

TimeBank
Carers Together Evaluation
Final report
January 2015

“Knowing that someone who understands and is there to offer help and support has been invaluable to me, it makes me feel much less alone.”

“Having a mentor has been a lifeline to me.”

“[My mentor has] given me hope that no one else has given me before. I was very down...she showed me there was light at the end of the tunnel.”



Evaluation Services

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Executive summary

Introduction (Section 1)

In 2013 TimeBank, on behalf of TimeBank and Carers UK, commissioned Cloud Chamber to conduct an evaluation of the Carers Together project. Carers Together is funded by the Big Lottery Fund's Reaching Communities programme and aims to improve the lives of carers by providing them with online and face-to-face mentoring. It is intended to reduce social isolation, improve emotional well-being and help carers cope with the stresses and strains of caring. The evaluation ran from July 2013 to December 2014.

The evaluation was expected to address the following key questions:

- What are the long term effects of the project on the lives of those involved?
- How did the project's processes and support mechanisms perform from the perspective of its participants?
- What difference has the project made?

The evaluation interviewed 36 mentors and mentees in two waves during 2014 using a mixture of telephone and email interview approaches.

Motivation, recruitment and training (Section 2)

Mentees came to the project from a variety of backgrounds and caring experiences. The majority were current carers for close family members who had a wide range of needs. Mentees' motivations for joining the project included addressing social isolation; seeking emotional support; learning coping techniques; and accessing information or guidance about a specific issue (such as housing). Having someone to talk to beyond their normal circle of family and friends was important: mentees worried about the burden they placed on those close to them, and wanted to speak to people who were better-placed to empathise with the difficulties of being a carer.

Mentors commonly said that their interest in mentoring stemmed from wanting to support carers in a way that they had been supported (or would have wished to have been supported) in their own care roles. They recognised the challenges faced by carers and felt that they had useful knowledge and experience to share. Mentor training was well-received. Mentors and mentees thought that they had been well-matched by the project, and that initial introductions had been well-managed.



The mentoring experience (Section 3)

Those who took part in online mentoring generally found it to be an intuitive and positive process. Mentors and mentees found the process flexible, allowing them to send a message whenever they wanted and giving them time between messages to reflect and articulate their thoughts clearly. They also appreciated the anonymity that online mentoring afforded them.

Participants did highlight some limitations with online mentoring. Conversations could become disjointed if there was too great a gap between messages, and some participants said that they would have preferred a more immediate means of communication, such as online messaging. Mentors said that it could be harder to maintain focus using the online system compared to a face-to-face relationship, and the lack of visual cues could make it difficult to interpret how a mentee was really feeling.

Face-to-face mentoring also received positive feedback from participants. Mentees said that it provided them with an often welcome opportunity to leave the caring environment and to have a degree of social interaction.

Outcomes for participants (Section 4)

Mentees reported a number of areas in which mentoring had helped them, including:

- Improved emotional resilience, providing an outlet to express their frustrations, and tackling feelings of guilt
- Better personal management, such as learning to relax and reflect, and reducing social isolation
- Specific knowledge and support, for example help with debt, organising care packages and addressing housing problems

The development of coping strategies appears to have been important in ensuring that the benefits of the mentoring process continue for mentees beyond the lifetime of their mentoring relationship.

Mentors also said that they benefited from the mentoring experience. They particularly enjoyed the satisfaction of knowing that they had been able to help other carers. In some cases, it also helped some to build their self-confidence and develop specific skills, such as in counselling.

Conclusions and recommendations (Section 5)

Carers Together has operated very effectively as a scheme, based on the very positive comments of its participants – mentors and mentees alike. The project team has been very successful in administering the scheme: providing the training that mentors require and matching them with the appropriate mentee. While this has not worked in every case, the occasions where the match has not worked have been few.

Carers Together has demonstrated that online mentoring, as a process, can be used effectively to support carers. But the mentoring mechanism needs to suit the participants. A face-to-face mentoring alternative is likely to remain important for those who are unfamiliar with using email or other electronic forms of communication.

Some mentors and mentees speculated on the benefits of having a more immediate alternative to online mentoring, such as telephone mentoring or web chats. While we can see that these would overcome some of the limitations of the project's current online system – allowing mentees to get an immediate supporting message from their mentors at a particularly difficult time, for example – we would be concerned about the burden that this would put on the mentors. With such a system, they may feel that they are constantly 'on call'.

The project has delivered a wide range of benefits to its mentees. We have detected no significant differences in the outcomes for online and face-to-face mentees except one: the face-to-face experience, by its very nature, has been better at tackling carers' social isolation.

The project has delivered longer term benefits especially where mentees have been given coping strategies by their mentors, or where their specific issues have been addressed. For some, however, the need for a sympathetic ear remains. This reinforces the need for mentors to consider at an early stage in the relationship how they intend to bring the relationship to an end, with a specific focus on building the resilience of their mentees to cope on their own, either through tips and strategies or by signposting them to other support.

1 Introduction

1.1 Overview

TimeBank is a national volunteering charity, which recruits and trains volunteer mentors to tackle complex social issues. In the Carers Together project Timebank partnered with Carers UK, which is a charity led by carers, for carers.¹

The Carers Together project aims to improve the lives of carers by providing them with online and face-to-face mentoring. The intention of the project is to reduce the social isolation of carers, improve their emotional well-being and help them cope with the stresses and strains of caring. It is funded by the Big Lottery Fund's Reaching Communities programme.

In 2013 Cloud Chamber was commissioned to conduct an independent evaluation of Carers Together. The evaluation ran from July 2013 to December 2014. Figure 1.2 provides a logic model for the project.

The evaluation was expected to address the following key questions:

- What are the long term effects of the project on the lives of those involved?
- How did the project's processes and support mechanisms perform from the perspective of its participants?
- What difference has the project made?

This report provides the final results of the evaluation.

1.2 Approach

The evaluation fieldwork has focused entirely on gathering qualitative evidence through interviews with mentors and mentees. Selection of the interviewees was conducted by TimeBank. The evaluation is intended to illustrate the potential benefits and limitations of mentoring for carers; the size and selection of the sample is not intended to be statistically representative of the entire cohort.

¹ TimeBank: Registered Charity No.1073831 (England and Wales) and SC042413 (Scotland) Company limited by guarantee registered in England and Wales no. 3695114; Carers UK: Registered charity number 246329 (England & Wales) and SC039307 (Scotland). Company limited by guarantee registered in England and Wales number 864097

TimeBank identified 40 mentors and mentees who consented to be interviewed. In the majority of cases, these were provided as pairs (i.e. we spoke to the mentor and their mentee). Participants were interviewed in two waves:

- Wave One: February to April 2014 – 20 individuals identified, of whom 18 were spoken to
- Wave Two: October to December 2014 – Wave One individuals were re-contacted for a second interview, and a further 18 (of 20) new participants were interviewed for the first time.

Where individuals were not interviewed, this tended to be due to the personal circumstances of the mentee or mentor. In all cases we would try to set up an interview several times, but avoided putting undue pressure on anyone to participate.

TimeBank specified that the research approach should include the option of email interviewing, given that time is a valuable commodity for carers. This involves the exchange of emails, with each exchange focusing on a single evaluation question. Figure 1.1 provides a summary of the fieldwork volumes.

Figure 1.1: Research fieldwork

Number interviewed at least once	Number interviewed by phone	Number interviewed by email (number of emails exchanged)
36	12	24 (278)

1.3 Anonymity

Some interviewees were understandably concerned that their views and stories be treated in a sensitive manner, and that their identities should be protected. We have therefore taken the necessary steps to ensure that their anonymity is preserved in this report.

1.4 Acknowledgements

We are very grateful to all those people who gave their time to speak to us for this evaluation, in particular the carers themselves.

Figure 1.2: Evaluation logic model

Rationale: The justification for intervention	Objectives: What the project intends to achieve	Inputs: The resources that are required	Activities: What the project intends to do	Outputs: The volume of project activities	Outcomes: The immediate difference made to beneficiaries	Impact: The knock-on benefits to beneficiaries, and others
<p>Caring can have a significant negative impact on carers' lives, e.g. social isolation, financial hardship and poor health</p> <p>Existing models of support do not suit all carers, especially those juggling care and other responsibilities (e.g. work)</p> <p>Mentoring potentially provides a cost-effective, flexible and non-intrusive means of support</p>	<p>Reduce isolation and improve self-esteem among carers as a result of project support</p> <p>Improve carers' quality of life through increased uptake of health services, social services and benefits</p> <p>Improve the coping skills of carers through sharing knowledge and experience</p> <p>Renew carers' personal aspirations and increase uptake of development opportunities outside of caring</p>	<p>£256,273 from Reaching Communities</p> <p>In-kind support from mentors/ project volunteers</p>	<p>Project management and administration</p> <p>Mentor and mentee recruitment and selection</p> <p>Mentor training</p> <p>Mentoring</p>	<p>370 people provided with mentoring support</p>	<p>For mentees:</p> <ul style="list-style-type: none"> - Improved self-confidence - Improved emotional resilience - Better personal management - Specific knowledge for carers <p>For mentors:</p> <ul style="list-style-type: none"> - Personal development 	<p>For mentees:</p> <ul style="list-style-type: none"> - Access to/support from health and social care services - Improved employment prospects - Improved financial circumstances - Personal development - Better caring skills - Increased social engagement - Improved health and wellbeing <p>Wider impacts:</p> <ul style="list-style-type: none"> - Improved standards of care - Treasury (financial) impacts - Health and social services resource implications - Benefits to TimeBank and Carers UK (profile, influence, fundraising, etc.)

2 Motivation, recruitment and training

2.1 Introduction

In this section we provide participant feedback on the ‘front end’ of the project, covering the motivations for participation; recruitment; matching; and, in the case of mentors, the training provided to them by TimeBank.

The text boxes in this section and throughout this report contain relevant anonymised quotes from the research participants themselves.

2.2 Initial contact

Mentors and mentees described a range of different ways in which they had found out about the project. The most common source of information for mentees was via email or other communication from Carers UK; for mentors it appears to have been a Carers UK newsletter. Other sources include the Do It volunteering website (for mentors), and online search results (mentees).

2.3 Mentee background and motivation

Mentees came to the project from a variety of backgrounds and caring experiences. The majority were current carers for close family members with a range of needs including dementia, learning disabilities, physical disabilities and substance abuse. Many were struggling with their own problems as a result of their caring roles, to do with financial security, for example, or mental and physical wellbeing.

The motivations for mentees getting in touch with Carers Together can be grouped under a few headings:

- Dealing with the social isolation of being a carer, not being able to go out as much as other people, often exacerbated by depression and low mood

“I didn't have anyone to confide in about my caring role and the ups and downs that come with that.”

“I wanted guidance and to make something for myself in my own life, which I have struggled with since I have been a carer.”

“I was particularly keen to “chat” about what the future holds...I thought it could be helpful to be able to talk about what options there are and so on, from someone who had been through the process already.”

Mentees

- Seeking emotional support and validating the frustrations they were experiencing in their caring roles, frustrations that were often accompanied by feelings of guilt
- Sharing the experiences of caring and picking up coping techniques
- Providing space for an opportunity to think about themselves and their own hopes, needs and aspirations
- Seeking information or guidance about a specific issue, e.g. housing. In some cases this was linked to the closure of a previous support service which had forced the mentee to look elsewhere for help.

Mentees often said that they wanted to speak to outside their normal circle of friends and family. This tended to be for two reasons: first, they worried about ‘burdening’ their immediate social circle with ‘more problems’; and, second, they felt that they needed to speak to someone with more experience of a caring role for empathy rather than sympathy.

Some of the mentees already received some support for their caring responsibilities, for example:

- Attendance at carer support groups
- Assistance with washing and dressing those they cared for
- Support from specific organisations, such as Rethink and Mind.

“I had been feeling very isolated and upset as a result of [my caring responsibilities]...What I longed for most was to be able to speak to someone outside my friendship circle and family who understood what I was going through.”

“My main priority was to find someone to talk to about housing.”

“I wanted an outlet to be able to say how I felt, what I would like to do. Really what my thoughts were. NOT for any solutions but just to be able to share what I was feeling.”

“I thought it would be good to have someone I could share my inner most feelings with and hopefully to get advice on how to handle the different changes that occur with looking after someone with dementia.”

Mentees

2.4 Mentor background and motivation

As with the mentees, mentors we interviewed came from a range of different backgrounds. However, all the mentors we spoke to had some personal experience of caring, and many were still in caring roles. For the large majority, this involved caring for members of their family. One mentor had previously been a paid live-in carer. Several mentors had a track record of volunteering, some of which had specifically involved mentoring and/or supporting carers through other initiatives.

Some had useful experience from elsewhere to draw on, and saw the project as a way of utilising their skills. Examples included:

- business coaches
- students of psychology and social work
- psychotherapeutic counsellors and psychologists.

Mentors commonly said that their interest in mentoring stemmed from wanting to support carers in a way that they had been supported (or would have wished to have been supported) in their own care roles. They recognised the challenges faced by carers and felt that they had useful knowledge and experience to share.

Timing also played an important part in the decision-making process for a number of mentors. They were seeking to fill a gap in their lives, for example due to the ending of their own caring responsibilities; children leaving home; or simply pursuing a desire to develop personally.

“I thought/hoped I would be able to help people who were going through a similar difficult time.”

“I first got involved because I had been a carer myself...I found it to be quite an isolating experience. At the same time, I found great comfort in the kindness of others, sometimes strangers. At a certain point I felt ready to see if I could perhaps help others by offering support in a small way.”

“I felt I would be giving something back. I survived my intense role as a carer and wanted to help others to realise it is OK to have difficult feelings sometimes about their position, and encourage them to have hope and expectation of good outcomes, and to pay attention to their own needs too.”

“I felt that anything I could do to ease the burden for other carers could only be a good thing and also I wanted to feel that my 21 years of hard-earned carers experience could be utilised in some worthwhile way.”

“I ... liked the idea that I would be involved with a serious professional organisation and that I would receive proper training.”

“Having experienced how difficult caring can be and finding ways to move forward, I want to give that knowledge back to other carers. If somebody had been there for my family and myself in the most difficult times, it would have made a big difference. I feel that this is the most worthwhile and rewarding volunteering role that I could possibly be doing.”

Mentors

2.5 Mentor training

Mentors expressed their contentment with the training they received from TimeBank and had no suggestions for its improvement. Several noted that the information on setting and keeping boundaries within the mentoring relationship had been very useful when it came to delivering mentoring in practice.

Those with more experience of mentoring and other talking therapies tended to regard the training as being quite basic, but welcomed the opportunity to meet other mentors and recognised that not everyone was starting with the same level of knowledge.

"[The training] worked well to get my head in the right place and understand the expectations on me. It was very clear on issues like confidentiality and focus – mental wellbeing, not mental health."

"A lot was stuff I already knew on the caring side but the mentoring was new."

"I got a lot out of talking to the others on course."

"The training [was] really good, very informative ... really easy learning."

Mentors

2.6 Matching mentors and mentees

Matching the right mentor to the right mentee is critical to the mentoring relationship sparking and thriving. Mentors and mentees were equally pleased with the way in which this had been handled by the project's managers.

Through the interviews, we have tried to isolate the factors that appear to help when it comes to matching mentors and mentees:

- **Geography:** for face-to-face mentoring in particular, some degree of geographical proximity is important. Neither person in the relationship is likely to be able to devote the necessary attention to their mentoring if it takes a long time to get to and from the meeting location. Many of those we interviewed were also reliant on public transport, which could be a further complication, and longer journeys also incurred more cost.
- **Expectations:** mentoring has a broad definition, and people's expectations about what it will cover can vary considerably (for example counselling, advocacy, or simply just a social chat). Aligning expectations is therefore key.
- **Skills and knowledge:** in some cases, mentees may be looking for some very specific support, such as help navigating the benefits system. If a mentor does not have the requisite knowledge, the mentee may get frustrated and the relationship may fail to take off.

"[We were] amazingly matched. My mentee was very pleased with the match. There was an age difference but our attitudes were similar. The introduction was well-managed, it was a very smooth transition."

Mentors

- **Attitudes:** individual attitudes and characters must be taken into consideration, for example a religious perspective was important in the case of one mentee, so it was crucial that the mentor was able to understand her spiritual needs.
- **Scale:** one mentor remarked on the importance of a project like Carers Together having a large pool of mentors to ensure that a sufficient range of backgrounds, characters and skillsets were available to maximise the chances of getting the match right.

The matching of mentors and mentees appears to have been more important in the context of the face-to-face relationships, judging by the fact that it was raised by a number of face-to-face participants (in a positive sense), and hardly at all by those in an online relationship. This is perhaps to be expected, as direct contact requires more trust to be established; mentees in particular may feel vulnerable, especially in the early stages of relationship development. In practice, both mentors and mentees were very positive about the experience, and the 'fit' with their respective mentoring partners, which we take as a sign that the project has an effective matching system in place.

From the experiences of those we interviewed, it is also clear that a lot rides on the first introductory meeting when a member of the project introduces the mentor to the mentee, and then bows out to allow the relationship to develop. There was a very high degree of satisfaction among mentors and mentees about the way in which this was managed by the project.

3 The mentoring experience

3.1 Introduction

In this section, we examine what it's like to experience the mentoring relationship, as a mentor or mentee. We focus more heavily on the online experience, because it is a relatively new way of delivering mentoring support whereas face-to-face mentoring is a much more established and well-known mechanism.

3.2 The online mentoring experience

Benefits

On the whole, those who have used the online mentoring system have found it an intuitive process; we know of only one instance where a mentee transferred to face-to-face mentoring as a result of struggling with the online system itself.

The main reported benefits have been:

- **Flexibility:** participants can send a message at a time convenient to them, and write as much as they want. This is particularly useful for the mentees. Convenience may mean when they have a moment to write, or perhaps at a point where they feel particularly overwhelmed by their caring responsibilities. Mentors also appreciate the flexibility as many of them are carers themselves and can therefore struggle to find free time.

"In the middle of the night when there isn't anyone else to call upon, just knowing that writing an email to another person is a great life line."

"Knowing she [the mentor] is there is a real comfort."

"Sometimes it is helpful to be able to write whenever you feel like it... it can be easier to write things that you wouldn't necessarily say – you can reflect before you press 'send', and some of the difficult caring issues, problems or questions that you want to express or write about can be best said without having to ever meet or speak to the person you are writing to."

"Rather than being diluted the electronic nature helps make the service location independent which is of use when like me I am at the other end of the country caring for my mother and so well away from my own support in London."

"[My mentor] provided emotional support electronically that I did not believe would be possible." Mentees

- **Location-neutral:** online mentoring removes the necessity for mentor and mentee to live close to one another, potentially increasing the pool of potential mentors for a given mentee when location stops being an issue.
- **Anonymity:** some mentees said that they were more willing to discuss personal and emotional issues online that they would have found difficult or embarrassing to raise in a face-to-face situation with a relative stranger.
- **Articulation:** the additional time that an online relationship allows for reflection and consideration has helped some mentees (and mentors) articulate their thoughts and needs in a way that might be difficult within a fixed face-to-face appointment.
- **Security:** we heard no complaints about the security or confidentiality of the online system. Furthermore, mentees seemed to find it very reassuring to know that their mentors were just a quick online message away (e.g. compared to a pre-arranged face-to-face meeting in the future).
- **Efficiency:** some mentors noted that it was possible to mentor more mentees at one time through an online system than it would be if every individual had to be met face-to-face.

Challenges

Although the benefits of the online system were widely reported by participants, it is not without its challenges:

- **Technical issues:** there have been a few minor negative comments about the online system itself, especially involving frustrations around the size of the message box, and problems with receiving message notifications in a timely manner.

“I enjoy the online format. I find the mentees are very open and I feel humbled by how much information they share. I think this reflects in part the trust they have in the platform and the anonymity it offers which allows a greater freedom of expression. Hopefully they feel safe in this environment.”

“Overall, I would say that online mentoring works extremely well and is particularly good for carers who are often stuck at home, looking after somebody and can't get out to meet up with a mentor easily. I would certainly recommend it to a fellow carer.”

“Some of my clients [mentees] struggle to make time to go online but on the whole I think it has worked well... I think the scheme provides a valuable opportunity for mentoring for computer literate people who have limited time and need to be flexible.” Mentors

“I've found it easy to use, although there has, at times, been a bit of a gap between my message and the reply to my message, which was a bit frustrating. Although sometimes it was helpful simply to write my thoughts and feelings down.” Mentee

- **Lack of visual cues:** one or two mentors noted that the lack of direct contact meant that it could be difficult to ‘read’ a mentee, for example in terms of their body language, facial expressions, or tone of voice. As a consequence, they felt that there was a risk that the mentoring relationship might not have the depth of a face-to-face alternative, and that comments made online might sometimes be misinterpreted as a consequence.
- **Interruptions to communication:** some mentors and mentees said that their relationships were sometimes difficult to maintain because there were delays in getting answers from the other person. This could break the ‘flow’ of a conversation and make it difficult to bring the relationship back on track. On the other hand, however, one mentor said that she appreciated the time delay because it provided her with an opportunity to research and think through her response.
- **Maintaining a focus:** one mentor thought that it was harder to set goals for mentees using an online system, and to keep them focused on their goals. With no direct contact, mentees could stray off the subject or avoid a difficult question if they wanted to.
- **Lack of immediacy:** some mentors and mentees said that, while they were happy with communicating online, they would have preferred a more immediate means of doing so, for example through a messaging or live chat mechanism
- **Complexity of need:** one mentor remarked that one of their online mentees had such complex needs that they really required a face-to-face conversation to be properly supported
- **Slow burn:** one mentor said that online mentoring tended to take a while to get going, and for people to understand its benefits. But it could be difficult to get mentees to stick at online mentoring for a sufficient amount of time for them to see how it could help them.

“I have found it a bit frustrating not speaking to my mentees or conversing face to face. On the other hand writing messages allows you to get tone and content appropriate/balanced. But that is partly because of the lack of clues about the mentee from visual or aural signals.”

“[Online mentoring] is not for me...I find it stilted but my mentee loves it.”

“It might have helped to know more about [the mentee’s] needs in advance – it’s hard to find out what someone is looking for online.”

“[My mentee] thought it was going to be a ‘live chat’ session.” Mentor

3.3 The face-to-face experience

Benefits

The following specific benefits of a face-to-face mentoring relationship emerged from our interviews:

- **Social contact:** to a great extent, this is an outcome of the project. But it was clear that face-to-face mentoring brought the added benefit of a more personal, intimate social interaction which many mentees appreciated
- **Leaving the caring environment:** the project encouraged participants to hold their mentoring sessions in neutral locations (e.g. coffee shops), in part to ensure that participants' home addresses remained confidential. It is clear from the interviews that mentees found it very helpful to be required to remove themselves from their caring environments. That in itself was a big step for some
- **General conversation:** face-to-face participants were much more likely to have commented on how they enjoyed an informal conversation about very general matters (e.g. asking about each other's families) with their mentors. In comparison, online conversations tended to be much more targeted and focused on the mentoring support.

“My mentor makes me feel comfortable talking about the similar experiences we share. I have only met her a few times so far but feel like we are friends.”

“We talk about day-to-day things: our families, what's happened locally...it's something to look forward to.”

“I'm old-fashioned, I prefer face-to-face. It's better to reduce isolation.” Mentees

Challenges

Interviewees mentioned very few challenges when it came to the process of face-to-face mentoring:

- **Matching:** as mentioned previously, matching appears more important for face-to-face mentoring, especially the character and attitudes of the individuals concerned, compared to the online alternative

- **Logistics:** the only other significant challenge in face-to-face mentoring was the ability of individuals to meet up for agreed appointments. There were several instances where one participant failed to turn up at a meeting, for a variety of reasons (e.g. illness or their caring responsibilities got in the way). Given that the appointments tended to take place in a 'neutral' place, this meant a wasted journey for the other side of the relationship. Face-to-face mentors and mentees tended to use text messaging to stay in touch and report if they were delayed or had to cancel, but this did not work in all circumstances.

3.4 Ending the relationship

Bringing a relationship to a clear and defined end is an important element of mentoring if mentees are not to be left feeling abandoned or uncertain of where they stand with their mentors in the longer term.

- The time-limited nature of the mentoring appears to have been clearer to those using the online system. In the majority of cases, the relationships were brought to a formal end with a sign-off email. Some mentors signposted their mentees to other forms of support (e.g. Carers UK Helpline, Alzheimer's Society website, etc.); others would try to summarise the relationship and leave the mentee with some key points to remember or reflect on (for example "make time for yourself", or "don't feel guilty if you have to find a nursing home"). Where relationships had petered out, this tended to be due to a drop off in interest from the mentee's perspective and the reasons for it are not entirely clear
- There appears to have been more flexibility around the timescales for the face-to-face relationships, and fewer of these seem to have ended in a well-defined fashion (e.g. with a formal final meeting).
- In some cases, the relationship ended for more specific reasons, for example when a mentee's caring responsibilities ended or where a specific problem they had (which was central to the mentoring relationship) was solved.

3.5 Improvements suggested by participants

The views of mentors and mentees towards the project have been very positive. As such, there have been few specific suggestions about how it could be improved, and none that represent any significant cause for concern. Those mentioned by more than one participant were as follows:

- Improved matching, which was raised in the few instances where the mentoring relationship did not seem to work due to incompatibilities between the two participants
- Mentees' desire for a more immediate method of communication, such as by phone or online chat. This, they argued, would improve the continuity of the mentoring relationship and provide a better level of help when it is most needed

- More flexible timescales for the mentoring relationship to reflect the different needs of mentees (i.e. some mentees needed more than three months' support)
- Some mentors wanted the opportunity to meet with other mentors in order to share their experiences and get a sense of how their individual efforts were contributing to the wider project (an event was held for mentors in late 2014, after our fieldwork had been concluded)
- One or two mentees wanted to see a more formalised ending to the mentoring relationship, for example with a review or evaluation of the process and what had been learned
- One mentor suggested that it might be helpful to pre-empt possible concerns from new mentors that the online process would make it hard to build relationships. Her experience was that this could be done, but it was inevitable that some people would have initial reservations.

4 Outcomes for participants

4.1 Introduction

In this section, we summarise how the project has generated outcomes (benefits) for its participants – mentors and mentees alike.

4.2 Outcomes for mentees

Improved emotional resilience

Mentees reported that the mentoring relationship had significantly helped to improve their emotional resilience, and that this was probably the most significant area of support for them. Emotional resilience came through in a number of different ways:

- **Venting their frustrations:** many mentees said that the relationship had been helpful in letting them express their anger, feelings and raw emotions. While this was mentioned by mentees in face-to-face relationships, it seems to have been more important to those being mentored online. It would appear that the immediate availability of the online system (and possibly the relative anonymity it grants mentees) allowed them the opportunity to vent their frustrations when they reached ‘boiling point’.
- **Realising they are not alone:** empathy has been crucial to mentees; they have found it enormously beneficial to know that they are not alone in feeling the way they do about their role as carers. This is something that many mentees said they could not share easily with others within their usual social circle because, while friends and relatives would try to be supportive, they had no real experience of the pressures and stresses of caring.

“[My mentor has] given me hope that no one else has given me before. I was very down...she showed me there was light at the end of the tunnel.”

“Having a mentor has been a lifeline to me...since I have had the mentor I haven't hit that rock bottom because before things get so bad I can message her and get things off my chest.”

“There were times I felt I could scream so I would email [my mentor] instead.”

“Having me to talk to is her own way of having someone who is not family and maybe enables her to speak freely without being seen as being selfish about her own needs.”

“It's all about people being out there who won't judge you for not coping.” Mentees

- **Tackling guilt:** mentors in particular, with their prior experience of caring, said that a lot of the support they provided was aimed at helping their mentees overcome feelings of guilt. This came from a variety of sources, for example:
 - Worries that they were not providing the right quality of care
 - The guilt of thinking about moving a relative into a nursing or care home
 - Feeling selfish about wanting more time to themselves away from their caring role.
- **Preparing for the future:** Some mentees found the relationship useful to visualise or prepare for future events in an emotional sense. This included issues such as preparing for the anticipated death of a loved one, or when a decision might be needed about whether or not to resuscitate.

Better personal management

There are various ways in which mentees said they had improved aspects of their personal management:

- **Relaxation and reflection:** some mentors offered tips for relaxation – often involving setting aside time for mentees to put some space between them and their caring role. One mentor suggested making a note of positive events or minor achievements throughout the day so that even on a bad day there was a chance for the mentee to have some positive reflection.

“When I respond to kind friends' enquiries, I often tailor my reply or answer very superficially as I don't want to burden them with all the unpleasant details. My mentor knows the reality of long term heavy duty caring, so I can speak in more depth and more freely, thus I can express my feelings more.”

“I recall trying to prepare for how I might feel after mum dies...[my mentor] indicated that it is probably impossible to know how anyone will feel after a bereavement. In a sense she helped me give myself permission to go with the flow. It has also helped knowing someone out there cares about me. That came across in the tone of the [online] communications from [her].” Mentees

“Sometimes they just need someone to hear how hard their life is. Sometimes that's sufficient.” Mentor

“I have worked with one mentee to devise a kind of survival manual, which includes different things that she enjoys doing and which she could do to help her wellbeing. This includes proactive things (e.g. making time to meet with friends) and reactive (e.g. making a cup of tea or going for a walk around the block).”

Mentor

- **Reduced social isolation:** for many mentees, the very act of mentoring, and of having a mentor, meant that they felt less socially isolated (more so for face-to-face relationships which have included social activities, such as meeting in coffee shops). For others, it has proved a spur and encouragement to become more social.

Specific knowledge for carers

There were a number of instances where mentees asked for, and were given, practical suggestions and solutions for their situations by their mentors. This tended to be more common in the face-to-face relationships, although it is not clear whether this is a particular trend or coincidence.

Example issues include:

- **Debt:** one mentee had struggled with their personal finances as a result of his caring responsibilities and had ignored the problem for some time. The mentor was able to convince him to address the issue and signposted him to expert support.
- **Care packages:** a recommendation to advertise a care/support worker as two posts instead of one, thereby offering a greater spread of support; helping a mentee decide on a care home for their relative and supporting them through the transfer process and the subsequent disposal of their relative's home

“My mentee is happy to get out, get some ‘me time’, sometimes that’s all people want.” Mentor

“I feel less alone and it has also given me a push and made me ‘get up and get on’! I haven’t done anything radical, the changes are always subtle.”

“Knowing that someone who understands and is there to offer help and support has been invaluable to me, it makes me feel much less alone.”

Mentees

“At one point I became very low and wasn’t sleeping very well, so [my mentor] came up with some suggestions for various options, which we then discussed in our messages. She also suggested various carers’ forums that I may find helpful particularly as I was feeling rather isolated.”

“My mentor has signposted me to other sources that may be beneficial to me...such as links on how to apply for direct payments and respite.”

“It’s draining...every time we turned a corner, we hit a brick wall...If it wasn’t for [my mentor], somebody who understood our situation and what we were going through, we would have gone mental and we would probably have given up.” Mentees

- **Medication:** suggesting a mentee speak to their doctor about concerns related to medication
- **Housing:** several mentees had issues with housing and accommodation. In some cases, they were helped to find properties more suited to a cared-for person's needs. In one example, the mentee and his family had struggled for months to make the case for a council house with an extra bedroom for a disabled relative.
- **Counselling:** for some, mentoring provided a stepping stone for mentees who came to realise that their personal problems (especially their mental health) deserved a level of professional support, such as counselling.

"It has been great to have someone to offload to who understands the stresses of caring for a disabled child/young adult. I have now the strength to seek counselling and group therapy, I am on the waiting list."

"It was my first way of getting the help I need. Opening up to someone else makes you realise how desperate things are getting, and maybe it's time to do something about it." Mentees

"They've been trying to get the council to put them in a bigger council house so they could care for [their relative]. It didn't work according to the points system, so I did a bit of 'council bashing' as well as mentoring. Also doing things like checking spellings in their emails to the council." Mentor

Longer term outcomes

For those mentees whom we interviewed on two separate occasions, we have tried to identify the longer term benefits from their mentoring experience. The majority we spoke to had ended their relationship since we first spoke to them.

For those who had come to the mentoring with a more specific issue or challenge to address (e.g. a housing problem), the ending of the relationship tended to coincide with the solving of that particular issue. In these 'event-specific' relationships, there was less of a longer term direct benefit from the mentoring, although the solving of something like an accommodation problem is likely to generate long term benefits for the mentee.

It is also clear that some mentees have been helped in the longer term by coping strategies that were learned through the mentoring process, and that these are revisited and deployed in times of need.

"The mentoring gave me confidence in my caring role and she helped me to see that I can find the support I need as she signposted me to places where I could get it. So that was good. I did find though when it finished that I missed having someone to go to as I am very isolated in my caring role. My mentor was someone neutral that I could talk too who wouldn't judge me or make me feel useless as a carer. I really miss that." Mentee

There were some mentees, however, who were clearly still struggling with their caring responsibilities and for whom the mentoring was sorely missed. This may be due to a particular change in circumstances (for example a death or a significant deterioration in a relative's health), or perhaps because they were not signposted to other support options at the end of the mentoring relationship. However, all the mentees we spoke to recognised that the project was time-limited and that it would have to come to an end, despite any ongoing problems that they might have.

"I liked the fact I met someone who knows how it feels to be in such a position, which made me feel less alone. Just getting out and doing things and to talk helped, which is what I try and do more of now. I feel a bit better in the fact I don't feel as guilty and also I can step back more, but also write and talk about it with others."

"Together we devised coping strategies and ways in which I could ease my stress levels. I've employed some of the strategies in recent months while I've been looking after [my relative]."

"I think that whilst for me some of the issues I had at the time were left un-dealt with, having a time limit actually helps. If it were open-ended I'm not sure that things would come to an end ever."

"I found it quite hard when the mentoring stopped as I still felt that I needed support... There were a lot of pressures on me ... and yes, I do wish that it had continued, although I appreciate that the project was time-limited." Mentees

4.3 Outcomes for mentors

On the whole, mentors said that they have found volunteering for the project a positive and worthwhile experience. Specifically, they articulated the benefits to them as follows:

- **Voluntary contribution:** for the majority of mentors, they enjoyed the satisfaction of knowing that they had been able to help other carers, providing the support that they received (or would like to have received) when they first became carers
- **Personal reflection:** for some, the experience had enabled the mentors to reflect on their own caring experiences and to recognise the knowledge they had developed about caring
- **Self-confidence:** one or two mentors had found the experience useful in terms of their own ability to talk to a relative stranger, build a relationship and feel sufficiently confident to provide advice and guidance to others
- **Skills development:** for some, the mentoring was an opportunity to try out counselling skills that they may not have used for years, or as a means of supporting their ongoing studies (e.g. in psychology) and personal development
- **Patience and persistence:** A couple of mentors reflected on the more negative or frustrating experiences of the role, when their suggestions to mentees didn't seem to work. These had helped them recognise that mentoring did not always result in huge steps forward, and that persistence was necessary in order not to get disheartened by the process. Change often occurred gradually, and in small steps.

“What I have gained is that I have been able to support someone else like I needed support.”

“I am enjoying it, it has helped me personally. Watching someone you love slowly fade away is probably the hardest thing I have ever had to do... If I am able to help someone who is in that situation it makes me feel that something positive has come out of that experience. I think in some ways it's been cathartic [for me].”

“I like to give, I get a sense of achievement.”

“The project has helped me with my confidence in meeting people for the first time. I hope to become a drugs and alcohol support worker next year and this project along with other volunteer work I do has really helped me understand people and their families, not everyone is the same and there is no one simple answer to anyone's problems.”

“It was an opportunity to try my counselling skills. Would I be any good at it, and want to do it over and over again? In a very real way, it puts your own problems in perspective.”

“It was a really good learning experience.”

“Talking to other carers, you learn a lot, ways of dealing with things. It kept the grey cells going.”

Mentors

5 Conclusions and recommendations

5.1 Introduction

In this section, we provide some concluding thoughts on the findings of the evaluation.

5.2 The mentoring process

Carers Together has operated very effectively as a scheme, based on the very positive comments of its participants – mentors and mentees alike. The project team has been very successful in administering the scheme: providing the training that mentors require and matching them with the appropriate mentee. While this has not worked in every case, the occasions where the match has not worked have been few.

Online mentoring

While this report is not a comparative study of online and face-to-face mentoring systems, there will inevitably be a lot of interest in what it has to say about the online approach. Online mentoring is still relatively new and one that is attracting interest particularly because it is thought to be a more cost-efficient system to run (we will come onto its impact later).

To an extent, it is unfair to compare face-to-face and online mentoring directly with one another. Each has its own benefits and limitations, and people may be more willing to accept the limitations of a face-to-face relationship because we are used to them - the approach has been around for so much longer than the online alternative. Bearing in mind those words of caution, we would make the following points:

- Online participants – mentors and mentees – have had very positive experiences overall and have been able to establish and maintain good, trusting relationships using the system
- The online system works well for those who are comfortable with the technology (the majority of users in this project)
- Online mentees have found it particularly useful where they have wanted a flexible, anonymous and immediate channel for their frustrations and concerns
- For mentors in particular, the lack of visual and auditory cues can make it challenging to understand and respond to a mentee's real needs
- Delays in responses between participants can provide useful thinking time; but too long and the relationship can be hard to maintain

- On average, online mentoring is likely to allow mentors to take on more mentees at any given time than they could face-to-face
- Face-to-face mentoring provides what might be described as a richer, more personal relationship; but meetings are less frequent than online contact, perhaps require a stronger level of trust between the participants, and are more sensitive to differences of personality – matching becomes more important

Carers Together has therefore demonstrated that online mentoring, as a process, can be used effectively to support carers. But the mentoring mechanism needs to suit the participants. A face-to-face mentoring alternative is likely to remain important for those who are unfamiliar with using email or other electronic forms of communication.

Alternative systems

In some of the interviews, mentors and mentees speculated on the benefits of having a more immediate alternative to the online system – something that allowed real time responses of the kind normally only available through a face-to-face meeting. Examples included telephone mentoring and social media options such as web chats and text messaging. While we can see that these would overcome some of the limitations of the project's current online system – allowing mentees to get an immediate supporting message from their mentors at a particularly difficult time, for example – we would be concerned about the burden that this would put on the mentors. With such a system, they may feel that they are constantly 'on call'.

5.3 The benefits to participants

The project has delivered a wide range of benefits to its mentees, especially in the areas of emotional support; personal organisation and motivation; and in fixing specific problems that can feel insurmountable to people already weighed down by the burden of care. We have detected no significant differences in the outcomes for online and face-to-face mentees except one: the face-to-face experience, by its very nature, has been better at tackling carers' social isolation.

The project has delivered longer term benefits especially where mentees have been given coping strategies by their mentors, or where their specific issues have been addressed. For some, however, the need for a sympathetic ear remains. This reinforces the need for mentors to consider at an early stage in the relationship how they intend to bring the relationship to an end, with a specific focus on building the resilience of their mentees to cope on their own, either through tips and strategies or by signposting them to other support.