

· Glasgow City Carers Partnership ·

Carer Service Name – Case Study	
Care Group Referral Pathway Carer Cared For	Mental Health Carers Centre Mental Health Sarah John
Background	
<p>Sarah is the main carer for her husband, John, who suffers from severe anxiety and depressive symptoms and has a Mild Cognitive Impairment. John had initially been diagnosed with dementia but this was negated when his condition remained stable. Sarah had been caring for her husband for over 10 years when we first met and was finding it increasingly difficult to cope with his intense anxiety. Sarah had tried to get John involved with numerous different support agencies over the years but found that John's anxiety and lack of motivation was always a barrier to any support being successful and allowing her a break from her caring role as he needed constant encouragement to engage with services. The diagnosis of a mental health condition was new to the family and they were struggling to come to terms with it due to the stigma they faced and their lack of understanding.</p> <p>When we first met, Sarah also provided a high level of practical and emotional support to one of her daughters (Natalie), regularly taking care of her grandchildren, one of whom suffers from autism, to give her daughter some time out despite the fact she felt close to breaking point herself. This caused a number of issues and conflicts in Sarah and John's relationship, particularly as John's relationship with his daughter had become very strained following his diagnosis as suffering from a mental health problem rather than dementia. Natalie was very confrontational with her dad because of her lack of understanding and Sarah found this upsetting and hard to manage. Whenever Sarah tried to explain John's difficulties to Natalie it would always cause an argument and this had a significant impact on Sarah's wellbeing and their relationships.</p> <p>Sarah's own health and wellbeing was deteriorating quickly due to her caring role, she was suffering from stress and depression which was increasing the pain she felt from her arthritis. She felt unable to leave John alone as in the past he had been hospitalised when she went away. She therefore felt tied to and burdened by her caring role and had no life of her own.</p>	
Output: (can list core service/s here eg Info & Advice, Short Break)	
<ul style="list-style-type: none"> • Information and advice <ul style="list-style-type: none"> ○ On mental health problems and the recovery model • Access to social opportunities and health and wellbeing opportunities <ul style="list-style-type: none"> ○ Reduce social isolation and provide peer support ○ Alleviate stress and build confidence in taking breaks from caring role • Courses in crafts and healthy cookery to allow Sarah to explore and develop her own interests and hobbies • Referral to Spark relationship counselling <ul style="list-style-type: none"> ○ to enable the family to explore better ways of communicating • Income maximisation • Carers Privilege Card • Training in mental health first aid • Referral to Carers Community Nurse so Sarah can prioritise her own health • Referral to Cope for counselling 	
Outcomes:	
<ul style="list-style-type: none"> • Life of her own • Choices in caring (including limits of caring) 	

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- Satisfaction in caring
- Better quality of life for carer and cared for
- Positive relationships with others
- Feeling informed and equipped
- Freedom from financial hardship
- Improved health and wellbeing
- Improved health and wellbeing of cared for
- Positive relationships with practitioners
- Feeling valued and as a partner in care

Impact

Sarah received 1to1 counselling from Cope which allowed her to address some of the issues from her past she hadn't felt able to deal with because she believed she had to 'be strong' for John. She discovered that actually being able to take time and space to grieve for past losses made her feel much stronger emotionally and also applied this to the change in her relationship with John. This allowed her to accept and move on from his diagnosis. Sarah also received intensive 1to1 support at this time focusing on building her resilience and capacity to cope with and continue in her caring role. Discussing how much care and support Sarah wanted to provide for John and her daughter helped Sarah to change her outlook on her caring role and she now feels much more in control and satisfied. 1to1 support also encouraged Sarah to set boundaries with both her daughter and her husband and built her confidence in maintaining them. Giving John some more autonomy and allowing him independence has also improved their relationship. Sarah and John attended relationship counselling sessions along with 2 of their children at Spark people. She related that this gave her a safe space to explain to her children and her husband her own needs which she had never felt able to discuss. The sessions also helped to educate Sarah's children about their dad's mental health problem and resulting behaviours allowing them to explore better ways to relate to each other. Sarah feels this has improved their relationships as she feels respected and appreciated by her family rather than being 'walked all over'. She states that their house is much calmer now as Natalie has a greater understanding of her dad's illness and has learned more effective ways to express herself.

Attending Creative Breaks funded social opportunities and health and wellbeing allowed Sarah to make positive links with other carers and reduce her social isolation. It also built up her confidence in taking time out from her caring role. One of the opportunities Sarah attended was a Craft Course with was run at a local community hub, On The Corner. Sarah enjoyed the opportunity to try something totally different and related that focusing on being creative allowed her to 'totally switch off' from her caring role and be in the moment. Sarah also made positive relationships with the people who ran the community hub and plans to start volunteering there for a few hours a week to give her time out from caring and maintain her own mental health. "I now go out when I feel I need time out... I feel better for getting breaks away [from caring]."

Reflective learning from the case that could inform service development.

Through running funded opportunities in a local community venue, Sarah was able to not only meet other carers, but also create valuable links with her local community. In Sarah's case these links led to a volunteering opportunity, but could also be gateways into employability, further education, or community engagement for carers.