

Need to know

Transitions in and out of caring: the information challenge



Contents

Summary	3
Key research findings	4
Implications of carer turnover	5
Why information & advice matters	7
Conclusions	13
Recommendations	14
Appendix 1: research method	16
Appendix 2: local data	17



Summary

As our population ages and more people live for longer with long-term health conditions, the pressure on families to provide care and support will continue to increase.

More and more of us will find ourselves looking after a loved one over the coming years, with this research suggesting there will be over 10.6 million new caring episodes over the course of the next five-year Parliament.

This means it has never been more important for good quality information and advice to be available for carers and a step-change is needed with new policies to ensure that carers are identified and reached earlier.

Carers UK's evidence shows that many people providing unpaid care to relatives and close friends do not recognise themselves as carers, do not know about the range of help that is out there and are not always signposted to support when they should be. The impact can be huge – both personally and financially.

Moreover, the carer population is not static – it is changing all the time. Every year millions of people find themselves in a new caring role, facing new challenges, often trying to juggle work and other family responsibilities alongside looking after an older, disabled or seriously ill relative or friend. Equally, around a similar number will end caring. Many will not need additional help when caring ends, but others will need tailored advice, information and support in order to cope.

Without help and support, carers and former carers can find themselves facing debt, financial hardship, stress and relationship breakdown. They can eventually be pushed to breaking point. This has serious consequences for individuals, families, employers and the UK economy as a whole, so it is vital that we do more to ensure all carers have the advice and information they need to access essential support.

This information and support challenge is one that is faced in all nations in the UK, whether Governments are working with existing legislation, or are looking to implement new legislation such as the Care Act 2014 in England, the Social Services & Well-being (Wales) Act 2014 in Wales, legislation to integrate health and social care services for adults and a new Carers Bill in Scotland, or are bringing in significant changes in how social care is delivered such as with Transforming Your Care in Northern Ireland.

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If I had known then what I know now, I'm pretty sure that knowing my rights at work would have kept me in work for longer. I would have pushed harder for help that would have prevented a lot of health issues that I had down the line and we would all have been better off all round. It's vital that we get to know our rights and what support is out there, not just when we start caring, but every step of the way when things change.

Kate Keays, Carers UK Local Ambassador

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Key research findings

New analysis by Michael Hirst of the Social Policy Research Unit at the University of York, carried out on behalf of Carers UK, estimates that over 2.1 million people become carers each year while just under 2.1 million people find their caring role comes to an end each year.¹ That's more than 10.6 million new caring roles over the course of the next Parliament.

This means that the proportion of carers who are in a new caring role is around a third of the total carer population at any one time.

This presents a big challenge for services, employers, local authorities and the NHS as they need to plan for this constant change and reach out to the new and hidden carers who are not accessing essential help and

support. Appendix 2 shows the transitions in and out of caring by local authority, giving some idea of the challenge facing councils and other services to ensure that local carers have access to advice and information early on in their caring journey.

The Care Act 2014, which will come into force in England from April 2015, and the Social Services & Well-being (Wales) Act 2014 which will take effect in 2016, are a step towards meeting this challenge as they will put a duty on local authorities to make advice and information available to all carers. The Carers Bill in Scotland is likely to do the same, and Health and Social Care Trusts in Northern Ireland already have a duty to inform carers under The Carers and Direct Payments Act 2002.

2.1 million people take on a new caring role each year, while just under 2.1 million people stop caring.

Nearly **6,000** people become carers every day.

Over **10.6 million** people will become carers over the next five-year Parliament.

Around **16,400** people will begin caring in the average parliamentary constituency over the next Parliament.

1 in 3 carers are in a new caring role at any one time.

£1.1 billion of Carer's Allowance goes unclaimed every year.

42% of carers have missed out on financial support as a result of not getting the right information and advice earlier. 57% of these missed out for more than two years.

¹ These estimates were calculated based on longitudinal data from the British Household Panel Survey (BHPS) and the Census 2011. See Appendix 1 for methodology.

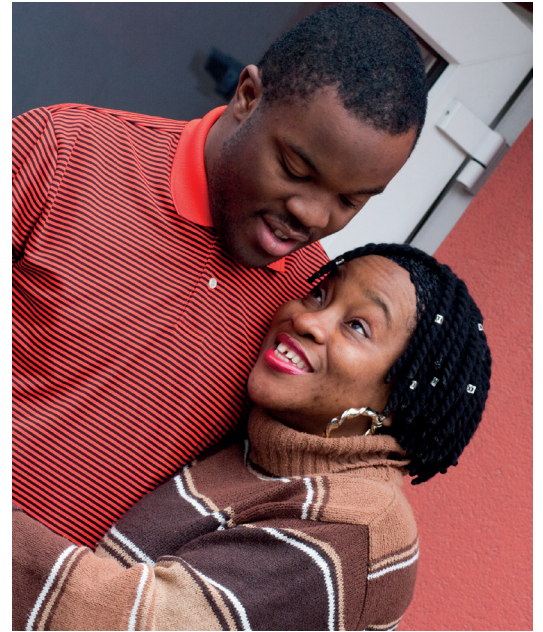
Implications of carer turnover

Every year 2.1 million people become carers while nearly 2.1 million find their caring role comes to an end, presenting a big challenge for services and local authorities to make sure they reach people with the information and advice they need.

New to caring

With 2.1 million people beginning a new caring role each year, thousands of people take on new responsibilities for a disabled, older or seriously ill loved one every day. When a partner has a stroke, a child is born with a disability or a parent starts to show signs of dementia, it can be very difficult to manage new responsibilities for looking after them alongside other demands such as work and childcare. Often, carers face the additional challenge of doing this from the end of a motorway when the person they are supporting does not live close by,² while many older people are already managing their own health conditions when caring starts.

Many people do not know that help is available when they find themselves in this situation, and if they do seek out support they can find navigating complex health, social care and benefits systems stressful and time-consuming at a time when their focus is on the needs of their loved one. It is essential that there is support and advice available to help new carers understand what help is out there and how to access it. Without this support early on, carers can find themselves falling into financial hardship and debt and giving up work, which can have a long-term impact later on in life.



Hidden carers

Many people providing care and support to someone they love do not think of themselves as a carer. They are just a husband or wife, son or daughter, parent or friend, doing what needs to be done. In fact, research by the Centre for the Modern Family has found that over a quarter of those providing care (27%) did not consider themselves to be a 'carer'.³

This is often the case when someone is new to caring, but lots of people who have been looking after someone for years still do not see themselves as a carer either. Previous research from Carers UK asked survey respondents how long it was before they realised they were a carer, with two-thirds (65%) saying that it took over a year. Nearly a third (32%) did not realise they were a carer for five years or more and 8% took over ten years.⁴

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I didn't actually consider myself a carer until after my loved one passed away. It was only then that I realised I had actually been her carer.

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² Employers for Carers, Carers UK and Nomura (2011) *Caring at a distance: bridging the gap*

³ Scottish Widows Centre for the Modern Family (2013) *Families that Care*

⁴ Carers UK (2006) *In the know: The importance of information for carers*

This can be a significant barrier to accessing support, because if you do not see yourself as a carer it may not occur to you to apply for carers' benefits, ask for a carer's assessment or practical support with caring, access workplace support, or seek out advice and information that is labelled 'for carers'. This can mean that opportunities are often missed to provide early advice and information to the people who may need it most – those who are not already receiving support with their caring role.

Professionals such as doctors, advice workers, social workers and pharmacists can play a role in overcoming this barrier by making sure they think about the whole family, not just the person needing care and support. Carers UK has argued for a duty on health and education professionals to identify and support carers, as we know that these professionals can make a real difference; they can help people to recognise that they are caring and point them in the direction of advice and information (for example, a local carers organisation, CAB or the Carers UK Adviceline) by simply asking if the person sitting in front of them is looking after anyone, and how they are coping.⁵ For carers juggling work and care, a conversation with their employer about their commitments at home can help them to access information about their rights at work and signpost them to support outside of work.

When caring ends

Every year, when millions of people find themselves in a new caring situation, a similar number find that caring comes to an end when their loved one recovers or passes away. For others, caring responsibilities can become less time-consuming when the person they look after moves into a care home or supported accommodation.

Former carers also need support and advice, as they find themselves in a new and often difficult situation. They may be grieving, they may have spent a long time out of the workforce, and they will often find that they quickly become ineligible for the benefits that they rely on to get by. Many former carers also have debts, built up after years of caring on a very low income. It is therefore important to make sure that advice, information and support is also available to former carers who may need help coping emotionally or financially, or who want to move back into work. Public bodies and voluntary sector organisations should plan for the fact that 2.1 million people will end caring every year.

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Becoming a carer happened gradually, from doing odd things to having to do everything every day.

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“

[I first thought of myself as a carer] when I realised I was doing much more for my disabled son than a mother of an able-bodied child would have to do.

”

“

After the loss of my brother, for whom I'd cared for several years, I realised the impact he'd had on my life... At the time I had just considered it to be something that siblings do.

”

⁵ There are already duties on NHS bodies in some parts of the UK; see p14 for more information

Why advice & information matters

Without the right information and advice, many carers miss out on essential support which can help them care, often facing financial hardship, stress and poor health as a result.

Missing out

In Carers UK's 2013 survey of over 3,500 carers, 42% said that they felt they had missed out on financial support as a result of not getting the right information and advice earlier.⁶

Of those, half (51%) said that it was because they just did not realise that support was available. More than 1 in 6 carers who missed out on support said that it was because they were given the wrong advice – demonstrating how important it is that advice is good quality and delivered by experts as well as accessible.

The impact of missing out on this support can be huge, with almost 6 in 10 carers (57%) saying that they missed out for more than two years – resulting in the loss of thousands of pounds of income. 16% missed out for over ten years.

“

Only after a visit from social services, requested by me, were we made aware of the help we could receive.

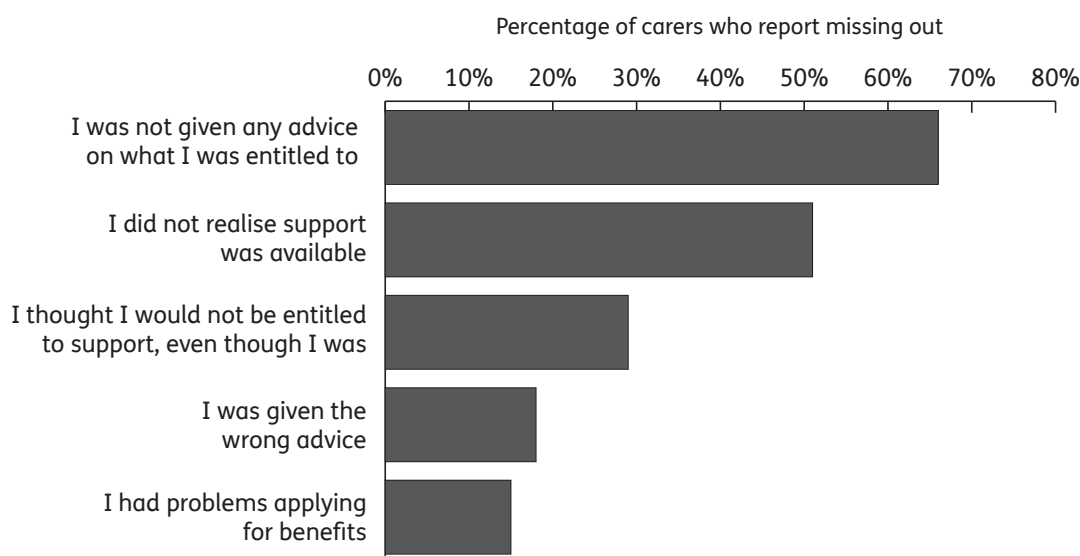
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“

From 2000 through to 2007 I had no real income. I wasn't informed I had any entitlements by the local authority and finished up in debt and in temporary accommodation.

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Figure 1: a graph to show the reasons why carers missed out on financial support.



⁶ Figures from the State of Caring Survey 2013, published in: Carers UK (2014) *Caring & Family Finances Inquiry: UK Report*

Giving up work

When someone begins caring they can face a huge loss in income if they have to give up work, reduce their working hours or take lower paid, flexible work which fits around their caring role. For carers looking after a spouse or partner, they may lose two salaries at once if a sudden injury or illness means that they both have to leave their jobs at the same time.

The impact on families' incomes of giving up work, reducing hours or taking a lower paid job is stark, with 70% of carers reporting that they were over £10,000 worse off as a result. 1 in 3 (30%) had seen a drop of at least £20,000 in their household income.⁷

While some carers choose to leave work so that they can care full-time, many others feel that they have no choice or they make a quick decision to leave work or reduce hours during a crisis which they regret later on when their caring situation becomes more stable. 1 in 7 (14%) carers who gave up work, reduced their hours or retired early to care said that they did so because they did not get the right information and advice about their entitlements,⁸ suggesting that good quality information and advice (in the workplace and from external sources) about the support available can make the difference between coping and falling out of the workforce altogether.

For example, the extended right to request flexible working means that employees can request a change in their working hours, times or place of work and employers have a duty to deal with these requests in a reasonable manner.⁹ Some employers also have carer-friendly policies in place such as care leave or career breaks. However, working carers are not always aware of these policies or their rights at work. A survey of employers and employees caring for someone with dementia found that the percentages of employers who said that they offered different types of support was much higher than the number of employees who reported getting that support.^{10/11} This 'disconnect' between employer and employee experience suggests that policies that could help carers remain in work are not always fully communicated to employees.

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It has been very difficult finding flexible enough work – my son is 20 but still has ‘school holidays’.

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“

I took early voluntary retirement in 1991. We were advised that if I was a carer credits would be paid towards my pension, but we were not advised that I needed to claim Carer's Allowance for that to happen - I only discovered that 10 years later.

”

“

I was working as a qualified community midwife when I became a carer but gave this up as it didn't fit with caring. I now work for an organisation that gives me the flexibility to combine work and caring.

”

⁷ Figures from the State of Caring Survey 2013, published in: Carers UK (2014) *Caring & Family Finances Inquiry: UK Report*

⁸ State of Caring Survey 2014

⁹ Employers for Carers and Carers UK (2014) *Supporting working carers: A guide to requesting flexible working*

¹⁰ For example, 83% of employers offered flexible working arrangements but only 48% of carers reported that this form of support was available in their workplace. 64% of employers said that they offered flexible/special leave while only 38% of employees said that this was available. 33% of employers mentioned a specific policy for carers, but this was reported by only 19% of employees.

¹¹ Employers for Carers and Carers UK (2014) *Supporting employees who are caring for someone with dementia*

The costs of caring

This drop in income that many carers see when they leave work or reduce their hours is often exacerbated by a sharp rise in household expenditure. Carers UK's *Caring & Family Finances Inquiry* found that the extra costs of caring and disability can include higher energy bills, specialist food, higher phone bills, higher transport costs, care services, care products, equipment and adaptations.¹²

“

Many things are more expensive as my husband cannot make use of things like his bus pass, or cheaper train travel, so we have to use the car for every journey.

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“

Because of my wife's illness we need the central heating on in summer as well as winter.

”

“

As a carer I have to pay taxi costs – including for hospital emergencies – for my son, as I have to accompany him and he has not got the money to pay.

”

Figure 2: Carers UK's *State of Caring Survey 2013* asked carers which extra costs they faced as a result of their caring responsibilities.



Cutting back

This sharp increase in living costs at the same time as reduced or lost earnings can have a huge impact on families' finances, with many carers saying they are unable to afford basic bills or even enough food.

- Over a third (36%) of carers told us that they could not afford to pay their utility bills.
- 1 in 5 (19%) said they could not afford their rent or mortgage payments.
- 45% were cutting back on food.
- 44% were cutting back on heating.
- Three quarters (73%) had reduced spending on clothes.

Unsurprisingly, this has a knock-on impact on carers' health and wellbeing, with 53% of carers saying that money worries were taking a toll on their health.¹³

“

I have sleepless nights worrying about the running costs of the car to get to hospital.

”

“

I live a very restrictive life. I also live in fear of not having money for emergency situations which affects my sleep pattern. My financial situation makes me unhappy.

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¹² Carers UK (2014) *Caring & Family Finances Inquiry: UK Report*

¹³ Carers UK (2014) *Facts about carers*

Financial support

Although Carer's Allowance, the main benefit for carers, is the lowest benefit of its kind, for many families it does go some way towards offsetting the loss of earnings and the extra costs they face, as well as providing National Insurance contributions.

Carers that are not able to claim Carer's Allowance may be eligible for Carer's Credit instead which builds up their National Insurance contributions and entitlement to the State Pension, helping to protect carers from long-term financial hardship in older age. There are also several other benefits that people with a disability or on a low income may be eligible for, but the benefits system can seem very complex and be difficult to navigate – especially if you feel like all your time and energy is taken up with caring.

When caring begins, whether it starts gradually or happens overnight, people can be overwhelmed by new responsibilities. The practical and emotional demands of caring, often alongside trying to work and manage other family commitments, can take over. Planning for the future or seeking out financial advice comes second to the day-to-day practicalities of looking after someone. This can mean that carers use up all their savings or build up debts before finding out that there is financial help available. This may go some way towards explaining the £1.1 billion of Carer's Allowance that goes unclaimed every year by over 360,000 full-time carers.¹⁴

Savings and debt

Missing out on financial support can also have very serious consequences for families' long-term finances. Of carers who had savings when they began caring, over half (55%) were using them to pay their everyday living costs and 38% had used over half of their savings. 1 in 8 (13%) had used almost all and a further 10% had used all of their savings up.¹⁵

Many carers also end up in debt as a result of caring, with over 4 in 10 (44%) telling us that this was the case for them. The amount of debt that families find themselves in can be substantial:

- 1 in 10 carers (11%) responding to our survey said they had debt of less than £1,000
- 22% said they had between £1,000 – £5,000 of debt
- 13% had between £5,000 – £10,000 worth of debt
- 1 in 7 (15%) were in over £10,000 worth of debt¹⁶

Good debt advice can make a big difference to carers' ability to manage what they owe and take action before their debts spiral out of control; for example they can be supported to consolidate their debts or set up a debt management plan.

“

The benefits system is far too complicated – you need to be a lawyer to navigate it.

”

“

I believe my son is entitled to support from the council but I can't face another battle to obtain that help.

”

“

Due to the difficulty claiming Disability Living Allowance and my husband's beliefs as a result of his mental health condition, he did not want to claim it – he did not want to fight the system.

”

“

We almost lost our home when we couldn't work due to caring for our son who lived with us at the time. We often sat in the cold and had hardly any food.

”

“

We have no savings for later on. We have cut even our insurance to the bare minimum and we are still in negative equity.

”

“

I have used all of my savings to cover my mortgage but there will come a time when I will not be able to afford the mortgage and we will need to sell the house.

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¹⁴ Research published by Carers UK to coincide with Carers Rights Day 2013 as part of the Caring & Family Finances Inquiry

¹⁵ Carers UK (2014) *Caring & Family Finances Inquiry: UK Report*

¹⁶ Carers UK (2014) *Caring & Family Finances Inquiry: UK Report*

Even when caring ends, it can be extremely hard for families to clear their debt or begin saving for the future again. If they have been out of the workforce for some time, it can be difficult to move back into work, especially for older carers. If they are over State Pension age when their caring role ends they may find themselves facing long-term financial hardship if they have been unable to contribute to a pension or put aside savings for years on end.

Practical support

It's not just financial support that carers go without because they don't have the right advice and information. Many carers miss out on the practical support that can help them care too, including equipment, telehealth or telecare, home adaptations, respite care or help from care workers.

Going without any practical support is unsustainable for many carers. Caring for months or years without a break can be overwhelming and means that carers have no time to look after their own health and wellbeing, or even get a good night's sleep. This is often exacerbated by the stress and worry caused by a lack of financial support. In Carers UK's 2014 survey of over 5,000 carers, 6 in 10 said that they had been pushed to breaking point as a result of caring.¹⁸

This can have devastating consequences for families. A quarter of those who reached breaking point required medical treatment as a result. For 1 in 9 carers who reached breaking point, the person they looked after had to be rushed into hospital or social services had to step in to look after the older or disabled person while the carer recovered. This can sometimes mean expensive double admissions to hospital for both the carer and the person they are caring for. Almost half (48%) of those who had reached breaking point said they had fallen ill, but just had to continue caring because they had no other options.

“

Trying to work full-time and look after my father caused me to almost get to breaking point. This is when I was advised to contact social services about direct payments.

I have since found out that I could have received direct payments for the past three years due to my father's condition – but nobody advised our family of this!

”

“

I felt humiliated more than anything else, that it could all come unglued as easily as it did. And frustrated. A little bit of help early on could have made all the difference.¹⁷

”

“

One day I couldn't take any more, I was just crying uncontrollably and couldn't function – my family stepped in to look after Mum so I could just rest and pull myself together.

”

“

When you love someone you go on regardless. You have no choice, even when you know it is damaging your health and emotional wellbeing. Without help, I will soon get to the point where I cannot continue.

”

“

The lifting has left me with constant back pain and arthritis and I eventually had to stop as I had to have a hernia operation.

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“

Mum was up all night, every night, slamming doors, shouting and throwing objects around. I just couldn't carry on without sleep.

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¹⁷ Norman's story can be read in full at: carersuk.org/search/hidden-issues-debt

¹⁸ Figures from the State of Caring Survey 2014, published in: Carers UK (2014) *Carers at breaking point*

Impact on the economy

When carers are pushed to breaking point because they don't have the help they need there are serious consequences for our society and our economy, as well as for families.

Of over 3,500 carers responding to Carers UK's State of Caring Survey 2013, over half (55%) said that the person they care for had been admitted to emergency hospital services in the last three years. Many carers attributed this to a lack of support, with 36% saying that additional support could have prevented admission.¹⁹

As long as carers go without the support they need to help them care, we will continue to see unnecessary and expensive emergency admissions to hospital or social care services stepping in to provide full-time care when carers cannot cope anymore. With our NHS and social care services already pushed to the limit and facing unprecedented demographic pressures, this is something our society just cannot afford.

As well as causing emotional and physical breakdown, a lack of support can also mean that many carers leave work when they feel like they cannot cope anymore. 1 in 5 UK adults have seen their work negatively affected by caring, including 2.3 million who have given up work to care at some point in their lives and almost 3 million who have reduced working hours.²⁰ This means that employers are losing skilled staff, often at the peak of their careers.²¹ Consequently, the Carers UK, Employers for Carers and HM Government report *Supporting Working Carers* identified the need for early identification and information and advice about the support available to carers as a key issue for helping carers stay in work.²²

With the costs of carers leaving the workforce estimated to be £5.3 billion every year,²³ we must do more to ensure that carers know how to access support to help them juggle work and care if this is what they want to do.

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I know that I will have been forced to give up my job and be caring 24/7 by the time we qualify for support – I've been told as much by social services.

”

¹⁹ 16% of respondents said more support from care services could have prevented emergency admission; 6% said replacement care (for when they, the carer, needs medical treatment); 21% said higher quality care and support for the person they care for; 10% said adaptations in the home of the person they care for; 7% said telecare or telehealth) could have prevented the need to go into hospital.

²⁰ Carers UK/YouGov (2013)

²¹ The majority of carers are of working age and the peak age for caring is 50-64. One in five people in this age bracket are carers. Source: Census 2011

²² Employers for Carers, Carers UK and HM Government (2013) *Supporting Working Carers: The Benefits to Families, Business and the Economy: Final Report of the Carers in Employment Task and Finish Group*

²³ Age UK (2012) *Care in crisis: more than £5.3 billion wiped from the economy*

Conclusions

With 2.1 million people becoming carers each year and many more not recognising themselves as carers at all, it is a big challenge to make sure that all carers know where to go for good quality advice and information.

It is vital that we meet this challenge if we are to ensure that carers know how to access essential financial and practical help that can help them care and avoid preventable long-term financial hardship and breakdown.

This is not only the responsibility of health and care professionals and national and local governments, although these all have a vital role. We all have a part to play to raise awareness of caring and talk about caring more as a society. As caring becomes more of a mainstream issue, more people will recognise themselves as carers and take up the help that is available. Carers UK will continue to work to raise the profile of caring in the media, with policy makers and with the public, including by working with other organisations and local groups to deliver awareness campaigns such as Carers Rights Day²⁴ and Carers Week.²⁵

Efforts to raise awareness of caring must be backed up by good quality advice and information that carers can access easily. The Care Act 2014, which will come into force in England from April 2015,²⁶ is a step in the right direction as it will put a duty on local authorities

to make advice and information available to all carers. From April 2015, English local authorities will also be required to offer carers a carer's assessment if they are looking after someone and may have a need for support. Other measures across the UK will also increase the responsibilities that devolved Governments, local authorities and integrated bodies have to ensure that information and advice is available to carers. While these new duties are an important step forward, it is essential that the Government puts in place a sufficient and sustainable funding settlement for health and social care to make carers' rights and entitlements a reality.

The new figures published in this report, on transitions into and out of caring, help to illustrate the scale of the task ahead to ensure the necessary steps are taken to reach out to the new and hidden carers in every nation, region and local authority.

There are several other important measures that local authorities, Governments across the UK and other organisations can take to improve identification of carers and to make sure that they can access essential advice, information and support.

²⁴ To find out more visit: carersuk.org/carersrightsday

²⁵ To find out more visit: carersweek.org

²⁶ The majority of the Care Act will come into force from 2015, though some provisions will not come into force until 2016.

Recommendations

1 Duty on health and education professionals to identify and support carers.

Too often carers are only identified and supported when they are already struggling to manage financially or are in crisis. A legal duty on health and education bodies, like GP surgeries, hospitals, schools and colleges, would ensure earlier identification, advice and support.

In Wales the Carers Strategies (Wales) Measure 2010 already places this duty on health and local authorities to identify carers and ensure they are signposted to appropriate sources of information, advice and support. In Scotland, as part of the GP contract, GPs must identify carers and keep a carers register, and the NHS has duties to identify and provide information to carers. These measures must be retained and built on.

2 Improved access to information and advice.

Navigating the complex health, social care and benefits systems is stressful and time consuming. Up-to-date, high quality and carer-specific information and advice must be available to guide carers to support.

When designing their information and advice strategies and mapping the level of need in their local areas local government should consider the numbers of people in their area who are new to their caring role and the needs of those people whose caring role is coming to an end. Both of these groups should be supported with tailored information and advice.

3 Employers should reach out to carers in their workforce and take steps to better support their employees who are caring.

Better supporting working carers has business benefits as employers improve staff retention and productivity and reduce absence and stress in their workforce. 1 in 9 UK employees has caring responsibilities,²⁷ so businesses cannot afford to ignore the needs of working carers.

A good first step would be to join the employers' forum Employers for Carers²⁸ which provides practical advice and support for employers seeking to develop carer friendly policy and practice and retain skilled workers. In Scotland, employers can take part in the Carer Positive award scheme for employers who support carers, learning from other employers and building policies to support their employees with caring responsibilities.²⁹

4 Governments across the UK should work in partnership to examine how different parts of Government can make automatic referrals between agencies.

When a carer is in contact with one department or agency, this is an opportunity to make sure that they know about other help and support available to them. For example, a Carer's Allowance claim should trigger a check on whether the carer has received a carer's assessment.

²⁷ Census 2011

²⁸ To find out more visit: employersforcarers.org

²⁹ To find out more visit: carerpositive.org

5 Governments across the UK and carers' and disability organisations should look at targeted information and advice for specific carer groups, such as parent carers, BAME carers, carers who are themselves disabled and male working age carers.

Different groups of carers may have very different needs for support, advice and information. For example, some BAME carers can face additional language and cultural barriers to accessing support, while parent carers must navigate a transition from children's to adult's services and will often have a lifetime caring role. There should be advice and information available that can meet these groups' specific needs.

6 Governments across the UK and debt advice providers should review support, advice and information for families in debt to provide tailored support for carers facing long-term debt as a result of caring.

Many families face significant and long-term debt as a result of loss of income and rising costs associated with caring and disability. This is often compounded by not receiving financial advice or accessing their entitlements early on their caring role.

Many carers cannot take up employment to pay off these debts because of their 24/7 caring responsibilities, and former carers often struggle to re-enter the workplace after long periods of caring full-time. Good quality advice, information and support from people that understand their situation should be available to help these carers.

7 Cross-Government work in each of the nations to develop support for carers to return to work when caring ends.

When caring ends many carers want to return to full-time work, but this can be extremely difficult if they have spent a long time out of the workforce, or taken on low-paid, flexible or part-time work which fits around their caring responsibilities. There should be tailored support and advice to help carers to return to work, and this should recognise the valuable and transferable skills that many people develop in their caring role.

Appendix 1

Research method: transitions into and out of unpaid care

The approach is based on data drawn from personal interviews conducted every 12 months for the British Household Panel Survey (BHPS). Each year adult interviewees are asked:

- Is there anyone living with you who is sick, disabled or elderly whom you look after or give special help to (for example, a sick, disabled or elderly relative/husband/wife/friend, etc.)?
- Do you provide some regular service or help for any sick, disabled or elderly person not living with you? (excluding help provided in the course of paid employment)

By comparing individual's responses to these questions over time, it is possible to identify people who take on or relinquish a caring role each year as well as those who provide unpaid care at successive interviews. The findings presented here relate to such transitions identified from BHPS interviews conducted between 1999 and 2008.

Annual transitions into and out of unpaid care were combined across successive pairs of interviews from 1999/00, 2000/01, ..., to 2007/08. Combining transitions in this way moderates year-on-year fluctuations and increases precision of the estimated rates. The validity of this approach was checked by showing that annual rates of transition did not vary significantly across the study period. It is reasonable therefore to apply the transition rates to the population censuses conducted in 2001 and 2011.

Population estimates

Using the 2011 Census count of unpaid carers in Britain and the whole of the UK, estimates for the number of people taking on or relinquishing a caring role each year are as follows:

Number of unpaid carers in 2011 census		Started caring 2010/11			Ceased caring 2011/12		
		Best estimate	Lower bound	Upper bound	Best estimate	Lower bound	Upper bound
		32.77%	31.89%	33.64%	32.27%	31.39%	33.14%
Britain	6,292,246	2,061,811	2,006,799	2,116,824	2,030,255	1,975,258	2,085,252
UK	6,506,226	2,131,927	2,075,044	2,188,810	2,099,298	2,042,431	2,156,165

These figures are likely to under-estimate the number of individuals starting and ceasing to provide care because the BHPS does not capture caring episodes that start and finish between interview waves. Nor does the BHPS cover unpaid care provided by children and young people. Transitions in multiple and consecutive caring roles may also be missed.

Acknowledgement

Data from the British Household Panel Survey were originally compiled by the Institute for Social and Economic Research at the University of Essex, Colchester, with funding from the Economic and Social Research Council, and were supplied by the UK Data Service.

Further details of how carer transitions were identified and evaluated can be found in:

Hirst, M. (2014) Transitions into and out of unpaid care, Working Paper No. 2644, Social Policy Research Unit, University of York.

Carers UK would like to thank Dr Michael Hirst for his research and analysis of carer transitions.

Appendix 2

Transitions into and out of unpaid care by region and local authority

The table below shows the estimated annual turnover of carers by country, region and local authority, based on Census 2011 figures.^{30/31/32}

Please note that these figures are estimates, calculated using the best national estimate of transitions into and out of unpaid care.

Area	Number of carers	Estimated number that begin caring annually (to nearest 10)	Estimated number that cease caring annually (to nearest 10)
UNITED KINGDOM	6,506,226	2,131,930	2,099,300
ENGLAND	5,430,016	1,779,280	1,752,050
WALES	370,230	121,320	119,460
SCOTLAND	492,231³³	161,290	158,820
NORTHERN IRELAND	213,980	70,120	69,040
NORTH EAST	286,351	93,830	92,390
County Durham UA	60,055	19,680	19,380
Darlington UA	11,048	3,620	3,570
Hartlepool UA	9,924	3,250	3,200
Middlesbrough UA	14,160	4,640	4,570
Northumberland UA	35,697	11,700	11,520
Redcar and Cleveland UA	16,034	5,250	5,170
Stockton-on-Tees UA	19,924	6,530	6,430
Tyne and Wear (Met County)	119,509	39,160	38,560
Gateshead	22,220	7,280	7,170
Newcastle upon Tyne	25,810	8,460	8,330
North Tyneside	22,208	7,280	7,170
South Tyneside	16,740	5,490	5,400
Sunderland	32,531	10,660	10,500
NORTH WEST	781,972	256,230	252,310
Blackburn with Darwen UA	15,756	5,160	5,080
Blackpool UA	16,319	5,350	5,270
Cheshire East UA	40,003	13,110	12,910
Cheshire West and Chester UA	37,121	12,160	11,980
Halton UA	15,018	4,920	4,850
Warrington UA	21,843	7,160	7,050

³⁰ Constituent Countries; Regions, counties, London boroughs, unitary authorities and districts in England; unitary authorities in Wales; council areas in Scotland; local government districts in Northern Ireland

³¹ Data for all usual residents.

³² Sources: Office for National Statistics, Northern Ireland Neighbourhood Information Service, National Records of Scotland

³³ Alternative estimates from the Scottish Household Survey which are those used by the Scottish Government recognise the figure of 657,000 carers in Scotland.

Cumbria	56,495	18,510	18,230
Allerdale	10,774	3,530	3,480
Barrow-in-Furness	8,245	2,700	2,660
Carlisle	11,305	3,700	3,650
Copeland	7,981	2,620	2,580
Eden	5,962	1,950	1,920
South Lakeland	12,228	4,010	3,950
Greater Manchester (Met County)	280,299	91,850	90,440
Bolton	30,649	10,040	9,890
Bury	19,954	6,540	6,440
Manchester	42,640	13,970	13,760
Oldham	24,322	7,970	7,850
Rochdale	23,260	7,620	7,510
Salford	23,402	7,670	7,550
Stockport	31,982	10,480	10,320
Tameside	24,059	7,880	7,760
Trafford	23,527	7,710	7,590
Wigan	36,504	11,960	11,780
Lancashire	133,213	43,650	42,980
Burnley	9,855	3,230	3,180
Chorley	12,318	4,040	3,980
Fylde	9,187	3,010	2,960
Hyndburn	8,923	2,920	2,880
Lancaster	14,615	4,790	4,720
Pendle	10,246	3,360	3,310
Preston	14,139	4,630	4,560
Ribble Valley	6,541	2,140	2,110
Rossendale	7,634	2,500	2,460
South Ribble	12,492	4,090	4,030
West Lancashire	13,426	4,400	4,330
Wyre	13,837	4,530	4,470
Merseyside (Met County)	165,905	54,360	53,530
Knowsley	17,865	5,850	5,760
Liverpool	50,562	16,570	16,310
Sefton	34,547	11,320	11,150
St. Helens	22,591	7,400	7,290
Wirral	40,340	13,220	13,020
YORKSHIRE AND THE HUMBER	551,341	180,660	177,900
East Riding of Yorkshire UA	37,368	12,250	12,060
Kingston upon Hull, City of UA	23,636	7,750	7,630
North East Lincolnshire UA	15,993	5,240	5,160
North Lincolnshire UA	18,157	5,950	5,860
York UA	18,224	5,970	5,880
North Yorkshire	64,779	21,230	20,900

Craven	6,611	2,170	2,130
Hambleton	10,004	3,280	3,230
Harrogate	16,188	5,300	5,220
Richmondshire	4,762	1,560	1,540
Ryedale	5,904	1,940	1,910
Scarborough	12,535	4,110	4,050
Selby	8,775	2,880	2,830
South Yorkshire (Met County)	148,905	48,790	48,050
Barnsley	27,167	8,900	8,770
Doncaster	33,364	10,930	10,770
Rotherham	31,001	10,160	10,000
Sheffield	57,373	18,800	18,510
West Yorkshire (Met County)	224,279	73,490	72,370
Bradford	51,026	16,720	16,460
Calderdale	21,369	7,000	6,900
Kirklees	43,665	14,310	14,090
Leeds	71,598	23,460	23,100
Wakefield	36,621	12,000	11,820
EAST MIDLANDS	490,249	160,640	158,180
Derby UA	25,584	8,380	8,260
Leicester UA	30,965	10,150	9,990
Nottingham UA	26,954	8,830	8,700
Rutland UA	3,799	1,250	1,230
Derbyshire	92,761	30,400	29,930
Amber Valley	14,607	4,790	4,710
Bolsover	9,624	3,150	3,110
Chesterfield	13,034	4,270	4,210
Derbyshire Dales	9,003	2,950	2,910
Erewash	12,562	4,120	4,050
High Peak	10,314	3,380	3,330
North East Derbyshire	13,135	4,300	4,240
South Derbyshire	10,482	3,440	3,380
Leicestershire	70,728	23,180	22,820
Blaby	10,552	3,460	3,410
Charnwood	17,127	5,610	5,530
Harborough	8,983	2,940	2,900
Hinckley and Bosworth	11,794	3,870	3,810
Melton	5,273	1,730	1,700
North West Leicestershire	10,657	3,490	3,440
Oadby and Wigston	6,342	2,080	2,050
Lincolnshire	79,262	25,970	25,580
Boston	6,630	2,170	2,140
East Lindsey	17,704	5,800	5,710
Lincoln	8,939	2,930	2,880
North Kesteven	12,193	4,000	3,930
South Holland	9,472	3,100	3,060
South Kesteven	13,841	4,540	4,470

West Lindsey	10,483	3,440	3,380
Northamptonshire	69,498	22,770	22,420
Corby	6,048	1,980	1,950
Daventry	8,453	2,770	2,730
East Northamptonshire	8,932	2,930	2,880
Kettering	9,742	3,190	3,140
Northampton	19,683	6,450	6,350
South Northamptonshire	8,753	2,870	2,820
Wellingborough	7,887	2,580	2,550
Nottinghamshire	90,698	29,720	29,270
Ashfield	14,068	4,610	4,540
Bassetlaw	13,215	4,330	4,260
Broxtowe	12,283	4,030	3,960
Gedling	13,442	4,410	4,340
Mansfield	12,708	4,160	4,100
Newark and Sherwood	13,191	4,320	4,260
Rushcliffe	11,791	3,860	3,800
WEST MIDLANDS	614,888	201,480	198,400
Herefordshire, County of UA	20,676	6,780	6,670
Shropshire UA	34,260	11,230	11,050
Stoke-on-Trent UA	27,385	8,970	8,840
Telford and Wrekin UA	17,944	5,880	5,790
Staffordshire	98,832	32,390	31,890
Cannock Chase	11,817	3,870	3,810
East Staffordshire	11,467	3,760	3,700
Lichfield	11,569	3,790	3,730
Newcastle-under-Lyme	14,731	4,830	4,750
South Staffordshire	13,542	4,440	4,370
Stafford	15,040	4,930	4,850
Staffordshire Moorlands	12,551	4,110	4,050
Tamworth	8,115	2,660	2,620
Warwickshire	59,240	19,410	19,110
North Warwickshire	7,519	2,460	2,430
Nuneaton and Bedworth	14,232	4,660	4,590
Rugby	10,391	3,410	3,350
Stratford-on-Avon	13,651	4,470	4,410
Warwick	13,447	4,410	4,340
West Midlands (Met County)	292,866	95,970	94,500
Birmingham	107,380	35,190	34,650
Coventry	32,101	10,520	10,360
Dudley	37,974	12,440	12,250
Sandwell	33,530	10,990	10,820
Solihull	24,113	7,900	7,780
Walsall	30,632	10,040	9,880

Wolverhampton	27,136	8,890	8,760
Worcestershire	63,685	20,870	20,550
Bromsgrove	11,201	3,670	3,610
Malvern Hills	9,390	3,080	3,030
Redditch	8,889	2,910	2,870
Worcester	9,648	3,160	3,110
Wychavon	13,434	4,400	4,340
Wyre Forest	11,123	3,650	3,590
EAST	597,591	195,820	192,820
Bedford UA	16,084	5,270	5,190
Central Bedfordshire UA	25,835	8,470	8,340
Luton UA	18,256	5,980	5,890
Peterborough UA	17,690	5,800	5,710
Southend-on-Sea UA	17,682	5,790	5,710
Thurrock UA	14,606	4,790	4,710
Cambridgeshire	60,176	19,720	19,420
Cambridge	9,777	3,200	3,160
East Cambridgeshire	8,289	2,720	2,680
Fenland	10,594	3,470	3,420
Huntingdonshire	16,525	5,420	5,330
South Cambridgeshire	14,991	4,910	4,840
Essex	146,211	47,910	47,180
Basildon	17,633	5,780	5,690
Braintree	14,830	4,860	4,790
Brentwood	7,796	2,560	2,520
Castle Point	9,897	3,240	3,190
Chelmsford	16,750	5,490	5,410
Colchester	16,570	5,430	5,350
Epping Forest	12,809	4,200	4,130
Harlow	8,061	2,640	2,600
Maldon	7,161	2,350	2,310
Rochford	9,421	3,090	3,040
Tendring	17,350	5,690	5,600
Uttlesford	7,933	2,600	2,560
Hertfordshire	108,615	35,590	35,050
Broxbourne	9,071	2,970	2,930
Dacorum	14,874	4,870	4,800
East Hertfordshire	12,799	4,190	4,130
Hertsmere	9,855	3,230	3,180
North Hertfordshire	12,805	4,200	4,130
St Albans	13,374	4,380	4,320
Stevenage	8,550	2,800	2,760
Three Rivers	8,855	2,900	2,860
Watford	8,062	2,640	2,600

Welwyn Hatfield	10,370	3,400	3,350
Norfolk	94,691	31,030	30,550
Breckland	13,925	4,560	4,490
Broadland	14,343	4,700	4,630
Great Yarmouth	10,905	3,570	3,520
King's Lynn and West Norfolk	17,412	5,710	5,620
North Norfolk	12,402	4,060	4,000
Norwich	11,884	3,890	3,830
South Norfolk	13,820	4,530	4,460
Suffolk	77,745	25,480	25,090
Babergh	9,716	3,180	3,140
Forest Heath	4,952	1,620	1,600
Ipswich	13,062	4,280	4,220
Mid Suffolk	10,468	3,430	3,380
St Edmundsbury	11,059	3,620	3,570
Suffolk Coastal	14,837	4,860	4,790
Waveney	13,651	4,470	4,410
LONDON	689,973	226,090	222,630
Inner London	237,886	77,950	76,760
Camden	17,306	5,670	5,580
City of London	576	190	190
Hackney	17,948	5,880	5,790
Hammersmith and Fulham	12,334	4,040	3,980
Haringey	18,887	6,190	6,090
Islington	16,311	5,350	5,260
Kensington and Chelsea	10,978	3,600	3,540
Lambeth	20,477	6,710	6,610
Lewisham	22,521	7,380	7,270
Newham	24,604	8,060	7,940
Southwark	20,725	6,790	6,690
Tower Hamlets	19,356	6,340	6,250
Wandsworth	19,985	6,550	6,450
Westminster	15,878	5,200	5,120
Outer London	452,087	148,140	145,870
Barking and Dagenham	16,201	5,310	5,230
Barnet	32,320	10,590	10,430
Bexley	23,522	7,710	7,590
Brent	26,610	8,720	8,590
Bromley	31,012	10,160	10,010
Croydon	33,683	11,040	10,870
Ealing	28,773	9,430	9,280
Enfield	27,624	9,050	8,910
Greenwich	22,014	7,210	7,100
Harrow	24,620	8,070	7,940

Havering	25,214	8,260	8,140
Hillingdon	25,905	8,490	8,360
Hounslow	22,310	7,310	7,200
Kingston upon Thames	13,288	4,350	4,290
Merton	16,327	5,350	5,270
Redbridge	27,291	8,940	8,810
Richmond upon Thames	15,802	5,180	5,100
Sutton	18,298	6,000	5,900
Waltham Forest	21,273	6,970	6,860
SOUTH EAST	847,353	277,660	273,410
Bracknell Forest UA	9,674	3,170	3,120
Brighton and Hove UA	23,967	7,850	7,730
Isle of Wight UA	16,420	5,380	5,300
Medway UA	25,033	8,200	8,080
Milton Keynes UA	21,797	7,140	7,030
Portsmouth UA	17,136	5,620	5,530
Reading UA	12,315	4,040	3,970
Slough UA	11,626	3,810	3,750
Southampton UA	20,363	6,670	6,570
West Berkshire UA	14,288	4,680	4,610
Windsor and Maidenhead UA	13,235	4,340	4,270
Wokingham UA	13,902	4,560	4,490
Buckinghamshire	49,514	16,220	15,980
Aylesbury Vale	16,566	5,430	5,350
Chiltern	9,664	3,170	3,120
South Bucks	6,893	2,260	2,220
Wycombe	16,391	5,370	5,290
East Sussex	59,409	19,470	19,170
Eastbourne	10,518	3,450	3,390
Hastings	9,442	3,090	3,050
Lewes	11,501	3,770	3,710
Rother	11,261	3,690	3,630
Wealden	16,687	5,470	5,380
Hampshire	132,938	43,560	42,890
Basingstoke and Deane	15,233	4,990	4,920
East Hampshire	11,631	3,810	3,750
Eastleigh	12,721	4,170	4,110
Fareham	11,879	3,890	3,830
Gosport	8,176	2,680	2,640
Hart	7,996	2,620	2,580
Havant	13,118	4,300	4,230
New Forest	20,747	6,800	6,690
Rushmoor	7,750	2,540	2,500
Test Valley	12,115	3,970	3,910
Winchester	11,572	3,790	3,730
Kent	151,777	49,730	48,970
Ashford	11,819	3,870	3,810

Canterbury	15,583	5,110	5,030
Dartford	9,219	3,020	2,980
Dover	12,654	4,150	4,080
Gravesham	10,310	3,380	3,330
Maidstone	15,561	5,100	5,020
Sevenoaks	11,945	3,910	3,850
Shepway	12,306	4,030	3,970
Swale	14,258	4,670	4,600
Thanet	15,502	5,080	5,000
Tonbridge and Malling	12,081	3,960	3,900
Tunbridge Wells	10,539	3,450	3,400
Oxfordshire	61,131	20,030	19,730
Cherwell	13,354	4,380	4,310
Oxford	11,725	3,840	3,780
South Oxfordshire	13,256	4,340	4,280
Vale of White Horse	12,438	4,080	4,010
West Oxfordshire	10,358	3,390	3,340
Surrey	108,433	35,530	34,990
Elmbridge	11,631	3,810	3,750
Epsom and Ewell	7,328	2,400	2,360
Guildford	12,576	4,120	4,060
Mole Valley	8,911	2,920	2,880
Reigate and Banstead	13,105	4,290	4,230
Runnymede	7,402	2,430	2,390
Spelthorne	9,844	3,230	3,180
Surrey Heath	7,894	2,590	2,550
Tandridge	8,535	2,800	2,750
Waverley	12,005	3,930	3,870
Woking	9,202	3,020	2,970
West Sussex	84,395	27,650	27,230
Adur	6,949	2,280	2,240
Arun	16,554	5,420	5,340
Chichester	12,487	4,090	4,030
Crawley	9,902	3,250	3,200
Horsham	13,642	4,470	4,400
Mid Sussex	13,982	4,580	4,510
Worthing	10,879	3,570	3,510
SOUTH WEST	570,298	186,870	184,010
Bath and North East Somerset UA	17,585	5,760	5,670
Bournemouth UA	17,325	5,680	5,590
Bristol, City of UA	40,138	13,150	12,950
Cornwall UA	63,192	20,710	20,390
Isles of Scilly UA	220	70	70
North Somerset UA	22,313	7,310	7,200
Plymouth UA	27,247	8,930	8,790
Poole UA	16,212	5,310	5,230
South Gloucestershire UA	27,639	9,060	8,920

Swindon UA	19,480	6,380	6,290
Torbay UA	16,107	5,280	5,200
Wiltshire UA	47,608	15,600	15,360
Devon	84,884	27,810	27,390
East Devon	15,844	5,190	5,110
Exeter	10,991	3,600	3,550
Mid Devon	8,452	2,770	2,730
North Devon	10,343	3,390	3,340
South Hams	10,229	3,350	3,300
Teignbridge	15,019	4,920	4,850
Torridge	7,609	2,490	2,460
West Devon	6,397	2,100	2,060
Dorset	49,322	16,160	15,910
Christchurch	5,988	1,960	1,930
East Dorset	10,895	3,570	3,520
North Dorset	7,274	2,380	2,350
Purbeck	5,692	1,870	1,840
West Dorset	11,956	3,920	3,860
Weymouth and Portland	7,517	2,460	2,430
Gloucestershire	62,644	20,530	20,210
Cheltenham	10,533	3,450	3,400
Cotswold	8,750	2,870	2,820
Forest of Dean	9,668	3,170	3,120
Gloucester	12,124	3,970	3,910
Stroud	12,847	4,210	4,150
Tewkesbury	8,722	2,860	2,810
Somerset	58,382	19,130	18,840
Mendip	11,838	3,880	3,820
Sedgemoor	12,999	4,260	4,190
South Somerset	17,481	5,730	5,640
Taunton Deane	11,671	3,820	3,770
West Somerset	4,393	1,440	1,420
WALES	370,230	121,320	119,460
Isle of Anglesey	8,042	2,640	2,600
Gwynedd	12,443	4,080	4,020
Ceredigion	8,603	2,820	2,780
Pembrokeshire	15,195	4,980	4,900
Carmarthenshire	23,989	7,860	7,740
Swansea	30,349	9,950	9,790
Neath Port Talbot	20,365	6,670	6,570
Bridgend	17,919	5,870	5,780
The Vale of Glamorgan	15,575	5,100	5,030
Cardiff	35,005	11,470	11,300

Rhondda Cynon Taf	29,640	9,710	9,560
Merthyr Tydfil	7,427	2,430	2,400
Caerphilly	22,721	7,450	7,330
Blaenau Gwent	8,752	2,870	2,820
Torfaen	11,929	3,910	3,850
Monmouthshire	11,491	3,770	3,710
Newport	16,604	5,440	5,360
SCOTLAND	492,231	161,290	158,820
Aberdeen City	15,571	5,100	5,020
Aberdeenshire	19,398	6,360	6,260
Angus	10,582	3,470	3,410
Argyll & Bute	8,821	2,890	2,850
Clackmannanshire	4,693	1,540	1,510
Dumfries & Galloway	14,955	4,900	4,830
Dundee City	13,072	4,280	4,220
East Ayrshire	12,620	4,140	4,070
East Dunbartonshire	11,374	3,730	3,670
East Lothian	9,475	3,110	3,060
East Renfrewshire	9,291	3,040	3,000
Edinburgh, City of	37,859	12,410	12,220
Eilean Siar	2,660	870	860
Falkirk	15,056	4,930	4,860
Fife	34,828	11,410	11,240
Glasgow City	53,914	17,670	17,400
Highland	20,993	6,880	6,770
Inverclyde	8,252	2,700	2,660
Midlothian	8,238	2,700	2,660
Moray	7,809	2,560	2,520
North Ayrshire	13,900	4,560	4,490
North Lanarkshire	34,393	11,270	11,100
Orkney Islands	1,978	650	640
Perth & Kinross	13,308	4,360	4,290
Renfrewshire	17,759	5,820	5,730
Scottish Borders	10,346	3,390	3,340
Shetland Islands	2,034	670	660
South Ayrshire	11,709	3,840	3,780
South Lanarkshire	32,796	10,750	10,580
Stirling	8,265	2,710	2,670
West Dunbartonshire	9,637	3,160	3,110
West Lothian	16,645	5,450	5,370
NORTHERN IRELAND	213,980	70,120	69,040
Antrim	5,989	1,960	1,930
Ards	10,582	3,470	3,410
Armagh	6,604	2,160	2,130
Ballymena	7,140	2,340	2,300
Ballymoney	3,425	1,120	1,110

Banbridge	5,766	1,890	1,860
Belfast	33,865	11,100	10,930
Carrickfergus	4,966	1,630	1,600
Castlereagh	9,048	2,970	2,920
Coleraine	6,361	2,080	2,050
Cookstown	4,109	1,350	1,330
Craigavon	10,840	3,550	3,500
Derry	12,228	4,010	3,950
Down	8,638	2,830	2,790
Dungannon	6,086	1,990	1,960
Fermanagh	6,749	2,210	2,180
Larne	4,010	1,310	1,290
Limavady	3,382	1,110	1,090
Lisburn	14,878	4,880	4,800
Magherafelt	4,784	1,570	1,540
Moyle	1,953	640	630
Newry and Mourne	11,311	3,710	3,650
Newtownabbey	10,770	3,530	3,480
North Down	10,362	3,400	3,340
Omagh	5,719	1,870	1,850
Strabane	4,415	1,450	1,430

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Carers UK Adviceline

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10am-4pm)



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Carers UK makes life better for carers.

Caring will affect us all at some point in
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With your help, we can be there for the
6,000 people who start looking after
someone each day.

We're the UK's only national membership
charity for carers. We're both a support
network and a movement for change.

- We give expert advice, information
and support.
- We connect carers so
no-one has to care alone.
- We campaign together for lasting
change.
- We innovate to find new ways to
reach and support carers.