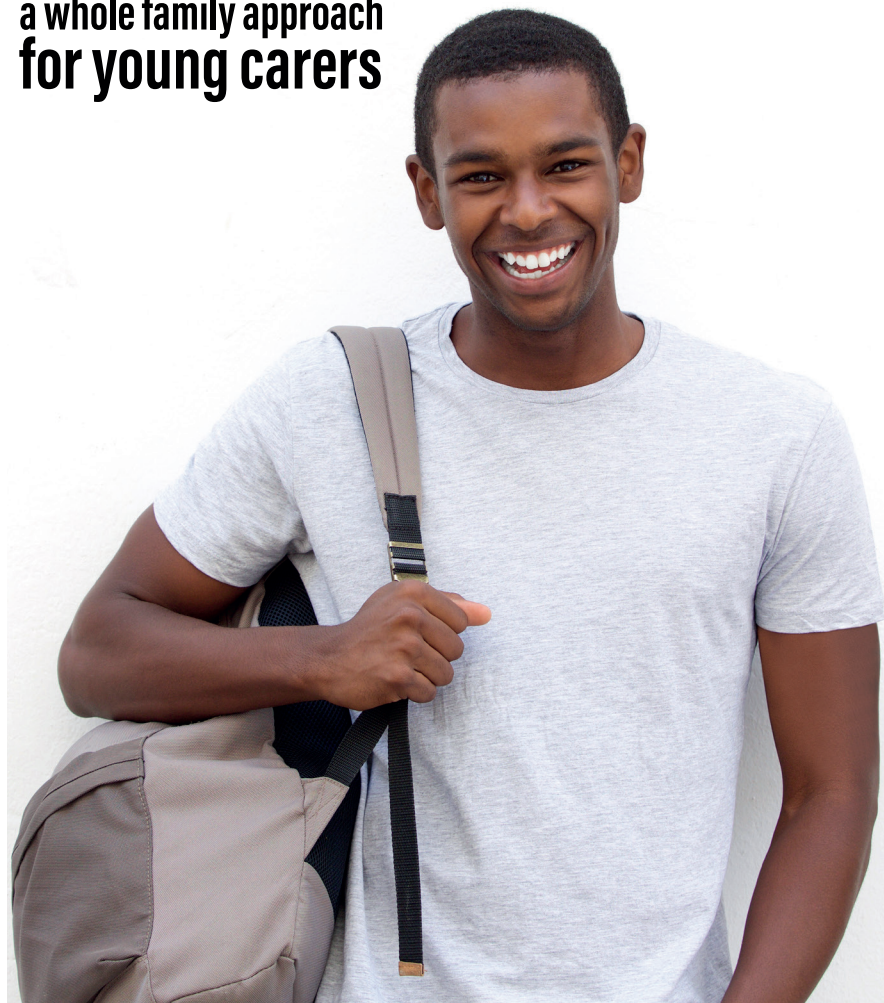




# TOGETHER

a whole family approach  
for young carers



# TOGETHER WE ARE STRONGER!

TRAINING SEMINAR FOR YOUNG CARERS AND FAMILY MEMBERS

GUIDE FOR WORKSHOP IMPLEMENTATION



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# **TOGETHER WE ARE STRONGER!**

## **TRAINING SEMINAR FOR YOUNG CARERS AND FAMILY MEMBERS**

### **GUIDE FOR WORKSHOP IMPLEMENTATION**

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# TABLE OF CONTENTS

<b>Introduction</b>	<b>4</b>
<b>Methodology</b>	<b>4</b>
<b>Workshop concept</b>	<b>5</b>
<b>Workshop programme and implementation</b>	<b>6</b>
<b>Summary of the pilot phase and conclusions</b>	<b>14</b>
<b>ANNEX 1 - Workshop materials</b>	<b>16</b>
<b>ANNEX 2 - Pre/Post Questionnaires</b>	<b>26</b>
<b>ANNEX 3 - Adaptations and pilot implementation in Italy</b>	<b>28</b>
<b>ANNEX 4 - Adaptations and pilot implementation in Scotland</b>	<b>31</b>
<b>ANNEX 5 - Adaptations and pilot implementation in Greece</b>	<b>34</b>
<b>ANNEX 6 - Adaptations and pilot implementation in Germany</b>	<b>38</b>

# INTRODUCTION

The second phase of the Together project aims to create and implement a series of workshops to encourage positive communication and support between young carers and family members. These workshops provide interactive activities and games to encourage reflection and facilitate open dialogue about the caring relationship within families. After an overarching model was developed, partners made small changes to ensure the workshops could be adapted to individual national contexts and facilitate the participation of target groups.

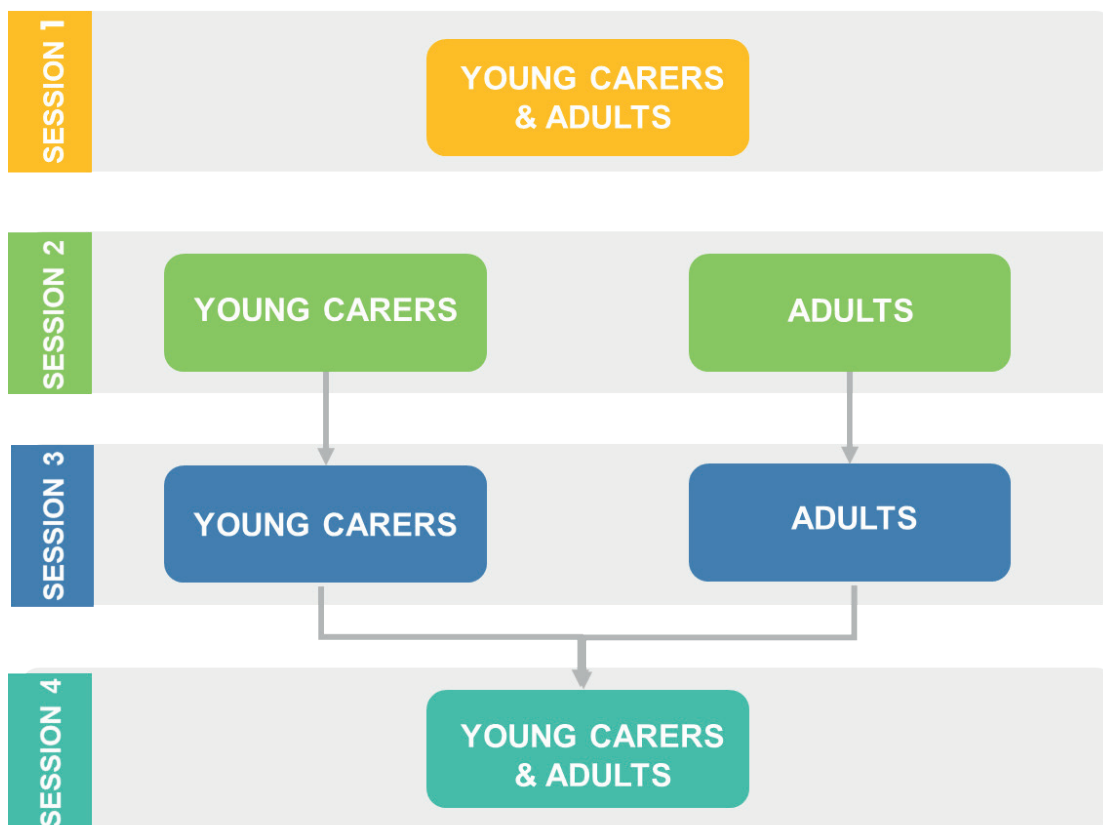
Each partner then piloted these workshops with young carers and their families, gathering feedback on the activities and impact. Following this pilot, the workshops were amended to ensure they would be well received by each target group. This guide accompanies the workshops and will be disseminated in all partner countries to practitioners working across a range of sectors, including youth work, care and family support. The aim of this guide is to support practitioners in delivering the workshops.

# METHODOLOGY

The Together workshop is designed to involve at least 10 participants (5 young carers aged 13-25 and 5 family members).

All family members, including the cared for person, can be invited to participate in the workshop. However, the participation of all family members is not mandatory and it is important to consider that not all carers may want to participate in the workshop. The workshop is addressed to all young carers and their families regardless of the caring situation. It is designed to facilitate open dialogue around the caring relationship, the impact this may be having on the young carer and how the whole family can support one another.

The workshops are divided into four weekly sessions, for a total of six meetings, of about 90 minutes each. In the first and last session young carers and their families are together, while in the remaining two sessions they are separated into two different groups:



The number of workshops and the duration of each activity can be changed and adapted. All sessions keep the same structure: icebreakers, core activities and final activities. When participants are separated into groups, they engage in the same activities and then feed back to the whole group. It would be ideal for the workshop to be held in person but, due to the Covid-19 pandemic, the proposed activities can also be delivered online.

The workshops were led by two experienced facilitators who regularly work with young carers and their families. Facilitators can be educators, social workers, youth workers and/or psychologists. It is possible, but not mandatory, to involve a third facilitator who can help to deal with difficult situations, for example if a participant shows discomfort and needs to speak to a facilitator individually.

As the content within these sessions covers emotional and intimate topics, all the activities proposed are interactive and engaging, such as exercises and games. When developing these sessions, partners considered existing tools for youth and adult education, awareness-raising measures from different care contexts and family communication models. This ensured we could build on good practice models, including the existing knowledge and experience of the project partners.

In order to monitor the impact, a questionnaire (see Annex 2) was also submitted before and after each workshop to participants. To check the effectiveness of the workshop in relation to its objectives, the pre-evaluation questionnaire must be submitted at the beginning of Session 1, before the start of the activities. The post evaluation questionnaire must be submitted at the end of Session 1 once all activities are finished.

## WORKSHOP CONCEPT

The overarching model that was developed aimed to encourage positive communication and mutual support between young carers and family members. Each partner then made small modifications to adapt the workshop to the context and situation of their country, trying to enhance what were the most salient parts to be addressed with young carers and their families.

The workshop was designed to be divided into four sessions, each with certain topics, objectives and practical activities. The four sessions dealt with different but consequential topics, as follows:

**SESSION 1 “Our needs”:** This session aims to provide an overview of the topic of young carers. Introductory activities aim to support participants and raise their awareness of their own needs and those of family members, as well as the emotions attached to this.

**SESSION 2 “Our emotions”:** The second session aims to increase self-awareness, supporting participants to become aware of their emotions related to caring activities, and try to give voice to their emotions by sharing them with the group.

**SESSION 3 “Our communication”:** This session aims for participants to become aware of and reflect on one’s own communication style as well as that of the family, to be able to communicate one’s feelings and thoughts and to practice active listening. At the end of this session, the question box activity gives participants the chance to share questions to young carers/family members.

**SESSION 4 “Out path together”:** This concluding session aims to recapitulate what emerged during the course as well as to share with each other what emerged in the sessions in which the two target groups were separated, by finding possible similarities and differences. The specific aims of this session are to become aware of the emotions and thoughts of others in relation to caring, to facilitate communication between family members and to provide a safe space to talk about caring activities (and related emotions) within the family.

Based on the consequential nature of the topics, each session includes an introductory activity to recap on where the previous session left off and a concluding activity at the end in which facilitators recall what was done during the session and what emerged. Below the full programme with details of each session and advice on implementing these, both online and in person, is presented. To read the workshop structures and adaptations implemented in each partner country as well as the results and feedback by the participants involved in the pilot phase, see the Annexes 3, 4, 5 and 6.

# WORKSHOP PROGRAMME AND IMPLEMENTATION

## SESSION 1: TOGETHER WE ARE STRONGER - OUR NEEDS

<b>AIMS:</b>	<ul style="list-style-type: none"> <li>▪ Know more about the workshop;</li> <li>▪ Know more about young carers;</li> <li>▪ Getting to know each other;</li> <li>▪ Create a climate of trust;</li> <li>▪ Becoming aware of own needs;</li> <li>▪ Becoming aware of family members needs.</li> </ul>
<b>TARGET:</b>	Young carers and family members together.
<b>DURATION:</b>	90 minutes
<b>MATERIALS</b>	<p>In person: White sheets, pens, markers, billboard (or something to write on), post-it, Needs' sheets of paper and IO1 materials.</p> <p>Online: PCs/ Smartphones/Tablets, Zoom (or another web platform), Ideaboardz or Mentimeter</p>



### INTRO ACTIVITIES



**10 MIN**

- Facilitators presents themselves and introduce participants to the workshops (aims, practical aspects, the importance of sharing this experience within the family);
- Participants' presentations;
- Ice-breaker to help participants to feel at ease and start get to know each other.

Note: each partner may implement the intro activity adapted to their own context and choosing the ice-breaker activity they prefer.

Ice-breaker example that can be done also in Zoom meetings:

The facilitator asks each participant to write their name vertically on a piece of paper and associate each letter with a personal characteristic. For example, name SARA:

S - Sensitive

A- Autonomous

R- Responsible



A- Affectionate

And to read it to the rest of the group.

This activity aims to break the ice and to help the participants and facilitators get to know each other.





## CENTRAL ACTIVITIES

<b>ACTIVITY 1</b>	<p>– <b>Collection of motivations and expectations about workshop</b></p> <p>Facilitators ask participants what are their motivations and expectations about the workshop. What do they expect to do? To talk about? What would they like to do?</p> <p>Facilitators write down their answers.</p>	 <b>10 MIN</b>
<b>ACTIVITY 2</b>	<p>– <b>Introduction to young carers topic (using IO1 materials)</b></p> <p>Facilitators make a brief introduction about young carers. Who young carers are? What do they do? What can be the possible consequences of caring activity?</p> <p>The idea is to give basic general information that can help them identify themselves as young carers.</p> <p><b>Note:</b> Facilitators should collect and present appropriate materials, based on their national context and on the general awareness about young carers' role.</p>	 <b>10 MIN</b>
<b>ACTIVITY 3</b>	<p>– <b>What my needs are?</b></p> <p>This activity aims to let people reflect on and become aware of own emotional and relational needs. It can be interesting to become aware not only of their own's needs but also family members.</p> <p>Some sheets of paper containing some needs (i.e. need to be seen, to be heard, to have own place) and some white sheets will be scattered on the floor. Participants are asked to choose the needs they feel in this moment and explain why. They can also add other needs writing on the white sheets.</p> <p>Group discussion: What are my needs in this moment? What are not my needs? Which needs are not met? What emotions are associated with these needs?</p> <p><b>Note:</b> specific implementation factors of the activity such as time, content and materials may be adapted in each national context</p>	 <b>30 MIN</b>
<b>ACTIVITY 4</b>	<p>– <b>Emotions' collage</b></p> <p>This activity aims to let participants becoming aware of the emotions related to the satisfaction and non-satisfaction of the needs identified in the previous exercise.</p> <p>This activity can be a way to start considering emotions that will be the topic of the next session.</p> <p>Once identified the emotions related to their needs participants have to write down the emotion on a post it and stick them on a billboard called Emotions' collage.</p> <p><b>Note:</b> specific implementation factors of the activity such as time and materials may be adapted in each national context</p>	 <b>20 MIN</b>



## FINAL ACTIVITY

<b>CONCLUSIONS, QUESTIONS AND FEEDBACKS.</b>	<p>Facilitators recall what was done during the session and what emerged. They ask if participants have questions and ask for individual feedback about the meeting (it can also be a single word).</p>	 <b>10 MIN</b>
<b>EVALUATION</b>	<p>See Annex 2 "Pre-Evaluation Questionnaire" and submit the questionnaire to participants <b>before</b> the start of the workshop.</p>	
<b>ANNEX</b>	<p>See Annex 1 "Activity 1.3 - What my needs are?"</p>	

<b>SESSION 2: TOGETHER WE ARE STRONGER - OUR EMOTIONS</b>	
<b>AIMS:</b>	<ul style="list-style-type: none"> <li>▪ Increasing emotions self-awareness;</li> <li>▪ Becoming aware of emotions related to caring activities;</li> <li>▪ Sharing emotions within the group.</li> </ul>
<b>TARGET:</b>	Young carers and family members separated in 2 different groups
<b>DURATION:</b>	90 minutes
<b>MATERIALS</b>	<p>In person: PC, sheets of paper, pens, coloured markers, billboard (or something to write on), a sheet of paper with an iceberg image, a written text and a small box.</p> <p>Online: PCs/ Smartphones/Tablets, Zoom (or another web platform) and App "Blackout board"</p>
 <b>INTRO ACTIVITIES</b>	
 <b>10 MIN</b>	
<ul style="list-style-type: none"> <li>▪ Facilitators remind participants what they have done during the previous session and ask for comments, questions and/or reflections.</li> <li>▪ Facilitators show the emotion collage from previous session and ask for feedbacks and reflections about it. This opens up to next activities about emotions.</li> </ul> <p>Ice-breaker example that can be done also in Zoom meetings:</p> <p>Ask each participant to prepare a list of three interesting "facts" about themselves, one of which must be made up. These could comprise anything, from a pet they own or a hobby they love to a famous person they say they've met, and so on. Then, get other participants to decide on the fact they think is false. The one who receives the most incorrect votes "wins."</p> <p>Note: Facilitators can adapt the intro activity to their own context and choose the ice-breaker activity they prefer.</p>	
 <b>CENTRAL ACTIVITIES</b>	
<b>ACTIVITY 1 - INTRODUCTORY VIDEO ABOUT EMOTIONS</b>	<p>Facilitators show a short video that becomes food for thought about emotions and feeling different.</p> <p><a href="https://vimeo.com/475578833">https://vimeo.com/475578833</a></p> <p>This activity aims to introduce emotions, to validate and normalize what people feel. It is important to put what will arise in relation to caring activity.</p> <p>The message is: however weird you feel inside you're not alone!</p> <p>The video is a stimulus to introduce a conversation on how you feel and what emotions you usually hide. It can be useful to reflect also on family members' emotions and on emotions related to caring activity.</p> <p>It is a link to the next activity.</p> <p>Note: specific implementation factors of the activity such as video and its duration may be adapted in each national context.</p>
 <b>10 MIN</b>	



<b>ACTIVITY 2 ICEBERG</b>	<p>Facilitators give participants a sheet of paper that contains an iceberg image to fill in. Each participant has to fill in his/her own iceberg indicating what emotions he/she shows and what he/she tends to hide. Then, after a group discussion, a group iceberg will be created.</p> <p>This activity aims to let participants reflect on what emotions he/she shows but, mostly, on what is hidden. What do people not see? What is kept under the surface?</p> <p>Note: If taking place on Zoom, facilitator can fill in the word document containing the iceberg with participants answers, sharing his/her screen.</p> <p>Specific implementation factors of the activity such as time and materials may be adapted in each national context</p>	 <b>20 MIN</b>
<b>ACTIVITY 3 - BLACKOUT POETRY</b>	<p>Facilitators give participants a written text and ask them to elaborate it using the Blackout poetry technique. Using the existing text, they have to isolate and then piece together single words or short phrases from this text to create their own poem. The topic is the emotions connected with caring activity.</p> <p>This activity aims to help participants express own emotions about caring activity/ being a young carer/ being person who takes care of a loved one/ being the cared for person in a creative way.</p> <p>The process of writing can be both cathartic and empowering, often freeing blocked emotions or buried memories and giving voice to one's concerns and strengths.</p> <p>This is an individual activity followed by a group discussion.</p> <p>Note: Facilitators can choose the text to use for this activity.</p> <p>An example can be David Copperfield's incipit by Charles Dickens.</p>	 <b>30 MIN</b>
<b>ACTIVITY 4 INTRODUCTION TO QUESTION BOX</b>	<p>Facilitators introduce participants to the question box, a box that will contain questions addressed to their family member. Participants have to write down questions they have in their mind and put it in the box. What would they like to know? What would they like to ask to their family members? The questions will be read during the last session. They can also take their time to reflect about the questions to ask and add other questions during the next session.</p> <p>This activity aims to give participants the chance to pose questions to young carers/family members.</p> <p>Note: specific implementation factors of the activity such as time and materials may be created and adapted in each national context</p>	 <b>10 MIN</b>
 <b>FINAL ACTIVITY</b>		
<b>CONCLUSIONS, QUESTIONS AND FEEDBACKS</b>	<p>Facilitators recall what was done during the session and what emerged. They ask if participants have questions and ask for individual feedback about the meeting (it can also be a single word).</p>	 <b>10 MIN</b>
<b>ANNEX</b>	See Annex 1 "Activity 2.2 Iceberg"	

# SESSION 3 : TOGETHER WE ARE STRONGER - OUR COMMUNICATION

**AIMS:**

- Becoming aware and reflecting on own communication style;
- Reflecting on family communication style;
- Being able to communicate my feelings and thoughts;
- Practicing active listening.

**TARGET:**  
Young carers and adults in 2 different groups

**DURATION:**  
90 minutes

**MATERIALS**

In person: billboard (or something to write on), white sheets, Coloured pens, Pens, Pencils, cards containing animals' images, a geometric image and a small box.

Online: PCs/ Smartphones/Tablets, Zoom (or another web platform), Ideaboardz

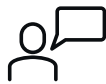


## INTRO ACTIVITIES

- Facilitators remind what they have done during the previous meeting and ask for comments, questions and/or reflections.



10 MIN



## CENTRAL ACTIVITIES

### ACTIVITY 1 - WHAT IS MY COMMUNICATION STYLE?

This activity aims to support practitioners to become aware of their own communication style.

In this activity different communication styles will be presented with a specific focus on other's perceptions. The facilitator asks each participant to choose the one among those here presented that best represent him/herself and explain why:

**D – Dominant – Lion**

Lions have a tendency to be independent, direct, firm, fast-moving, results-oriented, and decisive.

Others may perceive them as intimidating, fearless, or blunt.

**I – Influential – Dolphin**

Dolphins have a tendency to be outgoing, enthusiastic, optimistic, and outspoken.

Others may perceive them as reckless or sloppy.

**S – Steadiness – Zebra**

Zebras have a tendency to be even-tempered, accommodating, a team player, and patient.

Others may perceive them as indecisive or unassertive.




**C – Conscientiousness – Eagle**


Eagles have a tendency to be analytical, reserved, precise, detail-oriented, and sharp.

Others may perceive them as over-analysing, sceptical, and slowing down the process.



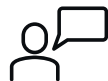
20 MIN

	<p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• What is your communication style?</li> <li>• When does it work?</li> <li>• When doesn't it work?</li> <li>• And your family style? How do I handle conflicts?</li> </ul> <p>Note: specific implementation factors of the activity such as time and materials have to be adapted in each national context</p>	
<p><b>ACTIVITY 2 - EFFECTIVE COMMUNICATION</b></p>	<p>This activity aims to let people realize how effective (or not) communication can be.</p> <p>This exercise demonstrates to participants that communicating can be hard and that the person we are interacting with will not always understand or capture the messages we want them to.</p> <p>One participant describes to another one a simple geometric image and the other one has to draw it following the instructions received.</p> <p>After this activity, it will follow a group discussion.</p> <p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• Do I communicate efficiently? Was it easy?</li> <li>• Was the person I'm interacting with able to capture the image?</li> <li>• What are the possible risks with communication?</li> <li>• How can I improve my communication?</li> </ul> <p>Materials to implement the activity</p> <p>In person: Exercise in pairs, sheets and coloured pens</p> <p>Online: Exercise in pairs using Zoom breakout rooms. The participant that draws needs to have a sheet of paper and coloured pens.</p> <p>Note: specific implementation factors of the activity such as time and materials have to be chosen in each national context</p>	<p> <b>20 MIN</b></p>
<p><b>ACTIVITY 3 ACTIVE LISTENING</b></p>	<p>This activity aims to convey the idea that listening is a fundamental part of effective communication.</p> <p>Sometimes we listen in order to answer and not to understand.</p> <p>This exercise lets participants practice active listening.</p> <p>One participant has to tell another one something that happened to him/her last week. The other one has to listen to him/her for 4 minutes without saying a word but focusing his/her attention on what he/she is saying.</p> <p>After this activity, it will follow a group discussion.</p> <p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• Reflecting on the experience of listening to another person without speaking.</li> <li>• Are we able to do it in everyday life? Is it difficult?</li> </ul> <p>Materials to implement the activity</p> <p>In person: Exercise in pairs (then the roles are reversed)</p> <p>Online: Exercise in pairs using Zoom breakout rooms (then the roles are reversed)</p> <p>Note: specific implementation factors of the activity such as duration have to be chosen in each national context</p>	<p> <b>20 MIN</b></p>
<p><b>ACTIVITY 4 - QUESTION BOX</b></p>	<p>This activity aims to give participants the chance to ask questions to young carers/family members. As anticipated in the previous session, participants are asked to write down questions they have in their mind and put them in a box, taking into account that questions will be read during the next session.</p> <p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• At the end of this session are there any other questions that you want to add in the box?</li> </ul> <p>Note: specific implementation factors of the activity such as time and materials have to be created and adapted in each national context</p>	<p> <b>10 MIN</b></p>


<b>FINAL ACTIVITIES</b>	<p>Conclusions, Questions and Feedbacks</p> <p>Facilitators recall what was done during the session and what emerged. They ask if participants have questions and ask for individual feedback about the meeting (it can also be a single word).</p>	 <b>10 MIN</b>
<b>ANNEX</b>	See Annex 1 “Activity 3.1 - What is my communication style?” and “Activity 3.2 - Effective Communication”	

## **SESSION 4: TOGETHER WE ARE STRONGER - OUR PATH TOGETHER**

<b>AIMS:</b>	<ul style="list-style-type: none"> <li>▪ Becoming aware of other people’s emotions and thoughts relating to the caring activity;</li> <li>▪ Facilitating communication among family members;</li> <li>▪ Giving the chance to talk about caring activities (and emotions related) within the family.</li> </ul>
<b>TARGET:</b>	Young carers and adults together
<b>DURATION:</b>	90 minutes
<b>MATERIALS</b>	<p>In person: billboard (or something to write on), white sheets, Coloured pens, Pens, Pencils, materials created during previous sessions, Conversational Cards (IO1 material)</p> <p>Online: PCs/ Smartphones/Tablets, Zoom (or another web platform), Ideaboardz</p>





### **INTRO ACTIVITIES**

<ul style="list-style-type: none"> <li>▪ Facilitators remind participants what they have done during the previous session and ask for comments, questions and/or reflections.</li> </ul>	 <b>10 MIN</b>
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### **CENTRAL ACTIVITIES**

<b>ACTIVITY 1 ICEBERG</b>	<p>This activity aims to let participants become aware and reflect on what emotions young carers/family members show and what is hidden.</p> <p>The 2 icebergs created by the groups (young carers and family members) are shown and compared and then will follow a group discussion.</p> <p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• What do the 2 icebergs have in common?</li> <li>• Was I aware of that?</li> <li>• What are the differences between them?</li> </ul>	 <b>15 MIN</b>
<b>ACTIVITY 2 QUESTION BOX</b>	<p>Each group receives the box containing the questions made by the other group. Each group have the chance to read the questions and comment on them within the group.</p> <p>Group discussion about the questions and possible answers.</p> <p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• Since this exercise is in groups (probably a unique answer for all families is not possible) it can be interesting to reflect more on the questions than on the possible answers.</li> </ul>	 <b>15 MIN</b>

<b>ACTIVITY 3 CONVERSATIONAL CARDS</b>	<p>This activity aims to let young carers and their family members to talk and reflect together on some topics connected to the caring activity.</p> <p>Young carers and family members draw a conversational card and try to answer the question included.</p> <p>At the end of this activity, it would be helpful to have few minutes of debriefing, in order to provide participants the opportunity to share what they felt during the activity and reflect on their emotions.</p> <p>It could be useful to give each family a deck of conversational cards that they can take home and use as a chance to sit and talk about how things are going, how they feel and so on (also involving family members that don't take part in the workshop).</p>	 <b>15 MIN</b>
<b>ACTIVITY 4 WHAT I WANT TO SAY TO YOU ACTION PLAN</b>	<p>This final activity aims to give participants the chance to say something they have never said or rarely had the occasion to say, to their family member after having shared this experience together.</p> <p>Participants have to write down a word/sentence they want to say to their family member after this experience and then read it.</p> <p>Main inputs to reflect on:</p> <ul style="list-style-type: none"> <li>• What I would like to say to you/share with you at the end of the workshop;</li> <li>• Could I recognize the impact of my words?</li> </ul> <p>Before leaving the session facilitators ask each family group to fill in their own action plan identifying the aims they want to reach together.</p>	 <b>25 MIN</b>
 <b>FINAL ACTIVITY</b>		
<b>FINAL ACTIVITIES</b>	<p>Conclusions, Questions and Feedbacks</p> <p>Facilitators recall what was done during the session and what emerged. They ask if participants have questions and ask for individual feedback about the meeting (it can also be a single word). Facilitators provide information and further materials and resources.</p>	 <b>10 MIN</b>
<b>EVALUATION</b>	<p>See Annex 2 “Post-Evaluation Questionnaire” and submit the questionnaire to participants after the end of the workshop.</p>	
<b>ANNEX</b>	<p>See Annex 1 “Activity 4.3 - Conversational cards” and “Activity 4.4 - Action Plan”</p>	

# SUMMARY OF THE PILOT PHASE AND CONCLUSIONS

Overall, the feedback from young carers and their family members was positive and all the participants in the various national pilots found the experience useful and supportive. The programme and the activities proposed met the project objectives. It is clear that these workshops raised awareness of young carers and of their needs and emotions. Another significant aspect was that communication within the family can sometimes be neglected, perhaps as young carers are particularly busy with care activities or because communicating about their caring role in the family can be difficult. The Together project showed how, through the practical activities proposed, it can be possible to promote and increase confidence in expressing one's feelings and communicating openly. However, it must also be considered that for some young carers, it may be necessary to run specific activities either individually or with their peers before working with their families. This pilot has therefore confirmed that having congregate sessions and sessions in which groups are separated is necessary in order to provide a safe space for participants to share their thoughts and feelings.

In conclusion, the piloting phase has validated the importance of an intervention such as the one proposed. The various modifications and adaptations to different national contexts presented above, demonstrate that this model can be replicated by other practitioners to promote communication and open dialogue within families.

This guide invites professionals, organisations and services in the youth, care and family support sector to implement the intervention in order to make a difference to young carers and their families. The programme can be used as proposed or adapted according to one's own services or the specific needs of the target groups.

# **ANNEXES**

# ANNEX 1 - WORKSHOP MATERIALS

## ACTIVITY 1.3 - WHAT MY NEED ARE?

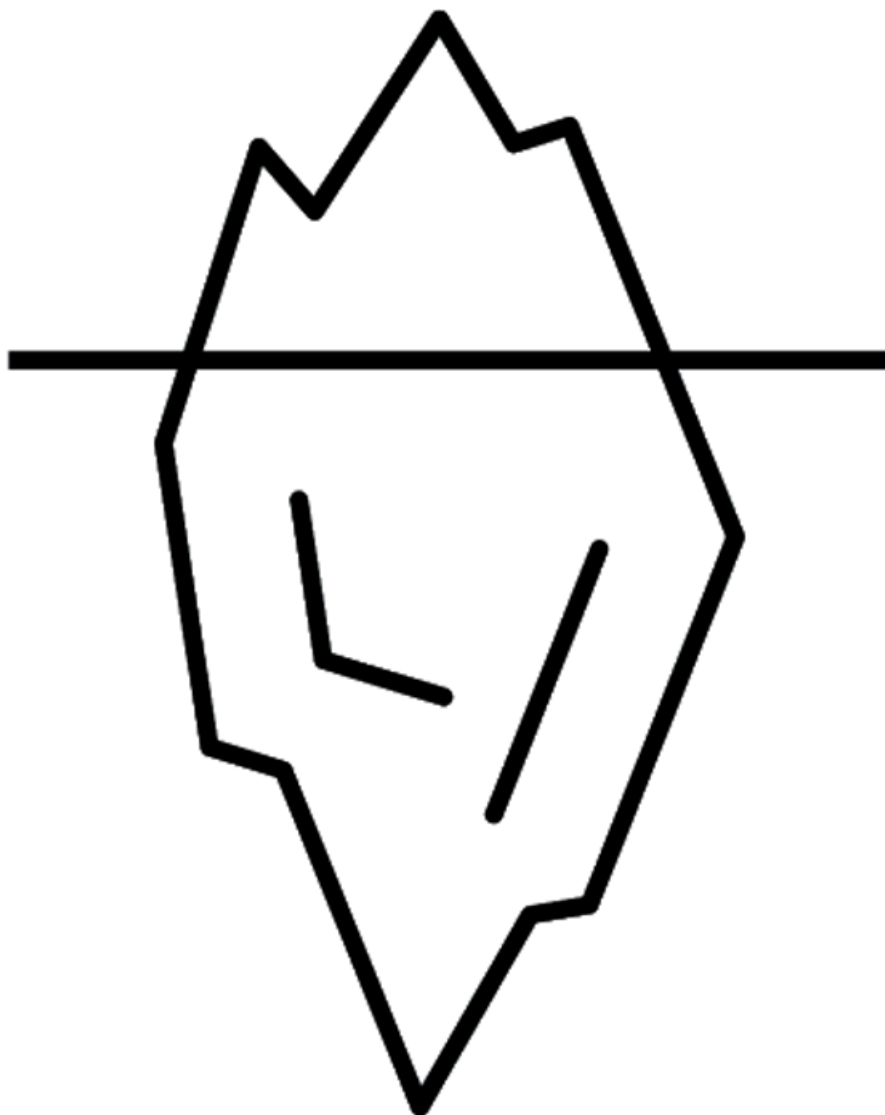
Need to <i>BE SEEN</i>	Need to <b>BE UNDERSTOOD</b>	Need to <b>BE LOVED</b>
Need to <b>BE LISTENED</b>	Need to <i>HAVE OWN PLACE</i>	Need to <b>CHOOSE</b>
Need for <i>SECURITY</i>	Need for <b>TIME FOR MYSELF</b>	Need for <i>LEVITY</i>
Need to <b>BE BELIEVED</b>	Need for <b>TENDERNESS</b>	Need to/for .....

For the implementation of this activity, you can use the picture below containing different needs. If the activity is held online, you can show it during the meeting by sharing the screen. If the workshop takes place in person, print each need on a A4 sheet of paper and scatter them on the floor.



## ACTIVITY 2.2 - THE ICEBERG

For the implementation of this activity, you can use the iceberg picture below. If the activity is held online, you can show it during the meeting by sharing the screen. If the workshop takes place in person, print this A4 sheet of paper and give it to each participant.



## ACTIVITY 3.1 - MY COMMUNICATION STYLE

Show these cards to participants asking them to reflect which of the communication styles better represents their own communication style. They should share their choice with other participants and explain why.

### DOMINANT - LION



Lions have a tendency to be independent, direct, firm, fast-moving, results-oriented, and decisive.

Others may perceive them as intimidating, fearless, or blunt.

### INFLUENTIAL - DOLPHIN



Dolphins have a tendency to be outgoing, enthusiastic, optimistic, and outspoken.

Others may perceive them as reckless or sloppy.

## STEADINESS - ZEBRA



Zebras have a tendency to be even-tempered, accommodating, a team player, and patient.

Others may perceive them as indecisive or unassertive.

## CONSCIENTIOUSNESS - EAGLE



Eagles have a tendency to be analytical, reserved, precise, detail-oriented, and sharp.

Others may perceive them as over-analyzing, skeptical, and slowing down the process.

## ACTIVITY 3.2 - EFFECTIVE COMMUNICATION

Send (or give) participants one of the pictures below and ask them to describe it to the other participants. Participants should describe the single parts of the image but not reveal what the entire figure represents.

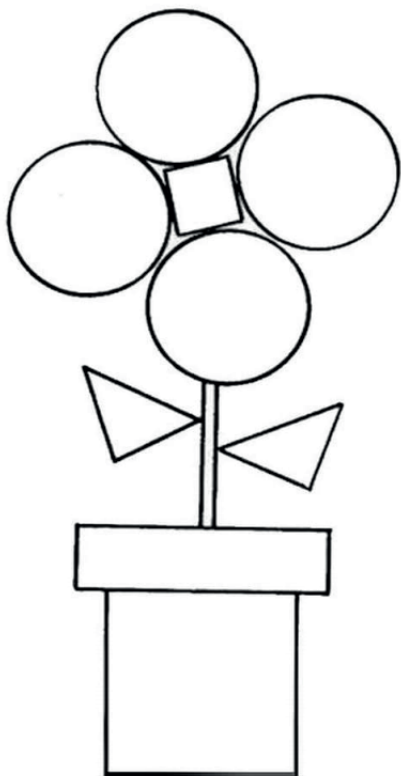


Figure 1

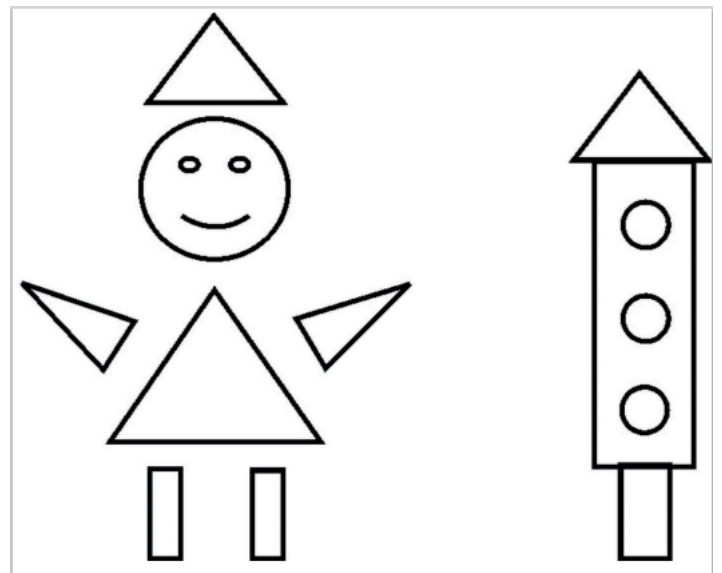


Figure 2

## ACTIVITY 4.3 - CONVERSATIONAL CARDS

Show (or give) participants these cards to support a conversation around the impact of caring. These cards provide the same situation from two different points of view and aim to facilitate open dialogue between young carers and their families.

YOUNG CARERS	FAMILY MEMBERS
Having caring responsibilities makes me feel ...	Having caring responsibilities makes me feel ...

YOUNG CARERS	FAMILY MEMBERS
I struggle to talk to you about ...	I struggle to talk to you about ...

YOUNG CARERS	FAMILY MEMBERS
Care activity and responsibilities I have impact on ...	Care activity and responsibilities I have impact on ...

YOUNG CARERS	FAMILY MEMBERS
In my spare time I would like to ...	In my spare time I would like to ...

YOUNG CARERS	FAMILY MEMBERS
I feel like I need support for ...	I feel like I need support for ...

YOUNG CARERS	FAMILY MEMBERS
With the whole family I would like to ...	With the whole family I would like to ...
YOUNG CARERS	FAMILY MEMBERS
I think as a family we would need to ...	I think as a family we would need to ...
YOUNG CARERS	FAMILY MEMBERS
I would like to receive more information about ...	I would like to receive more information about ...
YOUNG CARERS	FAMILY MEMBERS
That time I felt alone ...	That time I felt alone ...
YOUNG CARERS	FAMILY MEMBERS
That time I felt happy ...	That time I felt happy ...
YOUNG CARERS	FAMILY MEMBERS
That time when I felt disappointed ...	That time when I felt disappointed ...
YOUNG CARERS	FAMILY MEMBERS
That time when I didn't feel capable of handling the situation ...	That time when I didn't feel capable of handling the situation ...

YOUNG CARERS	FAMILY MEMBERS
I'd like to talk to you about ...	I'd like to talk to you about ...

YOUNG CARERS	FAMILY MEMBERS
Sometimes I would like to get more help for ...	Sometimes I would like to get more help for ...

YOUNG CARERS	FAMILY MEMBERS
I don't like having to ...	I don't like having to ...


YOUNG CARERS	FAMILY MEMBERS
I like it when ...	I like it when ...

# ACTIVITY 4.4 - ACTION PLAN

During the session, share the individual action plan and the family action plan below with participants. If the meeting is held online, facilitators can share their screen and, after the meeting, send these plans by email to each participant. If the workshop takes place in person, print these onto A4 sheets of paper and give to each participant.

## INDIVIDUAL ACTION PLAN.....


WHAT DO I HAVE START DOING?



WHAT DO I HAVE STOP DOING?



MY GOAL(S)



WHAT DO I HAVE TO CONTINUE TO DO?



TIME (WHEN DO I PLAN TO REACH MY GOAL(S)?




MY REWARD(S) WILL BE:


.....

.....

.....

.....




 YOU CAN PUT ME ON THE FRIDGE!



# FAMILY ACTION PLAN.....


WHAT DO WE HAVE START DOING?



WHAT DO WE HAVE STOP DOING?



OUR GOAL(S)



WHAT DO WE HAVE TO CONTINUE TO DO?



TIME (WHEN DO WE PLAN TO REACH OUR GOAL(S)?




OUR REWARD(S) WILL BE:


.....

.....

.....

.....



 YOU CAN PUT ME ON THE FRIDGE!

# ANNEX 2 - PRE/POST QUESTIONNAIRES

## PRE EVALUATION QUESTIONNAIRE

**I am aware of what a young carer is and the impact caring roles can have.**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

**I am able to express my feelings clearly about the caring relationships.**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

**I am confident in communicating with my family members about the caring relationships.**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

**I am aware of the support available to me**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

# POST EVALUATION QUESTIONNAIRE

**I am aware of what a young carer is and the impact caring roles can have.**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

**I am able to express my feelings clearly about the caring relationships.**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

**I am confident in communicating with my family members about the caring relationships.**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
--	-----------------------------------	---	--------------------------------	---

**I am aware of the support available to me**

<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
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## ANNEX 3 - ADAPTATIONS AND PILOT IMPLEMENTATION IN ITALY

In the Italian context, although the initiative was disseminated through various channels, different associations of the youth and care sector were contacted, as well as people who took part in previous projects addressed to target groups were invited to participate, the willingness of sufficient young carers and their relatives to participate in the workshop was not reached. In order to carry out this activity anyway, the Italian partner Anziani e non solo decided to convert it from a participatory and experiencing workshop to a consultative workshop. During two separate sessions young carers and family members gave their opinion about the programme and the activities proposed. Moreover, participants were involved in some exercises included in the programme.

Two online sessions were conducted by two facilitators (a psychologist and a social worker), one involving 3 young carers and the other 3 adults from different families. During the sessions the designed workshop concept was presented, without changes or adaptations to the Italian context, as it was considered appropriate by the local partner.

Due to the fact that the workshop in Italy was not an experiential workshop it was not possible to submit pre and post questionnaires, but the validity of the workshop was monitored through observation and comments collected, which were analysed and summarised in the following results.

### ADULTS' MEETING RESULTS

The session lasted about 90 minutes and was held online with the following participants:

- G.: Female, carer of her daughter
- N.: Female, carer of her son
- B.: Female, carer of her child

Two of the mothers who participated in the workshop are members of a local association of parents who care for children with disabilities.

All participants recognised the importance of a path like the Together workshop, considering it as an opportunity to receive attention on the reality of being a parent carer and to promote communication with children without disabilities who sometimes involuntarily receive little attention.

They also proposed to address the workshop also to younger children, obviously with the necessary modifications and adaptations. Allowing younger children to practise communication from an early age would help to sustain a positive relationship with other family members and not make them feel excluded or side-lined because of the time spent caring for their child with disabilities.

The structure and division of the workshop into different sessions was considered sensible and good. Parents also stated that the Together model should be further promoted, pointing out that in general, apart from their child's diagnosis, they are not given any support or advice on how to deal with the situation with the whole family. However, on the other hand, parents acknowledged that there might be obstacles to full and constant participation in the workshops due to caring commitments, and that it might be difficult for them to participate. Some exercises were considered particularly difficult because they put the participant in the condition of having to reflect or overcome certain obstacles or barriers that were put in place as a defence or to simplify everyday life. This last aspect can be considered particularly interesting, because it shows how the activities included in the workshop lead participants to engage in being aware of why some communication barriers

are set and to evaluate if and how they should be overcome.

## YOUNG CARERS' MEETING RESULTS

The session lasted about 90 minutes and was held online with the following participants:

- G.: Female, 20 years old, caregiver of her mum with psychiatric disorder;
- A.: Female, 16 years old, caregiver of her sister with down syndrome;
- G.: Male, 24 years old, caregiver of his grandfather with dementia and his aunt with psychiatric disorder.

At the beginning young carers seemed a little bit sceptical on the proposal to involve in workshops both young carers and their family members. A young carer told that in his opinion the format proposed seems good for young carers but not for family members. From his point of view the obstacles to family members' participation are multiple: lack of time, family organizational difficulties but also a poor predisposition to this kind of initiatives, initiatives in which they were asked to get emotionally involved. Another young carer told that she preferred a workshop only with other young carers, without involving family members. This because for her it is important to have the chance to make experiences apart from her family, to have time for her, to reflect and to escape from her family context. Another young carer agreed on the fact that a project like this would respond to her need to get away from her family environment and that talking with people she doesn't know is easier and let her feel at ease. On the other hand, she recognizes the importance to have the chance to talk to her family members because they are not used to do so.

They proposed to organize sessions addressed only to young carers and just one final session during which involving family members. In this way they could have the chance to talk with their family members only after having done this experience and having reflected on different issues concerning caring activity.

They appreciated the introductory video about emotions saying to have felt like the video's characters.

Young carers identified the need to choose, the need for time for themselves and for lightness as needs they felt more in that moment.

Participants gave many feedbacks on the iceberg exercise. Initially they said that this activity was a little bit difficult because the iceberg hidden part refers to actions that they usually do every day but that other people doesn't perceive. It was considered a very useful activity as a support to communicate with family members and to communicate something that may be done unconsciously but does not correspond to the true intentions. Moreover, one YC stated that he finds the tool useful especially to adults who often do not stop to think about introspective aspects and more personal and deep factors. Another YC considers it useful for people who normally hide their emotions, stating that sometimes she tends to hide her anger, especially if she sees another person angry, she avoids expressing hers in order not to burden the situation further. Another YC stated that the exercise could be useful to analyse certain feelings behind certain reactions. She shared with the group an episode in which, contrary to her calmness and self-control, she blurted out because inside she felt tired of the responsibilities she feels. In relation to this episode, she said that "for just an evening she would act like a normal adolescent".

The Blackout Poetry activity was considered interesting because by selecting parts of a text something might jump out at you that you don't normally see, and are aware of, and can therefore be an opportunity for reflection. A YC stated that an exercise like this can help in bringing out emotions and thoughts that can be hard to put into words.

The Question box activity was considered very difficult but, at the same time, very useful.

Participants started to think about what they could ask of their families. One participant said it

was a nice idea and that it can be an input to ask questions, but only if it is possible to ask questions anonymously. Another participant admitted that he often avoids asking questions because he already knows the answers. Another YC found the exercise difficult because she believes that putting a question in the box and then sharing it with the group would require additional effort on her part because she would have to share the reasons for her question and explain them. On the basis of their answers and feedbacks on this exercise it seems that for participants it is important that questions are anonymous.

For what concerns the session about communication participants found the exercises proposed very useful even in some cases a little bit difficult. In particular they referred that the exercise about their own communication style would help to think about things that can be taken for granted or underestimated. The exercise about the effective communication opened a reflection on the fact that sometimes it can be really difficult to let the other people understand what we feel if it is something that we are the only one to feel.

About the last session participants stated that for them it is really difficult to imagine how their family members would do these exercises but they were very curious about that.

In particular for what concerns the iceberg exercise they referred that it could be a good opportunity to highlight the things that family members at home show more while outside tend to hide. A YC stated that she tends to rely a lot on their family members but she doesn't know how they really feel, so an exercise like this could help her to feel more understood and less alone.

All participants considered conversation cards useful because sometimes there is not much conversation among family members and it can be really difficult to talk about caring activity.

The action plan exercise, as well as the "what I want to say to you" exercise were found useful by participants that considered them a good occasion to tell their parents things they never had the courage to share.

## CONCLUSIONS OF THE PILOT IN ITALY

In general, all participants appreciated the proposed workshop and gave many suggestions to adapt the activities as much as possible to their realities. They recognise the importance of an intervention with a comprehensive family approach that is done with a willingness to listen and understand, as well as recognising the importance of highlighting the issue of young carers. However, the two groups of participants provided two very different perspectives. On one hand, the mothers who participated in the workshop, although very busy caring for their child with the illness, would be very interested in being able to communicate openly with their other children to make them feel seen and appreciated. They saw the Together workshop as an excellent opportunity to explore these aspects and to be able to discuss relevant issues with their children. On the other hand, the young carers involved agreed that an experience like this could be really useful and all said they would participate. However, they stated that they would prefer to do it without their family members because they consider it important to first have the opportunity to talk freely about their experience as young carers with other young carers who can understand them.

## ANNEX 4 - ADAPTATIONS AND PILOT IMPLEMENTATION IN SCOTLAND

The Scottish partner, Carer Trust Scotland, were able to run two sets of workshops; one online due to the Covid-19 pandemic and one face-to-face. For both pilots, the workshop plans were adapted to the Scottish context and delivered in partnership with local young carer services. Due to the advanced unpaid carer landscape in Scotland and working collaboratively with carer centres, the focus of these workshops was less about who young carers are, but rather on facilitating open dialogue within families about the impact caring roles can have. Moreover, in order to engage the families, three sessions instead of four were carried out for both workshops. The session on communication was therefore dealt with in a transversal way, included in the various sessions in the most relevant and useful activities.

### ONLINE WORKSHOP RESULTS

On Thursday 6th May, Carers Trust Scotland worked collaboratively with Stirling Carers Centre to host sessions one and two on Zoom. During these sessions, young people and family members split into two break out rooms. On Monday 10th May, the final session was also hosted on Zoom where young people and family members participated together.

In order to monitor the impact of the workshops, participants were asked to fill in a pre and post evaluation questionnaire. The results of these questionnaires are presented below, accompanied by comments and reflections from the facilitators.

At the beginning of workshops one and two, five attendees had great awareness of who young carers are and the impact caring roles can have. Majority (80%) felt confident communicating with their family members and expressing their feelings about the caring relationship. All attendees were aware of the support available. Families involved have strong links with their local carers centre, this could be the reason for positive evaluation results ahead of the workshops. When completing the pre-evaluation, eight attendees completed this. This may be due to families using separate devices when splitting into breakout rooms during workshop two.

In the post evaluation, all attendees continued to report great awareness of who young carers are and the impact caring roles can have. 87% felt confident communicating with their family members, a slight increase in confidence having taken part in the activities. However, expressing their feelings about the caring relationship had a mixed response, with 13% disagreeing. Attendees may have reported greater confidence at the beginning of the workshops as they had not been given this time to reflect. This decline could indicate that the workshops are effective in supporting attendees to confront their own communication styles and the way they share their feelings with their families. It is important that communication activities are given more time going forward, and facilitators emphasise the importance of reflection during these workshops. All attendees were aware of the support available.

At the beginning of workshop three, six attendees had great awareness of who young carers are and the impact caring roles can have. Majority felt confident expressing their feelings about the caring relationship, however 17% reported lack of confidence in communicating with families. All attendees were aware of the support available.

After taking part in workshop three, all attendees continued to report great awareness of who young carers are and the impact caring roles can have. Majority of attendees continued to feel they were able to express their feelings clearly about the caring relationships having taken part in the workshop. Attendees reported feeling confident communicating with their families, with 75% agreeing or strongly agreeing with this statement. However, 25% neither agreed nor disagreed with this statement, suggesting that more time should be spent exploring communication styles and supporting attendees to speak to their family members honestly. Throughout each workshop, attendees reported great awareness of the support available.

## FACE TO FACE WORKSHOP RESULTS

At the beginning and end of this workshop, participants completed pre and post evaluation questionnaires.

### Pre evaluation:

9 attendees completed the pre-evaluation.

- I am aware of what a young carer is and the impact caring roles can have. 11% Agree and 89% Strongly Agree.
- I am able to express my feelings clearly about the caring relationships. 56% Agree and 44% Strongly Agree.
- I am confident in communicating with my family members about the caring relationships. 67% Agree and 33% Strongly Agree.
- I am aware of the support available to me. 33% Agree and 67% Strongly Agree.

Overall, all attendees had great awareness of who young carers are and the impact caring roles can have. Majority felt confident communicating with their family members and expressing their feelings about the caring relationship. All attendees were aware of the support available.

As we worked collaboratively with families who have strong links with their local carers centre, this could be the reason for positive evaluation results ahead of the workshop.

### Post evaluation:

9 attendees completed the post-evaluation.

- I am aware of what a young carer is and the impact caring roles can have. 11% Agree and 89% Strongly Agree.
- I am able to express my feelings clearly about the caring relationships. 22% Agree and 78% Strongly Agree.
- I am confident in communicating with my family members about the caring relationships. 11% Neither Agree nor Disagree, 11% Agree and 78% Strongly Agree.
- I am aware of the support available to me. 22% Agree and 78% Strongly Agree.

At the end of the workshop, all attendees continued to report great awareness of who young carers are and the impact caring roles can have. Majority continued to feel confident expressing their feelings clearly with their family, however the number of attendees who strongly agreed with this statement increased from 44% in the pre-evaluation, to 78% in the post evaluation.

At the beginning of the workshop, 33% of attendees strongly agreed that they were confident communicating with their family members about the caring relationships. At the end of the workshop, this arose to 78%. These results suggest that the workshop successfully facilitated open dialogue with families for attendees to confidently express their feelings and ultimately feel confident communicating with family members. However, 11% neither agreed nor disagreed with this statement in the post evaluation. This result suggests that whilst all attendees felt confident at the beginning of the workshop, their participation in the activities provided opportunity to reflect on their communication with families, and perhaps impacted their level of confidence having taken part.

Finally, 78% of attendees strongly agreed that they were aware of the support available. This result slightly increased from the pre-evaluation results. During group discussions, the lead staff member from the carers centre was able to share information on local support available through the service, particularly around school and financial support. Having this local knowledge available



during the workshop was extremely useful and may have led to this increased result in awareness for attendees.

## CONCLUSIONS OF THE PILOT IN SCOTLAND

Overall, the pilot of the whole family workshops online was a success, with majority of attendees feeling satisfied from the experience, and finding the workshops easy to follow and informative. It provided a platform to facilitate open dialogue between families; this was praised by facilitators and a family member.

The cooperation with Stirling Carers Centre has also been a real success of the programme delivery, by supporting with recruitment and facilitating workshops to ensure that all participants were comfortable to take part. All young carers and family members reported great awareness of the support available throughout.

Whilst we were able to adapt the interactive activities to an online context, it remained difficult to fully engage participants in an online space, particularly as they did not know one another. We also had to ensure that each family had two devices so that attendees could take part in break out rooms alongside one another. This should be a key consideration for services if they intend to deliver workshops online. Finding the balance of avoiding Zoom fatigue whilst also ensuring enough time for activities has also proved a challenge. Going forward, these workshops should be delivered in person, with enough time given to each activity.

As mentioned from Stirling Carers Centre staff, it is recommended that services use these workshops with families with similar caring roles. This would ensure all attendees feel more comfortable discussing caring relationships and could benefit from peer support.

The face-to-face pilot workshop also proved successful, engaging young carers and their family members in interactive activities and facilitating open dialogue with one another. The evaluation results suggest that this workshop provided attendees with information, support and a safe space to communicate honestly with one another. Hosting a workshop in person ensured we could spend time on each activity and allow space for in depth discussions.

## ANNEX 5 - ADAPTATIONS AND PILOT IMPLEMENTATION IN GREECE

The Greek partner EDRA implemented the pilot of the Together workshop online. They added some short presentations and short activities to the sessions in order to better meet the needs of the Greek target groups and to introduce topics relevant to the care and purpose of the workshop. However, in general, EDRA implemented the workshop based on the original concept as it was considered appropriate for the national context. The workshop was attended by 12 people, 6 of which were young carers of a person with a chronic illness and 6 were members of a family with a chronic illness. Based on the structure of the workshop there were implemented all the 4 sections, divided in 6 meetings of 90 minutes each.

### FIRST SESSION RESULTS

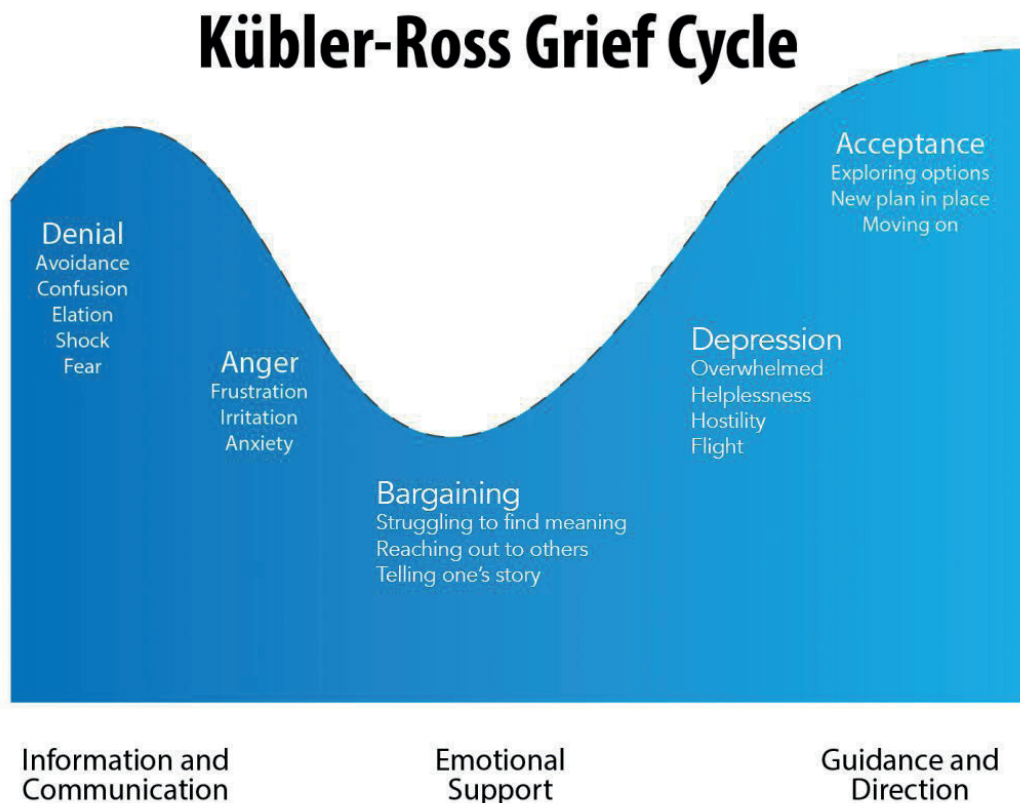
The first section of the seminar was the presentation of the program TOGETHER and the main objectives of the seminar. Participants were initially asked to introduce themselves and present as much information as they wanted about their role as young caregivers and family members caring for a chronic patient. The trainers then introduced the concept of “young caregiver” and the possible consequences of their young age as caregivers in the provision of care and the rest of their lives. The trainers then did a presentation on “Chronic Illness: Impact and Management in the Family”. During the presentation was defined when an illness is chronic and how this illness can affect the social roles of the patients. The presentation then triggered a discussion among the participants on how the chronic illness of their relative has affected not only the family, but also their personal life and development as well. Furthermore, participants reported difficulties in communication between young caregivers and older family members regarding the role of caregiver and their perspective on care. The young caregivers focused on understanding the fatigue of family members due to care, but they also asked to have their own needs for support heard, understanding of the multiple roles they are called upon to fulfil at a young age without being trained or have previous experience in managing crisis situations. At the end, all participants were asked the following questions:

- How do you feel right now thinking about your relative suffering from a chronic illness?
- What goes through your mind when you think of yourself as a caregiver? How do you feel about that?
- Tell us the main emotion that you experience right now.
- What have you gained from the seminar course that you just attended?
- Has the seminar helped you, or, do you think the seminar will help you regarding your relationship with other family members?

The answers were registered in an interactive whiteboard, so that there is feedback among the participants on how they feel and what they think. Through their answers, the participants shared their experience and realized that almost all had the same reaction when they got informed about the illness (“I was shocked”) and that they also feel more reconciled with the illness now. The final aim was to introduce ways of understanding the difficulties that can be experienced by everyone, the needs they have and how they will eventually be able to communicate better.

## SECOND SESSION RESULTS

In the 2<sup>nd</sup> section of the workshop, young caregivers and family members were divided in two different meetings. During the first meeting with young carers, it was discussed the feelings that arise in the young caregiver from the role they are called to fulfil. Ways of managing emotions were given through the modification of the non-functional way of thinking that reinforces the negative emotions into a functional way of thinking which strengthens their good emotional state. Through this technique, the participants themselves noted that they will be able to manage the negative thoughts they may have in the future about the other members, and this will contribute to a more harmonious relationship with them. The five stages of Kubler & Ross mourning was also presented to prepare for the way they will reach the acceptance of their relative's illness and to know what stages of psychological and emotional state they've gone through so far.



(Source: <https://www.psychom.net/depression.central.grief.html>)

Finally, a presentation was made by the trainers on “Ways to Manage the burden of family caregivers-Recognition and management of multiple roles which the caregiver has “ and the participants were trained in ways of managing the burden arising from chronic care such as keeping a diary of activities, psychoeducation, prioritization of needs and roles, techniques for managing competitive responsibilities, etc. to be prepared and to protect their mental and physical health but also to be able to understand the other members of the family who due to older age and long-term stress are more often burdened and this makes communication with younger caregivers difficult

In the second meeting with family members, the above structure was followed but with more emphasis was placed on understanding the importance of burden management, the need to share responsibilities and obligations with younger family members to train young people in care, to prepare them and in order for the older caregivers to have a little more free-time. Their thoughts and feelings were discussed regarding the non-recognition of their fatigue by young caregivers and their refusal to be more actively involved in care. Finally, both groups of participants recorded the communication difficulties between them in order to be used in role playing in the next meeting and to strengthen their communication skills.

## THIRD SESSION RESULTS

In the 3rd session, ways of more efficient communication were presented, and the attendees were trained on implementing specific techniques that were given. The 3 Communication Techniques were:

- Collaborative dialogue;
- Active listening;
- Communication based on empathy.

Initially, the facilitators presented the material “Enhancing the skills of self-care of caregivers of Chronically Ill Patients” where self-care had to do with better communication and benefits to ourselves and then to the smoother operation of the family caring for a chronically ill. Based on the communication techniques, examples of their use were given through role playing and description and discussion of incidents. Both groups gave feedback on how much they believe that these techniques will help them throughout their lives and the roles they have and not only in the care and better communication within the family. The young caregivers mainly mentioned the difficulty in expressing their feelings to the older ones as they were guilty and did not want to put up even more pressure on the other members of the family. On the other hand, older caregivers found it difficult to communicate their feelings because they felt that younger members would be burdened with thoughts, feelings, and responsibilities that which aren’t their age. So, the techniques above helped them to listen more to each other’s needs and to work with greater empathy according to the feedback given by the participants.

## FOURTH SESSION RESULTS

In the 4th and last session of the workshop, a presentation was initially made on the “Social Support Networks” for informal caregivers of the chronically ill. Through the presentation an extensive discussion was made on the need by the young caregivers, in collaboration with the rest of the family to seek sources of support both for the improvement of the patient’s care and regarding their own self-care. Afterwards, a summary of all that was presented during the session was made and a dialogue followed on the usefulness of the information provided and how much it can have a positive effect on the new caregiver’s relationship with the rest of the family for the benefit of the patient and the whole family.

The session finished with same questions asked during the 1st session and above presented, in order to evaluate the Workshop and the knowledge they gained from it and the feelings they experienced at the end.

According to the evaluation made before and after the seminar based on a standard questionnaire, the following were observed:

- Half of the participants did not know enough about the concept and the role of the young caregiver before the seminar, a fact which changed completely after the seminar as everyone noted that they know it, which indicates the influence of the workshop they participated in;
- In relation to the participants’ subjective perception of whether they easily expressed their feelings about caring relationships, it was observed that while before the seminar most considered that they had adequate communication with the rest of the family after the seminar, some reviewed highlighting essential communication problems that were also expressed during the seminar.
- In addition, according to the evaluation after the end of the seminar, most caregivers stated that they know the sources of support in the care they have access to and all of them stated that they learned something new from the seminar.

## CONCLUSIONS OF THE PILOT IN GREECE

All participants noted that they were satisfied with the seminar they attended and the information given to them helped them in their daily lives as caregivers and in the most meaningful and efficient communication with the rest of their family with the main goal of being able to understand their family member's feelings.

From the side of the moderators, the challenge was the coexistence of 2 different age groups (young carers and older family members) and the needed flexibility and adaptability to transfer knowledge in these 2 groups. The management of the conversation with both target groups of seminars was generally very good and something that helped for this was the interest of the participants in the educational topics. As a difficulty it could be mentioned the fact that the young carers in some cases, due to their non-participation in similar seminars in the past, needed more time to feel comfortable and be able to express their opinion and personal feelings about caregiving. On the other hand, the older members of the family, due to their greater involvement with the patient's care, sometimes went beyond the scope of the discussion and focused more on their own problem and how it would be solved. In both cases, however, the open dialogue and the delimitation of the participants for the purposes of the seminar contributed to the smooth running throughout the course and until its closing.



# ANNEX 6 - ADAPTATIONS AND PILOT IMPLEMENTATION IN GERMANY

The German partner DWBS, as the Italian partner, realised a consultative workshop instead of a participative workshop. The pilot phase was attended by 5 young carers and 1 adult family member. Feedbacks from the young caregivers were collected through a meeting in which the adult did not participate, but read the concept independently without monitoring and then sent written feedback to the facilitators.

The meeting with the young carers was attended by 5 (former) young carers: 3 of them participated on-site, 2 of them digitally via Zoom. The 5 former Young Carers, aged 19 to 27, participated in a discussion to talk about the concept for the workshop. For this purpose, the participants received the concept in beforehand in order to discuss and give feedback on this concept.

The former Young Carers have a sibling or a grandparent in need of care. Since all young carers no longer live at home, they are no longer involved in the care situation or are involved at a distance. The family member involved is a woman suffering from a disease who also has her two children, but the mother's disease being the most prominent.

In order to meet as much as possible, the reality of young German caregivers, before proceeding with the pilot implementation of the workshop, adaptations were made to the original workshop concept based on the suggestions of some social workers involved in two counselling meetings. On the basis of what emerged from the two meetings with professionals for the adaptation to the German context, it was decided to invert session 1 on needs with session 2 on emotions and the order of the topics of the sessions was therefore as follows:

- S1. Our emotions,
- S2. Our needs,
- S3. Our communication,
- S4. Our path together.

Based on the comments of the social workers, the following changes were made:

## **Session 1 - Our emotions**

- The emotion collage activity was not carried out in order to devote more time to other activities;
- Blackout Poetry and Question Box activities were skipped to have more time for the other activities.

## **Session 2 - Our needs**

- The iceberg activity was also used in the needs session to understand which needs are already openly communicated and which are not within the family.

## **Session 3 - Our communication**

- Instead of introducing the different types of communication, the 4 sides of a message are introduced. The four sides of a message Model by Friedemann Schulz von Thun is a model of communication psychology. This model will be used to describe a message under four aspects: Factual content, self-revelation, relationship and appeal. This model can help to understand how communication is working and why two people understand the same statement very differently. The principle is explained quickly and easily through examples and shows how what is said

works on different levels. An introduction to non-violent communication was also introduced;

- As a variant of active listening, a moment was proposed to express the feelings and needs from sessions 1 and 2 in a communicative statement, supported also by the previous activity of the 4 sides of a message model;
- The Question Box activity was skipped to have more time for the other activities.

#### Session 4 - Our path together

- The last session is about reviewing what has already been done. Based on this, the family can now start to act. So first of all, the facilitators look at the iceberg again, the possibility was offered to rearrange what was written at the beginning;
- Instead of the question box, it was suggested to create a family poster by writing down common goals and wishes. For this the family is given a large poster with four columns. The emotions are stuck in column 1. In column 2 the needs that arise from them and in column 3 the wishes for the future. From these, the family should now formulate goals for the care situation and write them down in column 4. In this way, the family can take the result home with them.
- An action plan is to record strategies on how the emotions and needs of the individual participants can be taken into everyday family life and implemented. In order to be able to implement the wishes and goals in the long term and to strengthen the effect of the workshop, monthly appointments are negotiated with the counselling centre in order to accompany the goals and wishes and to be able to adapt them if necessary. In addition, the offer of a group exchange is made.
- On top each family gets an emotion traffic light at the end, to better manage their own emotions and those of the other family members. An emotion traffic light, like a traffic light, shows the colours green, orange and red. Green stands for positive/good, orange for neutral and red for negative/bad. This can be hung up at home and each family member can pin their name on one of the colours. The names can be moved at any time and so each family member knows how the other is feeling and one can adapt the way of communication to the other person's emotional state or better understand why someone reacts this way or that way.

## FORMER YOUNG CARERS MEETING RESULTS

The workshop conducted in Germany and adapted to the context on the basis of the social workers' suggestions was appreciated by the participants, who considered it useful and supportive.

Concerning the first session on emotions, young carers suggested not to ask to talk honestly about their emotions at the beginning and in the joint session, because it is not obvious that they have already talked about it in the family. Instead to reflect the feelings in the group, everyone should also write down an emotion for themselves. But no one has to put the emotion on the iceberg in front of everyone else. It is enough if everyone classifies it for themselves. Another suggestion was to leave the iceberg up for the whole workshop, so that you can add your emotion when no one else is in the room and you are undisturbed. They added that it would also be useful to use picture cards to express oneself (e.g., with emoji or emotion cards). However, they felt that addressing their emotions with the iceberg and then ending the session was a very abrupt end if session 1 and session 2 did not take place one right after the other. If session 1 is a stand-alone session, then an abrupt ending could ensure that a negative feeling is left with the participants. Therefore, one could consider having the second session follow. If this is not possible, the conclusion could be to talk about what the strengths of their family could be. Everyone names a strength and the participants go home with a better feeling.

Participants were interested in what was discussed in terms of content at the beginning of the session. They think it would be good to specify the content here. Therefore, they suggest better design as they transition from session 1 on emotions to session 2 on needs. They also suggest not repeating the iceberg activity but rather giving families methods to implement, such as the complaint box or weekly meetings

Of session 3 the suggestion of the 4 sides of a message was appreciated and was relevant in daily life, especially when things need to be done quickly. For the activity "Effective communication" it would be good to give the families a codeword. The family members can then say this when everything becomes too much for them or they do not feel understood.

During the final session participants considered that showing the iceberg again is good, but it should not be rearranged because it can be a bad feeling when you might not be able to rearrange anything. They suggested instead to make the iceberg a more interactive poster that hangs in the room as a permanent medium for the whole workshop, so emotions can be secretly attached or emotions can “wander” between sessions.

Overall, all former Young Carers think that the workshop is a great offering and agreed that it would have saved them a lot of suffering if they had been able to do such a workshop with their family in the care situation.

The adult involved commented that the iceberg idea is great and thinks is very exciting to see which feelings are under the surface. Also, she considered that this activity may hold great potential for conflict, but also real opportunity for change in the entrenched family system. She commented also that the estimated time for the whole workshop seems too short and that, in her opinion and based on the concept proposed, it is difficult for the young person to be the focus of the workshop.

The evaluation form for IO2 was also discussed with some of the young carers (4 participants). For this purpose, the participants were asked to put themselves in the position they were in before reading the concept and what their impression was after reading the concept. The questions were presented by the workshop leaders and the facilitators answered the questions in turn. As not all participants wanted to/could take part in the questionnaire, there are only 4 questionnaires. The questionnaires were collected with the aim of getting a rough statistical impression of how much the workshop leads to a reduction in the use of young carers.

In the answers to “PRE-EVALUATION QUESTIONNAIRE” and “POST EVALUATION QUESTIONNAIRE” it is clear that participants in all areas are more confident after discussing the workshop and are encouraged to communicate openly and be aware of their situation. Especially in the area of “Awareness of the support” there was positive feedback.

All questions about the workshop itself were answered with an “Agree” or “strongly agree” by a large majority. This shows that the respondents found the workshop qualitatively valuable. In addition, the survey shows that they believe the workshop will have a lasting positive effect on the family and care situation.

It is interesting to see that just by imitating the questionnaire and discussing the workshop concept, a positive and more optimistic attitude could be seen among the young carers.

## CONCLUSIONS OF THE PILOT IN GERMANY

Based on our research in the together project, our daily work with young carers and their families and with professionals, we know how difficult it is for young carers to identify themselves and to be open about their situation to the outside world. In order for this to happen and for young carers to be supported in their situation in the best possible way, it is indispensable to create an environment that the whole family can make use of.

The basis of a workshop that includes all family members, looks at the current situation, shows ways of communication and therefore enables solutions for existing or future problems is a wonderful instrument.

In working with professionals who are in daily contact with Young Carers, it quickly became clear how useful a workshop concept can be in helping to advance family-oriented work and make their own work easier. It was important for the interviewed professionals to emphasise that, of course, adjustments have to be made in the implementation depending on the family, but that the workshop is a good roadmap to work with on a regular basis.

For us, the feedback from (former) young carers was particularly important, because they themselves know best what they need or would have needed and which design would have suited them. We received a lot of positive feedback, which made us very happy. It is particularly interesting that the demand from the participants was incredibly high. They also pointed out that flexibility in the concept was necessary depending on the family, but that the general offer and the given



structures would have been a great learning experience for their own situation.

We think that the concept is a good tool for professionals working with young carers to find solutions, build trust and work with these families in the long term. We see a big impact for the families and will spread the concept widely.



