

International Reference Centre for the Rights of Children Deprived of their Family (ISS/IRC)

Fact sheet N° 8

A global policy for Children and the Family

ELBORATING A LIFELONG PLAN: KINSHIP CARE

Of the millions of children throughout the world who are in out-of-home care, most are being looked after by grandparents or other members of their family. This form of care – known as kinship care – is indeed the most significant "alternative care" solution in a wide variety of countries. While there is a considerable *a priori* advantage for a child to be looked after by family members or others familiar to him or her, often in the original community, kinship in itself is no guarantee of welfare, protection and ability to cope. Yet kinship care is often subjected to far less supervision than its non-kinship counterpart, and in most cases to no supervision at all. It is not referred to in any internationally-recognised standards or guidelines.

Definition

The Child Welfare League of America (CWLA) defines kinship care as "the full time care, nurturing and protection of children by relatives, members of their tribes or clans, godparents, stepparents, or any adult who has a kinship bond with a child."1 Some other definitions are even a little wider, and include in particular neighbours who are well-known to the child. Invariably, the extended family has traditionally taken over child-care when parents are unable to fulfil their role for a period of time - including, for example, young single mothers - or when they are permanently incapacitated or have died. This is known as "informal" or "private kinship care".

Advantages and limitations

A number of features are common to both formal and informal kinship care. The identified advantages, in principle, of kinship care, include:

- Preservation of family, community and cultural ties;

- Avoidance of trauma resulting from moving in with strangers;
- Less likelihood of multiple placements.

There are also, however, a number of risk factors and problems associated with this form of care that can have negative repercussions for the children concerned. Thus, for example:

- Some relatives may cause intra-familial friction by insisting on caring for the child, or may allow unauthorised contact between the child and the parents;
- Some relatives may be abusive or neglectful because they come from the same "troubled" family;
- Kinship care may create financial disincentives to returning the child to the parents if relatives receive higher allowances than those available to parents, which is one reason why children may remain longer in kinship care than in non-kin foster care:
- Children may be less likely to receive services than they would in non-kin foster care;

- Relatives too may need more services and support than "specialised" non-kin foster carers:
- Division of responsibilities and decisionmaking powers between relatives and parents regarding the child may be unclear or contested, which may lead to intrafamilial friction and children may be the victims of conflict between their foster relatives and the birth parents.

Informal kinship care

Informal arrangements are by far the most prevalent form of kinship care. The literature shows that, while older siblings (including in child-headed households) and uncles and aunts provide informal care, most carers are grandparents or grandmothers. Under most systems, informal kinship care does not bring with it any monetary allowances, however. The financial burden on relatives caring for one or more children, as well as problems linked with size of accommodation, therefore often constitutes a major constraint and can jeopardise the quality of alternative care provided.

Some types of informal kinship care arrangements are notoriously likely to result in situations of child exploitation. As a result, they are more usually looked on and dealt with as issues of exploitative child labour, but it is equally important to look on these practices from the standpoint of protection in out-of-home care as well.

Formal kinship care

Keeping children within their own kinship, community, and cultural networks has found international favour in contemporary child welfare practice much bolstered by being a recognised right of the child.

Coupled with the growing, and sometimes already critical, pressure on formal foster care systems in the industrialised nations, it is therefore not surprising that kinship placements within the formal context have grown apace in those countries.

Within a kinship grouping, there may be reluctance to have a foster relationship defined by the court as opposed to being informal. However, one major advantage from the foster parents' standpoint may often be easier access to grants or allowances.

Cross-border kinship care

The main form of cross-border kinship care is an informal arrangement. It involves more especially, though not solely, sending a child from a developing or a transition country to stay with relatives residing in an industrialised country.

Clearly, it holds less of the advantages normally associated with kinship care:

- the child does not remain in his or her community;
- direct links with parents will likely be at least temporarily severed.

Equally, the risks associated with kinship care will be enhanced by the very fact that the child is outside the country of origin, which invariably increases vulnerability. Among other things, the child will likely have no one else to turn to in case of difficulties, may not speak the language in the country of destination, may be confused by traditional and cultural differences and, according to his or her legal status and/or that of the caregivers in that country, may not be known to the child protection services and not have access to health and education services.

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For more information:

- 1 CWLA at: www.cwla.org/programs/kinship/fag.htm.
- Tools for Permanency, Tool #4: Kinship Care", National Resource Center for Foster Care and Permanency Planning, at: www.hunter.cuny.edu/socwork/nrcfcpp/downloads/tools/kinship-tool.pdf
- Worrall J, Kinship care of the abused child: the New Zealand experience, Child Welfare. 2001 Sep-Oct;80(5):497-511.

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