



Who cares now?

Changes in informal caring 1994 and 2006

By Eileen Evason

Introduction

It has been estimated that one in three people will become carers at some stage in their lives (Carers Northern Ireland, 2007). Taking on a caring role can significantly change people's lives and have an impact on their financial circumstances as well as their health and well being. In 1994, the **Northern Ireland Social Attitudes** (NISA) survey included questions on informal caring to examine the extent and nature of this important, but often unappreciated, task. The NISA survey found considerable levels of caring, especially by female relatives aged 45-59 years (Evason and Robinson, 1996). Informal caring continues to be a major issue due to changing demographic and policy contexts and so, to update research on this topic, questions were included in the 2006 **Northern Ireland Life and Times** (NILT) survey. This Research Update uses data from both the 1994 NISA survey and the 2006 NILT survey to examine changes that have occurred in informal caring across the years. By informal care we mean the care that is provided, in the main by other family members, on an unpaid basis to older persons and persons with a disability. Informal care underpins our health and social care services and is a vital contribution to maintaining the health and well being of a significant proportion of the population in Northern Ireland.

The extent of informal care

Table 1 provides an indication of the volume of support provided by informal carers in Northern Ireland. In all, in 2006, 23% of adults had caring responsibilities. In other words, on top of the responsibilities

Table 1: The volume of caring

	%	
	1994	2006
Cares for someone in same household	5	11
Cares for someone in another household	21	14
All persons who are carers	26	23

people normally carry – earning a living, caring for children and so on – nearly one quarter of adults in Northern Ireland are informal carers. It would appear, however, that informal care is changing. Table 1 also indicates that, overall, the proportion of people reporting that they have caring responsibilities in 2006 was lower than the figure for 1994. Moreover, within this overall pattern, there has been a shift with fewer informal carers assisting persons in

another household. This and the other data presented below suggests that the boundaries of informal care are being pulled back and redrawn more tightly around the immediate family.

Figure 1 reflects the fact that some informal carers are supporting more than one person in need of assistance. Here again, however, there is evidence of shifting patterns of care. The percentage

Figure 1: Caring for two or more people

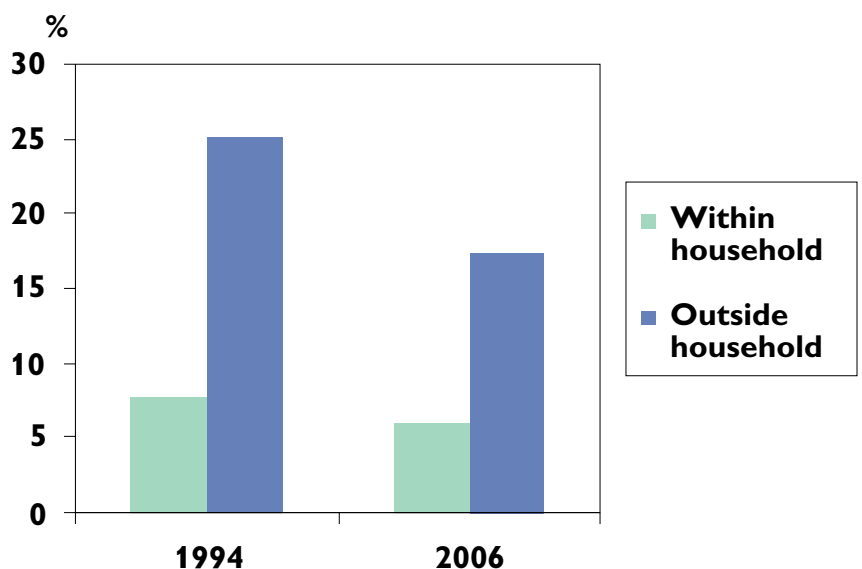


Table 2: Who is being cared for?

	%	
	1994	2006
Parents/parents-in-law	43	47
Another relative	34	18
Friend/neighbour	10	3
Child/step child	8	15
Spouse/partner	5	18

of respondents assisting more than one person in the same household hardly changed between 1994 and 2006 but there seems to have been a decline in the proportion of informal carers helping two or more people in another household.

The direction of caring

Table 2 is significant for a number of reasons. When the discussion on informal care began in the 1980's there was an assumption that networks of carers existed, or could be developed, in the community with friends, neighbours and relatives all being available to provide support and assistance to those who needed it. The implication of this assertion was that statutory provision could be limited and these networks would take up the slack. After much debate it was accepted that, far from being provided by broad networks in the community, informal care is, by and large, family care and often consists of one person, with limited additional help, providing care at considerable cost to themselves. Carers moved from being a resource to be exploited to being a group in need of recognition and support. Table 2 bears out the general point that informal carers are assisting those to whom they are related. In both 1994 and 2006 those most likely to be being supported by informal carers were parents and parents-in-law. There have, nevertheless, been changes in the direction of informal care. As the table indicates, the volume of care provided to 'other relatives' outside the immediate family circle has fallen sharply and very few informal carers (3%) are now caring for neighbours or friends.

Caring and gender

Table 3 indicates, predictably, that women are more likely to be informal carers than men. The table also suggests that the proportion of males in Northern Ireland providing care has declined sharply since 1994 with a more modest drop occurring amongst females. It would appear that, as the boundaries of care are redrawn, informal carers are more likely than before to be women.

Table 3: Volume of caring, by gender

	%	
	1994	2006
Males	22	17
Females	29	27

Table 4: Age of carers

	%	
	1994	2006
18-34 years	29	20
35-54 years	47	49
55+ years	24	31

Caring and age

One of the stereotypes which confused earlier debates on informal care was the assumption that such care generally involved the young and fit caring for the elderly. It has long been clear, however,

that care is often provided by people in late middle age or of pensionable age who may, of course, have a degree of disability themselves. Table 4 demonstrates the pertinence of these concerns. Indeed, it would appear that responsibility for providing informal care is shifting from the young to older persons. Informal carers today are less likely to be under the age of 35 years than they were in 1994 and persons aged 55 years and over are now more likely to report that they are carers.

The volume of informal care

Tables 5 and 6 detail the amount of time taken up by informal care. The tables show that, whilst fewer people are engaged in informal care, for those that are, informal care is more intensive and more demanding. Table 5 shows a sharp decline between 1994 and 2006 in the proportion of carers who assist for less than 10 hours a week and a sharp increase in the proportion of carers for whom informal care may be viewed as full-time employment. A similar shift is evident in Table 6 and the data as a whole are consistent with our earlier observation with regard to the tightening boundaries of informal care.

Table 5 indicates that amongst both male and female carers informal care is now less likely to involve a few hours a week. What stands out from the table is the fact that, not only are women now more likely to be informal carers, over one third (34%) of female carers report that they spend at least 30 hours a week caring. The more intensive nature of informal care today is also demonstrated in Table 6 which indicates that, for the majority of males and females, care means care on a daily basis.

Who should care?

The data reported here have indicated that there is a high level of informal care-giving in Northern Ireland. This is an issue that will remain critical in the future. Given the projected increase in the number of elderly persons needing care over the next few years, respondents were asked who should be expected to provide the

Table 5: Hours per week spent caring

	%					
	Males		Females		All	
	1994	2006	1994	2006	1994	2006
Under 10 hours	71	52	47	34	57	40
10-29 hours	23	22	33	29	29	26
30 hours or more	6	23	19	34	13	31
Don't know	0	3	1	3	1	3

Table 6: Days per week spent caring

	%					
	Males		Females		All	
	1994	2006	1994	2006	1994	2006
1-2 days	43	28	31	18	36	22
3-4 days	21	14	23	16	22	15
5-7 days*	37	58	47	64	43	62
Don't know	0	0	0	1	0	1

* 5-7 days is typically 7

bulk of the care that will be required. Table 7 shows that the pattern of responses is the same in 2006 as it was in 1994 in that the government is the most frequently identified source of care, followed by a relative. However, the percentage of respondents in the two years identifying each of these sources has changed – while 61% of respondents in 1994 thought that the government should provide care for elderly people, the figure for 2006 has risen to 73%. This was matched by a fall in the percentage of respondents thinking that a relative should provide the care – from 28% to 19%.

This perception of the government's obligation to provide care is confirmed in responses to a series of attitudinal questions. For example, more than three quarters of respondents in 2006 (77%) disagreed that women should be prepared to give up their jobs to care for family members who are sick, disabled or elderly, and a similar proportion (80%) thought the same in relation to men. This closes

the gap in the expectations for women and men since 1994, when a much lower percentage of respondents disagreed that women should be prepared to give up their jobs to care (69%) than thought that men should (78%).

In addition, 63% of respondents in 2006 and 67% in 1994 disagreed that it should

be everyone's responsibility to make their own provision so that they can pay for their own care when they are old. Allied to this, there has been an increase in the level of disagreement with the idea that elderly people should sell their own home to meet the cost of living in an old person's home, from 74% in 1994 to 87% in 2006.

Table 7: Who should provide care for elderly people?

	%	
	1994	2006
Government	61	73
Relative (including husband, wife or partner)	28	19
Friends or neighbours	2	1
Voluntary organisations	3	1
Other	4	4
Don't know	2	3

Conclusion

Informal care in Northern Ireland is changing. The boundaries of care are being drawn more tightly around immediate family members. There seem to be fewer informal carers but the care being provided is more intensive and demanding. The data did not permit detailed analysis of the causes of these changes. Further research is clearly needed but it may well be that people's capacity to care has diminished and hence informal care is being restricted. Over the past 15 years a number of developments may have led to people having less time to care. In social

policy there has been the drive to increase economic activity amongst groups such as lone parents. The emphasis on welfare to work has ignored the value of unpaid work and the contribution to welfare – through caring – that the economically inactive may make. Changes in the housing market, with rising house prices which require two salaries to service, may also be playing a role. Whatever the reason, it is evident that, whilst there seems to have been some decline in the proportion of the adult population who are involved in informal care, those that are providing informal care are providing more such care than in the past. It would appear that

carers today are under more pressure than before and are more likely to need support in this role.

References

Carers Northern Ireland (2007) <<http://www.carersni.org/Newsandcampaigns/Newsreleases/1176278277>>

Evason, E. and Robinson, G. (1996) 'Informal care in Northern Ireland', in Richard Breen, Paula Devine and Lizanne Dowds (eds) *Social Attitudes in Northern Ireland: The Fifth Report*, Belfast: Appletree Press, pp. 49-69.

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Key Points

- 26% of respondents in 1994 and 23% in 2006 provided informal care for someone else, with an increase in the proportion of people providing care for someone living with them.
- In 2006, 17% of men and 27% of women said they were carers and almost one half (49%) of them were aged between 35 and 54 years.
- Nearly half (47%) of carers looked after their parents or in-laws in 2006 and the figure has risen only slightly since 1994 (43%).
- Caring responsibilities are becoming more concentrated within the close family, with a decrease in the proportion of respondents caring for other relatives or friends.
- The amount of time per day and the amount of days per week spent caring has risen since 1994: in 2006, 31% of carers spent 30 hours a week or more caring, and 62% cared for someone 5-7 days per week.
- There has been an increase in the perception that government should provide care for elderly people (from 61% in 1994 to 73% in 2006).
- There has been a fall in support for the idea that elderly people should sell their own home to meet the cost of living in an old person's home.

The **Northern Ireland Life and Times survey** is carried out annually and documents public opinion on a wide range of social issues. In 2006, 1200 adults were interviewed in their own home. Interviews were carried out by MillwardBrown Ulster.

The survey is a joint project of the two Northern Ireland universities and aims to provide an independent source of information on what the public thinks about the social issues of the day. Check the web site for more information on the survey findings (www.ark.ac.uk/nilt) or call the survey director on 028 9097 3034 with any queries.

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