

Strengthening Kinship Care in Aotearoa New Zealand

Executive Summary
October 2025



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This is the summary of the “Strengthening Kinship Care in Aotearoa New Zealand Research Report”, which can be found at familyforeverychild.org/nz

To reference the full report, please cite:

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We gratefully acknowledge all those who have contributed to bringing this report to life. The beating heart of Strengthening Kinship Care in Aotearoa New Zealand is the kinship carers and practitioners who shared their wisdom and lived experiences.

To support this project, Family for Every Child New Zealand member, key partner agencies and academics were brought together to create an advisory rūpū (group). The advisory rūpū and their guidance throughout the research process - from initial research design, participant recruitment and ongoing support and sharing of their time, knowledge, experience and expertise was invaluable. Ngā mihi nui ki a koutou (thank you very much to you all):

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Whitireia and WelTec

Professor Nicola Taylor,
Director of the Children's Issues Centre
Faculty of Law, University of Otago

Through the support of the advisory rūpū and wider networks of the research team Braden had the honour of connecting with and interviewing phenomenal kinship carers and professionals working with kinship carers.

To all the participants, thank you so much for the generosity of your time, sharing your knowledge, stories and experiences – thank you, without you, this research would not have been possible. Your words and experiences have truly impacted on the research team. Thank you for trusting them and Family for Every Child to share your journey of kinship care. This research has highlighted the hidden role you play in often challenging circumstances to ensure tamariki (children) feel loved, cared for, safe, and can grow up within their family.

Family for Every Child initiated this research through Dr Michelle Egan-Bitran, Programme Advisor for New Zealand and the Pacific, who served as Project Manager and co-researcher. She worked closely with the Family for Every Child global team and Dr Braden Clark of Relate Services, the contracted lead researcher.



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Foreword

All mokopuna (children) in Aotearoa New Zealand and around the world have rights to be safe in all circumstances, and to belonging and connection as they grow up, especially to their family and whānau. Kinship care – the practice of extended family and whānau caring for children in formal State care arrangements through Court processes or informal arrangements within kin – is important when it comes to making children's rights real, consistent with the United Nations Convention on the Rights of the Child.

Internationally, kinship care has become a favoured approach for the care of children who are unable to be looked after by their parents. This is to be welcomed, and in Aotearoa New Zealand, this concept carries deep cultural, emotional and social significance, having been practiced for generations. Rooted in Māori principles of whānau, whakapapa and mana motuhake, for mokopuna Māori and whānau Māori, kinship care is crucial in maintaining whānau, hapū and iwi connections, and in continuing links to mātauranga Māori, including reo and tikanga.

Acknowledging these specific layers of importance of kinship care within whānau Māori, kinship care is important too, for mokopuna from all backgrounds, because it is about ensuring mokopuna safety and care, while maintaining whānau relationships and connections, emotional security and cultural belonging and identity.

Strengthening Kinship Care in Aotearoa New Zealand is a welcome report from Family for Every Child, outlining the continued need to strengthen how we care for mokopuna in our country. Following last year's launch by the organisation in New Zealand of Global Kinship Care Week in response to the findings of the Royal Commission into Abuse in Care, this new research highlights the lived experiences of kinship carers who are providing vital care and support to mokopuna, and shares insights from professionals working alongside them. I hope this report lands in the hands of policy-makers, government leaders and decision-makers, so that kinship care can be better recognised and supported, to give greater effect to the rights and needs of mokopuna.

As Children's Commissioner, I have the privilege of meeting mokopuna from diverse communities across the motu, including those with experience of kinship care arrangements, and those who have been removed from the care of their wider family and whānau. What comes through strongly from mokopuna is the importance of being safe and experiencing ongoing belonging and connection to their family and whānau – recognising that these two things can occur at the same time. Mokopuna often remind me that it is our threads of family and whānau culture and identity that weave together to create our sense of self and belonging. When I have had the opportunity to meet kinship carers, they tell me about the intergenerational realities of kinship caring, the gaps in support to care in trauma-informed ways, as well as a lack of access to sufficient practical resources, including financial support to meet the needs of mokopuna in their care.

The concept of kinship care is about more than parental responsibilities and caregiving – it's the embodiment of a wider commitment to the wellbeing and safety of children within their familial and whakapapa context. At its heart, it's about a collective responsibility for mokopuna, while at the same time allowing for a more flexible, tailored approach to mokopuna care, respecting



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each child's unique background and needs. As outlined in this report, those who step up to nurture and protect their kin through difficult times are providing an essential link for mokopuna to their whakapapa and wider community. They are weaving vital connections for their whānau and future, and I note that a significant number of the kinship carers interviewed for this research are whānau Māori. As the findings of this research make clear, Aotearoa New Zealand needs to ensure better support for all people providing kinship care. This is highlighted by the UN Committee on the Rights of the Child's most recent Concluding Observations on New Zealand, which recommend greater support for families, including kinship carers, and an increased focus on preventing mokopuna Māori from being in the State care system. Drawing on day-to-day experiences, Strengthening Kinship Care in Aotearoa New Zealand shows in practical terms the need for a care system that recognises and supports kinship care in all its forms, by providing families and whānau with the resources and support they need to truly thrive.

Kinship care acknowledges that children are not isolated beings but rather taonga within a constellation of relationships, bound together by whakapapa. Zooming out further, we must all take responsibility for the ecosystems that nurture our country's children as they grow. I am grateful for research such as this – albeit small scale – which makes an important contribution to growing understanding of the fact that the experiences of the villages around children have a direct impact on mokopuna themselves. After all, as a wealth of wider evidence over many years shows, when families and whānau thrive, mokopuna are much more likely to thrive too. Ngā mihi nui ki a koutou, to the whānau, caregivers and kaimahi who shared their valuable time, lived experiences and perspectives into this report, so that this kaupapa can be better understood.

It's my hope that this report sparks action: increased collaboration, understanding and support for those who step up to provide this vital care, so that all mokopuna in Aotearoa New Zealand grow up safe and surrounded by love, stability and a strong sense of belonging.



Nāku noa, nā

Dr Claire Achmad
Te Kaikōmihana mo Ngā Tamariki o Aotearoa
Children's Commissioner



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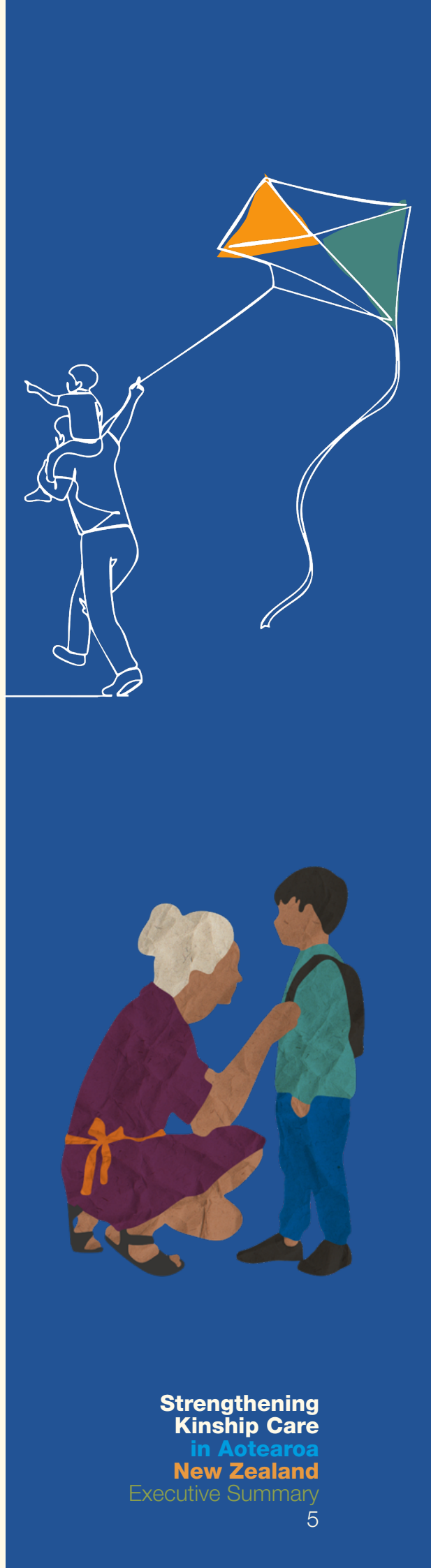
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Children have the right to grow up in a safe, loving family and whānau (family) environment. When children cannot live with their parents, they should live with their family. This is what is known as kinship care. Kinship care is important as it upholds children's rights, supports their identity, and is often preferred by children.

Māori are tangata whenua (the indigenous people of Aotearoa New Zealand). Māori have been subject to colonisation, racism, oppression and ongoing coloniality. This has resulted in the overrepresentation of Māori within various systems (such as child protection, justice, and mental health systems), resulting in intergenerational trauma, cultural disconnection, poverty, and disadvantage. Repeated reviews have called for urgent reform of the New Zealand child protection and care systems to protect children's wellbeing. Most recently, the Royal Commission of Inquiry into Historical Abuse in State and Faith-Based Care exposed widespread harm and abuse in State care, urging a shift for a greater focus on supporting family, whānau, hapū, iwi, and aiga caring for children and young people.

Within Aotearoa New Zealand, an estimated 16,000 to 22,000 children are living in kinship care arrangements (between 3.2% and 4.3% of all children in Aotearoa New Zealand). Most of these arrangements occur outside formal statutory kinship care. Despite the large numbers of children living in kinship care arrangements, very little Aotearoa New Zealand research has been completed.

This gap underscores the urgent need for evidence to inform policy, strengthen support, and uphold the rights and wellbeing of children and their whānau.



About This Research

This report presents findings from a small-scale qualitative study commissioned by Family for Every Child, examining how kinship care is understood and experienced in Aotearoa New Zealand. It explores the challenges faced by kinship carers and their support needs. The research also situates Family for Every Child's (2024) global best practice guidelines within the New Zealand context, guided by a commitment to decolonising knowledge and practice. This study is underpinned by Te Tiriti o Waitangi (the founding document of Aotearoa New Zealand) and international human rights frameworks, including the United Nations Convention on the Rights of the Child 1989 (UNCRC), United Nations Declaration of the Rights of Indigenous People 2007, and United Nations Convention on the Rights of Persons with Disabilities 2006 (UNCPRD).

This study explored informal and formal kinship care in Aotearoa New Zealand (excluding State care),¹ guided by four key research questions:

- 1. What are the unique cultural definitions and understandings of kinship care in Aotearoa New Zealand?**
- 2. What challenges do kinship carers face in providing stable, long-term care for tamariki and rangatahi?**
- 3. Which supports are most effective in enabling kinship carers to nurture and sustain whānau-based care?**
- 4. How can care reform be guided by principles of children's rights and decolonisation to better serve the needs of Māori children and their whānau?**

¹ Statutory kinship carers were not able to be recruited for this study due to approval for this research not being able to be obtained from Oranga Tamariki. We did not speak with children due to the scope and timeframes for this research. Gathering children's views on kinship care is an important and much needed area of further research.



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How We Completed this Research

This research utilised qualitative semi-structured interviews to explore the lived experiences of kinship care in Aotearoa New Zealand. We engaged with 17 kinship carers across 15 households and 4 professionals who support them. Thematic analysis was used to interpret the interview data, revealing key insights into kinship carers experiences, challenges, and support needs. An advisory rūpū provided cultural and analytical guidance throughout the project, shaping both the findings and recommendations. Ethical approval was granted by the Aotearoa Research Ethics Committee (AREC_24_69) in March 2025.



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What we learned

About Kinship Care in Aotearoa New Zealand

What is kinship care in Aotearoa New Zealand?

Kinship care was broadly understood as family stepping in to care for children when they could not remain with their parents. While most participants defined this as care provided by relatives, a few extended the concept to include close family friends. For Māori, kinship care was deeply rooted in cultural practices and framed as whānau care, atawhai, and whāngai, reflecting collective approaches to raising children found within te ao Māori.

“

It's whānau just all supporting each other and stepping in when you have to so that it doesn't get any worse and trying to do our best for the children.

(KC4)

”

Kinship care was consistently found to support and ensure children's safety and wellbeing. Nearly all kinship carers started to provide care due to concerns about parental care, commonly involving mental health issues, family violence, substance abuse, and neglect. These challenges often occurred together, creating complex and challenging circumstances for children and kinship carers who were left to navigate them with limited support.

Providing kinship care can be challenging but rewarding. Kinship care brings both deep rewards and significant challenges. Kinship carers often step into complex situations, supporting children with additional needs while managing shifting family dynamics and navigating fragmented support systems. Many also struggle to prioritise their own wellbeing, balancing caregiving with personal resilience in the absence of formal recognition or consistent resources.



“

She [mother] was having fights with the guy she was with and all sorts of dramas. And she'd dropped her [baby] on her head a couple of times, and she'd ended up in hospital ... There were all sorts of other things going on. I was getting phone calls from the people she was living with saying that she had been left screaming in the crib for hours. And drugs, obviously, and all of that kind of stuff.

(KC2)

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Providing kinship care can be challenging but rewarding

Kinship care brings both deep rewards and significant challenges. Kinship carers often step into complex situations, supporting children with additional needs while managing shifting family dynamics and navigating fragmented support systems. Many also struggle to prioritise their own wellbeing, balancing caregiving with personal resilience in the absence of formal recognition or consistent resources.

Children in kinship care often have additional needs

Kinship carers in this study showed profound awareness, empathy and insight into the emotional and psychological impacts of children's past experiences, including confusion over parental absence, anxiety, behavioural challenges, and suicide attempts. Many children also presented with undiagnosed disabilities, including neurodevelopmental conditions such as foetal alcohol spectrum disorder and attention deficit hyperactivity disorder, alongside other health needs. Despite these additional needs, the study found kinship carers often struggled to find or access services which support or meet these needs, leaving them to navigate caregiving with limited professional support.

“

She was attempting to take her life and stuff like that. And getting ICAMHS and counselling for her was a struggle. Like, you know, pretty much that we were being told like she actually has to actually, really, really try before we'll step in here. Because, you know, like we're just overwhelmed. And it was like, that's not good enough. ... We ended up getting counselling through the community house for her, which then got ICAMHS mental health really involved because of what she was saying to them.

(KC12)

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Navigating changing relationships

Relational connections are at the heart of kinship care. When care arrangements begin, carers, tamariki, parents, and wider whānau navigate shifting roles, responsibilities, and emotional landscapes. These relationships can offer support, but can also generate tension, especially as boundaries and expectations evolve. Figure 1 on the next page illustrates the complex interconnected relational ecosystem of kinship care, highlighting the interconnected roles of tamariki, family, whānau, hapū, iwi, parents, kinship carers, and broader social ties. Surrounding these networks are the systems, services, and organisations that influence and interact with kinship care.



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Figure 1:

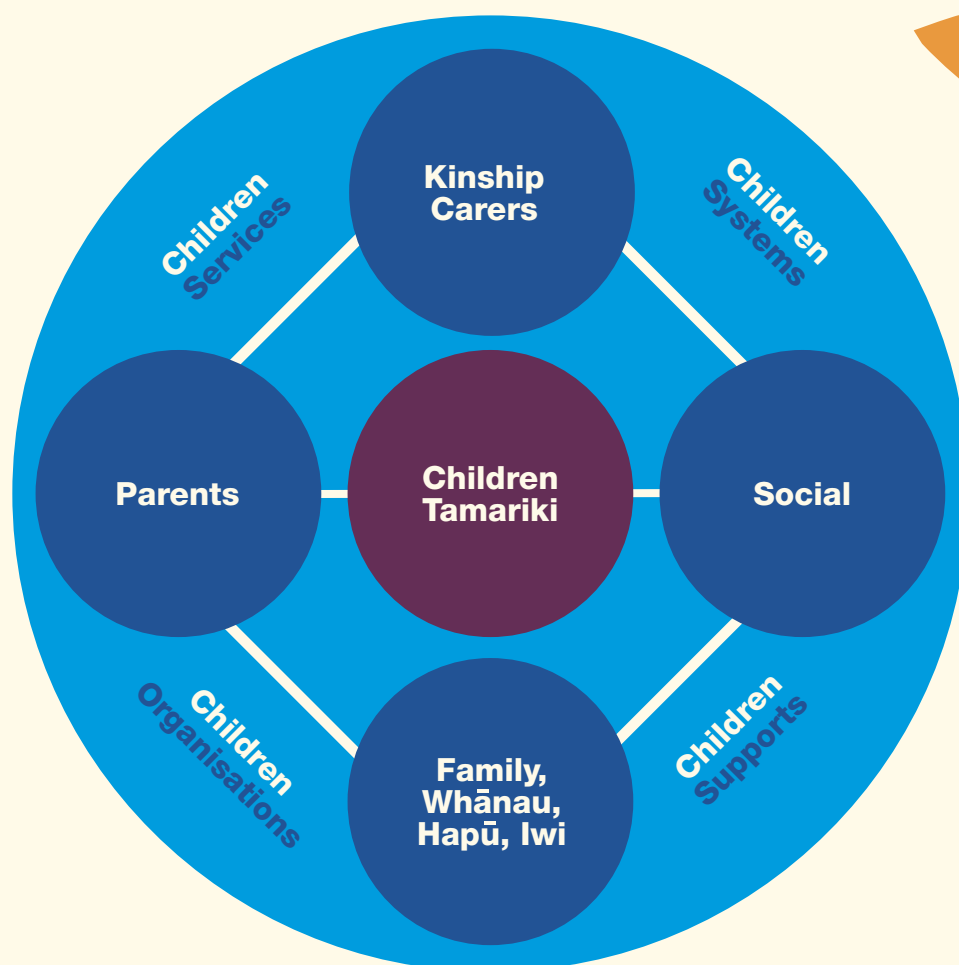


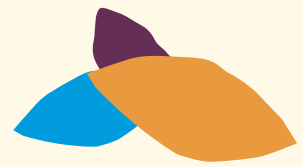
Figure 1: Kinship carers navigate relationships between themselves, children, parents, family, and social. The supports, services, systems, and organisations need to provide wraparound support.



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Changes in relationship with the child



This study reveals a significant shift in relational dynamics once kinship care begins. Carers were acutely aware that the child was not their own, and stepping into a caregiving role reshaped their identity and relationships within the family or whānau. For grandparent carers in particular, the shift from a traditionally nurturing, 'fun' role to one of daily parenting which requires providing structure, discipline, and emotional support, often created tension and emotional complexity. This redefinition of roles underscores the need for tailored support that acknowledges both the relational and practical realities of kinship care.

“

You've got to be the parent. So, you've got to be good and bad, you know. And, whereas when you're a grandparent, I guess you can just be the good and fun person to be with kind of thing.

(KC2)

”

Navigating ongoing relationships with the parents and family

Kinship care, by its nature, involves navigating layered, often complex family relationships, including with the child's parents and wider whānau, hapū, and iwi. This study found significant variation in the relationships between children in kinship care and their parents, ranging from informal visits to Family Court-mandated supervised contact. Some children did not have ongoing contact with one or both of their parents. Court-ordered arrangements frequently introduced logistical and financial burdens, including the cost of contact centres or the expectation that kinship carers themselves facilitate and supervise contact, adding further strain to already complex caregiving roles.

“

They disengaged right from the beginning. I think to some extent they love their son ... But then as years have gone by, there's not been that need to come back and build a relationship with him ... Pretty sad, but that's what it was.

(KC8)

”

Kinship carers often grappled with complex, conflicting emotions around maintaining contact between children and their parents. Many felt torn between supporting the child–parent relationship and protecting the child from harmful parental behaviour. This tension was compounded by carers' own relationships with the parents, frequently their own children, adding layers of emotional complexity and strain. While some carers described cooperative and supportive dynamics, others faced volatility, conflict, and even violence, underscoring the need for trauma-informed, culturally responsive support systems.



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The study also highlighted shifts in relationships between children, carers, and the wider family or whānau. For some children, kinship care enabled reconnection with extended family they had been isolated from while living with their parents. Grandparent carers observed shifts in their relationships with grandchildren, as caregiving responsibilities reshaped roles and expectations. At the same time, some carers faced tension with wider whānau who struggled to understand or accept why the kinship carer had assumed the caregiving role, highlighting the emotional complexity and social negotiation inherent in kinship care.

“

I don't really want her to have anything to do with her mother and father because of what's gone on in the past with them and the violence, the arguing... I don't want that rubbing off on the little ones. But at the same time, I know she needs to have that relationship with her parents.

(KC3)

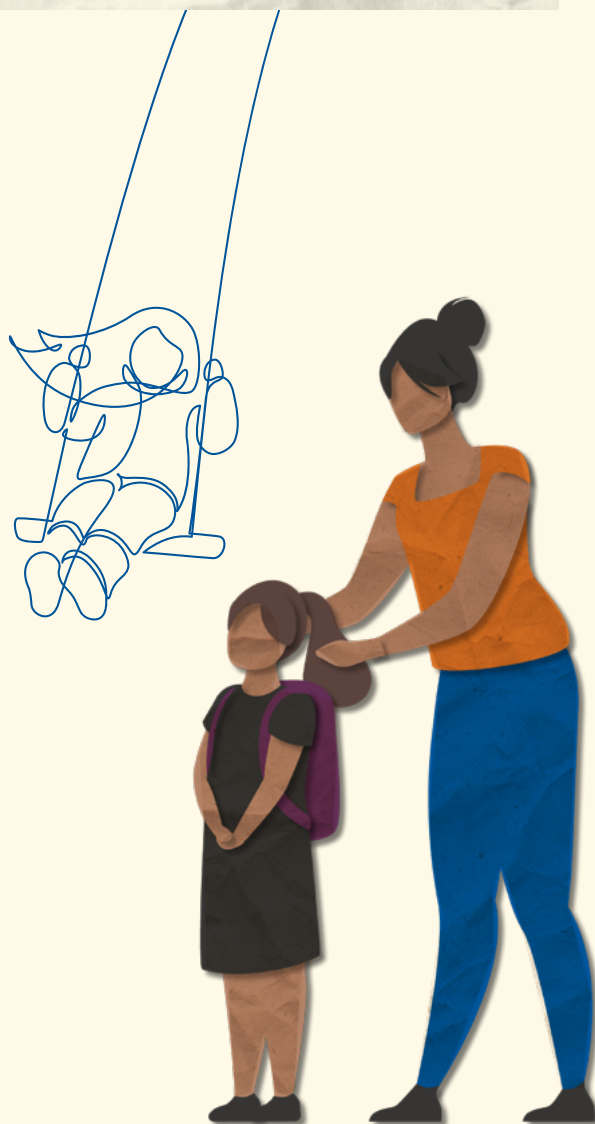
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“

It's hard being grandmother to your ... other grandchildren, you know. They miss out. Because when they come to my house, I'm not like the fun granny that I used to be with them. Because I'm tired and I'm stressed, and my house is dirty. ... Because even one of the other young grandchildren said, "Granny, can we do some baking like we used to?" And I'm like, "oh s*. Really?" Whereas before, when they used to come, you were like a normal old granny.**

(KC1)

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Changes in peer and social support

Kinship carers often experienced significant changes in their social and peer relationships after taking on caregiving roles. While some were able to draw on existing support networks for advice and emotional support, many, especially grandparent carers, described feeling they were in a different life stage to their peers due to the demands of caregiving. The responsibilities of care, compounded with financial strain, meant many kinship carers could no longer participate in the activities they once enjoyed.

“

We used to quite often go out to dinner on the weekend or, you know, do something else that might involve alcohol and stuff. And then we suddenly had to remember we had [child], and, you know, the bedtime story, reading bedtime stories to her and all that sort of thing.

(KC10)

”

Navigating systems can be challenging for kinship carers

The findings highlight that navigating support systems can pose significant challenges for kinship carers. While mechanisms such as the Family Court (for legal orders) and Work and Income (for financial assistance) are available, these systems are often bureaucratic, confusing, and hard to navigate. For carers already stretched by the demands of caregiving, these systemic barriers add stress and can delay or prevent access to vital services, support and resources.

The legal system

Experiences of securing legal orders varied widely among kinship carers. While a few navigated the process smoothly with the support of a lawyer, many faced it alone, without legal representation, describing the Family Court as overwhelming, confusing, and protracted. Applying for legal orders often came at considerable personal cost, up to \$10,000 in some cases, with many kinship carers ineligible for legal aid. Hidden costs, such as lost income from time off work, further compounded financial strain, forcing some carers to draw on savings, such as for their retirement, or taking on debt. Several Māori participants had initially not applied for legal orders as they were managing the care arrangements as a whānau. However, this created barriers to providing care. Participants described struggling to enrol children in education or consenting to medical treatment, without the guardians' (typically the parents') consent which could be difficult to obtain due to the parents being uncontactable.



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Financial support

Kinship care often carries a heavy financial burden. Most carers in this study received support through the Unsupported Child's Benefit, and in one case, the Orphan's Benefit, and expressed gratitude for this assistance. Yet accessing these supports was not always straightforward. Many faced delays, confusion, and bureaucratic hurdles, compounding the financial strain of caregiving. Several carers described significant hardship, with the costs of raising children stretching already limited resources and placing long-term financial stability at risk.

“

I've gone from like 45 hours a week to 4 hours a week. Because I was either at the court or at the lawyers, or at the school with these kids for a start for months on end.

(KC1)

”

The findings reveal that kinship carers consistently prioritise meeting the needs of the children, such as recreation, health, and mental health needs, over their own needs. To meet the children's needs, kinship carers made significant lifestyle sacrifices, including going without haircuts, social outings, food and purchasing new clothing. Many had to pay for services and items such as glasses, dental and orthodontic care, therapy, and mental health assessments. Given the high prevalence of experiences of adversity and trauma among children in kinship care, these needs are common, complex, and require appropriate supports to be met.

Kinship carers taking care of self

Kinship carers need support to care for themselves. The emotional toll of caregiving was evident across the study, with many carers emphasising the importance of breaks and time away. Yet access to respite, whether through respite care, babysitting or holiday programmes, was limited, inconsistent, and often regionally constrained. This lack of support compounds stress and undermines carers' wellbeing, despite their central role in providing stability for children.

“

It's difficult. It can be very difficult... But other than that, yeah, just making sure like for being in my position, making sure you take care of yourself... But it's made me realise that I actually need to put myself first. Because if my cup is empty, then I can't help the kids' cups and I can't help everyone else.

(KC12)

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Kinship care needs to be better supported

Kinship care faces distinct and compounding challenges. Carers often had limited access to formal supports and relied heavily on charities, navigating public services with difficulty. Experiences varied widely, revealing a fractured and ad hoc support landscape in Aotearoa New Zealand, one not intentionally designed to support kinship carers to provide the best possible care to children. This study found a clear need for holistic, wraparound services tailored to the specific needs of children in kinship care and their kinship whānau, including cultural needs. Services were most effective when they had a strong understanding of the unique aspects of kinship care. Several Māori participants expressed a strong desire for kaupapa Māori services that reflect tikanga and support whānau-led care. The findings identified key domains of support required by tamariki and whānau (see Figure 2): access to services and supports; support to navigate systems; peer and social support; training and education; and support to navigate family dynamics.

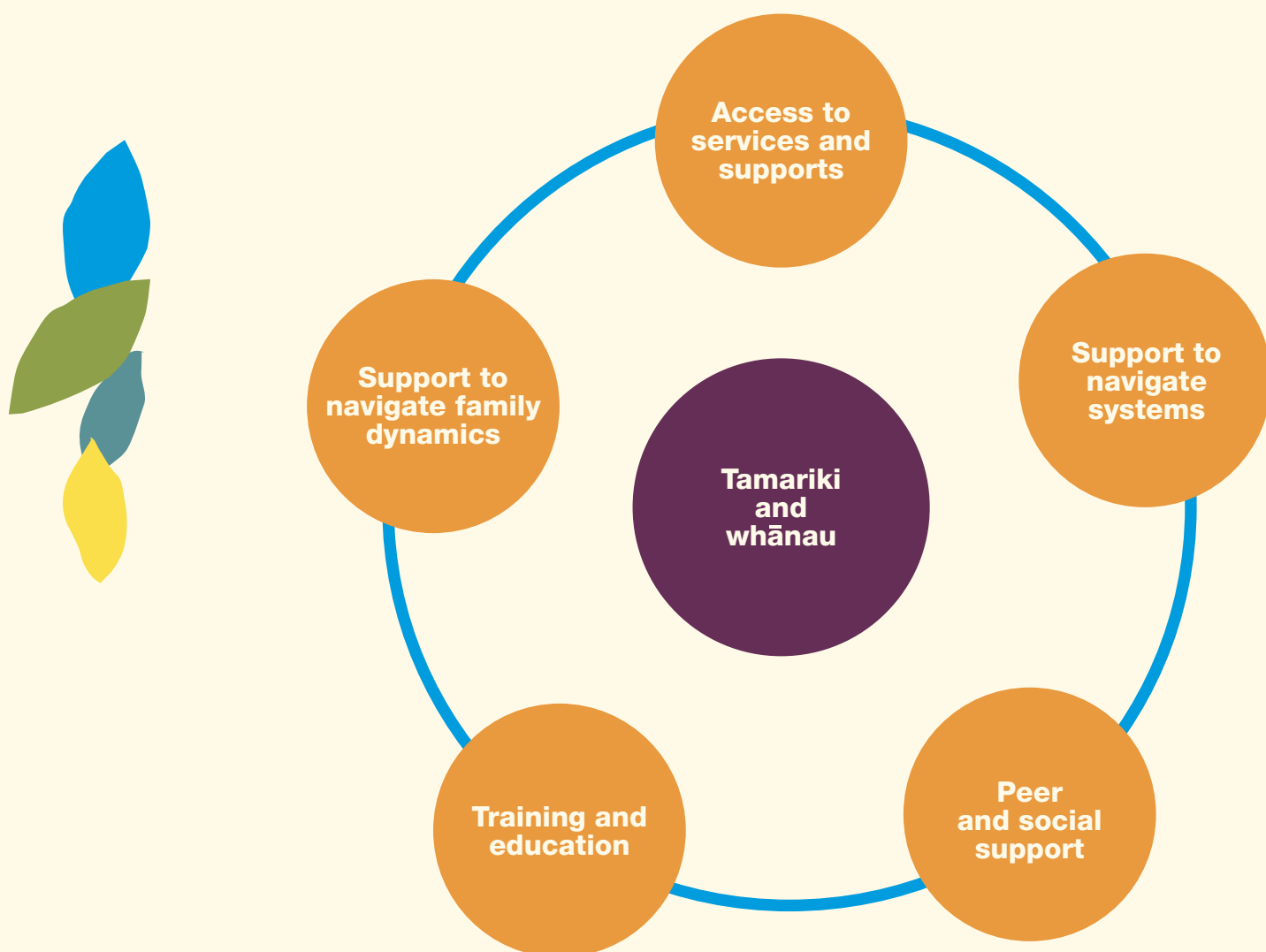


Figure 2: Kinship carers need support in a number of domains.

Principles for supporting kinship carers

This study found the way in which practitioners supported kinship carers was important. Effective support requires professionals to be whānau-led in their approach, uphold the mana of all involved, communicate with clarity and respect, and embed tikanga in their practice when working with whānau. Professionals also need a strong understanding of trauma and behaviour, and work in ways that are both child-centred and whānau-focused. An essential part of this support is helping whānau build and strengthen their support networks and navigate the systems and services needed to sustain care. Based on these findings, the following principles adapted from Family for Every Child (2024) offer guidance for professionals working alongside kinship carers.

These principles are:

- **Understand the unique and complex dynamics of kinship care.**
- **Be child-centred, whānau-led and culturally responsive.**
- **Link to and advocate for services and supports.**
- **Recognise the needs of children and whānau change over time.**
- **Support whānau to build an enduring support network who can provide practical supports.**

Kinship carers need support for the wellbeing of children

Kinship carers often actively sought services and supports to meet the complex health, disability, and emotional needs of children in their care. Yet access to essential services, such as counselling, disability support, and mental health assessments and services, was often difficult. Several participants reported receiving more responsive support through community organisations or privately funded services. The findings highlight the need for professionals and services to understand the unique nature of kinship care and how this may impact on the children. Wraparound, whānau-centred support for the child and their whānau was consistently identified as more effective, particularly as kinship carers were often managing behaviours and emotional responses from the children which they had not experienced before.



“

I just wish that there were supports. I feel like that I'm basically just someone that's had a child and is raising my own child is how I feel. Because there aren't any sort of additional supports there for her. But at the same time, she's not my child, and she has had this whole other experience before living with me full time.

(KC15)

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Peer support is valuable to many kinship carers

Peer support was found to be particularly valuable for kinship carers. Through shared lived experiences, these networks normalised the challenges and kinship carers' emotional responses to these and provide informal mechanisms for learning and developing skills. Organisations, such as Grandparents Raising Grandchildren and Caring Families Aotearoa, played a key role in connecting kinship carers, fostering belonging, and strengthening support systems grounded in common experience.

“

Caring for Families are very good. Grandparents Raising Grandchildren, I go to that sometimes when I can fit it in. And they do understand. Because one time I went there, and I said, I don't even like these children anymore. ... And it was being able to talk to the other grandparents because they were like, oh my God! I went through that a year ago. I hated mine. I couldn't stand the sight of them, you know. And then afterwards you thought, oh it's not just me, you know... It's just a phase that you're going through. So, if I didn't have those type of groups ... Yeah. It would be a lot harder.

”

(KC1)

Kinship carers need opportunities to develop their skills and knowledge

This study found that kinship carers valued learning opportunities relevant to their caregiving role. Key learning needs included understanding trauma and challenging behaviour, navigating family contact and complex relationships, and supporting children to make sense of their experiences. The study identified practical ways to improve access to training for kinship carers. Carers expressed a strong preference for kanohi ki te kanohi (face to face) training opportunities over online training (such as Zoom). The availability of child-care during training was also critical, as many carers could not attend without support for the children in their care. Accessible training not only strengthens parenting skills but also fosters peer relationships, helping carers expand their social support networks and buffer against the relational isolation and challenges kinship carers may face.

“

These training things are really helpful because, you know, often you just get so ... you've got things that are ingrained in the way you were brought up as well. And just to think outside the box and see what other people try and use. And you're also dealing with a lot more challenging behaviours because of the situations that they're coming from.

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(KC2)



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Kinship carers drew on family and social support

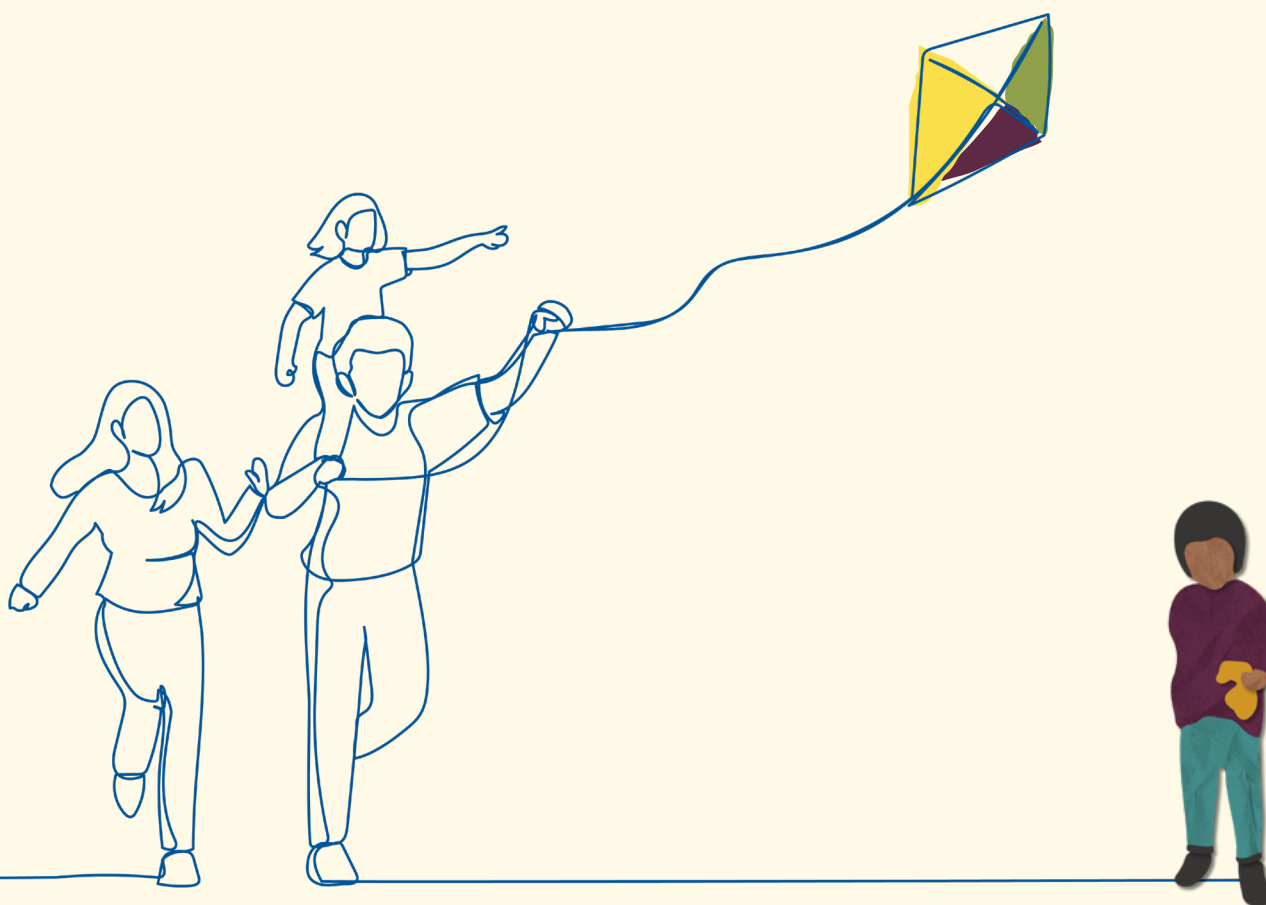
Kinship carers experienced varying levels of support from their family in their role as kinship carers. Some kinship whānau lived in multi-generational arrangements that sometimes provided additional support for most of these kinship carers, while others relied on extended family and whānau to help navigate challenges of kinship care and provide respite. Social support from friends was also important for many participants. However, some participants (usually grandparents) spoke about being in a different life stage to their friends which changed the dynamics or did not understand kinship care. These findings reflect the complex relational worlds kinship carers navigate. While ideally kinship carers would be fully supported by their families and friends, this may not always be the case.

“

We use our own whānau network and whānau supports. Yeah, and so we've been alright with that. We've been quite fortunate that ... having that strong relationship with the parents.

(KC14)

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Calls to Action

To strengthen Kinship Care in Aotearoa New Zealand



This study endorses Family for Every Child's (2024) seven components for an enabling environment that supports best outcomes in kinship care (see Figure 3):

1. Collect robust evidence on kinship and whānau care
2. Promote public awareness and acceptance of kinship care
3. Develop clear policies, strategies, and guidance
4. Strengthen the capability of the social service workforce
5. Coordinate cross-sector responses
6. Ensure adequate and accessible funding
7. Foster social norms that value kinship care

These seven components form the recommendations from this study to strengthen and support kinship and whānau care in Aotearoa New Zealand.

Figure 3: The seven components to create an enabling environment for kinship care (Family for Every Child, 2024)



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Recommendation 1

Collect evidence about kinship care

Invest in strengthening and developing research, data, and evidence on kinship and whānau care in Aotearoa New Zealand. Priority areas include lived experiences of tamariki, kaupapa Māori approaches, birth parent perspectives, pre-placement relationships, longitudinal outcomes, differences between informal, formal, and statutory kinship care, and the effectiveness of support systems.



Recommendation 2

Promote kinship care

Promote kinship care in Aotearoa New Zealand through public messaging that highlights its benefits, normalises whānau-based care, and builds awareness of the unique and complex dynamics of kinship care and how to support kinship carers. This will help drive policy change and strengthen community and government support for children and their caregiving whānau.



Recommendation 3

Develop policies, strategies, and guidance on kinship care

Develop clear policies, strategies, and guidance to support kinship care in Aotearoa New Zealand, ensuring carers are recognised, resourced, and supported in alignment with child protection legislation, Te Tiriti o Waitangi and are child-centred, whānau-led and culturally responsive.

Develop a national strategy to support non-statutory kinship carers. This strategy should be co-designed with kinship carers, Māori and Pacific communities, and child rights advocates. It must include culturally grounded, wraparound support, clear entitlements, and pathways for recognition, ensuring that those who care are cared for in return. Responses will also recognise that the needs of children and whānau change over time and adjust accordingly.

Review and reform Family Court processes to ensure they are accessible and fit for purpose for kinship carers. Expand legal aid to support carers seeking parenting or guardianship orders. Adopt the Kaiwhatu Kura Whānau Navigator proposal advocated for by Ngā Rangatira Mō Apōpō (Youth Advisory Panel from Pillars Ka Pou Whakahou) to guide whānau through proceedings and co-design support plans for tamariki and their caregiving whānau. Undertake a Māori-led review of the Care of Children Act 2004 to align with Te Ao Māori approaches to collective parenting, ensuring whānau-led decision-making is recognised and supported in law.



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Recommendation 4

Develop training to strengthen and support workforce capability and capacity to support kinship care

Strengthen social service workforce capability through targeted training on the unique dynamics of kinship care, ensuring professionals can provide informed, culturally responsive support to carers and children.

Recommendation 5

Work across sectors and coordinate responses to kinship care

Coordinate cross-sector responses to strengthen support for non-statutory kinship care. This includes funding kaupapa Māori whānau care services and improving access to culturally responsive, wraparound support that reflects the unique needs of children and their kinship whānau, hapū, iwi, and aiga.

Recommendation 6

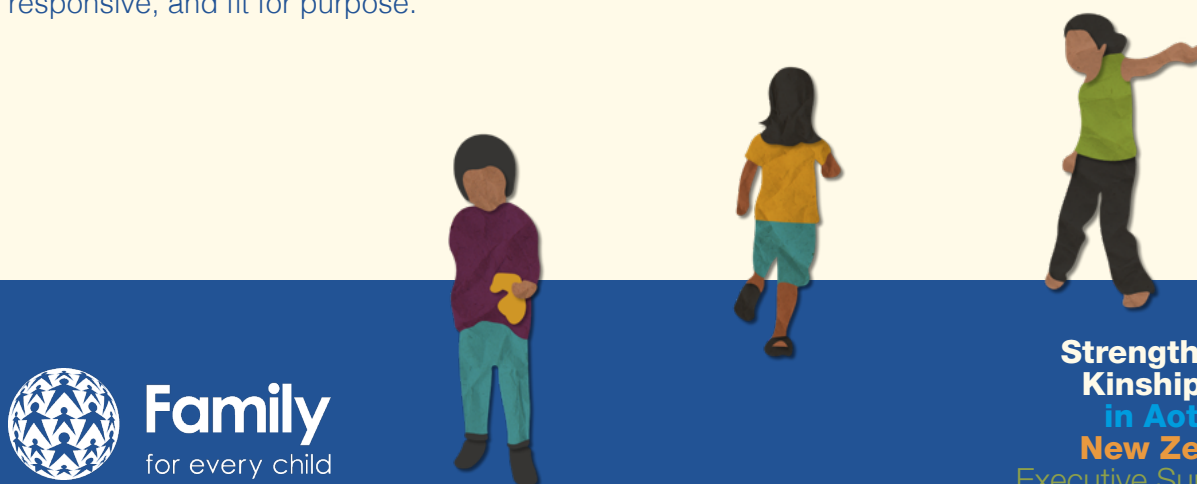
Ensure that social services and support for kinship care are properly financed

Ensure social services and financial support for kinship care are adequately funded and accessible, including streamlined access to benefits and targeted assistance for carers facing income loss or financial hardship.

Review and simplify the Unsupported Child's Benefit and Orphan's Benefit application process, ensure payment levels reflect the true costs of care, and establish kinship care champions in Work and Income offices to support carers in accessing their full entitlements.

Expand eligibility for the Permanent Caregiver Support Service to include informal and formal kinship carers, ensuring access to financial and social work support to meet children's additional needs through to age 18.

Expand and fund services that support the wellbeing of children and kinship care whānau, including respite care, relational support, supervised contact, and trauma-informed guidance. Services must reflect the complex dynamics of kinship care and be accessible, culturally responsive, and fit for purpose.



Recommendation 7

Ensure social norms support kinship care

Promote public messaging that affirms kinship care as a normal and valued practice in Aotearoa New Zealand, reflecting customary approaches such as whāngai and atawhai. This will help reduce stigma, strengthen social acceptance, and support carers within their communities.



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