ADOLESCENTS AS YOUNG CARERS

HBSC England 2022: Snapshot series
University of Kent.
https://hbscengland.org/@HBSCEngland

WHY IS THIS IMPORTANT?

There are indications that young carers lag behind in educational achievement, and are at risk of mental health problems.

HBSC ENGLAND DATA SHOWED

- **an increase in the number of adolescents who reported doing extra work around home due to having a disabled or sick family member**
- **and age differences in the prevalence of those doing extra work around the home**
- **a tendency for higher levels of undertaking extra work around home among young people from low-affluence families**
- **the impact of undertaking extra work around home on self-rated and mental health outcomes, problem solving, risk behaviours, bullying and being bullied & school experience.**

THIS SHOWS THE URGENT NEED FOR

- systematic screening in schools to identify young carers
- adequate support services in schools and communities targeting young carers from low-FAS families
- awareness campaigns about young carers to foster understanding and empathy.

Young people raised concerns about the caring role of adolescents affected by the pandemic and gender stereotypes

*Increasing numbers of young carers could possibly be an **effect of Covid where children were at home** more so they could help more and are **now more relied upon?***

Max, 14

*I think **gender stereotypes** create this - **girls are thought to be more 'motherly'** and so are expected to take on caring roles.*

Claudia, 14

KEY MESSAGES

Between 2018 and 2022…

The percentage of **young carers** who reported undertaking extra work around home because someone in the family was disabled or sick or 'can't do things' **DOUBLED** from 8% to 16%.

Undertaking extra work around home due to having a disabled or sick family member was more prevalent among…

- YOUNGER adolescents
- GIRLS
- Adolescents from LOW-AFFLUENCE FAMILIES

1.5 in 10 reported **doing extra work at home** (16%), *an increase from 8% in 2018*

HIGHER SCORES for extra work around home due to having a disabled or sick family member were reported overall for:

- **GIRLS**: 17% vs 15% for boys
- **YOUNGER ADOLESCENTS**: 11 yr olds [18%], 13 yr olds [16%], 15yr olds [14%]
- **LOW AFFLUENCE ADOLESCENTS**: 19% vs 12% [low/high FAS boys]; 24% vs 12% [low/high FAS girls].

Doing extra work due to having a disabled or sick family member is associated with levels of **HEALTH, WELLBEING, AND SELF-EFFICACY**

COMPARED WITH NON-CARERS, **YOUNG CARERS were LESS LIKELY to report…**

- excellent **self-rated health** (69% vs 81%)
- high **life satisfaction** (53% vs 68%)
- **managing to do things** that you decide (41% vs 53%)
- **finding a solution** to a problem always/most of the time (42% vs 54%).

Doing extra work due to having a disabled or sick family member is associated with **RISK BEHAVIOURS**

COMPARED WITH NON-CARERS, **YOUNG CARERS were MORE LIKELY to report…**

- **smoking** (6% vs 3%), **drinking alcohol** (13% vs 11%), **using cannabis** (17% vs 9%)
- **bullying others** (22% vs 15%) and **being bullied** (53% vs 32%)
- **deliberately hurting themselves** (53% vs 31%)
- **never eating breakfast** on weekdays (30% vs 21%)
- **having been injured 2+ times** in the last 12 months (34% vs 22%).

Doing extra work due to having a disabled or sick family member is associated with a **POORER SCHOOL EXPERIENCE**

COMPARED WITH NON-CARERS, **YOUNG CARERS were LESS LIKELY to report…**

- **school liking** (14% vs 16%)
- **teacher support** (46% vs 54%)
- **classmates' support** (45% vs 57%)

and **MORE LIKELY** to report **high levels of school pressure** (38% vs 31%).