

Kinship care

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"Kinship care" refers to the placement of children with relatives (kin), with persons without a blood relation but who have a relationship with the child or family, or with persons from the child's or family's community (kith). Kinship care is also referred to as "relative care", "kith and kin care" and "family and friends as carers" (Broad, 2001; Cuddeback, 2004; Mason et al., 2002). In the context of kinship care, the term "related child" is used to define a child who has a prior relationship with a carer, although this may not necessarily be a blood relation. Kinship care is the fastest growing care type in Australia (Australian Institute of Health and Welfare, 2007). In particular, kinship care has formally been recognised as the preferred placement option for Aboriginal and Torres Strait Islander children through the Aboriginal Child Placement Principle. Despite the prioritisation of kinship care in policy, kinship care has received limited attention in Australian research. Perhaps most noteworthy is the fact that, despite the explicit preference in legislation for Indigenous children to be placed in kinship care, there has been no Australian research investigating the outcomes for Indigenous children in kinship care, compared to Indigenous children in residential care or non-relative foster care (Cashmore & Ainsworth, 2004), and only one published paper that examines broadly the strengths and weaknesses of kinship care in Indigenous communities (McHugh, 2003), and this was not primary research.

Aim

In this paper, we aim to:

- summarise what we know from Australian research about kinship care for children and young people;
- assess the quality of the evidence base; and
- identify future research needs.

For each of the studies identified, a review was conducted describing the study's aim, methodology and key findings, and identifying any particular strengths or limitations that would affect whether the study findings could be generalised to the wider context. In this paper, the findings from this review are summarised to provide an overall picture of the Australian evidence base on kinship care. For a detailed description of each individual study review, see the tables in the Appendix.

What research was reviewed?

Four Australian research studies with findings relevant to kinship care that were completed between 1994 and 2006, and were publicly available, were reviewed. (For more information on how Australian research was identified, see Bromfield & Osborn, 2007. For papers on other topic areas, go to www.aifs.gov.au/nch/pubs/brief/menu.html#research.)

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The studies

The results from four research studies in Australia had findings that contributed to the Australian evidence base on kinship care. They were:

1. Baldock and Petit (2006), *Grandparents Raising Grandchildren Because of Alcohol and Other Drugs* (see Appendix, page 1).
2. Council on the Ageing National Seniors (2003), *Grandparents Raising Grandchildren* (see Appendix, page 2).
3. Higgins, Bromfield, and Richardson (2005), *Enhancing Out-of-Home Care for Aboriginal and Torres Strait Islander Young People* (see Appendix, page 3).
4. Mason, Falloon, Gibbons, Spence, and Scott (2002), *Understanding Kinship Care* (see Appendix, page 4).

How reliable is the evidence base regarding kinship care?

The study by Mason and colleagues (2002) was the initial foray by Australian researchers into the issue of kinship care. As such, it was an excellent exploratory study identifying broad trends in the use of kinship care, and highlighted issues of inequity, and problems that arose when attempting to apply the existing policy and practice framework for non-relative foster carers to kinship carers. However, it is not possible to make generalisations about the reasons for the increase in kinship care and the experiences of children in kinship care and their carers on the basis of a single study. Further, as it was a small-sample qualitative study, with data collected largely from one state, the results can not be generalised to other samples. Further research is needed to replicate and expand on the findings reported by Mason and colleagues on kinship care.

The report conducted by the Council on the Ageing National Seniors (2003) provided both state/territory and Commonwealth governments with a comprehensive list of recommendations to improve the current situation throughout Australia for grandparents raising their grandchildren. Baldock and Petit (2006) provided even greater insight into this issue and provided further recommendations for grandparents raising grandchildren specifically due to parental substance abuse. Again, these studies were qualitative, limiting how much they could be generalised. Further, the methodology for both of these studies was not adequately described to enable the quality of the research to be assessed. It is also worth noting that both the Council on the Ageing and the Canberra Mothercraft Society are special interest groups and, as such, are likely to have positions in relation to the support of grandparents caring for their grandchildren. As the methodologies for the Council on the Ageing National Seniors (2003) and the Baldock and Petit (2006) studies were not adequately described, it is not possible to determine whether any philosophical position held by the organisation influenced the research findings.

The study by Higgins et al. (2005) was a qualitative national exploratory study investigating the recruitment, assessment, training, support and retention of Indigenous carers. The methodology for this study was sound; however, it is not possible to generalise findings from a single exploratory study to the wider population. In addition, as an examination of issues relating to kinship care for Indigenous Australians was not one of the primary aims of this study, the findings in relation to kinship care are peripheral to the main study findings and require further exploration in future research.

What do we know about kinship care?

Kinship care trends in Australia

Mason, Falloon, Gibbons, Spence, and Scott (2002) focused on the extent of formal kinship care in Australia, reasons for the increase in kinship care, legislation and departmental guidelines relevant to kinship care, and the experience of children in kinship care and their carers. They showed that kinship care was the fastest growing form of out-of-home care in Australia. Kinship care was increasing as a consequence of changes in the policy environment (for example, the legislative requirement for the least intrusive form of intervention), a decrease in the number of non-relative foster carers and a simultaneous increase in the number of children requiring placement, preferences of children and families for kinship care, and to some extent the decreased financial and human resources expended to support kinship care placements. The authors showed that there was a lack of procedural guidelines for recruiting, assessing and supporting kinship placements and, as a consequence, kinship carers received less monitoring, training and support, and inappropriate assessments.

Kinship care is the fastest growing form of out-of-home care in Australia.

Grandparents caring for grandchildren

The Council on the Ageing (COTA) National Seniors (2003) conducted a report into the issue of grandparents raising grandchildren. The aim of the report was to gain information across five states from interviews with grandparents who were raising their grandchildren. The grandparents were asked about their existing support mechanisms, additional supports they would like, financial and legal issues they face and concerns they may hold regarding the wellbeing of their grandchildren. The study had a very large sample of 499 grandparents, who were raising 548 grandchildren. Overall, the study found that grandparents were disappointed and felt let down by both state/territory and Commonwealth governments, especially in relation to the financial and legal issues that they face and the lack of recognition and support that they receive.

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The common themes that emerged from workshops across the five states included the following:

- Governments need to acknowledge and recognise grandparents raising children as being a group that requires support.
- Grandparents need parity with foster carers in relation to payments and support services.
- Information and access to benefits and support services need to be promoted.
- Grandparents caring for their grandchildren need access to legal aid and the provision of respite care (COTA National Seniors, 2003).

The report also provided an extensive list of recommendations to both state and Commonwealth governments and was an exemplary report on this important issue (COTA National Seniors, 2003).

Kinship care placements require the same entitlements to monitoring and support as non-relative foster care placements.

Baldock and Petit (2006) of the Canberra Mothercraft Society explored the issue of grandparents raising grandchildren specifically as a consequence of parental substance abuse. This was an action research project, the overall aim of which was to increase the visibility of grandparents who raise their grandchildren because of parental substance abuse. The report concluded that the project was successful in achieving its aims to:

strengthen family resilience through appropriate referral and service enhancement to meet the specific needs of identified group; identify the needs and aspirations of grandparents and grandchildren in relation to family issues and other drugs; and enhance current services for grandparents by raising awareness, increasing understanding and providing information. (Baldock & Petit, 2006, p. 1)

The report provides a range of recommendations that arose out of the research. These recommendations included:

- listening to the voices of grandparents raising grandchildren affected by parental substance abuse;
- establish a cross-sectoral reference group to inform future policy and service provision for these families;
- provide coordinated early intervention and prevention education counselling programs for grandparent families at risk of experiencing the impact of alcohol and drugs;
- ameliorate the direct financial burden for grandparents through greater governmental financial assistance;
- conduct further research into the needs of grandparent families, especially Indigenous grandparent families;
- coordinate services that include targeted prevention, early intervention and recreation opportunities for children;
- strengthen family resilience through mediation and support services, and parenting and life skills education programs; and
- recognise and build on the strengths of grandparents raising grandchildren (Baldock & Petit, 2006).

Grandparents raising grandchildren due to parental substance abuse need greater social, financial and service supports.

Kinship care and Aboriginal and Torres Strait Islander children

There has been no Australian research to investigate the outcomes for Indigenous children in kinship care compared to children in other forms of out-of-home care. This is a major limitation, as there is no evidence base for a key tenet of policy and practice in relation to Australian children—in particular, Australian Indigenous children. The Aboriginal Child Placement Principle, which preferences kinship care over non-relative foster care, has been formalised in policy and legislation in all Australian states and territories. However, there was only one research study identified with findings relevant to kinship care that related specifically to Aboriginal and Torres Strait Islanders. Higgins, Bromfield, and Richardson (2005) reported that differentiating kinship and foster care was not useful for Indigenous Australians. In this study, it was found that most Indigenous carers were kith or kin to children. In addition, many Aboriginal carers were caring for multiple children and had dual roles of kinship and foster carers. In some cases, this led to confusion, as carers received support from one organisation in their role as kinship carer and from another in their role as foster carer. An examination of issues relating to kinship care for Indigenous Australians was not one of the primary aims of this study, thus the findings in relation to kinship care are peripheral to the main study findings. Nevertheless, the finding is of import to Australian policy-makers who are grappling with how best to support Indigenous carers in a culturally appropriate way.

Differentiating kinship and foster care is not useful for Indigenous Australians.

What future research is needed on kinship care?

There has been no Australian research to investigate the outcomes for children in kinship care compared to children in other forms of out-of-home care. This is a major limitation, as there is

no evidence base for a key tenet of policy and practice in relation to Australian children—in particular, Australian Indigenous children. There is a desperate need for further research to be conducted into the outcomes of children and young people in care and also in comparison to children in other forms of care (such as non-relative foster care, group care, residential care).

It is also important that future research includes the views, experiences and recommendations of the children and young people in kinship care and those family members that are providing that care. Evaluation is urgently needed to assess the applicability of the existing policy framework for recruiting, assessing, training and supporting kinship carers and to provide evidence-informed strategies to better meet the needs of kinship carers.

Given the formal recognition of the Aboriginal Child Placement Principle, which preferences kinship care for Indigenous children, there is an urgent need for research that examines Aboriginal and Torres Strait Islander children's and carers' experiences of kinship care.

What do we know about kinship care in Australia?

A summary

Australian research on kinship care comprised four studies. In brief, the limited findings demonstrated that kinship care is the fastest growing form of out-of-home care in Australia and that there is an urgent need for much more research into issues regarding kinship care, especially as they relate to Indigenous Australians.

Overall, the research demonstrated that:

- Kinship care is the fastest growing form of out-of-home care in Australia.
- Grandparents are disappointed and feel let down by both state and Commonwealth governments, especially in relation to the financial and legal issues that they face and the lack of recognition and support that they receive.
- Kinship care placements require the same entitlements to monitoring and support as non-relative foster care placements.
- Grandparents raising grandchildren due to parental substance abuse need greater social, financial and service supports.
- Differentiating kinship and foster care is not useful for Indigenous Australians.

Australian research regarding kinship care is very limited. Two large exploratory studies have been conducted, which were methodologically sound, but identified issues that need further research rather than providing an evidence base. In addition, two studies investigating specific issues for grandparents have been completed, both of which provided insufficient descriptions of the methodologies to judge the quality of the research. There has been no Australian research to investigate the outcomes for children in kinship care compared to children in other forms of out-of-home care. This is a major limitation, as there is no evidence base for a key tenet of policy and practice in relation to Australian children—in particular, Australian Indigenous children. Evaluation is urgently needed to assess the applicability of the existing policy framework for recruiting, assessing, training and supporting kinship carers and to provide evidence-informed strategies to better meet the needs of kinship carers.

Conclusion

Australian research was consistent with international research findings, which showed kinship foster carers are recruited differently from non-relative foster carers, but assessment procedures have not been modified to account for the different circumstances. Kinship care placements receive less and, in some instances, no monitoring, training and support. This is problematic, as kinship carers tend to have higher rates of poverty and disadvantage and tend to require more support than non-relative foster carers. There is limited international research examining the

outcomes for children in kinship care, and the findings are somewhat inconsistent. From the international evidence available, it appears that children in kinship care have worse outcomes than children who have never lived in care, but do at least as well, if not better, than children in non-relative foster care. Australian research is urgently needed to examine children's outcomes in kinship care. Finally, one of the primary strengths of kinship care is that children in kinship care (both Indigenous and non-Indigenous) can benefit from maintaining family, cultural and community connections.

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