

'Time for Myself' Survey Report

**By Jane Stokes, Tim Beighton and Matt Gillam
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1.0 Introduction

1.1 Healthwatch Essex

Healthwatch Essex is an independent charity which gathers and represents views about health and social care services in Essex. Our aim is to influence decision makers so that services are fit for purpose, effective and accessible, ultimately improving service user experience.

One of the functions of a local Healthwatch under the Health and Social Care Act 2012 is the provision of an advice and information service to the public about accessing, understanding, and navigating health and social care services and their choices in relation to aspects of those services. This document was revised in July 2022 and the role of Healthwatch was further strengthened as a voice of the public with a role in ensuring lived experience was heard at the highest level.

The Healthwatch Essex Carers Voices team is dedicated to supporting unpaid or informal carers; capturing the lived experiences carers in Essex are encountering daily. The team engages with groups, individuals and experts by their own experience, and aims to provide a platform for carers to feel heard and to share their experiences with relevant commissioners, to try to ensure that carer experiences inform and influence the nature of commissioned Health and Social Care services across Essex.

1.2 Topic Background

We were asked by Essex County Council to gather, analyse and present feedback from all age unpaid carers, to continue to inform and shape the offer to informal or unpaid carers in Essex.

1.3 Acknowledgements

Healthwatch Essex would like to thank all the carers who took part in this survey.

1.4 Disclaimer

Please note that this report relates to findings and observations carried out on specific dates and times, representing the views of those who contributed anonymously during the engagement period. This report summarises themes from the responses collected and puts forward recommendations based on the experiences shared with Healthwatch Essex during this time.

2.0 Purpose

This report presents the findings from a survey exploring the experience and understanding under the theme ‘Time for Myself’; the key question being asked by Essex County Council and designed by Healthwatch Essex Carers Voices Team, to try to gain an understanding about carers’ awareness of the importance of taking breaks. Breaks for unpaid carers, often called respite or short breaks, are planned periods of time away from daily caregiving responsibilities, designed to support the carer’s health, wellbeing, and personal life. These can range from a few hours for shopping to longer holidays, allowing for rest and maintaining social connections.

Participants were divided into two groups: those who had taken, or tried to take, breaks, and those who had not.

The survey was launched on the 6th of April 2026 and at the point of closure, 5th May 2026, had received forty-five responses. All participants were invited to share some anonymous information regarding:

- Their relationship to the person(s) they provide care for.
- Whether they lived with the person(s) they cared for.
- Approximately how many hours a week they provide care or support?
- The Carers age.
- The Carers postcode, to determine basic geography.

The survey included a mixture of closed and open-ended questions, allowing participants to share both quantitative responses and personal insights into their caring roles, responsibilities, and support needs.

The findings presented in this section highlight several key areas, including the amount of time spent with caring responsibilities, their awareness of the importance of taking breaks for themselves, from their role, and insights regarding barriers and/or opportunities. The results also capture reflections from those who have not taken breaks.

2.1 Engagement methods



Survey

The survey was based upon key questions required by Essex County Council, aligning to their Carers Strategy and created in partnership with Healthwatch Essex 'Experts by Experience' Ambassadors and partner organisations. Distributed as an online survey across the county and promoted across all the ECC Neighbourhood groups, receiving 45 responses.

2.2 The Survey

The survey was launched and ran for a period of four weeks. It was hosted online and was shared with all the ECC Neighbourhoods for wider circulation.

Informal, or unpaid Carers play a vital role in supporting their loved ones, or friends and neighbours and face significant challenges maintaining a sense of self. The purpose of being able to take a break enables them to remain in a good state of health; both mentally and physically, to enable them to continue to support the person they care for. Our survey questions were designed to gather the insights of:

1. Carers who have taken a break for themselves
2. Carers who have not taken a break for themselves

The questions aim to explore their experiences, needs, and the support that has helped or could help them.

This survey has been split into three different sections;

- a) location, amount of time spent caring
- b) Carers who have taken a break
- c) Carers who have not taken a break

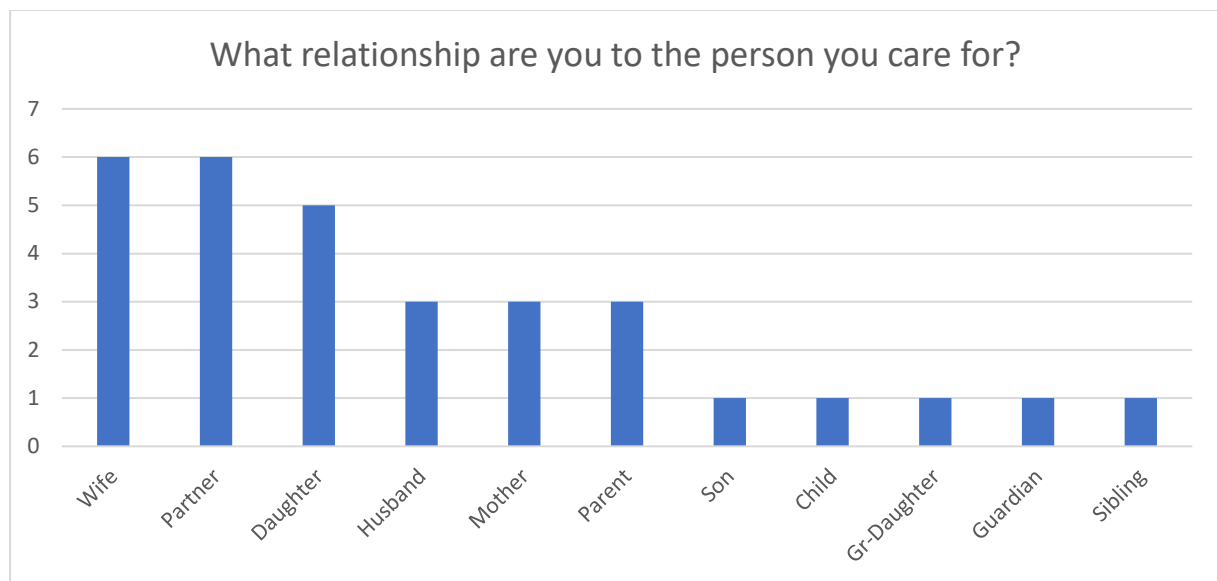
Results of the survey were as follows.

Section 1 - The Demography of our Essex Carer responses.

The first section featured questions tailored to all carers.

1. What relationship are you, to the person(s) you care for?

45 participants responded to this survey, but only 31 identified their relationship to the person they care for.



Both 'Wife', and 'Partner'* had the highest score - 19.35%

'Daughter'** scored the next highest 16.13%

'Husband', 'Mother' and 'Parent' all scored 9.6%

'Son', 'Child', 'Granddaughter', 'Guardian' and 'Sibling' scored equally with 3.2%

*- Included 'spouse'50%/'partner' 50%

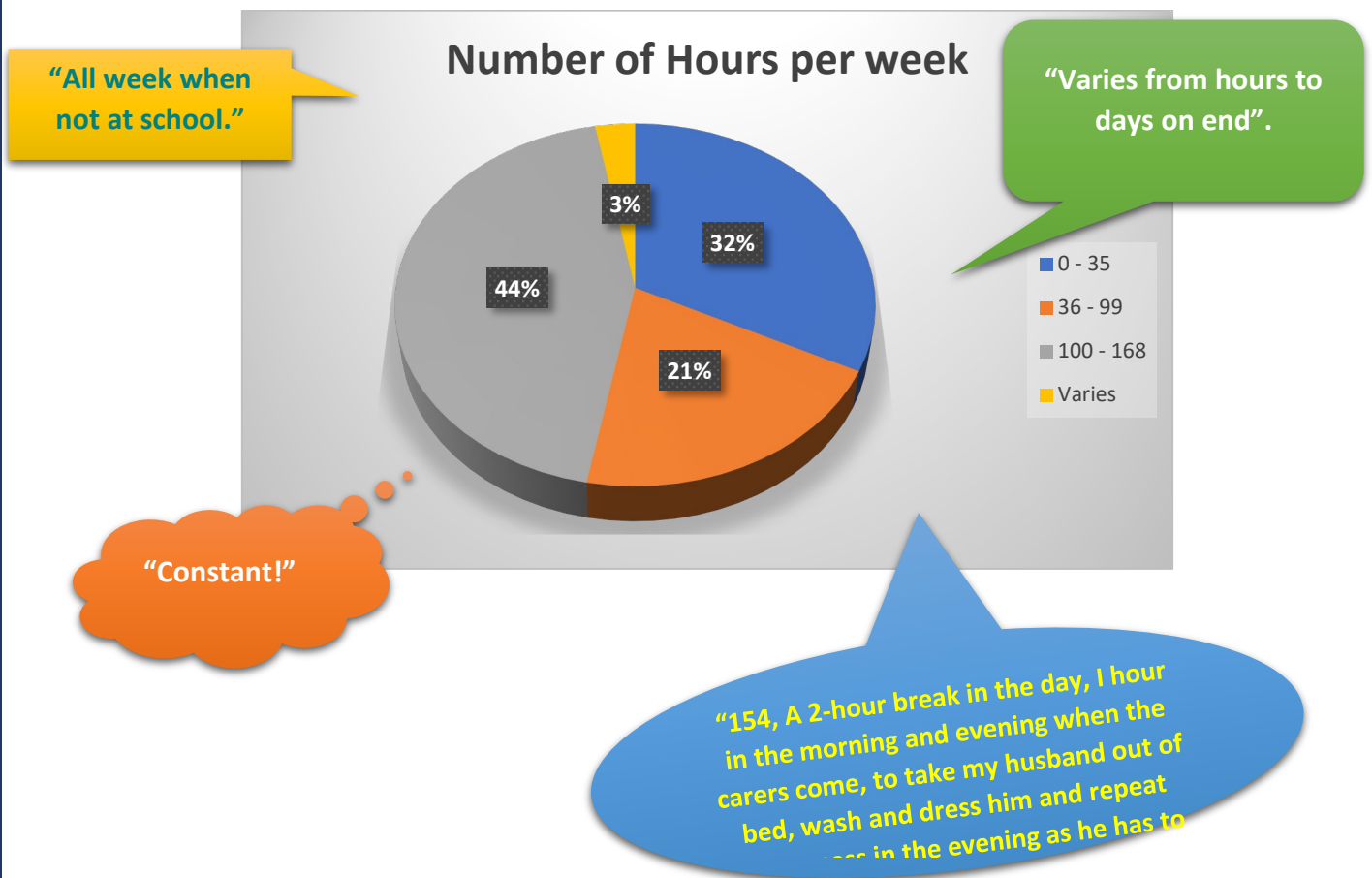
** -Included one 'Daughter-in-Law'

2. How many Hours do you provide care within a week?

34 of the 45 participants responded to this question.

- 11 participants (32.3%) identified caring for up to 35 hours per week.
- 7 participants' (20.0%) identified caring between 36 and 99 hours per week.
- 15 participants' (44.1%) identified caring between 100 and 168* hours per week.
- 1 participant (2.9%) responded 'Varies' to this question.

(*24 x 7)



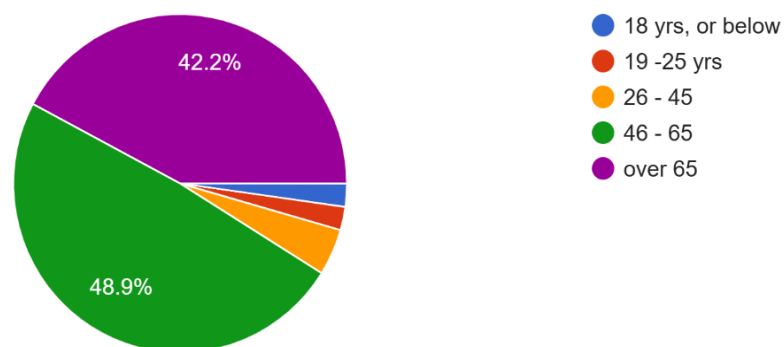
3. How old are you?

This question was completed by 45 participants. An overview of responses can be found below:

Nearly half of the participants (48.9%) are between 46 and 65 and 42.2% are over 65.

How old are you?

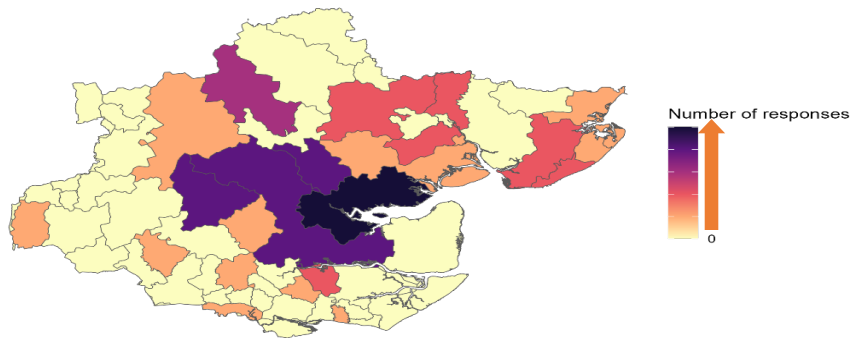
45 responses



4. What is your Post Code?

45 people responded to this question.

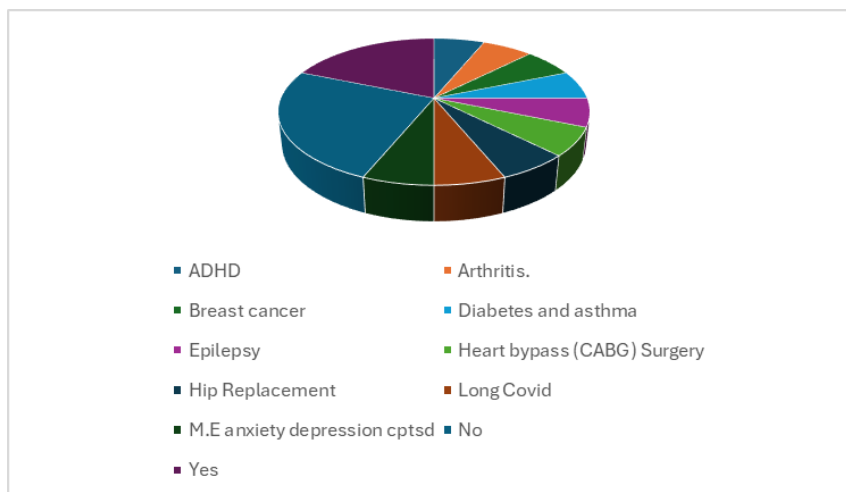
Essex has 73 postcode areas. The highest response rate being Central/Mid - Essex and the lowest response rate from the south of the county.



5. Do you have a disability, which might impact on your own ability to provide care or support?

16 people responded to this question and offered varied responses.

12 of those (75%) identified they had a disability which impacted upon their ability to provide care or support, of those 9 participants articulated specific health issues. Only 4 of the 16 who responded to this question (25%), did not identify a disability.

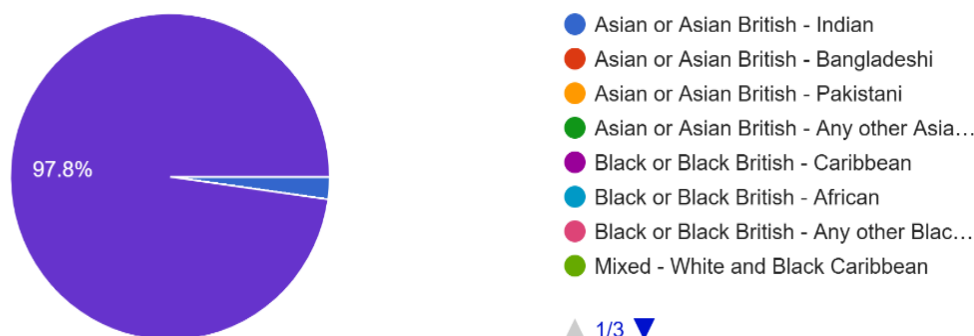


6. Ethnicity

45 people responded to this question

What is your Ethnicity? *The 16+1 ethnic data categories defined in the 2001 census is the national mandatory standard for the collection and analysis of ethnicity.

45 responses



1 participant (2.2%) identified as Asian, or Asian British - Indian

44 participants (97.8%) identified as White British.

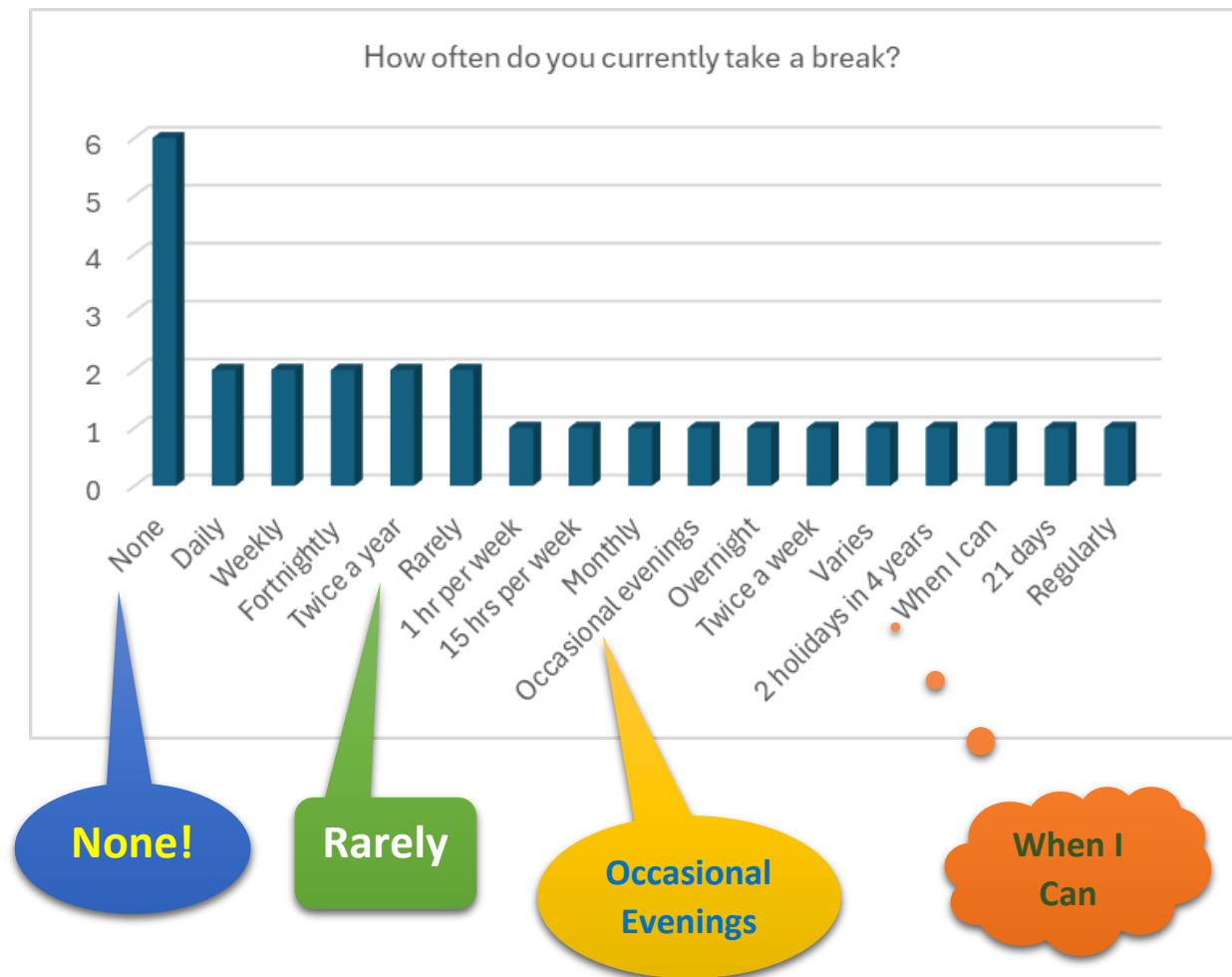
Section 2: the Survey

Part A: for Carers who have taken a break.

A1. How often do you currently take a break?

27 people responded to this question, and even though this section is specifically aimed at people who have taken a break, 6 people (22.2%) identified that they had not taken a break. Remaining responses were quite varied from non-measurable statements; '*Rarely (2)*', '*Occasional Evenings*', '*Varies*', '*When I can*', & '*Regularly*'.

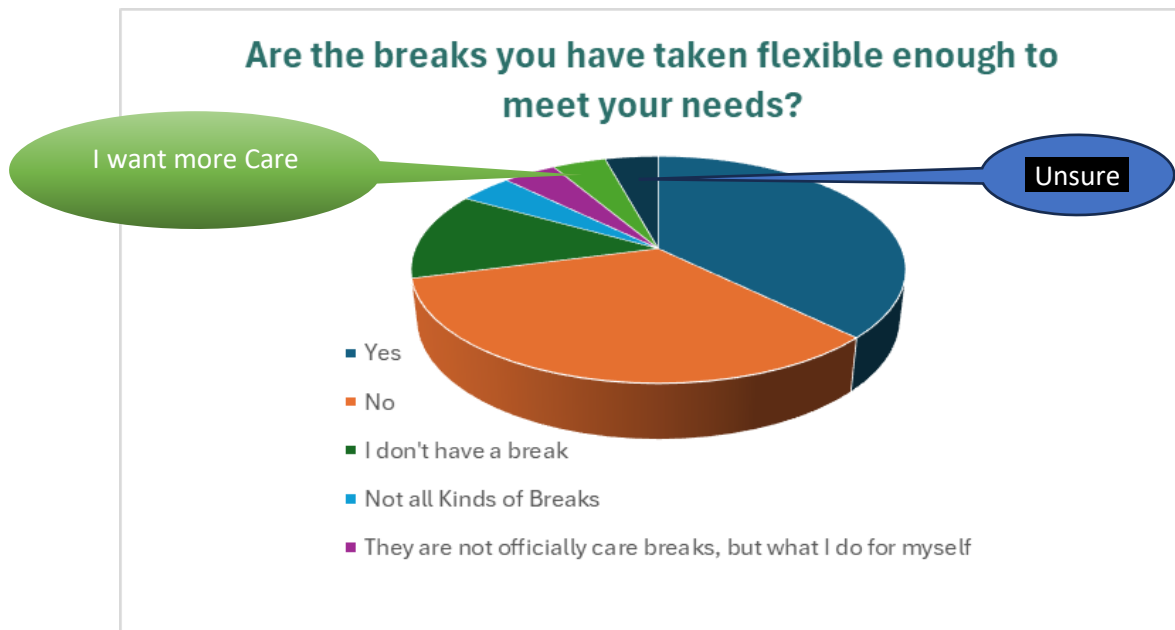
More measurable responses included '*1 hour per week*', '*15 hrs per week*', '*Daily (2)*', '*Weekly (2)*' and '*21 days per year respite*'.



A2. Are the breaks you have taken flexible enough to meet your needs?

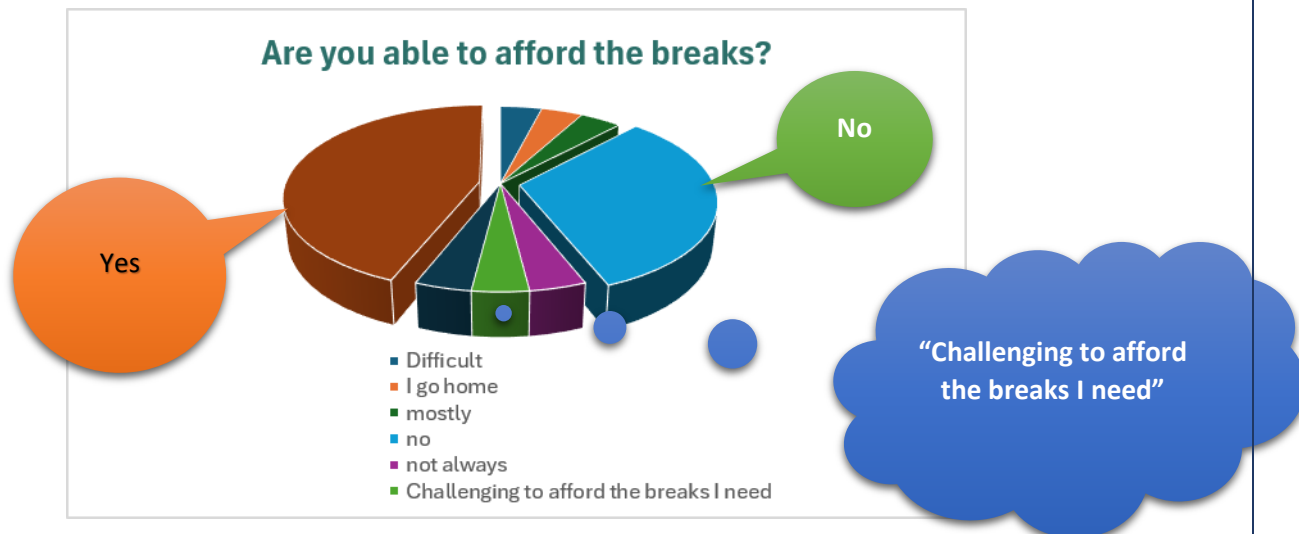
24 participants responded to this question. Again, despite this section being aimed at people who have taken a break, 3 people identified that they have not had a break, or that the question was not applicable.

9 of the 24 Carers (37.5%), identified that they felt the breaks were sufficiently flexible to meet their needs, although 8 of the 24 (33.3%) did not. 1 was unsure, 1 articulated that they wanted more care, and 1 identified that they did not take 'official' breaks, but did things for themselves.



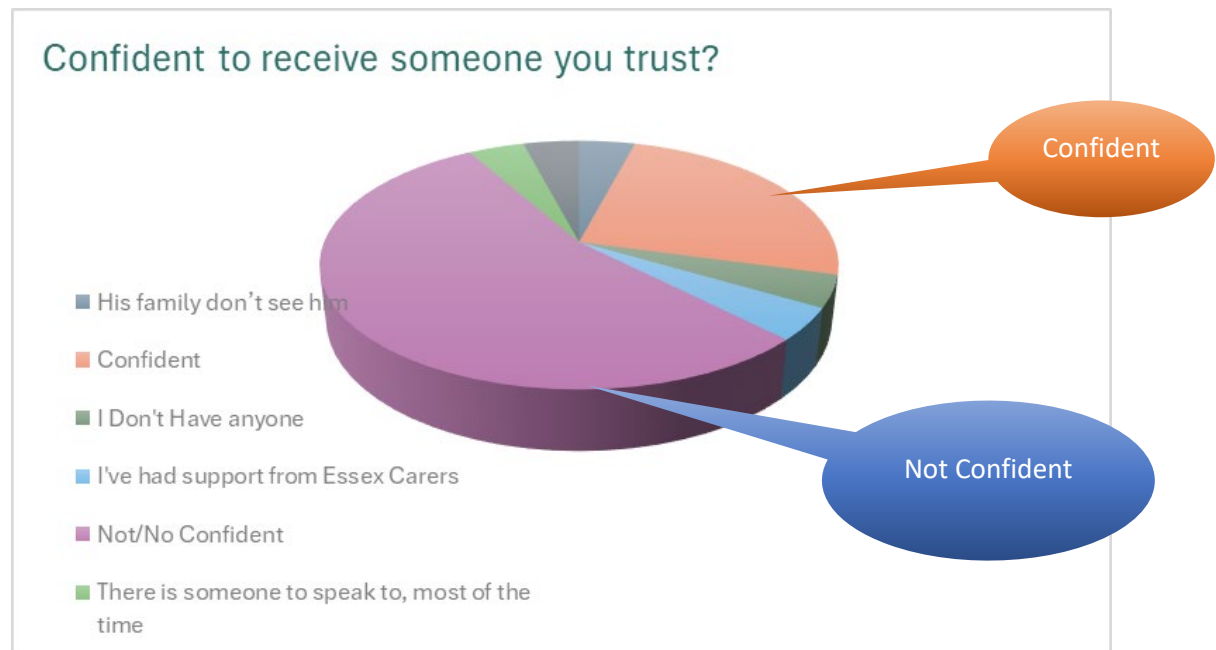
A3. Are you able to afford the breaks?

25 people responded to this question, with 11 of them (44%) identifying that they felt their breaks were affordable, and 1 answered 'Mostly'. 8 people (32%) identified 'no'.



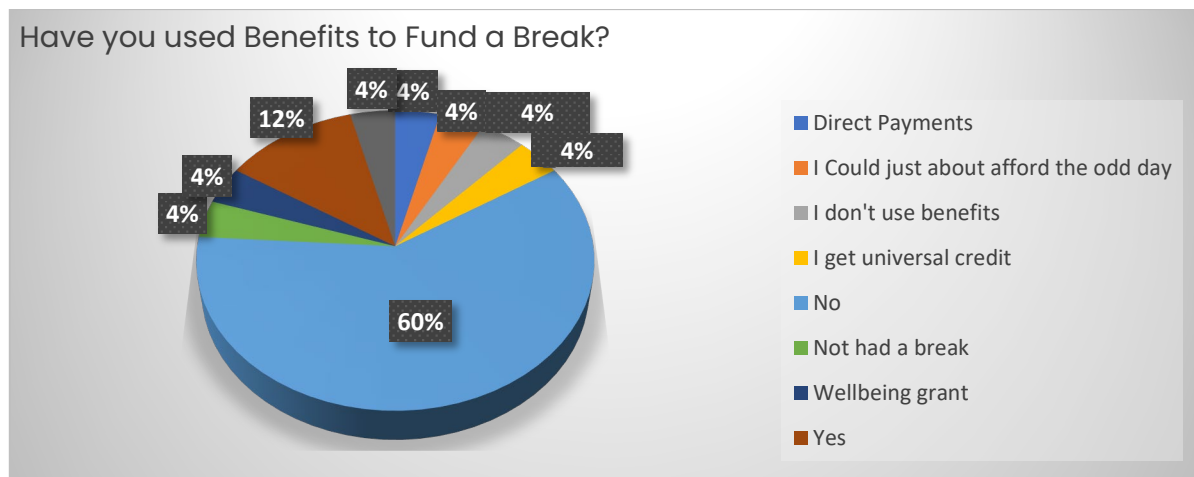
A4. How confident are you that you will receive the support you need from someone you trust?

24 People responded to this question. 13 people (54%) responded to say they were not confident, compared to only 7 (29%) expressing that they were confident. 1 person identified that they did not have anyone.



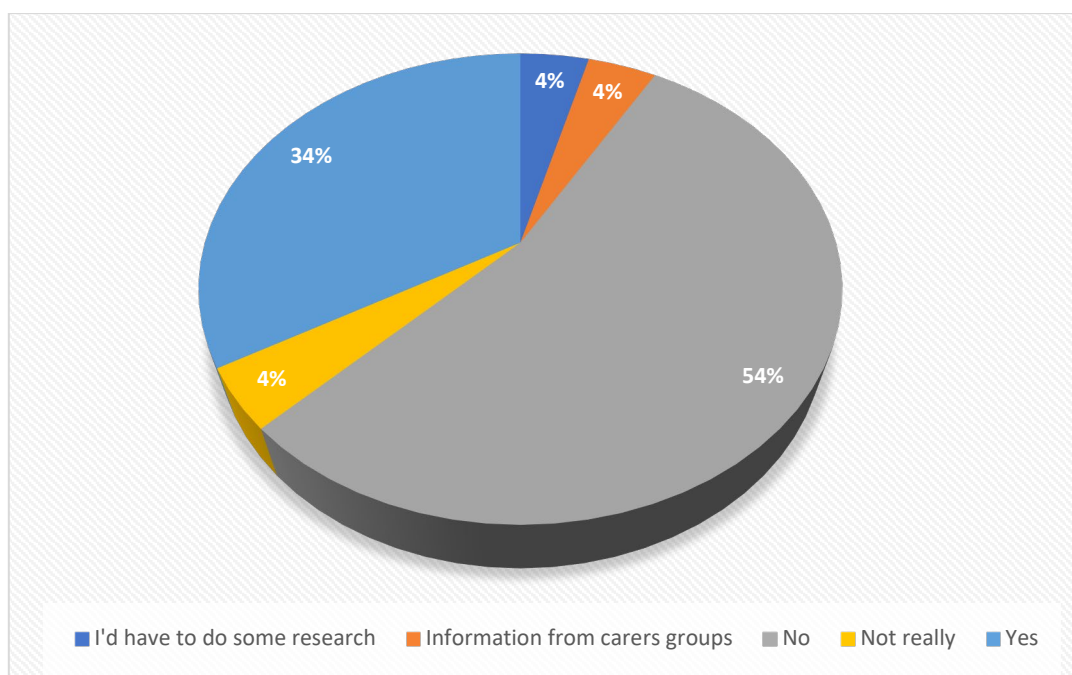
A5. Have you used benefits, or 'direct payments' to fund your breaks?

25 people responded to this question, 15 people (60%) said 'No', but there was also 1 person (4%) who did not use benefits, and 1 person who had identified that they had not had a break. 3 People (12%) identified that they had used benefits to fund breaks, whilst 3 further people identified Universal Credit, Wellbeing Grant, or LA (local authority) funded, which would bring the percentage up to 24%.



A6. Do you feel you have enough information to make decisions about a break?

24 people responded to this question, nearly two-thirds (62%) of whom responded "No", "Not really", or "I'd have to do some research", whereas just over one third (38%) identified "yes", or "I get my information from the Carers group".

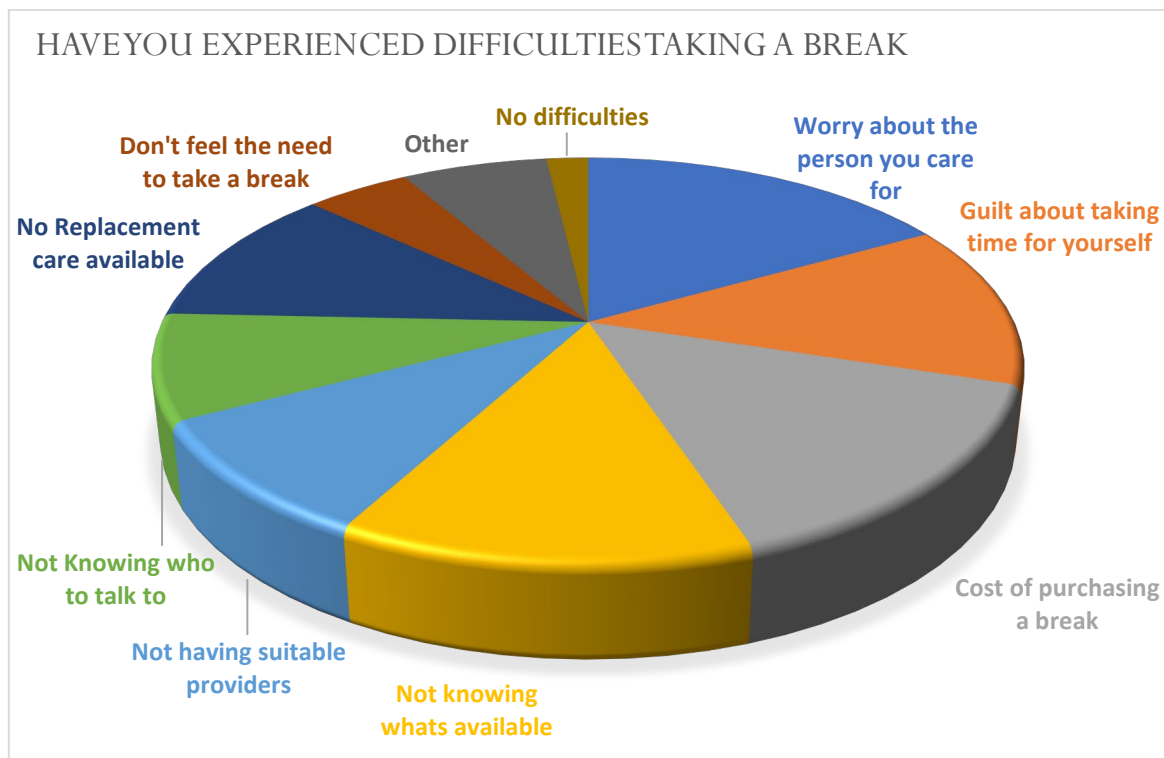


A7a. Have you experienced any difficulties taking a break

For this question, participants were invited to choose more than one option, if they felt it appropriate. There was a supplementary question for those who identified 'Other' as an option (A7b).

Of the 45 total participants, the split was:

- Worry about the person you care for 18.
- The Cost of Taking a Break 16.
- Guilt about taking time for yourself 14.
- Not knowing what is available 14.
- No replacement care available 12.
- Not having suitable Providers 10.
- Not knowing who to talk to 9.
- Other 7. (see 7b)
- You don't feel the need to take a break 5.
- No difficulties 2.



A7(b).If you responded in the previous section with 'Other', can you explain?

For the open prompt 'Other', participants were invited to add some free text, to explain why they ticked 'Other'. There were seven responses:

- I have to rely on my other son/daughter for when they have a holiday to help me out.

- I am in constant carer burnout so tired. And no one to go away with son will still call.
- No need my support ...daily.
- He is careless and I am worried about the house.
- It's not guilt, its concern that my partner doesn't feel abandoned, eats properly, doesn't want a stranger in the house.
- Social care currently refusing to provide overnight respite.
- N/A.
- I am deafblind and like local services

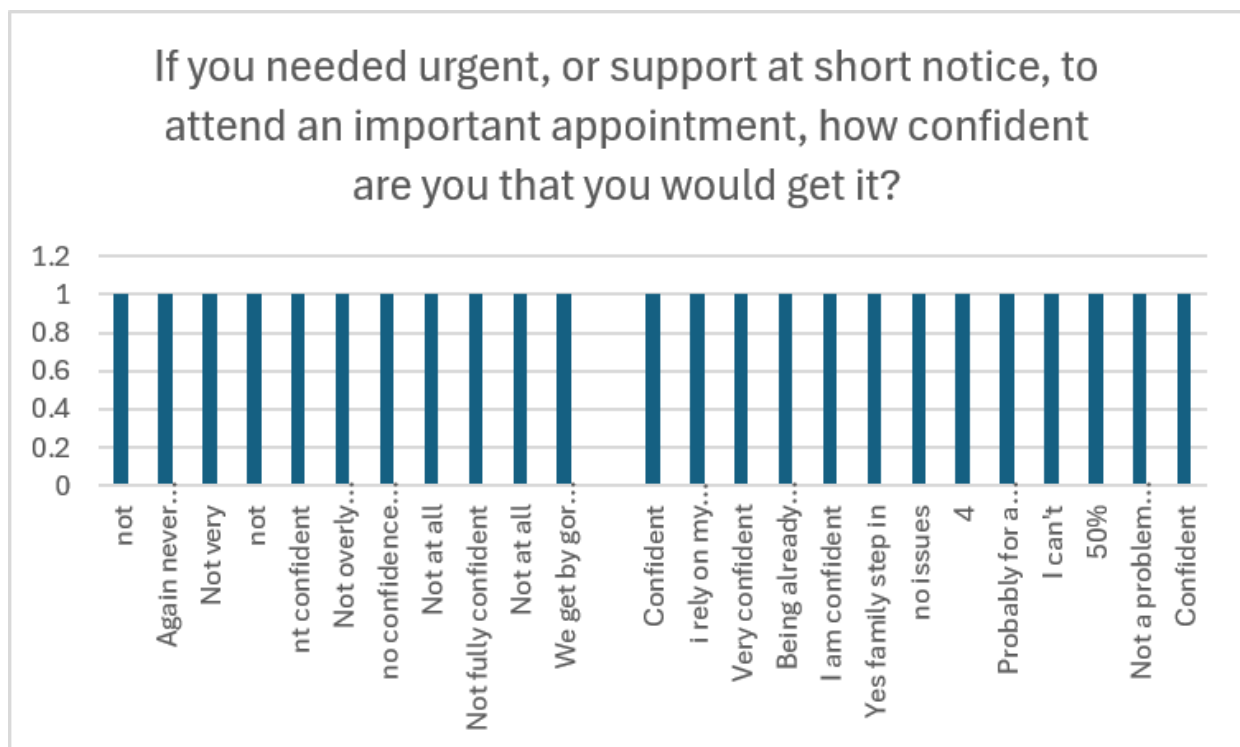
A8. What would help make a break more flexible, or suitable for you?

There were 21 responses to this question, which was a free text option:

- Comfort knowing somebody could look after her.
- More affordable places to go.
- Not sure never been asked before.
- Short break, support financially, support for daughter if I took a break.
- If a package of care is in place to suit his needs and my break needs.
- More time.
- Right now, it's about taking brief time for myself, I do not yet have to be stuck to her side but if and when that happens, I feel my top three would be that she is well cared for and, in the manner, requested and she is safe.
- My siblings helping.
- Somewhere for him to stay.
- LOL not sure you want to know that.
- having money; having appropriate person to care for caree whilst I'm away (not some random person who just wants to sit and drink tea).
- ?
- Overnight respite being authorised.
- More care.
- Arranging ad-hoc care.
- More options for suitable providers and better information about available breaks would help.
- Suitable care being available. Not needing to book a whole week at a nursing home.
- Weekends and more information.
- More availability of replacement care.
- Funding from Essex council with choice by me.
- Trust in the carers we have.

A9. If you needed urgent, or support at short notice, to enable you to attend an important appointment, how confident are you that you could get it?

24 people responded to this question, the responses were evenly split, with 11 people (45%) responding with negative responses, whilst 11 people responded positively, the last 2 responses were “50%”, and “4”.

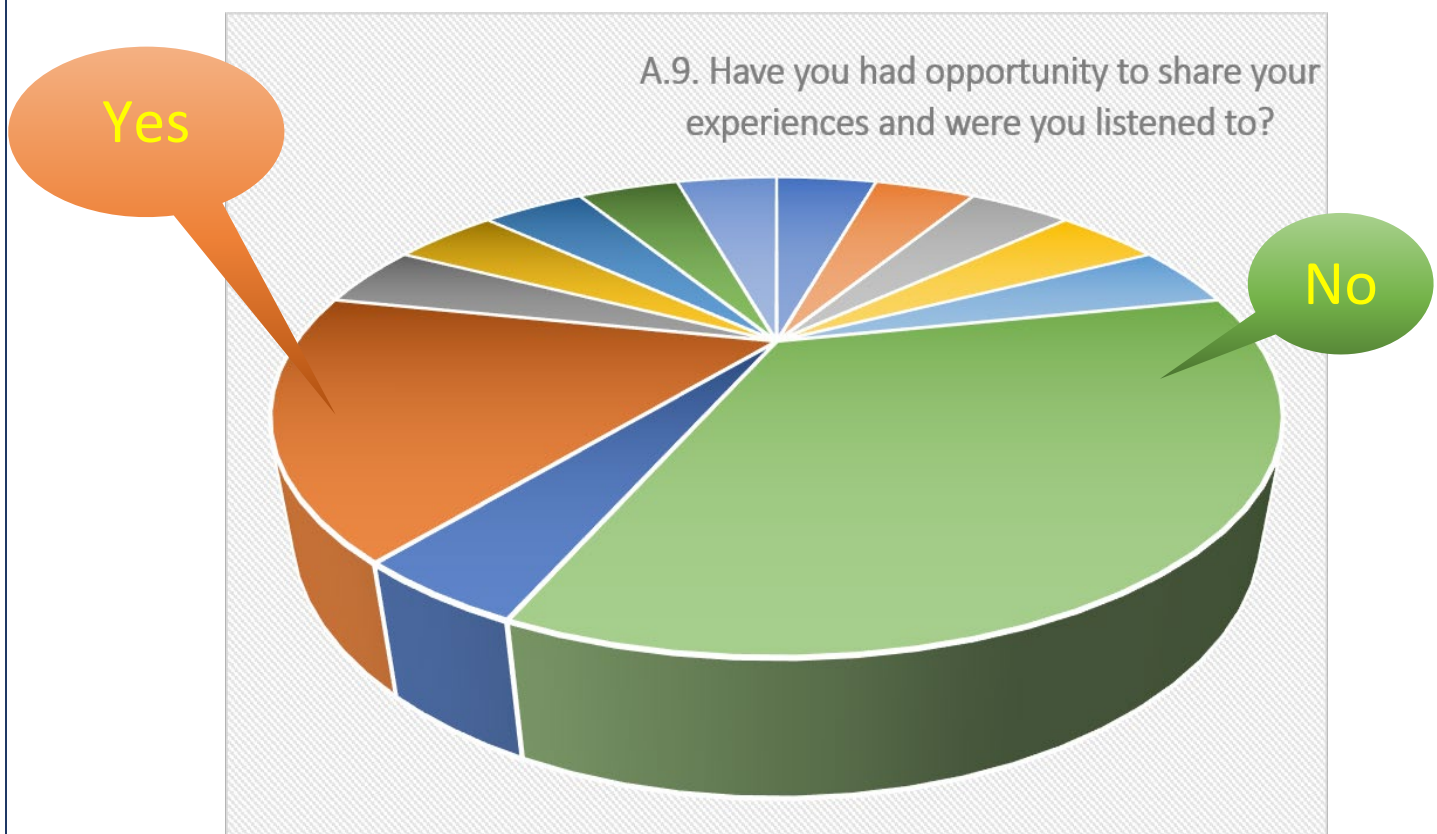


A10. Have you had the opportunity to share your experiences about your breaks, and do you feel your views, about receiving support, are listened to?

23 people responded to this question 9 people (39%) said ‘No’, whilst 4 people (17%) said ‘Yes’, however, there were additional free text responses, other than ‘Yes’ or ‘No’:

- I have never spoken to anyone about it.
- Only to the social worker that does the review every year.
- I have never tried.

- Yes, I have had the opportunity to share my views, and I did feel somewhat listened to.
- On the surface social care listen, but it feels like a tick box rather than making a difference.
- Each time you meet someone at different clubs to do with making your way through this journey, they listen and disappear, never to be heard of again.
- The social prescriber did help, very professional.
- I have not had the opportunity.
- Only the Carers Manager.
- Not shared.
- n/a.



*All other 'pie' slices are accounted for with the bullet points above.

A11. Are there any other types of breaks, or respite support, you would like to see developed locally?

20 people responded to this question, which invited free text responses:

- A sit in service so I can spend a whole day fishing once a month.
- I have attended TSSS Carer monthly meetings in the past but find them not fulfilling enough for me.
- Do not know.

- Study environments (Homework clubs) available later in the day (after school/college/university), especially for those whose homes are not ideal study environments.
- Yes, a respite centre where you could be in the same place as them but do something away from them, like they have for children as then you are on hand should you be needed but not on duty.
- Affordable respite.
- I have not thought about it.
- A place that takes both the partner and you with facilities that would be of interest to both parties. i.e. a sports lounge, or a whatever is of interest so the other could go for whatever is of interest to them. almost the impossible I know.
- Free holidays / weekends or a few days away WITH care provided for caree at home (which adheres to their normal schedule).
- Not sure.
- Overnight breaks for parent carers.
- Yes.
- Ad hoc care. i.e. I would like to go to an event and just need a social cater to keep my husband company.
- I would like to see more local options for short-term respite stays.
- Irregular sitting service.
- We are trying to source a sitting service for my stepdad with a male sitter with similar interests. We have tried sitting service with female sitter, but it doesn't work. We need a male who is interested in sports/politics/old music, the service we currently have isn't working as the female sitter doesn't engage or have any similar interests. We are finding it very difficult to source a suitable replacement service. Social care has said they can't provide options as we manage the service so have to find a solution.
- Sitting services.
- Don't know.
- Accessibility for disabled people, low cost.
- I would like to know what is available.

Part B - For carers who have not taken a Break.

The second section of the survey captured the experiences of those who had not already taken a break.

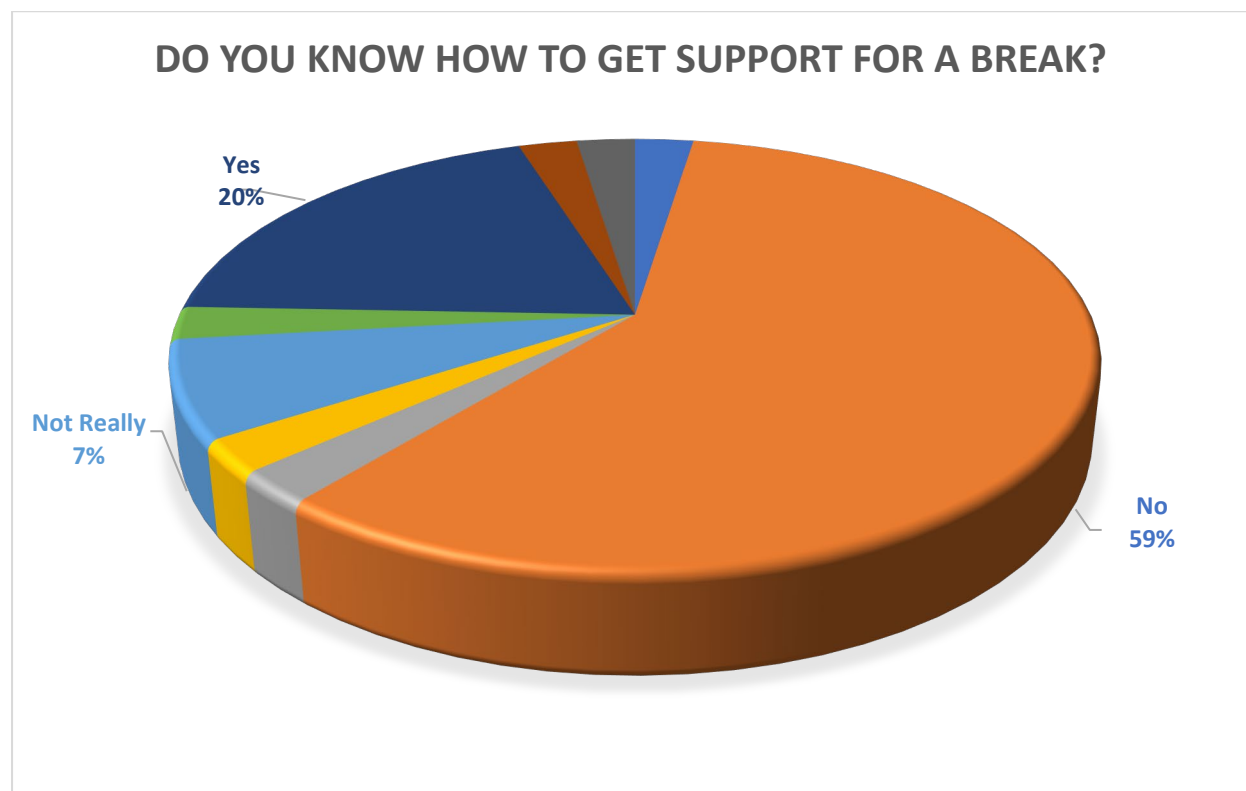
B1. Do you know how to get support for a break?

41 people responded to this question.

24 people (59%) identified that they did not know how to get a support break, whilst a further 3 people (7%), identified 'Not Really'.

8 people (20%) identified that they did know how to get a support break, with additional comments from a further 6 individuals:

- Carers Alliance.
- No, because my partner has severe mental health issues and therefore this doesn't seem to be considered.
- Not found anywhere suitable.
- She is a self-funder, so presumably no support.
- In theory.
- With great difficulty.



*All other 'pie' slices are accounted for with the bullet points above.

B2. Is it easy to find information about taking a break?

41 people responded to this question, of whom, 28 people (68%) indicated that they did not know where to get information. Only 3 people (7%) indicated that they did know where to get information about taking a break. There were further 10 people who answered in free text:

- No, I've tried and it seems to have some hoop jumping.
- I have never seen the need to research information, but I could if needed to.
- I would go straight to my supervising social worker.

- Do not know who to ask or find information.
- Haven't had time or energy to research.
- Not tried to be honest.
- It's somewhat difficult to find information about taking a break.
- Never tried so do not know.
- Only via our doctor.
- I've never looked.



*All other 'pie' slices are accounted for with the bullet points above.

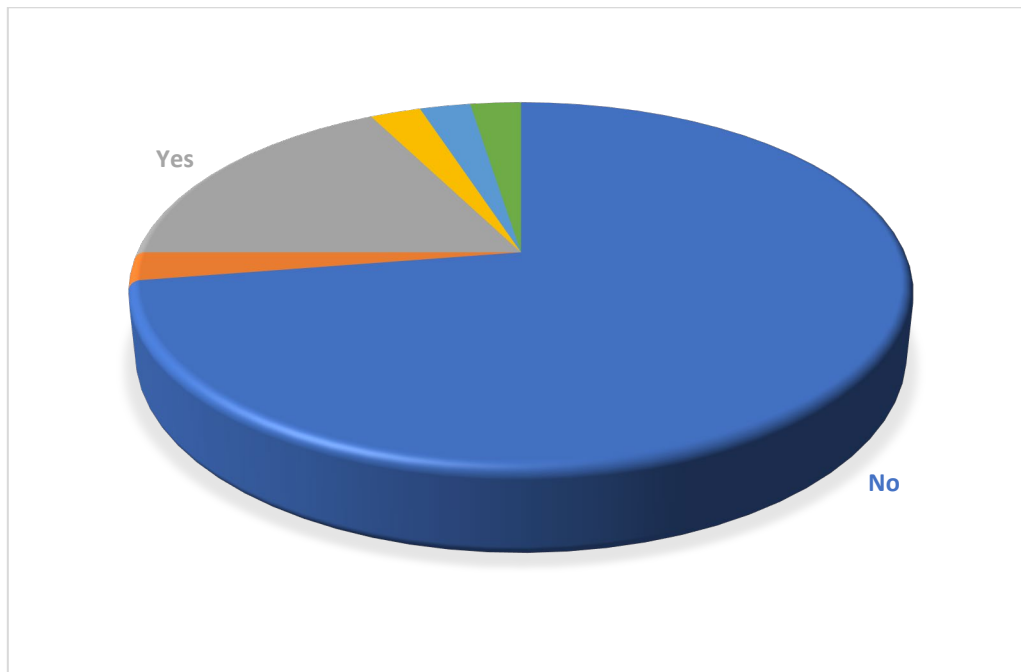
B3. Do you feel confident about choosing someone to support with breaks?

40 people responded to this question, with 29 people (73%) identifying that they did not feel confident about choosing someone to support with breaks, only 7 people (18%) said they did feel confident.

There were some additional free text responses:

- No, but I trust the fostering agency I am with, and they are a small agency so tend to have regular carers to support from what I have been told.

- I feel moderately confident about choosing someone to support with breaks.
- Not sure what information this question asks for.
- Depends on who it is. My husband has only ever had me as a carer, he would need to feel confident with someone else.

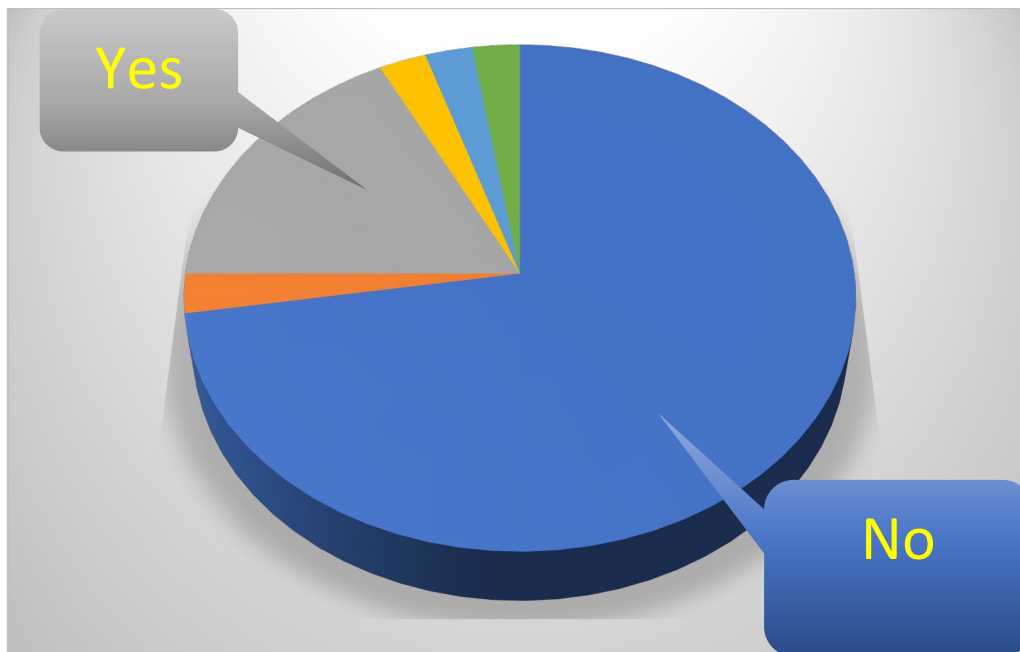


*All other 'pie' slices are accounted for with the bullet points above.

B4. Are you aware you might qualify for payments to be used to help arrange flexible breaks?

41 people responded to this question, of whom, 25 people (61%) identified that they were unaware that they might be eligible, whilst only 7 people (28%) were aware. There were additional comments shared:

- I didn't know about this however I am with an agency and not the council.
- I would be unlikely to be eligible.
- I wasn't until now. I receive a PB for support for my needs such as personal care and cleaning but didn't know I might be eligible for breaks.
- I don't want to be away from my wife for a long time.
- Yes, but it is not made easy, my cared for (3 people) don't receive adult social care Essex know I am a carer but never contact me the expectation is for me to make the first move. I am worn out I work and care I come last when thinking about my wellbeing.
- No, not for mental health.
- Yes - but its minimal.



*All other 'pie' slices are accounted for with the bullet points above.

B5. What would help make a break more flexible or suitable for you?

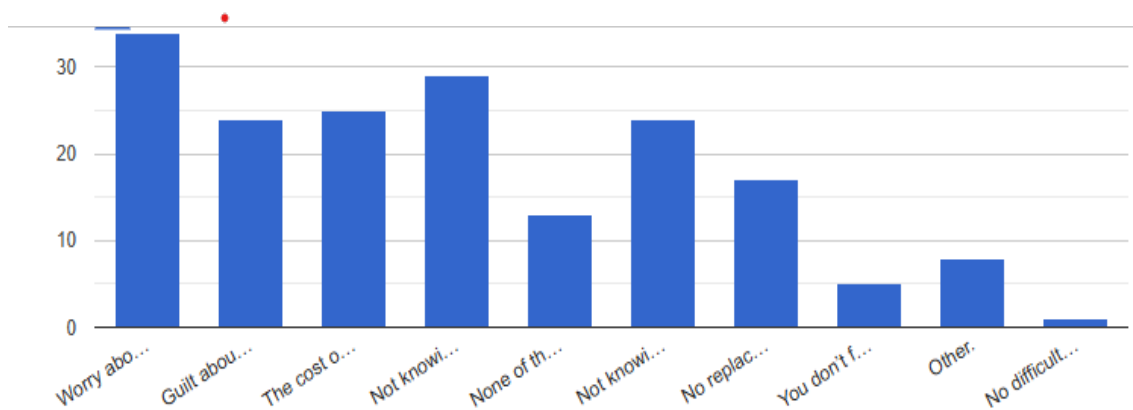
33 people responded to this question, which invited free text responses:

- Unsure.
- Being able to have respite care for two days and nights.
- The simple answer to that is that my wife would be ok in my absence.
- Maybe only one or two nights away.
- If my son's care package was increased while I took a break.
- There are no breaks for people in my situation.
- Knowing how realistic it is to organise flexible support. Support.
- More time.
- Care that is tailored individually.
- No idea.
- Knowing mum is ok.
- Already said - somewhere for him to stay.
- Knowing that my partner is getting proper home cooked food in his own home by someone he knows well. That he's safe and happy.
- I would be able to choose the dates.
- More money; suitable replacement carer.
- Not sure.
- Being able to go with my husband.
- Not sure.

- Information.
- I have never considered that I could take a break and don't know what type of support could be provided to even start thinking about what I would like to do, what would benefit me and what my needs would be around taking a break.
- To have a choice of people.
- Overnight being available.
- Overnight help.
- Being offered it in the first place!
- Ad hoc.
- Someone to care for my husband while I took a break.
- Having more options for suitable providers and better communication about available breaks would help make a break more flexible for me.
- Respite care when needed.
- Support for younger people who need a nursing home.
- Availability at weekends or a supported break to take the cared for with us but have carers and activities on hand to help.
- Having someone other than me sort it out.
- Not using my own savings to fund breaks from caring.
- Trust in the carers.

B6(a). Do you think there are difficulties in taking a break, such as;

For this question, participants were invited to choose more than one option, if they felt it appropriate. There was a supplementary question for those who identified 'Other' as an option (B6b).



Of the 46 total participants, the split was:

- Worry about the person you care for 34.
- Not knowing what is available 29.
- The Cost of Taking a Break 25.
- Guilt about taking time for yourself 24
- Not knowing who to talk to 24.
- No replacement care available 17.
- Not having suitable Providers 13.
- Other 8. (see 6b)
- You don't feel the need to take a break 5.
- No difficulties 1.

B6(b). Continued...If you responded in the previous section with 'Other', can you explain?

8 people, who indicated 'Other' in the previous question responded further:

- Needed two days and nights respite to go to a wedding in north of England.
- Own health.
- The 24/7 pressure and stress of living with someone who has complex mental health is not fully recognised. While I may not physically wash my partner, he requires constant supervision with all tasks and cannot self-manage life on any level. I also work from home 40Hrs a week so am trying to manage him at the same time.
- Again - somewhere for him to stay.
- No idea how to go about it.
- All different types of dementia...have watched other people class it as all the same without knowing a lot about it but think that they do...and treat the person to be cared for like they don't know what they want. My partner knows

what he DOESN'T want and still knows what..., who... he does want...It's not guilt, its concern.

- N/A.
- The effort of planning for a break and getting everything ready would drain me so much I feel I would derive little benefit from it.

B7. Are there any types of break/respite you would like to see developed locally?

29 people responded to this question, which invited free text responses:

- Unsure.
- Respite care in a care home for shorter than a whole week.
- Again not sure what could be provided.
- My husband is unwilling to go to any day care facilities; he finds socialising difficult.
- Yes, specific breaks for carers of mental health patients.
- Perhaps some means of organising local group support so the carers might have an hour or two to themselves.
- Nothing in my town.
- Defiantly respite.
- Again - somewhere for him to stay.
- No idea as I don't know what is possible.
- A place where 'WE' both could go with facilities to suit both people.
- Yoga or spa break.
- Holidays.
- Country house type, with careers to enable couples to stay together.
- No.
- Day care for people with similar interests.
- ?
- I don't know what is currently available so don't know what gaps there are.
- Places for day like a day centre to get more support.
- Late night and early morning care.
- Ad hoc / occasional care.
- I don't know.
- I would like to see more local options for short-term respite stays, particularly those that cater to specific needs.
- Yes, respite care.
- Irregular sitting service. More diversity in nursing homes for younger people.
- Breaks away where the cared for can also come away for a break but where there are cares/activities and support to help with the care, so carer gets a break. It's just as important to spend quality time together as it is to have a

break apart. It would be nice to do something enjoyable together with support from care when needed. This way the carer and cared for could enjoy activities and the carer could also get a break.

- PDA and Neurodiverse burnout centres.
- No idea.
- Services for long term complex needs for disabled people.

3.0 Key Findings and Recommendations

Key Findings

- Most informal carers who engaged are female or identify as female.
- Nearly two thirds of the carers identified that they provide between 36 and 168 hrs per week, with nearly half of the Carers identifying they provide more than 100 hours per week.
- More than one third of carers are over 65 years.
- Three quarters of Carers identified as having a disability, which impacts on their ability to provide care.
- Nationally, 'White British' account for 73.5% of the population, this survey had a 98% 'White-British' response rate, which would indicate that there is a need for wider engagement.
- Within the first section, aimed at people who had taken a break, more than 20% identified that they had not actually taken a break.
- One third of Carers do not feel that breaks are an affordable option.
- More than half of the Carer identified that they were not confident that they would receive the type of care they need, compared to less than one third feeling confident.
- 64% of Carers did not use benefits to cover the cost of taking a break.
- Nearly two thirds of Carers said they did not feel they had access to sufficient information to make decisions about taking a break.
- There was an even split between carers, when asked about confidence of obtaining care/support at short notice, and similarly regarding whether they felt listened to.
- For Carers who had not taken a break, two thirds identified that they didn't know where to obtain information about how to obtain a break; only 7% said they did.
- Three quarters of Carers said they did not feel confident about choosing someone to support breaks.
- Most Carers (34 of 45) identify that they worry about their ability to care for the person they look after.

Recommendations:

It is evident from the feedback from carers during this period of engagement that how and where information is communicated is key to carers finding out what is available to them in the way of breaks and respite. Coproduction would be key to this; namely a targeted piece of work starting with a wide demographic of carers being enabled to share and make decisions upon what would be the most effective for them. The end product of this would be a form of information pack, created by carers, for carers, with the supporting information and referral routes provided by a range of relevant agencies and professionals.

There are a number of potential opportunities for developing communication pathways to share this information pack, and a dedicated scoping exercise across the county would be advisable to assist with this. Specific partnership links could then be formalised to aid with the dissemination of this information, along with other data sources which are accessible to a wide audience. One possibility for such wholesale coverage could be working with local authorities to include the carers information pack with the annual postal Council Tax notifications.

Additionally, an analysis of the demographics of carers who connected with us on this topic highlights the need for a targeted piece of work focussed upon developing engagement with other cultural and ethnic groups. Interaction is consistent with White British carers, but there is clearly room to expand and deepen engagement with carers of other ethnicities. Healthwatch Essex have a significant, established network of relationships within faith and cultural groups, and have utilised this to secure the engagement with non-White British carers to date. However, we recommend that a specific workstream be created to delve into this in much greater depth, with the ability to spend time building more relationships and breaking down the additional barriers which exist for people within these groups. This would undoubtedly provide a wealth of information pertaining to carers across a much wider demographic in the county.

On a wider perspective, two issues which appear to be key in preventing carers from accessing breaks are affordability and lack of confidence in the support available for the cared for, whilst they access said break. The volume of participants who felt that breaks were not affordable would suggest pertinence in a review of the monetary benefits available to carers, and how well accessed they are in relation to the number of carers identified in Essex. Similarly, a deeper dive into the quality of support provided to those requiring care whilst carers took a break should also be explored in a more formalised manner. This should involve further engagement with carers who have expressed this sentiment to gather information on how and why these views have been formed, centring particularly on lived experiences. Both of these exercises would provide evidence to enable mitigation of these two significant barriers to achieving appropriate breaks for our carers.

4.0 Conclusion

The survey findings provide important insight into the experiences of carers and how they feel about taking breaks.

It is no surprise that most carers, who responded to the survey, are female and over the age of 65, three quarters of the responding Carers identify that they have a disability, which impacts upon their ability to provide care, and two thirds of Carers identify that they provide between 36 and 168 care hours each week.

The survey responses were almost exclusively from Carers who identified themselves as 'White-British', which indicates that there needs to be greater focus trying to engage with ethnic groups, to better reflect societal demography.

Nearly two thirds of participating Carers identified that they did not feel that they had access to sufficient information to make decisions about taking a break for themselves, so further consideration needs to be taken to determine the type of information currently available, and how it is accessed; including the potential use of benefits or eligibility thereof.

Three quarters of the participating carers stated that they worried about providing care for the person they look after, and that they did not feel confident about how to choose someone to assist with care or support.

Overall, the findings emphasise the importance of improved availability of information to improve understanding and awareness, clearer signposting to services, and tailored support for carers, to assist with familiarity of accessing support, which may help to reduce the expressed anxiety surrounding carer support and whether the carer has confidence in the support offered.

Strengthening support networks, ensuring continuity of services, and providing opportunities for carers to share their experiences may help reduce isolation and enable them to balance their caring responsibilities with their own personal needs to enable taking a break.