

Young Adult Carers and Employment

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Acknowledgements

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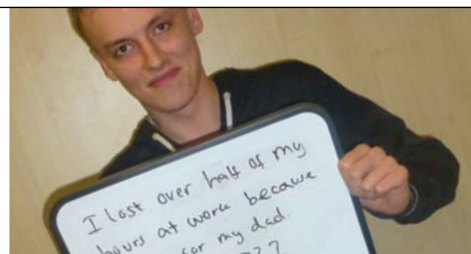
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Summary



In 2013, Carers Trust commissioned the University of Nottingham to undertake research to examine the experiences and aspirations of young adult carers with regards to school, further and higher education, and work. A total of 362 people viewed the survey; and responses from 295 young adult carers aged 14–25 were analysed. This is the second in a series of reports¹ to be published across 2013 and 2014 looking at issues related to school, college and university, employment, those not in work or education, and gender.

In this report we explore the experiences and perceptions of carers who are in employment, or not in employment, education or training (NEET) (n=77).

Young adult carers are often an overlooked group with limited services that meet their needs and little awareness among professionals and the wider public about the challenges they face.

The 2011 Census identified more than 375,000 young adult carers in the UK aged 14–25 who are providing support and assistance to their families and friends. Young adult carers take on significant additional responsibilities which can make the transitions from childhood into adulthood especially complex and challenging. The difficulties they experience as a result of their caring role can have significant and long-term negative impacts on their engagement with education and employment and their overall physical and emotional wellbeing.

It is necessary to understand how their caring roles impact upon their working lives or even prevent them from having working lives, so that appropriate services and support can be developed and provided for them.

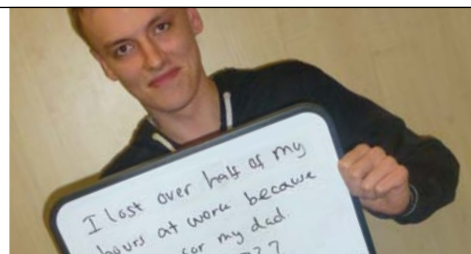
1 The first report in the series, Sempik, J and Becker, S (2013), *Young Adult Carers at School: Experiences and Perceptions of Caring and Education*, is published by Carers Trust.

Summary findings

- A survey of 77 young adult carers who had left school and were either in work, or NEET showed that, on average, they provided a ‘very high’ level of care². 27 of the young adult carers (39.1%) who responded did not think that their family were receiving good support and services.
- 45% reported that their own physical health was ‘Just OK’ or ‘Poor’, and over half (51%) reported having a mental health problem.
- Of the 77 respondents, almost half (49.6%) were unemployed. This represents 21% of the total young adult carers in the wider survey who were no longer at school (n=183).
- The most frequently reported highest qualification held by the respondents were GCSEs at grade D–G (28%). Of those no longer in education, only a small percentage (8%) of respondents had no qualifications. Qualifications of the rest ranged from GCSEs (49%) through to degrees (12%).
- Of the 37 respondents who answered the question, over half (54%) felt that they would have got better grades at school if it was not for their caring role.
- 87% (of 37 respondents) felt that they had not received good career advice at school; and that the advice did not take into account their caring role.
- Of the 38 respondents who had been to college or university, 11 (29%) had dropped out because of their caring role. This is four times greater than the national average for degree courses.
- Of the 39 respondents who were in work, 17 (44%) had chosen the job because it was not far to travel and they could continue to care; 38% of the young adult carers had also considered flexibility of working hours (so that they could care) when choosing their job.
- On average, young adult carers were absent from work for the equivalent of 17 days per year, and were late or had to leave early on approximately 79 days per year because of their caring responsibilities. This suggests that ongoing caring commitments can have a substantially disruptive effect on workplace attendance.
- 32 young adult carers in work (67%) informed their managers of their caring role, 41% of these reported that their managers were not supportive.
- Only a small proportion of the sample (six of the 77 respondents) were in receipt of any benefits. Many more would have an entitlement to some form of financial support but for whatever reason had not claimed, or had not received, any assistance.

2 The survey questionnaire included the psychometric MACA tool, Joseph et al (2009), *Multidimensional Assessment of Caring Activities* (London, The Princess Royal Trust for Carers). The tool is used to measure the extent of caring provided by young people; the mean MACA score of 19.2 indicated a ‘very high’ level of care.

Recommendations



Schools, colleges and training providers

Schools should establish a clear framework of support for young carers, which is embedded into the schools' policies and communicated to parents. There should be a named carers lead within schools and each young adult carer should have an individual plan to address any barriers to education.

Targeted career advice should be available to young adult carers which addresses their caring responsibilities, recognises any additional skills they have developed in their caring role and supports them to consider all available options.

Young adult carers should be encouraged to identify the transferable skills that they use in their caring roles and to record and develop these so they might use them to their advantage in the workplace.

Colleges and universities

Early intervention is needed to identify young adult carers at college and university who are in danger of dropping out or not fulfilling their potential, and to provide them with appropriate support in good time.

Admissions policies should identify caring roles so that young adult carers can be identified early and support such as flexible deadlines and access to discretionary funding can be provided to enable them to achieve their full academic potential.

Employers

Businesses should be encouraged to create easily accessible procedures so that young adult carers can inform them, in confidence, of their caring roles. Organisations which support young adult carers have a role to play in drawing up guidelines for this, and in raising awareness among employers.

Employers and apprenticeship and traineeship providers should understand the challenges faced by young adult carers and adopt workable policies which clearly define the support and flexibility available to the young adult carers whom they employ.

Assessment and support

Young adult carers should be identified early and receive a regular assessment and review of their own needs to ensure that their caring role does not have a negative impact on their education, health and wellbeing.

The care and support needs of the person being cared for must be adequately met to enable the young adult carer to participate fully in education, training, and employment so that they achieve their full potential.

Young adult carers and their families need high quality information and advice about their entitlements to welfare benefits, and to the health and social care support available to them, including rights to assessments.

Health professionals, child and adolescent mental health services, and mental health services need to recognise the mental health needs of young adult carers and prioritise them for support. Young adult carers should be identified as a priority group in key initiatives, for example, in increasing access to psychological therapies.

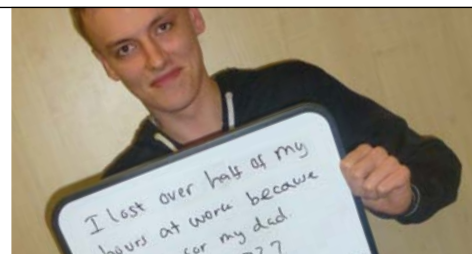
Carers projects

Young adult carers projects should help young people to access the benefits to which they are entitled by providing information and by helping them with the application itself. A guide to the benefits system especially for young adult carers is needed.

Research

Further research is needed to explore the relationship between the extent and context of caring and its impact on academic and employment success.

Background



The notion of a young adult carer was first identified and proposed by Becker and Becker (2008). Their study recognised that young adults with caring responsibilities were a special group that required special attention and services. These young adult carers are in a position of transition – between school and work; between school and college; or simply leaving school. Such transitions are hard for all young people. However, they are especially difficult for young people who spend much of their time caring for others in their family.

Much has been written about the difficulties facing younger carers (that is, those under 18) (Aldridge and Becker, 1999; 2003; Dearden and Becker, 1995; 1998; 2004) but relatively little is known about young adults who find themselves with caring responsibilities. It is necessary to understand how their caring roles impact upon their working lives or even prevent them from having working lives, so that appropriate services and support can be developed and provided for them. It is known that young adults (aged 16–24) with caring responsibilities are less likely to be in further or higher education than other young people in the general population (Yeandle and Buckner 2007, p21).

It is important to track the progress of these young people and to identify the hurdles that they face – and remove them if possible, or provide the young people with strategies for overcoming them. This research is part of that process. We have carried out a survey of almost 300 young adult carers aged 14–25, and have already reported on the experiences of those still at school (Sempik and Becker, 2013). This part of the study is concerned with those who are either in work, or are NEET.

The survey

The data were collected as part of an online survey of young adult carers conducted from April to August 2013. A total of 295 respondents provided information that was valid for inclusion in the analysis. We have previously analysed and published the data from those still at school (Sempik and Becker, 2013). This report deals with those 77 respondents who have left school and are either in work or NEET.

The sample

Of the 77 respondents, the majority (80.5%) were female. The mean age of all of the young adult carers who took part in the survey was 21.4, and there was little difference between the ages of the male and female respondents. The average age at which the young adult carers had begun caring was 10.6 (SD 1.4; $n=72$) and most respondents (56%) cared for their mother.

The survey questionnaire included the Multidimensional Assessment of Caring Activities (Joseph et al, 2009), a psychometric tool used to measure the extent of caring provided by young people. This psychometric instrument is used extensively to score the caring roles of children and young people. Levels of care provision are categorised as 'low' (MACA score <9), 'medium' (10–13), 'high' (14–17) and 'very high' (18 and above). Overall, the mean MACA score was 19.2 (SD 5.6; n=76) indicating a 'very high' level of caring by the young people in this sample.

The most common disabilities or conditions of those cared for by the young carers in this sample were physical disability and mental health problems (57% each) and long-term physical illness (46%)³, which also included terminal illness. 21% cared for someone with a learning disability or autism, and 14% for someone with drug or alcohol problems; or for older people. Four respondents in the sample cared for someone with dementia. The mean age at which they had started to care was 10.6 (SD 1.4; n=72). This shows that many of the young people in the sample had started caring before they started secondary school, and had cared throughout their teenage years.

More information about the sample is provided in the Appendix.

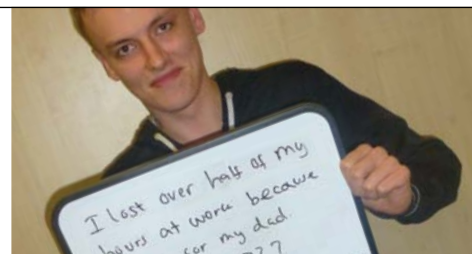
About Carers Trust

Carers Trust is a major new charity for, with and about carers. We work to improve support, services and recognition for anyone living with the challenges of caring, **unpaid**, for a family member or friend who is ill, frail, disabled or has mental health or addiction problems.

We do this with Network Partners – a unique network of 118 independent carers centres, 63 Crossroads Care schemes and 105 young carers services. Together we are united by a shared vision for carers – to make sure that information, advice and practical support are available to all carers across the UK.

3 Many of those cared for had multiple conditions, hence, the total percentage is greater than 100%. See Appendix for more details.

Research findings



Young adult carers' own health

Caring has well evidenced negative implications for the health and wellbeing of young people. The recent 2011 Census showed that the percentage of children aged 5–18 who reported their perceived general health as 'Not good' was higher among those providing **unpaid** care compared with those not providing it. Young carers providing 50+ hours of care a week were up to five times more likely to report their general health as 'Not good'⁴.

This research reflects the findings of the Census. Just over half the respondents in the sample (55%) considered their physical health to be 'Very good' or 'Good'. However, the remaining 45% perceived it to be 'Just OK' or 'Poor'. The proportion reporting their health as 'Just OK' or 'Poor' was greater among those who were NEET (53%) than among those in work (37%), however, the differences between the groups were not statistically significant ($p=0.20$).

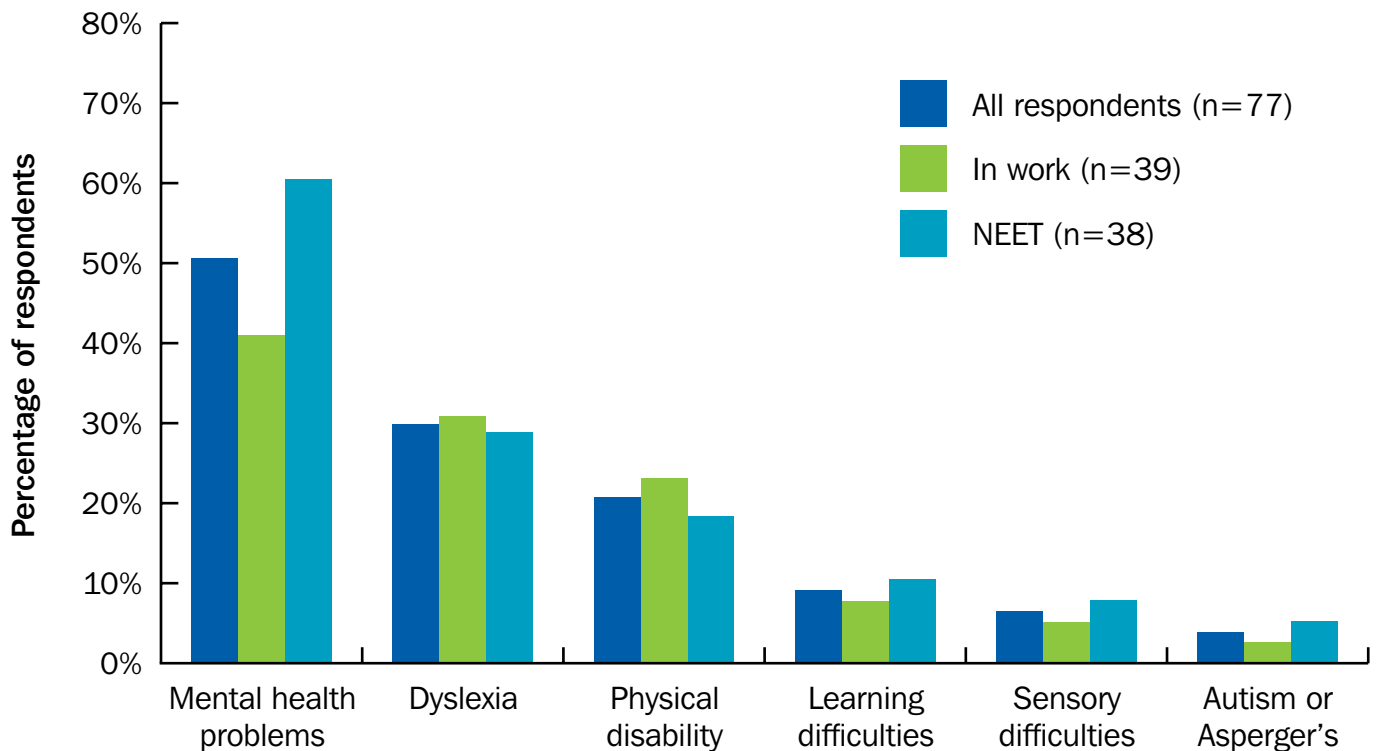
Perceived state of physical health of young adult carers

Perceived state of health	All respondents		In work		NEET	
	No	%	No	%	No	%
Very good	7	9.2%	6	15.8%	1	2.6%
Good	35	46.1%	18	47.4%	17	44.7%
Just OK	29	38.2%	12	31.6%	17	44.7%
Poor	5	6.6%	2	5.3%	3	7.9%
Total	76	100%	38	100%	38	100%

Over half of all respondents (51%) reported that they had mental health problems. The proportion was higher in those who were NEET (61%) than those who were in work (41%), although this was not statistically significant ($p=0.90$). Reporting of all other conditions was similar (see graph, overleaf).

4 2011 Census (www.ons.gov.uk/ons/rel/census/2011-census-analysis/provision-of-unpaid-care-in-england-and-wales--2011/sty-unpaid-care.html)

Health issues reported by young adult carers



Recommendation: young adult carers should be identified early and receive a regular assessment and review of their own needs to ensure that their caring role does not impact negatively on their education, health and wellbeing.

Recommendation: health professionals, child and adolescent mental health services, and mental health services need to recognise the mental health needs of young adult carers and prioritise them for support. Young adult carers should be identified as a priority group in key initiatives, for example, in increasing access to psychological therapies.

Experiences of education

Schools are ideally positioned to play a collaborative role in identifying and initiating support for young adult carers and their families. Young adult carers repeatedly communicate that they would like more support from their teachers and schools. While there are examples of schools implementing excellent practice, many others have limited or no support in place for this vulnerable group (Carers Trust, 2013).

37 respondents in the sample replied to questions about their experience of school. The majority (60%) reported that they had not enjoyed their time at school, but almost half said that they had done well. The great majority (76%) did not have any particular individual at school who recognised their needs and helped them. Similarly, 87% felt that they had not received good career advice at school; and that the advice did not take into account their caring role. Over half of the respondents (54%) felt they would have received higher grades at school if it were not for their caring role. However, there was no difference between the responses of those in work and those who were NEET.

Experiences of school

(all respondents; n=37; 21 work and 16 NEET)

	Yes	%	No	%	Not sure	%
I enjoyed school	13	35.1%	22	59.5%	2	5.4%
I did well at school	18	48.6%	14	37.8%	5	13.5%
There was a particular person at school who recognised I was a carer and helped me	7	18.9%	28	75.7%	2	5.4%
I got good career advice at school	3	8.1%	32	86.5%	2	5.4%
The career advice took account of my caring role	3	8.1%	32	86.5%	2	5.4%
I would have received better grades if it was not for my caring role	20	54.1%	9	24.3%	8	21.6%

These findings mirror those of Sempik and Becker (2013) with young adult carers still at school, and show that few of them are able to call on the support of a specific person at school to help them when they experience difficulties with their school work.

Recommendation: schools should establish a clear framework of support for young carers, which is embedded into the schools' policies and communicated to parents. There should be a named carers lead within schools and each young adult carer should have an individual plan to remove any barriers to education.

Completing the college course

Of those who had previously been to college or university, 68% had completed their course, but 29% had to drop out because of their caring role. Hence, a substantial number of young adult carers may not complete their course. The percentage of those who dropped out is four times greater than the national average of 7.4% for degree courses reported for 2010/11 by the Higher Education Statistics Agency⁵. Financial difficulties played a part for four of those young adult carers who dropped out (33% of those who did not complete their course), however, the majority appear not to have completed their course due to their caring responsibilities.

This reflects findings from a recent study of student carers by the National Union of Students (NUS) which revealed that only 36% of student carers felt able to balance their commitments, as compared to 53% of students without caring responsibilities. Of the students in the NUS survey who had considered leaving their course of study, student carers were also much more likely to indicate that this was because of the difficulties of balancing study and their other responsibilities (53% for student carers, compared with 36% for students without caring responsibilities)⁶.

Young adult carers completing college and university courses

	Yes	%	No	%	Not sure	%	Total
I completed my college/university course	26	68.4%	12	31.6%	0	0%	38
I had to drop out of college/university because of my caring role	11	28.9%	26	68.4%	1	2.6%	38
I had to drop out of college/university because I couldn't afford it	4	11.8%	28	82.4%	2	5.9%	34
I had to drop out of college/university because of other reasons	6	30%	13	65%	1	5%	20

5 www.hesa.ac.uk/index.php?option=com_content&task=view&id=2064&Itemid=141

6 www.nus.org.uk/Global/NEW%20Carers%20research%20report%20WEB.pdf

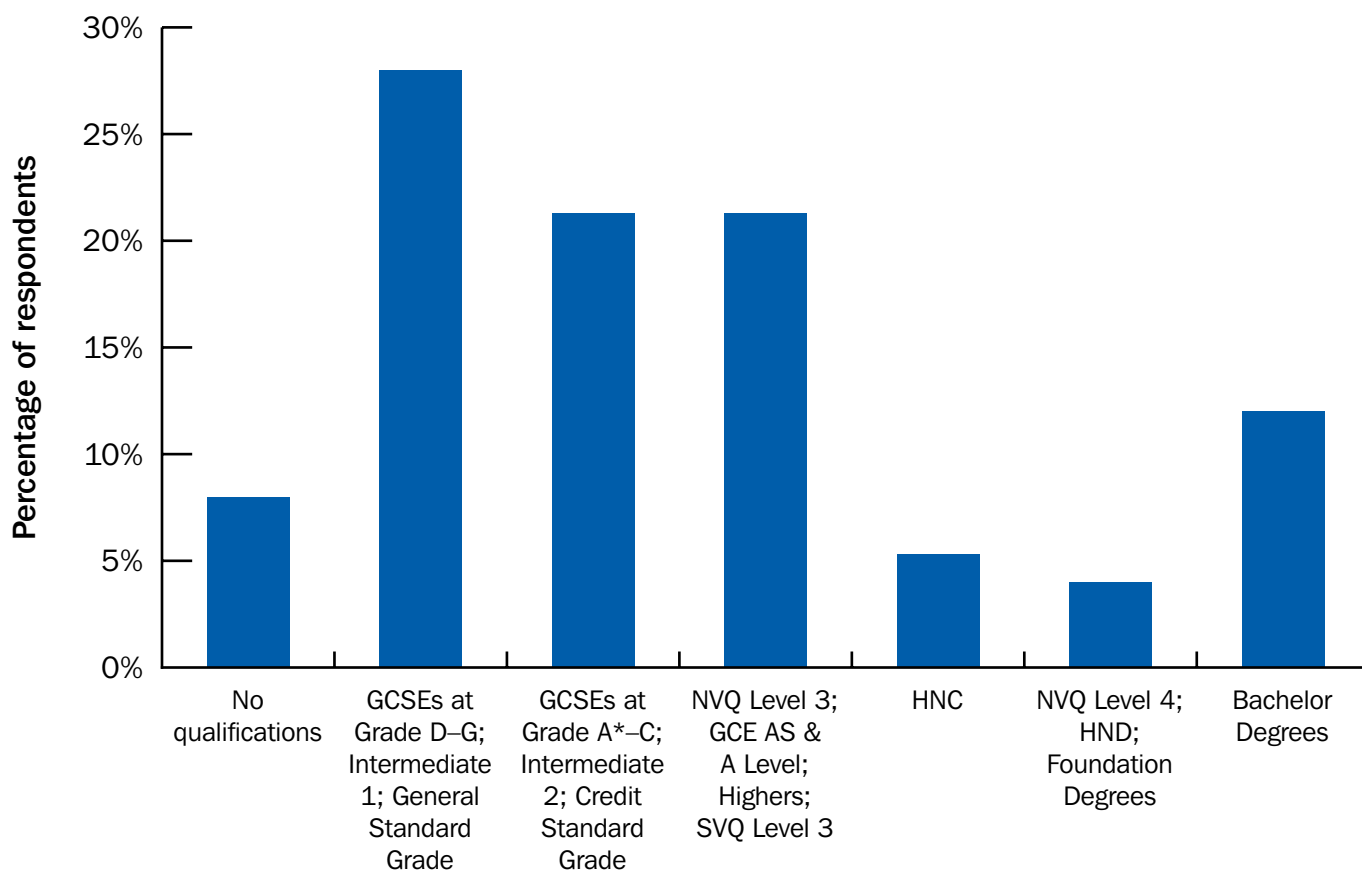
Recommendation: early intervention is needed to identify young adult carers at college and university who are in danger of dropping out or not fulfilling their potential, and to provide them with appropriate support in good time.

Qualifications of young adult carers

75 respondents provided details of their highest qualifications. These were categorised into levels using the Qualifications and Credit Framework/National Qualifications Framework for England, Wales and Northern Ireland (Ofqual⁷) and the Framework for Higher Education in England, Wales and Northern Ireland (qaa⁸).

Only six (8%) respondents had no qualifications. The rest had a range of qualifications from Level 1 (GCSEs at grade D–G) through to Level 6 (degrees). The most commonly held highest level of qualification was Level 1, (GCSEs at grade D–G; Intermediate 1; or General Standard Grade) held by 28% of the respondents. This is shown in the graph below.

Highest qualifications achieved by young adult carers



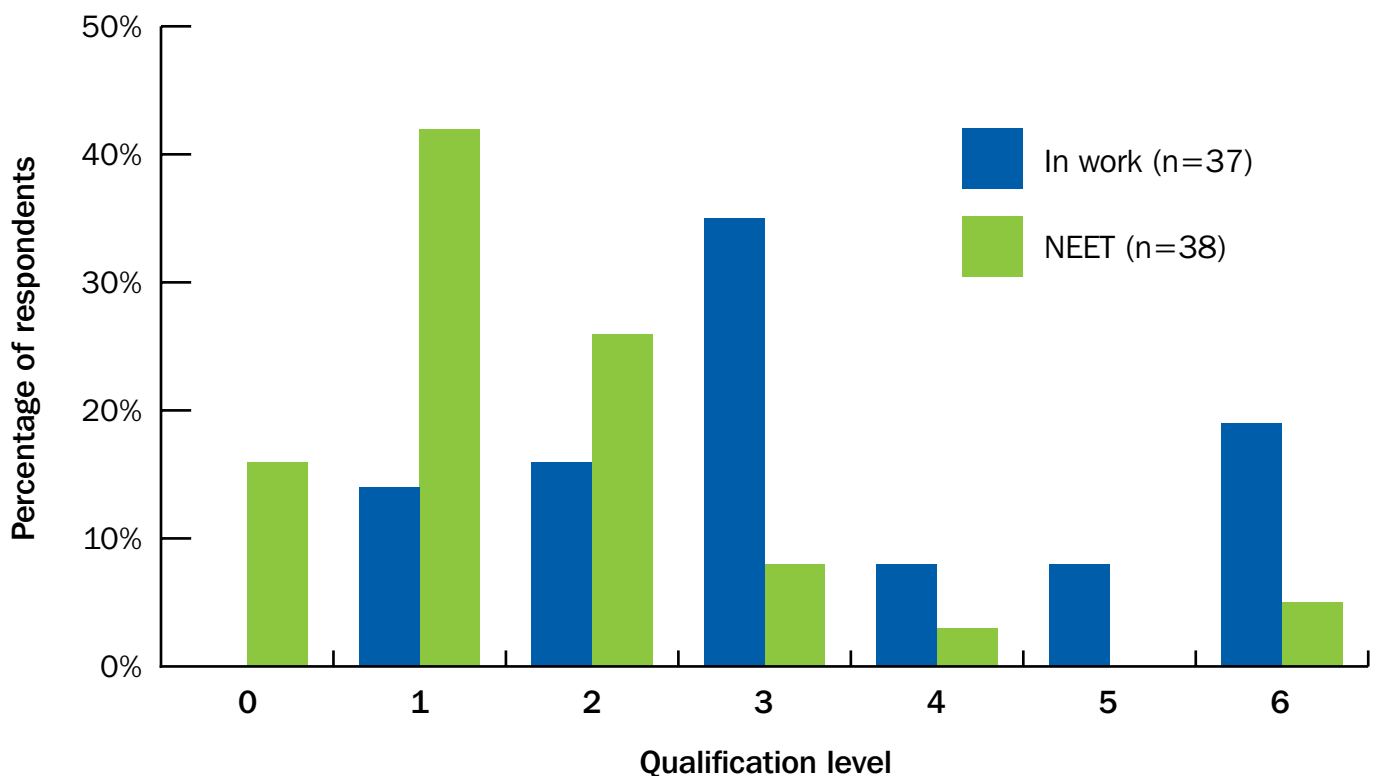
7 www.ofqual.gov.uk

8 www.qaa.ac.uk/academicinfrastructure/fheq

Respondents in work were more likely to have higher qualifications than those who were NEET (shown in the graph, below); and the difference between the two groups was statistically significant ($p=0.00025$). While it may not be surprising that young people in work have higher qualifications than those who are not in work, in the context of young adult carers it may be important.

Controversially perhaps, these findings suggest that the young people may be failing to find work because of their educational qualifications rather than *choosing not to work* to fulfil their caring roles. However, the reality is that it is likely to be a combination of lower qualifications coupled with growing expectations for young adult carers to provide ongoing care that lead to a higher proportion of lower qualified young adult carers who are NEET.

Employment status and qualification levels of young adult carers



Choosing a job

Of the 39 respondents who were in work, 17 (44%) had chosen the job because it was not far to travel and they could continue to care; 38% of the young adult carers had also considered flexibility of working hours when choosing their job. This suggests that caring responsibilities can affect the employment choices and opportunities of young people.

Of the young adult carers in work, those who had not previously been to college or university were more likely to have considered travel as a factor in their choice of employment (57% compared with 28%). However, the numbers in these groups are small, so caution is necessary in interpreting the results.

Reasons for choice of jobs

	At work and previously at college/university		At work and NOT previously at college/university	
	Number	% (n=18)	Number	% (n=21)
Full-time	9	50%	7	33.3%
Part-time	8	44.4%	14	66.7%
I really wanted to do this kind of work	10	55.6%	5	23.8%
It was the only job I could find	5	27.8%	12	57.1%
The hours are flexible so I can continue to care	5	27.8%	10	47.6%
It is not far to travel so I can continue to care	5	27.8%	12	57.1%
Other	1	5.6%	2	9.6%

Unsurprisingly, the findings suggest that those who had previously been to college or university had a better choice of work than those who had not; 56% of those found work that they wanted to do, compared with 24% of those who had not been to college or university (the difference was statistically significant, $p=0.042$).

Young adult carers who had been to college or university were more likely to have full-time employment (50% compared with 33%), rather than part-time (44% compared with 67%). These results were found to be statistically significant ($p<0.001$) highlighting the importance of reducing barriers to education for young adult carers, as for all other young people, in finding employment of their choice.

More help is needed to enable young adult carers to obtain educational and vocational qualifications and address the barriers they are experiencing.

Recommendation: targeted career advice should be available to young adult carers which addresses their caring responsibilities, recognises any additional skills they have developed in their caring role and supports them to consider all available options.

Recommendation: more research is needed to explore the relationship between the extent and context of caring and its impact on academic and employment success.

Informing managers of their caring roles

30 of 37 young adult carers in work told their managers of their caring role. Of the seven who did not, four wished to keep it private; one reported that they were embarrassed to discuss it; three felt 'there was no point'; one did not know who to tell and one reported that nobody had asked them. 19 (59%) reported that their managers were supportive. However, 13 (41%) said that their managers were not.

One informed their manager but wished to keep their caring role private from other staff:

"I have told my manager so that he is aware if I need to leave the office, but I keep it private from others in the office / work place."

Examples of types of support included:

"Allowances for timekeeping."

"My boss knows my husband and is a friend. He allows me time off for appointments (for myself or my husband), allows me to vent to him if needed, offers assistance at all times."

"They give me compassionate leave for meetings and stress time off."

"They understand that if I have to go I go but make up the time later."

But some respondents were aware of the limits to the support that could be given:

"They are OK but I know I can't go overboard with flexibility."

"I've told them that it wouldn't affect my ability to work."

Recommendation: businesses should be encouraged to create easy ways for young adult carers to inform them, in confidence, of their caring roles. Organisations which support young adult carers have a role to play in drawing up guidelines for this, and in raising awareness among employers.

Absence and lateness because of caring

On average, young adult carers lost 0.7 days off work per fortnight due to caring responsibilities. That is around 17 days per year; not far short of many individual's annual holiday entitlement. Additionally, a further 3.3 days per fortnight (approximately 79 days per year) were compromised due to being late, leaving early or being called home because of caring responsibilities. Clearly, caring responsibilities can have a substantial impact on young adult carers' working lives and may damage job security and chances of promotion, in addition to generating stress.

Absence and lateness because of caring

Absence and lateness in the previous two weeks:	At work		
	Mean	SD	n
Days missed due to caring	0.71	1.16	21
Times late because of caring	1.74	3.14	19
Times they had to leave early	0.95	1.99	20
Times they were called home because of caring	0.65	1.27	20

While some employers may understand the reasons for absence and be sympathetic towards young adult carers, there is a risk that they may still be perceived as inherently unreliable or unsuitable for promotion. This would be especially true if an employer was unaware of the caring responsibilities that a young person had. Young adult carers face multiple barriers in accessing and retaining employment, not just to make their employers aware of their caring responsibilities but also to convince them that such a role would not be detrimental to their business and could bring with it a wide range of different skills. The experience gained as a young adult carer is multi-faceted and includes many aspects that are forms of management that could be applied to the workplace, for example, financial management, time management, task scheduling and negotiating with other professionals.

Recommendation: young adult carers should be encouraged to identify the transferable skills that they use in their caring roles and to record and develop these so they might use them to their advantage in the workplace.

Recommendation: employers and apprenticeship and traineeship providers should understand the challenges faced by young adult carers and adopt workable policies which clearly define the support and flexibility available to the young adult carers whom they employ.

Support and assessments

The majority of respondents (57%) felt that they received good services as a young adult carer, and almost half (46%) considered that their family also received good support and services. However, 27 young adult carers (39%) did not think that their family had received good support and services. This suggests that the provision of services is not consistent across this group of young people and their families.

Of the 70 respondents, only 27% reported that they had received a formal assessment which addressed their needs. This is consistent with previous research showing only small numbers of young carers being assessed. Dearden et al (2004) found that a total of 18% (885 out of 6,178) of young carers were assessed.

	Yes	%	No	%	Not sure	%	Total
Received good services as a young carer/young adult carer	39	57.4%	23	33.8%	6	8.8%	68
Family receives good support and services	32	46.4%	27	39.1%	10	14.5%	69
Had a formal assessment by social services/social work department	19	27.1%	48	68.6%	3	4.3%	70
Used online support to help in their caring role	19	27.1%	47	67.1%	4	5.7%	70

Clearly, only a minority are having their needs assessed, and around half of young adult carers and their families are not receiving appropriate support and services. If these young people are representative of the population of young adult carers aged 14–25 in the UK (over 375,000 individuals), then over 200,000 young people and their families are not receiving the help and support that they need.

Recommendation: the care and support needs of the person being cared for must be adequately met to enable the young adult carer to participate fully in education, training, and employment so that they achieve their full potential.

Benefits received

Only six of the respondents reported that they received Carer's Allowance, and seven that they received other benefits or allowances (four were in receipt of Job Seeker's Allowance; three, income support; and two, Council Tax Benefit). The low number of young adult carers in receipt of benefits suggests that some, or even many, may not be claiming any or all of the benefits to which they are entitled. The benefits system may appear complicated and daunting to young adult carers and support may be needed to help them through it, for example, by assistance with their applications, or by support in maintaining a record of job applications to ensure that they do not lose Job Seeker's Allowance. Many young adult carers and their families will need high quality advice about their entitlement to benefits. The non-take-up of benefits among this population could amount to millions of pounds. Clearly, more research is needed to investigate the take-up and non-take-up among young adult carers and their families.

Recommendation: young adult carers projects should help young people to access the benefits to which they are entitled by providing information and by helping them with the application itself. A guide to the benefits system especially for young adult carers is needed.

Support from young carer and young adult carer projects

Just under half (48%) of all respondents were currently attending a young adult carers project, and 21% were attending a young carers project.

48% considered that the project gave them support at school; and 44% thought that the guidance and support they received from the project had enabled them to go to college or university. A similar number (41%) had received guidance for employment and 26% had actually found a job as a result of the project.

Benefits of attending a young carer or young adult carer project: support for education and employment

	Number	%
The project gave me support at school	26	48.1%
The project gave me support and guidance so that I could go to college/university	24	44.4%
The project gave me support and guidance so I could get a job	22	40.7%
I have been able to get a job	14	25.9%

80% of those who were attending or had attended a young carers or young adult carers project considered that they were a more confident person as a result, and 76% felt that the project had helped them to develop their personality and interests. Over half (57%) had more friends because of the project.⁹

A third of respondents (33%) felt that the projects had helped them to find support for their whole family; and a similar number (32%) considered that they now received more help from other organisations; 26% felt that they did less caring as a result of the project.

Young carers projects and those for young adult carers appear to provide help and support in a number of different and important aspects of the young people's lives. However, not all young people take advantage of this and more research is needed to understand why this is the case.

⁹ Percentages were calculated using the number of respondents who reported currently attending or having previously attended a project (54).

Conclusion



This study highlights the high levels of care being undertaken by many young adults and the implications this may have for their health and employment opportunities.

For the young adult carers who were in work, their caring responsibilities clearly had an impact on their working lives as seen by their absence from work and the times they were late. On average, young adult carers lost the equivalent of 17 days per year in missed days; and around 79 days per year were affected because of lateness and having to leave early or unexpectedly¹⁰. While managers may be supportive and allow flexibility, the young people know that they “can’t go overboard with flexibility” if they are to succeed in the workplace; and not all managers are sympathetic, 41% of respondents reported that their managers were not supportive. Employers need to acknowledge the caring roles held by young people and adopt workable policies which clearly define any flexibilities available to them. Their families need adequate services so that there is less reliance on the young person to have to provide care and so damage their prospects of progress and promotion.

The caring role also hinders these young people’s progress through higher education, and hence their ability to find employment in the first place. Young adult carers with higher qualifications had a better choice of work, and those who had been to college or university were more likely to have full-time employment rather than part-time. However, 11 (29%) of the 38 respondents who had been to college or higher education failed to complete their course because of their caring role. This is four times greater than the national average for the UK of 7.4% who drop out of higher education. Although the sample in this study is small, the findings suggest that a much greater proportion of young adult carers fail to complete their courses than other young people in the general population. Hence, this study highlights the need for appropriate recognition and support for young adult carers at college or university. Admissions policies should identify caring roles so that young adult carers can be identified early and support such as flexible deadlines and access to discretionary funding can be targeted to enable them to complete their courses and reach their full academic potential.

The research also suggests that there may be differences in the health of those who are NEET and those in work. While the differences may not be significant at the present time, it is possible that the two groups (those in work and those who are NEET) are beginning to diverge and important differences will become apparent later. At present, little time has passed between them leaving school and either

¹⁰ These are averages based on the previous two weeks, and not all of the young people had absences. The responsibilities of caring are not uniform and there are times of high demand. Therefore, these figures may underestimate the extent of the young people’s difficulties.

finding work or entering a phase of unemployment. As those who are not employed stay out of work for longer, they may find it harder still to find work and their health problems may be exacerbated. Early intervention is needed to break this vicious cycle. Children need to be protected from undertaking caring responsibilities that will have a negative impact on their outcomes and life chances as they begin their adult lives.

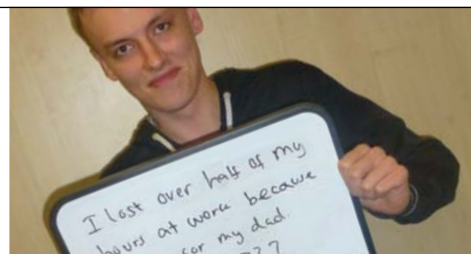
At present, only a small proportion of young adult carers engage with young adult carer projects. This reflects the lack of provision available to support the specific needs of young adult carers in the UK. It is highly likely that many others are simply unaware of the support they could receive, or may not even see themselves as carers and so not regard the projects as relevant for them. There is a need for projects to reach out to those young adult carers and let them know of the support that could be available to them. Since most research that explores the lives of young carers and young adult carers reaches its participants through projects, there is a lack of information on the needs of those young people who do not attend such projects. By widening participation, the needs of another hidden group may be uncovered.

Just under half of the young adult carers who responded to this survey had already been in contact with a support service. That these young adult carers had been identified and supported in some capacity yet still experienced these difficulties indicates a lack of adequate transition support. It also raises the question about the situation for all of those hidden young adult carers who have not been identified and therefore have not had access to support. Only a minority of young adult carers are having their needs assessed, and around half of them and their families are not receiving appropriate support and services. If these young people are representative of the population of young adult carers aged 14–25 in the UK (over 375,000 individuals), then over 200,000 young people and their families are not receiving the help and support that they need.

A clear transition framework is needed for young adult carers across education, health and social care which ensures that their caring responsibilities do not have a detrimental effect upon their life opportunities.

This study has looked at the perceptions of young adult carers who are at the beginning of their working lives and finding their feet. Their caring role at this stage (and prior to that) may be a significant influence on their later lives. Some of the negative influences that have exerted their effect in earlier life, can, and should be 'put right' by appropriate services and support as these young people progress into adulthood.

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Appendix

The sample

Age and gender of all respondents

Gender	Number	%	Mean Age (years)
Female	62	80.5%	21.3 (SD 2.2; n=61)
Male	15	19.5%	22.0 (SD 3.0; n=12)
Total	77	100%	

Current position of respondents

	Number	%
At work	21	27.3%
At work and had previously attended college or university	18	23.4%
Not in employment, education or training (no previous attendance at college or university)	16	20.8%
Not in employment, education or training (previously attended college or university)	22	28.6%
Total	77	100%

Who they care for

Person cared for	All respondents		Young adult carers in work		Young adult carers who are NEET	
	No	%	No	%	No	%
Mother	43	55.8%	19	48.7%	24	63.2%
Father	11	14.3%	7	17.9%	4	10.5%
Brothers/Step brothers	7	9.1%	4	10.3%	3	7.9%
Both parents	4	5.2%	3	7.7%	1	2.6%
Sisters/Step sisters	2	2.6%	2	5.1%		
Step father	2	2.6%	1	2.6%	1	2.6%
Grandparents	1	1.3%	1	2.6%		
Other relative	3	3.9%	1	2.6%	2	5.3%
Husband	1	1.3%	1	2.6%		
Own child (with support needs)	1	1.3%			1	2.6%
Total	77	100%	39	100%	38	100%

Number of individuals for whom care is provided

	Work		NEET	
	No	%	No	%
One	26	66.7%	28	73.7%
Two	10	25.6%	9	23.7%
Three	2	5.1%	1	2.6%
Four or more	1	2.6%		
Total	39	100%	38	100%

Conditions of those cared for

Disability or condition of person cared for	No	% (n=77)
Physical disability	44	57.1%
Mental health problem	44	57.1%
Long-term physical illness (including terminal illness)	35	45.5%
Learning disability or autism	16	20.8%
Older people	11	14.3%
Drug or alcohol problems	11	14.3%
Behavioural problem	8	10.4%
Dementia	4	5.2%



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