When Binary and Bias Thinking Erodes Thoughtful, Informed, and Instructive Conversations

Setting a thoughtful agenda for Kinship care research

By Dr. Sharon McDaniel, Founder & CEO, A Second Chance, Inc. & Dr. James T. Freeman, Chief Program Officer, A Second Chance, Inc.

Every field we have ever worked in — leadership, organizational learning, child welfare — eventually produces the same failure mode. A real and important question gets asked. Instead of being answered, it gets sorted. Which side are you on? Are you pro or con? Team safety or team family? Once a question has been sorted into a side, the work of actually answering it tends to stop, because the work is now persuasion, not discovery.

Kinship care policy is living through exactly this moment, and the sorting has already narrowed the conversation in ways that cost children something real. The question that dominates public debate — whether the field should support kinship care — is not, in fact, the important one. Almost no one seriously argues that children should be removed from grandparents, aunts, and adult siblings who are willing and able to keep them safe. The important question, the one binary framing keeps us from asking, is this: what supports must be in place for a kinship arrangement to meet a child's needs for safety, stability, and permanency — and who is responsible for ensuring those supports exist? That is a question about practice, infrastructure, and accountability. It cannot be answered by a side. It can only be answered by doing the work.

On one side of the current debate, a genuine and well-documented body of evidence shows that children placed with relatives and kin experience greater stability, stronger identity continuity, and — on the safety measures we can measure at scale — lower rates of re-abuse than children in non-relative foster care. On the other side, real cases of children harmed while in a relative's care are treated as proof that the entire kin-first movement is a safety compromise dressed up as a values statement. Both camps are working from real material. Neither camp, as currently practiced, is asking the question that would actually move the field forward: not "which side is right," but what we still do not know and why we do not know it yet.

What the Evidence Actually Supports

We need to be precise about what the current research shows and what is at stake, because both sides of this debate tend to skew the evidence toward their preferred conclusions.

Kinship caregiving is not a marginal arrangement at the edges of the child welfare system — it is a significant part of how the country already raises children who cannot remain with their parents. In federal fiscal year 2023, 131,490 children, or 38% of all children in foster care nationally, were living with a relative or kin caregiver, and just over half of those children — 70,934 — were in the care of licensed kin (Child Welfare Information Gateway, n.d.). Zoom out beyond the formal foster care system, and the number grows by an order of magnitude: an

estimated 2.5 million children are being raised in kinship and grandfamilies across the country. For every child in licensed kinship foster care, roughly 19 more are being raised by relatives entirely outside the system, with no agency oversight and, in most cases, little to no formal support (Generations United, 2026). That ratio matters. It means the debate over kin-first policy is really a debate over how — and whether — the child welfare system engages with a form of caregiving that families are already doing at massive scale, largely without it.

The most rigorous synthesis available — a Cochrane systematic review and meta-analysis by Winokur, Holtan, and Batchelder, pooling 102 studies and 666,615 children — found that children in kinship foster care had substantially lower odds of re-abuse than those in non-relative foster care, and that children initially placed in non-relative foster care were significantly less likely to ever achieve reunification than those initially placed in kinship care (hazard ratio = 0.76, p = .002) (Winokur et al., 2014). A more recent scoping review by Hallett, Garstang, and Taylor, covering 26 studies across five countries, presented a more mixed picture: lower rates of physical and sexual re-abuse in kinship care, but higher rates of neglect — and, notably, the authors explicitly declined to pool these findings into a single meta-analytic estimate because of heterogeneity across the underlying studies (Hallett et al., 2021). National maltreatment-fatality data from the Administration for Children and Families consistently show that parents, not any category of substitute caregiver, account for the overwhelming majority of child deaths — roughly 80% to 82% in each of the last three federal fiscal years — with relatives accounting for 4% to 5% (U.S. Department of Health and Human Services et al., 2025). A 2025 national study using 3.4 million records of children in state-supervised foster care found no association between how much a state relies on foster care entries and its rate of child maltreatment deaths (Edwards et al., 2025; Rutgers School of Criminal Justice, 2026).

I want to be neutral about what this evidence does and does not tell us, because the temptation on both sides is to reach beyond the data toward a verdict. The data shows that kinship placement correlates with lower re-abuse and better permanency outcomes on the measures we track well. It also shows that neglect risk in kinship settings deserves serious attention rather than dismissal. It shows that fatality is overwhelmingly a parental-supervision phenomenon, not a kinship-caregiver phenomenon, and that expanding kinship placement has not been shown to increase maltreatment deaths at the state level. None of that is a mandate. It is a floor — a description of what is currently known, offered so the conversation that follows can focus on what we still need to find out and the urgency of finding it, rather than on who gets to claim the data as a trophy.

What None of This Literature Answers

What this literature does not do — and I want to be direct, because this is the real gap, not a talking point for either side — is answer the question driving the public debate: whether children placed with licensed kinship caregivers die at the hands of those caregivers at a different rate than children placed with non-relative foster caregivers. That comparison has never been tested in a meta-analysis. It may not be answerable yet. AFCARS and NCANDS do not routinely link fatality-perpetrator data to placement type and caregiver licensure status at the caregiver level. So the honest answer to “where is the meta-analysis” is that it does not exist yet, for either side. In its absence, both sides are filling the gap with the next-best available material — correlational studies on one side and individual case narratives on the other. Neither is a substitute for the data we actually need.

Why the Binary Is the Real Problem

This is where binary thinking does its quiet damage. Once a debate is framed as kin-first versus safety-first, every new piece of evidence is treated as ammunition rather than as information. A meta-analysis showing lower re-abuse odds in kinship care becomes a talking point for expanding kinship placement, full stop — even though the same body of research shows higher neglect rates that warrant a serious response. A tragic case involving a kinship caregiver becomes proof that licensing standards were "weakened," even when the underlying facts — who actually committed the harmful act and what the vetting failure was — often turn out to be more complicated than the framing allows. Both moves skip the same step: determining what would have to be true for the claim to hold, and then checking.

The deeper cost of the binary is that it forces stakeholders to defend a position rather than solve a problem. Framed as "pro-kin" versus "pro-safety," the field spends its energy on defending positions rather than collaborating, and the "binary thinking" it produces is precisely what keeps best-practice solutions from being developed and implemented. Thus, the real challenge before us is not whether kinship or safety matters more. It never was. The challenge is understanding how to support families and kin caregivers in ways that strengthen both outcomes at the same time, because in the overwhelming majority of cases, they are not in tension with each other at all.

ASCI has spent thirty-one years operating as a kinship-exclusive foster care agency that has served more than 40,000 children. The organization and its leaders did not have the benefit of theory when they began this work. We had the benefit of practice — watching, case by case, what made a kinship placement safe and durable and what put it at risk. It was almost never the caregiver's relationship to the child. It was whether the agency did the work of vetting, training, monitoring, and supporting that caregiver with the same rigor it would apply to any placement. That is not a kin-first insight or a safety-first insight. It is a practice insight, and practice insight is exactly the category of evidence that tends to get left out of a debate that has been sorted into two research camps talking past each other in national publications.

The Bias Hiding Inside "Neglect" and "Fatality"

Binary thinking does not just distort which studies get cited. It shapes which explanations we reach for when something goes wrong, and those explanations carry their own unexamined bias. Neglect findings are routinely read through a lens that assigns responsibility to the caregiver, specifically to the caregiver's judgment or effort, without an equally rigorous look at the systemic failures, structural barriers, and root causes tied to poverty that so often underlie a neglect determination. A kinship caregiver who cannot keep the lights on, cannot afford childcare while working two jobs, or lacks reliable transportation to appointments is at elevated risk of a neglect finding that has almost nothing to do with whether they love or are committed to the child in their care. When the field treats the Hallett et al. (2021) review's elevated neglect finding as evidence against kinship placement rather than as evidence of under-supported kinship placement, it reproduces exactly this bias at the policy level.

Fatalities are read through the lens of the opposite distortion. A child's death rightly demands visible action, public accountability, and legal response — and it should. But that same visibility

can crowd out the harder, slower work of examining the systemic factors, missed opportunities, and collective failures that actually contributed to the outcome. A single caregiver's failure is a satisfying story with a clear villain. A cascade of missed risk assessments, unfilled caseworker positions, unmonitored case transfers, and under-resourced family support services is not a satisfying story, but it is usually the more accurate one, and it is the one that would actually change what happens next. A field that lets the visibility of fatality substitute for the analysis of fatality will keep re-learning the same lessons after the next tragedy instead of preventing it.

Naming these biases is not an attempt to excuse harm or minimize accountability. It is an acknowledgment that the assumptions embedded in how we categorize neglect and fatality shape the policy conclusions we draw, and that a genuine kin-first culture requires examining those assumptions with the same rigor we apply to the outcome data.

Placement Search Is Not a Kin-First Culture

This brings these authors' attention to the distinction we believe matters most and should be the heart of any serious call to action on this issue: the difference between a placement search and a kin-first culture.

A placement search is what an agency undertakes when it is short on foster homes and begins considering relatives as an available option. It is a response to scarcity. It is reactive, often triggered by caseload pressure or a shortage of licensed non-relative homes, and it treats kin primarily as a placement resource to be located, vetted quickly, and used. A kin-first culture is categorically different. It is a deliberate philosophy and practice model, built on the value of family and the use of families as a resource before a crisis occurs rather than in response to one. It is the commitment to a culture that recognizes family and kin networks as the primary source of connection, stability, and permanency for children, and that provides the sustained infrastructure — intentional family finding, real financial and training support, and ongoing agency oversight — required to make that recognition real rather than aspirational.

The difference is not semantic. An agency running a placement search under kinship-friendly language will often reduce foster care caseloads on paper while quietly shifting the burden of vetting, training, and monitoring onto families who never asked for it and were never resourced to carry it. An agency practicing an actual kin-first culture does the opposite: it seeks family before a placement decision becomes urgent, treats financial and training support as infrastructure rather than an afterthought, and holds itself, not just the caregiver, accountable for the placement's safety and durability. Much of the current debate collapses these two things into a single label, and that collapse is doing real damage. When critics point to a case where "kin-first" failed a child, it is worth asking which of these two very different practices was actually in place. An unfunded mandate to reduce placement caseloads by leaning on relatives is not a kin-first culture failing. It is a placement search wearing a kin-first culture's language, and the field owes itself the honesty to tell the two apart.

Support Is Not an Incentive

A genuine kin-first culture also requires the field to examine a quieter assumption underlying the financial-support debate: the idea that families step forward to care for their own primarily

because of the financial support attached to doing so. That assumption gets the causal relationship backward. In ASCI's thirty-one years of practice, the caregivers we have watched step forward for a niece, nephew, grandchild, or sibling were almost never motivated by the availability of a subsidy. They were motivated by the relationship. What financial support does is remove the barriers that would otherwise make it impossible for a willing, committed relative to follow through — the missed shifts, the extra bedroom, the childcare, the legal fees, the simple math of adding a child to a household already stretched thin.

This distinction is not a technicality. If we treat financial assistance as an incentive, we implicitly frame it as something that risks attracting the wrong caregivers for the wrong reasons, inviting tighter scrutiny, greater suspicion, and slower support at exactly the moment families need it most. If we instead recognize financial assistance as an investment — in family stability, in placement durability, in the child's well-being — we ask a different, better question: are we providing enough support, quickly enough, to let a family's existing commitment succeed? That reframing does not lower the bar for safety. It raises the bar for what the system owes a family it is asking to do this work.

A Thoughtful Research Agenda

If the field wants to move past dueling anecdotes and past dueling correlational studies, here is where we believe the actual work is:

- Link the existing datasets. AFCARS tracks placement type and licensure status. NCANDS tracks fatality and maltreatment perpetrator relationships. Neither is currently built to answer the caregiver-death-by-placement-type question because they were never linked at the case level for this purpose. That is a data infrastructure problem, not a values problem, and it is solvable.
- Separate the effect of kinship placement from the effect of licensing-standard changes. These are two distinct variables that the current debate treats as one. A study design using staggered state-level policy adoption or state and agency fixed effects could isolate whether the relationship (kin vs. non-kin) or the standard (licensed vs. waived requirements) is doing the work.
- Take neglect as seriously as fatality. The Hallett et al. (2021) scoping review's finding of higher neglect rates in kinship care warrants its own research agenda, separate from and not subordinate to the fatality debate, and grounded in the structural and poverty-related drivers discussed above. Under-supported kinship caregivers experiencing higher neglect rates is a resourcing and support-infrastructure question, not an argument against kinship placement itself.
- Bring large-N practice data into the research conversation. Academic researchers rarely have access to, or cite, single-agency operating records spanning decades and covering tens of thousands of children. That data exists. It should be treated as a legitimate evidentiary input, reviewed with the same rigor applied to any dataset, rather than

dismissed as anecdote simply because it originates with a practitioner rather than a university.

- Study what "kin-first" means in practice, not just in policy language. Measure and report the distinction described above — a placement search versus a kin-first culture — as a variable in its own right, not an assumption. A well-implemented kin-first culture includes rigorous family finding, real financial and training support for caregivers, and sustained agency-supported partnership with the entire kinship triad. Kin-first, when implemented as an unfunded mandate to reduce foster care caseloads, looks nothing like that, and research that fails to distinguish between them will keep producing findings neither side can actually use.

Toward a Kin-First Culture

None of this requires anyone to abandon a position they hold in good faith. It requires the field to agree that the current evidence base is thinner than either side's rhetoric suggests and that filling it in is more useful than winning the next round of the argument. That is not a compromise position. It is simply what informed, instructive conversation looks like before it has been sorted into a side.

Achieving a genuine kin-first culture will take more than moving the needle on kinship placement rates. It will require a shift in how the field thinks about families, safety, support, and accountability, treating them together rather than as competing line items on separate ledgers. It will require moving past the false dichotomy that asks us to choose between kinship and safety and toward recognizing that they are not competing goals — they are complementary. As the nation's lead Kinship Care Organization, we draw on thirty-one years of practice insights that point to the same conclusion: a well-supported family keeps a child safe. That means investing in intentional family finding instead of reactive placement searches, confronting the biases embedded in how we read neglect and fatality, and providing kin caregivers with support built and funded as infrastructure rather than offered as an afterthought or viewed with suspicion as an incentive. That is the path to a child welfare system that strengthens families while it protects children. This is our call to action and the system transformation that will result in a true kin-first culture.

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