findings

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Informal care and work after fifty

Many people in their fifties and sixties combine work with caring responsibilities for grandchildren, older relatives or their own children. Researchers at Thomas Coram Research Unit looked at how decisions about employment are influenced by the desire or need to provide informal care. The study, based on a survey, case studies and analysis of existing data, found that:

People in their fifties represent a 'pivot' generation with both care and work roles:

- two in three people between 50 and retirement age are in paid work;
- by age 50, one in three people have grandchildren;
- three in five 50-year-olds still have living parents;
- nearly half those surveyed (who were working for, or recently retired from, two councils) had some caring responsibility.

Despite increasing demand for elder care and childcare, changes in the population and in work patterns (for example if early retirement becomes harder) mean that fewer people will be available to provide informal care.

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Nearly as many men as women surveyed undertook informal care, but women's caregiving was more intensive.

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Few employees wanted to give up work in order to take on caring responsibilities. However, decisions about working were based on a combination of factors, including financial considerations, health, job satisfaction and stress, as well as caring responsibilities.

Those who combined work and care often did so at personal cost such as tiredness, ill-health and lack of leisure. Most employees did all they could to avoid informal care having a negative impact on their paid work. However, opportunities for career advancement could be affected.

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Although some grandparents were prepared to give up work or reduce their hours to provide childcare for their grandchildren, there was a general reluctance to offer full-time care.

The researchers conclude that without more resources to support carers, their contribution may not be sustainable. Flexible working hours, the opportunity to reduce hours or take a career break without financial penalties, and good-quality, affordable support for carers and care recipients would help employees to combine care and work.



Background

Of the estimated six million carers in the UK (excluding parents caring for non-disabled children), it is thought that around half are aged between 50 and 64. Surveys consistently show that relatives, in particular grandparents, are the most common providers of childcare while parents work.

However, growth in the number of older people has led to an increased demand for care at the same time as a possible reduction in the supply of potential caregivers. With fewer younger people in the population, employers are endeavouring to retain older employees and to attract and retain older female workers. The result is that women in their forties and fifties are being targeted by employers to enter and/or remain in the labour market, while at the same time more care demands are being made on this group of people. Women are more likely than men to provide substantial amounts of care and to do so at a younger age.

In addition to analysing existing data, the study used a survey and interviews with people in their fifties and sixties to find out how the need to provide informal care affected their decisions about paid work.

Who will care?

Findings from analysis of the Labour Force Survey have a number of implications for the provision of informal care by people in their fifties and sixties. More men in this age group are no longer in employment, and hence are potentially available as caregivers. On the other hand, those men who remain in employment are working increasingly long hours, which would make them less able to combine work and care. Many women have traditionally worked part-time, which has arguably made it easier for them to combine work with caring responsibilities. But growing numbers of women are also now working long hours, especially in their early fifties. Rising numbers of working women mean that more people in their fifties and sixties are living in households where both partners work. Thus the provision of informal care is likely to involve more juggling of schedules and time commitments than when one partner is at home full-time.

"I just couldn't cope with everything. And obviously I didn't think it was fair that I wasn't giving as much [to the job] as I should have been." (female worker, left job)

Extent of caring responsibilities

In the survey of council employees and recent retirees, almost half had some caring responsibilities; of the non-carers, over a half anticipated providing informal care within the next five years. More than one in three was caring for an elderly or disabled relative or friend, or had done so in the past 12 months. One in six was providing childcare for a grandchild, and one in ten was doing both. Nearly as many men as women reported providing care, but women's caregiving was more intensive. Over a third of those providing care were doing so for fewer than five hours a week, although a quarter of the female caregivers and one in eight of the male caregivers were providing 20 or more hours of informal care a week.

Informal care was undertaken by both men and women, in full and part-time jobs, and at all levels of the organisation. The main difference was that women's caregiving tended to be more extensive, and that working full-time or being in a household where both partners worked appeared to limit the hours of care that could be provided.

The effect of caring on family life and work

The majority of carers felt that informal care had an impact on their lives, both positive and negative. The two most common responses were that caring made their life more stressful, and that it gave them a lot of satisfaction and pleasure. Almost half reported that caring made their life more stressful, and around a third reported that they had less time for their family and for themselves. The impact was more likely to be felt and absorbed in carers' personal lives rather than having an effect on their work life. The health of carers could also suffer as a consequence of absorbing the impact themselves rather than allowing informal care to interfere with their ability to do their paid job properly.

What emerged was a picture of conscientious employees who were unwilling to let their caring responsibilities affect their ability to do their paid work well. But providing informal care could affect employment, for example by restricting career development:

"I love what I do and am excited by new ideas, but I feel unable to put myself forward for further training because I cannot give the best of myself." (Female worker with caring responsibilities)

Decisions about work and care

The case studies identified a number of factors that affected people's decisions about making changes in their work lives. Income and pensions were important considerations:

"Early retirement would be nice, but I don't think we can afford that luxury." (Male worker with caring responsibilities)

Insufficient pension contributions encouraged employees to stay in work and not reduce their hours. This was particularly so for women, who among this generation were more likely to have had career breaks because of childrearing. Many were keen to continue working so that they could maximise their pension contributions.

Many respondents had taken early retirement and others expected to do so, some in order to meet anticipated caring responsibilities. However, the trend towards early retirement is now facing a considerable challenge. Financial incentives that have encouraged people to leave the labour market early are being eroded, and changes are being made to pension schemes. The Government now needs older people to continue working, and has proposed changes to the age at which pensions can be drawn. Thus, as the need for informal care rises, early retirement is becoming unavailable as an option.

Enjoyment of, and commitment to, work were also significant to the participants in the study. The identity achieved through paid work seemed particularly important to women of this generation, who had often returned to the labour market after a break. Balanced against this enjoyment was the growing intensification of paid work. Participants described the extent to which the demands and stress of work had increased in recent years, and the impact this was having on their health and their decisions about continuing in employment:

"Everyone's doing one and a half or two jobs. And so you know there's a constant feeling that you're not doing your job as well as you could anyway ... you feel guilty about taking time off." (Male worker with caring responsibilities)

This extension and intensification of work sometimes resulted in a wish to move to a less stressful or parttime job, both to make it easier for carers to combine work and caring and to protect their health. The overall message from the interviews was a desire to achieve a balance between work and caring responsibilities. Although there were some examples of people giving up work to take on a caring role, few wanted to give up work entirely. Those who had reduced their hours, or were intending to do so in the future, generally did not want to stop work to become full-time carers. For example, eight of the 19 grandparents were providing or had provided childcare for grandchildren while their parents worked or studied, but only three had stopped working to do so. The general feeling among the majority of grandparents was that they would not want to stop work or reduce their hours to provide childcare, even with a financial incentive.

"I enjoy the job ... I'm not sure I'd be willing to give all that up to help look after the children." (Working grandmother)

What would help?

Flexible working hours came top of the list of benefits which employees thought would help those who were combining work and care. There was strong support for the opportunity to reduce working hours, but the working conditions for part-time employment, particularly pay and pensions, were often less attractive than for full-time work. Many workers were unaware of their employer's policies in this area. Implementation of flexible working practices depended on awareness and attitudes of line managers, who could sometimes block access to support. Flexible working practices often had to be negotiated, rather than being treated as a right.

"If I hadn't gone to my line manager when I needed support then I may have just accepted that I couldn't have that." (Female worker with caring responsibilities)

Formal support services for older people and their carers needed to be easily available and of good quality if they were to assist employees with caring responsibilities.

Conclusion

Most people, both men and women, have a strong sense of wanting and needing to provide care for those they are close to: "You do it because you love them, don't you? Because you want to help, you know". However, combining informal care with paid work incurs costs for carers. Those in work bear the financial consequences if they retire early without a full occupational pension, take a career break, forego career advancement or reduce their hours of work in order to provide care. The financial consequences in terms of impact on pensions can be long-term, especially for women who have often been less able to build up their pension entitlement over the years.

Yet the cost of caring is not primarily financial. In the study, for employees in their fifties and sixties, the main effect of providing informal care was not to draw them away from paid work, nor to affect their performance at work. Instead, caring affected their personal lives, health and relationships.

However, the impact of caring on work performance is likely to grow, as many jobs demand increasingly long hours despite attempts to limit this through legislation. Without more resources to support carers, both in and out of work, their contribution may not be sustainable.

Employers need to think about how their policies are disseminated to workers and managers, and to ensure that policies are accepted and implemented at all levels of the organisation. But informal care can be diverse, with people moving in and out of different caregiving situations. This suggests that a 'one size fits all' approach is unlikely to work. Those who are combining informal care and paid work need a range of options to suit different circumstances – for example, phased retirement or career breaks without incurring pension penalties, extended lunch breaks, homeworking and opportunities to work in the evenings.

More broadly, the study concluded that there is a need for a change of culture, and for a fundamental rethinking of the nature of work and care – not only within the workplace, but also in society more generally. There is a need for a culture which values caring and confers legitimacy on caring responsibilities. One of the workers interviewed for the study summed this up when she said:

"The whole ethos of the workplace and the workforce has to change, and it has to come from the top."

About the project

Ann Mooney, June Statham, Antonia Simon, Peter Moss and Charlie Owen undertook the research, with support in the rural area from Liz and Paul Ward. The research was carried out between October 2000 and March 2002. There were three stages to the study. First, secondary analysis of the Labour Force Survey between 1979 and 1999 looked at changes over time in employment patterns at household level. Second, a postal survey was completed by over a thousand employees aged 50 or over (of whom 5 per cent were over 65) and recent retirees, from one urban and one rural English local authority (representing a response rate of 38 per cent). Third, in-depth interviews were carried out with 22 carers and ten non-carers, to explore how informal care and other factors affected their decisions about paid work

How to get further information

The full report, **The pivot generation: Informal care and work after 50** by Ann Mooney and June Statham with Antonia Simon, is published for the Foundation by The Policy Press as part of the Transitions after 50 series (ISBN 1 86134 402 3, price £11.95).

Published by the

Joseph Rowntree Foundation The Homestead, 40 Water End, York YO30 6WP Tel: 01904 629241 Fax: 01904 620072 http://www.jrf.org.uk

ISSN 0958-3084

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The Joseph Rowntree Foundation is an independent, non-political body which has supported this project as part of its programme of research and innovative development projects, which it hopes will be of value to policy-makers, practitioners and service users. The findings presented here, however, are those of the authors and not necessarily those of the Foundation.