



# Policy measures to tackle poverty among unpaid carers in Northern Ireland

October 2023

A WPI Economics report for the Carer Poverty Commission NI

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## About the Carer Poverty Commission NI

The Carer Poverty Commission NI was established to better understand the causes of poverty among Northern Ireland's unpaid carer population and to deliver the fresh thinking needed to address it. The Commission is led by Carers NI and has two key goals:

- To examine the scale and drivers of poverty among unpaid carers in Northern Ireland; and
- To design new policy recommendations for the Stormont Assembly and Executive to help tackle that poverty wherever it exists.

For more information, visit: [carersuk.org/CarerPovertyNI](https://carersuk.org/CarerPovertyNI)

The work of the Carer Poverty Commission NI is funded by the Carers Support Fund, delivered by the Community Foundation NI and supported by the Department of Health. Carers NI is very grateful to the Department of Health and Community Foundation.



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## About Carers NI

Carers NI is Northern Ireland's membership body for unpaid carers. We're here to listen, to give carers expert information and tailored advice. We champion the rights of Northern Ireland's 220,000 carers and support them in finding new ways to manage at home, at work, or in their community. We're here to make life better for carers.

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# Executive Summary

The poverty rate for carers in Northern Ireland currently stands at 28.3%, a rate which is higher than the poverty rate for carers in the rest of the UK (23.6%), and considerably higher than poverty rates amongst adults in Northern Ireland who do not have caring roles (17.4%).

In this report, we investigate the drivers of carer poverty, and test the effects of various policy solutions on reducing the rate of poverty amongst carers.

## The biggest drivers of carer poverty are:

- **Inability to keep and retain employment.** Due to the demands of caring, carers struggle to enter and stay in the labour market, even if they want to work. Carers may only be available to work at certain hours and on certain days, may need flexible working arrangements which many types of employment do not provide, or may struggle to access the levels of replacement care they need to be able to work.
- **Type of housing tenure.** We found that carers who live in rented accommodation (both privately and socially rented) are at a far greater risk of poverty than carers who have a mortgage and own their own homes. This finding is important against the backdrop of rapidly rising rents in Northern Ireland, as this threatens to push carers into deeper poverty.
- **Inadequacy of social security.** Carer's Allowance is paid at a rate of £76.75 per week at the time of writing – the equivalent of around £2 per hour for those caring for the minimum of 35 hours per week needed to qualify for the benefit. Carer's Allowance also has one of the harshest earnings caps in the benefits system, significantly restricting many carers ability to work. Many carers have stated that the level of social security support they receive is inadequate to get by.
- **Type of care, with more demanding care needs putting carers at an increased risk of poverty.** This is particularly true of sandwich caring, where a carer has to simultaneously take care of two generations – their children, and adult relatives such as their parents or spouses. Juggling this can be particularly demanding, especially as caring for more hours, and caring for more people, puts carers at a higher risk of poverty.

The above pressures can negatively affect carers' mental health, lead to feelings of hopelessness, loneliness and isolation from others.

To begin addressing these significant levels of poverty among unpaid carers in Northern Ireland, we propose the following policy interventions.

## Policy solutions in the social security system:

- **Improving Carer's Allowance eligibility criteria. This could include:**
  - An increase in the Carer's Allowance earning threshold and the introduction of a taper;
  - The introduction of a working carers element to Carer's Allowance;
  - Reforming overlapping benefit rules to allow more older people to receive Carer's Allowance;
  - Allowing multiple Carer's Allowance payments to recognise the higher costs of caring for more than one person;
  - Allowing full time students to be eligible for Carer's Allowance.
- **Introducing a Carer's Allowance Supplement.** This would be a payment of £270.50 every six months, translating to £10.38/week. This mirrors the Scottish Government's Carer's Allowance Supplement.

- **Introducing new Carer Essentials Payment.** A payment of £25/week to help carers meet the extra, inescapable costs of caring for a sick or disabled person.
- **Carer's Allowance uplift.** This would introduce a larger payment to carers that brings Carer's Allowance to the level of £120/week, by giving an additional £43.25 each week. This is the amount calculated by the Joseph Rowntree Foundation as the bare minimum an individual needs to cover the essentials.

**We also recommend the following policy solutions that will support carers out of poverty:**

- Review of the value and eligibility criteria of Carer's Allowance.
- The introduction of a Young Carer's Grant
- The introduction of statutory paid carer's leave that is separate to holiday entitlement.
- The introduction of flexible working as a day-one right for unpaid carers.
- Delivery of adult social care reform to ensure carers have access to the replacement care they need to be able to stay in, or return to, work.
- Greater engagement from employers with carers and carer organisations to introduce carer-friendly policies and more supportive workplace cultures for carers.
- Employers co-designing and implementing work placements and training schemes for unpaid carers.
- Improved support for carers to access further and higher education.
- Legislation to enshrine unpaid caring as a protected characteristic under equality law.

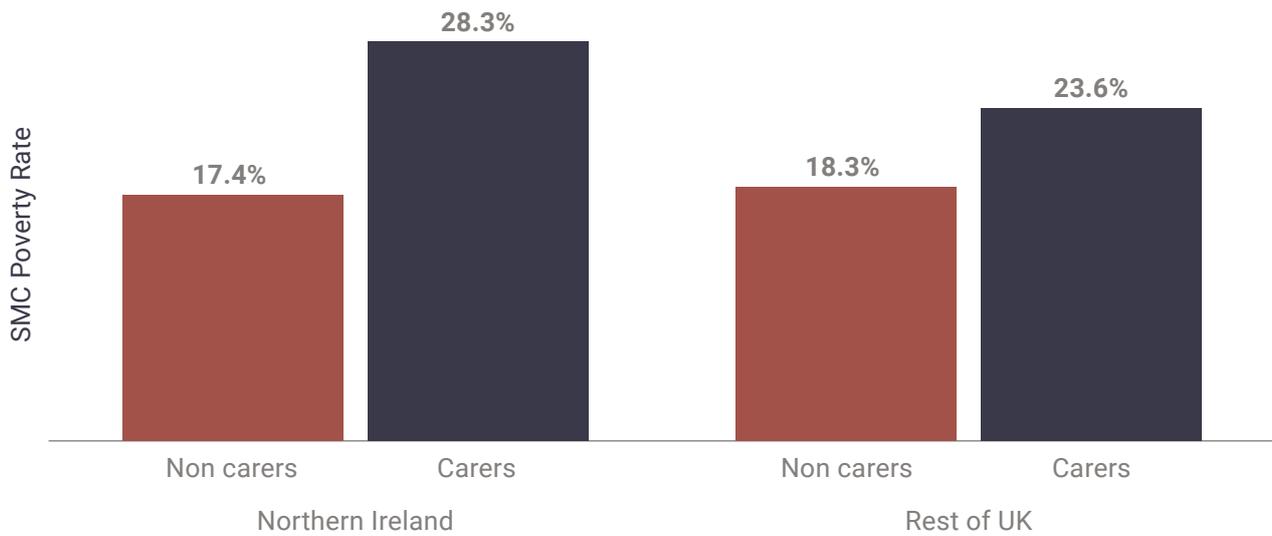


## Carer poverty infographic

Poverty rate in carers when we account for the additional costs of caring:

NI		Rest of UK	
Non-carers	Carers	Non-carers	Carers
 <b>17.4%</b>	 <b>28.3%</b>	 <b>18.3%</b>	 <b>23.6%</b>

- Carers in Northern Ireland are more likely to be in poverty than carers in the rest of the UK. More than one in four carers in Northern Ireland live in poverty.
- Of those who receive Carer’s Allowance, 46% live in poverty while 16% live in deep poverty (50% below the poverty line).
- Being unemployed, living in rented accommodation and caring for multiple generations at once are some of the strongest predictors of poverty amongst carers.



# Introduction

Since the beginning of 2023, the Carer Poverty Commission NI has been working to better understand the scale, drivers and impact of poverty among unpaid carers from all walks of life in Northern Ireland – shining a spotlight on an issue that has long affected the carer population, but has grown worse in the face of one of the worst cost of living crises in decades.

The Commission's research has already revealed that Northern Ireland's carer poverty rate is higher than the rest of the UK, with a combination of inescapable extra caring costs, barriers to work and inadequate social security support leaving carers here living in poverty; forced to cut back on essentials and make other desperate decisions to get by.

Unpaid carers make an immense contribution to Northern Ireland, saving the public purse billions of pounds per year and propping up the health system, so it seems grossly unfair that so many should be condemned to a life of destitution and despair in return.

This research report examines how Northern Ireland can begin to reverse that trend – setting out a programme of recommendations for delivering the financial security carers need.

Taking part in one of the Carer Poverty Commission's focus groups earlier this year, a local carer said: *"This is my normal. Poverty is all I've ever known."* It is Carers NI's mission to help deliver a new future for Northern Ireland, where carer poverty is never considered 'normal' again.



## Literature review

At the outset of the Commission, we conducted a literature review to explore the current situation in Northern Ireland, and to understand the drivers of poverty already identified in the literature to give us a starting point in conducting our research.

### Poverty amongst unpaid carers in Northern Ireland: A growing problem

Poverty amongst unpaid carers in Northern Ireland is the highest of all four UK nations.<sup>1</sup> Half of unpaid carers in Northern Ireland are reporting that they are struggling financially.<sup>2</sup> Carer's Allowance is one of the lowest benefits of its kind – at £76.75 a week, this is equivalent to around only £2 for each hour a carer spends caring. Of those who receive Carer's Allowance, 46% are struggling to make ends meet, and 44% are concerned they can't heat their homes.<sup>3</sup> The low level of Carer's Allowance is compounded by the fact that taking on an unpaid caring role often coincides with the loss of two household incomes – the person who requires care has to leave the labour market due to the nature of their illness, and their partner will often reduce their working hours to provide care.<sup>4</sup>

Unpaid carers in Northern Ireland have many longstanding financial and social pressures including accessing regular and high-quality support through the Health and Social Care system, maintaining their own health and wellbeing, juggling work and their caring responsibilities, accessing appropriate housing that meets their caring needs and experiencing high levels of poverty and financial hardship.<sup>5</sup> These pressures have been severely exacerbated by the ongoing cost of living crisis. The cost of living crisis has increased financial pressures leading to caring families amassing debt on utilities and housing, giving up basics such as food, heating and family leisure activities – all of which has a negative impact on the mental health of parents and children.<sup>6</sup> The mental health crisis amongst unpaid carers is increasingly concerning,<sup>7</sup> as poor mental health can exacerbate the ill-effects of poverty even further.

### Key drivers of poverty amongst unpaid carers

Existing research on the experiences of poverty amongst unpaid carers in Northern Ireland, and the rest of the UK more widely, points to three key drivers:



**Limited employment opportunities:** An important driver of poverty identified amongst carers is their inability to stay in work. The lack of flexible work means it can be very difficult for carers to juggle work and care responsibilities.<sup>8</sup> Of those carers who are in work, many worry about having to reduce their hours of work or leave altogether.<sup>9</sup> One estimate is that unpaid carers who do give up work experience an average loss of pay of £487 per month – nearly £6,000 per year.<sup>10</sup>



**Inadequate social security system:** One of the major drivers of carer poverty is the low level of support provided by the Carer's Allowance benefit and other income from the social security system not being adequate enough to replace lost wages or meet increased costs.<sup>11</sup> There is a lack of dedicated support for young (non-adult) unpaid carers who are unfairly excluded from the social security.<sup>12</sup> Navigating the social security system for carers is often overly complex and difficult – especially if a carer is trying to combine care with work. The system is also unresponsive to complex caring circumstances, for example someone is caring for multiple people at the same time.<sup>13</sup> The inability of both the carer and the person being cared for to have early access to pensions is another issue that locks carers in poverty.<sup>14</sup>



**Nature of care needs:** Carers providing more care are often on lower incomes.<sup>15</sup> The more time someone spends caring, their risk of being in poverty increases as their chance of being in employment reduces.<sup>16</sup> Caring for more than one person puts carers at a higher likelihood of poverty,<sup>17</sup> particularly sandwich caring.<sup>18</sup> Another predictor of poverty amongst unpaid carers is the caring relationship, and whether this has an impact on the capacity of carers to take on employment.<sup>19</sup> The financial pressures faced by carers are further exacerbated by the immense and inescapable extra costs attached to caring. This includes substantial

electricity costs, higher heating bills, greater spending on food due to specific nutritional needs, the extra transport costs of travelling to and from health appointments,<sup>20</sup> and the cost of childcare.<sup>21</sup> In Northern Ireland, the cost of fuel has been highlighted as a particularly salient cost.<sup>22</sup> Many carers are forced to use credit cards, take out loans and borrow from friends and relatives to attempt to meet those extra costs.<sup>23</sup>

The first report from the Carer Poverty Commission has highlighted the centrality of all of these drivers to understanding unpaid carers' lived experiences of poverty and, in particular, the negative impact these drivers have on a wider range of key outcomes including: strained family and community life leading to isolation and loneliness; locking carers into a vicious cycle of poor mental health and financial hardship; carers living in precarious financial situations and fearing for their financial futures; and having limited access to educational and learning opportunities that could improve their situations.<sup>24</sup>



# Drivers of poverty

We have further explored those key drivers from a quantitative perspective, building on the previous qualitative research undertaken for the Carer Poverty Commission.

In order to examine how the poverty drivers influence the likelihood of a carer being in poverty, we constructed a bivariate logistic regression that predicts a person’s likelihood of poverty based on a range of factors. These factors include socioeconomic characteristics, such as employment status, tenure and family composition, as well as carer characteristics such as the number of hours spent caring and whether or not someone identified themselves to be a sandwich carer. For a full list of predictors we used and their effects for a representative carer, see Appendix B.

Due to small sample sizes, we estimated this model for all of the UK, and then ran a model with an interaction to see if Northern Ireland was significantly different from the rest of the UK. This means that we estimated each carer characteristic for the rest of the UK to establish a baseline, and then we checked how different each estimate was in Northern Ireland. We found no significant differences between drivers of poverty in Northern Ireland and the rest of the UK.

For a representative carer, the strongest predictors of poverty were, in order of importance:

- **Employment status**, with the difference particularly stark between unemployed and full-time employed carers;
- **Tenure type**, with private and social renters most at risk;
- **Sandwich caring**, with sandwich carers at an increased risk of poverty;

## Headline poverty figures

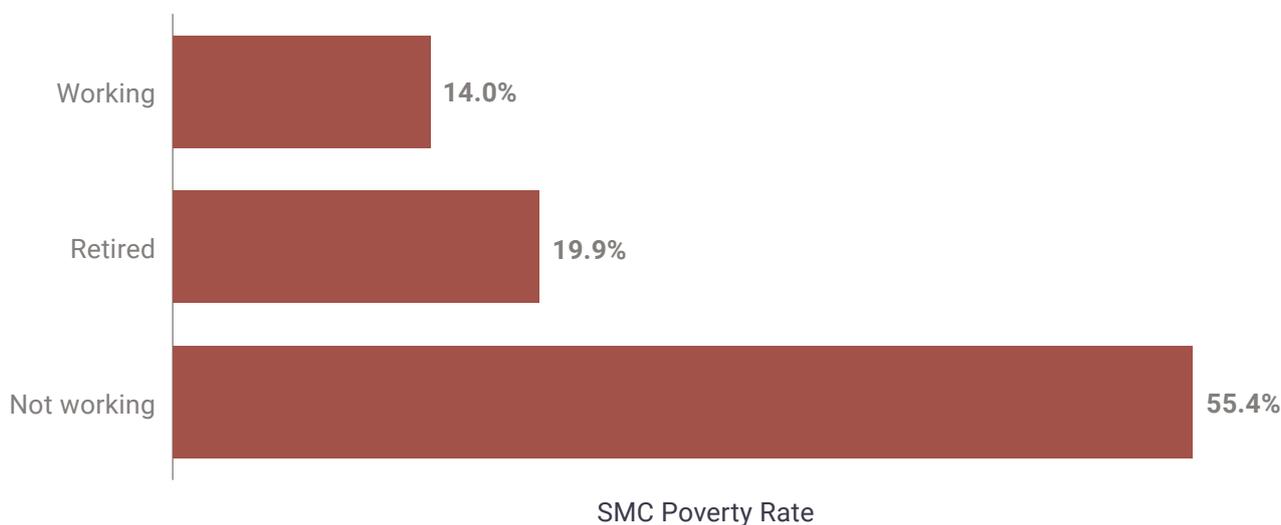
NI		Rest of UK	
Non-carers	Carers	Non-carers	Carers
 <b>17.4%</b>	 <b>28.3%</b>	 <b>18.3%</b>	 <b>23.6%</b>

In this report, ‘poverty’ is measured using the approach developed by the Social Metrics Commission (SMC).<sup>25</sup> SMC poverty is underpinned by Total Resources Available, which includes all income, liquid assets and benefits minus inescapable costs such as housing, childcare, costs of disability and costs of caring. Using this poverty measure allows us to account for increased costs faced by carers, which are crucial in understanding carer poverty. For more information on how the poverty rate is calculated, see Appendix A.

## Difficulty finding and staying in employment

More than half (55%) of unpaid carers who are out of work live in poverty. This compares to 20% of retired carers, and 14% of working carers who live in poverty. Being unemployed is the single strongest predictor of carer poverty.

Figure 1: Poverty rate in carers by employment status, Northern Ireland, 2022



Source: WPI Economics analysis of HBAI/FRS 2018/19-2021/22

These numbers strongly reinforce our qualitative findings and the existing literature on poverty amongst carers, which highlights that difficulty in finding and keeping employment is one of the strongest drivers of poverty amongst carers.

For many, unemployment is not a choice, but an unavoidable result of their caring responsibilities. This is due to a variety of reasons:

- **Difficulty juggling work and care:** Juggling work and care is a challenging task, and for many proves impossible. In 2019, around 130,000 people in Northern Ireland either reduced their working hours or left work entirely because of the demands of a caring role.<sup>26</sup> Carers may have successful careers before being thrust into their caring role and forced to leave the labour market.
- **Lack of employer support and flexibility:** Employer support can be lacking, with many having no policies in place to support staff with the demands of their caring roles. Paid carer's leave is uncommon, so carers are forced to rely on their annual leave allowance to deal with caring-related emergencies and demands. Many employers and industries also fail to provide the flexible working arrangements, like working from home, that can help facilitate carers staying in work.

### Rebecca's Story

*"I went from maternity leave, to career break, to resigning because the caring role was just too much around work and that remains the case. So, I haven't been physically in an office for seven years now. I had a professional career at a university that I had to give up to care for my children. I had no idea this was going to be my life. There was no heads up of any of us at all, so no sort of financial plan.*

*"And the cost of living crisis really does make the gap between unpaid carers and the rest of society so much larger."*

The impact of leaving work to care is lasting, and has deep consequences for carers' current and future financial security – impacting not just their existing income but pension contributions for later life, too.

## Molly's Story

*"I care for my mother who's 90 and can barely walk but she's medically fit to be home. So, I retired from my job in April to look after my mum because I couldn't work five days a week and look after [her]. That means that I have now lost my salary. So, what's next? Nobody can tell me.*

*"I retired because I had to make that decision. I'm now just in a complete flux because this is no salary after 27 years. So, I don't know where I'm going to be going as regards paying for the basics bills, keeping the car on the road, go back and forward every day to the hospital to provide for my mom everything she needs. It probably hasn't quite hit me yet, but I know it's all on its way.*

*"Just a horrible sense of impending doom and anxiety that I've reached the age of 60 and I should have been getting my pension this month. That would have been okay if I did, it wouldn't have been a problem at all. But I've been sort of falling now with no safety net having been paying into the pension all my working life.*

*"Not only are we living in financial fear and poverty, worrying about keeping things afloat and paying bills, we're also trying to continue with our own basic life through a poverty of support and understanding and a poverty of isolation and loneliness."*

## Mary's Story

*"When my parents got dementia, I came back here and looked after them but kept working, but only part time, because they lived 50 miles away from me. When COVID came I found absolutely no support at work. So I just had to give up work. It was only part time, but I had to totally give it up and come and live with my mother.*

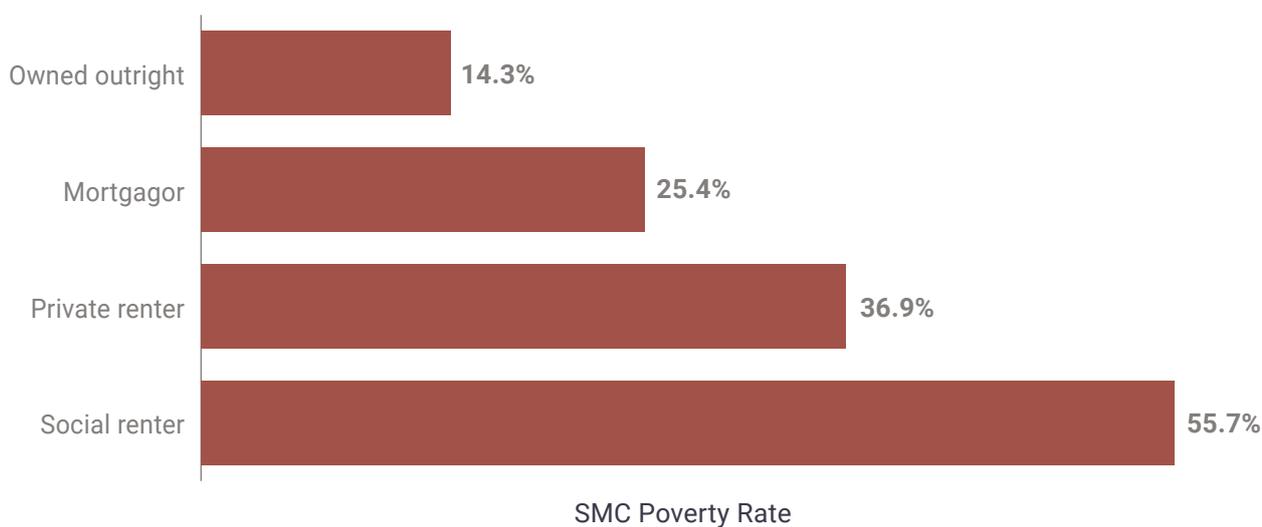
*It never occurred to me to think about sort of the financial implications of giving up work to care. I never thought to the future. Well, I'm absolutely reeling now. Absolutely reeling. I'm absolutely raging because I never thought about the loss of my National Insurance contributions. I will not get a full state pension, and I will now not get a full work pension.*

*So, I'm skint. I now have a future of poverty. I do not know what I'm going to do because I'm not well enough to work again. And I had several brilliant jobs that I have had to give up to care. Why is it that I have poverty to look forward to at 59?"*

## Living in rented accommodation

Carers who rent are more likely to be in poverty than carers who own their homes. The type of tenure is the second strongest predictor of poverty following employment status. This is a striking result, given housing tenure type is not often mentioned in literature on carer poverty.

Figure 2: Poverty rate in carers by tenure type, Northern Ireland, 2022



Source: WPI Economics analysis of HBAI/FRS 2018/19-2021/22

For a typical carer who is living in privately rented accommodation, outright home ownership would be associated with a 36% decrease in risk of poverty.

The growing demand for private rental properties in Northern Ireland has been taking place at the same time as a 'supply crunch' within Northern Ireland's private rental sector.<sup>27</sup> This situation has meant Northern Ireland has experienced the largest rise in private rental prices of anywhere across the UK in recent years. According to the ONS's Index of Private Housing Rental Prices, private rental prices in Northern Ireland increased by 9.1% in the 12 months to June 2023, significantly above the increase in private rental prices across the UK of 5.5%.<sup>28</sup>

As such, those who live in the private rental sector in Northern Ireland are increasingly falling into poverty. In 2020, 30% of people living in poverty in Northern Ireland were private renters, a substantial increase from 18% in 2005.<sup>29</sup> Our analysis indicates that poverty amongst private renters who are carers might be even higher. There is an intrinsic link between poverty and being a private renter, with private renters typically spending a far greater proportion of their income in housing costs than those who own their homes. Recent analysis by the Poverty Strategy Commission has shown that private renters living in poverty spend close to half (47%) of their net income on housing costs.<sup>30</sup>

## Tenure type and poverty: a synthetic case study

We were unable to gather qualitative evidence on how various tenure types can influence the risk of poverty in carers. However, a logistic model we developed allows us to see how poverty risk of a typical carer might be influenced by their type of tenure.

Our hypothetical carer, a woman around the age of 50, is part-time employed and lives together with her spouse and children. She is in good health, and receives some benefits, but not Carer's Allowance. She cares for one person for more than 20 hours a week.

If our carer is a private renter, her base risk of poverty is 46%. However, if she owns her house outright, our model predicts her risk of poverty to be only 22%. House ownership can cut the predicted risk of poverty in half – even when all other characteristics remain unchanged.

This statistical exercise shows just how strongly type of tenure can affect risk of poverty in carers.

## Inadequate social security support

The inadequacy of social security support available to carers to support income lost through unemployment is a considerable driver of poverty. The current system can also exacerbates the barriers carers face to entering and staying in the labour market. Regarding Carer's Allowance, the carers we spoke to were critical of the strict and exclusionary eligibility criteria and the low monetary value of the payments, which heightened financial difficulties and experiences of poverty.

### James' Story

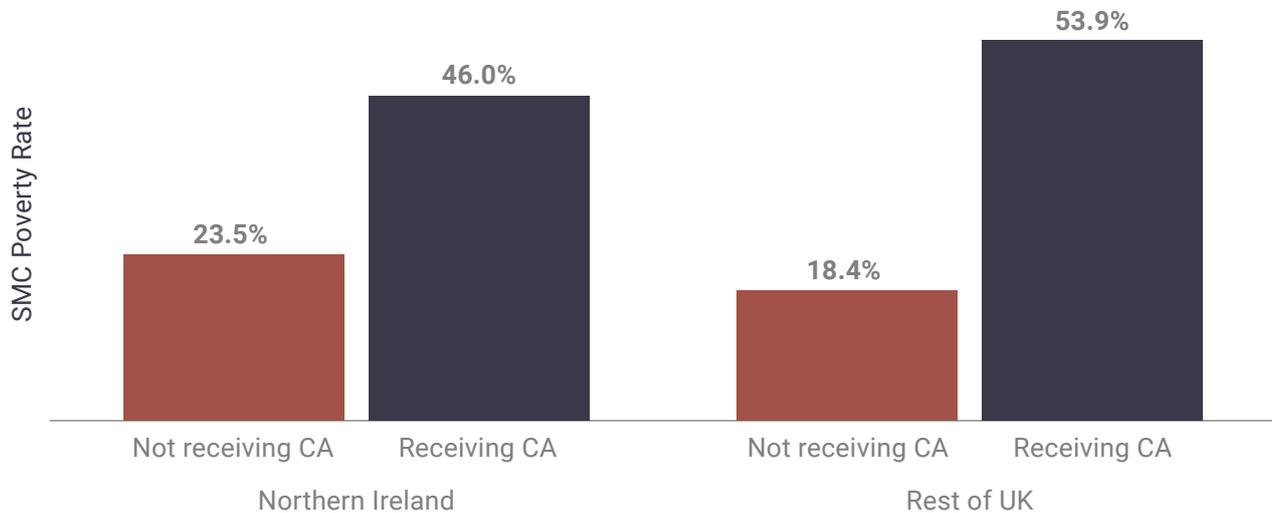
*"As for the cost of living and prices, I don't know what's going to happen. You're worried about what the winter is going to bring and how we're going to survive. Last winter the expense of everything was just getting too much and I couldn't afford oil to the tank. And the children come around and say 'Why?' I'm too embarrassed to say I haven't got the money to put in the tank. I just don't know where it's going to go.*

*"It's not great, Carer's Allowance, and it's very difficult to make ends meet. I can't remember the last time I was shopping for clothes. I always go to Oxfam or second hand shop. But you just know that your money is never going to do. You're always looking for smart price in Asda."*

Carer's Allowance is available to those aged 16 and over who care for an ill or disabled person for at least 35 hours per week. It has a strict earnings cap of £139/week and is unavailable to those receiving their State Pension or in full-time education. Those in receipt of Carer's Allowance receive £76.75 per week, which is the equivalent of £2 per hour for those caring for 35 hours per week – around five times less than the National Living Wage. As a result, it was not uncommon for carers to describe Carer's Allowance in its current form as an "insult", "terrible" and "degrading".

The data shows us that Carer's Allowance is not enough to keep carers with low incomes out of poverty. Amongst those who receive Carer's Allowance in Northern Ireland, the poverty rate is 46% - much higher than the poverty rate among those not reliant on Carer's Allowance (23.5%).

Figure 3: Carer poverty rate by Carer's Allowance, Northern Ireland and the rest of the UK, 2022



Source: WPI Economics analysis of HBAI/FRS 2018/19-2021/22

Some carers believed that the current system discourages carers from seeking work for fear of losing their social security entitlement. Carer's Allowance is not tapered as income increases, so, perversely, working more has the potential to lower carers' incomes. This is unlike other benefits like Universal Credit, where a person can keep some of the payment as they earn more, and can make it much more difficult for carers to seek paid employment. The uncertainty and risk associated with losing benefits traps carers in poverty.

## Helen's Story

*"I'm working two days a week, but there is a sense of dread. I know that the time of having to give up work is coming. I don't know when, but it's sooner rather than later. I'm going to have to give that work up and then I will be in this precarious position and it's quite scary.*

*"I mean, I've looked at Carer's Allowance and I think Carer's Allowance is an insult. It is indeed an absolute insult to everyone. There's no point in even talking about the value of it because it's a disgrace."*

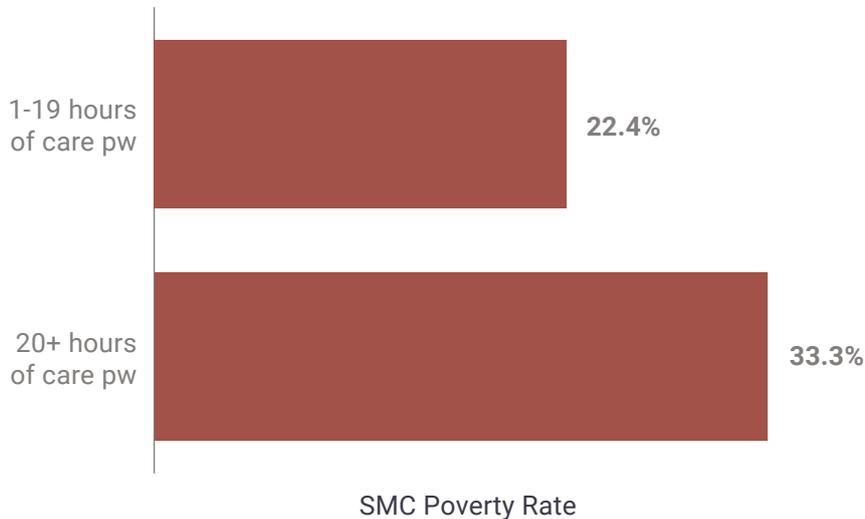
## Type of caring

Our research found that carers who are most at risk of being in poverty tend to:

- care for long hours (more than 35 hours per week),
- care for people who have very complex needs,
- be a sandwich carer, looking after two different generations with care needs at the same time – e.g., a disabled child and elderly parents.

### Caring for long hours

Figure 4: Carer poverty rate by hours spent per week (pw) caring, Northern Ireland, 2022



Source: WPI Economics analysis of HBAI/FRS 2018/19-2021/22

Those who care for longer hours are less likely to be able to find and keep employment. In addition, they are more at risk of suffering from increased costs associated with their caring role. Those who need more care tend to have more complex needs, which bring on additional cost.

As a result, 33.3% of carers who care for more than 20 hours per week live in poverty, compared to 22.4% who care for 1-19 hours per week – a rate which is still higher than the non-caring population.

### Jessica's Story

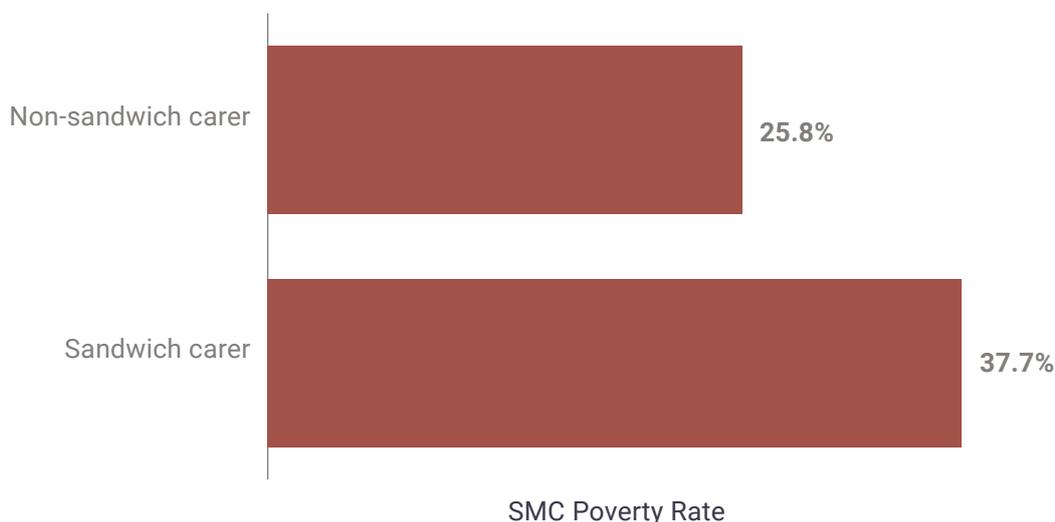
*"I'm trying to juggle working from home, working from the office, and caring full time. And it was tough before the pandemic, but since the pandemic, it's just escalated because nobody cares. And then with the cost of living, 40% of my income in the last year has been spent on caring because I have four pieces of equipment that have to be on 24 hours a day, so the electric has skyrocketed.*

*"I don't get out so I don't have a social life. I want to say fortunately from a financial point of view, but it's not good for your mental health because you don't get out. So the poverty is not just financial for me, it's the poverty of actually just existing instead of living. It's humiliating and embarrassing because it's hard enough trying to be a carer."*

### **Sandwich caring**

The data shows sandwich caring is one of the strongest predictors of carer poverty that we tested – with 38% of sandwich carers living in poverty in Northern Ireland, compared to 26% of non-sandwich carers.

Figure 5: Carer poverty rate by sandwich caring, Northern Ireland, 2022



Source: WPI Economics analysis of HBAI/FRS 2018/19-2021/22

Sandwich caring often means a carer has little or no respite from their responsibilities as the care needs of multiple people, from different generations, are difficult to juggle. This can result in caring taking up all of their waking hours, and the stress and demands associated with it can force them out of work. One sandwich carer said:

*"I'm a carer for my daughter, but I'm also caring for my mother who has dementia. ... Caring has exhausted me so much that I've had to give up my job and retire because I just can't do working with people that are sick all the time and then caring full time outside of that. So, yeah, it's been tough."*

### **Complex needs lead to higher costs**

All of the carers who participated in our qualitative research outlined significant and numerous additional costs they faced as a result of their caring role and that these were only rising as a result of the cost of living crisis. The infographic below summaries the struggles carers are facing with a wide range of extra costs.

These inescapable extra costs are squeezing carers' already limited budgets as a result of low income from both paid work and the social security system, and we heard that carers are being driven to cut back on essentials, use foodbanks and other support, rely on credit cards and overdrafts, and in some instances borrow from illegal money lenders.



## Food

Special nutritional or dietary needs can substantially increase the food costs faced by carers

“You go to the supermarket, and you put your card in the machine, and you’re almost sitting there with a silent prayer saying, ‘please let there be enough money there, please, so that I don’t have to leave some of this stuff’ ... Food has especially increased I have noticed. I would sooner that I didn’t eat so that my son could eat and my partner could eat.”

“At different points my children needed different sorts of allergy related foods, and they cost a fortune. And there’s never offers on those. And we all know that inflation is through the roof and has been for such a long time ... We just couldn’t afford the cost of it. Food prices are just depressing.”



## Electricity and heating

People with disabilities and other conditions often require warmer homes all year round, and may need medical equipment running in the home, all of which drives up energy costs

“My son can’t regulate his temperature. So, we’re high electricity users, we’re high gas users. There’s a lot of electrical equipment that’s on all the time in in the house and that helps him regulate [his temperature]. So those costs have been huge.”

“My son requires water therapy. So, we purchased a hot tub and it’s on all the time. He’s in it every day, but the running costs of that are astronomical. But it meets my son’s needs, it makes him happy. It may look like a luxury, but it’s not. But the running cost of our electric has gone up by at least £200 a month.”

“The electricity bill has doubled in the last year because I have four pieces of equipment that have to be on 24 hours a day, so the electric has skyrocketed.”



### Transportation costs

Getting to and from medical appointments, health services and other essential places can be very costly

**“I get no help with the petrol to and from hospital appointments. He has to go to three different hospitals with his condition. And you’re up and down. And it’s not just the petrol, it’s the car parking. So those are additional costs.”**



### Toiletries and clothing

People with disabilities may have special clothing requirements, which represent a significant cost

**“[The person I care for] struggles with incontinence and that side of things. And then the cost of replacing bed sheets and pyjamas constantly and underwear, and then just holes in clothes because they wear differently. I have to buy about ten pairs of joggers every couple of months just from the wear.”**

**“I calculated it last year that I spent £630 on school uniforms. He was in school two weeks, and he ruined his shoes and that was another £115 because he needs specialist adapted shoes.”**



### Caring in a rural area

The burden of travelling long distances to appointments and for essentials is usually greater for carers living in a rural area compared to carers who live in urban areas.

**“It’s got gradually more and more difficult. [The person I care for] often needs very specific foods. Because we live quite rurally, I often do a 30 to 40 miles trip to get everything that I need.”**

## Clare's Story

*"I have been a carer for three and a half years now. I care for my husband who had a stroke when he was 40. I'm still working, but I've had to reduce my hours slightly. I was working full time, bringing home probably £2,000 a month just on my own, which was fantastic. But when my husband had his stroke, I just spoke to my employer and said 'I don't want to quit work, I can't, I have to pay the mortgage. There's only my wage. So would you agree to me reducing my hours?'.*

*So that means I now take home about £15,500-£16,000 which sounds like a load, but then I've got all the bills come out of my wage, everything. I pay for the groceries, I pay for the petrol, I pay for the mortgage, I pay for the car insurance, home insurance, my insurance, phones, everything. So, at the end of it, I have very little left. And really, with the cost of living crisis and the price of just basic groceries and petrol going up so much, it's a struggle, it's a big struggle. And the fear of what if I don't have enough money to pay for things this month? What are we going to do?*

*And for husband he also needs therapy, but the cost of therapy is massive – we're looking at almost £400 a month. And he pays that out of his benefits and that's money that could help me with the house, but I don't feel right taking it from him because it's helping him physically. So that cost is massive.*

## The pressures of poverty and caring affect health and well-being

The combination of struggling to manage household finances alongside the demands of an unpaid caring role can also have a significant impact on mental and emotional wellbeing.

Some carers explained how the demands of providing care had led to mental ill-health, while others discussed reoccurring anxieties of not being on top of bills and living under chronic stress from the pressures of caring and poverty. This can create a vicious cycle, where poverty-related ill-health makes it more difficult to work, in turn creating more financial strain.

## Denise's Story

*"I've been a nurse for 35 years, but I've actually got physically and mentally sick because of my caring role. So much so that I've had to take retirement from my job because I just couldn't carry on working and caring at the same time. I just can't do working with people that are sick all the time and then caring full time outside of that.*

*"And now that my finances have changed dramatically, I don't have the money that I used to and that eats away at your head all the time, that feeling of how you're going to pay. So, yeah, it's been tough. And it is the poverty of not being able to go places and do things with your own friends that you could do either. You just don't have the time to do things for yourself and you don't have the money now."*

## Putting it all together: poverty risk for various types of carer

The factors we have explored so far can interplay and, in some cases, reinforce one another. This can result in carers becoming increasingly vulnerable to the risk of poverty. Below, we outline three sets of model predictions of poverty risk in carers given various sets of characteristics, which shows the importance of wider context in thinking about drivers of carer poverty:

	Household type	Age	Sex	Sandwich carer	Hours of care	Number of people cared for	Employment status	Benefits	Tenure type	Poverty risk
Carer A	Lone parent 	25-34	Female	Yes	>20 hours	2	Full-time work	Other benefits	Social renter	39%
Carer B	Couple with children 	45-54	Female	No	<20 hours	1	Full-time work	No benefits	Mortgage	6%
Carer C	Single 	45-54	Male	No	>20 hours	1	Not in work	Other benefits	Social renter	81%

- Even though both carer A and carer C are social renters, predicted risk of poverty of carer C is twice as high. That is because of the wider circumstances, including the fact carer C is out of work, while carer A works full-time.
- In spite of both Carer A and Carer B being in full-time work, Carer A is at a six times higher risk of poverty because they are a single adult and a sandwich carer.

# Policy recommendations

Having explored the extent of carer poverty and the circumstances which are driving it, we set out to create and test various policy recommendations that might help tackle poverty among carers. In this section, we describe a set of financial benefits and their modelled impacts; as well as providing some wider recommendations on how employers and wider stakeholders can work to help reduce levels of poverty among carers.

## Summary

In this section, we present the results of a policy simulation exercise. Using the Family Resources Survey / Households Below Average Income dataset, we analysed the effects of three different policy proposals to support those in receipt of Carer's Allowance: a Carer's Allowance Supplement, a Carers Essentials Payment, and uplifting Carer's Allowance in line with the estimated threshold to meet essential daily living costs.

We found that:

- Even as little as an additional £10/ week could reduce poverty amongst carers who receive Carer's Allowance by 3.8%.
- An Essentials Payment of £25/ week would reduce the poverty rate in carers who receive Carer's Allowance by 6.6%.
- Giving those who receive Carer's Allowance an additional £43.25 / week to bring the value of Carer's Allowance up to JRF's Essentials Guarantee (£120 / week)<sup>31</sup> would reduce the poverty rate in carers who receive Carer's Allowance by 8% and slash the deep poverty rate by more than half, from 15.8% to 6.5%.

For more information on how the tool was built, see Appendix A.

## Policies we tested

We tested different levels of financial support using our policy tool to understand the expected impact of each of them on carer poverty and deep poverty. We assume that each of these policies do not impact on a carers wider benefit entitlement (See Appendix A for more detail).

For each policy, we estimate how many carers will no longer be in poverty as well as deep poverty. Seeing potential movements in and out of poverty is the main goal of this policy testing. However, we want to acknowledge that, just because someone remains in poverty, it doesn't mean their situation does not improve substantially upon receipt of additional benefits. In order to understand the movements within group of carers who are still in poverty, we highlight movements in and out of deep poverty.

Deep poverty is defined as someone being more than 50% below the poverty line. That means they get less than 50% of the resources they'd need to be considered on the poverty threshold.

### *Carer's Allowance Supplement*

We explored the impact of a payment of £270.50 every six months, translating to £10.38/week, which mirrors the current Scottish Government's scheme.

#### Why did we choose to model this policy?

- **Existing implementation in Scotland:** The policy has already been introduced by the Scottish Government, with an evaluation of the scheme in Scotland showing it helps carers to pay for essential household expenses that they would otherwise have struggled to afford; relieves money worries; enables carers to pay off debts and improves their mental health and wellbeing.<sup>32</sup> In light of the success of the Scottish Government scheme, the policy has previously been recommended by the Independent Review of Welfare Mitigations for introduction in Northern Ireland.<sup>33</sup>

- **Support of unpaid carers and wider stakeholders:** There was strong support for replicating a policy similar to the Scottish Government's scheme among the unpaid carers we spoke to in Northern Ireland – with some labelling it a “perfect starting point” for improved social security support. Our stakeholder engagement similarly revealed the policy has widespread support from charities and other key stakeholders in Northern Ireland, as an important first step in reforming welfare provision for unpaid carers. Stakeholders placed particular emphasis on the importance of ensuring young carers – who are currently excluded from receiving Carer's Allowance – are included in the provision of any supplement.

### Impact

The number of carers in poverty would be reduced by **3,400** right away, and the number would rise to **4,400 by 2033** due to a projected increase in the population of carers (assuming the benefit is scaled up with inflation). This would correspond with a **3.7% point fall in poverty rate amongst carers who receive Carer's Allowance – a decrease from 46% to 42.3%**.

The number of people in deep poverty would decrease by **2,500** people straight away – with the number rising to **3,200 by 2033**. That's a fall in the deep poverty rate for carers who receive Carer's Allowance of **2.8% points, from 15.8% to 13%**.

### *Carer Essentials Payment*

We modelled the impact of a payment of £25/week to help carers meet the extra, inescapable costs associated with caring for someone with an illness or disability – including higher energy, food and travel costs. Many carers have always faced above-average bills for these essentials, and that has only been compounded by the cost of living crisis.

### Why did we choose to model this policy?

- **The additional financial demands of caring and disproportionate impact of the cost of living crisis:** The cost of living crisis has only compounded the above-average household bills that many unpaid carers have historically faced (as set out earlier in the report). Food inflation in the UK, while currently easing, still stands at 9.9% (September 2023). Rent prices in Northern Ireland in particular rose 10% between March 2022 and March 2023, compounding already significant pressures placed on unpaid carers; and energy prices still stand significantly high when compared to just a few years ago. This policy is designed as a way to help carers meet the high and rising costs of their household bills.

### Impact

If the Carer Essentials Payment was provided only to those receiving Carer's Allowance, the number of carers in poverty would be reduced by **6,000** right away, and the number would rise to **7,600 by 2033** due to a projected increase in the population of carers (assuming the benefit is scaled up with inflation). This would correspond with a **6.5% point fall in poverty rate amongst carers who receive Carer's Allowance – a decrease from 46% to 39.5%**.

The number of carers in deep poverty would also decrease by **5,100** – with the number rising to **6,500 by 2033**. That's a fall in the deep poverty line for carers who receive Carer's Allowance of **5.6% points, from 15.8% to 10.2%**.

If the Carer Essentials Payment was provided to all unpaid carers in Northern Ireland, the number living in poverty would reduce by 23,000 immediately, and by 29,300 in 2033. **The poverty rate among carers would fall by 5.4% points, from 28.3% to 22.9%**.

## Carer's Allowance uplift

We also looked at the impact of a £43.25 uplift in Carer's Allowance to bring payments to the level of £120 per week, the amount calculated by the Joseph Rowntree Foundation as the minimum amount Universal Credit should be paid at to cover the cost of essential goods and services for an individual.<sup>34</sup>

### Why did we choose to model this policy?

- **Carer's Allowance is wholly inadequate and doesn't allow many carers to afford the bare essentials:** The existing level of Carer's Allowance is not enough to prevent many carers living in poverty – with a much higher poverty rate among those receiving Carer's Allowance (46%) than carers overall (28%). Those receiving the benefit because of the unpaid care they provide should receive adequate financial support to cover the essential costs of daily living.

### Impact

The number of carers in poverty would be reduced by **7,300** right away, and the number would rise to **9,300 by 2033** due to a projected increase in the population of carers (assuming the benefit is scaled up with inflation). This would correspond with **an 8% point fall in poverty rate amongst carers who receive Carer's Allowance – a decrease from 46% to 38%**.

The number of people in deep poverty would decrease by **8,500** people straight away – with the number rising to 10,800 by 2033. That's a fall in the deep poverty rate for carers who receive Carer's Allowance of **9.3% points, from 15.8% to 6.5%**.

## Policy tool – lessons

Our policy modelling highlights a number of important lessons on alleviating carer poverty in Northern Ireland.

- **The more we give, the greater the effect.** The additional benefits of increasing the financial support provided to unpaid carers does not diminish the reduction in the poverty rates.
- **Giving those who receive Carer's Allowance an additional £43.25 / week would slash their deep poverty rate by more than half.**
- **The benefits of the policies aren't visible only 'at the margins' – just because someone remains in poverty after receiving an additional benefit, it doesn't mean the money didn't help them.** We can see this by looking at shifts in the deep poverty rate.
- **The effects of the policy will become more and more salient with time, as a larger proportion of population becomes an unpaid carer.** On the flipside, as the carer population increases into the future, the policies will also become more expensive. This necessitates the need for a shift in the way we think about unpaid carers, and search for wider structural solutions that can alleviate carer poverty in the long-term.

## Other policy recommendations

Beyond the policies outlined above, there is much wider work to do to support carers out of poverty – including deeper reform of Carer's Allowance; help for those carers who don't receive social security; and through the likes of greater workplace rights, access to social care support and more. The Carer Poverty Commission is therefore also calling for:

- **Review of the value and eligibility criteria of Carer's Allowance.** This should include:
  - An increase in the Carer's Allowance earning threshold and the introduction of a taper, similar to Universal Credit, to better support carers in work.
  - Introduction of a working carers element to Carer's Allowance that provides a top-up for carers working reduced or part-time hours.

- Reforming overlapping benefit rules to allow more older people to receive Carer's Allowance alongside their State Pension, as well as allowing those in full-time education to access Carer's Allowance.
- Allowing multiple Carer's Allowance payments to recognise the higher costs of caring for more than one person.
- **The introduction of a Young Carer's Grant.** To provide much deserved recognition and compensation for young carers who are ineligible for Carer's Allowance.
- **Greater engagement from employers with carers and carer organisations to introduce carer-friendly policies and more supportive workplace cultures for carers.**
- **Employers signing up and co-designing work placements and training schemes to support carers to enter the labour market.**
- **Legislation to enshrine unpaid caring as a protected characteristic under equality law.**
- **The introduction of flexible working as a day-one right for working carers.**
- **The introduction of statutory paid carer's leave that is separate to holiday entitlement.**
- **Greater access to joined-up health, social care and community services.** This would give carers the time and space to do things outside of caring, including going to work, and help them access support for their own health and wellbeing.
- **Improved support for carers to access further and higher education.** Providers should work with carer organisations to provide tailored and bespoke schemes that are accessible for carers.

# Conclusion

The rate of poverty in carers in Northern Ireland currently stands at 28.3% - higher than the poverty rate for carers in the UK (23.6%), and higher than the poverty rate for non-carers in Northern Ireland (17.4%). Through qualitative and quantitative research, this report attempts to uncover the drivers of the high poverty rates amongst carers. We identified the main drivers to be:

- Difficulty keeping and finding work as a carer.
- Tenure type, with carers who rent more at risk of poverty than carers who own their homes.
- Inadequacy of social security to cover cost of living and caring.
- Type of caring characteristics, such as the number of hours spent caring, the number of people cared for, and whether or not the carer is a sandwich carer.

We tested the effects of three benefits of varying amounts on the poverty rate of those in receipt of Carer's Allowance in Northern Ireland. We found that:

- Carer's Allowance Supplement of £10.38/week could decrease the poverty rate in carers who receive Carer's Allowance by 3.8% points (from 46% to 42.3%).
- Carer Essential Payment of £25/week could decrease the poverty rate in carers who receive Carer's Allowance by 6.6% points (from 46% to 39.5%).
- Carer's Allowance uplift of £43.25/week could decrease the poverty rate in carers who receive Carer's Allowance by 8% points (from 46% to 38%).

We also recommend some wider measures that can be implemented through a mixture of government intervention, support of employers and wider stakeholders to help banish structural issues that keep carers in poverty.

Overall, a package of action from Government, employers and other stakeholders could make a meaningful difference to both poverty levels among carers in NI and their experience of caring.

# Appendix A: Methodology

## Quantitative methodology

### *Datasets used in our analysis*

Our quantitative analysis is based on all available years of the Family Resources Survey/Households Below Average Income (FRS/HBAI) dataset up to and including the FYE 2022. In line with the current DWP methodology, we have excluded the year 2020/2021 from our analysis due to data quality issues. The headline estimates produced show a three-year pooled average for 2018/19, 2019/20 and 2021/22.

### *Our definition of poverty*

In this report, 'poverty' is measured using the approach developed by Social Metrics Commission (SMC), which is different from the Households Below Average Income measurement of poverty. While both measures use incomes in order to define whether someone is in poverty, only the SMC poverty measure accounts for costs faced by the benefit unit.<sup>35</sup>

In order to understand how well off a benefit unit is, we calculate their total resources available. Total resources available include all income, liquid assets and benefits minus inescapable costs such as housing, childcare, costs of disability and costs of caring.

$$\text{Total Resources Available} = \text{income} + \text{assets} - \text{costs}$$

$$\text{Poverty line} = 54\% \text{ of 3-year smoothed median Total Resources Available}$$

### *Additional costs of caring*

We define the additional costs of caring as the inescapable additional costs associated with care. These costs may include food that meets special dietary requirements, electricity and heating, transportation costs (including to medical appointments), and costs of any additional toiletries and clothing that may be required by the person in need of care.

Crucially, these additional costs are inescapable and necessary – paying them is not a choice, but the bare minimum to protect health and well-being of the carer and the person they care for.

In order to account for the additional costs of caring, we added a proportional multiplier to the benefit unit's Total Resources Available based on hours spent caring. We used the following weighting:

Hours spent caring	Weight
1-9	7.5%
10-34	15%
35-50	22.5%
50+	30%

The weights were applied to each individual and then summed for each benefit unit. We limited the maximum weighting to 1.25x the maximum personal weighting of a benefit unit member. We then applied the weighting to the median Total Resources Available of each benefit unit's income quintile, in order to reduce the impact of outliers. The resulting sum was subtracted from the Total Resources Available of the household. We treated any resulting negative values as 0.

### *The drivers of poverty*

In order to uncover drivers of poverty, we estimate a bivariate logistic regression that predicts a person's likelihood of poverty based on a range of factors. These factors include socioeconomic characteristics, such as employment status, tenure and family composition, as well as carer characteristics such as the number of hours spent caring and whether or not someone identified themselves to be a sandwich carer. For a full list of predictors we used, see Appendix B.

Due to small sample sizes, we estimated this model for all of the UK, and then run a model with interaction to see if Northern Ireland was significantly different from the rest of the UK. We found no significant differences between drivers of poverty in Northern Ireland and the rest of the UK we could identify.

### ***Our policy tool***

We designed a policy simulation tool to test the effect of implementing different income policies on carer poverty rates in Northern Ireland. Our carer policy tool is based on FRS/HBAI data between 2011/12 and 2021/22 to inform our projections of carers numbers, with base estimates of poverty in derived from the 2018/19, 2019/20 and 2021/22 pooled data.

Projections of carers numbers are estimated using a simple line of best fit extrapolated up to and including the year 2023. We assume a constant rate of growth of the carer population. The resulting numbers are in line with projections found elsewhere in the literature which take into account the changes in carer numbers due to aging population.

The policy tool assumes that each policy has 100% take-up amongst carers who already receive Carer's Allowance, and that the additional money given does not have any effect on other benefits such as Universal Credit. This is modelled based on the Scottish Carer's Allowance Supplement schemes, whereby the additional money does not have any effect on other benefits.

### ***Why we decided to build the model***

The poverty tool was designed to understand and test how different levels of financial support would impact on carer poverty in Northern Ireland.

### ***How the model was built***

The model is based on all years of available data from the Family Resources Survey (years 2011/12 – 2021/22, but excluding year 2020/21 from pooling due to data quality issues brought about by the COVID-19 pandemic. The 2021/22 estimates are based on a pooled three-year average of years 2018/19, 2019/20 and 2021/22.

### ***What the model can and can't tell us***

The policy tool allows us to test how different levels of financial support will impact poverty numbers in carers in Northern Ireland. We are able to examine the number of families who will no longer be in poverty, as well as the number of families who will no longer be in deep poverty, defined as being more than 50% below the poverty line.

This model is based on Northern Ireland data. Because of this, small sample sizes do not allow us to estimate how different policies might impact different demographic groups. We cannot say with confidence which groups are the most vulnerable. Because of data limitations, we were not able to test the effects of giving benefits to more targeted groups, such as young carers. However, we outline potential policies targeted at young carers in the 'other policy recommendations' section.

In order to make sure the results are robust in spite of small sample sizes, we run our analysis on UK-wide data to see how different the effects were between Northern Ireland and the UK. We decided to show NI-specific impacts in the report, having confirmed that the effects were similar in orders of magnitude to UK-wide impacts.

## **Qualitative methodology**

To support our quantitative analysis, we conducted qualitative research with unpaid carers and key sectoral stakeholders.

The experience and perspective of unpaid carers were gathered through three focus groups and a small number of semi-structured interviews conducted in May and June 2023. In total, twenty unpaid carers from Northern Ireland took part in our qualitative research. Focus group discussion focused upon:

- understanding the key drivers and risk factors of carer poverty that emerged within existing literature and our quantitative analysis from the perspective of lived experience;
- how poverty has impacted upon carers' quality of life and experiences across a range of key outcome areas assessed by the SMC measure of poverty;
- the levels of support amongst unpaid carers for different policy solutions designed to tackle carer poverty.

A full exploration of the findings from these focus groups has been published separately by the Carer Poverty Commission.<sup>36</sup>

The unpaid carers we engaged with provided good coverage of a number of key demographic diversities among unpaid carers, including the conditions of the individual(s) being cared for, the relationship to the person being cared for, the number of people being cared for in the household, the length of time an individual had been providing care, the employment status of the carer, the age of the carer and whether or not the carer received Carer's Allowance. However, as with all qualitative research, there are limitations to the coverage within the sample. Among the participants, female carers were over-represented, as were those who were providing a high number of caring hours. It was also difficult to recruit carers who lived in rural parts of Northern Ireland. Practical, ethical and safeguarding challenges also meant we were unable to speak to child or young adult carers for this report. However, additional qualitative research has been conducted by Action for Children for the Carer Poverty Commission to explore experiences of poverty amongst young carers and published as a separate report.<sup>37</sup>

In addition to focus groups and interviews with unpaid carers, we also conducted a series of roundtables and interviews with key stakeholders, including charities and advice organisations, academics, civil servants and public bodies. These roundtables were focused upon understanding the key challenges stakeholders saw facing unpaid carers, and the policy solutions that could help to tackle unpaid carer poverty.

Transcriptions from all qualitative research were organised and analysed through a computer-assisted qualitative data analysis software package. This allowed us to systematically code the transcripts to identify common themes, topics and ideas – both those identified in our desk-based research and quantitative analysis as well as organically from the qualitative research itself. This process of coding and carrying out thematic analysis allowed us to identify key patterns within the qualitative data and to compare and contrast the relative importance both carers and sectoral stakeholders placed on different drivers, risk factors, outcomes and policy proposals.

# Appendix B: Data tables

## Main logit model of poverty likelihood

	Marginal Effect	Standard Error	- 95%	+ 95%	p
<b>Carer characteristics</b>					
Number of people cared for					
1 (ref.)					
2	-7.47	3.60	-14.53	-0.42	.038*
3	-18.41	7.06	32.26	4.56	.009**
4	-12.22	21.14	-53.66	29.22	.563
Hours of care given					
20+ (ref.)					
1-19	-6.69	1.98	-10.58	-2.797	.001***
Where care is given					
In household (ref.)					
Out of household	-13.42	1.99	-17.33	-9.51	.000***
In and out of household	2.44	5.51	-8.36	13.24	.658
Whether a sandwich carer					
No (ref.)					
Yes	25.58	2.89	19.92	31.25	.000**
In receipt of Carers Allowance					
No (ref.)					
Yes	-13.85	2.49	-18.73	-8.96	.000**
<b>Demographic characteristics</b>					
Sex					
Female (ref.)					
Male	2.40	1.76	-1.05	5.87	.173
Age					
45-54 (ref.)					
16-24	-9.94	4.41	-18.59	-1.29	.024*
25-34	-3.24	2.94	-9.00	2.51	.270
35-44	4.55	2.63	-0.60	9.71	.084
55-64	1.73	2.54	-3.26	6.72	.497
65 and over	-0.51	5.32	-10.95	9.92	.923
Family composition					
Couple, with children (ref.)					
Single, no children	19.94	3.29	13.48	26.40	.000***
Lone parent	-11.33	2.96	-17.14	-5.52	.000***
Couple, with children	13.64	3.40	6.97	20.31	.002**
Pensioner, single	-0.13	6.57	-13.00	12.74	.984
Pensioner, couple	-7.49	4.97	-17.24	2.26	.132
Housing tenure					
Private rented (ref.)					
Owned outright	-32.46	2.97	-38.27	-26.64	.000**
Mortgaged owned	-23.97	2.67	-29.21	-18.73	.000**
Social rented	-1.42	2.39	-6.11	3.27	.553
Self-rated health					
Good (ref.)					
Less than good	4.68	2.02	0.73	8.63	.020**
Did not say	6.41	2.34	1.83	11.00	.006**
Whether disabled					
Not disabled (ref.)					
Has a disability	-0.39	1.89	-4.09	3.30	.836
Work status					
Part-time work (ref.)					
Full-time work	-15.33	2.53	-20.29	-10.38	.000***
Unemployed	27.78	4.59	18.79	36.78	.000***
Retired	2.81	5.07	-7.13	12.76	.579
Not working for any other reason	17.65	3.93	9.93	25.36	.000***
Sector for main job					
Private (ref.)					
Public	-6.92	2.73	-12.27	-1.58	.011*
Not working or did not say	7.50	3.80	0.05	14.94	.048*
In receipt of income-related benefits (exc. CA)					
Yes (ref.)					
No	-17.37	2.28	-21.84	-12.90	.000***
Year					
2021/22 (ref.)					
2018/19	-3.76	1.93	-7.54	0.03	.052
2019/20	-4.80	1.96	-8.64	-0.96	.014*
Constant	46.53	4.55	37.61	55.45	.000***
<b>Model Summary</b>					
Observations: 9,795					
AUC: 0.845					
Pseudo R <sup>2</sup> : 0.277					

1. Significant at the \*5% level; \*\*1% level; \*\*\*0.1% level.

2. Estimates are derived from logistic regression on SMC poverty using a three year cross-section of the Family Resources Survey (2018/19, 2019/20 & 2021/21); the sample is limited to individuals who describe themselves as 'informal carers' and who also provide at least one hour of care per week.

## Interactions

	Marginal Effect	Standard Error	- 95%	+ 95%	p
<b>Country X Carer characteristics</b>					
Country X Number of people cared for					
Rest of UK					
NI X 1	0.55	1.32	2.03	3.15	.670
NI X 2	2.61	4.90	-6.99	12.22	.594
NI X 3	11.52	11.52	-11.07	34.12	.318
NI X 4 (Omitted)	-	-	-	-	-
Country X Hours of care given					
Rest of UK (ref.)					
NI X 1-19	3.86	1.91	0.11	7.61	.043*
NI X 20+	-1.87	1.91	-5.62	-1.87	.328
Country X Where care is given					
Rest of UK (ref.)					
NI X In household	3.86	2.14	-0.33	8.06	.072
NI X Out of household	0.27	2.06	-3.77	4.32	.893
NI X In and out of household	-20.71	6.45	-33.36	-8.05	.001***
Country X Whether a sandwich carer					
Rest of UK (ref.)					
NI X No	0.01	1.48	-2.93	2.90	.992
NI X Yes	4.55	4.67	-4.61	13.72	.330
Country X In receipt of Carers Allowance					
Rest of UK (ref.)					
NI X No	1.95	1.44	-0.87	4.79	.176
NI X Yes	-2.42	2.04	-6.42	1.57	.234
<b>Country X Demographi characteristics</b>					
Country X Age					
Rest of UK (ref.)					
NI X 16-24	0.69	5.34	-11.17	9.78	.896
NI X 25-34	1.55	4.03	-6.35	9.46	.701
NI X 35-44	1.91	4.21	-6.34	10.18	.649
NI X 45-54	1.81	3.26	-4.59	8.21	.580
NI X 55-64	5.60	3.20	-0.67	11.88	.080
NI X 65 and over	6.38	5.48	-17.12	4.36	.224
Country X Family composition					
Rest of UK (ref.)					
NI X Single, no children	0.27	3.82	-7.76	7.21	.943
NI X Lone parent	-3.56	3.09	-9.62	2.49	.249
NI X Couple, no children	3.24	3.55	-3.71	10.21	.361
NI X Couple, with children	2.04	3.62	-5.06	9.16	.573
NI X Pensioner, single	10.26	6.93	-23.84	3.32	.984
NI X Pensioner, couple	2.44	4.89	-7.14	12.03	.617
Country X Housing tenure					
Rest of UK (ref.)					
NI X Owned outright	-0.04	1.73	-3.81	2.99	.814
NI X Mortgaged owned	6.03	3.10	-0.04	12.12	.052
NI X Private rented	-3.27	4.27	-11.64	5.10	.444
NI X Social rented	1.40	3.94	-6.33	9.14	.722
Country X Self-rated health					
Rest of UK (ref.)					
NI X Good	0.08	1.21	-1.56	3.18	.502
NI X Less than good	0.09	1.28	-1.61	3.42	.481
NI X Did not say	0.09	1.33	-1.64	3.58	.466
Country X Work status					
Rest of UK (ref.)					
NI X Full-time work	0.00	2.94	-5.77	5.77	.999
NI X Part-time work	-1.02	4.12	-9.11	7.05	.804
NI X Unemployed	-5.64	11.07	-27.34	16.06	.611
NI X Retired	7.58	6.28	-4.72	19.86	.227
NI X Not working for any other reason	1.96	5.23	8.29	12.23	.707
Country X Sector for main job					
Rest of UK (ref.)					
NI X Private	0.05	3.47	-6.26	7.36	.874
NI X Public	0.04	3.79	-7.00	7.86	.909
NI X Not working or did not say	1.65	3.26	-5.45	8.76	0.648
Country X In receipt of income-related benefits (exc. CA)					
Rest of UK (ref.)					
NI X Yes	3.53	3.39	-3.13	10.19	.299
NI X No	0.02	1.93	-3.57	4.02	.906

1. Significant at the \*5% level; \*\*1% level; \*\*\*0.1% level.

2. Interaction effects represent the difference between NI and the rest of UK across the observed values of all other countries. Additional covartates are included (see table of main effects above) and modelled with a constant slope across NI and the rest of the UK.

# Endnotes

- 1 Joseph Rowntree Foundation, March 2022, Poverty in Northern Ireland 2022.
- 2 Carers NI, March 2022, A manifesto to support unpaid carers in Northern Ireland (2022-2027)
- 3 Carers NI, October 2022, Unpaid carers and the cost of living crisis in Northern Ireland
- 4 Marie Curie, May 2022, Dying in poverty: Exploring poverty at the end of life in the UK / Implications for Northern Ireland report
- 5 Coalition of Carers Organisations NI, May 2023, A New Deal for unpaid carers in Northern Ireland
- 6 Family Fund, October 2022, The Cost of Caring: A report exploring the challenges facing families raising disabled children
- 7 Carers NI, October 2022, Unpaid carers and the mental health impact of Northern Ireland's cost of living crisis
- 8 Carers NI, October 2022, Unpaid carers and the cost of living crisis in Northern Ireland
- 9 Carers Week, May 2022, Make caring visible, valued and supported: Carers Week 2022 report
- 10 Joseph Rowntree Foundation, July 2023, The caring penalty
- 11 Carers NI, August 2022, Unpaid carers, poverty and the cost of living crisis in Northern Ireland
- 12 Carer Poverty Commission NI, September 2023, Young carers' experiences of poverty in Northern Ireland
- 13 Joseph Rowntree Foundation, June 2023, Unpaid care and poverty: unpaid carers' priorities for change through participatory co-design
- 14 Marie Curie, May 2022, Dying in poverty: Exploring poverty at the end of life in the UK / Implications for Northern Ireland report
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- 19 New Policy Institute, May 2016, Informal carers & poverty in the UK: An analysis of the Family Resources Survey
- 20 Carers NI, August 2022, Unpaid carers, poverty and the cost of living crisis in Northern Ireland
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- 23 Carers Trust, November 2022, I feel like I've disappeared: An urgent call to action from the UK's unpaid carers
- 24 Carer Poverty Commission NI, August 2023, The experiences of poverty among unpaid carers in Northern Ireland
- 25 Social Metrics Commission, December 2021, Measuring poverty before the Covid-19 Pandemic.
- 26 Carers UK, January 2019, Juggle work and unpaid care: A growing issue.

- 27 Northern Ireland Housing Executive, March 2023, Performance of the private rental market in Northern Ireland H2 2022.
- 28 ONS, September 2023, Index of Private Housing Rental Prices, UK: August 2023.
- 29 Joseph Rowntree Foundation, March 2022, Poverty in Northern Ireland 2022.
- 30 Poverty Strategy Commission, September 2023, A New Framework for Tackling Poverty: The interim report of the Poverty Strategy Commission.
- 31 The JRF Essentials Guarantee is the minimum amount needed to afford basic living essentials, and has been proposed as the minimum level of support that should be provided by the social security system.
- 32 Scottish Government, December 2020, Carer's Allowance Supplement: Evaluation
- 33 Department for Communities, October 2022, Welfare mitigations review: Independent Advisory Panel report.
- 34 Joseph Rowntree Foundation & Trussell Trust, February 2023, An Essentials Guarantee
- 35 For more on the Social Metric Commission's measure of poverty see: <https://socialmetricscommission.org.uk>
- 36 Carer Poverty Commission NI, August 2023, The experiences of poverty among unpaid carers in Northern Ireland
- 37 Carer Poverty Commission NI, September 2023, Young carers' experiences of poverty in Northern Ireland



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**October 2023**