Walking the tightrope
The challenges of combining work and care in later life
Introduction

With more and more people providing care for friends and family, the role played by government and employers in supporting longer working lives is becoming more crucial than ever.

This report examines the challenges and barriers facing carers aged 50+ as they attempt to juggle their caring responsibilities with work, as well as some of the potential solutions. Through our own research and focus groups, it investigates the stories of 50+ carers, looking at what works – and crucially what’s needed – to improve their employment prospects.

And new analysis for this report finds that caring has a statistically significant impact on employment prospects from as little as five hours care provision per week, and that from 10 hours carers suffer significant detriment to their employment prospects, which can lead to significant financial and social disadvantage.

We make a series of recommendations to government and employers which we believe will go some way to redressing the difficulties raised, and help improve carers’ ability to remain in work.

‘Carers make a valuable contribution to our society providing vital support to their families and friends with illnesses and disabilities. I know that balancing caring responsibilities with work and family life can be difficult and I thank Age UK and Carers UK for their insight into an often complex issue.’

Baroness Altmann, Minister of State for Pensions
Foreword

‘Isn’t Jane marvellous, spending so much time when she isn’t working looking after her Mum? I don’t know how she does it.’

Most of us have heard sentiments like these and many of us have expressed them. And sometimes of course it is Frank, or Dave, or Steve – increasing numbers of older men are ‘doing the right thing’ and caring.

We are living longer, often with multiple health problems; the State is failing to meet the care needs of our ageing population; and working life is extending for many of us into our late sixties and beyond. Together, these trends mean we can expect caring for older relatives or friends while wanting or needing to work in late middle age and early old age to become increasingly common.

But at the moment this is a punishing thing to do, as this report shows. The root of the problem is that we haven’t yet caught up with this new reality, culturally or economically. People who try to combine work and caring encounter not only practical problems but attitudinal ones too. We all love carers – but all too often there’s a perception among employers that the unpredictability of demands on them at home can get in the way of a well-ordered work pattern. It is not surprising that in such circumstances many carers give up work, finding the juggling too much to bear on top of the strain of looking after someone they love.

When they do stop work the costs are high: for them personally and financially and for the rest of us too. And as the numbers of carers grow, the accumulated loss to our economy from them throwing in their jobs or being forced to do so will only get higher.

Something has to give. At the moment too often it’s the health and finances of carers. This isn’t fair and it isn’t sustainable either. We need to implement the kinds of policies recommended in this report so people who want and need to care, saving the State a fortune in the process, have a much better chance of staying in work. Or, if that really isn’t possible, that they do not experience such huge financial detriment from having to leave their jobs.
Caring is one of the most important things we do in our lives. We want to do it well. But increasingly we’re being asked to combine providing care for family or friends with complex health and care needs at the same time as working to ensure we are financially secure in later life. This collision of responsibilities can put huge pressure on those juggling work and care with negative impacts for their finances, health and relationships.

For most people caring responsibilities come when they are in their late 40s and early 50s, a time when they have skills and experience built up over many years of working. The challenges of combining work and care mean that many people are leaving their jobs or reducing hours to provide care and finding themselves depleting savings and ending up in financial hardship ill prepared for their own retirement and care costs.

Despite being something that more and more of us are doing, caring still isn’t talked about at work in the way that looking after children is. We need to encourage a much more open culture where we all recognise that caring is a normal part of life. We hear from working carers that often feel very isolated at work and don’t know what if any support they’d get from their employer if they ‘came out’ as a carer. Published carer policies and carer networks at work can make carers feel more supported and provide the opportunities for peer support from others.

But it’s by no means all about the workplace. To remain in work alongside caring, carers need flexible, affordable and reliable care services so they can be confident that the person they care for is being well supported when they are at work. This can be the make or break issue for carers continuing in work.

The fact that we are living longer is something to celebrate. It must surely be accompanied by a public service infrastructure and workplace rights that reflect the reality of our ageing society; one where we will all be caring for someone or need that care ourselves, at the same time as being expected to be in paid work for longer. Unless changes are made, along the lines of the recommendations in this report, too many people will face making a decision about whether to work, or to care.
Executive Summary

Key findings:

• Caring impacts people’s ability to remain in work in later life, even when they are caring for as few as five hours per week.

• This is due to caring – new analysis has found that caring has a significantly detrimental impact on work, after controlling for other factors (e.g. age and gender).

• There is a notable disparity between the eligibility threshold for Carer’s Allowance (35 hours caring per week) and the number of hours caring that creates a significantly detrimental impact on a carer’s employment prospects.

• People aged 50–64 are most likely to be carers, so this is a crucial issue for the Fuller Working Lives agenda.

• The impact of care on work varies depending on the carer’s occupational group – with those in higher skilled occupations (i.e. managerial or professional roles) likely to make smaller reductions in their working hours than those in lower skilled groups.

• The transition to being a carer presents particular risk to older people’s employment – the failure of employers and the care and support system to help people through this transition risks their long term withdrawal from the labour market.

• Carers experience a range of disadvantages as a result of their difficulties combining work and care including loss of income during their working life, and in retirement; and impacts on their health and wellbeing due to the loss of a sense of identity and social connection associated with work.

• The cost to the economy of carers’ withdrawal from the labour market is estimated to be £1.3 billion; the potential gain of enabling carers to work as been estimated to be £5.3 billion per annum.
It is inevitable that in future more older people will need to combine work and caring. However, at present there remain significant barriers to doing so.

Many carers want to work, not just for financial reasons, but because of the positive impact of work on their wider health and wellbeing, which comes from a sense of identity, purpose and social connection associated with working. However, carers face a range of barriers in the workplace including:

- Lack of flexibility in juggling day-to-day caring.
- Lack of support in dealing with emergencies and transitions.
- Poor attitudes towards carers.

As a result of these challenges, many carers find themselves having to make compromises in their working lives – passing up opportunities for promotion and training; working additional hours; and using leave time to care. These strains can ultimately lead to withdrawal from the labour market.

The system of support for carers and their loved-ones also creates barriers to carers’ continued employment:

- Many carers struggle to find appropriate paid-for care for their loved-ones.
- The lack of responsiveness of the care and support system means many older workers are forced to give up work while arrangements are made, and many never return.
- The system of financial support for carers also creates disincentives to work, particularly for carers on low incomes.
- Carers feel a sense of profound grievance at receiving little or no additional financial recognition for their caring role.

There is clear evidence that becoming a carer creates significant risk of labour market withdrawal. New analysis from Age UK shows that the risk of withdrawing from the labour market increases when people start to care, even for as few as five hours per week; and that those caring for more than 10 hours per week are at marked risk of labour market withdrawal.

Age UK’s analysis also shows that there are differences in the impact of caring on labour market participation by occupational group – with those carers in lower skilled groups making larger reductions in their working hours, than those in higher occupational groups.
Labour market withdrawal is significant cause for concern because:
• Carers who are unable to combine caring with work suffer significant financial disadvantage, not just during their working lives, but also in retirement.
• Carers suffer wider impacts on their health and wellbeing.
• The societal impacts of our failure adequately to support older carers to work, are felt in the impacts on business resulting from the failure to retain expert staff etc, and the wider economic costs of the loss of carers’ contributions – which are estimated at £1.3 billion per annum.

However, there are potential solutions to these problems, many of which are already being taken up by leading employers. We recommend:

A drive to improve access to flexible working, through:
• A new requirement for jobs to be offered as ‘flexible by default.’
• Consideration of a kitemark for flexible working, including a requirement to allow new staff to request flexible working arrangements at the point of recruitment.

A renewed effort to improve awareness of carers’ issues in the workplace, through:
• Employers creating visible signals of their ‘carer friendly’ status, including:
  - A named contact for carers in the workplace.
  - Carers’ forums and support groups for staff.
  - Carers’ champion(s) within the workplace.

Providing special support for carers during times of transition and in emergencies, through:
• The introduction of a statutory entitlement to at least five days paid carers’ leave and looking at a longer period of unpaid leave.
• A cross-sector working party involving carers, local authority care and support leads, employers and DWP/Jobcentre Plus to assess options for improving support for working carers going through times of transition.

Improving work support for carers, through:
• Training for all Jobcentre Plus staff relating to the barriers faced by carers aged 50+.
• The development of specific programmes to support former carers to return to work; which are also open to carers over State Pension age.

Improving financial support for carers, through:
• A review of Carer’s Allowance, and wider benefits available to carers, to ensure that working carers are getting the financial support they need, and to reduce disincentives to work.

Definitions
For the purposes of this report ‘older carers’ are understood as carers aged 50 or over who are caring for an older, disabled or seriously-ill friend or relative.

‘Sandwich generation’ carers are those people who provide unpaid care for an older person while, at the same time, looking after one or more dependent child. However the precise definitions of the ‘sandwich generation’ used in the research vary. Children may be considered dependent to age 18, 21 or 25. Some studies consider only disabled children as ‘cared for’.
‘We just need to make clear that this is part of life, and it can be managed.’
Introduction

As the workforce and the population age, the way we live our later lives is changing.

As increasing numbers of older people work for longer, whether through choice or necessity, the benefits of doing so – not just in terms of people’s finances, but also in terms of the impact on the economy and our wider health and wellbeing – are becoming clear.

However at the same time as our workforce ages our requirements for care, as a society, are growing. In the context of an ongoing squeeze on resources for adult social care, this means an increased need for people to provide unpaid care – and many more will find themselves providing care simultaneously for older and younger family members – the so-called ‘sandwich generation’.

If we are to avoid shortages in either the supply of labour, or of care, or both, more people in later life will need to combine work with caring for older, disabled or seriously-ill friends or family members. However, as this report makes clear, at present too many people struggle to do this, leaving carers forced to choose between the two with damaging implications for their physical, emotional, psychological and financial wellbeing.

This report seeks to illuminate the current experience of people aged 50 and over who are trying to combine work and caring, to identify key trends, to assess the impact of these dual roles on those that undertake them, and to consider what action can be taken to improve the experience of older working carers.

Drawing on the evidence from literature, fresh analysis of the available data, and discussions with carers aged 50+, this report sets out the key challenges, and makes recommendations for the Government and employers for addressing them.

The quotations used throughout the report are taken from the focus groups and discussions with carers aged 50 and over.
Policy context

In recent years, carers’ issues and the agenda around work in later life have garnered increased government interest and attention.

In the early 2000s knowledge of the numbers and circumstances of working age carers was limited. However the inclusion of a new question on unpaid care of older, sick or disabled people in the 2001 Census, combined with the Action for Carers and Employment (ACE) National Partnership led by Carers UK (2002–7), provided an opportunity to address this gap. It led to a new evidence base around the circumstances of carers under State Pension age1 and the business benefits of supporting carers in employment, also seeing the establishment of the ‘Employers for Carers’ interest group (which later became the Employers for Carers forum).

Recent decades have seen the publication of a series of carers’ strategies, articulating successive governments’ visions for encouraging and supporting those who provide unpaid care, and at time of writing a further strategy is out for consultation.2 These strategies have ushered in incremental improvements in the support available to carers, conferring new rights and entitlements in the areas of employment, financial support, pensions and care and support services (and in particular respite care).

The needs of carers in the workplace have received growing emphasis over the years, with the Carers’ Strategy (2010) affirming that ‘It is crucial that we place a much higher priority on supporting people of working age with caring responsibilities to remain in work, if they wish to do so’, and recognising the role not only of flexible working conditions, but also social care services in providing ‘replacement care’ to enable carers to continue to work.

This was followed by the publication of a landmark report, Supporting Working Carers: The Benefits to families, Business and the Economy by HM Government, Employers for Carers and Carers UK.3 The report made a number of recommendations highlighting the economic and social benefits of addressing this agenda, and paved the way for the establishment of nine Government funded pilots across England to explore innovation in supporting people to combine work and caring. The pilots will run until spring 2017.4

Most recently the Care Act 2014 set out new rights for carers to have their support needs assessed and made clear that risks to carers’ employment could trigger eligibility for support services, including paid-for ‘replacement’ care.

At the same time governments of all shades have sought to encourage and support longer working lives – most recently through the Fuller Working Lives programme, but also through other initiatives and legislation, such as the Age Positive programme, the ban on age discrimination in the workplace and the abolition of the Default Retirement Age. These initiatives have helped enable growing numbers of older people to remain in work.5

There are very clear links between the age and care at work agendas, as people aged 50–64 are most likely to be carers, and many people in this age group face pressures to care for both younger and older generations. It is therefore clear that improving conditions for carers will be crucial to the success of the Fuller Working Lives agenda.

In its work on employment in later life, the Government has sought to recognise the impact of caring on older people’s employment, with an emphasis placed on flexible working as means of supporting older carers to remain in work. However despite these initiatives, as we explore below, too many older carers continue to face significant challenges in the workplace.
1. Caring and working in later life: older people’s experiences

‘I feel like a “push me pull you”... conflicted, confused... But I feel I must not lose track of my own life and role.’
Our discussions with older carers, through focus groups and interviews, paint a picture which is reflected in the wider evidence, of individuals stretched thin by the attempt to juggle work and care, without sufficient support from their employers, or from the care and support system, and experiencing significant disadvantage as a result.

In this chapter we explore some of the particular challenges carers face. Potential solutions are explored and recommendations for action are made in chapters four and five.

The factors affecting people’s decisions around work and care are many and varied, and dependent on a range of intrinsic and extrinsic factors to the carer and to the person for whom they care. However, in our discussions with carers, the support available to them at work, and the operation of the wider care and support system were clearly critical factors.

In a survey undertaken by Carers UK in 2015, among carers who had given up work, retired early or reduced working hours, 65 per cent said the stress of juggling work and care was a contributing factor, 30 per cent said it was because there were no suitable care services and 22 per cent said care services were too expensive. 15 per cent said that the leave available from work was insufficient to be able to manage caring alongside work and 18 per cent were unable to negotiate suitable working hours.

Below we examine the experiences of older carers and consider how these impact on their ability to continue working and caring.

**Barriers in the workplace**

**Lack of flexibility**

The evidence clearly demonstrates that the biggest day-to-day workplace barrier to carers remaining in employment is a lack of flexible work arrangements.

Carers in our focus groups described a need for two main forms of flexibility: the flexibility to alter their working patterns and/or locations around day-to-day caring responsibilities; and the flexibility to take time off at short notice to deal with unpredictable requirements to care, or emergencies.

While some carers had benefited from flexible working arrangements to some extent, for many the lack of flexibility in their existing jobs, and the lack of access to jobs that offered flexibility, had led to long-term labour market withdrawal.

While some carers’ employers had explicitly refused requests for flexible working, other carers had not felt able to ask, or had prejudged that flexible arrangements would not be available.

These experiences chime with the overall picture of poor awareness of employees’ rights around flexible working, and an unwillingness or inability among many carers to make formal requests for flexibility.
Compromises and sacrifices
In the absence of a proper system of support in the workplace, carers are forced to make sacrifices and compromises in their working lives, often with negative effects on their careers, their pay, and their wider wellbeing.

A survey undertaken among working carers in 2013 found that:
• 79 per cent had used holiday time to look after person cared for.
• 40 per cent had been unable to attend meetings or training sessions.
• 38 per cent were unable to take on extra projects or responsibilities.
• 20 per cent had taken on a less qualified, responsible or senior role.
• 17 per cent had taken sick leave when they were not sick.8

And over time, these sacrifices can become too burdensome to maintain. A 2015 survey for Carers UK found that 60 per cent of working carers were worried about their ability to remain in work over the next year.9

Shula Chiat’s story
Professor Shula Chiat is 62, and has been caring intensively for her mother who has dementia for around three years.

When her mother’s need for additional support first became apparent, Shula was working full-time as an academic. At first she was able to bring in a ‘Helping Hand’ from Age UK to assist with cleaning etc., but her mother’s needs rapidly progressed beyond those the ‘Helping Hand’ could meet, so Shula arranged for a carer from a local agency. However, before long she realised her mother needed even more help. She explains ‘I realised my mother needed help with most practical things, was not safe alone, and could no longer go for walks alone as she had been doing for some years.’

Shula had assumed that her mother would be best to move into a residential care home, but, as she explains, ‘She reacted very negatively to this possibility, and all the professional advice I received was that it would be best for her to stay in her own home.’ Shula then made arrangements with a specialist agency to provide live-in care.

Shula explains her caring responsibilities ‘I now oversee the care arrangements for my mother, manage her flat, finances, etc, and usually accompany her for medical appointments and to social services and care reviews. In addition,

I cover about ten hours a week with my mother (about half the live-in carer’s time off). During this time, I provide whatever care is needed (my mother now needs help with all everyday functions), take her out, and keep her company.’

Shula explains the strains of caring: ‘As well as the time taken up by my part-time care role, it is emotionally draining, and reduces my energy for work and particularly for the ‘people’ side of my work.’

In January 2014, Shula reduced her working days from full-time to three days a week. She explains ‘This was a great relief as I was very stressed keeping up with work and my care role, meaning I was more available to support my mother. I am extremely lucky with the flexi-retirement package offered by the Universities Pension Scheme which meant I could take some of my work pension early, so this was not too detrimental to me financially.’

She believes she has benefited from working in an environment that is supportive of carers. She explains ‘I am extremely lucky that academic work allows more flexibility than most jobs, especially in more senior/research positions, and I have taken great advantage of this flexibility. In addition, universities tend to have relatively sympathetic policies (thanks to relatively strong trade union activity) and I have very sympathetic colleagues who are supportive to each other.’
**Attitudes and awareness**

‘The employer offered flexible working but other staff were unhappy about this so I had to give up the job.’

For many carers, the attitudes of managers and other staff were just as an important a factor in their decisions around work and care as were the formal policies in place in their workplace.\(^{10,11}\)

Carers described being made to feel guilty or as if they were underperforming, or feeling pressure to compensate for the flexibilities they required as a carer, by working harder.

‘There is pressure to work harder and faster than others.’

Some had experience of formal policies being explicitly overridden by management.

‘My employer changed their policy to give up to one working week paid carers’ leave. [...] However the CEO said he thought that carers taking special leave would make other staff feel disadvantaged.’

Negative attitudes in the workplace can lead carers to avoid discussing their caring roles, and to shy away from seeking formal support.\(^{12,13}\) It was striking that even those carers who had discussed their caring roles with their employer described having had to be ‘brave’ or ‘assertive’ to do so.

‘I had to give up teaching. But I’m not a fighter, I just accept things. I was juggling work with caring for two disabled children.’

**Managing emergencies and transitions**

Managing the inevitable emergencies that arise when loved-ones have complex needs was seen as another key challenge to remaining in work, for the carers to whom we spoke. Carers described a range of challenges, from employers refusing to allow them to have a telephone with them to make and receive urgent personal calls, to lack of flexibility in taking time off.

For many carers, having to deal with a crisis was the trigger to coming to terms with the growing impact of their caring responsibilities on their working lives. For some, these emergencies had prompted them to realise that they were a carer.

‘Employers should be supportive of emergency commitments – but this could lead to feeling guilty about taking time off.’

These experiences are backed by other research among older carers, which found that in general emergencies were not well catered for; that even when policies around emergency leave were in place these were often restricted to immediate family members and therefore could not be used in all caring situations; and that leave often had to be negotiated, rather than being treated as a right, leaving carers feeling exposed in taking up these options.\(^{14}\)

It was clear that these transitions are particularly ‘risky’ periods for labour market withdrawal, and had precipitated the withdrawal from work of a number of carers to whom we spoke.

‘I didn’t initially know I was a carer. A key stage in the transition to being a carer was when I decided to tell my employer. This meant a changed identity.’
Self-employment

‘Clients were sympathetic, but in the end the world keeps moving and they need someone to do the job.’

Caring also has an impact on older workers who are self-employed. Age UK analysis shows that self-employed people with caring responsibilities on average reduce their working time by 1.8 hours per week: with self-employed men and women typically cutting two and 1.6 hours per week respectively.

One participant in our focus group explained how he had attempted to set up his own business as a haulier after leaving his previous job to care for his wife. However, he found the need for flexibility to meet caring responsibilities was unattainable, and that if client orders could not be met they simply went elsewhere and he lost their custom. The business was ultimately not sustainable.

Barriers in the system

Inadequate care and support services

Also significant in impacting carers’ decisions about work are their experiences of the care system and of the services available to their loved-ones.

A recent survey for Carers UK, showed that 30 per cent of carers who had given up work, retired early or reduced working hours had done so because there were no suitable care services available, and 22 per cent because care services were too expensive. This echoes an earlier major study of working carers which found that only a quarter felt they had adequate support from formal services to enable them to combine work and care.

In our focus groups carers described being unable to find care that met their loved-one’s needs and which fit around work commitments – with ensuring that loved-ones could attend multiple appointments presenting a particular challenge. Many carers had experienced long delays in having their loved-ones’ needs assessed leading them to have to leave work to step in to provide care, even when they would have preferred to remain in employment.

Carers looking after people with dementia stressed that there are specific barriers here. The length of time it can take to get a diagnosis, during which time there is little or no support available, can create additional barriers. Some carers told us that by the time they got a diagnosis and support they had already left their job.
However, the research makes clear that where appropriate care services are available it has a protective effect on carers’ ability to work. Studies have shown:

- Links between caring and labour market withdrawal are less pronounced in countries where more formal services are available.17
- Carers caring for ten or more hours a week are more likely to be in employment if the cared-for person receives at least one paid-for service.18

### Disincentives in the benefits system

The interaction of work with the system of carers’ benefits can act as a significant barrier to work. Many carers value the social and mental health benefits that the workplace can bring, but removing the financial incentive to work through the withdrawal of Carer’s Allowance persuades people to give up their job.

The earnings limit on Carer’s Allowance (currently set at £110 per week – equivalent to 15 hours work at the National Minimum Wage (April 2016 rates)) creates disincentives to work, particularly for carers whose earnings would be close to this level.19 A carer earning over £110 loses Carer’s Allowance in its entirety.

‘My employer created a part time role. Because of loss of benefits it didn’t pay any more than being on benefits, it was only break even, but I took it anyway as I wanted to work.’

Carers’ sense of profound grievance at receiving no financial recognition for the work they do, was also clear in our focus groups – this was true both of carers whose earnings precluded their receipt of Carer’s Allowance and for those whose state pension was considered an ‘overlapping benefit’ with Carer’s Allowance, meaning the amount of their state pension was deducted from their Carer’s Allowance award, often leaving them with no additional financial support relating to their caring responsibilities. Carers pointed out that many of them were in receipt of substantially lower pensions overall, simply as a result of giving up work to care, and therefore felt that refusing them any recognition of their caring role was particularly unfair.

The interaction with other benefits was also complicated, with some carers highlighting the discrepancy between carers who live with their loved-ones and those who do not. This affects the rules for Housing Benefit eligibility, which can lead to perverse incentives to live away from a loved one, and hence increase the pressure to give up work.

‘Work means I don’t get carers’ benefit, I have never received a penny. [Loved-one] receives no Housing Benefits because they are living with a family member.’

As Universal Credit is rolled out, it is vital that conditionality placed on both out-of-work and in-work carers is realistic. There is a danger that, for example, it might not be possible for many working carers to meet conditionality applied to increasing earnings, and this could be highly punitive. The roll-out of Universal Credit should have this understanding at its core.

Another area of concern for carers in our focus groups was the position of carers following bereavement. Many carers were reliant on a range of benefits allocated to them and their loved-ones and were therefore very fearful that these benefits would be lost at the point at which they became bereaved. Carers fears were exacerbated by their sense that there no guarantee they would be able to return to work after their caring responsibilities had ended.

‘We hear stories of how the carer loses absolutely everything when the person they care for dies.’
Pull factors for work

‘It’s a good feeling to have a job.’

However, while carers experienced challenges in juggling work and care, many reported significant attractions to working, and were keen to remain in employment despite the difficulties they faced. In explaining their enthusiasm for work, carers cite benefits beyond the financial rewards of work, including social and health benefits, and a sense of respite from caring.20,21

‘Work is an escape – I have a reputation for being really fast on the till because I try to lose myself in work.’

‘I need to work to feel connected to other people.’

Lis’s story

Lis Robinson is 61 years old, she works full time as a civil servant in London, and is a carer for her eldest daughter who has learning disabilities and autism.

She describes work as her ‘saviour’, and is keen to help people to understand that juggling work and caring can be done, but is also clear that it isn’t easy – and requires a huge amount of emotional strength, courage and resilience.

Lis believes that, as a civil servant, she is able to access a reasonable amount of support in her role as a carer, and has generally had supportive managers and staff and benefitted from supportive HR policies. However she explains that for a long time she did not take up all the support that was on offer. Lis said: ‘You make a deliberate choice to minimise the issue in the workplace. You don’t want to make a big deal of it. It’s not necessarily that you think people will react badly to it – it’s more about what you feel about caring.’

She is also clear that caring has impacted on her career. Lis explains: ‘I stayed in the same grade and working locally for a very long time, longer than if I’d purely thought about my career. Even when I got promotion, and had two opportunities in front of me, I chose the one that was local, not because I thought it would be a better job, but purely on the grounds that I could be there for my eldest.’

She argues that real or perceived limitations tend to impact carers’ career decisions, and rather than being passed over by management, carers self-select to avoid career development for fear of the impact on their caring roles.

Ultimately however Lis did feel able to take promotion, and she attributes this to a process of becoming ‘braver’. She explains that a spell working in Human Resources also gave her greater awareness of the support on offer, and a greater confidence in taking up that support. She says that almost as important as having a supportive line manager, is having a supportive team of colleagues around her.

Latterly Lis has been involved in a ‘task and finish’ group to improve working conditions for carers with her employer – she explains: ‘I think it helped having a network of people to look at what would be helpful, and to have carers writing the policies and suggesting things to HR – this was more empowering than just having good HR policies. It was surprising how few people were aware of their rights or the opportunities for support. But as important as individual awareness is line manager awareness. Policies are no good if line managers are not aware of them, or are not supportive.’

Lis has been able to use flexible working arrangements – including flexi-time and home working – to allow her to juggle caring responsibilities such as attending appointments with social workers and support brokers. These have been invaluable. However there are times where emergencies occur and, even though she knows that colleagues are supportive, it can be hard to take up support. Describing an incident
when an emergency arose and she had to leave work, she explained: ‘I did just leave. But I felt very awkward doing that.’

She describes points of transition or crisis as particular hard to manage, as carers need to be very proactive in pushing things for their loved-ones at these times. These can be very stressful times so it is helpful to have options such as flexi-time and home working to help manage all the appointments. She says that without these arrangements she’d have to take annual leave and would end up with no time for leisure.

She argues that people need to be given time to adjust to new caring responsibilities, so they don’t panic and leave work before getting used to the ‘new normal’ of caring. She also believes that role models and case studies are important to enable people to see that juggling work and care can be done.

However Lis says that in her experience, work offers a real escape from the stress of caring. She explains: ‘Working is psychologically helpful, because you stand or fall on your own – it’s just about you. This can be quite a relief.’

Thinking about the future, Lis believes more could be done to prepare people for the reality of combining work and care – which will affect many more people as society ages. She believes it is vital that people are given the support they need to build emotional strength and resilience.

She says: ‘We need to make sure people have the information, so that when they are facing a situation – when someone has a stroke for example – the seed has already been planted, and they know someone, or they have seen something and they know where to go. We don’t need to ram it down people’s throats, but we just need to make clear that this is part of life, and it can be managed.’
2. Patterns of work and care in later life
At the last Census, over **5.7 million people in England and Wales were providing unpaid care**, of whom 58 per cent were women and 42 per cent were men.\textsuperscript{22} Around 2.1 million adults in the UK take on a caring role each year and a similar number cease care-giving.\textsuperscript{23}

Although at all ages the vast majority of people (around 80 per cent or more) provide no unpaid care, individuals in late middle age (aged 50 to 64) are most likely to be carers – with nearly a quarter of women in this age group (23.6 per cent) providing some unpaid care – followed by those aged 65 or over. And the likelihood of needing to provide 50+ hours per week of unpaid care increases with the age of the carer.
Combining work and caring

Across the population, over three million carers in the UK combine work with caring, and this includes over two million who work full-time. However, research clearly demonstrates that caring has a negative impact on people’s ability to remain in work. Overall it is estimated that approximately 315,000 carers aged 16–64 in England have left employment to provide unpaid care and are currently out of employment. Of these, 120,000 are men and 195,000 are women.
However the extent of the impact of care on work varies, such that:

- Rates of employment drop sharply as the number of hours of care provided increase.\textsuperscript{29,30}
- Co-resident carers are significantly less likely to be in employment than carers who do not live with the person for whom they care.\textsuperscript{31}
- Rates of employment among carers vary significantly by age, such that in one study looking at carers providing ten or more hours a week of care:
  - Of those aged 18–24 years 38.7 per cent of women and 45.6 per cent of men were employed;
  - Of those aged 35–49 years 50 per cent of women and 46.1 per cent of men were employed; and
  - Of those aged between 50 years and state pension age 45.3 per cent of women and 35.5 per cent of men were in employment.\textsuperscript{32}

There are also differences along gender lines; with male carers experiencing a sharper rate of employment withdrawal, but women’s higher employment rate largely a product of part-time working.\textsuperscript{33}

Figure 3 shows the hours of care cross-referenced by the proportion of 50+ men and women not working (unemployed and economically inactive). It appears that caring acts as a barrier to work, with the proportion out-of-work increasing along with hours. At a low number of hours, however, work prospects appear to increase – something that warrants further investigation. Trends among older workers mirror those among the wider working age population, such that rates of employment decline as the number of hours of care provided rise.\textsuperscript{34} However, even so, almost one quarter of round-the-clock carers aged 50–64 are in work, and the majority of these (four fifths) employed (rather than self-employed).\textsuperscript{35}

The need for action is clear – once people are caring it is likely to provide an additional obstacle to work, and support will be needed to enable these individuals to return to employment.

It is worth noting that it is not possible to draw a conclusion about the direct impact of caring from this analysis. In the section on ‘Tipping points’ below we isolate the impact of caring alone on employment prospects.

Figure 3: Proportion of older workers caring and not in paid work, Age UK analysis of Understanding Society \textsuperscript{36}
Clearly individual carers’ circumstances and the ways in which they respond to the challenges of caring vary. In a survey undertaken for Carers UK in 2015, half (51 per cent) of carers responding said they had given up work to care and 12 per cent had retired early to care. A fifth (21 per cent) had reduced their working hours, and 13 per cent had to take a less qualified job or turned down promotion to fit around caring.37

**Tipping points**

New analysis by Age UK, shown in Figure 4, demonstrates the exclusive impact of caring on employment. It isolates this from other factors showing how much caring alone effects employment rates when compared to someone who cares for zero hours. For example, after controlling other factors (age, gender etc.), caring is responsible for someone caring for 20–34 hours per week being only 61.1 per cent as likely to be in employment as someone who has no-caring responsibilities.

It also shows that the ‘tipping point’ is as few as five hours of care, with significant numbers of people being forced to compromise their ideal working pattern to meet their caring responsibilities. The analysis confirms this is due to the fact that people are caring. The more hours of caring undertaken, the greater is the effect on employment.

Numerous studies have sought to understand the ‘tipping point’ between care provision and labour market withdrawal.38,39,40 These analyses make clear that caring impacts on labour market participation even when it takes up relatively few hours per week.

*The Age UK analysis confirms that the more hours of caring per week, the greater the effect on employment – and that this is due to the caring itself.*

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**Figure 4: Change in likelihood of being in paid work as a result of caring,**
*Age UK analysis of Understanding Society*41

<table>
<thead>
<tr>
<th>Hours of caring per week</th>
<th>Likelihood of being in paid work relative to non-carer</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>100%</td>
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<tr>
<td>1-4</td>
<td>90%</td>
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<tr>
<td>5-9</td>
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<td>10-19</td>
<td>70%</td>
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</tbody>
</table>
Age UK’s analysis also examined the effects of the number of hours of informal care provided on the number of hours worked. It found that:

- Among those providing 10 hours or more of care: both 50+ men and women are more likely to leave paid employment altogether than to reduce their hours.
- Women who continue in paid employment after starting to provide informal care for at least 10 hours a week, are more likely to reduce their working hours, than women who do not take on caring responsibilities.

This confirms the findings of a 2013 study based on the English Longitudinal Study of Ageing.42

These findings are particularly significant in considering what should be the criteria for eligibility for Carer’s Allowance, which currently are set at caring for 35 hours or more. It is clear that the impact on work has already been felt long before someone is providing these amounts of care.

Factors impacting choices around care and work

It is clear that the challenges facing carers are not experienced universally. For example rural working carers’ experiences have been found to be different to those living in urban areas, as a result of the increased distances between work and home, the challenges accessing services in rural areas, and the different nature of the employment market in many rural areas.43 And part-time workers have been shown to be more likely than full-time workers to reduce their hours of paid employment when they start caring.44

There are also differences between the experiences of carers in different types of employment. In our focus groups some carers perceived that caring was incompatible with certain types of profession:

‘Working as a haulier I found I was increasingly unable to be reliable and to keep deadlines so lost business associates.’

‘If you need 820 people to run a production line then that’s what you need.’

New analysis by Age UK, of the experience of women aged 50–59 and men aged 50–64 who are in paid employment, has also shown that the impact of becoming a carer on the number of hours worked is dependent on their occupational group (i.e. whether the person is in a managerial or professional, a semi-skilled or unskilled occupation etc.)* This analysis found that people who work in lower skilled roles experience a significantly greater impact to their roles than those who work in higher occupational groups:

- The higher the occupational group of the older person concerned, the smaller the reduction in number of hours in paid employment as a result of becoming a carer.
- There was a continuum of decreasing reductions in working hours the higher the occupational group – for those in full-time employment (i.e. working for 35 hours a week or more), becoming a carer implies an average reduction of three hours for older workers in unskilled or partly skilled occupations, of 1.61 hours for those in skilled occupations, and of 1.33 hours for those in the higher occupational social classes.
- Among all workers (i.e. both those working full-time and part-time), workers in unskilled or partly skilled occupations, reduced their working hours by 1.68 hours a week on average as a result of becoming a carer, while those in professional, managerial or technical occupations on average made no reduction in their working hours.45

* Results were controlled for age, gender, marital status, and whether the worker was an employee or self-employed.
These findings are aligned with previous Age UK research on flexible working, which found that workers in managerial, professional or higher skilled roles are significantly more likely to be able to work flexibly than those in lower skilled and routine occupations. This lack of access to flexible working is likely to play a significant role in pushing carers out of work. The government and employers must take urgent action to improve access to genuine flexible working – i.e. flexibility that actually benefits the worker, as opposed to the employer – among lower skilled workers in particular.

Gender, care and working in later life

’The company didn’t really understand the significance of being a carer. I think I experience discrimination as a man as employers think I am on a scam.’

The evidence around the impact of gender on care and work in later life is mixed, and it is hard to draw clear conclusions. The evidence tends to show that men are slightly more likely than women to withdraw altogether from the labour market when they become carers. However women who are in work are more likely overall to be in part-time work and we know that part-time workers are more likely than full-time workers to reduce their hours when they become carers. It is therefore likely that the overall employment figures for women mask a large number of female carers experiencing significant disadvantage due to being forced to reduce their working hours to provide care.

The literature tends to highlight the financial and other disadvantage experienced by carers and former carers as an issue particular affecting women, due to the higher overall propensity of women to undertake caring roles across the life course. However, as we’ve already seen men are often greatly affected by their caring responsibilities, and suffer significant disadvantages to themselves. It was also clear, in our focus groups, that some men perceived particular challenges resulting from their role as male carers. For example men reported finding it particularly difficult to talk to their employer about their caring role, because they felt that they would be perceived as ‘weak’. It will be important for employers and policy makers to understand the gendered impacts of caring as they seek to improve workplace practices.

It is likely that the overall employment figures for women mask a large number of female carers experiencing significant disadvantage due to being forced to reduce their working hours to provide care.
‘The employer didn’t realise I was dedicated to being a carer. I told them from day one but they were very target driven and had no respect for workers.’
3. Why this matters
The impact of carers’ withdrawal from the labour market
The long term impacts of the failure to facilitate older people’s efforts to combine working and caring are clear in a number of areas.

Individual impacts

Financial scarring
Caring leaves a ‘scar’ on carers’ financial resources, as a result of its impact on both income and expenditure. Women’s finances are especially like bear the scars of caring, given the higher proportions who take on caring roles across their life courses.49

Carers tend to have lower earnings, as a result of having to leave work, reduce their working hours, or to pass up opportunities for promotion or for overtime. And these reductions in income often persist beyond the period of care provision, due to difficulties carers face in returning to work.50

‘What will happen when I get to pension age? Because I am a carer there’s no pension for me.’

Carers are also disadvantaged in retirement as a result of their significantly lower levels of private pension saving than the wider population.51,52,53 According to recent research by the Pensions Policy Institute, people in receipt of Carer’s Allowance have on average 96 per cent lower total savings in defined contribution pensions, and 93 per cent lower savings in defined benefit pensions than the average saver. And while recent changes to the state pension system should, over time, ensure that more carers retire on a full state pension, their incomes overall will remain lower. In addition carers tend to have a lower propensity to save for the long term and are more likely to draw down on long term savings to meet immediate costs of caring.54, 55

At the same time carers face additional costs as a result of their caring responsibilities – these include travel costs, household expenses, and additional accommodation costs.56

The Government should consider how to ensure that carers who have had their employment – and hence their ability to save into a pension – restricted do not lose out on a private pension income in later life. This could be, for example, by paying a credit for those who are eligible for Carer’s Allowance into a private pension account, similar to Carer’s Credit which exists for the State Pension.
Wider impacts
Loss of income is not the only way in which leaving work impacts carers. In our focus groups carers spoke of the wider psychological and emotional impacts of labour market withdrawal, in terms of loneliness, loss of identity and loss of a sense of self-efficacy.

‘I feel useless, unlike when I was working when I was confident of doing a good job. I have no control over my life.’

Impacts on employers
Employers also report a range of effects resulting from their employees’ caring responsibilities, relating both to the loss of talented employees unable to combine work and care, and from the challenges facing staff who are caring. These include retention issues, reduced productivity (where carers’ capacity for work is compromised because they cannot get practical help with caring), knowledge/experience flight, and increased absence levels due to staff struggling to cope with caring responsibilities outside work.
Societal impacts
Clearly these challenges have wider societal impacts. While carers contribute significantly to our health and care system by providing support for people who would otherwise require costly services, the withdrawal of carers from the labour market brings its own implications.

The public expenditure costs of carers leaving employment are estimated at £1.3 billion a year, based on the costs of Carer’s Allowance and lost tax revenues on foregone incomes alone. Working from this analysis, Age UK has estimated the additional output from carers being able to work could therefore be up to £5.3 billion per annum.

Gaps in the later life workforce/care supply
Looking to the future, research makes clear that we will need to support more people to combine work and care in later life, if we are to avoid unsustainable shortfalls in the supply of workers and of carers.

In 2013 Pickard et al argued that ‘If intense unpaid care for older parents is to meet demand in the coming decades in England, then the proportion of the population providing this form of care will need to rise [...] Given the association between intense unpaid care provision and withdrawal from the labour market [...] a substantial increase in the number of people of working age providing intense unpaid care could lead to a decline in labour market participation, particularly among women, who constitute the majority of care-providers.’

In 2014 the Institute for Fiscal Studies sought to model the extent to which individuals aged between 65 and 74 might have to combine the provision of care with being in paid work in 2022–23. Their projections suggested an increase in the proportion of women in couples who would be in paid work and simultaneously providing informal care and a sharp drop in the proportion of women who were projected to be neither in paid work nor providing informal care.

This suggests that there will be a growing requirement for the workplace to adapt to the needs of those providing care and working in later life, and that the needs of women workers in later life should be a particular focus.

The public expenditure costs of carers leaving employment are estimated at £1.3 billion a year.
4. What makes a difference? Supporting carers to remain in work
However we know that in the context of our ageing society we cannot afford for this to happen. If we are to retain the skills of more older people in the workplace, and to avoid shortages of carers, action will be needed to break down the barriers and reduce disincentives in the system.

Looking across the evidence we have gathered from the literature and from our focus groups we can identify a range of areas for action:

- Improving access to flexible working.
- Working on attitudes and awareness – particularly among managers.
- Supporting carers through times of transition and in emergencies.
- Improving access to care services.
- Improving work support for carers.
- Removing disincentives in the benefits system.

### Improving access to flexible working

Research has shown that flexible working is one of the most important factors in determining whether or not carers are able to continue working.\(^63,64\)

The term ‘flexible working’ encompasses a wide range of working patterns and options – from the ability to reduce working hours or job share; to staggered working days; flexi-time and home working arrangements. Age UK analysis showed that in 2010 some 38 per cent of older workers benefitted from some form of flexible working arrangement.\(^65\)

However in our focus groups it was clear that many carers had struggled to make arrangements that would work for them, and many had felt unable to request the flexibility they needed.

Since 2003 carers have had the right to make a formal request for flexible working, which was extended to all employees with at least six months’ service in April 2014. Employers have a duty to consider requests and only to reject them if there are business reasons to do so. However lack of awareness of rights and responsibilities around flexible working remains a barrier for many carers.\(^66\)

In our focus groups some carers reported fears that their employer would disadvantage them if they were to request flexible working, and fear that their reputation would be damaged by doing so. This was particularly true of people working in sectors such as manufacturing, where there was a perception that they would be perceived as ‘difficult’ and could end up being forced out.

As the recent Foresight report set out: ‘**without sufficiently flexible sources of formal care, flexible work places and the support of other informal carers, those taking on informal caring responsibilities are likely to face some degree of withdrawal from paid work.**’\(^62\)
However, some employers are taking proactive steps to encourage more effective flexible working discussions between staff and managers, such as producing illustrative lists of acceptable flexible arrangements.

For example, Chelsea and Westminster Hospital has a well-established flexible working policy to support employees with caring responsibilities. Their flexible working guide sets out a range of worked examples of the choices available and stresses that it is important for individuals to request the best arrangement to suit their caring commitments, and then to discuss it with their line manager.

Age UK and Carers UK have advocated a move from the ‘right to request’ flexible working to a position in which all jobs are ‘flexible by default’. This would engender a real shift among employers and would embolden employees in requesting arrangements that work for them.

**Listawood**

Listawood is a small business, with a workforce of around 150 people, which manufactures promotional products such as ceramic mugs, fridge magnets and mouse pads. The company has made a firm commitment to creating a culture of flexibility and support for those needing to balance their home and work lives, often at short notice, which they believe is a significant driver of their strong record of staff retention.

The recent recession, and increased competition from emerging low wage economies, has placed enormous strain on Listawood’s sector, creating pressure to keep staff costs low. As part of their performance management framework, Listawood regularly survey their employees to measure staff satisfaction. The company are aware that they do not offer the best salary levels in the area – indeed only 56 per cent of staff surveyed felt their pay was competitive when compared with other employers locally. However, their deep rooted culture of flexibility is well recognised by staff – 97 per cent felt that the company offered better opportunities for work life balance than other employers in the area.

Explaining their approach, Managing Director Alex Turner said: ‘Losing highly trained staff is incredibly disruptive in any business. In the sales environment it fractures customer relationships which can result in reduced levels of business, and in the factory it compromises manufacturing efficiency. On top of this you then have to bear the costs associated with recruitment and training for their replacement. We are in no doubt that our staff retention levels are driven by our attitude to work life balance rather than the generosity of our remuneration packages. This makes it possible for us to remain competitive and profitable in a highly competitive market, even during these unusually difficult trading conditions.’

**Age UK and Carers UK** have advocated a move from the ‘right to request’ flexible working to a position in which all jobs are ‘flexible by default’.
Raising awareness and understanding of carers’ needs

However in practice, flexible working arrangements alone may not be sufficient to secure carers’ participation. Raising awareness – among staff and managers – and encouraging positive attitudes will also be vital.

‘Decisions can be very subjective and dependant on individual managers.’

In a survey of working carers for Carers UK, improved and consistent manager awareness of caring issues was considered one of the top priorities for improving carers’ experiences of work (alongside more flexible/special leave arrangements).

Current practice in leading employers points to a range of actions that could be taken to promote attitudinal change, and improve awareness of carers’ needs and rights, including:

• Formal training and awareness-raising, particularly for line managers
• Including information about caring in staff handbooks/on intranet etc.
• Creating carers networks or workplace support groups for carers, both as a means of enabling carers to support each other, and of raising awareness of caring issues.
• Identifying carers champions at senior (and other) levels within the workplace.

Carers in our focus groups were attracted to the idea of creating a single point of contact for carers within the workplace – akin to a union representative, or even a ‘Care Aider’ (like a First Aider). The aim of these schemes would be to offer carers an approachable third party with whom they could discuss any challenges they were facing, and who could support them in discussions with line managers.

Other potential solutions include a ‘carers’ passport’ – an idea developed and implemented initially by BT as a mechanism to support better communication between carers and their managers, and to promote a more consistent approach to caring issues.

Sainsbury’s

Sainsbury’s estimate that some 20,000 of its colleagues are providing care for an ill, frail or disabled family member or partner, friend or neighbour at any one time. The organisation is committed to supporting these colleagues as part of a wider recognition of the growing issue of balancing working and caring in today’s society, and a belief in the role big businesses can play in driving progress and improving things for carers in the workplace.

Sainsbury’s are longstanding steering group members of Employers for Carers and the organisation is proud of its leadership approach to supporting colleagues who are balancing work with caring responsibilities. The organisation is one of the few FTSE100 companies with a specific policy for carers, which is known as the Carers People Policy.

Staff say that a formal policy in place has made a huge difference in having conversations with other colleagues and their own line managers around the support that is available during challenging times, such as taking time off to go to appointments, changing schedules to fit around caring commitments or making adjustments to ways of working (for example, allowing mobile phones on the shop floor in case of emergencies).

Sainsbury’s strive to create a positive workplace culture and encourage people to think about what it means to be a carer through involvement in campaigns such as Carers Week and Carers Rights Day. The organisation sees this not just as a support to colleagues, but also to the wider public. With over 1300 supermarkets and convenience stores across the country the organisation is able to reach out to customers and help spread awareness of local community organisations.
Supporting carers to manage transitions and emergencies

Most carers will face emergency situations, and most will have to support their loved-ones through times of transition, and these can be risky times for maintaining carers’ employment.

Relatively simple adjustments, such as allowing carers access to telephones to receive personal calls, can help, but often carers needed more substantial adjustments – in particular the ability to take time off work, often at short notice and for unpredictable amounts of time.

Employees already have an entitlement to ‘reasonable time off’ to deal with emergencies, but in practice this is not well understood by carers or employers, and does nothing to normalise caring in the workplace.

Some employers in the UK provide packages of carers leave, but there is no statutory entitlement specific to carers. By contrast, carers in Sweden benefit from a statutory entitlement to leave to care for a relative or friend. Carers in our focus groups said that they would find a statutory entitlement to carers’ leave very helpful, and while ideally most would prefer such leave to be paid as the financial strain of being a carer can be considerable, a guarantee that using leave would not harm future employment prospects, was considered the priority.

Once a period of statutory leave has been established, progressive employers could then be encouraged to go further, by extending to carers some of the current allowances made for parents – including paid periods of leave, and options for career breaks etc.

Employees already have an entitlement to ‘reasonable time off’ to deal with emergencies, but in practice this is not well understood by carers or employers, and does nothing to normalise caring in the workplace.
As well as providing leave to support carers in emergencies or at times of transition, there is also a case for additional practical support, and this is discussed in the section on the care and support system below.

**Improving access to care services**

The Care Act 2014 confirms that enabling carers to remain in work is a legitimate aim of care and support services, however too often carers are unable to access paid-for care which would enable them to remain in work – either because services do not meet their loved-ones’ needs or do not fit around working hours and locations.

In Carers UK’s survey of working carers the top priority for support outside the workplace was more, better quality, or more suitable support from care services.71

Clearly local authorities will have an important role to play – not just in ensuring that the needs of working carers are taken into account when commissioning respite services, and services for individuals with care and support needs; but also in their roles in shaping wider provision in their local areas, and stimulating models of care that can support those not eligible for statutory services. This might include time banking schemes – through which individuals volunteer their own skills and time and receive credits which they can use to ‘buy’ volunteer services from other participants or to access leisure opportunities – and carers support groups.

As identified in the section above, a key priority will be ensuring that care and support services are made available in a timely fashion. Many carers we spoke to had been forced to leave work when their loved-ones’ needs escalated, as they found they were unable to make appropriate alternative care and support arrangements. However, the experience of other carers demonstrates that over time a balance can be struck – with some carers managing even to juggle full-time caring with work.

It is clear that, in these cases, carers are falling down the cracks between the care and support and employment support systems – and opportunities are being missed to protect carers’ employment through times of transition.

There is clearly a need for a single body to coordinate transitional support between employees, employers and the care and support system to ensure that carers do not prematurely withdraw from the labour market. If properly supported, more carers may be encouraged to remain in work, thereby reducing their likely need for support from the welfare system in the longer term. There is therefore a case for considering what role Jobcentre Plus may be able to play in coordinating such support.

Employers may also be able to play a role by providing information about, and signposting employees to, external sources of support. Some leading (larger) employers also offer practical support such as care search and back-up care and eldercare services through employee assistance programmes. However, this is still relatively rare compared with childcare.

**Improving work support for carers**

While many carers, with the right support, are able to remain in work, some will withdraw from work, and others will need to change their jobs due to their caring roles.

These carers need access to tailored employment support which is sensitive to their needs, both during and after their time of caring. Unfortunately carers told us that they are not confident that the support offered through Jobcentre Plus is suited to their needs.

Similarly, Age UK analysis of the Work Programme has found it to be particularly poor for older jobseekers, with providers often failing to meet the needs of this age group adequately.72
This is significant because, in addition to the challenges of combining work with care, older carers face a number of barriers related to their age, including discrimination from employers and having outdated qualifications. For carers aged 50+, there is therefore a ‘double whammy’ – or even a ‘triple whammy’ among those who also have health problems – of barriers which can be difficult to tackle effectively within mainstream employment services.

There was near unanimous agreement in our focus groups that a specialist 50+ employment support programme would be more adept at dealing with the barriers faced by this cohort, and would be well placed to support older carers. Greater interaction between Jobcentre Plus and local specialist programmes would be highly desirable, and should be actively encouraged by the Department for Work and Pensions through Jobcentre Plus’ ‘Flexible Support Fund’. Similarly the new Work and Health Programme for the long term unemployed must address the barriers faced by older workers, and take particular account of the challenges associated with caring.

Carers and former carers who are required to seek work need to be supported appropriately, with Claimant Commitments that are tailored to their personal circumstances, and support around their particular needs such as help in discussing flexible work with potential employers.

A particular priority for older carers will be ensuring appropriate support is available to those who want to return to work after their period of caring has ended. It is clear that returning to work after caring is not simple. Studies have shown that former carers are less likely to return to the labour market after their responsibilities have ended. Carers UK has called for cross-Government work to develop support for carers to return to work when caring ends, an aim which is fully supported by Age UK. It will be vital that includes consideration of how to reach out to former carers who are above state pension age, so that these individuals are given the opportunity to compensate for previous lost earnings, and for the impacts of their caring on their pension entitlements.

Removing disincentives in the benefits system

It is clear that the benefits system can operate as a disincentive to carers continuing to work – particularly for those whose earnings are close to the current earnings limit for Carer’s Allowance of £110 per week.

The wider complexity of the benefits system can create additional burdens for carers – as several carers in our focus groups described having to juggle complex benefits interactions for themselves and their loved-ones, and in some cases had been forced to live apart from their loved-ones against their best interests.

Caring can also affect future retirement income. Despite changes that make it easier for carers to build up state pension entitlement, in some situations carers need to make a claim for Carer’s Credits and may be missing out. Furthermore many carers continue to be disadvantaged in later life by a lack of private pension savings, and due to overlapping benefits rules, they may receive little or no financial recognition of their role as carers once they are in receipt of a state pension.

Clearly making adequate provision for carers and their loved-ones will remain a challenge, particularly in the current economic climate. However there is a clear case for a full review of how the benefits system operates for carers in order to make it easier to understand, to eliminate disincentives to work and provide a fair reward to those whose work is impacted by caring responsibilities.
‘The NHS was very flexible but once I went below three days I had to become bank staff. This enabled flexibility in my working pattern but I lost benefits such as holiday pay, which seemed particularly unfair.’
5. Recommendations
Below we set out a series of recommendations for **action by employers, by the Government and others.**

**Improving access to flexible working**

Carers need access to a range of flexible working options. Age UK and Carers UK have already called on the Government to make all jobs ‘flexible by default’ to support longer working lives. For carers this is vital.

**Employers should:**
- Make flexible working options available to staff from ‘day one’, and ensure flexibility is explicitly referenced in recruitment literature.
- Take proactive steps to promote flexible working options available to staff, and to encourage staff and managers to discuss working patterns with all staff. Potential mechanisms could include:
  - Creating a ‘menu’ of potential flexible working patterns available to staff.
  - Making consideration of what flexibilities could be offered a requirement for approval of headcount changes.
- Consider what flexibilities could be offered to applicants for each arising vacancy.

**Central Government should:**
- Create a requirement for all jobs to be ‘flexible by default.’
- Work with industry to develop a kitemark for flexible working, including a requirement to allow new staff to request flexible working arrangements at the point of recruitment. Measures of quality could include carer retention.

**Working on attitudes and awareness – particularly among managers**

While formal arrangements are important, action is needed to build awareness of caring issues in the workplace, and to shift attitudes, particularly among managers, to the needs of those caring in later life.

**Employers should:**
- Provide training to managers on the issues affecting carers and the mechanisms in place to support them.
- Create visible signals of their ‘carer friendly’ status, which could include:
  - A named contact for carers in the workplace.
  - Carers forums and support groups for staff.
  - Carers champion(s) within the workplace, especially at senior levels.
- Consider introducing ‘carer passports’ to support carers in managing discussions around their needs.
Central Government should:

- Work with Employers for Carers and other relevant parties to consider the development of a ‘carer friendly/positive about carers’ accreditation for workplaces along the lines of the two ticks disability scheme.
- Work with employers across sectors to encourage wider understanding of the growing number of older carers in the workforce and of the business case for supporting carers to remain in work.

Supporting carers through times of transition and in emergencies

While longer term flexible working arrangements can enable carers to balance day to day caring with work, emergencies, and periods of transition will arise, and carers need to support to manage these.

Central Government should:

- Introduce a statutory entitlement to at least five days paid leave and look at a longer period of unpaid leave.
- Designate a single body to coordinate transitional support between employees, employers and the care and support system to ensure that carers do not prematurely withdraw from the labour market.

Improving access to care services

It is clear that the inadequacy of care services is a key factor in forcing more older carers to withdraw from the labour market. We need to improve access to flexible care and support – both day to day and particularly at times of transition – to support older workers to remain in the workplace.

Employers should:

- Signpost carers to external sources of practical support. Employers that provide Employee Assistance packages should consider including specific services such as care search, back-up care and eldercare services as part of these.
Central Government should:

• Explore how best to encourage closer joint working between carers, the care and support system and employers to support carers through times of transition, including exploring the potential for Jobcentre Plus to play a role.
• Consider the case for transitional support packages, for carers whose employment is at risk.

Local authority commissioners should:

• Consider the needs of working carers in shaping the local market.
• Consider how time banking and other voluntary schemes might offer support to those carers not eligible for statutory support.

Improving work support for carers

It is vitally important that the unemployment support system is responsive to the needs of carers.

Central Government should:

• Ensure that claimant commitments for carers are realistic and reflect the real life circumstances of carers.
• Provide training for all Jobcentre Plus staff relating to the barriers faced by carers and the over 50s.
• Ensure that harder-to-help carers, e.g. those aged 50+ and with their own health problems, have access to more intensive brokerage service as part of the Jobcentre Plus service.
• Develop specific programmes to support former carers to return to work. These programmes should be open to carers over state pension age.

Improving financial support for carers

It is clear that the benefits system does not currently work effectively to support carers to continue working.

Government should:

• Review Carer’s Allowance, and wider benefits available to carers, to ensure that working carers are getting the financial support they need, and to reduce disincentives to work.
• Consider how the contribution of carers who are not in receipt of Carer’s Allowance either due to their earnings or their receipt of a state pension can be recognised.
• Align a rise in the earnings threshold for Carer’s Allowance and any rise in the National Living Wage to ensure that carers can always work a minimum of 16 hours at National Living Wage and receive Carer’s Allowance.

It is clear that the benefits system does not currently work effectively to support carers to continue working.


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About Age UK

Age UK is the country’s largest charity dedicated to helping everyone make the most of later life.

We believe in a world where everyone can love later life and we work every day to achieve this. We help more than 5 million people every year, providing support, companionship and advice for older people who need it most. The Age UK network includes Age UK, Age Cymru, Age NI and Age Scotland and around 165 local Age UK partners in England. Learn more at www.ageuk.org.uk

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