

Rise Up Policy Brief

2026



Kinship Care: Recognised in Policy, Invisible in Practice

Executive summary

Kinship care, care by grandparents, aunts, uncles, older siblings and close family friends, is the world's most common way children grow up when they cannot live with their parents. For most of these children, it is simply family life, it provides a sense of safety, security and belonging. Yet a global civil society survey of national laws and policies across 21 countries in four regions, conducted between April–July 2026, finds that kinship carers, and the children in their care, are frequently unrecognised in policies, unsupported in practice and uncounted in data.

Supporting kinship carers is a critical way to secure children's wellbeing and safety and to prevent family separation. Yet while 81% of countries have kinship care as the preferred first option for children who

cannot live with their parents written into policies, that priority does not translate into support services if care is informal: just 10–33% of countries extend any support to informal kinship carers and the children they raise, compared with 52–71% for biological parents. In 95% of countries, legal decision-making authority for the child is tied to formal status, and responsibility for kinship families is scattered across child protection, social welfare, social protection and justice systems that rarely coordinate.

This brief sets out what the evidence shows, and the cross-sector action needed to close the gap between recognition and support – for children's sake as much as their carers'.

The questions we seek to answer

- ✓ What do national laws and policies across diverse contexts tell us about how, and how well, kinship carers are recognised and supported, and what are the most critical gaps?
- ✓ How can governments build the case for investing in holistic kinship care, including for children with disabilities, as a child protection priority, including integrating it within parenting support frameworks?
- ✓ What policy, legislative and practice shifts are needed to ensure that all caregivers, including kinship carers, can access the support they need?

A public health approach to child protection

This brief addresses the following public health pillars:

- Improving policies and legislation
- Effective governance and multisectoral coordination.

Kinship care spans child protection, social protection, health and justice systems, so the brief takes a cross-sector approach. It also extends WHO's INSPIRE parenting and caregiver support strategy to kinship carers.



The problem: The most common form of care for children is also the least recognised, supported and counted

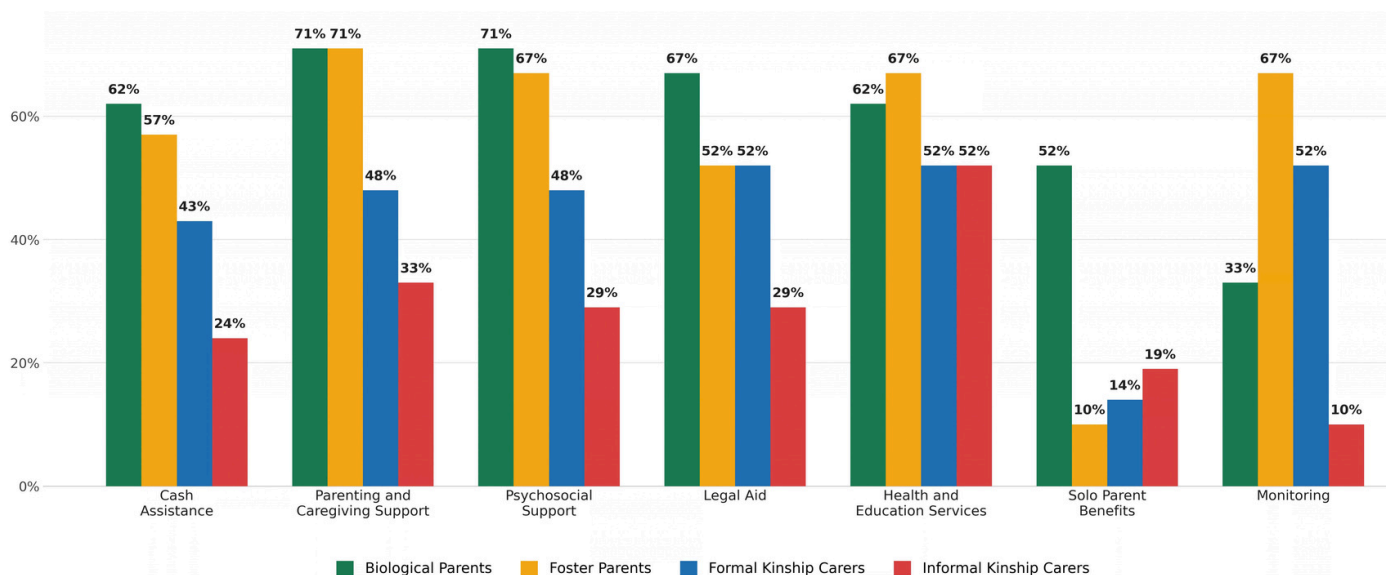
For most of the world's children who grow up apart from their parents, this is not an entry into a formal "alternative care" system – it is care by grandparents, aunts, uncles, older siblings or close family friends, an ordinary extension of family life. **Kinship care is the world's most common form of care for children who cannot live with their parents**, and it remains largely invisible to the systems meant to support families. When Kinship Care families remain invisible and unsupported they are at risk of increased vulnerability and increased risk of violence against children.

A global civil society survey covering 21 countries across Africa, Asia-Pacific, Europe, Latin America and the Caribbean^[1] maps how national laws and policies treat kinship care across five dimensions: legal recognition, prioritisation, support, registration and oversight, and data.

- **76% of countries formally recognise kinship care in law or policy**, but recognition is rarely a distinct legal category: most route it through general guardianship, foster care or family law instead.

- **Only 48% of countries legally recognise customary or traditional forms of care**, and 62% extend recognition to carers who are not blood relatives.
- **81% of countries have kinship care as the preferred first option** for children who cannot live with their parents written into law, **but only 4 of the 21 surveyed explicitly extend that priority to informal arrangements**.
- Support is starkly unequal: while 52–71% of countries provide some form of government support to biological parents, **only 10–33% extend any support to informal kinship carers, and the children in their care**. (see chart 1).
- **In 95% of countries, legal decision-making authority for the child is tied to formal status or a court order**, and over **62% have no dedicated pathway to support informal kinship arrangements** at all.
- **Only 6 of 21 countries (29%) can confirm their data distinguishes formal from informal kinship carers**. Where official data systems exist, they are typically built around formal placements. Since most kinship care worldwide is informal, this is the group hardest to see in national statistics, a shared challenge across contexts, not a shortfall specific to any country.

Chart 1: Access to support by caregiver type



The gap is especially acute for children with disabilities and other children with additional needs: only 8 of the 21 countries surveyed (38%) clearly recognise their needs within kinship care specifically. Colombia is a rare exception, its kinship care assessments explicitly factor in displacement, poverty, conflict-affected areas and ethnic origin, with cross-border family-tracing mechanisms for children separated from family during crises.

Responsibility for kinship care is also structurally scattered: legal authority typically sits with courts, financial support with social protection agencies, and child welfare oversight with child protection departments, three systems that, across almost every country surveyed, do not coordinate by default.

[1] Bangladesh, Brazil, Bulgaria, Colombia, Egypt, Guatemala, Guyana, Ireland, Kenya, Kyrgyzstan, Liberia, Mexico, Nepal, New Zealand, Paraguay, Philippines, Rwanda, South Africa, Sri Lanka, United Kingdom, Zimbabwe.

Policy recommendations

Mapped to the findings above, five shared policy asks for governments:

- 1. Define kinship care in law.** Explicitly recognise kinship care, including customary/traditional forms and non-relative trusted carers known to the family and child, as a distinct category in national legislation and policy, rather than folding it into general foster care or guardianship provisions. When Kinship Care families remain invisible and unsupported they are at risk of increased vulnerability and increased risk of violence against children.
- 2. Make kin-first policy real for every child.** Ensure the priority for kinship care applies equally to informal arrangements and is backed by clear criteria for disadvantaged children, and for children with disabilities in particular. Recognizing the important role Kinship Carers play in preventing violence against children and family breakdown.

These recommendations track with live polling of Rise Up Policy Forum session delegates (non-representative – n=23–25 self-selected attendees). Asked to name the single biggest gap in their own country, delegates were split between legal recognition (32%) and insufficient access to support services (28%), reinforcing recommendations 1 and 3. Only 22% said informal carers can access support without formalising their status; the rest said support is partial (30%) or they weren't sure (30%), reinforcing recommendation 4. Regarding disability-specific pathways, just 4% said one exists in their own country, with 57% not sure, the sharpest gap in the room, and a direct case for recommendation 2.

- 3. Build a consistent support package for carers and children.** Cash assistance, parenting and caregiving support, psychosocial support and legal aid should be available to all kinship carers and the children they raise, regardless of the type of arrangement to reduce the vulnerability of kinship care families and risk of violence against children.
- 4. Remove formalisation as the gatekeeper to support.** Kinship carers should not need a court order to access basic support or protection for the children in their care. Extend simplified pathway and proportionate monitoring to informal carers with proper assessment and follow up where the placement follows abuse, neglect or violence.
- 5. Count children in kinship care** through household surveys and censuses, not only formal administrative records, so informal carers can be counted without being made to formalise. Disaggregate by carer status, gender and disability status to make children's needs visible.



Implementation considerations

The main barrier identified across the survey is not a lack of political will to prioritise kinship care in principle, but the absence of implementation mechanisms if kinship care is informal – and the fact that responsibility is split across child protection, social welfare, social protection and justice systems that rarely coordinate. Closing this gap requires a genuinely cross-sector response, not action by any single ministry alone.

Short term: open up existing services designed for parents such as parent support programmes, psychosocial support, cash transfers where these already exist, to kinship carers. Wherever such services exist, being a kinship carer, formal or informal, should not be a barrier to accessing them. This is the lowest-cost entry point: it uses services and budgets that already exist, rather than requiring new investment.

Medium term: reform law to define kinship care as a distinct category, and extend simplified, non-court pathways to support for informal carers. This requires legislative time but not new infrastructure.

Long term: make children in informal kinship care visible in the data. The main source of data is very often administrative records, which by design capture only formal, registered arrangements. Closing this gap requires integrating social protection and child protection information management systems, and using population-based tools, household surveys and censuses, that can capture children in informal kinship care outside the formal system.



What children and carers told us

Children and young people who grew up in kinship care describe it not as a stopgap but as a second home, a source of safety, belonging and care as unconditional as any parent's. But they are also clear that their carers' wellbeing cannot be separated from their own: grandparents and other kinship carers often make significant financial and personal sacrifices with little formal recognition

or mental health support. This is felt most acutely by children with disabilities, who face heightened risks of neglect and family separation when the relatives caring for them, often grandparents, cannot access the support they need. For these children, support for their carers is not a secondary concern; it is a condition of their safety.

Case study: how litigation, a new grant and everyday system design closed the formalisation gap in South Africa

During the 2000s, as HIV-related orphaning rose sharply, South Africa's foster care caseload grew from around 50,000 children to over 500,000 by 2010, as orphaned children already raised by extended family were routed through the child protection system and given access to the higher value foster child grant. **The system collapsed due to administrative over-burdening: between 2009 and 2011 alone more than 113,000 foster care placements were not extended resulting in these children losing their grants.**

Beginning in 2011, a 12-year civil society legal challenge (Centre for Child Law v Minister of Social Development) escalated until the courts declared the government's failure to fix the system unconstitutional and ordered a permanent legislative solution. That order produced two Acts: the Social Assistance Amendment Act 16 of 2020, which allowed for the introduction of the Child Support Grant Top-Up – 1.5× the base grant, reaching over 100,000 children by 2025, through a simple, means-tested application – and the Children's Amendment Act 17 of 2022, which channeled orphaned children already safely in the care of relatives away from formal court process altogether.

Thus, **informal kinship carers now have access to two social grants**, the base Child Support Grant for children whose biological parents are still living but are in the day-to-day care of another caregiver, or the Child Support Grant Top-Up for those caring for orphaned children. **Both are accessed through the South African Social Security Agency without the need for social worker or court involvement, although conditions do apply.** Children with disabilities in kinship care are also eligible for a dedicated care dependency grant, accessed the same way, through a sworn affidavit of primary caregiving rather than a court order. Throughout the amendments, the South African Social Security Agency (SASSA) and the social development department were required to implement the changes under continued court supervision.

The reform's impact is tangible: around 100,000 orphaned children already living with relatives are now receiving the CSG Top-Up without their carers first needing a foster care order through a social worker and the Children's Court. Removing these

cases from the statutory foster care system has also reduced pressure on social workers and courts, freeing capacity for children who do need protection from abuse, neglect or exploitation, and made income support more reliable for both kinship and foster families.



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While no formal return-on-investment study exists, the reform was underpinned by costing and transition models developed before implementation, modelling how eligible kinship-care cases would gradually move out of foster care, how uptake of the CSG Top-Up would grow, and how expenditure would shift between the two systems over time. This means the reform was not simply an added cost, but partly a reallocation of resources from a costlier, administratively intensive route to a simpler existing social assistance mechanism for families who did not need child protection statutory intervention.



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This reform sits within a wider pattern: universal services such as healthcare, education, social services, are explicitly accessible regardless of formal or informal status, by design. The Old Age Grant reflects the same intentional design: nominally a grant for the caregiver, it was built with the understanding that it also supports dependents, commonly orphaned grandchildren, in an elderly carer's household, making it a child-centred response in practice. South Africa's data systems are also a rare exception to the data gap identified above: they disaggregate by gender and formal/informal status, drawing partly on population surveys rather than administrative records alone.



Conclusion

Kinship care can give children safety, connection and a sense of belonging. But that isn't guaranteed: it depends on carers having the support to sustain it, and too many don't get it. Without that support, kinship families, like any other family, are left more vulnerable, and children more exposed to violence and neglect.

Closing that gap requires recognising kinship care in law, making the kin-first priority real for informal carers too, building a consistent support package for carers and children alike, removing formalisation as the gatekeeper to that support, and counting these children so they are no longer invisible in the data.

South Africa shows that this combination can work in practice: reform that closed the support gap has reached over 100,000 children.

Governments need effective governance and multisectoral coordination, connecting the child protection, social protection, health and justice systems that already exist around the carers and children relying on them. They should act on this now.

Further information

- Family for Every Child, [How to support kinship care: lessons learnt around the world, 2024](#).
- Family for Every Child global kinship care policy mapping survey, 21 countries, 2026 (unpublished).
- [Instituto Colombiano de Bienestar Familiar \(ICBF\)](#) – Proceso Administrativo de Restablecimiento de Derechos
- South Africa, [Children's Amendment Act 17 of 2022](#). gov.za
- South Africa, [Social Assistance Amendment Act 16 of 2020](#). gov.za
- WHO, [INSPIRE: Seven Strategies for Ending Violence Against Children, 2016](#)
- Centre for Child Law v Minister of Social Development and Others, North Gauteng High Court (unreported, GNP Case No 21726/11).

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This brief draws on Family for Every Child's 21-country global kinship care policy mapping survey (2026), supplemented by delegate discussion and live polling during the '[Caring for the Carers](#)' session moderated by Lumos at the ISPCAN Rise Up Policy Forum in Melbourne on 27 August 2026. Special thanks to Suzanne Clulow from CINDI, South Africa, for her contribution to the case study.

The [ISPCAN Rise Up Policy Forum](#) is a global initiative to catalyse progress in child protection through a public health and system strengthening approach. It brings together governments, researchers and practitioners in a community of practice and learning, to build on and translate into action the pledges made during the 2024 Ministerial Conference on Ending Violence Against Children.



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