

Social Return on Investment Report acta, November 2010

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acta Community Theatre

acta (access, creativity, theatre, arts) Community Theatre is an educational charity that has been delivering participatory arts projects in and around Bristol for the last 25 years. The Company targets services at those most at risk and most in need, and provides a wide range of arts opportunities to increase self-confidence and self-worth. The Company helps people create and perform their own original theatre, producing an average of 20 new shows every year.

The wide-ranging acta programme, engaging participants and audiences of all ages, relies on a range of different sources of project funding, each with its own monitoring & evaluation requirements. As a result, the Company has an interest in exploring a range of different methods of evaluating the impact of our work. The Company has previously reported the national recognition for the efficacy of the arts and creative learning in promoting individual development and community cohesion that is available both in the PAT 10 report published by DCMS in 1998, and in Francois Matarasso's evaluation of the social impact of participation in the arts, *Use or Ornament* (Comedia 1999).

As a voluntary sector arts organisation with a strong social impact ethos, we were keen to be part of the developing interest in the SROI framework. We were particularly interested in SROI as a tool to measure the change in young people, as a result of their participation in acta. Furthermore, SROI would enable us to measure and account for a much broader concept of value than our existing monitoring & evaluation systems. It would enable us to identify the broader impact of the project on all stakeholders, and to include a detailed assessment of future social and economic impact.

However, we considered it important to refine the scope of our involvement to one specific acta project, in order that we may conduct a good quality study, and we therefore decided that our older youth theatre for young carers, *Who Cares* youth theatre, would be the most appropriate focus for this report.

Who Cares

Youth theatre has always been at the heart of our work, and over the last decade, the Company has developed a commitment to providing a youth theatre for young carers across the City. The Company is currently delivering a network of eight youth theatres, two of which are specifically for young carers.

The Who Cares group provides a free weekly youth theatre workshop for up to 20 young carers aged 14 – 19 years, with transport also provided. The project delivers 36 term-time workshops annually, with funding from a Bristol City Council Supplementary Preventative Fund contract, that was awarded via a commissioning process undertaken by Children and Young People's Services Joint Commissioning Team.

There are also additional occasional activities in holiday periods, such as intensive rehearsals for youth theatre productions and summer residentials, but these are delivered with additional support from arts, heritage and other funding sources, so are outside of the scope of this study.

The target / expected project outcomes of the service are as follows:-

- 1) The fun drama workshops improve the emotional well-being and mental health of the young participants.
- 2) Performing to others in the group, and to an audience, improves participants' self-confidence & self-esteem.
- 3) Attending a group of other young carers improves participants' self-awareness.
- 4) Participants make new friends, and have time in a safe environment to develop social skills with their friends, away from their caring responsibilities, by taking part in the project.
- 5) Participants' aspirations are raised / ambition increased, through their participation in the project, as they learn to think ahead to their futures and consider how to make it happen. (Develop a positive attitude to risk-taking.)
- 6) Participants become more motivated to participate in activities and make positive life choices.
- 7) Participants improve their educational attainment and employability through participation in youth arts awards and other extra activities linked to learning.

The Who Cares service was developed in response to the specific needs of young carers, who show high levels of stress, anxiety, low self-esteem, and depression; (SCIE research briefing 11: The health and well-being of young carers, Feb 2005). This paper also reported that many young carers feel isolated from their peers, lack the time and opportunity to socialise, and further, that they can be reluctant to do so. Our own project evaluation and consultation with young people had also started to underline these findings, and we developed the above project aims as a result of these agreed needs.

Who Cares aims to achieve these outcomes by providing a safe and supportive service where young carers are encouraged to use their imagination and creativity, work in a group setting with their peers, where their contributions are valued and developed, and where they are able to be themselves, play and develop a new sense of identity and belonging. The service provides opportunities for the young people to create, produce and present their own original work, with wider community benefit. They develop skills in communication, making decisions, co-operation, planning and presenting work. We believe that the skills learned lead to improvements in mental health, and better equip young people to meet challenges successfully. It is this theory of change that the SROI seeks to investigate.

The acta project is designed to maximise the attractiveness of the activities to the people involved. We aim to create a sense of occasion and memorable experience; to set up a special environment to enable participants to focus, and provide them with a heightened awareness of the moment. An exciting, yet safe space provides the necessary conditions for the arts experience to have long-term transformative benefits for the participants.

The project is led by the acta senior drama worker, who is an experienced arts facilitator and is also available for one to one counselling and advice. It is acta policy to employ professional arts facilitators to lead projects, which are developed specifically for the wide range of learning opportunities that they offer. These arts workers are not only specialists in their own art form, but are also experienced in facilitation skills. The acta method of facilitation stems from a basic educational belief that arts education is not about transmitting a body of knowledge, but about helping people to find basic life skills through creative opportunities. The facilitators do not take the role of artists or arts teachers who have a performance to share, or knowledge and skills to impart, but focus upon teaching people how to learn, through developing these basic life skills: self-confidence, resourcefulness, self-esteem, communication skills, curiosity and imagination; the basic toolkit for a successful learner. Thus acta encourages an open attitude to learning, for facilitator and participant to explore creatively together.

It is the transferable nature of this personal skills development, which facilitates in acta participants, learning about learning. To have a real educational impact upon the participants, the project needs to develop in individuals, and in groups, the skills necessary for future learning.

In a wider sense, taking the matters of health and 'employability', the whole project's primary purpose is to build self-confidence and a feeling of self-worth in the participants involved, so that they feel more positive about their own potential and their contribution to the wider community. It is our belief that self-confidence is the cornerstone of both employability, and general wellbeing.

Scope

As outlined above, Who Cares youth theatre project for young carers aged 14-19yrs was agreed as the project that acta would analyse for this SROI, and furthermore, that we would focus on the weekly term-time service as funded by the Bristol City Council Supplementary Preventative Fund, with its own specific project outcomes as outlined above. We would not include those occasional additional activities such as residential projects in school holiday periods that are funded with additional funds from other sources, such as arts, heritage and charitable trusts, and have a range of additional outcomes, which are mainly artistic.

Whilst the Who Cares project has established mechanisms in place to collect data on distance travelled by project participants, in order to report back to the local authority on the impact of their project funding, the SROI consultation would also consider in depth the theory of change for young people outlined above, allowing participants and workers to discuss it as a group, as well as in one to one interviews with which participants were more familiar.

We agreed to carry out a forecast analysis SROI for the two years of the local authority contract, as the service aims to achieve target outcomes by the end of the two year period. However, we would collect the data to inform our analysis by using some evaluation of past and present group activities. We further agreed to consider the changes for stakeholders over a period up to a maximum of five years after the end of the two year service contract.

We were keen to use the SROI as a tool to assess the broad impact of our work. As an arts organisation with an interest in evaluating the whole: the end product, the process that participants go through in the creation of that end product, and the wider impacts of change for participants; the SROI study would enable us to assess the process of change and that wider impact in some more detail.

Identified Stakeholders

We considered all the possible Who Cares project stakeholders, and identified the following to be included in the analysis: _

1) Young people

It is the participants with whom we are primarily interested to analyse the social and economic impacts of the project, as the intended project outcomes are all concerned with the theory of change for them, so we had no hesitation in identifying these existing young participants as stakeholders. We decided to include the 16 young people who were currently accessing the service in the consultation, either through the group interview or individual interviews. We considered this to be a good number of young people to consult.

In addition, as acta has been delivering a similar service i.e. a youth theatre for young carers, for close to a decade, and continues to involve a number of former participants now in their early twenties, who accessed the service as teenagers, we also considered including some of this group in the stakeholder consultation. We were keen to have data from a more longitudinal study to inform the discussion about the chain of outcomes for young carers accessing the service, although we were aware that most of these people are not experiencing change as a result of the current service, so would only be included as a means to identify outcomes for the young people included in this forecast-analysis SROI. Being several years older than the current project participants, their life experience in the years after leaving the service was considered valuable data to inform our analysis.

We managed to identify an additional four older young people who used the service between four and ten years ago, to add data to the discussions with young people as to what they felt would change for them as a result of their participation in the Who Cares service. However, one of these young people is currently employed as a freelance apprentice workshop facilitator for Who Cares, and so it can also be argued that she would experience change as a result of the current project delivery. This apprentice would also be in a position to add data to the analysis of change for the existing project participants, as she is one of the two facilitators responsible for delivery of weekly workshops, and therefore in an excellent position to observe changes in young people through the project.

The young people stakeholder group is therefore made up of a total of 20 young people (16 existing participants and four former participants).

2) Project Facilitator – acta Senior Drama Worker

As mentioned above, the service delivery is led by acta's Senior Drama Worker, who has the knowledge and experience of leading acta's service for young carers over the last ten years. As a result, she is considered a significant stakeholder for this analysis, to be involved at all stages throughout the process, to ensure all relevant data is collected, and that it is interpreted correctly.

Although we considered it important to note the inputs of this significant stakeholder for the service, we concluded that there are no additional material outcomes to be included in the SROI calculations, as the material changes are all concerned with the young people with whom she is working.

3) Participants' families

Although the service is only for young carers themselves, and does not extend to working with other members of the family (except when siblings also access the youth theatre group), we considered how valuable it would be to include participants' families as stakeholders, to provide further evidence of what changes as a result of the young people's engagement in the service. Our contact time with the young people each week accessing the weekly workshop is only two hours, whilst they spend the majority of their time with their families at home, where they have caring responsibilities, so we agreed to include the families as stakeholders, in order to provide further data on the expected changes for young people, as well as to ascertain whether there are any further unexpected project outcomes which we were not aware of.

We understood that with limited capacity, we would not be able to conduct a detailed consultation with all members of a family, but we considered that by inviting one adult family member of each of the 16 current participants to take part, we should be able to collect a valuable set of data to add to the analysis from this stakeholder group.

4) Referring agencies

Young carers are referred to the Who Cares service in a number of different ways, including self-referral and word of mouth. Of the various voluntary sector organisations working with young people in the City, there are two in particular who have been responsible for referring the majority of participants to the project, Princess Royal Trust for Carers and Shelter Children's Services.

We discussed whether it was appropriate to include these two main referring agencies in the SROI, as we did not anticipate Who Cares to deliver any material changes to their organisations, so initially considered excluding them from the report. Whilst we were aware that they valued the service in terms of the changes it delivers for the participants, we had not considered whether they as organisations might also have their own outcomes as a result of our service. However, after some

initial conversations with Shelter (who we were working in partnership with on this SROI project), we were encouraged to include them, as they indicated that they had specific outcomes to include that would be valuable to the SROI. We therefore took a decision to include these two partner organisations, firstly, to gather evidence on the changes for the young carers who engage in Who Cares, and secondly, to understand the value of acta and the Who Cares project to them in their own organisations' work.

5) Local Authority

Bristol City Council is the sole funder for the core element of acta's Who Cares service that is delivery of the weekly sessions, as included in the scope of this report. This is delivered through a two year contract for a service for two different age groups, 10-13 yrs and 14-19 yrs, the older of which is the focus for this report. As the sole financial investor in the service, the local authority is considered a key stakeholder for the SROI. However, the outcomes for the local authority are already considered through consultation with other stakeholders, as the local authority investment in the service is aimed at achieving the material project outcomes for residents of the City, and not for any additional benefits to the City Council.

Consultation methodology

This SROI has been carried out by the acta Programme Manager with responsibility for monitoring & evaluation and programme delivery, who has been working for the Company throughout the last decade whilst acta has been delivering a youth theatre for young carers in Bristol. It has been developed in close consultation with the acta Senior Drama Worker, who as outlined above, was identified as a key stakeholder in the process. In order to complete the SROI within our existing programme delivery, with no additional resources, it was essential to have these experienced members of staff in place, and that the same members of staff led the stakeholder consultation, as were to complete the later stages of the SROI. Thus the consultation was completed by the Programme Manager, with support from the Senior Drama Worker at every stage.

1) Young people

We approached the stakeholder consultation with young people initially as an evaluation exercise, in order to collect evidence to indicate what had changed for our young people as a result of their engagement. However, in order to collect the data necessary for the SROI, we also asked them to judge how their future lives will change, as a result of sustained engagement in the Who Cares project as teenagers. We would then use the results to test our original intended outcomes for the project, and to collect evidence for the changes that have been indicated, to enable a forecast analysis SROI for the project.

We began by booking a group consultation session, within the regular weekly session time for the Who Cares group. We introduced the session by asking the group what they thought the outcomes of the project were for them, and then comparing their results with the agreed project target outcomes. This was successful in focusing attention on what changes for them as a result of their engagement in the service. Whilst there were some differences in how the outcomes were described, the outcomes the service users identified for themselves could be aligned with the target outcomes of the project.

We then moved on to examine each of the seven outcomes in detail, and explained to the group that we needed to agree a system to measure the level of change for each of them. The young people understood the subjective nature of most of the project's intended outcomes, such as improvements in emotional well-being, confidence and self-esteem. We discussed the importance of finding a way to measure these changes quantitatively, in addition to the qualitative evaluation exercises that are more familiar to them. The young people suggested a system of giving themselves a mark out of 10 for where they were at when they first started with the project and a second mark for where they are at now, so that we could calculate a total mark for level of change. E.g. if they scored 2/10 when they started, but consider themselves 6/10 now, their level of change is 4/10. We agreed that we would do this for each of the seven consultation questions that had been prepared in advance from the project's intended outcomes.

Following this group consultation session, the four group members who had been absent from the session that week were interviewed individually, following the same structure as the group session. The group discussions were reported back to each of them within the interview, and they were asked to add their own comments and marks for change. Hence all 16 group members were included in the consultation. It was possible that the group context for the consultation could have influenced the results obtained. However, the individual interviews did not highlight any significant variation, so this opportunity also served to test this methodology.

The longitudinal aspect of the stakeholder consultation, to gather evidence from four older young people who had as teenagers, participated in an acta youth theatre for young carers, was conducted through individual interviews with each. As with the consultation with existing young people, these interviews were structured around the seven target project outcomes. The four young adults were asked to consider where their lives were when they first accessed the acta service, and how their engagement had changed them as teenagers, as well as the consequent impact of this on their lives as young adults.

One of these four former participants remains engaged in the service as the apprentice drama worker. In addition to the one to one interview, she also took part in the group consultation with young people, by assisting with facilitation of this consultation session.

2) Project Facilitator – acta Senior Drama Worker

Following the completed consultation with the young people, which had itself been jointly facilitated by the acta senior drama worker, we then asked her to score each young person herself, using the same scoring system for change that the young people had agreed for their own consultation. She also has the knowledge gained through the standard initial assessments completed with each service user.

Further interviews with the acta senior drama worker took place throughout the SROI analysis. Firstly, she attended the majority of the stakeholder consultation interviews herself, and was then available afterwards to add her own views on how each young person had changed as a result of their engagement in the service. Later in the consultation, further interviews took place to enable her to input into the detailed analysis of results, to forecast how young people's future lives would be different as a result of their engagement in the service.

3) Participants' families

At the end of the consultation with young people, each youth theatre member was given a family questionnaire, and asked to take it home with them to complete with the adult member of their family who they consider knows them best, and would be

best placed to observe any changes in them as a result of their engagement in the acta service. They were given a choice of either interviewing this adult, and completing the questionnaire themselves by noting down what was said at the interview, or simply asking the adult to complete the questionnaire themselves. Parents were also given the opportunity to discuss the research with an acta member of staff directly and to take part in an interview.

The questionnaire was designed to provide indicators as to how we know that there has been change for the young people. It was also kept short, and reasonably simple to complete, to encourage as many as possible to take part. Thus family members were given a summary of the target outcomes, and asked to mark up to four of them that they had observed had taken place in their young person, and then to provide indicators as to how they knew this.

The questionnaire was further used to gather evidence as to whether families experienced any costs associated with young people attending the Who Cares weekly sessions, and also to ascertain whether there were any unexpected outcomes for the family .

Before distributing questionnaires to the whole group, one young person agreed to “test” the design on her family, and fed back some minor changes to the layout / design to enable all the questions to be easily understood.

4) Referring agencies

The two main referring agencies identified to include in the stakeholder consultation, Shelter Children’s Services and Princess Royal Trust, were each interviewed with a view to collecting further indicators of the changes for the young carers who engage in Who Cares, but also to examine the value of acta and the Who Cares project to them in their own organisations’ work. The two interviews took place with the worker who had been the main link with acta’s service for young carers over the years, and who would also have the best understanding of the service delivery as a whole in terms of the impact of the partnership on their own organisations.

5) Local Authority

The service has existing structures in place to provide regular reports to Bristol City Council on delivery of the contract, so it was not considered useful to add further systems of consultation for the purposes of this report. However, existing records of progress for each young person, set up to provide regular reports to the local authority, would be consulted by the project facilitator for the analysis.

It should be further noted that this report was completed with on-going support from a local authority evaluation officer at every stage, therefore providing a further

opportunity for the local authority to act as a key stakeholder in terms of reviewing progress throughout.

Consultation results

The seven target project outcomes repeated again below,

- 1) The fun drama workshops improved the emotional well-being and mental health of the young participants.
- 2) Performing to others in the group, and to an audience, improved participants' self-confidence & self-esteem.
- 3) Attending a group of other young carers improved participants' self-awareness.
- 4) Participants made new friends, and had time in a safe environment to develop social skills with their friends, away from their caring responsibilities, by taking part in the project.
- 5) Participants' aspirations were raised / ambition increased, through their participation in the project, as they learnt to think ahead to their futures and consider how to make it happen. (Develop a positive attitude to risk-taking.)
- 6) Participants became more motivated to participate in activities and make positive life choices.
- 7) Participants improved their educational attainment and employability through participation in youth arts awards and other acta activities linked to learning.

are summarised in the results with the following seven headings:-

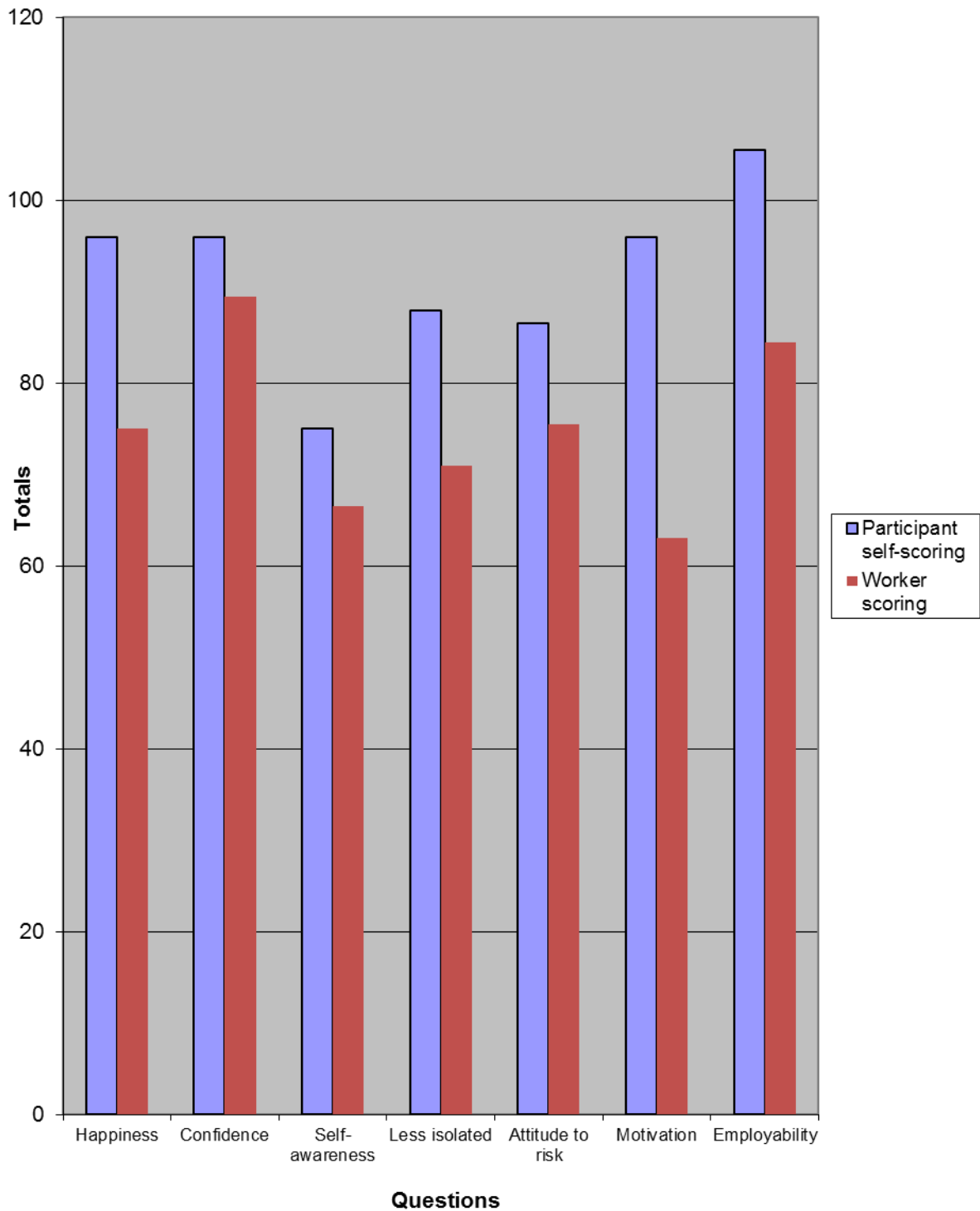
- Happiness
- Confidence
- Self-awareness
- Less isolated
- Attitude to risk
- Motivation
- Employability

We will analyse the consultation results for each of the five stakeholder groups, by examining evidence collected for each outcome:-

1) Young People

As outlined above, the young people created their own marking scheme for quantifying their level of change in each outcome area, as a result of their engagement in the project. The total change scores for the 16 young carers in the existing group, for each of the seven outcomes, are illustrated on the graph below, which also compares their own marks to those given by the acta worker. Most notably, the graph illustrates that overall, the scores for change in each of the seven areas are generally fairly similar, although participants have scored themselves very slightly higher than the acta worker on every question.

Total scores for each question



Good scores were achieved for all seven questions, with the totals ranging from 63 to 105. *N.B. If all 16 people had scored the maximum change of 10 (i.e. 0/10 at the start and 10/10 now), the maximum score for any one question is 160 (16 x 10); and*

no change at all would be indicated by a score of zero. The largest areas of change are in employability (participants scored themselves highest) and in confidence (acta worker scored them highest), but there is a considerable level of change in every area.

The evidence collected for each outcome area is detailed below:-

1) Happiness

Young people were asked to consider what makes them happy, and came up with a range of evidence as to how the Who Cares project makes them happier.

Firstly, they discussed the nature of participating in a theatre project, and the excitement, adrenaline and sense of achievement that this enables. They discussed how they enjoy having an opportunity to be someone else; imagining a character, and understanding that different person and their feelings. They agreed that by understanding the lives of others, and how they feel, it can help them to understand themselves better. They suggested that being creative can be an important release mechanism for them.

Secondly, group members stressed the importance of the weekly session, and how it is the one thing they have to really look forward to in the week. One group member explained that when she started, the weekly session was on the same day as her worst day at school, so it was like a reward for getting through the day. She also described how she used to really notice not having it in the long school holidays too. Several group members explained that having the weekly workshops to come to had kept them “ticking over.”

There was also some discussion as to how the friends they have made through the project have made them happier, and how being more confident enables them to improve their level of happiness.

2) Confidence

The young people were asked to consider how confident people behave, and also, what they do now, or would do now, that they would not do before they engaged with acta Who Cares?

The group agreed that confidence was the opposite of being shy; it was being more open, and that open body language is often a good indicator of confidence. However, the discussion very quickly progressed into how confident people can be annoying, as you can't get a word in, and that it is not nice to be over-confident. Confident people are not afraid to do anything, but they can often lack self-awareness. The group suggested they were comfortable with the project partly because they are all at a similar starting point when they join, in terms of low levels of self-confidence.

Group members offered a wide range of evidence as to how their confidence levels have improved as a result of their participation in the project. Educationally, they described how they are happy to offer opinions in lessons at school or college now. One group member explained how her face to face communication skills have improved, particularly at school, where she would never speak out before, and always sat quietly in the corner, refusing to speak. She had lacked confidence as a result of having English as a second language, but Who Cares had helped her to develop the confidence to deal with this. One group member even attributed the fact that she has learnt to drive and is about to go to university as direct results of her increased confidence gained through the project.

Once again, the participants discussed the importance of being given an opportunity to create and produce their own theatre, in this outcome area. They discussed the improvements in their levels of confidence in relation to their improvisation and performance skills, explaining how they are now happy to lead a bit more in a group, happy to improvise more different characters, or are more relaxed about performing. One young person stated that she now has the confidence to take a lead role in the next show, and perform on her own. Many described their raised confidence since starting the project by explaining that they are now able to perform in front of large audiences without getting shy.

The young people also described their increased confidence by describing how they are more relaxed about speaking to people now, than when they started:-

"I talk to random people now, and I can make a fool of myself without worrying about it!"

"I would of never spoke or acted in public, but I do tend to speak a lot in public now, and I am starting to love it."

"I actually talk to people now. I will get up on stage and do stuff."

"I had no confidence when I started, largely as a result of language barrier, as I was afraid of what people thought of me, and I thought that if I spoke, I might say something wrong."

The group's discussion about confidence and their views on the difference that their participation in the project has made to their levels of confidence are well summarised by one group member, in the following quote taken from the consultation:-

"Less confident people are often more thoughtful of others, but you need to have the confidence to say what you need to say and do what you want to do, and to speak out in front of others. I would not have had the confidence to speak out in front of others without acta. It also allows you to be yourself; when you take on another role, another character, it is an escape route, as it is easier to play someone else than be yourself, but it helps you to understand yourself better."

3) Self-awareness

Group members were asked to consider why they need Who Cares in their life? They were asked to think about why they first joined, and whether their reasons for

coming have changed at all; whether they are more aware of their own needs now than when they first started? Kate (apprentice worker) introduced the discussion by explaining that she only started at acta as a young teenager because the Young Carers support organisation pushed her to do it. However, over time her reasons for coming changed dramatically, and she remembers well that as a teenager she absolutely had to come each week, and would not allow herself to miss a session.

Most group members agreed that when they first came, it was as a break from their caring responsibilities and home situations, and whilst this remains important today, they now have additional reasons for coming. Participants appreciate the support they get from each other at their weekly sessions, which helps them to put their problems at home into perspective. They explained that when they first started, they were “not really bothered” about themselves, but that now they really value the opportunity and the challenge of creating & performing, and they have started to consider the importance of their own lives, and their futures. Group members agreed that they are much more aware of their own needs now; *“You get to know who you are and who you want to be.”*

4) Less isolated

The consultation approached this outcome area by asking the group to consider whether young carers feel more isolated than other teenagers, and whether there are any advantages to being a young carer?

Once again, Kate introduced the discussion by giving her own view that young carers are more isolated than other young people, but stressing that their particular issue is that they have no choice; they can't go out, whereas other teenagers can choose either to go out or to isolate themselves.

All agreed that young carers are more isolated, and gave a range of evidence of this. Some reported that they used to get bullied, which they believed was a result of their isolation. Others explained that young carers' families are often more isolated than other families, with many of the young people in the group caring for parents with mental health issues, who have become isolated themselves as a result of their mental health.

There was also some discussion as to the advantages of being a young carer, and group members communicated a positive attitude to being a young carer, largely as a result of their agreement that young carers are more aware and understanding of others. However, they also agreed that it was important for the isolation of young carers to be challenged by offering them more opportunities.

5) Attitude to risk

The group discussed their attitude to risk-taking, whether it is good to take risks, and what we mean by this? One group member suggested it means moving out of your comfort zone, and the group discussed how it can be positive to take risks. Various

people linked taking a risk to trying something new and therefore learning something. Comments included:-

“Acta helped me to look outside the box. When I started, just talking to people was a risk!”

“This is very much related to confidence. I have helped deliver a series of workshops for homecare, and spoken in front of large numbers of people at considerable length, which I would not have had the confidence to do without acta. Now I will at least consider taking a risk, and am able to think for myself.”

6) Motivation

We asked the group members to consider whether they are more motivated now than when they started, as a result of participating in Who Cares? We discussed that this motivation could be for something like leaving the house, or could be to participate in a specific activity. Activities that members listed they were taking part in as a consequence of Who Cares were:-

- acta helped me develop the confidence to choose to go on to college, and the motivation to take part in media workshops and to direct short films.(Other support organisations have also helped me to develop motivation a little, but would not have been to this extent without acta.)
- I am at college studying travel & tourism, and I also make time to see my friends. As well as acta, I have received support from other youth organisations, but without acta I would not have had the confidence and motivation to commit to other activities.
- I don't do other activities apart from acta, but I am more motivated to make the most of school opportunities e.g. acta encouraged me to do BTEC Drama.
- I think I may have gone to college anyway without acta, but I would not have chosen to do drama, and so would not have been as committed.
- Senior student at sixth form.
- If I could afford it, would love to do dance & singing lessons. As a result of acta, I make presentations at college, go to interviews, go out with friends and go on the bus on my own.
- Dance.
- I'm more interested in drama now and more motivated to pursue a career in it.
- I've helped start up an 18+ group for young carers. I'm way more motivated now than when I started. I'm going to Uni.
- I have taken up singing lessons since I have been coming to acta.
- More likely to try something new because of acta because they inspire you. I do dancing & singing now.

- I have been motivated to do singing, dancing, photography, and going camping.
- I do feel more motivated to go to school; my attendance has grown loads.
- I am more interested in drama and more willing to try things like singing and dancing because of coming to acta.
- I was motivated to go to college, although I no longer attend. I have done lots of talks for Young Carers e.g. a series of workshops for “homecare”, and I believe that I would not have had the confidence to do activities on this scale without acta. However, I continue to have periods when acta is the only activity for which I leave the house.
- Driving lessons.

7) Employability

We asked the group to consider how taking part in Who Cares has helped them to develop skills that will make them more attractive to potential employers. We discussed the skills that employers look for, and that going for an interview does require people to act the part of a particular character. Group members listed the following skills that Who Cares has helped them develop:-

- More confident to sell myself; feeling confident when going for interviews; confidence in leading and organising things; positive attitude; can do anything if I try.
- Verbal communication skills; speaking out in public; acting skills; expressing myself proudly.
- Arts award qualification on my CV.
- Team work skills; understanding other people’s opinions and perspectives; social skills.
- More motivated; effort.
- Commitment.

Additional evidence of change in each outcome area, and how long this change lasts, was collected through the four longitudinal interviews, as follows:-

Jenny, July 2010

Jenny was a member of acta's first youth theatre for young carers in Bristol over 10 years ago, joining when she was 11 yrs. Now 22 yrs, she lives with her four year old son in a small flat in North Bristol, in the same area in which she grew up, close to her mum, step dad and younger sister. Since leaving college, she has worked part-time whilst bringing up her son, working in a nursery and in various catering jobs, but recently began once again to work full-time as a carer for her mum, (whilst her step dad is working and her sister is at college.)

Jenny moved to Bristol with her mum and sister just before starting at secondary school. She cared for her mum, who had mental health issues, as well as her younger sister (5 years younger than Jenny). She attended a Bristol school, and soon began receiving support from a young carers support organisation, who suggested Jenny try coming along to acta youth theatre sessions.

In an interview with the acta young carers project worker, it was agreed that acta had probably had a greater positive impact on Jenny's life than on any other young carer that we have worked with over the last decade.

Jenny described herself when she began acta as extremely shy and nervous, always clinging to her mum, and not sure what to expect from a youth theatre project, as she had never done any performing arts before at all. She had no life of her own and extremely low self-esteem, as her only priorities in life were to care for her mum and to bring up her sister (she had ambition for her sister, but not for herself). She was not interested in making friends with her peers because she was embarrassed about her life, so did not want to share it with anyone else.

Jenny recounted that in her early teenage years, she would spend occasional weeks with her dad in the school holidays. (As the years progressed, the acta project worker supported Jenny as she confided in her as to the sexually abusive nature of her relationship with her father.) We noted the confidence and strength of Jenny today to be able to mention her dad in this interview.

Jenny began to explain the various impacts of acta on her; how her life changed as a result of her participation:-

- I soon started to make friends and feel more comfortable. I associated acta with my friends and time for myself. Workers were interested in me e.g. would comment, "New shoes? They're nice." It made me feel more like a girl and less like a robot. I did not enjoy being a teenager, as it meant being the person that people expected me to be. But at acta it was ok to be myself, to play and have fun, and I felt that I did look good.
- I met my best friend through acta, and we remain best friends today.

- I did my GCSEs and went on to college to do Performing Arts. I'm not sure that I would have done either without acta.
- We went on occasional residential trips away, which really helped to change my view of the world, broadening our horizons. We met lots of new people, and saw a variety of different shows / shared work / variety of creativity. Also great fun / the excitement of getting away. I felt able to leave my sister in charge, and give myself some time.
- Acta helped me to be proud of myself, which is hard to learn on your own. I needed acta to help me to understand myself. Now I know my faults and I understand them. I know who I am.
- We learnt to work as a team, to accept people for who they are, and that everyone is different, and we should not judge. These were important skills for my future work, where I had the skills and experience to lead a team of people.

Towards the end of the interview Jenny concluded that she was glad she didn't lead the life that she would have had to lead without acta. Her life is not an easy one – her son, her mum and her sister all come before herself and her boyfriend, which does not make a relationship easy, but she is happy and understands who she is. At the end of the interview we looked together at some of the photographs of acta shows displayed in her flat, and noted her gold arts award certificate that she achieved, proudly displayed, alongside the photos of her son and her acta friends.

Mark, July 2010

Mark started attending acta's youth theatre for young carers when he was 14 yrs old, some 8 years ago. He was attending Portway School, where he had done some drama, but his main reason for joining was because his friend, also a young carer at the same school, had recommended it to him. He was caring for his mum for most of his teenage years, alongside his two younger sisters.

Mark described his younger self as quite quiet and reserved, and even a bit nerdy and self-conscious; cautious to the point of paranoia. He had very few friends when he first started, and coming to acta made him happier because it provided an escape from his normal life and an opportunity to develop some close friendships. Mark recalls that he was encouraged to make an idiot of himself, and to come out of his shell. He had always had an interest in drama, but without his engagement in acta, would not have been able to achieve anything close to his potential.

Mark spoke lots about his increased confidence as a result of acta, recalling how it grounded him, and meant he was able to do things. In an interview with the acta project worker, she recalled how Mark found the confidence to come out as a young gay man through his work with acta, and became more secure about who he was. Although he attributes some of his confidence today to his years at college too, he considers that he would not have had the confidence to stick at his two years of college courses without the acta experience. He thinks he may well have dropped

out without acta, as he has always struggled to focus & work on something if he is not enjoying it, and acta helped him to develop his motivation and ambition.

In terms of employment, Mark had not really aspired to anything in his early teens, but he recalled how acta had been like a gateway for him, developing his ambition to go either into acting or to being a teacher. He was given an opportunity to work as an apprentice on another acta youth theatre session, and he recalled how this was the start of his ambition to teach.

He does not consider himself to be a natural leader, but feels that acta gave him the confidence to lead, and showed him how much he enjoys it. It also helped him to develop his communication skills, particularly with skills such as making eye contact with the person you are speaking to. Mark is currently working for Axa pensions, where he leads a small team of people, and is convinced that he would not have had the confidence and motivation to do a job like this if it had not been for his years with acta.

Towards the end of the interview we discussed Mark's attitude to risk-taking, and whether acta had helped him to develop a more positive attitude to taking risks. Mark wondered whether he had perhaps moved too far in the other direction, in that he had taken some risky and fairly immature decisions, such as quitting a job before he had something else to go to. He considered that as a young carer, you have to grow up fast, look after others, and put yourself on the back burner. He had been able to leave home aged 19 yrs, because his mum's health improved, and had perhaps understandably, used this as an opportunity to have some fun and take some risks. Now aged 22 yrs, he wonders whether he should try to grow up a bit?!

Julie, July 2010

Julie joined the acta youth theatre for young carers 9 years ago, when she was 14 yrs old. She cared for her mum. It was just the two of them. The young carers support organisation recommended Julie join acta, as she was keen to act, although she did get very nervous. (Julie's mum had been an actor, and had encouraged Julie to pursue ballet and acting interests, but could no longer afford to pay for her to take part in most groups.)

Julie enjoyed drama at school, but could not always relate to the scripts of the shows they were given to do. She enjoyed acta because the group got to pick what they did, so it gave her a wider perspective about what drama can be. Without the acta experience, Julie thinks she may well not have chosen to study drama at college, and so would not have enjoyed college as much, and would probably have dropped out.

Julie recalls the success of the acta experience for her was the fact that all the young people taking part were young carers. Although they did not always talk about being a young carer, everyone just knew. In particular, she remembers a residential trip to

a youth theatre festival, where they got to see loads of shows, as well as have a holiday.

The major outcomes for Julie were:-

- Friendships – Without acta she would not have met her best friend, who she remains best friends with today.
- Fun – time for myself.
- Confidence boost – She was already doing drama, but did not really believe she was very good at it.
- Motivation & commitment – Became motivated to pursue acting work, including work as an extra.
- Positive attitude to taking a risk.

Julie became a young mum when she was 17 yrs old, and started living independently at this point. (Although she still occasionally cares for her mum, she no longer lives in Bristol, so Julie is not able to see her very often.) Julie used the “care to learn” nursery scheme to complete three years at college, as a mum. She is now a mum of three, and also works full-time in a care home for older people. She lives with her boyfriend, who works in the same care home, in North Bristol, close to the area in which she grew up.

Kate, July 2010

At 15 years old, Kate was the oldest member of acta’s first young carers youth theatre 11 years ago. Now 26 years old, she works as an apprentice drama worker on the current Who Cares project, and has a full time job in a day care service for older people. Kate continues to live at home with her dad, for whom she is the only carer.

Kate was originally referred to the young carers support organisation through Barnardos, just a few months before joining acta, as she was caring for both a disabled brother and dad, after her mum left home when she was 12 years old.

In her early teens, her social worker supported her to try a couple of activities outside of home and school, but with little success. She went to a local weekly girls club, but it cost her most of her pocket money to go, and there was not really anything there that interested her. She had expressed an interest in drama, and went to two alternative schemes, but hated both. She explained that the other young people there were mostly fairly confident, and from completely different backgrounds to herself. She attended one of these only once, where she was asked to be a bumble bee. At the second she felt that the teacher had favourites, from the way that she spoke to the group, and although she committed to attending a few sessions before giving up, she dreaded every one of them. She notes that just because a person is confident, it does not necessarily make them a good actor.

Kate recalled that she had a real teenage desire to fit in, but was easily bullied at school, because she was neither particularly academic, nor one of the cool, naughty ones. When she joined the young carers support organisation, she gained a certain amount of confidence. However, it was not until she started with acta, that her confidence increased dramatically. Although a little nervous, she was excited at the first session, as she had already met some of the other young carers who were going to be there. She was a little apprehensive, as she was not sure what to expect of the acta project leader, as at school, she was doing GCSE Drama, but did not like the teacher. She explains that developing their own characters and plays at acta, rather than working from a script that had been done before, meant there was no comparison with how other people had played the part better. Rather, acta workers ensured they gave advice on how to develop a character further, and then plenty of positive feedback, so that they believed they could do it well.

Confidence was the most important factor for Kate. She explains that acta gave her the confidence to make new friends at college, and to go out and have fun. She also developed the confidence to stand up for herself; to say what it is she is thinking, as it is normally what everyone else is thinking too! She started with a desire to fit in, but acta helped her to learn that it is not all about the latest trainers! She feels she has also developed her self-esteem, and that acta has given her opportunities to ensure she can be proud of her achievements. However, she has also learnt to cover up her true feelings in order to present professionally as a carer, and sometimes questions whether her self-esteem is very good.

Kate certainly believes that acta is responsible for ensuring she secured her job caring for older people. She explained how the facilitation skills that she learnt at acta help her in her work today; that in order to promote her clients' independence, you ensure they take ownership and control of the tasks themselves, rather than doing it for them.

And finally, acta opened up Kate's eyes both to the possibilities of the theatre world, and to the world in general. If it had not been for her acta experience, Kate believes she would probably be working in Asda.

Observations

Through the stakeholder consultation discussions, with both past and current group members, it became clear that there is considerable cross-over between all of the project's primary outcomes, but that there are two major secondary outcomes for the project in terms of changing young people's lives: improving mental health / emotional well-being, and increasing employability.

The longitudinal study was particularly useful in analysing the chain of outcomes or theory of change for the young people, as the past participants were able to look back and see how the changes they experienced through their project engagement impacted onto their future lives e.g. increased self-awareness as a teenager helping them to achieve emotional well-being as young adults.

2) Project Facilitator – acta Senior Drama Worker

As noted, this SROI is not concerned with any material outcomes for this stakeholder. The project facilitator was interviewed with a view to use her knowledge of the service users to further examine the impact of the seven primary project outcomes, on the two secondary outcomes for the project, which had been identified through the consultation with young people.

As mentioned above, the acta worker's scores for change in each outcome area for each young person were largely very similar to the scores the young people gave themselves, with very good levels of change in each of the seven outcome areas, thus providing further evidence of the changes outlined in more detail above.

A detailed further analysis of the consultation data with the acta worker showed the following results for the 20 young people involved, as regards the two main secondary outcomes identified:-

a) Improving mental health / emotional well-being

13 out of the 20 had provided evidence that without engagement in Who Cares, they would need support for mental health problems in their adult lives. Of these 13, evidence suggested that without engagement in Who Cares, at least two people would need support for severe mental health problems.

b) Employability

13 out of the 20 provided evidence that without engagement in Who Cares, they would not have gained the skills necessary to secure adult employment.

3) Participants' families

The results from the family questionnaires provided further evidence of change in most of the outcome areas that further endorse the findings described above. Increased self-confidence and self-esteem through the opportunity to create and perform their own theatre show was identified as the primary outcome; (selected by 11 out of 12 families, when asked to select 4 out of the 8 outcomes listed in which they had most noticed change in the young people.) Over half of the families also selected improved emotional well-being and mental health, social skills and the opportunity to make new friends, and motivation to make positive life choices, as the main changes that they had observed.

Interestingly, no families at all selected improved educational attainment, despite the fact that the young people themselves had marked their improved educational and employability skills as the most significant change. From the perspective of the family, the opportunities that Who Cares offers the young people are so completely separate from their schooling, and are often so much more positive than their

experience of the education system, that they do not link the project outcomes to educational attainment and employability.

It is also significant that the family consultation was conducted via questionnaire, and the consultation with existing group members was via a group consultation session and face to face interviews, so that young people were given more opportunity than their families to make links between outcomes. For instance, in the group consultation session, young people discussed how increased confidence was an important factor in education and employment. The young people were therefore given more opportunity to examine the holistic nature of the project and its impact of their future lives, whilst parents looked more at how the project supports them in their role as parents of young carers, offering opportunities that they are not able to offer as a result of their family caring responsibilities.

The family questionnaire also asked for evidence of how they know the outcome changes they indicated have been achieved, and whether there were any other outcomes they had noticed which we had not included in our seven outcome areas. The following additional evidence was collected for each outcome area:-

1) Happiness

- Seeing the interaction between group members and with the acta workers – they had time off for fun, and were able to have fun.
- It gave her the confidence to be herself and join in more, as it was ok to have fun.
- As parents, we are not able to offer all the opportunities that other children get, as a disabled sibling and mum so things like shopping, day trips, camping etc. are things we cannot do as a family, but he has done with friends and through this project.
- More able to talk about emotions, and as a result, is happier and calmer overall.
- More able to express herself emotionally.
- Makes parents feel more involved – young people have one to one support with the project leader, if can't speak with parents – helps parents.
- My daughter is more relaxed and happy after coming from sessions.

2) Confidence

- Opportunity to perform to others in the group, and to an audience, has resulted in improved self-confidence & self-esteem
- The bond between the group and the improvement in the quality of their theatre performances is evidence of the team-building and increased confidence.

- She was so lacking in self-esteem and confidence, but now is a different young lady – matured with so much confidence, that she will need in her future life.
- Has become more assertive.
- Has more confidence since starting acta, as she has started talking more in school.
- Went to London with a friend... booked own train tickets and made all their own arrangements.
- She is more outgoing and confident as before attending acta she was very quiet and would never speak up in a crowd.
- Has been able to come out of her shell more from starting acta.

3) Self-awareness

- More aware of own strengths & weaknesses.
- A meeting place in a safe environment; has shown how to communicate better with peers.
- More aware of siblings' needs.
- More body confidence.
- More mature.
- It gives her a sense of belonging; somewhere else as well as home.
- The safety net around acta showed them ways forward as developing teenagers in communication, emotions and personal development of their characters in a safe environment with no pressures.

4) Less isolated

- Opportunity to make new friends - time in a safe environment to develop social skills - time away from caring responsibilities
- She found it hard to make friends, but now has no problem speaking out and mixing with other people.
- Happier to go out of the house now. She goes out to socialise with other group members and enjoys it; not a chore, like it used to be.
- Has made new friends, which has made her want to make friends elsewhere.
- She has friends who understand her situation that she did not have before.
- Being with other young carers reduces isolation, and takes the stigma away, allowing them to share problems that they can't share with family.

5) Attitude to risk

- Before, she was not too keen to meet new people or socialise with them, but now she is open and willing to take risks in life.

- More forward thinking; has high aspirations and believes he can achieve his goals.
- She tries to do the best she can now e.g. at a recent sports day, and she had never done a sports day before.

6) Motivation

- Is now more involved in other community activities.
- She is more responsible and more self-motivated.
- She is more likely to try something new because of the support that Who Cares gives her.

7) Employability

- Going to university.
- Going to college.

At the end of the questionnaire, parents were asked about any negative outcomes, such as the family finding it difficult to cope when the young person was away from home to participate in the project? No negative outcomes were reported.

One respondent used it as an opportunity to provide feedback as to how the project had also been positive for the family, as it had given the disabled father some ownership, providing something that he was able to make happen or allow his daughter to do:-

Her father (the cared for) endorsed her attendance to enable her to have time off from the pressures of being a carer. There were no negative impacts as other family members were able to step into the breach! This was a positive thing that her father was able to do when he was not in control of his own illness.

All of this data from parents provided us with evidence that in addition to our expected well-being and life skills outcomes, for the stakeholder families, Who Cares was also providing monetary value as a leisure activity for young carers who needed a break from their caring responsibilities. Furthermore, there was evidence of improved family cohesion e.g. more aware of sibling needs (see above).

4) Referring agencies

Princess Royal Trust for Young Carers

The acta youth theatre service for young carers was originally developed in partnership with Off The Record in B&NES and then with Barnardos in Bristol. In 2002, the Princess Royal Trust took over support services for young carers in the City from Barnardos, and acta began working with them for the first time. In the first year, the project was delivered more as a partnership, with Princess Royal Trust coordinating & funding transport for young carers to access the youth theatre, as well as providing support workers to come to the acta centre to meet with young people on session nights. However, following some feedback from youth theatre members, both organisations agreed to separate their work, so that support sessions being offered by Princess Royal workers no longer took place at the acta centre, thus allowing the young carers to focus on the acta project on youth theatre nights, with support from their peers and acta workers leading the session as necessary.

Acta then secured project funding itself to cover transport costs for the young carers, and developed further project proposals for the Who Cares group, based on the needs identified by existing group members and referring agencies. The acta project workers would continue to communicate with support workers at Princess Royal Trust (and with those at other referring agencies), as appropriate, and most importantly, would continue to take referrals of young carers from Princess Royal Trust. Princess Royal Trust would continue to accompany new referrals to their first session, if necessary, and to organise groups of other young carers to come along as audience for productions.

Princess Royal Trust are only able to work with a small percentage of the young carers in Bristol, as their current capacity is 45 families total (normally about 55 – 60 young people, mainly aged 8 – 18yrs.) They therefore aim to engage other agencies in supporting young carers, as appropriate, e.g. education, health organisations, youth service etc and they are particularly focused on improving the understanding of and support for young carers in schools. They organise activities to enable young carers to support each other, which includes online support.

We discussed how the acta youth theatre service differs from the other activities and services available to young carers in the City. Princess Royal Trust provided the following evidence as to why they value the acta service:-

- Acta is able to meet an unmet need in that we will accept new young carers with whom Princess Royal Trust does not currently have the capacity to support.
- Acta staff are skilled and experienced in understanding the specific needs of young carers. For instance, young carers will naturally fall into the role of caring for others in the group, rather than putting their own needs first, and acta workers understand this, and will work to ensure group members focus on themselves as well as others.
- Continuity, consistency & security of the service, which offers a regular weekly ongoing activity, enabling a relationship of trust to be developed between young carer and acta worker.

- The youth theatre activity that acta offers requires the young people to work together as a group on an on-going basis, so that they develop a group responsibility and support each other. This is unusual in a youth setting, where activities frequently can mean that young people are left to their own devices, allowing cliques to form. The low confidence levels of most young carers means that more traditional youth service activities can be at best, unsuitable.

We went on to discuss the changes that Princess Royal Trust (PRT) staff have observed in young carers they have referred to acta over the years. We began by agreeing that it is not always easy to get young carers to choose to engage in the activity, as they cannot imagine themselves performing on stage in front of an audience. However, it is often their peers who help to encourage them to come along for the first time, as they build friendships with other young carers who already come to acta.

1) Happiness

We recognised the cyclical nature of emotional well-being for many of our young carers, who care for single parents with their own mental health issues, and are therefore more likely to develop their own mental health issues*. We discussed the importance of increasing young people's confidence, to ensure they are better equipped for looking after their own emotional well-being. PRT note the "buzz" of the theatre performance that acta is able to offer the young carers, and the impact of this on their confidence and emotional well-being, so that when they are feeling down, workers can remind them of what they achieved and how they felt when they performed in their show.

**N.B. Whilst there is little research evidence of long-term emotional or mental health problems as a result of caring, Princess Royal Trust collect indicators that this is the case regularly. An article in Wales earlier this year, reported a study based on information from the Welsh Health Survey in 2008, which showed 12% of carers aged 16-44 yrs were being treated for mental illness, compared to only 6% of non carers; (Mental health fears for young carers, Feb 26 2010 by Graham Henry, Western Mail.)*

2) Confidence

PRT agree that this is the most apparent change in our young carers, and so are not surprised that the stakeholder consultation has shown this to come out so highly. They note that it can take years for a young carer to develop the confidence to speak out, but that this happens so quickly when they succeed in getting them to choose to engage in acta. Young carers who have engaged in acta are much more able to express their needs.

3) Self-awareness

Once young carers are more confident and happier, it is then not so threatening for them to think about their own needs. PRT note how much more difficult it is to talk

to those who are not engaging in acta, about how they are doing and what is going on for them. *"We know that if they could bring themselves to come to acta, they would get so much out of it."* Who Cares also supports them to think positively about identifying as a young carer; as acta is not seen as a support organisation for young carers i.e. problem-solving, but an arts organisation that gives opportunities to different groups of people to create a show i.e. we need you to help us to put on a show.

4) Less isolated

We discussed the complications of young carers using public transport to engage in other activities, and agreed that whilst it is possible to support some, it is not always possible for a variety of reasons e.g. over-protective parents, lack of time due to caring responsibilities.

5) Attitude to risk

For most young carers, the risk of failure is a strong one, and they will choose not to do something, rather than fail. The popularity of the youth arts award qualifications that acta offers helps them to develop a more positive attitude to risk.

6) Motivation

Despite motivation being a key area of concern, PRT have noticed that young carers who have come through acta usually feel more able to move on with their lives, outside of their caring responsibilities, and for themselves e.g. learning to drive, going to college or university.

7) Employability

Although not all, PRT agree that the majority of young carers engaging in acta are employable as a result of their engagement in the service, and that this is directly related to their improved emotional well-being, confidence and self-awareness. They are all more able to sell themselves, and most are also more motivated to do it.

Shelter Children's Service

Acta has been working in partnership with Shelter's children's service in Bristol for the last eight years, focusing largely on a project outside of the scope of this analysis, which is an annual "play in three days" project delivered at the acta centre in the Easter holidays. Shelter coordinates and funds the project, which acta delivers at a reduced rate, and staff from both organisations work together for the three days to deliver the project, with acta workers leading the arts project, and Shelter workers caring for all other participant needs e.g. transport, liaising with participant families, providing breakfast & lunch, and supporting the children and young people to get the most out of the project.

One of the additional project outcomes is that it offers participants a taster of acta's work, and occasionally Shelter workers have therefore been able to refer young people onto regular weekly acta youth theatre activities; including the Who Cares project. Four of the existing Who Cares group are young carers who have been referred by Shelter.

We discussed some of the feedback that young people and Shelter workers have given on the value of acta's method of working with young people:-

- When parents have mental health needs, and are up and down, it is important that acta can provide the long-term security of an adult who cares & values them.
- Young people report the most important thing about acta is having an adult who will listen and care for me. The fun activities we do are the second most important thing.
- We don't feel silly; they take us seriously.
- They are not like teachers at acta.
- We should not underestimate the value of our service to the parents and the whole family.
- The theatre project gives young people a voice, ownership of the project, and therefore increases their self-worth and their ability to care about themselves.
- We should consider the value of our work in terms of "breaking the cycle," to consider what we prevent, and include the children of our participants.

5) Local Authority

An analysis of the existing two year contract with the local authority to deliver the project provides the following evidence from which to forecast.

The contract agrees that by the end of the two year period, 20 young carers will have identified themselves as a youth theatre member. They will have developed their ability to communicate their ideas through speaking to a large group, to their peers and to people in authority. They will also have demonstrated increased confidence and self-esteem through presentation or performance of their own work and will have collaboratively developed a progression plan; and finally, they will have demonstrated increased motivation to acquire new skills through their sustained engagement, including ten of them successfully achieving Youth Arts Awards.

A mid-term review (end of year one) of the delivery of the contract shows the project to be on target, with considerable evidence noted on the progress of each young carer towards achieving each outcome.

The Local Authority are therefore able to meet their strategic objectives in ensuring positive outcomes for these young people.

Financial Proxies

In order to identify financial proxies, to attach a value to the changes and two main secondary outcomes that we have forecast for young people as they become young adults, we began by looking at the costs of mental health services.

In “Hidden costs of mental illness”, The British Journal of Psychiatry, December 1, 2003; 183(6):477-478 Martin Knapp argues that it is important to consider the wider impacts of mental health beyond health costs, such as loss of earnings. We too will consider these wider impacts in terms of the welfare benefit savings and increased tax revenues from employment gained later, but first, to look at the health costs themselves.

The PSSRU cost book outlines the following:-

Counselling services in primary medical care - may be concerned with addressing and resolving specific problems, making decisions, coping with crises, working through conflict, or improving relationships with others. The work of most counsellors in primary care is generalist and is not necessarily linked to any diagnostic categories. In generic counselling, a broad range of techniques is used to help the patient. In specific counselling, a specific model such as psycho dynamic counselling or bereavement counselling is used - £32 per hour; £42 per hour of client contact; £67 per surgery consultation – Research suggest the mean number of sessions is 7.

We judged that this level of mental health support was most appropriate to apply to the 11 young people for whom we were forecasting that without engagement in the service, they would need support in their adult lives. We can therefore forecast the value for this SROI as follows:-

11 (number of people) x 7 (mean number of sessions) x £67 = £5,159

We further judged that the level of support needed for the 2 out of 20 young people whom we forecasted would need higher levels of mental health support in their adult lives was equivalent to a targeted CAMHS team:-

£4,648 average cost per case per team

In terms of proxies for the other main secondary outcome for young people, that they become employable, and therefore generate increased tax income and reduce welfare benefits, we looked to the SROI project database to identify the following financial proxies:-

- Net reduction in benefits due to potential Job Seekers Allowance recipient achieving full-time employment.
- Increased income tax revenue – income tax on average earnings.

A final financial proxy was needed for the referring organisations, for the outcome identified through the stakeholder consultation with both families and referring agencies that without this service, the young carers would need an alternative leisure activity to be provided, to give them a break from their caring responsibilities.

We recognised the complications in identifying the most appropriate alternative activity to cost here, as there is such a wide range of possibilities, with such a wide range of price variances. However, we considered a trip to the cinema would be universally recognised as an appropriate leisure activity for young people, and was also comparatively conservative in terms of cost. We further considered how much should be included for travel and refreshment costs for the trip, and calculated that the £10 per person charge would reasonably cover the cost of a ticket plus a contribution to group transport and refreshments.

It should further be noted that whilst this alternative provides an indicative cost, and would reduce social isolation, such an activity is unlikely to support young people to achieve the range of outcomes identified through the consultation.

Deadweight and displacement

In order to establish whether young carers may have developed naturally without engagement in the service, we included in the consultation with stakeholders, discussions as to whether young people naturally change as they mature through their teenage years, in terms of our target outcomes e.g. better communication skills.

We needed to consider whether some of the young people would have reported some of these changes anyway, without engagement in Who Cares, over a two year period? However, all the evidence collected from stakeholders was clear that in fact, the reverse was true, in that young carers will naturally lead such isolated lives, that without prevention and early intervention initiatives such as this, these outcomes would not only not have been achieved but also, evidence suggests things could very easily escalate, as the young person matures but still does not have important life skills, such as confidence and communication skills.

The stakeholder consultation with referring agencies was particularly useful in assessing deadweight, as they have comparison groups of young carers they work with who do not engage in the acta service. We were therefore able to collect some clear evidence that young carers who had not benefitted from the Who Cares service intervention had not achieved the young person outcomes anyway.

We are therefore able to forecast a minimal deadweight calculation for the two years of our SROI, and agreed a nominal 2% level.

In terms of displacement, however, the counting of increased income tax contributions and reduced welfare benefits for the secondary outcome of young people becoming employable, does have a high displacement rate, as they will be securing jobs that most likely are now denied to someone else who could have made similar contributions. Of course there is also an argument that some of these young people may also be in a position to create their own employment opportunities, and add to the total number of jobs available in the economy.

We therefore decided to make a displacement calculation for the young people employment outcome of just less than one third, and agreed 30%.

Attribution

In terms of other organisations contributing to the same project outcomes that we were attributing to our service, our consultation results note that three of the 20 young people reported the changes they had evidenced as a result of engagement in Who Cares should not be accredited solely to acta, but were also a result of support from a second organisation. They did not consider this to be duplication of support, but rather, they had benefitted from the joint approach. Consultation with two referring partner organisations, Shelter Children's Services and Princess Royal Trust, provided no evidence to the contrary, with both partners recognising the value of the continuity, security and trust that the weekly service offers young people as added value to the support their own services give to the families of young carers.

We can therefore reasonably calculate an attribution value (% of the outcome that is not attributable to Who Cares) as follows:-

3 out of 20 young people included in consultation attributed outcomes to other organisations as well as the acta service = 15%

These 3 people attribute 50% of the change to Who Cares, and 50% to other organisations, so $0.5 \times 15\% = 7.5\%$ attribution value.

We also considered an attribution calculation regarding the referral of young carers to our service by other organisations, as it could be argued that without these other professionals to refer young people to us, either the cost of our service would need to increase in order that we could find young people ourselves, or the quality of our service would be reduced, as we would not have as many young carers referred to us. However, upon discussion with some of our stakeholders, we agreed that in reality, if some, or even all, of the other organisations offering support to young carers in the City were not there, our service may equally find it receives more referrals, as it may well be easier for young carers to be directed straight to our service. We therefore agreed not to add an attribution value for this.

Drop-off

In terms of how long the outcomes for young people last beyond their engagement in the project, our stakeholder consultation, and in particular, the longitudinal study with former participants, provided a wealth of evidence to indicate that there would be no change to the impact of the project in future years, as the primary outcomes were so life-changing. Thus our initial response was to estimate a drop off of zero.

However, after some further consideration, we noted the importance to young people of the security that attendance at weekly sessions offers the project participants, and questioned whether a small proportion of young people may lose some of the impact when they lose engagement in the project.

We concluded that a 10% drop off each year should be introduced for each year after the activity, for each of the outcomes for young people.

Sensitivity analysis

The above calculations were considered in some detail at a meeting of all four of the voluntary sector organisations working with Bristol City Council to complete SROI studies. Some minor changes were made to the calculations following these discussions with the group, and the group then agreed that the judgements were fair, and gave their validation of the acta SROI.

End result

Our SROI result is a social return of £15.88 for every pound invested.