

Carers in the Region

A profile of the North East

Carers at the Heart of 21st-century Families and Communities (the National Carers Strategy 2008) offered an ambitious new vision for carers, to be achieved by 2018. In doing so, it set a challenging agenda for health and local authorities and for other local and regional agencies across the public, private and voluntary sectors.

To succeed in rising to these challenges, all agencies with a role to play in delivering support for carers need good information – about who carers are, what the particular needs of carers living in their own region or locality may be, and about the different kinds of support and services for carers which are already in existence. The **Carers in the Region** profiles aim to meet this need for better information about carers at the regional level, and have been commissioned by the *Department of Health* from a team at the *University of Leeds* for each of the nine English regions.

The Government White Paper, **Our health, our care, our say (2006)** announced a New Deal for Carers which included a range of new measures to support carers, including:

- **The establishment of a national helpline for carers**
- **Specific funding for the creation of an expert carers programme**
- **Specific funding for short-term home-based respite care for carers in crisis or emergency situations**
- **An update to the Prime Minister's 1999 Strategy for carers**

The subsequent new **National Carers' Strategy** (2008) sets out the Government's agenda and vision for supporting carers. Underpinned by £255 million initially, plus medium and longer-term plans, it committed:

- **£150 million towards planned short breaks for carers**
- **Up to £38 million towards supporting carers to enter or re-enter the job market; and**
- **£6 million towards improving support for young carers**

Other commitments in the strategy include: pilots to explore annual health checks for carers, the ways in which the NHS can better support carers and ways to provide more innovative breaks for carers; training for GPs; a more integrated and personalised support service for carers; accessible information and targeted training for key professionals.

EXISTING STATUTORY RIGHTS FOR CARERS

Carers (Recognition and Services) Act 1995 introduced the concept of a Carers Assessment

Employment Relations Act 1999 gave employees the right to 'reasonable time off' to deal with emergencies

Carers and Disabled Children Act (2000) gave carers the right to an Assessment (carers of adults and carers of disabled children). Allowed carers to receive services in their own right and introduced Direct Payments to purchase them. Direct Payments also offered to parents of disabled children to manage on their child's behalf.

Employment Act 2002 established the right to request flexible working arrangements for employed parents of disabled children under the age of 18.

Carers (Equal Opportunities) Act 2004 Local authorities have a statutory duty to inform carers of their rights and to consider their wishes re education, training and employment when conducting Carers Assessments.

Work and Families Act 2006 extended the right to request flexible working arrangements to all carers in employment.

Childcare Act 2006 placed a duty on local authorities to provide sufficient childcare for working parents 'which includes provision suitable for disabled children'.

Pensions Act (2007) reduced the number of qualifying years carers need for a full basic state pension; introduced a new Carers Credit for those caring 20+ hours a week for someone who is severely disabled.

1. Carers in the North East: Summary

Carers are people who provide regular unpaid care to a relative, friend or neighbour who needs their help and support because of illness, disability or frailty in old age. They include parents of seriously ill or disabled children, as well as people supporting someone with physical or mental health/disabilities, and those looking after someone who is terminally ill. In 2001, the Census of Population revealed that in the UK about 6 million people were providing unpaid care of this type.

Carers in the North East region

In 2001 there were 275,813 carers in the North East region¹ (11% of the region's population compared with 10% across England as a whole). However:

- 18% of men and 25% of women aged 50-64 were carers
- Half of carers aged 75 or over provided 50 or more hours care per week

Carers who provided 20 or more hours of care per week (38% of all carers in the region) were considerably more likely to:

- Live in social housing
- Live in a household with no working adult
- Live in a household with a person with a limiting long-term illness (LLTI)

Demand for care in the region is growing

Between 2008 and 2030 it is expected that in the region:

- The number of people aged 85+ will double to 109,200, increasing from 2.0% of the population to 4.0% (compared with an increase from 2.2% to 3.9% in England as a whole)
- The number of people with a limiting long-term illness (LLTI) will increase by one fifth, from over 595,000 million to over 722,000
- More than twice as many people aged 65 or over will have dementia: over 44,900 people
- The number of carers will increase by over 16,200 or 5%, compared with 15% in England as a whole

Personalisation and local services in the region

In 2007/8:

- 26,010 carers received a Carers Assessment
- 22,655 carers received carers' services or information
- Two fifths of those assessed and receiving services/information were aged 65 or older

Carers' health and wellbeing

The 2001 Census showed:

- 39,349 carers were themselves in poor health (14% of all carers, compared with 12% of carers in England)
- 16,392 carers in poor health provided 50 hours or more of care per week (42%)
- Up to 50 years of age, people in poor health were more likely to be carers than people whose health is good or fairly good
- Carers in poor health were more likely to provide 50 or more hours of care per week than other carers

¹ 2001 Census Standard Tables, Crown Copyright 2003.

Support for carers in the North East

- Most local authorities in the region have developed Carers Strategy Steering Groups which include representatives of relevant local organisations, as well as carers themselves.
- All local authorities in the region are concentrating on delivering carers' breaks. All have also developed strategies for supporting young carers.
- Across the region, 30,780 people of working age have an entitlement to Carer's Allowance (CA), and among them 27,300 receive this benefit².

Carers' access to work

The 2001 Census showed:

- 224,943 carers were aged 16-64, which accounted for 82% of all carers in the region (80% of carers in England are aged 16-64).
- 13,740 carers were aged 16-24 (6% of carers aged 16-64 compared with 6% in England as a whole)
- In the region working age carers were much less likely than healthy non-carers (or than carers in England as a whole) to be in employment or to have any formal educational qualifications.

Carers and employment

In 2001:

- There were 129,620 carers of working age (61%) in employment. In England as a whole 65% of working age carers are in paid employment.
- 13,980 carers in employment also provided 50 or more hours of unpaid care per week
- 52,120 male carers and 37,700 female carers were people in full-time employment
- 4,680 male carers and 35,120 female carers were people in part-time employment

Young carers

- The region had 10,781 young carers under age 20
- Young carers were more likely than other young people to: live in workless households; be in lone parent families; have a limiting long-term illness
- Young adult carers (aged 16-19) were much less likely to have any qualifications or to be in employment or education than other people of this age

Older carers

- There were 45,971 carers aged 65 or over
- 19,826 older carers provided 50 or more hours of care per week
- 1,408 carers were over 85 years old

Care and support in the region: future challenges

The region covers some very rural areas as well as some of England's largest cities. Future challenges in supporting carers in the region include:

- Severe deprivation in some urban areas, where there are levels of illness and disability, poverty, worklessness and social exclusion, putting particular pressure on carers
- Delivering appropriate help and support for carers in black and minority ethnic communities, where rates of illness and disability are often high and the population is also ageing
- The particularly high proportion of people in rural areas who are over 65
- Providing better access to care and other services in a rural setting and developing the best ways of delivering these

² DWP Information Directorate: Work and Pensions Longitudinal Study, February 2009. The difference between the number of carers entitled to CA and those who receive it may be due to carers being not paid CA because they receive an overlapping benefit equal to or greater than the weekly rate of CA.

Characteristics of carers in the North East region

In 2001 there were 275,813 carers in the North East region³. Carers thus formed 11% of the region's population. When compared with other people in the region, carers who provide 20 or more hours of care per week were considerably more likely to: live in social housing; live in a household with no working adult; and live in a household with a person with a limiting long-term illness (LLTI). However, they were less likely to have access to a car.

Table 1.1 Population by sex and weekly hours of care provided: North East region *numbers*

| | Male non-carers | Males caring for: | | | Female non-carers | Females caring for: | | |
|---------------------|-----------------|-------------------|-------------|-----------|-------------------|---------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| All | 1,015,700 | 71,949 | 13,546 | 27,704 | 1,042,993 | 99,208 | 22,114 | 41,292 |
| Age | | | | | | | | |
| 5-15 | 181,252 | 1,883 | 176 | 180 | 172,087 | 2,186 | 257 | 217 |
| 16-24 | 127,467 | 4,404 | 729 | 549 | 125,883 | 5,725 | 1,128 | 1,205 |
| 25-49 | 378,222 | 30,147 | 5,563 | 8,714 | 370,425 | 46,336 | 9,964 | 16,044 |
| 50-64 | 182,064 | 25,735 | 4,453 | 8,726 | 171,150 | 34,050 | 7,936 | 13,535 |
| 65-84 | 90,049 | 7,256 | 1,734 | 5,861 | 104,424 | 8,249 | 2,048 | 6,985 |
| 85+ | 56,646 | 2,524 | 891 | 3,674 | 99,024 | 2,662 | 781 | 3,306 |
| Ethnicity* | | | | | | | | |
| White British | 1,061,945 | 70,426 | 13,166 | 27,132 | 1,093,719 | 97,321 | 21,551 | 40,332 |
| Indian | 4,914 | 257 | 42 | 70 | 4,474 | 243 | 74 | 80 |
| Pakistani | 6,605 | 346 | 98 | 103 | 6,154 | 376 | 135 | 255 |
| Bangladeshi | 2,957 | 117 | 29 | 32 | 2,795 | 121 | 44 | 73 |
| Black ethnic groups | 2,166 | 71 | 27 | 28 | 1,543 | 71 | 28 | 27 |
| Other ethnic groups | 26,340 | 1,080 | 230 | 388 | 25,237 | 1,330 | 317 | 580 |

Source: 2001 Census, Standard Tables, Crown Copyright 2003. * 2001 Census Commissioned Tables, Crown Copyright 2003 (all people including those aged 0-4).

Note: Totals may differ as the 2001 Census Standard Table 25 is for people in households, whilst the commissioned table covers all people.

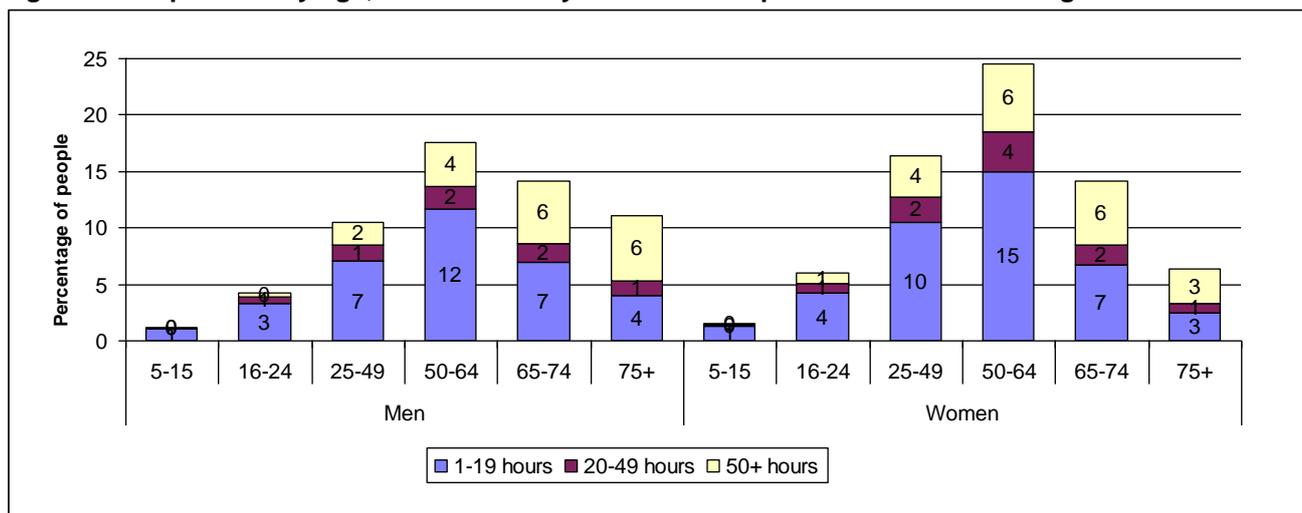
Table 1.2 Characteristics of carers: North East region *(% of people)*

| | Male non-carers | Males caring for: | | | Female non-carers | Females caring for: | | |
|-------------------------------------|-----------------|-------------------|-------------|-----------|-------------------|---------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| North East | | | | | | | | |
| People in workless households | 28 | 24 | 43 | 67 | 34 | 26 | 41 | 60 |
| Co-resident with a person with LLTI | 22 | 39 | 75 | 92 | 21 | 30 | 61 | 91 |
| Living in social housing | 23 | 15 | 32 | 39 | 26 | 18 | 30 | 37 |
| No access to car | 24 | 12 | 25 | 31 | 31 | 18 | 27 | 36 |
| ENGLAND | | | | | | | | |
| People in workless households | 22 | 22 | 39 | 60 | 28 | 24 | 37 | 56 |
| Co-resident with a person with LLTI | 18 | 35 | 74 | 91 | 17 | 28 | 62 | 91 |
| Social housing | 17 | 11 | 24 | 28 | 19 | 13 | 23 | 29 |
| No access to car | 16 | 9 | 19 | 23 | 23 | 12 | 20 | 28 |

Source: 2001 Small Area Microdata, Office for National Statistics (2006a).

³ 2001 Census Standard Tables, Crown Copyright 2003.

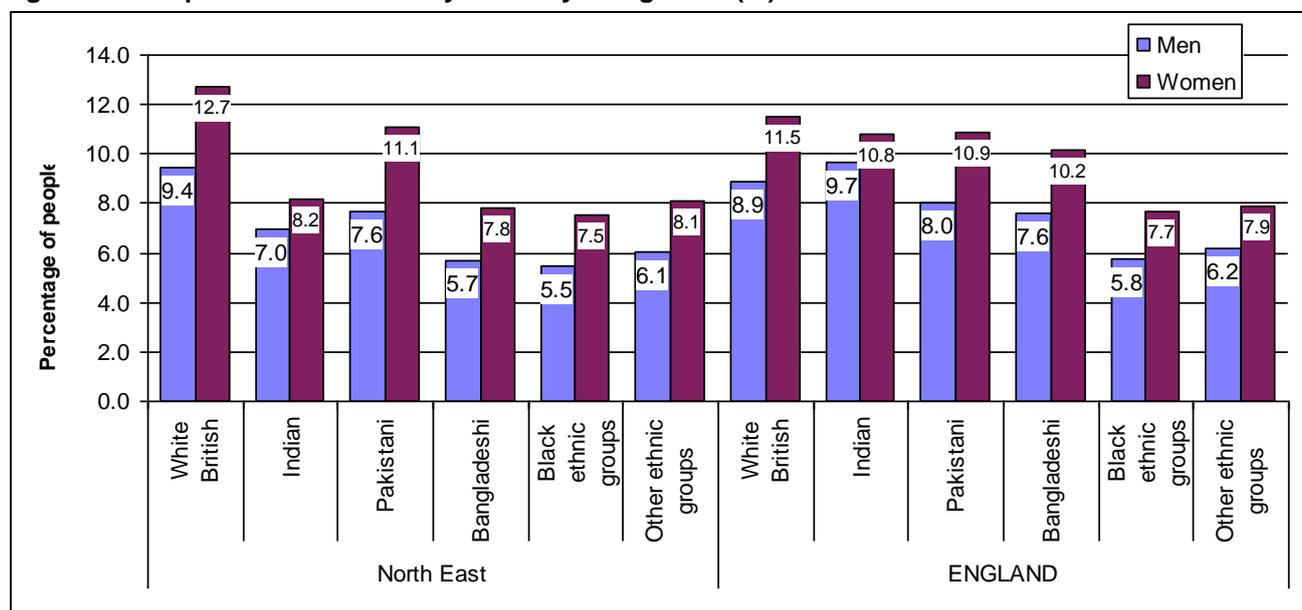
Figure 1.1 Population by age, sex and weekly hours of care provided: North East region



2001 Census Commissioned Tables, Crown Copyright 2003.

The likelihood of being a carer peaks in the 50-64 age group for both sexes. In this age group 18% of men and 24% of women in the region were providing care. The incidence of caring was lower among people aged 65 and over, but carers in older age groups were more likely than younger carers to provide 50 or more hours of care per week. In the region, half of all carers aged 75 or over provided 50 or more hours of care per week (52% of men and 49% of women, compared with 45% of men and 43% of women in England as a whole). By contrast just 22% of men and 24% of women aged 50-64 (17% of men and 20% of women in England as a whole) provided 50 or more hours of care per week, figures which were nevertheless well above the national average.

Figure 1.2 People who are carers by ethnicity and gender (%)



2001 Census Commissioned Tables, Crown Copyright 2003.

The proportion of people who are carers varies by both ethnicity and sex (Figure 1.2). The variation seen arises partly as a consequence of the different age structures; some black and minority ethnic groups having a much younger age profile than others. It is also associated with higher rates of illness and disability in some ethnic groups⁴. 6,672 carers in the region were from one of the region's ethnic minority groups.

⁴ Ethnicity and Health. Postnote No. 276, January 2007. The Parliamentary Office of Science and Technology. www.parliament.uk/documents/upload/postpn276.pdf

2. Demand for care in the North East

Between 2008 and 2030 a significant increase in the demand for personal care and support in the North East is predicted, mainly as a result of the anticipated increase in life expectancy and rising numbers of people living with poor health or disability (Table 2.1). In particular:

- The number of people aged 85+ is set to double (similar to England as a whole)
- The number of people with a LLTI will increase by a fifth (21%), from 595,463 to almost 722,500 (32% for England) (Figure 2.2)
- More than twice as many people aged 65 or over will have dementia
- The number of carers is predicted to increase by over 16,200 or 5% (compared with 15% across England as a whole) (see Figure 2.3)

Table 2.1 Projected demand for care: North East

(numbers)

| | 2008 | 2010 | 2015 | 2020 | 2025 | 2030 |
|---|----------------|----------------|----------------|----------------|----------------|----------------|
| People aged 85+* <i>numbers</i> | 52,400 | 55,800 | 64,500 | 76,500 | 93,200 | 109,200 |
| <i>% of population 85+ (England)</i> | 2.0 (2.2) | 2.2 (2.3) | 2.5 (2.5) | 2.9 (2.8) | 3.4 (3.3) | 4.0 (3.9) |
| People with a LLTI** ALL | 595,463 | 605,424 | 633,627 | 664,977 | 695,965 | 722,438 |
| <i>% of population with LLTI (England)</i> | 23 (18) | 23 (18) | 24 (19) | 25 (19) | 26 (20) | 26 (20) |
| Age of men with a LLTI Men (ALL) | 288,462 | 294,508 | 310,395 | 326,992 | 342,320 | 354,458 |
| 0-14 | 13,049 | 12,962 | 13,281 | 13,923 | 13,964 | 13,725 |
| 15-49 | 74,336 | 74,070 | 71,706 | 69,830 | 71,215 | 74,902 |
| 50-64 | 92,320 | 94,152 | 94,812 | 98,052 | 96,097 | 87,984 |
| 65-74 | 57,659 | 59,453 | 68,383 | 73,945 | 74,423 | 80,259 |
| 75-84 | 39,599 | 41,032 | 45,847 | 50,079 | 59,745 | 65,210 |
| 85+ | 11,498 | 12,838 | 16,366 | 21,162 | 26,876 | 32,378 |
| Age of women with a LLTI Women (ALL) | 307,001 | 310,916 | 323,232 | 337,986 | 353,644 | 367,980 |
| 0-14 | 8,722 | 8,667 | 8,891 | 9,336 | 9,346 | 9,180 |
| 15-49 | 70,812 | 70,355 | 67,338 | 64,517 | 64,746 | 67,274 |
| 50-64 | 84,466 | 86,564 | 88,914 | 93,462 | 91,593 | 83,622 |
| 65-74 | 57,985 | 59,307 | 66,417 | 71,931 | 72,992 | 80,170 |
| 75-84 | 56,990 | 56,832 | 59,608 | 62,561 | 72,190 | 78,591 |
| 85+ | 28,027 | 29,191 | 32,064 | 36,179 | 42,778 | 49,144 |
| People in poor health** | 295,842 | 301,960 | 317,607 | 333,768 | 348,170 | 360,652 |
| <i>% of population (England)</i> | 11.8 (8.7) | 11.9 (8.7) | 12.3 (9.0) | 12.7 (9.3) | 13.0 (9.5) | 13.2 (9.8) |
| People with a LLTI who are also in poor health** | 260,579 | 266,307 | 281,054 | 296,505 | 310,285 | 321,931 |
| <i>% of population (England)</i> | 10.4 (7.3) | 10.5 (7.4) | 10.9 (7.6) | 11.2 (7.9) | 11.6 (8.2) | 11.8 (8.4) |
| People aged 65+ predicted to have a longstanding health condition caused by: | | | | | | |
| A stroke *** | 13,913 | 14,446 | 16,131 | 18,717 | 20,414 | 22,438 |
| <i>% of population 65+ (England)</i> | 3.7 (3.7) | 3.7 (3.7) | 3.6 (3.6) | 3.7 (3.8) | 3.7 (3.7) | 3.7 (3.7) |
| Dementia (people aged 65+) # | 22,377 | 23,755 | 27,866 | 33,014 | 38,714 | 44,924 |
| <i>% of population 65+ (England)</i> | 5.9 (6.2) | 6.0 (6.2) | 6.2 (6.3) | 6.6 (6.8) | 7.1 (7.3) | 7.4 (7.7) |
| Heart disease | 34,343 | 35,597 | 40,080 | 45,630 | 48,824 | 53,429 |
| <i>% of population 65+ (England)</i> | 9.1(9.0) | 9.1 (9.0) | 8.9 (8.9) | 9.1 (9.1) | 8.9 (8.8) | 8.9 (8.8) |

Source: Data have been taken from POPPI/PANSI, DH Crown Copyright

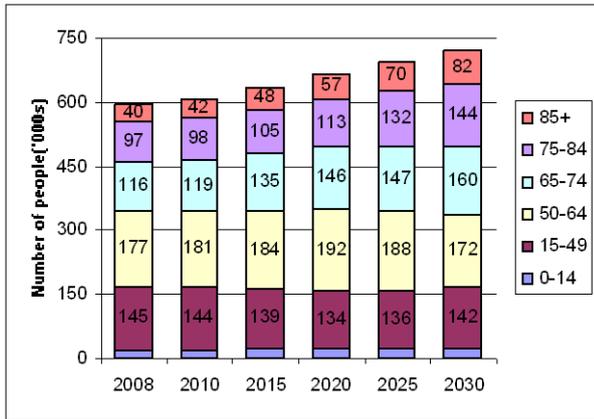
*2006-based sub-national population projections (Crown Copyright).

**Rates from 2001 Census Standard Tables (Crown Copyright 2003) applied to ONS, 2006-based sub-national population projections (Crown Copyright).

***Prevalence rates are based on the 2004/05 General Household Survey, National Statistics. The prevalence rates have been applied to ONS population projections.

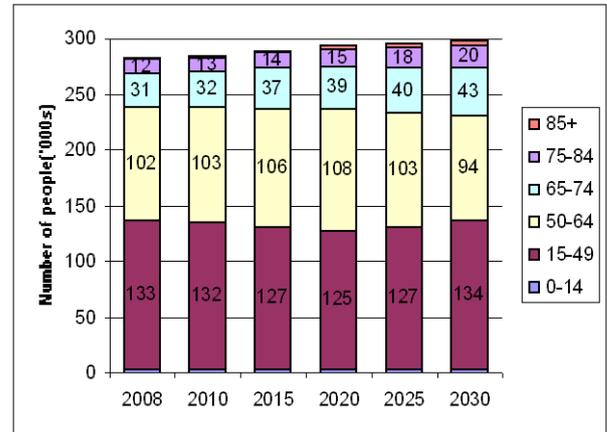
#Prevalence rates are taken from a report into the prevalence and cost of dementia prepared by the Personal Social Services Research Unit (PSSRU) at the London School of Economics and the Institute of Psychiatry at King's College London, for the Alzheimer's Society, 2007. The rates have been applied to ONS population projections.

Figure 2.2 Projected numbers of people with a LLTI by age: North East ('000s)



Source: ONS, 2006-based sub-national population projections, Crown Copyright; 2001 Census Standard Tables, Crown Copyright 2003.

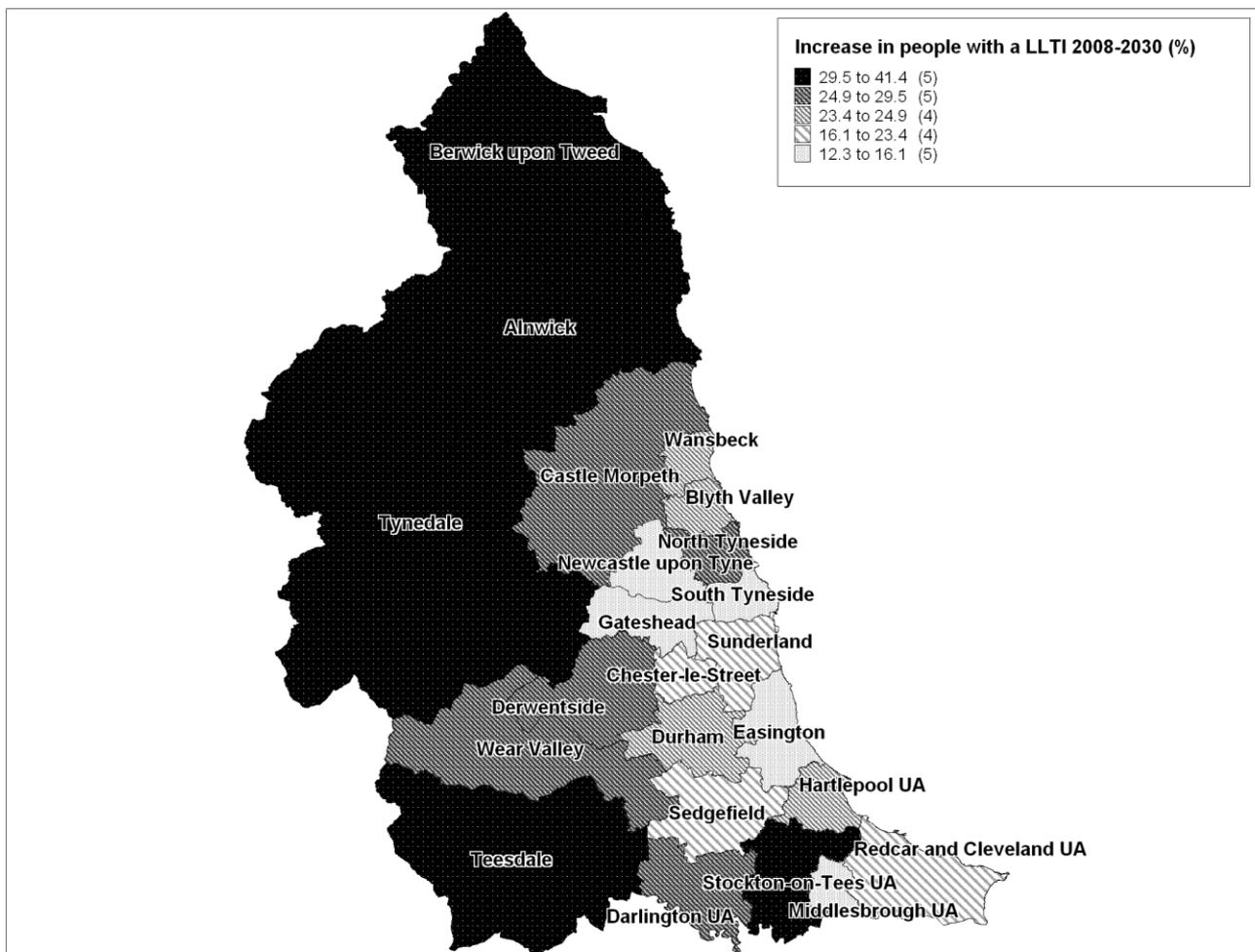
Figure 2.3 Projected numbers of carers by age: North East ('000s)



Source: ONS, 2006-based sub-national population projections, Crown Copyright; 2001 Census Standard Tables, Crown Copyright 2003.

Across the region there is significant variation in the percentage increase in the projected numbers of people with a LLTI between 2008-2030, from just 12% in Middlesbrough (up 3,690) to 41% in Berwick upon Tweed (up 2,400) (Figure 2.4). The greatest increase in numbers of people with a LLTI is expected in Stockton on Tees, where a rise of 14,411 (32%) is forecast, and in Sunderland (11,296 or 16%).

Figure 2.4 Regional variation in the expected increase in the number of people with a LLTI, 2008-2030



Source: 2006-based sub-national population projections, 2001 Census Standard Tables. This work is based on data provided through EDINA UKBORDERS with the support of the ESRC and JISC and uses boundary material which is Copyright of the Crown.

3. Personalisation and local services in the North East

There are 12 CSSRs (councils with social care responsibility) in the region, and all have a statutory duty to provide support and services to carers and the sick and disabled people they care for. Latest figures show that within the region 26,010 carers received a Carers Assessment (Table 3.1) in 2007/8, representing about 9% of all carers, while 22,655 carers received carers' services or information (Table 3.2). Of these carers:

- 10,765 (41%) of all carers assessed were aged 65 or over
- 9,540 (42%) of all carers receiving services were aged 65 or over
- Carers aged 65 and over who received a service were more likely to get a carer's break or specific carer's service (61%) than carers aged 16-64 (57%), who were more likely to be offered information only. However, 89% of carers aged under 18 were offered a carer's break or specific carer's service
- Over 1,490 people had a Direct Payment in place (including some carers)

Table 3.1 Carers Assessments, reviews and services: North East region (numbers)

| | Carers assessed or reviewed | | | Declining assessment or review |
|--|-----------------------------|------------|---------|--------------------------------|
| | ALL | Separately | Jointly | |
| All | 26,010 | 5,530 | 20,485 | 2,500 |
| By age | | | | |
| <i>Under 18</i> | 305 | 215 | 90 | - |
| <i>18-64</i> | 13,080 | 3,510 | 9,575 | 1,290 |
| <i>65-74</i> | 4,140 | 895 | 3,245 | 480 |
| <i>75 and over</i> | 6,625 | 890 | 5,735 | 715 |
| <i>Age not known</i> | 1,860 | 20 | 1,840 | 10 |
| By condition of cared for person | | | | |
| <i>Physical disability, frailty and sensory impairment</i> | 19,025 | 3,320 | 15,705 | 1,850 |
| <i>Mental Health</i> | 3,830 | 1,185 | 2,645 | 450 |
| <i>Learning Disability</i> | 2,610 | 635 | 1,975 | 175 |
| <i>Substance Misuse</i> | 75 | 20 | 55 | 20 |
| <i>Vulnerable People</i> | 480 | 370 | 110 | 5 |

Source: Community Care Statistics 2007 - 08: Referrals, Assessments and Packages of Care for Adults, England, National report and CASSRs, NHS Information Centre.

'-' indicates a number of 5 or less which has been suppressed to prevent identification of individuals.

Figures may not add up because of rounding.

The sum of the primary client types may not equal the number of carers offered an assessment or review. This is due to a number of carers where the primary client type of the person being cared for was unknown.

Table 3.2 Carers receiving services: North East region (numbers)

| | Carers receiving services | | |
|--|---------------------------|---|-----------------------------|
| | ALL | Breaks for the carer and /or other carers' specific service | Information and advice only |
| All | 22,655 | 13,255 | 9,405 |
| By age | | | |
| <i>Under 18</i> | 175 | 155 | 20 |
| <i>18-64</i> | 11,470 | 6,590 | 4,885 |
| <i>65-74</i> | 3,615 | 2,040 | 1,575 |
| <i>75 and over</i> | 5,925 | 3,805 | 2,120 |
| <i>Age not known</i> | 1,465 | 665 | 800 |
| By condition of cared for person | | | |
| <i>Physical disability, frailty and sensory impairment</i> | 16,435 | 8,835 | 7,600 |
| <i>Mental Health</i> | 3,355 | 2,395 | 960 |
| <i>Learning Disability</i> | 2,360 | 1,695 | 665 |
| <i>Substance Misuse</i> | 60 | 40 | 20 |
| <i>Vulnerable People</i> | 445 | 285 | 160 |

Source: Community Care Statistics 2007 - 08: Referrals, Assessments and Packages of Care for Adults, England, National report and CASSRs, NHS Information Centre.

Totals may not add up because of rounding.

In 2007-2008, 87% of carers in the region who were assessed received services or information, compared with 89% in England as a whole. Of the carers receiving services (either carers specific services or information and advice), there was wide variation in the percentage of carers receiving a carer specific service following assessment or review, which according to published data ranged from just 38% in Sunderland to 100% in Newcastle upon Tyne (Table 3.3). Differences in reporting practises may partially explain this variation.

Table 3.3 Carers assessed and receiving services: Councils in the North East region

| | Numbers of carers | | | Percentage of carers receiving services | |
|---------------------|--------------------------|--|--------------------------------|---|--|
| | Assessed or reviewed (A) | Receiving carers specific services (B) | Receiving Information only (C) | Following assessment or review (B+C)/A | Receiving carers specific services B/(B+C) |
| ENGLAND | 377,635 | 208,730 | 128,265 | 89 | 62 |
| NORTH EAST | 26,015 | 13,255 | 9,405 | 87 | 58 |
| Durham | 3,340 | 2,420 | 915 | 100 | 73 |
| Northumberland | 4,095 | 1,955 | 2,140 | 100 | 48 |
| Darlington | 1,085 | 460 | 520 | 90 | 47 |
| Hartlepool | 1,705 | 470 | 245 | 42 | 66 |
| Middlesbrough | 1,445 | 1,090 | 355 | 100 | 75 |
| Redcar & Cleveland | 880 | 470 | 405 | 99 | 54 |
| Stockton-on-Tees | 1,115 | 675 | 440 | 100 | 61 |
| Gateshead | 3,095 | 950 | 325 | 41 | 75 |
| Newcastle upon Tyne | 1,460 | 1,435 | 0 | 98 | 100 |
| North Tyneside | 1,785 | 955 | 420 | 77 | 69 |
| South Tyneside | 1,040 | 500 | 540 | 100 | 48 |
| Sunderland | 4,970 | 1,870 | 3,100 | 100 | 38 |

Source: Community Care Statistics 2007 - 08: Referrals, Assessments and Packages of Care for Adults, England, National report and CASSRs, NHS Information Centre.

Use of Carers' Grant allocations

Carers' Grant is an annual sum of money made available to local authorities to dedicate to carers in their locality, with a particular focus on carers' breaks, young carers, promoting carers' well-being, and developing innovative services for carers. In 2009 the Department of Health allocated £10.5 million⁵ for this purpose to local authorities in the North East.

A review of Carers' Grant expenditure by English local authorities in 2004-6 (conducted by the University of Leeds)⁶ showed that, using these funds, local authorities had dedicated funds to: promoting carer services region-wide, with a particular focus on hard-to-reach carers (e.g. among ethnic minority groups); promoting carer involvement in decision-making about carer services, via carers' forums and steering groups; attempting to increase the number of Carer's Assessments conducted annually by the local authority; increasing carers' breaks provision; developing young carers' support groups; setting up innovative services for carers (such as one-off payments for goods which would ease their caring role); supporting carers wanting to return to employment or education; and developing new or existing partnerships with voluntary sector and health-based organisations.

⁵ Carers' Grant allocation for 2006/2007 taken from 'Carers' Grant details and Guidance' from www.dh.gov.uk/en/SocialCare/Carers/DH_079454.

⁶ Local authorities' use of Carers' Grant by Gary Fry, Christopher Price and Sue Yeandle (Centre for Research on Care, Labour and Equalities, School of Sociology and Social Policy, University of Leeds). Department of Health, August 2009.

4. Carers' health and wellbeing in the North East

The 2001 Census showed that in the North East 39,349 carers were themselves in poor health (14% of carers were in poor health compared with 12% of carers across England as a whole) (Table 4.1). Of these carers in poor health:

- 16,392 provided 50 hours or more of care per week. At all ages, carers in poor health were much more likely to care for 50 or more hours a week (42%) than carers with good/fairly good health (22%) (38% and 19% respectively in England as a whole)
- 484 were aged 85 or older

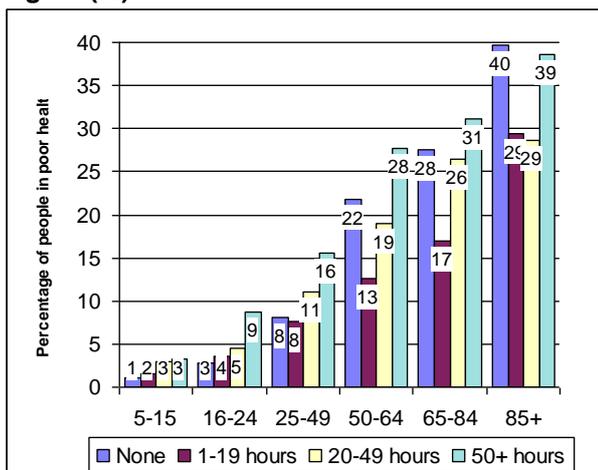
Table 4.1 People in poor health by age, sex and the amount of care they provide: North East

| | Male non-carers | Males caring for: | | | Female non-carers | Females caring for: | | |
|-----------------------|-----------------|-------------------|-------------|-----------|-------------------|---------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| All (numbers) | 117,904 | 7,859 | 2,395 | 7,431 | 131,443 | 9,481 | 3,222 | 8,961 |
| 5-15 | 2,317 | 26 | 3 | 7 | 1,799 | 38 | 10 | 6 |
| 16-24 | 3,477 | 161 | 32 | 49 | 3,769 | 204 | 52 | 104 |
| 25-49 | 30,461 | 2,374 | 664 | 1,444 | 30,414 | 3,450 | 1,058 | 2,402 |
| 50-64 | 41,199 | 3,605 | 1,029 | 2,898 | 35,551 | 3,920 | 1,325 | 3,261 |
| 65-84 | 37,170 | 1,624 | 648 | 2,857 | 50,611 | 1,800 | 747 | 3,067 |
| 85+ | 3,280 | 69 | 19 | 176 | 9,299 | 69 | 30 | 121 |
| All (% people) | 12 | 11 | 18 | 27 | 13 | 10 | 15 | 22 |
| 5-15 | 1 | 1 | 2 | 4 | 1 | 2 | 4 | 3 |
| 16-24 | 3 | 4 | 4 | 9 | 3 | 4 | 5 | 9 |
| 25-49 | 8 | 8 | 12 | 17 | 8 | 7 | 11 | 15 |
| 50-64 | 23 | 14 | 23 | 33 | 21 | 12 | 17 | 24 |
| 65-84 | 27 | 17 | 26 | 31 | 28 | 17 | 27 | 31 |
| 85+ | 37 | 30 | 22 | 39 | 41 | 29 | 35 | 39 |

Source: 2001 Census, Standard Tables, Crown Copyright 2003.

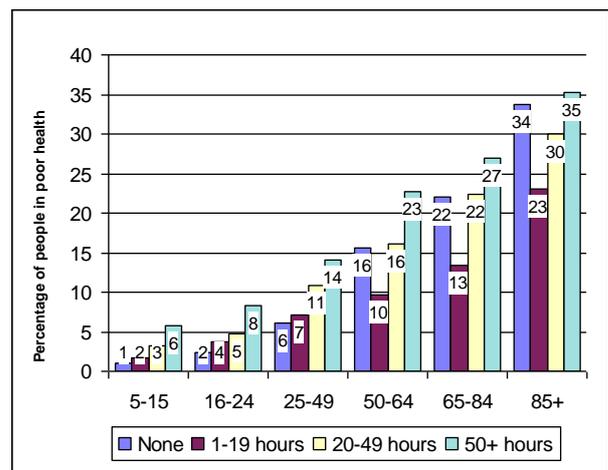
At all ages, with the exception of the oldest age group (people aged 85+), people regularly providing 50 or more hours of care each week were more likely to be in poor health than other people of the same age (Figures 4.2a and 4.2b).

Figure 4.2a People with poor health by age and the amount of care they provide: North East region (%)



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

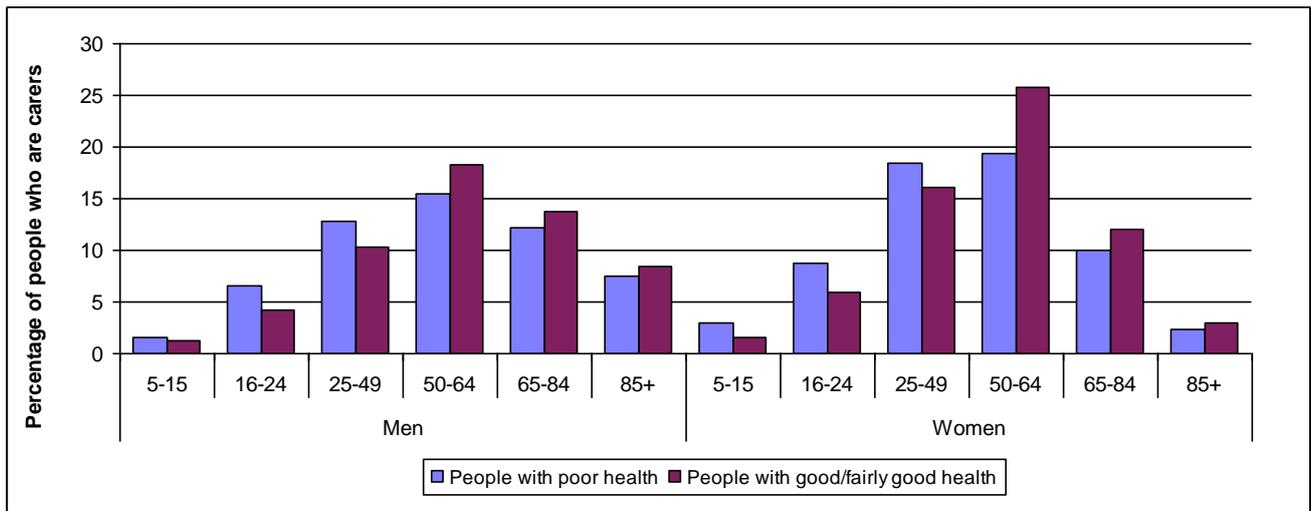
Figure 4.2b People with poor health by age and the amount of care they provide: England (%)



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Below 50 years of age, men and women in poor health were more likely to be providing unpaid care than those in good/fairly good health (Figure 4.3).

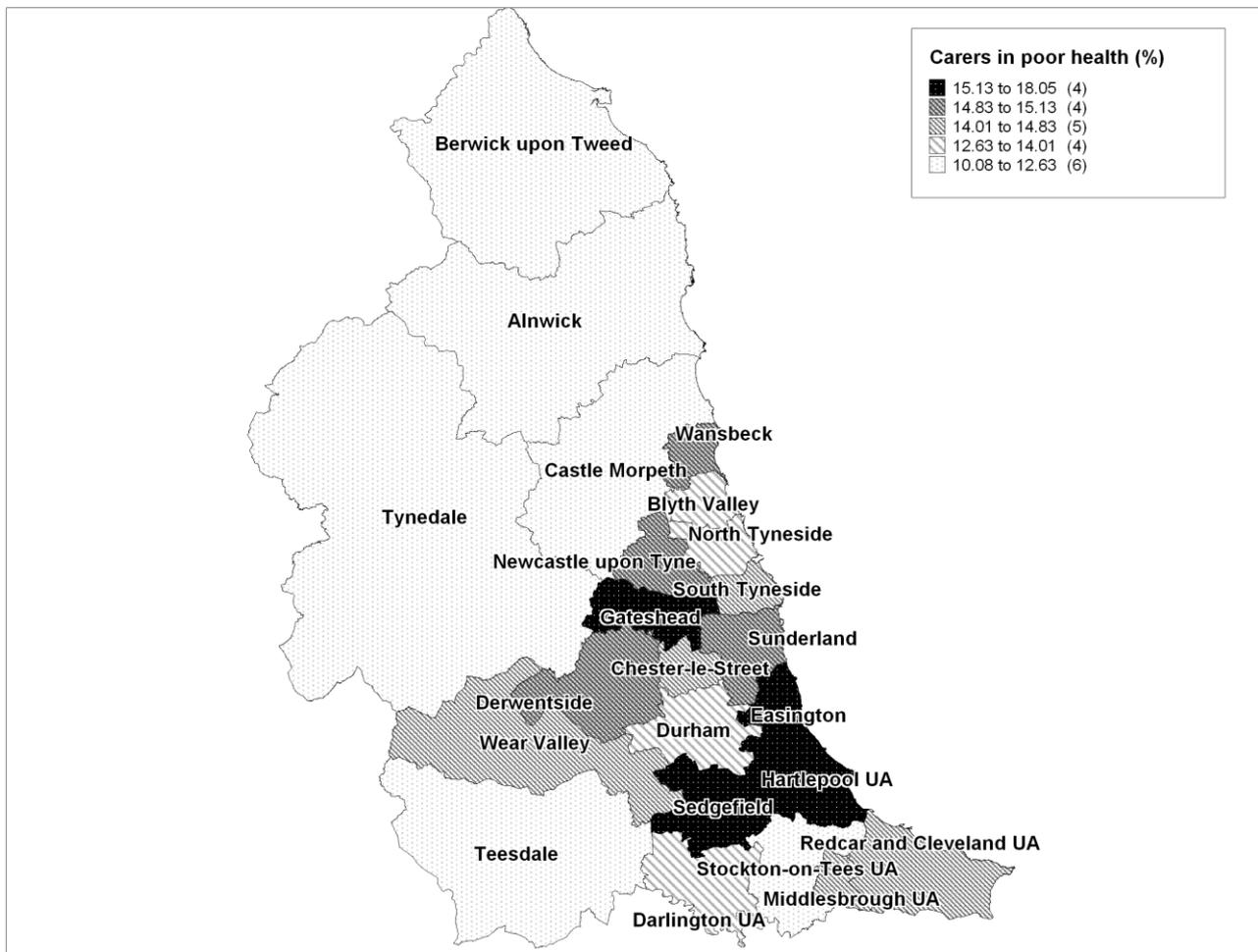
Figure 4.3 People who are carers by their health status: North East region (%)



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

A map of the proportion of carers who were in poor health (Figure 4.4) shows considerable variation across the region. In Tynedale 10% of carers were in poor health, compared with 18% in Easington. The national average across England is 12%.

Figure 4.4 Distribution of carers in poor health in the North East region



Source: 2001 Census Standard Tables, Crown Copyright 2003. This work is based on data provided through EDINA UKBORDERS with the support of the ESRC and JISC and uses boundary material which is Copyright of the Crown.

5. Support for carers in the North East

Carers in the North East have access to a range of information, advice and services delivered by local authorities, voluntary sector agencies and other organisations, sometimes working in partnership. Some of the different types of support available to carers of sick, disabled, frail and vulnerable people in the region are outlined here.

Strategic approaches to support for carers

Each local authority in the region has an up-to-date Carers Strategy detailing its vision for carers in the immediate future. These local strategies, developed following the first National Carers' Strategy in 1999, outline how the local authority has responded, or plans to respond, to key legislation and recommendations from Joint Improvement Partnerships relating to carers, and also how local challenges are being addressed in their plans and activities. Among the key priorities indicated in the region's Carers Strategies are helping carers to have a life of their own, giving them a 'voice' in decisions about service development, promoting knowledge about carers' rights, offering support and training focused on employment and education, offering a range of breaks and respite, increasing the number of carers' assessments conducted annually, and increasing access to information. There is also a focus on achieving equality of access to support for diverse groups by ensuring they are fully included in both existing and new developments affecting carers.

Most local authorities in the region have developed Carers Strategy Steering Groups which include representatives of relevant local voluntary organisations, the local PCT, and local authority personnel from other directorates, including housing and leisure, as well as carers themselves, often representing Carers' Forums. These steering groups are generally tasked with decision-making and monitoring of new and existing carers' activities and schemes. Most groups have devised detailed Action Plans, which outline objectives and proposals for future development according to predetermined timescales. Regular meetings assess the progress of these ongoing developments.

In the North East, some of the local challenges identified include engaging with carers who are traditionally 'hard to reach', whether because they belong to an ethnic minority group (as in the case of several metropolitan and city councils), are located in secluded residential areas (as in the case of several rural-based councils), or have never had any contact with social services in relation to their care needs. To reach these 'hidden' groups of carers local authorities in the region have worked with a variety of partners including the NHS (through GP surgeries and hospitals, for example, to access carers at 'first diagnosis' of the cared-for person) and voluntary organisations including specialist groups dedicated to supporting people with particular needs.

All local authorities with social services responsibility in the region receive an annual Department of Health Carers' Grant budget allocation, and it is with funds made available in this way, as well as with mainstream monies, that many carer-related innovations and existing services are now being initiated and supported. These are outlined below; several examples of each service are included to indicate some of the ways local authorities in the North East are tackling carers' needs.

Local authority support for carers

Advice and information for carers in the North East is available in a variety of ways. Literature promoting services available through local authorities is distributed using a range of outlets and can also be downloaded from the dedicated carer-related web pages of the local authorities' websites. All local authorities in the region include signposting to help carers identify other organisations specialising in services for people caring in a range of different circumstances. In many parts of the region there are also telephone advice lines/email addresses and/or advocacy services that allow carers to contact local authority staff who can advise them on receiving support. Examples include:

Redcar and Cleveland Borough Council offers a helpline related to care issues available from Monday to Friday. It also offers an out-of-hours / weekends emergency line.

Hartlepool Borough Council has put in place a telephone-based Duty Team which signposts carers to a range of local support networks and activities. It also has an emergency out-of-hours service.

Many local authorities in the region promote carers' services by hosting local events during Carers' Week (annually in July) and at other appropriate times of the year, such as Carers' Rights Day in December. In many areas, such as Middlesbrough, the council produces literature promoting carers' services in different languages, to help reach out to local ethnic minority communities, traditionally considered 'hard to reach' on social care and carers' issues. As stated above, carers are also encouraged to take part in decision making on carers' issues. Examples include:

Northumberland County Council has published a report based on a project it commissioned which involved four carers conducting an evaluation of the effectiveness of carer support workers in the field of mental health. This was intended to bring carers' expertise to the process of service evaluation as well as encouraging carers to value their perspective on such issues.

Gateshead Metropolitan Borough Council has developed a Carers Partnership which has control over part of its Carers' Grant budget and has been able to commission and decommission services in response to needs locally identified through consultation with carers.

Voluntary sector and other support for carers

All local authorities in the North East have devoted resources to delivering breaks to carers, sometimes in partnership with voluntary agencies. These usually take the form of respite, sitting services and access to day care centres. Such services are often specifically tailored towards carers of people with particular conditions, including disabled children and adults, older people, those suffering mental health problems, and those with learning difficulties. Some local authorities have developed culturally sensitive breaks services specifically geared towards ethnic minority groups.

Gateshead Metropolitan Borough Council has a wide range of breaks available for carers of people with a variety of conditions and needs. It has a building specifically designed to provide breaks, a caravan in Berwick in which carers can holiday, and a flexible person-centred service called Shared Lives Carers which provides sitting services.

Middlesbrough Council focuses on respite breaks and has purchased places at a local caravan park in which carers can holiday. It also has a dedicated carers' breaks centre which has self-catering log cabins and has the capacity to provide 500 carers breaks up to 2013.

Collaboration with voluntary sector organisations is a crucial part of carer activities for many local authorities in the North East. Many of these organisations have long experience of supporting carers and also have other sources of funding with which they provide support, advice, and information to carers. With the money made available through Carers' Grant, as well as other sources of social care funding, local authorities have been able to invest in a wider range of carer-related projects. These are often developed in close collaboration with voluntary sector organisations, and based on their 'grass roots' engagement with carers.

North Tyneside Metropolitan Borough Council works with Age Concern, Parkinson's Disease Society, Alzheimer's Society and a number of other voluntary organisations to provide age-related and condition-specific advice, information and signposting to carers in the region.

Sunderland City Council works comprehensively with the Alzheimer's Society, and through this organisation funds a Peer Support Project designed to provide personal assistance to sufferers of dementia-related conditions and their carers.

Voluntary sector carers' centres exist in many parts of the North East, offering valued support, information and services to carers; details of these are available from the Carers Direct website, which includes an interactive map showing the location of nearby centres, with contact details and a summary of the services they provide. Often affiliated to national carers' organisations including the Princess Royal Trust for Carers (PRTC), Carers UK and Crossroads, many of these agencies are well established and can draw on many years experience of advising and supporting carers.

Carers Direct

Free confidential Information and advice for carers, set up as a national service in 2008.

Find addresses, phone numbers and websites for services for carers near you.

www.NHS.uk/CarersDirect

Call Carers Direct on **0808 802 0202**

Lines are open 8am to 9pm Monday to Friday, 11am to 4pm at weekends.

Calls are free from UK landlines

Or email CarersDirect@nhschoices.nhs.uk

Supporting young carers

All local authorities in the North East have developed services specifically geared towards young carers. Young carers are particularly vulnerable to the demands of caring which can have a major impact on their lives. Many voluntary sector carers' centres have prioritised this type of support, which has been a particular focus of centres linked to the Princess Royal Trust for Carers.

Durham County Council's Young Carers' Project provides a range of activities including sporting events, awareness-raising promotions in schools, and safety awareness campaigns. It also allows young carers to contribute to decision making on care-related projects via a forum.

Newcastle upon Tyne City Council has a Young Carers Project which is managed by the charity organisation Barnado's. It has developed a dedicated strategy and a guide to help young carers cope with their various responsibilities. Young carers in the area have also made a DVD designed to let others know what being a young carer is like.

Services to help carers combine caring with employment or education

Some local authorities in the North East have developed projects to help carers who want to combine caring with paid work or who are seeking employment and further education. These projects provide support and advice to enable carers to access training and funding opportunities, to revise job application and interview skills, and to address work-related issues, including advising them about new rights given to carers in recent legislation.

Middlesbrough Council has developed a support group specifically designed to help male carers – particularly those who are fathers – deal with a range of care-related issues. An important part of this programme is employment training, support and advice, which is delivered during meetings in which other activities are available such as sporting events.

Stockton-on-Tees Borough Council has, since February 2007, overseen a successful partnership between its Adult Education Service and the Link Carers organisation. The aim of this partnership is to open up learning opportunities to people who are carers of mental health service users. The project provides taster sessions, short courses and access to information and advice. A range of activities including aromatherapy, art, drama and an ICT workshop allow carers to progress onto mainstream Adult Education courses including a Skills for Life literacy class.

Telecare

Since 2006, offering telecare equipment to help carers deal with their caring situation has also been a developing area of local authority activity in the North East, with new funds available through the Preventative Technology Grant⁷. Where telecare equipment is installed in the home of a person needing care or support, it often offers significant benefits for carers as well. Available equipment includes personal alarms, fall detectors, smoke, gas and spillage/flood alerts and automatic lighting and door entry controls. In 2006/2007 an estimated 5,000 new service users aged 65 or over in the region were provided with items of telecare, giving carers' peace of mind and more freedom in their everyday lives.

⁷ Through the Preventative Technology Grant, £80 million was invested to help English local authorities develop telecare programmes.

Sunderland City Council uses telecare equipment as part of a range of services to support over 22,000 vulnerable people living at home in the region. It has also developed a DVD which demonstrates the benefits of telecare equipment.

South Tyneside Metropolitan Borough Council offers a range of telecare services whose costs start at £3 per week. The maximum fee for telecare services is £8 per month, though many carers on certain benefits are offered these services for free.

Courses for carers

A number of courses for carers have been developed by local authorities in the North East. These include learning to care for themselves, improving health and wellbeing, facilitating access to services and specific skills (e.g. lifting and handling), as well as teaching relaxation and similar techniques.

South Tyneside Metropolitan Borough Council has developed a training course called Self Care Skills which aims to help people, including carers, improve their health and wellbeing in a non-medical way by providing encouragement to make sustainable changes in their lifestyle. The course is delivered via six weekly sessions which cover areas such as building confidence, managing stress, healthy eating and exercise, and is followed by reviews and an evaluation.

Darlington Borough Council has developed a training course designed to provide information to carers. Its five modules cover accessing local support services, how carers can care for themselves, overcoming stress and relaxation techniques, identifying organisations which can help with care-related problems, and understanding Welfare Rights.

The nationwide **Caring with Confidence** programme for carers is working with three providers in the North East. Carers can select and attend specialised modules relating to different aspects of caring. There is also an online version of the course, and a self-study version which carers can complete at their own convenience and pace. The service began operating in the region in summer 2009.

The Caring with Confidence programme

This is a knowledge- and skills-based programme, funded by the Department of Health, which aims to help carers make a positive difference to their life and that of the person they care for. Delivered by specially trained facilitators, often carers themselves, it offers a range of modules in a flexible programme of free carer support. Carers can mix and match how they develop their knowledge and skills - taking part in free local group sessions, using self-study workbooks or accessing the programme online.

www.caringwithconfidence.net

Call: **0800 849 2349** (Carer Information Line) or **0113 385 4491**

or email: cwc.info@caringwithconfidence.net

State benefits for carers

Across the North East, 30,780 people of working age have an entitlement to Carer's Allowance, and of these 27,300 receive this state benefit. Carer's Allowance is a weekly payment of £53.10p (the maximum claimable in 2009), available to carers providing 35 or more hours of weekly care to someone receiving specified sickness or disability benefits. A further 22,620 people who have reached state pension age also have an 'underlying entitlement' to Carer's Allowance, which qualifies them for the Carer Premium, linked to Pension Credit; of these, 1,340 receive this element. Carer's Allowance is available through the Department for Work and Pensions and the rules governing it are set at the national level⁸.

⁸ DWP Information Directorate: Work and Pensions Longitudinal Study, February 2009. Intended to be an 'income replacement' benefit, Carer's Allowance (CA) 'overlaps' with other benefits and is not *paid* to people receiving a state retirement pension (and some other benefits paid at a higher rate). Eligible claimants nevertheless retain any linked entitlements (e.g. to housing benefit). CA was 'renamed' in 2003, replacing Invalid Care Allowance (established 1975).

Carers' access to paid work in the North East

In the region, there are 224,943 carers aged 16-64 (Table 6.1). These account for 82% of all carers in the North East. (In England as a whole 80% of carers are aged 16-64.) Of these carers 48,773 regularly provide 50 or more hours of care each week (22% of carers in the region, compared with 18% in England as a whole), and 13,740 are aged 16-24.

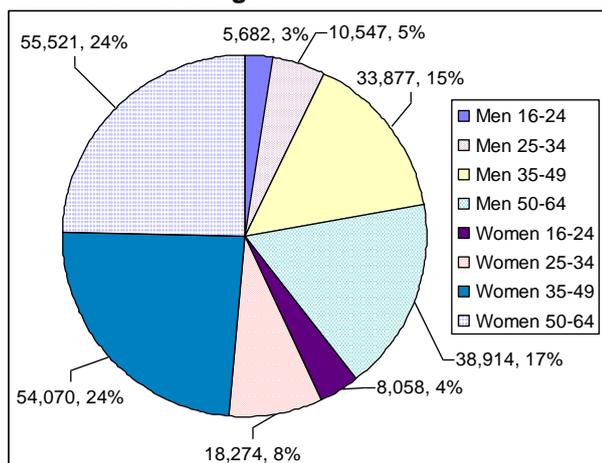
Table 6.1 People of working age (16-64) by age, sex and the amount of care they provide: North East (numbers)

| | Male non-carers | Men caring for: | | | Female non-carers | Women caring for: | | |
|------------------|-----------------|-----------------|-------------|-----------|-------------------|-------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| All 16-64 | 687,753 | 60,286 | 10,745 | 17,989 | 667,458 | 86,111 | 19,028 | 30,784 |
| 16-24 | 127,467 | 4,404 | 729 | 549 | 125,883 | 5,725 | 1,128 | 1,205 |
| 25-34 | 145,268 | 7,125 | 1,422 | 2,000 | 148,762 | 11,143 | 2,506 | 4,625 |
| 35-49 | 232,954 | 23,022 | 4,141 | 6,714 | 221,663 | 35,193 | 7,458 | 11,419 |
| 50-64 | 182,064 | 25,735 | 4,453 | 8,726 | 171,150 | 34,050 | 7,936 | 13,535 |

Source: 2001 Census, Standard Tables, Crown Copyright 2003.

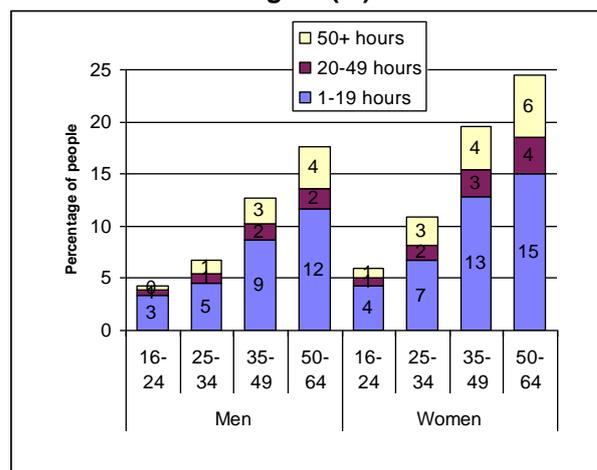
Of carers aged 16-64, 56% are women and 41% are people aged 50-64 (Figure 6.2). Almost a quarter of all women aged 50-64 and almost a fifth of men in this age group are carers (Figure 6.3). Women are more likely to be carers than men at all ages between 16 and 64.

Figure 6.2 Carers of working age by age and sex: North East region



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Figure 6.3 People of working age who are carers: North east region (%)



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

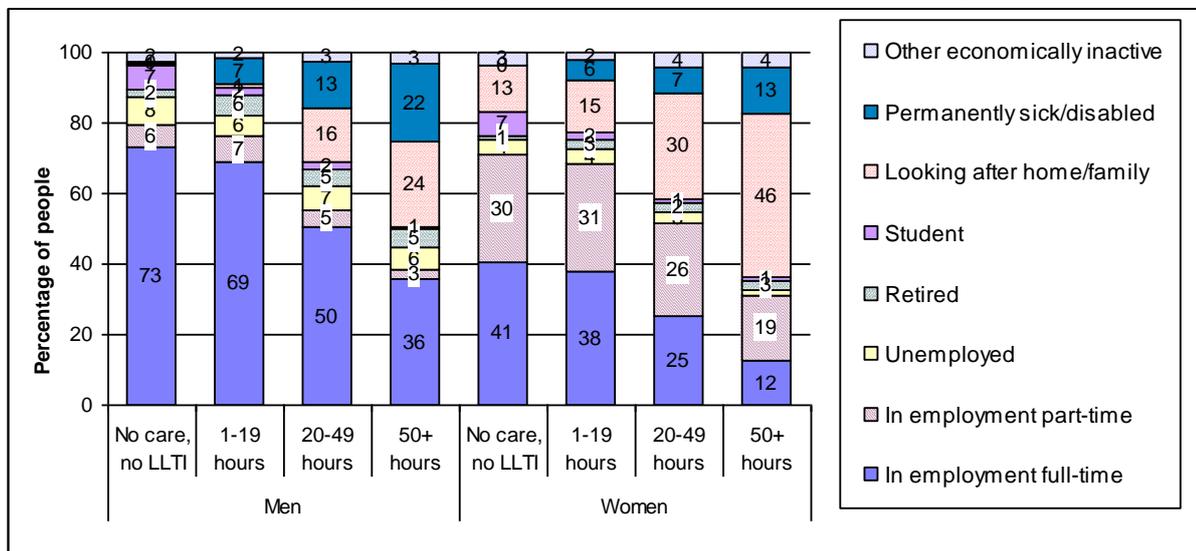
Table 6.4 Characteristics of carers of working age: North East region

| | North East | | | | ENGLAND | | | |
|------------------------------------|-------------------------|--------------------|-------------|-----------|-------------------------|--------------------|-------------|-----------|
| | Non-carers without LLTI | People caring for: | | | Non-carers without LLTI | People caring for: | | |
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| No qualifications | | | | | | | | |
| Men | 21 | 22 | 38 | 46 | 20 | 20 | 34 | 43 |
| Women | 23 | 23 | 40 | 49 | 19 | 21 | 36 | 43 |
| Degree-level qualifications | | | | | | | | |
| Men | 18 | 20 | 10 | 9 | 23 | 23 | 14 | 11 |
| Women | 17 | 20 | 10 | 8 | 23 | 23 | 14 | 11 |
| In paid employment* | | | | | | | | |
| Men | 80 | 76 | 55 | 38 | 84 | 80 | 63 | 46 |
| Women | 71 | 69 | 52 | 31 | 73 | 73 | 53 | 34 |

Source: 2001 Small Area Microdata, Office for National Statistics (2006a). *2001 Census Individual SAR, Office for National Statistics (2006b).

Comparing carers of working age with healthy non-carers (those without an LLTI), Table 6.4 shows that carers are much more likely to have no qualifications and are much less likely to be qualified to degree-level or above, especially if they are committing 20 or more hours per week to their caring role. They are also much less likely to be in paid employment. Data on the 'economic activity' of carers and a comparator group of healthy non-carers is shown in Figure 6.5. As regular weekly hours of care increase, the likelihood rises that a carer will be either 'looking after their home or family full-time', or 'permanently sick or disabled' themselves.

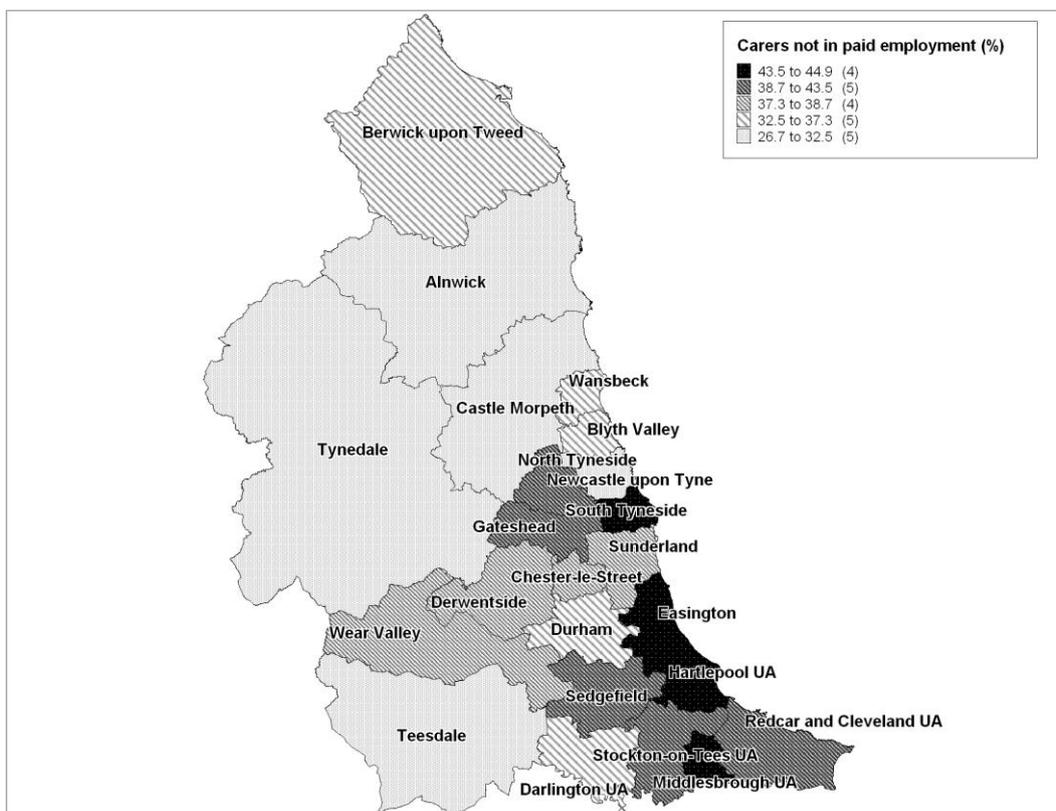
Figure 6.5 People of working age by sex, and amount of care: North East region



Source: 2001 Census Individual SAR, Office for National Statistics (2006b).

The proportion of carers who are not in paid employment varies across the region, from the lowest level (27%) in Teesdale in County Durham, to a much higher figure (45%) in Middlesbrough (Figure 6.6).

Figure 6.6 Carers of working age who are not in employment: North East region (%)



Source: 2001 Small Area Microdata, Office for National Statistics (2006a). This work is based on data provided through EDINA UKBORDERS with the support of the ESRC and JISC and uses boundary material which is Copyright of the Crown.

7. Carers in employment in the North East

In 2001, there were 129,620 carers of working age in paid employment in the region (aged between 16 and state pension age; 64 for men and 59 for women in 2001). Of these carers:

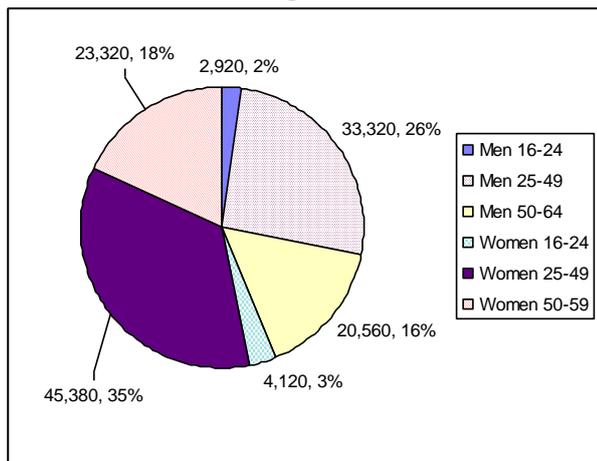
- 52,120 male carers and 37,700 female carers were in full-time employment
- 4,680 male carers and 35,120 female carers were in part-time employment
- 13,980 (11%, compared with 10% in England as a whole) provided 50 or more hours of care per week

Table 7.1 People of working age (16-64 for men and 16-59 for women) in employment by employment status, age, sex and the amount of care they provide: North East region

| | Male non-carers | Men (16-64) caring for: | | | Female non-carers | Women (16-59) caring for: | | |
|----------------------|-----------------|-------------------------|-------------|-----------|-------------------|---------------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| All full-time | 444,060 | 40,980 | 5,900 | 5,240 | 224,960 | 30,700 | 3,740 | 3,260 |
| 16-24 | 56,680 | 1,760 | 320 | 60 | 39,940 | 1,840 | 300 | 100 |
| 25-49 | 291,380 | 24,800 | 3,300 | 3,300 | 152,200 | 19,660 | 2,460 | 1,920 |
| 50-64/59 | 96,000 | 14,420 | 2,280 | 1,880 | 32,820 | 9,200 | 980 | 1,240 |
| All part-time | 42,180 | 3,500 | 640 | 540 | 171,900 | 25,660 | 4,520 | 4,940 |
| 16-24 | 16,220 | 700 | 80 | 0 | 29,420 | 1,500 | 220 | 160 |
| 25-49 | 16,640 | 1,260 | 340 | 320 | 110,780 | 15,840 | 2,680 | 2,820 |
| 50-64/59 | 9,320 | 1,540 | 220 | 220 | 31,700 | 8,320 | 1,620 | 1,960 |

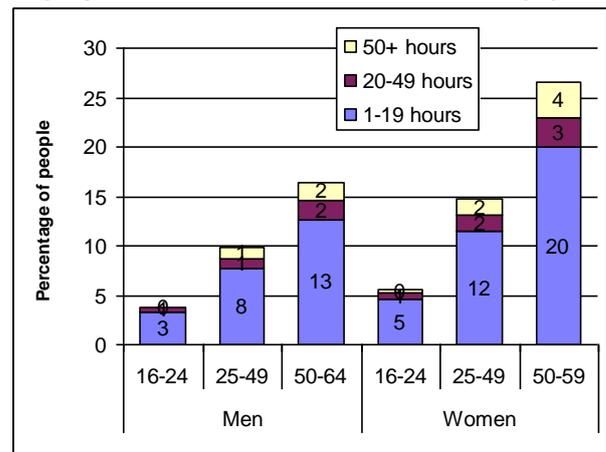
Source: 2001 Small Area Microdata, Office for National Statistics (2006a).

Figure 7.2 Carers in paid employment by age and sex: North East region



Source: 2001 Census Commissioned, Standard Tables, Crown Copyright 2003.

Figure 7.3 People of working age in paid employment who are carers: North East (%)



Source: 2001 Census Commissioned, Standard Tables, Crown Copyright 2003.

Almost half of all carers who were in paid employment in the region were men (44%, Figure 7.2), and combining work and care is quite a common experience, especially for men and women over 50 (Figure 7.3). Carers in employment, particularly women, were more likely than others in paid work to work part-time (Table 7.4). The percentage of carers working part-time increases with the amount of care provided. A high percentage of women carers who provided 50 or more hours of care each week as well as having a paid job were employed for less than 16 hours per week.

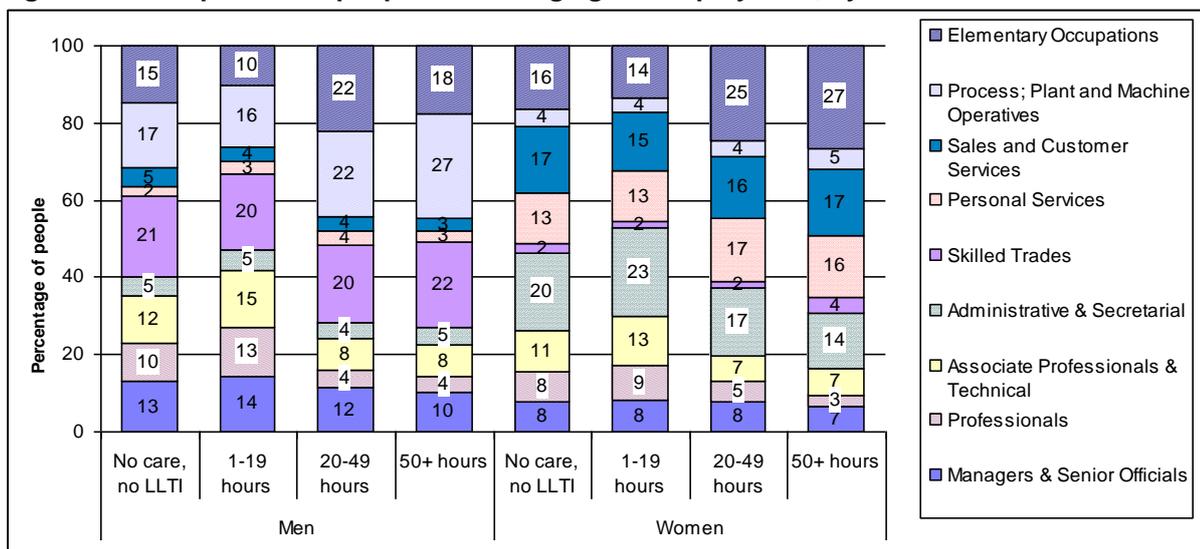
Carers were much more likely to work either at home or very close (within 2km) to where they live. This often limits the jobs available to them making them more likely to be employed in low-skilled, low-paid elementary or process, plant and machine operative jobs, and much less likely to be in managerial or professional occupations (Figures 7.5 and 7.6). Carers in employment were also much more likely than healthy non-carers in employment to be the only person in the household who is working.

Table 7.4 Characteristics of people of working age (16-64 for men and 16-59 for women) in employment: North East region (%)

| | North East | | | | ENGLAND | | | |
|-----------------------------------|-------------------------|--------------------|-------------|-----------|-------------------------|--------------------|-------------|-----------|
| | Non-carers without LLTI | People caring for: | | | Non-carers without LLTI | People caring for: | | |
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| Work part-time | | | | | | | | |
| Men | 8 | 10 | 9 | 7 | 8 | 10 | 11 | 11 |
| Women | 43 | 45 | 51 | 60 | 40 | 47 | 50 | 58 |
| Work <16 hours per week | | | | | | | | |
| Men | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| Women | 12 | 13 | 25 | 29 | 13 | 14 | 18 | 26 |
| Elementary occupations | | | | | | | | |
| Men | 15 | 10 | 22 | 18 | 13 | 11 | 18 | 18 |
| Women | 16 | 14 | 25 | 27 | 13 | 11 | 19 | 21 |
| Distance to work <2km | | | | | | | | |
| Men | 23 | 23 | 29 | 24 | 25 | 27 | 29 | 30 |
| Women | 31 | 32 | 43 | 42 | 32 | 35 | 40 | 42 |
| Only working adult | | | | | | | | |
| Men | 28 | 31 | 53 | 53 | 29 | 32 | 53 | 52 |
| Women | 23 | 25 | 43 | 40 | 22 | 24 | 37 | 38 |

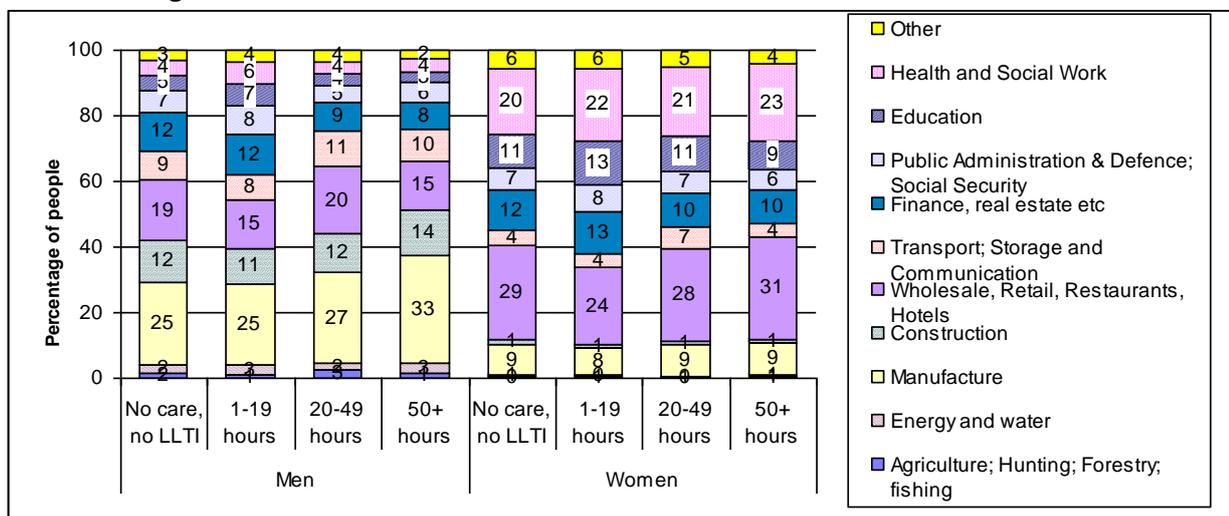
Source: 2001 Census Individual SAR, Office for National Statistics (2006b).

Figure 7.5 Occupations of people of working age in employment, by sex and amount of care: North East



Source: 2001 Census Individual SAR, Office for National Statistics (2006b).

Figure 7.6 Industrial distribution of people of working age in employment by sex and amount of care: North East region



Source: 2001 Census Individual SAR, Office for National Statistics (2006b).

8. Young carers in the North East

In 2001, there were 10,781 carers in the region aged 5-19 (Table 8.1). Of these young carers:

- 976 provided 50 or more hours of care per week
- 4,899 were under 16 years old
- 253 were themselves in poor health
- 7.5% of Indian, 4.5% of Pakistani and 3.6% of Bangladeshi children provided unpaid care, compared with just 2.2% of White British children (Figure 8.6)

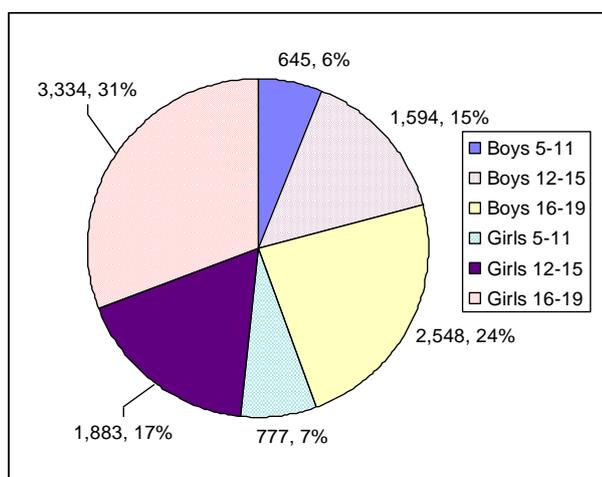
Table 8.1 Young people aged 5-19 by age, sex and the amount of care they provide: North East

| | Male non-carers | Boys caring for: | | | Female non-carers | Girls caring for: | | |
|----------------------|-----------------|------------------|-------------|-----------|-------------------|-------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| All aged 5-19 | 240,821 | 3,886 | 521 | 380 | 230,487 | 4,675 | 723 | 596 |
| 5 to 7 | 46,827 | 86 | 10 | 7 | 44,367 | 84 | 15 | 28 |
| 8 to 9 | 33,792 | 147 | 19 | 28 | 31,744 | 168 | 18 | 25 |
| 10 to 11 | 33,847 | 289 | 24 | 35 | 32,178 | 368 | 31 | 40 |
| 12 to 15 | 66,786 | 1,361 | 123 | 110 | 63,798 | 1,566 | 193 | 124 |
| 16 to 17 | 31,373 | 1,011 | 154 | 84 | 30,486 | 1,275 | 229 | 156 |
| 18 to 19 | 28,196 | 992 | 191 | 116 | 27,914 | 1,214 | 237 | 223 |

Source: 2001 Census, Standard Tables, Crown Copyright 2003.

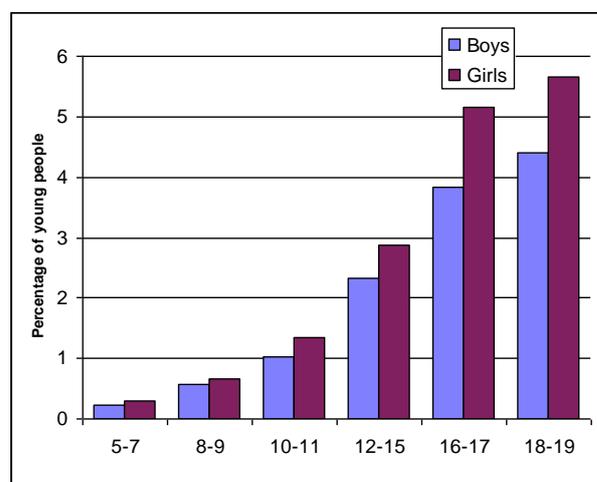
55% of all young carers were aged 16-19 (Figure 8.2). Across all ages, girls were more likely to be carers than boys (Figure 8.3). The data in Figure 8.3 suggest that all schools, colleges and universities in the region are likely to have some young carers among their students.

Figure 8.2 Young carers by age and sex: North East region



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Figure 8.3 Young people who are carers: North East region (%)



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Young carers are more likely to live in households with no working adult and are also more likely to live in socially rented housing (Table 8.4). Young carers who regularly provide 20 or more hours of care each week are significantly more likely than other children both to live in lone parent families and to have a limiting long-term illness.

Young carers aged 16-19 are much more likely than other young people to be unemployed and are more likely to be 'not in employment, education or training' (NEET) (Table 8.5). Young carers aged 16-19 who provide 20 or more hours of care per week also face potential disadvantage in the labour market for many years to come, as they are less likely to have any formal qualifications.

Young people in the Asian ethnic groups are considerably more likely than other young people to be carers (Figure 8.6).

Table 8.4 Characteristics of young people (aged 5-19) by amount of care provided: North East (%)

| Young people aged 5-19 | North East | | | | ENGLAND | | | |
|-----------------------------------|------------|------------|-------------------|-----------|---------|------------|-------------------|-----------|
| | ALL | Non-carers | People providing: | | ALL | Non-carers | People providing: | |
| | | | 1-19 hours | 20+ hours | | | 1-19 hours | 20+ hours |
| All (numbers '000s) | 487.5 | 476.4 | 9.0 | 2.2 | 9,569.0 | 9,186.8 | 159.3 | 34.6 |
| Ethnic group | | | | | | | | |
| <i>White British</i> | 467.4 | 456.9 | 8.5 | 2.0 | 7,941.6 | 7,789.9 | 126.0 | 25.7 |
| <i>Mixed ethnic groups</i> | 5.1 | 4.9 | 0.1 | 0.0 | 293.9 | 287.1 | 5.7 | 1.1 |
| <i>Indian</i> | 2.1 | 2.0 | 0.1 | 0.0 | 240.4 | 231.4 | 7.2 | 1.9 |
| <i>Pakistani</i> | 4.5 | 4.3 | 0.1 | 0.1 | 221.9 | 212.5 | 7.3 | 2.1 |
| <i>Bangladeshi</i> | 2.2 | 2.1 | 0.1 | 0.0 | 94.9 | 90.7 | 3.0 | 1.1 |
| <i>Other ethnic groups</i> | 6.3 | 6.1 | 0.1 | 0.0 | 534.8 | 523.1 | 9.2 | 2.5 |
| No working adult in family | 21 | 21 | 29 | 50 | 16 | 16 | 25 | 39 |
| Household tenure | | | | | | | | |
| <i>Rents - from LA/HA</i> | 28 | 28 | 32 | 49 | 23 | 23 | 27 | 40 |
| Family type | | | | | | | | |
| <i>Lone parent</i> | 25 | 25 | 28 | 49 | 23 | 23 | 26 | 39 |
| <i>Couple with children</i> | 72 | 72 | 68 | 47 | 74 | 74 | 70 | 57 |
| <i>Other family (no children)</i> | 3 | 3 | 4 | 5 | 3 | 3 | 4 | 4 |
| Limiting long-term illness | 6 | 6 | 9 | 13 | 5 | 5 | 7 | 12 |

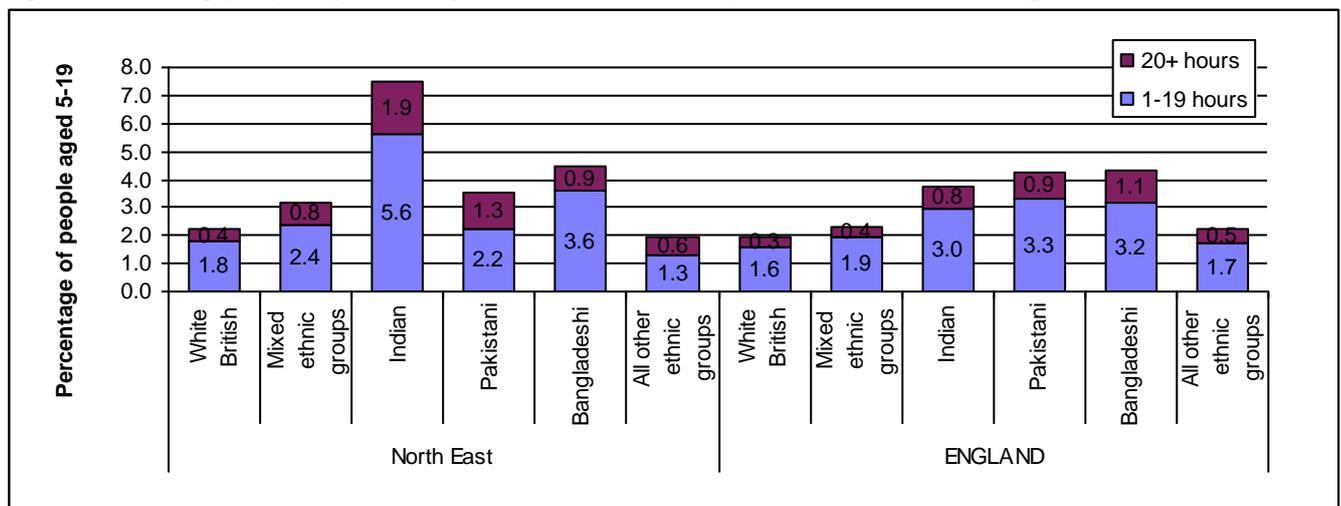
Source: 2001 Small Area Microdata, Office for National Statistics (2006a).

Table 8.5 Characteristics of young people (aged 16-19) by amount of care provided: North East (%)

| Young people aged 16-19 | North East | | | | ENGLAND | | | |
|--------------------------|------------|------------|-------------------|-----------|---------|------------|-------------------|-----------|
| | ALL | Non-carers | People providing: | | ALL | Non-carers | People providing: | |
| | | | 1-19 hours | 20+ hours | | | 1-19 hours | 20+ hours |
| No qualifications | | | | | | | | |
| <i>Males</i> | 27 | 27 | 26 | 52 | 24 | 24 | 19 | 28 |
| <i>Females</i> | 24 | 23 | 24 | 39 | 21 | 21 | 17 | 29 |
| Economic activity | | | | | | | | |
| Males | | | | | | | | |
| <i>In employment</i> | 43 | 43 | 42 | 40 | 47 | 47 | 46 | 38 |
| <i>Unemployed</i> | 13 | 13 | 13 | 12 | 10 | 10 | 12 | 19 |
| <i>Student</i> | 40 | 40 | 40 | 28 | 40 | 40 | 40 | 31 |
| <i>Other</i> | 5 | 4 | 6 | 20 | 3 | 3 | 3 | 11 |
| Females | | | | | | | | |
| <i>In employment</i> | 44 | 44 | 46 | 37 | 47 | 47 | 44 | 35 |
| <i>Unemployed</i> | 10 | 10 | 11 | 5 | 7 | 7 | 10 | 10 |
| <i>Student</i> | 38 | 38 | 39 | 32 | 39 | 39 | 39 | 30 |
| <i>Other</i> | 8 | 8 | 4 | 27 | 6 | 6 | 6 | 24 |

Source: 2001 Small Area Microdata, Office for National Statistics (2006a).

Figure 8.6 Young people by ethnicity and amount of care provided: North East region



Source: 2001 Small Area Microdata, Office for National Statistics (2006a).

9. Older carers in the North East

In the region, there were 45,971 carers aged 65 or over. This figure amounts to 17% of all carers in the region. Of these older carers:

- 19,826 (43% compared with 36% in England as a whole) regularly provide 50 or more hours of care per week
- 1,408 were over 85 years old (among them 769 providing 50+ hours of care)
- 11,227 (24% compared with 20% in England as a whole) were themselves in poor health
- 6,221 (55% compared with 50% in England as a whole) older carers in poor health provided 50 or more hours care per week

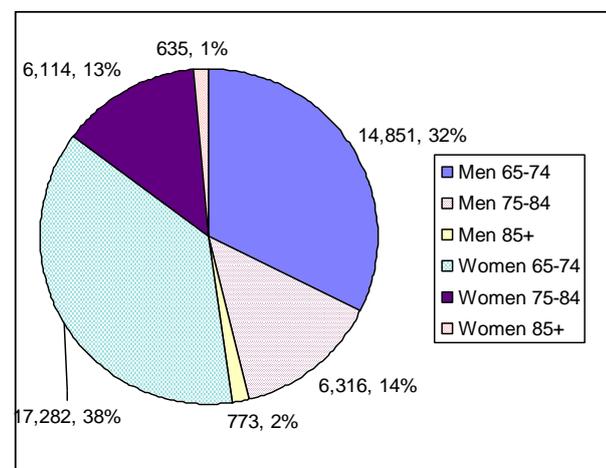
Table 9.1 Older people aged 65+ by age, sex, health status and the amount of care they provide: North East region

| | Male non-carers | Men caring for: | | | Female non-carers | Women caring for: | | |
|------------------------------|-----------------|-----------------|-------------|-----------|-------------------|-------------------|-------------|-----------|
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| ALL (numbers) | 146,695 | 9,780 | 2,625 | 9,535 | 203,448 | 10,911 | 2,829 | 10,291 |
| 65-74 | 90,049 | 7,256 | 1,734 | 5,861 | 104,424 | 8,249 | 2,048 | 6,985 |
| 75-84 | 47,826 | 2,293 | 805 | 3,218 | 76,161 | 2,425 | 696 | 2,993 |
| 85+ | 8,820 | 231 | 86 | 456 | 22,863 | 237 | 85 | 313 |
| Poor health (numbers) | 40,450 | 1,693 | 667 | 3,033 | 59,910 | 1,869 | 777 | 3,188 |
| 65-74 | 22,482 | 1,136 | 425 | 1,797 | 25,751 | 1,275 | 517 | 1,958 |
| 75-84 | 14,688 | 488 | 223 | 1,060 | 24,860 | 525 | 230 | 1,109 |
| 85+ | 3,280 | 69 | 19 | 176 | 9,299 | 69 | 30 | 121 |
| Poor health (%) | 28 | 17 | 25 | 32 | 29 | 17 | 27 | 31 |
| 65-74 | 25 | 16 | 25 | 31 | 25 | 15 | 25 | 28 |
| 75-84 | 31 | 21 | 28 | 33 | 33 | 22 | 33 | 37 |
| 85+ | 37 | 30 | 22 | 39 | 41 | 29 | 35 | 39 |

Source: 2001 Census, Standard Tables, Crown Copyright 2003.

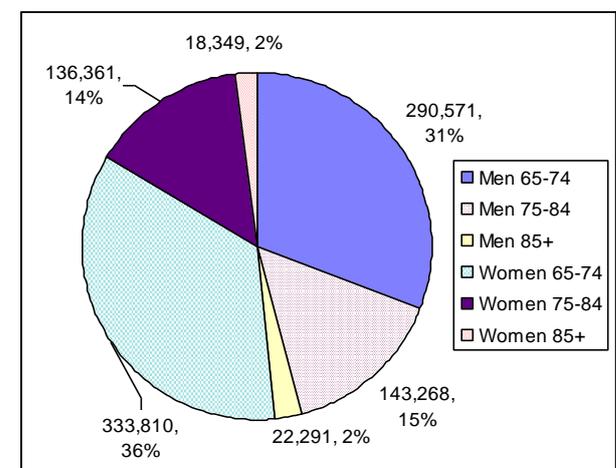
Over two thirds of older carers are aged 65-74 (Figure 9.2a,b). In the older age groups, men are more likely to be carers than women, although people aged 85 and over are less likely to be carers than people aged 65-84 (Figure 9.3). However, men and women aged 85 and over who are carers are more likely regularly to provide 50 or more hours of care each week (59% of men carers and 49% of women carers), compared with 39% and 40% of men and women carers aged 65-74.

Figure 9.2a Older carers by age and sex: North East region



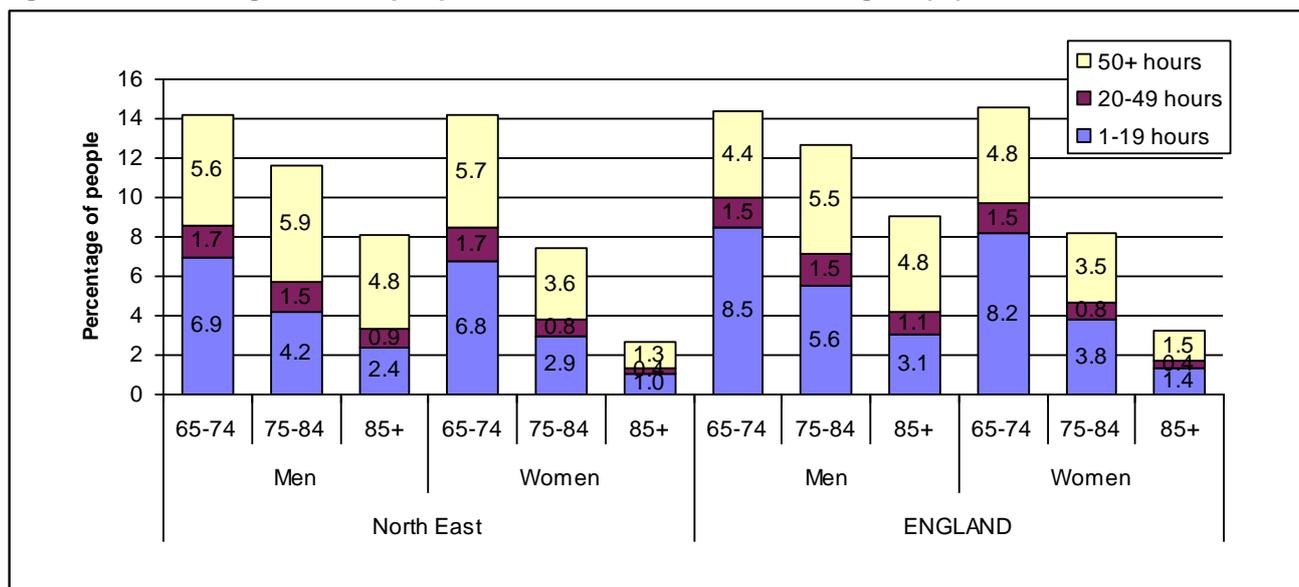
Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Figure 9.2b Older carers by age and sex: England



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Figure 9.3 Percentage of older people who are carers: North East region (%)



Source: 2001 Census, Standard Tables, Crown Copyright 2003.

Table 9.4 presents some of the characteristics of people in these older age groups by the amount of care they provide. This shows that older carers are more likely than non-carers to:

- Live with a person who has a LLTI
- Live in housing that is rented from the local authority or Housing Association
- Live with one other person aged 65 and over

Table 9.4 Household/family situation of older people: North East region (%)

| | North East | | | | ENGLAND | | | |
|--|------------|--------------------|-------------|-----------|------------|--------------------|-------------|-----------|
| | Non-carers | People caring for: | | | Non-carers | People caring for: | | |
| | | 1-19 hours | 20-49 hours | 50+ hours | | 1-19 hours | 20-49 hours | 50+ hours |
| Co-resident with a person with a LLTI | 26 | 46 | 83 | 94 | 22 | 40 | 79 | 94 |
| Household tenure | | | | | | | | |
| Owns/buying with a mortgage | 57 | 80 | 78 | 60 | 67 | 84 | 75 | 70 |
| Rents - from LA/HA | 33 | 17 | 20 | 35 | 21 | 11 | 19 | 24 |
| Rents - private | 5 | 3 | 2 | 5 | 7 | 4 | 5 | 6 |
| Communal establishment | 5 | 0 | 0 | 0 | 5 | 0 | 0 | 0 |
| Family type by sex | | | | | | | | |
| Men | | | | | | | | |
| Lives in CE | 3 | 0 | 0 | 0 | 3 | 0 | 0 | 0 |
| Live alone | 27 | 17 | 3 | 2 | 24 | 14 | 7 | 1 |
| Lives with one other person 65+ | 43 | 50 | 65 | 65 | 45 | 50 | 61 | 69 |
| All other types of household | 27 | 34 | 32 | 33 | 28 | 35 | 32 | 30 |
| Women | | | | | | | | |
| Lives in CE | 6 | 1 | 0 | 0 | 6 | 0 | 0 | 0 |
| Live alone | 49 | 26 | 10 | 3 | 46 | 31 | 13 | 2 |
| Lives with one other person 65+ | 30 | 53 | 56 | 65 | 32 | 52 | 59 | 70 |
| All other types of household | 15 | 20 | 34 | 32 | 16 | 17 | 28 | 28 |
| No access to car | 54 | 29 | 43 | 48 | 41 | 19 | 28 | 35 |

Source: 2001 Census Individual SAR, Office for National Statistics (2006b).

Note: CE – Communal Establishments such as a retirement/nursing homes.

10. Care and support in the North East region: future challenges

The North East region is very diverse covering both extremely rural areas and one of England's largest cities. Some of the urban areas within the region suffer very high levels of deprivation. The 2007 Index of Multiple Deprivation (DCLG 2007) shows that almost a fifth (18%) of the North East's 1,657 small areas (each small area covers on average 1,500 residents) were among the 10% most deprived areas of the country. In the region the most deprived areas are found in Sunderland, Middlesbrough and Newcastle upon Tyne. People living in deprived areas have lower life expectancy at birth than people in other areas, and are more likely to experience long periods in poor health at the end of their lives (Rasulo et al. 2007). Deprivation is associated with a higher prevalence of unpaid care (Young et al. 2005), as well as with high levels of illness, poverty, worklessness and social exclusion. While recent advances in health and medicine mean that people with long-term health problems have longer life-expectancy, and enable a higher proportion of children with chronic poor health or serious disabilities to survive into adulthood, these welcome developments also bring increasing demand for care.

In urban areas, the region's relatively diverse population also presents other challenges: with the numbers of older people in ethnic minority groups rapidly increasing (from just 1,215 in 1991 to 3,241 in 2001, and now thought to be 5,000 (ONS 2009)), meeting their needs and those of their carers presents some providers and the health and social care system with a growing demand for sensitive, appropriately tailored support.

The region's rural areas present particular challenges which include: a relatively high proportion of older people; more limited access to service; and challenging transport issues, as public transport may be infrequent or costly, and many sick and disabled people and their carers do not have private cars.

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