

Informal Carers, Poverty and Work

5.3 million people in the UK routinely provide unpaid care to someone with a disability or long-term condition. This research analysed data from the Family Resources Survey on the links between providing care, poverty and work.

- 4 million carers in the UK are of working-age, 1.1 million are pensioners and 130,000 are children. The most common care arrangement is for adults to provide support to their parents.
- About the same number of men and women care for a spouse or partner. But a much larger number of women than men provide care for someone outside of their household (1.9 million compared to 1.1 million).
- 1 in 10 adults provide unpaid care. It is most common among those aged 55-64 with 20% of women and 13% of men providing care.
- 2 million informal carers (37%) provide at least 20 hours per week of support including 710,000 who care for at least 50 hours. A large minority of carers (45%) provide less than 10 hours of care per week.
- 1.2 million carers are in poverty. The poverty rate among carers, at 22% overall, varies considerably by age, care intensity and relationship to the recipient.
- The poverty rate is much higher among working-age adults caring for at least 20 hours per week (at 35%). Higher intensity carers living with the care recipient have a particularly high poverty rate as the household contains two people (the care giver and recipient) with a limited capacity to work.
- Some carers had a relatively low poverty rate. The 2.1 million low intensity working-age carers supporting someone outside their household were concentrated in the top half of the income distribution. As the social security system does not expect pensioners to work, the impact of providing informal care on pensioner poverty is less pronounced.
- As care levels increase employment decreases, with a clear impact on full-time employment. Among working-age people providing 20 hours or more of care each week, 28% were in full-time and 16% were in part-time work.

by Hannah Aldridge and Ceri Hughes

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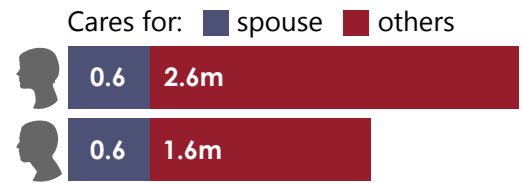


Caring is a mainstream activity with 1 in 10 adults providing some form of unpaid care. Most carers (72%) provide care to immediate family, with the most common arrangement being adults providing support to their parents.

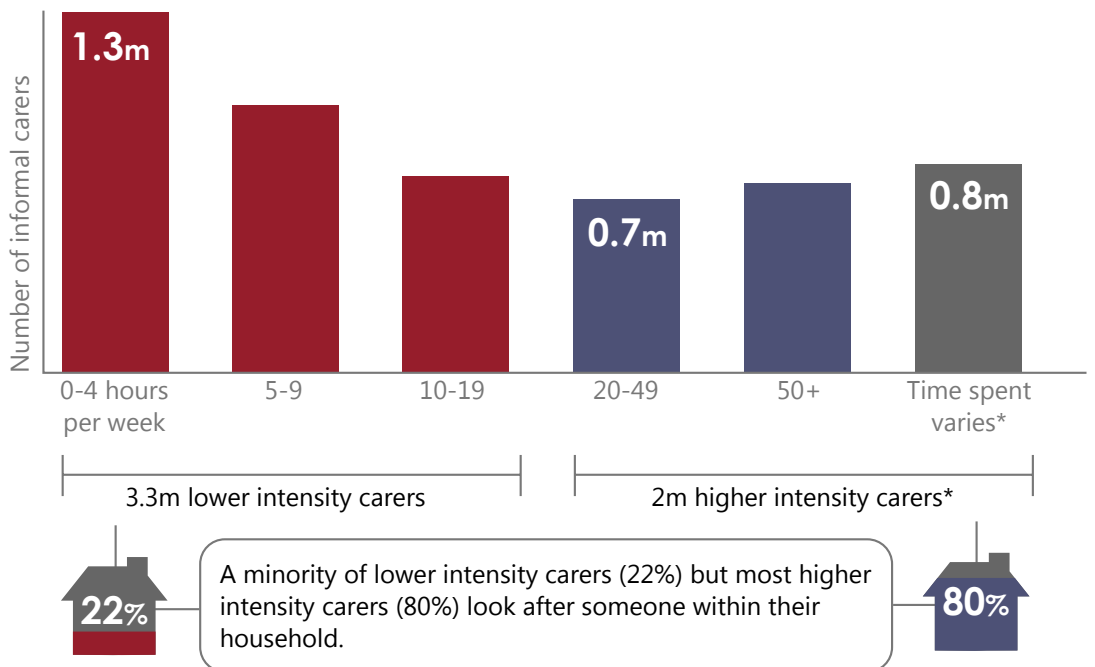
130,000 children are carers, but the vast majority of carers are adults. The proportion of people providing care rises with age until it peaks at the age of 55 to 64, when a fifth of women (20%) and 13% of men are informal carers.



Most informal carers are women (60%) but a large minority are men. About the same number of men and women care for a spouse or partner, but many more women than men care for someone outside of their household.



For a large minority of informal carers (45%) caring occupies less than 10 hours a week of their time. At the other end of the scale, 37% of carers (2 million people) provide at least 20 hours per week of support including 710,000 who care for at least 50 hours.



Working-age carers are more likely to care for fewer hours than pension-age carers – 65% of working-age carers provide less than 20 hours per week, compared to 52% of pension-aged carers. Among pensioner carers almost half (46%) are caring for their partner.

*77% caring for a variable number of hours provide more than 20 hours per week

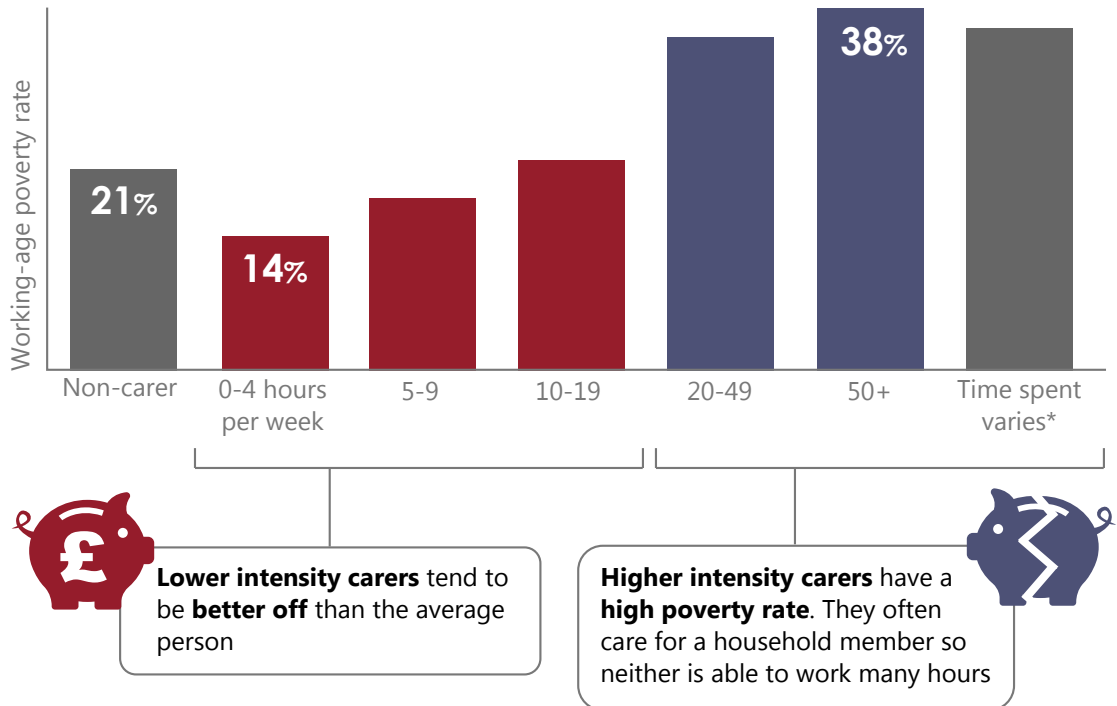


Disability benefits are paid to people in order to cover some of the additional costs associated with having a disability. These benefits are meant to partially compensate for higher costs, rather than make the recipient materially better-off than someone without a disability. Since over a third (36%) of carers live in a household that receives a disability benefit, the poverty estimates presented in this paper discount disability benefits from household income to provide a more accurate assessment of poverty risks among the carer population.

1.2 million carers are in poverty. At 22% the poverty rate for carers is slightly higher than non-carers at 20%. But this masks considerable variation in the poverty rate among the carer group. Age, care intensity and relationship to the recipient all have an impact on household income.

Working-age

Poverty increases with the amount of care provided



Pension-age

The impact of providing informal care on pensioner poverty is less pronounced. Overall, pensioner carers had a lower poverty rate (at 14%) than non-carers (at 16%). This is linked to the different household composition of pensioner carers - 80% were in couples. Pensioners caring for a spouse had a higher poverty rate than non-carer couples (at 16% compared to 13%). Otherwise single pensioners and those in couples who provided care had a lower poverty rate than their non-carer equivalents.

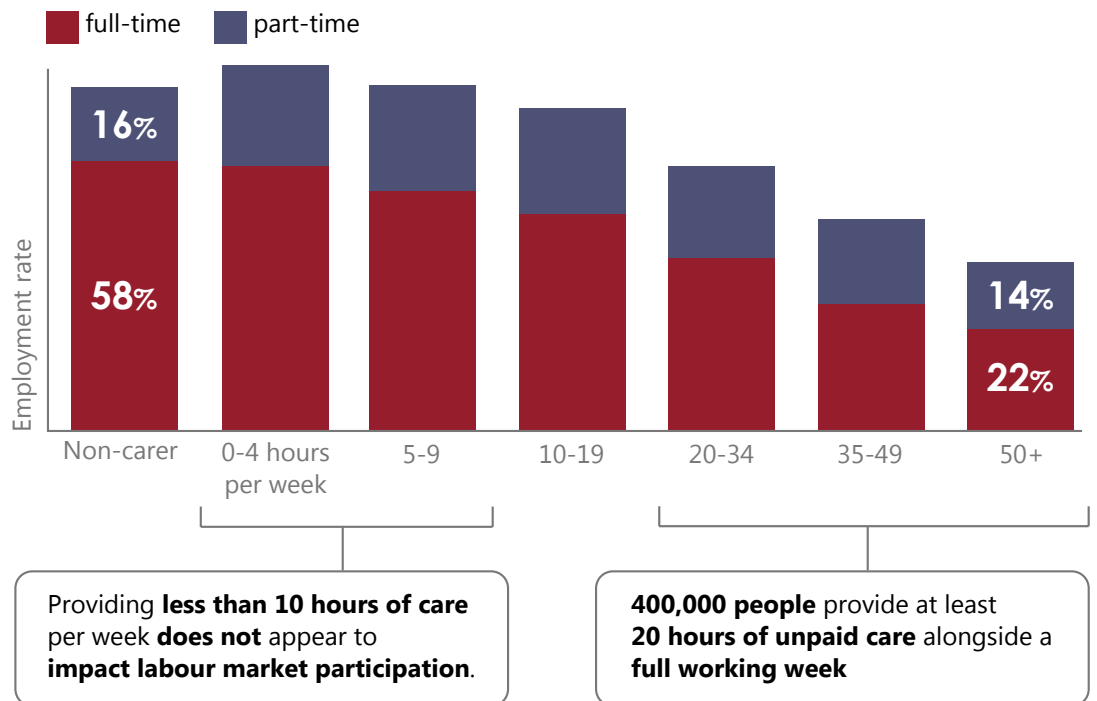


Among those in employment, carers are over-represented in caring and service sector roles, as well as in administrative occupations. A fifth (20%) of women who were in employment and providing informal care were in caring, leisure and service sector jobs, relative to 17% of women who were not carers. Meanwhile, 16% of working and caring women were in professional occupations, compared to 21% of working women not providing informal care. The pattern for men was similar but less pronounced.

At 23% the proportion of higher intensity carers with no qualifications was almost double the proportion of non-carers (at 12%). Meanwhile, 39% of non-carers had a degree-level qualification, compared to 24% of high-intensity carers. The qualification profile of lower intensity carers (less than 20 hours per week) was similar to non-carers.

The majority of working-age carers are able to combine caring with paid work. The overall carer employment rate, at 64%, was 10 percentage points lower than the rate for non-carers. This gap is linked to the much lower proportion of carers that are in full-time work (44% compared to 58% of non-carers).

As care levels increase employment decreases, with a clear impact on full-time employment



The link between poverty and informal care depends on the amount of care provided, the caring relationship and the impact this has on household employment. Caring is associated with a higher risk of poverty amongst working-age carers providing long hours of care. The majority of such carers (76%) support someone within their household. In a household where an adult requires high intensity care and another provides that care, the scope to increase income through employment will be limited.

The state plays an important role in supporting low income carers – indirectly through administering disability benefits and directly through carer benefits and local authority support packages. Improving these services should be the primary concern for reducing carer poverty. Alongside this there is a role for employment support that helps carers re-skill and return to work after a period of caring and to support carers with the capacity to work to access opportunities.

The statistics in this research were derived from the Family Resources Survey 2011/12 to 2013/14. For more information and a copy of the full report see: www.npi.org.uk/publications