# Social Effectiveness Research Centre

# Carers' Voice (Unsung Heroes)



# FINAL EVALUATION

(July 2018 - July 2020)

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#### I. Introduction and Methodology

#### Introduction

*"It's difficult being an older carer juggling work and caring role, looking after my husband with heart problems and my father who is very elderly, but the Neil story the project ran has given me hope."* 

Older carer beneficiary, Carers' Voice

Carers' Voice (also known Unsung Heroes after a major element of its work) was a project commissioned by BVSC (Birmingham Voluntary Service Council) on behalf of the Birmingham Ageing Better Partnership and its Ageing Better in Birmingham programme (ABB). ABB works to reduce isolation for people over 50 in the city and is delivered in partnership by a range of organisations, led by BVSC.<sup>1</sup> ABB is part of the National Lottery Community Fund's England-wide six-year, £78 million Fulfilling Lives: Ageing Better programme.<sup>2</sup>

Carers' Voice was delivered by Forward Carers, who also run the Birmingham Carers Hub. The project formally began in July 2018 and ran through until the start of July 2020, although some legacy work has continued beyond that date, principally in the form of the 2020 Birmingham Carer Friendly Business Awards and related publicity.<sup>3</sup>

The indicative budget for the project was £70,000 over the two years, with the primary output for this being the development of a media campaign to support three headline outcomes the project was seeking to achieve in Birmingham:

"(a) To raise awareness of the issues that carers face and ensure that services, activities, employers, organisations and institutions are 'carer-friendly'.

(b) To raise awareness of the services and support available to carers and enable them to access these effectively.

<sup>&</sup>lt;sup>1</sup> Ageing Better in Birmingham, 'What We Do', available at; <u>https://www.ageingbetterinbirmingham.co.uk/about-ageing-better-in-birmingham/what-we-do</u> <accessed August 2020>.

<sup>&</sup>lt;sup>2</sup> National Lottery Community Fund, "Ageing Better", available at: <u>https://www.tnlcommunityfund.org.uk/funding/strategic-investments/ageing-better</u> <accessed August 2020>.

<sup>&</sup>lt;sup>3</sup> See, for example, Forward Carers, 'Carer Friendly Business Awards aims to make Birmingham the first 'Carer Friendly City'' (11 August 2020), available at: <u>https://forwardcarers.org.uk/carer-friendly-business-awards-aims-to-make-birmingham-the-first-carer-friendly-city/</u> <accessed August 2020>.

(c) To reduce the key risks and triggers of isolation amongst carers."

ABB's 'Older Carers In Birmingham – Local Action Plan', of which the project was a part, also noted that the outcomes of the Carers' Voice campaign would be sustained *"through changes in attitude, greater awareness and understanding of the experience of carers in Birmingham and more carer-friendly and carer-aware services"*.<sup>4</sup>

The project was to be delivered in an integrated manner by a specialist carers' advocacy organisation supported by a marketing and communications provider with strong experience and expertise in campaign management/delivery and social marketing.<sup>5</sup>

Orange Juice, a public relations company based in Northamptonshire, was chosen as this communications partner, with the first of the project's annual campaign plans agreed in August 2018.

This report evaluates Carers' Voice against its headline outcomes over its two-year lifespan, in order to give a picture of the project's overall achievements, the challenges it faced and the learning it has generated for any similar projects running now or in the future.

#### Methodology

In order to evaluate progress made against the project's headline outcomes, the evaluation process comprised the following stages:

- An initial review of the background and contextual literature relating to the project and its activities (including the aforementioned National Community Lottery Fund's Fulfilling Lives: Ageing Better programme, together with other evaluations and research relating to the issues of loneliness and social isolation among older carers).
- Analysis of the monitoring data collected by the project over its two years, including project records and statistics, website and social media analytics and toolkits and other materials produced as part of its campaign.

<sup>&</sup>lt;sup>4</sup> Ageing Better in Birmingham, "Older Carers In Birmingham – Local Action Plan' (5 April 2017), p.12, .available at:

https://www.ageingbetterinbirmingham.co.uk/images/Older Carers Local Action Plan v1.0.pdf <accessed August 2020>.

<sup>&</sup>lt;sup>5</sup> Ibid, p.11.

- A remote survey in which over 40 older carers (aged 50+) living in Birmingham gave their views on the project and various aspects of its effectiveness, with telephone/video follow up interviews where permission was given. (These interviews were originally to be done in person, but this proved impossible due to social distancing requirements resulting from the the COVID-19 pandemic, which was ongoing throughout the research process for this evaluation.)
- Additional remote interviews with other stakeholders, including with employers who had been involved in elements of the project, and with project staff.

This information has been used to evaluate the project's achievements against its three headline outcomes. It has also been used to consider the unexpected outcomes and more general crosscutting themes to emerge during the project. Finally, all of this evidence has been used to capture learning and make recommendations for the further development of the model that formed the basis of Carers' Voice.

#### II. Outcome 1 – Increased Awareness of Older Carers' Issues



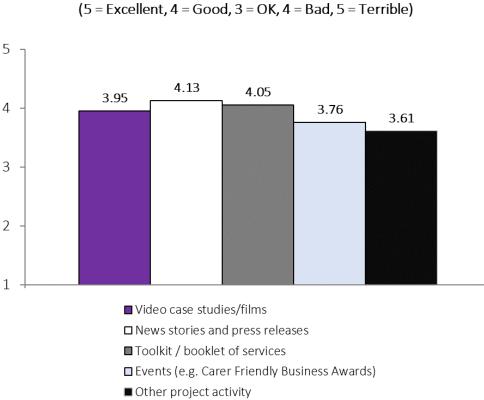
"The project brought awareness of how many older people care for others into the general public. Keep the good work up in bringing this issue into the public domain."

Older carer beneficiary, Carers' Voice

The first main outcome Carers' Voice sought to achieve was that of increasing awareness of the issues that carers face. Almost two-thirds (65%) of the older carers feeding back as part of this evaluation felt the project had achieved this.

In part this was because of the perceived effectiveness of the project's approach and the materials it developed based on that approach.

As the following graph illustrates, all of the different types of things the project produced over its lifetime received an average rating of between 3.61 and 4.13 (out of 5). Rounding this up into the plain English terms that the ratings were translated into for evaluation participants, this meant that the older carers sampled on average rated the project as closest to 'Good' in all activity areas, with some areas slightly nearer to 'Excellent' and others slightly nearer to 'Satisfactory':



CARERS' VOICE Average Beneficiary Quality Ratings For Project Activities (5 = Excellent, 4 = Good, 3 = OK, 4 = Bad, 5 = Terrible)

Ratings were slightly higher for the project's more conventional media activities, such as its news stories and press releases or booklet of services, than for other elements, such as the video case studies or project events. The smallness of difference between ratings for each activity area, however, suggests that there was little variation in quality between the project's different outputs. In general therefore, the quality of the activities the project delivered may be categorised as good.

Along with the quantitative data relating to this outcome, evaluation participants also fed back numerous qualitative comments outlining exactly how the project had helped raise awareness through these activities, or – as one older carer put it – *"enhanced caring as a major issue"*. Comments relating to this theme included the following:

- *"It was something good for carers to show that they have been recognised for all they are doing."*
- *"It raised awareness."*
- "The project highlighted carers."

- "The project increased awareness of older carers."
- *"I've always been a carer, and it's great that carers are being recognised."*
- *"It's nice to see that older carers are now being taken into consideration and that awareness of older carers does exist."*

As well as raising awareness of older carers and their issues with other bodies in general, Carers' Voice also made some carers more aware of their own issues. For instance, one older carer reported that it *"made me aware of how different carers are and how our needs can change over time – I realise how important support networks are"*. Sometimes the project made beneficiaries them think of themselves as older carers for the very first time – as one put it, *"I have never really seen myself as an older carer as I have to stay very fit and healthy to look after my elderly mother!"* 

One particularly innovative aspect about Carers' Voice in relation to how it raised awareness amongst and about carers was the decision it took as a result of the initial consultations with carers about the project. Following these consultations, Carers' Voice decided to focus more on themes relevant to older carers rather than (always) focusing explicitly on older carers as a discrete group in every communication. As one project staff member outlined in their interview for this evaluation:

> "One of the early conversations was how much you needed to target different messages at different audiences as part of the project's general awareness raising. We changed the project fairly early on to focus more on themes than just older carers as a group. These themes attracted more attention from certain stakeholders than something labelled purely about older carers would have done. For example, the theme around health, and getting carers to let their GPs know they were carers, this really attracted the attention of certain types of professionals such as GPs and practice staff – we even had one staff member at a surgery who realised she was an older carer because of the project, but had never thought of herself as one."

Another staff member echoed this:

"We purposely put older carers at the forefront of our videos and our imagery, but we also wanted to be inclusive, to reach those who will reach the age of 50 soon

for example. Fifty is not old! It's about planning ahead – most people start their caring journey about 40-45 years old."

This seems to have been a successful strategy, if the feedback from those definitely identifying as older carers in this evaluation is anything to go by. Project staff noted too that they had seen an increase in registrations as carers with their organisation during the lifetime of the project. While, as one older carer beneficiary started part of her feedback, *"sometimes we don't like having a label..."*, it seems increasing numbers of older carers in Birmingham may be agreeing with the conclusion of the same carer's sentence: *"...but it can be useful"*.

The project's staff felt as well that Carers' Voice had benefited from existing awareness raising activities undertaken by Forward Carers as the host organisation, such as the annual Carers' Week events that the organisation puts on and the several hundred attendees this brings. They also felt, however, that the Carers' Week events had benefited in turn from the existence of Carers' Voice – as one staff member put it, "Carers' Week would have never been where it was without the learning from Carers' Voice", for instance around using social media mechanisms.

Similarly, in its targeted awareness raising efforts with employers (the most specific piece of 'segmenting' the project did according to its staff), the project was able to achieve more because of the learning it was able to gather as it went along. Project staff also identified getting more feedback from partners as another noticeable effect of the way the project worked in relation to its first outcome.

The targeting of awareness raising with employers in particular seems to have contributed towards this. In the words of one employer partner of the project, who attended the inaugural Birmingham Carer Friendly Business Awards launched by the project in 2019:

"It was great going to the awards ceremony and meeting other organisations there that were prepared to look at their policies towards carers. It was a very heartening experience".

At the same time the interviewee in question counselled against treating all older carers as a homogenous group:

"No two carers are the same. There isn't a formula, as people's caring responsibilities vary enormously. Some people have to care constantly while others are off and on."

According to project staff, some organisations in Birmingham were already doing good work with identifying and supporting carer service users, but were less proactive when it came to their own staff. Others, including the ceremony attendee quoted above, who won an award for their good practice, were in their view already doing good things on the staff side as well. Generally, though, promotion of employers' understanding of the needs of the carers among their own staff was what project staff felt Carers' Voice had been *"able to take to the next level"* through its work and awareness raising approach.

Indeed, one of the more concrete legacies of the project has been the new Carer Friendly Brum scheme to help employers develop carer friendly policies for their clients, customers and staff.<sup>6</sup> The scheme works through a three-level nominations process that can see an organisation awarded 'Making A Difference', 'Carer Aware' or, ultimately, 'Carer Friendly' status.<sup>7</sup>

In general, the evidence gathered for this outcome suggests that the project's crossing of visual elements largely focused on older carers with content elements of a broader, more thematic appeal (elements that would naturally raise awareness in different ways with different types of audience), was successful. This innovative approach may therefore be a way forward for other projects seeking to increase awareness of older carers and their issues, both among older carers themselves and among wider stakeholder groups in society.

 <sup>&</sup>lt;sup>6</sup> Forward Carers, 'Carer Friendly Brum – Businesses, Providers and Organisations', available at: <u>https://forwardcarers.org.uk/carer-friendly-communities/caring-in-business/</u> <accessed August 2020>.
<sup>7</sup> Forward Carers, 'Carer Friendly Brum – I am a Carer', available at: <u>https://forwardcarers.org.uk/carer-friendly-communities/i-am-a-carer/</u> <accessed August 2020>.

#### III. Outcome 2 – Greater Awareness of Support Available

# Carer insists that help is on hand

A carer has spoken out about the 'mentally and physically draining' demands of caring for a loved one, but insists there is help out there.

Speaking ahead of Carers Rights Day tomorrow, Sylvia Johnson-Davis is helping to raise awareness of a new campaign called Unsung Heroes. It has been launched to celebrate

It has been launched to celebrate the role of family carers across the city as part of Ageing Better in Birmingham, which is funded by The Big Lottery Fund and being delivered by Forward Carers.

The 50-year-old, from Birmingham, first started looking after her mum in 2014 who was diagnosed with Alzheimer's.

She said: "Initially, I took on board the physical care and that put a huge strain on my family at home. No one understood just how stressful it was trying to help my mum, while also being a good mum, wife and friend. "I was sorting mum's medication,



Carer Sylvia Johnson-Davis

her shopping, getting her out to fulfil her social needs. It was a lot of work. On top of that I had the school run to do and my own household duties to carry out. Eventually, I realised I couldn't be super woman. I was spreading myself too thinly, getting stressed out and finding the caring role a challenge."

Sylvia attended a Forward Carers

training session where she received help and support. From there, she found the voice to say she also needed help.

Simon Fenton, CEO of Forward Carers, said: "Sylvia's story is sadly very common among carers.

"Unsung Heroes is all about identifying those silent champions of Birmingham, who largely carry out their day to day role without complaining and very often putting their own needs last.

"We've launched this campaign to reduce their social isolation, improve their emotional well-being and to celebrate the great work that they do."

Sylvia said receiving the support came at the right time and she was able to turn her life around. She added: "Once I'd got my health

She added: "Once I'd got my health back on track and built my self-confidence, I decided I would return to my training as a mental health nurse. This was a big decision, but seeing mum stable made me feel more comfortable."

"It's made me aware of help I can use which I didn't realise was there."

Older carer beneficiary, Carers' Voice

The second main outcome Carers' Voice aimed at for its beneficiaries was also about increasing awareness. This time, however, it was awareness among older carers themselves of the support and services they could access. This was the area in which the project had the most success, judging from the responses received from older carers for this evaluation – three-quarters (75%) of respondents said that the project had helped them in this regard.

The use of social media occasioned by the project, plus its partnership format between a carers advocacy organisation and a professional communications agency, seem to have been chief contributory factors here. As a member of the project staff attested:

"We have learnt a lot, and have a lot of knowledge, such as that timing is everything on social media – for example that older carers are more likely to read things if you send them out on a Sunday afternoon rather than a Monday morning."

Another staff member on the project noted a similar effect of the campaign:

"This is the first time we've used analytics of social media and so on in quite such depth – it was so interesting what drew people in and what didn't. Our use of them is a lot more focused now."

Specifically in terms of the partnership with Orange Juice, the same staff member added that *"it was good, it gets you to think in a different way – we learnt some useful tools and techniques, for example around paid advertising on social media"*.

The view from one of the communications partner staff interviewed for this evaluation was similar:

"We had a good relationship, there was mutual trust. The only reason some of the carers were talking to us was because of the relationship they had with Forward. We were outsiders, but we had freshness – it felt like a good partnership."

The communications agency was involved from a very early stage, attending some of the initial consultation work with carers, which had led to the project's conception and successful application for funding from ABB. Nevertheless, and perhaps unsurprisingly, there was still a learning curve for both organisations in the partnership.

As another member of staff from the communications agency outlined:

"We were experienced journalists, but we learnt that carers need sensitivity. The host organisation staff did such a good job of briefing us. It was frustrating sometimes that some older carers had good stories, but were very private people and we couldn't use them."

One particular 'test and learn' aspect of the communications side of Carers' Voice was the move from an initial focus on organic advertising on social media (in the project's first few months) to more of a paid advertising focus over its later course. According to the Orange Juice staff interviewed, this paid dividends – as one put it, "our project partners said they had people coming to their events through Facebook advertising who they had never seen before, particularly those who hadn't thought they were carers before".

It may therefore be that the communications agency's expertise in being able to target social media advertising to new levels of exactitude (for instance, focusing on people of certain ages in certain postcodes or with particular interests that might make them more likely to be older carers) played a key role in making the project's older carer beneficiaries

more aware of the support and services they could access. This seems especially true when that expertise was combined with the pre-existing networks, reach and knowledge of their user base that Forward Carers could bring as the carers advocacy organisation in the partnership.

Over its two years, the project's campaigns reached over 150,000 unique individuals via Facebook and other social media means, and an audience of around 98,000 through its use of print media. Overall engagement rates were high, working out at close to one 'like' or other interaction per follower, rates which compare favourably to industry standards for campaigns by non-profit organisations.<sup>8</sup>

As one of the Orange Juice staff summed up:

"You could argue that the budget was small for a citywide campaign – we couldn't afford adverts on buses and the like. But for the budget we were very happy with the figures."

Qualitative feedback from older carers themselves also bore witness to the project's success in relation to its second outcome. Along with carer quoted at the start of this section, numerous others explicitly named increased awareness of support as the most important change the project had achieved for them:

- "It helped me become aware of what help is around for me and the person I care for."
- *"It made me aware that there is more support for me than I originally thought. People do not understand how hard it is to be a carer."*
- *"The project notified me of available information and help."*
- *"It made more aware of what support there is."*
- *"The project made us aware of help and courses available to us."*

<sup>&</sup>lt;sup>8</sup> All information supplied by Orange Juice. For further information on non-profits and standard social media engagement rates, see B. Feehan, '2020 Social Media Benchmark Report' (Rival IQ, 4 March 2020), available at: <u>https://www.rivaliq.com/blog/social-media-industry-benchmark-report/#title-nonprofits</u> <accessed August 2020>.

- "I found out what services I could access."
- *"It's made me aware that there is more support out there to have."*

It should be noted at this point that the project did also offered some limited direct support itself, and was not wholly restricted to just signposting carers to other services (as it did, for instance, through the booklet of carer services in Birmingham it produced).

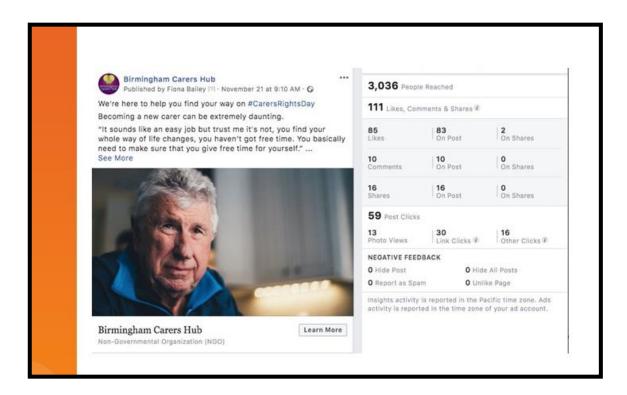
One example of its more direct role was its toolkit for carers (as featured on the cover of this evaluation report). Another would be the advice contained in the videos it produced. One beneficiary felt aspects such as these were the most important thing the project did – in their view, *"the most important thing about the project was it giving out help and support"*.

But whether the signposting or direct help was ultimately more important, Carers' Voice seems to have performed well against its second outcome. This view was summed up by one older carer beneficiary of the project, who commented that the project had " *enabled carers to see they're not alone and have support at hand*".

Another older carer also flagged up the ease with which its materials and the information it gave could be passed on by word of mouth or in other ways. As they noted approvingly, *"I was able to let other people know about it"*.

Either way therefore, directly or indirectly, on the evidence gathered for this evaluation, the project enjoyed its greatest amount of success in relation to this outcome.

## IV. Outcome 3 – Reduced Isolation



*"I don't feel like I'm alone doing this caring any more. It's made me more confident."* 

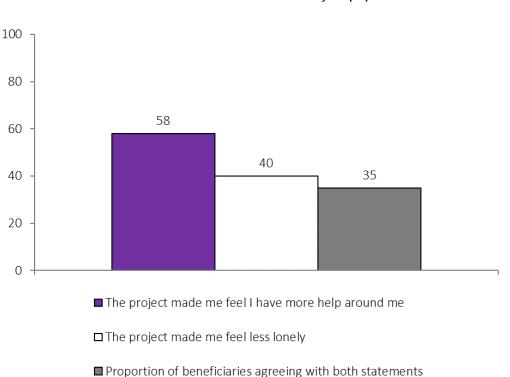
Older carer beneficiary, Carers' Voice

The final main outcome Carers' Voice wanted to bring about for its beneficiaries was reduced isolation. Isolation can take two forms – objective social isolation from support networks and/or subjective feelings of loneliness and distance from other people. Loneliness will often go hand in hand with social isolation, but may still be felt even when with other people or when part of wider social networks.

This is a particularly important distinction to draw when talking about older carers, as carers are one of the groups in society least likely to ever actually be completely in their own company. They are, however, at the same time still vulnerable to feelings of loneliness, as well as social isolation beyond their immediate household and the person for whom they care.

As the following graph records, significant proportions of the older carers feeding back in this evaluation felt Carers' Voice had helped them in relation to one of these two potential

depressant factors on their wellbeing. Moreover, again translated into plain English terms, over a third also felt it had helped them in relation to both types of problem:



CARERS' VOICE Proportion of Beneficiaries Sampled Identifying Isolation Outcomes from Project (%)

Progress on this outcome was especially important for the project, given the coronavirus pandemic that was to hit during its final year. As one older carer fed back, *"COVID has not helped older carers and looked after people as it has increased social anxiety, created isolation and impacted on our mental wellbeing in daily living"*.

Against this, there were numerous testimonies from beneficiaries indicating that this may have been the most immediately impactful of the project's outcomes, if their descriptions of the biggest change it had on them are anything to go by:

- "The most important change is knowing that I am not isolated and other careers are going through similar or same issues."
- "That help is out there when a carer needs help and support knowing others are in the community going through the same ups and downs in a carer's life."

- *"Understanding that you are not alone when you are struggling to cope with various problems."*
- "The regular contact during the lockdown has made me feel as if I am not on my own. Thank you."
- "Just to feel that there are others in the same position in these challenging times."
- *"Knowing that we're not alone."*
- *"That other people around you care about what you're going through."*
- *"It's made me feel more valued and less isolated. I think this is a brilliant initiative and has brought people more confidence and involvement within the community."*

It was instructive too to see that, together with other related terms such as 'support', 'help' and 'others', issues of being isolated or alone were relatively prominent in the word cloud of the most common terms mentioned across all feedback from project beneficiaries (the larger the word, the more frequent its occurrence in the feedback):



While, as noted in the graph earlier in this section, a slightly lower proportion of beneficiaries reported that they had benefited from this third and final intended outcome of Carers' Voice compared to the two other outcomes, it was nevertheless still an area where most older carers felt the project had achieved what it set out to do.

Indeed, as with previous outcomes, formal separation of the different types of changes the project was trying to achieve did not necessarily reflect how the project's outcomes were often interlinked in practice. As one older carer put it, *"any sort of awareness raising is always good – it makes you feel less alone and that others are in the same boat"*.

The next section of this report therefore discusses the more crosscutting or unexpected outcomes from Carers' Voice that emerged alongside the three headline outcomes for the project.

V. Unexpected Outcomes and Crosscutting Issues



"The project has given me confidence to be a carer for a loved one who needs it the most, and there should be more like this in the future for everyone."

Older carer beneficiary, Carers' Voice

To start with the unexpected outcomes Carers' Voice led to, perhaps the most unexpected was the **depth of change** the project achieved for some beneficiaries. In particular, several beneficiaries reported that the project had gone beyond just helping them with support or isolation issues, and had improved their feelings of wellbeing more generally – in the words of one beneficiary, *"the project gave me inspiration and hope"*. Similarly, another older carer testified that they sometimes stressed about the person they cared for and what would become of them, but *"when reading others' stories, it gave me hope for his future"*.

In terms of crosscutting issues, the amount of change the project was able to achieve seems in part to have been because of the **quality of service** provided by the organisations involved in it, as feedback from numerous different beneficiaries illustrated:

- "The Forward Carers staff who ran the project did a very good job highlighting areas that we did not know about."
- *"It was a very good service thank you."*

- *"Forward Carers keep you updated especially around COVID and an ever changing world."*
- *"Forward Carers is an excellent service."*
- "Well done to the organisers."
- "Forward Carers are excellent."
- *"Keep up the good work."*

Despite this positive testimony, the project could not of course solve everything for its beneficiaries. A second crosscutting issue to emerge comprised the **wider challenges of being an older carer**. These encompassed issues beyond isolation and loneliness that the project was not directly resourced to deal with.

For example, the issue of carers having to care when in poor health themselves came through strongly as an important source of unresolved stress. As one older carer beneficiary observed, *"being an older carer makes life quite difficult if you are unwell"*. Another felt that simply being older made it harder physically to be a carer – as they commented, *"being an older carer does restrict your own caring as I now tire easily"*.

A third beneficiary even flagged up both issues at once in their feedback:

"Being an older carer with your own health issues is tough and you don't have the energy as someone younger. Friends are often the same age and have their own issues and so you can be isolated and/or unable to access family and friends' help."

Another added that the person they cared for *"knows that I have competing priorities – we are the sandwich generation"*, adding that *"I have just reached a milestone birthday and I need to be selfish, and take care of myself as well"*.

The mental stresses of being a carer also came through strongly in several beneficiaries' feedback. As one interviewee related:

"As a carer you have to be an advocate for the people you care for, as well as for yourself. You have to be a nurse, teacher, advocate, lawyer and psychologist all in one. This creates massive amounts of stress."

Or in the words of another, "I would not say that I feel lonely, although sometimes I can feel frustrated and I end up thinking <u>why is it always me</u>?"

Moreover, the **impact of the coronavirus pandemic** seems to have only increased these stresses according to the testimony of another beneficiary taking part in the evaluation:

"Older carers bear the burden and it is made far more difficult due to bureaucracy and the time spent on the phone trying to get help. It has not helped trying to access social services in crisis situations and them working from home during the virus with children and or dogs in the background."

The same older carer also added that:

"After many weeks of begging for help, one of the people I care for died on the morning that funding had come through for extra care. I also have another person I care for who is over 50 and severely disabled. Social services do not appear to have a computer system that links multiple household care needs."

An employer interviewed for this evaluation likewise mentioned the challenge of COVID. They described how, when they had found out about the project, they had invited its workers in to explain to some of their staff about the types of support and services available if they were a carer, commenting that *"this would have been rolled out to potentially over 5,000 more employees in Birmingham, except that the pandemic occurred and so many people started to work from home"*.

The interviewee did note though that this roll out was "*still on the cards*" for when things returned to a more normal state.

These challenges were in turn reflected in feedback from other beneficiaries regarding the **wider context of services for carers** beyond the work of the project. This was summed up by the view of one beneficiary that *"the project made me aware of some good things but realise that more should be done"*. Another beneficiary expressed a similar sentiment, commenting that *"it is good that projects like this run, but the* 

*underfunding of adult social services remains a disgrace"*. A third older carer too saw the situation in general as dissatisfactory:

*"Caring is stressful, filling gaps, Parliament neglects. Carers can be very lonely, isolated, and require much care and support."* 

Perhaps the biggest single specific issue, however, to emerge among the crosscutting themes in this evaluation was the **difficulties older carers face combining caring and employment**. All of the older carers who mentioned it in interviews or other feedback commented that they found it challenging, and several specifically said they had had to reduce their hours since becoming a carer. For example, one interviewee related how they had been a full-time employee, and had then had to go part-time (*"I had to reduce my hours – I didn't want to do this at the time, I had a career, but the person I care for was clearly not looking after themselves"*). Worse still, the interviewee in question was now faced with having to reduce even those hours even further.

Part of the reason for feedback like this seems to be a gap with some employers between carer-friendly policies on paper and carer-friendly behaviour in practice. As another older carer feeding back to this evaluation described their situation:

> "I'm a carer because the person I care for is fearful about moving to a care home. I had to give up my job because, although my employer had a carer policy, managers were not monitored on how they implemented it. Several of us took voluntary redundancy at the same time to become full-time carers. It should have been flagged up but wasn't. It was all talk – no support."

Given that older carers are now increasingly expected to work more in general, as well as for longer because of changes to the state retirement age (as the first interviewee quoted above commented, *"I have to work until I'm past my mid-sixties now, so I have a few more years yet"*), this seems a potential area where more could still be done to help carers cope.

To some extent this had already begun to happen during the lifetime of Carers' Voice, as the project introduced the Birmingham Carer Friendly Business awards and developed a growing strand of activity around work-life balance as it unfolded over its two years.<sup>9</sup>

<sup>&</sup>lt;sup>9</sup> See, for example, its 'Work Life Balance' video, available at:

https://www.youtube.com/watch?v=fTckC2dE2n8&feature=youtu.be <accessed August 2020>.

No project can do everything though, and while not every older carer is able, or even necessarily wants to work, there was some evidence that further efforts in this direction by any future similar project would be welcomed by many older carers. As one Carers' Voice beneficiary described their situation:

> "I haven't worked for over two decades since the person I care for was diagnosed. I do have someone helping me to get back to work now. I'd love to work. I've got a degree and lots of practical experience. It would be better if the person I care for saw me going out."

The Carer Friendly Business Awards could be a useful building block in this element of the project's legacy. As an employer commented in their interview for this evaluation:

"When I went to the awards, it became clear that Forward Carers were reaching out to lots of people and organisations. For example there were GPs there and there were clearly a lot of referral pathways in place."

Another employer also hinted at the reasons why other employers might be able to sign up to such a commitment:

"It was wonderful getting the award. We are not a wealthy organisation, so we can't give our staff financial bonuses, but what we can offer is family friendly policies."

At the same time, the same employer felt that more follow up might be needed once the awards ceremony has taken place each year. As they outlined:

"Sadly, although we were delighted with the award and certainly promoted everywhere that we had received it, nobody has contacted us, wanting to do the same or asking how we did it. But this has been COVID-19 year, so perhaps that's why."

Indeed, it should be recorded here that for all its good work, Carers' Voice was unsurprisingly **not able to reach every older carer** in Birmingham. While this may only to be expected in a city with over 100,000 carers of all ages, just under 18% of the older carers feeding back in this evaluation did not gain any particular outcome from the project. This was usually because they had not been specifically aware of it until approached for their views as part of the evaluation. As one commented, *"I don't think I caught on about the* 

project, this may be down to lack of information or that I missed it as I was informed about it in a long email which may have only been quickly looked at".

There were also a couple of older carers, though, among those feeding back who had heard of the project but not gained much from it. In the view of one, "none of the information I have read helped me", while another observed that "I don't feel it has done anything much for me, but it does seem to have helped other people". A third older carer made the different but equally relevant point that "selfishly it makes no difference if something is a 'project' when what I need is ongoing support", adding that "regular email updates are a great help".

This issue fed in turn into the penultimate crosscutting theme to emerge from the feedback for this evaluation, namely **suggestions for future work** for Carers' Voice or any similar future project. As the following list indicates, there were several suggestions made by older carer participants in their feedback:

- *"It would be great if we could have a campaign around mobility cars for older people in wheelchairs."*
- *"If anything happened to me, the people I care for wouldn't know where to turn to in relation to their benefits. There needs to be a system to support cared for people if their advocate is no longer around. It's a real worry."*
- "Pensioners do not get Carer's Allowance in the same way other people do, it appears that it is not widely known among the public and available services as I am often told don't forget to claim it. Perhaps a tax break could be considered"
- "I would like to see Forward Carers enabling people in the same situation to get together, but I understand that lockdown has prevented this. I would like to see a blended approach where face-to-face and Zoom type options for example were both on offer for such meetings so carers could join in from home. That would be really good."

Employers too had suggestions, for example around the importance of keeping close links with local carers. In the words of one:

"Forward Carers has many different strands to cover the many different circumstances and types of caring, ranging from looking after somebody with a mental health problem to somebody who is sick or with dementia. Keeping this breadth is really important. For me, the most important thing is that they act as a pivot in the community. By this I mean that they link with the caring community at a local level, and give them the information that they need directly. I know how important this is from my own family background."

Another employer echoed the importance carers themselves had flagged up regarding their own health and wellbeing as an issue needing more attention:

"We have noticed through our own work that some carers can be very neglectful of their own physical and mental health. For example they often don't eat as well as the person they care for. Going forward we do intend to look at nutritional education, we have just been stopped in our tracks by the pandemic."

At the same time, this employer also counselled against taking any one-size-fits-all approach to recommendations for such a wide and varied group as older carers:

"We don't think that online access should ever replace carers being able to go for a break, there should be blended provision for them. Some carers want to talk to other carers, others don't. Some are interested in a carer's assessment and sitter service, others aren't. It is really about offering a range of different things."

Despite all the things that could be improved for older carers in Birmingham, however, perhaps the thing that came through most strongly of all in the feedback for this evaluation were the **skills and happiness older carers can bring** to their work – as one put it *"being an older carer is good because you have experiences to draw on"*. Another stated simply when asked for any other comment that *"I enjoy being a carer for both the people I care for"*. Similarly, in the view of another evaluation participant, older carers can be *"satisfied with their full life and work caring for someone, peace of mind for good work"*.

So, while there is always more to do in terms of the crosscutting themes to arise from this evaluation, it may also be important to step back and appreciate what was able to be achieved, both in relation to the expected outcomes of Carers' Voice discussed in previous sections, as well as to the more unexpected outcomes outlined in this one.

#### VI. Conclusion and Recommendations

"It renews your faith in human nature that there are others that care."

Older carer beneficiary, Carers' Voice

Judging from the evidence gathered as part of this evaluation, for a relatively small scale project, Carers' Voice seems to have had a wide range of different impacts upon the older carers in Birmingham who were its target audience. These include some deeper impacts, such as the effect of the project visible in the quote above, that might not have been entirely expected at its outset.

As a potential model for an older carer-focused project, Carers' Voice, as noted in previous sections, took an innovative approach, basing itself on a partnership between a carers' advocacy organisation (Forward Carers) and a professional communications agency (Orange Juice).

Out of that partnership seems to have come a genuine 'test and learn' approach, as both organisations challenged each other's preconceptions and ideas. The result was a project that came up with new, non-standard ways of reaching its audience, such as the way in which it raised older carers' issues and made them aware of the support available to them.

It achieved this by combining visuals focused around older carers with a less specific wider focus on general carer themes (but themes that would just happen to be of particular interest to older carers), rather than – as is more conventional – by focusing explicitly on older carers as a group *per se* in all communications.

By focusing on older carers as, so to speak, 'whole' people (in other words, people who might also have jobs or also have an advocacy role for the person they cared for, or also have their own mental and physical needs, as well as their caring role) – and by not just focusing on part of their lives, in the form of their role as carers for the person they cared for – the project arguably achieved more than it might have been expected to at its outset.

The overall learning to emerge from the project reflects this; there are three areas of learning in particular from which any similar future project might benefit from implementing its specific lessons.

The first area is the importance of addressing the physical health and mental wellbeing of older carers, a concern which came through strongly not just from older carers themselves but also the employers taking part in this evaluation. There is already work being done in this regard, not least by Forward Carers themselves, but it would help bring the issue into even sharper relief if it was an explicit focus of any future project along the lines of Carers' Voice, with a dedicated outcome of its own to go alongside others around awareness raising, information provision, isolation/loneliness and the like:

RECOMMENDATION #1: That any future similar project explore having specific physical health and/or mental wellbeing improvement outcomes to work towards alongside its other goals.

A second area of learning that is particularly important comprises the range of suggestions for specific campaign elements that older carers in Birmingham still feel are needed. While, as outlined in the crosscutting themes section of this report, there were numerous very different issues under this banner, building at least some of them into the awareness raising element of any future similar project would seem sensible, even if some of them would be more easily or quickly achievable as campaign goals than others:

RECOMMENDATION #2: That any future similar project include in its awareness raising efforts some of the issues raised by older carers in Birmingham through this evaluation, along with any new issues that might emerge from its own initial consultation processes.

The final area of learning concerns the success of the partnership model that Carers' Voice has piloted. This encompasses not just the central partnership between carers advocacy organisation and professional communications agency, but also the wider partnerships formed with employers, BVSC, Ageing Better in Birmingham and so on. This broader partnership also included older carers themselves through the initial consultation processes for the project, as well as its ongoing gathering of their feedback and the evaluation processes at its end. All of this work seems to have demonstrated that the more stakeholders are involved (within reason), the better the outcomes for older carers in Birmingham. It may therefore be worth any future similar project being consciously run along similar lines. Those relationships could perhaps even be formalised to encompass a regularly meeting network of project beneficiaries and stakeholders that could ensure that

any learning produced was kept in the widest possible circulation and could form an ongoing source of good practice for older carers projects in Birmingham and beyond:

RECOMMENDATION #3: That any future similar project consider including provision and resource for a dedicated, regularly meeting network of project beneficiaries and stakeholders, through which to ensure the ongoing momentum of the project, its legacy and the learning derived from it.

In conclusion, however, perhaps the most significant learning generated by the project does not concern things like outcomes or campaign themes or feedback structures. Rather it comprises the importance and near universality of caring as a part of ageing, as well as – it is to be hoped – as part of ageing in a better way in future. Many of us, if we are lucky enough to make it to the age of 50 or are fortunate enough to already have done so, will be either carers, cared for, or very possibly both at some point in our later lives. Any project aimed at older carers therefore should not be exclusionary, but should ideally include future carers in its target audience as well, not just current ones. As one final beneficiary put it in their feedback on the project:

"Caring is enjoyment, but when the time comes after, when we become old, so we have to think of ourself, also if we will have the same type of caring from someone in our needs."

Overall, Carers' Voice has piloted a novel model of raising awareness and understanding of the carer experience that has led to many positive outcomes for older carers in Birmingham. It may yet lead to more beyond its lifetime, through legacy work like the Carer Friendly Brum scheme.

Through the project's link with Ageing Better in Birmingham, in turn part of the wider National Lottery Community Fund's Ageing Better programme across England, there is also – despite all the challenges of the new post-COVID world – an opportunity to share the learning from the two-year journey of Carers' Voice more widely.

It is very much to be hoped that this opportunity will now be taken to the full.

Dr. Leon Quinn and Dr. Anna Hraboweckyj Social Effectiveness Research Centre (August 2020)