



For family or friends who  
step up to raise a child.



# Raised by Relatives:

the experiences of Black and  
Asian kinship carers in England

## Executive Summary

Dr Priya Tah and  
Professor Julie Selwyn



# ABOUT THE STUDY

Little is known about the experiences of Black and Asian kinship carers. There are many gaps in our understanding of how kinship carers from Black and Asian communities become carers, the type of support they receive and need and how they see their future as kinship carers. This study aimed to begin to understand the experiences and needs of kinship carers (both formal and informal) from Black and Asian ethnic communities. The study was commissioned by Kinship and supported by the KPMG Foundation. Thirty-seven kinship carers from Black and Asian communities took part in interviews and standardised assessments exploring their experiences, health and well-being, levels of stress, and sources of support. Kinship carers were recruited via organisations from Black and Asian communities, social media, and existing contacts of the researcher, peer researchers and the Kinship charity.

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# KEY FINDINGS

## Background

Little is known about the experiences of Black and Asian kinship carers. However, the available evidence<sup>1</sup> suggests that more than one in five of the 120,000 kinship children in England live with minority ethnic kinship carers. Previous research<sup>2</sup> with mainly White kinship carers found that kinship carers were more likely to experience deprivation, have higher rates of unemployment, and live in the poorest neighbourhoods in poorer housing compared with parents in the general population. Commonly reported difficulties were lack of support, financial problems, stress, and fears about the future. The same difficulties are likely to be experienced by Black and Asian kinship carers. However, we do not know whether kinship carers from the Black and Asian communities experience additional difficulties or face additional barriers in accessing the support they need to continue being able to care for children within the extended family. This study aimed to begin to understand the experiences and needs of kinship carers (both formal and informal) from Black and Asian ethnic communities.

## Methods and recruitment

Thirty-seven kinship carers from Black and Asian communities took part in the study. They completed interviews and standardised assessments exploring their experiences, health and well-being, levels of stress, and sources of support. Kinship carers were recruited via organisations from Black and Asian communities, social media, and existing contacts of the researcher, peer researchers and the Kinship charity. Recruiting kinship

carers from Black and Asian communities was challenging because of the additional time needed for researchers to gain their trust; the recruitment information did not resonate with them, as children were not thought of as "someone else's child"; their mistrust/fear of services; underdeveloped kinship support services within these communities and a misunderstanding of the term 'kinship carer'.

## The kinship carers

The majority of participating kinship carers were from the Black Caribbean community. Most kinship carers cared for one kinship child, and aunts and grandmothers comprised the largest proportion of kinship carers in this sample. Most kinship carers had a legal order (Special Guardianship Order); four were kinship foster carers, and three were informal kinship carers. Levels of well-being were moderate, whilst levels of stress and strain were moderate to high. Scores on the support measure which asked carers about the support they had access to if needed were positive. However, this measure did not ask whether the kinship carers had *actually received* any support regularly and kinship carers reported that when they had needed support, it had not been provided.

## Becoming a kinship carer

The majority felt they had no choice but to care for the child, often making this decision quickly and with insufficient information. Although this finding replicates earlier research<sup>3</sup> with kinship carers generally, Black kinship carers reflected on the impact of generational trauma

1 Office for National Statistics (ONS), released 26 September 2023, ONS website, article, Kinship care in England and Wales Census 2021.pdf  
 2 Hunt, J. (2020) Two decades of UK research on kinship care: an overview. Family Rights Group. Available at: <https://frg.org.uk/wp-content/uploads/2020/12/Overview-research-kinship-care.pdf>  
 3 Kinship (2022) Out of the Shadows: a vision for kinship care in England. Available at <https://kinship.org.uk/wp-content/uploads/2024/09/Out-of-the-Shadows-2022.pdf>

stemming from enslavement and colonialism, which served as motivation to ensure that the child remained with their family. The sense of duty ran deep for Black and Asian families as there was an expectation to care for their kin. There were also fears that Children's Services would intervene and take the child into care.

Once Children's Services handed over responsibility for the child, kinship carers did not know who to contact or how to access support. They felt unprepared and struggled with the change to their day-to-day lives, the additional strain on their finances and the complex relationships with birth parents whilst trying to provide a safe and stable home for the child. The type of support available varied depending on in which local authority the kinship carer lived, the quality of the advice received when the kinship arrangement began and whether there was a legal order. Support was needed and not provided in the following areas: financial assistance; support to secure suitable housing in safer neighbourhoods, where there is a lower likelihood of exposure to environmental, social, and developmental risks and hazards; respite; facilitation of family contact; and support for other children already living in the home. Although many kinship carers had supportive family and friends, they felt they had to carry much of the burden alone.

## The impact of ethnicity on kinship carers' experiences

The interviews explored the impact of ethnicity on kinship carers' experiences. Most kinship carers in this research study had asked for help but were told nothing was available. The kinship carers expressed uncertainty as to whether their ethnicity or racism was influencing decisions. Some carers were sure it had played a part and described not being listened to, a lack of understanding and feeling judged. Kinship carers spoke about being

overlooked in favour of White relatives, even when those relatives had not expressed an interest in caring for the child. Some Black and Asian kinship carers gave systemic examples of racism, particularly regarding Black boys. There was a lack of understanding from professionals, for example, about the impact of placing a carer and a Black boy in certain locations or types of accommodation. Another example of this lack of cultural competence was described by an Asian carer who was stopped from bringing Asian food for her grandsons during contact visits before a Special Guardianship Order (SGO) had been granted. Professionals had not understood that the food was a way to maintain the connection between the boys and their grandparents, as well as their heritage and culture.

The additional pressures of living in larger households, a lack of space, financial difficulties and supporting/caring for other family members meant that not only were kinship carers more stretched, but they were also deterred from seeking help from services they felt had abandoned them. Kinship carers described professionals who had made assumptions that extensive support networks were available in Black and Asian communities. In reality, kinship carers often had additional caring responsibilities and were supporting other relatives financially, practically and emotionally. Furthermore, kinship carers described how, over time, the extended family disengaged, and the carers were left responsible for raising the child.

A similarity with previous research with White kinship carers was conflict with family members, which caused additional stress. However, for Black and Asian families, cultural norms, multi-generational households, and family dynamics had also to be considered. Maintaining respect for 'elders' often had to be kept in mind when navigating the child's contact with family members, which made it difficult for some carers to manage boundaries, expectations and relationships with extended family.

Some carers identified fear of stigma and feelings of shame as the reason why Black and Asian families might not make themselves visible to services. There was also a belief in Asian communities that support was only available if the child had a special educational need or disability. Support groups were not always seen as places where kinship carers, particularly Asian carers, felt able to access support. The importance of having peers in support groups who shared Asian and Black kinship carers' culture and had a shared understanding of history was highlighted.

## Absence of support

The lack of support and the impact of entrenched narratives from local authorities based on ethnic and racial assumptions left the kinship carers in this study feeling disempowered and disillusioned, subsequently disengaging from services. This *rational* disengagement is a response to services that are seen as complacent, neglectful and indifferent. Kinship carers were also bewildered at how professionals could place a child with them and show no further interest or concern in their progress or well-being.

## Life as a kinship carer

Kinship carers described how life had changed since they took on the caring role, reflecting on the impact on themselves and the child. Most kinship carers stated that the child would remain with them as long as they needed a home. They spoke about seeing positive changes in the child, feeling good about providing a safe home for the child, and, despite the struggles, the happiness the child(ren) brought them. However, at the same time, it was clear that becoming a kinship carer triggered several challenges. Kinship carers described family breakdown, negative impacts on their own children, having to make sacrifices due to lack of finances or lack of free time, and struggling to manage the behaviour and additional needs of some of the children.

## Limitations

Our study focussed on the experiences of Black and Asian kinship carers as they reflect the majority of kinship carers within ethnic minorities. However, we acknowledge that the study had methodological limitations, including a low number of Asian and Black African participants, a low number of informal kinship carers, excluding ethnic minority groups who were not Black or Asian, and collecting limited information about participants' class and socioeconomic status.

# RECOMMENDATIONS

**Based on the findings, the following recommendations are made to improve practice and support to kinship carers.**

## Information

A public campaign is needed to raise awareness of the term 'kinship carer'. The objective would be to reach and engage kinship carers and raise awareness about sources of information, advice and support. Government funding is required to develop a comprehensive national resource pack for kinship carers. This should be co-produced with kinship carers and tailored for different ethnic minority communities. To reach marginalised communities there must be funding to support existing community-based organisations/support groups to engage with and build trust with kinship carers from ethnic minority communities. This would help to enable information to be shared in a meaningful and accessible way.

Information should also be freely available through education settings, health centres, food banks, libraries, and advice centres. It should also be made available online, for example through the Kinship website [www.kinship.org.uk](http://www.kinship.org.uk) and the interactive online tool, Kinship Compass.

Local authorities should ensure that their local offer for kinship families includes services and support developed with and for kinship carers from Black and Asian communities.

## Improving the visibility of support services for kinship carers

Signposting to Kinship support groups and charities should be provided by Children's Services and should be included in new policies and the local offer. Kinship support groups for specific ethnic groups – both in person and online – should be available so carers can attend groups with shared cultural understanding.

## Financial support

Financial support should be a standard offer for all kinship carers and should not be subject to means testing or dependent on whether the child was previously looked after. The UK Government should introduce a consistent financial allowance available to kinship carers across all local authorities in England to support kinship carers with the costs of bringing up their kinship children.

Further research on economic issues is needed to identify the greater needs for minoritised carers, given their urban housing contexts and the economic inequalities and disparities for many Black and Asian communities.

## Statutory right to paid kinship care leave

Kinship carers' roles should be recognised in the same way that new and adoptive parents are recognised, with a statutory right to paid leave on a par with adoption leave. Employers should be encouraged to support flexible working arrangements and their offers of support for kinship carer employees, including joining the Kinship Friendly Employers scheme.<sup>4</sup>

## Support for the kinship child

All Kinship children should have access to therapeutic support and diagnostic assessments, including any enhanced access to provision available to those currently or previously looked after given their similar experiences of separation, trauma, and abuse. Carers should have access to the child's history and be provided with guidance or support on managing life history work. Children should also be eligible to use advocacy services and be informed of that right.

## Support in schools

All children in kinship care should have support in school to address any additional needs. The virtual school should ensure that the needs of all kinship children under their care are identified and addressed. Virtual school heads should also address how they can best help children and kinship carers from minoritised communities.

Schools should ensure that staff are fully informed and that complete information is shared when the child moves schools. Schools' policies on bullying need to ensure that all staff are aware that children being brought up by kin may be targeted for taunting or bullying.

## Support for birth children

Birth children should have access to support if needed. This includes priority access to therapeutic assessment or support and support to adjust to a new 'sibling' joining the family. Kinship carers need to be offered appropriate support to help them care for their birth children while caring for a new child.

## Supporting family contact

All kinship carers need support to manage ongoing family contact, which is often a source of stress and upset. This is particularly true in Black and Asian families, where there is often an expectation that 'elders' are respected, which can make it difficult for younger carers to set boundaries. Legal orders must only be finalised once the court is confident that the children will be kept safe during contact, that the contact arrangements have been agreed, will be supported if necessary and how they will be reviewed.

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<sup>4</sup> <https://kinship.org.uk/get-involved/partner-with-kinship/become-a-kinship-friendly-employer/>

## Support packages

Kinship carers should receive support packages similar to those offered to foster carers or adoptive parents, but which recognise their own unique needs, strengths and experiences. Children's needs should be assessed, and ongoing support should be planned. All kinship families should be entitled to a written support plan.

## A point of contact

Kinship carers must have access to local authority support services via a named contact or named team. A point of contact should be able to answer specific kinship queries or address concerns. This should be extended to informal kinship carers, amongst whom minoritised communities are disproportionately represented.

## Providing respite care

Kinship carers should have the option for respite, either directly or indirectly (offering financial support to allow carers to secure paid childcare when needed).

## Support in finding a suitable home

All kinship carers should be in suitable standard housing with enough space for the whole family, considering the impact of ethnicity on a family's ability to agree to specific locations. Sufficient social housing for larger households should be made available. Kinship carers should be given prioritised allocation for social housing, and those with their own homes should have access to funds to extend or adapt their properties when needed. Local authorities must meet their legal obligation to ensure the safeguarding and welfare of children in their area, with specific requirements in policy development, data collection and direct consultations with communities to ensure they are addressing the needs of their Black and Asian minoritised children being raised by relatives in these communities.

## Social work education and training

Ensure kinship care is included in the curriculum of all professional and post-qualifying social work training programmes and includes the needs of minority ethnic carers.

## Social work practice

Children's Services should develop specialist kinship teams or have experienced kinship social workers embedded in looked-after teams. Kinship families would benefit from an annual 'check-in' to identify difficulties early and hear about the child's progress. Good practice needs to be developed in the transition for SEN young people who need ongoing support from adult services. Assessment for kinship carers should be culturally appropriate.



# CONCLUSION

This research study explored the experiences of Black and Asian kinship carers to address gaps in previous kinship care research. Black and Asian kinship carers were struggling financially, emotionally and practically with little or no support from statutory services. The difficulties in accessing support from services left them feeling abandoned. Whilst there were many similarities in their experiences and previous research findings, the impact of ethnicity cannot be overstated. The racialised nature of the carers' engagement with a system tells us that this is a systemic issue. The families' needs and poor experiences were intensified by the current lack of cultural competence shown by professionals who did not appreciate kinship carers' culture and heritage, assumptions made by services about the support carers had from their extended family network, the absence of support groups tailored for specific ethnic groups – particularly Asian kinship carers – and the impact of systemic racism on the carers and children they were raising.

## About Kinship

We are Kinship. The leading kinship care charity in England and Wales. We're here for kinship carers – friends or family who step up to raise a child when their parents aren't able to.

We are made by and for our community of kinship carers. For too long they have been isolated without the help they need.

Our purpose is to change lives, and change the system.

We support, advise and inform kinship carers. Connecting them so they feel empowered.

Because a child needs the love and warmth of a thriving family.

We develop research, campaigns and policy solutions. Creating positive change across society.

Because for kinship families, love alone is not enough.

And as we see momentum building for change, we keep working with our community and making impact.

Join us. Together, let's commit to change for kinship families.

**[www.kinship.org.uk](http://www.kinship.org.uk)**

## About the Rees Centre

Founded in 2012 the Rees Centre seeks to produce research and evidence that enables practitioners, policymakers and the research community to understand and improve children's social care and education.

Our mission as a research centre is to produce research and evidence which enables practitioners, policymakers and the research community to understand and improve children's social care and education.

Our vision is that children and young people supported by children's social care services have stronger and more stable relationships, better educational outcomes, and better lives. We conduct research to understand the nature and causes of outcomes and to test ideas about how things might improve, to inform policy and practice.

We begin from a commitment to the rights of children, particularly those with a need for care and protection, and to independent research of the highest quality that supports the full realisation of these rights. This requires us to understand the experiences of those interacting with children's social care and the ways the system functions. It requires us to co-design research with those most affected by it and to make our findings accessible to those seeking to act on them.