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Available to download from www.youngcarers.co.uk

Introduction

The Upbeet project is part of Dundee's Young Carers Project. It works with young adult carers aged 16-21, offering person-centred support, confidence-building activities, and help to access further education, training and employment. A young carer is someone who helps look after a family member who needs care due to illness, disability, mental health issues or addiction.

As young adult carers have been identified as being at higher risk of becoming NEET (Scottish Executive, 2006 p.9), the focus of the research was to identify what young adult carers perceive as the barriers to employment and education which they face. The participants discussed their experiences of school, further education and work, as well as the support they had received and what they considered needed to change, in individual interviews and a subsequent focus group.

The research coincided with a conference on the same topic organised by Upbeet in February 2010 and these findings are to be distributed with the conference report. It is hoped the findings will benefit the project in terms of evaluation of this model of service delivery, and developing the service to respond effectively to the identified needs of young adult carers. It may also make a contribution to the limited literature on this 'invisible' group of carers.

Literature Review

In reviewing the literature, it became clear that young adult carers "have been almost totally ignored in research" (Levine et al, 2005). While there is a growing body of research on carers and young carers (under-16), the young adult group has been termed "invisible" (Becker & Becker, 2008 p. 10). Professor Saul Becker is a lead researcher in this area and his website (www.saulbecker.co.uk) has been a useful resource throughout the course of the project.

'Young Adult Carers in the UK: Experiences, Needs and Services for Carers aged 16-24' (Becker & Becker, 2008) reports on the experiences of this group of carers under a number of themes, including education at school, college and university. The research was carried out across Britain making it the most comprehensive piece of research on this group to date. Almost one quarter of the participants were NEET – not in education, employment or training.

Two previous studies by Dearden and Becker (2000, 2004) highlight the impact of poor school attendance and attainment on young adult carers. Similarly, Yeandle and Buckner (2007) found that "Among young adults aged 16-24, caring reduces the likelihood of being a student and thus participating in further or higher education". Two reports by young carers projects (Action for Young Carers, 2005; Barnardos, 2007) found that many young adult carers think that their "caring responsibilities will be a barrier" to accessing employment.

This is acknowledged by the Scottish Government in the More Choices, More Chances strategy (2006), which recognises young carers as a 'targeted sub-group' who are at higher risk of becoming NEET. It states that about 5.8% of 16-19 year olds in Scotland are young carers and NEET (p.9). The evaluation framework for young carers projects 'How good is our work for young carers and their families?' (HMle, 2008) states that young carers should not have to face "barriers to achieving their fullest potential in education, employment and lifelong learning". This echoes one of the priorities for the community learning and development sector, "to facilitate (young people's) personal, social and educational development" (Scottish Executive 2004).

Methodology and Approach

Given the small scale of the inquiry, and in keeping with the person-centred ethos of the Dundee Carers Centre, a predominantly qualitative approach was taken. Our interest was in exploring participants' personal experiences and their subjective perception of their situation, and this approach was more likely to yield rich data rather than cold facts (Denscombe, 2007). As this is more difficult to validate than quantitative data, it was necessary to triangulate the research; through a literature review, face-to-face interviews and a focus group.

In the planning stage, an interview schedule was devised and piloted with one young adult carer and an Upbeet worker. It was felt that interviewees may be reluctant to discuss the personal nature of their caring role with someone they did not know, so it was decided to give them the option of having their key worker present during the interview and to not ask directly about their caring role. The Upbeet worker raised the issue of literacy, so the information and consent form were rewritten in plain English and were also given verbally where required. It was decided to negotiate access to the young people through the Upbeet workers, who acted as 'introducers'.

There are currently 15 young people engaged in Upbeet, of whom consent was obtained from nine and seven were actually interviewed. A semi-structured approach was used to engage participants in conversation, asking open-ended questions which generated detailed answers, but keeping broadly to the same topics. Three of the participants subsequently took part in a 'mini' focus group.

The study adhered to the ethical guidelines of the University of Dundee, as it was conducted as part of the researcher's BA in Community Education course.

Main findings

Of the seven participants, three were in further education, one in employment combined with college, three were not in employment or education (neet) and one was still in school (so-called pre-neet). On average, the participants left school in 4th year. Only three had sat their Standard Grade exams.

“I’m just rushed off my feet, cooking at work and then cooking at college whilst helping out at home”

Experiences of school

All but one of the young adult carers interviewed reported poor attendance at school. Caring responsibilities were only one of the reasons cited for this. The most frequent reason cited was difficult relationships with peers, including bullying, and teachers. Three of the participants left school without qualifications and two reported issues with literacy. Five reported that their negative experiences of school had influenced their attitude to or ability to access further education.

“They wanted rid of us. The teacher actually gave me the form and made me go home and get it signed.”

Further education and training

All six school leavers had accessed some form of further education or training. Three participants were currently attending college. Of these, two reported struggling with the demands of the course. One was unable to obtain financial support for college due to being in receipt of carers allowance. Positive experiences of college included learning new things and meeting new people. Three participants reported that their college was more supportive of them than their school had been. One participant reported that their poor attendance at school almost jeopardised their chance to access college. Another cited their literacy issues as a barrier.

“They had to seriously consider letting me on to the course because my attendance was that bad at school”

Employment

Three of the participants had experience of employment, only one of whom was currently working. Three were currently on benefits but one of these was soon to take on a part-time job and another was waiting to hear back from a second-round interview. Two of the young people expressed an interest in apprenticeships but had found these difficult to access as there are not many opportunities. One expressed no interest in working due to her own health issues but is engaged in regular voluntary work as well as her caring role.

One participant felt that it was better not to tell potential employers about their caring responsibilities as it would make them less likely to give them the job.

“because you’re a carer they’re like there’s no point in hiring her because she’s gonna be off a lot”

Sources of support

Two participants reported a teacher or tutor being supportive. Two cited family. Other agencies such as Barnardos, the Carolina Trust, the Attic Youth Project, Careers Scotland and Job Centre Plus were cited. One cited a psychologist. All participants reported increased confidence and self-esteem and reduced social isolation as a result of their involvement in Upbeet. Five reported confidence as the biggest difference that being involved in Upbeet had made for them. The others reported feeling *“less stressed”* and *“more comfortable with myself”*. Involvement in Upbeet also helped to reduce social isolation.

“Before Upbeet I was very, didn’t have any confidence, didn’t talk to anyone, y’know about two year ago probably if you’d done this sort of interview, I wouldn’t of spoke to you.”

Barriers

Poor school attendance, lack of qualifications and literacy issues were cited as barriers to accessing education and employment. The current economic climate was seen as a barrier in terms of employment opportunities. Other barriers identified included lack of money, lack of motivation, poor relationships with peers (including bullying) and tutors, lack of confidence and self-esteem, and the attitudes of employers, teachers, tutors, Job Centre staff, peer groups and the young people themselves.

While none of the young carers interviewed had anything negative to say about their caring role, the focus group members expressed resentment at other family members not sharing the caring responsibilities, feeling that this was a significant barrier to them being able to access education and employment opportunities as well as social activities.

What needs to change?

Financial hardship was one of the cited barriers to accessing further education. Households with a disabled adult are 50% more likely to live below the poverty line (Disability Alliance, 2004). This reflects Becker & Becker's finding that "many of the young carers in our study will be brought up in poor families" (2008, p72). This suggests that young adult carers require additional financial support in order to access further education.

"you feel kind of bad when your pals are buying your dinner or buying you fags or whatever"

One participant suggested that young adult carers should get a 'badge' to make the Job Centre and other support agencies aware that they may need additional support. Becker & Becker concur that service providers should be "more alert to the specific needs of young adult carers" (2008, p.80). As this report was being compiled, Job Centre Plus has announced the 'Work Focused Support for Carers' scheme to help

carers to combine paid work with their caring role by providing training and funding respite care.

“They treat you like you’re everybody else. You know the ones who don’t want to work and can’t be arsed. They just treat you like one of those and I do want to work.”

The impact of poor school attendance was identified as a major barrier to accessing further education and employment. Two participants had left school with significant literacy issues. This suggests that resources need to be targeted at identifying young carers who are pre-neet and supporting them to remain in school and maximise attendance. This would require the involvement of young carers projects, teachers, and family support workers to ensure the causes of poor attendance are addressed and the young carer is able to focus on school and improve their educational attainment.

Upbeet as a Model of Service Delivery

While there are mainstream services for adult carers and a growing number of young carers projects supporting carers up to age 16 or 18, traditionally young adult carers have tended to disengage from young carers projects without moving on to adult services (Becker & Becker 2008, p.61). This transition period takes place at a time when young adult carers are particularly vulnerable to becoming Neet. Becker & Becker (2008, pp 61-68) put forward different models of service delivery which could be used to engage young adult carers (see appendix). Upbeet could be described as a ‘16+’ model, as the service currently works with young people aged 16 to 21. It is also a ‘specialist support service’ as it works specifically with young carers who are at risk of becoming Neet.

Though the scale of this study was small, it represents nearly half of current Upbeet service users ($n= 15$) and as such can serve as a useful evaluation of the project.

Among participants interviewed there was universal satisfaction with the service provided and all reported either increased confidence or reduced social isolation as a result of their involvement with Upbeet.

“if it wasn’t for Upbeet I’d never have gone to Fairbridge and that and I wouldn’t have had so much confidence and that and meeting new people and that cos I used to hate meeting new people”

The project also provides practical support to help young adult carers access further education and employment, such as CV building and interview training. In 2009-10, out of 28 who engaged, 19 Upbeet participants entered a ‘positive destination’ in education, employment or training, as defined by the Dundee Employability Pipeline (Fairer Scotland Fund, 2010).

“Upbeet’s helped us like with application forms and phoning up jobs and things like that”

In addition, the Young Carers Project has a Family Support service which also works with the families of Upbeet participants. This allows the project to offer a number of supports from one, rather than a range of, agencies. The service is integral to the project’s work with young adult carers as it addresses the impact of caring on the whole family, and ensures their parents have all the support they need and are entitled to. This holistic approach can help to alleviate the responsibilities of the young adult carer and improve relationships within the family.

However, the project’s remit is to work solely with 16-21 year olds who are at risk of becoming Neet. This does not serve the needs of young adult carers who are not at risk, who begin caring after this age or are in full-time work. Young adult carers aged over 21 are a group not catered for by traditional adult carers services. As this is an identified gap in service provision, Dundee Carers Centre may consider undertaking further investigation into how best to engage with this group of young adult carers.

Conclusions

The focus of the research was to identify barriers to education, employment and training experienced by young adult carers. The barriers reported by participants, such as poor school attendance, leaving school early and lack of confidence, reflect Becker & Becker's finding that the key reasons for young adult carers becoming Neet are "low self-confidence and not having the necessary qualifications" (2008, p.3).

As participants in this study reported an increase in confidence as a result of their involvement in Upbeet, it is suggested that this may serve as an appropriate model of service delivery which could be replicated by other young carers projects working specifically with this group.

Education

Though the scale of the study was small, the incidence of exclusions among participants suggests that schools may be more likely to deal with students punitively than to identify the root causes of problem behaviour. This echoes the recently published findings of a survey by The Princess Royal Trust for Carers and The Children's Society, which found that "many young carers feel that they are unsupported or misunderstood by their teachers" (2010).

Effective awareness raising about young carers issues in schools may help to address this. In Dundee, the recently approved Dundee City Council Education Department's Policy on Provision for Young Carers (2009) contains provision for closer working between schools and the Young Carers Project. It is hoped that this will lead to improved outcomes for young adult carers.

Although lack of financial support was only cited by one participant engaged in further education, Upbeet key workers report young adult carers having significant difficulties with this, particularly Educational Maintenance Allowance (EMA). Issues include late payments, delays with bursaries due to receipt of Carers Allowance, concern about

EMA impacting on the cared for's Disability Living Allowance, and restrictions on the type of courses young adult carers can access, such as part-time study which would fit in with their caring role. To address this, the college or training provider and Upbeet needs to work in partnership to support the young person and avoid late payments due to attendance and to address concerns about welfare rights. There should also be clear information and flexible options regarding financial support for full- or part-time study.

Employment and training

As there were so few participants with experience of employment, no conclusions can be reached in relation to employers. However, it is suggested that flexibility is essential for employees who have caring responsibilities. Under current employment legislation, employees may take unpaid leave only if they care for a dependant (Employment Rights Act, 1996). Certain categories of carers have a statutory right to request flexible working hours, but only if they have been in the employment for 26 weeks (Employment Act, 2002). These provisions are unlikely to apply to a young adult carer as a) the person they care for is not their dependant and b) they may be entering employment for the first time. Given the increased competition for jobs in the current economic climate, this could contribute to making young adult carers less employable if they are honest about their caring role.

As part of its 'Work Focused Support for Carers' perhaps Job Centre Plus could provide financial support for respite care for young adult carers taking up employment which would relieve them of some of their responsibilities and enable them to focus on work.

However, it should be recognised that young adult carers should not be 'coerced' into employment. For some, caring full-time for a family member and receiving benefits such as Carers Allowance may be the best choice for them to make at this time. Engaging with projects such as Upbeet can help to ensure that they receive the support they need and are not isolated because of their role.

The future

Despite the many barriers reported by participants, when asked about their plans for the future nearly all of them felt positive (expressed in three words):

“It’s looking good” “A good future”
“My own restaurant” “Not looking up”
“Very, very bright” “Better, stable life”
“Famous, happy, wealthy”

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