



# young carers

**RESOURCE PACK FOR SCHOOLS**





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# 1. introduction

## What is a young carer?

**A young carer is a young person (up to the age of 18) whose life is affected by caring, where the person being cared for has a disability or long term illness. The person being cared for may be a parent, sibling, other family member or friend and is not necessarily living in the same house as the young carer.**

## Why is this pack important?

*There were 174,997 Young Carers in the UK identified in the 2001 Census<sup>1</sup>. There will be several young carers in every school. As many as 80 Young Carers were identified in one senior school in Surrey.*

*One in five young carers miss school<sup>2</sup> because of their caring responsibilities. Many will be late to school and unable to complete their homework on time. When at school young carers may have difficulty concentrating due to anxiety about the person they care for. In addition to academic problems, many young carers have difficulty integrating socially within the school environment, with some being teased or bullied by their peers.*

*In spite of these problems the majority of young carers will not be identified as such by staff in schools, partly because young carers and their families often remain silent about their caring responsibilities due to fears of the reactions of statutory agencies and peers, or because they are unaware that help may be available.*

## What is this pack for?

*'Young Carer' is a relatively new term, so one of the aims of this project is to raise teachers' awareness of young carers and their needs and to provide some suggestions on how young carers can be supported within schools. Young carers themselves have identified that the attitudes of their peers compound the difficulties that they experience. The aim of the lessons included in the pack is to increase pupils' understanding of disability, illness and caring responsibilities. It is hoped that this improved understanding will result in a more supportive social environment for young carers and a reduction in isolation and loneliness.*

*Many young carers do not realise that there are other young people in similar situations or that they and their families may be entitled to support. Participation in the lessons will encourage young carers to consider their own situation and to seek help from appropriate sources.*

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<sup>1</sup> 2001 Census

<sup>2</sup> 'Young Carers in the United Kingdom: A Profile' Chris Dearden and Saul Becker. Carers National Association 1998.

### **What is in the pack and how can schools use it?**

*The pack contains materials for Key Stages 2 and 3. The materials are designed as a half term (6 weeks) module of lessons to be integrated into schools' existing Personal, Social and Health Education (PSHE) programmes. In addition to the lesson materials the pack contains background information for teachers and suggestions for supporting known young carers within school and through other agencies – a list of suggested contacts is included for this purpose.*

*Should schools wish to extend the work beyond the lesson plans given in the pack, the appendices contain some suggestions for work in Key Stages 1 and 4. There is also an appendix relating to special schools.*

### **Where did this pack come from?**

*The pack is a result of a collaborative project involving Surrey Young Carers Project, Soroptimist International of Reigate and District, Surrey Education Service and Surrey schools. The classroom materials were written by teachers of Key Stage 2 and 3, working in schools in Surrey.*

*The quotations used throughout this pack are those of young carers in Surrey – taken either from conversations with local workers or Elizabeth Clark's research into young carers in Guildford<sup>3</sup>. The case studies are based on young carers in the county, but details have been combined or fictionalised to protect the identity of individuals.*

*A full list of those involved in the project and acknowledgements can be found in the appendices.*

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<sup>3</sup> 'Young Carers in Guildford. Seeing the Whole. In Support for Caring Families' Elizabeth Clark. Guildford Crossroads and Surrey Social Services 1996.



## 2. background information

**This section of the pack has been designed to give teachers an overview of young carers issues that will supplement their existing skills and expertise. It does not attempt to cover this very complex and sensitive subject comprehensively. There have been several publications in recent years that consider the issues of young carers in greater depth and give more extensive guidance – many of these are listed in the resources section.**

### **Definition**

As stated earlier, a young carer is a young person (up to the age of 18), whose life is affected by caring, where the person being cared for has a disability or long term illness.<sup>4</sup>

Within this definition, the person being cared for may be a parent, sibling, other family member or friend, and is not necessarily living in the same house as the young carer.

Disability and long term illness is not restricted to a physical disability or illness, but includes mental health, learning disability, substance misuse, HIV and AIDS, etc.

The following young people are excluded from the definition:

- **those caring for someone with a short term illness, eg. flu;**
- **those caring for non-disabled siblings whilst non-disabled parents are absent, eg. because of work commitments;**
- **those caring for their partner or their own child.**

In addition, young carers themselves may have a disability or illness, and in such cases will experience even greater disadvantage.

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<sup>4</sup> *This definition has been developed by Surrey Young Carers Project and agreed by Surrey Social Services*

## Some statistics

“Young Carers in the United Kingdom: A Profile”<sup>5</sup> is the largest single piece of research into young carers in Britain, studying over 2,000 young carers known to projects across the country.

AGE	GENDER	ETHNICITY	WHO DO THEY CARE FOR?
Average age 12	57% female	86% white European	58% care for their mother
1% of pre school age	43% male	7% Afro-Caribbean	13% care for their father
32% between 5 and 10	This reflects the proportions of adult carers	It is believed that this data understates the amount of young carers from minority ethnic groups	24% care for a brother or sister
54% between 11 and 15			4% care for a grandparent
14% between 16 and 18			1% other
			12% of young carers are caring for more than one person

54% of young carers are in lone parent families. It is often assumed that, if there is a “well” adult around, young carers would not take on the caring role. However relationship difficulties, work commitments and other factors may mean that children in two parent families become carers. Young carers may be caring for both parents. There are also a significant number of young people who support the able parent in caring.

DISABILITIES AND ILLNESSES	CARING TASKS
63% care for someone with physical health problems	Caring tasks may be determined by the condition of the care receiver.
29% mental ill health	72% perform domestic tasks
14% learning disability	57% administer general care eg. helping with mobility or giving medication.
4% sensory impairment	
3% other illness/disability	
	43% offer emotional support
	21% give intimate personal care
	7% provide child care for non-disabled brothers and sisters
	29% provide other types of care and many young carers will perform a range of caring tasks.

<sup>5</sup> ‘Young Carers in the United Kingdom: A Profile’ Chris Dearden and Saul Becker. Carers National Association 1998.

“Sometimes I cannot go out, because I feel I have to stay with him. I don’t want Mum or my sister looking after him on their own”.

“I don’t like tidying up all the time”.

“It gets tiresome doing the cooking etc”.

“My friends don’t understand why I can’t go out. They say ‘your Mum’s all right now’. They don’t understand how much emotional support she needs”.

“I don’t like emptying commodes”.

“When my Mum goes into hospital with my sister, I have to be like the Mum”.

## The effects of caring

When discussing the effects that caring has on young carers, the focus has shifted away from quantifying the caring tasks undertaken, to considering the impact on the individual and the family. Growing up coping with the disability or illness of a loved one will, inevitably, affect a young person. The nature and extent of such effects will be dependent on a number of factors, eg. the services and support offered to the family by friends and agencies; the structure and dynamic of the family itself; the nature of the disability and the personality of the child.

The importance of contextual factors such as the culture of the family and the personality of the child should not be underestimated. For example, there is some evidence to suggest that larger families cope better with illness or disability as the practical and emotional burdens are shared, but even within a family there will be variations between children in how they feel about their caring role.<sup>6</sup>

## Education problems

86% of young carers are of compulsory school age. One in five of these children misses school because of their caring responsibilities. 28% of young carers have some kind of educational difficulty – this may mean missing school, receiving education welfare services or additional support, or they may have been referred to the Project by an education professional. This figure rises to 35% of young carers in secondary school.<sup>7</sup>

Young carers are often late to school and those who do manage to get there may have difficulty concentrating because of tiredness, concern about the person they are caring for and social problems within the school. Academic under achievement, combined with continuing caring responsibilities, limits young carers’ career and further education options.

## Social Problems

Young carers experience a range of social problems. These may occur for practical reasons, for example they cannot go out to play or take part in activities because of caring responsibilities, low income and transport problems. They also arise because young carers and their families are seen as different by other children, the behaviour of the care receiver may be seen as embarrassing or threatening, or their condition stigmatised. Where young carers are able to access leisure opportunities, they often find it difficult to relax and enjoy themselves because they are worried about the care receiver. Such factors may lead to isolation from peers, bullying, behavioural difficulties, loss of childhood, disaffection and problems with social and personal development.

Caring responsibilities may also lead to false maturity, ie. the young carer appears to be very mature for his/her age, but will behave immaturely in a ‘safe’ environment.

The onset of illness or disability will also lead to changes within family relationships and may cause family breakdown.

Relationships in adult life may be affected by the social problems encountered by young carers in their childhood.

<sup>6</sup> ‘Young Carers in Guildford. Seeing the Whole. IN Support for Caring Families’ Elizabeth Clark. Guildford Crossroads and Social Services 1996.

<sup>7</sup> ‘Young Carers in the United Kingdom: A Profile’ Chris Dearden and Saul Becker, Carers National Association 1998.

**“I would like my brother to change and be a normal human being like us”.**

**“My sister’s going through all the pain, and I have nothing seriously wrong”.**

**“I feel guilty if I’ve said or thought something about my sister – it’s not her fault”.**

## **Emotional problems and mental ill health**

Clearly the effects of caring discussed above will impact on the emotional well being and mental health of young carers. Young carers often describe feelings of isolation, stress, depression, of being different and of having no control over their lives and environment. Feelings of loss and grief are also common due to changes in family relationships, income and activities and discernible differences between the childhood experiences of young carers and their peers. Sadly many young carers will also experience bereavement.

Emotional distress experienced by young carers may be manifested through eating disorders and self harm.

## **Physical ill health**

Like adult carers, young carers experience physical ill health and injury because of their caring roles. Injury may arise from lifting or heavy domestic tasks and young carers may become ill through lack of sleep or poor self care and nutrition. Illnesses such as asthma, other allergies and severe headaches also appear to be quite common in young carers, possibly due to stress.

## **Siblings**

Dearden and Becker’s research shows that 24% of young carers are caring for a brother or sister with a disability or illness.<sup>8</sup> Often these young carers will be playing a supportive role to their parents, but the impact on siblings and their consequent needs should not be overlooked or undervalued.

“All in the family: siblings and disability”<sup>9</sup> is a study of children who had a brother or sister with a disability. The survey found that all of the children interviewed helped to care for their brother or sister.

The effects were that:

- **55% of children had their sleep disturbed by the sleeping patterns of their brother or sister with a disability**
- **45% were sometimes tired at school**
- **45% had difficulty completing homework because of the attention seeking behaviour of their sibling**
- **70% felt jealous or angry at the time parents spent with their brother or sister**
- **over 40% were angry or upset because family outings were infrequent or limited in scope**
- **nearly 40% felt isolated**
- **60% did not mind helping to care, the remainder refused to comment**
- **over 40% were upset by regularly disturbed mealtimes**
- **70% had been bullied or teased at school because of their sibling’s disability**
- **almost 60% were embarrassed, upset or angry when their sibling spoilt games with friends**
- **almost 70% were upset or angry when their sibling acted oddly in public.**

<sup>8</sup> ‘Young Carers in the United Kingdom: A Profile’ Chris Dearden and Saul Becker, Carers National Association 1998.

<sup>9</sup> ‘All in the family: siblings and disability’ Nicola Atkinson and Mavis Crawforth. NCH Action for Children 1995.

## **Young carers' needs**

Below is a list of some of the types of support that professionals and young carers themselves have said they need. Every young carer and every situation is unique, and this should be seen as a menu from which each young carer may require an individual combination of services, or something completely different.

- **for their role to be acknowledge and valued**
- **to be heard, believed and respected**
- **someone to talk to**
- **information on the care receiver's condition**
- **information on the support available to the young carer and the care receiver**
- **to know that there are others in the same position**
- **opportunities to take part in age appropriate activities**
- **a break from caring**
- **educational support**
- **services for the care receiver**
- **services for the whole family that allow them to undertake activities, holidays, etc. together**
- **support in their caring role (emotional and practical)**
- **counselling – including bereavement counselling**
- **advocacy**
- **opportunities for self-determination and to plan for their futures**
- **to be part of decision making in relation to themselves and their families**
- **to be empowered to feel that they deserve support**
- **therapeutic family support**
- **to feel cared for themselves**
- **opportunities to mix with peers and other young carers**
- **transport**
- **to have their role valued**
- **financial support**
- **early identification and assessment**
- **information on their right to a carers assessment under the Carers (Recognition and Services) Act 1995**

## **Young carers have their say**

### **The physical and emotional effects of caring**

“I’m feeling constantly tired and worried, and then I’m told I have nothing to worry about as I have no problems.”

“I’m sometimes sad.”

### **Young carers need explanations of medical conditions**

“I’ve had information so I know about his illness”

“I worry why my Mum’s in hospital”

“I’d like to be able to talk to people and have a lot more information”

“Mental illness should be explained more to kids”

“No-one ever sat down and explained to me and my brother what manic depression was. Mum might have done, but no professional person ... if someone had explained what it was, it would have helped.”

### **Young carers need to be listened to, believed and respected**

“Being a young carer is hard and sometimes people’s reactions don’t help.”

“I’m not able to talk to people about it because not many people, including my family, understand.”

### **Do not place caring expectations on young carers**

“The district nurse isn’t allowed to touch it [TPM machine] – but we can do it ... because the district nurse has not had training. I suppose if she set it wrong she could be held responsible, but if we set it wrong then that’s our problem ... I suppose they do have to cover themselves. Like if she didn’t get the air bubble out it can cause a heart attack.”

“So who trained you?”

“Mum.”

### **Siblings**

“I’m an interpreter of what he (his 10 year old autistic brother) might want to do ... the loving big brother.”

### **Parents with mental ill health**

“I don’t like Mum changing her mind about things she says she will do and the fact that I can’t do anything about it”

“You have to wake up in the middle of the night if you hear him walking around, to make sure he is not going to do anything ... Like coming home and if he has taken an overdose, call up the doctor ... I came home from college and I heard him whining and screaming upstairs and my door was all smashed down ... and there was blood on the floor where he had cut himself and he was lying on the bed drugged and alcohol’ed up ...”

“... no-one talks about mental illness ... there is a lot of ignorance. If they knew what mental illness was, it would make it easier ... I have had things said to me behind my back ...”

## **Young Carers and their peers**

“I get upset inside when she (mother) has to use her walking sticks and kids laugh at her.”

“I know how to do things they have never done ... my friends just let their Mums do it.”

“In some ways it has made it harder for me to get on with friends ... when I was 11 they would play with dollies and I'd be cooking and cleaning the house. It makes you feel – you feel different and you think they are so childish ... Now, at 15, 16, whenever you hear them talk about (their parents) – it's just to complain – ‘I want to wear this and she's not washed it!’ ... and you just think they should be grateful ... they don't understand.”

## **Young carers in school**

“I just don't mention it. They've (the teachers) already got a one-track mind ... so I leave it that way ... at secondary school there's a different atmosphere – so you relate to the atmosphere.”

“... go to school, get home, tidy up, get dinner, tidy up a bit more ... I'm doing my A levels, my Dad's at work – he works long hours. I can't cope with the amount of housework we've got to do.”

“It was when I happened to fall asleep in a class that they found out my Mum was ill ... it's not the sort of thing that comes up ... teachers don't really care a toss ... I didn't used to talk to anyone. I suppose that was my own fault in a way, but then I didn't know anyone was interested.”

“I used to run away from school because I always wanted to be with my Mum ... I used to think that my Mum was going to die. I was about 8 ... I kept getting told that she was not going to die, but she was not getting any better, which means she is worse – which means she will die. They treated me as if I was playing truant, but I wasn't ... I just said that I had a feeling inside me ... they did not understand.”

The above are direct quotations from young carers as recorded in “Young Carers In Guildford” (Clark, 1996) and from the Surrey Young Carers residential weekend.



# case studies

## Asha

Asha is 20. When she was sitting her mock GCSE's her father had a stroke. He was a professional man who had been the main wage earner.

Asha's father can no longer work. He cannot be left on his own for very long periods of time as he is likely to leave the cooker or the fire on, or let the bath overflow. He has difficulty understanding what is going on around him and cannot judge appropriateness of behaviour in social situations. He is very demanding and Asha and her mother share the caring role.

Her caring responsibilities interfered with her school work:

*"When I got home from school I was basically caring, so I had very little time to do homework. My father would always be saying: 'come here, I need this ...' and I didn't really have time to go out and do other things that I wanted to do."*

Her teachers told her: *"We think you should leave now because ... there's no way you can combine your caring tasks with your school work.' I was really angry. I wanted to go to university."*

Asha did complete her A levels and is now at university studying for a degree. She continues to care for her father during her holidays and provides a lot of emotional support to her mother.

## Ashley

Ashley (15) and his brother helped to care for their mother who was terminally ill. Their Dad works long hours so they do all the housework.

Ashley's school did not realise that he was a young carer until he fell asleep in class. Since then Ashley has been talking to the school youth worker and pastoral care tutor on a regular basis and has become involved with two local voluntary organisations.

Ashley was offered extended deadlines for his homework.

When Ashley's mother died the school youth worker helped Ashley to access bereavement counselling.

## Kevin

Kevin is 18. His mother has rheumatoid arthritis. His parents parted when he was younger and Kevin has been caring for his mother since he was 8, taking on a lot of the domestic jobs and helping his mother when her mobility has been poor.

Kevin has had lots of problems at school: *"When I was 10 I decided to tell one of my teachers what was going on ... she sat me down in front of the whole class and said to the entire form what was happening at home and as a result, for the next 2 years that I was there, I don't think anyone*

*actually spoke to me unless they had to. I was completely excluded from all my peer groups, teachers treated me as extra special with kid gloves, my friends weren't interested."*

Kevin's educational problems continued into his A levels. *"I gave up an A level as a result of having to look after Mum. It's impossible to get your work done when you're looking after a parent at home. It's not so much the physical burden but the emotional one, the constant worry. You can't have a social life, you can't go out in the evenings. You can't stay out late at the library or stay behind at college because you need to be at home for your parent."*

Kevin passed his A levels but spent another year at college trying to improve his grades.

## **Andrea**

Andrea's mother has a mental health problem. She is the middle child of a large family.

Now 13, for a long time Andrea and her brothers and sisters have been bullied by other children at school and on their estate, because of their mother's illness. In the past few years Andrea has started hitting back at the children who bullied her. Andrea has been getting into trouble at school on a frequent basis and is very unhappy there.

Following a number of fights at school Andrea has been excluded. She says that she does not want to return to school.



## 3. young carers in school

### Identification

Young Carers are often difficult to identify because they hide their caring roles due to fears of becoming marginalised from peers, the institutionalisation of the care receiver, or child protection proceedings. However the impact of caring responsibilities may be manifested in a number of ways and a combination of factors may indicate that a child or young person is caring. These include:

- the presence of illness or disability in the family
- the needs of others in the family being placed above those of the young person
- the young carer assumes a parental role to other, able siblings
- difficulties in school attendance
- the young person is sometimes unwell, stressed or depressed
- the young person's own health and welfare is not satisfactory
- tiredness
- poor concentration
- academic performance below potential
- inability to complete homework
- isolation from peers or problems interacting with peers
- the young person is not making use of leisure activities
- false maturity ie. appearing to be very mature and responsible but 'letting go' and behaving immaturely in a safe environment
- behavioural problems (often in response to bullying). There is anecdotal evidence to suggest that a significant number of young carers are excluded (and then referred to Pupil Referral Units or Emotional Behavioural Difficulty Schools) because of such problems.

### Supporting Young Carers

Young carers may be identified in school or their caring responsibilities made known to the school. In such cases the school's response can have an enormous impact on the young carer, with sensitive support from schools proving to be hugely beneficial in reducing young carers' anxiety. Many young carers and their families have complex needs that require multi-agency support and schools are one of the agencies that may be involved. Schools clearly have a responsibility to address young carers' needs when their educational

achievement and pastoral welfare is affected by their caring role, and to refer on to other agencies as necessary. The suggestions below illustrate some ways in which schools may support young carers.

- **Use good child care practice – a child centred approach – listen to young carers, respect and believe what they say**
- **Respond to young carers' needs sympathetically and sensitively and be sensitive to the needs of all family members**
- **Communicate information about young carers and their families only on a 'need to know basis' and inform young carers of your intentions regarding the information provided**
- **Make information regarding health issues and local community services available and accessible to all young people**
- **Know who is available locally to meet young carers' needs**
- **Have procedures in place for joint working between statutory and voluntary agencies in relation to young carers**
- **Establish a confidentiality statement in case of the need to share information with others (particularly in relation to child protection issues), and explain this clearly to young carers**
- **Offer young carers the use of a telephone, in private. (This allows them to 'phone the person they care for during the day to check on their welfare, thus reducing anxiety and improving attendance and concentration.)**
- **Allow young carers the opportunity to talk to someone they trust – again this may reduce anxiety and relieve tension**
- **Be flexible in relation to punctuality, attendance and completion of homework – punitive responses to poor attendance and punctuality and failure to complete homework on time will only serve to aggravate young carers' difficulties. However a balance does need to be struck that ensures these young carers do receive a full education and are not distinguished as being different from the rest of their class. Options include providing a quiet place to do homework during the school day and help on catching up with any missed work**
- **Discuss the issue with liaison workers from education welfare, health and social services**
- **Support parents with mobility problems in visiting the school and attending school events, for example by ensuring that the premises are wheelchair accessible. Maintain regular 'phone contact with parents who are unable to come into school**
- **Challenge bullying or isolation of young carers and where necessary help them to integrate into existing groups run in the school**
- **Be sensitive – do not discuss young carers' situations in front of other pupils or parents**
- **Use this pack to train staff in young carers' issues and to raise pupil awareness.**



## 4. how to use the classroom materials in Key Stages 2 & 3

The classroom materials have been written by Key Stage 2 and 3 teachers and are designed to be self contained units of work which will complement existing Personal, Social Health Education (PSHE) programmes within schools.

As with any effective PSHE work dealing with sensitive issues, teachers will need to consider how to create a safe and unthreatening learning environment. The following tried and tested PSHE strategies may help towards this:

- **Establishing ground rules:** the class negotiates the basic rules for building harmony within the group eg. only one person speaks at a time
  - the right to pass
  - respect for each person's contribution
  - for more detailed advice see appendix iv.
- **Group forming and trust building:** the group take part in activities designed to help members get to know each other, to establish communication between them or to focus attention on the topic under consideration. For further information on this area see appendix iv.
- **Active listening:** individuals listen without interrupting, and then give feedback designed to establish that they have understood what the speaker intended
- **Assertiveness:** pairs and groups explore concepts relating to assertiveness and practice skills
- **Thought shower:** group members contribute ideas for achieving a specific task. A scribe records everything which is said. There is no discussion or comment during the first stage. The second stage is to select a small number of ideas for more detailed consideration
- **Card round or circule work:** the whole class or group responds in turn to a specific agenda, which sometimes involves completing stem statements
- **'I' statements:** participants are expected to state their own feelings and wishes using statement which include 'I' rather than 'you'. A version is included for teachers as well as students

- ***Negotiation*: a four step strategy includes progressive stages to reaching agreement on a course of action:**
  - active listening
  - identifying and expressing personal feelings and wishes
  - making 'I' statements
  - agreeing win/win solutions
  
- ***Target setting*: a work sheet for personal target setting, with notes for teachers.**

Great sensitivity will be needed to ensure that, if young carers are present in the classroom, they are not openly identified in front of their peers and made to feel vulnerable and exposed.

When using the case studies, bear in mind that some pupils may become distressed if they identify with the situations described. It may be necessary to select case studies carefully or to ensure support is available for pupils in these circumstances.

It may be the case that young carers will miss this unit entirely through absence, due to being a carer. They may return to school half way through the unit which would demand considerable sensitivity by the class teacher.

### **Cross curricular links**

The lesson materials provide opportunities for cross curricular links with subjects such as art, history, drama and information technology – students may like to research young carers via the Internet, for example.



## **5. key stage 2: introduction & classroom materials**

**These classroom materials for pupils in years 5-6 have been written to complement existing PSHE programmes such as TACEDE's 'Skills for the Primary School Child' and use of Circle Time in primary schools.**

This programme has been designed to provide half a term's PSHE programme, and as such, has been split into 6 lessons of approximately 45 minutes duration and comprises the following headings:

- 1. 'Who Cares?' – an explanation of what 'caring' means**
- 2. 'The long and short of it' – different timescales of care**
- 3. 'What does it mean to you?' – to know that there are physical and mental symptoms with illness**
- 4. 'Put yourself in my shoes' – empathise that illness can impact on family life**
- 5. 'How would I feel?' – demonstrate understanding of a particular situation: case study**
- 6. 'How could I help?' – potential ways of helping young carers**

The unit aims to help pupils to explore the whole area of caring and being cared for, through an examination of short and long term illnesses and disabilities. It aims to help pupils to empathise with some of the responsibilities experienced by young carers and therefore hopefully reduces the likelihood of isolation and bullying often experienced by them.

Each lesson has three parts; a short introductory activity, a main activity, followed by a concluding activity. In many of the lessons alternative ways are presented to approach the activity. Lessons have been designed to be short and snappy to keep pupils' attention. The timings are approximate.



# lesson 1: who cares?

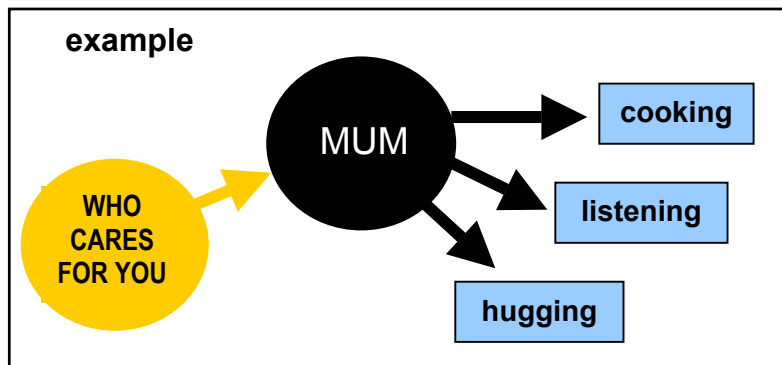
**Aim:** To identify what caring involves  
**Duration:** 45 minutes  
**Resources:** Paper, coloured pens/pencils

## Lesson outline

**Introductory Activity: 10 minutes**

**Focus question: "Who cares for you?"**

Thought shower either in small groups or as a whole class the people who care for them as individuals.



**Main activity: 30 minutes**

**Focus question: "How do they show they care?"**

Add to first thought shower the various ways that person demonstrates their care. Either as individuals or groups produce a description / definition of care.

### Possible approaches:

- give words or phrases beginning with the letters of CARE that describe caring actions eg.
  - C - communication
  - A - attitude
  - R - responsibility
  - E - expression of
- written description of care in action.

**Concluding activity: 10 minutes**

- show examples of work
- draw out that there are different responsibilities/ways of caring



# lesson 2: the long and the short of it

**Aim:** To know that certain situations call for short term or long term special / extra care  
**Duration:** 45 minutes  
**Resources:** Photocopy sheets, lesson 2, A and B

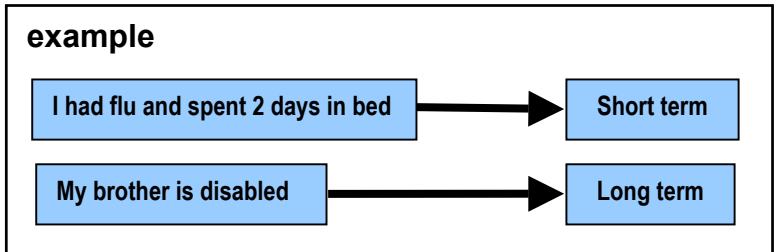
**Introductory Activity: 10 minutes**

**Lesson outline**  
**Focus question:** "When have I or someone in my family needed extra care"

Discuss with a partner times when you have needed extra care. Feedback to whole class some examples.

**Main activity: 20 minutes**

- Record some examples on the board and then talk to the children about whether the care they needed was short term or long term.



- Each pair has a set of 12 cards showing a variety of both short and long term care situations.
- Children to sort into 2 piles according to type of care needed.

**Alternatives**

- Read cards to class, stick onto board as sorted.

**Concluding activity: 15 minutes**

*Caution: Be aware of children in caring situations or who have an illness or disability themselves*

- Choose a pair of children to explain their groupings with reasons
- Short class discussion on whether we agree with these groupings.



## **lesson 2: photocopy sheet a**

**I've got a headache**

**I've broken my leg**

**I'm in a wheelchair**

**I've got arthritis**

**I can't go out of the house**

**I feel sick**



## **lesson 2: photocopy sheet b**

**I've got a sore throat**

**I'm feeling really down**

**I've got a cold**

**I have diabetes**

**I have epilepsy**

**I've got chicken pox**



## lesson 3: what does it do to you?

**Aim:** To know that illness can have seen and unseen symptoms.  
To know the names and effects of certain illnesses.  
**Duration:** 45 minutes  
**Resources:** Resource sheets, leaflets. Photocopy sheet lesson 3,A

### Lesson outline

**Introductory Activity: 10 minutes**

**Focus question: How do we know when someone is ill?**

- Talk with the children about how they know someone is ill.
- Explain that on the sheet are things that can be wrong with people and that we want to know whether these can be seen (noticed by someone) or if they are unseen.
- Tell the children all they need to do is tick on the sheet.

### Alternative

Make one large poster and do it as a class.

**Main activity: 30 minutes**

- Teacher selects illnesses that they feel are suitable for their class to study.
- Important ones that are accessible to children are diabetes, MS, arthritis, depression.
- Explain to the children that they are to produce a poster/leaflet to describe the effects on the person who has the illness.

**Concluding activity: 5 minutes**

Show posters and explain what they have found out.

**Caution: Warn the children not to begin looking for these effects in themselves. Be aware of any children who have got these illnesses or have these illnesses in their families – they may be embarrassed by the discussion or they may not know the long term effects of the condition.**



## lesson 3: photocopy sheet a

How do we know when someone is ill?

<b>Symptoms</b>	<b>See it</b>	<b>Have to be told</b>
<b>Headache</b>		
<b>Worry</b>		
<b>Tired</b>		
<b>Spots</b>		
<b>Back pain</b>		
<b>Been sick</b>		
<b>Pale</b>		
<b>Grumpy</b>		
<b>Fed up</b>		



## lesson 4: put yourself in my shoes

**Aim:** To see that illness can affect and change a family's life. To know the names and effects of certain illnesses.

**Duration:** 45 minutes

**Resources:** Resource sheets. Photocopy sheets lesson 4, A and B

### Lesson outline

**Introductory Activity: 5 minutes**

**Focus question:** How do you think illness would affect other members of the family?

- Refer to last week's work (lesson 3) on posters.
- Talk about the effects on a person of arthritis..

**Main activity: 25 minutes**

- Read John's letter to his aunt in America, describing what is happening in his family at the moment.
- Children are divided into groups and given different rôle play situations. There are only 3 so some will be repeated.
- Through doing these the children will find out for themselves some of the difficulties/demands on John.
- They may need reminding of what the person with arthritis can or cannot do.
- Whilst doing the rôle play the children need to think about the difficulties John faces and present their findings to the class.

### Alternative:

Discuss as a class the situations and talk through difficulties using questions to help focus the children.

**Concluding activity: 15 minutes**

Watch rôle plays or hear answers to discussion.

**Caution:** Be aware that there may be a young carer in the class – don't force them to share.



## lesson 4: photocopy sheet a

***Dear Auntie***

***Thought that I would drop you a line to say how we are all getting on. I'm getting quite good at cooking – oven chips are my best thing, we have them most days!***

***Alison is doing quite well at school although sometimes she cries when I leave her. Good news – we now have Sue who comes in to look after Mum while I'm at school. I didn't like her much at first, I thought she'd take over. I like it at the weekends when she's not there, she makes the place too tidy, you know me I like my things all over the place.***

***Mum is not too bad, mornings are still pretty awful for her as she aches a lot and finds it difficult to move. She is being quite chatty in the evenings. We've had some good laughs.***

***My teacher keeps asking why I haven't done all my homework, the other children in my class are beginning to notice. I don't want to be different from the others.***

***Hope everything is alright with you. Love to Alice and Tom.***

***Your nephew  
John***



## **lesson 4: photocopy sheet b**

### **Rôle play questions**

#### ***Getting up***

- 1. How am I going to get her out of bed?**
- 2. What if she falls over?**
- 3. How am I going to get her downstairs?**

#### ***Tea time***

- 1. How do I cook oven chips?**
- 2. How do I keep it all hot?**
- 3. What do I do if I burn myself?**

#### ***Bed time***

- 1. How am I going to get Alison to bed? She's really upset tonight.**
- 2. My homework's due tomorrow. When am I going to do it?**
- 3. Mum's really grumpy tonight and I'm really tired. What shall I do?**



## lesson 5: how would I feel?

**Aim:** To demonstrate their understanding of the effects an illness can have on a family  
**Duration:** 40 minutes  
**Resources:** Resource sheets. Photocopy sheets lesson 4, A and lesson 5, sheets A, B and C

### Lesson outline

**Introductory Activity: 5 minutes**

- Ask class to give examples of the things they think John has to do in a day when caring for his Mum.
- Possibly read letter again.

**Main activity: 25 minutes**

- Give out 'A day in the life of John' timetable sheet.
- Read it through with the class or in groups.
- Talk together and think through the answers to the question sheet.

**Concluding activity: 15 minutes**

- Feedback answers.
- Make a list of the good/bad things about being a young carer.

**Caution: Avoid direct comparisons with their days in case a young carers is present in the class**



## lesson 5: photocopy sheet a

<i>Times</i>	<i>What I have to do .....</i>
7.30am	Get myself up.
7.40am	Get Mum out of bed, help her to wash and get dressed. Help her downstairs.
8.00am	Get up sister, help her wash and dress.
8.10am	Get everyone's breakfast ready. Wash up and clear away.
8.35am	Outside help arrives. Check everything is OK.
8.40am	Leave for school.
8.45am	Drop sister off at school.
8.50am	Arrive at school. Worried about Mum and sister. Thinking about what needs to be done when I get home. When am I going to get this homework done?
3.15pm	Pick up sister, go home.
3.25pm	Arrive home: help leaves. Make cup of tea for Mum.
3.45pm	Check helper got the shopping.



## lesson 5: photocopy sheet b

- 4.00pm* Sort washing into whites and colours, put on a load in washing machine.
- 5.00pm* Hang out washing.
- 5.15pm* Start to get tea ready.
- 5.45pm* Dish up and eat tea.  
Wash up with help from sister and Mum.
- 7.00pm* Get sister ready for bed.
- 7.15pm.* Put her to bed.
- 7.30pm* Sit and chat to Mum. Try and do homework.
- 9.00pm* Start to get Mum upstairs and ready for bed.
- 9.30pm* Tuck Mum in.
- 9.45pm* Lock up house.
- 10.00pm* Go to bed – exhausted.



## **lesson 5: photocopy sheet b**

### **Questions for 'A day in the life of .....**

1. How long is John's day?
2. How many different jobs does John do in one day?
3. Why do you think he worries while he is at school?
4. What happens if he is not feeling well?
5. What do you think he does at the weekends?
6. What happens if John gets invited out after school?



## lesson 6: how could I help?

**Aim:** To suggest ways the children could offer help/support to a friend in this situation  
**Duration:** 30 minutes  
**Resources:** Photocopy sheets lesson 6, A. Leaflets for the local young carers project.

### Lesson outline

**Introductory Activity: 10 minutes**

- Ask children to list the feelings they would have in a similar situation either verbally or written and why/in what situation they would feel like this.
- Provide children with list of feelings and get them to tick the appropriate ones and give reasons for the feelings. Share these suggestions with the rest of the class.

**Main activity: 15 minutes**

- Individually or in groups discuss and think about the help you would need in this situation, eg. lifting help, time out, someone to talk to, someone to listen to you.
- Make a list of things you could do to help a friend in this situation.

**Concluding activity: 5 minutes**

- Share suggestions.
- Remind children that this is a sensitive issue.
- Give to all pupils a copy of the local young carers project leaflet or the information sheet for young people – appendix vii.



## lesson 6: photocopy sheet a

How would I feel?

<b>FEELING</b>	<b>REASON</b>
<b>love</b>	
<b>angry</b>	
<b>scared</b>	
<b>sad</b>	
<b>lonely</b>	
<b>anxious</b>	
<b>protective</b>	
<b>jealous</b>	
<b>tired</b>	
<b>guilty</b>	



## 6. key stage 3: introduction and classroom materials

This unit of work has been produced to complement schools' existing PSHE programmes. It comprises of six one hour lessons which can be taught as a distinct unit over half a term or alternatively it can be taught as a progression, or as an introduction to related units such as disability, relationships and the family.\*

The six lesson titles are as follows:

1. What is a family?
2. Rôles within a family.
3. Changing rôles.
4. Case studies of young carers.
5. A study of the local young carers project.
6. How can schools help young carers to do their best?

### Overall aims of the unit:

- to increase pupils' understanding of disability, illness and caring for others;
- to reduce the stigma, isolation and bullying that young carers can experience;
- to encourage young carers to identify themselves within a safe environment.

### Information for using the pack:

These lessons have been carefully planned, building in continuity and progression, in order to ensure that all pupils feel secure in their learning environment. Young carers in the class who may or may not be known to the teacher, should not feel vulnerable and exposed.

***Current work and research involving young carers indicates that they do not wish to be identified in front of their peers and teachers must be aware of this.***

In view of the progressive nature of this unit, teachers need to take account of pupils who miss any of the 6 lessons by recapping and placing the lessons in context wherever possible. The lessons rely heavily upon pupil participation and active learning techniques in order to meet the overall aims of the unit. In view of the need to exercise sensitivity it is suggested that pupils work with at least one person they know well during the activities.

*Note: If there is insufficient time to deliver all 6 lessons – lessons 1 and 2 and lessons 5 and 6 may be condensed into two lessons, instead of four.*



# lesson 1: what is a family?

**Aim:** For pupils to consider and discuss the purpose and function of the family  
**Duration:** 60 minutes  
**Resources:** Sugar, paper, marker pens

## Lesson outline

**Introduction:** teacher explains aim of lesson

### Activity 1: 15 minutes

*Note to teachers: Throughout this lesson teachers will need to exercise sensitivity and show awareness that there are different family structures*

- Pupils work in mixed ability / gender groups to thought shower the question 'What is a family?' (eg. supportive, caring, provides shelter and money, provides food, bringing up children.)
- Groups feedback words to the teacher (whole class – teacher led activity) who writes words on board.

### Activity 2: 25 minutes

- Pupils look at the words written on the board. Then working individually pupils write down their top ten words to answer the question 'What is a family?' Pupils write down their ten words in rank order – without discussing with others.
- Pupils work in groups of 6 (different groups to activity one are suggested). Each group must produce their top ten words answering the question 'What is a family?' (this must involve them in discussion / negotiation about the purpose / function of the family). Top ten to be written on large sheets of sugar paper.
- Each group feeds back their top ten to the rest of the class, giving reasons for their choices.

### Activity 3: 15 minutes

*Note to teachers: The group statements will need to be retained for use in lesson 2.*

*Extension activities: Research the notion of extended and nuclear families and the way in which family life has changed in the last hundred years.*

- Remaining in the same groups as for activity two, pupils use their top ten words to produce a group statement answering the question 'What is a family?' Write the statements on sugar paper.
- Each group reads their statement to the rest of the class.



## lesson 2: rôles within a family?

**Aim:** For pupils to consider the various rôles within a family and address the issue of stereotypical images.  
**Duration:** 60 minutes  
**Resources:** Pictures of different family groupings taken from colour supplements; statements produced on sugar paper during lesson 1; rough paper/pens.

### Lesson outline

**Introduction: (5 minutes)** Recap lesson 1 asking each group to read their statement 'What is a family?'

#### Activity 1: 5 minutes

- Pupils look at a series of numbered pictures which are stuck on the walls around the room (max 15). Each pupil chooses the two pictures which best match their group's statement and the two pictures which least match their group's statement.
- Pupils should jot down the reasons for their choices on rough paper – together with the numbers of the pictures chosen.

#### Activity 2: 15 minutes

- Pupils move into the groups they worked in during lesson one (activities 2 and 3) and compare their reasons for choices discussing whether or not these choices match the group statement.
- Groups feedback to whole class. Teacher led discussion focusing on the nature of families and family rôles.

*Teacher note: they do not need to meet stereotypical images of family rôles.*

#### Activity 3: 30 minutes

*(Teacher note: teacher should ensure that less concrete jobs such as 'giving advice' or 'looking after family members who are sick' are drawn out and listed on the board).*

*(Teacher note: this should not be a teacher led activity. Sensitivity should be exercised here – pupils do not have to offer suggestions/answers for each or any of the jobs).*

- **Class Thought showers** the question 'What jobs need doing in a family?' Teacher writes ideas on the board, eg. cooking, washing, ironing, feeding pets etc.

#### **Class survey:**

- Who does each of these jobs in my family?
- Pupils to present the findings of the class survey in a chart/graph which will be used in lesson 3.

#### **Extension activities:**

- Pupils could use IT to produce their graph or chart;
- Study the way in which families are portrayed in soap operas.



# lesson 3: changing rôles

**Aim:** To raise pupils' awareness about what happens when family rôles cannot be fulfilled.  
**Duration:** 60 minutes  
**Resources:** Exercise books, paper.

## Lesson outline

**Activity 1: 10 minutes**

- Pupils study the graph/chart that they produced during lesson 2 Complete a small piece of written work: What I have learnt from the class survey on 'who does the jobs in our families?'
- Teacher asks a few pupils to feedback their ideas to the whole class.

**Activity 2: 20 minutes**

Activities 2 and 3 alternative to rôle play:

- Pupils design a cartoon strip which shows what would happen if the family member who does most jobs (on the basis of the class survey) is unable to do them
- Teacher led discussion: family members take on different rôles in this situation.

- Pupil rôle play.
- Divide pupils into a mixed ability/gender groups of 6 to 8.
- Pupils look at the charts produced in lesson 2 and select the member of the family who does the most jobs.
- Rôle play scenes which show what would happen if this person is unable to do any of their jobs during a typical week.
- Brief teacher led discussion: how could some of the problems shown in the rôle plays be solved by the family? The aim being to draw the idea that family members take on different rôles in this situation.

**Activity 3: 20 minutes**

Activities 2 and 3 alternative to rôle play:

- Pupils design a cartoon strip showing how the family would solve the problems during a typical week or the teacher led discussion as above.

- Rôle play: the same pupil groups devise a rôle play showing how the family would solve the problems during a typical week.
- Teacher summary: family members take on different responsibilities when another member is unable to fulfil a rôle.

### Extension activities:

- suggest reasons why rôles within a family may change.



# lesson 4: case studies of young carers

<b>Aim:</b>	To raise awareness of the existence of young carers, the problems they may face and the skills/qualities they possess; to raise the esteem of any young carers in the group and encourage them to seek help if necessary
<b>Duration:</b>	60 minutes
<b>Resources:</b>	4 case study work sheets: Luke, Sundeep, Sondra, Isobel, exercise books.

## Lesson outline

### Activity 1

### Introduction

- Divide pupils into mixed gender/ability groups (max 6). Give each group copies of one of the worksheets. Pupils read the case study of the young carer and discuss/answer each of the questions in their exercise books for later reference:
1. What skills and qualities does (young carer) possess? eg carrying out domestic tasks, reliable, understanding etc.
  2. What difficulties does (young carer) face a) with friends? eg. can't take them home etc. b) at school? c) in thinking about the future?
  3. Each group should feedback ideas to the rest of the class.

*(teacher led activity)*

### Activity 2

### 

*Teacher note: Young carers in the class should not be openly identified or made to feel vulnerable or exposed*

- Teacher introduces the words Young Carer with reference to characters in worksheets and asks pupils to write a group definition of the term 'young carer' (based on what they have learnt about each of the characters on their worksheet). Groups feedback their definitions to the whole class.
- Teacher shows and talks through the definition of 'young carers' given at the beginning of this pack.

### Activity 3: 20 minutes

### 

#### Extension activities:

- Write extracts from the weekly diary of Luke, Sundeep, Isobel or Sondra showing how they feel about their lives..

#### Thought shower:

- Whole class, teacher led. 'What practical help and support could young carers like those on the worksheets be given?' Teacher writes suggestions on the board.
- In mixed ability/gender groups look at each of the suggestions on the board. Discuss who? How? Where? When? for each suggestion. Write down ideas ready for lesson 5.



## case study task sheet lesson 4

### Isobel, age - 15

Isobel lives with her mother who has recently separated from Isobel's stepfather. Isobel's mother has schizophrenia and agoraphobia. Her condition prevents her from carrying out many domestic tasks. She frequently wants to harm herself and hears voices telling her to commit suicide. She relies on Isobel's company to prevent her from harming herself.

#### **Task**

Discuss and answer each of the following questions:

- 1) What skills and qualities does Isobel possess?
- 2) What difficulties might Isobel face?
  - with her friends?
  - at school?
  - thinking about the future?



## case study task sheet lesson 4

### Sundeep

Sundeep is 14 and helps her mother look after her father who has multiple sclerosis. Her brother, Dalvir, Aged 15, also helps. Her Dad is gradually getting worse. He can walk around a little but not without a stick – or he uses a wheelchair. Over the past 5 years he has got so bad that he hasn't been able to do a lot of the things he could do before. They got used to the changes slowly and realised they couldn't go to places in a car like other families.

Sundeep's mother does most of the caring as well as some part time cleaning jobs. Sundeep's Dad goes to a day centre three times a week which takes the strain off her mother. Sundeep normally helps her Mum with cooking and cleaning and some housework. Where her Dad used to get up a ladder to change a light bulb or jobs like that, Dalvir does that now. Dalvir and Sundeep like to try and lighten the load for their Mum.

### Task

Discuss and answer each of the following questions:

- 1) What skills and qualities does Sundeep possess?
- 2) What difficulties might Sundeep face?
  - with her friends?
  - at school?
  - thinking about the future?



## case study task sheet lesson 4

### Luke

Luke is helping to care for his younger brother who is disabled and has physical and learning disabilities. In the beginning he simply had to watch and play with Joshua and keep him out of harm's way, but as Joshua got older, bigger and heavier, Luke's help was needed more and more.

Luke's father works away from home and his mother does not have the strength to lift Joshua alone. Luke gets up early to get Joshua ready before he goes to school and comes home early for the same reason.

### Task

Discuss and answer each of the following questions:

- 1) What skills and qualities does Luke possess?
- 2) What difficulties might Luke face?
  - with his friends?
  - at school?
  - thinking about the future?



## case study task sheet lesson 4

### Sondra

Aged 14, Sondra lives alone with her mother who is suffering from rheumatoid arthritis. She has been caring for her alone since Sondra's father left 7 years ago. Her mother finds it difficult to go out of the house or even perform the simplest tasks without becoming tired and weak. On bad days she can barely make herself a cup of tea, and when she is at her worst Sondra does all the housework, shopping and cooking of meals.

### Task

Discuss and answer each of the following questions:

- 1) What skills and qualities does Sondra possess?
- 2) What difficulties might Sondra face?
  - with her friends?
  - at school?
  - thinking about the future?



# lesson 5: study of the local young carers project

**Aim:** For pupils to understand the work of the local young carers project.  
**Duration:** 60 minutes  
**Resources:** Any literature available from the local young carers project.

## Lesson outline

### Activity 1:

- Groups feedback suggestions on the practical help and support which could be given to young carers (from lesson 4).
- Teacher to introduce the idea that one group, the local young carers project, helps co-ordinate this kind of help.

### Activity 2:

- Each group to be given information packs to read/review. Pupils should find out about:
  - a) what the project is;
  - b) statistics regarding young carers;
  - c) help offered by the project;
  - d) why the project is important.

### Activity 3:

- Individually or in pairs pupils produce a fact sheet about the young carers project, focusing on the four areas researched in activity 2.

## Extension activities

- Produce a leaflet on the young carers project using IT skills;
- Produce a video or audio tape on the young carers project.



## lesson 6: how can schools help young carers achieve their best?

**Aim:** To highlight the idea that a young carers' learning, development and future choices can be affected by their situation; to establish and promote ways in which a school can assist young carers.

**Duration:** 60 minutes

**Resources:** Exercise books, plain paper, coloured pens, computers (optional), "Young Carers in School" section of this pack.

### Lesson outline

#### Activity 1

*(teacher led activity)*

#### Introduction

- Recap the problems a young carer may face in school (lesson 4) recorded in pupil exercise books. Write each of these problems on the board.
- Pupils work in groups: allocate a problem to each group and ask them to discuss solutions to these problems.
- Groups to feedback solutions to the whole class. Pupils to record the ideas in their exercise books.

#### Extension activities

- Teacher gives groups a copy of the "Young carers in school" section.

#### Activity 2

- Pupils produce a poster which shows the practical things which can be done to help young carers achieve their best.
- Give all pupils a copy of the local young carers project leaflet or the information sheet for young people – appendix vii.



## 7. appendices: appendix i

### key stage 1 foundation work

Most children and staff involved in Key Stage 1 will tackle the issues of caring for themselves and each other. Perhaps the best way in is to use children's fiction and to use follow-up questions to draw out the issues of caring in a family.

Pupils should realise that some other children will be responsible for caring ie. doing all the jobs usually thought of as 'grown up' tasks in their family.

Examples of children's fiction which could build on the theme of caring:

**Aliki** (1987) *Feelings. Pan*

**Althea** (1988) *When Uncle Bob died Dinosaur Publications*

**Ames, R** *Our brother has Downs Syndrome.*

**Anderson, R** (1988) *Jessy runs away. Alblack*

**Anderson, R** (1989) *The bus people. Oxford University Press*

**Beresford, E** (1988) *The four of us. Hutchinson*

**Buchanan Smith, D** (1987) *A Taste of Blackberries. Penguin*

**Burningham, J** (1994) *Granpa. Jonathan Cape*

**Striker, S & Kimmel, E** (1978) *The anti colouring book. Hippo / Scholastic*



## appendix ii special schools

There may be young carers attending schools which cater for pupils with moderate learning difficulties (MLD) or emotional and behavioural difficulties (EBD). It is possible that pupils, particularly with emotional and behavioural difficulties, may be caring for a parent with mental health or substance abuse problems. Alternatively some pupils may be cared for by a sibling.

These materials may be useful for MLD and EBD schools, but please be sensitive to the potential presence of young carers in the classroom or pupils who are cared for by young carers.

Special schools catering for children with disabilities may consider setting up a group for sibling carers.



## **appendix iii key stage 4 and 16+. development of unit of work on young carers**

Work with students in Key Stage 4 and those over the age of 16 could focus on the way that being a young carer might affect future choices.

Issues to consider include:

- **skills and qualities of young carers in relation to further study and employment**
- **employment and the young carer – industries with flexible working hours and sympathetic attitudes**
- **personnel officers and work**
- **developing social skills**
- **stress reduction eg. Yoga, exercise, listening to music**
- **time management skills**
- **university applications – living at home and studying**
- **managing money (income support, disability allowance)**
- **understanding aspects of mental illness**
- **facing death and bereavement (coming to terms with ....)**



# appendix iv effective strategies for personal and social education

## Part 1: Forming Groups

When considering the optimum size for groups, experience has shown that small groups of 3 to 5 students are more likely to lead to active participation for all group members than those of a larger size. If larger groups are necessary, careful thought will need to be given to the monitoring of task, rôles and relationships within the group. Larger groups may need a teacher to act as chairperson some of the time, which has the advantage of providing a model for managing the group but the disadvantage of reducing the opportunity for students to take responsibility for their own learning.

A teacher managed group may reduce conflict within the group, but thought needs to be given to the possibility that a degree of conflict can lead to better quality outcomes because participants are forced into questioning and justifying their plans and strategies in more rigorous ways, and also that participants can benefit from the opportunity to learn how to handle conflict effectively.

Groups which work together frequently or over a long period have plenty of opportunity to resolve any difficulties in working together, but may also adopt a pattern where individuals tend to fill the same rôle each time, thus limiting their experience.

When students are not used to group work it is usually best to create maximum safety by allowing students to choose who they work with and by keeping to the same groupings for some time.

<b>Student choice</b>	Free choice, size of group specified or unspecified Find a partner of the same gender Each pair join with one or more pairs of the same or opposite gender
<b>Teacher directed</b>	Teacher schedules membership of groups in advance, according to specific criteria
<b>Random</b>	Each student is given a card and finds others with the same colour, picture, word or concept Control the size of the groups by the number of each aspect given out. eg.

<b>Red</b>	<b>Yellow</b>	<b>Blue</b>	<b>Green</b>	<b>Purple</b>
<b>Hammer</b>	<b>Chisel</b>	<b>Saw</b>	<b>Drill</b>	<b>Pliers</b>
<b>Pear</b>	<b>Apple</b>	<b>Banana</b>	<b>Orange</b>	<b>Lemon</b>

Each student is given a card with a word or picture from an easily identifiable group and finds others to complete the set, eg.

<b>Group A</b>	<b>Group B</b>	<b>Group C</b>
<b>Fish</b>	<b>Spring roll</b>	<b>Roast potato</b>
<b>Chips</b>	<b>Sweet &amp; sour pork</b>	<b>Cabbage</b>
<b>Salt</b>	<b>Chop suey</b>	<b>Roast beef</b>
<b>Vinegar</b>	<b>Lychees</b>	<b>Yorkshire pudding</b>

A different picture for each group is cut into pieces – the number according to the desired group size. Pieces from all the pictures are jumbled together and handed out randomly. Students join up with those holding pieces from the same picture.

Students line up according to given criteria eg.

- **tallest to shortest**
- **in order of birthdays, with months in alphabetical order**
- **darkest eyes to lightest eyes**

The teacher then counts off groups of the desired size.

See also ideas in introduction of ‘Skills for the Primary School Child’ (TACADE)

## **Part 2: Establishing ground rules**

Ground rules can be provided by the teacher, but are often more used more willingly and effectively when created by the class. Small groups may thought shower the behaviour and strategies most likely to lead to harmony, which the whole class then combines into an agreed procedure. This can then be written in the form of a contract, which each individual signs. The final version should be permanently and prominently displayed in the classroom.

- **The ground rules should include:**
- **only one person to speak at a time**
- **everyone listens respectfully to the current speaker**
- **no put downs or name calling**
- **everyone is free to pass their turn to someone else**

It is helpful if the teacher insists that agreement must be by consensus rather than majority vote and that groups try to ensure that everyone is happy with the decisions, so that no one 'wins' or 'loses'. Groups should in general consist of no more than four or five students. However, sometimes the thinking may be started in pairs, then two pairs join to make groups of four. When desirable, the process can be further continued by joining two sets of four into eight and later still, two sets of eight into sixteen and so on until the whole class constitutes one group.

Alternatively the teacher may collate the outcomes from the small groups and pass a draft version back to them for final review and agreement.

### **Starting points – thought showering and prioritising**

*Either:*

1. In order to be at my best in this class –  
I have a right to .....  
I have a responsibility to .....

*Or:*

1. In order that everyone in this class is equally valued –  
I have a right to .....  
I have a responsibility to .....
2. What I wish would happen in this class –  
always .....  
never again .....
3. To make this class a good place in which to learn we will ensure that –  
always .....  
never again .....
4. If I am to be safe in this lab/workshop/kitchen/classroom:  
I need to .....  
I need others to .....
5. For small groups before undertaking a specific task  
In your group, how will you ensure that everyone –  
feels valued  
is enabled to be assertive  
feels happy with Group outcomes

## **Starting points – Rules for negotiation**

The teacher might display 'Rules for Negotiation' on a poster or overhead projector, and invite the class to discuss them.

### Step 1

Say what you want and why

### Step 2

Say what you think the other person wants and why

### Step 3

Propose solutions

### Step 4

Decide on one

### Step 5

Check that it suits everyone

## **Strategies for ensuring that only one person speaks at once**

### **The Speaker's Mace**

An object such as an orange, a pencil case or a stick tied with ribbon becomes the Speaker's Mace. Only the person holding it may speak. The Mace is passed to each person in turn, or to those who request it.

### **No one speaks twice**

until everyone has spoken once. No one speaks four times until everyone has spoken twice.

### **Pay to speak**

Students begin with the same number of counters. Each time they speak they pay with a counter into the centre. When they have no more counters they may no longer speak.

### **Card round**

The teacher prepares a set of cards, each containing one incomplete sentence. The cards are placed in a pile face down in the centre of the group. Each student in turn reads the sentence aloud and completes it.

## **Part 3: Building trust within groups**

When a group first forms or meets after a break, it is important to establish good communication between members. This can be through a structured agenda which takes only a few minutes or through a longer activity which has value in meeting other objectives as well. The agenda or activities may be unconnected with the main task or may be used to focus thinking on the main task.

Groups may be given the opportunity to demonstrate the outcome of the activities to the other groups.

## **Structured agenda**

Each person in turn:

- **name**
- **one enjoyable thing that has happened to me recently**
- **one reason why I am pleased that (person on right) is part of this group is .....**
- **one thing you could not know about me by looking at me is .....**

## **Group activity**

Making sure that everyone in the group is included, create:

- **a statue of a tree**
- **a representation of a moving aeroplane**
- **a representation of a working machine**
- **a representation of a still photograph (one or two only)**

## **Group activity**

Provide each group with an uncaptioned cartoon. Ask them to come up with a caption within 5 minutes.

## **Group activity**

In 5 minutes, write down as many ways as you can of how to make use of a

- **flower pot**
- **leather belt**
- **ping pong ball (use only)**

## **Group activity**

Create a name and logo for the group to use on all work displayed by the group.

## **Strategies**

### **Addressing concerns – ‘fear in a hat’**

A strategy for enabling students to express personal concerns about sensitive issues without being personally identified – pupils anonymously write their concerns on a piece of paper and place the paper in a 'hat'.

### **Card sort**

A strategy for exploring attitudes and values through sorting a number of statements according to given criteria. The aim is to reach consensus within the group.

**Carousel**

The class forms two circles, one inside the other. The inner circle faces out, the outer circle faces in. Opposite people form a partnership to address a specific task for a given length of time, through discussion, sharing experiences or rôle play. One circle then moves on two places. The same or a different issue is addressed by the new partnerships.

**Clarifying a concept**

Groups reach a common understanding of a concept through a sequence of activities either starting from Thought showering or involving building a detailed statement from phrases or sentences contributed by individuals.

**Conflict resolution**

Groups undertake a series of steps designed to lead to win/win solutions, which meet everyone's interests at least to an acceptable degree.

**Group work with an observer**

An observer gives the group feedback on the way the group has tackled the task, according to previously agreed criteria.

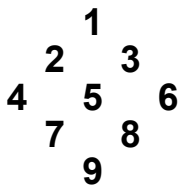
**Group work with a consultant**

A consultant is available to provide information to the group. The consultant can be a teacher, student or visitor.

**Identifying priorities**

Statements on separate cards are sorted into a sequence according to identified criteria.

'Diamond nines' – sort into this pattern

**Information carousel**

Each group has access to a different source of information. They identify the key issues and send a spokesperson to communicate the issues to other groups. The original groups reflect on what they have learned.

**Interviewing a visitor**

Groups agree and carry out a course of action to welcome and draw on the personal experience of a visitor.

**Line up**

Individuals place themselves on a continuum or either side of an imaginary line, to represent their personal views in response to a controversial statement.

**Matching concepts**

Two or more sets of statements about different aspects of a topic are matched according to given criteria.

**Problem solving**

Groups are given a specific task to achieve collaboratively.

**Reaching consensus on a course of action**

Discussion or other strategies are used to bring all members to a common understanding or an agreed course of action.

**Rôle play**

Groups act out a given situation in order to gain understanding and experiment with possible solutions to a problem situation.

**Simulation**

Individuals play a rôle in a simulation of a real life experience.

**Strcutured agenda**

Groups consider a sequence of steps all relating to a specific issue. The sequence is deliberately planned to lead to insight, understanding and action especially in relation to complex issues.



## appendix v issues of loss and bereavement

Many young carers experience some kind of loss or bereavement. The loss may be related to the parent no longer being able to do certain activities with the young person that were once a core part of family life, there may be a loss of income and status or the onset of disability may result in family breakdown. Sadly, some young carers will experience the death of the person they are caring for. There are a number of publications and other resources that can be used with young people in these situations or provide useful advice to school staff:

**Bryant-Mole, K** (1992) *Death. Wayland*

**Couldrick, A** (1991) *When your Mum or Dad has cancer. Sobell Publications*

**Dyregrov, A** (1991) *Grief in children, a handbook for adults. Jessica Kingsley Publishers*

**Grollman, E** (1993) *Straight talk about death for teenagers – how to cope with losing someone you love. Beacon Press US*

**Heegaard, M** (1991) *When someone very special dies – children can learn to cope with grief. Woodland Press US*

**Heegaard, M** (1991) *When something terrible happens – children can learn to cope with grief. Woodland press US*

**Heegard, M** (1991) *When someone has a very serious illness – children can learn to cope with loss and change. Woodland Press*

**Hollins, S & Sireling L** (1994) *When Dad died, when Mum died. St. George's Mental Health Library*

**Limb, S** (1993) *Come back Grandma. Bodley Head*

**Mayled, J** (1986) *Death customs. Wayland*

**Perkins, G & Moms, L** (1991) *Remebering Mum. Al Black*

**Sanders, P** (1990) *Death and dying. Franklin Gloucester Press*

**Searle, Y and Steng, I** (1996) *The grief game. Jessica Kingsley Publishers*

**Simmonds, R** (1987) *Fred. Picture Puffin*

**Smith, S C & Pennells, M** (1996) *Interventions with bereaved children. Jessica Kingsley Publishers*

**Smith, S C & Pennells, M** (1994) *Guidelines for working with bereaved children Jessica Kingsley Publishers*

**Turner, M & Thomas, B** (1997) *Talking with children and young people about death and dying Jessica Kingsley Publishers*

**Varley, S** (1984) *Badger's parting gifts. Picture Lions*

**Ward, B** (1995) *Godd Grief 1 Exploring Feelings, Loss and Death with Under 11's 2<sup>nd</sup> ed.; Good grief 2. Exploring feelings, loss and death with Over 11's and Adults, 2<sup>nd</sup> ed. Jessica Kingsley Publishers*

**Wilhelm, H** (1992) *I'll always love you. Hodder & Stoughton*



## **appendix vi contact sheet for teachers**

If you have identified young carers in your class you may like to contact the following agencies to see what support may be available:

- **your Education Welfare Officer**
- **your local social services office**
- **the youth service / youth counselling service**
- **your local carers support worker or young carers support worker**
- **disability charities such as the Multiple Sclerosis Society, Motor Neurone Disease Association etc.**

Contact details for these agencies will be available from social services or your local council for voluntary service.



# 8. evaluation sheet

Young Carers – Resources for Schools

Contact name

Would you use these materials again?

School

To your knowledge, were there any young carers present during the sessions?

Address

If YES, please comment on how this work was received by them

Please circle the key stage and year group that this pack was used with

key stage

2 3

year

5 6 7 8 9 10

Have these materials changed your approach to young carers and how?

Have the lessons changed pupils' responses to young carers and how?

Was the background information at the beginning of this pack sufficient to inspire confidence in teaching the module?

Any other comments: (please use a separate sheet of paper if required)

yes

no

If not, what further information would you need?

Please comment on the lesson plans under the following headings

ease of use

timings

age appropriateness

successes

problems

general

Thank you for completing this form. Please return it to: Surrey Young Carers Project, 43 Blackborough Road, Reigate, Surrey RH2 7BU

Your comments on this pack are most welcome and will be incorporated into any future, revised editions