

# **Suffolk Family Carers: Evaluating support available for young carers across primary schools in Suffolk**

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## EXECUTIVE SUMMARY

There are currently 1,913 young carers aged 5-16 years registered with Suffolk Family Carers, of which 562 young carers are aged 5-9 years. This report is based on data gathered via a mixed methods approach, using online surveys ( $n = 96$ ), secondary qualitative data analysis ( $n = 63$ ) and in-depth qualitative interviews ( $n = 7$ ), undertaken by the University of Suffolk between February-June 2020, to explore the experiences and perspectives of parents and educational staff supporting young carers aged 5-9 years old. The purpose of this project was to investigate experiences, perspectives and impact of the Suffolk Family Carers Young Carers Schools Award programme for primary schools.

The parents, guardians and educational staff who engaged in this evaluation describe the importance of identifying young carers from an early age, and subsequently the important role that primary schools and the young carers team play in enabling the young person to grow in confidence, build social connections, develop positive coping mechanisms and access respite opportunities. Parents and guardians suggest that their child(ren) aged 5-9 years who are identified by their schools as young carers through the schools' award programme led by Suffolk Family Carers as a result felt proud to be a young carer and displayed increased self-esteem and confidence. Educational staff suggested that after receiving support they had a good or excellent knowledge and understanding of how to identify, assess and support a young carer. Furthermore, their perceptions of the impact of support within school upon the young people is concurrent with that of parents, suggesting an increase in happiness at school, confidence and self-esteem. The connections that Young Carers Advisors build with primary schools is vital in ensuring that families are aware of any support they might be able to receive, as well as reducing the stigma attached to a child being identified as a young carer. The findings of the research and subsequent recommendations are outlined below:

**Table 1: Summary of findings**

	Description	Findings
1	Parents: Identifying Young Carers	<ul style="list-style-type: none"><li>The majority of parents suggested that they believed it was very important to identify and support children aged 5-9 as young carers (83%), the majority of whom also suggested that young carers should be identified below the age of 5 (83%).</li></ul>
2	Parents: Impact	<ul style="list-style-type: none"><li>Thematic analysis of qualitative responses revealed that identification had an impact on 4 key areas: Confidence, Social Connection, Identity and Belonging and Respite.</li></ul>
3	Parents: Feedback	<ul style="list-style-type: none"><li>Parents describe a positive experience of the support from their child's primary school. Most parents were also either satisfied (48%) or very satisfied (29%) with the support received from Suffolk Family Carers</li></ul>

4	Teachers: Identifying Young Carers	<ul style="list-style-type: none"> <li>All respondents suggested that it was either important (11%) or very important (89%) for schools to identify children aged 5-9 years as young carers. The need to identify carers below the age of 5 was considered of importance to most educational staff (79%).</li> </ul>
5	Teachers: Impact	<ul style="list-style-type: none"> <li>Educational staff were likely to strongly agree or agree that the support offered to young carers at their school enabled the children to build friendships with peers, feel happier at school and achieve better educational outcomes</li> </ul>
6	Teachers: Feedback	<ul style="list-style-type: none"> <li>After receiving support from Suffolk Family Carers, all respondents suggested they had developed a good or excellent knowledge base and understanding of how to assess, identify and support a young carer</li> </ul>

**Table 2: Summary of recommendations**

Recommendation	Description
<b>Further Research and Monitoring</b>	<ul style="list-style-type: none"> <li>Further research, adopting child-centred creative and participatory methods is recommended, but also looking at secondary datasets and examining any changes in academic attainment and attendance between those identified as a young carer and those who are not, and self-reported differences both at the outset and after the intervention period.</li> </ul>
<b>Parental Mental Ill-Health: Responses and Support</b>	<ul style="list-style-type: none"> <li>Suffolk Family Carers may want to provide or think about providing some tailored training for teachers around how they can approach and support children whose parent or another family member is living with a mental health condition.</li> </ul>
<b>Breaking down stigma: Outlining expectations</b>	<ul style="list-style-type: none"> <li>Suffolk Family Carers may want to provide guidance (for example via anonymised case studies of children with different responsibilities across the caring spectrum) as to what parents should expect if they disclose their child is a young carer, from both the school and Suffolk Family Carers, to potentially ease apprehension.</li> </ul>
<b>Reconsidering the age of identification and support provision</b>	<ul style="list-style-type: none"> <li>It is recommended that the age is lowered but taken on a case-by-case basis but should not be a pre-requisite for obtaining support from organisations such as Suffolk Family Carers. Such a transition would require additional resources for SFC to move provision to early years settings, but also to review safeguarding and approaches to provision for younger carers below the age of 5.</li> </ul>
<b>Sharing best practice</b>	<ul style="list-style-type: none"> <li>Developing a Young Carers Lead network or forum to share best practice and disseminate ideas may be a potential mechanism to build connections across primary and secondary school settings, to facilitate transition, build connections and share ideas.</li> </ul>

# 1. INTRODUCTION

## 1.1. Who are 'Young Carers'?

According to the most recent census (Office for National Statistics, 2011), there are almost 166,000 young carers (aged 5-17) in England. This represents a 19% increase over the ten-year period between 2001 and 2011, although among younger carers aged 5- 7 years old there has been around an 80% increase recorded<sup>1</sup>. Nonetheless, anecdotal evidence suggests that this figure is likely to underrepresent the number of young carers, many of whom are hidden from view from authorities and other organisations they need support from<sup>2</sup>.

Many young people will have taken on their caring role at primary school age, for example, Sempik & Becker (2013)<sup>3</sup> reported that children within their sample at a school started caring for someone on average at age 9 years. These children are most likely to have a caring role for a parent, sibling or grandparent, but some have identified as having caring roles for extended family members and community members (The Children's Society, 2013). The nature and definition of what it is to be a young carer is, is complex, however a common definition is outlined below:

*'The term young carer should be taken to include children and young people under 18 who provide regular or ongoing care and emotional support to a family member who is physically or mentally ill, disabled or misuses substances... a young carer becomes vulnerable when the level of care-giving and responsibility to the person in need of care becomes excessive or inappropriate for that child, risking impacting on his or her emotional or physical well-being or educational achievement and life chance.'* (The Children's Society, 2012)<sup>4</sup>

Published research findings show that young carers may experience a range of different problems and difficulties. These might include emotional difficulties, behavioural issues, problems at school caused by trying to balance caring responsibilities and school needs; poor

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<sup>1</sup> Clay et al (2016). The lives of young carers in England Qualitative report to DfE. Accessed: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/498115/DFE-RR499\\_The\\_lives\\_of\\_young\\_carers\\_in\\_England.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/498115/DFE-RR499_The_lives_of_young_carers_in_England.pdf)

<sup>2</sup> The Children's Society (2013). Hidden from View. *The experiences of young carers in England*. Accessed: [https://www.childrenssociety.org.uk/sites/default/files/tcs/report\\_hidden-from-view\\_young-carers\\_final.pdf](https://www.childrenssociety.org.uk/sites/default/files/tcs/report_hidden-from-view_young-carers_final.pdf)

<sup>3</sup> Sempik & Becker (2013) Young Adult Carers at School: Experiences and Perceptions of Caring and Education [https://www.basw.co.uk/system/files/resources/basw\\_34017-5\\_0.pdf](https://www.basw.co.uk/system/files/resources/basw_34017-5_0.pdf)

<sup>4</sup> ADASS, ADCS and The Children's Society (2012), Working together to support young carers and their families, <http://www.adcs.org.uk/download/positionstatements/2012/MoU%20young%20carers%202012.pdf>

concentration and lower academic attainment<sup>5</sup>. Nonetheless, in a meta-synthesis of qualitative research with young carers themselves, Rose and Cohen (2010)<sup>6</sup> identified that being a young carer is a process of identity formation, and that it might therefore be difficult to separate them from this role<sup>7</sup>, therefore positive interventions to enable them to thrive and to celebrate the role young carers play is recommended.

## 1.2. School provision and support for young carers

Qualitative research with young carers themselves shows that when asked about their needs, young carers ask for assistance to participate in their local community, to attend school, and to have opportunities for respite (Moore & McArthur, 2007<sup>8</sup>). However, a significant proportion of young carers have not disclosed their caring responsibilities to their school (Clay et al, 2016), despite research indicating that caring affects children's ability to participate in school and their decisions to continue into further education (Becker, 2007<sup>9</sup>).

Support for young carers in schools is ad-hoc and considerably varied. In some cases, support received had positive impacts upon emotional development and academic attainment, but in others there was inconsistency in responses due to lack of shared understanding amongst teachers (Clay et al., 2016). In their research, Clay and colleagues (2016) highlighted that parents of younger carers felt that it was important for school staff to be aware of the family situation in order for their child to be better supported. Younger carers had often developed close relationships with particular members of staff who they would talk to as and when needed.

School support is therefore of increasing importance for young carers and their families. Suffolk Family Carers have implemented a Young Carers Schools Award which was introduced in order to assist educational institutions in adopting policies and practices to meet the rising demands placed by increasing numbers of children being identified as young carers across Suffolk.

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<sup>5</sup> Becker, S., and A. Leu. 2014. "Young Carers." In Oxford Bibliographies in Childhood Studies, edited by H. Montgomery, 1–21. New York: Oxford University Press

<sup>6</sup> Rose, H. D., & Cohen, K. (2010). The experiences of young carers: A meta-synthesis of qualitative findings. *Journal of Youth Studies*, 13(4), 473–487.

<sup>7</sup> Joseph, S., Sempik, J., Leu, A., & Becker, S. (2020). Young carers research, practice and policy: an overview and critical perspective on possible future directions. *Adolescent Research Review*, 5(1), 77-89.

<sup>8</sup> Moore, T. & McArthur, M. (2007). We're all in it together: Supporting young carers and their families in Australia. *Health and Social Care in the Community*, 15(6), 561-568.

<sup>9</sup> Becker, S. 2007. "Global Perspectives on Children's Unpaid Care Giving in the Family." *Global Social Policy* 7 (1): 23–50.

### 1.3. Young Carers in Suffolk: Suffolk Family Carers (SFC)

Data provided by the Children’s Commissioner (2016)<sup>10</sup> suggests that based on projected figures and responses from Local Authorities there are around 4,577 young carers in the East of England alone. There are currently 1,913 young carers aged 5-16 years registered with Suffolk Family Carers, of which 562 young carers are aged 5-9 years. Supportive provision for these young people and their families is therefore paramount.

Suffolk Family Carers is a charitable organisation helping family carers of all ages across Suffolk to ensure they have the support needed to live fuller lives. The Young Carers team works with young people and their families where the young person has been identified as having caring responsibilities. Currently Young Carers team-works with young carers (aged 5-16 years) and young adult carers (aged 16- 25 years) to provide a range of support options, from one to one support to events and activities.

The service has also designed and implemented the Young Carers Schools Award, which was created to help schools improve identification and support to young carers and award best practice. Suffolk Family Carers currently works with 113 schools in total (incl. secondary and primary schools), who have adopted carer sensitive practices by working toward a school’s award. There are around 254 primary schools in Suffolk and Suffolk Family Carers are currently working within 68 of these primary schools to develop their provision by working toward a school’s award (*Table 3*).

**Table 3: Number of Primary Schools working toward carer sensitive practices**

		YC Lead Identified	Working towards or achieved Award	% with identified Lead	Bronze	Silver	Gold
2018	Primary schools	31	40	12%	10	6	4
2020	Primary schools	68	58	58%	23	12	9

The primary aim of this evaluation was therefore to explore the experiences and perspectives of parents and educational staff of the Young Carers Schools Award programme for primary schools supporting young carers.

<sup>10</sup> <https://www.childrenscommissioner.gov.uk/vulnerability-in-numbers/groups/young-carers/>

## 2. METHODS

A mixed methods approach was adopted, using online surveys, secondary qualitative data analysis and in-depth qualitative interviews to explore the experiences and perspectives of parents and educational staff supporting young carers aged 5-9 years old.

### 2.1 Quantitative Data and Analysis

An online survey was disseminated to parents and educational staff from February to April 2020. The parents and guardian survey focused on understanding demographic variables, their perceptions of the need to identify young carers early and their experience of support from their child(ren)'s school and Young Carers ( $n = 68$ ). Similarly, the educational staff survey focused on understanding the perceptions around early identification, school support offered to young carers and feedback upon Suffolk Family Carers provision. Data was analysed in Microsoft Excel and SPSS, and descriptive statistics derived ( $n = 28$ ).

### 2.2 Qualitative Data and Analysis

Interviews via telephone were conducted with primary school educational staff and parents of young carers in June 2020 ( $n = 7$ ). A total of 4 parents and 3 educational staff engaged in telephone interviews to build upon findings from the quantitative survey. A secondary qualitative dataset was also analysed ( $n = 63$ ). Both interviews and the secondary dataset were analysed using thematic analysis to identify codes and recurring themes throughout responses. Quotes are highlighted in highlighted boxes throughout this report.

Unfortunately, as a result of the COVID-19 pandemic, planned school visits were unable to take place in which the researcher was to engage in child-focused participatory focus group discussions with the young carers group, but also engage in school observations. As a result, and by following guidelines outlined by Chessbrough et al (2017)<sup>11</sup> young carers below the age of 11, due to ability to comprehend issues and ethical implications of interviewing, were unable to be involved in any form of survey or interview unless present with a parent. Therefore, parents were used as a proxy to understand the young person's experiences, unless the young person identified they would like to engage in the process.

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<sup>11</sup> Chessbrough et al (2017) Lives of young carers in England: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/582575/Lives\\_of\\_young\\_carers\\_in\\_England\\_Omnibus\\_research\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/582575/Lives_of_young_carers_in_England_Omnibus_research_report.pdf)

### 2.3 Ethical considerations

Individuals who engaged in the survey and interviews volunteered to participate and were informed of the purpose of the research prior to participation. All participants were provided with information about the research being undertaken by the University of Suffolk, as well as how the findings would be circulated. The research team are highly experienced researchers, working with individuals across the lifespan to investigate sensitive topics, have enhanced DBS certificates and have all undergone appropriate safeguarding training.

The evaluation was subject to University of Suffolk's ethical scrutiny and approval, and it complied with the British Sociological Association<sup>12</sup> and the British Psychological Society's Guidelines<sup>13</sup>. Adherence to guidelines set out by the United Kingdom Research Integrity Office's Code of Practice for Research ensured that the research followed the principles of the Singapore Statement of Research Integrity<sup>14</sup>:

- Honesty in all aspects of research
- Accountability in the conduct of research
- Professional courtesy and fairness in working with others
- Good stewardship of research on behalf of others

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<sup>12</sup> <https://www.britisoc.co.uk/ethics>

<sup>13</sup> <https://www.bps.org.uk/sites/bps.org.uk/files/Policy/Policy%20-%20Files/BPS%20Code%20of%20Ethics%20and%20Conduct%20%28Updated%20July%202018%29.pdf>

<sup>14</sup> [https://www.jsps.go.jp/english/e-kousei/data/singapore\\_statement\\_EN.pdf](https://www.jsps.go.jp/english/e-kousei/data/singapore_statement_EN.pdf)

## 3.FINDINGS

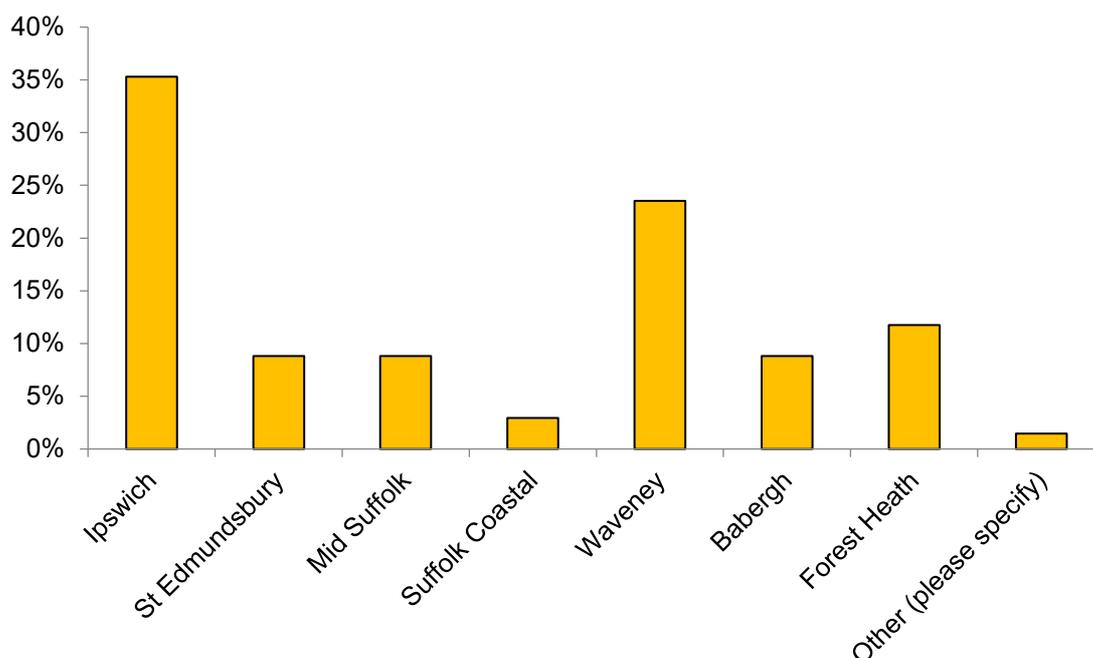
The following section will present findings from the mixed methods approach, by combining survey responses and qualitative feedback from three different sources (online questionnaires, secondary qualitative data and interviews with parents and educational staff). The findings have been triangulated and themes developed from the analysis of all data.

### 3.1 Parent Perceptions

#### 3.1.1 Participant demographics: Parents

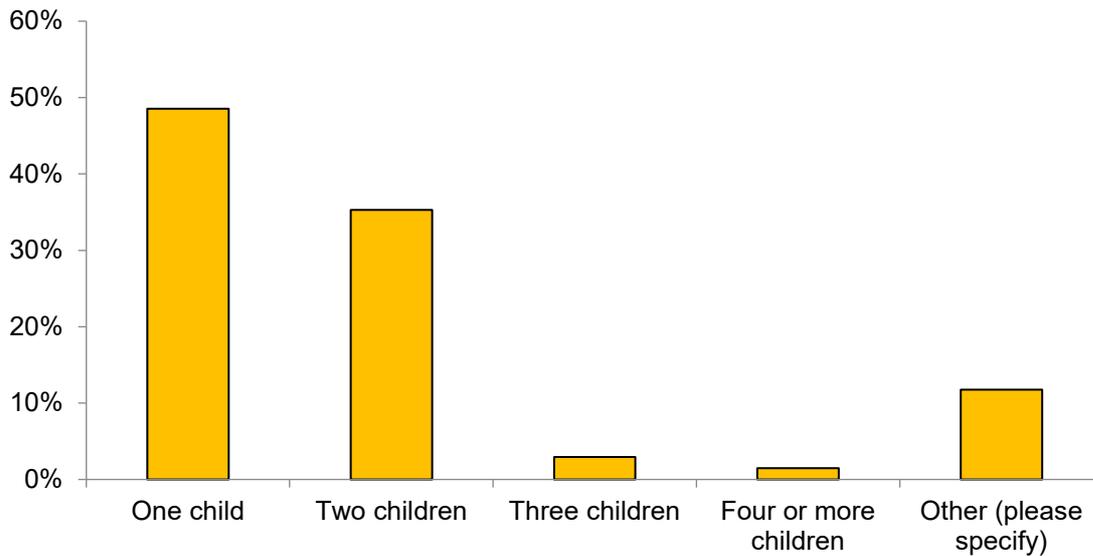
A total of 68 parents completed the online survey distributed by Suffolk Family Carers. The parents were located across all districts within Suffolk, with the majority living in Ipswich (35%) or Waveney (24%) (Figure 1).

**Figure 1:** Which district of Suffolk do you live in?



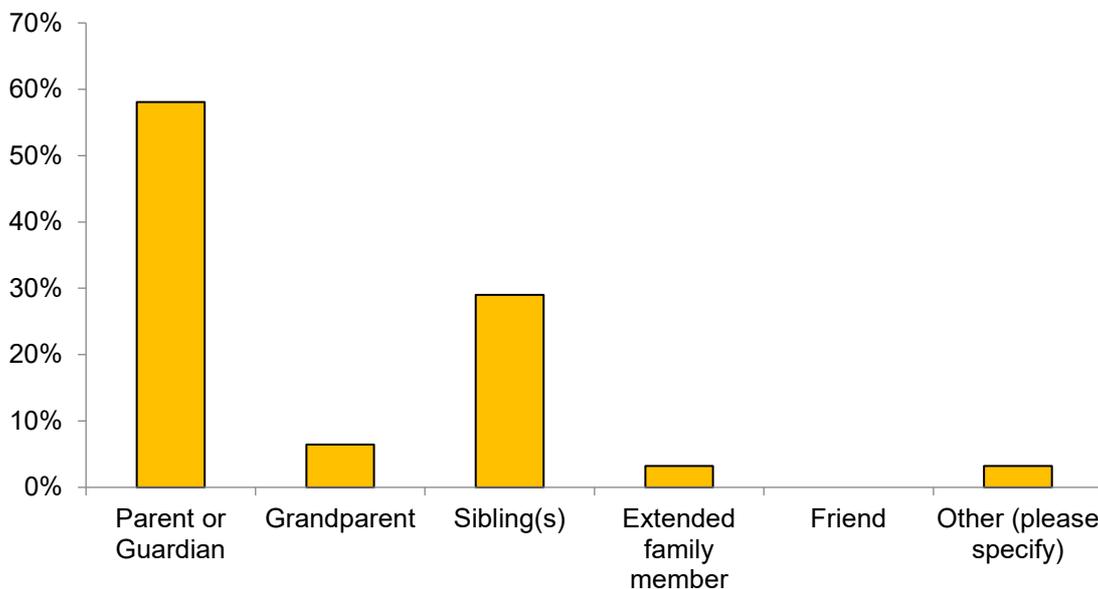
The majority of parents responding to the survey had one (49%) or two (35%) children between the age of 5-9 years. For those with one child, the child was likely to be between the age of 6-9, for those with more than one child, the children were likely to be aged 5, 8 or 9 years.

**Figure 2:** How many children do you live with between the age of 5 - 9 years?

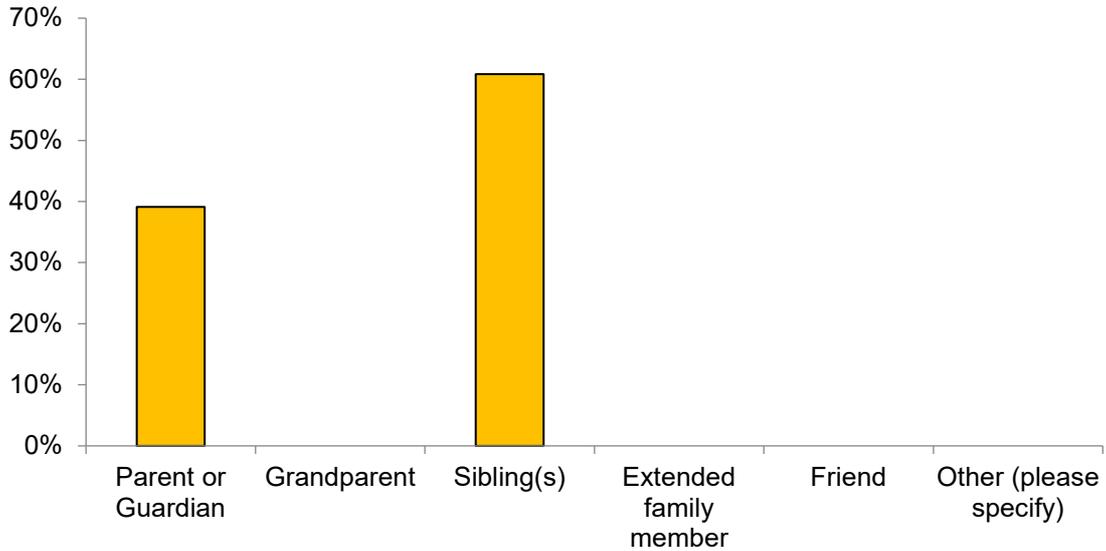


For households with one child aged 5-9, this young person, was most likely to have a caring responsibility for a parent or guardian (58%) or a sibling (29%) (*Figure 3*). For households with more than one child between the ages of 5-9, the children were most likely to have caring responsibilities for a sibling (61%) or a parent (39%) (*Figure 4*).

**Figure 3:** Who does your child have a caring role for?

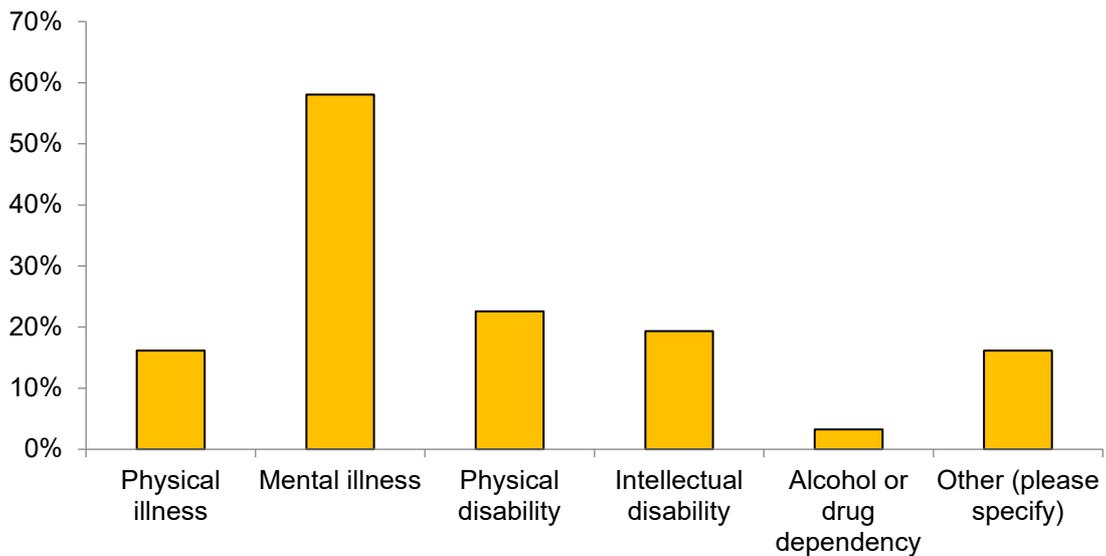


**Figure 4:** Who does your child (or children) have a caring role for?

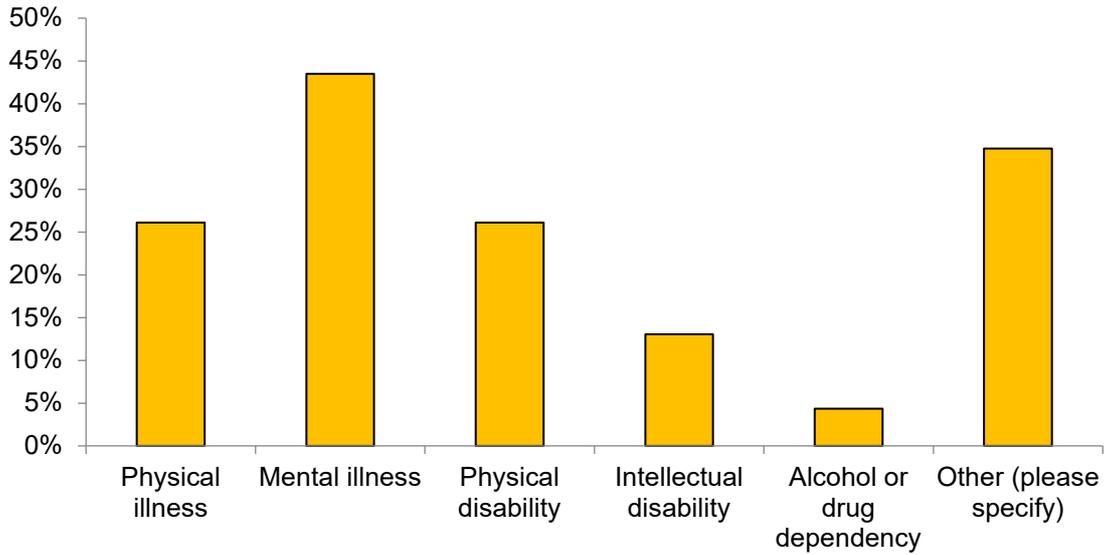


For households with one child between the age of 5-9, the child typically had caring responsibilities for an individual (most likely a parent as in Figure 3) living with mental illness (58%). For households with more than one child aged 5-9, those young people were likely to have some caring responsibilities for an individual living with mental illness (44%) or ‘other’ (35%) from which most parents or guardians suggested the young person had caring responsibilities for an individual with neurodevelopmental disorders such as Autism Spectrum Disorder or ADHD (*Figure 6*).

**Figure 5:** What is the condition(s) requiring the young person to take on a caring role? (please select all that apply)



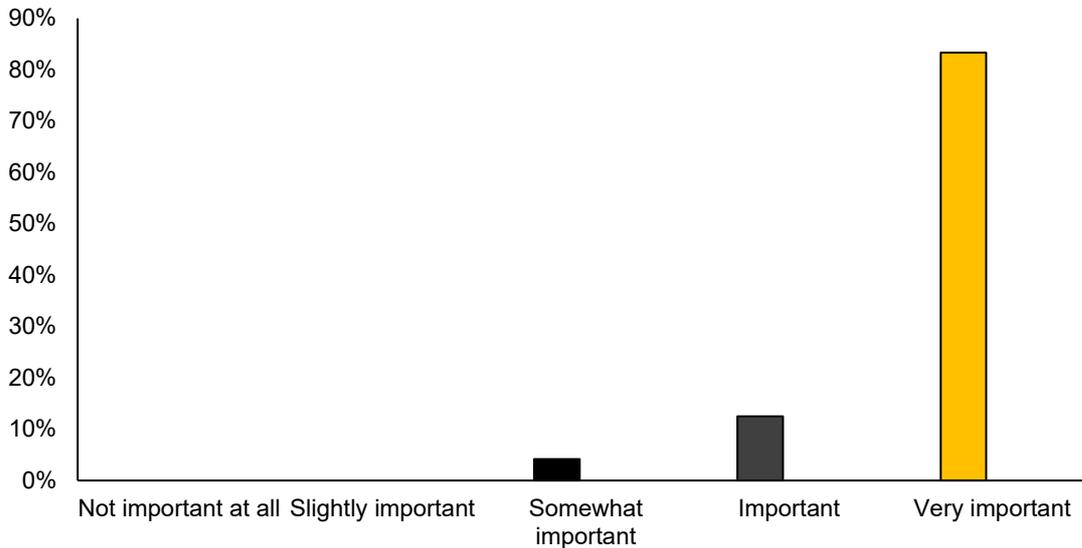
**Figure 6:** What is the condition(s) requiring the young person to take on a caring role? (please select all that apply)



### 3.1.2 Identifying Young Carers

The majority of parents suggested that they believed it was very important to identify and support children aged 5-9 as young carers (83%), the majority of whom also suggested that young carers should be identified below the age of 5 (83%).

**Figure 7:** How important do you think it is to identify children aged 5-9 years as young carers?

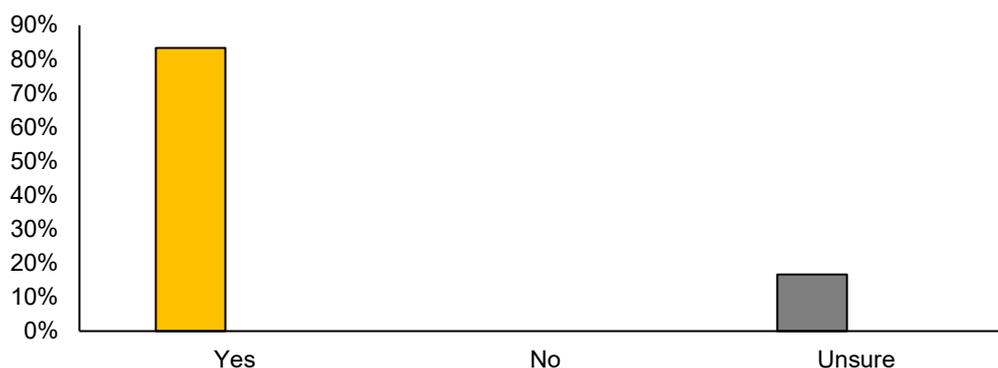


Reasoning for respondents predominantly focused around the need for early identification, preventative work and embedding support to maintain the child's self-confidence as they move through the education system.

*'I think really it depends on the child and their understanding of their environment and what's happening, I knew the fact that [young person, aged 5] was talking about the things that he had seen, when my dad collapsed and I had to catch him, and he wet himself because he didn't know he was doing, [young person] stood and watched that and he knew it wasn't normal, for him to go into school and talk about it meant it was obviously on his mind for him to talk about it after the Easter holidays. I didn't go out searching for young carers support, it was something that [educational staff member] suggested because of the situation. And the thing is there were a few times my little girl [aged 6] would say to me, and it sounds awful, but in her child's way she said to me, 'when will nanny die?', I said 'I don't know it's not something I want to think about but she will do one day, we all will someday', and she said 'it's just all the time you say in a minute in a minute, and you will say in a minute and you will say it for a long time and then say it's time for bed' and then I thought it is really affecting them now.'* (Parent)

Most parents and guardians also suggested that it may be beneficial to identify children as young carers below the age of 5 years old (Figure 8), as age was deemed irrelevant considering the potential impact a caring role has on a child. Research suggests that our early skills, social and emotional development greatly affects our adult life, including emotional and physical health, employment and life satisfaction<sup>15</sup>.

**Figure 8:** Do you think there is a need to identify young carers below 5 years of age?



*'Yes, children as young as four understand that their life is different to their peers. I believe that if identified early enough, these children would be given the tools and reassurance to deal with challenging situations and behaviours with self-confidence.'* (Parent)

<sup>15</sup> Goodman et al (2015). Social and emotional skills in childhood and their long-term effects on adult life. Accessed: <https://www.basw.co.uk/system/files/resources/EIF-Strand-1-Report-FINAL1-1.pdf>

Parents also reflected on their experiences with a child who has been identified as a young carer, suggesting that actually, the child becomes aware of the strains placed on the family unit from a young age. Subsequently, identification and support from an earlier age was considered as important by the majority of parents and guardians.

*'Most definitely, [child] has struggled a lot since the age of two so starting it at a younger age would have meant he would have had most support'*

*'Yes, I think [child] would have benefited from it from when she started school and not waited until she was 5' (Parent)*

*'Yes, as unfortunately with two siblings with additional needs it is having an impact on the child from well before 4 but they start to notice around this time. They start to realise from 4 that they cannot go out as freely as a family, and other children do more clubs etc. It would be nice to balance out the positive with the negative when this starts.' (Parent)*

This is consistent with research which highlights that:

*'Young carers are defined as a person under 18 who helps look after someone who is ill, disabled or misuses drugs or alcohol. We have worked with young carers who talk about taking on caring responsibilities as young as 5 years old. However, the legal definition of a young carer means that caring roles could start even younger...'* (Zuvac-Graves, 2020)<sup>16</sup>

Those parents who were unsure as to whether children should be identified as young carers any earlier (16%,  $n = 4$ ), suggested that this was because they considered the young person to be too young to understand emotionally, or that each child is different, and affiliation with being identified as a young carer may change over the course of the child's development.

*'I think each child is different, my little girl was identified at the age of 8 but she didn't want to join the groups until she was 10 and now she is 12 she tends to hide it more, she says some children take the Mickey out of it. My little girl struggles with anxiety and confidence this is why I think she hides most of it from her friend's.' (Parent)*

*'I'm not too sure whether at that age children would be aware of what being a carer is or means, even if they do help care at the time?' (Parent)*

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<sup>16</sup> <https://www.childrenssociety.org.uk/news-and-blogs/our-blog/facts-you-might-not-know-about-young-carers>

There is also still a stigma attached to the idea of children being identified as young carers, with some parents' expressing a concern that formal assessments and service involvement isn't necessary or acknowledging that their child may be in a position of being a young carer. This could be a future avenue for Suffolk Family Carers to explore, to raise awareness of the different situations in which families can receive support, but also engaging in some myth busting exercises to ensure families know what to expect if they were to receive support to prevent feelings of apprehension.

*'I think at first I was a bit like, I didn't see the children as young carers, I think it's not that you know they do everything for me and things like that, I think the schools concern was mainly for their mental well-being with regards to how they felt about the situation, so they wanted to put that support in place for them, but I think, yeah I was a bit apprehensive, but once SFC came round and did like an assessment and chat with us and stuff as a family, it was like oh ok this is fine, it wasn't as daunting as it sounds erm because it does sound quite daunting when someone says that to you, because it's like 'oh I don't need that' you know, but actually it was, it's just a bit of extra support for the children if they ever need it, which is a bonus for them really' (Parent)*

Nonetheless, the vast majority of parents and/or guardians suggested that earlier identification would have positive ramifications for young carers as a means of preventing 'unhelpful coping mechanisms', but also providing additional support given the complex nature of young people's lives with additional caring responsibilities. Young people are only referred by schools to Suffolk Family Carers when they reach the age of 5 and have parental permission, the findings suggest that there may be scope and potential, with adjustments to programme delivery and training, for this support and provision to be put in place at a much earlier age. This becomes increasingly important when looking at children's behavioural, social, emotional and academic abilities in Suffolk and Ipswich in comparison to the rest of England in which we have lower percentage rates of children achieving early learning goals<sup>17</sup>.

*'My daughter required a lot of emotional support and could have done with play therapy from age 2 1/2 when her dad's brain injury occurred. No one could help us. She goes to a small village school where nearly everyone has 2 parents who are well and no other young carers so at age 4 she already identified she was different from everyone else' (Parent)*

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<sup>17</sup> Ipswich Opportunity Area Delivery Plan (2017-2020). Accessed: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/696854/Social\\_Mobility\\_Delivery\\_Plan\\_Ipswich\\_v11\\_FINAL\\_WEB.PDF.PDF](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/696854/Social_Mobility_Delivery_Plan_Ipswich_v11_FINAL_WEB.PDF.PDF)

When asked about the impact of this early identification upon the child and the family unit, parents suggested that it is useful for young people to be identified at an early age so that they receive the respite and support which they would not necessarily receive at home due to competing demands. After conducting a thematic analysis on open ended survey responses and conversations with parents, the following themes best describe the impact of early identification from the parent's perspectives.

### **Confidence**

The majority of parents suggested that the identification of the young carer at an early age enabled the young person to grow in confidence. The reported increase in confidence was predominantly a result of young people having others to identify with in similar situations, having a supportive adult to speak with about their concerns, receiving support based on their needs and reassurance of their role, and the importance of that role.

*'[Young person] now has more confidence in making friends. He still has a long way to go before he has a 'normal' amount of confidence, but I feel he is definitely improving. I think if he had received this help later in life, he may not have been able to help as he would have had his 'defeatist' attitude installed in him.'* (Parent)

*'It has had such a positive impact on my son; to know there are other children just like him out there, dealing with a sibling with challenging behaviours. Even though we are new to young carers scheme he is already more self-assured, confident and relaxed in himself. This may not have been the case if he was not identified as needing the support at age seven.'* (Parent)

### **Social Connection**

In addition to an increase in confidence, parents described the importance of early identification of a young person as a carer in building social connections. Most parents described this early identification as crucial in building the foundations for positive relationships, both within and outside the family unit. Not only this, but due to the complex nature of young carers lives, the support received by Suffolk Family Carers at an early age led many parents to suggest that this reduced isolation, enabled the young person to identify with others and build a supportive social network.

*'It gives me relief to know my son has a great support network with plenty of people who will listen to his concerns and help him with them. I think without this support my son may have felt a lot more isolated in his world, negatively affecting his wellbeing and schoolwork.'* (Parent)

*'My son is now proud to be a carer and loves attending carers club as it's something for just him. I feel him being identified at a young age and having things for just him has made him feel special. If it had been left longer, he may view his role more negatively.'* (Parent)

### **Identity and belonging**

Similarly, to the above theme, many parents described the importance of the Suffolk Family Carers network early on in the young person's life in an order to build a positive identity around their caring role, but also negate some of the potential negative emotions associated with being a young carer. Many described their child building an identity in which being a 'young carer' was firmly embedded, this acted as a positive coping mechanism for some children, facilitating a sense of pride.

*'Having already gone through this with [young person's] older sibling and him not being able to access support, I am eternally grateful for [young person] being identified as a young carer and receiving support to cope with her emotional and social wellbeing. Without this support I believe her mental health would be affected as she grows into a young woman.'*  
(Parent)

*'[Young person] can be quite shy and reserved at times and this grew when her Dad's health declined. Young carers has helped her confidence to grow and I know she now feels proud to be helping and understanding with her Dad. She feels part of a team of special individuals who all help in their family roles in so many different ways. This has helped our little family so much, we almost feel relieved to see her happy and look forward to Young Carers meetings. I feel so thankful for us that Young Carers came so quick for us and was able to give [young person] a new purpose on a day to day basis. I feel she may have become very withdrawn with her thoughts and feelings if we had to wait till she was older.'*(Parent)

### **Respite**

Finally, many parents emphasised the idea that at an early age, the ability to have time away from caring responsibilities and respite in which the child engages in activities which are positive for them was of considerable importance. Time with Suffolk Family Carers therefore

offered opportunities for the young person to be themselves, to connect with others but also have time in which they are the focus of attention, something which may be limited at home, where parents or guardians are negotiating a myriad of competing responsibilities.

*'[Young person] has always had a large circle of friends. However increased frustrations at home have started to affect his attitude/patience at home and school. He enjoys the carers clubs and it gives him time away to be 'him' therefore I feel if this wasn't in place things would be more of a struggle for him. Definitely agree carers need to be identified at an early age so they are aware they are not alone. Have someone to speak to and have time to be themselves without having to support anyone.'* (Parent)

### 3.1.3. Parents: School Support for Young Carers

Analysis of the qualitative secondary data suggests that there is mixed experience regarding the support received and usefulness of support received from schools. Some parents and guardians explain that they are not receiving any form of support from the school with regards to their young carer. For some, they suggest that schools do the minimum amount required.

*'I do not feel the school helps other than bare minimal support unless obviously in need. They do however let [name] attend when they [Suffolk Family Carers] go into school.'*  
(Parent)

*'They know and recognise that [name] is a young carer but I don't actually think there is anything in place within the school setting to help and support him with this.'* (Parent)

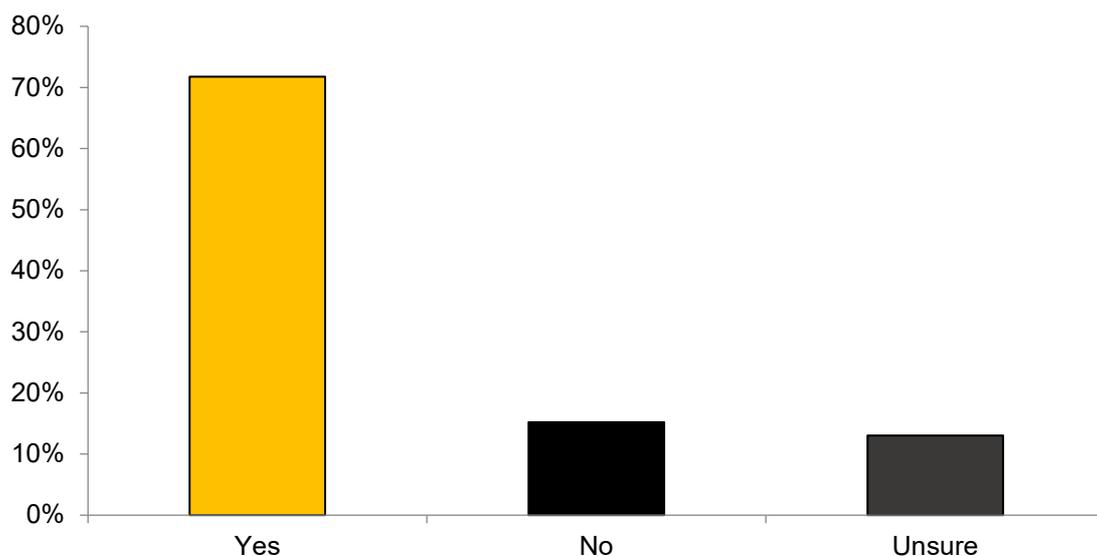
On the other hand, most parents and guardians suggest that the schools are positively influencing their child or children's lives, by engaging in collaboration with external organisations with expertise in supporting young carers, such as Suffolk Family Carers. Not only this, but it appears that schools engaging in best practice based on parents feedback revolves around an open and supportive culture within the school, opportunities for respite, one to one and group support for young carers, holistic familial support and recognition of the child as a young carer and subsequently making any necessary adjustments to expectations.

*'Her school is amazing and supports her tremendously. Allows her to talk freely and supports her and us as we are able to talk to school about things and they can support [young person].' (Parent)*

*'Yes, the school SendCo has been instrumental in providing information and support for him as a young carer. Just for him to speak his truth honestly and without judgement has had a hugely positive impact already. As he put it: " It's great that people are listening to me and understand I'm sometimes worried or scared. Now I can share my feelings with them as well as you (Mummy) and Daddy"' (Parent)*

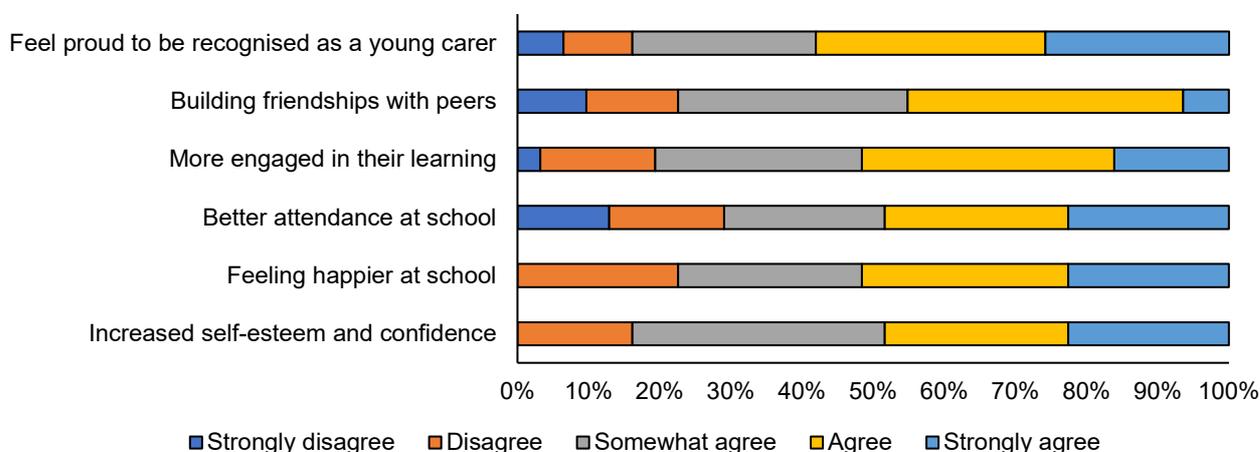
The majority of parents suggested that the school in which their child was enrolled was aware of their status as a young carer (71.4%), with 15% suggesting the school was unaware, and 13% implying they were unsure.

**Figure 9:** Is your child or children's school aware that they are a young carer?



When asked about the impact of identification as a young carer by the school, parents suggested that their child(ren) was more likely to feel proud to be recognised as a young carer, have increased self-esteem and confidence. Parents were less likely to suggest that as a result of identification, the young person had better school attendance or built friendships with peers.

**Figure 10:** Parents: How much would you agree that the identification of your child as a young carer by their school has impacted upon them in the following ways:



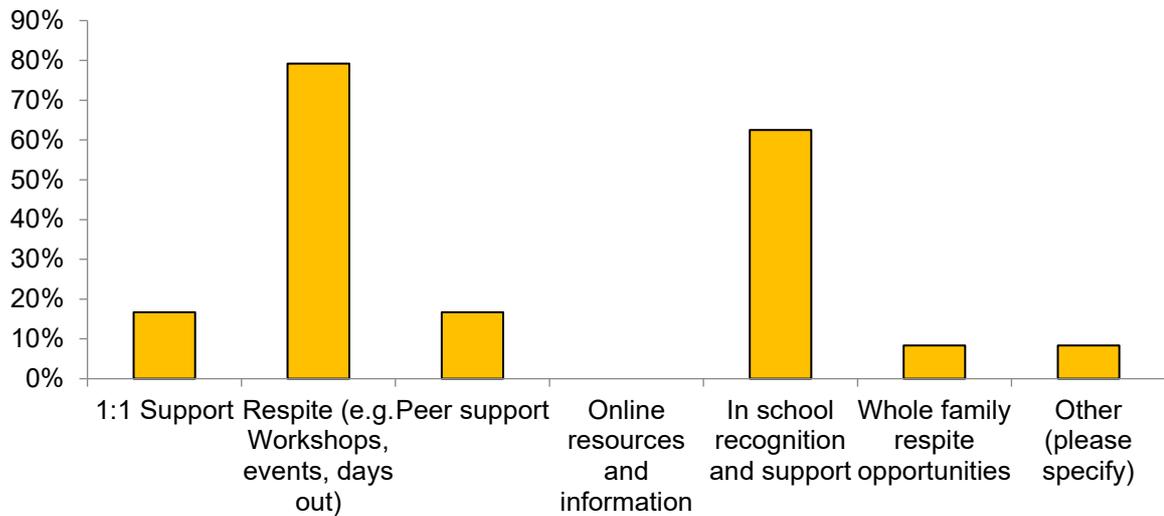
It appears that schools as the mediatory between Suffolk Family Carers and the families can work in a positive way, potentially reducing the stigma attached to children being identified as ‘young carers’ and ensuring those children receive support in a safe environment that parents and guardians feel comfortable with.

*‘I think it is really good that they are doing that, I wasn’t aware of it and I didn’t realise [my daughter] would qualify, because in my mind a young carer is someone who looks after say a parent, obviously I am [sons] main carer and she is just a sibling so I didn’t realise she would qualify for something like that so I think the school involving her because she is a sibling is really good it gives her opportunities she might not get otherwise. The school are really supportive if I need any assistance, any questions, anything they don’t send you away they do their best to find an answer.’ (Parent)*

### 3.1.3 Support from External Organisations - Suffolk Family Carers

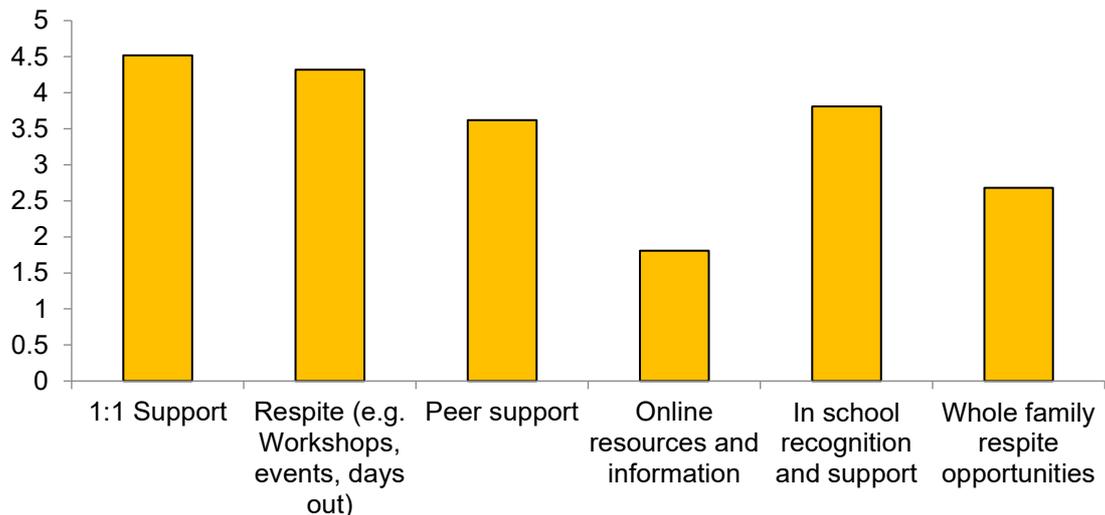
Most parents indicated that their child accessed respite services provided by Suffolk Family Carers (79%), which referred to workshops, events or days out organised by the team. Children were also likely to receive in school recognition and support (63%) (Figure 11).

**Figure 11:** Which type of support provided by Suffolk Family Carers does your child currently access (please tick all that apply)?



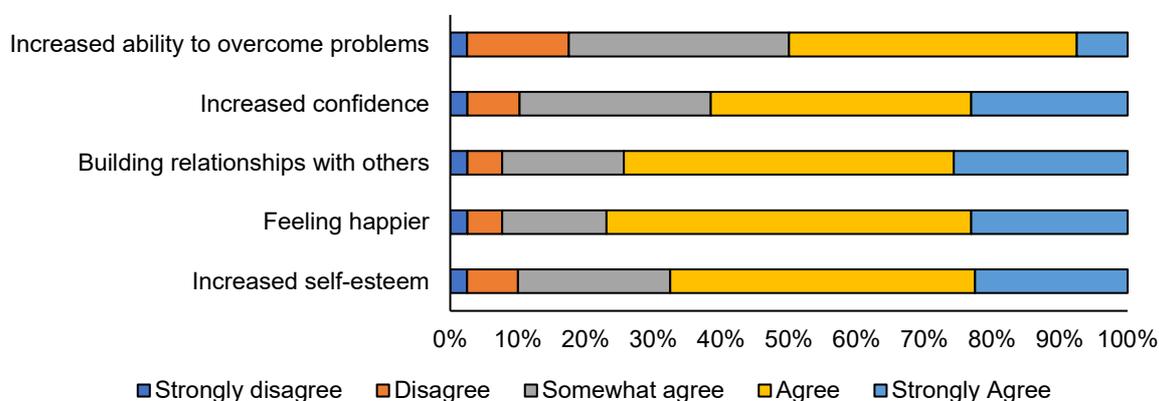
Of the services offered by Suffolk Family Carers, most parents suggested that they found the one-to-one support and respite to be of high importance with an average score of 4-4.5 out of 5. Of least importance to parents was access to online resources and information, but also surprisingly, whole family respite opportunities.

**Figure 12:** Of the types of support provided by Suffolk Family Carers, which do you think is the most important (please rank by level of importance)?



When asked about the impact of support provided by Suffolk Family Carers upon their child, most parents agreed that this support had enabled their child(ren) to build relationships with others, feel happier and increase self-esteem. Of the options, parents were most likely to disagree that support provided their child with an increased ability to overcome problems.

**Figure 13:** How much would you agree that the types of support offered by Suffolk Family Carers have assisted your child in the following ways:



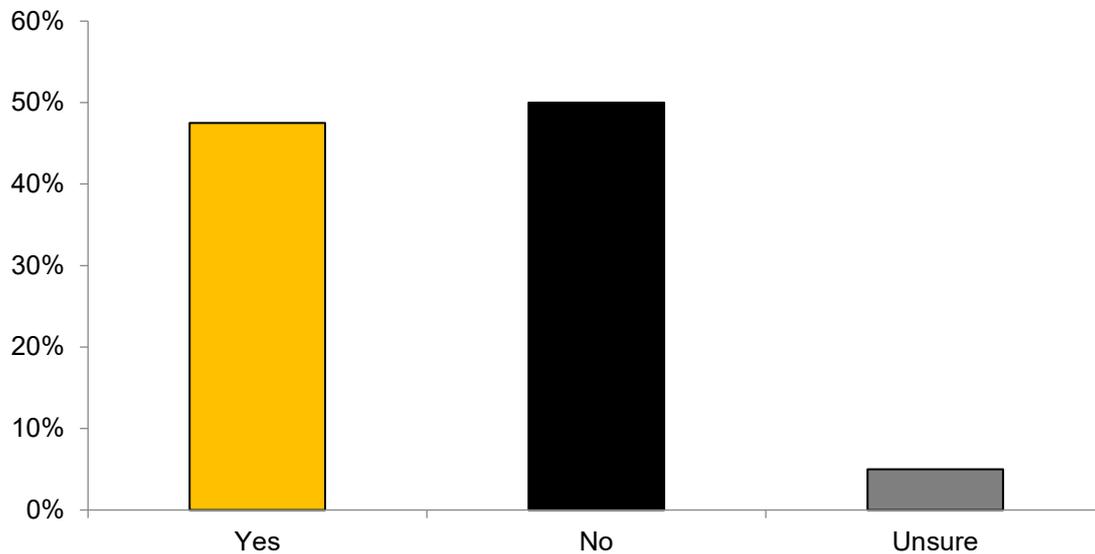
Over 50% of parents suggested that they did not refer their child to Suffolk Family Carers for support, while 48% did directly refer their child(ren) (Figure 14). It would be interesting to identify where 50% of children were referred from, but also to derive narratives from these as during the interviews most parents were sceptical of professional referrals to Suffolk Family Carers for potential ramifications on their living situations or involvement from health and social care professionals. Of those who did directly refer their child(ren) to Suffolk Family Carers, some suggested they were encouraged to do so via professionals at GP surgeries and schools, or via word of mouth through networks. Interviews with parents reveal the importance of integrated support with primary schools, due to the rapport and relationships built with schools enabling easier identification of families who may be in need of additional support.

*‘They asked at the school, how were your Easter holidays and [child] had said, ‘oh grandad had an accident he did a wee on the floor and on mum’ and all this sort of thing, and it’s difficult to deal with them when you have two children following you around the house, so they were seeing things that other children wouldn’t normally see, so [child] had told his teacher this and she said ‘well is everything alright’ so I explained, and then we got chatting about the home situation what the children see, they have never done any personal care, but they did a lot of emotional support for my mum and they would always want to be helpful and do things like that, so [educational staff member] said have you thought about whether they would like to be part of young carers at the school, and that can come with support with Suffolk Family Carers or without, but we can give them some support if you think they need it. And I thought it’s always good for children to be part of a community of like-minded people or children going through the same kind of experiences and things, so it started from there.’*

*(Parent)*

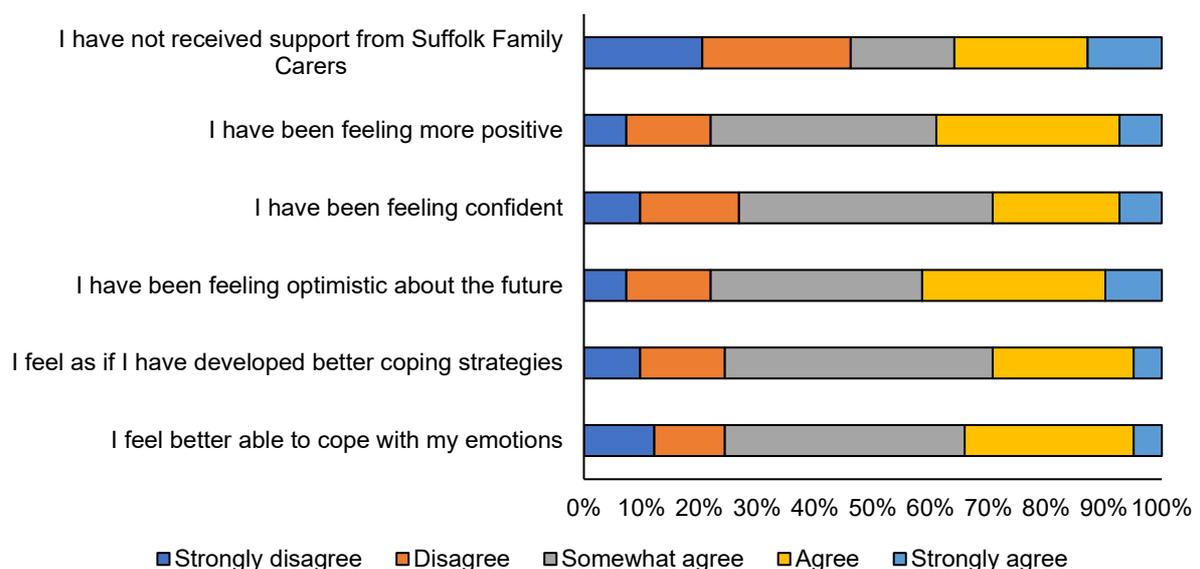
Most parents were motivated to find the support as they thought their child(ren) would benefit from some respite, time out and additional support.

**Figure 14:** Did you refer your child for support from the young carers service provided by Suffolk Family Carers?



Parents were then asked about the impact of support received from Suffolk Family Carers upon their subjective well-being. The majority of respondents suggested that they ‘somewhat agree’ that the support received has enabled them to feel more confident and develop better coping strategies. Most parents strongly agree (10%) or agree (32%) that the support they have received has enabled them to feel optimistic about the future (*Figure 15*).

**Figure 15:** Since receiving support from Suffolk Family Carers, how much would you agree with the following statements:

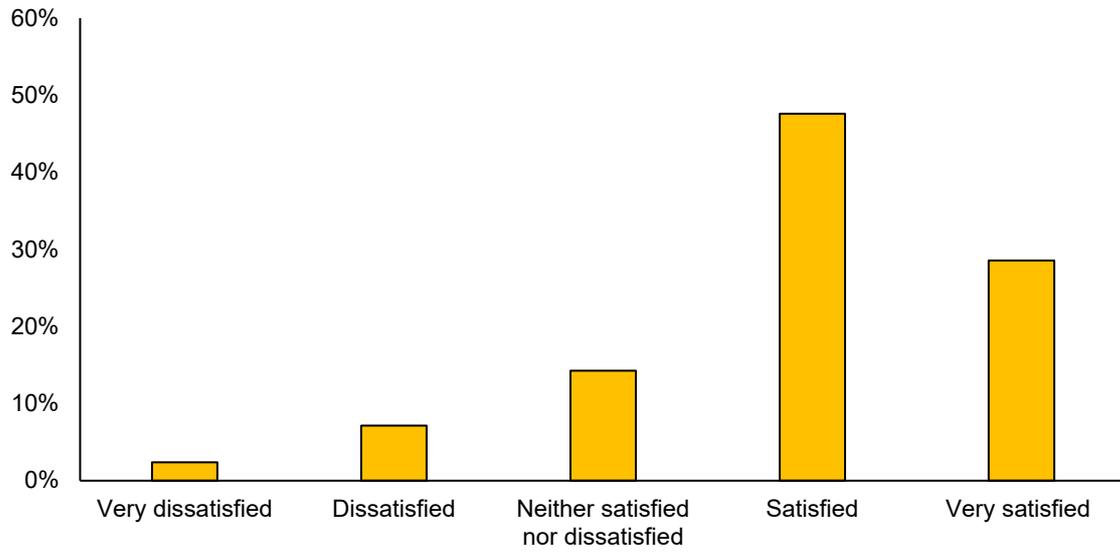


Most parents were also either satisfied (48%) or very satisfied (29%) with the support received from Suffolk Family Carers (*Figure 16*). Parents were offered the opportunity to feedback on their experience, the majority of whom provided very positive comments, suggesting that SFC has a very supportive and caring team and they are very supportive of the provision. A few parents would like some additional support for themselves, and this may be an opportunity for SFC to become increasingly joined up with the regional health and social care sector as we move toward an integrated healthcare system, in order to signpost and refer onto adult services. Furthermore, some parents suggested that it would be ideal if schools were able to provide groups for young carers as this would negate any difficulties around transport and also enable young people to build up a closer community within their immediate environment. Some parents also raised concerns around the suitability of events for young carers, particularly those at the lower end of the scale, around aged 5, and potential safeguarding concerns about those young people receiving transportation to events. Nonetheless, most parents suggest they are very happy with the support received from SFC, enabling their child(ren) to grow in confidence, build support networks and acquire the support they need and deserve.

*'SFC have supported me and my son at all times. Due to my complex health concerns, I have been supported with transport to pick and drop my son to the activities, the communication has been so good when there's been some changes according to schedule. This has helped my mental health and well-being as I have not been able to physically do it even though I would have loved to. Thank you so very to everyone for making a difference in mine and son's life. My son also gives incredible feedback when he attends these activities and also the taxi company that they choose are very friendly to him. I can't thank you enough.'* (Parent)

*'My son has enjoyed Carers club and always asks when he can go. It is the one place he is proud to have siblings with disability. He loves the people who work for Suffolk Family Carers. Unfortunately, he cannot attend much as I have three other children. Two of which have additional needs and a new-born. It would be nice to see schools run a carers group in school so children know peers that are nearby for support.'* (Parent)

**Figure 16:** How satisfied are you with the support provided by Suffolk Family Carers?

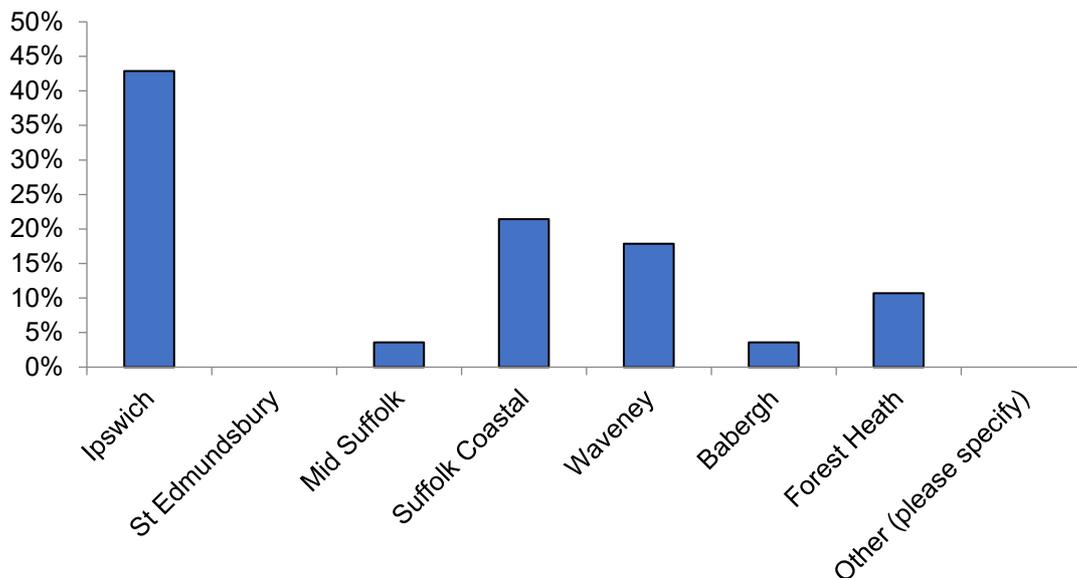


## 3.2 Educational Staff Perspectives

### 3.2.1 Teachers and Educational Staff: Participant demographics

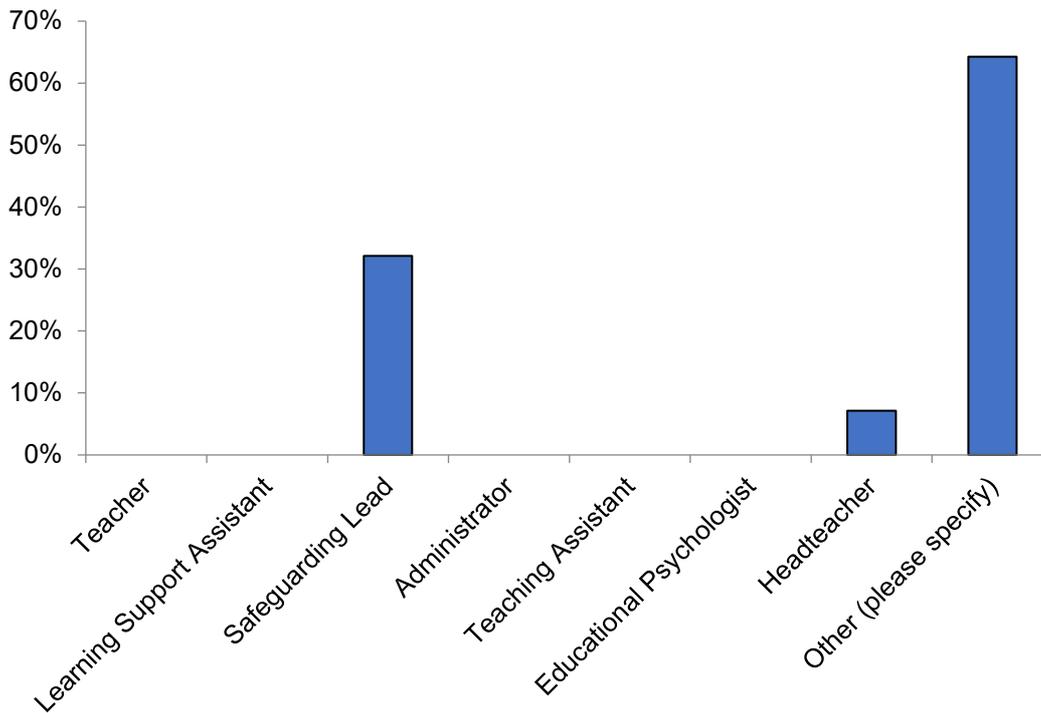
An online survey was also distributed to educational staff participating in the SFC 5-9s programme, a total of 28 staff participated in the survey. The majority of education staff who responded to the survey were based in Ipswich (43%) followed by Suffolk Coastal (21%) and Waveney (18%). Less responses were received from the St. Edmundsbury region, Mid Suffolk and Babergh. It should be noted however that SFC has a good working relationship with primary schools across the county and therefore response rates are not representative of the relationships with education providers. Data collection was interrupted by COVID-19, and therefore response rates were unfortunately lower than anticipated.

**Figure 17:** Which district of Suffolk is your school in?



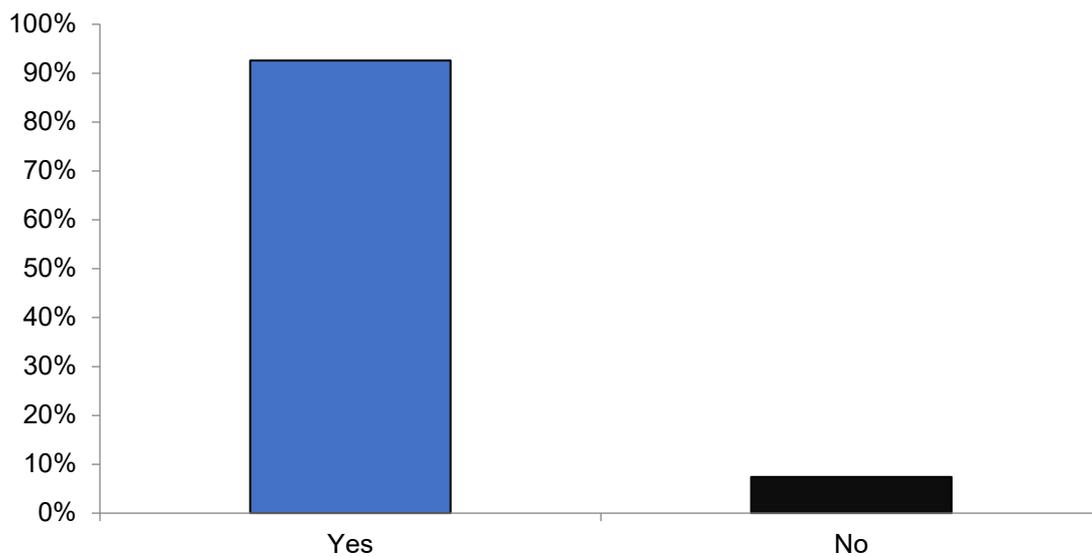
Of the responses, 32% were a designated safeguarding lead for their school, and 7% were headteachers. The remaining 64% selected 'other' suggesting they associated with a range of roles, including behavioural lead, pupil welfare officer, thrive practitioner, home school liaison officer, pastoral support lead or a family support practitioner (*Figure 18*).

**Figure 18:** Which of the below best describes your professional role?

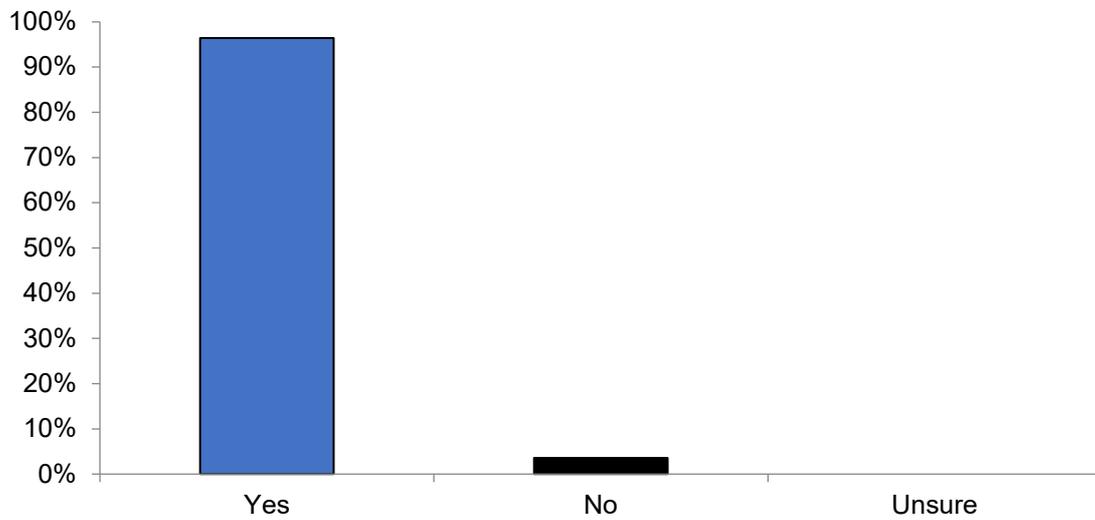


The majority of respondents identified as the designated Young Carers Lead at their school (93%). With the majority also having experience of directly supporting a young carer aged 5-9 years of age (96%) (Figure 20).

**Figure 19:** Are you a designated Young Carers Lead at your school?

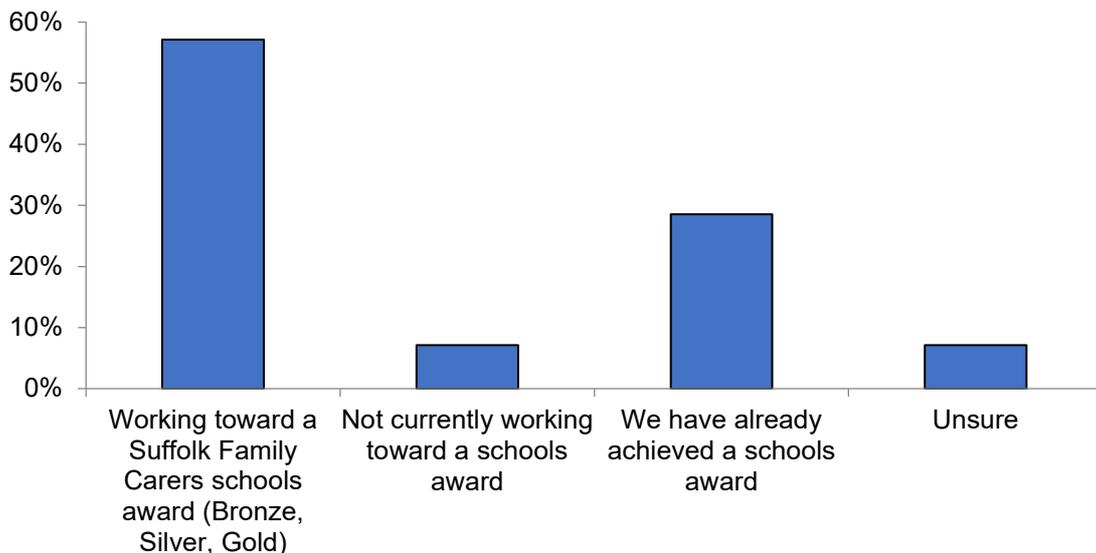


**Figure 20:** In your role, have you had to directly support a young person between the age of 5-9 years who has been identified as a young carer?



A total of 57% of respondents suggested that their school is currently working toward a school's award, with 29% suggesting they have already achieved an award. A total of 14% of respondents were not currently working toward an award or were unsure.

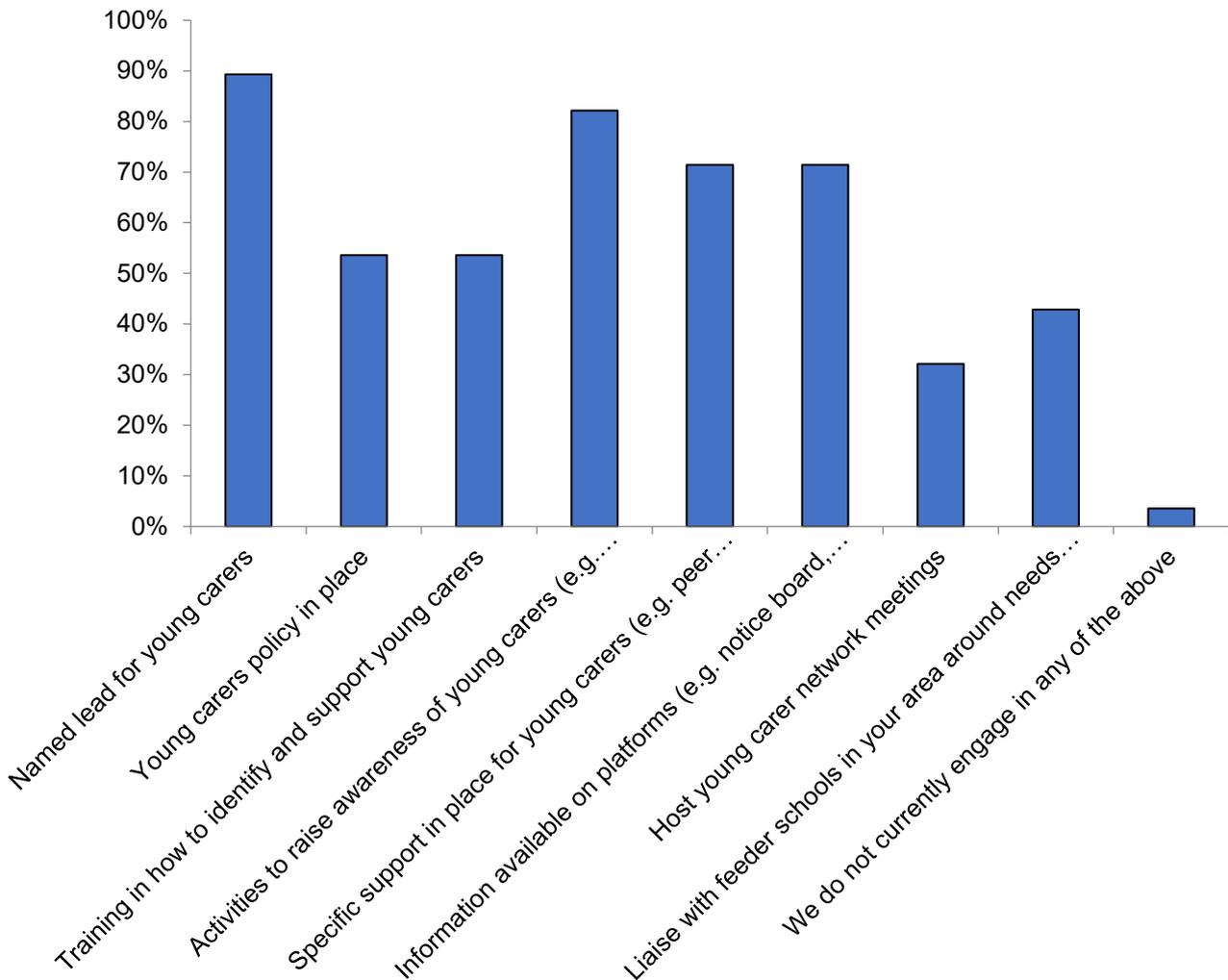
**Figure 21:** As far as you are aware, within your school are you currently:



Respondents were then asked to select as many options as possible from a question asking about the provision and support available at their school. Most educational staff suggested that they had a named lead for young carers (89%) or had activities to raise awareness of young carers (82%) (Figure 22). Around 71% of respondents suggested that they had support

in place for young carers and information available via various mediums. Respondents were less likely to suggest they had a young carers policy or training in how to identify and support young carers (54%).

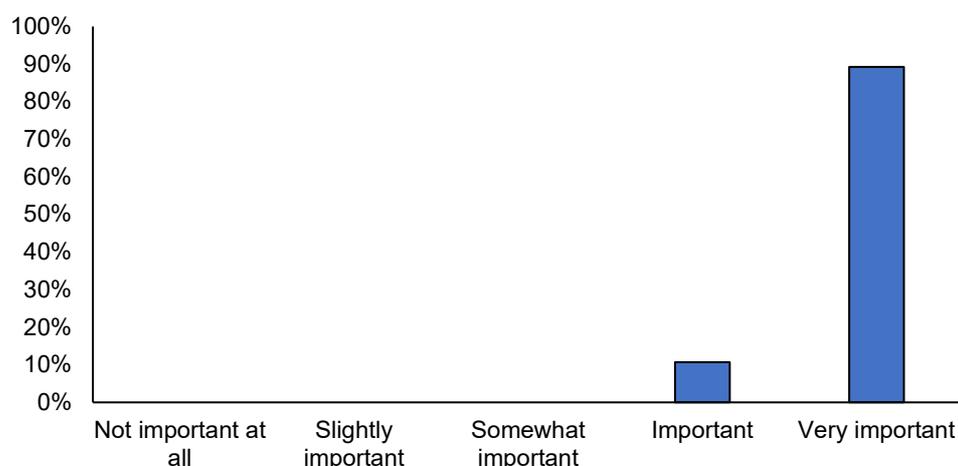
**Figure 22:** Do you currently have or engage in any of the following at your school? (please tick all that apply)



### 3.2.2 School identification and support of young carers

Similarly to parents, educational staff were also asked about their perception of early identification of young carers. All respondents suggested that it was either important (11%) or very important (89%) for schools to identify children aged 5-9 years as young carers.

**Figure 23:** Teachers: How important do you think it is for schools to identify children aged 5-9 years as young carers?



Educational staff gave multiple reasons as to why it is important to identify children aged 5-9 as young carers. The most frequent reason was the importance of 'early intervention' and preventative measures. Educational staff suggested identifying young carers early was important in preventing a compromise to their well-being by providing internal support at school as well as external support by organisations such as SFC. Educational staff also suggested that this early identification by schools is important in order *'to recognise what important role they [young carers] play, which also needs to be celebrated'*. Furthermore, it was also suggested that this early intervention is important as a caring role is likely to impact that young person regardless of age.

*'The identification and support that can then be offered both internally by education providers and externally by SFC is vital in ensuring the best outcomes for the child and the family' (Educational Staff)*

*'The potential impact upon these young people socially, emotionally and educationally is such that, to not recognise and be pro-active in supporting them, is failing in a duty of care.'*  
(Educational Staff)

Some teachers referred directly to stigma as a barrier which may prevent parents or guardians in identifying their child as a young carer, particularly when the parent is living with a mental illness. Considering the vast majority of parents who responded to the survey identified the young person as having a caring role due to mental illness within the family (Figure 5), this is something which may need further investigation and subsequent training and support for educational staff, particularly as some described uncertainty in broaching the subject with

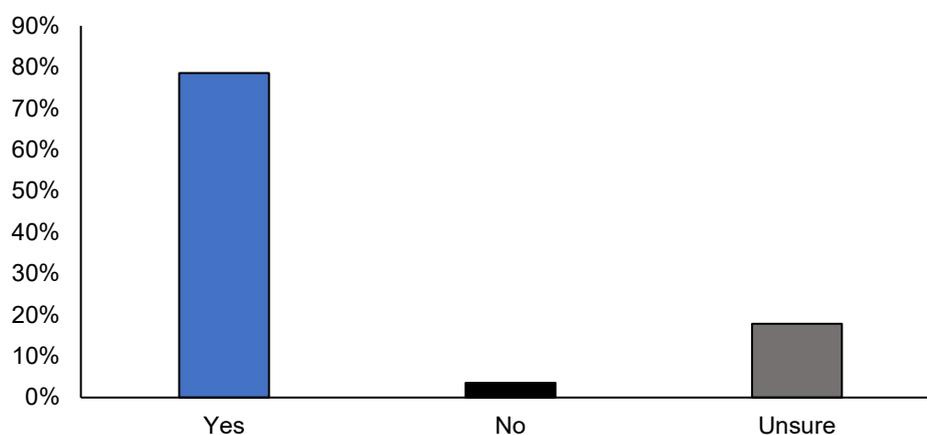
parents, navigating complex, sensitive conversations requiring high levels of emotional intelligence to build rapport and relationships.

*'I think sometimes there is still a bit of a stigma, I think erm, and I think that when you say the word young carers people feel that those children are doing quite a lot to support, but what we know in our school is that actually, for most of our children, that is not necessarily the case, I support our biggest majority of children who are young carers there is a parent with mental health issues, so they are not necessarily doing things around the house, the don't have a lot of responsibilities but obviously they are impacted by the parents mental health, we have attachment issues with some of those children, they can be quite quiet, so we see how that impacts on them emotionally than physically doing tasks'* (Educational Staff)

*'I have come across a couple of parents who are like no no, they don't want their children to engage with young carers, I didn't want to offend anyone, I didn't want to phone them out and say your child is a young carer, especially when it is around mental health, when it is a physical disability and the child has to physically help, that is when I find it easier, but when it is around mental health that's when I find it harder to not offend them, because you don't want to give them the impression you think they are not coping with their children, so that is what I needed guidance with.'* (Educational Staff)

When asked about the need to identify carers below the age of 5 years, there was less consistency in responses, with some educational staff suggesting they were unsure (18%), nonetheless the majority considered very early identification to be of importance (79%) (Figure 24).

**Figure 24:** Teachers - Do you think there is a need to identify young carers below 5 years of age?



Educational staff who thought that there was a need to identify carers under the age of 5 years suggested that early intervention should not be restricted or limited due to a child's age, and that children can be carers regardless of age, and this is considered to have an inevitable impact upon their everyday lives.

*'Children do not just become carers from 5. They will be doing all sorts of things within the home under this age and will need to be able to be a child and do fun activities... It is not the adults' fault if they are unable to fully support their child. It can be a sibling that needs extra support so taking up more time and the under 5 is struggling to feel they are part of the family.'* (Educational Staff)

*'I think the impact being a young carer can have cannot be measured by age.'* (Educational Staff)

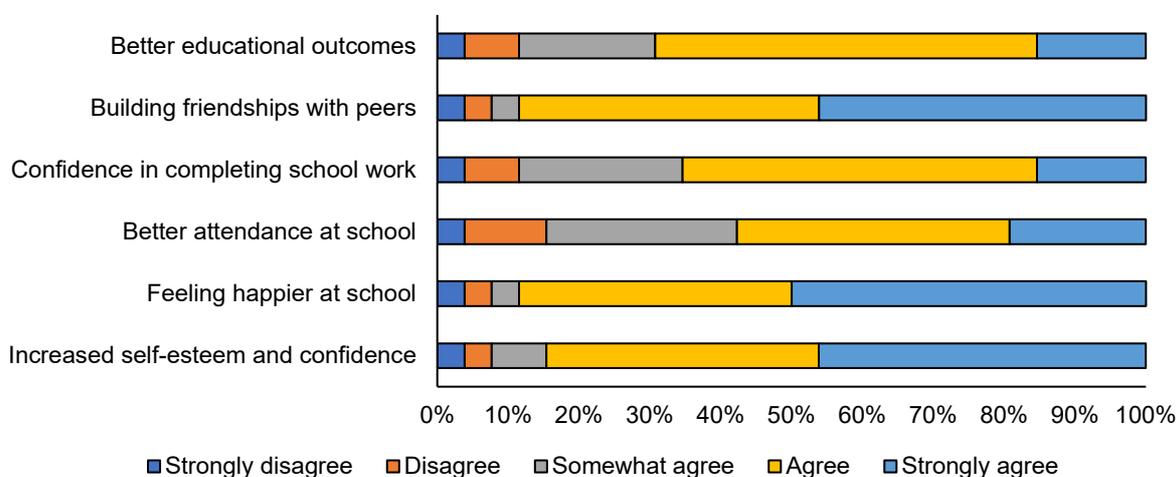
However, the educational staff who were unsure as to whether children under the age of 5 should be identified as young carers suggested that this was due to uncertainty around a child's ability to understand or fully recognise their situation, something which is thought to be more prevalent once the child attends school and has multiple comparison points.

*'Although a carer of any age needs support, sometimes younger children may not fully understand the situation and may find it difficult being with the older children - be overwhelmed by it all'* (Educational Staff)

*'Not sure what the child understanding will be as they have no concept of a different life. Once at school they see that things are different for them. Although support for them would never be a bad thing'* (Educational Staff)

Nonetheless, identification of children aged 5-9 years and support provided by schools was perceived by educational staff to have a substantial positive impact upon the young carers. For example, educational staff were likely to strongly agree or agree that the support offered to young carers at their school enabled the children to build friendships with peers, feel happier at school and achieve better educational outcomes (*Figure 25*).

**Figure 25:** Teachers: How much would you agree that the types of support offered for young carers in your school has impacted them in the following ways:

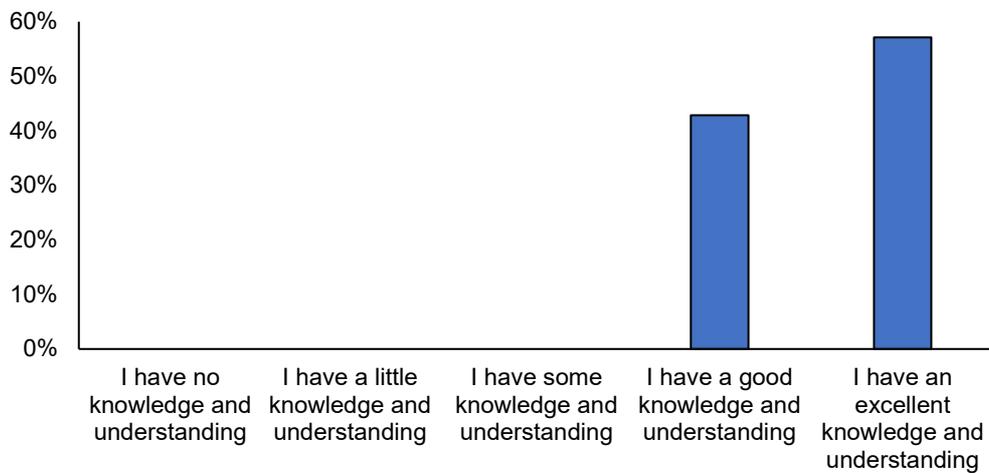


Educational Staff interviewed also demonstrated innovative ideas and activities for engaging with the young people they are working with, the families and other professionals. These included parent and child open evenings, exhibitions, personal communication, building connections with feeder schools, monitoring processes, embedding young carers into the curriculum and youth-led participatory activities. Suffolk Family Carers may want to consider an informal Suffolk Family Carers Educational Leads network or an updated collection of 'best practice' as the project continues to progress, to share or disseminate ideas and materials.

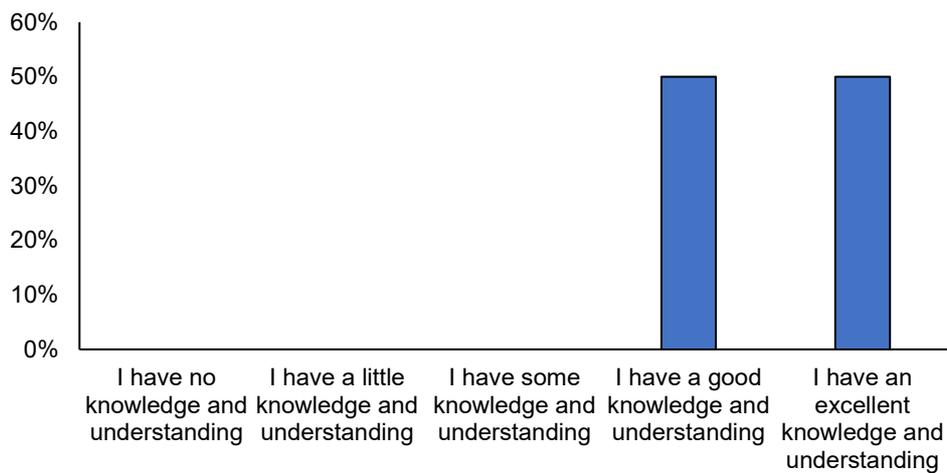
### 3.2.3 School Support from External Organisations: Suffolk Family Carers

Lastly, educational staff were asked a series of questions about support received from Suffolk Family Carers and the impact upon their knowledge and confidence in identifying and supporting a young carer. After receiving support from Suffolk Family Carers, all respondents suggested they had developed a good or excellent knowledge base and understanding of how to assess, identify and support a young carer (*Figure 26 & 27*).

**Figure 26:** Teachers: After receiving support from SFC, how would you rate your **knowledge and understanding** of how to **assess and identify** a young carer?

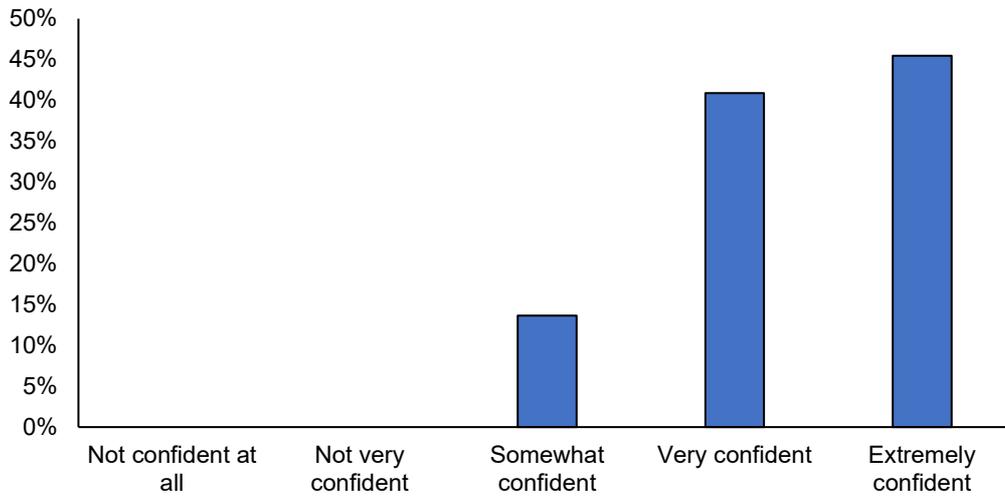


**Figure 27:** Teachers: After receiving support from SFC, how would you rate your **knowledge and understanding** of how to **support** a young carer?

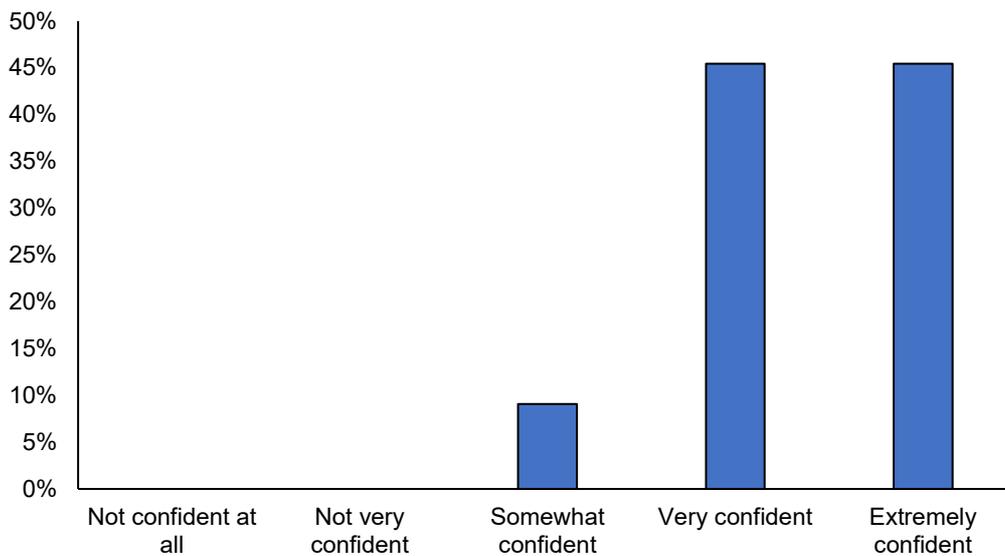


Similarly, educational staff suggested they felt very or extremely confident in assessing, identifying and supporting a young carer after support from Suffolk Family Carers (*Figure 28 & 29*). Note however that 10-13% of respondents felt only 'somewhat confident' when identifying and supporting a young carer, suggesting that for some, whilst knowledge and understanding is rated highly, applying this in practice might be more challenging.

**Figure 28:** Teachers: After receiving support from SFC, how **confident** do you feel in your ability to **assess and identify** a young carer?



**Figure 29:** Teachers: After receiving support from SFC, how would you rate your **confidence** in **supporting** a young carer?

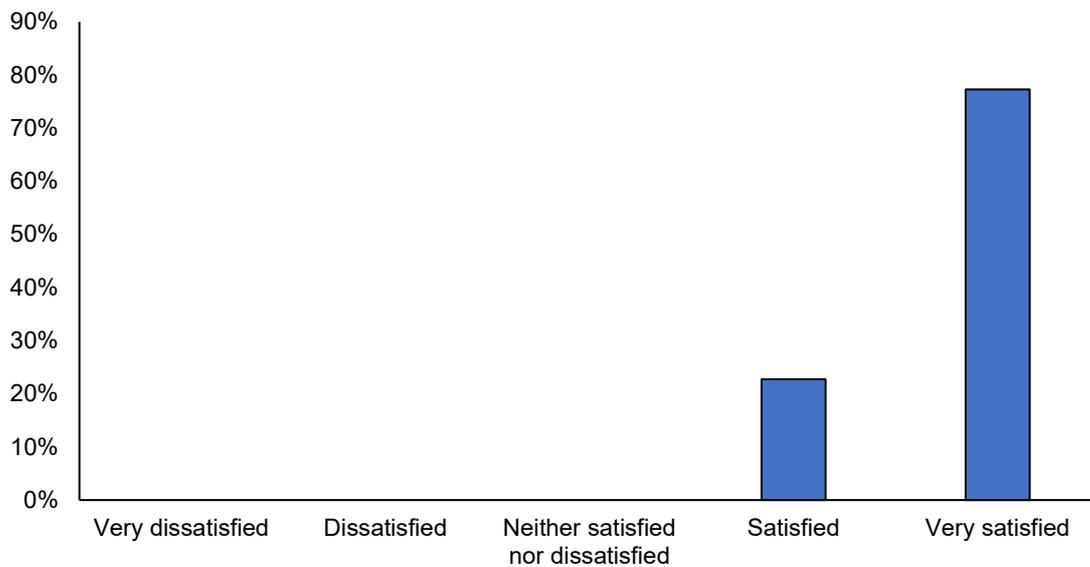


Educational staff were very positive regarding the support they had received from the Suffolk Family Carers Young Carers team (*Figure 30*), suggesting that the staff are extremely supportive, approachable, pro-active and inspiring. Positive comments also arise when educational staff describe a positive working relationship with the SFC team. Some respondents suggested that the team would benefit from additional staff in order to cater for the number of schools across the county.

*'The services received have been outstanding. It has enabled our educational setting to provide excellent care for our pupils who have been identified as Young Carers. They have supported us throughout our journey, always available to answer questions and support us.*

*They have enabled us to utilise all of the awards available, not purely for certification purposes, but to enable us to provide outstanding provision for our Young Carers and their families.'* (Educational Staff)

**Figure 30:** Teachers: How satisfied are you with the support provided by Suffolk Family Carers?



*'It's incredible, amazing, wonderful, couldn't have done it without them, we have 43 children in this school, who because of what they did when they walked into this school in 2016 or whenever it was, we have those families now, who would not have got what they have without the support of those people. I do what I do because I am passionate about it, but without them supporting me and the school and the community in the first instance we would probably be unaware of the number of young carers. Because of their professionalism, their drive, they are inspirational, and they support me every step of the way. They are a phone call away, they always come into speak to the children, they keep me informed, they come up with inspiring ideas, but they are truly remarkable and I tell everyone I can, and the families, without them, we would not have what we have got in this school today.'*

*(Educational Staff)*

## 4. CONCLUSIONS

The families and support systems, including charitable organisations and educational institutions, of children and young people with a caring role are crucial in shaping their socio-emotional development. The parents, guardians and educational staff who engaged in this evaluation describe the importance of identifying young carers from an early age, and subsequently the important role that primary schools and Suffolk Family Carers play in enabling the young person to grow in confidence, build social connections, develop positive coping mechanisms and access respite opportunities. Parents and guardians suggest that their child(ren) aged 5-9 years who are identified by their schools as young carers through the schools' award programme led by the Young Carers team within Suffolk Family Carers as a result felt proud to be a young carer and displayed increased self-esteem and confidence. The connections that Suffolk Family Carers build with primary schools is vital in ensuring that families are aware of any support they might be able to receive, as well as reducing the stigma attached to a child being identified as a young carer. Not one family unit is the same, and young carers have different experiences with regards to their caring roles and responsibilities. Parent and guardian comments reflect the need for flexible services, which are responsive to the needs of the family and assist regardless of the age of the child.

Similarly, educational staff, the majority of whom were young carer leads at their schools, highlight the importance of early identification and support as a preventative mechanism to help young people access support they need and deserve prior to any potential difficulties emotionally, socially, behaviourally and academically in later stages of development. The idea of identifying young carers from a young age is complex, and a sensitive topic to navigate, with some young people at different points of the spectrum with regards to their caring responsibilities. This evaluation has highlighted that care should be taken by professionals, using their expertise, knowledge and professional capacity to address the topic in with families in an empathetic way, building rapport and reassuring parents as to what this identification entails, as many of the educational staff interviewed demonstrated. Educational staff suggested that after receiving support from Suffolk Family Carers they had a good or excellent knowledge and understanding of how to identify, assess and support a young carer. Furthermore, their perceptions of the impact of support with school upon the young people is concurrent with that of parents, suggesting an increase in happiness at school, confidence and self-esteem. Overall, this evaluation highlights the importance of holistic support, involving the family and young person at all stages. The findings are consistent with previous literature and give further insight into the importance of cross-organisational support mechanisms for young carers and their families.

## 5. RECOMMENDATIONS

Overall, parents, guardians and educational staff were highly positive of the support provided by Suffolk Family Carers and the subsequent provision within primary schools. The findings from this project reflect the views and perceptions of parents, guardians and educational staff in both identifying young carers, educational support and external support outside of the school setting. In accordance with their perceptions and as with projects of this nature, some factors needing further consideration were identified during the research process. The research team has therefore devised the following recommendations to guide future development and directions:

### 1. Further Research and Monitoring

Unfortunately, due to the outbreak of Coronavirus within the UK and subsequent lockdown period during the data collection period of this project, primary school children themselves were unable to participate in the evaluation as planned. Therefore, further research, adopting child-centred creative and participatory methods is recommended (Joseph et al., 2020), but also looking at secondary datasets and examining any changes in academic attainment and attendance between those identified as a young carer and those who are not, and self-reported differences both at the outset and after the intervention period.

### 2. Parental Mental Ill-Health: Responses and Support

Most parents who completed the survey identified that the young carer has some form of caring role for an individual with mental health difficulties. Suffolk Family Carers may want to provide or think about providing some tailored training for teachers around how they can approach and support children whose parent or another family member is living with a mental health condition. Future in-depth research and intervention work investigating caring responsibilities of young carers with a parent, sibling or family member with mental health difficulties may be of interest.

### 3. Breaking down stigma: Outlining expectations

Parents suggested that one of the barriers to coming forward to seek support was the stigma surrounding the concept of a 'young carer' and what the nature of support would entail. This appears to be partly overcome by schools approaching parents and families where a rapport is built, however Suffolk Family Carers may want to provide guidance (for example via anonymised case studies of children with different responsibilities across the caring spectrum)

as to what parents should expect if they disclose their child is a young carer, from both the school and Suffolk Family Carers, to potentially ease apprehension.

#### **4. Reconsidering the age of identification and support provision**

Most respondents suggested that young carers could have been identified and subsequently provided support earlier, even below the age of 5 years of age. There were however some parents and educational staff members who were unsure of such early identification. As a result, it is recommended that age lowered but taken on a case-by-case basis but should not be a pre-requisite for obtaining support from organisations such as Suffolk Family Carers. Such a transition would require additional resources for SFC to move provision to early years settings, but also to review safeguarding and approaches to provision for younger carers below the age of 5.

#### **5. Sharing best practice**

Some educational staff reflected the desire to find out what other young carer leads had created or developed in terms of activities, policies and examples of best practice. Developing a Young Carers Lead network or forum to share best practice and disseminate ideas may be a potential mechanism to build connections across primary and secondary school settings, to facilitate transition, build connections and share ideas.