

Quick Guide

KINSHIP CARE PRACTICE GUIDE

This Practice Guide relates to Outcome 2 of the Children's Social Care National Framework: Children and Young People are supported by their family network.

INTRODUCTION

1

This Practice Guide has been produced to support senior leaders and commissioners in local areas to commission and develop effective services to support kinship families. In this guide, kinship care refers to different types of legal arrangements, including Kinship Foster Care and Special Guardianship Orders, as well as informal kinship care arrangements, where friends or family members care for a child without a legal order.

This guide contains two types of headlines:

- **Key principles:** which summarise the needs, experiences, and preferences of kinship carers in the UK, and evidence on implementation and design of services and interventions. These ensure accessible, acceptable, and effective interventions can be delivered.
- Recommendations: which summarise the best-evidenced interventions for improving outcomes among kinship carers and children and young people in kinship care. These are drawn from robust impact evaluations of interventions in highincome countries sourced via a systematic review. ¹

 $^{1\ \} See: https://www.foundations.org.uk/our-work/publications/what-interventions-improve-outcomes-for-kinship-carers-and-children-in-their-care/$

KEY PRINCIPLES

Key Principle 1: Support for kinship carers should take into account the specific needs and strengths of kinship carers.

Why? Kinship carers are more likely than other carers to be older, socio-economically disadvantaged, living with long-term health conditions, and be from some minoritised ethnic background.² It should be recognised that kinship carers come from all ages and ethnic backgrounds and have unique needs and strengths. Support should be responsive and tailored to the specific and diverse needs and strengths of kinship carers.

How?

- Support should involve building trust and familiarity with kinship carers, and an understanding of sometimes poor past experiences of statutory services based on family history and/or wider discrimination, such as experiences of structural racism.
- Some kinship carers have had negative experiences of statutory services in the past, and so prefer to receive support through non-statutory services. It may therefore be helpful for statutory services to mirror some of the approaches taken by nonstatutory services.
- Local kinship carers (especially those from minoritised ethnic backgrounds) should be pro-actively involved in co-design of local interventions.

Key Principle 2: One-to-one relationships and high quality casework should be at the heart of support for kinship families.

Why? Trusted relationships with practitioners are a key aspect of successful support. The most common feature of effective interventions, in terms of both carer and child outcomes, is dedicated one-to-one support for kinship carers.

How?

- Kinship carers report that consistent intensive interactions with practitioners are an
 effective way of developing positive relationships that promote engagement with the
 support available.
- Interventions which are focused on the individual kinship carer and the child, and are able to adapt to an individual's needs, are strongly preferred by kinship carers and may help foster a sense of agency and empowerment.
- Practitioners' interpersonal skills are key to building positive, supporting, trusting relationships with kinship carers. Practitioners should be solution-focused and committed to supporting the carer.

² ONS (2023) Kinship Care in England and Wales: Census 2021, https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/articles/kinshipcareinenglandandwales/census2021#:~:text=Of%20all%20children%20aged%200,it%20is%20an%20older%20population.

• Providing ongoing and personal support from a specialist worker is thought to benefit kinship carers where the support includes assessing families' needs and connecting them to relevant services and interventions.

Key Principle 3: Kinship families need to be made aware of the support they are entitled to, and local authorities should actively work to address barriers to accessing support.

Why? Kinship families may need support to overcome barriers to accessing support. In particular, it is important to consider: economic barriers; how support is delivered; how to ensure that support on offer is culturally sensitive; and incorporate flexibility when delivering an intervention.

How?

- Effective interventions have been delivered in a range of settings, including home visits and in-person meetings in community settings, and online, virtual, and telephone engagement. No specific setting or way of delivering support was found to be more effective, so support should be flexible and reflect the needs of the kinship families that practitioners are working with.
- Kinship carers reported benefits to receiving support from non-statutory services, and support from these services can have a positive impact on kinship families.

RECOMMENDATIONS

	STRENGTH OF EVIDENCE FOR EACH RECOMMENDATION		
RECOMMENDATION	STRONG EVIDENCE	GOOD EVIDENCE	PROMISING EVIDENCE
1. Offer kinship carers specialist support to learn about, navigate and access the support that they are entitled to.			
Programmes that provide specialist practitioners, information, and infrastructure to support kinship carers to understand and access support can improve placement stability, improve kinship carer wellbeing, and increase the likelihood of reunification with birth parents for some children and young people. Practitioners should be dedicated kinship family support workers/case workers, with social work training and/or training in the specific model or method of supporting kinship carers to access services.		~	
2. Offer parenting support when a child or young person is demonstrating behaviours that challenge their kinship carer(s) on a frequent basis.			
Providing kinship carers with training and support in parenting skills can improve children and young people's behaviour. This includes improving behaviours that challenge their carer(s) that risk ongoing problems for the child and carer if unaddressed.			V
3. Make services available to facilitate peer support groups to improve kinship carers' wellbeing.			
Peer support can improve carers' emotional health and wellbeing and is consistently found to be popular among kinship carers. Kinship carers have reported that access to a network of peers can improve ongoing engagement with other forms of support.			V
4. Make Cognitive Behavioural Therapy available to kinship carers who have been assessed as in need of therapeutic support because, for example, the child or young person in their care is demonstrating behaviours that challenge the kinship carer.			V
Cognitive Behavioural Therapy (CBT) for kinship carers can reduce these behaviours among children and young people they care for. The research supporting this was focussed on grandmothers who were kinship carers.			

STRENGTH OF EVIDENCE FOR EACH RECOMMENDATION

RECOMMENDATION

STRONG EVIDENCE GOOD EVIDENCE

PROMISING EVIDENCE

5. Offer kinship carers training in self-care to support their emotional health, wellbeing and quality of life.

Carer training in self-care refers to interventions which mainly involve programmes, workshops or sessions designed to equip carers with the necessary knowledge and skills to support their own emotional well-being and cope with the challenges associated with being a kinship carer.

6. Offer financial allowance to kinship carers to increase placement permanency, reduce the likelihood of placement disruption and improve the likelihood of permanent guardianship.

In the US, a number of evaluations have been conducted to assess the impact of financial support provided to to kinship carers who assume legal guardianship for the children in their care. In these studies, kinship carers who assumed legal guardianship received a subsidy of \$300 a month. This was \$112 more per month when compared with unlicensed (informal) kinship carers receiving benefit payments. Licensed (formal) kinship carers receiving foster care payments were given an average allowance of \$600 per month. The evidence shows positive impact of financial allowances on increasing placement permanency, reducing the likelihood of placement disruption, and improving the likelihood of permanent guardianship.

GOOD

A rating of 'strong' is given if the evidence is from a meta-analysis of at least two methodologically high-quality experimental studies and demonstrates effectiveness of the intervention(s).

STRONG

A rating of 'good' is given if the evidence is from a meta-analysis or a narrative synthesis of at least two moderate quality experimental studies and demonstrates efficacy of the intervention(s).

PROMISING

A rating of 'promising' is given where the evidence is from one methodologically highor moderate-quality experimental study of the intervention(s).

Useful links:

- Kinship Care Practice Guide: foundations.org.uk/practice-guides/kinship-care
- Reflective Tool for actioning the Kinship Care Practice Guide: https://foundations.org.uk/wp-content/uploads/2024/10/reflective-tool-kinship-care-practice-guide.pdf
- · Find out more about the Practice Guides: foundations.org.uk/practice-guides