

Scotland Briefing: Caring About Equality



Introduction

This year, Carers Week 2025 focuses on the theme of **Caring About Equality**. It is <u>60 years since the carers'</u> movement officially began, and whilst there is greater awareness of unpaid carers and young carers, and rights and entitlements across employment, care, finances and health services, too many unpaid carers still feel invisible and are not adequately supported. To tackle the disadvantages they experience and to ensure equality of access to support and opportunities, carers need tailored help that recognises their individual circumstances, caring responsibilities and barriers they may face.

Caring affects most families and is vital to both our communities and to the sustainability of health and social care services. Research published for Carers Week found that over a third (37%) of the Scottish adult population – **1.7** million people - have provided unpaid care at some point in their lives, whilst 716,250 people are currently providing unpaid care in Scotland. This estimation is higher than providing unpaid care identified in Scotland's Census 2022ⁱ (627,715 people). We also estimate that there are currently 28,000 young carers aged under 18ⁱⁱ.

Unpaid carers' contribution, though vital to society, often comes at a great personal cost, especially when adequate practical and financial support is not available.

Every day nearly 1,000 people in Scotland become unpaid carersⁱⁱⁱ. Scotland's Census showed that carers were providing more hours of care than ever before and the value of their support across Scotland has reached a staggering £15.9 billion every year^{iv}. With an ageing population, people living longer with multiple conditions, and care being brought closer to home, caring is likely to be a feature of most people's lives in the future.

There is a significant and growing risk that if the UK <u>and</u> Scottish Governments do not **proactively tackle** the inequality that unpaid carers and young carers experience, more people will end up living in poverty and in poor physical and mental health, with reduced educational attainment and employment prospects. Inaction will have a profound impact on our society, economy and the lives of carers and young carers.

As part of this year's Carers Week, the Carers Week partners have published new research "Caring About Equality" which sets out the impacts on the lives of current and former carers including on employment, health, education and income. The report, which covers the whole of the UK, with some summary data for Scotland, can be found at www.carersweek.org.

This Scotland briefing for Carers Week builds on the report, sharing a summary of its findings alongside a range of information and data from research on unpaid carers in Scotland. This demonstrates that, whilst progress has been made in support for carers, too many continue to face significant inequality.

Carers Week is a partnership across the UK seeking to raise awareness and campaigning for the needs of unpaid carers to be recognised and action taken to improve their lives. In Scotland, the partners are Carers Scotland, Age Scotland, Carers Trust Scotland, MND Scotland, Oxfam Scotland and The Lewy Body Society.

Caring, equality and financial security

This year's Carers Week report shows that, across the UK, financial worries continue to be a concern for many carers, with 47% of current and former carers saying that they face disadvantages in relation to their finances. Carers from underrepresented groups including LGB+ carers and ethnic minority carers were even more likely to say they face disadvantages with their finances. For example, a higher proportion of LGB+ current and former unpaid carers across the UK said they face disadvantages in relation to their finances, compared with heterosexual current and former carers (52% compared with 47%).

Key Facts

- 28% of unpaid carers and 65% of those in receipt of a Carer Element within income related benefits such as Universal Credit live in poverty.
- Two thirds (65%) of unpaid carers are struggling to afford the costs of electricity and gas, with 28% cutting back on essentials like food and heating to make ends meet^{vi}.
- One in eight (12%) of unpaid carers have skipped meals and 11% not eaten for a day to make ends meet. vii
- Two thirds (617%) of BME unpaid carers suffer financial difficulties due to caring with 52% cutting back on food or utility bills to make ends meet^{viii}.

Unpaid carers are at a higher risk of poverty due to several factors, including the need to reduce or leave paid work to provide care, the high costs associated with caring, and the limitations of the social security system in adequately supporting them. Carers have a 56% greater likelihood of living in poverty than non-carers and a 60% greater chance of living in deep poverty^{ix}. Some groups experience even greater challenge, including those in receipt of means tested benefits, disabled carers and unpaid carers who are caring for a disabled child or have parental responsibility for a non-disabled child under 18^x.

There are over 120,000 people aged 65 and over providing unpaid care. One in five older carers are living in poverty and the rate of poverty for carers aged 65 and over is 54% higher than non-carers of the same age group. Most older carers are not eligible for Carer Support Payment because of complex benefit rules but can be eligible for a Carer Addition in Pension Credit. However, only 65% of those eligible for Pension Credit received it in 2023 and many unpaid carers of pension age do not know the complex rules around carer benefits.

Poverty is not confined to those unpaid carers who are not in paid employment, with research showing that one in six carers currently in paid work are struggling to make ends meet and over a quarter (26%) are cutting back on essentials such as food and energy^{xi}.

Caring, equality and employment

This year's Carers Week report shows that of people who are or have been an unpaid carer in the past in Scotland, 24% had reduced their working hours, 15% had given up their work and 14% had turned down career opportunities. The proportion reducing hours of work was the highest amongst all UK nations. Of impact to future career prospects and aspirations, the research also found that 6% of unpaid carers had stopped studying or decided not to study.

Key Facts

- 303,928 unpaid carers in Scotland are employed, and 48,475 are self-employedxii
- A third (39%) of carers who have given up work to care said they were struggling to make ends meetxiii.
- Half (57%) of carers who reduced their paid employment hours and 34% of working age carers said that they have not been able to save as much, on indeed anything, for their retirement^{xiv}
- Recent research on BME unpaid carers found that half (48%) were "not in paid work", which impacted family income and savings for the future^{xv}.

Unpaid carers are less likely to be in paid work than others who do not have caring responsibilities^{xvi}. Previous research by Carers UK has found that 600 people a day have given up work to care^{xvii} and research by Carers Scotland also found that 34% of current unpaid carers had given up employment *at some point in their career* to provide care. Many more face reducing hours or taking on a less qualified and lower paid role to manage the demands of unpaid care alongside paid employment. In addition, the peak age for caring (45-54) coincides with the peak of individual careers making the negative impacts on earnings and retirement income even greater.

Reducing unpaid carers' ability to be in paid employment has potentially devastating consequences for both their short-and long-term finances but also for the economy. Employers lose talented and skilled workers and have increased costs to recruit and retrain, and the economy sees productivity impacts and the economy could be affected by ill-health and unpaid carer to the staggering cost of £37 billion a year^{xviii}. As many as one in three workers within the NHS is an unpaid carer^{xix}.

Caring, equality and health

This year's Carers Week report shows that 41% of current and former carers in Scotland said they had either a mental or physical health condition develop or become worse when they were providing care. A quarter (24%) of current or former carers said they had postponed or cancelled a medical appointment, test, scan, treatment or therapy because of caring and 54% said they face disadvantages trying to look after their own health and wellbeing. Across the UK, young adult carers (aged 18-24) were most likely to say they had done so. Concerningly, it was also young adult carers who were most likely to say they had a health condition develop or get worse since they began caring (57%). Given the importance of social connections and breaks to physical and mental health, unpaid carers said that they face disadvantages in their ability to take a break (50%) and in their social life (61%).

Key Facts

- 36% of all unpaid carers and 59% of carers who were struggling to make ends meet said they had bad or very bad mental health and 28% of all unpaid carers and 49% of carers struggling to make ends said they had bad or very bad physical health^{xx}.
- 60% of BME unpaid carers said their physical health had suffered because of caring with 40% saying their mental health had suffered. Only 1 in 4 said they have access to any support that allows them to take a break from caring^{xxi}.
- 63% of unpaid carers felt overwhelmed because they have not had a break from caring and 50% because of their own health needs^{xxii}.
- Over a half (51%) of young carers or young adult carers "always" or "usually" feel worried about their future and 52% "always" or "usually" feel stressed because of being a young carer or young adult carer, and 25% either "never" or "not often" feel they get enough sleep.**xiv

Levels of poor physical and mental health are increasing, for example, research showed a 28% increase in poor mental health in 12 months^{xxv} and that more than half (54%) of unpaid carers said their physical health has suffered because of caring, with 20% suffering an injury from caring^{xxvi}.

Caring is a social determinant of health xxviii and data is increasingly showing health inequalities between those who are caring for disabled, older and ill-relatives and friends and those who are not xxviii. Some of these negative impacts are long lasting, and many could be preventable or reduced. However, unless action is taken to increase unpaid carers equality of access of healthcare and support, there are substantial risks to individual health but also to the economy and the sustainability of health and social care services. The Scottish Fiscal Commission recognises this risk: "the age demographic of unpaid carers and the fact that this age group has seen the largest increase in reporting of a health problem or disability which limits day-to-day activities between 2011 to 2022 poses a risk in the future. This is the age group that carries out most unpaid care who may not be able to do so because of their own activity-limiting health problems".

Caring, Equality and Gender

This year's Carers Week report shows a much higher proportion of female current and former unpaid carers across the UK said they face disadvantages with their health compared with males (64% compared with 52%). A higher proportion of female current and former carers also said they had struggled to look after their health and wellbeing (37%) compared with male current and former carers (27%). Female carers were also 67% more likely to be providing 50 hours or more of care each week. However, a higher proportion of male current or former carers said they face disadvantages with their education compared with females (33% compared with 21%).

Key Facts

- Women represent 58% of all unpaid carers in Scotland^{xxix}.
- More women are 38% more likely to be provide intense care of 50 hours or more each weekxxx.
- Women in Scotland provide care 12 years earlier than menxxxi.

It is well evidenced that women disproportionately shoulder the burden of unpaid care work, spending significantly more time on household tasks, childcare, and caring for family members than men. This is shown clearly in research about caring for an older, ill or disabled relative, where women have a greater likelihood of being an unpaid carer, providing more intense caring hours <u>and</u> of providing care earlier than men. Women have 50:50 chance of providing care by the time they are aged 45, men by the age of 57^{xxxii}.

This imbalance in the division of unpaid labour contributes to women's economic disadvantage. Women are more likely to reduce their working hours in order to provide unpaid care. Research in Scotland found that women are twice as likely than men to give up paid work to care and more likely to be working in part-time, insecure work working in part-time, insecure work working long term implications and is inextricably linked to greater poverty, including child poverty, with women twice as likely to be reliant on social security. Poverty can last long into retirement, often long after the caring role has ended two-thirds (67%) of pensioners in poverty are women working to women working the security.

Conclusion and Recommendations

This year's Carers Week research, and previous research from the Carers Week partners provided in this briefing, clearly sets out the significant impacts of providing unpaid care and the disadvantages that current and former carers face in their health, finances, work, education and social contact. Many of these negative impacts could be prevented with greater recognition and targeted support. This is particularly important as many carers do not feel they have a choice in providing unpaid care. Carers Week 2024 research found that 62% of unpaid carers had no choice about caring because there were no other care options available.

And, given the disparities and inequalities that exist between groups of unpaid carers linked with factors such as age, gender and ethnicity, it is vital that tailored support is provided, and barriers reduced so that all carers have access to the same opportunities and life chances.

Significant and sustained action is needed urgently to address the inequalities faced by unpaid carers in protecting and sustaining their health and wellbeing. With such a high proportion of carers struggling to look after their health and wellbeing, and many carers having to cancel their own medical appointments due to the demands of their caring role, this needs to be a key focus for change. Addressing these issues will begin to help improve the health and wellbeing of carers, preventing the breakdown of care and supporting the sustainability of the NHS and social care services for the future.

However, and damagingly, a lack of recognition and targeted support for carers has been reinforced by the omission of care and carers from the Scottish Government's National Outcomes, which it says describe the kind of Scotland it

aims to create. This was on the cusp of changing last year with the publication of <u>a new set of draft national</u> <u>outcomes</u>, but has been indefinitely delayed. The Government argued that its inclusion would help to ensure that gender equality is "more effectively represented in the National Outcomes". As argued by the <u>A Scotland that Cares campaign</u>, a dedicated National Outcome isn't a panacea, or a replacement for immediate action to reduce many of the inequalities highlights in this briefing, but it would help to provide a strong focus for new, and sustained, policy and spending action at national and local levels which has never been more necessary.

The Carers Week partners have made a range of recommendations in the full <u>Carers Week report</u>. Key recommendations for the Scottish Government include:

- An urgent need to increase investment in social care, recognising both its fundamental role in supporting the
 NHS and its key role in protecting the health and wellbeing of unpaid carers and their opportunities to take part in
 employment and education. This should include investing in local carer services, including carer support within
 condition-specific organisations, to provide support for mental wellbeing and training to support caring.
- Local authorities should include a dedicated Equalities section in Local Carers Strategies to ensure that
 unpaid carers with protected characteristics are identified, more accessible information is made available, and
 that support services provided are culturally and linguistically appropriate.
- Delivering the proposed right to a break for unpaid carers, ensuring that it is fully funded and that work is undertaken to ensure that a full range of break options are available to meet diverse needs. This should include breaks that are culturally and linguistically accessible to BME carers.
- Developing a **dedicated Carers Health Inequalities Plan** with measurable actions to improve carers' health in the short, medium and long term to prevent the health inequalities that carers and young carers face.
- Increasing the value of and eligibility for Carer Support Payment including ensuring that plans to deliver a new payment for those caring for more than one person are delivered in this Parliamentary term. This should include reforming the earnings threshold, extending the time carers are paid the benefit when the person they care for has died, and working to deliver an older carers recognition payment. Work should also take place to monitor the uptake from unpaid carers with protected characteristics and take action to reduce barriers, including developing communication strategies that ensure full and equal access to relevant information, including for non-first language English speakers and those who are digitally excluded.
- Committing to delivering a pilot Minimum Income Guarantee for unpaid carers to provide increased income and holistic support to prevent the significant poverty that carers experience.
- Continuing to promote and support the Carer Positive award and encourage employers across Scotland to support carers in their workforce, including though public procurement.
- End the delay in the publication of the new National Outcomes which include a dedicated National Outcome on Care in Scotland, as called for by the <u>A Scotland that Cares campaign</u>, to better value and invest in all those who provide care, whether paid or unpaid, as well as all those who experience care, with robust indicators to assess and track progress over time, including on reducing the inequalities highlighted here.

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