Breaking the vicious circle
Addressing the barriers and difficulties faced by grandparent kinship carers in Sunderland where the birth parents are involved in substance misuse

Report of findings of a participatory action research project

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About Sunderland Carers Centre

Sunderland Carers’ Centre offers a confidential advice, information and support service to carers throughout the City of Sunderland. A carer is someone who looks after a family member, partner, friend or neighbour who due to illness, disability, frailty or addiction is unable to manage alone. Sunderland Carers’ Centre is an independent voluntary organisation, registered as a charity, and is part of The Princess Royal Trust for Carers Network. Sunderland Carers’ Centre is Company limited by guarantee and a Registered Charity. For more information contact:

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1. Executive Summary

Introduction

1.1. This an executive summary of the findings and recommendations of participatory action research designed to identify and respond to the needs of grandparents who are caring full time for their grandchildren because of their parent’s substance misuse. The research was peer led by two grandparent kinship carers in Sunderland. It came about because we were learning of more and more incidences in Sunderland where grandparents are faced with difficult and emotional choices related to this situation. At the outset we knew from our own experiences that grandparents need support to deal with changes in their lives and to overcome emotional and practical impacts. Yet we knew of no existing support networks and groups Sunderland and we did not have a clear idea of the extent of the problem. The research questions were as follows:

a. What is the extent of grandparent caring for their grand-children full time as a result of birth parents substance misuse in Sunderland?

b. What barriers and difficulties are these grandparents facing in the course of their everyday lives?

c. What types of supports and services are needed to overcome the barriers, difficulty and conflicts?

d. What support services already exist and where are the gaps?

e. What examples of support for kinship carers exist elsewhere in the North East?

1.2 The research specifically related to situations where the birth parents are involved in substance misuse, this is because we know from experience that there are specific difficulties and barriers to overcome in this situation.

Key findings

The extent of grandparent kinship care in Sunderland

1.3 It has not been possible to identify the extent of grandparent/ kinship care in Sunderland as a result of birth parents substance misuse. We know that there currently 192 kinship carers who are currently paid a means-tested allowance from City of Sunderland Children’s Services. However, this does not reflect those who are not in receipt of an allowance, where courts outside of Sunderland have made the orders and/ or where Sunderland City Council’s Children’s Services have not been involved with the child(ren)s case.

1.4 This raises a question of how those who have obtained orders from Sunderland Courts without contact with Sunderland City Council’s Children’s Services (e.g. if the case has been dealt with by another local authority) access financial assistance and other support.

1.5 Of the sixteen family units we contacted for this research almost a third had no legal order on the children, suggesting that there may be many grandparent kinship carers in the position in Sunderland.

1.6 Sunderland City Council’s Children’s Services have not been able to provide any indication of what proportion of the birth parents of children placed with grandparent/ kinship carers are involved in substance misuse. However as this research shows, this group of kinship carers have complex issues and multi-levelled support needs.
Barriers and difficulties faced by grandparent kinship carers in Sunderland

1.7 The findings of this research in Sunderland resonate with other research carried out with kin-carers in the UK and across the European Union. Most of those involved in the research are uncertain about theirs and their children’s future e.g. retirement, managing teenagers as elderly parents, care of children if the grandparent kinship carers become very ill or die. The research has identified that the barriers and difficulties facing grandparent kinship carers and complex and multidimensional.

1.8 Grandparent kinship carers face; personal and emotional issues, economic issues, social issues, family issues linked to changed relationships and dynamics, health issues and multiple caring responsibilities. They are often also caring for an elderly parent or a sick or disabled partner as a result their own health needs are completely neglected. The complex and difficult issues faced by grandparent kinship cares are compounded by a lack of support, knowledge and information and for almost all, a deep mistrust of Children’s Services. Grandparent kinship carers often find themselves in a vicious circle of barriers and difficulties.

Types of supports and services needed

1.9 Not surprisingly, in relation to the difficulties and barriers faced, grandparent/kinship carers were found to have a a whole myriad of support needs, The following scored as the most useful (in order of priority).

- Respite opportunities
- Campaigning and lobbying to change the situation of kinship carers
- Kinship carer network (for mutual support/ self-help)
- Advocacy (e.g. with social services or schools etc.)
- Financial support
- Legal Advice and/ or Information
- One to one support (face to face)
- Support emotional or behavioural problems, special needs or learning difficulties

Existing support services and gaps

1.10 City of Sunderland Children’s Services provided information about a whole range of services (some of which are subject to assessment) for those with Residency Orders, Special Guardianship Orders or Kinship Foster Carer status, including:

- Financial support
- Access to support groups
- Assistance with the arrangements for contact between the child(ren) and their parents
- Cash to help with the costs of contact
- Mediation to help resolve difficulties with contact
- Therapeutic services for the child(ren)
- Mediation if there are disagreement between kinship carers and the parents about important decisions in the child’s life
- Training so that you are able to meet the child’s needs.
- Counselling
- Advice and information
- Financial assistance with legal fees
1.11 It is notable that respite opportunity ranked the highest in the survey of kinship carers needs, yet it is not something that is provided for kinship carers by Sunderland Children’s Services. Many of the supports provided do correspond with the needs of grandparent kinship carers. However, almost without exception, the grandparent/kinship carers involved in this research very unclear about supports available and most did not have access to financial assistance or other support from Children’s Services. They mainly felt that they had been ‘left to get on with it’ and one of the research participants described their experience of being a grandparent-kinship carer thus:

“It’s like standing alone in an empty field where there is nothing anywhere. You only find out where there is support if you come across it accidentally, by bumping into someone or happening to have a conversation with someone.”

1.12 *More than Grandparents* fills a gap in the need for a kinship carers’ network in Sunderland that can provide advocacy, peer support and the need for campaigning and lobbying to change the situation for kinship carers and to signpost to legal advice and information. Having a partnership with of a specialist in broader carers issues from Sunderland Carers Centre and in the needs of parents of children with substance abuse issues from Sunderland Area Parents Support has been vital to progressing the research and network development to date. It is notable that all of our referrals to date have come from these agencies and other voluntary agencies dealing with substance abuse and addictions.

1.13 National sources of support have been identified as part of the process of doing this research, such as Grandparent Plus, Grandparents Association, National Association of Kinship Carers and Family Rights Group and stronger links have been made with these agencies as a result. For example, More than Grandparents are working with Grandparents Plus to host a grandparent/kinship carers conference in the North East as part of National Carers Week, the event will have a focus upon supports needed and local policies. These national agencies provide excellent support materials and resources, telephone help-lines for legal and financial advice and importantly an ear into Government for lobbying purposes.

1.14 Elsewhere in the North East, support agencies for grandparent kinship carers that also specialise in substance misuse have been identified in Teesside, Northumberland and North of Tyne & Wear. There are gaps is support agencies in all of the areas that border on Sunderland, i.e. South of Tyne (South Tyneside and Gateshead) and in County Durham (other than Liberty in Chester-le-Street). Two grandparent kinship carers involved in the research had experienced specific difficulties in accessing support and assistance due to the child’s case being dealt with in by a bordering authority.

**Recommendations**

1.15 **Awareness-raising** - The findings of this research should be disseminated to Children’s Services and other agencies involved in the support of kinship carers and the children they care for, such as, Schools, Adult Services, Sunderland Teaching Primary Care Trusts and Health Visitors, GPs, Drug & Alcohol Action Teams, Welfare Rights Services, Children and Adolescent Mental Health Services (CAMHS), etc. so that they better understand the issues, barriers and difficulties faced by grandparent-kinship carers.
1.16 **Enabling informed choices** - City of Sunderland Children’s Services should enable grandparent kinship carers to make informed choices by providing accessible information about the support and assistance and the types of legal orders that are available in line with the new policy guidance from Government.¹

1.17 **Peer support network for grandparent/kinship carers** - City of Sunderland Children’s Services and other agencies should promote *More than Grandparents Sunderland* to grandparent kinship carers that they have contact with. Furthermore and as part of the implementation or the Local Family and Friends Care Policy, they seek way to contribute to sustaining the network in conjunction with other relevant voluntary and statutory partners.

1.18 **Cross boundary approaches/policies** - The issue of how grandparent/kinship carers access financial and other supports where another local authority has dealt with the child(ren) case needs to be addressed. Moreover, the apparent lack of specialist support for grandparent kinship carers in bordering local authorities of South Tyneside and Gateshead and County Durham and attempts are made to disseminate emerging good practice across authority boundaries.

1.19 **Better data, information and knowledge** - Attempts should be made to gain a more accurate picture of the number of and types of legal orders granted for grandparent/kinship carers in Sunderland and more should be done to identify when children are placed with grandparent/kinship carers as a result of their birth-parents substance misuse. More information should gathered by Children’s Services about the particular barriers and difficulties and support needs of grandparent/kinship carers when the birth parents are involved in substance misuse.

1.20 **Reflect findings in local friends and family policy** - The findings of this research should be reflected in the Sunderland’s Local Family and Friends Care Policy.

1.21 **Family-wide approaches** should be adopted to the development and implementation of Sunderland’s Local Friends and Family Care Policy, to include; Adult Services, Sunderland Teaching Primary Care Trusts (including Health Visitors and Midwives), GPs, Drug & Alcohol Action Teams, Welfare Rights Services, Sunderland Carers Centre, Children and Adolescent Mental Health Services (CAMHS), Sunderland Area Parents Support (SAPs) and drug treatment agencies etc.

At the time of writing, the researchers from Sunderland Carers Centre are working in partnership with City of Sunderland Children’s Services to develop a delivery plan for Sunderland’s Friends and Family Care Policy which will reflect the research recommendations.

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¹ Family and Friends Care: Statutory Guidance for Local Authorities, Department of Education (March 2011)
2. Introduction

This is a report of participatory action research designed to identify and respond to the needs of grandparents who are caring full time for their grandchildren because of their parent’s substance misuse.\(^2\) The research was peer led by two grandparent kinship carers in Sunderland. It came about because we were learning of more and more incidences in Sunderland where grandparents are faced with difficult and emotional choices related to this situation. At the outset we knew from our own experiences that grandparents need support to deal with changes in their lives and to overcome emotional and practical impacts. Yet we knew of no existing support networks and groups Sunderland and we did not have a clear idea of the extent of the problem. The research questions were as follows:

- f. What is the extent of grandparent caring for their grand-children full time as a result of birth parents substance misuse in Sunderland?
- g. What barriers and difficulties are these grandparents facing in the course of their everyday lives?
- h. What types of supports and services are needed to overcome the barriers, difficulty and conflicts?
- i. What support services already exist and where are the gaps?
- j. What examples of support for kinship carers exist elsewhere in the North East?

The research specifically related to situations where the birth parents are involved in substance misuse, this is because we know from experience that there are specific difficulties and barriers to overcome in this situation.

3. Methodology

This project used a participatory action research model, which is a social justice model of research that aims to empower research participants to take action to improve conditions in their lives. Action research has an explicit empowering and transformative agenda and is based upon collaborative inquiry by and with, rather than on people. In this case we sought to empower grandparent kinship carers to take action to improve their every-day lives. The research was conducted by two grandparent kinship carers with the support of Sunderland Carers Centre.

3.1 Research activities

- **Outreach work and focus groups** - the barriers and difficulties faced by grandparents/kinship carers in the course of their everyday lives and types of supports and services needed to overcome them are being explored and identified through one-to-one outreach sessions and informal focus group discussions. Two gatherings of grandparent kinship carers were held at Sunderland Carers Centre on 29\(^{th}\) November 2010 and 10th February 2011.

- **Requesting information from statutory agencies** - a letter was sent to Executive Director of Children’s Services at Sunderland City Council on 20\(^{th}\) October 2010 requesting data and information, regarding the extent of grandparent/ kinship care and the support and assistance available (the letter is in appendix 1).

\(^2\) Recent guidance published by the National Institute for Clinical Excellence (NICE) offers the following definition of **substance misuse** as ‘intoxication by – or regular excessive consumption of and/or dependence on – psychoactive substances, leading to social, psychological, physical or legal problems. It includes problematic use of both legal and illegal drugs (including alcohol when used in combination with other substances).
• **Survey of grand parent kinship carers** to further clarify the types of supports and services needed (see appendix 2).

• **Regional presentation and focus group** - the interim findings were presented to the Regional Carers Forum un Darlington on 1st February 2011 followed by a short focus group to identify examples of support for grandparent kinship carers across the region.

• **Review of national sources of support and advice** – a desk top review has been carried out. One of the researchers attended the Grandparents Plus *Grandparent’s Lobby Day* in London on 28th October 2010 and a regional meeting with Family Rights Group on 6th November 2010.

• **Literature review** – a brief review of the policy context and other relevant research has been conducted.

• **Action planning** – a series of meetings were held with City of Sunderland Children’s Services during May and June 2011 to discuss the research findings and to devise a joint action plan based on the recommendations (see section 6 of this report)

• **Dissemination research findings** – The findings and outcomes of the research were disseminated at a regional event for kinship carers’ hosted by Grandparents Plus in Newcastle on 13th June 2011 and will be presented to the Sunderland Children’s Service Partnership on 12th July 2011. Further dissemination is detailed in the action plan in section 6 of this report.

### 3.2 Scope and limitations of research

Sixteen grandparent/kinship carer family units were identified through the outreach and networking for this action research project. They participated in the research through one-to-one outreach sessions and through conversations to identify the barriers and difficulties faced and to explore the supports needed and some participated in the two ‘gatherings’ at Sunderland Carer’s Centre to explore the barriers, difficulties and supports needed further. The following is a profile of the participants:

- They had 27 kinship children between them aged between 2 years and 17 years (plus two who are now adults, aged 19 and 20).

- Four had a Special Guardianship Order (SGO), one has an SGO pending, six have Residency Orders (RO) and one had an interim Residency Order, five family units have no orders at all for the care of the children at all.

- In all but two cases the children were not with the birth parents due to their substance misuse\(^3\) and in two cases the mother has died.

- 25% (6) of the children had some kind of special needs or emotional/behavioural difficulty

- Twelve were grandparents, three are aunties and one is a great grandparent.

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\(^3\) In one case the issue was mental health of the birth parents and the other violence. However, many of the issues experienced by these grandparent kinship carers in this situation were parallel to those where the issue was the birth parents substance misuse.
- Five were contacted through Sunderland Carers Centre, three through NECA, one through Escape (a support project for substance misusers carer in Northumberland) five are associates of one of the researchers, one was contacted through Sunderland Area Parents Support and one through the crisis team.

- Most of the grandparent/kinship carers were in their 50s or 60s, the oldest being 70 and the youngest 47. The one aunt carer identified was 40 years old.

- The geographical location of the grandparent/kinship carers contacted is in central and South Sunderland, the Coalfield Area and Sunderland.
  - Six from the Coalfields
  - Four from Sunderland Central
  - Four from Sunderland South
  - One from Washington
  - One from Sunderland North

The limitations of the research are that we have not accessed any carers from the North-side of Sunderland or any from Black and minority ethnic groups and this will have to be addressed as the network develops.

4. Policy Context

The value of kinship care was highlighted in the Children Act 1989, yet Freedom of Information requests made to local authorities by Family Rights Group found 70% lacked an overall written policy on kinship care (FRG 2009). The survey was carried out in 2007 and there was an 83% response rate. 49% of councils stated kinship care should be the first option for children in need of an alternative, yet more than half did not have a kinship care policy.

4.1 National policy

There are a range of different legal arrangements for kinship carers in England.

- Residence order – This is a court order granting residence and parental responsibility. It lasts until the child turns 18, unless the court says something different.
- Special Guardianship Order - This is a court order granting residence and parental responsibility. It is usually in force until the child turns 18, and is harder to overturn than a residence order
- Kinship Foster Care – Kinship carers may be looking after a child on a short term or permanent basis and these arrangements can be made directly between parents and their relatives or friends or the local authority may be involved. When this occurs local authorities often (and indeed should) find out whether there are any relatives or friends who can take on the care of the child. If they place a child with a relative or friend for longer than 6 weeks, that person must be approved as a local authority foster carer.
- Adoption – This is a permanent legal order, revoking all legal rights of the birth parents. Once adopted, the child is legally a member of the adoptive family.

Where a child is cared for by someone other than the parent, such as a grandparent or other close relative a legal arrangement may not be necessary – this is referred to as a private agreement.

Policy makers are starting to show more recognition and attention to the significant role played by kinship carers (Templeton 2010, FRG 2009). In a letter to Iain Wright MP, dates 10th January 2011, Tim Loughton MP, the Parliamentary Under Secretary of State for Children and Families states that:
There are currently unacceptable variations between local authorities in levels of support and services available to relative carers of children; and there is a need for transparency and equity in relation to services and support for relatives caring for children.

In March 2011, the Department of Education\(^4\) issued statutory guidance for kinship care, *Family and Friends Care: Statutory Guidance for Local Authorities*. The guidance is aimed at: lead members for children’s services in local authorities, Directors of Children’s Services, managers of services for children in need and looked after children and social workers and other social care staff working with children in need. The guidance sets out a framework for the provision of support to family and friends carers. In particular it provides guidance on the implementation of the duties in the Children Act 1989 in respect of children and young people who, because they are unable to live with their parents, are being brought up by members of their extended families, friends or other people who are connected with them.

By the 30\(^{th}\) September 2011 each local authority in England with responsibility for children’s services must publish a policy setting out its approach towards promoting and supporting the needs of children living with family and friends carers. The policy must be produced in collaboration with local partners (including the voluntary and community organisations and groups). The policy should be supported by good data and information about the extent of family and friends care and what the needs are so that appropriate services can be developed. The policy should be clearly expressed, regularly updated, made freely and widely available and publicised through websites and leaflets etc. The following aspects should be included in the policy.

a) Values, principles and objectives - Local families and friends care policies should founded upon the values and principles of the 1989 Act, the key principle being that ‘children should be enabled to live within their families unless this is not consistent with their welfare.’ Policies should also:

- Promote permanence for children by seeking to enable those who cannot live with their parents to remain with members of their extended family or friends.
- Be underpinned by the principle that support should be based on the needs of the child
- Seek to ensure that family and friends carers are provided with support to ensure that children do not become/ or remain accommodated by the local authority
- Make clear that children are active participants and that their wishes and feelings should be taken into account in all relevant processes

b) Evidence base - Policies should be based on evidence of what works in supporting family and friends carers to meet children’s needs, and knowledge of the services which carers and children want to be available to them. Authorities must consult children and young people, family and friends carers and parents as appropriate in drawing up their policies, and set out how policies have been informed by their views.

c) Management accountability - The Director of Children’s Services should identify a senior manager who holds overall responsibility for the family and friends care policy and ensuring that the policy meets the statutory requirements and is responsive to the identified needs of children and carers. The responsible manager should:

- Gather specific up-to-date information such as the number of family and friends foster carers, and of those to whom they are providing special guardianship or adoption support services
- Ensure that local authority staff understand the policy and that they operate within its framework

\(^4\) http://www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-00025-2011
• Ensure that local partners are aware of their responsibilities towards children living in family and friends care and are proactive in meeting those needs
• Ensure that the policy is publicised sufficiently, clearly and effectively
• Ensure that staff who are responsible for implementing the policy should have appropriate training and understanding of the issues, obligations, powers and responsibilities.

d) Legal framework - The local policy should set out, in an accessible format, the relevant legal framework including an explanation of the authority’s powers and duties in relation to ‘children in need’ and ‘looked after children’,5 and address the effect of a residence order, special guardianship order or adoption order. The purpose of this is to:

Ensure that members of the public have the necessary information to make informed choices about the most appropriate route for them to follow. Information should be provided about the meaning and implications of different legal situations, the rights of carers and of the children’s parents, and the nature of decisions which family and friends carers will be able to make in relation to the child.

Department of Education, March 2011: p23

e) Information about services and support - Local family and friends policies should support the promotion of good information about the full range of services for children, young people and families in the area, and highlight the availability of advice from independent organisations for example:
• What resources are available to support children in the local area, including information about universal services such as early years provision, day care and out of school services, schools and colleges, health services, leisure facilities and youth support services (services should ensure that information they publish demonstrates their responsiveness to the needs of family and friends carers)
• How to access targeted and specialist services which may be required, such as special educational needs services and Child and Adolescent Mental Health Services (CAMHS)

f) Financial support - The local policy must identify how family and friends carers can apply for financial help, how they are made aware of the eligibility criteria and when means testing applies, and how and when decisions are made about eligibility. Where financial support is offered, a written agreement should be drawn up detailing the level and duration of the support that is to be provided, and the mechanism for review, to ensure that all parties remain clear about the arrangements.

5 A child who is in care of a Local Authority and as deemed under Section 22 of the Children Act 1989

g) Accommodation - Local policies should help to ensure that housing and social care services work in partnership to support the housing needs which may face family and friends carers. Local authorities have the power under section 17 of the 1989 Act to give financial support towards accommodation costs where they assess this as the most appropriate way to safeguard and promote a child’s welfare.

h) Supporting contact - Local policies should identify services available to family and friends carers to support the management of contact arrangements, and where necessary to offer independent supervision of contact.
i) **Family Group Conferences** - Local authorities should ensure that they have arrangements in place to offer a family group conference or other form of family meeting as a means to engage families at an early stage and to support them in identifying solutions to difficulties they face in caring for their own children. The arrangements should be set out in the local families and friends care policy.

j) **Support groups** - Local authorities should work with partner agencies and the voluntary sector to find ways to encourage peer support and access to support groups for family and friends carers. Support groups for special guardians and prospective special guardians, children subject to special guardianship orders and their parents are included in services prescribed by the Special Guardianship Regulations 2005 for which the local authority must make arrangements.

k) **Private fostering arrangements** - The National Minimum Standards for Private Fostering require the local authority to have a written statement which sets out its duties and functions in relation to private fostering and the ways in which they will be carried out. This statement should define what private fostering means.

l) **Family and friends foster carers** - Families and friends policies should include information about the local authority’s powers and duties including circumstances in which a child may become accommodated by the local authority or in which care proceedings may be instigated, and how and by whom such decisions are made. Informal family and friends carers should know how they will be involved in this process and what framework will be used to assess that the child or young person may need to become looked after by the local authority. See Department of Education, March 2011: p28-30, 4.43 to 4.50.

m) **Special Guardianship, residence orders and adoption** - Local authorities should identify in their family and friends policy where further information can be found about the manner in which it exercises its duties and powers in relation to people in whose favour a special guardianship order, residence order or adoption order has been made, and by what means these persons may seek support services.

n) **Complaints** - The local policy should explain or signpost how children and young people, families and friends carers and other relevant people may make a complaint about the service.

At the time of writing, it is not clear what the impact of the Comprehensive Spending Review upon local authorities might have on financial assistance and support. It is estimated that if all the children being cared for by friends or relatives were in the care system it would cost the government an estimated £12 billion each year, yet kinship carers are likely to be particularly vulnerable to changes in the welfare benefit system, such as changes to tax credit thresholds, housing benefit changes and benefit caps etc. (Grandparents Plus 2010). The Ministry of Justice are currently proposing to make some significant changes to legal aid in England and Wales which include ‘Family Law and Private Children’s Matters’. If implemented, these changes are likely to have a detrimental impact upon kinship carers seeking legal orders and may therefore have wider ramifications for children of substance abusers who are at risk of entering the care system.

4.2 **Local policy (Sunderland)**

The following is a summary of the policy position in Sunderland at the time the research was carried out (i.e. prior to the Department of Education issuing statutory guidance on friends and family care.

Sunderland City Council *Foster Carers Handbook* (July, 2010) makes one reference to ‘kinship care’, the following is an extract:
Children’s Services recognises that the needs of the children that the Authority looks after are many and varied and, therefore, the directorate needs to provide a range and variety of family placements to meet these needs. There are a number of different types of fostering households within the service. These are…

...Kinship Carers - these are people already known to a child who are assessed and approved to care for that child/ren only. They receive a fostering allowance for the child.

Section 1.2: pp11-12

In a section of the handbook titled ‘Legal orders’, there is a section on Residency Orders and Special Guardianship Orders (section 11, p64).

City of Sunderland Children’s Looked After Strategy 2005-9 sets out to reduce the numbers of ‘Looked After Children’ with a range of measures, including:
- Increasing the number of Residence Orders
- Introducing & implementing Special Guardianship Orders from Jan 2006
- Establish kinship care process

This was the most recent version of the Children’s Looked After Strategy located in the literature review. Sunderland Local Area Agreement 2008 – 2011 has a priority indicator ‘Stability of placements of looked after children: length of placement’ which falls under ‘Improve the emotional health and wellbeing of children’. The baseline for stability of placement is 71% (in 2006/07) and the target is to improve this to 74% in 2010/11. There is no mention of kinship or friends and family care.

5. Research findings

5.1 The extent of grandparent kinship care

5.1.1 The national picture

Although there are no official figures, it is estimated that 200,000 family and friends carers are raising around 300,000 children in the UK (Grandparents Plus, 2010). It is further estimated that only 6,800 of these children are formally classified as ‘looked-after children’ (FRG 2009). A recent study of 2001 Census data, found that in the UK approximately 173,200 children were living with relatives without their parents present in the household (Nandy and Selwyn, 2011).

- Wales had the highest prevalence rate of 1.4% - 1 in every 72 children.
- Scotland and England both had prevalence rates of around 1.3% (or around 1 in every 77 children).
- Northern Ireland had the lowest prevalence rate of 1.1% (or 1 in every 91 children).

For the Family Rights Group, recent legal and policy developments suggest the numbers of children cared for by family and friends will rise in the future (FRG 2009).

Existing estimates are that there are 250,000 - 350,000 children of problem drug users in the UK (ACMD, 2003) and 780,000 - 1.3 million children of adults with an alcohol problem (AHRSE, 2004). The British Crime Survey (2004) and National Psychiatric Morbidity Survey (2000) indicated that:
- 8% (up to 978,000) of children lived with an adult who had used illicit drugs within that year
- 2% (up to 256,000) with a class A drug user and 7% (up to 873,000) with a class C drug user
- Around 335,000 children lived with a drug dependent user, 72,000 with an injecting drug user

6 A child who is in care of a Local Authority and as deemed under Section 22 of the Children Act 1989
- 72,000 with a drug user in treatment
- 108,000 with an adult who had overdosed

Whilst acknowledging that ‘harm from parental substance use is not inevitable,’ it is suggested that children living with substance misusing parents exceeds earlier estimates and that this has implications for policy makers and service deliverers (Duffy et. al. 2010).

### Key facts about parental substance misuse

- Around 1.3 million children in the UK, or one in 10, are affected by parental alcohol misuse.
- At least 250,000 -350,000 children under 16 in the UK have a parent who has serious drug problems. Recent estimates indicate that as many as one in 30 children has a parent who is a problem drug user.
- Children of substance misusers are at risk from emotional and physical neglect, and of developing serious emotional and social problems themselves later in life.
- In a study of four London Boroughs, 83% of families on social work caseloads were affected by parental drug or alcohol misuse.
- 3,000 babies are born every year in the UK with Fetal Alcohol Syndrome caused by heavy maternal drinking in pregnancy. Symptoms include learning and behavioural difficulties and in some cases facial abnormalities.

From *Family and friends care and parental substance misuse*, Policy briefing Paper 04, Grandparents Plus, January 2011

### 5.1.1 The local picture

It has not been possible to identify the extent of grandparent/kinship care in Sunderland as a result of birth parents substance misuse. Sunderland is 6th out of 23 North East towns and cities for children living in friends and family care in the 2001 Census, giving a prevalence of 1.5% or 15 in every 1000 children. That is one in every 67 children which is higher than the national average of 1 in 77. (Nandy and Selwyn, J., 2011),

In response to a questionnaire carried out by the National Association of Kinship Carers the following figures were provided by Sunderland City Council’s Children’s Services for Looked After Children Manager. Table 1 shows children subject to Special Guardianship Orders (SGOs) and Residence Orders (ROs) for whom Sunderland currently is currently paying an allowance (at March 2011).

---

Table 1: *Children subject to SGO and Residence Orders for whom Sunderland currently pays an allowance*

<table>
<thead>
<tr>
<th>Categories of care</th>
<th>Numbers of children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Guardianship Orders (SGOs)</td>
<td>73</td>
</tr>
<tr>
<td>Residency Orders (ROs)</td>
<td>102</td>
</tr>
<tr>
<td>Kinship Foster Carers</td>
<td>17</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>192</strong></td>
</tr>
</tbody>
</table>

The respondent states that the allowances shown in table 1 are those paid to those with SGOs and ROs are means tested so these figures may not reflect the extent of children with these orders from Sunderland Courts. Also the total number of all children subject to these orders is not known because the order may have been made by courts outside of Sunderland or without ever coming into contact with Sunderland City Council’s Children’s Services. This raises a question of how those who have obtained orders from Sunderland Courts without contact with Sunderland City Council’s Children’s Services (e.g. if the case has been dealt with by another local authority) access financial assistance? This needs to be addressed with Children’s Services. Sunderland Courts also need to be approached to access data about the number of legal orders granted.

Sunderland City Council’s Children’s Services were not able to tell us what proportion of the birth parents of children placed with grandparent/kinship carers are involved in substance misuse, neither were they able to tell us about informal kinship care arrangements.

> **We have been trying to collate the information requested, but unfortunately it is not kept in a format that makes pulling off the data straightforward. We should be able to give you some figures on relative foster carers who are grandparents, but it is much harder for informal kinship care arrangements.**

By email from on 24th December 2011

The total number of children in care, and therefore looked after by the Council, was 392 in January 2009 compared with 398 in March 2008. The number has remained stable (Sunderland Children’s Trust 2009a). 198 children were subject of a Child Protection Plan in 2009.13

The table below shows that the numbers of children entering the care system in Sunderland did fall during 2007 and 2008, only to begin to rise again on 2009 and level off by March 2010:

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13 Sunderland Children’s Trust 2009b
Table 2: *Children who started to be looked after during the years ending 31 March, by Local Authority Years ending 31 March 2006 to 2010* (Source: SSDA 903)

<table>
<thead>
<tr>
<th>Local Authority</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>24,600</td>
<td>24,000</td>
<td>23,300</td>
<td>25,700</td>
<td>27,800</td>
</tr>
<tr>
<td>North East</td>
<td>1,480</td>
<td>1,450</td>
<td>1,410</td>
<td>1,460</td>
<td>1,810</td>
</tr>
<tr>
<td>Darlington</td>
<td>75</td>
<td>50</td>
<td>65</td>
<td>65</td>
<td>80</td>
</tr>
<tr>
<td>Redcar and Cleveland</td>
<td>90</td>
<td>65</td>
<td>65</td>
<td>55</td>
<td>100</td>
</tr>
<tr>
<td>Northumberland</td>
<td>125</td>
<td>135</td>
<td>105</td>
<td>85</td>
<td>100</td>
</tr>
<tr>
<td>Hartlepool</td>
<td>55</td>
<td>80</td>
<td>85</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>South Tyneside</td>
<td>110</td>
<td>105</td>
<td>110</td>
<td>115</td>
<td>130</td>
</tr>
<tr>
<td>Sunderland</td>
<td>135</td>
<td>115</td>
<td>90</td>
<td>135</td>
<td>130</td>
</tr>
<tr>
<td>Gateshead</td>
<td>140</td>
<td>135</td>
<td>95</td>
<td>95</td>
<td>150</td>
</tr>
<tr>
<td>North Tyneside</td>
<td>130</td>
<td>125</td>
<td>125</td>
<td>115</td>
<td>155</td>
</tr>
<tr>
<td>Stockton-On-Tees</td>
<td>110</td>
<td>110</td>
<td>120</td>
<td>125</td>
<td>185</td>
</tr>
<tr>
<td>Middlesbrough</td>
<td>135</td>
<td>125</td>
<td>150</td>
<td>145</td>
<td>185</td>
</tr>
<tr>
<td>Durham</td>
<td>185</td>
<td>230</td>
<td>215</td>
<td>220</td>
<td>245</td>
</tr>
<tr>
<td>Newcastle Upon Tyne</td>
<td>185</td>
<td>185</td>
<td>190</td>
<td>200</td>
<td>250</td>
</tr>
</tbody>
</table>

Notes on table
- England totals have been rounded to the nearest 100 if they exceed 1000, and to the nearest 10 otherwise
- Regional totals have been rounded to the nearest 10. Other numbers have been rounded to the nearest 5
- Only the first occasion on which a child started to be looked after in the year has been counted
- Figures exclude children looked after under an agreed series of short term placements
- Historical data may differ from older publications. This is mainly due to the implementation of amendments and corrections sent by some local authorities after the publication date of previous materials

In 2007 in Sunderland the numbers of children leaving the care system was 170, this figure has been fairly consistent since 2007 at 130, only falling to 120 in 2008.

### 5.2 Barriers and difficulties facing grandparent kinship carers

Grandparent/kinship carers provide the highest quality of care and the most secure placements for children in difficult circumstances with little cost to the state (Farmer and Moyers 2009). However, for grandparents and kinship carers the financial, emotional and physical costs are high. Research carried out by Grandparents Plus found that:

> As a result of their caring role over half give up work or reduce their paid hours. Many are likely to experience poverty or poor health as a result… Nearly half are looking after a child with a behavioural problem or a disability. Over half give up work or reduced their hours when they take on the caring role, thus relying upon the benefits system and discretionary local authority allowances which are now being cut.  

- Wellard, S., Wheately W., (2010)

Other recent research shows the complex of barriers and difficulties experienced by grandparents:

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14 All the references like this are from the Department of Education Research and Statistics Gateway - http://www.education.gov.uk/rsgateway/DB/SFR/s000960/index.shtml
older relative carers could feel socially dislocated as they did not fit with parents of the child’s age or with their own friends who no longer looked after dependent children. Many found looking after children tiring when they were older, had less energy and had limited financial resources. Some too had other caring responsibilities for their own elderly parents or a sick partner. (Farmer and Moyers, 2009: p4)

Grandparent carers were sometimes struggling with feelings of loss and guilt about the difficulties of their adult children which had necessitated the children being removed from them or because they had been unable to take on a full sibling group. Others were still grieving for the death of the children’s parents. . (Farmer and Moyers, 2009: p5)

Recent research with kinship carers across the European Union found that kinship carers often face stigma and worry rather than respect and support:

- Kinship carers’ needs, and those of the children in their care, are often unmet.
- The stigma carers feel can be very high and this can be exacerbated by the professionals that work with them.
- Kinship carers can be extremely worried about the power of the state to remove children in their care.

Mentor UK (2010)

Research carried out by Grandparents Plus (2011) found that Grandparents and other family and friends carers who have stepped in to bring up children as a result of parental drug and alcohol abuse were struggling financially and suffering high levels of stress. A continuing source of stress and difficulty for the carer was from the relationship with the drug or alcohol misusing parent and the kinship-carer is providing emotional, practical or financial support to the parent (note that many grandparent kinship carers are also likely to be carers of older relatives). Children of substance misusing parents are likely to have had very difficult experiences before they moved in with the carer as reflected in these statistics from the research.

Almost half (49%) of the carers who are looking after the children due to parental drug or alcohol abuse say that they are looking after at least one child with special needs or a disability…. There is a particularly high incidence of children with emotional and behavioural problems, with 37% saying at least one of the children they are looking after is affected compared with 28% of carers raising children for reasons other than parental drug or alcohol misuse.


The findings of this research in Sunderland resonate with other research carried out with kin-carers in the UK and across the European Union. Most of those involved in the research are uncertain about theirs and their children’s future e.g. retirement, managing teenagers as elderly parents, care of children if the grandparent kinship carers become very ill or die. The research has identified that the barriers and difficulties facing grandparent kinship carers and complex and multidimensional (see figure 1). Grandparent kinship carers face; personal and emotional issues, economic issues, social issues, family issues linked to changed relationships and dynamics, health issues and multi dimensional caring issues. They are often also caring for an elderly parent or a sick or disabled partner as a result their own health needs are completely neglected. The multi-dimensional issues faced by grandparent kinship cares are compounded by a lack of support, knowledge and information and for almost all, a deep mistrust of Children’s Services. Grandparent kinship carers often find themselves in a vicious circle of barriers and difficulties.
One of the research participants described their experience of being a grandparent-kinship carer thus:

“It’s like standing alone in an empty field where there is nothing anywhere. You only find out where there is support if you come across it accidentally, by bumping into someone or happening to have a conversation with someone.”

The following are the details of the barriers and difficulties faced under each theme:

**Lack of support**
- Distrust of social services
- No respite
- No support whatsoever
- A lack of a local sign-posting agency that would be familiar with the position of kinship carers
- Being ‘left to get on with it’ without any available support
- Not enough support for grandchildren’s problems

**Lack of knowledge and information about system**
- No order on child - could not even get passport as no parental responsibility
- Lack of available information and knowledge about rights and entitlement or support networks for kinship carers
- Fear about social services processes and feeling powerless
Personal & Emotional
- Loss of identity of the grandparent kinship carer
- Grieving for loss of self
- Having little left for self
- Having the world on shoulders
- Guilt/ stigma about daughters drug use
- Anger about situation and lack of support for position as grandparent carers
- No recognition
- No life of ones own/ feeling birth parent has taken life away
- Isolation – don’t know anyone else in same position
- Feeling we shouldn’t have this at our time of life

Economic
- Lack of any financial support whatsoever
- Much diminished capacity to earn income
- Financial struggles
- Bringing up children on a retirement pension
- Due to grandfathers illness, grandmother no longer able to work
- Loss of job/ income as a result of having no maternity leave
- Inadequate housing conditions for child
- No money for treats or hobbies for child
- Poverty

Social
- Social isolation
- Not able to make most of retirement
- No holidays
- Not even able to have a night out

Familial
- Managing contact difficult and hard work
- Strain on family relationships
- Other family members creating added pressures ]
- Strain upon relationship between spouses
- Spouses having no time together
- Struggling to cope with teenage problems
- Concerns about behaviour difficulties in grandchildren, particularly in teen years
- Difficulties with managing boundaries with own children who are still abusing substances and alcohol
- Worried that kin-child will have the same problems as birth parent/s

Health & Caring
- Health worries
- Multiple caring responsibilities
- Also caring for elderly husband
- Ill health
- Husband has a progressive illness
- Great-grandmother caring for a kin-child has breast cancer
- Caring for a child with special needs
5.3 Supports and services needed

As part of this research nine grandparent carers completed a survey about what supports are needed by grandparent/kinship carers. Seven were grandparents, one a great-grandmother and on an auntie. Those who specified their ages were between 40 and 67 years old and caring for eleven children aged between 2 years and 15 years old. Three of the children are grown-up, two aged 18 and one aged 20, although they still live at home and two of these are still financially dependent upon their grandparents as they are students.

They were asked to rate a range of different types of support Rate from 0 to 3, with 0 = not useful at all and 3 = very useful. Table 3 shows that there are a whole myriad of support needs. The following scored as the most useful (in order of priority).

- Respite opportunities
- Campaigning and lobbying to change the situation of kinship carers
- Kinship carer network (for mutual support/ self-help)
- Advocacy (e.g. with social services or schools etc.)
- Financial support
- Legal Advice and/ or Information
- One to one support (face to face)
- Support with kin-child(ren's) emotional or behavioural problems, special needs or learning difficulties

The full results and ranking scores are shown in Table 3 below.

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Rating Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respite opportunities</td>
<td>2.9</td>
</tr>
<tr>
<td>Campaigning and lobbying to change the situation of kinship carers</td>
<td>2.8</td>
</tr>
<tr>
<td>Kinship carer network (for mutual support/ self-help)</td>
<td>2.8</td>
</tr>
<tr>
<td>Advocacy (e.g. with social services or schools etc.)</td>
<td>2.8</td>
</tr>
<tr>
<td>Financial support</td>
<td>2.6</td>
</tr>
<tr>
<td>Legal Advice and/ or Information</td>
<td>2.6</td>
</tr>
<tr>
<td>One to one support (face to face)</td>
<td>2.6</td>
</tr>
<tr>
<td>Support with kin-child(ren's) emotional or behavioural problems, special needs or learning difficulties</td>
<td>2.5</td>
</tr>
</tbody>
</table>
When respondents were asked if there is any training for grandparent/kinship carers that they would find useful, the following were identified:

- Boundary management/ how to set clear boundaries especially in relation to caring for child and also providing support to birth-parent who is an addict
- Coping and caring for your own health
- What to expect from services and how to challenge them when we disagree

The need for specialist support services for grandparent kinship carers is noted in other research carried out in Sunderland, South Tyneside and Gateshead:

> There is a need for more specialist grandparent services; as grandparents may often have to look after a grandchild as well as care for their daughter or son who misuses substances. A loss of the role of grandparent to main carer can have a huge impact in terms of employed work, finance and additional responsibility. Grandparents may also find themselves at child protection meetings and have to relate to a myriad of services. It is therefore essential that this specialist group of carers get specialist support. (Hull, 2010: p15).

This research identified specific needs for the following support services:

- Solicitor Advice
- Child Care
- Benefits
- Support
- Training
- Family Interventions
- Out of hours help

In an extensive study exploring the complex needs of kinship carers and their children, Farmer (2009) identifies a range of services to assist kinship carers to deal with multidimensional difficulties and barriers:

- Support with contact issues
- Training to understand and manage the behaviours of the kin-children they were looking after. Practical help with the caring task was also needed such as respite care, short breaks and child sitting to allow for occasional evenings out
- Access to groups of kin carers and links with other kin carers
- Financial help for activities for the children, for school uniforms etc.
- Counselling for kin carers especially in coming to terms with unresolved issues of loss and guilt related to the difficulties of their adult children
- Help from adult services for carers with health problems or who had caring responsibilities for their elderly relatives

Farmer 2009: p23

National Research into the specific difficulties face by kinship carers where there is parental substance misuse recommends the following (Grandparents Plus, 2011).

1. **Recognition of the vital role they play in looking after vulnerable children and keeping them out of the care system.** Including official data on the number of families in this situation.

2. **Respect and support from service providers**, including legal advice and information about financial and other support.
3. **Protection for the impact of welfare reform and cuts to local authority children’s services**, which may hit family and friends carers and the children they are looking after particularly hard. Grandparents Plus are campaigning a national allowance for family and friends carers who look after a child for more than 28 days.

4. **Better access to services for them and for the children** they are looking after including respite care, peer support groups and family group conferencing.

5. **A period of paid leave, equivalent to adoption leave** when they take on the care of a child.

The findings report of EU Kinship Carers Project makes the following recommendations in relation to how government and government agencies can develop systematic and multi-agency responses to the needs of kinship carers and their children:

- *The core needs of carers and the children in their care – which may include financial, material, emotional and physical health issues – must be met by a systemic response by member states.*

- *Agencies beyond social care (for example schools, family doctors, drug services, etc.) should consider the needs of the whole family including kinship carers when developing plans for parents with addictions.*

**Mentor, 2010**

### 5.4 Existing support services

Findings from two significant research projects reveal wide variations on services provided to kinship carers and their children:

*A few authorities are extremely proactive in promoting and supporting such arrangements even when they are not legally obliged to, whilst others seek to avoid providing support wherever legally possible. The majority of authorities have no coherent written approach to family and friends care, and in particular there is an absence of written policies, procedures or guidance on assessment and financial and practical support for the vast majority of children being raised by family and friends carers outside the looked after system.*

*Family Rights Group, 2009 (summary): p3-4*

*In the UK, in the absence of a strong policy steer at national level on family and friends care, individual local authorities have developed policy and practice in a variety of ways. Since some authorities have developed well articulated policies and practice using research evidence, there is much that authorities can learn from each other about policies and arrangements that appear to facilitate good practice.*

*Farmer, 2009: p24*

Research carried out by Grandparents Plus (2011) high levels of dissatisfaction with the support received from social services from Grandparents and other family and friends carers who have stepped in to bring up children as a result of parental drug and alcohol. Another study in the same year, found that kinship carers have to fight hard to access their rights and entitlements and several had made legal challenge. However, more often than not, survey respondents expressed that they are left struggling with inadequate support or no support whatsoever to care for their kin-child(ren).
At the moment we are so stunned on what to do – how can anyone possibly be expected to afford two little kids with no support of any kind.


Family Rights Group has developed a Good practice guide on family and friends care to assist local authorities to make sure kinship carers are appropriately assessed and supported (FRG 2009).

### 5.4.1 Support from Sunderland Children’s Services

Information has been requested from Sunderland Children’s Services about the types of financial assistance and support for grandparent kinship carers has not been received. However the following information has been accessed from research being carried out by the National Association of kinship Carers during 2011.

#### Table 4: Support services provided by City of Sunderland Sunderland Children’s Services for kinship carers and their child(ren)

<table>
<thead>
<tr>
<th>Types of support</th>
<th>Kin-foster carers</th>
<th>Those with ROs</th>
<th>Those with SGOs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial support</td>
<td>Yes</td>
<td>Subject to assessment</td>
<td>Subject to assessment</td>
</tr>
<tr>
<td>Access to support groups</td>
<td>Yes (there are no specific kinship foster carer groups but have full access to mainstream carer groups)</td>
<td>As with Kinship carers</td>
<td>As with Kinship Carers, but also support assessment can lead to ongoing support by After Adoption Workers (who also work with carers who are Special Guardians)</td>
</tr>
<tr>
<td>Assistance with the arrangements for contact between the child(ren) and their parents</td>
<td>Yes</td>
<td>Contact issues are considered during the assessment process. If there are any potential difficulties then court may be requested to make a Supervision Order. Children’s Services will remain involved to facilitate/supervise contact and try to resolve difficulties.</td>
<td>Contact issues are considered during the assessment process. Ongoing support is available from the After Adoption Workers.</td>
</tr>
<tr>
<td>Cash to help with the costs of contact</td>
<td>Yes</td>
<td>Contact arrangements are considered as part of the assessment process. Where there are financial difficulties RO Allowance and SGO Allowance are considered.</td>
<td>As with RO</td>
</tr>
<tr>
<td>Mediation to help resolve difficulties with contact</td>
<td>Yes</td>
<td>As stated contact issues are considered during the assessment process. If there are any difficulties that</td>
<td>Contact is considered as part of the assessment process. Support is available from the After</td>
</tr>
<tr>
<td>Types of support</td>
<td>Kin-foster carers</td>
<td>Those with ROs</td>
<td>Those with SGOs</td>
</tr>
<tr>
<td>------------------</td>
<td>------------------</td>
<td>----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>can not be resolved prior to the making of the order then court may be requested to make a Supervision Order. Children’s Services will remain involved and provide advice and support to try to resolve difficulties and will consider the appropriateness of holding a Family Group Conference. CAFFCAS and Mediation Services are also available</td>
<td>Adoption Service, Family Group Conference, CAFCASS and Mediation Services can also be considered.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Therapeutic services for the child(ren)</td>
<td>Yes</td>
<td>Main stream support available from CAMHS Services, Children &amp; Family Support Services, Specialist support also available e.g. Kite, Kaleidoscope</td>
<td>As above. Family Therapy also available from Children and Family Services if identified as part of support assessment.</td>
</tr>
<tr>
<td>Therapeutic services for the child(ren)</td>
<td>Yes</td>
<td>Main stream support available from CAMHS Services, Children &amp; Family Support Services, Specialist support also available e.g. Kite, Kaleidoscope</td>
<td>As above. Family Therapy also available from Children and Family Services if identified as part of support assessment.</td>
</tr>
<tr>
<td>Respite care for kinship carers</td>
<td>No</td>
<td>Has been provided, but not extensively used.</td>
<td>No</td>
</tr>
<tr>
<td>Mediation if there are disagreement between kinship carers and the parents about important decisions in the child’s life</td>
<td>Yes</td>
<td>Potential difficulties between parents and carers are considered as part of the court process and attempts made to resolve. However with any difficulties subsequently arising, parents/carers can refer for assistance to Children’s Services, CAFCASS, Mediation Services or seek legal advice and return to Court if difficulties can not be resolved Assessment for support is available from After Adoption Workers for SGO Carers.</td>
<td>As with RO</td>
</tr>
<tr>
<td>Training so that you are able to meet the child’s needs.</td>
<td>Yes</td>
<td>Mainstream Support is available e.g. access to Parenting Programmes from Children’s Centres, Sungate etc.</td>
<td>As with RO</td>
</tr>
<tr>
<td>Types of support</td>
<td>Kin-foster carers</td>
<td>Those with ROs</td>
<td>Those with SGOs</td>
</tr>
<tr>
<td>------------------</td>
<td>------------------</td>
<td>----------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Counselling</td>
<td>Yes</td>
<td>Is available from Sunderland Counselling Services. Parents/carers can also access counselling services via their GP</td>
<td>As with RO</td>
</tr>
<tr>
<td>Advice and information</td>
<td>Yes</td>
<td>Available from Social Workers, After Adoption Workers, Counselling Services, Child and Family Support Services, CAMHS, Kaleidoscope, Kite.</td>
<td>As with RO</td>
</tr>
<tr>
<td>Other support services (please state)</td>
<td>Support phone line</td>
<td>In addition to those services indicated above, financial assistance with legal fees have been considered and provided to support some carers making applications to court.</td>
<td>As with RO</td>
</tr>
</tbody>
</table>

**Table 5: Levels of financial assistance paid by City of Sunderland Children’s Services**

<table>
<thead>
<tr>
<th>Categories of care</th>
<th>Rate per week in £s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Guardianship Orders</td>
<td>£86.68 max</td>
</tr>
<tr>
<td>Residency Orders</td>
<td>£86.68 max</td>
</tr>
<tr>
<td>Kinship Foster Carers</td>
<td>£215.74 max</td>
</tr>
<tr>
<td>Other types of order stated</td>
<td>n/a</td>
</tr>
</tbody>
</table>

The questionnaire respondent notes that these rates are not being affected current cuts in public spending, furthermore that Sunderland is introducing a new career progression scheme for all foster carers, including kinship foster carers in April 2011. All foster carers will have the opportunity to be paid a fee as well as the allowance for the child.

The following information about financial assistance is extracted from *Fostering Handbook* (July 2010). It shows that those payments available for foster carers are limited for those with ROs or SGOs.

**Foster carer allowances** - all foster carers are paid an allowance for each child they have in placement.

**Holiday allowances** - during July, all foster carers will receive an allowance, which is equivalent to two weeks of the basic rate payable for the age of child in placement. There is no holiday allowance paid to carers receiving approved Adoption Allowance or Residence Order Allowance.
**Birthday and Christmas allowances** - a payment equivalent to one week’s allowance for the appropriate aged child will be made for each child who has their birthday while placed with a foster carer. There is no Christmas allowance paid to carers receiving an Approved Adoption allowance, Residence Order, or Special Guardianship allowance.

**Emergency placement payments** - defined as an unplanned placement which takes place the same day as a request for the placement is made to the carer.

**Fostering equipment** - new carers - Equipment needed will be identified during the assessment process. The amount of equipment required will be dependent upon the: age, gender and number of children the carers are approved for.

**Transport** - the fostering allowance paid to all carers has an element included to recompense them for transporting foster children on local journeys (e.g., 10 mile round trip), including social, leisure, contact, school and medical.

Section 6, Financial Matters (pp42-49)

**5.4.2 Voluntary support services in Sunderland**

**Sunderland Carers Centre**
12 Toward Road, Sunderland SR1 2QF, 0191 567 3232
Offers a confidential advice, information and support service to carers throughout the City of Sunderland

**Sunderland Area Parents Support (SAPS)** - a community based project that delivers support and services to the families of substance users across the City of Sunderland. Telephone Monday to Friday from 9am till 5pm on 0191 520 3444 or by Mobile on 0791 264 1203 from 9am till 10pm email: southareaparents@hotmail.co.uk website: www.sunderlandareaparentsupport.org/

**5.4.3 National Support Services**

**Grandparents Plus** – a national charity which champions the vital role of grandparents and the wider family in children’s lives - especially when they take on the caring role in difficult family circumstances
info@grandparentsplus.org.uk
http://www.grandparentsplus.org.uk/

**Grandparents Plus** – championing the vital role of grandparents and the wider family in children's lives. Has an advice service for grandparents and other family members or friends who have stepped in to bring up a child who is not their own offering, comprehensive benefits advice, information and signposting on a broad range of areas including housing, employment, debt, education, pensions and social care
T: 0300 123 7015
e-mail: advice@grandparentsplus.org.uk
website: www.grandparentsplus.org.uk/advice
Opening Hours: 10.00am - 3.00pm Monday-Friday
**National Association of Kinship Carers (NAKC)** - an independent association for the purpose of campaigning for better rights and entitlements for kinship carers and children, its vision is the fulfilment of the following rights and entitlements:

- Full recognition by statutory agencies of the particular role and impact of kinship carers
- Comprehensive and accessible free legal information for kinship carers
- All necessary support for children's behavioural difficulties and educational needs
- A right to financial assistance for kinship carers on a par with payments to foster carers
- Social, emotional support and health care for kinship carers
- Changes in social attitudes and political responses to and on behalf of kinship carers

Website: [https://sites.google.com/site/nakinshipcarers/](https://sites.google.com/site/nakinshipcarers/)
Join online [http://www.surveymonkey.com/s/QYW6WBT](http://www.surveymonkey.com/s/QYW6WBT)
Or email: [nakinshipcarers@gmail.com](mailto:nakinshipcarers@gmail.com)

### 5.4.4 Legal information and advice

**Family Rights Group** - advises parents and other family members whose children are involved with or require children's social care services because of welfare needs or concerns. **FREE HELPLINE** - confidential advice service for families living in England or Wales is free and there is no charge for mobile and landline callers - 0808 801 0366 [http://www.frg.org.uk/](http://www.frg.org.uk/)

**Children's Legal Centre** - Provides free legal advice and assistance in many areas of child and family law. If you need legal advice on any topic relating to children, Child Law Advice Line (freephone) on 08088 020 008 [http://www.childrenslegalcentre.com/](http://www.childrenslegalcentre.com/)

**Ridley & Hall Solicitors** - Ridley and Hall's commitment to human rights and our cutting edge legal work means that we can provide advice on the responsibilities of local authorities and we know how to hold them to account for their actions. The Kinship Care Team has a national reputation for working with friends and family carers and works closely with the Family Rights Group, the Grandparents Association and local Fostering support organisations.
Tel: 01484 538 421 email: [info@ridleyhall.co.uk](mailto:info@ridleyhall.co.uk) web site: [http://www.ridleyhall.co.uk/](http://www.ridleyhall.co.uk/)

Under the umbrella of **Elderflower**, Ridley & Hall Solicitors offer specialist advice and representation on Welfare Benefits. Elderflower aims to address the changing needs of families. Sometimes specialist advice is needed for those who need to go to court to resolve issues. As part of Elderflower they are launching **The Grandparents Legal Centre** on 16th June 2011. The centre will provide advice and representation for Grandparents seeking to have contact with their grandchildren and grandparents find that they are caring for children whose parent or carers are involved in Care Proceedings.
5.5 Examples of kinship care support in the North East

The following is a summary of support services that exist elsewhere in the region identified during the course of the research. It is by no means intended to be an extensive list.

<table>
<thead>
<tr>
<th>Agency/Location</th>
<th>Support provided</th>
<th>Contact details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bridges Project, Stockton</td>
<td>Provides group and individual support, counselling and respite breaks for grandparent and family carers affected by drug or alcohol misuse</td>
<td>Tina Williams, 01642 605 222 <a href="mailto:Bridges@btinternet.com">Bridges@btinternet.com</a></td>
</tr>
<tr>
<td>Escape, Blyth, Northumberland</td>
<td>Spectrum (group for kinship carers relating to substance and alcohol)</td>
<td>Elaine Toopchizadagan, 01670 352 700 <a href="mailto:elaine.toopchizadagen@escapefamilysupport.co.uk">elaine.toopchizadagen@escapefamilysupport.co.uk</a> 93 Emily Davison House Blyth, Northumberland NE24 2JR</td>
</tr>
<tr>
<td>Families First, Middlesbrough</td>
<td>Provides a range of Support for kinship carers</td>
<td>Kay Duffy 1 Albert Terrace Middlesbrough TS1 3PA Tel - 01642 354070 Fax - 01642 354080 Email <a href="mailto:kay_duffy@middlesbrough.gov.uk">kay_duffy@middlesbrough.gov.uk</a> <a href="http://www.option2.org/Families%20First%20Middlesbrough.htm">http://www.option2.org/Families%20First%20Middlesbrough.htm</a></td>
</tr>
<tr>
<td>Liberty from Addiction Chester-le-Street</td>
<td>Support for parents and families of people affected directly and indirectly by substance misuse in Durham, Chester-le-Street and the surround areas</td>
<td>0191 387 1111 <a href="mailto:info@libertyfromaddiction.org.uk">info@libertyfromaddiction.org.uk</a> Craghead Road Pelton Fell Chester Le Street County Durham DH2 2NH</td>
</tr>
<tr>
<td>PROPS – Newcastle and North Tyneside</td>
<td>Provides support to partners, carers and families affected by someone else’s drug use.</td>
<td>tel. 0191 226 3440 email. <a href="mailto:office@newcastleprops.org.uk">office@newcastleprops.org.uk</a> tel. 0191 270 4248 email. <a href="mailto:admin@northtynesideprops.org.uk">admin@northtynesideprops.org.uk</a> <a href="http://www.newcastleprops.org.uk">www.newcastleprops.org.uk</a></td>
</tr>
</tbody>
</table>
### 6. Action Plan

#### Priority 1: Awareness-raising

<table>
<thead>
<tr>
<th>Target Outcomes</th>
<th>Key Activities</th>
<th>Tasks</th>
<th>Target Date</th>
<th>Target Outputs</th>
<th>Lead</th>
<th>How measured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Better understand the issues, barriers and difficulties faced by friends and family carers and the children they care for by all relevant agencies</td>
<td>Disseminate findings of research, policy and delivery plan to Children’s Services and other agencies involved in the support of friends and family carers and the children they care for</td>
<td>Disseminate finding of action research, to include: • Press release • Websites update - Carers Centre / Council • Presentation to ‘Behind Closed Doors conference (8.8.11)</td>
<td>From July 2010</td>
<td></td>
<td>More than Grandparents (MTG)</td>
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<tr>
<td></td>
<td>Presentation to Children’s Trust on findings of research, policy and delivery plan</td>
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<td>18.10.11</td>
<td>Report on how we disseminate</td>
<td>MTG/ Children’s services</td>
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<tr>
<td></td>
<td>Whole Family Approach Steering Group to be briefed</td>
<td></td>
<td>Sept 2011</td>
<td></td>
<td>Head of safeguarding</td>
<td></td>
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<tr>
<td></td>
<td>Raise awareness with CAF Panels</td>
<td></td>
<td>Oct 2011</td>
<td>All 5 CAF panels aware</td>
<td>Head of safeguarding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Briefing for head teachers and school governors</td>
<td></td>
<td>Dec 2011</td>
<td>Briefing in newsletter</td>
<td>Head of safeguarding</td>
<td></td>
</tr>
</tbody>
</table>

#### Priority 2: Enabling informed choices

<table>
<thead>
<tr>
<th>Target Outcomes</th>
<th>Key Activities</th>
<th>Tasks</th>
<th>Target Date</th>
<th>Target Outputs</th>
<th>Lead</th>
<th>How measured</th>
</tr>
</thead>
<tbody>
<tr>
<td>More confident and informed friends and family carers</td>
<td>Enable friends and family carers to make informed</td>
<td>Family Rights Group (FRG) booklet and information about specialist advice and services available to families</td>
<td>Ongoing</td>
<td></td>
<td>Children’s Services</td>
<td></td>
</tr>
</tbody>
</table>

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15 Such as, Schools, Adult Services, Sunderland Teaching Primary Care Trusts (including Health Visitors and Midwives), GPs, Drug & Alcohol Action Teams, Welfare Rights Services, Sunderland Carers Centre, Children and Adolescent Mental Health Services (CAMHS), Sunderland Area Parents Support (SAPs) and drug treatment agencies etc.
<table>
<thead>
<tr>
<th>Priority 4: Support and training for friends and family carers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target Outcomes</strong></td>
</tr>
</tbody>
</table>
| More knowledge and increased access to rights and entitlements | All relevant agencies to promote *More than Grandparents (MTG)* to grandparent friends and family carers | Circulate information on MTG to all relevant agencies for dissemination  
Children’s Services to circulate information to all friends and family carers currently receiving and allowance and from then on to all new friends and family carers | October 2011 | Information leaflet sent to 193 in receipt of allowance | MTG          | Children’s Services      |

16 Family and Friends Care: Statutory Guidance for Local Authorities, Department of Education (March 2011)
| Increased sense of well being and less isolation | Sunderland Children’s Services contribute to developing sustaining MTG and other local friends and family support networks in conjunction with voluntary and statutory partners. | Explore avenues for future funding to sustain MTG (e.g. area committees, Gentoo etc.) Explore potential of expanding More than Grandparents Sunderland across South of Tyne Identify wider support needs of friends and family carers. i.e. other than those where issues is birth parents substance misuse (began with initial focus group around policy on 19.7.11) | Ongoing | Children’s Services, MTG, Sunderland carers Centre | Children’s Services |

**Target Outcomes** | **Key Activities** | **Tasks** | **Target Date** | **Target Outputs** | **Lead** | **How measured**
--- | --- | --- | --- | --- | --- | ---
| Target Outcomes | Key Activities | Tasks | Target Date | Target Outputs | Lead | How measured | Target Outcomes | Key Activities | Tasks | Target Date | Target Outputs | Lead | How measured |
| Explore the potential for developing and implementing aspects of the unsuccessful KEEP bid to the Department of Education | Exploratory meeting between Parenting Strategy Officer, Children’s Services Potentially promote the development of wider support networks through the delivery of a bespoke training programme for friends and family carers | 15.9.11 | Sunderland Carer’s Centre/ Children’s Services | | | | | | | | | | 17 Keeping Foster and Kinship Parents Supported and Trained. |
Friends and family carers and children will not be disadvantaged in cases where different authorities are dealing with the child’s case (i.e. other than Sunderland)

Promoting consistency in how grandparent/kinship carers access financial and other supports where another local authority has dealt with the child(ren)

Share policy and delivery plan and emerging good practice with Heads of Safeguarding across region

Promote awareness friends and family carer issues in CAF processes across the region

Work towards standardising how allowance are calculated across region (drawing upon work from Stockton)

Priority 7: Ensure family and friends carers influence policy and approaches

<table>
<thead>
<tr>
<th>Target Outcomes</th>
<th>Key Activities</th>
<th>Tasks</th>
<th>Target Date</th>
<th>Target Outputs</th>
<th>Lead</th>
<th>How measured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Better joint working between adult and children’s services and other agencies</td>
<td>Reflect research findings in the Sunderland’s Local Family and Friends Care Policy and delivery plan</td>
<td>Service of Works – potentially group meeting 13/??/11 – July 12-2p.m.</td>
<td>13.07.11</td>
<td></td>
<td>Michael Elsy (Policy)</td>
<td></td>
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<tr>
<td>Policy to incorporate Whole Family Approach</td>
<td>Family and Friends carers focus group</td>
<td></td>
<td>19.7.11</td>
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<tr>
<td>Integrate a whole family approach to friends and family carer policy and practice involving all relevant agencies</td>
<td>Focus group with children living in Friends and Family Care</td>
<td></td>
<td>Aug 2011</td>
<td></td>
<td></td>
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<tr>
<td>Policy to incorporate Whole Family Approach</td>
<td>Policy to scrutiny panel</td>
<td></td>
<td>30.9.11</td>
<td></td>
<td>Michael Elsy (Policy)</td>
<td></td>
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<tr>
<td></td>
<td>Policy to Cabinet</td>
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<tr>
<td></td>
<td>Policy to scrutiny panel</td>
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<tr>
<td>Produce delivery plan for implementation of policy</td>
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<td>October 2011</td>
<td></td>
<td>Council Policy Directorate</td>
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</tbody>
</table>

Priority 6: Understanding numbers of friends and family carers

<table>
<thead>
<tr>
<th>Target Outcomes</th>
<th>Key Activities</th>
<th>Tasks</th>
<th>Target Date</th>
<th>Target Outputs</th>
<th>Lead</th>
<th>How measured</th>
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<tr>
<td>A better evidence base of the extent of friends and family care in Sunderland and what works in supporting family and friends carers to meet children’s needs</td>
<td>Gain a more accurate picture of the number of and types of legal orders granted for grandparent/kinship carers in Sunderland</td>
<td>Improve data collection Establish a baseline for friends and family carer</td>
<td>April 2012</td>
<td>Reports from ICS</td>
<td>Children’s Social Care Performance Team – Andrew Baker</td>
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<tr>
<td>Gather more information and knowledge about how friends and family come to be caring for children (e.g. instances where substance misuse is factor)</td>
<td>Undertake needs assessment of all known friends and family carers</td>
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<tr>
<td>Increase knowledge about extent of informal arrangements for friends and family care</td>
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<td></td>
<td>Ongoing</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
References


City of Sunderland (24th June 2008) Minutes of the Corporate Parenting Board Meeting held on in Committee Room 1, Civic Centre, Sunderland at 5.00pm


City of Sunderland Council (June 2009), *Foster Carers Handbook* http://www.sunderland.gov.uk/CHttpHandler.ashx?id=8937&p=0.


Farmer, E., Professor, Moyers, S., (2009), *Executive Summary: Kinship Care, Fostering Effective Family and Friends Placements*, School for Policy Studies, University of Bristol.


Sunderland Children’s Trust (2009a), Young People’s Plan 2009-10

Sunderland Children’s Trust (2009b), Prevention Strategy 2009-12 (draft)

Templeton, L., (September 2010), *The experiences and needs of grandparents who care for their grandchildren because of parental substance misuse*. Aquarius, Birmingham.


Appendix One: Letter to Sunderland Children’s Services

21st October 2010

Mr Keith Moore
Acting Executive Director of Children’s Services
Sunderland City Council
Civic Centre
Burdon Road
Sunderland SR2 7DN

Dear Mr Moore

Action research to identify and responding to the needs of grandparent kinship carers in Sunderland

I am writing to request the support of your department with our action research to identify and respond to the needs of kinship carers. This research specifically relates to situations where the birth parents are involved in drug and alcohol abuse and it is grandparents who are looking after the child(ren). This is because we know that there are specific difficulties and barriers to overcome in this situation. However, we acknowledge there will be some commonality of issues with others who are providing care to a child or children of a family member as a result of traumatic circumstances within that family particularly where there has been intervention.

The proposal has come about because we are becoming aware of more and more incidences in Sunderland where grandparents are faced with difficult and emotional choices related to this situation. We know from our own experiences that there grandparents need support to deal with changes in their lives and overcome isolation and emotional impacts. Yet we know of no formal support networks and groups in Sunderland and we do not have a clear idea of the extent of the problem, although our anecdotal evidence suggests that it may be widespread.

The research questions we are requesting your input into addressing are:

1. What is the extent of kinship care of children in Sunderland (i.e. how many do kinship carers come to the attention of Children’s Services)?
   a. Do you know what proportion of these cases are grandparent kinship carers? If so how many?
   b. Do you know what proportion are situations where the birth parents are involved in drug and alcohol abuse, or the birth parent(s) have died as a result of drug and alcohol abuse and it is the grandparents who are looking after the child(ren)? If so, how many?
2. Can you provide numbers of the status of kinship carers, e.g. how many have Residency Orders, how many have Special Guardianship Orders, how many are approved as Kinship Foster Carers?
3. What do you know about the barriers and difficulties kinship carers/grandparents face in the course of their everyday lives?
   a. Do you know of any specific difficulties faced by grandparent kinship carers?
   b. Do you know of any specific difficulties relating to situations where birth parents are involved in drug and alcohol abuse and grandparents look after the child(ren)? Or where the birth parent(s) have died as a result of drug and alcohol abuse?
4. What support services does your department provide for kinship carers and their child(ren)?
5. How many kinship carers are supported by your department (financially or otherwise) and what form this takes?
6. Have you identified/or do you know of any gaps in services for kinship carers and their child(ren)? And what these are?
7. Do you know of any good practice examples of support for kinship carers that exist outside of Sunderland, particularly for grandparents who are looking after the child(ren) where the birth parents are involved in drug and alcohol abuse?

The research is being conducted by two grandparent kinship carers with the support of Sunderland Carers’ Centre. The research participants (grandparent kinship carers) will be involved in the process of interpreting the findings and making recommendations. We will do this informally by holding two or three coffee mornings. An event will be held at the end of the action research process to launch a support network for Sunderland. The findings of the action research will be presented in written report form to the relevant bodies.

We look forward to hearing from you with details of how your department can assist us with progressing this research. If you need to know more about the research please contact by email: sue@suerobson.co.uk or by telephone 07813 109 215.

Yours sincerely

Sue Robson and Kate Conqueror
Researchers
Appendix 2: Grandparent kinship carers survey

Addressing the barriers and difficulties faced by grandparent kinship carers

More than Grandparents (Sunderland) are conducting action research to identify and respond to the needs of kinship carers. The research to date has found that grandparent kinship carers in this situation are often caught in a vicious circle of barriers and difficulties. The next stage is to find out what supports are needed by grandparent/kinship carers.

More than Grandparents Sunderland is an independent support and campaigning network led by and for grandparent kinship carers, particularly those who are caring for their grandchildren as a result of their parents’ substance misuse. More than Grandparents are aiming to find solutions to the barriers and difficulties faced by grandparent kinship carers in this situation.

This information is being recorded and stored anonymously and will only be used for the purpose of informing More than Grandparents Research - names and personal details will not be disclosed in the research report or to any external parties. For more information contact:
Kate - Telephone: 0191 5673232 or
Sue – E-Mail: sue@suerobson.co.uk or Telephone 07813 109 215

Would any or the following type of support be useful for you? Rate from 0 to 3, with 0 = not useful at all and 3 = very useful.

<table>
<thead>
<tr>
<th>Types of support</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
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</thead>
<tbody>
<tr>
<td>Advocacy (e.g. with social services, schools etc.)</td>
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<td>Benefits Advice</td>
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<tr>
<td>Campaigning and lobbying policy makers to change things for kinship carers</td>
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<tr>
<td>Child Care</td>
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<tr>
<td>Counselling for children (bereavement, attachment, dealing with parental substance abuse, etc.)</td>
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<tr>
<td>Counselling for kinship carers (e.g. unresolved issues of loss, guilt, anger etc.)</td>
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<tr>
<td>Financial assistance</td>
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<tr>
<td>Holistic therapies</td>
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<tr>
<td>Kinship carer network (for mutual support/ self-help)</td>
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<td>Legal Advice and/ or Information</td>
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<td>One to one support (face to face)</td>
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<tr>
<td>One to one support (outreach/ home visits)</td>
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<tr>
<td>One to one support (telephone)</td>
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<tr>
<td>Peer support groups (with other kin-carers)</td>
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<tr>
<td>Respite opportunities</td>
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<tr>
<td>Social activities and outings</td>
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<tr>
<td>Types of support</td>
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<tr>
<td>Support or assistance with contact issues with parents</td>
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<tr>
<td>Support with housing needs</td>
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<tr>
<td>Support with kin-child(ren’s) emotional or behavioural problems, special needs or learning difficulties</td>
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<tr>
<td>Telephone help-lines</td>
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</table>

Is there any other support you would find useful?

Is there any training for grandparent/kinship carers that you would find useful? YES/ NO (delete one)
If yes, please say what would be useful?

If you have said you would like to meet with other grandparent kinship carers—where would be the best place(s) for you to meet with others?

Would you travel out of the Sunderland to meet other kin-ship carers (with travelling expenses were provided)? YES/ NO/ DON’T KNOW (delete as appropriate)
If yes, please give an indication of where you would travel?

Your name:  
Part of Sunderland where you live:  
Email (if you have one):  
Phone number:  
Number of kin children you are caring for:  
Ages of the kin children you are caring for:  
Relationship to children:  
Your age (optional):  
Is there anything else you want to say?