

4.1.13 Young Carers

Context

Young carers are defined as under 18 year olds who carry out significant caring tasks for a family member, often assuming a level of responsibility which would normally be associated with an adult. These caring tasks and duties can have an adverse impact on the day to day wellbeing of the young person, as well as having a long term effect on development and outcomes. Under the Children Act 1989, young carers would be defined as children in need.

The 2011 Census identified a 7.6% increase in the number of young carers in Yorkshire and Humber. Previous estimates from the 2001 census provided an estimate of 2500 young carers. If the increase is applied this provides a new figure of 2,690. Estimates are problematic as census data relies on self identification and young carers and families in certain circumstances are reluctant to do this (parental substance misuse).

The 2001 Census (ONS, 2001) estimated there to be 175,000 young carers nationally, equating to in the region of 2500 young carers in the Bradford district¹. This is likely to be an under-estimate due to the low recognition of the caring roles taken by children and young people in relation to parental substance misuse. There are estimated to be 250,000-350,000 children of problem drug users in the UK equating to about one for every drug user. (Advisory Council on the Misuse of Drugs, 2003)². Between 780,000 and 1.3 million children in England are affected by parental alcohol problems (Prime Minister's Strategy Unit, 2004)³.

The impact of being a young carer is evident across all areas of a young person's life. The lasting effects of having been a young carer can also continue to have a negative impact into adult life. The refresh of the National Carers Strategy "Recognised, Valued and Supported: Next Steps For The Carers Strategy" (Department of Health, 2010), identifies four priority areas for all carers including young carers^{4,5}

- Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset both in designing local care provision and in planning individual care packages.
- Enabling those with caring responsibilities to fulfil their educational and employment potential.
- Personalised support both for carers and those they support, enabling them to have a family and community life.
- Supporting carers to remain mentally and physically well.

The strategy also identifies the need to do more to identify and support young carers. It identified "Working Together To Support Young Carers" (Memorandum of understanding) as being important in improving the response of all services to young carers – with specific reference to schools and other education settings.

In Bradford "Working Together To Support Young Carers" has been signed off by heads of service for adult and children services^{6,7}. A strategy group has been established and reports to the Children's Trust Board through the Vulnerable Children strategic lead. An action plan is in development to ensure good practice with young carers is embedded in services across the District^{6,7}.

The overriding priority of the vision for young carers in Bradford is prevention - ensuring that young carers are actively protected from excessive or inappropriate caring and that parenting roles are supported. This vision has been central to preparing for the anticipated operation of the Joint Memorandum of Understanding between Directors of Children's and Adult's services.

Agreement between Statutory Directors to prioritise better support and outcomes for young carers and families will require effective partnership working with schools, health, housing, the community and

voluntary sector, families and local communities. This should include robust and responsive arrangements for working together to ensure early identification of young carers and timely and personalised responses to their situation.

National and local targets

The government's aim for Young Carers is that they should have the same opportunities and achieve the same outcomes as other children and young people. (DoH, 2008)^{4,5,8}

- By 2018 professionals in front line services will have the knowledge they need to identify problems early and encourage young carers to come forward to access the help they may need.
- Preventative measures, including early identification and support, will ensure that children do not experience negative outcomes as a result of inappropriate caring.
- The refresh of the National Carers' Strategy refers to the potential role of community budgets for families with multiple problems, and the significance of the personalisation agenda.
- Increased awareness and understanding of young carer issues, leading to more appropriate responses within the school setting.
- Development of a whole family approach, known as "Think Family" practice⁹, to ensure that young carers and their families receive appropriate and timely support.
- Support for, and understanding of, young carers' needs will be embedded in universal and targeted services.

Locally, the Bradford District Carer's Strategy identified the need to increase support to young carers⁴. This will be most effectively achieved through:

- Increased understanding and support from universal services; supported through input from the specialist service (Bradford Young Carers).
- Improved family focussed working; particularly in terms of parental substance misuse and parental mental illness.

Relevant strategies and local documents

- The Carers (Recognition and Services) Act 1995
- The Carers and Disabled Children Act 2000
- Carers (Equal Opportunities) Act 2004
- The Children and Young Persons Act 2008
- Carers at the heart of 21st-century families and communities 2008
- Bradford District Carers Strategy 2008 – 2013
- Health Equity Audit of Children and Young People in Bradford District 2009
- Children and Young People's Plan 2011 – 2014
- Children and Young People's Health and Lifestyle Survey 2010
- Working Together to Support Young Carers Memorandum Bradford District 2010

What do the data tell us?

The most common reasons for children and young people having to provide care are parental mental illness, parental physical illness or impairment and parental substance misuse. In 2012-13 there was a significant increase in the number of young carers accessing the service who cared for a parent with

substance misuses issues. Reasons for caring recorded by the local specialist service (Bradford Young Carers) are:

- Parental Mental Illness – 30-35%
- Substance Misuse – 25%
- Physical Illness - 15-20%
- Physical Impairment - 15-20%
- Learning disabilities – 10%
- Sensory Impairment - less than 5%

Statistical profiles of the 500 young carers using the service show that:

- Males and females are equally likely to become young carers.
- The mix of different ethnic heritage groups is broadly similar to the ethnic profile of the district population as a whole. Although there appears to be an under representation of young carers identifying themselves as Black African or Black Caribbean. The specialist service is currently exploring ways to address this.
- Approximately one third of young carers that access the service are caring for a parent, usually in a lone parent situation, who has mental health problems.
- Almost two thirds of young carers are caring for their mother.
- There has been a continued increase in the number of young carers caring for a parent who has substance misuse issues.

Future needs and gaps in provision

Young carers can experience ^{7,10,11}

- Poor educational attendance and attainment.
- Poor emotional health and wellbeing.
- Bullying and victimisation by peers at school and also within the local community.
- Emotional and physical neglect including lack of appropriate parenting.
- Potential physical harm due to e.g. manual lifting or challenging behaviours of the person receiving care.
- Compromised parenting and increased family stresses due to mental illness or substance misuse.
- Increased likelihood of living in a lone parent, low income, inadequately housed household.
- Increased risk of being NEET.

The only dedicated service for young carers in the Bradford district works with around 500 young carers annually. There has been a slight change in source of referral –still over 80% from statutory services, but a slight reduction from children’s social care (now over 40%), and an increase from health sources (mainly school nurses). The service has achieved increased capacity with a more outcomes focused and family focused approach to service delivery. Developing the role of universal services in providing accessible support to young carers will enable the specialist service to focus on those young carers with the highest level of need.

Summary of priorities

Adult’s and children’s services must work effectively in responding to the needs of young carers and their families, through a “Think Family” approach to develop ⁸:

- shared understanding of the needs of young carers amongst partners and a multi agency approach to meeting their needs.
- early identification and family assessment of young carers' physical and mental health, needs using 'Think Family' approaches and the Bradford 'Threshold of Need' guidance
- periodic audit of the impact of 'Working together to Support Young Carers'
- consistent use of safeguarding protocols where there are inappropriate levels of care and/or where a young carer is at risk of significant harm.
- consistent information, advice, advocacy and support to young carers.
- consistent use of the principles of personalisation, to support young carers to identify their needs and develop a personal plan to address these needs.
- a named, trained staff member in schools with lead responsibility for young carers. Training and consultation will be provided by the Young Carers Service.
- sign-up by all schools to the Young Carers School Policy and increase number of home-school agreements.
- mainstreaming of the targeted work delivered under the PHSE education input. to address under achievement and poor attendance.
- clear partnership governance and lines of accountability for Young Carers Strategy Group.
- an action plan, with clear review arrangements, to ensure effective implementation of the Memorandum of Agreement.
- opportunities for Young Carers and their families to influence service design and delivery.

References

1. Office of National Statistics (2001) Census. London: ONS.
2. Advisory Council on the Misuse of Drugs (2003) Hidden Harm: Responding to the needs of children of problem drug users. London: Home Office.
3. Prime Minister's Strategy Unit (2004) Alcohol Harm Reduction Strategy for England. London: HMSO.
4. Department of Health (2008) Carers at the heart of 21st-century families and communities. London: Crown Copyright.
5. Department of Health (2010) Recognised, valued and supported: Next steps for the Carers strategy. London: Crown Copyright
6. Bradford Young Carers Service (2010) Working Together to Support Young Carers Memorandum. Bradford: Bradford Young Carers Service .
7. Bradford Metropolitan District Council Bradford District Carers Strategy 2008 – 2013, Bradford:.
8. Department of Health (2004) Carers (Equal Opportunities) Act. London: HMSO.
9. Social Exclusion Task Force (2008) Think Family: Improving the life chances of families at risk. London: Cabinet Office.
10. Audit Commission (2010) Against the Odds: Re-engaging young people in education, employment and training. London: Audit Commission.
11. Davies M. (Ed), (2000) The Blackwell Encyclopaedia of Social Work. Oxford: Wiley-Blackwell.