



# Submission to the Commission on Young Lives call for evidence

November 2021

## Summary

- According to the 2011 census, an estimated 180,040 children were living with a relative under kinship care in the UK. It is estimated that a further 20,000 children are in kinship care with family friends. There are more children in kinship care than any other placement option for children whose parents are unable to care for them, and if these children were not being looked after by their kinship carers most would be in local authority care.
- While children who live in kinship care generally have better outcomes than children in mainstream foster and residential care, their outcomes are still significantly worse than those in the general population. Children in kinship care are particularly vulnerable and often have high needs. Most of them have suffered trauma, usually due to abuse and neglect whilst in the care of their parents. They often experience emotional, social, and behavioural difficulties. This can have a significant impact on their development and life chances. Kinship care offers children love, stability and security within a family they can call their own, but too often kinship carers have to fight for any support – practical, financial or therapeutic to help them best support children who have experienced trauma.
- Kinship carers are also vulnerable and face many challenges in caring for children with additional and complex needs. Kinship carers are more likely to be older, in poorer health, insecurely housed, socially isolated, and living in poverty than any other parenting group.
- Therefore, children in kinship care need additional support to help them manage the impact of their traumatic experiences and they need carers who can focus on meeting these additional needs. Yet kinship carers and the children they care for rarely receive the support they require. There is a lack of parity in support available to kinship carers when compared with adopters or foster carers. Ultimately kinship care is excluded from the system for supporting children whose parents are unable to raise them.
- We believe fundamental changes are needed to develop a kinship care system which acknowledges and supports the distinct needs of kinship carers and the children they care

for. This support should be available to all kinship carers based on the needs of the child and not where they live or the type of care order the child has.

- If kinship carers and the children they care for continue to be failed in support, and gaps in services are not addressed, fewer children will be able to grow up in kinship care, forcing more into the care system where they will face poorer outcomes. It is also vital that support is improved so as to address the vulnerability of children in kinship care and improve their life chances

## **1. What leads to vulnerability and crisis and why aren't services as effective as young people and families need them to be?**

*Children in kinship care often have high level of needs*

Children in kinship care often have the same pre-placement experiences as children in foster care, and it is likely their health needs will be similar. Most children live with kinship carers because their parents could not care for them safely or posed a risk to them. This could be for a variety of reasons including domestic abuse; drug and alcohol misuse; abuse and neglect including physical, emotional, and sexual abuse; physical and mental health issues; the death of a parent; and the children being beyond the parents' control. This means the children are likely to be experiencing psychological, social, and emotional distress which in turn affects their behaviour making them more challenging to parent.

Findings from [Kinship's 2021 Annual Survey](#) on the needs of children in kinship care show:

- Prior to coming into kinship care, drug and alcohol misuse occurred in 54% of families, neglect in 49%, and domestic abuse in 34%.
- 62% of kinship carers believe that the children in their care have long-term physical and mental health needs.
- 36% of carers reported that the child in their care has diagnosed special educational needs – three times the national average of 12%.
- 40% of kinship carers reported their children displayed risk-taking behaviour including self-harming and drug and alcohol misuse.
- Child-on-carer violence continues to be a significant issue, which 26% of carers reported experiencing over the past year.

A significant number of children in kinship care are growing up in poverty and deprivation. Analysis of the 2011 census found that 40% of children in kinship care live in the poorest 20% of households, and 76% of children in kinship care live in a deprived household (Wijedasa 2015). There are significant risks for families living in poverty who are more likely to need children's services involvement and they have poorer health and educational outcomes than people who have financial security.

It is important to note that despite the vulnerabilities of kinship carers and their children, the outcomes for children in kinship care are generally better than those for other children with similar experiences. For example, a recent study found that children in kinship care were more likely to achieve educational qualifications, be in employment, be socially mobile, live longer, and have better health than children in foster care (Sacker et al 2021). However, outcomes for children in kinship care are not as good as for children living with parents.

### *The needs of kinship carers*

Kinship carers often face significant challenges due to their children's experiences or because of their own vulnerabilities, and most have very limited access to advice or support. Kinship carers are primarily older than other groups raising children with 65% ranging in age from 55 to 85. 39% of carers reported they had additional needs that they felt required more support ([Kinship's 2021 Annual Survey](#)). When compared to other groups raising children, kinship carers are also more likely to be in poorer health, insecurely housed, and live in poverty and social isolation.

Most kinship carers find that taking on the role – often with very little notice or preparation - means they are plunged into poverty. Many kinship carers face financial hardship due to the necessity of giving up work or living off a pension, while also having to take on full financial responsibility for the child. [Kinship's June 2021 survey](#) on financial allowances showed that 82% of kinship carers worried about money in the past year. This has a negative impact on the children in their care's wellbeing and life chances, and can result in the family needing higher levels of support in the future.

Covid-19 has put kinship families under additional strain. From our [2021 Annual Survey](#), 63% of kinship carers stated that the lockdown restrictions had a negative impact on their physical and mental wellbeing. 64% percent of carers reported that the Covid-19 restrictions had a negative impact on their children's physical and mental wellbeing.

## **2. How vulnerable families and communities living in high-risk situations can be supported to strengthen their home and support environment, providing strong support for parents who are struggling and building family resilience that gives teenagers more stability, guidance, and protection.**

### *Lack of support from services for children in kinship care and their carers*

Kinship care is a vital part of the care system, providing stability and permanence to a significant number of children who would otherwise be in care, but have the opportunity to grow up within their wider family. Yet the current support services available for kinship carers are totally inadequate. Support is complicated, sporadic, and often dependant on where families live or the legal status of the children rather than on their needs. This uncertainty and lack of fairness leaves some kinship carers at breaking point putting a greater number of children at risk of coming into the care system. [Kinship's 2021 Annual Survey](#) found that 70% of kinship carers felt they did not receive the support they needed from their local authority. Managing contact between children in kinship care and their parents is often identified as an area where kinship carers need support. Despite this, only 11% of carers were receiving support from their local authorities to help with contact and a further 23% said they needed support but did not receive it.

*“We just wanted to be a family and the system made this so difficult the placement broke down...it is absolutely heart-breaking because with the correct support system in place I think we could have had a better experience of being a kinship carer as we want to care for our family because we love them....but it is virtually impossible to have that support.”* (Aunt who was caring for one child who was unable to live with their parents due to parental disability or illness).

*“There's a real lack of awareness of what kinship care is. You have to explain yourself over and over and relive painful experiences.”* (Lorraine, a kinship carer in London).

### *What support kinship carers need*

It is vital that services recognise the role of kinship care in enabling children to grow up within a wider family unit, and that all efforts to provide early support to families to strengthen the home environment and relationships also include these wider family units which provide stable and loving homes to children who would otherwise be in care.

In addition to the need for financial support as outlined above, kinship carers need practical support which is tailored to their specific needs and offered by specialist kinship care professionals. This should include advice and information, alongside comprehensive support, such as peer to peer support, whole family therapeutic support, and training.

Many kinship carers do not need a children's social care intervention but need early help or preventative services. The Government's commitment to family hubs represents a pivotal opportunity to enable easier access to services for kinship carers in a universal service setting in every local authority. An early help preventative service for kinship families in family hubs is likely to increase engagement in support and reduce the need for future crisis interventions or family breakdown.

*“I believe that kinship carers are not really informed on the impact to their lives when taking on a child. Financially, socially, emotionally, mentally - no information, no training and having to fight for any support.”* (Great aunt caring for one child who was unable to live with their parents due to parental drug or alcohol misuse).

*“We were not told about possible behaviours of kinship children who are abandoned by their parents. We have had violence to outburst/smashing up of property along with emotional instability and mental health issues. All of which should be addressed and advised on before placement along with a package of support for those children. Instead of ‘get on with it’ attitude that they currently have.”* (Step-grandmother caring for two children who were unable to live with their parents due to parental abandonment).

### *Examples of Kinship services providing whole family and peer support*

#### Kinship Connected in Kirklees

The Kinship Connected service provides intensive one-to-one family support to kinship carers and two peer support groups for carers every month. The service is delivered in 25 local authorities to provide high quality, tailored and value for money support, helping kinship carers develop long-term supportive networks which result in a more stable environment in which the

children in their care can thrive. Prior to covid, we also ran two groups a month for young people. This included those in kinship care, and any children within that kinship household, and involved structured activities or free play. A group for older young people was also started pre-covid which was peer-led. They were supported by a carer to arrange and undertake activities such as going bowling or to the cinema. The young people enjoyed attending these sessions and felt less isolated as children growing up in kinship care. It also gave the opportunity for the carers' birth children to meet others who were now living with kin children.

#### Kinship Active in Teesside

This programme, funded by Sport England, provides intergenerational physical activities for kinship families in Redcar & Cleveland and Middlesbrough areas of the North East. Project workers provide support to enable kinship families to become more active and lead healthier lifestyles through a range of interventions including weekly "walk and natter" support groups, family swim sessions, and family activities in school holidays. Only 13% of participants were active five or more times a month prior to the start of the programme which increased to 54% during and after the project.

### **3. What support young people need to ensure good mental health and wellbeing and the services and support that are needed to deliver it.**

As outlined above, children in kinship care face significant emotional, social and behavioural challenges, similar to children in foster care. Therefore, it is extremely concerning that 30% of carers believe their children needed specialist support that they were not receiving. While 62% carers believe their children have additional physical or mental health needs, just 33% have received a formal diagnosis ([Kinship's 2021 Annual Survey](#)). This suggests that many carers believe they are caring for children with undiagnosed health needs, which is likely to add to the carers' stress as their children are not receiving the help they need.

One possible contributing factor is that, unlike children in foster care, children in kinship care do not undergo a formal health assessment before or while living with carers. Children in foster care receive these assessments as it is recognised that their past experiences mean they are more likely to have additional health needs.

In addition, children in kinship care do not have the same priority access to help as children in foster care or adoption. The Adoption Support Fund (ASF) does offer some children access to therapeutic support, however there is high access criteria. This restricts access to the fund to children who are subject to Special Guardianship Orders (SGO) and have previously been in local authority care, rather than being linked to the therapeutic needs of the children. All other children in kinship care (for example those with a Child Arrangement Order or in informal kinship care) typically have to wait for therapeutic help, leaving families struggling to cope.

*"Support was needed as soon as (the children) were removed from parents. We fought hard for four years, by which time, many behavioural issues had developed". (Grandmother caring for three children for up to five years who were unable to live with their parents due to parental negligence).*

The broadening of scope of the ASF during the pandemic to include advice, information and peer support for Special Guardians was a very positive development which enabled a greater number of families raising children under a SGO to be supported. The scheme was also positive in recognising that support needs to be directed towards adoptive parents and Special Guardians rather than always direct to the child and that more preventative forms of support for families are of significant value.

In order to better support the mental health of children in kinship care we are calling for increased access to therapeutic support via reform of the Adoption Support Fund based on the needs of children rather than legal status. We also want all children in kinship care to have automatic access to health assessments and priority access to CAMHS on a par with children in the care system.

*“All the support that would come with fostering, as we do the same job, with more to put up with, we need therapeutic help, help with fighting for a diagnosis” (Grandmother caring for three children who were unable to live with their parents due to parental drug or alcohol misuse).*

#### **4. How schools and colleges can be inclusive, can identify and can respond positively and proactively to young people who are at risk, and how they can support these children to progress and achieve in school.**

In order to improve the life chances and educational outcomes of vulnerable children it must be recognised that a significant group of vulnerable children are in kinship care. Some schools appear to be developing good support systems for kinship families, with many providing additional support to children as required. 52% of carers said that their children receive additional support at school.

However, 36% of children in kinship care have special educational needs – which is three times the national average of 12%. A significant minority (18%) of carers felt their children had not received the support they needed ([Kinship’s 2021 Annual Survey](#)).

Kinship is calling for specialist education support for all children in kinship care, regardless of their legal status, which includes priority access to school admissions, automatic entitlement for pupil premium plus, and extending the remit of virtual schools.

Recommendations for a national strategy:

- Health and educational support for all children in kinship care regardless of the legal status of their kinship carer, on par with children in the care system.
- Financial support for all kinship carers - equivalent to the minimum fostering allowance, alongside enabling access to free, independent legal advice in order for kinship carers to make informed decisions about the care arrangements they make for the child as soon as possible.
- Practical support for all kinship carers within every local authority - including adequate advice and information services on options available and supporting access to these services, alongside comprehensive support tailored to the specific needs of every kinship family as early as possible. This support needs to be offered by specialist kinship care professionals located within family hubs to provide training, peer support and therapeutic support.

Kinship would be more than happy to provide further oral evidence or case studies to the Commission, as well as facilitate a visit to one of our services.

## **About Kinship**

Kinship is the leading kinship care charity in England and Wales. We offer kinship carers financial, legal, practical, and emotional support and understanding from the moment they need it, for as long as they need it.

Our expert advice, information, and guidance help with complicated and stressful decisions that so many kinship families must make. We are always there to support them through difficult times and celebrate the good.

Kinship carers are strong and determined. Together, they are powerful. We help them build communities of support and action by connecting families locally and across England and Wales.

We are at the heart of kinship networks, partnering with and influencing service providers, local and national government, and other organisations.

We communicate directly with 8,000 kinship carers and 1,000 kinship care professionals. We have partnerships with 77 local authority kinship teams. In 2020-21, our advice service advised 3,500 kinship carers.

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