Results- 1. Subjective Impact of Caring for an Adult with a Mental Health Problems

Young MH Carers were primarily positive about their role, but socially isolated, agreeing:

✓ ‘I feel good being able to help out’ (81%)
✓ ‘I have learned skills that other children do not have’ (75%)
✓ ‘I am more understanding of others’ (59%)
✓ ‘I can’t share problems with my parent(s) or carer(s)’
✓ ‘I am sometimes lonely’

Girls are more likely to identify the benefits and costs of caregiving than boys; only girls agreed:

✓ ‘I am more understanding of others’
✓ ‘I can’t share problems with my parent(s) or carer(s)’
✓ ‘I am sometimes lonely’ when analysed separately

Parents primarily view their child’s caring role negatively, agreeing that:

✓ ‘It makes them stressed and anxious’ (84%)
✓ ‘They are sometimes lonely’ (68%)

Young MH Carers underestimated stress; parents overestimated their child’s stress. Parents judged their child to be stressed in the absence of a problematic score, while young people subjective views underestimated their measured distress according to the SDQ.

Young people identified intrinsic benefits, parents identified interpersonal benefits. Parents cited family and empathy for others, while young people identified skills gained.

Results- 2. Impact on Strengths and Difficulties Questionnaire Scores

Young MH carers demonstrate Emotional Distress and Overall Stress. 70% & 68% respectively of respondents SDQ scores indicated a high risk of problems in these areas.

Young MH girl caregivers self-identify stress, boys do not. Girls SDQ scores were consistent with self ratings; boys scores showed no coherent relationship, suggesting an inability or unwillingness to identify as stressed.

Young MH Carers demonstrate psychological distress, while generic carers do not.

Parents primarily view their child’s caring role negatively, agreeing that:

✓ ‘It makes them stressed and anxious’ (84%)
✓ ‘They are sometimes lonely’ (68%)

Young MH Carers underestimated stress; parents overestimated their child’s stress. Parents judged their child to be stressed in the absence of a problematic score, while young people subjective views underestimated their measured distress according to the SDQ.

Young people identified intrinsic benefits, parents identified interpersonal benefits. Parents cited family and empathy for others, while young people identified skills gained.

Results- 3. Impact of GAMH Young Carers Project

Young people reported support by peers and staff, respite and improved social inclusion at GAMH Young Carers Project. Project outputs had excellent levels of approval by the young people engaged with the project.

Young people’s confidence & wellbeing improved since attending the GAMH Young Carers Project. 91% of parents and 84% of young people reported that the young persons confidence was better or much better & 80% and 68 respectively said that their happiness was better or much better since attending the project.

Beyond the young person, family life & relationships improved. We were able to demonstrate knock on improvements beyond the individual directly engaged with the project for parents and families.

Conclusions

Our study suggests that young people caring for an adult with a mental health problem experience psychological difficulties and social isolation not evident in their peers providing general care. In spite of this, there was evidence that they maintained a more positive self-image about their role, both in comparison to peers and the relative passivism of parents. The results of our service evaluation suggest these improvements in resilience may plausibly be due to their engagement with the GAMH Young Carers Project.

Both the costs and benefits of caring identified may be expressions of a common source. Subjective benefits identified by the young carers require empathy and the substraction of self-interest and SDQ scores tended towards internalising problems, arising harm to the self rather than outwardly. Together, they suggest a disproportionate focus on the needs of others in the absence of reciprocal emotional support.

An overview of our results suggests that, while this group is specifically marginalised and disadvantaged by their role, support targeted at their specific needs, which differ significantly from the wider population of young carers can mitigate for these challenges.

Our service evaluation provides evidence that simple, cost effective, strengths based interventions can significantly improve the confidence, social inclusion and wellbeing of young people, with wider improvements for family life and relationships.

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