

Young Carers of Black and Minority Ethnic families

The
Children's
Society

No child
should feel
alone

Specific issues for BME families:

- Young carers are **1.5 times** as likely to be from BAME communities, and twice as likely to not speak English as a first language.¹
- BAME groups as a whole are **more likely** to report and experience ill health than white British people.²
- People from marginalised groups, including BAME households, are at **greater risk** of developing mental health problems.³
- Recent studies have found that BME carers **may not access support** because they are often unaware that such support exists.⁴

Legal duties

The Race Relations (Amendment) Act 2000 places a duty on all public bodies to promote equality of opportunity, tackle racial discrimination and promote good relations between different communities.

legislation.gov.uk/ukpga/2000/34/contents

This is reaffirmed in the Equality Act 2010 which aims to protect disabled people and prevent disability discrimination.

www.equalities.gov.uk/equality_bill.aspx

The Care Act 2014 and Children and Families Act 2014 placed responsibilities on local authorities to actively identify young carers from all backgrounds.

childrenssociety.org.uk/youngcarer/legislation

Barriers

There may be a range of barriers when working with BME carers and their families.

- Poor experience of culturally insensitive services or professionals.
- Lack of accessible information or knowledge about services available.
- Language barriers and misunderstanding – for example about medical terms.
- Stigma surrounding particular types of ill health and disability.
- Uncertainty about support from formal sources due to cultural expectations of role.
- Direct and institutional discrimination.

scie.org.uk/publications/raceequalitydiscussionpapers/redp03.asp

refugeetoolkit.org.uk

A '**young carer**' is defined in section 96 of the Children and Families Act 2014 as: '...a person under 18 who provides or intends to provide care for another person.'

This relates to care for any family member who is physically or mentally ill, frail elderly, disabled or misuses alcohol or substances.

The **key principle** is that: 'Children should not undertake inappropriate or excessive caring roles that may have an impact on their development. A young carer becomes vulnerable when their caring role risks impacting upon their emotional or physical well-being and their prospects in education and life.'

The **Children and Families Act 2014** amended the Children Act to make it easier for young carers to get an assessment of their needs and to introduce 'whole family' approaches to assessment and support. Local authorities must offer an assessment where it appears that a child is involved in providing care.

Children Act 1989: Section 17ZA 1(a) [inserted by section 96 Children and Families Act 2014] If any child or young person is identified as carrying out a caring role, this should result in an offer of a needs assessment for the adult requiring care and support, and the local authority must consider whether to undertake a young carer's needs assessment under the Children Act 1989. Refer to our 'Supporting Young Carers and their families' introductory booklet for more information.

Although young carers need extra support they are no more likely to find it from statutory agencies than other children (The Children's Society Hidden from View, 2013)

BME / BAME: Black Minority Ethnic (BME) or Black Asian and Minority Ethnic (BAME) 'refers to all groups who are discriminated against on the grounds of their race, culture, nationality or religion.' (Carers UK – carersuk.org)

¹ The Children's Society (2013) Hidden from View

² Ethnicity and health (London, Parliamentary Office of Science and Technology, 2007), p. 1. Sourced: www.irr.org.uk/research/statistics/health/ 2017

³ Independent Mental Health Taskforce (2016) A Five Year Forward View of Mental Health

⁴ www.iriss.org.uk/resources/insights/improving-support-black-minority-ethnic-bme-carers May 2011

Messages from Black and Minority Ethnic parents:

'Professionals need to think about young people who are ethnic minorities where caring is seen as part of the culture.'

'Lack of information about what's available is a barrier, because social services think being from an Asian community means they can do it themselves and have it in their blood to look after their own people and their own families.'

Best practice top tips:

- 'Think child, think parent, think family' to ensure the child is heard and their needs met. Do not leave it to someone else (SCIE Guidance 2009).
- Culturally sensitive ways of enabling people to access services are needed. Some services need to adapt provision to meet the needs of particular communities. Take care to avoid assumptions because of someone's culture or background. Ensure open consultation with family members, take into account any particular needs and requirements that arise, for example foods, festivals, understanding of illness or disability and expectations about caring.
- Statutory service providers like GP surgeries can gather a lot of information. They need to be more proactive and seek out young carers, and give them the signposting and counselling support that they need.
- Communities are the most important aspect of the jigsaw to engage young carers. That means going to the local mosque, going to the local temples, going to the local churches, going to where young people gather.
- Remember that if the child's health or development is impaired or there is the risk of significant harm, Children's Services must be informed.

**(Source: The Refugee Toolkit, 2017
The Children's Society, refugeetoolkit.org.uk)**

Service providers need to be sensitive and have an approach that will identify BME families and go to them with good training and sensitivity toward their cultural needs and their expectations and also the ability to signpost them. If we can do that on a more regular basis, today's young carers will not be tomorrow's cared for.

(Source: engagetoolkit.org.uk)

'Stigma is a big barrier. [It is hard] for carers to identify themselves and say they need help because there is fear there: a fear that the person they care for may be taken away from them; a fear that that are going to be taken away from the family unit; and also a fear of the community – certain illnesses aren't deemed something you'd talk about.'

Support

The Children's Society (2016) Supporting Young Carers and their Families sets out key legislation and best practice guidance. Further resources are available from the Include Programme website. youngcarer.com

The **Engage Toolkit** sets out a wide range of resources, links and video clips for policy and practice of working with BME young carers and their families. engagetoolkit.org.uk

Insight 7: Improving support for black and minority ethnic (BME) carers.

iriss.org.uk/resources/insights/improving-support-black-minority-ethnic-bme-carers

The **Whole Family Pathway** resource is a map or guide for both families and agencies to follow so they can see what choices, what responsibilities and what lines of accountability for services may be available for carers and their families.

childrenssociety.org.uk/sites/default/files/whole-family-pathway-2018.pdf

Think Family helps embed policy and practice in working with the whole family to ensure effective assessment and response to need. webarchive.nationalarchives.gov.uk/20130323053534/https://www.education.gov.uk/publications/eOrderingDownload/Think-Family.pdf

Research

The Children's Society (2016) 'There's nobody is there – no one who can actually help?' The challenges of estimating the number of young carers and knowing how to meet their needs.

The IARS International Institute (2017) Tearing Down the Barriers to Employment and Education for young, black and minority ethnic carers.

care2work.org

Please note these organisations and resources are listed for your information. The Children's Society does not necessarily endorse them.