

Valuing Carers 2021/22: the value of unpaid care in the UK

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Contents

03	Foreword
04	Introduction
06	Key findings
08	Comparative analysis of unpaid care across the four nations
11	Valuing Carers 2021: England and Wales
12	Valuing Carers 2021: Northern Ireland
13	Valuing Carers 2022: Scotland
14	Conclusion and recommendations
18	Contact Centre for Care
19	Contact Carers UK

Foreword

Helen Walker,
Chief Executive, Carers UK



Every day, millions of people across the UK are providing unpaid care for family members and friends. Previous research by Centre for Care found that the average person has a 65% chance of providing care in their adult life - and that increases to 70% for women.

Caring can happen to anyone, at any time, and it can impact on people's lives in numerous ways. Yet despite the challenges that caring can present, 5.8 million people in the UK continue to dedicate huge amounts of their time to supporting their loved ones. With a lack of affordable and accessible social care services, and challenges in getting timely support from the NHS, unpaid carers are being relied upon more and more to support people who are disabled, older or chronically ill.

We've seen from recent Census data in England, Wales and Northern Ireland that although there has been a decrease in the proportion of people who are providing unpaid care, the number of hours of care that people are providing has increased, in all four nations of the UK. As this report shows, this rise in high intensity care has led to a substantial increase in the value of care over the past decade. Of course, for many people, care is an expression of love and it isn't easy to quantify it or put a monetary value on it. But we must also recognise the huge contribution carers are making to our society.

This vital analysis from Centre for Care finds, yet again, that the economic value of care across the UK is an incredible £184 billion a year – a significant increase of 29% since 2011. That's equivalent to the NHS budget for all four nations, demonstrating the fact that unpaid carers are saving the public purse an astonishing amount of money each year.

Given the significant contribution that carers are making to our health and social care systems, it is more important than ever that they receive the support they need to maintain their health and wellbeing, continue to work in paid employment if they wish to do so, and have the resources they need to lead a fulfilling and independent life free from financial difficulties.

I'd like to thank to our colleagues at the Centre for Care for this crucial research on the economic value of care. This report, and the individual reports for each of the nations, are invaluable in supporting our policy and campaigning work as we continue to highlight the value of unpaid care and the support that carers should be receiving both now and in the future. For carers, who so often feel invisible, this kind of support makes a difference because it demonstrates their support is valued, and helps them to feel recognised in society.

Introduction

Professor Matt Bennett
Centre for Care,
University of Birmingham



Across the UK, millions of unpaid carers support family members, friends, and neighbours with daily living activities due to long-term illness, disability, or older age. Most of us will become unpaid carers at some point in our lives - thousands of us daily, often combining paid work and other responsibilities alongside new caring roles.¹ While it affects us all, from all walks and stages of life, some of us are more likely to become unpaid carers than others: for example, women and people from lower socio-economic backgrounds are more likely to become unpaid carers; are more likely to do so earlier in their lives; and are more likely to provide higher intensities of care per week.²

We often do not know exactly when we will become an unpaid carer, or how it will affect us. Becoming an unpaid carer can happen suddenly, due to an unexpected illness or accident, or gradually, as a condition worsens. Yet the vital care that unpaid carers provide often negatively impacts their own finances, social relationships, health and happiness.³

¹ Petrillo, Bennett and Pryce (2023). Cycles of caring: transitions in and out of unpaid care. London: Carers UK.

² Zhang, Y., Bennett, M. R., and Yeandle, S. (2019) 'Will I Care: The likelihood of being a carer in adult life'. London: Carers UK

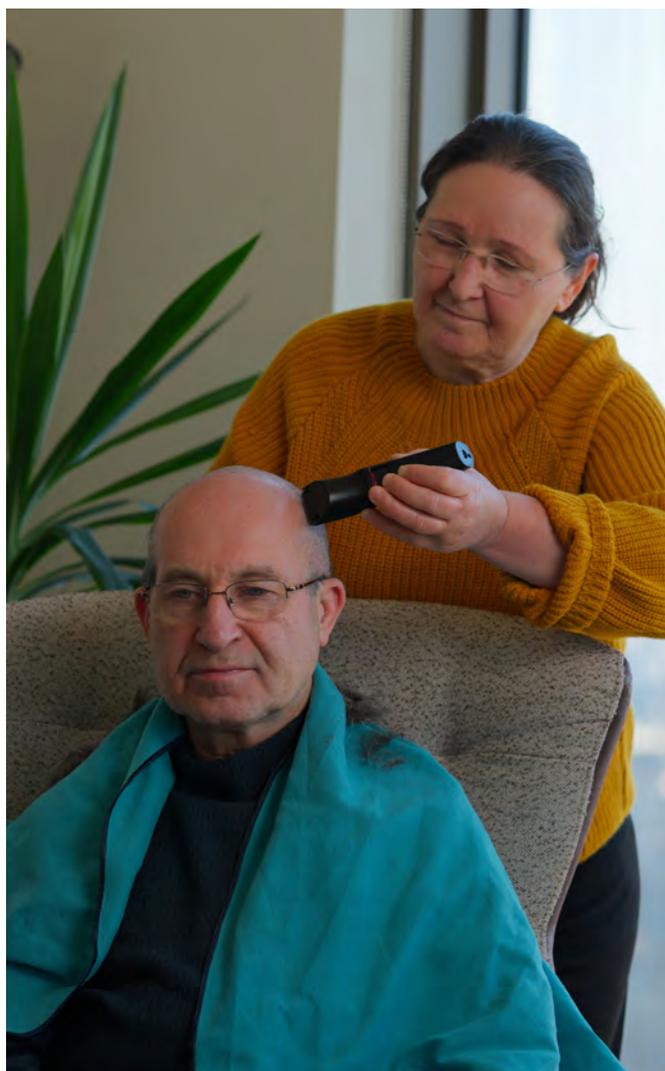
³ Keating, N., McGregor, J. A., and Yeandle, S. (2021). Sustainable care: theorising the wellbeing of caregivers to older persons, *International Journal of Care and Caring*, 5(4), 611-630.

This research report highlights the incredible increasing economic value of unpaid care across the four nations of the United Kingdom (UK). Unpaid carers in the UK are providing care worth an unbelievable £184.3 billion a year – an increase of 29.3% since 2011. To put these extraordinary numbers into perspective, the combined NHS budget across all four nations of the UK was approximately £189 billion⁴ - this means that unpaid carers are providing care equivalent to the budget of a second NHS in the UK. This value of unpaid care is also over four times the amount of publicly funded spending on adult social care services. People are providing more hours of unpaid care than ever before, and the contributions made by unpaid carers have increased across all Local Authorities, Trusts and Councils in the UK. If unpaid carers stopped providing care overnight, the health and social care systems in the UK would collapse.

This report consolidates the findings from each of our three previous reports in our Valuing Carers series that focus on England and Wales,⁵ Northern Ireland,⁶ and Scotland.⁷ The research used Census data and the UK Household Longitudinal Study (also known as ‘Understanding Society’) over time and place to estimate the cost of unpaid care. We are, as always, hugely grateful to the statistics authorities in each of the four nations for making Census data available - the Office for National Statistics, the Northern Ireland Statistics Research Agency, and National Records of Scotland - and the Economics and Social Research Council for funding and making these data assets available to the public.

Our Valuing Carers series has been a collaboration between the Centre for Care⁸ and the wider Carers UK family. It has brought together Dr Maria Petrillo, Dr Jingwen Zhang and myself in the Centre for Care; and Melanie Crew, and Emily Holzhausen CBE (Carers UK); Fiona Collie, Craig Harrison, and Richard Meade (Carers Northern Ireland and Carers Scotland).

Matthew Bennett



⁴ This value was calculated based on NHS budgets for each nation for the year each Census was conducted - 2021 for England, Wales and Northern Ireland; 2022 for Scotland (for further details see to each individual Valuing Carers report [see footnotes 5-7]).

⁵ Petrillo, M and Bennett, M.R. (2023) Valuing Carers 2021: England and Wales. London: Carers UK. carersuk.org/media/2d51e03c/valuing-carers-report.pdf

⁶ Zhang, J., Petrillo, M. and Bennett, M.R. (2023) Valuing Carers 2021: Northern Ireland. Belfast: Carers Northern Ireland. carersuk.org/media/irkn5e00/valuing-carers-northern-ireland.pdf

⁷ Zhang, J., Petrillo, M. and Bennett, M.R. (2024) Valuing Carers 2022: Scotland. Glasgow: Carers Scotland.

⁸ The authors gratefully acknowledge the support of the Economic and Social Research Council (award reference ES/W002302/1).

Key findings



This report calculates the financial value of the contributions made by unpaid carers across the four nations of the United Kingdom (UK). It draws upon our findings from our three separate reports that comprise our Valuing Carers series in England and Wales,⁹ Northern Ireland,¹⁰ and Scotland.¹¹ Unpaid carers provide essential support to family, friends and neighbours due to challenges associated with long-term illness, disability, or older age.

⁹ Petrillo, M and Bennett, M.R. (2023) Valuing Carers 2021: England and Wales. London: Carers UK.

¹⁰ Zhang, J., Petrillo, M. and Bennett, M.R. (2023) Valuing Carers 2021: Northern Ireland. Belfast: Carers Northern Ireland.

¹¹ Zhang, J., Petrillo, M. and Bennett, M.R. (2024) Valuing Carers 2022: Scotland. Glasgow: Carers Scotland.

It is impossible to put a true financial value to unpaid care which comprises unquantifiable levels of love, respect and duty. However, attempting to do so is a powerful way to highlight the invaluable contributions that unpaid carers make to our society and the savings to the UK's health and social care systems - costs that would otherwise be incurred if the care was provided formally.

The combined economic value of unpaid care across the four nations of the UK is **£184.3 billion in 2021/22**, a 29.3% increase over the past decade (**£119.4 billion in 2011**). The increase in the economic value of unpaid care is mainly due to the increase in the number of hours of care provided by unpaid carers in all four nations. In Scotland, the increase in the economic value of unpaid care is also due to the increase in the number of unpaid carers.

The estimated value underscores the vital contributions of unpaid caregivers across the UK, illustrating how they save the public purse substantial amounts of money every week, day, and hour throughout the year:

- **£184.3 billion per year**
- **£3.5 billion per week**
- **£506 million per day**
- **£21 million per hour.**

This report uses Census data from 2011 and 2021/2022¹², with supplementary information from the UK Household Longitudinal Study ('Understanding Society') to estimate the average hours of unpaid care provided¹³. Using a replacement cost approach, we assign a unit cost¹⁴ to hours of unpaid care to estimate the overall economic contribution of unpaid carers. The method captures the monetary value of care across different care intensities and considers inflation-adjusted unit costs.

Each nation shows unique patterns in care provision, influenced by population ageing, rising health needs, and regional differences in formal care arrangements. Despite these differences, a common theme is evident: the intensity and value of the unpaid care provided have increased significantly across all geographical localities within the four nations of the UK.

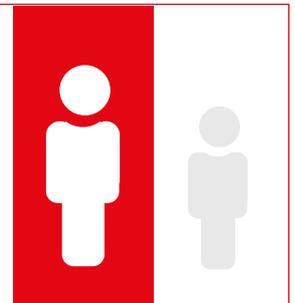
Value of unpaid carers' support across UK

£184 billion



29%

increase in the value of unpaid care over the past decade



¹² 2022 for Scotland and 2021 for England, Wales and Northern Ireland.

¹³ For more detailed information on the methodology please refer to the individual reports.

¹⁴ This is in line with the official estimate of the actual cost per hour of providing home care to an adult.

England and Wales

The 2021 hourly cost of home care: Unit Costs of Health and Social Care 2021 (Jones, K. & Burns, A. (2021) Unit Costs of Health and Social Care 2021, Personal Social Services Research Unit, University of Kent, Canterbury). The 2011 hourly cost of home care: Unit Costs of Health and Social Care 2011 (Curtis, L. (2011) Unit Costs of Health and Social Care 2011, Personal Social Services Research Unit, University of Kent, Canterbury).

Northern Ireland

The 2021 and 2011 cost of home care: Department of Health, Northern Ireland (2020). Community Services Indicators – Trust Unit Cost 19-20.

Scotland

The 2022 hourly cost of home care: Unit Costs of Health and Social Care 2022 (Jones et al. (2022) Unit Costs of Health and Social Care 2022, Personal Social Services Research Unit, University of Kent, Canterbury). The 2011 hourly cost of home care: Unit Costs of Health and Social Care 2011 (Curtis et al. (2011) Unit Costs of Health and Social Care 2011, Personal Social Services Research Unit, University of Kent, Canterbury.)

Comparative analysis of unpaid care across the four nations

The data in Tables 1 and 2 provide a detailed view of the economic value of unpaid care across England, Wales, Northern Ireland, and Scotland. Table 1 displays *nominal values* - monetary values unadjusted for inflation - showing the face value of care at each Census timepoint without accounting for changes in the cost of living. In contrast, Table 2 presents *real values*, which are inflation-adjusted using the Consumer Prices Index including owner occupiers' housing costs (CPIH). This adjustment enables a meaningful comparison of care value across years by considering the impact of inflation and shifts in the cost of living. Therefore, changes in the economic value of care over time are reported in real terms in both tables.

It is important to note that values for England, Wales, and Northern Ireland are adjusted using the 2021 CPIH (111.6), while Scotland uses the 2022 CPIH (120.5) due to its Census being conducted a year later¹⁵. While this discrepancy introduces a minor timing inconsistency, we provide both tables to offer insights into the economic value of care in real terms across the UK.

Each nation has seen changes in both the percentage of unpaid carers and the economic value of unpaid care over the past decade. While the overall percentage of unpaid carers has decreased in most nations, the value of unpaid care has increased, indicating that fewer unpaid carers are providing more hours of care.

The value of unpaid care across the UK has increased substantially over the past decade, highlighting a rising dependence on unpaid care. Since 2011, all four nations have seen an increase in the economic value of unpaid care, though with some differences in trends.¹⁶

The intensity and distribution of care hours varied within each nation. In Scotland, there was an increase in all intensity levels. In Northern Ireland there was an increase in the number of unpaid carers providing 20-49 and 50+ hours of care. In England and Wales there was an increase in the proportion of people providing 20-49 hours of care, with the proportion of people providing 50+ hours per week largely stable.



¹⁵ ons.gov.uk/economy/inflationandpriceindices/timeseries/l522/mm23.

¹⁶ It is important to acknowledge some limitations in the comparative analysis across the four nations. The timing of the most recent Censuses may help explain the disparities between Scotland and other nations. Northern Ireland, England, and Wales conducted their Censuses in 2021 during the COVID-19 pandemic, when social distancing and household mixing restrictions were still in effect. In contrast, Scotland's Census was conducted in 2022 after most of these restrictions had been lifted. Additionally, the 2021 Censuses in England and Wales, and Northern Ireland revised the wording of care-related questions by omitting examples of people who might receive care. This alteration could have contributed to the reported decline in unpaid carers in 2021 compared to 2011 in these nations. Conversely, the wording of care-related questions in Scotland was consistent across the last two Censuses. Furthermore, the PSSRU unit cost of replacement care decreased from £25 in 2021 to £23 in 2022, which may explain why the change in the value of unpaid care in Scotland was less pronounced than in England and Wales, and Northern Ireland.

Table 1: Proportion of unpaid carers and the value of care by hours of care and nation, 2021/22 and 2011

	2021/22* Unpaid carers (%)	2011 Unpaid carers (%)*	Nominal Value 2021/2022* (£m)	Nominal Value 2011 (£m)	Real Change 2021/22*- 2011 (%)
England					
19 hrs or less	4.4%	7.2%	16,262	17,386	-21.4%
20-49 hrs	1.8%	1.5%	44,250	21,667	71.6%
50 hrs or more	2.7%	2.7%	91,310	58,791	30.5%
Total	8.9%	11.4%	151,822	97,845	30.3%
Wales					
19 hrs or less	4.7%	7.4%	969	1,316	-38.1%
20-49 hrs	2.2%	1.9%	2,852	1,578	51.8%
50 hrs or more	3.6%	3.7%	6,944	4,855	20.1%
Total	10.5%	13.0%	10,766	7,749	16.7%
Northern Ireland					
19 hrs or less	5.7%	7.4%	580	610	-18.2%
20-49 hrs	3.0%	2.2%	1,776	836	82.6%
50 hrs or more	4.0%	3.6%	3,470	2,073	43.8%
Total	12.8%	13.2%	5,826	3,519	42.3%
Scotland					
19 hrs or less	6.5%	5.4%	2,072	1,443	11.5%
20-49 hrs	2.4%	1.7%	4,744	2,755	33.8%
50 hrs or more	2.9%	2.7%	9,109	6,181	14.5%
Total	11.8%	9.8%	15,924	10,379	19.2%

Source: The proportion of unpaid carers and value of care by hours of care in England and Wales was taken from the report, Valuing Carers 2021: England and Wales (Petrillo and Bennett, 2023); the figures for Northern Ireland were taken from the report, Valuing Carers 2021: Northern Ireland (Zhang et al., 2023); and figures for Scotland were taken from the report, Valuing Carers 2022: Scotland (Zhang et al. 2024). Columns "Nominal Value 2021/2022" and "Nominal value 2011" are the nominal values of unpaid carers' contributions (which are not adjusted for inflation). The percentage change in unpaid carers' contributions (column "Real Change 2021/22 - 2011") considers the real unit cost, adjusted for inflation using the Consumer Prices Index including owner occupiers' housing cost (CPIH).

Note: * 2022 for Scotland and 2021 for England, Wales and Northern Ireland.



Table 2: Change in the real value of unpaid carers' contribution in the United Kingdom, 2011 and 2021/2022

	Real Value 2021/2022* (£m)	Real Value 2011 (£m)	Real Change 2021/2022*-2011 (%)
19 hrs or less	145,679	112,634	29.3%
20-49 hrs	5,350	3,760	42.3%
50 hrs or more	13,215	11,088	19.2%
Total	164,244	127,482	29.3%

Source: The real value of care in England and Wales was taken from the report, Valuing Carers 2021: England and Wales (Petrillo and Bennett, 2023); the figures for Northern Ireland were taken from the report, Valuing Carers 2021: Northern Ireland (Zhang et al., 2023); and figures for Scotland were taken from the report, Valuing Carers 2022: Scotland (Zhang et al. 2024). Columns "Real Value 2021/2022" and "Real Value 2011" represent the real value of unpaid carers' contributions (adjusted for inflation).

Note: * 2022 for Scotland and 2021 for England, Wales and Northern Ireland.

In the following sections, there is a breakdown of each nation's unpaid care trends, highlighting changes in care intensity and economic value.

Valuing Carers 2021: England and Wales

The economic value of unpaid care

Unpaid carers in England and Wales contributed an estimated **£162 billion** to the economy in 2021, an **increase of 29%** from 2011. This value is roughly equivalent to NHS spending.

The increase in carers' hours and contributions

While there has been a decrease in the proportion of people providing 19 hours or less of unpaid care over time, unpaid carers are devoting more hours to unpaid care than ever before:

- **20-49 hours of care per week:** The percentage of people providing 20-49 hours weekly increased to 1.9% (up from 1.5% in 2011) of the population. This corresponds to 1 million people contributing £47 billion in economic value in 2021.
- **50 or more hours of care per week:** 1.5 million people provided over 50 hours of unpaid care per week in 2021, representing 2.8% of the population (up from 2.7% in 2011). This accounted for a substantial proportion of the economic value of unpaid care, contributing over £98 billion in 2021.

The reasons behind the shift in the number of unpaid carers

The total proportion of unpaid carers in England decreased from 11.4% in 2011 to 8.9% in 2021, indicating a reduction in the number of people identifying as carers. The same was recorded in Wales with a decrease in the proportion of unpaid carers from 13% to 10.5%. These decreases are most likely explained by: Methodological changes in the census survey; impact of COVID-19; and changes in population health.

1 Methodological changes in the census survey

The wording of the caregiving question and the categories for hours of care changed between 2011 and 2021, which may have impacted respondents' interpretation of what qualifies as unpaid care. In 2011, people were asked if they helped family members, friends, neighbours or others, but in the 2021 Census this list of people who someone might support was removed. This may have caused people to be prompted in 2011, but not in 2021.

2 Impact of COVID-19

The pandemic had a significant influence on caregiving patterns. During COVID-19 lockdowns, many shared or community-based caregiving arrangements were disrupted due to social distancing rules, and some carers took on sole responsibility for family members. Conversely, some people may have stopped identifying as carers if they could not physically provide in-person care due to restrictions, even if they continued supporting loved ones remotely. Moreover, increased mortality rates during the pandemic, particularly among older people and people with disabilities, led to a decrease in the number of people receiving care.

3 Changes in population health

Census data reveal a 1.7% decline in the proportion of the population reporting a disability from 2011 to 2021 in England and Wales. Additionally, over this period, there was a rise in the percentage of people reporting their health as "very good" and a reduction in those describing their health as "bad" or "very bad".

Valuing Carers 2021: Northern Ireland

The economic value of unpaid care

The economic contribution of unpaid carers in Northern Ireland is estimated at **£5.8 billion per year**, a figure that has grown by 42% in real terms since 2011. This is the highest percentage increase among the four nations. This contribution is equivalent to approximately 85% of the Department of Health's budget in Northern Ireland for 2021/2022.

The increase in carers' hours and contributions

Northern Ireland experienced a significant increase in the intensity of care over time and a slight decrease in the percentage of people providing care (from 13.2% in 2011 to 12.8% in 2021):

- **20-49 hours of care per week:** The percentage of carers providing 20-49 hours of care per week increased from 2.2% in 2011 to 3.0% in 2021. This represented an increase of 82.6% (roughly £1.8 billion).
- **50 or more hours of care per week:** The percentage of people providing 50 hours or more of unpaid care per week increased from 3.6% to 4.0%. This was a £3.4 billion per year (43.8%) increase in the value of care.

The reasons behind the shift in the intensity of care

Several factors contributed to the rising intensity of unpaid care in Northern Ireland:

1 Demographic changes and population ageing

Between 2011 and 2021, the proportion of people aged 65 and older increased from 14.6% to 17.2%. Older adults are more likely to require support due to health complications, resulting in an increased need for unpaid care to support daily living activities.

2 Rising health and disability needs

The number of people with limiting long-term health conditions or disabilities also increased, impacting nearly one in four residents in 2021. Additionally, the percentage of people reporting "bad" or "very bad" general health increased from 6.4% in 2011 to 8.2% in 2021. These health challenges meant more people required care support, placing additional demands on unpaid carers.

3 Decline in domiciliary care services

Domiciliary care, or home care, which helps people with long-term health conditions live independently at home, has been reduced over the last decade. The number of people receiving domiciliary care from the statutory sector decreased between 2011 and 2021. Alongside these reductions, waiting lists for domiciliary care services grew, and social care providers reported significant staff shortages. COVID-19 exacerbated these shortages, further limiting the availability of support services.

4 Impact of changes to census question wording

The 2021 Census wording differed from the wording in 2011, potentially influencing how people reported their unpaid care responsibilities. In 2011, respondents were asked if they provided care due to "long-term physical or mental ill-health/disability". However, in 2021, the question was broader to include "long-term physical or mental health conditions or illnesses," with mental health conditions now presented as a broader category. In 2011, people were also asked if they helped family members, friends, neighbours or others; but in the 2021 Census this list of people who someone might support was removed. This may have caused people to be prompted in 2011, but not in 2021. Additionally, the 20-49 hour care category was divided into narrower bands (20-34 and 35-49 hours), giving respondents more specific options to reflect higher-intensity care.

Valuing Carers 2022: Scotland

The economic value of unpaid care

The total economic value of unpaid care in Scotland is estimated at 15.9 billion in 2022, a figure that has increased by 19.2% in real term from 2011.

The increase in the number and intensity of unpaid carers

Number of carers: The overall proportion of unpaid carers in Scotland increased from 9.8% to 11.8%, making Scotland the only nation that experienced an increase in the proportion of unpaid care.

Scotland is also the only nation where the proportion of people providing care at all intensity levels increased:

- **19 hours or less of care per week:** The percentage of carers providing fewer than 19 hours of unpaid care per week rose from 5.4% to 6.5%, with the value of this care increasing by 11.5% to nearly £2.1 billion.
- **20-49 hours of care per week:** The percentage of people providing 20-49 hours of unpaid care per week increased from 1.7% to 2.4% - the value of this care increased by 33.8% to £4.7 billion.
- **50 or more hours of care per week:** The percentage of people providing 50 or more hours of unpaid care increased slightly from 2.7% to 2.9% - this increased the value of care by 14.5% to £9.1 billion.

The reasons behind the shifts in the number of carers and intensity of care provided

Several factors contributed to the increased number of unpaid carers and the increased intensity of unpaid care:

1 Population ageing

Between 2011 and 2022, the proportion of residents aged 65 and older increased from 16.8% to 20% of the total population. As functional and health-related needs increase with age, the demand for care has risen, relying more heavily on unpaid carers, especially for long-term support in daily activities.

2 Rise in long-term illness and disability

There has been a substantial rise in the prevalence of long-term health conditions across Scotland. In 2022, around 1.3 million people reported having a health condition or disability that limits their daily activities - a 26% increase since 2011. Mental health conditions saw a significant increase from 4.4% in 2011 to 11.3% in 2022, along with an increase in physical disabilities. The growing prevalence of these conditions put increased pressure on unpaid carers.

Conclusion and recommendations

The value of unpaid carers' support is significant as it demonstrates the huge input from families, close friends and neighbours in supporting older, ill and disabled relatives and friends. This support, however, comes at a personal cost to unpaid carers. We know that carers are less likely to be in employment¹⁷ - an estimated 600 people a day give up work to provide unpaid care,¹⁸ with devastating impacts on their income in the short term, and pensions in the longer term. A staggering 1.2 million unpaid carers live in poverty across the UK¹⁹. Carers are more likely to be in poor health, with increased risk of mental ill-health, and other conditions such as high blood pressure and joint problems²⁰.



¹⁷ WPI (2024) Poverty and financial hardship of unpaid carers in the UK. London: Carers UK. carersuk.org/reports/poverty-and-financial-hardship-of-unpaid-carers-in-the-uk

¹⁸ Carers UK (2019) Juggling work and care. London: Carers UK carersuk.org/media/no2lwyxl/juggling-work-and-unpaid-care-report-final-web.pdf

¹⁹ WPI (2024) Poverty and financial hardship of unpaid carers in the UK. London: Carers UK. carersuk.org/reports/poverty-and-financial-hardship-of-unpaid-carers-in-the-uk

²⁰ GP Patient Survey (2024)

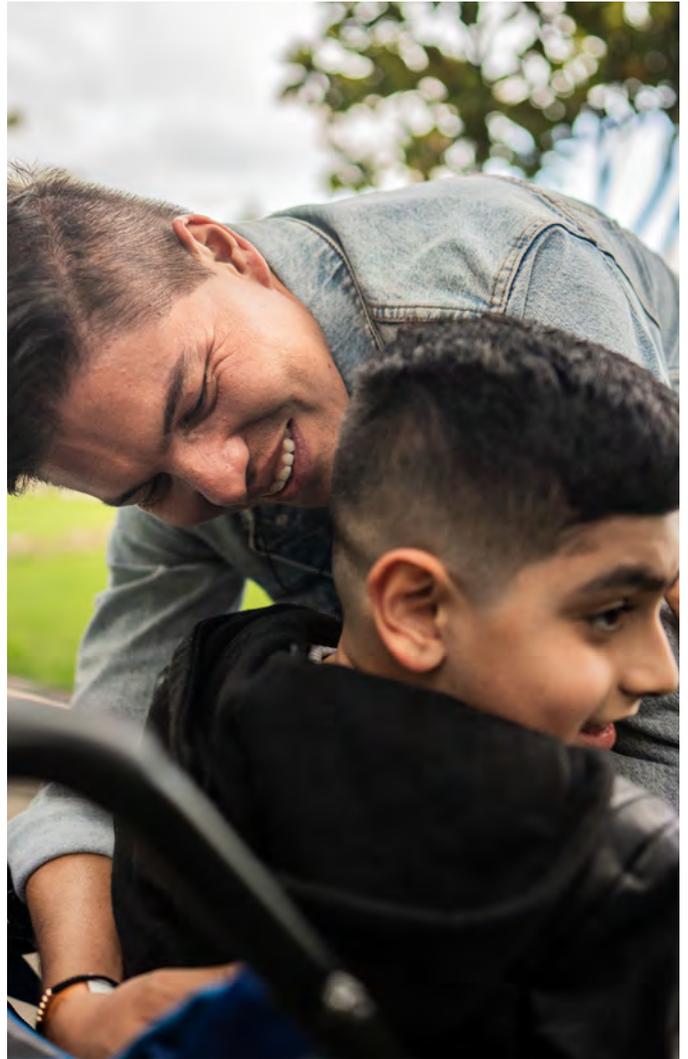
This research also shows that when social care, NHS services and other support fails to keep pace with our ageing population and the prevalence of ill-health and disability, a greater share of caring falls to families. This doesn't just come at a cost to families - it comes with a high price for employers and the economy. An estimated £5.3bn has been wiped from the economy in lost earnings due to people who've left the workforce to take on caring responsibilities for older or disabled loved ones²¹. If employers are able to support carers by adopting flexible working policies, this could result in savings of up to £4.8 billion a year in unplanned absences and a further £3.4 billion in improved employee retention²².

Caring can affect anyone at any time, but the impacts are not felt evenly. Women have a 50:50 chance of providing care by the time they are 46, men by the time they are 57 – 11 years later²³. Carers with disabilities are more likely to face additional challenges, as are carers from ethnic minorities. The majority of unpaid carers do not have a choice about caring²⁴ and even more likely to not have a choice over the negative impacts.

Many of these negative outcomes can be prevented and addressed with the right kind of intervention by Government, decision-makers, employers, communities and society. What is needed is a fresh new approach and energy to supporting unpaid carers. As a priority, the UK Government should commit to **introducing a National Carers Strategy**, covering all ages, with feedback sought from stakeholders and carers through a consultation. A national strategy would harness the power of different Government departments and allow them to work together to support the lives of unpaid carers, recognising that many elements of caring are inter-linked.

UK Government is carrying out a huge consultation on the future of the NHS. It could take this opportunity to make the NHS fit for the future by **transforming the way the NHS interacts with unpaid carers** to make it the most carer-friendly health service in the world. Key elements of this would include:

- Using legislation to place new duties on the NHS to promote unpaid carers' health and wellbeing – to underpin a fresh new approach.
- Using data and digital to systematically identify unpaid carers and provide support where it is most needed.
- Harnessing the power of digital, informed by carers' views on how technology could be helpful, and any barriers they might face. This would enable carers to have more control in caring, and maximise the potential of the NHS App to let unpaid identify themselves.
- Empowering unpaid carers by updating the NHS Constitution to clearly set out the future.
- Equipping carers with the information, advice and support to care safely and well where they choose to do so.
- Ensuring equal access to treatment and support across the NHS.



²¹ Age UK analysis (2012) ageuk.org.uk/latest-press/archive/care-in-crisis-more-than-53-billion-wiped-from-the-economy

²² Centrica Supporting carers in the workplace. centrica.com/media/3247/centrica_carers_guide.pdf

²³ Zhang, Y. and Bennett, M. (2019) Will I care: the likelihood being a carer in adult life. London: Carers UK.

²⁴ Carers Week (2024) No choice but to care carersuk.org/media/3dblytnt/carers-week-report-2024-web_final.pdf

UK Government should urgently **address the underfunding of social care by:**

- Bringing forward their engagement and plans for a ten-year plan for a National Care Service in England, alongside sustainable funding over the longer term.
- Urgently invest in social care including investing an additional £1.5 billion in breaks and respite services in England (with consequential funding for Devolved Nations).
- Legislating so all carers have a statutory right to regular and meaningful breaks.

UK Government has already announced an independent review into the overpayments of Carer's Allowance and will be increasing the earnings limit for Carer's Allowance to £196 in April 2025, equivalent to 16 hours at the National Living Wage rate. However, there is an opportunity to go further and **improve financial support** for carers by:

- Reviewing the current support provided to unpaid carers through the social security system, including setting objectives for carers' social security benefits as well as timescales and options for change.
- Increasing the value of Carer Element, Carer Premium and Carer Addition by £11.10 per week, to lift at least 30,000 people out of poverty and 40,000 out of deep poverty.
- Preventing the accumulation of Carer's Allowance overpayments, by writing off past substantial overpayments where carers could have been notified sooner and bringing forward options and timescales to introducing a taper to earnings similar to other benefits.
- Improving the process for claiming Carer's Allowance to make it less complicated for claimants by modernising delivery, increasing staffing and improving staff training, improving information sharing between DWP departments, and improving carers' understanding of eligibility rules.
- Reforming the eligibility rules for Carer's Allowance, such as removing the 21-hour study rule.
- Providing additional financial support to carers of State Pension age through a new non-means-tested payment, and reviewing pension rules for carers to get carers up to similar pension levels as non-carers.

UK Government should support unpaid carers to combine work and care by:

- Building on the Carer's Leave Act 2023 by laying the foundations in the Employment Rights Bill to turn the existing statutory right to one week's unpaid leave to paid Carer's Leave.
- Continuing to strengthen flexible working rights in the Employment Rights Bill.
- Exploring opportunities to provide employees with the right to take a longer period of unpaid Carer's Leave of up to six months so people do not fall out of the labour market when they have particularly complex and intense periods of unpaid care.
- Reviewing and implementing changes to the social security system to better support carers to remain in work, removing any aspects that act as a disincentive to work.
- Investing in structural support to enable carers to return to work following a period of absence related to their caring responsibilities, including establishing a new national network of carers' partnership managers, to coordinate carers' pathways back into work.
- Undertaking a full and independent review into issues relating to work and unpaid care reconciliation, to better understand the range of policy interventions and shifting practice within job roles.
- Making caring a protected characteristic by updating the Equality Act 2010 to strengthen carers' rights to protection from discrimination and harassment in the workplace.
- Introducing a new campaign to increase employers' awareness of carers in their workforce and to help employees who have caring responsibilities to better understand their rights.

Employers should support carers to juggle work and care by:

- Raising awareness of unpaid caring within the workplace and promoting a positive culture of understanding and support.
- Training all managers on carer recognition and how to support employees within their workplace who are unpaid carers.
- Considering joining Employers for Carers and Employers for Carers Wales to make the most of leading knowledge and expertise in the sector.
- Being “early adopters” of the new legislation on unpaid carer’s leave and going one step further to introduce the leave as paid Carer’s Leave.
- Recognising the range of skills that carers gain through their caring role, to support carers return to work.



Contact

Centre for Care

The Centre for Care is a research-focused collaboration between the Universities of Sheffield, Birmingham, Kent, Oxford and the London School of Hygiene and Tropical Medicine, the Office for National Statistics, Carers UK, the National Children's Bureau, and the Social Care Institute for Excellence. Funded by the Economic & Social Research Council (award reference ES/W002302/1 'Centre for Care') as one of its flagship research centres, it works with care sector partners and leading international teams to provide accessible and up-to-date evidence on care – the support needed by people of all ages who need assistance to manage everyday life.

Led at the University of Sheffield by Centre Director Professor Kate Hamblin and Deputy Director Professor Nathan Hughes, our work aims to make a positive difference in how care is experienced and provided in the UK and internationally by producing new evidence and thinking for policymakers, care sector organisations and people who need or provide care.

In studying care, we focus on ways of improving wellbeing outcomes and on the networks, communities and systems that support and affect people's daily lives, working closely with external partners.



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Carers UK

Across the UK today 5.7 million people are carers – supporting a loved one who is older, disabled or seriously ill.

Caring will touch each and every one of us in our lifetime, whether we become a carer or need care ourselves. Whilst caring can be a rewarding experience, it can also impact on a person's health, finances and relationships.

Carers UK is here to listen, to give carers expert information and tailored advice. We champion the rights of carers and support them in finding new ways to manage at home, at work, or in their community. We're here to make life better for carers.



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