

Evaluation of the Young Carers Peer Support Group Toolkit

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The research team acknowledge this work was done on the lands of the Wadjuk peoples of the Noongar nation, Western Australia. We pay our deepest respects to the Elders past and present. We offer our gratitude to all Aboriginal participants who contributed to this research. This is, was and always will be Aboriginal land.



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Executive Summary

In Western Australia (WA), of the estimated 320,000 unpaid carers, approximately 40,000 are recognised as young carers (YCs), aged 8 years to 18 years, attending school (ABS, 2022; Carers WA, 2024c; Department of Communities, 2021). This figure of 40,000, equates to approximately two to three YCs in every WA classroom (Carers WA, 2024c). This does not include YCs aged 4 to 8 years, those not attending school due to their caring role, unidentified YCs and young adult carers aged over 18 years to 25 years (Carers WA, 2023; Carers WA, 2024c).


Compared to their peers, YCs provide additional practical and emotional support to family members, which can be detrimental to their social and emotional health and development (Carers WA, 2024a; Casu et al., 2021). The caring tasks undertaken can vary depending upon the strength of the family support structures, the disability or illness affecting the family member, and the age of the child or young person caring (Phelps et al., 2010; Ruggiero-Cakir, 2022).

It is estimated over 60% of YCs are the primary carer to an adult in their life and have heavy or very heavy caring responsibilities that equates to 20-50+ hours a week, or more undertaking tasks related to caring (Carers WA, 2024c). These tasks include assistance with mobility, cooking, cleaning, caring for siblings, supporting with appointments and medicine administration, managing finances, personal care and providing emotional support (Carers WA, 2024c).

Although caring for a family member can sometimes be a rewarding experience, YCs encounter challenges including emotional, physical, and financial strain of caregiving, risks of familial neglect, societal isolation and stigma, and disconnection from immediate and long-term social, educational and employment opportunities (Carers Australia, 2024; Carers WA, 2020; Kettell et al., 2021; Mohanty & Niyonsenga, 2019). YCs also encounter various challenges within the education setting including the social consequences of limited interaction with friends, educational issues arising from the inability to participate in extracurricular activities, complete homework or attend school events (Carers WA, 2024c; Kaiser et al., 2024).

Carers WA is the peak body representing the needs and interests of all carers in WA and is part of a national network of Carers Associations (Carers WA, 2024a). Carers WA report that the YC cohort is still one of the four main at-risk groups of young people in Australia (Redmond and Skattebol et al., 2016) and the most hidden, forgotten, and misunderstood within government policy, educational facilities, and social service organisations (Carers WA, 2024c). According to a recent ANU study, nearly one in six young people in Australia have caring responsibilities (Doery et al., 2024).

In response to these challenges, the Young Carer Team at Carers WA have developed a *Peer Support Group (PSG) Toolkit*, consisting of a starter kit and session plans designed to assist schools in facilitating a safe space to support children who are caring for a family member with a disability, physical or mental health challenges. The four-part practical toolkit was designed in consultation with young carers, educators, non-teaching staff and service providers across WA schools. The toolkit can be adapted for use in primary school, high school, or higher education settings.



In collaboration with a research team at The University of Western Australia (UWA), this qualitative research project aimed to evaluate the impact of the Carers WA PSG Toolkit on YCs and provide an overview of practical recommendations to improve the functionality and impact of the toolkit and policy recommendations to ensure ongoing implementation and expansion of the program within schools in WA. The project had a comprehensive and robust research approach that included: undertaking a qualitative literature review to provide an overview of other peer support group programs and services to support YCs within educational settings; an analysis of existing qualitative data collected by Carers WA from the Voice Lab interviews with 35 young carers aged 8 to 12 years old across three schools to gain an understanding of YCs experiences; and analysis of new qualitative data collected by UWA researchers from three focus group meetings with six school staff participants, (five from a primary school and one from a high school), to gain an understanding of their experiences and perspectives regarding peer support groups and the Carers WA PSG Toolkit for young carers in their schools.

Overall, the findings highlight the importance of Carers WA continued support in schools to assist with information and knowledge of YCs and confirmation the PSG Toolkit is essential in providing peer support for YCs within schools. The research found an urgent need to resource Carers WA to expand the scope of the PSG Toolkit and ensure the continuation of the valuable work they are doing to identify and support YCs in Western Australia.

Key practical recommendations to improve the functionality and impact of the toolkit and policy recommendations to ensure ongoing implementation and expansion of the program within schools in WA have been included in this report.


Introduction

Young carers (YCs) who care for and support family members often face negative impacts to their mental and physical health and psychosocial development due to high levels of stress, anxiety and depression (Bjorgvinsdottir & Halldorsdottir, 2014; Casu et al., 2021; Smyth et al., 2011). A YCs caring role can also negatively impact their school engagement and attrition, future employment prospects, and earning capacity (Casu et al, 2021; Kaiser et al., 2024; Smyth et al., 2011). Between 2022 and 2023, YCs aged 15-24 years saw a much higher than average decline in wellbeing. Indeed, 50% of YCs live in households that are close to or below the poverty line (Carers WA, 2024c).

School is an important place for YC's to develop their social connections, be identified and receive the supports they need to thrive (Kaiser et al., 2024; Smyth et al., 2011). However, a YCs caring responsibilities can negatively impact their engagement with education and social connection to peer groups (Carers WA, 2024c; Kaiser et al., 2024; McGowan, 2024; Smyth et al., 2011). As a result, YCs are more likely to suffer school absenteeism and lateness, miss deadlines for important assignments, lack resources needed to successfully participate in school and feel socially isolated, stigmatized and bullied (Butler & Astbury, 2005; Carers WA, 2024c; McGowan, 2024). Additionally, YCs can have difficulty concentrating when at school due to concern for their loved one at home, tiredness due to their caring role and anxiety about their social exclusion (Butler & Astbury, 2005; Carers WA, 2024c; McGowan, 2024).

The risk factors that increase the negative impacts for YCs include the extent and nature of the caring role and having housing or economic insecurity (Nagl-Cupal et al., 2014; Casu et al., 2021). There is additional evidence YCs are more likely to remain hidden and unsupported if they are from Indigenous and culturally and linguistically diverse (CALD) backgrounds (Smyth et al., 2011). Caring for a family member with mental health issues or drug and alcohol dependency is also associated with a lower emotional connection and attendance with the entire school environment, including peers, teachers, and schoolwork (Casu et al., 2021; Hamilton & Redmond., 2020; Lakman et al., 2017). Additionally, YCs can fall through the gaps of other government services, such as disability, medical or mental health support because health professionals may not identify YCs in their clinics due to lack of awareness of the negative impacts of the caring role (Acton & Carter, 2016; Thomas et al., 2003). If YCs remain a hidden and unsupported cohort, they cannot access available educational, health and social care support services (Becker & Becker 2008a).

School can be positive experience for YCs if their families support their caring role and there is a whole school approach to identification and support for YCs (Becker & Becker, 2008a; Chevrier et al., 2022; McGowan, 2024). The Young Carer team at Carers WA have developed a Peer Support Group (PSG) toolkit, consisting of a starter kit and session plans designed to assist schools in facilitating a safe space to support children who are caring for a family member with a disability, physical or mental health challenges. The four-part practical toolkit was designed in consultation with young carers, educators, non-teaching staff and service providers across WA schools. The toolkit can be adapted for use in primary school, high school, or higher education settings.



In collaboration with a research team at UWA, this qualitative research project aimed to evaluate the impact of the Carers WA PSG Toolkit on YCs and provide an overview of practical recommendations to improve the functionality and impact of the Toolkit and policy recommendations to ensure ongoing implementation and expansion of the program within schools in WA to continue supporting this vulnerable group.

2. Methods

This qualitative research project was initiated by Carers WA and has been conducted in collaboration with a UWA research team within the School of Allied Health, Department of Social Work and Social Policy. The aim of the project is to evaluate the impact of the PSG Toolkit on YCs and provide an overview of practical recommendations to improve the functionality and impact of the toolkit and policy recommendations to ensure ongoing implementation and expansion of the Carers WA PSG Toolkit within schools in WA. Our research method for evaluating the Carers WA PSG Toolkit was intended to be comprehensive, covering a wide range of approaches and topics, and robust, in terms of being grounded in a well-designed methodology. We thus relied on completing both a qualitative literature review, and reflexive thematic analysis of the data from Carers WA Voice Lab transcripts and the three focus group transcripts. Qualitative methods of research and reflexive thematic analysis are suitable for exploring aspects of human experiences and are therefore complementary to exploring how best to support young carers within the school context (Braun & Clarke, 2006; Nowell et al., 2017). The research occurred in four phases:

Phase 1 Undertake a literature review to provide a qualitative and exploratory based overview of other peer support group programs and services to support YCs and identify the barriers and facilitators to this support within educational settings. The methodology of the literature review is discussed in Section 2.1. The completed Literature Review appears in Appendix 1.

Phase 2: Review and analyse existing qualitative data collected by Carers WA from the Voice Lab interviews with 35 young carers aged eight to 12 years old across three schools to gain an understanding of YCs experiences. The interview questions were developed by Carers WA, and the interviews were performed anonymously by Voice Lab Artificial Intelligence technology. Transcripts from the Voice Lab were analysed using reflexive thematic analysis techniques, as discussed in Section 2.2.

Phase 3: Review and analyse new qualitative data collected by UWA researchers from three focus group meetings to gain an understanding of the participants experiences and perspectives regarding peer support groups and the Carers WA PSG Toolkit. The six participants, 5 from a primary school context and 1 from a high school context, were experienced in facilitating peer support groups and/or implementing the Carers WA PSG Toolkit for YCs in their schools. The focused group questions were developed by UWA researchers, and the three meetings were conducted as online teams' meetings across three separate days. One participant, who had to cancel her scheduled meeting, provided her focus group answers by email. Transcripts from the focus group meetings were analysed using reflexive thematic analysis techniques, as discussed in section 2.2.

Phase 4: Provide practical recommendations to improve the functionality and impact of the Toolkit and policy recommendations to ensure ongoing implementation and expansion of the Carers WA PSG Toolkit within schools in WA.

2.1 Literature Review

The research team searched, retrieved and analysed a broad range of literature to summarise and provide an overview of research findings to inform the qualitative evaluation report (Antman et al., 1992; Arksey & O'Malley, 2005). The method adopted identified exploratory, broad-based research findings, regardless of the study design and did not include a critical appraisal of the quality of research findings (Arksey & O'Malley, 2005). The review process was guided by a methodological framework described by Arksey and O'Malley (2005) and later refined and enhanced by Levac et al (2010) and Joanna Briggs Institute (JBI) (Peters et al., 2024).


The following research questions were defined by the UWA research team and guided the search strategies (Arksey & O'Malley, 2005).

1. What are current programs that support young carers within educational settings?
2. What are barriers and facilitators to providing support to YCs within educational settings?

Relevant research studies were identified by searching peer reviewed published and grey literature via different sources such as electronic databases, reference lists and reviewing relevant information, reports and a hybrid conference (Arksey & O'Malley, 2005). Due to budget and time constraints, the research team defined the search terminology (keywords) and had parameters to eliminate research studies and sources not relevant to the research questions (Arksey & O'Malley, 2005). The key terms include **young carers; peer support; student services; family support; social support; literature review; psychosocial support.**

Relevant research studies were identified by searching the following databases: CINAHL Complete, MEDLINE, ProQuest Central and Taylor & Francis. Additionally, grey literature searches were conducted using Google and Google Scholar search engines. This included reports and data from international, national and local organisations working in the field such as government departments, Carers UK, Carers Australia, and Carers WA (Arksey & O'Malley, 2005). The literature review only included relevant research studies published in English, and translated to English language, within the last 20 years from developed countries (UN DESA, 2023).

The development of inclusion and exclusion criteria was an iterative process as more understanding of young carers and support programs specific to the cohort became more apparent. The research team excluded research studies outlining peer support programs to young people at school in general. This was to focus our attention on peer support programs for young carers as a definitive group. The subsequent research highlighted young carers are largely unidentified within educational settings and thus do not access peer support programs. The research team included studies of programs and policies that support the identification of young carers within the educational setting in addition to including existing peer support programs for identified young carers. Additionally, the research team included recent research highlighting a family focused approach to providing support for young carers in addition to peer



support. There was a total of 22 articles, inclusive of published and grey literature from studies within the UK, Germany, Canada, Austria, Switzerland, and Australia.

The research team adopted a 'narrative review' approach by recording general information and findings from each research study to collectively inform and identify the key themes, issues and recommendations to answer our research questions (Pawson, 2002, p.171). By providing a comprehensive review of the literature we were able to identify current peer support programs and the barriers and facilitators to providing support to YC within educational settings. The completed Literature Review appears in Appendix 1.

2.2 Thematic Analysis

The reflexive thematic analysis approach was adopted for the analysis of the Carers WA Voice Lab and focus group data (Braun & Clarke, 2019, p. 594). This provided an opportunity for an actively interpretative and constructionist analysis and generation of main themes based on the data set and theoretical assumptions and disciplinary research skills of the researchers (Braun & Clarke, 2019; Byrne, 2022).

Reflexive thematic analysis is designed to extract meaning, understanding and interpretations from different subjects and explore both explicit and implicit meanings within the data (Braun & Clarke, 2019). The overall exploration of the Voice Lab and focus group data combined both an inductive and deductive analytical approach. An inductive approach was used to develop understanding of the YCs lived experiences, feelings and opinions expressed in the Voice Lab data, which were given primary significance in the interpretation of the dataset (Braun & Clarke, 2019). A combined inductive and deductive approach was used to develop an understanding of the focus groups datasets. The initial analyses accurately interpreted the participants' experiences, feelings and opinions while a theoretically informed analytical lens provided new insights (Braun & Clarke, 2019). This generated a deeper theoretical understanding and interpretation of the dataset across both the Voice Lab and focus groups transcripts.

Data familiarisation involved actively listening, reading and analysing the Voice Lab and focus group transcripts to make sense of semantic and latent meanings provided by the participants. Throughout the process the researchers documented observational notes, points of interest and ideas connected to the research question (Braun & Clarke, 2019; Byrne, 2022). Codes were generated relevant to the research questions to understand YCs experiences, evaluate the impact of the Toolkit on YCs and identify the facilitators and barriers to the program's implementation in schools. Some data items have been coded both semantically and latently, to communicate the participants' meaning and the researchers' interpreted meaning to ensure a deeper level of understanding across the data set (Braun & Clarke, 2019; Byrne, 2022).

The coded data was reviewed, different codes were combined based on shared meaning and a list of collated codes was produced with sufficient depth conducive to interpreting themes (Braun & Clarke, 2019; Byrne, 2022). The generation of major themes followed a review of the initial themes, and a reconsideration of the codes and data set to ensure distinctive multifaceted themes were developed that addressed the research questions (Braun & Clarke, 2019; Braun et al., 2022).

3. Results

Through the process of reflexive thematic analysis five major themes were generated:

- (1) The importance of Carers WA school support;
- (2) Young carers' identification in schools;
- (3) Parental/guardian consent for Peer Support Groups (PSG);
- (4) Supporting PSG Toolkit Facilitation; and
- (5) The diversity of YC PSG supports.

Table 1 shows the themes and subthemes that emerged from the analysis of both the Voice Lab and focus group data.

Table 1

Themes	Subthemes
Importance of Carers WA school support	Raising awareness of YCs in schools
	Provision of YC support services
	Provision of initial PSG Toolkit implementation
YCs' identification in schools	YC visibility in school
	Skills of school staff
	Unidentified or hidden YCs
Parental/Guardian consent for PSG	Family psychosocial complexities
	Family connection to school
	Family support for YC PSG program
Supporting PSG Toolkit implementation	Trauma informed whole school approach
	Staff training
	Resourcing support
Diversity of YC PSG Supports	Provision of psychosocial supports
	Provision of crisis support
	Provision of age-appropriate supports

3.1 Importance of Carers WA school support

Carers WA school support is essential in raising awareness of YCs at school and the social, emotional and educational challenges they experience. Carers WA presence in the school via discussions with chaplains and student services team members, provision of information packs or presentations at school assemblies are all beneficial in promoting knowledge of Carers WA services and the PSG Toolkit program. There was consensus across the focus group participants that Carers WA initial implementation of the PSG Toolkit program in schools is highly appreciated and essential for supporting YCs and demonstrating how to use the Toolkit. As one focus group participants states:

When we got involved in the Young Carers program, I realised there were a lot more children in this role than I would have known. [Carers WA school support] provided me with the opportunity to find out who these children were, begin to understand more about their circumstances and how their role as a young carer impacted their life.

The participants also agreed that the provision of Carers WA resources, information packs and guest speakers at school assemblies acknowledged the presence of YCs, provided information about the support services available to them, and encourage family connection to Carers WA support services. An example is this statement from a participant:


I've had a meeting with [Carers WA school support] and she really showed me what is available and especially in the line of like you know, children just being children, you know, to that support. And she spoke about the camps that's available. The kids loved it when..... we got like, a bag with different bits and bobs in it and some information for the parents about other things that Carers WA provided for them and for their kids.

Carers WA school support also includes the provision of practical psychosocial support to referred YCs. One high school student services team (SST) participant conveyed the importance of Carers WA referral support for YCs at school and had observed improvements in their school attendance, educational achievement and social inclusion.

Carers WA have been excellent in supporting our students, we've done some referralsover the last number of years and every single one of them have been picked up to my knowledge. I referred someone last year, and they actually ended up getting help with their driving lessons or a laptop. Now they want to hear a bit more about it because that's something tangible, you know, something that they can use there and then

She adds:

And at one point Carers WA acted as an advocate for one of the students, sort of saying, you know, she's experiencing these barriers and she doesn't quite know how to go about it. You know, in one of her classes. And that was news to us and



we were able to rectify that straight away. So that had a massive improvement on her attendance as well.

Additionally, participants' acknowledged Carers WA school support provides access to external support services and supports for YC and their families:

That's why I loved working with a Young Carers and getting additional resources like Anglicare and all the additional services to come and present one session. So then the kids can always say these people are out there to support us.

Young Carers came in. I had a lot of agencies that, in their scope of practise, they would work with the young carers but sometimes families can't get to those services, so they are willing to come and do things on site.

Most importantly, the participants value the YC PSG Toolkit program for providing a safe space for YCs to reconnect to school and peers with similar lived experience and get practical support for school engagement.

The program provided the school with a focus on these students and the toolkit gave us a program to support these children to learn about their situation and the tools they can use to support themselves.

I think it was helpful for the children in the program to know some of their peers had similar experiences. The children built friendships and/or developed understanding with these peers. The children showed increased levels of confidence and empowerment as the group got to know each other.


The focus group participants confirmed Carers WA school support is instrumental in providing the initial PSG Toolkit program implementation:

We were one of the pilot schools where [Carers WA Field Worker] came and actually ran the peer support in our school for a while. So then when she left.....she left me with the toolkit.

I'd probably need to be set up by them. But, you know, just to have that support in the initial setting up phase and then just be a presence in the school, maybe invite them to assembly. Sometimes you can catch up with parents at the same place as well.

I only helped do the coordination for the [Toolkit] program, the group was actually run by Carers WA. I just helped her get it organised in my school, and she did it. She did everything.

Carers WA presence within schools, with direct discussions with chaplains and school staff, sharing information about YC supports, provision of information resources, are all beneficial in raising awareness of YCs and promoting knowledge of Carers WA services and the PSG Toolkit program. There are also sustainable benefits in Carers WA supporting the initial implementation



of the PSG Toolkit in schools, to raise awareness of YCs and the supports available to them and demonstrate how to use the Toolkit. There is scope to improve the onboard training of PSG Toolkit implementation with chaplains and other school staff to run the program in the long term when Carers WA support is not there. Over reliance on Carers WA to implement the program in the long term is not sustainable.

Focus group participants outlined some practical recommendation about the use of the PSG Toolkit. There is scope to improve the onboard training of PSG Toolkit implementation as a whole school approach to ensure there is more than one staff member who can facilitate the program in the event of staff turnovers. This is important to ensure YCs have a consistent PSG program throughout the school year. Participants also suggested that Carers WA onboarding training should also ensure facilitators are equipped with knowledge of Carers WA referral pathways, to provide YCs with practical and immediate supports when required. According to some participants, there is an overreliance within schools of chaplains facilitating the PSG Toolkit. Finally, there was support from participants for Carers WA to provide YC trauma informed Toolkit training with the Chaplain Association to share knowledge of YC/family services and encourage use of the Toolkit in schools.

3.2 YCs identification in schools

YCs identification in schools is the important first step in connecting students to the PSG Toolkit program to provide peer support and improve school engagement. Identifying YCs in school is impacted by their visibility at school, the skill of school staff to recognise or acknowledge YCs and the complexities of the unidentified and hidden YCs. YCs caring for siblings with disabilities may be more visible than YCs caring for their parents with mental health challenges or substance use issues. A primary school student may not understand they are a YC until a teacher identifies them as one. A high school student YC may wish to remain hidden due to fear of bullying or to protect their family. There is an inherent problem within the school system of unidentified or hidden YCs not getting access to the support they need.

One participant described how she identifies YCs at her school:

[a student] who carries an additional load in their family due to their family circumstances. I have got kids in my peer support group who have got parents in jail, so they pick up an additional load. I've got kids in my peer support group who are from domestic violence families, so they sometimes grab the young siblings, keep them safe, or really struggling with alcohol abuse, where the parents are not doing what they're supposed to, so kids carry an additional load.

She identifies YCs via a deduction approach:

Sometimes it's a bit of deduction. I feel if I speak to the student or become aware via a teacher or parent that their domestic situation looks different than others then I sometimes assume wrongly or rightly. My biggest challenge is in the beginning of the year, finding the right ones, finding them. Where are you hiding? Who needs it most?



Additionally, she uses her observational skills to identify YCs:

The other point is sometimes they [YCs] just look like they have lost the joy of life, they look burdened, and they carry it. They just feel sad. You can see that on them.

The identification of YCs in schools can be assisted by skilled facilitators with a psychosocial understanding of the lived experiences of YCs, the complexities of their caring role and the extent of family support.

Another participant used her observational skills and connection with teachers and parents to identify YCs caring for siblings with disability:

I look at the kids in our school who have got disabilities or imputed disabilities and then go and talk to their parents and the siblings and go that way. And then there's a few kids that we found out through classroom teachers that they have a sibling in the special needs school down the road.

However, another participant, in her description of how she identifies YCs, raised an issue of the hidden nature of some YCs due to their caring role:

I've only had experience with students in primary school but caring is mostly in terms of having either a younger or an older sibling, maybe on the spectrum, so having probably autism or one of those concerns. In terms of caring for adults, I don't think there is.


The participant may not identify YCs caring for adults at her school because they are not as visible as YCs caring for siblings. YCs who care for adults with mental health or substance use issues may want to remain hidden due to societal shame, stigma or to protect their family from unwanted child protection intervention:

The ones that are quickest to take up the peer support group are the ones with siblings that have a diagnosis or very obvious imputed disabilities. They're the quickest. The ones with parents who are struggling, they're the hardest to get on board.

The high school SST participant explained some YCs in high school want to remain hidden because:

Sometimes it's just a case of either them not wanting to identify themselves or worried that, you know, they're talking out of turn at home because they don't want to actually say that, you know, things are not great at home or, you know, my mom or my dad or my guardians aren't necessarily coping.

Additionally, school attendance issues, including regular lateness to school and missing classes, can assist in YC identification if schools are aware of YCs' circumstances:



Sometimes it's attendance issues as well, they won't come to school because they need to be at home to look after mum or to look after dad.

Knowledge of the YCs and the PSG program provided one participant information she could share within the classroom to help students self-identify as YCs:

As far as finding which kids are young carers... I've gone to the classes and kind of presented a little thing about like what a young carer is, what the young Carer's group is about. And then hand out some permission forms.

This also supports the class teachers' knowledge and support of YCs in their classroom and encourages them to release students for PSG Toolkit program during class time. This teacher support is acknowledged by the participant:

So the teachers have been so kind and caring to always let these students out of whatever it was that they had which makes it possible to run this program.

A barrier to YC identification can exist when there is limited school administration and parent support for YCs:

If you [had] administrative staff that don't see the value and they won't send the kids and so that would be a barrier. If it's not communicated well, the parents might not want their kids to be part of that. That could be a barrier. Not having resources would be a barrier and lack of understanding for what Young Carers is all about.

According to research participants, there appears to be a lack of a coordinated, comprehensive approach to YC identification. The deduction and assumptions approach currently used to identify YCs in school is dependent on the training and observational skills of school staff and chaplains and may miss unidentified or hidden YCs. It was recommended by participants that Carers WA include a simple framework for YC identification in schools to be included within the onboard training for PSG Toolkit implementation to ensure school administration, staff and chaplains are aware of the visible and behavioural signs of a hidden or unidentified YC in school

3.3 Parental/ guardian consent for PSG

Parental/ guardian consent is essential for YCs to access the PSG Toolkit program in primary school and high school. Achieving parental/ guardian consent is often difficult and time consuming. This may be influenced by the family psychosocial complexities, lack of positive family connection to school (inclusive of the administration, student support services and teaching staff) and lack of family support for the PSG program. This creates a barrier to achieving consent for YCs to access the PSG Toolkit program. As one participant commented:

And then if I've got my list, how to ask for parental permission without making parents feel embarrassed or whatever? I'm just getting a yes without disclosing to

much. Yeah, I find awkward. It's maybe just me. Because some families don't want others to know about this situation

Another participant stated:

Yeah, it's just difficult to get parents involved and parents are a bit suspicious about outside help. Probably the biggest fear our parents have is that CPFS [child protection and family support] will get involved and they will lose their children.

The administrative burden of getting parental/guardian consent is also time consuming:

Sometimes I do the hound; I camp out at the side of the classrooms and wait to see if I can find that parent and then get a quick scribble. But most of the time it is over the phone and then sometimes it takes me a couple of weeks of calling every day before they'll pick up an answer. So the consent can be quite arduous.

The high school SST participant describes parental/guardian consent and family support for PSG program can be achieved when there is an established positive family connection to school established over time:

We've got less than 600 students and a lot of the families in the area don't move away from the area. So the students that we have coming back, they're related to ex-students. So we know quite a bit of history of the local families around here. We know that to get students here, we have to build up those relationships with them and their families as well. And when we see them regularly, that's when they feel connected to us. We can feel connected to them and that's when we can actually help them the most.


There is a dynamic process of referring students to the PSG Toolkit program and it can happen due to trust built within school with students, teachers, Chaplains and families over many years. As one participant highlights, there will always be some parents:

...who may have fear of agencies and think that if their child comes to us [for PSG], you know, we're gonna be doing CPFS referrals.

Another theme that has emerged from the data is that a positive connection between family and school needs to be established within a trauma-informed, whole school approach, to achieve consent and sustainable support for YCs PSG. Carers WA need to be resourced to support schools and provide information to school administration on how to establish trusted family and school connections and have those difficult conversations around parental/guardian consent so YCs do not miss out on the benefits of the PSG Toolkit program.

3.4 Supporting PSG Toolkit implementation

The analysis confirms support for the ongoing implementation of the PSG Toolkit program in schools requires a trauma-informed whole school approach, trained staff and access to school resource support. This would ensure a consistent support framework is provided to YCs as they



progress through their school years. Additionally, there is consensus the Toolkit manual provides a good guide and resource with flexibility for facilitators to adapt the sessions depending upon the group dynamics.

A participant describes the benefits of a trauma informed, whole school approach to PSG Toolkit implementation:

We have a lot of support in our school for anything social and emotional. And that's part of our demographic of high needs, high trauma kids. The whole school, teachers, teacher assistants, right up to the principal, support anything that they think will be beneficial. I know I'm lucky in that case, some schools aren't like that.

A primary school Principal participant encouraged a whole of school approach to PSG implementation with supportive staff:

I think it is important to identify champions in the school and make the program simple to implement. The toolkit is easy to read and provides the right amount of information for a staff member to pick up and organise.

The high school SST participant advised in the past the social and educational demands for high school students impact older YCs' access to PSG program and finding an appropriate time to facilitate the program had been difficult. However, the participant's high school is committed to trauma informed whole school approach to social and emotional learning (SEL) and has committed to reimplementing the PSG Toolkit program within a timetabled class:


We are planning for implementation for 2025 as part of a timetabled SEL program. Our student services have been petitioning to have a class on the timetable, a 25th period they call it, which is devoted to social and emotional learning across the school, and one of the things that we will embed is the young carers peer support group during that time as well.

The high school SST participant further explained Carers WA PSG Toolkit is a trauma informed program that warrants a trauma informed, whole school approach, to ensure consistency of YC support:

Yeah, I think it [the Toolkit] links really well, hand in hand, because let's be honest, if they're a young carer that I'm sure there's some some element of trauma within their life. Whether it's ongoing past or, you know generational, so it's yeah, it is something that. Yeah, it [the Toolkit] is very sympathetic to trauma care.

Consistency of PSG program implementation will provide YCs with support consistency as they progress through school. As one participant notes:

I have found consistency is important to them. So having it on the same day, at the same time. If we give them advanced notice that we need to move that, that's OK. That consistency because they would ask me the day before. Do we



have it tomorrow? You can feel that it's important for them. There's something in there that they needed or wanted.

[YC PSG] gave me the opportunity to speak into their lives on a weekly basis to touch base with them, to eyeball them at least once a week, which I wouldn't have been able to do otherwise

The focus groups provided an understanding of the importance of staff training to firstly understand YC challenges and secondly, have the skills to facilitate the PSG Toolkit session plans to fully support the YCs. The high school SST participant is trained in the provision of social and emotional wellbeing programs and works in a student service support team. She advises the PSG Toolkit sessions are practical and accessible for any staff member to facilitate:

The Toolkit itself is awesome as someone who works as part of a team and portfolios change, staff members change, this toolkit here you could pass this on to anyone who sort of works within our team and it's amazing. There is everything there, it is set out, even the time, the 45-minute length, timing of the sessions and stuff like that, you've got the option to go over if you want, you know, have a feed at the end of it because we have to feed our kids every time we see them, otherwise they're not going to come.


However, other participants, who worked within the chaplaincy program in schools, felt they did not have the skillset, capacity or resources to implement the PSG Toolkit program or had to limit the number of YCs they could support:

The school is on board to have this program, it's just that I don't have the capacity, the time to do it..... we have a classroom available. The time is available. I've done all the coordination with the families to get the students on board. I think it's the human resource that you need. My students do come and ask me all the time. When can we start? When will we start? And I have no answers for them.

I personally don't have any more than five kids in a group because I don't have a lot of group training. Most of my training is one-on-one. I have a counselling background and not in group counselling.

Participants provided an understanding of the emotional toll of facilitating the PSG Program and the need for extra staff assistance to help with the group sessions was raised:

Because it takes a lot of emotional energy to be there and to care. I would not run too many. Even if there was resources and resources in terms of venue and staff. If I had external people so that I don't do all the caring and all the carrying of this, then, Yeah. Then I'm kind of a programme coordinator that I can then then run lots of groups, but to personally do that, I can't do it well, yeah.



Additionally, it is difficult to manage group dynamics when some YCs are suffering from trauma and need one on one support. Managing group dynamics is difficult with one facilitator and is dependent on the facilitator's group therapy skills:

How to keep the heads in the game when they are not interested or when someone has a bad day and now acting up how to keep the group going and still look after this young person? That's a bit tricky so when one is off, because they are sad or sitting in the corner, how do you support that person? While adding value to the others as well. There's some of the challenges

The addition of an extra staff assistant improves PSG Toolkit facilitation and can increase the number of YCs supported:

The school provided me with an educational assistant so that I could be between the groups and the educational assistant would manage behaviour in the group and the facilitator, would just work with the content. And so I was able to capture, we had 16 that year, which was beautiful and sometimes you could have combined activities. Yeah, that was beautiful.

Lack of school resources such as time, venue, cost, training and staff was identified by the primary school Principal as the main barrier to PSG Toolkit implementation:

The program needs to provide a framework for schools to implement the program without the requirement of too many resources (as we all know these are lacking). The main barrier from an administrator's perspective is resourcing. Who can run the program, how will I fund their time, who will train them, how will I fund the training, when will this take place.


The impact of the lack of school resources was supported by another participant:

Just in my school, the only barrier is money. The toolkit costs. Well you've got to get bits and pieces for it if you wanted to follow that exactly. Just another one of the reasons why I kind of go off on my own. There's just not a lot of spare money.

This research data supports a whole of school, trauma-informed approach, to the identification and support of YCs in Western Australian schools. There are school administrative barriers to the support of PSG Toolkit implementation due to limitations of resources such as staffing, materials, time, facilities, equipment, technical assistance and training in some schools.

3.5 Diversity of YC PSG supports

All the participants agreed the YC PSG Toolkit program provides a safe place for YCs to reconnect with peers with similar lived experience and connect to a diversity of supports for social inclusion, social and emotional wellbeing, referrals to external service, and coping strategies. The participants also identified some YCs may require specific PSG supports dependent upon the complexity and extent of their caring role, their age and developmental stage; the cohesion and support of their family and whether they have experienced trauma:



I kind of separate my young carers into kids who are caring for a parent and kids who are partly caring for their siblings because I find they, although some of it overlaps, they do face some different issues.

Specific PSG supports include understanding disability support, provision of crisis support, school attendance support and high school specific support.

The PSG program provides social inclusion support for YCs who are disconnected from school and peers providing them a place to be seen, heard and share their lived experience with others who understand:

Most of the clients that I work with just wanted to be like other kids, so they suffer in silence because they just don't want others to know about it. They just want to blend in and be normal for a little bit. One of the biggest benefits would be the feeling, I'm not alone, there are others too. And so a sense of belonging, a sense of I'm being seen. And they get an opportunity to feel heard. Sometimes they just want to be seen. Want others to know that life is not so easy for me. That's not all of them. Some of them don't want others to know about what they are carrying - I'm carrying this. I don't want to talk about this but thank you for walking alongside me.

The PSG program provides YCs with social and emotional wellbeing support:


I find some of the initial ones really important, like how to know when you're struggling, how to know when you need help, where to go and find that help we have. Those are always really big sessions.

The PSG program provides YCs access to external services support. The inclusion of external agencies, such as Carers WA or Headspace, within the PSG sessions is beneficial to providing YCs with information about external supports they can share with their family, especially when some families cannot get to these services. Information sharing and connection to external support for YC's family further supports the YCs by making them feel supported and less alone:

I had a lot of agencies that, in their scope of practise, they would work with the young carers [because] sometimes families can't get to those services, so they are willing to come and do things on site. Yeah, I had Headspace come in one year and they facilitated the whole eight weeks - they covered four sessions with the kids with mental health.

The PSG program provides YCs with a personal toolkit of coping strategies, to manage their feelings of stress, emotions and challenging situations due to their caring role:

[PSG] Helps them develop a personal toolkit of coping strategies, explaining that sometimes what is happening in our lives is not something that we can change. It's part of our given. But the way that we deal with that makes all the difference.



It is clear from participant data that those involved in the PSG program support the extension of its remit to provide more than coping strategies. The notion, '*what is happening in our lives is not something that we can change*', suggests YCs' school and home challenges are fixed. However, connection to school supports and referrals to Carers WA and other external service agencies can provide tangible outcomes and positive change for YCs at school and home. Carers WA need to provide trauma informed PSG Toolkit training with chaplains and school staff to ensure PSG facilitators are aware of and know how to refer YCs to Carers WA and other external service agencies for support connection.

YCs caring for their sibling with disability can have positive experiences as described by this participant:

There are kids [Young Carers] with the sibling, with the disability. They seem to have a more positive experience. [PSG] It's a lot more about their responsibilities, their roles. What they can do to help and depending on what their parents are like, that can be really positive for them and they grow a lot and show some real maturity in different areas.

However, YCs caring for their sibling with disability can also suffer from anxiety due to the behavioural challenges of their sibling:


What I see is lots of anxiety that our students have when they are a young carer.... caring is mostly in terms of having either a younger or a older sibling, maybe on the spectrum, so having probably autism or one of those concerns

A primary school participant felt she was untrained to provide YCs with practical steps to manage challenging behaviors commonly associated with Autism Spectrum Disorder (ASD):

One thing they've asked for is more practical steps that they can take or more skills that they can learn on how to deal with your autistic brother ripping your stuff up, how to deal with or how to get your autistic brother or sister to stop hitting you..... which is a bit sad, that they're thinking that they need to do the behaviour management of their sibling. But that's what they're asking for.

The data from the focus groups supports the PSG needing to provide age-appropriate behavioural management strategies for autism spectrum disorder (ASD) to support YCs caring for siblings with disability. The PSG Toolkit program could include an age-appropriate session on different disability conditions and practical steps for supporting YC caring role in the short term. A preventative approach could be adopted to provide YCs and their families with referrals to external disability services to provide long term support for siblings with disabilities.

Participants identified YCs who care for parents with severe mental health and are at risk of self-harm, suffer fear and anxiety within traumatic family circumstances and may need crisis support. Furthermore, these YCs are often also caring for their younger siblings as highlighted by this participant:



I have got kids in my peer support group who have got parents in jail, so they pick up an additional load. I've got kids in my peer support group who are from domestic violence families, so they sometimes grab the young siblings, keep them safe, or really struggling with alcohol abuse, where the parents are not doing what they're supposed to, so kids carry an additional load.

Another participant commented:

I've had a few kids in the past who help care for a parent with severe mental health, and those kids face a lot of fear.....will mum's self-harm be fatal next time? I guess from what I see day-to-day with those kids I've got in my mind were just anxiety over the day-to-day things. Not being able to focus in class because they are very concerned, they're very wrapped up in what's happening at home. And one little girl, I mean, she's ten and she's got three siblings younger than her. So she's taking care the way she talks about those siblings. It's like, you know, she's the mother and almost like she's mothering mum as well. And I think there's domestic violence and drug and alcohol abuse is also a factor for some of these homes.


The PSG program provides a safe place for YCs with complex care responsibilities and often traumatic life experiences to ask for crisis support for unmet everyday needs. This participant describes some of the practical ways the school is able to help after needs were identified in the PSG:

There's lot of practical needs. So we in our school have food hampers and stuff. We've actually, in response to two of our young carers, have started a life skills program in the morning where they could come in and brush their hair, brush their teeth, wash their face. And we'll be extending that into actually having a washing machine available for them to wash clothes and teach them how to do that because those needs at home aren't being met.

From the data came a recommendation that the PSG Toolkit program could include a session on age-appropriate trauma understanding and practical steps for providing immediate intervention support for YCs in the short term. A preventative approach could be adopted to provide YCs and their families requiring crisis support to be connected to external support services to get the support they need for the long term.

The participants agreed that YC attendance issues and co-dependencies and separation anxiety type of behaviour are big barriers for the PSG Program. This familial codependency has negative impacts on YCs school attendance and this in turn impacts their peer connection and educational engagement. One participant states:

Big barriers on engagement with school due to low attendance, and we find that there's a bit of codependency going on where the young carer, feels they need to stay home to keep an eye on the parent or the person who needs caring or make sure that things are running smoothly at home so school is less of a priority.



This is because they have got bigger issues going on at home, so when they're not attending as often, they often lose connection with their peers..... So yeah, it's attendance would be the biggest barrier I would feel. I'm probably going to walk in and have to do a test that, you know, I don't know the subject matter. I don't know if my friends are going to be at school or who's in my class

A participant explains the YCs need support to understand their feelings of codependency and separation anxiety so they can have:

Time to have their own sense of identity, realising that it's OK to be at school and away from the home and trying to disconnect from what's going on at home so they can try and focus on what's going around them at school.

Data from this study supports that the PSG program can provide primary and high school YCs with support for attendance issues when their caring roles keep them at home because they are concerned about leaving their family member alone. Additionally, the school can adopt practical solutions to help YC cope with these issues while they are at school, to encourage attendance and engagement in education. A whole school approach to trauma informed knowledge for teachers/ admin staff to understand and recognize YC attendance issues would also be beneficial. Repeated attendance issues and lateness of YCs could also help identify hidden YCs.

High school YCs have different psychosocial needs and educational demands due to their adolescence developmental stage and therefore need specific PSG program supports compared to primary school YCs. High school YCs are in adolescent transition to adulthood (Erikson, 1950) and have different personal, educational, and social developmental pressures. Their caring role can negatively impact their need for independence, self-identification, intimate relationships, and plans for future educational endeavors and work opportunities.

The high school SST participant explains older YCs need to be encouraged to attend PSG programs by communicating the age-appropriate benefits. High school YCs may not be interested in group activities that do not address their immediate problems. One participant suggested that the Toolkit must 'speak' to this cohort of young adults and address their needs in a certain way that engages them, and they can see the value of returning:

You sort of dangle a few carrots to some of the students.... I referred someone last year, and they actually ended up getting help with their driving lessons or a laptop now they want to hear a bit more about it because that's something tangible, you know, something that they can use there and then because if they think that they just have to sit around in a, you know, a group and colour in and do, you know with ice-breaking activities; you've lost them unless there's food involved. But you know there you've lost them so.

So, although the service or the support group might not be what they need at the time, they still kind of know that there's something there that they can come back to. And it's sometimes a point of need as well, which is not really what you

know, ongoing support like a peer support group is necessarily for, more crisis support. But it's one of those things that if we can get them to link in regularly, then yeah, maybe it might help

4. Recommendations

Based on thematic analysis from the focus group data gathered in this project, the research team has identified the following key recommendations:

(1) The importance of Carers WA school support

- The Toolkit is a comprehensive and valuable resource for supporting YCs in school however there is scope to improve the onboarding training of PSG Toolkit implementation as a broader school support team or whole school staff approach. This would ensure all the information and resources that are present in the Toolkit, such as how to achieve parental consent or how to implement a YC school policy, is clearly understood and accessible for facilitators. Additionally, a whole school approach to onboard training may ensure there is more than one staff member who can facilitate the program in the event of staff turnovers.
- Carers WA should include onboarding PSG Toolkit training for the school chaplains and other school support team staff members so they can implement the program when Carers WA staff are no longer at the school. This is important to ensure YCs have a consistent PSG program throughout the school year.
- Carers WA onboarding training should also ensure facilitators are equipped with knowledge of Carers WA referral pathways, to provide YCs with practical and immediate supports when required.
- There is an overreliance within schools of chaplains facilitating the PSG Toolkit. Onboarding training could be extended to the service providers that provide school chaplains in WA schools. Carers WA needs to be funded to provide trauma informed PSG Toolkit training to share knowledge of YC/family services and encourage chaplains to implement the PSG Toolkit in schools.

(2) YCs identification in schools

- The Department of Education to develop a policy for the identification and support of young carers in Western Australian schools. In addition, the data from this evaluation supports the inclusion and acknowledgement of YCs in the WA Department of Education's student health wellbeing policy and framework.
- There appears to be a lack of a coordinated, comprehensive approach to the identification of YCs within the school context. The deduction and assumptions approach currently used to identify YCs in school is dependent on the training and observational skills of school staff and chaplains and may miss unidentified or hidden YCs. Carers WA could be funded to include a simple framework for YC identification in schools to be included within the onboard training for PSG Toolkit implementation to ensure school administration, staff and chaplains are aware of the visible and behavioural signs of a hidden or unidentified YCs in school.

- The literature review has uncovered a simple tool that may assist in the identification of YCs within schools. It is the Carers' *Alert Thermometer for Young Carers (CAT-YC)* screening tool that has been developed to ensure YCs can be easily identified and assessed based on priority of support needs (Kettel et al., 2021). It was developed in consultation with YCs in the UK, aged 11- 18 years, together with health, social care and educational professionals who work with YCs (Kettel et al., 2021). The CAT-YC contains one identification question followed by ten questions based on current caring situation needs and carer's health and wellbeing needs (Kettel et al., 2021). Furthermore, the tool provides YC with the recognition they deserve and license to engage in their support plan (Kettel et al., 2021). Carers WA could assess the applicability of the CAT-YC inclusion within the PSG Toolkit and their on-board training in schools. It would only be recommended to be used by qualified professionals who are trained in its use and with the appropriate support and follow up available for the child/ young person. Further information about the CAT-YC is available at the project website: <https://www.edgehill.ac.uk/carers/>
- Carers WA could include throughout the Toolkit resource reference to identification and support for young carers to ensure schools facilitators are aware that there are resources to assist in the identification of YCs in addition to support for YCs. For example, the Carers WA *Identifying and Supporting Young Carers* information sheet could be included within the Toolkit resource for easy access for facilitators.

(3) Parental/ Guardian consent for PSG

- A positive connection between family and school needs to be established within a trauma-informed, whole of school approach, to achieve consent and sustainable support for YCs PSG. Carers WA should be funded to support schools and provide information to school administration on how to establish trusted family and school connections and have those difficult conversations around parental/guardian consent so YCs do not miss out on the benefits of the PSG Toolkit program.

(4) Supporting PSG Toolkit implementation

- There are school administrative barriers to the functionality of PSG Toolkit implementation due to limitations of school resources such as staffing, materials, time, facilities, equipment, technical assistance and training. This could be rectified with more funding for schools to support YCs as a priority cohort.
- Carers WA have recommended the WA Government include the term *young carer* as a distinct group in the *Carers Charter* within the *Carers Recognition Act 2004 (WA)* and within the recent *WA Youth Action Plan 2024-2027* to gain additional support for YCs in schools with professional training for staff, and awareness and identification support in service delivery intakes (Department of Communities, 2024b).
- To compliment these previous recommendations, Carers WA could also investigate, with WA Department of Education, the inclusion of a 'Young Carers disadvantage loading' as one of the student-based loadings within the Federal Government's, Department of Education, School Resource Standard (SRS) funding model. This could assist schools get additional funding to support the PSG Toolkit implementation. Further information about SRS funding model is available at: <https://www.education.gov.au/recurrent-funding-schools/schooling-resource-standard#toc-srs-loadings>

- Carers WA should be funded to address technological barriers to accessing the online Toolkit resources within schools and for the provision of hard copies of the Toolkit to participating schools.
- Challenging 'uncooperative behaviours' is expected within both primary and high school peer support depending upon the complexity of their caring role and home life. However, knowledge of trauma-informed practice should form part of the PSG Toolkit program, to assist facilitators to understand YCs with challenging behaviors could be experiencing trauma.
- Managing group dynamics is difficult with one facilitator and is dependent on facilitator group therapy skills. Carers WA could be funded to include a section on trauma-informed group dynamics and training about this to save time for PSG facilitators who lack skills and experience in group facilitation.
- Carers WA could encourage school administrators to provide an extra staff member to assist Chaplains with YCs' individual and group support needs. YC PSG numbers would increase with provision of extra staffing or external agency assistance in implementation of the Toolkit.

(5) Diversity of YC PSG supports

- The PSG program could provide preventative ideas for YCs as well as coping strategies. Connection to school supports and referrals to Carers WA and other external service agencies can provide tangible outcomes and positive change for YCs at school and home. Carers WA should be funded to provide trauma-informed PSG Toolkit training with chaplains and school staff to ensure PSG facilitators are aware of and know how to refer YCs to Carers WA and other external service agencies for support connection.
- The PSG Toolkit program could be funded to include age-appropriate sessions on behavioural management strategies for Autism Spectrum Disorder (ASD) or other disability, health and mental illness conditions with practical steps for supporting YC caring role in the short term. A preventative approach could be adopted to provide YCs and their families with referrals to external disability, health or social care services to provide long term support.
- The PSG Toolkit program could include a session on age-appropriate trauma understanding and practical steps for providing immediate intervention support for YCs in the short term. A preventative approach could be adopted to provide YCs and their families requiring crisis support to be connected to external support services to get the support they need for the long term.
- The PSG program can provide primary and high school YCs with support for attendance issues when their caring roles keep them at home. Additionally, the school can adopt practical solutions to help YC cope with these issues while they are at school, to encourage attendance and engagement in education. A whole school approach to trauma informed knowledge for teachers/ admin staff to understand and recognise YC attendance issues would also be beneficial. Repeated attendance issues and lateness of YCs could also help identify hidden YCs.

5. Ethics

Ethics approval was received on the 28 August 2024 (ET000702) from the University of Western Australia Human Research Ethics Committee.

6. Conflicts of Interest

None Declared.

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8. References

- Acton, J., & Carter, B. (2016). The Impact of Immersive Outdoor Activities in Local Woodlands on Young Carers Emotional Literacy and Well-Being. *Comprehensive Child and Adolescent Nursing*, 39(2), 94–106. <https://doi.org/10.3109/01460862.2015.1115156>
- Antman, E. M., Lau, J., Kupelnick, B., Mosteller, F., & Chalmers, T. C. (1992). A Comparison of Results of Meta-analyses of Randomized Control Trials and Recommendations of Clinical Experts: Treatments for Myocardial Infarction. *JAMA : The Journal of the American Medical Association*, 268(2), 240–248. <https://doi.org/10.1001/jama.1992.03490020088036>
- Australian Bureau of Statistics (ABS). (2022). *Disability, Ageing and Carers, Australia: Summary of Findings*. ABS. <https://www.abs.gov.au/statistics/health/disability/disability-ageing-and-carers-australia-summary-findings/latest-release>
- Arksey, H., & O'Malley, L. (2005). Scoping studies: towards a methodological framework. *International Journal of Social Research Methodology*, 8(1), 19–32. <https://doi.org/10.1080/1364557032000119616>
- Becker, S. & Becker, F. (2008a) *Young Adult Carers in the UK: Experiences, Needs and Services for Carers aged 16-24*. The Princess Royal Trust for Carers.
- Bjorgvinsdottir, K., & Halldorsdottir, S. (2014). Silent, invisible and unacknowledged: experiences of young caregivers of single parents diagnosed with multiple sclerosis. *Scandinavian Journal of Caring Sciences*, 28(1), 38–48. <https://doi.org/10.1111/scs.12030>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>

- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, 11(4), 589–597.
<https://doi.org/10.1080/2159676X.2019.16>
- Braun, V., Clarke, V., Hayfield, N., Davey, L., Jenkinson, E., Bager-Charleson, S., & McBeath, A. (2022). Doing Reflexive Thematic Analysis. In *Supporting Research in Counselling and Psychotherapy* (pp. 19–38). Springer International Publishing.
https://doi.org/10.1007/978-3-031-13942-0_2
- Butler, A. H., & Astbury, G. (2005). The caring child: an evaluative case study of the Cornwall Young Carers project. *Children & Society*, 19(4), 292–303.
<https://doi.org/10.1002/chi.851>
- Byrne, D. A worked example of Braun and Clarke's approach to reflexive thematic analysis. *Qual Quant* 56, 1391–1412 (2022). <https://doi.org/10.1007/s11135-021-01182-y>
- Carers Australia. (2024). *Submission to the Department of Social Services on the National Carer Strategy Discussion Paper*.
<https://www.carersaustralia.com.au/submissions-reports/submissions/>
- Carers WA. (2020). *Young Carers Peer Support Group Toolkit: A practical guide for educators, non-teaching staff and leaders to provide young carers with peer support groups in education facilities*. Carers Association of WA.
- Carers WA. (2023). *Submission to the Australian Government Department of Communities: WA Youth Action Plan Consultation Paper*. Carers Association of WA.
- Carers WA. (2024a). *Young Carers*. <https://www.carerswa.asn.au/our-services/young-carers/>
- Carers WA. (2024b). *Carers WA Policy Submission: National Carer Strategy*
<https://www.carerswa.asn.au/resources/policy-submission-research-reports/>
- Carers WA. (2024c). *Carers WA Policy Submission: Review of the School Education Act 1999 (WA)*. <https://www.carerswa.asn.au/resources/policy-submission-research-reports/>
- Casu, G., Hlebec, V., Boccaletti, L., Bolko, I., Manattini, A., & Hanson, E. (2021). Promoting Mental Health and Well-Being among Adolescent Young Carers in Europe: A Randomized Controlled Trial Protocol. *International Journal of Environmental Research and Public Health*, 18(4). <https://doi.org/10.3390/ijerph18042045>
- Clarke, V., & Braun, V. (2017). Thematic analysis. *The Journal of Positive Psychology*, 12(3), 297–298. <https://doi.org/10.1080/17439760.2016.1262613>
- Department of Communities. (2021). *WA Carers Strategy*.
<https://www.wa.gov.au/government/publications/wa-carers-strategy>
- Doery, K., Arnup, J. & Edwards, B. 2024 'Young carers' GENERATION Data Story # 13, Australian National University. https://generationsurvey.org.au/data_story/young-carers/

- Hamilton, M., & Redmond, G. (2020). Are Young Carers Less Engaged in School than Non-Carers? Evidence from a Representative Australian Study. *Child Indicators Research*, 13(1), 33–49. <https://doi.org/10.1007/s12187-019-09647-1>
- Kaiser, S., Siegemund-Johannsen, S., Schulze, G. C., & Spittel, A.-M. (2024). Basic Conditions for Support of Young Carers in School: A Secondary Analysis of the Perspectives of Young Carers, Parents, Teachers, and Counselors. *Healthcare*, 12 (11), MDPI AG. <https://doi.org/10.3390/healthcare12111143>
- Kettell, L., O'Brien, M. R., Jack, B. A., & Knighting, K. (2021). Development of the Carers' Alert Thermometer for Young Carers (CAT-YC) to Identify and Screen the Support Needs of Young Carers: A Mixed Method Consensus Study. *Child & Adolescent Social Work Journal*, 38(5), 559–570. <https://doi.org/10.1007/s10560-021-00789-2>
- Lakman, Y., Chalmers, H., & Sexton, C. (2017). Young Carers' Educational Experiences and Support: A Roadmap for the Development of School Policies to Foster their Academic Success. *Alberta Journal of Educational Research*, 63(1), 63–74. <https://doi.org/10.55016/ojs/ajer.v63i1.56226>
- Levac, D., Colquhoun, H., & O'Brien, K. K. (2010). Scoping studies: Advancing the methodology. *Implementation Science: IS*, 5(1), 69–69. <https://doi.org/10.1186/1748-5908-5-69>
- Mohanty, I., & Niyonsenga, T. (2019). A longitudinal analysis of mental and general health status of informal carers in Australia. *BMC Public Health*, 19(1), 1436–1436. <https://doi.org/10.1186/s12889-019-7816-8>
- Nagl-Cupal, M., Daniel, M., Koller, M. M., & Mayer, H. (2014). Prevalence and effects of caregiving on children. *Journal of Advanced Nursing*, 70(10), 2314–2325. <https://doi.org/10.1111/jan.12388>
- Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic Analysis: Striving to Meet the Trustworthiness Criteria. *International Journal of Qualitative Methods*, 16(1), 1–13. <https://doi.org/10.1177/1609406917733847>
- Pawson, R. (2002). Evidence-based Policy: In Search of a Method. *Evaluation*, 8(2), 157–181. <https://doi.org/10.1177/1358902002008002512>
- Peters, MDJ., Godfrey C., Mclnerney P., Munn Z., Tricco AC., Khalil, H. (2024) Chapter 10: Scoping Reviews. In E. Aromataris, C. Lockwood, K. Porritt, B. Pilla, & Z. Jordan (EDs.), *JBI Manual for Evidence Synthesis* (pp. _). Joanna Briggs Institute. <https://synthesismanual.jbi.global>. <https://doi.org/10.46658/JBIMES-24-09>
- Phelps, D., Leadbitter, H., & Manzi, D. (2010), *Supporting Young Carers: A Resource for Schools*. The Princess Royal Trust for Carers and The Children's Society.
- Redmond, G., Skattebol, J., Saunders, P., Lietz, P., Zizzo, G., O'Grady, E., Tobin, M., Thomson, S., Maurici, V., Huynh, J., Moffat, A., Wong, M., Bradbury, B., & Roberts, K. (2016). Are the kids alright? Young Australians in their middle years : Final report of the Australian Child



Wellbeing Project. Flinders University; University of New South Wales; Australian Council for Educational Research (ACER). https://research.acer.edu.au/well_being/5

Ruggiero-Cakir, A. (2022). *Supporting Young Carers in Schools: A Step-by-step Guide for Leaders, teachers and Non-Teaching Staff*. Carers Trust.
<https://carers.org/downloads/ycis-steps-1-10-web.pdf>

Smyth, C., Blaxland, M., & Cass, B. (2011). "So that's how I found out I was a young carer and that I actually had been a carer most of my life". Identifying and supporting hidden young carers. *Journal of Youth Studies*, 14(2), 145–160.
<https://doi.org/10.1080/13676261.2010.506524>

Thomas, N., Stainton, T., Jackson, S., Cheung, W. Y., Doubtfire, S., & Webb, A. (2003). 'Your friends don't understand': Invisibility and unmet need in the lives of 'young carers.' *Child & Family Social Work*, 8(1), 35–46.

United Nations (UN) Department of Economic and Social Affairs (DESA). (2023). *Department of Economic and Social Affairs Highlights 2022-2023*. United Nations.
<https://www.un.org/sites/un2.un.org/files/desa-highlight-report-2022-2023.pdf>

Appendix 1: Literature Review

Exploration of existing peer support group (PSG) programs supporting young carers (YC) within educational settings internationally

Background

Young Carers (YCs) represent a cohort of young people under the age of 25 years, who provide substantial ongoing or intermittent personal care and support to family members with complex care needs due to disability, terminal or chronic illness, mental health challenges, substance use issues, neurological disorders and /or aging related frailty (Becker, 2000; Becker & Becker, 2008a,b; Carers WA, 2020; Carers WA, 2024c; Casu et al., 2021; Day, 2015; Kaiser et al., 2024; Smyth et al., 2011; Stamatopoulos, 2015).

In this caring role, a YC undertakes a variety of tasks, occasionally or round the clock, depending upon the family's needs and circumstances. This can include physical, emotional, medical or therapeutic support for the person being cared for, support and care for other members of the family, such as younger siblings, and more responsibility for their own care than is expected for their age (Becker, 2000; Kaiser et al., 2024). Additionally, caring roles can increase for YCs in culturally diverse families with language difficulties or within families experiencing parental absence due to various factors such as lone parenting, divorce or desertion (Ireland & Pakenham, 2009; Stamatopoulos, 2015). The burdens of YCs are often unacknowledged and misunderstood outside their family situation (Francesco et al., 2023).

The diversity of lived experience and support needs for YCs and their family is dependent on where they live, the social, economic and cultural foundation and cohesion of the family, the needs of the care recipient and extent of caring required, and level of availability and accessibility of support structures (Chevrier et al., 2022; Becker & Becker, 2008b; Aldridge & Becker, 1993; Aldridge et al., 2016; DSS, 2024). Young carers can live in remote, rural, regional, and metropolitan locations and belong to diverse groups of people such as First Nations communities, CALD communities and LGBTIQ+ communities (Carers WA, 2024b; DSS, 2024). The literature supports the need for better acknowledgement of the important caring role undertaken by YCs and most importantly, awareness, understanding and compassion within educational settings so they can be better supported to engage in their basic right to educational opportunities (DSS, 2016; DSS, 2024; Carers WA, 2024c).

Young carers within the Australian legislative context

The *Carer Recognition Act 2010* (Cth) aims to increase departmental, interagency, and societal awareness and recognition of unpaid family and young carers (Department of Social Services [DSS], 2016). Within the Act, the *Statement for Australia's Carers*, provides ten key principles to be achieved in policy, programme, and service delivery. Principle two stipulates "*Children and young people who are carers should have the same rights as all children and young people and should be supported to reach their full potential*" (DSS, 2016, p.3).

The Western Australian (WA) *Carers Recognition Act 2004* (WA) recognises the role of carers in the community and includes a *Carers Charter*, outlining how carers are to be treated and included in delivering services that affect them and their caring role (Department of Communities, 2024a). However, the charter does not delineate between *carer* and *young carer* as a distinct group. Therefore, although young people who provide unpaid care have been

acknowledged in legislation, no mandatory protective services have been put in place to support any resultant specific needs they may have (McDougall et al., 2018).

In support of legislative change, Carers WA's submission to the Department of Communities *Youth Action Plan 2024-2027 Consultation Paper*, advocated for the recognition, inclusion, and representation of young carers in legislation, policy and services and provided the following key recommendations for inclusion in the Action Plan (Carers WA, 2023):

1. Recognition of YCs as a distinct cohort alongside pre-identified diversity of young people that includes First Nations people, people with disability (including mental illness), the LGBTIQ+ community, and young people from culturally and linguistically diverse backgrounds.
2. Compulsory training for school staff and other educators on how to identify, engage with and support YCs.
3. Awareness raising initiatives on recognition, identification and inclusion of YCs.
4. YC identification within all service delivery intakes, and strong referral pathways to supports.

The final WA Youth Action Plan 2024-2027, launched October 2024, provided valuable initiatives for all young people in WA and did provide YCs with an advisory voice and an opportunity to raise awareness of their experiences *through representation on the Carers Advisory Council. Supporting this, the department will raise awareness for and celebrate young carers as a part of National Carers Week* (Department of Communities, 2024b, p.18).

However, the Action Plan did not include YCs to be recognised as a distinct cohort alongside pre-identified diversity of young people who need additional support in schools with professional training for school staff, and recognition in service delivery intakes to help them feel valued and supported to achieve their goals (Department of Communities, 2024b).

The recent Centre for Social Impact (CSI) report, *Evaluation of the Young Carers Program*, also provides important recommendations to focus future support on increased awareness of YCs and their wellbeing through formal recognition within WA Parliament and within the WA Department of Education; advocacy for YCs under the age of 14 years; trauma informed training for Young Carer program staff and additional staff resourcing to ensure young carers can be acknowledged and supported throughout the metropolitan and regional areas in WA (Lester et al., 2024).

Young carers within the WA educational context

Carers Australia's submission to the *National Carers Strategy Discussion Paper* outlines the challenges confronted by many YCs within educational settings across Australia and provides a range of solutions identified by YCs themselves. YCs at school report feeling misunderstood and judged unfairly by teachers when their caring responsibilities impacted their school attendance, lateness, and homework (Carers Australia, 2024b). YCs reported feeling socially isolated when the opportunity to make friendships at school was made harder by missing lunchtime, social catchups, extra-curricular activities, and school excursions due to their caring role or family's financial circumstance (Carers Australia, 2024b).

The solutions identified by YCs include teacher training to raise awareness and provide supports to balance their caring and school responsibilities; an enrolment process whereby YCs can self-identify to ensure support throughout their education is provided; peer support for YCs to provide a social support network; whole of school education so their peers can understand the challenges of caring to reduce stigma (Carers Australia, 2024b).

Carers WA's submission to the *National Carers Strategy Discussion Paper* confirmed YCs would like to see:

“....increased awareness and understanding of their caring role; more recognition and allowances (time and money); being recognised as a priority group; more opportunities and involvement in decision-making and advisory opportunities. Young carers would also like to have more support, whether this be a physical safe place outside of school for young carers to go, young carer peer support groups or services that understand and can support young people in the caring role” (Carers WA, 2024b, p. 28).

Additionally, the Department of Communities, WA Carers Strategy (2021) outlines the main priority for YCs is to support their participation in education and to ensure schools understand young carer roles, responsibilities and needs. This entails a commitment from Department of Education to fulfill their responsibilities to ensure all teachers and administration staff understand the barriers to participation and attainment faced by young carers and encourage and support schools to develop and implement programs and guidelines to support young carers (Department of Communities, 2021).

Young carer social and emotional challenges


Young carers are at greater risk of high psychological distress, are at higher risk of financial distress, are more susceptible to social isolation, financial & educational disadvantage, unemployment, and poor physical & mental health. Between 2022 and 2023, young carers aged 15-24 years saw a much higher than average decline in wellbeing. Indeed, 50% of young carers live in households that are close to or below the poverty line (Carers WA, 2024c).

YC often must often prioritize the challenges of caring for a loved one instead of focusing on their own educational engagement and personal needs (McGowan, 2024). The negative impacts include school absenteeism and lateness; missing deadlines for important assignments; struggling to study for a test or exam; lacking resources needed to successfully participate in school; difficulty concentrating when they are at school due to worry and anxiety about their loved one at home, or stress or fatigue due to their caring role; and being socially isolated or experiencing bullying (Carers WA, 2024c; McGowan, 2024). This leads to long term disadvantages for YCs in terms of achieving educational attainment and accessing future work and academic opportunities, compared to young people without caring responsibilities (McGowan, 2024)

The risk factors that increase the negative impacts include being female, or non-binary, having a migration background, housing insecurity, extent and nature of the caring role and economic insecurity (Nagl-Cupal et al., 2014; Casu et al., 2021). Particularly caring for a family member with mental health issues or drug and alcohol dependency is associated with a lower emotional connection and attendance with the entire school environment, including peers, teachers, and schoolwork (Hamilton & Redmond, 2020; Lakman et al., 2017; Casu et al., 2021).

Additionally, YC fall through the gaps of other government services, such as disability, medical or mental health supports, simply because health professionals may not recognise and identify the young people in their clinics are caring for their parent or family member due to lack of awareness of the negative health impacts of the caring role (Thomas et al., 2003; Acton & Carter, 2016).

A YC's caring role affects school retention, employment prospects, future earning capacity, physical and mental health and well-being (Smyth et al., 2011). Butler & Astbury (2005) outline that social isolation and exclusion, and stigma are negative influences on a YC's experience within their social and educational settings. YC wellbeing is at risk with feelings of anxiety and depression (Bjorgvinsdottir & Halldorsdottir, 2014).



YCs require support to self-identify as a carer. This includes awareness of the negative impacts of their caring role on their immediate educational milestones and long-term life prospects (Cass et al., 2011). Absence from school means YCs can miss out on important extra-curricular information, guidance, advice and social inclusion from forums on health and wellbeing, sexual relations, career information and vocational pursuits, and leisure activities like camps and team sports (Chevrier et al., 2022b; Becker & Becker, 2008a). If YCs remain a hidden cohort, they cannot access available health, social care, or carer support services (Becker & Becker 2008a).

School is an important place for YCs to develop their social connections, identification, and supports, however it can also be a challenging and isolating experience (Kaiser et al., 2024; Smyth et al., 2011). There is consensus YC support begins with personal knowledge, acceptance and recognition; followed by acknowledgment and support within their family and school context (Becker & Becker, 2008a; Leu et al., 2018; Thompson et al., 2017).

Young carer barriers for identification

There is a consensus within the literature that many young people who care for family members remain hidden from the crucial support they need (Kettell et al., 2021). Additionally, young carer support programs have a significant challenge in reaching young people who provide care because they do not recognise or identify themselves as 'young carers' within educational, medical and social service settings (Smyth et al., 2011). YCs remain hidden if they do not self-identify, are unsupported to self-identify and are not supported to approach support services directly for help (Smyth et al., 2011).

Research provides many reasons why YCs do not want to be identified such as stigma, shame, fear of bullying, and not realising their caring is unusual for their age group (Morrow, 2005; Aldridge, 2006). There is additional evidence YCs are more likely to remain hidden if they are from Indigenous and culturally and linguistically diverse (CALD) backgrounds or are male (Smyth et al., 2011). Sometimes parents of young people may not recognise that their child is taking on far more responsibilities and care duties than their peers (Smyth et al., 2011). Therefore, they do not receive the family support they need to assist them with their familial caring role and personal support to engage in their educational, social and employment aspirations (Butler & Astbury, 2005).

The young person may not realise or self-identify as a YC because they do not view the extra responsibilities and care duties as unusual, or different from their peers (Smyth et al., 2011). This is often due to the familial relationships within their family that accept and encourage the young person's care giving role as a 'normal' responsibility, and this is particularly common within culturally diverse communities (Smyth et al., 2011; Morrow, 2005, Moore & McArthur 2007; Cass et al., 2010; EDAC, 2003; Hill et al., 2009). Alternatively, the young person may not fully understand the negative impacts it can have on their own health and wellbeing, until their role is identified by teachers, social services or health services assisting their ill or disabled family member (Aldridge, 2017; Phelps, 2017).

Additionally, some YCs caring for a family member with severe disabilities, mental illness, or substance abuse, or are impacted by family domestic violence, are afraid and hesitant to raise awareness of their burden or seek support due to respect and privacy for and protection of their loved ones, or fear of unintended repercussions for themselves such as peer humiliation, unwanted child protection intervention, stigma or bullying from their peers and teachers

(Aldridge & Becker, 1993; Dawe, 2007; Goffman, 1968; Kaiser & Schulze, 2015; Moore, 2005a; Moore, 2005b; Moore & McArthur, 2007; Smyth et al., 2011).

Societal expectations normalise and expect adults in families to be the main caregiver, and children and young people to be the care recipients (Becker, 2007). This is despite the identification of the 'Young Carer' as a social category within academic research and government policy and legislation in some countries such as the UK and Australia (Smyth et al., 2011). Additionally, the invisibility of YC lived experiences can also occur when parents do not want to disclose or talk about their illness or health challenges, not even to the YC (Kaiser & Schulze, 2015).

Absenteeism and truancy are linked to the invisibility of the young carer cohort within the educational setting (Fox, 1995; Howatson-Jones & Coren, 2013; Kaiser & Schulze, 2015). Many 'hidden' young carers can feel social isolation, exclusion, and stigmatisation within their social and educational settings (Butler & Astbury, 2005).


Unfortunately, many teachers and administrative staff focus on school absenteeism and truancy through a disciplinary lens as opposed to a trauma informed lens (Kaiser & Schulze, 2015). Some illnesses are not visible; therefore, a teacher may not recognise their student's absenteeism is due to the young person's caring role of a family member (Kaiser & Schulze, 2015). Schools need to be able to identify the link between YC challenges at home and their absence and disconnection from school (Kaiser & Schulze, 2015). Invisibility is a burden for the YC as it further reinforces their isolation within the school environment and prolongs their inability to seek support because they do not feel connected to their peers or their classroom learning due to missed days. The cumulative effect for YC is incomplete or nonexistent academic and social participation in their learning, low self-esteem, and disengagement from future educational and employment opportunities (Rumberger, 2011).

The school environment is the ideal place to identify vulnerable 'hidden' YC because their absenteeism or unattendance is noted and recorded; if not understood. Thomas et al. (2003, p.44) state that "Schools are an obvious place to start, because most young carers are at school for much of the time when they are not at home caring, yet they seem to attract little notice". However, identification of YC in the school context requires multidisciplinary cooperation between staff at the school and a professional awareness of YC challenges.

Young carer barriers to peer support

School was a positive experience for YC if their family recognised and valued their caring role, and the school administration and teaching staff were aware of and understood the impacts on attendance, lateness, homework (Chevrier et al., 2022; Becker & Becker, 2008a). On the other hand, school experience was negative, with low attendance and underachievement, if there was shame or stigma attached to their caring role, bullying by peers, and the school was unaware and unsupportive (Chevrier et al., 2022; Becker & Becker, 2008a).

YC often must prioritise the challenges of caring for a loved one instead of focusing on their own educational needs and personal lives (McGowan, 2024). Within the educational context YCs can feel forgotten, misunderstood and sadly punished for their absence, lateness or failure to complete assignments (McGowan, 2024). Many young carers reported they were frequently late to school or sometimes had to miss school altogether; they struggled to get their homework done on time or study for test or exam; missed out on school clubs and activities; had experiences of bullying; and consequently, could not perform at their best at school (McGowan,



2024). This leads to long term disadvantages for the young carer, such as achieving educational attainment and accessing future work and academic opportunities, compared to young people without caring responsibilities (McGowan, 2024). Additionally, the mental health toll on a young carer is high compared to their peers with YCs more likely to report severe psychological distress the longer they care, being more likely to self-harm and make attempts on their life (Holt-White et al., 2022).

The barriers, for young carers getting the immediate and long-term support they need, was due to family not recognising the challenges of their child's caring role, or the child themselves not understanding they are a young carer, a young carer's mistrust of support services and school staff being unable to identify young carers in the classroom (Lester et al., 2024). Although some schools do have awareness of YC issues and provide referrals to Carers WA for identified students. Other schools do not acknowledge or recognise there are young carers within their cohort despite evidence suggesting one in four young people are YCs (Lester et al., 2024).


The evaluation of the Young Carers Program highlights a need for mental health support for YCs within the school context (Lester et al., 2024). Ensuring there is someone a young carer with severe mental health challenges can talk too is essential in primary schools as many external mental health support services are cost prohibitive, with long waiting times (Lester et al., 2024). Additionally, Carers WA counselling staff can only be referred YCs over the age of 14 years, and the YC team members, who visit schools, are not trained to provide trauma informed, mental health support (Lester et al., 2024). Some YCs under the age of 14 attend school without the everyday necessities such as food, money, school uniform and thus feel ashamed, stigmatised and stressed (Lester et al., 2024).

Recent UK research confirms three main issues for YCs within the school context. Their caring responsibilities have a negative impact on their education; there are low levels of awareness, identification & recording of their situation; and support is inconsistent across educational facilities (McGowan, 2024). The report also acknowledges more research is required to understand the needs and lived experiences of home-schooled young carers and young carers with their own health challenges (McGowan, 2024). The report highlights the evidence around YCs' absences from school as the pivotal wake up call, to ensure all YCs are viewed within government educational policy as a distinct disadvantaged group and receive the funding and supports they need to receive the same educational opportunities as their peers.

Provision of family focused preventative support

An audit conducted in 2012 of existing young carer support programs within Australia provides a framework categorising types of support programs for young carers (Purcal et al., 2012). Although the research is now somewhat dated, the type of support programs for young carers is still current and is based on the intensity of caring, the factors constraining the young carer to get support such as familial circumstances, and the balance of existing informal and formal supports (Purcal et al., 2012). The three types of support programs identified are assistance support, reduction support, or preventative support (Purcal et al., 2012).

Assistance support programs provide short-term support, aiming to provide the young carers with counselling and peer support to help them cope with their role, provide information about available support to help them and those they care for, and social connections with other young carers (Purcal et al., 2012). Reduction support programs provide a longer term and more intensive support, aiming to reduce the young carer's time, commitment and stress of their caring responsibility. These support programs provide respite and support for the YC with



educational assistance, training and employment assistance, and financial support (Purcal et al., 2012).

Preventative support programs are an early intervention support, aiming to avoid the entrenched caregiving role and lifelong impacts on a young carer's health, wellbeing and social, educational and employment engagement. Preventative support services provide a whole family approach, connecting the family to informal and formal support within the social, health and disability services. An early intervention approach should start when the family member, with chronic illness or disability, is first diagnosed, or when the YC is first identified as providing high care (Cass et al., 2010; Purcal et al., 2012; Stamatopoulos, 2015).

The study highlights that most support programs in educational settings provide short term assistance and reduction support to YCs. Few programs focus on the early intervention preventative support programs providing sustained support for the whole family, and ensuring less care responsibilities is required from the young carer over time (Purcal et al., 2012).

This is supported by a similar study in Canada that raises the issues of assistance-mitigation support services for YCs and the lack of preventative support programs in Canada. The preventative model is blocked due to two key issues of lack of stable and sufficient funding and difficulties in creating collaborative partnerships with local school boards (Stamatopoulos, 2015). Early intervention, preventative support programs support the YC by supporting the whole family through a family centered approach, with connections to targeted and sustained social, health and disability services (Purcal et al., 2012; Cass et al., 2009; Stamatopoulos, 2015). It requires personalised case management, to ensure a coordinated and multi-disciplinary service provision, and must involve the whole family (Purcal et al., 2012).

An analysis of YC peer support in schools within Germany acknowledges the education setting is the best place for a young carer to receive support, however the assistance they receive can be selective and not focused on the young carer's individual caring and familial circumstance (Kaiser et al., 2024). There is recognition that sustained support for YCs within the education setting must be a coordinated, comprehensive approach within the constraints of the existing school structures and the YC's age, family circumstance, and caring role (Kaiser et al., 2024).

An integrated model is developed offering a low-threshold supportive approach for identified and hidden YCs (Kaiser et al., 2024). A low-threshold supportive approach provides the basic conditions of support structure such as raising awareness of YC circumstances with professionals in education, health and social care; understanding a YC individual caring burden within their family; ensuring open communication between teachers and parents; enabling a preventative, whole of family support, by integrating support systems into school life via cooperation and information sharing between all the stakeholders – parents, school administration teachers and professionals in health and social care (Kaiser et al., 2024).

The report confirms support strategies focused on the YCs independently at school without connection to their family circumstances provides insufficient support over time (Kaiser et al., 2024; Nap et al., 2020). Rather, a coordinated family centered approach is required to provide optimum sustained support over the long-term for YCs (Kaiser et al., 2024). The whole family approach provides a framework engaging the family and the YC with multi-disciplinary support within the school and with external support agencies outside the school (Kaiser et al., 2024). The whole family approach works when there is regular communication between the YC's family and the school (Kaiser et al., 2024).

Provision of Psychosocial Supports

A study in Austria explores the psychosocial resources used by YCs that support their resilience and ability to handle the day-to-day challenges of their caring role for family members (Matzka et al., 2020). Through a resilience, strengths-based lens, the article outlines two sets of psychosocial resources the YC employs. Firstly, personal resources including spending leisure time and finding distractions from day-to-day challenges and problems (Matzka & Nagl-Cupal, 2020). Secondly, interpersonal resources including encouraging and fostering peer support and friendships, getting help from the family and ensuring a positive relationship with the person being cared for (Matzka & Nagl-Cupal, 2020).


The resilience, strengths-based lens supports the YC's accounts of the positive consequences they feel because of their caring role, such as high levels of self-confidence, empathy and feelings of being prepared for their future adult life (Roling et al., 2019; Nagl-Cupal et al., 2015; Szafran et al., 2016). Support interventions also include encouraging the YC to have peer connections; cohesion and support from immediate/ extended family; and good relationships with the ill or disabled family member they are caring for (Matzka & Nagl-Cupal, 2020).

Understanding the social and cultural reality of a YC experience is often difficult due to the young person's inability to fully verbalise their lived experience in interviews (Zartler, 2014). The study suggests complimenting interviews and discussions with visual media tools (Harper, 2002; Zartler, 2014). This method is called photo novella and the YCs are encouraged to take photos to illustrate aspects of their lives and lived experience (Close, 2007). The use of photographs taken by the YC was helpful during the verbal interviews to provide prompts to recall, verbalise, describe and reflect on positives and negatives of their lived experiences (Close, 2007). The photos also stimulated discussion about the psychosocial supports that supported the YC resilience and ability to get through challenging days.

The YCs within the Austrian context highly valued their connection to school systems, with structured learning, excursions and friendships providing the interpersonal resources required to give them a break from the worry of home responsibilities (Moore et al., 2006). Peer support activities, organised by social service providers in Austria, provided YCs the opportunity to discuss the challenges of caring with other YCs and formulate meaningful friendships over shared experiences (Matzka & Nagl-Cupal, 2020).

However, the most important resource highlighted by the study was the connection, advice and support they received from their parents and legal guardians (Matzka & Nagl-Cupal, 2020). Good relationships and connections to a parent enabled reduced care responsibilities for the YC and an opportunity to foster a 'normal' balanced childhood (McDonald et al., 2010; Nagl-Cupal & Hauprich, 2018). Fostering a connected, communicative family is imperative for this to occur, therefore support programs that encouraged a family to listen to each other, to problem solve together, to share recreational time together is imperative for YCs to feel supported (Matzka & Nagl-Cupal, 2020). The study highlighted that support programs for YCs are successful when they also focus on both the healthy and ill/disabled family member (Matzka & Nagl-Cupal, 2020). Interventions should be family centered, and strengths-based, as it is ultimately the strength of the familial support structure that inevitably benefits the YC (Purcal et al., 2012; Brown & Kerrigan, 2018; Nap et al., 2020).

A study focused on the provision of psychosocial support with peer support programs outside the classroom in the UK outlines the benefits of peer group immersive outdoor activities



(Acton, 2016). The YC's wellbeing and emotional health improved through spending carefree time in nature with their peers. Engagement in sports, playing with friends, and spending time outside within nature were beneficial pursuits to improve their feelings of wellbeing and mental health (Gill, 2014). They made friends, felt happier and more positive after the experience (Acton, 2016). The peer support program involved preparing immersive outdoor activities based on the YC's needs. All sessions included a practical component (learning how to build a fire, cook, build a shelter, learn about the surrounding flora and fauna); a play component (team building and individual play); and a self-reflective component (encouraging YCs to articulate their emotions about the impacts on them personally and on their environment). This was to encourage the YC's ability to increase their emotional intelligence to have self-awareness, self-regulation, self-motivation, empathy and social competence (Goleman, 1995). Goleman's study found that having emotional intelligence was important for long-term mental health and wellbeing of children (Goleman, 1995).


A study of a strengths-based, biopsychosocial support program in Switzerland provided a salutogenic approach to support services, with a focus on the YC's resilience as opposed to their care burdens (Frech et al., 2021). Accordingly, professional support should build on the YC's existing individual competencies and coping mechanisms, together with the family's collective cohesion and support networks (Frech et al., 2021). The aim of the support program is to achieve a preventative and family centred approach (Purcal et al., 2012; Brown & Kerrigan, 2018; Nap et al., 2020).

However, this approach has problems when the cohesion and communication within the family, and the relationship between the YC and the care recipient is fractured or broken (Frech et al., 2021). This can happen for various reasons, such as, the care recipients' progressive or long term illness or disability is never discussed openly within the family; the care recipient is extremely ill, suffering chronic pain or grief with the burden of their condition; or the condition is hard to visually see and comprehend for the YC such as mental illness (Frech et al., 2021). When the relationship between the YC and the care recipient is strained, and the family is not cohesive or communicating, the burden on the YC was greater and their ability to cope weakened (Frech et al., 2021).

In the absence of an adult confidant, peer support groups can provide a safe place to enable YCs to voice their anger, confusion, concerns and experience, with other peers, who understand what they are going through (Frech et al., 2021). Additionally, it provides a space for enhancing YCs' social, mental and physical well-being and increases their opportunities to connect to their school experience (Feldman et al., 2018; Becker & Sempik, 2019; Del-Pino-Casado et al., 2019). The study highlights the care recipient also feels a sense of relief when they know the YC is receiving some support they are unable to give, due to their health challenges (Frech et al., 2021).

Peer support groups can also provide a space whereby the support needs of YCs can be viewed within the wider family context. This involves assessing the needs of the YC within the wider needs of all family members. A family-centered approach involving the whole family's needs is crucial for providing sustained support for YCs at home and school (Becker et al., 1998; Nixon, 1999).

The study highlights the need to communicate with and inform YCs on an equal footing (Frech et al., 2021). For instance, the illness may be a sensitive subject such as mental illness or substance abuse and not openly acknowledged or discussed within the family. Therefore, the



YC will seek understanding via the internet to obtain information in the absence of peer or professional support (Frech et al, 2021). It is beneficial if peer support programs include age-appropriate information and discussions of the type and progression of illnesses and disabilities the YC is dealing with at home (Frech et al, 2021). This provides YCs with much needed understanding of why the care recipient is behaving or feeling a certain way, together with a bigger picture of the immediate and long-term support they may need at home.


Provision of protective factors

A study undertaken in Europe and the UK provides a summary of the protective factors YCs aged 15-17 need to reduce the negative consequences of their caring role on their own development and social and emotional wellbeing (Casu et al., 2021). The listed protective factors need to be included and addressed in any peer support program. For example, the YC requires high self-esteem, connection to social support, opportunities for recreational and fun activities, peer engagement and support, and positive engagement with school so they can achieve at school, engage and connect with peers and cope with their caring responsibilities (Kallander et al., 2018; Gough & Gulliford, 2020; Matzka & Nagl-Cupal, 2020; Casu et al., 2021). Not surprisingly, healthy food intake and physical activity provide further protective factors, increasing the mental and physical health outcomes for YCs (Głąbska et al., 2020; Mohanty & Niyonsenga, 2019; Casu et al., 2021).

The study explains the resilience building *ME-WE intervention (Psychosocial Support for Promoting Mental health and Wellbeing)* (Casu et al., 2021). It is an adaptation of both Acceptance and Commitment Therapy (1999) and DNA-V model (2015) to promote mental health and wellbeing in adolescent YCs (Hayes & Ciarrochi, 2015; Hayes et al., 1999). It provides an opportunity to investigate and consider both the internal workings of the YC (self-esteem, existing mental health and well-being) and the external factors (social support and school engagement) to find solutions to everyday challenges, manage negative emotions, build social networks, and build resilience for the YC (Casu et al., 2021). The aim of the intervention is to support young people to cope with daily challenges and stress of their caring role. The sessions have a standard structure based on achieving an objective, having an ice-breaker introduction, a central activity to support the objective and wrapping up at conclusion (Barbabella et al., 2023). The ME-WE intervention will be available as face-to-face, online and as an app-mediated version. The app-based version provides YCs with greater flexibility, privacy (anonymity if required), reduces stigma and embarrassment of seeking help (Grist et al., 2017; Casu et al., 2021).

Provision of identification support

A standardised screening tool, the *Carers' Alert Thermometer for Young Carers (CAT-YC)*, has been developed to ensure YCs can be easily identified and assessed (Kettel et al., 2021). The screening tool was adapted from the previous *Carers' Alert Thermometer (CAT)* used to identify adult carers caring for a dying loved one (Kettel et al., 2021). It was developed in consultation with YCs in the UK, aged 11- 18 years, together with health, social care and educational professionals who work with YCs (Kettel et al., 2021). It is a short, easy to use, standardised screening tool whereby young people, caring for a family member with a disability or long-term illness, can be efficiently identified, screened and assessed, based on priority of support needs, within health, social care and educational settings (Kettel et al., 2021). The (CAT-YC) contains one identification question followed by ten questions based on current caring situation needs and carer's health and wellbeing needs (Kettel et al., 2021). Furthermore, the tool provides YCs with the recognition they deserve and license to engage in their support plan (Kettel et al., 2021).



An analysis of YCs aged 18 to 25 years (identified within the study as Young Adult Carer (YAC), in the USA, UK, Australia and Europe, provides applicable recommendations for young carer identification and support within the primary and secondary school context (Chevrier et al., 2022b). YACs need information and advice on finance arrangements, housing needs, future career choices, and employment and training assistance within the vocational and university context (Chevrier et al., 2022b). The study outlines the need to develop a universal identification process to identify YACs so support can be provided.

In the interim, the study outlines an existing self-identification questionnaire: *Multidimensional Assessment of Caring Activities for YC (MACA-YC18)* (Chevrier et al., 2022a; Joseph et al., 2009, 2019). This is an 18-item, self-report questionnaire and screening tool, relevant to the YC cohort, highlighting different caring activities between general household chores, personal and emotional care, sibling care and financial/practical care (Chevrier et al., 2022a). Particularly helpful within the university context and transferable to primary and secondary school context, was the idea of a carer's passport, identification of an advocate staff member as the go to person and lived experience peer mentors to assist new YC students. The passport enabled all staff to be aware of YC challenges without multiple explanations, an advocate staff member to provide YC with support information and peer mentors to destigmatize the caring role (Chevrier et al., 2022b; Kettell, 2018).


When a young person is supported to identify with the social category 'young carer' they began to view their everyday helping role, not as normal household chores or expected familial obligations, but as a YC providing essential personal and intimate care (Smyth et al., 2011). The label 'young carer' is not necessarily a negative one. It is important to understand that for some YCs, the familial caring role they provide is a part of their self-identity and provides them with self-respect, confidence and purpose (Smyth et al., 2011).

There are many benefits of a young person being identified as a YC with the following positive outcomes (Kettel et al., 2021; Chevrier et al., 2022). Formal acknowledgment of the extra familial caring responsibilities provides a young people the ability to explain their situation to others which can increase their acceptance amongst their friends, and within their family, social networks and school community (Smyth et al., 2011; O'Conner, 2007). Additionally, it provides a collective understanding of the extra burden they are carrying and the negative impacts this may have on their social and emotional well-being, educational attendance and attainment (Smyth et al., 2011). Recognition and validation of their caring role also provides confirmation their lived experience is exceptional, well intentioned and valued. This connects to the social context of care giving as a positive and rewarding role (Smyth et al., O'Conner, 2007).

Access to peer support is integral to supporting YCs as it helps them to feel less alone and isolated, being around people their own age going through the same issues they are experiencing (Smyth et al., 2011). Additionally, identifying as a YC also provides benefits for peer support, emotional and social support for themselves and for their families because accessing family support is made easier once young carers self-identify or are acknowledged as providing a young carer role in their family (Smyth et al., 2011)

Provision of safe space for peer support

An analysis of the barriers recruiting adolescent YCs, aged 15-17 years, to a psychosocial support intervention study across six European countries, provides valuable insight into how to connect with, retain and provide peer support to this cohort within educational settings at a crucial time in their psychosocial development (Barbabella et al., 2023). To engage adolescent



YCs with ongoing peer support, sensitivity to the nature of their often-hidden caring roles and their age is required to provide a teenager a friendly, informal peer support hub, that is not identified amongst the general school cohort as a counselling or remedial room (Barbabella et al., 2023). Additionally, engaging with a well-known musician or sports person with YC lived experience to sponsor the peer support program is highly valued by adolescents (Barbabella et al., 2023). The provision of transport support to get home or providing blended in-person and online sessions is helpful for those YCs with a high level of care responsibilities (Barbabella et al., 2023). So too is the provision of a network of stakeholders and an asset map of external support services close to school for YCs to access support when they need to for themselves or their families (Barbabella et al., 2023).

The young carer support network within the UK


A foundational body of research together with extensive work by charitable organisations over the last 30 years has provided the UK with an advanced model of supporting young carers and their families (Joseph et al., 2012). This is underpinned by national level recognition and awareness of YCs as a distinct social category, a legislative framework providing legal rights for young carers under the age of 18 years and a dedicated network of YC Projects (agencies) throughout the UK (Aldridge & Becker, 1993; Leu & Becker, 2017; Bilsborrow, 1992; Carers UK, 2016; Newman, 2002; Phelps, 2021; Stamatopoulos, 2016).

The national level recognition of YCs is supported by an extensive public communication network and public relations platform identifying health and social support programs for young carers (Stamatopoulos, 2016). For example, information regarding local registered young carers support centres, support programs, 'young carer self-assessment' tools, legal and financial supports, and counselling help phone lines are housed on the National Health Service (NHS) website for easy 24/7 online access for young carers (Stamatopoulos, 2016).

Additionally, national recognition is supported by the Carers Trust, a national membership charity organization that partners with local carer organizations across England, Wales and Scotland to provide funding, evidence-based programs and policy development to raise awareness of and support unpaid carers in the UK. Carers Trust, together with The Children's Society, a UK children's charity, operates the Young Carers in School (YCiS) program to share best practice, tools and training and assist in the identification and support of young carers in schools (McGowan, 2024). The Trust has published a recent report *Caring and classes: the education gap for young carers* outlining an overview of the main challenges for educational attainment and opportunities for young carers together with policy recommendations and practical solutions (McGowan, 2024).

The legislative framework of the *Children and Families Act 2014* (HM Government), and the *Care Act 2014* (HM Government), requires local authorities to take reasonable steps to identify YCs living within their area and provide an assessment of needs to establish the participation rates in educational, training and recreational endeavours for all YCs under the age of 18 (McGowan, 2024). The identification of a YC automatically triggers the legal requirement for full assessment by a qualified social worker (Leu & Becker, 2017; Local Government Association, 2018). This triggers support for the young carer and their family via connection to their local YC Project (Phelps, 2021).

However, the recent report highlighted that many YCs continue to miss out on support despite the legislative framework because they are unrecognized, unidentified and not recorded within schools (McGowan, 2024). This is supported by UK schools' census data indicating higher rates of 'absence and persistent absence' in YCs compared to their peers, despite three quarters of schools reporting no young carers in their cohort (McGowan, 2024).



Additionally, some primary schools had reported they cannot receive support from their Local Authority for their youngest young carers because they are under the age of 8 (the minimum age of a young carer for needs assessment and support services) (McGowan, 2024). Therefore, there is a contingent of very young carers under the age of 8 years who cannot access needs assessment and young carer services (McGowan, 2024)


The legislative framework has provided a growth of YC support and in 2020 there were 260 dedicated YC Projects throughout England. (Phelps, 2021). A comprehensive study of services and interventions providing support and positive change to a cohort of YCs aged 9-17 years and their families, within the Hampshire YCs Alliance (HYCA), a collaboration of ten YC Projects in the UK, identify the 'key dynamics' of support network for YCs (Phelps, 2021).

The YC Projects provide a preventative child focused, whole of family intervention model, combining individual and peer group support, in school support and family support (Phelps, 2021; Stamatopoulos, 2016). The support programs help YCs manage their care giving role to alleviate the emotional tole, social isolation and educational difficulties that arise and provide a place to socialize, meet with peers, talk about their concerns, provide information and support parents (Aldridge et al., 2016; Phelps, 2021). Interventions include leisure and respite programs, one-to-one support, counselling, assistance with homework and liaison with school staff (Phelps, 2021; Stamatopoulos, 2016). The YC Projects employ specific staff to work within schools to provide group and targeted YC support and teaching staff support and provide a dedicated 'Family Support Officer' to support families (Phelps, 2021).

The YC Projects also provide support within primary and secondary high schools with a dedicated YC Lead employed by the Project to run informal 'drop in' peer support and information programs at lunchtime or to support a YC individually (Phelps, 2021). Positive changes for YC include reduced feelings of isolation and stress, increased support and confidence in their caring role, improved social skills, making friends and engagement with school (Phelps, 2021). Fundamental to the positive changes was recognition that the YC role is valued, recognised and protected; "no-one was going to take [them] away" (Phelps, 2021, p. 552).

The YC Projects provide families with information and connection to external support agencies and family centred relationship building support (Phelps, 2021). The YC Projects collaborate with external support agencies such as housing, social services, disability and employment agencies, to connect the family to the services they need. Most YC services employ a dedicated 'Family Support Worker' to provide home visits, referrals to external support agencies and advice on parenting and family relationships (Phelps, 2021). The YC Projects also organise family fun day experiences such as picnics, trips away, or coffee mornings to meet other local families. Positive changes for families include knowing their child is getting support, and help with school, friendships, and fun experiences; thus, less worry/guilt about their child, knowing they are receiving the support they can't provide due to their illness or disability (Phelps, 2021).

The success of the YC Projects is due to staffing, operational frameworks and the support environment (Phelps, 2021). Experienced and reliable staff build trusted and confidential relationships with YCs and their families (Phelps, 2021). Provision of compassionate and consistent, early intervention and ongoing, support services provide YC and their families with the confidence to engage with YC Projects. Additionally, YC Projects provides a diverse range



of interventions and support services to meet the diverse needs of YCs and their families. For example, YC Projects can provide flexible and creative interventions to address identified needs such as self-harm or sexual health concerns (Phelps, 2021). The study confirms YCs, and their families, need diverse, multifaceted support intervention due to the different intensities of caring (Phelps, 2021; Joseph et al., 2019).

The young carer support system within schools in the UK

The *Young Carers in Schools* (YCiS) program, launched in 2014, is a free initiative run by Carers Trust and The Children's Society (Ruggiero-Cakir, 2022). The YCiS program provides schools with information on key policy developments, best practice research initiatives, and tools and training to support young carers in schools, such as the *Supporting Young Carers in Schools: A Step-by step Guide for Leaders, Teachers and Non-teaching Staff* (McGowan, 2024; Ruggiero-Cakir, 2022).


The *Step-by-Step Guide* was launched in 2017 and based on principles and tools from previous research into supporting young carers within schools (Ruggiero-Cakir, 2022; Phelps et al., 2010). An independent evaluation of the Guide, undertaken in 2018, highlighted positive outcomes for young carers throughout England with improvements in their awareness and identification, their school engagement, attainment and achievement and their confidence and wellbeing (Ruggiero-Cakir, 2022; Coram, 2018). The Guide provides ten clear steps, primary and secondary schools' staff and teachers can take towards ensuring young carers are identified and supported to achieve school attainment, educational accomplishment and personal wellbeing (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 1 involves implementing a whole school approach in identifying and understanding YCs and the impacts their extra emotional and/or practical caring responsibilities at home has on their educational engagement, and social and emotional wellbeing (Ruggiero-Cakir, 2022; Phelps et al., 2010). Step 2 involves encouraging a senior staff member, Chaplain or designated YC Lead to undertake a review of current YC support systems in the school to identify existing strengths, and weaknesses (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 3 involves securing a school leadership commitment to early identification of YCs and allocation of resources to support YCs such as timetabled peer support/ social and emotional learning (SEL) and staff training to understand how to identify young carers and actions they can take to support young carers day by day (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 4 involves the designation of a staff member to take on the role as a YC Lead. This is instrumental in building trusted relationships and securing long-term support for YCs and their families in the school environment (Ruggiero-Cakir, 2022; Phelps et al., 2010). The YC Lead acts as the main contact for YCs and their families, advises school staff about how to identify and support a YC in the classroom and is the contact point for external support agencies to meet the needs of the YCs and their family (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 5 involves acknowledging and formalising a whole school approach for YCs within school policy documents and communication to students, families and staff (Ruggiero-Cakir,




2022; Phelps et al., 2010). This will ensure YCs, and their families, feel supported and included within the school environment. Informative and positive communication about YCs and the supports available to them and their families can be displayed on school websites, staff and pupil notice boards and via staff intranet; referred to at school assemblies and within school annual reports; and communicated to prospective students and families during enrolment (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 6 involves setting up school procedures to identify, assess and support YCs (Ruggiero-Cakir, 2022; Phelps et al., 2010). These procedures begin at school enrolment with standard sensitive questions to parents/guardians to help identify if a prospective student is a YC and provide information about types of support available if required (Ruggiero-Cakir, 2022; Phelps et al., 2010). Procedures can include ensuring there is a confidential setting where a student can talk to a staff member about a family member or call home during breaks to reduce their worry; setting up a peer support group for young carers; providing a school message box where students can self-identify as a young carer with privacy and confidentiality. To achieve best practice, school administration can keep checks on the attendance, attainment and progress of identified young carers; check the protocols for information sharing between internal and external agencies to ensure the YC does not have to repeat their story; identify hidden young carers by sensitively monitoring and tracking poor attendance of students to connect them with the Young Carers School Lead for support if required (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 7 involves raising awareness of YCs via professional training for teaching and non-teaching staff, to identify and support YCs. This is not viewed as an extra workload; rather it equips them to fulfil their existing roles within the school (Ruggiero-Cakir, 2022; Phelps et al., 2010). Training staff to recognise the signs a student may be a YC is imperative for early identification. Training needs to be trauma informed and provide specific insight into young people affected by parental mental ill-health, addiction and HIV (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 8 involves raising awareness of YCs for other school families and students. This includes age-appropriate information about YCs' caring role and sensitive messages about illness, disability, mental health challenges and addiction within the school environment (Ruggiero-Cakir, 2022; Phelps et al., 2010). This reduces stigmatisation and increases empathy and understanding of all students (Ruggiero-Cakir, 2022; Phelps et al., 2010). Peer awareness is achieved by student noticeboards/or school websites, assembly presentations and inviting local support agencies to make presentations about topics (Ruggiero-Cakir, 2022; Phelps et al., 2010). Family awareness is achieved by providing regular communication and information about support provided by the school for YCs and how to connect with the School Lead (Ruggiero-Cakir, 2022; Phelps et al., 2010).

Step 9 involves identifying, assessing and supporting YCs and their families through key actions by the School Lead. Once identified as a YC, the School Lead must ensure prompt assessment of the student by a relevant staff member or external agency to ascertain the level of support and intervention required to meet their needs; secure consent from families/ guardian for information sharing; establish involvement of staff and other professionals to plan and implement support; develop and deliver agreed upon YC's school support plan and monitor and review the impacts (Ruggiero-Cakir, 2022; Phelps et al., 2010).



Step 10 involves proactively sharing practices and policy implementation to share knowledge within the school's district and encourage best practice (Ruggiero-Cakir, 2022; Phelps et al., 2010).


The *Step-by-Step Guide*, prepared in consultation with UK teachers and school staff, can be adapted depending upon a school's existing administrative pressure, student support structures and local issues (Ruggiero-Cakir, 2022). The guide provides primary and high schools with a flexible, whole school approach, to identify and support YCs with templates, material and resources staff can access online (via <https://youngcarersinschools.com>).

The recent Carers Trust report entitled, *Caring and classes: the education gap for young carers* (2024), provided key recommendations to improve the education attainment and support opportunities for YCs. The report highlighted that despite legislative protection and the support provided by the YC Project's and the *Step-by-Step Guide* program, sadly "almost 1 in 4 young carers say there is no support at all for young carers in their school" and within the educational context they can still feel unidentified, misunderstood and sadly punished for their absence, lateness or failure to complete assignments (McGowan, 2024, p. 5).

The report confirms the three main issues for YCs within the school context. Their caring responsibilities have a negative impact on their education; there are low levels of awareness, identification & recording of their situation; and support is inconsistent across educational facilities (McGowan, 2024). The report also acknowledges that more research is required to understand the needs and lived experiences of home-schooled young carers and young carers with their own health challenges (McGowan, 2024). The YCs interviewed for the report said they needed someone to talk to; a YCs peer support group/time out session; a school awareness of YCs and what they do; counselling or mental health support; and academic support (McGowan, 2024). Additionally, the existing school supports that were highly valued by YCs included a YC Lead who the YCs can go to, to get support, provision of food and hygiene hampers assisting with the financial pressure on their families, opportunities to access school trips and excursions,

The report outlined recommendations to facilitate support for YCs in schools. This included YCs to be viewed within government educational policy as a distinct disadvantaged group and receive proper funding support. Currently Carers Trust provides *Pupil Premium* funding for disadvantaged students. The report calls for the UK Government to adopt a *Young Carers Pupil Premium* (YCPP) to work in tandem and provide an annual payment to schools so they can provide dedicated pastoral, wellbeing and academic support to identified YCs (McGowan, 2024). For example, the extra YCPP support could provide the following: dedicated monitoring of YC's progress, paying additional hours for a staff member to be a YC Lead, employing additional staff to provide academic and peer support, funding additional external services (mental health services, excursion providers) and provision of information support for family members (McGowan, 2024). Specific funding allocation to YCs in schools would also encourage schools to formally identify the YCs they have (McGowan, 2024).

Another recommendation outlined the UK Department of Education should provide YC awareness training with e-learning modules and curriculum training for graduate teachers, teachers, school administration/attendance support staff, and student services staff, to ensure a whole school approach to improve recognition, identification and recording of YCs (McGowan, 2024). Additionally, the Department of Education should ensure all schools are required to add YCs to the daily attendance reporting requirements to help monitor their engagement with



school and provide trauma informed attendance support and appoint a permanent YC Lead to be the advocate for YCs and their families. This can be a member of staff, a teacher, teaching assistant or chaplain, who understands the challenges of caring responsibilities and can coordinate support within the school when a YC needs it (McGowan, 2024).

Conclusion


The literature review confirms YCs within schools need and highly value consistent peer support programs that provide them with someone to talk too, counselling or mental health support when required, academic support, crisis support, school attendance support, and opportunities for respite and recreational activities. Peer support programs in school are valued as a safe space for YCs to feel less isolated, cope with their role, gather information about available support to help them and those they care for, and provide vital social connections with other young carers.

The main barriers to peer support in educational settings identified is due to lack of YC recognition within legislative and policy frameworks, inconsistency of established support structures within schools due to lack of awareness of YC predicament, lack of identification of YCs and parental/guardian support and consent, and lack of school resources such as funding and staff training.

The review found a receptive and responsive school environment provides one of the best strategies for identifying and informing young carers, educating them about young carer support, connecting them to peer support and promoting whole of family access to supports they need. School is a positive experience when YC are supported to self-identify, they are recognised and valued within a cohesive family and are understood and supported within the educational context. On the other hand, YCs can have a negative experience at school with social isolation, low attendance and underachievement if there is shame or stigma attached to their caring role, there is bullying by peers, and the school is unaware and unsupportive of their caring challenges. YCs can be afraid and hesitant to raise awareness of their burden or seek peer support programs due to respect and privacy for and protection of their loved ones, or fear of unintended repercussions for themselves.

When a school is receptive to YC lived experience there is an opportunity to conduct peer support programs, conduct awareness raising presentations to students regarding YC services, and provide opportunities for families to connect to school environments through breakfast clubs, homework clubs and parenting talks. A whole school approach includes a commitment to multidisciplinary communication and cooperation between the school administration, student support services, teachers and psychologists are required to understand the multicausality of the caring role and extra responsibility assumed by young carers. To understand a young carer may be absent or disengaged from school due to their caring role is pivotal to identifying a YC within the school context.


The literature review has provided an exploration of peer support group programs and services supporting YCs within educational settings internationally and the barriers and facilitators to this support. The literature review supports the need for better acknowledgement of the caring role undertaken by YCs and most importantly, awareness, understanding and compassion within the educational settings so they can be better supported to engage in their basic right to



educational opportunities. Additionally, the literature review has highlighted the legislative and policy environment that is required to ensure improvements in YC awareness and identification, their school engagement, attainment and achievement and their overall confidence and wellbeing. This is to ensure additional funding and resources support is provided to schools and other government agencies to ensure YCs are recognised, valued and supported within the educational context.

References

- Acton, J., & Carter, B. (2016). The Impact of Immersive Outdoor Activities in Local Woodlands on Young Carers Emotional Literacy and Well-Being. *Comprehensive Child and Adolescent Nursing*, 39(2), 94–106. <https://doi.org/10.3109/01460862.2015.1115156>
- Aldridge, J. (2006). The experiences of children living with and caring for parents with mental illness. *Child Abuse Review*, 15(2), 79–88. <https://doi.org/10.1002/car.904>
- Aldridge, J., & Becker, S. (1993). *Children who care: Inside the world of young carers*. Loughborough University, Young Carers Research Group.
- Aldridge, J., & Becker, S. (1999). Children as carers: the impact of parental illness and disability on children's caring roles. *Journal of Family Therapy*, 21(3), 303-320.
- Aldridge, J., Clay, D., Connors, C., Day, N., & Gkiza, M. (2016). *The lives of young carers in England: Research brief*. Loughborough University, Young Carers Research Group. https://assets.publishing.service.gov.uk/media/5a74ed2fed915d3c7d52909a/DFE-RB499_The_lives_of_young_carers_in_England_brief.pdf
- Antman, E. M., Lau, J., Kupelnick, B., Mosteller, F., & Chalmers, T. C. (1992). A Comparison of Results of Meta-analyses of Randomized Control Trials and Recommendations of Clinical Experts: Treatments for Myocardial Infarction. *JAMA : The Journal of the American Medical Association*, 268(2), 240–248. <https://doi.org/10.1001/jama.1992.03490020088036>
- Australian Bureau of Statistics. (2022). *Disability, Ageing and Carers, Australia: Summary of Findings*. ABS. <https://www.abs.gov.au/statistics/health/disability/disability-ageing-and-carers-australia-summary-findings/latest-release>
- Arksey, H., & O'Malley, L. (2005). Scoping studies: towards a methodological framework. *International Journal of Social Research Methodology*, 8(1), 19–32. <https://doi.org/10.1080/1364557032000119616>
- Barbabella, F., Magnusson, L., Boccaletti, L., Casu, G., Hlebec, V., Bolko, I., Lewis, F., Hoefman, R., Brolin, R., Santini, S., Socci, M., D'Amen, B., de Jong, Y., Bouwman, T., de Jong, N., Leu, A., Phelps, D., Guggiari, E., Wirth, A., ... Hanson, E. (2023). Recruitment of Adolescent Young Carers to a Psychosocial Support Intervention Study in Six European Countries: Lessons Learned from the ME-WE Project. *International Journal of Environmental Research and Public Health*, 20(6), 5074-. <https://doi.org/10.3390/ijerph20065074>
- Becker, S. (2000). *Young carers (Version 1)*. University of Sussex. <https://hdl.handle.net/10779/uos.23456924.v1>
- Becker, S. (2007). Global Perspectives on Children's Unpaid Caregiving in the Family: Research and Policy on 'Young Carers' in the UK, Australia, the USA and Sub-Saharan Africa. *Global Social Policy*, 7(1), 23–50. <https://doi.org/10.1177/1468018107073892>



Becker, S., Aldridge, J., & Dearden, C. (1998). *Young carers and their families*. University of Sussex.

Becker, S. & Becker, F. (2008a) *Young Adult Carers in the UK: Experiences, Needs and Services for Carers aged 16-24*. The Princess Royal Trust for Carers.

Becker, S., & Becker, F. (2008b). *Service needs and delivery following the onset of caring amongst children and young adults: Evidenced based review*. The University of Nottingham. <https://www.sussex.ac.uk/about/documents/service-needs-evidence-review-on-young-carers-and-young-adult-carers.pdf>

Becker, S., & Sempik, J. (2019). Young Adult Carers: The Impact of Caring on Health and Education. *Children & Society*, 33(4), 377–386. <https://doi.org/10.1111/chso.12310>

Bilsborrow, S. (1992). *You grow up fast as well. Young carers on Merseyside*. Carers National Association.

Bjorgvinsdottir, K., & Halldorsdottir, S. (2014). Silent, invisible and unacknowledged: experiences of young caregivers of single parents diagnosed with multiple sclerosis. *Scandinavian Journal of Caring Sciences*, 28(1), 38–48. <https://doi.org/10.1111/scs.12030>

Brown, G., & Kerrigan, N. (2018). *Who cares for the carer? Exploring the role of advocacy in supporting young carers: Young Carers*. Coventry University.

Butler, A. H., & Astbury, G. (2005). The caring child: an evaluative case study of the Cornwall Young Carers project. *Children & Society*, 19(4), 292–303. <https://doi.org/10.1002/chi.851>

Carers Australia. (September 2024). *Submission to the Department of Social Services on the National Carer Strategy Discussion Paper*. <https://www.carersaustralia.com.au/submissions-reports/submissions/>

Carer Recognition Act 2010 (Cth). <https://www.legislation.gov.au/C2010A00123/latest/text>

Carers Recognition Act 2004 (WA). [https://www.legislation.wa.gov.au/legislation/prod/filestore.nsf/FileURL/mrdoc_28814.pdf/\\$FILE/Carers%20Recognition%20Act%202004%20-%20%5B01-e0-01%5D.pdf?OpenElement](https://www.legislation.wa.gov.au/legislation/prod/filestore.nsf/FileURL/mrdoc_28814.pdf/$FILE/Carers%20Recognition%20Act%202004%20-%20%5B01-e0-01%5D.pdf?OpenElement)

Carers WA. (2020). *Young Carers Peer Support Group Toolkit: A practical guide for educators, non-teaching staff and leaders to provide young carers with peer support groups in education facilities*. Carers Association of WA.

Carers WA. (2023). *Submission to the Australian Government Department of Communities: WA Youth Action Plan Consultation Paper*. Carers Association of WA.

Carers WA. (2024a). *Young Carers*. <https://www.carerswa.asn.au/our-services/young-carers/>

- Carers WA. (2024b). *Carers WA Policy Submission: National Carer Strategy*
<https://www.carerswa.asn.au/resources/policy-submission-research-reports/>
- Carers WA. (2024c). *Carers WA Policy Submission: Review of the School Education Act 1999 (WA)*. <https://www.carerswa.asn.au/resources/policy-submission-research-reports/>
- Cass, B., Brennan, D., Thomson, C., Hill, T., Purcal, C., Hamilton, M., & Adamson, E. (2011). *Young carers: social policy impacts of the caring responsibilities of children and young adults: final report*. Social Policy Research Centre, University of New South Wales.
- Cass, B., Smyth, C., Hill, T., Blaxland, M., & Hamilton, M. (2010). Social Policy Research Paper: Young carers in Australia: Understanding the advantages and disadvantages of their care giving. *Youth Studies Australia*, 29(1), 61-.
<https://search.informit.org/doi/epdf/10.3316/jelapa.950716759845632>
- Casu, G., Hlebec, V., Boccaletti, L., Bolko, I., Manattini, A., & Hanson, E. (2021). Promoting Mental Health and Well-Being among Adolescent Young Carers in Europe: A Randomized Controlled Trial Protocol. *International Journal of Environmental Research and Public Health*, 18(4). <https://doi.org/10.3390/ijerph18042045>
- Chevrier, B., Dorard, G., Jarrige, E., Joseph, S., Becker, S., Leu, A., & Untas, A. (2022a). Assessing caring activities in French adolescents and young adults: Relevance of the Multidimension Assessment of Caring Activities for Young Carers (MACA-YC18). *Child : Care, Health & Development*, 48(5), 788–799. <https://doi.org/10.1111/cch.12988>
- Chevrier, B., Lamore, K., Untas, A., & Dorard, G. (2022b). Young adult carers' identification, characteristics, and support: A systematic review. *Frontiers in Psychology*, 13, 990257–990257. <https://doi.org/10.3389/fpsyg.2022.990257>
- Close, H. (2007). The use of photography as a qualitative research tool. *Nurse Researcher*, 15(1), 27–36. <https://doi.org/10.7748/nr2007.10.15.1.27.c6052>
- Coram. (2018). A Better Relationship with Learning: an evaluation of the Young Carers in Schools Programme. https://www.coram.org.uk/wp-content/uploads/migrated/resource_files/Carers%20Trust%20evaluation%20report.pdf
- Dawe, S. (2007). *Drug use in the family: Impacts and implications for children*. Australian National Council on Drugs. <https://apo.org.au/node/7330>
- Del-Pino-Casado, R., Espinosa-Medina, A., López-Martínez, C. & Orgeta, V. (2019). Sense of coherence, burden and mental health in caregiving: a systematic review and meta-analysis, *Journal of Affective Disorders*, 242: 14–21. doi: 10.1016/j. Jad.2018.08.002
- Department of Communities. N.d. *Carers Recognition Act 2004* brochure.
https://www.wa.gov.au/system/files/2021-08/Carers-Recognition-Act-brochure-English_0.pdf
- Department of Communities. (2021). *WA Carers Strategy*.
<https://www.wa.gov.au/government/publications/wa-carers-strategy>



Department of Communities. (2024a). Fact Sheet: Carers Charter.
https://www.wa.gov.au/system/files/2023-10/carers_factsheet_carers_charter.pdf

Department of Communities. (2024b). WA Youth Action Plan 2024-2027 Koorlangka Bidi "Young People's path". <https://www.wa.gov.au/organisation/department-of-communities/wa-youth-action-plan-2024-2027>

Department of Economic and Social Affairs of the United Nations Secretariat (UN DESA). (2022). *World Economic Situation and Prospects 2022: Statistical Annex*. (UN DESA).
https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/WESP2022_ANNEX.pdf

Department of Social Services. (2016). *Carer Recognition Act 2010 Guidelines: A guide for Australian Public Service Agencies for the implementation of the Carer Recognition Act 2010*. Commonwealth of Australia. <https://www.dss.gov.au/carers-support/resource/carers-recognition-act-2010-guidelines>

Department of Social Services. (2020). *More funding for carers services: 2019 Budget*.
<https://www.dss.gov.au/budget-and-additional-estimates-statements/resource/more-funding-carers-services>

Department of Social Services. (2024). *National Carer Strategy: Discussion Paper*.

Commonwealth of Australia. <https://engage.dss.gov.au/national-carer-strategy/national-carer-strategy-discussion-paper/>

Ethnic Disability Advocacy Centre (EDAC). (2003). Supporting CALD carers: the service needs of culturally and linguistically diverse carers of people with disabilities.

Feldman, D.B., Einav, M. & Margalit, M. (2018) Does family cohesion predict children's effort? The mediating roles of sense of coherence, hope, and loneliness, *The Journal of Psychology*, 152(5): 276–89. doi: 10.1080/00223980.2018.1447434

Fox, N. J. (1995). Professional models of school absence associated with home responsibilities. *British Journal of Sociology of Education*, 16(2), 221–242.

Frech, M., Berger, F., Rabhi-Sidler, S., Nagl-Cupal, M., Becker, S., & Leu, A. (2021). How professional support for young carers benefits from a salutogenic approach. *International Journal of Care and Caring*, 5(4), 591–610.
<https://doi.org/10.1332/239788221X16196023939801>

Gill, T. (2014). The benefits of children's engagement with nature: A systematic literature review. *Children, Youth & Environments*, 24(2), 10–34.
doi:10.7721/chilyoutenvi.24.2.0010

Głąbska, D., Guzek, D., Groele, B., & Gutkowska, K. (2020). Fruit and vegetables intake in adolescents and mental health: a systematic review. *Roczniki Państwowego Zakładu Higieny*, 71(1), 15–25. <https://doi.org/10.32394/rpzh.2019.0097>

- Goffman, E. (1968). *Stigma: Notes on the management of spoiled identity*. Penguin.
- Goleman, D. (1995). *Emotional Intelligence: Why it can matter more than IQ*. Bantam Books.
- Gough, G., & Gulliford, A. (2020). Resilience amongst young carers: investigating protective factors and benefit-finding as perceived by young carers. *Educational Psychology in Practice*, 36(2), 149–169. <https://doi.org/10.1080/02667363.2019.1710469>
- Grist, R., Porter, J., & Stallard, P. (2017). Mental Health Mobile Apps for Preadolescents and Adolescents: A Systematic Review. *Journal of Medical Internet Research*, 19(5), e176–e176. <https://doi.org/10.2196/jmir.7332>
- Hamilton, M. G., & Adamson, E. (2013). Bounded agency in young carers' lifecourse-stage domains and transitions. *Journal of Youth Studies*, 16(1), 101–117. <https://doi.org/10.1080/13676261.2012.710743>
- Hamilton, M., & Redmond, G. (2020). Are Young Carers Less Engaged in School than Non-Carers? Evidence from a Representative Australian Study. *Child Indicators Research*, 13(1), 33–49. <https://doi.org/10.1007/s12187-019-09647-1>
- Harper, D. (2002). Talking about pictures: A case for photo elicitation. *Visual Studies*, 17(1), 13–26. <https://doi.org/10.1080/14725860220137345>
- Hayes, L. L., & Ciarrochi, J. (2015). *The thriving adolescent : using acceptance and commitment therapy and positive psychology to help teens manage emotions, achieve goals, and build connection*. Context Press.
- Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (1999). *Acceptance and commitment therapy: An experiential approach to behavior change*. Guilford Press.
- Hill, T., Social Policy Research Centre., National Youth Affairs Research Scheme., Social Policy Research Centre., & National Youth Affairs Research Scheme. (2009). *Young carers: their characteristics and geographical distribution : report to the National Youth Affairs Research Scheme (NYARS)*. Attorney-General's Department.
- Holt-White, E., De Gennaro, A., Anders, J., Cullinane, C., Early, E., Montacute, R., Shao, X., & Yarde, J. (2022). Mental Health and Wellbeing. Wave 1 Initial Findings - Briefing No. 4. COVID Social Mobility & Opportunities Study. In *Sutton Trust*. Sutton Trust.
- Howatson-Jones, L., & Coren, E. (2013). Scoping the assessment needs of young carers of adults with a long-term condition. *Journal of Nursing & Care*, 2(2), 129.
- Ireland, M. J., & Pakenham, K. I. (2010). The nature of youth care tasks in families experiencing chronic illness/disability: Development of the Youth Activities of Caregiving Scale (YACS). *Psychology & Health*, 25(6), 713–731. <https://doi.org/10.1080/08870440902893724>
- Joseph, S., Becker, S., & Becker, F. (2012). *Manual for measures of caring activities and outcomes for children and young people, 2nd Edition (Version 1)*. University of

Sussex. <https://carers.org/resources/all-resources/101-manual-for-measures-of-caring-activities-and-outcomes-for-children-and-young-people>

Joseph, S., Becker, S., Becker, F., & Regel, S. (2009). Assessment of caring and its effects in young people: development of the Multidimensional Assessment of Caring Activities Checklist (MACA-YC18) and the Positive and Negative Outcomes of Caring Questionnaire (PANOC-YC20) for young carers. *Child: care, health and development*, 35(4), 510–520. <https://doi.org/10.1111/j.1365-2214.2009.00959.x>

Joseph, S., Kendall, C., Toher, D., Sempik, J., Holland, J., & Becker, S. (2019). Young carers in England: Findings from the 2018 BBC survey on the prevalence and nature of caring among young people. *Child : Care, Health & Development*, 45(4), 606–612. <https://doi.org/10.1111/cch.12674>

Kaiser, S., & Schulze, G. C. (2015). Between Inclusion and Participation: Young Carers Who Are Absent From School. *Journal of Cognitive Education and Psychology*, 14(3), 314–328. <https://doi.org/10.1891/1945-8959.14.3.314>

Kaiser, S., Siegemund-Johannsen, S., Schulze, G. C., & Spittel, A.-M. (2024). Basic Conditions for Support of Young Carers in School: A Secondary Analysis of the Perspectives of Young Carers, Parents, Teachers, and Counselors. *Healthcare*, 12 (11), MDPI AG. <https://doi.org/10.3390/healthcare12111143>

Kallander, E. K., Weimand, B., Ruud, T., Becker, S., Van Roy, B., & Hanssen-Bauer, K. (2018). Outcomes for children who care for a parent with a severe illness or substance abuse. *Child & Youth Services*, 39(4), 228–249. <https://doi.org/10.1080/0145935X.2018.1491302>

Kettell, L. (2018). Young adult carers in higher education: the motivations, barriers and challenges involved – a UK study. *Journal of Further and Higher Education*, 44(1), 100–112. <https://doi.org/10.1080/0309877X.2018.1515427>

Kettell, L., O'Brien, M. R., Jack, B. A., & Knighting, K. (2021). Development of the Carers' Alert Thermometer for Young Carers (CAT-YC) to Identify and Screen the Support Needs of Young Carers: A Mixed Method Consensus Study. *Child & Adolescent Social Work Journal*, 38(5), 559–570. <https://doi.org/10.1007/s10560-021-00789-2>

Further information about the CAT-YC is available at the project website:

<https://www.edgehill.ac.uk/carers/>

Lakman, Y., Chalmers, H., & Sexton, C. (2017). Young Carers' Educational Experiences and Support: A Roadmap for the Development of School Policies to Foster their Academic Success. *Alberta Journal of Educational Research*, 63(1), 63–74. <https://doi.org/10.55016/ojs/ajer.v63i1.56226>

Leu, A., & Becker, S. (2017). A cross-national and comparative classification of in-country awareness and policy responses to 'young carers.' *Journal of Youth Studies*, 20(6), 750–762. <https://doi.org/10.1080/13676261.2016.1260698>

- Leu, A., Jung, C., Frech, M., Sempik, J., Moser, U., Verner, M., & Becker, S. (2018). Study protocol: young carers and young adult carers in Switzerland. *BMC Health Services Research*, 18(1), 183–183. <https://doi.org/10.1186/s12913-018-2981-5>
- Lester L., Scullin B., Lester R., Zou S., & Flatau P. (2024). *Evaluation of the Young Carers Program*. Centre for Social Impact. The University of Western Australia. <https://www.carerswa.asn.au/resources/policy-submission-research-reports/>
- Levac, D., Colquhoun, H., & O'Brien, K. K. (2010). Scoping studies: Advancing the methodology. *Implementation Science: IS*, 5(1), 69–69. <https://doi.org/10.1186/1748-5908-5-69>
- Local Government Association. (2018). *Meeting the health and wellbeing needs of young carers*. <http://www.local.gov.uk/bright-futures>
- Matzka, M., & Nagl-Cupal, M. (2020). Psychosocial resources contributing to resilience in Austrian young carers—A study using photo novella. *Research in Nursing & Health*, 43(6), 629–639. <https://doi.org/10.1002/nur.22085>
- McDonald, J., Dew, K., & Cumming, J. (2010). Change and Adaptation in Families with Young Carers. *The Australian Journal of Social Issues*, 45(4), 459–475. <https://doi.org/10.1002/j.1839-4655.2010.tb00192.x>
- McDougall, E., O'Connor, M., & Howell, J. (2018). Something that happens at home and stays at home: An exploration of the lived experience of young carers in Western Australia. *Health & Social Care in the Community*, 26(4), 572–580. <https://doi.org/10.1111/hsc.12547>
- McGowan, A. (2024). *Caring and classes: the education gap for young carers*. Carers Trust. <https://carers.org/downloads/young-carers-in-education---summaryfinal.pdf>
- Mohanty, I., & Niyonsenga, T. (2019). A longitudinal analysis of mental and general health status of informal carers in Australia. *BMC Public Health*, 19(1), 1436–1436. <https://doi.org/10.1186/s12889-019-7816-8>
- Moore, T. (2005a). *Reading between the lines: Talking to children and young people about their experiences of young caring*. Canberra: Youth Coalition of the ACT.
- Moore, T. (2005b). Young carers and education: Identifying the barriers to satisfactory education for young carers. *Youth Studies Australia*, 24(4), 50-55.
- Moore, T., & McArthur, M. (2007). We're all in it together: supporting young carers and their families in Australia. *Health & Social Care in the Community*, 15(6), 561–568. <https://doi.org/10.1111/j.1365-2524.2007.00719.x>
- Moore, T., McArthur, M., & Morrow, R. (2009). Attendance, achievement and participation : young carers' experiences of school in Australia. *The Australian Journal of Education*, 53(1), 5–18. <https://doi.org/10.1177/000494410905300102>
- Morrow, R. (2005). *A profile of known young carers and identification and snapshot of the ones who are hidden*. <https://espace.curtin.edu.au/handle/20.500.11937/11174>

- Nagl-Cupal, M., Daniel, M., Koller, M. M., & Mayer, H. (2014). Prevalence and effects of caregiving on children. *Journal of Advanced Nursing*, 70(10), 2314–2325.
<https://doi.org/10.1111/jan.12388>
- Nagl-Cupal, M., Metzger, S., & Mayer, H. (2015). Experiences of being a former young carer: Effects in the transition into adulthood and in the present life situation. *Revista Eletrônica de Enfermagem. Electronic Nursing Journal*, 17(4), 1–10.
<https://doi.org/10.5216/ree.v17i4.34350>
- Nagl-Cupal, M., & Hauprich, J. (2018). Being we and being me: Exploring the needs of Austrian families with caring children. *Health & Social Care in the Community*, 26(4), e532–e540.
<https://doi.org/10.1111/hsc.12567>
- Nap, H. H., Hoefman, R., De Jong, N., Lovink, L., Glimmerveen, L., Lewis, F., Santini, S., D'Amen, B., Socci, M., Boccaletti, L., Casu, G., Manattini, A., Brodin, R., Sirk, K., Hlebec, V., Rakar, T., Hudobivnik, T., Leu, A., Berger, F., ... Hanson, E. (2020). The awareness, visibility and support for young carers across Europe: A Delphi study. *BMC Health Services Research*, 20(1), 921–921. <https://doi.org/10.1186/s12913-020-05780-8>
- Newman, T. (2002). 'Young Carers' and Disabled Parents: Time for a change of direction?. *Disability & Society*, 17(6), 613–625.
- Nixon, P. (1999). Promoting family decision making in child care practice: An overview of the use of family group conferences in child protection, youth justice, schools and with young carers. *Child Care in Practice*, 5(4), 308–327.
<https://doi.org/10.1080/13575279908415537>
- Pawson, R. (2002). Evidence-based Policy: In Search of a Method. *Evaluation*, 8(2), 157–181.
<https://doi.org/10.1177/1358902002008002512>
- Peters, MDJ., Godfrey C., McInerney P., Munn Z., Tricco AC., Khalil, H. (2024) Chapter 10: Scoping Reviews. In E. Aromataris, C. Lockwood, K. Porritt, B. Pilla, & Z. Jordan (EDs.), *JBI Manual for Evidence Synthesis* (pp.). Joanna Briggs Institute.
<https://synthesismanual.jbi.global>. <https://doi.org/10.46658/JBIMES-24-09>
- Phelps, D., Leadbitter, H., & Manzi, D. (2010), *Supporting Young Carers: A Resource for Schools*. The Princess Royal Trust for Carers and The Children's Society.
- Phelps, D. (2017). The voices of young carers in policy and practice. *Social Inclusion*, 5(3), 113–121. <https://doi.org/10.17645/si.v5i3.965>
- Phelps, D. (2021). What Changes for Young Carers? A Qualitative Evaluation of the Impact of Dedicated Support Provision for Young Carers. *Child & Adolescent Social Work Journal*, 38(5), 547–558. <https://doi.org/10.1007/s10560-021-00790-9>
- Productivity Commission. (2022). *Review National School Reform Agreement – Study Report*. Commonwealth of Australia. <https://www.pc.gov.au/inquiries/completed/school-agreement/report/school-agreement-overview.pdf>

- Purcal, C., Hamilton, M., Thomson, C., & Cass, B. (2012). From Assistance to Prevention: Categorizing Young Carer Support Services in Australia, and International Implications. *Social Policy & Administration*, 46(7), 788–806. <https://doi.org/10.1111/j.1467-9515.2011.00816.x>
- Roling, M., Falkson, S., Hellmers, C., & Metzger, S. (2019). Early caregiving experiences and the impact on transition into adulthood and further life: A literature review. *Scandinavian Journal of Caring Sciences*, 34, 539–551. <https://doi.org/10.1111/scs.12757>
- Ronicle, J., & Kendall, S. (2010). *Improving support for young carers—Family focused approaches*. Research Report DFE-RR084. UK Department for Education.
- Ruggiero-Cakir, A. (2022). *Supporting Young Carers in Schools: A Step-by-step Guide for Leaders, teachers and Non-Teaching Staff*. Carers Trust. <https://carers.org/downloads/ycis-steps-1-10-web.pdf>
- Rumberger, R. W. (2011). *Dropping out: Why students drop out of high school and what can be done about it*. Harvard University Press.
- Smyth, C., Blaxland, M., & Cass, B. (2011). "So that's how I found out I was a young carer and that I actually had been a carer most of my life". Identifying and supporting hidden young carers. *Journal of Youth Studies*, 14(2), 145–160. <https://doi.org/10.1080/13676261.2010.506524>
- Stamatopoulos, V. (2015). Supporting young carers: a qualitative review of young carer services in Canada. *International Journal of Adolescence and Youth*, 21(2), 178–194. <https://doi.org/10.1080/02673843.2015.1061568>
- Szafran, O., Torti, J., Waugh, E., & Duerksen, K. (2016). Former Young Carers Reflect on Their Caregiving Experience. *Canadian Journal of Family and Youth / Le Journal Canadien de Famille et de La Jeunesse*, 8(1), 129–151. <https://doi.org/10.29173/cjfy27145>
- The Princess Royal Trust for Carers. (2006). *Young carers: guidance for schools and education departments*.
- Thomas, N., Stainton, T., Jackson, S., Cheung, W. Y., Doubtfire, S., & Webb, A. (2003). 'Your friends don't understand': Invisibility and unmet need in the lives of 'young carers.' *Child & Family Social Work*, 8(1), 35–46.
- United Nations (UN) Department of Economic and Social Affairs (DESA). (2023). *Department of Economic and Social Affairs Highlights 2022-2023*. United Nations. <https://www.un.org/sites/un2.un.org/files/desa-highlight-report-2022-2023.pdf>
- White, R., & Wyn, J. (2004). *Youth and society: Exploring the social dynamics of youth experience*. Oxford University Press.
- Zartler, U. (2014). Photo interviews with children: Relating the visual and the verbal from a participation perspective. *International Journal of Child, Youth & Family Studies IJCYFS*, 5(4.1), 629–648. <https://doi.org/10.18357/ijcyfs.zartleru.5412014>



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