

Insight into the Prevalence and Experiences of Young Carers in Ireland using data from the HBSC 2018 Study.

Pictured is Seunfunmi and Moyo Solanke. Seunfunmi is a former Leinster Young Carer of the Year.



No one should have to care alone

#### **KEY FINDINGS**

#### 1.

The HSBC 2018 survey shows that 13.3% of young people between the 10-17 years report a caring role. Extrapolation to the national population suggests that some 66,956 young people in the 10-17 year age group provide regular unpaid care.

## 2.

Across a range of indicators of emotional health and wellbeing, young carers reported poorer outcomes than their non-carer peers.

# 3.

Young carers scored lower for life satisfaction than their non-carer peers.

## 4.

More than one third of young carers reported being bullied at school.

## 5.

More than half of young carers said they have had an injury that required medical attention in the last 12 months.

## 6.

One in four young carers said they went to school or bed hungry because there was not enough food at home.

#### INTRODUCTION

Young carer is the term given to young people, typically under the age of 18 years, who provide substantial unpaid care to a family member due to illness, disability, mental health, substance misuse or problems related to old age.

Socio-demographic changes including an increase in the number of single parent households, an increase in substance misuse, an ageing population and pressures on adult social support services mean more young people are having to sacrifice their studies and hobbies to care for a relative. Young carers may undertake a range of tasks to support family members including practical help with cooking, housework and shopping, providing personal care, helping them get out of the house, keeping an eye on them or giving them emotional support.

Caring for someone can be isolating, worrying and stressful. For young carers, this can have a profound impact on the things that are important to growing up. It can affect a young person's health, social life and self-confidence. It can also negatively impact their experiences and outcomes in education and have a lasting effect on their life opportunities. It is therefore not surprising that young carers are themselves vulnerable to their mental health being compromised. Drawing on findings from the Health

Behaviour in School-aged Children (HBSC) Ireland Study 2018<sup>1</sup>, this briefing sets out key findings relating to young carers' health and wellbeing, social environments and health behaviours.

#### ABOUT THE HBSC STUDY

The Health Behaviour in School-aged Children (HBSC) study is a cross-national research study conducted in collaboration with the World Health Organisation (WHO) Regional Office for Europe and runs on a four-year cycle. The overall aims of the HBSC study are to gain new insight into and increase our understanding of young people's health and wellbeing, health behaviours and their social context. The study is a school-based survey with information collected from a nationally representative sample of students through selfcompletion questionnaires in classrooms. In 2018, Ireland participated for the sixth time in the HBSC study, with funding provided by the Department of Health. The 2018 study included 15,557 school children from 3rd class in primary school to 5th year in post-primary school. Collectively, 255 primary and post-primary schools across Ireland participated in this study. The methods employed comply with the International HBSC protocol and are detailed in the national report from the 2018 survey2.



 $<sup>^1</sup>$  See http://www.nuigalway.ie/media/healthpromotionresearchcentre/hbscdocs/shortreports/2020\_Gavin\_Short-Report\_Young-Carers.pdf

<sup>&</sup>lt;sup>2</sup> See httn://www.nuigalway.je/hhsc/hhscireland/2018study/

#### PREVALENCE OF YOUNG CARERS IN IRELAND

There is limited data relating to the prevalence of caring among young people in Ireland. One of the first sources of information on prevalence was from the Census in 2006 which estimated that 2% of children aged between 15 and 17 years had a caring role. The 2016 Census identified 3,800 young carers. However, because the Census requires parents to disclose their child's caring role, which they may be reluctant to do due to a fear of stigmatisation or concerns about privacy, these figures are likely to significantly underestimate the actual prevalence of young carers. The HBSC study, which is completed by the young person themselves, included a question on caring in 2014 and 2018<sup>3</sup>.

#### The 2018 findings show

13.3 of 10-17 year

of 10-17 year olds (n=15,557) reported a caring role. This figure represents an increase from 11.5% in 2014.

Extrapolation from this sample to the national population would suggest that some



young people in the 10-17 year age group alone provide regular unpaid care.

Whilst the survey does not capture the level of care provided, which may vary depending on the family situation and the needs of the person being cared for, the findings suggest that caring is an issue faced by many children. It is also worth noting that young carers are more likely than non-carers to miss school so the results may slightly underestimate the prevalence of caring in young people given the school-based administration of the survey<sup>4</sup>.

# HEALTH AND WELLBEING AMONG YOUNG CARERS

The HBSC data suggests links between caring and problems related to health and wellbeing. Young carers were significantly less likely to report high life satisfaction than the non-carer sample. They were more likely to report bullying behaviour, with 37.5% reporting being bullied and 15.9% saying they had bullied others. Young carers were also more likely to report drinking alcohol, smoking and using cannabis. More than half (51.3%) reported an injury that required medical attention in the last 12 months – significantly more than the non-carer sample (41.1%).





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<sup>&</sup>lt;sup>3</sup> The question is phrased 'Do you provide regular unpaid personal help for a family member with long-term illness, health problem or disability? (includes problems which are due to old age. Personal help includes help with basic tasks such as feeding or dressing) with response option 'Yes' and 'No'.

<sup>&</sup>lt;sup>4</sup> Warren, J. (2007). Young carers: Conventional or exaggerated levels of involvement in domestic and caring tasks? Children and Society, 21,136–146.

Life satisfaction of 10-17 year olds by carer status		
	Carer	Non-carer
High life satisfaction	68.2	72.0
Low life satisfaction	27.9	25.6
Missing	4.0	2.4

Young carers were significantly less likely to report high life satisfaction than non-carers (p<0.05)

Bullying at school among 10-17 year olds by carer status				
	Been bullied at school		Bullied others	
	Carer	Non-carer	Carer	Non-carer
Yes	37.5	28.3	15.9	12.4
No	61.4	70.5	82.9	86.2
Missing	1.1	1.2		1.4

Young carers were significantly more likely to have been bullied than non-carers (p<0.001). Young carers were significantly more likely to have bullied others than non-carers (p<0.001)

# Injury requiring medical attention in the last 12 months among 10-17 year olds by carer status

	Carer	Non-carer
Yes	51.3	41.1
No	47.7	58.1
Missing	1.0	0.9

Young carers were significantly more likely to have had a medically attended injury than non-carers (p<0.001)

For the first time in the Irish HBSC survey, two standardised measures were used to screen different aspects of mental health (the five-item Mental Health Inventory and the WHO-Five Well-Being Index). The findings show that young carers aged between 15-17 years reported significantly higher scores than non-carers on the Mental Health Inventory as well as significantly lower scores than non-carers on the WHO-5 Index.

The findings show that young carers aged between 15-17 years reported significantly poorer mental health scores than non-carers on both of these measures.

#### Mental health among 15 to 17 year olds in 2018 by carer status

	Mental Health Inventory		WHO-Five Well-Being Index	
	Carer	Non-carer	Carer	Non-carer
Average score	36.06	34.60	49.14	50.56
Standard deviation	20.32	20.13	22.07	22.32

Young carers reported significantly higher scores than non-carers on the Mental Health Inventory (p<0.001), indicating poorer mental health among young carers. Young carers reported significantly lower scores than non-carers on the WHO-5 Index (p<0.05), indicating poorer mental wellbeing among young carers.

#### **FOOD POVERTY**

The HBSC survey asked children to report how often they go to school or bed hungry because there was not enough food at home.

24.6% young carers said they experienced hunger, significantly higher than the non-carer population (17.9%).

It is important to note that the origins of food

poverty are not only socioeconomic. A study of Canadian HBSC data, for example, found that going to bed hungry was also strongly related to the organisation and functioning of family environments<sup>5</sup>. For example, adolescents from single parent and 'other' family structures reported the most frequent levels of hunger compared with families when both parents were present. Regardless of its cause, hunger is linked with a range of negative outcomes for a child's health, behaviour, emotional wellbeing and academic experiences so deserves attention from policymakers and relevant professionals.



Ever going to bed or to school hungry among 10-17 year olds by carer status			
	Carer	Non-carer	
Yes	24.6	17.9	
No	75.2	81.9	
Missing	0.1	0.2	

Young carers were significantly more likely to have experienced hunger before bed or school than non-carers (p<0.001)

<sup>&</sup>lt;sup>5</sup> See Pickett, W., Michaelson, V., & Davison, C. (2015). Beyond nutrition: hunger and its impact on the health of young Canadians. International journal of public health, 1-12. DOI: 10.1007/s00038-015-0673-z

<sup>&</sup>lt;sup>6</sup> See https://familycarers.ie/carer-supports/young-carers/young-carer-projects for more details.

#### CONCLUSION

The HBSC Ireland 2018 research has identified that young carers are at greater risk of mental and emotional difficulties, more likely to bully and be bullied, and more prone to experiencing food poverty than their non-carer peers. Through Ireland's only national young carers programme, Family Carers Ireland supports young carers' physical and mental health, helping them to remain engaged in school, enabling them to make transitions and assisting them to engage socially<sup>6</sup>. The research findings reaffirm the critical importance of such national programmes, as well as raising some important considerations for research, policy and practice.

- There are considerable discrepancies between Census data and the Department of Health funded HBSC data relating to the prevalence of young carers in the Irish population. These disparities have important implications for research and practice as it becomes more difficult to estimate the prevalence of young carers in the Irish context and therefore the extent to which it is an issue, the types of activities they undertake as young carers, the impacts of caring and the provision of services to them. Addressing the variances in national estimates of young carers is critical to countering the serious and widespread deleterious effects of caring on young people.
- Caring is a risk factor for children and young people's mental health and wellbeing, which continues to be little-understood and often invisible to professionals and policymakers. This suggests that cognisance of the vulnerability of young carers must make its way onto national policy agendas and any initiatives that have a bearing on young carers' lives.

- Young carers can provide insights into their lived experience, their needs and how these can be met. Including and acting upon young carers' voices in planning and decision-making processes at all levels will ensure that relevant policies and initiatives respond to the priority areas identified by young people with caring roles.
- Access to a safe and varied healthy diet is a fundamental human right. Whilst there is no single approach to tackling all the relevant issues related to food poverty, the specific needs of young carers and those susceptible to experiencing food poverty should form part of a long-term term strategic approach to ensure the provision of nutritionally balanced meals for all children.
- While the findings illustrate some of the challenges young carers face, there is further scope within the HBSC dataset to examine the influence of class, gender, age and the hours spent caring on young carers' health and wellbeing. This will shine a light on different contexts of care and their influence on outcomes for young people.

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To learn more about how Family Carers Ireland can support young carers, please contact our Young Carer Support Manager on 05793 70208 or email youngcarers@familycarers.ie in confidence. You can also visit our website to access information about young carer projects, online workshops, free membership, our parent hub and lots more, and we have a Freephone National Careline where you get advice and also a listening ear. We believe no one should have to care alone.

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