high proportion of migration-related kinship care compared to other settings, suggesting that these patterns are shaped by national policy gaps in portable social protection, education access, and urban family support. Addressing urban-specific drivers and destination-area barriers could reduce the need for parents to leave children in kinship care and help increase the feasibility of safe, formal kinship care options when separation is unavoidable.

Access to education is another contributing factor. Although schooling is officially free under the policy ‘Education for All’, which provides 15 years of free education for all children regardless of their legal status, hidden costs for uniforms, transport, materials and meals can push some parents either to place children with relatives in areas with better schooling or to use residential institutions that appear to provide free, stable schooling, which unintentionally incentivises institutionalisation. In rural areas, the absence of local schools or inconsistent teaching quality further limits access. In some urban destinations, migrant families also encounter enrolment barriers linked to the household registration system, reinforcing decisions to leave children in rural areas where they can attend school more easily. While this pathway is significant for those affected, against a

backdrop of about 2.9 million children in kinship care, it likely accounts for a relatively small share overall. In practice, kinship care becomes a *de facto* substitute for unmet education and other basic services.

Migration also presents a two-tiered dynamic, in which the children of international migrants, particularly those who are undocumented, face heightened risks. These families often contend with the lowest wages, unstable employment, and significant barriers to travel and access to services. As a result, their children may experience greater vulnerability than those of Thai nationals migrating internally (UNICEF East Asia and Pacific, 2021). Given the challenges of international migrants residing in Thailand, children in kinship care may face an even higher risk of institutionalisation, causing further disruption, even if parental contact is maintained for some (UNICEF & One Sky Foundation, 2025).

Recent cost analysis highlights that despite the significantly higher public expenditure per child in institutional settings, families continue to use them as a substitute for unavailable or inaccessible basic services (UNICEF & DCY, 2024). This reliance persists even though formal kinship care, currently accessed by only a small fraction of children living apart from their parents, costs substantially less per child and is aligned with Thailand's commitment in the National Action Plan for Alternative Care (2022–2026) to expand and strengthen family-based care options, including kinship care (DCY, 2022). The very low uptake of formal, government-supported kinship care, despite its lower cost and potential benefits, reflects a critical gap in provision and investment.

Kinship care in Thailand is closely entwined with poverty. It is often a response to economic hardship, yet it can also deepen hardship for caregiving households. Recent survey data indicate that approximately 37% of children living apart from their parents are in the poorest wealth quintile, underscoring the unequal burden borne by low-income families (UNICEF & DCY, 2020, p. 65). However, government kinship care support reaches just over 5,000 children. In these circumstances, kinship care functions not as a protective intervention, but as an informal and under-recognised substitute for basic public provision. While such care can offer emotional stability and avoid institutionalisation, its protective value is significantly compromised when left unsupported, as echoed in recent international guidance (Family for Every Child, 2022). Furthermore, where kinship care is arranged without support and preparation, children may also experience disrupted attachment or emotional insecurity. These effects can be exacerbated by the absence of consistent parental contact and the lack of mechanisms to monitor children's well-being or intervene when harm arises. Regular contact with parents, where safe to do so, remains important not only for emotional security but also for maintaining a sense of identity and belonging throughout childhood.

These patterns reflect broader concerns about care informalisation. Despite policy recognition of kinship care as a preferred option and a pilot project to provide foster care for institutionalised children from public orphanages, Thailand lacks a dedicated framework for assessing, supporting, or monitoring the scaling up of such arrangements. The Child Protection Act B.E. 2546 (2003) provides broad legal powers for care and welfare services, including the placement of

children with kin, but it does not establish specific procedures, standards, or sustained support mechanisms for kinship arrangements (Royal Thai Government, 2003). More recent commitments under the National Action Plan for Alternative Care (2022–2026) include the expansion of family-based care, such as kinship care, alongside deinstitutionalisation, gatekeeping, and service standards (Department of Children and Youth, 2022). However, in practice, formal kinship care remains marginal: while kinship carers are eligible for small monthly grants, coverage is minimal and the vast majority of kinship arrangements remain informal and unsupported (UNICEF & Department of Children and Youth, 2024). In the Thai context, the burden of caregiving has long been placed on families, reflecting a historically *laissez-faire* approach in which the state has played a minimal role in supporting caregiving responsibilities. This policy gap not only leaves most kinship arrangements unregulated and unsupported, but also helps sustain high rates of institutional care. An estimated 135,000 children remain in residential facilities (Ladaphongphatthana et al., 2022), many not because of abuse or neglect, but due to poverty or to access schooling (Rogers et al., 2023). This coexistence of widespread informal kinship care and institutional care highlights the inadequacy of current systems to meet the UN guidelines' standards of necessity and suitability. Access to welfare and schooling should not necessitate separation from parents, especially in potentially unsuitable placements, whether that be informally with kin or in an institutional setting, which is a form of care regarded as a form of structural neglect (van Ijzendoorn et al., 2008).

Thailand's experience highlights the limitations of applying global care frameworks without critical adaptation to under-resourced settings. While kinship care is widely practiced and culturally accepted, the absence of formal recognition and support has the potential to entrench vulnerability rather than ensure genuine protection. These realities underscore the importance of tailored national responses. The following section critically examines how Thai policy and practice currently engage with kinship care, identifying both gaps and opportunities for reform within the country's child welfare system.

### *Policy and Practice Responses: Reforming Kinship Care in Thailand*

While kinship care has long featured in Thailand's caregiving landscape, it has historically functioned outside of formal child protection systems, operating as a default response to poverty and migration rather than a deliberately chosen or well-supported care arrangement. Thailand's National Action Plan for Alternative Care (2022–2026) marks a welcome shift, signalling policy intent to expand support for family- and community-based care, including allocating a budget for vulnerable kinship care (Department of Children and Youth [DCY], 2022). However, the plan, which is the first phase, focuses more on laying the basic foundation for care reform. Kinship care is framed mainly in aspirational terms and embedded within broader commitments for more family-based alternative care provision, without detailed operational guidance, funding mechanisms, or workforce strategies to ensure its safe and sustainable implementation. The plan also does not explicitly acknowledge the large proportion of children in informal kinship

arrangements, who make up the majority of kinship care cases and often receive no formal oversight or support. To translate policy intent into impact, a dual approach is required: strengthening formal kinship care through legal, procedural, and workforce reforms, and reducing over-reliance on informal kinship arrangements by tackling the structural conditions that drive them.

### *Strengthening Formal Kinship Care Systems*

The recognition of kinship care in national policy documents, including the Action Plan, signals an important shift in approach. Kinship carers are explicitly identified as a group requiring targeted support, with the plan emphasising the need to fund and strengthen services for vulnerable kinship care arrangements (DCY, 2022, pp. 11–14). While the Action Plan outlines measures to register foster care placements and develop service delivery mechanisms and national standards for foster care, its inclusion of kinship care within broader support strategies nonetheless represents a growing policy acknowledgement of this longstanding form of family-based care. However, implementation of the action plan remains limited, and the system remains narrow in reach and scope.

It is important to highlight that in the Thai context, ‘formal’ kinship care refers to a placement that is authorised by the state and recorded with the competent authority, typically through a provincial child protection order and registration with DCY systems; receipt of a small monthly grant alone does not make an arrangement formal if the child was not placed by the state. As of 2024, only an estimated 5,000 children benefit from the kinship care grant, a small fraction compared to the estimated 290,700 children in kinship care nationwide (UNICEF & DCY, 2024). Quotas on funding and provincial variation in delivery mean that access to support remains inconsistent and often unavailable. Without legal recognition or integration into the child protection system, most kinship carers remain invisible to formal services. The vast majority receive no training, monitoring and/or support, or any financial assistance. Rather than seeking to formalise all kinship care arrangements, policy efforts should focus on strengthening the support available to carers who are most vulnerable, while also prioritising interventions that enable children to remain safely with their parents. With an estimated 3 million children in kinship care across Thailand when informal arrangements are included, the long-term goal should be to reduce this number through effective family strengthening, poverty reduction, and access to social protection. At the same time, kinship care must remain a valued option for children who cannot safely remain at home, ensuring they can stay within their extended family and community when separation is necessary. Accordingly, large-scale formalisation would be neither feasible nor desirable. A more appropriate direction is to build flexible community-based support and modest financial assistance for kinship carers, alongside improved coordination between local welfare officers and provincial authorities. This approach would help to protect children, reduce reliance on informal care, and reinforce family-based care without creating unnecessary bureaucratic barriers.

To strengthen formal kinship care, a number of concrete actions are needed. First, the legal status of kinship care arrangements must be clarified and formalised,

including clear definitions of kinship relationships, responsibilities of carers, and the rights of children. Legal recognition should not impose unnecessary bureaucracy on carers, but it should enable access to support and ensure minimum safeguards are met (Family for Every Child, 2022). A brief national practice note could codify when kinship should be used, how it is authorised, and the minimum documentation required for registration and review. Eligibility criteria for formal kinship care support should also be clarified to ensure equitable access for all children in need, regardless of nationality or documentation status. Thailand's constitutional commitments and ratification of the UN Convention on the Rights of the Child affirm the right to care and protection for every child, non-Thai children and their carers, particularly those in border and migrant communities. However, they are often excluded from grants and support services in practice due to poverty, lack of legal status, and inconsistent provincial implementation (Department of Children and Youth et al., 2021). Establishing a national directive on eligibility, coupled with proactive outreach to marginalised communities, would reduce these disparities and strengthen the protective potential of kinship care.

Second, there is a pressing need to invest in the systems and processes for case management and oversight mechanisms. The current system does not require even minimal checks on the suitability or safety of formal kinship placements. Embedding kinship care within the responsibilities of existing child protection case workers, supported by context-appropriate assessment and review tools, would help ensure placements are both necessary and suitable (Better Care Network & UNICEF, 2015). The National Action Plan recognises this gap but does not yet specify the tools, training or systems needed to deliver on this ambition (DCY, 2022). At present, the government is working to equip more social workers to document and provide limited case management for residential care, particularly along the border areas, but these efforts remain small in scale. Addressing standards in residential care and expanding foster care provision appear to be prioritised over the development of kinship care systems. It is important to acknowledge that government staff are not yet able to conduct regular annual reviews for more than 730 residential care facilities nationwide. In this context, the introduction of tiered assessment and six-monthly reviews for registered kinship placements would be unrealistic given the current workforce and resource constraints. Over time, however, gradual investment in systems and capacity is important so proportionate assessment and review processes become feasible, providing oversight without overburdening workers.

Third, alongside stronger systems, there must be parallel investment in the capacity and competencies of the workforce. Many social workers in Thailand lack the training, tools or time to adequately assess and support kinship carers. The current workforce is also too small to meet existing demand, with high case-loads limiting the depth and quality of support that can be provided. Investing in standard operating procedures, clear referral pathways and specialist guidance for kinship placements could support the workforce to practice a consistent and child-centred approach. The Action Plan outlines capacity-building as a key strategy, but it will require sustained commitment, funding and leadership across both

national and provincial levels. Short, modular training focused on assessing family strengths, supporting grandparent carers, and maintaining safe contact with parents would deliver immediate gains.

Fourth, financial support must be expanded. The current monthly grant of 2,000 baht, which has been in place since 1985, is modest, and many eligible carers are excluded due to provincial quotas. By contrast, institutional care receives significantly more investment per child per year. The recent Child Protection Investment Analysis estimates the cost of kinship care at just 25,640 baht per child per year, compared to 141,285 baht for institutional care (UNICEF and DCY, 2024, p. 28). Investing in formal kinship care is not only more cost-effective, but it also aligns with Thailand's stated policy direction and global best practice. A predictable, nationally funded kinship subsidy with transparent criteria would reduce provincial disparities and incentivise safe formalisation where separation is necessary. At present, both government and private financing flows disproportionately support institutional provision, reflecting longstanding patterns of public–private partnership. Redirecting these combined resources toward family-based options, including kinship care, would better align investment with stated policy goals.

#### *Reducing Informal Kinship Care Through Policy Reform*

Efforts to strengthen formal kinship care must go hand in hand with strategies to reduce reliance on informal care. Informal kinship care is not inherently problematic, but when it arises from structural constraints rather than family preference or cultural norms, it can place children in precarious situations without oversight, stability or continuity. Thailand's high rates of informal kinship care reflect a deeper failure of policy to enable families to stay together and thrive.

The Child Protection Investment Analysis highlights that most children in residential institutions are not there due to abuse or neglect, but because of poverty, family separation or lack of access to education (UNICEF & DCY, 2024, p. 13). In these contexts, kinship care functions more as a workaround than a planned, sustainable caregiving solution. Without broader investments in family well-being, formalising kinship care alone will not reduce the risks children face. Social policy reform is therefore essential. Expanding access to early childhood care and development (ECCD) services could alleviate the caregiving burdens that prompt some parents to place children with relatives. Thailand's early years system remains underfunded and uneven in coverage, particularly in rural areas and in informal urban settlements in migration—'receiving' areas, where demand from incoming families often outstrips provision. Migrant and non-Thai children may also face enrolment barriers due to documentation requirements. Strengthening ECCD in these 'receiving' areas would help families remain together and reduce reliance on informal kinship care. Parental leave policies are also limited, placing strain on families, particularly single parents or those in precarious employment, who may feel compelled to place children in informal care in order to work. Modest improvements to leave entitlements and workplace protections could have significant knock-on effects for child well-being and family unity (International Labour Organization, 2023).

Improved social protection systems would also reduce the economic pressures that underpin many informal care arrangements. While Thailand's Child Support Grant has made some progress in reaching families in poverty, coverage remains incomplete, and the benefit level is low relative to household needs (UNICEF East Asia and Pacific, 2021). According to recent estimates, the CSG now reaches over 1.8 million children under six, a significant milestone in Thailand's push for universal coverage. However, nearly one-third of eligible children are still excluded due to barriers such as lack of documentation, administrative burdens and geographic remoteness (UNICEF & DCY, 2020). These access gaps risk leaving the most vulnerable families behind, reinforcing dependence on extended kinship networks.

The gradual expansion of the CSG from a narrowly targeted pilot to a near-universal entitlement reflects a positive shift in the state's role in supporting caregivers and preventing unnecessary family separation. In line with the Guidelines for the Alternative Care of Children, which identify prevention of separation as a core principle alongside provision of appropriate alternative care (UNGA, 2009), policymakers should build on this momentum by simplifying enrolment processes, improving outreach to marginalised groups, and integrating child protection systems with social welfare databases to better identify families at risk. Strengthening prevention also requires going beyond financial support to include access to quality early childhood services, parenting support, health care, and decent work protections, ensuring families have the stability and resources needed to care for their children safely at home.

Given the Ministry of Social Development and Human Security's comparatively small share of the national budget, expanding direct cash transfers alone may be difficult in the short term. Complementary measures that do not rely exclusively on MSDHS appropriations could include tax policy and social insurance levers. For example, introducing caregiver tax deductions, allowing kinship carers to accrue social security credits, and enabling employers to offer flexible work and childcare benefits that are deductible for corporate tax could deliver practical support to kinship families while broader budget reforms are pursued.

Alongside social protection, migration policies also shape whether families are able to stay together. Thailand has high rates of internal and cross-border migration. Field research from Sangkhlaburi (Department of Children and Youth et al., 2021) reports that many children live with grandparents or relatives because parents migrate for work, particularly across the border or to urban centres. According to UNICEF East Asia and Pacific (2021), millions of children in ASEAN countries, including Thailand, remain with non-parental caregivers while parents migrate for employment, placing them at increased risk of poor emotional, educational and physical outcomes. The UNICEF Thailand Migration Country Brief notes that these children are often vulnerable to psychosocial distress, school dropout, and reduced emotional connection with caregivers, yet they remain largely invisible to formal child protection services (UNICEF East Asia and Pacific, 2021). While the most recent Multiple Indicator Cluster Survey (UNICEF, 2020) estimated that around 2.9 million children in Thailand live apart from one

or both parents, it does not capture the reasons for this separation. As such, there is no nationally representative figure on how many are in kinship care due to parental migration, despite strong indications that migration is a major driver in high out-migration provinces.

These separations are rarely due to child protection concerns and more often reflect the economic and policy realities facing low-income families. Parents are unable to bring children with them because of unstable employment, lack of affordable housing, and ineligibility for public services in destination areas. Furthermore, for those employed in factories, industrial zones are typically located to maximise business convenience rather than to align with the needs of the workforce, with no government-led incentives to situate them in areas of low employment. The absence of legislation requiring family-friendly accommodation for migrant workers means that housing in destination areas rarely offers affordable access to schools, childcare, or safe community spaces. This reinforces a structural dependence on informal kinship care, an example of ‘care informalisation’ whereby the state shifts caregiving responsibilities onto families while providing little accompanying support or regulation (Razavi, 2007). Within such a policy environment, families compensate for gaps in childcare, education and social protection by relying on relatives, even when those relatives lack resources or oversight. Accordingly, child–parent separation is not merely a private family decision but a consequence of policy gaps across labour, housing and social welfare systems.

UNICEF recommends labour policy reforms that promote decent work and family stability, inclusive public services for migrant families, portable social protection systems, and parenting programmes to support both migrant parents and kinship caregivers. These reforms are critical to reducing the reliance on informal care arrangements that emerge from structural inequality rather than child-focused planning (UNICEF East Asia and Pacific, 2021). Strengthening labour rights, improving parental access to childcare, and enabling whole family migration can therefore help prevent unnecessary separation and reduce this entrenched reliance on informal kinship care.

These dynamics exemplify the concept of care informalisation, where caregiving responsibilities are shifted to extended families without adequate support. Thailand’s structural dependence on informal kinship care reflects not just cultural norms, but gaps in the care diamond between family, state, market, and community provision.

## Conclusion

Kinship care in Thailand reflects a tension between cultural continuity and structural constraint. It is widely practised and socially accepted, yet overwhelmingly informal and unsupported, and frequently driven by poverty, migration and gaps in social protection rather than assessed child protection need. Thailand’s experience reinforces growing recognition that while kinship care can be protective, it is not inherently so. Where separation is structurally produced and placements

operate without oversight or sustained support, vulnerability may be displaced rather than resolved.

Viewed through the lens of care informalisation, Thailand's reliance on large-scale informal kinship care illustrates how caregiving responsibilities are shifted onto extended families in the absence of adequate public investment. Underinvestment in childcare, labour protection and income support has reinforced the family as the default provider of care, without equipping it to meet that role safely or sustainably. This dynamic helps explain the coexistence of widespread informal kinship care and continued residential provision. Thailand, therefore, illustrates a threefold pattern: large-scale informal kinship care, limited formal kinship infrastructure, and continued reliance on institutional provision. When unsupported kinship arrangements falter, or when families seek access to education and basic services, institutional care remains a parallel pathway. Deinstitutionalisation therefore stalls not only because of institutional inertia, but also because family-based alternatives are insufficiently supported.

Reform requires a dual strategy. First, formal kinship care must be strengthened within the child protection system through clearer legal recognition, proportionate assessment and review processes, accessible financial support and workforce investment. Formalisation should enhance safeguards and access to services without imposing unnecessary bureaucratic barriers. Second, the structural drivers that generate large-scale informal kinship care must be addressed. Expanding early childhood services, strengthening parental leave and labour protections, improving portability of social protection and reducing administrative barriers to service access are central to enabling families to remain together safely.

Thailand's experience offers a cautionary lesson for care reform agendas in middle-income settings. Promoting family-based care in principle is insufficient if families are left to absorb systemic gaps alone. Without sustained investment in both preventive family support and accountable kinship care systems, informal arrangements risk entrenching inequality and, when placements break down, perpetuating reliance on residential care. This includes ensuring that children in kinship care are not rendered invisible to safeguarding systems simply because placements occur within extended family networks. Aligning family-based reform with genuine deinstitutionalisation requires rebalancing responsibility across the care system so that children's rights to family, rather than structural constraint, determine where and how they grow up.

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