

Supporting Kinship Placements Improve Child Behavior

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A [study](#) conducted by Garcia and colleagues at PolicyLab at The Children's Hospital of Philadelphia (CHOP) shows that emotional and behavioral outcomes among kids in [kinship](#) placements (placements with relatives rather than foster parents) are more likely to improve when caregivers demonstrate a reduction in depression over time or are never depressed. The findings come from emotional/behavioral assessments of children placed with kinship and non-relative foster care providers in a Mid-Atlantic city in 2006-08 and 6-12 months post-placement.

It is not surprising to find that youth in kinship care always experienced better change in behavioral outcomes than youth in non-relative foster care. We have always known that keeping a child connected to family is paramount. What is noteworthy about these findings is that positive developmental outcomes are conferred to youth placed with kin who are not depressed themselves. All too often we place maltreated children with kin, assuming that family connectedness will be enough to promote child well-being. But, what happens when the caregivers' mental health is compromised, and given little, if any, services? This study reveals the children are likely to suffer too.

Findings lend to policy relevance for child welfare systems to allocate additional resources to strengthen and support kinship placements for their sake and for the sake of the children they care for. Policies that require human service providers and medical professionals alike to routinely assess for need of mental health services for kinship caregivers should be prioritized. Public health and child welfare caseworkers should conduct periodic home visits to the caregivers' home to assess need and provide referrals to evidence-based, culturally relevant services. And, while the [Fostering Connections to Success and Increasing Adoption Act of 2008](#) provides funding to states to support services to kinship care families, little is known as to what, if any, of those resources are used to promote caregiver mental health. The study lends support that placement with kin might need to be accompanied by greater attention to caregiver health to augment benefits to youth.

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