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# 'It's good because my sister is young, and she knows what's going on': Children's views about their young kinship carers

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**Abstract**

Much literature about kinship care has focused on the issues facing grandparent carers. An Australian research project explored the experience and support needs of young kinship carers and children in their care through analysis of census data and in-depth interviews with young kinship carers and children/young people. This article describes the views of 16 young people. These young people expressed satisfaction with their home life and spoke of improvement over time in their wellbeing, mental health, and schooling. While they appreciated their carers' attunement to the world of young people, they articulated many challenges for themselves and their carers, including the burden on their carers, the challenge of adjusting to their carers' parental role, and financial pressures. They wanted greater access to counselling and casework services in order to deal with the impacts of family trauma.

**KEYWORDS**

child poverty, child welfare (in Australia), family policy, kinship care, research with children, young people (wellbeing of in care)

## 1 | INTRODUCTION

Kinship care is defined as 'family-based care within the child's extended family or with close friends of the family known to the child, whether formal or informal in nature' (United Nations, 2010, p. 6). Most kinship care is provided under arrangements made informally within families (Kiraly et al., 2021; Selwyn & Nandy, 2014). Grandparent care has been identified as more stable than care by other relatives and friends (Farmer & Moyers, 2008; Hunt et al., 2010); however, grandparents carry a significant burden of care, with issues of health and fatigue often mentioned in the literature (Boetto, 2010; Cuddeback, 2004). A focus on grandparent carers has tended to overshadow the existence of other relative and friends carers, who in fact constitute significant cohorts. In the UK, Selwyn and Nandy (2012) used 2001 census data to identify 44% of kinship carers as grandparents, and an unexpectedly large group of older siblings carers (38%). Given this finding, the demographic characteristics of sibling carers were explored specifically. This group was found to be predominantly young, single, poor and as having limited education. These researchers enjoined researchers in other countries to explore

the prevalence of kinship care by siblings, and to investigate their circumstances. Wijedasa (2015) replicated the Selwyn and Nandy (2012) study using 2011 census data. She estimated that in England, carers designated as 'relation-other' (aunts, uncles, cousins and other close relatives) constituted 27% of the total, and as such were the second largest group after grandparents (51%). At 23%, siblings still comprised a significant group.

A literature search did not reveal any studies that focused on the experience of children being raised by sibling carers, or by young kinship carers more generally. However, the experience of children in informal kinship care was explored through 80 interviews with children/young people aged 8–18 (Farmer et al., 2013). Most of these young people were well attached to their carers. Those with very limited networks were mostly living with older carers. A substantial minority worried about their carers' health and their own future if their carers died. A second British survey of 53 young people aged 16–26 with experience of growing up in kinship care also found that most of the young people had felt secure in the care of their relatives, and had contact with a wide range of people in their extended family (Wellard et al., 2017). Most reported a good relationship with their

carers, and most of those over 18 had lived continuously with their carer until independence. Outcomes on a range of measures were generally better than for children in (non-kinship) foster care as a whole including educational progress, and most young people had gone on to post-secondary education. Two areas of their lives that caused distress for these young people were separation from siblings, and their relationships with their parents. Over one-third had lost a parent, often due to substance abuse. Among their wishes, more money featured prominently.

Earlier studies of young people's views of kinship care conducted in the US (Messing, 2006), the UK (Burgess et al., 2010; Farmer et al., 2013) and Australia (Downie et al., 2010) also presented generally positive pictures, while each noted vulnerabilities such as financial stress and concern by those in the care of older relatives about their carers' health and possible death.

In reviewing studies of children's views about kinship care in relation to parental and other family contact, Kiraly and Humphreys (2013) noted a strong theme to be the importance of children's contact with their siblings and wider family, including cousins, aunts, and uncles, contrasting with the children's very mixed experiences of contact with their mothers and fathers.

The current three-part study was inspired by Selwyn and Nandy's challenge to explore the prevalence and circumstances of sibling kinship care in countries other than the UK. For technical reasons explained elsewhere (Kiraly et al., 2021), our focus moved away from siblings specifically, to embrace all young kinship carers, a group comprised largely of older siblings and young aunts and uncles. In addition, we included a focus on the experience of children/young people. The aim of the study as a whole was to identify the prevalence, circumstances, experience, and support needs of young kinship carers and children in their care. Part 1 involved exploration of the prevalence and circumstances of households where kinship care was taking place using 2011 Australian census data, with a specific focus on identifying households headed by young kinship carers. We found one-fifth (20%) of all kinship care households had carers aged 30 years or less (Kiraly et al., 2021). In Part 2, interviews were conducted with both young kinship carers (see Kiraly et al., 2020), and with young people with an experience of such care, as described in the present article. Part 3 comprises action research activities including codesigned advocacy and support for young kinship carer families, media interviews and conference presentations with young kinship carers, and is ongoing as of 2021.

## 2 | TERMINOLOGY

In this article the term *young person* is reserved for those in the care of young kinship carers and includes children; the terms *children* and *young people* are sometimes used interchangeably. *Formal* or *statutory* care refers to care ordered by the child protection authority of an Australian State or Territory (United Nations, 2010, p.6). The term *young carers* is here used to refer exclusively to young kinship carers.

## 3 | METHODS

The aim of this component of the study was to explore the lived experience of young people raised by young kinship carers (carers aged 18–30 years) including their circumstances, wellbeing and challenges. Interviews were conducted with 16 young people (15 female and 1 male) with experience of such care. Only young people in informal care were included as we did not have permission to interview young people in statutory care. The study was approved by the University of Melbourne Human Research Ethics committee (ID:1341257). Most of the young people were recruited through carers who had also participated in the study. Three young people in their twenties who had earlier lived with a young carer were recruited through the CREATE Foundation,<sup>i</sup> and another through a radio programme about the project.

Young people in kinship care are obviously a vulnerable population, and the research process was designed with this in mind. Both researchers had practice experience in child and family services and took care to ensure the young people's comfort in participation. They were provided with young person-friendly information sheets and asked to sign straightforward consent forms; for the legal minors, caregivers also gave signed consent. The research process was briefly described before each interview and the option to withdraw reiterated. At times the researchers elected not to follow up comments about sensitive matters. There were no reports of undue distress subsequently, and no requests for the available debriefing. Participants were given a \$50 gift voucher, and were later sent the project report. Most young people visibly enjoyed their participation.

Fourteen interviews were conducted face-to-face and two by telephone with young people in the Australian States of Victoria and Queensland. Interviews were semi-structured. Open questions were asked to give free rein to the young person's voice in describing their experiences. Some questions were asked about support received and not available, and young people's advice for policy and programme development was solicited. Interviews were recorded and transcribed.

As this topic is unexplored territory, a thematic analysis was undertaken using a grounded theory approach (Stern & Porr, 2011; Thomas & Harden, 2008), allowing both anticipated and unanticipated themes to emerge from the interview data. The NVivo software package (QSR International, 2010) was used to code material to nodes developed to reflect the research aim. Codes were developed as a team, and coding was undertaken by both researchers until there was satisfaction about consistency of interpretation of data. To enhance understanding of context, codes were attached to lengthy paragraphs rather than to specific words or phrases (Miles & Huberman, 1994). Related codes were grouped into categories, which suggested a number of overarching themes that appeared to explain much of the data. Multiple quotes are presented in this paper in order to privilege the voices of the participants. For confidentiality, names and potentially identifying details have been changed.

## 4 | LIMITATIONS OF THE STUDY

Participation in research is understood to favour those whose lives are more settled (Hunt et al., 2010; Messing, 2006). It is assumed that this bias pertained to the young people in this study; nevertheless, all the young people interviewed had experienced considerable trauma in their lives and were able to articulate the impact of these experiences. It is also possible that in any study of children using self-report data, some children may feel the need to overstate the positive aspects of their current living arrangements (Downie et al., 2010), perhaps through loyalty or fear of their comments being fed back to their carers despite assurances of confidentiality.

It is rarely possible to achieve a truly representative sample in small qualitative studies. This sample included one young person born overseas, one child of an immigrant, and one Aboriginal young person, likely under-representing these cohorts. As seen, the sample was definitely biased towards young women despite specific efforts to recruit young men; this reflects a common bias in social research of this nature that appears difficult to overcome. Also, by being limited to two eastern Australian States, findings do not reflect the experience of kinship care families in more remote areas of Australia, both Indigenous and non-Indigenous.

As mentioned above, none of the young people were on statutory orders at the time of interview. However, half (8) had been in such care in the past, and child protection had been involved with four others without authorizing the kinship care arrangement as statutory (in two such cases this decision was later reversed). The fact that we were unable to interview children in statutory care may constitute less of a limitation than would first appear. Most children in kinship care are not involved with the statutory care system (Kiralý et al., 2021; Selwyn & Nandy, 2012). With half the participants having been in statutory care in the past, the experiences of such children are arguably at least adequately represented.

## 5 | THE YOUNG PEOPLE

The 16 young people were living in Victoria and Queensland: 14 in metropolitan areas and two in regional towns. Reasons for care were mostly parental incapacity associated with drug misuse and/or mental health issues. In one case the young person moved to her sister's care due to bereavement of both parents.

Nine young people were aged 13–17 years, three were 18–20 and three were 21–26, with one outlier aged 9 years. Those under 21 were still living with their young carers except for one 18-year-old. One 23 year old was also a kinship carer for her partner's sister. Ten began living with their young carer between the ages of 13 and 15, and six between 3 and 11. Considering only years of care below the age of 18, eight had been with a young carer for less than 2 years, six for 3–4 years, and two for longer periods (5 and 10 years). All those still in kinship care were expecting to be there long-term.

The young people's primary carers were all women; ten had live-in partners. Nine of the carers were 22 years or less at the

commencement of care. Seven young people were living with older siblings, six with aunts/uncles, two with cousins, and one with a family friend.

## 6 | FINDINGS: THE EXPERIENCE OF CARE IN A YOUNG KIN FAMILY

### 6.1 | Young people's relationships with their carers

#### 6.1.1 | Quality and stability of care arrangements

There were many comments about young people feeling secure in their relationship with their carer, and about feeling nurtured following experiences of neglect or abuse with their parents. Young people described opportunities to do things previously not possible including recreational activities, holidays, and simply having fun together. Several mentioned helping their carers with housework and looking after younger children.

Stability, knowing that you don't have to go anywhere else. That we can stay here. (Alyssa, 18)

<What are the best things about living with your aunt?>  
Everything. It's a lot better than any other house I've been to. There's love in this house. And animal love. And there's food. (Danika, 14)

The relatively small age difference was seen by many as a source of mutual understanding. Carers were also sometimes seen as more easygoing than parents.

It is good, because my sister's young and she knows what's sort of going on. (Pippa, 13)

The similarity in age definitely helps ... compared to a lot of my friends, I can talk to Nicki about a lot more things than they could with their parents. (Bella, 17)

Lisa just doesn't have as many rules as my parents did. She's pretty chilled out in what I do ... She still wants me to do well at school and in life and stuff, but she's not strict as my parents were, she's a lot more laid back. (Opal, 16)

#### 6.1.2 | Competing needs

While almost all of the young people were positive about their care overall, a number of areas were mentioned where their needs differed from those of their young carers. Many were conscious of the challenges they presented for their young carers, and grateful for their carers' commitment to them.

I'm 21 next year and I would not take on the child that was me. No hope in hell. (Kayla, 20)

I guess at the start it was difficult for Mandy (sister). She didn't really know what to do. She was in a situation, it was just a bit odd. (Pippa, 13)

They still have their young lives to live and they deserve to live it. I almost feel bad that I'm here, because I want to be like, 'Ah, go out'. But at the same time, they don't want to leave me and Kit home alone. (Daisy, 15)

Role conflict was mentioned by several young people, especially when young carers tried to exert control over them. This tended to settle with time.

It's difficult coming to terms with the fact that even though she's my sister, she is my Mum figure now. That's what I had trouble with a lot. All the time I just wanted my sister there, but she'd just be this Mum figure. But we go out and we do our sister days. For my birthday she actually got us tickets to the Gold Coast, for a sister weekend. (Kiera, 16)

I feel like it's harder because they're still growing up with you. That's the main problem me and Nina had, that it was hard to establish if she was more my parent or my friend. So it's like; 'Do I tell her this? Will I get in trouble?' (Penny, 18)

Conflicting needs were an issue for Victor (18) and his sister who was parenting young children. Both were recent immigrants struggling to establish themselves in a new community. Victor felt that his sister lacked understanding of his difficulties while awaiting surgery to deal with a painful leg injury.

My sister is saying to me, Victor now you can stand by yourself and do things ... Actually she is also busy now ... So that's why it's really hard for me now.

Penny had been in the care of her cousin Russell and his partner Nina for ten years prior moving to live with her grandmother following conflict with them. However relationships subsequently improved, and following the research interviews, Penny and Nina participated together in a publicity event about kinship care.

Russell and Nina always wanted me to do everything they didn't do. Nina didn't finish school, and Russell didn't either. So they really pushed me to do school, and I'm just not really that academic and I wasn't really interested in school. I kind of just wanted to go to TAFE<sup>ii</sup> to do my nursing. (Penny, 18)

### 6.1.3 | Relationship with carers' partners

In some cases, young people had to work out a relationship with their carer's partner as well as their carer. Nearly all comments were positive.

He's great. He helps me with my homework. He's very nice, yeah. He's been there since — he's been dating my sister for a very long time, since I was born. (Pippa, 13)

Another young woman with a history of trauma was able to address her anxieties about men through gradually connecting with her sister's partner.

I had a bit of trouble with being around adult male figures, because of my past. It was good the way Nicki introduced me to Jack. She would try to reassure me that everything is fine with him and tell me what ... his actions mean, I guess. So that really helped me gradually get used to having an adult male in my life again ... [Also] Jack's father was quite kind and caring, and not like my father. So he's sort of now the fatherly figure in my life. (Bella, 17)

The eldest of three sisters living with their aunt acknowledged some difficulty in this regard more so than the younger girls.

[Sister 2]: At first we were a little bit - we were like family, but we weren't very tight. Now we're like family. Blood.

[Eldest sister]: See, me and Wade are still a bit far [apart], but I think it's because I was bad when I was their age. We never really got that connection, so it's more just like we're family but we're not that close. That's okay.

[Sister 3]: He's like a father-figure at the moment, because Dad's not here. I see them as family, like parent-figures, but at the same time they're like my auntie and uncle.

### 6.1.4 | Financial stress

Finances were frequently mentioned as a source of stress for the young kinship families. Many young people were very aware of the costs of day-to-day living, and the fact that they constituted a financial burden for their carers. Several young people considered that financial support was the most important support needed.

I feel like a lot of [tension between the carers] was financial struggles - two more kids and things like that. (Penny, 18)

Well definitely [we needed] a lot more support because it was just Kelly and her boyfriend, and he

was obviously not even related to us [yet] he still decided to help out Kelly. We just needed more people, and more support. Kelly was only 20-something, and she's not rich or anything obviously. There wasn't much money. She was working full-time, and she had to quit her job just to support us ... and then she looked for another job that was part-time. And there was just no-one to help. (Daisy, 15)

## 6.2 | Relationships with other family members

### 6.2.1 | Mothers and fathers

There were many difficulties in the young people's relationships with their parents. Almost all the young people had experienced trauma in the care of their parents, usually associated with parental substance abuse and/or mental illness. A small number had experienced the incarceration of a parent. Many found their experiences very difficult to resolve. Many young people had limited or no contact with one or both parents, and ongoing relationships were frequently troubled. For two young people, grief impacted on settling into alternative care.

I was just having suicidal thoughts and stuff. I was just really upset because I didn't think this stuff would go on for so long, and then I was thinking Mum is never going to get better. (Alyssa, 17)

My Dad's a bit fruit loopy kind of thing. It's all the drugs and stuff ... It was just constantly back and forth – like every weekend at our Dad's. I never really wanted to go ... I think I was 12 or 13 when we finally could say 'I don't want to go there anymore – I want to go when I want to'. It made things easier ... I see him probably twice a year now. (Penny, 18)

It was very hard, and it still is hard ... My Mum was my everything. I went to her for everything ... [When Dad died] I was a lot younger ... But I think I got over that, well I didn't get over it obviously because I miss him. But I was more like ... 'Okay, I have Mum. It's okay'. Then when she passed away I just ... (Pippa, 13)

### 6.2.2 | Siblings and the wider family

A particular benefit of kinship care for many young people was the continuation of their connections to sisters and brothers, both living together and apart. A small number commented on the support they gained though sharing their traumatic experiences with siblings (whether their carer or another young person).

Me and Pia are always going to be close. Everything that we've been [through] – the bond that we have is definitely unbreakable. (Penny, 18)

Well it's good that all my siblings are together ... instead of us to going to separate houses ... [Little sister] sometimes comes and sleeps over. My Grandma brings her over. (Alyssa, 17)

Reflecting a key benefit of kinship care, most young people were also in contact with other family members such as aunts and uncles, cousins and grandparents.

Christmas at Nina's – Nina [cousin and former carer] is definitely the glue of our family. Her and my auntie keep it all together. If it wasn't for them two, I reckon we'd all just be off on our own kind of. (Penny, 18)

## 6.3 | Wellbeing and personal development

### 6.3.1 | Mental health

Several young people reflected on their moods and wilfulness as adolescents, and the challenges they presented for their carers and others. Several young people had had serious mental health issues when they first came to live with their young carer, and three spoke about being hospitalized due to mental illness. These three were all progressing well at the time of interview, two with ongoing psychotherapy. For many young people, stability in the relationship with their carer appeared to be crucial to turning emotional and behavioural problems around.

It was hard, because Mum would teach me to just pretty much act like a psycho towards people, and if I didn't get what I wanted, to just scream and swear. So I pretty much had to learn to be normal again ... In Year 7, I was always known as the psycho chick ... Sometimes when I'm really struggling to deal with something, it just comes back, and I've got to try and push it down. (Kiera, 16)

I'm the type of person that if I don't want to do it [school] I'm not going to put my mind to it, and I don't do anything for anyone. I do it for myself. That's just who I am. (Penny, 18)

One young person felt that her 21-year-old aunt had had to learn how to respond helpfully when she was acutely ill.

I had a lot of mental illness myself, and I was just wild ... I was still very upset that I didn't have parents around ... I was alone, so although I had Leah there, it

wasn't my parents, so I was very depressed about that for a lot of years. I would cry all the time. Every Father's Day, Mother's Day ... I actually ended up in psych wards a few times, so it wasn't a very good mindset ... I had a lot of trauma. It was hard to look after me ... Leah wasn't very understanding with it ... She'd be like 'Oh, you're just going through a phase', and I'm like, 'I want to die' ... But I think since [caring for] me, she knows how to deal with it a lot more now. (Kayla, 20)

### 6.3.2 | Schooling

Many young people's schooling had been disrupted. A small number mentioned taunting or bullying at school; one young family had moved interstate to escape particularly cruel taunts. Stella (17) described her unsettled life prior to moving in with her brother and sister-in-law.

It was just a share home [we lived in] because my Mum couldn't like really afford – so we kept on moving. Moving schools and stuff, that was really confusing. That's why I'm in Year 10 because I had to go back [a] year again.

Most young people had progressed at school since moving in with their carer. Most saw their carers as keen to see them succeed, and active in facilitating this. All the young people had aspirations to complete their education.

It's getting easier and easier as the years pass, I've obviously told some people my situation and they're very supportive and understand ... School's good ... [Before] I went to maybe five different primary schools. It's nice to have been at the same school for all my high school years ... I have a group of friends that I love so much ... I am hoping to maybe possibly go to university and do whatever study I want there. (Daisy, 15)

A number of young people mentioned the need for additional help with their schoolwork given their history. Alyssa had become seriously depressed during difficult times in her family, with consequential schooling impact. Following moving to her carer and mental health treatment, she was returning to studies with support.

I got kicked out [of school] because my attendance was bad ... [Now] I go once a week and work with this lady and she helps me get my Certificate of General Adult Education ... so they help people who aren't in school get an education ... I met [her] on my first day and ... she said, 'You need to know it's going to help you with TAFE<sup>ii</sup> ... this is how we're going to do it.' (Alyssa, 18)

### 6.3.3 | Extracurricular activities

Outside of school, young people enjoyed a wide range of interests and activities, including gymnastics, drawing, netball and contemporary dance. Enjoyment of music-making was mentioned by several, including two young women who had been hospitalized due to mental illness.

I used to play in the school orchestra. I play violin, piano and clarinet, but currently just mainly focusing on violin. We just had a concert a couple of days ago. (Bella, 17)

In school I am a good student. In sport I participate but I mainly go there because I get to put my music on on Thursdays, which is fabulous, and the teacher enjoys my tunes. Then when I'm at home I enjoy my reading, listening to music, looking after my lizard. (Danika, 14)

I got my Driving Learner's [Permit] yesterday. (Kiera, 16)

## 6.4 | Support and assistance

### 6.4.1 | Counselling and casework

A number of the young people had had access to casework and counselling that had helped them address past trauma and ongoing difficulties. They really appreciated an understanding approach. Counselling was however not always available when needed. Mental health support was frequently mentioned as beneficial, although a perceived drawback for a small number was the feeling of being identified as different from their peers.

We had one worker for three years. We had a lady called Helen and she was honestly the best ... We got another worker ... and we loved her as well ... They came to my house, and stuff like that, and spoke to us. Helen always used to take me and Pia out for lunch. They helped Nina when we had school camps, clothing [and] when we started high school ... The financial support was nice, but I feel like the understanding was more better for me particularly. (Penny, 18)

The wellbeing coordinator and the chaplain, they would always be there for me if I needed someone to talk to. [The therapist] was really good to talk to. She would always listen, and if she didn't understand something, she'd go back and really ask me about it. I'm going to be starting animal therapy soon. (Kiera, 16)

A few months ago, I wish I had spoken to someone outside of school. Outside of my family I guess, just to get things straight. Like, 'I am normal', and 'This situation, it happens', and yeah, 'I'm going to be sad, but I'm not going to be sad forever'. (Pippa, 13)

However many young people felt that they and their carers had needed more support. Some spoke of the need for those in authority to have a better understanding of their circumstances, and some wanted casework to help with their family relationships.

You're going to need a lot of extra attention. I feel like for [my little sister], she feels very abandoned. So they would need that extra attention and reassurance that they're not going to go somewhere else, or [carers] won't leave them ... Yeah, [a worker] that actually cares and isn't just like 'doing their job' too much ... (Alyssa, 17)

Unfortunately, few positive comments were made about casework provided by child protection. It would appear that the pressure of workloads, bureaucratic requirements, the demands of the job and associated staff turnover presented barriers for child protection staff to provide the support that young people needed.

We had a lot of workers. We burned through a lot ... [it] was just ridiculous. They just drained my life – because of my Dad, he has such a violent temper. I think at one point we went through four workers in six months. (Penny, 18)

#### 6.4.2 | Advice for policy and practice improvements

Young people frequently articulated the need for greater awareness of their existence and circumstances, and for assistance tailored to their specific situations. Financial support also featured prominently in their advice.

Definitely financial [support is needed]. Unless someone in that position has a lot of money, then they're definitely going to need financial support, because ... even just one kid is dead expensive. To put them through school when you didn't even plan on having a child ... and then you have to pay for them to be alive, food, water, beds, light. Definitely the most important. (Kayla, 20)

I think they need to understand that sometimes people don't have grandparents ... trying to understand that it's not always going to be grandparents. There's other people that are willing to and able to look after the young one, like a brother or a sister. (Pippa, 13)

Probably the fact that the age gap isn't that big, but they still have to figure out the roles between themselves ... She's had to learn how to do it all. (Kiera, 16)

I think there just needs to be more awareness ... I don't think people realise how difficult it is to be a young carer ... how young carers have to struggle with so many things on top of just caring for the person as well ... I didn't think society knew about the young carers, because we don't get mentioned at all. Yeah, mostly we hear about the grandparents taking care of younger children, but we never hear about younger carers. (Bella, 17)

## 7 | DISCUSSION

'If the blind lead the blind, both shall fall into the ditch'.<sup>iii</sup> Some professional support staff have been known to view kinship care by young adults in this way, especially where carers share the same troubled family background as their young charges. Young adults undoubtedly lack life experience, and frequently lack experience in the care of children. These 16 young people however presented an optimistic picture of the care they were receiving from their young relatives. Similarly to other studies of young people in kinship care cited, these young people were generally positive about their relationships with their carers, and grateful for their carers' commitment to them. They appreciated the connections with their siblings and other relatives afforded by their circumstances, connections reported as of particular concern to young people (Kiralý & Humphreys, 2013; Wellard et al., 2017). Many saw their carers' youth as an asset in their attunement to the cultural world of young people. They were achieving their developmental goals and recovering from the impact of significant trauma, including for some, from outright mental illness. As found in the previous studies, these young people were progressing well academically, and developing aspirations for the future. Overall, they presented a picture of their carers as clear-sighted rather than 'blind', and as determined to lead them safely to a better future.

The story was not without its downsides however. The young people were well aware of the burden of care they constituted for their young carers. Young people had had to make significant adjustments to the changed family roles, especially when their carers exercised parental authority over them; and as seen in other studies of young people in kinship care, many had difficulty managing relationships with their parents. Some were still struggling with the impact of trauma on their personal development and on their progress at school, and as Farmer et al. (2013) also found, a minority had experienced bullying or taunting as a result of their circumstances. While some young people had received counselling and casework, they saw a need for greater access to both counselling and for more casework assistance with their difficult family relationships. As also seen in earlier studies, young people were acutely aware of their carers' limited

incomes and the high costs of their own care, and identified financial assistance as their most important unmet need.

The young people's views support indications from the interviews with young carers, that despite youth and disadvantage some young adults are well able to provide warm, stable care for their child relatives when they elect to do so (Kiralý et al., 2020). The concern for carers' health seen in the surveys of young people's views cited earlier was, unsurprisingly, absent here. The obvious advantages of youthful health and energy thus contrast with the health and long-term capacity issues of older carers that were reported as a worry for other young people in kinship care in the studies cited earlier. However, like older carers, the young kinship carers experience negative impacts related to their particular stage of life, key issues here being interruptions to employment and study towards qualifications that might set them up for adult life (Kiralý et al., 2020; Selwyn & Nandy, 2012).

We note that while almost all these young people's care arrangements appeared to be stable at the time of interview, breakdowns in relationships between young people and young kinship carers were likely to be under-represented by virtue of the young people's self-selection, and several of the carers interviewed in Part 2 of this research study had indeed experienced breakdowns in the care of a child. Like the young people, many young carers stressed their need for greater access to casework, counselling and above all, financial assistance (see Kiralý et al., 2020). There are thus some situations where both carers and young people may feel they have 'fallen into a ditch', especially when they are unable to access needed help. Like the young people, the carers also expressed the desire for greater awareness of their existence, circumstances and needs.

## 8 | CONCLUSIONS

This study constitutes the first time attention has been directed towards children being looked after by young kinship carers specifically, identifying their particular issues. Young kinship families such as siblings, aunts and uncles have now been identified as significant, but hidden, minorities in both the UK and Australia. Further research is now needed to explore this group of young kinship families elsewhere in the world, and to hear from both young people and carers about their circumstances and the support they need in order to thrive.

Of particular concern is that the identification of financial difficulties as a predominant issue by both young people and their carers once again echoes the findings of multiple surveys of kinship carers of all ages and relationships in Australia, the UK and elsewhere (Kiralý, 2015). This is a serious issue for these most vulnerable children and families. The need for improved assistance is long overdue.

More broadly, this study once again demonstrates what is increasingly evident from the kinship care literature, that under the right circumstances kinship care provides a better alternative than traditional out of home care: care firmly embedded in familiar, ongoing relationships involving warmth, security and commitment to children's interests (Gilligan, 2006; Winokur et al., 2018). Hopefully greater

awareness of the existence of young kinship families will improve the chances of establishing better support for them, whether the children are among the minority in statutory out-of-home care, or the vast majority in so-called 'informal care'. Civil societies need to recognize the contribution of young kinship carers and the need for financial and practical support for all children in alternative family and community care, not just those in statutory foster or kinship care. The next challenge is to ensure that the benefits for children can be maximized and do not accrue at undue cost to their carers.

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### CONFLICT OF INTEREST

No identified conflict of interest.

### ETHICS STATEMENT

Approval was obtained from the University of Melbourne Human Research Ethics Committee, Ethics ID: 1341257.

### DATA AVAILABILITY STATEMENT

Research data are not shared.

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### ENDNOTES

- <sup>i</sup> CREATE Foundation: the Australian consumer body representing the voices of children with an out-of-home care experience.
- <sup>ii</sup> TAFE: an acronym for Technical and Further Education, a stream of post-secondary education.
- <sup>iii</sup> A saying common in ancient texts, reported in this form in The Bible, Matthew 15:14.

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