**Prioritising family strengthening and kinship care**

Submitted by India Alternative Care Network (IACN)

With participation from children, caregivers, child protection workforce and civil society organisations in India.

**Background**

The growing evidence of the adverse impact of long-term institutionalisation and the importance of a safe and nurturing family environment for children guide care reform practices globally. Supporting vulnerable families to care for their children and promoting family-based care are essential components of care reform. It also advocates for deinstitutionalisation and limiting the use of institutions as a last resort.

This report is a consolidation of deliberations with children and caregivers in kinship care arrangements, the child protection workforce[[1]](#endnote-2), and civil society organisations[[2]](#endnote-3) on their experiences and insights on family strengthening and kinship care in India.

**The scope of ‘family strengthening’ and positioning it as an umbrella approach to the continuum of care**

Strengthening at-risk or vulnerable families is the first line of defense against their breakdown. Its primary purpose is to prevent the separation of children from their biological parents. This is a pivotal intervention as many children in difficult circumstances and institutional care belong to families with poor access to social security measures. Furthermore, family strengthening plays an equally important role for children in family-based alternative care, such as kinship care, foster care, or other customary practices across cultures. Family strengthening is also a sustainable and long-term measure that allows for deinstitutionalisation. Family strengthening and its allied support interventions must consist of comprehensive legislation, policies and programmes to empower the family to provide quality care to children within the community. When implemented effectively, family strengthening forms a complete safety net around children and caregivers to avoid their neglect, abuse, separation or institutionalisation.

**Essential components of family strengthening**

Every child has the right to grow in a safe and nurturing family. Research evidence and experiences of children have long shown the detrimental aspects of institutionalisation. Therefore, family strengthening becomes essential for:

* Supporting vulnerable families in child care roles;
* Supporting families caring for children with inadequate parental care and vulnerable children (OVC) in alternative care arrangements (kin, foster carers);
* Reintegrating children in institutional care into the care of their parents or family-based care.

Components of family strengthening are inexhaustive and wide-ranging and take into account the needs of all vulnerable families facing a crisis, including kinship families, single parents etc. Family strengthening aims at:

* Ensuring the rights of children, such as:
  + Protection from abuse, neglect, exploitation and violence
  + Education
  + Healthcare and nutrition
  + Safe and hygienic living accommodation
  + Opportunities for participation
  + Legal aid
* Building economic capacity of families through financial support, skill development and incentives to family-based alternative caregivers
* State’s pro-active engagement in ensuring ready access to social security measures to vulnerable families
* Capacity building of caregivers as individuals and parents in areas such as:
  + Parenting
  + Developing resilience, self-esteem and coping with distress
  + Interpersonal and social skills, communication
  + Conflict resolution
  + Child rights and protection, and children’s participation.
* Community involvement and building a protective ecosystem around the family that would act as a safety net in crisis
  + Facilitating access to community-based child protection groups
  + Early childhood care
  + Access to daycare/ nightcare
  + Self-help groups/peer parenting support groups
  + Facilitating access to social protection benefits and services
  + Referral and linkages to specialised services

**Approach to implement family strengthening initiatives**

Given the scope of family strengthening programmes, a multi-sectoral preventive approach is essential. Regular mapping and assessment of at-risk families by the State and identifying their vulnerabilities is key to family strengthening. Understanding family strengthening as a comprehensive bouquet of services and its integration as an essential component in the continuum of care is necessary. Community-based child protection groups, local self-government bodies, and other community stakeholders become the strong conduits and proponents of family strengthening services. Convergence of community mechanisms and stakeholders with child protection mechanisms at all levels enables gatekeeping, referrals, and linkages with services on a needs basis.

**Kinship care as a preferred option on the continuum of care for promoting family-based care and preventing institutionalisation**

Kinship care is family-based care within the child’s extended family or close friends of the family known to the child. It is a widely used practice across many cultures around the world, including in India.

Family – as understood and defined in many different forms – remains the best care option for children. Children report many positive outcomes growing up in kinship care, and as an informal cultural practice, it comes naturally to kins. The possibility of neglect and abuse in kinship care families can be addressed by assessing their preparedness and suitability to care and realise the best interest of the child. This can be enabled through the specialised services of NGOs and the child protection system.

**Understanding kinship care practice in India**

In India, kinship care practice varies across cultures and regions. In some contexts, relatives, family friends, and even neighbours and communities can assume the role of primary caregivers. It remains largely an informal practice without representation in policy and legislation. Thus, it lacks support services and mechanisms for children and caregivers.

Kinship care as an alternative care option in India should be understood in the backdrop of families in crisis and families where children’s safety and well-being are at risk, like death, desertion or incarceration of one or both parents; in the context of certain unavoidable practices/phenomena like natural disasters, seasonal migration of parents (as seen in the State of Maharashtra), conflict (in the State of Jammu and Kashmir), ‘*nata pratha*’[[3]](#footnote-2)(as practised in the States of Rajasthan, Gujarat and Madhya Pradesh), etc.

**The discourse in kinship care – to formalise or not**

Though children shared positive outcomes and a sense of belongingness in kinship care, they also highlighted instances of neglect, discrimination and exploitation. Caregivers underscored financial difficulties, the need for capacity building, and the lack of support services and mechanisms to respond to the needs of the children. The absence of support limits the caregivers from providing quality care and extending and continuing the care arrangement despite their willingness to do so.

To ensure better outcomes for children in kinship care in India, there is a need to build evidence on the experiences of children and caregivers and the role of the State, NGOs, and communities to support it. The deliberations around kinship care should begin with the articulation that formalising the practice is different from legalising it. This is not to say that legal measures are not required. When inheritances are at stake, minor children may need to be taken in as wards[[4]](#footnote-3) to protect their property. Formalising kinship care, thus, relates to policies, schemes and support services that augment the care of children in a family environment. Strengthening families should guide the intent of formalising kinship care, not an invasion of their privacy or coercion. The recognition that there is no ‘one-size-fits-all’ approach is crucial.

Hence, a distinctive and nuanced policy-making exercise that addresses concerns on formalising while recognising the need for culturally specific solutions to preserve traditional protective factors should be undertaken in collaboration with stakeholders at different levels. The child’s agency and participation in decision making and their best interests should guide their care.

**Meaningful participation of children in the decision-making process**

Children identified the opportunity to be heard as an essential aspect of kinship care. They shared that many adults and duty-bearers/functionaries see them as beneficiaries of care services rather than as right holders, undermining their agency and limiting opportunities for participation.

The specific challenge in India relates to the underlying cultural norms that underestimate the role of children in families and societies. The power dynamics that dominate the child-parent relationship further adds to it. Girls and children from marginalised communities are more likely to face systemic denial of their right to participation.

The barriers to children's participation can be overcome by

* Building children's capacities and making them aware of their rights;
* Ensuring their participation through existing avenues of children's groups, representation in the village child protection committees (VCPCs), and school management committees (SMCs), etc.;
* Building the capacities of parents and caregivers to recognise children’s rights, individuality and agency, and by improving communication between children and caregivers.

**Impact of COVID -19 on children and families and the support they seek**

COVID-19 has pushed already vulnerable families to the brink of crisis. Children in kinship care are at an increased risk of neglect, exploitation and separation. With reports of a rise in child marriages in India since the pandemic, girls in kinship care are particularly at risk of being forced into child marriages as financial crisis looms large over families. There are also reports of children being trafficked into forced labour. Children in rural areas and economically weaker sections face the brunt of the digital divide in learning and are at risk of dropping out to support the family income. Children in kinship care families feel more burdened to contribute out of obligation.

**The State must:**

* **Identify vulnerable children and families, children who have lost one or both parents/caregivers, and create linkages with relevant social protection schemes to ensure their protection and well-being. Where such measures are missing, there is an urgency to articulate new policies and schemes to meet this need.**
* **Children who have lost one or both parents should be entitled to interim/emergency care with kin, fit person or institution till long term family-based care can be in place**
* **Relief measures and assistance for children who have lost one or both parents should extend coverage to families where the primary caregivers were not biological parents.** These relief measures should include educational support (access to digital devices and online schooling), financial assistance, income generation opportunities, ration, psychosocial support and medical benefits.
* **Timely disbursal of financial assistance for COVID-19-related relief and support and other social protection benefits, including the schemes for kinship care.**

**Prioritise family strengthening and kinship care**

* **Shift in the nomenclature of international and national guidelines and instruments on alternative care to include family strengthening in their titles;** to further emphasise its importance as a measure for prevention of separation and its application to the entire range of non-institutional family-based care. **Kinship care should also find separate mention in alternative care policies and guidelines.**
* **Initiate global public engagement initiatives to sensitise people on the care reform approach, highlighting the necessity and approach towards care in a family environment**. This is a huge gap in India currently, and it demands investment in public messaging and social media campaigns in regional languages.
* **Engage with funders at the national and international level to invest in programmes, knowledge and advocacy that support the care of children in family-based care arrangements.**
* **Expand opportunities for learning from international, national and regional success in reducing the number of children admitted to institutional care through prevention, intervention and gatekeeping initiatives.** The learning should focus on evidence about causes of family separation, targeted support that helps families to remain together or be united if the separation has taken place, and should cover family strengthening interventions in different contexts like families facing social stigma or discrimination, such as those caring for children with disabilities (or where the parents are persons with a disability), children of indigenous or minority communities, families fleeing armed conflict or other dangers, and children on the move.
* **Formulate a national family policy in India that includes a gamut of family strengthening services needed for children to thrive in their families and prevent separation.** The services to support families and children are inexhaustive and allows families to draw upon them according to their needs. This should also cover kinship care families and other family-based alternative care.
* **Ensure regular identification and assessment of at-risk families to identify their vulnerabilities and strengths.** Gatekeeping and referrals should be critical outcomes of such assessments.
* **Formalise kinship care to enable support services and mechanisms in line with the family strengthening approach**. The policies and schemes should have special provisions for children with varying gender identities, those with special needs and prolonged medical conditions and vulnerable caregivers, like grandparents. The involvement of NGOs to support the child protection systems is essential in reaching out to vulnerable children, delivery of services and maintaining their quality.
* **In kinship care policy, delineate the role and responsibilities of the birth family and the possibility for early restoration through family strengthening services.**
* **Invest in research to build empirical evidence and understand children and caregivers' experiences in kinship care in diverse socio-economic and cultural contexts**. The experiences of children and caregivers should guide the policies, schemes and support services.
* **Recognise family strengthening and kinship care in the scope of existing social protection schemes wherever relevant.** Every State in India should have a commitment document on family strengthening and kinship care.
* **Streamline the implementation of existing schemes on kinship care to facilitate easy access and availability.** Delay in receiving the allocated financial assistance, and complicated procedural requirements restrict their access.
* **Recognise the role of community-based child protection committees and village level stakeholders (health worker, teacher, local self-government representatives) that are the first line of responders in communities to enable and support family strengthening gatekeeping and kinship care**.
* **Prepare children and kinship families through the transition and increase their access to continued psychosocial support and follow-up.** This must include specialised services that cover de-addiction, trauma-informed counselling etc. Unplanned placements where children and caregivers are not involved in the decision-making process and the absence of counselling and mental health support are known causes of separation in kinship care families.

**About us**

IACN is a collective of practitioners and civil society organisations working on the care and well-being of children without parental care or at risk of separation. Contact us at: iacnsecretariat@gmail.com

**Endnotes**

1. Conducted by Child In Need Institute and Miracle Foundation India [↑](#endnote-ref-2)
2. Consultation on family strengthening and kinship care in India, held on 24 June 2021, organised by IACN and supported by UNICEF.

   List of participants:

   Nina Nayak, Former member National Commission for the Protection of Child Rights and Former-chairperson State Commission for the Protection of Child Rights, Karnataka

   Nilima Mehta, Visiting-Professor and National Consultant, Former member Child Welfare Committee, Mumbai

   Bharati Ghate, Shishu Adhar

   Nirmala Fernandes, Family Service Center

   Shilpa, Samvedna Trust

   Rajendera Meher, Former chairperson State Commission for the Protection of Child Rights, Odisha and Youth Council for Alternative Development

   Lopamudra Mullick, Child In Need Institute

   Anjali Sood, Miracle Foundation India

   Vijayalaxmi Arora, Catholic Relief Services

   J.B Oli, Butterflies

   Alpa Vora, Manna Bisawas, Rini Bhargava, Sanjay Nirala and Sharmila Ray, UNICEF

   Richa, IACN Secretariat [↑](#endnote-ref-3)
3. A tradition in which a woman can leave her husband or partner and start living with another man. This practice is know to contribute to abandonment of children as women leave behind children from previous partners. [↑](#footnote-ref-2)
4. Under the Guardianship and Wards Act 1980 [↑](#footnote-ref-3)