



**Inquiry into Better Support for Carers  
Submission from AICAFMHA- COPMI National Initiative**

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The Australian Infant, Child, Adolescent and Family Mental Health Association Ltd (AICAFMHA) was formally established to actively promote the mental health and well being of infants, children, adolescents and their families. It brings together professionals from a wide range of disciplines and consumers and carers in the one organisation. Further information is available at our website:  
<http://www.aicafmha.net.au/>.

The Australian Children Of Parents with a Mental Illness (COPMI) initiative is being undertaken by AICAFMHA with funding provided by the Australian Government Department of Health and Ageing. The overall aim of the national COPMI initiative is to promote better mental health outcomes for children of parents with a mental health problem or disorder.

This submission will focus on children of parents with mental illness as young carers. Of the recognised 384,000 young carers in Australia, approximately twenty five percent care for a person with a mental illness.

## Summary of Key Points of Submission

Many Australian children of parents with a mental illness are not identified as carers and yet provide major care-giving roles. The first challenge is to identify these children, recognise their contribution and then support them in their caring roles. Support and practical resources may enhance their life journey and assist to decrease the impact that their caring role has on their young lives. The following would help to address this situation and increase the opportunities for these young carers.

- *An increased **national** education campaign to raise awareness of the existence of young carers, particularly targeting education, community, justice and health sectors.*
- *Identification of young carers at access points to services through a nationally uniform system in order to develop a care plan for them from a formal needs assessment.*
- *Easy and increased access to appropriate services for practical assistance and support including mentoring and/or counselling.*

## 1. *Role and contribution of carers in society and how this should be recognised*

Young carers, particularly those with parents with mental health issues are often not identified or may choose not to disclose that they are in a caring role and therefore their challenges and contributions are not recognised.

Reasons for this may include:

- Young people not identifying with the term 'Young Carer'.
- Services treating service users/consumers as individuals rather than holistically as part of a family and therefore not identifying the role of a young person as a young carer.
- Service users/consumers, on admission to a hospital or care centre, may not be asked if they have dependent children.
- Lack of knowledge by the family members and /or the young carer that they are carrying out a caring role. They may not be familiar with the term 'young carer'.
- Fear of being removed from the family home if the parent is perceived as being unwell or not coping. This may also include the fear of being separated from siblings. "However children need also to feel reassured that the consequences of talking more openly about their experiences and needs will not inevitably lead to further discrimination and family separations" (Aldridge J & Becker S 2005 p. 82).
- Fear of being seen as different or being stigmatised.
- Lack of knowledge of services.
- Young carers not being aware of or not perceiving available services as appropriate.
- Lack of time to access services.

### *Identification of children of parents with mental illness*

The concept of improving data collection systems is supported within the child protection arena and also in associated arenas such as mental health. For example, despite advocacy over a number of years, questions about the parenting responsibilities of adults with mental health problems are yet to be included within the National Minimum Data Set for Admitted Patient Mental Health Care and within the National Minimum Data Set for Community Mental Health Care.

If they were to be included, data could be collected nationally to measure the size of the issue and the parenting status of people accessing mental health services could be ascertained at point of admission, thereby triggering further questions about the current safety and well-being of any dependent children.

*Once identified young carers need to be valued by:*

- Adequate, easily accessible and appropriate support services including respite.
- Inclusion that is age appropriate in their parent's care plans.
- Flexible education delivery that makes allowances for their caring role and the subsequent impact that it may have on their continuing education both at a school and tertiary level.

*2. Barriers to social and economic participation for young carers.*

Children of parents with a mental illness may:

- have unusual time and financial constraints.
- not be able to access the same employment opportunities as their peers because of their caring role.
- have study commitments but also need to find part time employment to assist with family finances. This along with their caring roles leaves little if any time for socialising.
- also be at risk of not accessing educational opportunities either through leaving school early or not going on to higher education. This may then lead to uncertain or inflexible employment options or limited career choices.

*3. Practical measures required to better support young carers.*

- Identification of young carers at access points to services. When consumers are admitted to hospital or access other medical or support services the question needs to be asked. 'Do you have children?'
- A national education campaign to raise awareness of the existence of children of parents with a mental illness, particularly targeting education, community, justice and health sectors.
- Easy access to relevant and appropriate support services that include:
  - *Respite* to enable attendance at educational and social opportunities and to give relief from caring role.
  - *Peer Support* services so that young carers realise that they are not alone and can benefit from other young peoples' caring experiences.
  - *Mentors* - appropriate adults to assist young carers to negotiate with government and non government agencies when applying for assistance and support.
  - *Financial compensation.*
  - *Practical domestic assistance*

- *Legal advice* so they are recognised as having responsibilities beyond their years that enables them to be included or referred to when care plan are being made for their parents.
- School programs
- Young carer assessments that take into account health needs.

4. *Strategies to assist carers to access the same range of opportunities and choices.*

- COPMI to be identified at entry or access point to services such as hospitals, support services etc.
- Schools and other child and youth services to be educated and aware of the signs that young people may be unidentified young carers and have strategies in place for assistance and referral.

**Key priorities for action**

- *An increased **national** education campaign to raise awareness of the existence of young carers, particularly targeting education, community, justice and health sectors.*
- *Identification of young carers at access points to services through a nationally uniform system in order to develop a care plan for them from a formal needs assessment.*
- *Easy and increased access to appropriate services for practical assistance and support including mentoring and/or counselling.*
- *Increased age appropriate and reliable information and better access to a phone help line specialising in young carer issues.*

## Bibliography

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