

Kinship Care - Intergenerational Opportunities and Constraints

What are the Ethical, Theoretical and Practice Implications for Social Work?

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Overview

The topic draws on examples and data from European countries, the US, and Ireland—with a special focus on the ethical, practice and theoretical implications for social work in both formal and informal kinship care arrangements for children.

Key Topics:

- Definition & Context of Kinship Care
- Global Data & Trends (Europe, USA, Ireland)
- Intergenerational Opportunities & Constraints
- Ethical & Theoretical Implications for Social Work
 - Two cases provided for illustrative purposes in PPT but may not have time for illumination given short time frame.
- Policy Recommendations & Future Directions

What is Kinship Care?

- Care provided by relatives (both formal/legal and informal arrangements)
- Typically used when children cannot remain with their parents

Key Components:

Family Preservation: Maintains familial, cultural, psychological and social connections

Types: (O'Brien 2015)

- (a) Formal (state-supported, statutory)
- (b) Informal (family-arranged, less regulated)

Formal Kinship Care Provisions

Embedded as a formal care option in child welfare systems from 1990's – shift in practice thinking re family and strengths / shortage of alternative care

- **Characteristics:**

- Governed by statutory frameworks and formal assessments
- Eligibility criteria, training, support and supervision oversight

- **Advantages:**

- Children stay within their own family network; Access to state funding, structured support services, and legal protections

- **Constraints:**

- Bureaucratic delays and possible rigidity in matching support to family needs; Failure to sufficiently adapt standard models based on non relative foster care (O'Brien 2014c)
- Ethical issues: potential infringement on family & cultural autonomy, over-regulation vs. under-support (2014a);

Informal Kinship Care Provisions

Age old practice -

Definition & Characteristics:

- Arrangements agreed upon by family members without full statutory oversight
- Reliance on family consensus and community support

Advantages:

- Tailored, culturally relevant care with minimal state involvement / interference

Challenges:

- Limited access to formal support, financial aid, and legal status
- Ethical challenges: fairness, potential neglect of caregivers' rights and needs, gaps in services for children

Practice :

What role has social workers had to date in setting up these placements and the role in advocating for for policy reforms that support informal kinship carers

Informal Kinship Care in Ireland	Children in Care/ Formal Kinship Care in Ireland
It is estimated that 10,000-12,000 children are living in informal kinship care in Ireland.	At the end of December 2024, Tusla recorded that 5,823 children (0-17 years) are in care.
As informal kinship care arrangements are unrecorded, an accurate picture is unavailable.	Tusla (2024) recorded that 87.2% (5,077) of all children in care are in foster care (3,581 general foster care, and 1,496 relative foster care) 29.5% Kinship Care 70.5% Foster care

It is estimated that 1 in 10 children globally are living in kinship care (Family for every child, 2024).

To date, no clear or consistent system is in place to collect data on informal kinship care in Ireland. This lack of data collection, significantly impacts on the visibility of kinship families and the limits the advancement of policy and practice to best meet the needs of kinship carers and their kinship children.

Gráinne Powell PhD candidate 2025 – Written communication

Key Agencies Advocating for Kinship Carers

Kinship Care Ireland (the national advocacy group supporting and promoting increased visibility/supports for informal kinship carers)

Website: www.kinshipcare.ie

IFCA - Promoting and supporting foster care so that every child in care can grow up in a safe and caring family

Website : www.ifca.ie

A Profile of Kinship Carers – (Powell 2024)

- Kinship carers find themselves parenting in loco parentis, with little time to prepare for the changes to their circumstances.
- Kinship Carers are largely, but not exclusively, comprised of older families, experiencing poverty, headed by single women, (many grandparents) (Zuchowski et al. 2019; Lee et al. 2016; Gleeson et al. 2016), experiencing a range of health issues (Sharda et al. 2019; Lee et al. 2016).
- Central question - What is needed for parenting in this unique space?

Global Perspectives & Data

European Context:

- Countries like Italy, Spain, and Scandinavian nations emphasize cultural continuity and family cohesion in kinship care. – **Universal services orientated – Nordic countries**

USA & UK Overview:

- US: Statutory kinship care arrangements offer formal support, with nearly 30–40% of children in out-of-home care placed with relatives – Pressure to adopt once placement stabilized.
- Ireland: Mixed model – similar to UK – A mixed model with both statutory (foster care with kin) and voluntary arrangements (informal kin care).
- Ireland ahead on policy and practice developments in 1990's /early 2000's – higher rate

Common Themes across Nations

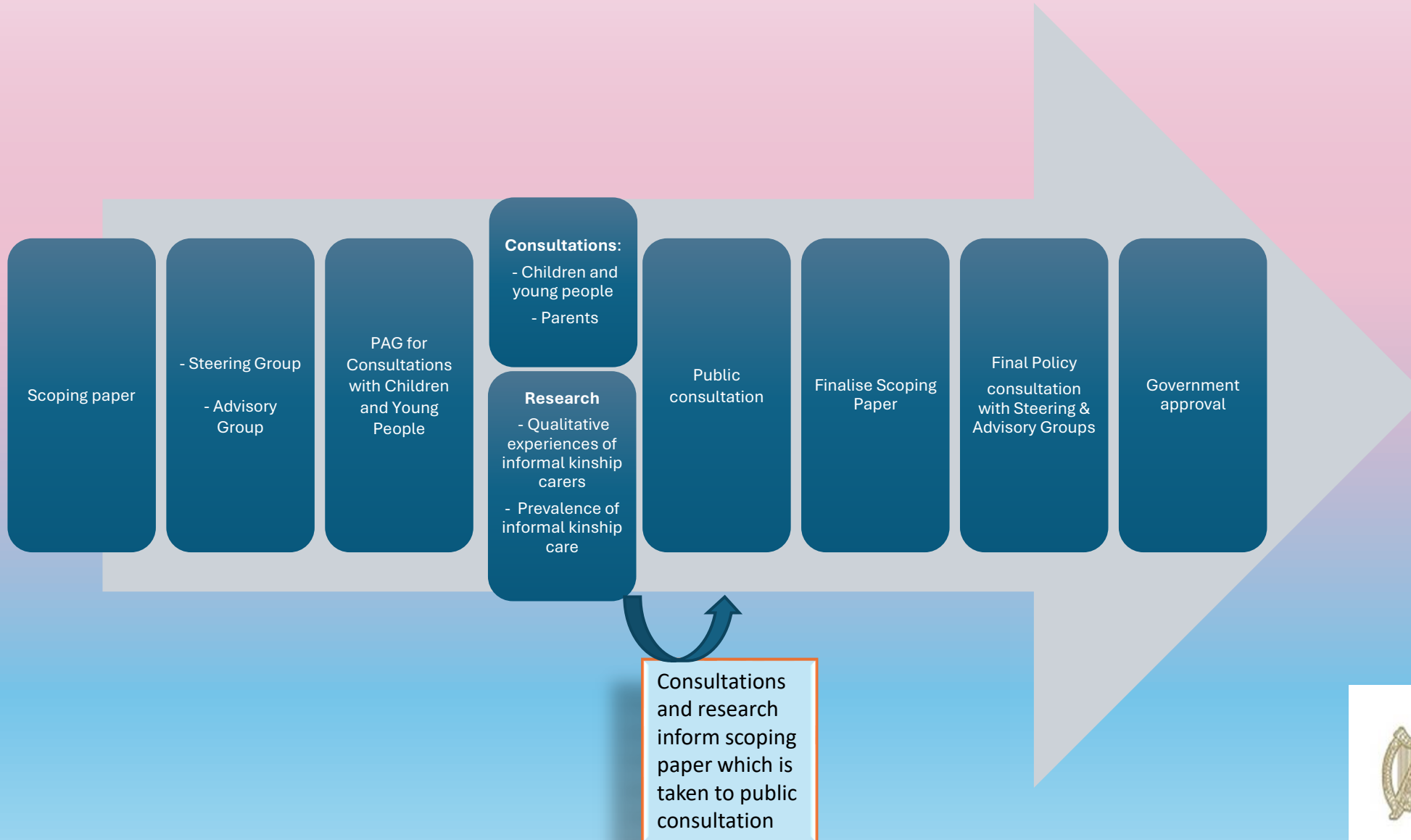
- Preservation of familial bonds, but challenges in funding, oversight, and training exist across regions.
- Emerging formal frameworks; reliance on informal kinship networks
- Ongoing efforts to align policy with international best practices

European Developments

The European Child Guarantee places the rights and needs of children at the heart of European policy (Sacur and Diogo, 2021) and highlights family-based care (foster care and kinship carer) as the most suitable forms of alternative care for vulnerable children (Frazer 2020).

EU Convention on the Rights of the Child: March 2023, recommendation for Ireland to develop a policy on the rights of children in informal kinship care. (Powell 2023)

Development of Irish Policy on Informal Kinship Care - Underway



An Roinn Leanaí, Comhionannais,
Míchumais, Lánpháirtíochta agus Óige
Department of Children, Equality,
Disability, Integration and Youth

Theoretical Frameworks for Social Work in Kinship Care

(a) Systems Theory:

Recognizes the multiple contexts affecting kinship care (family, community, policy) and understanding of network of relationships – State /Family relationships – Boundary that divides

Family life Cycle – Developmental tasks and transitions

(b) Attachment Theory:

Underlines the importance of secure familial bonds for child development -

(c) Resilience Theory:

Focuses on building strengths within adverse circumstances

(d) Self Reflexivity Theory

What and how am I seeing, listening, feeling and responding and how is that impacting on interventions – effects of own practice

Application:

- Social workers can use these theories to guide assessments, interventions and support strategies
- Emphasis on culturally sensitive, strength-based practices that acknowledge intergenerational dynamics

WHAT ARE THE GAPS IN THEORY – WHAT ARE OUR THEORIES BLINDING US TO?

Recent Research Themes

Research Area	Focus	Key Insights
Comparative Outcomes	Kinship vs. traditional foster care	Kinship care often offers greater stability; resource challenges persist.
Intergenerational Dynamics	Caregiver health and cultural transmission	Older caregivers face unique stressors; cultural ties bolster resilience.
Formal vs. Informal Models	Legal status, funding, and oversight	Formal systems provide structure but may disrupt familial bonds.
Trauma-Informed & Culturally Sensitive	Embedding trauma care into practice	Tailored interventions yield better child and caregiver outcomes.
Technological Innovations	Digital tools and predictive analytics	Promising in overcoming logistical challenges; enhancing support.
Policy Development & International Comparison	Cross-national policy impacts	Integrated support models lead to improved long-term wellbeing.

Research Underway in Ireland

Grainne Powell PhD Candidate : What facilitates or impedes effective parenting for informal and formal Kinship Carers?

Dept DOCEDIY – Informal Kinship Care Experiences – including Relatives, Children and Young People, Birth parents and Practitioners – Summer 2025

What are best practices for social work in kinship care?

Comprehensive Assessment

Culturally Sensitive &
Trauma-Informed Care

Empowerment & Collaborative
Decision Making

Facilitating Access to
Resources

Collaborative & Multi-
Disciplinary Work

Evidence-Based Practice &
Theoretical Frameworks

What social workers are saying

Bespoke and specialised to meet needs (not squeezed to fit a system)

Flexible, creative, imaginative, multi disciplinary teams with good community links, local response, retention of staff, good relationships.

Less of a gap between the formal and informal carers could lessen the amount of children coming into the care system.

So how can we as social workers advocate for the change? How to ensure the inequalities between formal and informal kinship care are addressed?

O'Brien 199, 2014, Powell 2023

Moving Forward:

How can we best address social work practices in which there is so much inequality of treatment between formal and informal kinship care?

In what ways can cross-national research further illuminate best practice models that can be adapted locally, particularly in contexts like Ireland?

What models of care are most effective for the diverse range of families in kinship care, and how can these be standardized across different regions?

How can longitudinal studies help in understanding the evolving needs of children in formal and informal kinship care as they transition into adulthood?

How can we better integrate digital tools into child welfare systems – to facilitate more efficient, data-driven support?

As Practitioners – (O'Brien 2024c)

What must we do? – Law; What should we do? – Policy; What do we want to do? – values;

What can we do? - Resources

Assoc Prof. Valerie O'Brien, IASW World Social Work Day,
2025

Case study examples

Case studies illustrating kinship care practices.

Examples—drawn from formal and informal kinship placements showcase both intergenerational opportunities and constraints.

Case Study 1: The Ryan Family (formal kinship / relative)

Background & Context

- Situation:** When the parents of two children encountered severe challenges related to addiction /child protection issues, the children were placed in kinship care with their maternal grandmother
- Care Arrangement:** Ms Ryan entered a formal kinship care placement supported by the state's child welfare services. This arrangement provided her with some access to financial resources, training programs, and ongoing supervision. **€425 per week for each foster child.** Children in Voluntary care initially – later secured with care order -

Interventions & Support

Support Services:

- **Formal Assessments & Training:** Ryan's received foster care training focused on trauma-informed practices and age-appropriate parenting strategies.
- **Financial Support :** Government subsidies – Foster care allowance helped cover basic living expenses and healthcare needs.
- **Case Management:** Two social workers supported and supervised both the children's development and the carers well-being and parenting.

Outcomes & Lessons Learned

•Positive Outcomes:

- **Emotional Stability:** Children benefitted from familiar context, traditions, and familial bonds which provided stability during a difficult period.
- **Generativity:** Granny reported a renewed sense of purpose and pride in passing on her values and sense of caring when it was needed

Challenges:

- **Systemic Constraints:** Navigating bureaucracy occasionally delayed tailor-made support—highlighting the ethical tension between state oversight and family autonomy.
- **Caregiver Limitations:** Ms Ryan's own health constraints and financial stresses underscored the need for enhanced ongoing support.

Case Study 2: The Murphy Family (Informal Kinship)

Background & Context

- **Situation:** Arising from mental health challenges, two children were provided with major supports from grandparents - arranged privately. Arising from deterioration in MH and growing use of drugs- Tusla – through family support encouraged a more stable care placement -
- **Care Arrangement:** The kinship care arrangement was eventually formalized through a guardianship allowance of 227 Euro – but this took almost two years to achieve.

Interventions & Support

- **Integrated System Response:** No proactive coordinated medical, educational, and social interventions. The grandparents received no home visits or access to training
- **Resource Accessibility:** No financial aid for period up to Guardianship

Outcomes & Lessons Learned

- **Positive Outcomes:**

- **Robust Support Network:** The formal integration of kinship care with state support mitigated many of the resource constraints seen in less formal systems, leading to better overall outcomes for both children and caregivers.
- **Intergenerational Resilience:** The system empowered both the older and younger generations; grandparents contributed wisdom and emotional stability, though limited state support

Challenges:

- **Bureaucratic Complexity:** Navigating bureaucratic procedures sometimes delays support or leads to mismatches between the family's needs and available services.
- **Ethical Nuances:** Balancing the autonomy of the family with the necessity of interventions requires constant ethical vigilance by practitioners. What of the differential in supports emerge?

Comparative Reflections of Cases –

Aspect	The Ryan Family	The Murphy Family ()
Model Type	Formal Kinship Care	Informal - A family / community support orientation -
Primary Support	Government subsidies, case management	State-provided services
Key Benefits	Strong familial bonds; emotional stability	Intergenerational resilience – comes at a cost – cost of privacy
Primary Challenges	Bureaucratic delays; carer health and financial stress and pain of relationship breakdown with parents	Bureaucratic complexity; need for continuous ethical balancing – as systems move from universal to selective services – where is the practitioner?
Ethical Focus	Balancing child protection with caregiver autonomy	What happens if no one is seeing demands on carers and child focus?

Moving Forward: the last thoughts

How can we best address social work practices in which there is so much inequality of treatment between formal and informal kinship care?

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References

- O'Brien, V. (2014a) 'Responding To The Call: A Conceptual Model for Kinship Care Assessment', *Child and Family Social Work*, 19 (3), 355–66.
- O'Brien, V; (2014b) Navigating Kinship Networks with the Fifth Province: *Human Systems* 25, 58-76.
- O'Brien, V; (2014c) Navigating Child Welfare and Protection in Ireland with the Help of the Fifth Province, in *Feedback, Journal of Family Therapy: Special Issue on Supervision*, pp 91-117.
- O'Brien, V; (2015) Formal and Informal Kinship Care: Complexities, Dilemmas and a Way Forward? In *Ensuring the rights of children and Family Centred Services*. (ed) Douglas, D; Kennedy, J.A. IFCO: Sydney. 174-191.
- Powell, Grainne (2023) In Loco Parentis. An Exploration of The Experiences and Needs Of Kinship Carers In Formal And Informal Kinship Care Families: A Life Course Paradigm. *Presentation to The 9th National Child Protection and Welfare Social Work Conference ; 27th of October at UCC.*
- Powell, Grainne (2024) *An Irish Perspective Kinship Care*- Paper presented to Researchers Network UK September
- Sacur, B.M.; Diogo, E. The EU Strategy on the Rights of the Child and the European Child Guarantee—Evidence-Based Recommendations for Alternative Care. *Children* 2021, 8, 1181. <https://doi.org/10.3390/children8121181>