

Valuing Carers 2022: Scotland

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Foreword

Richard Meade,
Director, Carers Scotland



Scotland's unpaid carers play a crucial role in our society providing hours of care and support to family members, friends and neighbours who couldn't get by without that help. Two thirds of all people living in Scotland will one day take on an unpaid caring role.

Scotland's 2022 Census found over 627,700 unpaid carers. Although we believe that this still underestimates the true number of Scotland's unpaid carers it does show a vital trend that Scotland's unpaid caring population is growing, and more and more carers are caring for longer and longer hours.

With Scotland's population ageing and more people living longer with multiple health conditions, and at the same time, our health and social care systems struggling to meet demand, we believe that this trend will continue, and even accelerate. We particularly expect to see more carers providing intense caring roles of over 35 hours per week.

With this growing demand on unpaid carers, it is important that we recognise and understand the contribution that they make to our health and social care system, both nationally and locally.

This report and the research behind it demonstrates the significant contribution that carers currently make and what it would cost the state to replace the care they provide. The truth is that without unpaid carers our health and social care system would simply collapse.

There is a distinct gender dynamic to unpaid caring with more women than men taking on caring roles, particularly those of working age, which can have a significant impact on their finances and health, happiness and relationships both in the short term and when they reach retirement. Asking women to pay this personal financial cost in order to care, while at the same time making such a significant contribution to our society is unfair and unjust and must be addressed.

We must do much more to support all our unpaid carers to ensure they cannot only continue to care, but also have a good quality of life alongside their caring role. Unpaid carers need more support to ensure they get a break from caring, greater financial support and support to enable them to stay in employment alongside their caring role if they want to, and they need support to help their health and wellbeing.

Richard Meade
Director, Carers Scotland

Introduction

Professor Matt Bennett
Centre for Care,
University of Birmingham



To mark Carers Rights Day 2024, we've collaborated with Carers Scotland to put a financial value to the contributions of unpaid carers in Scotland.¹ The support that unpaid carers provide far exceeds any monetary value that we can assign to the lifeline that they provide for the people they support. However, assigning a monetary value helps us to recognise and highlight the essential role unpaid carers play in health and social care systems - systems that would collapse without them.

In the UK, the majority of care that is provided to support people to manage daily activities (usually due to long-term illness, disability, or older age) is done so at home by family, friends and neighbours. Our previous work demonstrates that we will all become carers at some point in our lives, but that some of us are much more likely to experience it than others.² Thousands of us start our care journeys every day,³ which often significantly impacts on our friendships, finances, health and happiness.⁴

This new research highlights the growing financial value of unpaid care in Scotland, which reached an astonishing £15.9 billion in 2022. To put this in context, the NHS budget for Scotland in 2022/2023 was £17.8 billion.⁵ The value of unpaid care was also around four times the expenditure on adult social services in Scotland that year.⁶ Over the past decade, the monetary contribution of carers has risen by 19.2%. People are also providing more hours of unpaid care, with an increase seen across all Local Authorities. These findings underscore the crucial role unpaid carers play in society and the significant savings they provide to health care budgets.

This research uses data from Census 2011 and Census 2022 from the National Records of Scotland (NRS) and the UK Household Longitudinal Study (Understanding Society) to inform our estimates. We are incredibly grateful to NRS and the ESRC, respectively, for funding, collecting and making these data assets available to the public.

This is the final report in our Valuing Carers series, which seeks to put a monetary value to the contributions of unpaid carers and raise awareness of their invaluable role across the UK's four nations.^{7,8} As always, I'm incredibly grateful for the opportunity to work with, and learn from, wonderful colleagues as part of our ongoing work - this research has been a collaboration between Dr Jingwen Zhang, Dr Maria Petrillo and myself in the Centre for Care; and Richard Meade and Fiona Collie at Carers Scotland.

Matthew Bennett

Professor Matt Bennett,
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- 1 The authors gratefully acknowledge the support of the Economic and Social Research Council (award ref. ES/W002302/1).
- 2 Zhang, Y., Bennett, M. R., and Yeandle, S. (2019) 'Will I Care: The likelihood of being a carer in adult life'. London: Carers UK.
- 3 Petrillo, Bennett and Pryce (2022). Cycles of caring: transitions in and out of unpaid care. London: Carers UK.
- 4 Zhang, Y and Bennett, M. R. (2024). 'Insights Into Informal Caregivers' Well-being: A Longitudinal Analysis of Care Intensity, Care Location, and Care Relationship' The Journals of Gerontology: Series B Psychological Sciences & Social Sciences,79(2)1-12.
- 5 Audit Scotland. (2024). NHS in Scotland 2023. Edinburgh: Audit Scotland.
- 6 Scottish Government (2024). Supplementary Adult Social Care Expenditure Data by Client Group (LFR SC): 2022-23.
- 7 Petrillo, M and Bennett, M.R. (2023) Valuing Carers 2021: England and Wales. London: Carers UK.
- 8 Zhang, J., Petrillo, M. and Bennett, M.R. (2023) Valuing Carers 2021: Northern Ireland. Belfast: Carers Northern Ireland.

Key findings



In 2022, the monetary value of the time that unpaid carers dedicated to caring is estimated at £15.9⁹ billion, marking a substantial 19.2% increase in real terms since 2011. This figure highlights that unpaid carers are essential to the functioning of our health and social care system, providing vital support that keeps it running.

The economic value of the contributions made by unpaid carers in Scotland is nearly the value of the NHS budget for Scotland, which in 2022/2023 was £17.8 billion.¹⁰ This value is also roughly four times what local authorities spent on adult social care services in the same year¹¹.

The estimated value highlights the crucial role of unpaid carers in Scotland, demonstrating how they save the public purse incredible amounts of money every week, day, and hour throughout the year:

- **£15.9 billion per year**
- **£306.2 million per week**
- **£43.7 million per day**
- **£1.9 million per hour.**

The growth in the economic value of unpaid care in Scotland was attributed to several factors including the increase in the number of unpaid carers and the increasing intensity of care provided.

Both the number of unpaid carers and the intensity of care has increased between 2011 and 2022 in Scotland:

- 627,719 people provided unpaid care in 2022, which was an increase of 27.5% (135,488) people since 2011.
- The percentage of people providing 20-49 hours of care per week rose from 1.7% in 2011 to 2.4% in 2022. The percentage of people providing 50 or more hours of care per week increased from 2.7% in 2011 to 2.9% in 2022.

The increases in the number of unpaid carers and the intensity of care could be due to the following reasons:

- Population ageing: The percentage of people aged 65 and over was 20.0% in 2022 up from 16.8% in 2011.
- Increase in long-term illnesses, conditions and disabilities: The percentage of people reporting long-term physical or mental health issues or disabilities increased considerably from 2011 to 2022.

⁹ This is likely to be an underestimation. Please see methodological detail in the 'Findings and Methodology' section, and robustness checks in the appendix.

¹⁰ Audit Scotland. (2024). *NHS in Scotland 2023*. Edinburgh: Audit Scotland.

¹¹ Scottish Government (2024). *Supplementary Adult Social Care Expenditure Data by Client Group (LFR SC): 2022-23*.

Findings and methodology

Scotland's Census 2022 included the following question on the provision of unpaid care:

Do you look after, or give any help or support to family members, friends, neighbours or others because of either long-term physical / mental ill-health / disability; or problems related to old age? Do not count anything you do as part of your paid employment.



The information on the provision of unpaid care is drawn from Scotland's Census 2011 and Census 2022. These data sources provide the public and policymakers with comprehensive information on the support that unpaid carers provide for people due to long-term disability, illness or older age.

Measuring the value of unpaid care comprehensively is difficult as its true value in terms of love, respect and duty is unquantifiable. Nevertheless, attaching a monetary value to unpaid care is a powerful way to acknowledge and highlight the immense contribution that unpaid carers make to society, and the health and social care system in Scotland.

Table 1 presents the number and age-standardised proportions of people providing unpaid care by hours of care and gender in Scotland¹². The result shows that the proportion of people providing unpaid care was 11.8% in 2022, which is higher than both 2011 (9.8%) and 2001 (10.5%), after accounting for the effects of population growth and differences in age profile. The increase from 2011 to 2022 was observed for both men and women.

An increase in care intensity - measured by the number of hours of unpaid care - is also observed over the past decade. The proportion of people who provided 20-49 hours of unpaid care per week increased from 1.7% in 2011 to 2.4% in 2022. Moreover, the proportion of people providing the most intensive care (50 or more hours per week) rose from 2.7% in 2011 to 2.9% in 2022. This increase was more pronounced among women, with the proportion rising from 3.0% in 2011 to 3.3% in 2022.

¹² Age-standardised proportions are used throughout the report whenever proportions of unpaid carers are mentioned. The age composition affects the proportion of unpaid carers within a population, making age-standardised proportions more appropriate and valid than crude percentages when making comparisons between populations over time or geographies, as it can remove the effect of population ageing.

Table 1: Total number and age-standardised proportions of unpaid carers by hours of care in Scotland, 2001-2022

	2022 No. of unpaid carers	2022 (%)*	2011 No. of unpaid carers	2011 (%)*	2001 No. of unpaid carers	2001 (%)*
Total						
19 hrs or less	350,671	6.5%	273,333	5.4%	304,387	6.5%
20-49 hrs	124,724	2.4%	86,816	1.7%	60,120	1.3%
50 hrs or more	152,324	2.9%	132,082	2.7%	115,427	2.7%
Total	627,719	11.8%	492,231	9.8%	479,934	10.5%
Men						
19 hrs or less	144,899	5.6%	110,272	4.5%	122,267	5.6%
20-49 hrs	51,974	2.1%	36,362	1.6%	23,053	1.1%
50 hrs or more	61,681	2.4%	53,974	2.4%	45,533	2.5%
Total	258,554	10.1%	200,608	8.5%	190,853	9.2%
Women						
19 hrs or less	205,772	7.5%	163,061	6.3%	182,120	7.5%
20-49 hrs	72,746	2.7%	50,454	1.9%	37,067	1.5%
50 hrs or more	90,643	3.3%	78,108	3.0%	69,894	2.9%
Total	369,161	13.5%	291,623	11.2%	289,081	12.0%

Source: National Records of Scotland (NRS) Census 2022, 2011 and 2001.

Note: * indicates age-standardised proportion. The age-standardised proportions for 2022 and 2011 were provided by the NRS, while the proportion for 2001 were calculated by the authors.

To estimate the economic value of unpaid care, we calculated the total hours of unpaid care provided by the Scottish population per year and then multiplied that figure by the equivalent hourly rate for replacement care (home care). The unit cost for replacement care was set at £23 per hour in 2022¹³ and £18 per hour in 2011¹⁴, based on official estimates of the weekday hourly rate for a home care worker (for a full explanation of the method used to calculate the final value of caring activities, see Appendix B).

¹³ The 2022 hourly cost of home care, Unit Costs of Health and Social Care 2022 (Jones et al. (2022) Unit Costs of Health and Social Care 2022, Personal Social Services Research Unit, University of Kent, Canterbury.)

¹⁴ The 2011 hourly cost of home care, Unit Costs of Health and Social Care 2011 (Curtis et al. (2011) Unit Costs of Health and Social Care 2011, Personal Social Services Research Unit, University of Kent, Canterbury.)



Table 2: Nominal value of unpaid carers' contributions and real change in carers' contributions (%) in Scotland, 2011 and 2022

	2022 No. of unpaid carers	2011 No. of unpaid carers	Value 2022 (£m)	Value 2011 (£m)	Change 2022-2011 (%)
19 hrs or less	350,671	273,333	2,072	1,443	11.5%
20-49 hrs	124,724	86,816	4,744	2,755	33.8%
50 hrs or more	152,324	132,082	9,109	6,181	14.5%
Total	627,719	492,231	15,924	10,379	19.2%

Source: Authors' calculations based on Census 2011, and 2022 in Scotland (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Curtis et al, 2011; Jones et al, 2022). Columns 'Value 2022' and 'Value 2011' represent the nominal value of unpaid carers' contributions (not adjusted for inflation) to provide discrete estimates for the value of unpaid care in 2022 and 2011. However, to enable comparisons in the value of unpaid care between 2022 and 2011, the percentage change in unpaid carers' contributions considers the real unit cost, adjusted for inflation using the Consumer Prices Index including owner occupiers' housing cost (CPIH). More details on the methodology are provided in Appendix B (Table B.1).

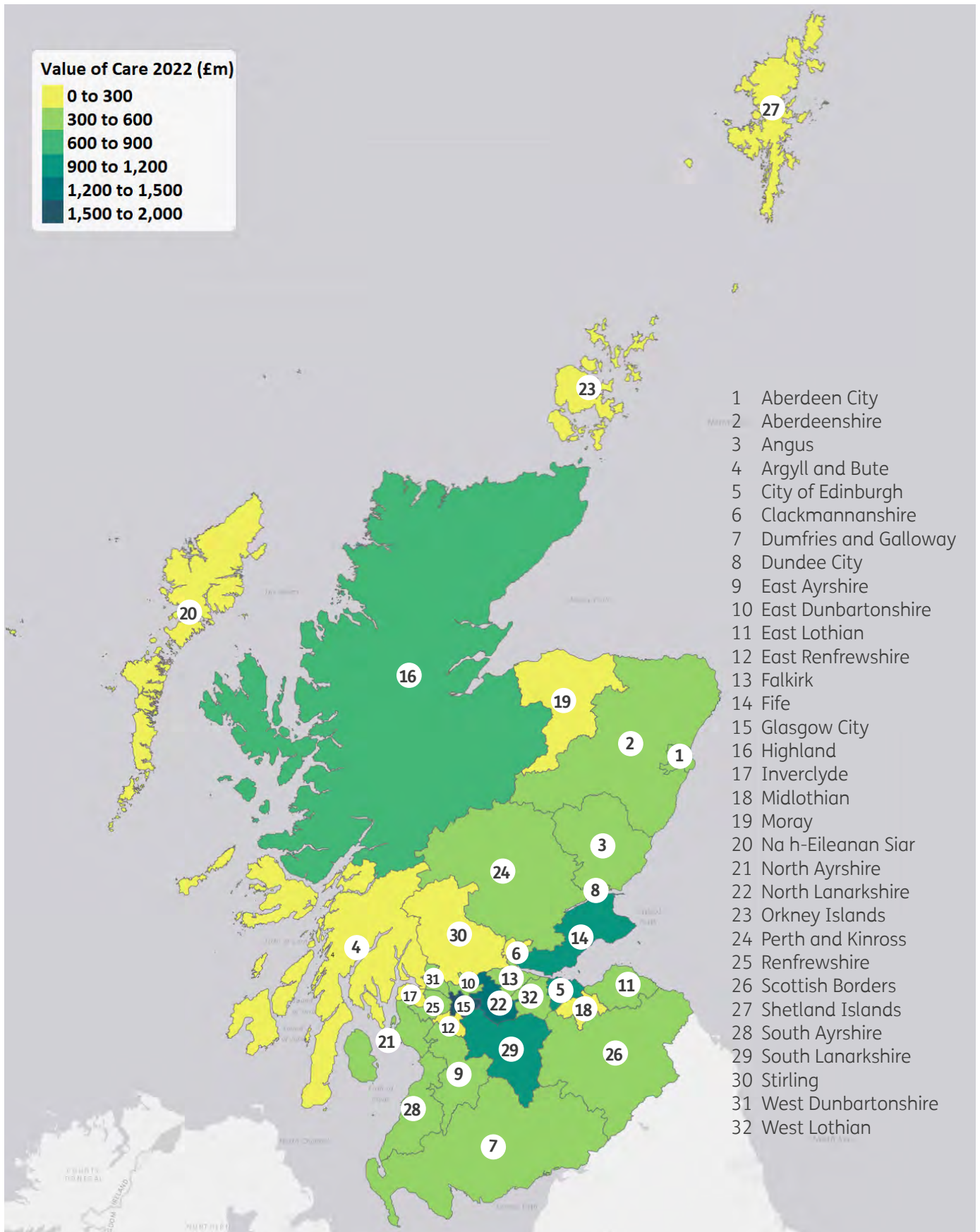
Table 2 presents the estimated economic value of unpaid care in Scotland, which rose significantly by 19.2% from 2011 to 2022. In 2022, the contributions of unpaid carers in Scotland translated into substantial savings for the public purse every week, day, and hour of the year:

- **£15.9 billion per year**
- **£306.2 million per week**
- **£43.7 million per day**
- **£1.9 million per hour.**

We also calculated the value of unpaid care in each local authority across Scotland, as illustrated in Figure 1. Five local authorities stand out, with the value of unpaid care exceeding £1 billion: Glasgow City, North Lanarkshire, Fife, South Lanarkshire, and the City of Edinburgh (also see Table A.1 in Appendix A). The ranking of the value of unpaid care among these local authorities largely corresponds to the size of the ageing population. However, although the City of Edinburgh has the second-largest population after Glasgow, its value of unpaid care is lower than South Lanarkshire, North Lanarkshire, and Fife. This is primarily because the proportion of people providing the most intensive care (50 hours or more) in the City of Edinburgh is one of the lowest among all local authorities, at 2.0%. The increase in the value of unpaid care is observed across all local authorities, with Midlothian experiencing the sharpest increase (by 34%).



Figure 1: Geographic variation in the value of unpaid carers' contributions in Scotland (2022)



Source: Authors' calculations based on Scotland's Census 2022 (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Jones et al, 2022). The unit cost is the nominal value of unpaid carers' contributions (not adjusted for inflation).

Comparison with other nations in the UK



Table 3 compares the proportion of unpaid carers and the economic value of unpaid care between Scotland, England, Wales and Northern Ireland.

It should be noted that each nation's most recent Censuses were not all conducted in the same year, so they are not directly comparable. Scotland's most recent Census was conducted in 2022, whilst the other three nations conducted their most recent Censuses in 2021. Each nation did conduct its previous Census in the same year- 2011. Moreover, the Census in Scotland includes data on the population aged 3 and above, whereas the Censuses in Northern Ireland, England, and Wales capture the population aged 5 and above. Another point to note is that the cost estimated by the Personal Social Services Research Unit (PSSRU) was used as the unit cost for replacement care in England, Wales, and Scotland, while estimates provided by the Department of Health in Northern Ireland were used for the unit cost in Northern Ireland.

- According to the most recent Census, the proportion of unpaid carers in Scotland was higher than in England and Wales but lower than in Northern Ireland. This marks a shift from 2011 when Scotland had the lowest proportion of unpaid carers among the four nations.
- Scotland is the only nation that experienced an increase in the proportion of unpaid carers (+2.0%) between the two recent Census years, while England (-2.5%), Wales (-2.5%) and Northern Ireland (-0.4%) all experienced decreases.
- Scotland is the only nation where the proportion of people providing both less intensive care (19 hours or less per week) and more intensive care (50 hours or more per week) increased. In contrast, other nations saw a decline in the proportion of people providing less intensive care.
- The timing of the most recent Census may have contributed to the differences between Scotland and other nations. Northern Ireland, England and Wales conducted their Censuses during the COVID-19 pandemic when restrictions on social distancing and household mixing were still in place, Scotland's Census took place after most of these restrictions had been eased.
- The 2021 Census in England, Wales, and Northern Ireland revised the wording of care-related questions, removing examples of individuals who might receive care. This change could have contributed to the lower reported number of unpaid carers in 2021 compared to 2011 in Northern Ireland, England and Wales. However, in Scotland, the wording of care-related questions remained unchanged in the most recent two Censuses.
- In addition, the PSSRU unit cost of replacement care decreased from £25 in 2021 to £23 in 2022, which may explain why the change in the value of unpaid care in Scotland was less substantial compared to England and Northern Ireland.

Table 3: Proportion of unpaid carers and the value of care by hours of care and nation, 2021/22 and 2011

	2021/22* % of unpaid carers	2011 % of unpaid carers	Value 2021/22* (£m)	Value 2011 (£m)	Change 2021/22* - 2011 (%)
Scotland					
19 hrs or less	6.5%	5.4%	2,072	1,443	11.5%
20-49 hrs	2.4%	1.7%	4,744	2,755	33.8%
50 hrs or more	2.9%	2.7%	9,109	6,181	14.5%
Total	11.8%	9.8%	15,924	10,379	19.2%
England					
19 hrs or less	4.4%	7.2%	16,262	17,386	-21.4%
20-49 hrs	1.8%	1.5%	44,250	21,667	71.6%
50 hrs or more	2.7%	2.7%	91,310	58,791	30.5%
Total	8.9%	11.4%	151,822	97,845	30.3%
Wales					
19 hrs or less	4.7%	7.4%	969	1,316	-38.1%
20-49 hrs	2.2%	1.9%	2,852	1,578	51.8%
50 hrs or more	3.6%	3.7%	6,944	4,855	20.1%
Total	10.5%	13.0%	10,766	7,749	16.7%
Northern Ireland					
19 hrs or less	5.7%	7.4%	580	610	-18.2%
20-49 hrs	3.0%	2.2%	1,776	836	82.6%
50 hrs or more	4.0%	3.6%	3,470	2,073	43.8%
Total	12.8%	13.2%	5,826	3,519	42.3%

Source: The proportion of unpaid carers and value of care by hours of care in England and Wales was taken from the report, Valuing Carers 2021: England and Wales (Petrillo and Bennett, 2023). The figures for Northern Ireland were taken from the report, Valuing Carers 2021: Northern Ireland (Zhang et al., 2023). Columns 'Value 2021/22' and 'Value 2011' are the nominal values of unpaid carers' contributions (which are not adjusted for inflation). The percentage change in unpaid carers' contributions considers the real unit cost, adjusted for inflation using the Consumer Prices Index including owner occupiers' housing cost (CPIH).

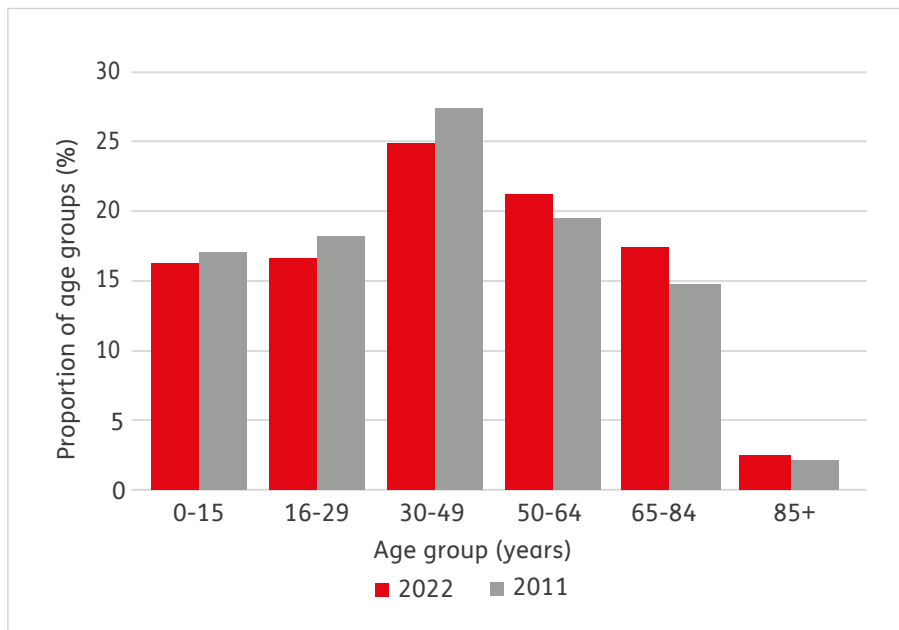
Note: * 2022 for Scotland and 2021 for England, Wales and Northern Ireland.

Why has the number of unpaid carers increased?

Ongoing population ageing in Scotland

The increase in the proportion of unpaid carers is closely linked to shifts in Scotland's age profile. The number of people aged 65 and over grew from 890,300¹⁵ (16.8%) in 2011 to 1,091,100 (20.0%) in 2022. Notably, the percentage of those aged 85 and above saw a significant increase, rising from 2.0% in 2011 to 2.4% in 2022. Older adults are more prone to experiencing functional decline, which increases demand for care.

Figure 2: The age structure in Scotland, 2011 and 2022



Source: Authors' calculations based on Scotland's Census 2022 and Census 2011 (NRS).



Rise in long-term illnesses, conditions and disabilities

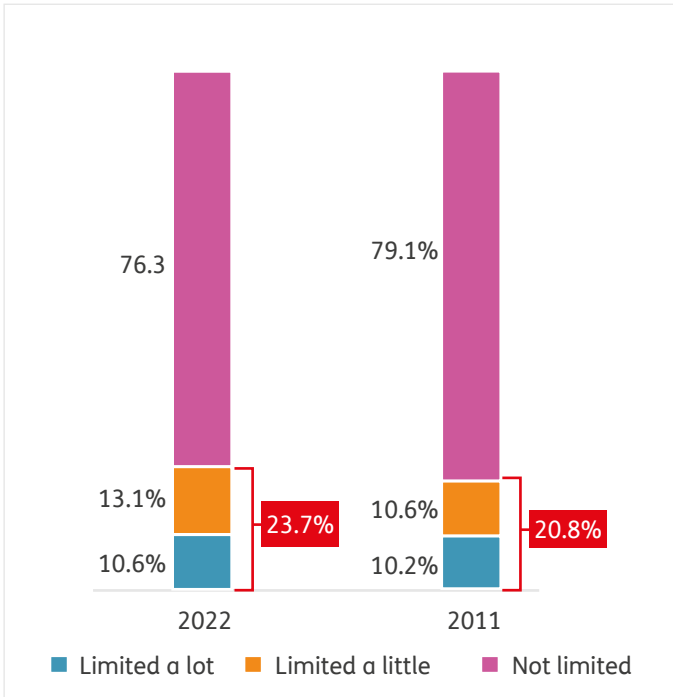
In 2022, 1,310,900¹⁶ people reported having a health problem or disability that limited their day-to-day activities, representing a 26.0% increase (an additional 270,500 people) since 2011. Notably, 10.6% of people indicated that their daily activities were limited "a lot", accounting for a rise of 79,600 people over this period (see Figure 3). Among various long-term health conditions, the most significant increases were observed in relation to mental health conditions and physical disabilities. The proportion of people with long-term

mental health conditions surged from 4.4% in 2011 to 11.3% in 2022 (See Figure 5). Similarly, those reporting long-term physical disabilities rose from 6.7% to 9.7%. Additionally, the percentage of people rating their health as "bad" or "very bad" increased from 5.9% in 2011 to 6.8% in 2022 (See Figure 4).

These figures indicate a growing prevalence of long-term illnesses, conditions, and disabilities; along with a general decline in overall health, even after accounting for the effects of population ageing. The health challenges also contribute to the increase in the need for long-term care support.

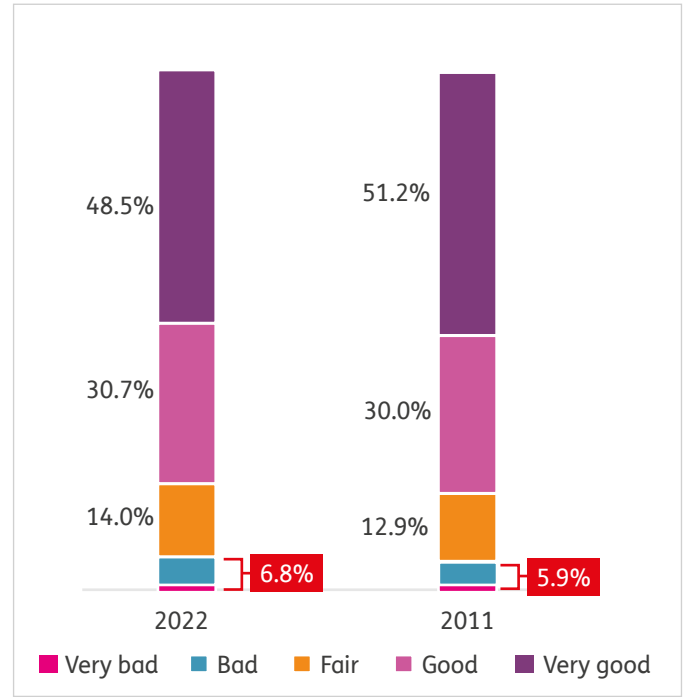
¹⁵ The numbers of people in this section have been rounded to the nearest 100.

Figure 3: Proportion of people with long-term disability or health problems in Scotland, 2011 and 2022



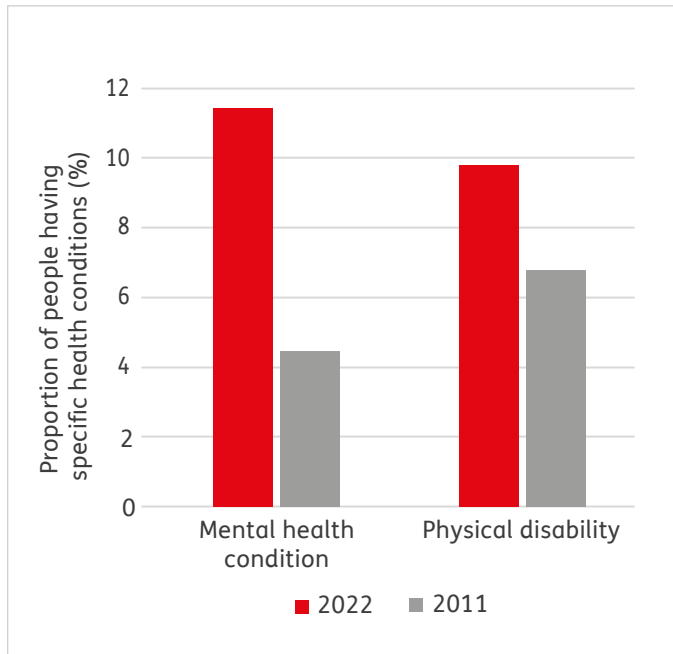
Source: Authors' calculations based on Scotland's Census 2022 and Census 2011 (NRS). All the proportions are age standardised.

Figure 4: The distribution of general health status in Scotland, 2011 and 2022



Source: Authors' calculations based on Scotland's Census 2022 and Census 2011 (NRS). All the proportions are age standardised.

Figure 5: Proportion of people with specific long-term health conditions, 2011 and 2022



Source: Authors' calculations based on Scotland's Census 2022 and Census 2011 (NRS). All the proportions are age standardised.



16 The numbers of people in this section have been rounded to the nearest 100.

Recommendations



Given the value of unpaid carers' support, we need a new social contract for carers which recognises not just their contributions to society, but their need for specific rights, support and recognition.

This should have the following goals supporting all aspects of carers' lives:

- Awareness amongst the general population.
- Support and rights in employment.
- Better rights, recognition and support from the NHS and social care.
- Sufficient support from health and social care to protect their health and wellbeing.
- Freedom from financial hardship, and a recognition of the additional impact and costs of caring.
- Prevention of loneliness and the ability to maintain relationships.
- Freedom from discrimination and promotion of equality.

We would like to see everyone, from employers, public authorities, the Scottish and UK Governments, our elected representatives and community organisations, understand the value of unpaid care and caring, and make concrete changes to improve carers' lives and wellbeing.

Specific recommendations

The Scottish Government should urgently address the underfunding of social care and promote a carer friendly NHS by:

- Reforming social care and urgently providing increased investment for social care, putting it on a sound footing to deliver sustainable care in the future.
- Investing in and seeking early delivery of a right to a break for carers to enable carers to access the breaks they need and improve their mental and physical health and wellbeing.
- Committing to developing a focused workforce strategy for social care to put the sector on a sustainable footing, improving the quality of care provided, attracting new talent to the profession and planning for demand to avoid future crises.
- Introducing a new responsibility on the NHS to identify and promote carers' health and wellbeing – this would help to keep carers in better health and reduce the burden on the NHS, as well as social care, in the event of a carer breakdown.
- Providing additional training, including as part of induction, to all NHS staff to deliver carers rights under the Carers (Scotland) Act 2016 and monitor its delivery.

- Providing the necessary investment in the NHS to reduce waiting times for treatments for unpaid carers and the people that they care for. This includes treating caring as a factor for more urgent treatment appointments, in primary and secondary care, in recognition of the fact that waiting for a necessary treatment is likely to hinder their ability to continue to provide care for the people that they support.
- Introducing a specific amount of funding to target health and care support specifically at carers who are on the waiting list or caring for someone on the waiting list to help them manage care and minimise further deterioration in their health.

Both Scottish and UK Governments should provide improved financial support for unpaid carers.

The Scottish Government should:

- Raise the earnings limit for Carer Support Payment to at least 21 hours per week pegged to the National Living Wage to better enable more unpaid carers to continue with paid employment alongside their caring duties. This must include setting into law annual uprating for inflation and for increases to the National Living Wage.
- Publish an updated plan for priority improvements to Carer Support Payment including, for example, an additional payment for those caring for more than one person and extended the run on of Carer Support Payment when the cared for person dies. We believe this run on should be paid for six months.
- Work with the UK Government to ensure that changes to Carer Support Payment and the introduction of a future Minimum Income Guarantee deliver new income for carers and have no financial detriment to carers when these changes interact with reserved social security benefits.
- Renew its commitment to deliver a pilot of a Minimum Income Guarantee for unpaid carers.
- Seek to reduce inescapable additional costs to carers and disabled people such as energy, transport and deliver its commitment to remove care charging.

The UK Government should:

- Increase the Carer Element and Additions under Universal Credit, Income Support and Pension Credit to the level of Carer Support Payment (£81.90 per week 2024/25 rate).
- Give unpaid carers in receipt of Universal Credit a Work Allowance to ensure that those with a capacity for work do not lose their entitlement if they undertake part time work alongside their caring duties.
- Create a mechanism to enable unpaid carers to access their State Pension up to 5 years earlier.
- Create auto-enrolment payments for carers in receipt of Carer's Allowance or Carer Support Payment to ensure that they continue to contribute to additional pensions.

The UK Government should support unpaid carers to juggle employment and care by:

- Setting a comprehensive UK wide plan for enabling, encouraging and supporting unpaid carers to stay in employment to achieve the aim of a growing, inclusive economy.
- Introducing right to paid carer's leave.
- Developing a plan to provide training and support to enable carers to return to paid work should they wish.

The Scottish Government should support unpaid carers to juggle employment and care by:

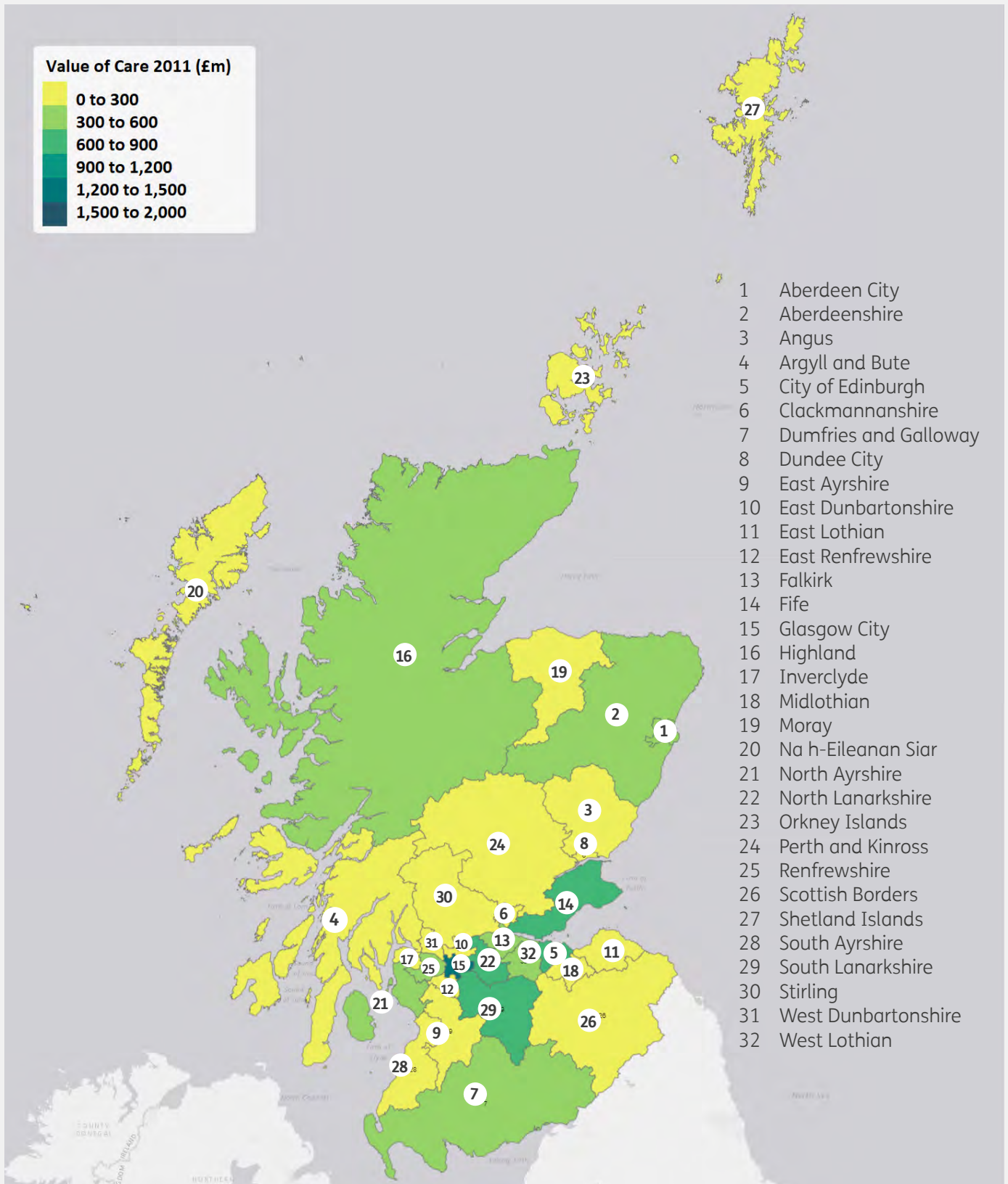
- Requiring all organisations receiving public contracts to be Carer Positive employers.
- Developing dedicated devolved employability planning to enable carers to return to paid work should they wish.

The UK Government should ensure that unpaid carers are not discriminated against by:

- Amending the Equalities Act 2010 to include caring as the 10th protected characteristic.

Appendix A

Figure A.1: Geographic variation in the value of unpaid carers' contributions in Scotland (2011)



Source: Authors' calculations based on Scotland's Census 2011 (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Curtis et al, 2011). The unit cost is the nominal value of unpaid carers' contributions (not adjusted for inflation).

Table A.1: Nominal value of unpaid carers' contributions in 2011 and 2022 and real change in carers' contributions by Local Authorities in Scotland (%)

Local Government District	2022 No. of unpaid carers	2011 No. of unpaid carers	Nominal values 2022 (£m)	Nominal values 2011 (£m)	Change 2022- 2011 (%)
Scotland					
Aberdeen City	18,887	15,571	450.4	302.0	16%
Aberdeenshire	25,252	19,398	577.3	364.3	23%
Angus	13,196	10,582	332.9	217.0	19%
Argyll and Bute	10,305	8,821	251.8	172.3	14%
City of Edinburgh	48,272	37,859	1,047.8	683.4	19%
Clackmannanshire	6,397	4,693	167.7	104.9	24%
Dumfries and Galloway	18,150	14,955	482.4	330.0	14%
Dundee City	16,843	13,072	456.3	292.9	21%
East Ayrshire	15,485	12,620	423.4	287.1	15%
East Dunbartonshire	13,897	11,374	311.5	207.5	17%
East Lothian	13,143	9,475	305.7	183.9	29%
East Renfrewshire	11,863	9,291	273.3	167.2	27%
Falkirk	19,817	15,056	504.2	323.3	21%
Fife	44,222	34,828	1,143.8	725.6	22%
Glasgow City	69,018	53,914	1,933.9	1,295.8	16%
Highland	26,179	20,993	637.6	421.2	18%
Inverclyde	10,596	8,252	299.8	191.5	22%
Midlothian	11,611	8,238	293.5	170.1	34%
Moray	9,460	7,809	233.0	161.1	12%
Na h-Eileanan Siar	3,387	2,660	78.3	53.6	14%
North Ayrshire	17,223	13,900	474.2	317.9	16%
North Lanarkshire	45,300	34,393	1,255.9	806.9	21%
Orkney Islands	2,539	1,978	55.9	37.3	16%
Perth and Kinross	17,925	13,308	421.4	255.4	28%
Renfrewshire	22,676	17,759	568.3	371.3	19%
Scottish Borders	13,126	10,346	302.8	196.9	19%
Shetland Islands	2,784	2,034	57.2	35.3	26%
South Ayrshire	13,622	11,709	352.0	250.5	9%
South Lanarkshire	42,375	32,796	1,102.3	701.1	22%
Stirling	10,729	8,265	248.7	162.4	19%
West Dunbartonshire	11,311	9,637	308.3	225.3	6%
West Lothian	22,117	16,645	572.6	363.8	22%

Source: Authors' calculations based on Census 2011 and Census 2022 in Scotland (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Curtis et al, 2011; Jones et al, 2022). Columns 'Value 2022' and 'Value 2011' represent the nominal value of unpaid carers' contributions (not adjusted for inflation). The percentage change in unpaid carers' contributions considers the real unit cost, adjusted for inflation using the Consumer Prices Index including owner occupiers' housing cost (CPIH).

Appendix B: Detailed methodology

1. Distribution of the hours of unpaid care

All our assumptions on the distributions of hours of unpaid care are based on survey evidence from the UK Household Longitudinal Study (calendar years 2021^{17,18}, and 2011¹⁹), also known as Understanding Society. As Understanding Society provides more granular information on the hours of care than the Census 2021/2011 (1 to 19 hours, 20 to 49 hours and 50 or more hours per week), it enabled us to obtain more specific and robust estimates for the hours of care.

In the Understanding Society dataset, people were identified as (unpaid) carers if they answered ‘yes’ to either of the following questions:

- “Is there anyone living with you who is sick, disabled or elderly whom you look after or give special help to (for example, a sick, disabled or elderly relative, husband, wife or friend etc)?”.
- “Do you provide some regular service or help for any sick, disabled or elderly person not living with you?”.

Hours of care per week were identified by asking survey participants the following questions:

- “Now thinking about everyone who you look after or provide help for, both those living with you and not living with you – in total, how many hours do you spend each week looking after or helping them?”
 - » “0–4 hours per week”
 - » “5–9 hours per week”
 - » “10–19 hours per week”
 - » “20–34 hours per week”
 - » “35–49” hours per week”
 - » “50–99 hours per week”
 - » “100 or more hours per week/continuous care”
 - » “Varies under 20”
 - » “Varies 20 hours or more”.

Specifically, the distribution of hours of care estimated using the Understanding Society dataset are as follows:

2022

- 152,324 unpaid carers provided 50 or more hours of care per week. We have assumed that these unpaid carers were all providing 50 hours of care per week. This is likely an underestimate.
- 124,724 unpaid carers provided 20–49 hours of care per week. Here we have assumed that 68% (84,812) of unpaid carers were providing, on average, 27 hours of care each week and 32% (39,912) 42 hours of care per week.
- 350,671 unpaid carers provided 1–19 hours of care per week. We have assumed that 62% (217,416) of this group were caring for 2 hours per week, 25% (87,668) for 7 hours per week, and 13% (45,587) for 15 hours per week.

2011

- 132,082 unpaid carers provided 50 or more hours of care per week. We have assumed that these unpaid carers were all providing 50 hours of care per week. This is likely an underestimate.
- 86,816 unpaid carers provided 20–49 hours of care per week. Here we have assumed that 54% (46,881) of unpaid carers were providing, on average, 27 hours of care each week and 46% (39,935) 42 hours of care per week.
- 273,333 unpaid carers provided 1–19 hours of care per week. We have assumed that 56% (153,066) of this group were caring for 2 hours per week, 26% (71,067) for 7 hours per week, and 18% (49,200) for 15 hours per week.

¹⁷ The decision to use the calendar year 2021 rather than 2022 was due to the fact that data from the 2022/23 Understanding Society survey has not yet been released. Additionally, the sample size of people interviewed in the calendar year 2022 within the 2021/22 wave was very low for those living in Scotland, making it unlikely to provide robust estimates. Therefore, we relied on the most recent available calendar year data (2021) to approximate the distribution of care hours. However, it is important to note that COVID-19 restrictions on household mixing and social distancing were still in place during 2021, which may lead to an underestimation of the total care hours provided in 2022.

¹⁸ University of Essex, Institute for Social and Economic Research. (2024). Understanding Society. [data series]. 12th Release. UK Data Service. SN: 2000053, DOI: <http://doi.org/10.5255/UKDA-Series-2000053>

¹⁹ University of Essex, Institute for Social and Economic Research. (2024). Understanding Society. [data series]. 12th Release. UK Data Service. SN: 2000053, DOI: <http://doi.org/10.5255/UKDA-Series-2000053>

2. Robustness checks

2.1 Real value versus nominal value

Table B.1 shows the value of unpaid carers' economic contributions in Scotland in real terms (inflation adjusted). After adjusting for inflation, the unit cost of replacement care is £19.1 per hour in 2022 and £19.2 in 2011. Accordingly, the real value of unpaid care in Scotland in 2021 is 13.2 billion, up from £11.1 billion in 2011.

According to Table B.1, in Scotland, carers' contributions to the care of others in 2022 are about:

- **£13.2 billion per year**
- **£254.1 million per week**
- **£36.3 million per day**
- **£1.5 million per hour.**

Table B.1: Change in the real value of unpaid carers' contributions in Scotland, 2011 and 2022

	2022 No. of unpaid carers	2011 No. of unpaid carers	Real value 2022 (£m)	Real value 2011 (£m)	Change 2022- 2011 (%)
Scotland					
19 hrs or less	350,671	273,333	1,719	1,541	11.5%
20-49 hrs	124,724	86,816	3,936	2,943	33.8%
50 hrs or more	152,324	132,082	7,559	6,604	14.5%
Total	627,719	492,231	13,215	11,088	19.2%

Source: Authors' calculations based on Census 2011, and 2022 in Scotland (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Curtis et al, 2011; Jones et al, 2022). Columns 'Value 2022' and 'Value 2011' represent the real value of unpaid carers' contributions (adjusted for inflation).



2.2 Disaggregation of the 50+ category

The estimated value of unpaid care shown in Table 2 is conservative. This is due to a lack of detailed information on how the hours were distributed among those providing 50 or more hours of care. As a result, it was assumed that all people in this category provided exactly 50 hours of care, although they are likely to provide more. To better approximate the true distribution of care hours, this section presents the results of a robustness check using data from the UK Household Longitudinal Study (see Appendix B.1), which allows us to distinguish between carers providing '50 to 99' hours of unpaid care and those offering '100 or more' hours per week. Specifically:

According to Table B.2, in Scotland, carers' contributions to the care of others in 2022 are about:

- **£22.6 billion per year**
- **£434.1 million per week**
- **£62.0 million per day**
- **£2.6 million per hour.**

2022	2011
<ul style="list-style-type: none"> • 152,324 unpaid carers provided 50 or more hours of care per week. We have assumed that of those unpaid carers, 27% were providing 50 to 99 hours and 73% were providing 100+ hours of care per week. 	<ul style="list-style-type: none"> • 132,082 unpaid carers provided 50 or more hours of care per week. We have assumed that of those unpaid carers, 11% were providing 50 to 99 hours and 89% were providing 100+ hours of care per week.

Table B.2: Nominal value of unpaid carers' contributions and real change in the value of unpaid carers' contributions in Scotland with the disaggregation of the 50+ category, 2011 and 2022

	2022 No. of unpaid carers	2011 No. of unpaid carers	Nominal value 2022 (£m)	Nominal value 2011 (£m)	Change 2022-2011 (%)
19 hrs or less	350,671	273,333	2,072	1,443	11.5%
20-49 hrs	124,724	86,816	4,744	2,755	33.8%
50 hrs or more	152,324	132,082	15,756	11,656	5.0%
Total	627,719	492,231	22,572	15,854	10.6%

Source: Authors' calculations based on Census 2011, and 2022 in Scotland (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Curtis et al, 2011; Jones et al, 2022). Columns 'Value 2022' and 'Value 2011' represent the nominal value of unpaid carers' contributions (not adjusted for inflation).

2.3 Unpaid carer's contributions by age groups

The value of unpaid care in Table 2 was calculated based on the entire population of individuals aged 3 years and above. To assess the contribution of unpaid carers of working-age people, we calculated the value of unpaid care by age groups, distinguishing the values contributed by younger carers (under 16 years old),

working-age carers (16-64 years old) and older carers (above 64 years old). The results are shown in Table B.3, which highlights an increase in the number of unpaid carers across all age groups. Specifically, the number of younger carers, working-age carers, and older carers rose by 36%, 27%, and 30%, respectively. The economic value of unpaid care provided by working-age carers amounted to £11.6 billion, reflecting a 19.8% increase from 2011 to 2022.

Table B.3: Nominal value of unpaid carers' contributions and real change in carers' contributions (%) by age groups in Scotland, 2011 and 2022

	2022 No. of unpaid carers	2011 No. of unpaid carers	Nominal value 2022 (£m)	Nominal value 2011 (£m)	Change 2022-2011 (%)
Under 16 years old					
19 hrs or less	10,289	7,660	60.8	40.4	16.8%
20-49 hrs	2,112	1,394	80.3	44.2	41.1%
50 hrs or more	1,251	948	74.8	44.4	31.0%
Total	13,652	10,002	215.9	129.0	30.0%
16 - 64 years old					
19 hrs or less	287,492	229,533	1,698.6	12,11.7	8.9%
20-49 hrs	102,712	70,934	3,906.4	2,250.8	34.8%
50 hrs or more	100,393	86,784	6,003.5	4,061.5	14.8%
Total	490,597	387,251	11,608.5	7,524.0	19.8%
Above 64 years old					
19 hrs or less	52,890	36,140	312.5	190.8	27.2%
20-49 hrs	19,889	14,488	756.4	459.7	27.8%
50 hrs or more	50,681	44,350	3,030.7	2,075.6	13.4%
Total	123,460	94,978	4,099.6	2,726.1	16.8%

Source: Authors' calculations based on Census 2011, and 2022 in Scotland (NRS) using the unit cost of replacement care as determined by the Personal Social Services Research Unit (Curtis et al, 2011; Jones et al, 2022). Columns 'Value 2022' and 'Value 2011' represent the nominal value of unpaid carers' contributions (not adjusted for inflation) to provide discrete estimates for the value of unpaid care in 2022 and 2011. However, to enable comparisons in the value of unpaid care between 2022 and 2011, the percentage change in unpaid carers' contributions considers the real unit cost, adjusted for inflation using the Consumer Prices Index including owner occupiers' housing cost (CPIH).

Note: The data released by NRS has undergone perturbation to ensure confidentiality. Therefore, the total number of unpaid carers in Table 2 and Table B.3 may not be the same.

2.4 Using the unit cost of Free Personal Care (FPC) in Scotland

Results reported in Table 2 are estimated based on unit costs provided by the Personal Social Services Research Unit (PSSRU). The method used by PSSRU for estimating unit costs has remained relatively consistent over time and is considered one of the most reliable sources for social care cost estimates, frequently used in both academic research and policy development. However, it is important to note that PSSRU unit costs are primarily derived from data in England and may not fully reflect costs specific to Scotland.

To provide estimates more relevant to Scotland, we also used the unit cost of Free Personal Care (FPC) for people aged 65 and above in Scotland (See Table B.4). This cost was calculated by dividing the annual expenditure on personal care services provided at home by the total number of hours of personal care provided each year. Using this method, the unit cost for home care is estimated at £21.1 in 2022²⁰ and £17.8 in 2011²¹. It is worth mentioning that FPC for individuals aged 18 to 64 was only introduced in 2019, so data for this age group in 2010/11 is not available. Therefore, all estimates are based on services provided to individuals aged 65 and over.

Table B.4: Nominal value of unpaid carers' contributions and real change in the value of unpaid carers' contributions in Scotland using the FPC unit cost, 2011 and 2022

	2022 No. of unpaid carers	2011 No. of unpaid carers	Nominal value 2022 (£m)	Nominal value 2011 (£m)	Change 2022-2011 (%)
19 hours or less	350,671	273,333	1,898	1,425	3.4%
20 to 49 hours	124,724	86,816	4,345	2,721	24.0%
50 hrs or more	152,324	132,082	8,344	6,106	6.1%
Total	627,719	492,231	14,587	10,252	10.5%

Source: Authors' calculations based on Census 2011, and 2022 in Scotland (NRS) using the unit cost of replacement care as determined by FPC unit costs (Scottish Government, 2012; 2023). Columns 'Value 2022' and 'Value 2011' represent the nominal value of unpaid carers' contributions (not adjusted for inflation).

According to Table B.4, in Scotland, carers' contributions to the care of others in 2022 are about:

- **£14.6 billion per year**
- **£280.5 million per week**
- **£40.1 million per day**
- **£1.7 million per hour.**

²⁰ Scottish Government (2023) [Free Personal and Nursing Care, Scotland, 2021-22](#).

²¹ Scottish Government (2012) [Free personal and nursing care, Scotland, 2010 -11](#).

Contact

Centre for Care

The Centre for Care is a research-focused collaboration between the Universities of Sheffield, Birmingham, Kent, Oxford and the London School of Hygiene and Tropical Medicine, the Office for National Statistics, Carers UK, the National Children’s Bureau, and the Social Care Institute for Excellence. Funded by the Economic & Social Research Council (award reference ES/W002302/1 ‘Centre for Care’) as one of its flagship research centres, it works with care sector partners and leading international teams to provide accessible and up-to-date evidence on care – the support needed by people of all ages who need assistance to manage everyday life.

Led at the University of Sheffield by Centre Director Professor Kate Hamblin and Deputy Director Professor Nathan Hughes, our work aims to make a positive difference in how care is experienced and provided in the UK and internationally by producing new evidence and thinking for policymakers, care sector organisations and people who need or provide care.

In studying care, we focus on ways of improving wellbeing outcomes and on the networks, communities and systems that support and affect people’s daily lives, working closely with external partners.



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Carers Scotland

Carers Scotland is Scotland’s membership charity for unpaid carers. We work to represent and support the over 627,000 people in Scotland who provide unpaid care for ill, older or disabled family members or friends – fighting for increased recognition and support for all carers and to ensure they have a voice in the issues that affect them.



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