Kinship Care: What the Research Tells Us

Annotated Bibliography: Peer-Reviewed Research on Kinship Caregivers

Overview

This handout accompanies the Chapin Hall and Generations United literature review presented in the webinar, “Kinship Care: What the Research Tells Us.” It summarizes 50 studies on kinship caregivers and children in kinship care. Most appear in *Children and Youth Services Review, Child Abuse and Neglect, Child Development, Research on Social Work Practice, Families in Society, Journal of Developmental and Behavioral Pediatrics, Child Welfare, Trauma, Violence, and Abuse,* and *Journal of Public Child Welfare, Healthcare, Child & Family Social Work*, and *Clinical Child and Family Psychology Review.*

Each entry—listed alphabetically by first author’s last name—includes the full citation, the kinship population studied (formal, informal, or diversion/voluntary), key findings, notable result(s), and its limitations. This bibliography is drawn almost entirely from peer-reviewed academic research and on articles published between 2016 and 2026.

How This List Was Built

This was a single-reviewer literature scan using a general web search engine, not a formal systematic review with subscription database access. The search was done in three steps. The first search used terms "kinship care," "kinship foster care," "grandfamilies," and "relative caregiver." Since this webinar was intentional about including diverse perspectives, a second search was done with terms such as "kinship care risks" and "does kinship care work," to surface studies with mixed or less favorable findings. That second pass added the Font (2015), Cheng and Lo (2021), and Sattler, Herd, and Font (2023) articles. A third search focused on the term "fictive kin" to surface research on non-relative caregivers and non-custodial kin/fictive kin network members, which the first two passes underrepresented. That search added the Leon, Hodgkinson, Osborne, Lutz, and Hindt (2024) and Osborne and Leon (2024) articles. We also compared this list against existing scoping reviews to check for major omissions, and verified each study’s citation, abstract, and key findings against its publisher or PubMed record.

This approach has notable limitations. We did not run subscription database searches, use a second reviewer, or follow the formal, multi-step screening process that rigorous systematic reviews typically use. Search-engine discovery also tends to favor frequently cited, older work over newer or less-discoverable studies, so recent publications (2024 to 2026) are likely underrepresented. As a result, this list is carefully verified but may not be exhaustive.

A Few Research Terms You Will See

A handful of research terms come up in the entries below. We define these once here to support understanding the information being shared:

- Systematic review / scoping review: a study that does not collect new data from people, but instead searches for and summarizes many existing studies on a topic, following a defined process.
- Meta-analysis: a review of studies that mathematically combines the results into one overall number.
- Cross-sectional: data collected at a single point in time, as opposed to “longitudinal,” which follows the same people over time. A cross-sectional study can show that two things are related, but not which one came first or caused the other.
- Matched comparison (including “propensity-score matching”): a statistical technique for comparing groups of children or caregivers who are otherwise very similar to each other, so that a difference in one factor (like placement type) can be looked at more fairly.
- Selection bias / selection effects: children and families are not randomly assigned to kinship care versus foster care. Certain kinds of children — for example, those with fewer behavior problems — may be more likely to end up with relatives in the first place.
- Statistically significant: a way of saying a result is unlikely to be due to chance alone.
- Self-report: information based on what caregivers or children said, rather than independently verified records.

Annotated Bibliography (Alphabetical by First Author)

Bell, T., and Romano, E. (2017). Permanency and safety among children in foster family and kinship care: A scoping review. *Trauma, Violence, & Abuse, 18*(3), 268–286.

Link: https://doi.org/10.1177/1524838015611673

STUDY POPULATION: Formal kinship care compared with formal (non-kin) foster family care (a review of 54 existing studies, 2007–2014)

Key findings: Across the studies reviewed, children in kinship care experienced greater permanency than children in non-relative foster care, including lower reentry into care, greater placement stability, and more guardianships. Adoption and reunification rates were lower, however, and the permanency differences narrowed over time. On safety, the review describes its own findings as mixed.

Notable / specific result: The review's most consistently supported finding is a positive relationship between kinship placement and permanency. They also flag that kinship families may need additional resources to support adoption and reunification specifically.

Limitations: Covers studies published through 2014. Findings are summarized in writing rather than combined into one overall statistic, and none of the included studies randomly assigned children to kinship vs. foster care, so selection effects cannot be ruled out.

Casanueva, C., Smith, K., Ringeisen, H., Dolan, M., Testa, M., and Burfeind, C. (2020). NSCAW Child Well-Being Spotlight: Children living in kinship care and nonrelative foster care are unlikely to receive needed early intervention or special education services. OPRE Report #2020-31. Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Link: https://acf.gov/opre/report/child-well-being-spotlight-children-living-kinship-care-and-nonrelative-foster-care-are

STUDY POPULATION: Voluntary (informal) kinship care, formal kinship care, and nonrelative foster care, all three compared directly

Key findings: The study measured two separate things: how many children showed a developmental, cognitive, or academic need on a standardized assessment, and how many of those children actually received services for it. Identified need was broadly similar across the three placement types[voluntary (informal) kinship care, formal kinship care, and nonrelative foster care]; service receipt did not. Among young children with developmental, cognitive, or language delays, only 4% of those in voluntary kinship care had an Individualized Family Service Plan (IFSP), the early-intervention plan for children under 3, compared with 22% of similar children in nonrelative foster care. Among 3-to-17-year-olds with a cognitive or academic need, 22% of those in voluntary kinship care had an Individualized Education Program (IEP), the school plan that delivers special education services, compared with 54% in nonrelative foster care.

Notable / specific result: In every placement type, most children who appeared to need early intervention or special education were not receiving it. This is a systemwide access gap rather than a kinship-specific one, though it is most pronounced for children in voluntary (informal) kinship arrangements.

Limitations: Data collection is over a decade old, so does not reflect more recent changes to support services. “Need” is based on standardized assessment cutoffs rather than a clinical diagnosis, so it may not map precisely onto formal state eligibility criteria.

Cheng, T. C., and Lo, C. C. (2021). With their children placed in kinship care, did parents get the services they needed? *Children and Youth Services Review, 121,* Article 105850.

Link: https://doi.org/10.1016/j.childyouth.2020.105850

STUDY POPULATION: Formal kinship foster care (birth parents of children placed by a child welfare agency)

Key findings: This study looked at whether birth parents actually received the services identified as needed in their child welfare case. Receiving those services was more likely when the parent had Medicaid coverage, had more education, had a case plan that spelled out which services were needed, and was matched with a caseworker of the same race or ethnicity. It was less likely when services were unavailable, when they were hard to access, when the parent declined them, when the caseworker was minimally engaged with the family, and when there was a history of physical maltreatment in the case.

Notable / specific result: This study centers parents-of-origin rather than children or kinship caregivers, a population almost entirely absent elsewhere in this bibliography. It finds that when a child is in kinship care, whether a parent gets the services needed to reunify depends heavily on caseworker engagement and case-plan specificity, not just family need.

Limitations: Secondary survey data, self- and caseworker-report of service receipt, and a sample limited to parents already engaged enough with the system to be captured by the survey. Parents who disengaged entirely are likely undercounted.

Day, A. G., Murphy, K. S., Drywater-Whitekiller, V., and Haggerty, K. P. (2021). Characteristics and competencies of successful resource parents working in Indian Country: A systematic review of the research. *Children and Youth Services Review, 121,* Article 105834.

Link: https://doi.org/10.1016/j.childyouth.2020.105834

STUDY POPULATION: Formal kinship and foster care in Indian Country (tribal and state systems)

Key findings: This review of research looked at what distinguishes an effective caregiver for AIAN children, beyond the general foster-parenting skills any caregiver needs. Three things came up repeatedly across studies: cultural knowledge, an existing connection to the tribal community, and a willingness to actively support the child's ongoing relationship with their tribe and extended family.

Notable / specific result: The review documents that AIAN children continue to be removed from their homes and placed outside tribal or kin networks at high rates. Preventing exactly this was the purpose of the Indian Child Welfare Act of 1978, which sets placement preferences favoring a child's extended family, other tribal members, and then other Native families. More than four decades after ICWA passed, the gap between that legal standard and actual placement practice persists.

Limitations: The authors note a continued shortage of AIAN foster and kinship homes relative to need. These shortages compound itself in available research: fewer available homes mean fewer culturally matched placements to make, and fewer such placements to study against alternatives.

Dolbin-MacNab, M. L., and O'Connell, L. M. (2021). Grandfamilies and the opioid epidemic: A systemic perspective and future priorities. *Clinical Child and Family Psychology Review, 24*(2), 207–223.

Link: https://doi.org/10.1007/s10567-021-00343-7

STUDY POPULATION: Grandfamilies broadly (formal and informal), specifically those formed in response to parental opioid use

Key findings: The opioid epidemic has driven a substantial rise in grandparent-headed kinship families, but research specific to this population has not kept pace with its scale. Drawing on the studies that do exist, the review identifies three recurring challenges: high levels of caregiver stress, complicated and often unresolved relationships between the grandparent and the child's parent, and children arriving with significant trauma exposure and health needs.

Notable / specific result: Grandparents raising grandchildren because of opioid use face a combination of stressors that the broader kinship literature, largely built around removals for general maltreatment, does not capture well. Those include grief over their own adult child's addiction, sustained uncertainty about whether that parent will recover and seek to resume care, and the stigma attached to addiction in the family.

Limitations: This is a narrative review rather than a formal systematic review, meaning it does not apply strict rules for which studies to include, and the authors note that research specific to opioid-affected grandfamilies is still thin. Most existing studies are a one-time snapshot based on what caregivers reported about themselves, which limits how confidently we can say what is actually causing caregiver stress or child outcomes.

Dolbin-MacNab, M. L., Smith, G. C., and Hayslip, B. (2022). The role of social services in reunified custodial grandfamilies. *Children and Youth Services Review, 132*, Article 106339.

Link: https://doi.org/10.1016/j.childyouth.2021.106339

STUDY POPULATION: Custodial grandfamilies (largely private or legal-guardianship arrangements, not formal foster care)

Key findings: Grandfamilies continued to need, and often lacked access to, social services and support after reunification. Support needs do not end when the child returns to a parent's care.

Notable / specific result: Families that maintained some connection to services after reunification reported better-managed transitions than families who lost service access after reunification, which points toward stepping services down gradually rather than ending them at once.

Limitations: Relies on caregivers looking back and describing their own past service use and needs from memory, so some details may be misremembered. The sample size and how participants were recruited limit how confidently the findings apply beyond this study's specific region.

Ferraro, A. C., Maher, E. J., and Grinnell-Davis, C. (2022). Family ties: A quasi-experimental approach to estimate the impact of kinship care on child well-being. *Children and Youth Services Review, 137,* Article 106472.

Link: https://doi.org/10.1016/j.childyouth.2022.106472

STUDY POPULATION: Formal kinship foster care compared with non-relative foster care (using statistical matching to compare similar children)

Key findings: Children whose acting-out behavior was severe enough to be a clinical concern were less likely to be placed with relatives than in foster care. After comparing children and caregivers who were otherwise similar to each other, kinship care's effect on behavioral and emotional well-being was no longer a statistically reliable difference from foster care, though it still leaned in kinship care's favor.

Notable / specific result: This is one of the few studies designed specifically to figure out how much of the well-being "kinship advantage" found in other research comes from which children end up placed where, rather than from the placement type itself — and finds that the kinship advantage was no longer statistically reliable once similar children were compared.

Limitations: This kind of matching can only account for characteristics that were actually measured, not other unmeasured differences between children who ended up with kin versus in foster care. Findings describe short- to medium-term well-being rather than long-run outcomes.

Foluso, A. A., Routh, B., Schure, M. B., and Koltz, D. J. (2023). Influence of kinship caregiver and family characteristics on kinship care experiences. *Families in Society: The Journal of Contemporary Social Services, 105*(1), 94–106.

Link: https://doi.org/10.1177/10443894231204533

STUDY POPULATION: Kinship caregivers broadly (this review groups findings by theme and spans both formal and informal arrangements across the reviewed literature)

Key findings: This review found racial background, economic burden, and access to structural supports (things like transportation and respite care) each produce different experiences and outcomes for different caregivers. The practical implication is that "kinship care" describes a legal or living arrangement, not a common experience: two caregivers in the same arrangement can face very different circumstances.

Notable / specific result: The review identifies five themes along which caregiver experience diverges: racial background, the caregiver's role in the family (a grandparent versus an aunt, for instance), economic burden, structural supports, and the caregiver's own health. The review treats structural supports as a theme separate from economic burden, indicating that barriers to access are not only financial. That complements the income-focused hardship findings elsewhere in this bibliography, such as Washington and Despard (2024).

Limitations: Because the review synthesizes findings thematically rather than statistically, it produces no single estimate of how large any of these effects are, only evidence that they recur across studies. Its conclusions also inherit the weaknesses of the underlying literature, much of which is cross-sectional, capturing families at one point in time rather than following them, which makes it hard to separate what causes a difficult kinship care experience from what merely accompanies one.

Font, S. A. (2014). Kinship and nonrelative foster care: The effect of placement type on child well-being. *Child Development, 85*(5), 2074–2090.

Link: https://doi.org/10.1111/cdev.12241

STUDY POPULATION: Formal kinship foster care and nonrelative foster care, compared directly (a national sample of 1,215 children ages 6–17 who spent time in one or the other)

Key findings: Using several strategies to reduce selection bias (including propensity-score weighting and instrumental-variables regression), the study found a consistent negative effect of kinship placement on children's reading scores. Kinship placement had no measurable effect on child health, and results for math, cognitive-skills tests, and behavioral problems were mixed rather than consistently favoring either placement type.

Notable / specific result: Estimated declines in both academic achievement and behavioral problems were concentrated among children who were already lower-functioning at baseline — meaning the placement-type effects were not spread evenly across all children, but concentrated in a more vulnerable subgroup.

Limitations: This is one of the few studies in this bibliography to combine several different statistical strategies within the same analysis specifically to rule out selection bias, which strengthens confidence in the reading-score finding. However, the sample is limited to formal kinship and nonrelative foster care, so it does not speak to informal or diversion arrangements, and reflects research that is now over ten years old.

Font, S. A. (2015). Are children safer with kin? A comparison of maltreatment risk in out-of-home care. *Children and Youth Services Review, 54,* 20–29.

Link: https://doi.org/10.1016/j.childyouth.2015.04.012

STUDY POPULATION: Formal kinship foster care, informal kinship care, and non-relative foster care, all three compared directly

Key findings: About 6 out of every 100 informal, TANF-funded kinship placements had an investigation into a report that the caregiver abused or neglected the child, compared to about 3 out of every 100 placements in formal kinship care or non-relative foster care.

Notable / specific result: Looking at risk by month, rather than adding it up over the full placement, informal kinship care actually has the *lowest* monthly risk of investigation — even though its cumulative rate is higher (about 6 per 100 vs. 3 per 100, as reported above). The author's explanation is not that these placements are more harmful; it is that they tend to last longer, giving more time for an investigation to occur at some point.

The more important pattern holds across placement types: risk of both investigated and substantiated maltreatment is highest in the first three months, then drops. The early concentration of risk points toward front-loading support needed in the first months rather than extending oversight indefinitely, though that practice implication is ours rather than a stated conclusion of the study.

Limitations: The analysis draws on official case records from a single state (Wisconsin, 2005–2012, covering over 50,000 children) and does include statistical controls, though it cannot fully rule out that some placement types are simply watched more closely than others, which would affect how often problems get reported. That concern is sharpened by how the informal group is defined: because these caregivers receive a public benefit, the group is both materially poorer and already known to a state agency, and neglect, which is closely tied to material hardship, is the most commonly alleged maltreatment type in informal kinship care according to Font's companion 2015 article in *Child Maltreatment.* Informal caregivers who never applied for TANF are absent from the study entirely.

Francis, A. M., Hall, W. J., Ansong, D., Lanier, P., Albritton, T. J., and McMillan, A. (2023). Implementation and effectiveness of the Indian Child Welfare Act: A systematic review. *Children and Youth Services Review, 146,* Article 106799.

Link: https://doi.org/10.1016/j.childyouth.2022.106799

STUDY POPULATION: Formal foster care, ICWA-preferred (kinship and tribal) placements for American Indian/Alaska Native children

Key findings: A systematic review of research on American Indian and Alaska Native (AIAN) children in the child welfare system found evidence on ICWA's effectiveness to be generally positive across the four outcomes examined (whether children were placed according to ICWA's preferences, kinship care, adoption, and reunification). Mixed results were found, though, with authors sharing that this may be due to how the law is being implemented.

Notable / specific result: Where ICWA is implemented, particularly with tribal involvement, results are largely favorable; the recurring problem is inconsistent implementation. The study groups the barriers into four categories: the characteristics and actions of child welfare staff, logistical challenges, problems with how cases are assessed, and how the various parties (agencies, courts, tribes) interact with one another.

Limitations: Only 16 of 408 screened studies met the review's inclusion criteria, despite ICWA having been law since 1978. That thin evidence base is itself a finding: AIAN child welfare has been studied far less than the scale of the disparity would warrant. The included studies are also dated, spanning roughly the late 1970s through 2010, which the authors flag themselves, so the review says little about ICWA compliance in the years since.

Gómez, A. (2021). Associations between family resilience and health outcomes among kinship caregivers and their children. *Children and Youth Services Review, 127*, Article 106103.

Link: https://doi.org/10.1016/j.childyouth.2021.106103

STUDY POPULATION: Kinship caregivers and children broadly, predominantly informal arrangements

Key findings: Higher family resilience was associated with better health and mental health outcomes for both kinship caregivers and children, particularly when caregivers could draw on other household members for problem-solving and mutual support.

Notable / specific result: This is one of the only studies in the bibliography to model caregiver and child well-being as linked outcomes of the same family-level resource (resilience), rather than analyzing caregiver stress and child outcomes as separate questions.

Limitations: This is a one-time snapshot, so it cannot tell us whether family resilience leads to better health, better health makes resilience easier, or something else explains both. Sample and recruitment details limit how confidently findings apply beyond this study's specific population.

Gómez, A., Guo, S., and Lau, C. S. (2024). Associations between family resilience, child flourishing, and school engagement among children in kinship care. *Families in Society, 105*(1), 6–18.

Link: https://doi.org/10.1177/10443894231200660

STUDY POPULATION: Kinship care broadly, mostly informal/private arrangements (caregivers were 74.6% grandparents; the survey did not capture child welfare system involvement, so formal and informal families cannot be distinguished)

Key findings: Family resilience was positively associated with both child flourishing and school engagement, even after accounting for poverty, caregiver mental health, and child behavior problems, including internalizing problems (like anxiety or withdrawal). Children in kinship care scored significantly lower on both flourishing and school engagement than children raised by their birth parents.

Notable / specific result: Child behavioral and internalizing problems were far stronger predictors of low flourishing and low school engagement than any other variable in the model, including family resilience itself — a reminder that the mental-health and academic-outcome domains in this literature are closely intertwined, not separate tracks.

Limitations: This is a one-time snapshot, so it cannot prove that one thing causes another. The survey was not designed to sample kinship families specifically and did not capture child welfare system involvement, so formal and informal kinship caregivers cannot be

distinguished. It relies entirely on what caregivers said about themselves and their families, and caregivers may present things in a more favorable light, consciously or not.

Gómez, A., Wollen, S. L., Day, A. G., Garcia-Rosales, K. V., Feltner, A., Shearlock, A., and Delaplane, G. (2024). "Now I am calm because they guide you:" A mixed-method exploratory study of the service needs and experiences of Latine kinship caregivers in Washington State. *Children and Youth Services Review, 157*, Article 107420.

Link: https://doi.org/10.1016/j.childyouth.2023.107420

STUDY POPULATION: Kinship caregivers participating in a statewide kinship navigator program, formal and informal combined

Key findings: Compared to non-Latine caregivers, Latine caregivers were more likely to report parental deportation as the reason the child came into their care, had lower incomes, were more likely to report an unmet medical need for the child, and had more children in the home on average.

Notable / specific result: Latine caregivers described navigator programs as effective for legal and mental health needs but reported that economic hardship and language barriers to services persisted regardless of navigator involvement.

Limitations: The Latine group within this larger statewide survey was small (60 caregivers), which makes it harder to detect real differences for some comparisons. Findings come from one state's navigator program and caregiver population and may not generalize to other states' immigrant and mixed-status kinship families.

Hallett, N., Garstang, J., and Taylor, J. (2023). Kinship care and child protection in high-income countries: A scoping review. *Trauma, Violence, and Abuse, 24*(2), 632–645.

Link: https://doi.org/10.1177/15248380211036073

STUDY POPULATION: Formal and informal kinship care, compared against nonrelative foster care and other out-of-home settings (a review of 26 existing studies, mostly U.S.-based)

Key findings: Across the studies reviewed, rates of re-abuse — and physical and sexual abuse specifically — tended to be lower in kinship care than in other out-of-home settings, but rates of neglect were often higher in kinship care.

Notable / specific result: Rates of neglect appeared higher in informal than formal kinship care, while lack of oversight and training for kinship caregivers was repeatedly raised as a concern. This review covers overlapping ground with the Winokur et al. (2018) systematic review already in this bibliography.

Limitations: As a broad review rather than one that combines results into a single statistic, it maps out what exists in the research rather than formally rating every study's quality.

Hassall, A., Janse van Rensburg, E., Trew, S., Hawes, D. J., and Pasalich, D. S. (2021). Does kinship vs. foster care better promote connectedness? A systematic review and meta-analysis. *Clinical Child and Family Psychology Review, 24*(4), 813–832.

Link: https://doi.org/10.1007/s10567-021-00352-6

STUDY POPULATION: Formal kinship care compared directly with non-relative foster care

Key findings: Children in kinship care were more likely to feel connected to family in general than children in foster care, but there was no clear advantage for kinship care on connectedness to caregiver, birth parent, culture, or community specifically.

Notable / specific result: The review directly tests a common assumption for kinship care (that it better preserves cultural and community ties); the advantage observed in this study is narrower than that assumption suggests, limited mainly to general family connectedness.

Limitations: Only 3 of the 31 included studies had results that could be mathematically combined, so most of the review's conclusions come from summarizing findings in writing rather than one overall statistic. Different studies also measured "connectedness" in different ways, which makes comparing them harder.

Jedwab, M., Xu, Y., and Shaw, T. V. (2020). Kinship care first? Factors associated with placement moves in out-of-home care. *Children and Youth Services Review, 115,* Article 105104.

Link: https://doi.org/10.1016/j.childyouth.2020.105104

STUDY POPULATION: Formal kinship foster care, non-relative foster care, and group/residential placements, examining both initial placement (N = 3,838) and children's subsequent moves into and out of kinship care (n = 1,893)

Key findings: This study is about what predicts whether a child is placed into kinship care in the first place, and what predicts a later move into or out of it. Two factors increased the odds of an initial kinship placement: the child being Black, and parental substance use. Child behavioral problems, disabilities, and older age all decreased the odds of an initial kinship placement. Among children who later moved to a second placement, moving from kinship into non-kin foster care was associated with the child being older, having behavioral problems, or having an incarcerated parent; moving the other direction, from non-kin foster care into kinship care, was associated mainly with parent characteristics (housing instability, substance use, difficulty coping with the child).

Notable / specific result: The same factors that make a child less likely to be placed with kin to begin with (behavioral problems, disability, older age) also show up as factors associated with later moving out of a kinship placement.

Limitations: These are patterns found in official case records from one mid-Atlantic state's child welfare system, not a controlled test of whether kinship care itself improves stability. Case records also cannot capture placement quality or caregiver strain that does not result in a formal placement change.

Killos, L. F., Vesneski, W. M., Pecora, P. J., Rebbe, R., and Christian, S. (2018). A national analysis of guardianship assistance policy and implementation. *Children and Youth Services Review, 94,* 115–125.

Link: https://doi.org/10.1016/j.childyouth.2018.09.017

STUDY POPULATION: Formal kinship guardianship (children exiting foster care to subsidized relative guardianship)

Key findings: State guardianship assistance policies vary widely on eligibility rules, subsidy amounts relative to foster care maintenance payments, and post-permanency support. There is no single national model for how subsidized guardianship works.

Notable / specific result: Guardians in many states receive lower ongoing subsidies than they would have received as licensed foster parents for the same child. That design difference represents a potential financial disincentive to pursue guardianship, though the study documents policy provisions rather than measuring what caregivers decide.

Limitations: This is a policy and implementation analysis, not an outcome study. It documents what states' guardianship policies say, not how children and caregivers actually fare under them. Findings are current as of the 2018 survey; state guardianship statutes may have changed since.

Koh, E., Daughtery, L., and Ware, A. (2022). Informal kinship caregivers' parenting experience. *Children and Youth Services Review, 133*, Article 106360.

Link: https://doi.org/10.1016/j.childyouth.2021.106360

STUDY POPULATION: Informal kinship caregivers specifically, not currently involved with the public child welfare system

Key findings: Informal kinship caregivers reported meaningful parenting stress and unmet service needs despite being outside formal child welfare supervision, with financial hardship emerging as the most commonly reported challenge.

Notable / specific result: Because these caregivers are, by definition, not represented in official child welfare records, this survey-based approach (an anonymous survey of 41 informal caregivers) is one of the few ways this population's experience gets captured in the literature.

Limitations: This is a small sample (41 caregivers) of people who were easy to reach rather than randomly selected, recruited outside official systems. That limits how broadly the findings apply, and it cannot rule out that caregivers already connected to some support network were more likely to take part.

Lee, D. H. J., Huerta, C., and Farmer, E. M. Z. (2021). Kinship navigation: Facilitating permanency and equity for youth in child welfare. *Children and Youth Services Review, 131,* Article 106251.

Link: https://doi.org/10.1016/j.childyouth.2021.106251

STUDY POPULATION: Formal, child-welfare-involved kinship placements enrolled in a kinship navigator program

Key findings: Youth whose families received kinship navigator (KN) services were 3.8 times more likely to obtain permanent legal custody than youth who did not receive KN services.

Notable / specific result: There was no significant difference in reunification (returning home) rates between the KN and non-KN groups. The program's measurable advantage was concentrated in legal permanency, not reunification.

Limitations: Single-county study conducted in the early years (first two years) of program implementation, in a jurisdiction the authors themselves describe as nationally atypical for its child welfare innovation. Results may not transfer to less-resourced counties or newer navigator programs.

Lee, E., Kramer, C., Choi, M. J., Pestine-Stevens, A., and Huang, Y. (2020). The cumulative effect of prior maltreatment on emotional and physical health of children in informal kinship care. *Journal of Developmental and Behavioral Pediatrics, 41*(4), 299–307.

Link: https://doi.org/10.1097/DBP.0000000000000769

STUDY POPULATION: Informal kinship care specifically (children never in the formal foster care system)

Key findings: A higher cumulative count of prior maltreatment experiences was associated with worse emotional and physical health outcomes for children in informal kinship care, even though these children had never entered the formal foster care system.

Notable / specific result: The study is among the few in this bibliography to isolate informal kinship caregivers as its sole target population.

Limitations: Because children in informal kinship arrangements are, by definition, outside official child welfare record systems, the sample was drawn from community and clinical settings instead. That limits how representative it is of the full informal kinship population nationally.

Lee, J. Y., Ogilvie, T., Yoon, S. H., Kirsch, J., Koh, E., and Spencer, M. S. (2022). Native Hawaiian and Pacific Islander children in foster care: A descriptive study of an overlooked child welfare population. *Children and Youth Services Review, 141,* Article 106618.

Link: https://doi.org/10.1016/j.childyouth.2022.106618

STUDY POPULATION: Formal foster care, comparing relative (kinship) and non-relative placements

Key findings: NHPI (Native Hawaiian and Pacific Islander) children in foster care were most likely to be placed with relatives. Non-relative foster parents were more likely than relative caregivers to care for NHPI children with disabilities, sexual abuse histories, or parental incarceration. NHPI children in relative (kinship) placements experienced the fewest placement disruptions.

Notable / specific result: Relative foster families caring for NHPI children were more socioeconomically disadvantaged than non-relative families and less likely to receive foster care payments, even though their placements were more stable.

Limitations: This study supports relative placements being more stable, but its design cannot tell us why. NHPI children remain a very small subgroup in national data, so estimates carry wide uncertainty and cannot be broken out by specific Pacific Islander or Native Hawaiian subgroup.

Leon, S. C., Hodgkinson, N., Osborne, J., Lutz, N. M., and Hindt, L. A. (2024). Barriers to the involvement of extended family and fictive kin in the lives of children in foster care. *Journal of Public Child Welfare, 18*(5), 915–934.

Link: https://doi.org/10.1080/15548732.2023.2265873

STUDY POPULATION: Formal foster care; examines the informal support networks (kin and fictive kin) surrounding children entering care, not custodial kinship placement itself

Key findings: Barriers were defined as four things that could rule out a relative or fictive kin as a caregiver: a criminal record, prior CPS (Child Protective Services) involvement, a domestic violence history, or a substance use history. Most children (87%) had a low-barrier network, meaning almost none of their relatives or fictive kin had any of these four issues. The remaining 13% had a high-barrier network, where these issues showed up often. Overall, barriers were common in some children's networks but not others — they were not spread evenly across the sample.

Notable / specific result: For most children (87%), the relatives and fictive kin in their network had few or no barriers that would rule them out as a caregiver. Only 13% of children had networks where these barriers were common.

Limitations: This comes from a single county, so findings may not hold true elsewhere. Barrier categories were coded from available records and reports, which may undercount or miscategorize barriers not documented in the case file, and the study does not link barrier profiles to eventual placement outcomes.

Lin, C.-H. (2018). The relationships between child well-being, caregiving stress, and social engagement among informal and formal kinship care families. *Children and Youth Services Review, 93,* 203–216.

Link: https://doi.org/10.1016/j.childyouth.2018.07.016

STUDY POPULATION: Both informal and formal kinship care (direct comparison)

Key findings: Social engagement softened the negative effect of caregiving stress on child well-being in both formal and informal kinship caregivers, but how much it softened that effect differed.

Notable / specific result: Informal caregivers reported comparatively less access to formal support services despite facing caregiving stress levels similar to (or exceeding) those of formal caregivers.

Limitations: This is a one-time snapshot, so it cannot tell us which came first — the stress or the lower engagement. The sample was drawn from a single state, so findings may not hold true in other states with different policies.

Littlewood, K., Cooper, L., and Pandey, A. (2020). Safety and placement stability for the Children's Home Network kinship navigator program. *Child Abuse & Neglect, 106*, Article 104506.

Link: https://doi.org/10.1016/j.chiabu.2020.104506

STUDY POPULATION: Formal and voluntary/diversion kinship placements enrolled in a kinship navigator program (Children's Home Network, Florida)

Key findings: Children whose caregivers received Peer-to-Peer-only or full Kinship Navigator services were the least likely to have a substantiated maltreatment report and the most likely to still be living with their relative caregiver at 12, 24, and 36 months, compared to usual child welfare services.

Notable / specific result: The gains held up at 12, 24, and 36 months, a longer follow-up window than many navigator evaluations report.

Limitations: This is a small sample (240 caregivers, 60 per group) from a single Florida program, so findings may not hold true elsewhere. Randomly assigning caregivers to different service groups makes the results more trustworthy as evidence of cause and effect, but they describe one specific navigator model, not kinship navigator programs in general.

Littlewood, K., Cooper, L., Yelick, A., and Pandey, A. (2021). The Children's Home Network kinship navigator program improves family protective factors. *Children and Youth Services Review, 126*, Article 106046.

Link: https://doi.org/10.1016/j.childyouth.2021.106046

STUDY POPULATION: Formal and informal kinship caregivers enrolled in a kinship navigator program (Children's Home Network, Florida)

Key findings: Kinship navigator program models were associated with measurable improvements — both over time and compared to a comparison group — in family functioning, concrete supports, child development knowledge, and nurturing/attachment; caregivers who received usual child welfare services alone actually saw these same protective factors decline.

Notable / specific result: The comparison group — kinship caregivers receiving usual child welfare services alone — demonstrated reduced protective factors over the study period. Improvement therefore tracked with the navigator services rather than with baseline child welfare involvement alone.

Limitations: Single-program study from one Florida agency; the specific service models tested may not transfer directly to differently structured navigator programs elsewhere. Protective factors here are based on what caregivers reported about themselves, used as a stand-in for well-being — not a direct measure of how the child is actually doing.

Lovett, N., and Xue, Y. (2020). Family first or the kindness of strangers? Foster care placements and adult outcomes. *Labour Economics, 65,* Article 101840.

Link: https://doi.org/10.1016/j.labeco.2020.101840

STUDY POPULATION: Formal kinship foster care compared with non-relative ("stranger") foster care

Key findings: Former foster youth placed with kin were more likely to be employed or enrolled in school, and less likely to be incarcerated, homeless, or receiving public assistance, at age 21.

Notable / specific result: This is one of the few studies in the kinship literature to use a research design built to isolate cause and effect, rather than simply comparing groups as they naturally occur. The authors also report the kinship advantage is stronger for young women than young men across several outcomes.

Limitations: To creatively approximate a controlled experiment, the researchers relied on a real-world pattern: relative caregivers are typically paid less than unrelated foster parents, and this pay gap happens to steer some children toward kin placement and others toward non-kin placement for reasons that have nothing to do with the child's own needs. The researchers used this pay gap as a stand-in for random assignment. This approach only works if the pay gap affects a young person's later outcomes *only* through where they were placed — not through some other hidden pathway. That assumption cannot be fully proven, only argued for. In addition, the findings are based on outcomes at age 21 within one state's foster care payment and administrative system, so they may not hold true in other states or at other ages.

O'Higgins, A., Sebba, J., and Gardner, F. (2017). What are the factors associated with educational achievement for children in kinship or foster care: A systematic review. *Children and Youth Services Review, 79,* 198–220.

Link: https://doi.org/10.1016/j.childyouth.2017.06.004

STUDY POPULATION: Formal kinship and foster care in high-income countries (a review of existing studies)

Key findings: Male gender, ethnic-minority status, and special educational needs were consistent predictors of poorer outcomes, while caregiver and young person aspirations predicted greater success.

Notable / specific result: Drawing on the 39 studies that met inclusion criteria (screened down from an initial pool of over 7,000), the review could not identify a consistent kinship-versus-foster effect on education specifically.

Limitations: Most studies reviewed are from outside the U.S. or predate newer studies that use large, linked government datasets, like Washington, Stewart, and Rose (2021), already in this bibliography.

Osborne, J., Hindt, L. A., Lutz, N., Hodgkinson, N., and Leon, S. C. (2021). Placement stability among children in kinship and non-kinship foster placements across multiple placements. *Children and Youth Services Review, 126*, Article 106000.

Link: https://doi.org/10.1016/j.childyouth.2021.106000

STUDY POPULATION: Formal kinship foster care compared to non-kin foster care

Key findings: Kinship placement was associated with fewer disruptions across the first three placements a child experienced, even after accounting for the child's behavior problems and other risk factors.

Notable / specific result: Most placement-stability research only studies a child's first placement or first disruption; this study is one of the few to show the kinship stability advantage holds up across a child's second and third placements too, not just their first. The authors conclude that caseworkers should continue to consider kinship care even when a prior kin placement has disrupted.

Limitations: Drawn from a family-finding intervention study rather than a general child welfare sample, which may affect how representative the findings are. The survival analysis covers up to a child's first four placements, so it does not describe what happens for children with more placement changes than that.

Osborne, J., and Leon, S. C. (2024). Beyond family: Patterns of kin and fictive kin caregivers among children in the child welfare system. *Children and Youth Services Review, 163,* Article 107823.

Link: https://doi.org/10.1016/j.childyouth.2024.107823

STUDY POPULATION: Formal, child-welfare-involved placements. The study looks beyond just who the child is placed with (custodial kin) to map the child's full network of supportive relatives and family friends — including those the child does not live with (non-custodial kin and non-custodial fictive kin).

Key findings: Four distinct network profiles emerged, each describing a different mix of relatives and family friends around a child: "Multigenerational Predominant Cousin" (support spanning several generations, mostly cousins), "Bigenerational Lower Involvement" (two generations, less involved overall), "Bigenerational Predominant Fictive Kin" (two generations, mostly close family friends rather than blood relatives), and "Multigenerational Predominant Aunt/Uncle" (several generations, mostly aunts and uncles). In short, there is variety in who surrounds a child in care.

Notable / specific result: One profile was centered on fictive kin rather than blood or marriage relatives, underscoring that "kinship support" for a meaningful share of children in care is organized around fictive kin relationships rather than a conventional family tree.

Limitations: This method groups children into profiles based on shared patterns in their support networks — it describes those patterns rather than testing whether they cause different outcomes for children. The profiles come from one sample in one place, so this same four-profile picture might look different elsewhere.

Sattler, K. M. P., Herd, T., and Font, S. A. (2023). Foster care, kinship care, and the transition to adulthood: Do child welfare system processes explain differences in outcomes? *Children and Youth Services Review, 153,* Article 107098.

Link: https://doi.org/10.1016/j.childyouth.2023.107098

STUDY POPULATION: Formal kinship foster care, directly compared to non-relative foster care

Key findings: Initial placement setting was not directly related to incarceration or teen parenthood. However, initial placement in kinship care was associated with fewer placement moves, longer duration in care, and a higher probability of a new maltreatment investigation, and it was that new investigation specifically — not the initial placement type — that was linked to worse incarceration and teen-parenthood outcomes.

Notable / specific result: This is a challenge to the more positive kinship-care narrative found in the bibliography. Rather than asking whether kinship care looks better on the surface, it asks what is actually driving the difference, and finds that a higher rate of subsequent maltreatment investigation in kinship care is doing some of that work, not the placement type itself.

Limitations: This uses official case records from a single state (Wisconsin), covering children who entered care between ages 5 and 10. A higher rate of maltreatment investigations in kinship care could reflect real differences in how often maltreatment happens, or it

could mean kin caregivers are watched more closely and get reported on more readily — or some mix of both. The study cannot fully separate these explanations.

Sharda, E. A., Sutherby, C. G., Cavanaugh, D. L., Hughes, A. K., and Woodward, A. T. (2019). Parenting stress, well-being, and social support among kinship caregivers. *Children and Youth Services Review, 99*, 74–80.

Link: https://doi.org/10.1016/j.childyouth.2019.01.025

STUDY POPULATION: Kinship caregivers generally (formal and informal caregivers surveyed together)

Key findings: Higher perceived social support was associated with lower parenting stress and higher kinship caregiver well-being. Caregivers who felt isolated from formal and informal support networks reported the highest stress levels.

Notable / specific result: The relationship between support and well-being held even after accounting for caregiver age and household income, suggesting support access, not just financial resources, is independently associated with kinship caregiver well-being.

Limitations: This is a one-time snapshot based on what caregivers said about themselves. The sample was not selected to represent the whole country, so these specific rates should not be assumed to hold true everywhere.

Shao, W., Sun, F., Sheneman, G., and Brock, M. (2024). Children's behavioural issues and kinship caregiver depression: The roles of self-care and formal support. *Child & Family Social Work, 2024*, 1–9.

Link: https://doi.org/10.1111/cfs.13165

STUDY POPULATION: Formal kinship caregivers connected to a kinship care navigator program (118 caregivers in Michigan, surveyed once)

Key findings: More frequent child behavioral issues were associated with higher kinship caregiver depression. Caregivers' self-care practice statistically explained (mediated) that relationship: caregivers facing more child behavior problems reported less self-care, and less self-care was in turn associated with higher depression.

Notable / specific result: Use of the navigator program moderated the pattern unevenly: it was associated with lower depression for caregivers whose children had low or moderate levels of behavioral issues, but that benefit did not extend to caregivers whose children had the most behavioral issues — suggesting that service navigation and referral alone may not be enough support for the highest-need families.

Limitations: The sample is small (118 caregivers), drawn through one Michigan program, which limits how broadly the findings apply. The design is a single cross-sectional survey, so it cannot establish which comes first, child behavior problems or caregiver depression, and the authors note the relationship likely runs in both directions.

Shelton, J. L. (2026). Getting to guardianship: Impacts of kinship guardianship subsidies on guardianship permanency for foster care-involved youth. *Children and Youth Services Review, 188*, Article 109107.

Link: https://doi.org/10.1016/j.childyouth.2026.109107

STUDY POPULATION: Formal kinship foster care exiting to subsidized guardianship (Title IV-E KinGAP)

Key findings: Title IV-E KinGAP is a federal program that provides subsidies to relative caregivers who become a child's legal guardian, offering a permanency option that does not require terminating the birth parents' rights (as adoption does) or keeping the child in ongoing foster care. This study found that KinGAP enactment did not significantly change the likelihood that a child exited foster care, or exited specifically to guardianship, in the states and years studied.

Notable / specific result: This complicates the assumption that subsidy access alone drives guardianship uptake (compare Killos et al., 2018, which documents subsidy policy design but does not test its effect on uptake). This study's research design, built to isolate cause and effect, suggests financial support by itself may not be enough, and that other barriers (e.g., licensing standards, awareness, agency practice) may matter as much or more.

Limitations: This approach — comparing states before and after they adopted KinGAP, since states rolled it out in different years — captures the average effect of subsidy availability, not how well individual states implemented or publicized their programs, so it

cannot distinguish "subsidies do not work" from "subsidies were not reaching families." It also covers 2009–2018 state adoption only, before more recent state-level implementation changes.

Washington, T., Coley, S. L., Blakey, J. M., Walton, Q. L., Labban, J., Tadese, H. B., Martinez, D. N., and Leathers, S. J. (2025). Caregiver and birth parent influences on depression and anxiety in African American children in kinship care. *Healthcare, 13*(16), Article 2025.

Link: https://doi.org/10.3390/healthcare13162025

STUDY POPULATION: African American kinship caregivers and children, formal and informal arrangements combined

Key findings: Children in kinship care showed fewer symptoms of depression and anxiety when their caregivers reported lower stress. A stronger relationship between the child and their birth mother was also linked to better outcomes, particularly in reducing depressive symptoms.

Notable / specific result: This mixed-methods study surveyed 58 African American kinship caregivers, then followed up with interviews of 16 of those caregivers — and those qualitative interviews surfaced two themes not captured by the survey data alone: the ongoing grief and financial strain caregivers describe as "the weight of kinship care," and the mixed role birth parent relationships play, offering connection but also conflict and loss.

Limitations: Small sample (58 caregivers) recruited through a single research team's network. Combining survey and interview data strengthens the interpretation, but still cannot tell us for certain whether caregiver stress is causing the child's mental health symptoms, the reverse, or both.

Washington, T., and Despard, M. (2024). Making a way out of no way: The importance of improving financial instability among African American kinship care families. *Children and Youth Services Review, 158*, Article 107409.

Link: https://doi.org/10.1016/j.childyouth.2023.107409

STUDY POPULATION: Kinship care households broadly, identified by demographic characteristics in a nationally representative dataset

Key findings: Using a nationally representative dataset, predicted probabilities for three types of financial instability were higher among households with demographic characteristics of kinship care families than comparison households. The three measures were: difficulty covering household expenses, having income that does not exceed expenses, and lacking emergency savings.

Notable / specific result: This is the bibliography's clearest quantitative treatment of financial hardship as a distinct, measurable risk facing kinship families, rather than a background assumption. The authors connect financial instability to downstream effects on parental stress and children's academic and behavioral outcomes reported in other research.

Limitations: Kinship care status is inferred from household demographic characteristics rather than directly identified in the dataset, so findings describe households that resemble kinship families rather than a confirmed kinship care sample specifically.

Washington, T., Stewart, C. J., and Rose, R. A. (2021). Academic trajectories of children in formal and informal kinship care. *Child Development, 92*(6), 2299–2316.

Link: https://doi.org/10.1111/cdev.13580

STUDY POPULATION: Both formal and informal kinship care, directly compared against non-kin foster care and children never in out-of-home care

Key findings: Children in formal kinship care had academic performance trajectories statistically similar to children who were never in out-of-home care. Children in non-kin foster care and informal kinship care performed significantly worse academically than both the formal-kinship and never-in-care groups. However, in additional analyses that directly compared kinship placements to non-kin foster care, both informal and formal kinship settings were protective relative to non-kin foster care, with a real advantage for math (informal: .48 points; formal: .94 points); no meaningful differences were found for reading.

Notable / specific result: The finding that children in informal kinship care experienced worse academic outcomes than children in formal kinship care suggests that the services and supports available to children in formal kinship care are an important contributor to

their academic trajectories. At the same time, placement type relative to non-kin foster care specifically does matter: both formal and informal kinship care outperformed non-kin foster care in math, and children in formal kinship care performed similarly to children in the general population who were never in out-of-home care.

Limitations: The sample is drawn from a single state (North Carolina) and one school cohort year, so results may not generalize to other states' child welfare and education systems. Official school and welfare records cannot capture why informal kinship children fared worse (e.g., unmeasured hardship, lack of legal status to enroll in services).

Washington, T., Walton, Q. L., Kaye, H., Hong, J. S., and Cook, B. (2024). Exploring self-care practices of African American informal kinship caregivers. *Child & Family Social Work, 29*(1), 12–23.

Link: https://doi.org/10.1111/cfs.13047

STUDY POPULATION: Informal kinship caregivers specifically (African American caregivers outside the formal child welfare system)

Key findings: The study found three themes in how African American informal kinship caregivers practice self-care. First, caregivers used specific behaviors to manage stress, though some of these coping methods were maladaptive. Second, the children in their care sometimes reminded caregivers to take care of themselves. Third, some caregivers prioritized their own needs through activities like listening to music or exercising.

Notable / specific result: Some caregivers described the children they were raising as the ones prompting their self-care (e.g., reminding them to attend a doctor's appointment), inverting the usual caregiver-to-child support direction this bibliography otherwise documents.

Limitations: Small pilot sample (12 caregivers) recruited for a qualitative study, not designed to be representative. Findings describe patterns that would need further testing.

Wheeler, C., and Vollet, J. W. (2017). Supporting kinship caregivers: Examining the impact of a Title IV-E waiver kinship supports intervention. *Child Welfare, 95*(4), 91–110.

Link: https://www.jstor.org/stable/48623589

STUDY POPULATION: Voluntary (informal) kinship care with unlicensed caregivers, compared to non-relative foster care and to unlicensed kin care without the intervention

Key findings: Children whose kinship caregivers received Kinship Supports Intervention (KSI) services were less likely to experience a re-report of maltreatment within 6, 12, and 18 months, and were about three times less likely to re-enter out-of-home care, than children in non-relative foster care. KSI children also had fewer placement moves and less time in care than both the non-relative foster care and unsupported kinship comparison groups.

Notable / specific result: KSI children were less likely to reunify with parents but more likely to achieve permanency overall than the non-relative foster care comparison group. The intervention's measurable effects were concentrated in stability and safety rather than in reunification.

Limitations: Findings come from a single state's IV-E waiver demonstration (2012–2015) and one specific service model (a kinship coordinator role), so results may not generalize to kinship navigator or support programs structured differently in other states.

Winokur, M. A., Holtan, A., and Batchelder, K. E. (2018). Systematic review of kinship care effects on safety, permanency, and well-being outcomes. *Research on Social Work Practice, 28*(1), 19–32.

Link: https://doi.org/10.1177/1049731515620843

STUDY POPULATION: Formal kinship foster care (compared to non-kin foster care)

Key findings: As compared to children in traditional (non-kin) foster care, children in kinship foster care showed fewer behavioral problems, fewer mental health disorders, better overall well-being, fewer placement disruptions, and lower use of mental health services. Reunification rates were similar across the two groups.

Notable / specific result: The one domain where kinship care did not come out ahead was mental health service access: children in kinship care received fewer mental health services than children in foster care. That can be interpreted as an access gap rather than a worse outcome for kinship children; the same pattern appears elsewhere in this bibliography (see Casanueva et al., 2020).

Limitations: The analysis included studies that compared existing groups rather than randomly assigning them, which leaves room for selection bias (families or caseworkers may route more resilient children toward kin). Most underlying studies used official child welfare records, so findings describe formal, agency-supervised kinship foster care and do not necessarily apply to informal or diverted arrangements. The re-abuse comparison specifically (what the review labels "institutional abuse") pooled only 3 of the 102 included studies.

Wu, Q. (2017). The relationship between kinship diversion/voluntary and child behavior problems. *Child Welfare, 95*(3).

Link: https://www.cwla.org/journal-archives/

STUDY POPULATION: Kinship diversion/voluntary specifically, children diverted to kin at the point of a child protection investigation without entering formal foster care

Key findings: Kinship diversion/voluntary was associated with children's behavior problems in ways that differed from both formal kinship foster care and non-kin foster care comparisons, indicating diverted children and families may need distinct, not identical, supports relative to families in the formal system.

Notable / specific result: This is the one study in the bibliography built specifically around diversion/voluntary as its own placement category, rather than folding diverted families into a broader "informal kinship" group.

Limitations: Diversion/voluntary is inconsistently defined and tracked across states--and even across counties within states--so single-study findings on diversion/voluntary should be read as suggestive rather than definitive until state-level tracking matures.

Wu, Q., White, K. R., and Coleman, K. L. (2015). Effects of kinship care on behavioral problems by child age: A propensity score analysis. *Children and Youth Services Review, 57*, 1–8.

Link: https://doi.org/10.1016/j.childyouth.2015.07.020

STUDY POPULATION: Kinship foster care compared with non-kinship foster care, split into younger (ages 0–5) and older (ages 6–17.5) age groups (584 children in kinship care and 470 in non-kinship care)

Key findings: The study found that older children in kinship care had significantly lower levels of externalizing, internalizing, and total behavior problems than matched children in non-kinship foster care. For younger children, kinship care showed a similar pattern, but the difference did not reach statistical significance.

Notable / specific result: The age split is this study's distinguishing contribution: it suggests that any behavioral advantage associated with kinship care may not be uniform across childhood, and may be easier to detect statistically in older children than in children under six.

Limitations: The data is a single comparison rather than a long-term follow-up, so the study cannot say whether the age-related pattern persists as children get older. As with related studies in this bibliography (e.g., Font, 2014), the matching method reduce--but do not eliminate--the possibility that unmeasured differences between children placed with kin and those placed with non-kin explain part of the result.

Wu, Q., Zhu, Y., Brevard, K., Wu, S., and Krysik, J. (2024). Risk and protective factors for African American kinship caregiving: A scoping review. *Children and Youth Services Review, 156*, Article 107279.

Link: https://doi.org/10.1016/j.childyouth.2023.107279

STUDY POPULATION: African American kinship caregivers specifically (formal and informal combined across the reviewed literature)

Key findings: In a review of existing studies, the most common risk factors for African American kinship caregivers were found to be financial need and physical health; the most common protective factor was caregivers' spirituality/religion.

Notable / specific result: This is the only entry in the bibliography to organize the evidence base specifically around what helps versus what strains African American kin caregivers, rather than around placement type or outcome domain, and it surfaces spirituality/religion as a protective factor not highlighted elsewhere in this bibliography.

Limitations: As a broad review, it maps the breadth of existing risk/protective-factor research rather than formally rating study quality or combining results into one overall statistic.

Wu, Q., Zhu, Y., Ogbonnaya, I., Zhang, S., and Wu, S. (2020). Parenting intervention outcomes for kinship caregivers and child: A systematic review. *Child Abuse and Neglect, 106,* Article 104524.

Link: https://doi.org/10.1016/j.chiabu.2020.104524

STUDY POPULATION: Predominantly formal kinship caregivers (a small number of included studies also enrolled informal caregivers)

Key findings: Overall, the review of existing studies suggest positive effects of parenting interventions on kinship caregiver stress, parenting competencies, and children's behavior problems.

Notable / specific result: Effects were inconsistent across specific outcomes. Most individual interventions improved some outcomes (e.g., caregiver stress) but not others (e.g., child behavior) within the same study, meaning no single intervention model showed consistent benefit across the board.

Limitations: Included studies used widely varying designs and measures, several with small samples and short follow-up windows, which the review authors flag as limiting confidence in which specific intervention components drive positive effects.

Xu, Y., and Bright, C. L. (2018). Children's mental health and its predictors in kinship and non-kinship foster care: A systematic review. *Children and Youth Services Review, 89,* 243–262.

Link: https://doi.org/10.1016/j.childyouth.2018.05.001

STUDY POPULATION: Formal kinship foster care

Key findings: Children in kinship care showed better mental health outcomes than children in non-kinship care in simple side-by-side comparisons. The review also catalogued predictors of mental health across child, caregiver, family, and neighborhood levels.

Notable / specific result: Once studies accounted for other differences between groups using statistical models, the kinship advantage became mixed and inconsistent. How strong the finding looked depended heavily on the study's design — a one-time snapshot versus following the same children over time — and whether selection bias was addressed.

Limitations: Only eight studies met inclusion criteria. The review is limited to formal foster care placements; informal kin arrangements outside child welfare supervision were out of scope.

Xu, Y., Bright, C. L., Ahn, H., Huang, H., and Shaw, T. (2020). A new kinship typology and factors associated with receiving financial assistance in kinship care. *Children and Youth Services Review, 110*, Article 104822.

Link: https://doi.org/10.1016/j.childyouth.2020.104822

STUDY POPULATION: Formal kinship foster care, classified by type of financial assistance received

Key findings: Kinship families of color other than Black, children with more internalizing problems, and caregivers who were employed had lower odds of receiving foster care payments; being a licensed foster caregiver was associated with lower odds of receiving TANF.

Notable / specific result: This is the bibliography's clearest empirical picture of how unevenly financial assistance actually reaches kinship families, identifying specific caregiver and child characteristics linked to falling through the cracks of both TANF and foster care payment systems.

Limitations: Cross-sectional data from a single survey wave limits the ability to track families' financial assistance status over time. The categories used come from one national survey's classification system and may not capture more recent state-level policy changes.

Xu, Y., Bright, C. L., Barth, R. P., and Ahn, H. (2021). Poverty and economic pressure, financial assistance, and children's behavioral health in kinship care. *Child Maltreatment, 26*(1), 28–39.

Link: https://doi.org/10.1177/1077559520926568

STUDY POPULATION: Formal kinship foster care (267 children who remained in kinship care across three waves of nationally representative data)

Key findings: Economic pressure (caregivers' subjective sense of financial strain) and receipt of TANF were both associated with increases in kinship children's internalizing and externalizing behavior problems over time. Receiving TANF worsened the effect of poverty on externalizing problems, but softened the effect of economic pressure on internalizing problems.

Notable / specific result: The study distinguishes poverty (an objective measure) from economic pressure (caregivers' subjective experience of financial strain) and finds that the subjective experience carries its own, separate association with children's behavioral health — a nuance a poverty statistic alone would miss. On average, however, children's internalizing and externalizing scores stayed within the normal range.

Limitations: Financial assistance here is limited to TANF and foster care payments; other supports (e.g., SNAP, informal help from family) are not captured. The correlational design also limits what can be said about direction: economic hardship and behavior problems could both stem from an unmeasured third factor, such as caregiver mental health, which this bibliography documents elsewhere (e.g., Xu, Wu, Levkoff, & Jedwab, 2020).

Xu, Y., Jedwab, M., Soto-Ramirez, N., and Weist, M. D. (2023). The use of mental health services among children in kinship care: An application of Andersen's behavioral model for health services use. *Journal of Public Child Welfare, 17*(3), 669–694.

Link: https://doi.org/10.1080/15548732.2022.2092809

STUDY POPULATION: Formal kinship foster care specifically (718 children in kinship care drawn from Wave II of NSCAW II)

Key findings: The study found that clinically significant internalizing and externalizing problems along with child age, gender, and Hispanic ethnicity, were associated with children's use of mental health services.

Notable / specific result: The study breaks mental health service use into specific service types rather than treating it as one outcome: being Hispanic, older, living in poverty, and having a male caregiver were tied to higher odds of school-based services specifically, while being a girl or having a caregiver in better physical health was tied to lower odds.

Limitations: The sample is limited to children already in formal kinship foster care, so it does not describe service use among children in informal or diversion arrangements. Because the analysis is cross-sectional, it identifies factors associated with service use at one point in time rather than tracking whether use changes as children's needs change.

Xu, Y., Wu, Q., Levkoff, S., and Jedwab, M. (2020). Material hardship and parenting stress during the COVID-19 pandemic among grandparent kinship providers: The mediating role of grandparents' mental health. *Child Abuse and Neglect, 110*(Part 2), Article 104700.

Link: https://doi.org/10.1016/j.chiabu.2020.104700

STUDY POPULATION: Grandparent kinship caregivers, largely outside formal foster care licensure

Key findings: Material hardship during the pandemic was associated with higher parenting stress, and this relationship ran through grandparents' own mental health. Hardship worsened mental health, which in turn worsened parenting stress.

Notable / specific result: Because hardship was associated with parenting stress through caregiver mental health, caregiver mental health is a plausible point of intervention alongside material assistance.

Limitations: Data were collected at a single, pandemic-specific time point from a sample of people who were easy to reach rather than randomly selected. That limits how well the findings apply to non-crisis periods and to grandparent caregivers who were harder to reach through the study's recruitment channels.