

Purpose

A carer is a person who is providing, or who has provided unpaid care and support for family members or friends who are living with a disability, mental illness, chronic condition or terminal illness, an alcohol or other drug issue, or who are frail aged.

As the Peak Body for Carers in Tasmania, Carers Tasmania welcomes the opportunity to provide a response to the Tasmanian Child and Youth Wellbeing Outcomes Framework (the Framework).

Carers Tasmania's feedback is focused on the needs of young carers, that is children and young people up to 25 years who are providing care and support. Whilst awareness of the needs of young carers is gradually developing and the momentum to provide support is growing, there is much to do to support this often hidden group of young people.

The Tasmanian Government launched its first Tasmanian Carer Policy in 2013, and it was refreshed in 2016, with an Action Plan for 2016 – 2020, so the development of a 'carer aware culture' within government is still relatively new. Carers Tasmania was not invited to be a part of the development of the indicators in this Framework, or to comment on this draft, despite having Peak Body status whose work is funded by Communities Tasmania and is responsible for the development of this Framework.

To continue to develop this 'carer aware culture', Carers Tasmania is interested to meet with the project team to discuss the needs of young carers and children and young people living in caring families as offered in the paper.

Introduction

Children and young people's wellbeing is shaped not only by their relationships with their family and the wider community, but as illustrated in Bronfenbrenner's Ecological Model of Human Development, also by how well their family is resourced and connected to a community with the strength and the capacity to support them.

The challenge for families caring for a family member or friend with significant needs is they are often isolated by the care they are providing, and are unable to work or study or participate in community life to the extent they otherwise could be. This focus on the person requiring care can have an impact on relationships with friends and family, and is not something within the control of the young person whose wellbeing and future is so important to society.

Carers Tasmania is happy to see reference to the United Nations Convention on the Rights of the Child, in the Framework, particularly the reference to children and young people's right to be heard and treated as active participants in the development of their own wellbeing.

With young carers not routinely identified in our government systems, there is significant work to do before children and young people in caring roles can be heard and treated as active participants in their own wellbeing. Improving this would involve the routine identification of those in caring roles, the offering of support to young carers and their families from a strength based perspective, and the routine inclusion and the consideration of young carers in decisions that affect them across all government departments.

Carers Tasmania has recently commenced the development of a Young Carers Reference Group as part of its Peak Body work, funded by Communities Tasmania. This group provides advice on their

collective needs and how Carers Tasmania can best support them and advocate for their needs. Our work with them and young carers more generally informs this submission.

Background

According to the Australian Bureau of Statistic's Survey of Disability, Ageing and Carers (SDAC) 2015, 272,000 of Australia's carer are young carers, which is around one in ten.¹

The role young carers play is often 'hidden' or under the radar, because families see what they do as part of 'normal' family relationships. There is also a general societal presumption that caring is the domain of adults, and young people in caring roles can therefore be missed. As a result, young carers are often 'beyond the reach of services and supports'.²

Research suggests that significant caring responsibilities, combined with lack of appropriate and responsive support services to meet family needs and a lack of awareness and understanding within the education system understandably and significantly reduce a young carers capacity to fully engage with their learning.³

We know caring as a young person has a significant impact on educational outcomes. The Australian Institute of Family Studies research conducted in 2017 found one in ten 14 or 15 year olds were providing daily care for a household member, with two thirds of them assisting with personal care, mobility and communication. Boys from this group who were spending two or more hours per day caring were the equivalent of 1.9 years behind their classmates in Year 9 NAPLAN Reading, and 15 months behind their peers in Year 9 NAPLAN Numeracy testing. Girls were 1.6 years behind their peers in Year 9 NAPLAN reading, and 15 months behind in Year 9 NAPLAN Numeracy testing.

Alongside these barriers to educational engagement is the impact of caring for a family member on mental health, which is particularly significant if the family member is the parent, and has a mental illness or substance misuse,⁵ is caring for a parent with a physical or intellectual disability⁶ or the young carer is located in a rural area, an area of high unemployment and lives in a lone parent family.⁷

The Tasmanian Carer Policy 2016⁸ acknowledges the needs of young carers as quite different to adult carers, and the significant impact this has on education, training, employment and social development. It acknowledges the Australian Government's commitment to decreasing welfare dependency and increased workforce participation.

¹ ABS (2015) Survey of Disability, Ageing and Carers

² Blaxland, M. and Cass, C. (2011) 'So that's how I found out I was a young carer and that I had actually been a carer most of my life'. Identifying and supporting hidden young carers

³ Moore, T., McARthur, M. Morrow, R (2009) Attendance Acheivement and Participation: Young Carers' Experiences of School in Australia

⁴ Australian Institite of Family Studies (2017) Longitudinal Studey of Australian Children 2016 Annual Statistical Report *Young Carers*

⁵ Pakenham, K., Cox, S. (2014) The Effects of Parental Illness and Other III Family Members on the Adjustment of Children

⁶ Ireland, M., Pakenham, K. (2010) Youth adjustment to parental illness or disability: The role of illness characteristics, caregiving, and attachement

⁷ Hill, T., Thomson, C., and Cass, B. (2011) Young carers: Location, education and employment disadvantage.

⁸ Department of Premier and Cabinet (2016) The Tasmanian Carer Policy 2016

The Policy's accompanying Action Plan 2017 – 2020 identifies the following Actions that relate directly to young carers:

- The Department of Education's Attendance Policy and Process will help schools identify absence due to caring responsibilities
- That Government will work with their frontline services to explore how they can embed awareness of carer needs, and how these differ across diverse groups of carers
- A commitment to work with Carers Tasmania and other key carer support organisations to find ways to ensure carers know about available supports and services
- The development of a Child and Student Wellbeing Strategy
- Building successful re-engagement programs delivered by the Department of Education
- Acknowledging carers as a target group within the Training and Work Pathways program, which aims to expand and sustain learning opportunites and employment options for disadvantaged Tasmanians.

The Australian Government's National Carer Recognition Framework, comprising the Carer Recognition Act 2010 and the National Carer Strategy, states in its set of principles that "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". 10

This background information suggests young carers need and have a right to be routinely considered as a group with specific needs alongside other diverse groups.

This approach of identifying carers as a group with specific needs has occurred for carers who are employees of the Tasmanian Government in the State Service Diversity and Inclusion Framework 2017 – 2020. ¹¹ An early intervention approach for young people interacting with Government services incorporated into the Tasmanian Child and Youth Wellbeing Outcome Framework, that identifies diverse groups with specific needs and includes carers in this group, may ensure their needs receive the attention they require and prevent some of the impact on wellbeing and education.

Indicators used in the Outcomes Framework

Carers Tasmania notes the indicators currently used in the Framework are clinical and not strengths based. This is understandable, given the context of this work being developed under the Strong Families, Safe Kids Redesign of Child Protection Services.

It makes sense there is a need to extend indicators to fit with the definition of wellbeing being used. Carers Tasmania has provided suggestions of possible indicators for consideration under each outcome.

While there is an understanding indicators are beyond the direct control of any single government service, or department, the question becomes, how does government ensure departments remain accountable, and that progress continues to be made?

⁹ Department of Premier and Cabinet (2017) Tasmanian Carer Action Plan 2017 - 2020

¹⁰ Australian Government (2010) Carer Recogntion Act

¹¹ Department of Premier and Cabinet, State Service Management Office (2016) State Service Diversity and **Inclusion Framework**

Carers Tasmania offers the following comments under the following domains:

Wellbeing Domain 1: Being loved and safe

Carers Tasmania agrees positive supportive relationships with family and notably with parents, are one of the most important influences on a young person, and the foundation for positive outcomes for children.

Parents and families generally do the best they can within their capacity to love and care for their children, however the age old saying "It takes a village to raise a child" must be acknowledged.

Providing a stable loving family, when there is disability, chronic or palliative conditions, mental health issues, addiction or ageing related conditions is much more likely if there is adequate support for that person and their wider family.

Part of ensuring children and young people are loved and safe could involve identifying those in caring roles and offering individualised support. For this to occur it is important to reduce stigma and build trust between families and government and other services, so that we can truly work together.

Possible strength based indicators could involve a wellbeing survey which would allow for the collection of the following data:

- The number of children and young people in caring roles
- The number of parents who who identify as having broader family and friends who can support them if needed
- The number of parents, or children and young people who identify as participating regularly in the community
- The number of children and young people who identify as having a positive and trusting relationship with services who can support them.

Wellbeing domain 2: Having material basics

Carers Tasmania agrees material basics such as housing and food are the foundations of supporting day to day life. However, to truly address wellbeing as defined in the Framework, material basics should include whatever is needed to support children and young people to participate in education and the development of their strengths.

Carers Australia supports young carers with their education via a Young Carer Bursary, providing 333 Bursaries of \$3,000 across the country. Last year Carers Australia received over one thousand applications. At the time of providing this report, the Young Carer Bursary is open and it is anticipated applications are already higher than the previous year.

While there are supports other than the Bursary available to young carers, those in contact with young carers first need to have identified them as a young carer, be aware of the existing supports available and have the capacity to support them to access them, including referral, advocacy and follow up as required.

A possible indicator could be the percentage of parents who do not feel able to meet their child's educational needs such as uniform, transport, tutoring, trips, extra curricular activities, technology, and that are aware of and comfortable to access supports to assist in these areas.

Wellbeing Domain 3: Being Healthy

Healthy start to life:

Often by the time young carers, and carers more generally reach Carers Tasmania they have been in a caring role for a significant period of time. And their question to Carers Tasmania is, why hasn't anyone told us about your organisation before?

The critical period of development for children mentioned in the Framework illustrates the need for the early idenfication of extra needs within families and the routine offer of referrals to community supports, including referrals for any young person in a caring role. This could be a rountine checklist for those in touch with families in these early years, and an indicator could be the number of referrals they are completing to service providers and community supports.

An early intervention approach to the provision of all supports for families is crucial, both for the person with the extra needs, and the family members providing informal support.

Mentally emotionally and spiritually health:

As mentioned in the background to this submission there is a very real possibility the caring role will impact on the mental health of a young person.

To ensure they have as much potential to be mentally, emotionally and spiritually healthy young carers require support both in the educational setting, as well as emotional support and the opportunity to participate in activities typical of any young person their age. This ensures they can meet the developmental needs of this stage of their lives. To fully understand and explore their circumstances and their impact, and to find support and inspiration, it is very helpful if young carers also have the opportunity to meet others in similar circumstances. Again, this rellies on the identification of young carers.

Carers Tasmania is concerned the only indicator currently included in the framework is self harm, and given the use of a definition that states wellbeing includes having their mental and emotional health needs met, it may be that more holistic indicators are required.

It could be suggested that a wellbeing survey is implemented through the Department of Education with touchpoints at significant milestones. Further indicators could be:

- Percentage of children and young people who feel happy, safe and included in their school environment
- Percentage of children and young people who report having positive relationships with their peers
- Percentage of students who feel supported and encouraged in their educational setting.

Physical health:

Carers Tasmania is interested in the indicators suggested for Alcohol, Tobacco and Illicit Drug use. Whilst the harms associated with use are well documented, in the development of a separate sense of identity, experimentation with substances is highly likely. It could be that indicators based on harm minimisation principles could be included, which is consistent with current drug related policy in Australia since the National Campaign Against Drug Abuse in 1985. Possible indicators that could include secondary school students' awareness of strategies to keep themselves safe, and awareness of services available to assist them.

Other possible indicators relevant to physical health for young carers and all young people would be the percentage of children and young people having the recommended amount of sleep per night.

Wellbeing Domain 4: Learning

Caregiver support and encouragement is mentioned in the Framework as the biggest contributing factor to learning outcomes. The capacity to support a child in their education may be compromised where there is a family member with disability, a chronic or palliative condition, a mental illness, an alcohol or other drug issue or who is frail aged.

As provided in the background, there is significant evidence regarding the challenges for young carers in remaining engaged with their education, and the impact on their education outcomes.

An early intervention approach would be to routinely identify young carers before identifying poor attendance rates. This could occur as routine part of enrolment.

When non-attendance does occur, students could also be routinely asked f caring responsibilities are a factor alongside other reasons, and the offer of support would then follow.

Indictators used here could be the collection of data around the rationale for missing a day of school, and the support that was provided. Another indicator could be the percentage of parents who feel included and supported in their children's education, given the significance of their role in learning outcomes.

Wellbeing Domain 5: Participation

Engaging with peers/community/participating

Young carers can have reduced capacity to participate and engage with their peers and the community due to their caring responsibilities and the caring responsibilities of others in their family. This may mean having less opportunity to socialise and to develop special interests and skills.

Young carers can feel different to their peers, and along with the opportunity to engage with peers and special interests, it can be beneficial for them to have the opportunity to get together with others in similar situations.

Carers Tasmania provides social opportunites for young carers from time to time, made possible through corporate sponsorship. Carers Tasmania also refers to other organisations who deliver holiday programs for young carers. However, funding for these programs has been reduced, with the rationale that it has been redirected to the National Disability Insurance Scheme.

The Tasmanian Carer Policy mentions that carers should have a say in decisions that affect them. Participation in decisions that affect them is much broader than the suggested indicator of being

enrolled to vote. In the case of young carers the critical step is for them to be identified as carers when the person they care for is interacting with services, and that they are considered and included (as appropriate).

Whenever government is consulting, it could consider young carers as a particular group who needs to be heard, and contact Carers Tasmania as the Peak Body who represent them. It is likely that many policies with the Departments of Communities Tasmania, Health and Human Services and Education do affect carers, and it could be recommended that consultations are routinely performed by departments who have actions under the Tasmanian Carers Action Plan using Carers Tasmania as a conduit.

Conclusion

Carers Tasmania is very interested and available to work with Communities Tasmania in the space of Child and Youth Wellbeing. There is still significant work to do in bringing young carers out from 'under the radar', where their needs are understood and their needs are given the importance they deserve through routine identification, and the offer and provision of support. Consideration of specific needs groups, including young carers may assist to address more issues in the Tasmanian Child and Youth Wellbeing Outcomes Framework.