



# Getting To Know You



An Introduction  
to  
West Lothian Young Carers Project

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# HOW DO YOU FEEL TODAY?



**IMPATIENT**



**JEALOUS**



**PROUD**



**HAPPY**



**GUILTY**



**CONTENT**



**SAD**



**AFRAID**



**EMBARRASSED**



**ANGRY**



**HOPEFUL**



**SORRY**



**SURPRISED**



**CONFUSED**



**HURT**



**EXCITED**

# Session 1 - Introduction

## Initial Assessment

Date:

Worker:

This form will help us at West Lothian Young Carers Project (WLYCP) find out more about you, and then we can work out how we can support you better with what you need.

### About You

Name:	DOB:
-------	------

Address:	Tel No:
	Mobile:
	Email:
Post Code:	

### About school or college

Which school do you go to?	Which class are you in?
----------------------------	-------------------------

Who is your class teacher/guidance teacher?

### Other Stuff

Do you go to any clubs?      Yes          No   

If so what are they?

What else do you do in your spare time?

## West Lothian Young Carers Project

Name: .....

Date: .....

**How I feel about . . .**  
Being a Young Carer

Self Esteem      Being Confident

Family      School

Friends

Goals I would like to work on are:

**How would you rate your life overall?**

Not Good		OK		Great	
1	2	3	4	5	

**What Score would you like to be in a few weeks' time?**

Not Good		OK		Great	
1	2	3	4	5	

**Areas I would like to improve are:**

• Be safer		• Be Healthier	
• Be more active		• Achieve more	
• Be more respected		• Be more confident	
• Be more included		• Be less stressed	
• Be less lonely		• Be happier	

## Session 1 - Introduction

### Home and Family Fact file

I have lived in my house for ..... years.

### My Own Space/Bedroom



My Own Space	My Most Treasured Possessions	My Pets

### In My Home I live with the following people



Name	Age	Who are they?

### Other Family Members Who Live Elsewhere and I see them

Who (eg maternal aunt, etc)	Where do they live?	Often	Sometimes

# Session 1 - Introduction

## Ground Rules

We need to make up some ground rules for the 1:1 work that you do with your key worker. These are rules are so we both know what is OK for our meetings together and we should both try to stick to them.

For example they could be like the following:

- I will have respect for you (what do you mean by respect?)
- I will listen to what you say

## My 1:1 Ground Rules

1.
2.
3.
4.
5.

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## Session 2 - Family and Life as a Young Carer

### Overall caring jobs that I do

Below are some jobs that young carers do to help. Think about the help you have provided over the last month. Please read each one and put a tick in the box to show how often you have done each of the jobs in the last month. Thanks 😊

		Never	Some of the time	A lot of the time
1D	Clean your own bedroom			
2D	Clean other rooms			
3D	Wash dishes or load dishwasher			
4H	Take responsibility for food shopping			
5H	Help with lifting or carrying heavy things			
6F	Help with financial matters such as bills, banking money, collecting benefits			
7F	Work part time to bring in money			
8P	Interpret, sign or help communicate for the person you care for			
9P	Help the person you care for to dress or undress			
10P	Help the person you care for to have a wash/ shower or bathe			
11E	Keep the person you care for company e.g., sit with them, read to them etc			
12E	Keep an eye on the person you care for to make sure they are ok			
13E	Take the person you care for out			
14S	Take your brothers or sisters to school			
15S	Look after your brothers or sisters whilst an adult is near by			
16S	Look after your brothers or sisters on your own			

Dom=

House=

Finance=

Personal=

Emotional=

Siblings=

# LOOKING AFTER SOMEONE IN MY FAMILY



**SOMEONE I HAVE LOOKED AFTER IS...**

**I LIKE DOING THIS BECAUSE...**

**I DON'T LIKE DOING THIS BECAUSE...**

**THINGS THAT I WOULD LIKE TO BE DIFFERENT...**

## Session 2 - Family and Life as a Young Carer

### The caring jobs I do

Below are some jobs that young carers do to help. Think about the help you have provided over the last month. Tick the box to show how often you have done each job in the last month.

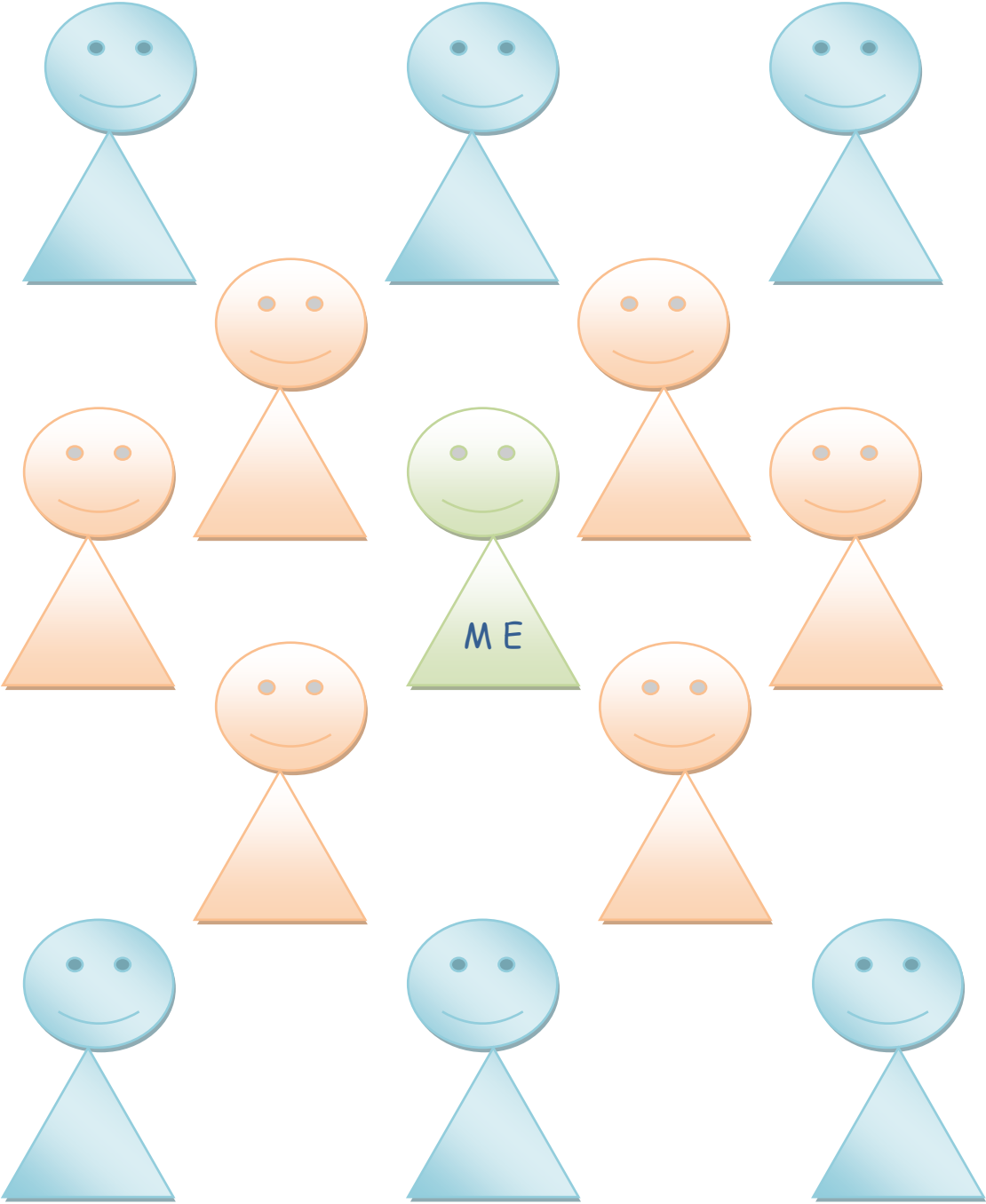
		Never	Some of the time	A lot of the time
1	Tidy/dust own bedroom			
2	Hoover your own bedroom			
3	Hoover other rooms			
4	Tidy/dust other rooms			
5	Lay the table			
6	Make snacks			
7	Make main meals			
8	Wash dishes/load dishwasher			
9	Wash own clothes			
10	Wash clothes for people you live with			
11	Iron own clothes			
12	Iron clothes for people you live with			
13	Mow the grass			
14	Weed or look after the garden			
15	Do repairs to the home			
16	Decorate rooms			
17	Take responsibility for shopping for food			
18	Help with lifting or carrying heavy things			
19	Help with paperwork e.g. writing letters, filling in forms			
20	Help with financial matters such as bills, banking money, collecting benefits			
21	Work part time to bring in money			
22	Interpret for someone you live with because English isn't their first language			
23	Signing for someone you live with because they are hearing impaired			
24	Give medicines to someone you live with e.g. making sure they take pills, give injections, change dressings			

		Never	Some of the time	A lot of the time
25	Prepare special food or diet because of medical needs of the person you care for			
26	Take someone you live with to the doctor or hospital			
27	Help someone you live with to walk, get upstairs, get in and out of bed			
28	Help someone you live with to dress or undress			
29	Help someone you live with to have a wash			
30	Help someone you live with to bathe or shower			
31	Help someone you live with to shave			
32	Help someone you live with to cut their nails			
33	Help someone you live with to use the toilet			
34	Help someone you live with to eat and drink			
35	Keep someone you live with company			
36	Keep an eye on someone you live with to make sure that they are ok			
37	Take someone you live with out e.g. for walk or visit friends/relatives			
38	Take brother/ sisters to school			
39	Look after brothers/sisters whilst an adult is near by			
40	Look after brothers/sisters on your own			
41	Talk with officials (doctors, benefits office) about the person you care for			
42	Miss out on sleep e.g. get up in the night or stay up late to look after someone			

# Session 2 - Family and Life as a Young Carer

## Who do I Trust?

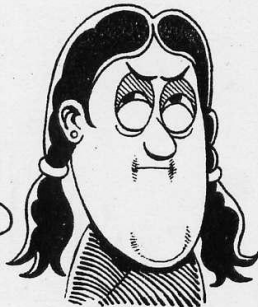
Which of the important people in your life do you feel able to talk to and trust? The figures below represent these people . . . you are the one in the middle! The closest to you are the ones you trust the most. Those furthest away you trust the least. Write their names on their bodies. In their head write the topics you feel able to trust them with the most.



# HOW DO YOU FEEL TODAY?



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**CONTENT**



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**HOPEFUL**



**SORRY**



**SURPRISED**



**CONFUSED**



**HURT**



**EXCITED**

## Session 3 - Self Esteem and Confidence

### How caring affects me

Below are some things young carers like you have said about what it feels like to look after someone. Please read each statement and tick the box to show how often this is true for you. There are no right or wrong answers; we are interested in what life is like for you.

		Never	Some of the time	A lot of the time
1	Because of caring I feel I am doing something good			
2	Because of caring I feel that I am helping			
3	Because of caring I feel closer to my family			
4	Because of caring I feel good about myself			
5	Because of caring I have to do things that make me upset			
6	Because of caring I feel stressed			
7	Because of caring I feel that I am learning useful things			
8	Because of caring my parents are proud of the kind of person I am			
9	Because of caring I feel like running away			
10	Because of caring I feel very lonely			
11	Because of caring I feel like I can't cope			
12	Because of caring I can't stop thinking about what I have to do			
13	Because of caring I feel so sad I can hardly stand it			
14	Because of caring I don't think I matter			
15	Because of caring I like who I am			
16	Because of caring life doesn't seem worth living			
17	Because of caring I have trouble staying awake			
18	Because of caring I feel I am better to cope with problems			
19	I feel good about helping			
20	Because of caring I feel I am useful			

Positives=

Negatives=

## Session 3 - Self Esteem and Confidence

### I AM GOOD AT . . .

Circle the things you are good at:

Staying calm

Listening to people

Asking questions

Making others laugh

Controlling my temper

Saying thanks

Talking to new people

Saying sorry

Helping others

Being Sympathetic

Resisting Pressures/Saying NO

Talking about myself

Showing I like people

Talking to the opposite sex

Giving compliments

Sharing/giving

Taking turns/being fair

Receiving compliments

Talking to my parents

Talking to my teachers

Most proud of: .....

One I would like to be: ..... /20



Session 3 - Self Esteem and Confidence

What am I?

Draw a circle around the words, which describe you the most:

- Kind                      Boring                      Honest                      Helpful                      Lazy
- Happy                      Greedy                      Funny                      Nasty                      Generous
- Interesting                      Reliable                      Dishonest                      Successful
- Depressed                      Popular                      Impulsive                      Careless
- Well-organised                      Gentle                      Crafty                      Sensible                      Sad
- Intelligent                      Good-looking                      Warm                      A Good Laugh
- Hard working                      Cruel                      Exciting                      Uncooperative
- Noisy                      Thoughtful                      Anxious                      Unattractive                      Failure
- Even-tempered                      Quick thinking                      Aggressive                      Relaxed
- Stupid                      Lovable                      Vindictive                      Loyal                      Jealous
- Hyper                      Caring                      Angry                      Annoying                      Quiet

Most proud of: .....

One I would like to be: ..... /50

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**GUILTY**



**CONTENT**



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## Session 4 - School and Social

### What I like and dislike about caring

We want to ask you questions about the hours you spend caring and what tasks you like and dislike most. There are no right or wrong answers here; we are just keen to hear your views.

At what age did you first start to do caring jobs?

Which one of your caring jobs do you like the most? Please tell me a little more about it.

Please say why you like this caring job.

Which one of your caring jobs do you dislike the most? Please tell me a little more about it.

Please say why you dislike this caring job.

Which one of your caring jobs upsets you the most? Please tell me a little more about it.

Please say why this caring job upsets you.

In the last 2 weeks of school, how many days have you missed because of your caring?

..... days missed

In the last 2 weeks of school, how many days were you late because of your caring?

..... days late

# Session 4 - School and Social

Think about an experience/event that's happened at school that you were involved with.

# School life.

MANY YOUNG PEOPLE HAVE DIFFERENT EXPERIENCES IN SCHOOL. CAN YOU TELL US ABOUT YOURS?

MY SCHOOL IS CALLED...

SCHOOL SUXX!

SCHOOL RULZ!

Handwritten notes: *at school / i like school / i like school / i like school*

Session 4 - School and Social

In the boxes below write as many words that describe how you feel and think about



# SCHOOL!!!


## Session 4 - School and Social

### Friends and Others

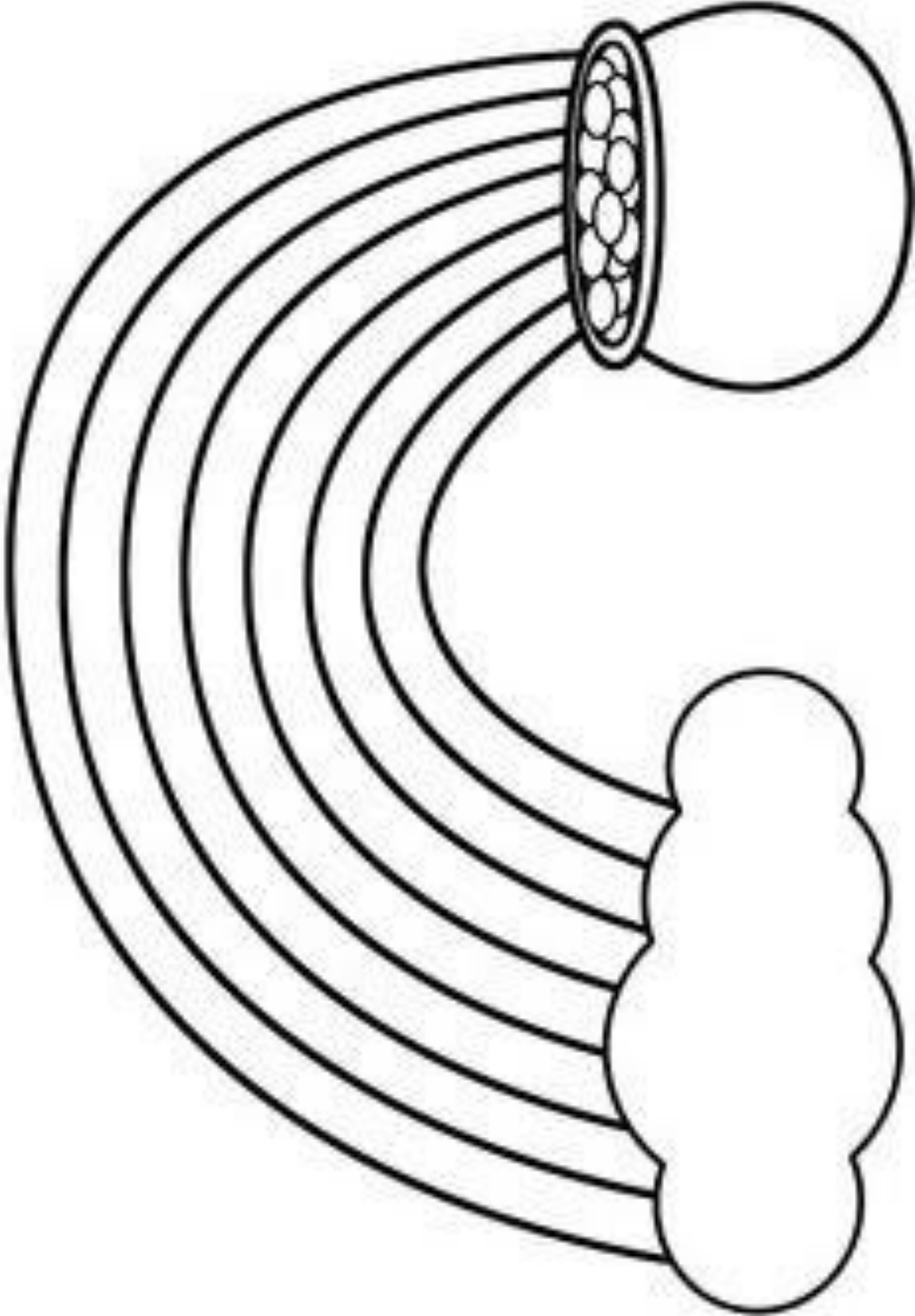


**True or False?** (Please circle)

<b>I have got lots of friends</b>	<b>TRUE</b>	<b>FALSE</b>
<b>My parents like my friends</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I have a good social life</b>	<b>TRUE</b>	<b>FALSE</b>
<b>My friends get me into trouble</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I sometimes get my friends into trouble</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I am able to keep my friends</b>	<b>TRUE</b>	<b>FALSE</b>
<b>Most of my friends are older than me</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I have hobbies and interests</b>	<b>TRUE</b>	<b>FALSE</b>
<b>Other people copy what I do</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I copy what other people do</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I like to be the centre of attention</b>	<b>TRUE</b>	<b>FALSE</b>
<b>My social life is more important to me than school</b>	<b>TRUE</b>	<b>FALSE</b>
<b>There is nothing to do where I live</b>	<b>TRUE</b>	<b>FALSE</b>
<b>My parents restrict my social life</b>	<b>TRUE</b>	<b>FALSE</b>
<b>I need lots of excitement</b>	<b>TRUE</b>	<b>FALSE</b>

**Session 4 - School and Social**

Please tell us a bit more about your hobbies and interests. Write on the pot of gold something you would like to do with your free time if you had the chance. Think about what stops you doing this.





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**CONFUSED**



**HURT**



**EXCITED**

# MY TOP 3

# WORRIES



SOMETIMES I WORRY ABOUT STUFF THAT'S OUT OF MY CONTROL. OFTEN I FIND IT HELPS TO TALK ABOUT IT...

A large cloud-shaped area for writing, with three small worry icons on the left side. The icons are small, stylized drawings of a person with a worried expression, similar to the one in the top left. The cloud shape is irregular and has a scalloped edge.

# 3 THINGS THAT SCARE ME MOST

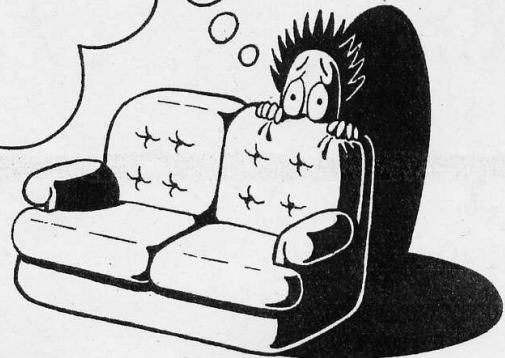


THERE ARE MANY DIFFERENT THINGS WHICH SCARE DIFFERENT PEOPLE, CAN YOU TELL ME 3 THINGS THAT SCARE YOU THE MOST...

1.

2.

3.



# WHO DO YOU TELL?



I ONCE TOLD A FRIEND ABOUT STUFF THAT WAS GOING ON AT HOME AND THEY WENT AND TOLD EVERYONE!

YEAH BUT, I TOLD MY LEARNING MENTOR, AND THEY PUT ME IN TOUGH WITH PEOPLE WHO CAN HELP ME!



WHO I WOULD TELL...

WHO I WOULDN'T TELL...

PICK A PERSON FROM THE WOULDN'T LIST, WHY WOULDN'T YOU TELL THEM?

WHAT PROBLEMS DOES IT CAUSE NOT BEING ABLE TO TELL PEOPLE?



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**MY FUTURE...**

... AND CAN YOU NAME A FEW THINGS YOU WOULDN'T WANT TO HAPPEN TO YOU...

WE ALL HAVE DREAMS ABOUT OUR FUTURE - CAN YOU NAME A FEW THINGS YOU WOULD LIKE TO HAPPEN TO YOU...

## West Lothian Young Carers Project

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**How I feel about . . .**  
Being a Young Carer

Self Esteem                      Being Confident

Family                                  School

Friends

If your score was higher than your first score, how did this happen:

If lower why do you think it was lower? (caring, family, school situations, etc)

How would you rate your life overall?

Not Good		OK		Great	
1	2	3	4	5	

What Score would you like to be in a few weeks' time?

Not Good		OK		Great	
1	2	3	4	5	

Areas I would like to improve are:

• Be safer		• Be Healthier	
• Be more active		• Achieve more	
• Be more respected		• Be more confident	
• Be more included		• Be less stressed	
• Be less lonely		• Be happier	

## Session 6 - Planning

- |   |     |    |
|---|-----|----|
| 1. Was it worth meeting with WLYCP  | Yes | No |
| 2. Have you a better understanding of your caring situation?<br>If yes, in what way | Yes | No |
| 3. Do you feel more able to discuss your caring situation?                          | Yes | No |
| 4. Are you more able to voice concerns?   | Yes | No |
| 5. Have we helped in improving your caring situation?<br>If yes, in what way?       | Yes | No |
| 6. Do you feel you do better at school or attend more?                              | Yes | No |
| 7. What can I tell the person who referred you?                                     |     |    |

**Thank you**