

CARERSUK

IN POOR HEALTH

The impact of caring on health



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SUMMARY

Carers who provide high levels of care for sick, or disabled relatives and friends, unpaid, are more than twice as likely to suffer from poor health compared to people without caring responsibilities.¹ Analysis of the Census shows that nearly 21% of carers providing over 50 hours of care say they are in poor health compared to nearly 11% of the non-carer population (Table 1).

Carers in younger age groups – i.e. 16 and up – are significantly more likely to suffer ill-health than non-carers of the same age. And, as carers become older, the evidence suggests that they are far more likely to be caring with ill-health – at a similar rate to their own age group. In other words, if they already have ill-health and take on caring responsibilities, this could have a significant impact on their health.

The causes of carers' poor physical and mental ill-health are due to a lack of information, lack of support – either the right kind or the right amount, worry about finances and the general stresses and strains of caring full-time with everyday life and isolation. Yet, an estimated £660 million in carers' benefits alone were going unclaimed according to a report from Carers UK published last year.² Other research has found that half of the carers providing round-the-clock care were unaware of their right to an assessment – often the gateway to further support.³

The economic cost of carers' health, if it breaks down, could be vast since the value of the support

provided by the UK's six million carers has been valued at £57 billion.⁴ In addition, a new sector of the population will face the health risks associated with caring since roughly 2 million people become carers every year.⁵ Carers' ill-health itself will place a cost on the NHS. Yet the evidence below also shows that some of these costs are preventable.

1 Census 2001, Office of National Statistics

2 Carers UK (2003) Carers Missing Millions – the importance of claiming carers' benefits, Carers UK London

3 Carers UK (2003) Missed Opportunities, the impact of carers new rights, Carers UK London.

4 Carers UK (2002) Without us...? Calculating the value of carers' support, Carers UK: London

5 Hirst M (2004) Transitions to Informal Care in Great Britain during the 1990s, Journal of Epidemiology & Community Health, Vol56, 579-587, 2002

EVIDENCE OF CARERS' POOR HEALTH

Nearly 700,000 carers reported that they were in 'not good health' according to the Census. Nearly a quarter of a million carers providing over 50 hours of care per week said they were in poor health. The results of the Census corroborate earlier surveys such as the General Household survey which found that three quarters (72%) of carers providing over 50 hours a week reported that their health was affected in some way and 35% of those caring for 20 hours or more reported a limiting longstanding illness.⁶ This also suggests that, the Census may be under-reporting ill-health amongst the carer population.

⁶ J Maher and H Green (2002), Carers 2000, Office for National Statistics, The Stationery Office

Statistics across the UK

The results show that nearly one in five – 21% of carers in the UK providing substantial care are not in good health compared to 11% of those who do not have caring responsibilities. Table 1 below also shows that the more care a carer provides, the more likely it is that they will be in poor health, particularly if the care provided is over 50 hours a week.

Table 1 in the Appendix shows that there are differences in carers' health between England, Wales, Scotland and Northern Ireland. By far the worst reporting of ill-health by carers is in Wales where nearly one in four carers (24%) providing substantial care, and those most at risk, also suffer from ill-health. The biggest disparity in ill-health is found in England, where one in five carers (21%) providing substantial care suffers from ill-health compared to nearly 11% of the non-carer population.

Age group	Numbers of carers	Numbers of carers in 'not good health'	% of carers in 'not good health'	Numbers of carers providing 50+ hrs care per week in 'not good health'	% of carers providing 50+ hrs care in 'not good health'	% of non-carer population in 'not good health'
16 – 24	290,370	12,469	4.29	2,611	8.3	2.5
25 – 34	524,006	37,863	7.2	11,100	10.8	4.1
35 – 44	941,050	83,173	8.8	24,583	13.7	6.5
45 – 54	1,340,731	144,014	10.8	40,735	19.6	11.3
55 – 64	1,096,106	151,450	13.8	52,459	23.7	17.4
65 – 74	624,381	106,860	17.1	49,252	24.7	19.2
75 – 84	279,629	66,763	23.9	37,066	30.5	26.1
85+	40,640	12,207	30.0	7,227	35.2	33.8
Total population	5,774,993	689,639	12.0	256,543	20.7	11.04

Table 1: Summary of UK-wide data on carers' health taken from 2001 Census

Carers' ill-health and the link to age

Table 1 shows that there is an important link between caring full-time, ill-health and the age of the carer. Carers in the youngest age groups are significantly more likely to suffer from ill-health than the equivalent non-carer population. This shows that the younger a carer, the more at risk their health will be from caring full-time. It also raises the issue of whether any of these health problems will be long term. Many of these carers will be caring for disabled children, which can be a long-term, if not lifetime, commitment.⁷ Others care for partners which also tends to be a longer term commitment and raises similar long-term health issues.

Although older carers providing substantial care, particularly those aged 75 and over, are only slightly more likely than non-carers of the same age group to suffer ill-health, the statistics are cause for concern. As full-time care poses a health risk, those with poor health, who are older, could be particularly at risk from even poorer health if they provide substantial care. What these statistics cannot reveal is whether the 75 year old with caring responsibilities is more likely to have chronic and complex illnesses compared to a 75 year old without caring responsibilities who has also reported ill-health. More work needs to be carried out in these areas.

7 Carers 2000 op cit

LOCAL STATISTICS

where carers are in worst health

England

Table 1 in the Appendix shows the extent of carers ill-health by local authority. The column entitled 'difference' shows the difference between the health of carers providing over 50 hours a week and non-carers. Those ranking top with the greatest difference in the health of carers providing 50 plus hours care and non-carers is Wandsworth where they are up to three times more likely to report ill-health. This is followed by the Broads National Park (2.7), Richmond (2.63) and Watford (2.54).

However, the greatest proportion of full-time carers suffering ill-health, are to be found in Barnsley, Sheffield, Gateshead and Sedgefield. In these areas, more than one in four, around 26%, of those providing over 50 hours of care per week reported ill-health. Many of these areas which have high levels of carers in poor health are also areas with high levels of disability and illness. This suggests that carers may already have poor health before they start caring. And, if caring is a risk factor in ill-health, it is likely that their health could become even worse with substantial caring responsibilities.

Wales

The Appendix shows that in Wales, nearly 15% of all carers suffer from ill-health with 23.74% – nearly one in four of those caring for over 50

hours a week – counting themselves as being in poor health. Merthyr Tydfil has the highest percentage of all carers suffering from ill-health (18.72%), followed by Blaenau Gwent (18.08%), Rhondda Cynon Taff (17.74%), Caerphilly (17.55%) and Neath Port Talbot (17.45%). For those providing over 50 hours of care per week, over one in four (28.29%) in Merthyr Tydfil, Blaenau Gwent (28.14%) and Torfaen (26.82%) suffer from ill-health.

Many of these high deprivation areas were or are the location of heavy industrial activity such as mining, where there is a legacy of long term limiting illness. Carers in these areas may share the poor health of the general population, increasing their difficulties as carers and storing up very poor health for themselves in later life.

This may also suggest that carers in Wales have to care for longer periods of time and corroborates previous statistics which show that carers in Wales have the heaviest caring responsibilities in the UK.

Northern Ireland

In Northern Ireland, one in ten (9%) of all carers suffers from ill-health. For those providing substantial care, nearly one in five (18%), double this proportion, feel they are in poor health. The highest proportions of carers suffering ill-health are found in Belfast where 14% of all carers are

in poor health and 24% of those caring for over 50 hours a week. This also goes hand-in-hand with high levels of poor health in the population of non-carers where 18.35% of non-carers suffer from ill-health.

North Down has the greatest difference in health between non-carers and carers, where carers providing substantial care are 1.71 times more likely to be in poor health, followed by Antrim (1.61).

Scotland

In Scotland, more than 12% of all carers suffer from ill-health with more than 15% of those providing substantial care feeling they are in poor health. The highest proportion of carers providing substantial care who are suffering from ill-health are to be found in Glasgow City (21.3%), Dundee City (20.5%) and Falkirk (17.4%). The areas which have the greatest health difference between carers and non-carers are to be found in Scottish Borders where carers providing 50 hours care are just under twice as likely to suffer from ill-health compared with non-carers (1.8 times more likely). This is followed by Edinburgh City and Perth and Kinross where they are 1.7 times more likely to suffer ill-health.

Differences in the general trend

Overall, carers are more likely to suffer ill-health, compared to non-carers, particularly if they are

providing over 50 hours of care a week. However, there are a few areas in Scotland and Northern Ireland where this trend is marginally reversed. These areas include the Shetland Islands and East Ayrshire in Scotland and Cookstown, Ballymoney and Dungannon in Northern Ireland. The difference in health, on the whole, negligible between the carer and non-carer population. These disparities need further research investigation as the difference may be due to age of population, proportions of younger people relative to older people, or other factors.

Links with other data

In comparing sickness rates amongst carers with other data sets which explore this in much more detail, it is clear that rates of illness may, in fact be lower in the Census. As reported above, 34% of carers providing at least 20 hours of care a week report limiting longstanding illness and nearly half (46%) report longstanding illness, either limiting or non-limiting.

The Census data cannot objectively measure the seriousness of the illness suffered by an individual. Ill-health may have a mild or substantial limiting effect on the life of carers but this is not measured. These can have significant implications for carers' ability to provide care, their quality of life and their future health and well-being.

WHAT ILL-HEALTH DO CARERS SUFFER?

Physical health

The General Household Survey found that 24% of carers caring for 50 hours a week or more reported "physical strain".⁸ Carers UK's own research found that half of the respondents providing substantial care had suffered a physical injury since they began caring often due to having to lift or handle the disabled person. Carers also report other physical health problems associated with stress such as high blood pressure, heart problems, etc.

Andrew, who cared for both his parents, said that the family's GP had attributed his mother's stroke to the stress of caring for this father. Prior to being a carer she had led a healthy life and had no other stress-

related illnesses. With her stroke, Andrew was faced with new and substantial caring responsibilities which lasted for nearly six years, in which time, he also had to give up work in order to care.

Mental health

Caring also has a negative effect on carers' mental health. A recent report found that mental health problems were more likely to be associated with caring, than physical ill-health. The representative study, based on analysis of the British Household Panel Survey, also found that carers were more likely to report high levels of psychological distress, including anxiety, depression, loss of confidence and self-esteem,

compared to non-carers.⁹ This research also found key times when caring was more likely to make you ill – at the beginning of caring and once caring had ceased. Women were also more likely than men to suffer from mental ill-health if they were a carer. Research published in 1998 by Carers UK found that 52% of respondents providing substantial amounts of care had been had been treated for a stress-related disorder.¹⁰

8 Carers 2000, op cit

9 M Hirst (2004) Hearts and Minds: the health effects of caring, Social Policy Research Unit, University of York and Carers UK

10 M Henwood (1998) Ignored and Invisible: carers' experiences of the NHS. Carers National Association.

CAUSES OF ILL-HEALTH AMONGST CARERS

The Census cannot determine any causal link between caring and health – it merely counts the number of carers with poor health against the non-carer population. However, substantial evidence exists, to show that there is a strong link between providing high levels of care and ill-health. The evidence shows that this is due to the lack of appropriate support, isolation, financial stress and lack of information.

Lack of appropriate support

Caring can be both physically and mentally demanding. Carers who provide substantial care may be on call 24 hours a day. There may be constant worry about a relative coming to harm and the General Household Survey 2000 found that 24% of carers, one in four, carried out physically demanding tasks such as moving, bathing, lifting, dressing, etc.¹¹

Carers are twice as likely to suffer from mental ill-health if they do not get a break from caring. 36% of those who provided substantial care and did not get a break suffered ill-health compared to 17% of those who accessed a break.¹² The same study found that a third of carers (35%) without good social support suffered ill-health compared to those with good support (15%).

Carers also report that care which is not appropriate, either poor quality, not the right kind, or not sufficiently flexible places extra stresses and strains on them. Limited research into direct payments, whether for the disabled person or the carer, shows that carers tend to find that they make an important difference to their lives. This

suggests that increased flexibility and appropriateness of services could help to prevent ill-health amongst carers.

Joan cares for her son, David, who has complex disabilities, both physical and learning difficulties. She provided care, 24 hours a day, seven days a week. Without support, her health quickly began to suffer. She said that the complexity of benefits information added extra stress to her already stressful life. As a result of a lack of practical support, she had a nervous breakdown. Because she did not apply for benefits immediately, it is likely that she will have gaps in her pension record later in life – leading to lasting poverty – even if her caring responsibilities have ended.

Isolation

Carers can often experience isolation as a result of caring, as it becomes increasingly difficult to socialise with friends or families. Many find giving up work an isolating experience. Equally, carers more likely to miss out on support, such as those from ethnic minorities communities, can quickly become isolated.

Financial stresses

Research by Carers UK found that six out of ten carers providing substantial care said worry about their finances was affecting their health.¹³ The same research found that carers are amongst the some of the poorest and most socially excluded groups in the UK. This work also found that, after 5 years of caring, carers were significantly more likely to be in receipt of Income Support. One in

three (35%) was struggling to pay essential bills and 22% of carers were cutting back on food to make ends meet. Financial problems seem to be directly related to the amount of care provided – 70% of those caring for 24 hours a day found the costs of caring a drain on income – double the rate for those providing less than 5 hours of care per day.¹⁴

Around one in five carers gives up work in order to care.¹⁵ Carers UK research has shown that 77% of carers have become financially worse off since becoming a carer and, for many, giving up work makes it increasingly difficult to manage financially over time. If financial worries cause ill-health amongst carers, then loss of employment will be a significant issue for them.

In addition, many carers do not identify themselves as carers or realise that they are entitled to financial support. In one survey, one in seven carers took ten years to realise they were a carer, with nearly half (48%) taking two years or more to realise.¹⁶ At today's rates, this would mean that many carers missed out on nearly £4,500 worth of the main carer's benefit, Carer's Allowance, over those two years. The complexity of the benefits system also makes tailored advice, such as that provided by Carers UK's information and advice service, vital.

Finally, carers blame some of their financial stresses on the level of benefits provided. Carer's Allowance is worth only £44.35 per week (2004/5 rates) and is the lowest benefit of its kind.

Lack of information

Carers consistently rate information, provided at the right time, very highly. A lack of information about benefits can lead to lasting poverty for carers. Equally, little knowledge about support provided by the NHS, social services, other parts of the local authority and voluntary organisations can have a long term negative impact on carers' health and well-being.

Evidence from a recent survey found that, carers of people with mental illness who were able to access the right information experienced fewer adverse health effects compared to those who did not. Nine out of ten carers said that access to information had a moderate to significant impact on improving their health.¹⁷

A report by Carers UK found that up to £660 million of carers' benefits alone could be going unclaimed. Similarly, only half of carers of eligible

carers in one survey were aware of their right to a carer's assessment – an important step to getting support.¹⁸

For those carers who live in remote rural areas, are disabled and need information in different formats, or who are from ethnic minorities and have both cultural barriers to combat as well as language barriers, information will be even more important.

A carer's story

Sarah cares for her mother who has mobility problems, long-standing disabilities now compounded with frailty. She is 36 years old and has cared for her mother for several years. She didn't know that breaks services were available. And after getting the right information from Carers UK, she had her first break. She said, "I was at the end of my tether – just could not cope any more. I had the break and as soon as I arrived, I just cried and cried and cried. That break has done me the world of good".

11 Ibid

12 Singleton et al (2002) Mental Health of Carers, Office of National Statistics, The Stationery Office.

13 Carers UK, Caring on the Breadline: the financial implications of caring, Carers National Association (now Carers UK) 2000.

14 Op cit

15 Equal Opportunities Commission website: www.eoc.org.uk, taken from a representative poll carried out in 2003.

16 Carers National Association (1992) Speak Up, Speak Out, Carers UK.

17 Who Cares? The experiences of mental health carers accessing services and information, June 2003, Rethink

18 Missed Opportunities, op cit

CONCLUSIONS AND SOLUTIONS

As the research demonstrates, not all carers experience ill-health as a result of caring. This is dependent, not only on the stresses of caring, tasks, amount of support, etc. but also how the carer personally is able to cope with the stresses of caring. However, for a substantial proportion – one in five – the health effects of caring full-time can be very significant.

There are several costs associated with carers ill-health. The first is direct costs in treating the carer's own ill-health. The second is the potential costs that would result if the carer is less able to care because of their ill-health. Given that carers' support is worth an estimated £57 billion a year, these costs could be substantial. Finally, there are other costs associated with ill-health – if carers feel unable to work once caring has ended or whilst they are caring – because of their ill-health, there are costs to the Exchequer and business in terms of lost skills, lost tax revenue, etc.

Research suggests that some health costs for individual carers and the state in terms of additional treatment or the costs of the caring situation breaking down, are avoidable.¹⁸ The provision of information, at the right time, so that carers can access available financial and practical support, and manage caring better, reduces ill-health. Similarly, an improvement in the quality of support, or flexibility can help to improve carers' health – just as staying in work longer could delay financial stresses whilst caring and reduce isolation.

Support also needs to be targeted. For example, at key points such as at the start of caring, any major change e.g. hospital discharge and once caring has finished. Reducing the health effects of caring also needs to be targeted according to age and gender since women are also statistically more likely to suffer mental ill health if caring.

The role of support – not just quantity – but quality and flexibility affects carers' health. Carers who are supported tend to have better health than those who are not. Equally, support which is flexible and allows carers to achieve personal goals and have life outside caring has a positive effect on carers' lives. Limited research on carers' experiences of direct payments, whether for the disabled person or for

themselves, has shown that it gives them choice and flexibility.¹⁹

Finally, the role of paid employment and training and learning is often overlooked in relation to carers' ill-health. Research has shown that life-long learning can have a positive effect on carers' health and, for some, provides a vital stepping stone into work.²⁰ Working also reduces many of the negative factors that affect health. Carers in employment are less isolated, less likely to become depressed and less likely to be trapped in poverty long-term.

Addressing carers' health imbalance requires a mixed approach from employers, Government and Executives, social services and social work departments, health bodies, voluntary organisations and other service providers.

18 Pickard L, 2004, The Effectiveness and Cost Effectiveness of Services and Support to Informal Carers of Older People, Audit Commission.

19 Missed Opportunities, op cit

20 Something for You, Carers and Life-long learning, booklet published by Carers UK, November 2004. Sutcliffe, J (2000) Access and Inclusion, developing support for carers across agencies, NIACE.

RECOMMENDATIONS

Promoting better health for carers

- Government and the Executives should consider developing strategies to combat carers' social exclusion. In Northern Ireland, for example, a promoting social inclusion working group has been set up to ensure that all Government departments addressed the needs of carers in their planning.
- Preventing ill-health amongst carers should be an integral and explicit part of planning on public health, cutting across different agencies.
- Health bodies and GPs, in particular, need to take an active role in health promotion for carers, including annual health checks, flu jabs, etc.
- Carer's assessments should be address carers' health issues as a matter of course and take account of wider issues that impact on carers' health, such as flexibility of service delivery.
- Regular information campaigns are essential to ensure that carers are aware of their entitlements. Information reduces anxiety and stress and improves health.
- Information should be made available through as many means as possible, for example, local authorities carrying out benefits and rights take-up work, the Department for Work and Pensions funding national helplines, leaflets, etc. GPs surgeries holding welfare days, etc.
- Information should be available in as many different formats as possible, including ethnic minority languages, large print, etc.
- Ensure that measures are put in place to help working age carers remain in the workforce for as long as possible since paid employment reduces many negative factors affecting carers' health.
- Support needs to be targeted at higher risk times i.e. at the beginning of caring, any major change in the caring situation and following bereavement.
- Support needs to be targeted in terms of ill-health related to both age and length of time spent caring.
- Strategies need to be adopted by employers, across business, the voluntary and public sectors, to ensure that working age carers are helped to remain within the workforce.
- Sufficient planning for predictable problems and emergencies is needed. This should be regularly included in all carer's assessments and assessments of disabled or older people.
- Research needs to establish further which groups of carers have particular health needs or are at particular risk of poor health. This needs to include data on different ethnic groups of carers.

Recognition of carers as an at risk group

- Public health and social inclusion strategies need to identify carers as an at risk group in terms of health.

Provision of practical support

- Ensure essential funding for support for carers, particularly breaks services, continues – such as the Carers Grant in England which ends in March 2006.
- Local authorities and health bodies, in particular, should ensure as much flexibility in services for disabled people and carers as possible in order to minimise negative health impacts. For example, direct payments, vouchers, not having to travel long distances, etc.
- Governments and Executives should take an innovative approach to the development of social care.
- Essential aids and adaptations need to be provided quickly.

Better financial support for carers

- The level of carers' financial support, particularly Carer's Allowance, needs to be reviewed.
- Government needs to examine tax credits for carers to both remove barriers to work as well as offer incentive and help to make work pay.

Appendices

Table 1: UK, England, Wales, Northern Ireland and Scotland totals. Number and percentages of carers aged 16 + in poor health by number of hours cared, compared with non-carers in poor health. Final column shows the difference in health between non-carers and those providing over 50 hours care per week. Source: Census 2001

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference
UK	5744993	689639	12.00	256543	20.7	11.04	1.88
England	4764300	563885	11.84	203528	20.58	10.63	1.94
Northern Ireland	179071	18956	8.86	8234	17.9	13.7	1.31
Scotland	468715	57618	12.29	23668	15.42	11.94	1.29
Wales	332907	49180	14.7	21113	23.74	15.11	1.57

Table 2: England - number and percentages of carers aged 16 + in poor health by number of hours cared, compared with non-carers in poor health. Final column shows the difference in health between non-carers and those providing over 50 hours care per week. Source: Census 2001

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
ENGLAND	4764300	563885	11.84	203528	20.58	10.63	1.94
NORTH EAST	270914	39259	14.49	16379	23.88	14.38	1.66
Darlington UA	9849	1309	13.29	499	21.65	11.73	1.85
Hartlepool UA	9650	1489	15.43	641	24.08	15.04	1.60
Middlesborough UA	14321	2037	14.22	918	22.56	14.13	1.60
Redcar and Cleveland UA	15813	2259	14.29	960	23.37	14.55	1.61
Stockton-on-Tees UA	18656	2381	12.76	956	20.71	12.37	1.67
Durham County	55858	8662	15.51	3692	25.66	15.99	1.61
Chester-le-Street	6034	887	14.70	342	24.84	13.51	1.84
Derwentside	9717	1474	15.17	631	24.94	15.91	1.57
Durham	8854	1184	13.37	439	23.50	12.89	1.82
Easington	11702	2153	18.40	1021	27.99	21.86	1.28
Sedgefield	10009	1615	16.14	690	26.26	16.05	1.64
Teesdale	2659	308	11.58	118	20.85	11.47	1.82
Wear Valley	6874	1023	14.88	439	24.79	15.60	1.59
Northumberland	32985	4105	12.45	1552	21.41	12.23	1.75
Alnwick	2975	316	10.62	102	17.03	10.28	1.66
Berwick-upon-Tweed	2629	280	10.65	104	17.60	11.06	1.59
Blyth Valley	8712	1212	13.91	480	22.29	13.66	1.63
Castle Morpeth	5549	610	10.99	215	20.57	10.51	1.96
Tynedale	6015	609	10.12	195	19.31	9.54	2.02
Wansbeck	7097	1077	15.18	464	25.03	15.83	1.58
Tyne and Wear (Met County)	113769	17007	14.95	7158	24.51	14.79	1.66
Gateshead	20764	3203	15.43	1425	26.14	15.70	1.66
Newcastle upon Tyne	25669	3865	15.06	1575	24.41	13.99	1.74
North Tyneside	20608	2890	14.02	1137	23.34	13.29	1.76
South Tyneside	15594	2328	14.93	1001	24.20	15.22	1.59
Sunderland	31142	4719	15.15	2031	24.45	15.74	1.55
Tees Valley less Darlington	58444	8168	13.98	3474	22.48	13.81	1.63
Former county of Durham	65717	9969	15.17	4187	25.09	15.28	1.64
NORTH WEST	707580	96545	13.64	36925	22.69	13.14	1.73
Blackburn with Darwen UA	13593	1948	14.33	696	21.57	14.06	1.53
Blackpool UA	14852	2545	17.14	1084	25.47	16.34	1.56
Halton UA	13242	1934	14.61	877	23.87	14.29	1.67
Warrington UA	19584	2305	11.77	864	21.24	10.84	1.96
Cheshire County	70409	7549	10.72	2587	19.86	9.87	2.01
Chester	12201	1241	10.17	444	19.41	9.69	2.00
Congleton	9386	888	9.46	313	20.17	9.09	2.22

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Crewe and Nantwich	11293	1282	11.35	443	20.69	10.58	1.96
Ellesmere Port and Neston	9139	1129	12.35	432	21.21	11.37	1.87
Macclesfield	15429	1518	9.84	418	18.06	8.67	2.08
Vale Royal	12973	1502	11.58	540	19.99	10.53	1.90
Cumbria	50637	5963	11.78	2091	19.82	11.75	1.69
Allerdale	9739	1122	11.52	397	19.00	11.93	1.59
Barrow-in-Furness	8476	1344	15.86	523	24.44	16.23	1.51
Carlisle	9828	1140	11.60	404	19.96	11.30	1.77
Copeland	7059	804	11.39	321	19.23	12.56	1.53
Eden	4720	470	9.96	142	17.15	9.17	1.87
South Lakeland	10824	1082	10.00	311	17.17	9.73	1.76
Greater Manchester (Met County)	251405	35590	14.16	13304	23.12	13.45	1.72
Bolton	27813	3903	14.03	1450	23.00	13.26	1.73
Bury	18751	2410	12.85	815	20.71	11.83	1.75
Manchester	33155	5735	17.30	2289	25.23	15.37	1.64
Oldham	22909	3154	13.77	1184	22.48	13.90	1.62
Rochdale	21457	2974	13.86	1056	22.20	13.77	1.61
Salford	21849	3431	15.70	1421	25.10	15.43	1.63
Stockport	29610	3479	11.75	1118	19.99	10.68	1.87
Tameside	21744	3266	15.02	1223	23.61	13.88	1.70
Trafford	20928	2448	11.70	787	19.72	10.60	1.86
Wigan	33200	4807	14.48	1966	25.21	14.52	1.74
Lancashire County	120727	16054	13.30	5814	22.50	12.32	1.83
Burnley	9539	1492	15.64	557	25.36	14.64	1.73
Chorley	10686	1341	12.55	458	23.27	11.01	2.11
Fylde	7972	971	12.18	312	19.85	11.76	1.69
Hyndburn	8715	1331	15.27	519	25.81	14.67	1.76
Lancaster	13138	1783	13.57	659	22.68	11.64	1.95
Pendle	9522	1321	13.87	435	22.18	13.90	1.60
Preston	12718	1705	13.41	626	22.48	12.29	1.83
Ribble Valley	5760	590	10.24	168	18.58	9.11	2.04
Rosendale	6919	988	14.28	344	23.26	12.83	1.81
South Ribble	11277	1356	12.02	467	21.19	10.82	1.96
West Lancashire	12188	1499	12.30	589	20.79	11.87	1.75
Wyre	12233	1665	13.61	674	22.45	13.13	1.71
Merseyside (Met County)	153120	22645	14.79	9606	23.69	15.25	1.55
Knowsley	16923	2703	15.97	1301	24.68	17.20	1.44
Liverpool	46524	7514	16.15	3373	24.53	16.90	1.45
St. Helens	21050	3111	14.78	1262	24.21	15.66	1.55
Sefton	31980	4308	13.47	1648	21.93	13.22	1.66
Wirral	36677	5026	13.70	2022	22.94	13.62	1.68
Former county of Cheshire	103235	11794	11.42	4331	20.85	10.58	1.97
Former county of Lancashire	149192	20553	13.78	7591	22.78	12.89	1.77
YORKSHIRE AND THE HUMBER	507250	66758	13.16	25579	22.64	12.28	1.84
East Riding of Yorkshire UA	32109	3607	11.23	1325	20.61	10.10	2.04

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Kingston upon Hull;							
City of UA	22412	3359	14.99	1479	23.21	13.56	1.71
North East							
Lincolnshire UA	15072	1841	12.21	729	19.66	11.16	1.76
North							
Lincolnshire UA	15642	1866	11.93	722	20.10	11.49	1.75
York UA	16588	1829	11.03	602	20.21	9.13	2.21
North Yorkshire							
County	55218	5716	10.35	1882	18.66	9.35	2.00
Craven	5582	539	9.66	147	15.56	9.38	1.66
Hambleton	8190	792	9.67	246	17.70	8.72	2.03
Harrogate	14246	1347	9.46	404	18.41	8.19	2.25
Richmondshire	3878	389	10.03	122	17.68	8.25	2.14
Ryedale	4947	506	10.23	167	18.00	9.06	1.99
Scarborough	10991	1397	12.71	544	21.09	11.99	1.76
Selby	7406	759	10.25	263	19.11	9.45	2.02
South Yorkshire							
(Met County)	141690	20936	14.78	8530	24.50	14.57	1.68
Barnsley	25663	4137	16.12	1716	25.82	17.27	1.49
Doncaster	31262	4445	14.22	1812	22.37	14.79	1.51
Rotherham	29768	4196	14.10	1711	23.29	14.73	1.58
Sheffield	54990	8150	14.82	3284	25.84	13.26	1.95
West Yorkshire							
(Met County)	208532	27625	13.25	10320	22.92	12.32	1.86
Bradford	46696	6101	13.07	2209	21.24	12.44	1.71
Calderdale	19375	2418	12.48	871	22.61	11.83	1.91
Kirklees	39089	4839	12.38	1696	21.32	11.78	1.81
Leeds	68961	9155	13.28	3429	24.03	11.55	2.08
Wakefield	34394	5111	14.86	2115	24.73	14.90	1.66
The Humber	85236	10663	12.51	4246	21.13	11.50	1.84
The former county of North Yorkshire	71801	7541	10.50	2488	19.04	9.30	2.05
EAST MIDLANDS	425546	51171	12.02	18445	20.98	10.77	1.95
Derby UA	23052	3007	13.04	1094	22.61	11.87	1.91
Leicester UA	25921	3533	13.63	1276	20.48	12.46	1.64
Nottingham UA	23253	3651	15.70	1412	22.90	13.11	1.75
Rutland UA	3172	275	8.67	85	16.67	7.13	2.34
Derbyshire County	84851	10834	12.77	3977	23.01	12.06	1.91
Amber Valley	13501	1637	12.13	594	22.15	11.95	1.85
Bolsover	8902	1433	16.10	632	25.62	16.47	1.56
Chesterfield	11940	1766	14.79	672	25.00	14.42	1.73
Derbyshire Dales	7997	821	10.27	227	18.44	9.42	1.96
Erewash	11660	1392	11.94	512	21.91	10.81	2.03
High Peak	9514	1080	11.35	356	21.28	10.28	2.07
North East							
Derbyshire	12389	1646	13.29	616	24.39	13.10	1.86
South Derbyshire	8955	1044	11.66	367	21.75	10.17	2.14
Leicestershire							
County	61986	6009	9.69	1884	18.17	8.63	2.11
Blaby	9298	897	9.65	259	17.64	8.08	2.18
Charnwood	14753	1484	10.06	427	18.16	8.61	2.11
Harborough	7558	597	7.90	167	15.59	7.28	2.14
Hinckley and Bosworth	10810	1066	9.86	370	19.49	9.19	2.12

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Melton	4700	388	8.26	125	15.57	7.32	2.13
North West							
Leicestershire	9198	1021	11.10	382	20.98	10.37	2.02
Oadby and Wigston	5667	550	9.71	168	17.14	8.85	1.94
Lincolnshire	64113	7905	12.33	3005	20.10	10.47	1.92
Boston	5533	744	13.45	304	22.49	11.19	2.01
East Lindsey	14476	2119	14.64	938	22.31	13.27	1.68
Lincoln	7628	1031	13.52	368	20.29	10.65	1.90
North Kesteven	9352	1057	11.30	348	17.84	9.15	1.95
South Kesteven	7651	944	12.34	355	19.44	10.54	1.84
South Kesteven	11107	1137	10.24	376	17.70	8.29	2.13
West Lindsey	8370	877	10.48	316	18.82	10.06	1.87
Northamptonshire	57628	5811	10.08	1944	18.55	8.79	2.11
Corby	5001	587	11.74	211	17.03	11.65	1.46
Daventry	6680	562	8.41	175	17.34	7.33	2.37
East							
Northamptonshire	6839	676	9.88	222	18.29	8.34	2.19
Kettering	8070	795	9.85	286	20.86	9.08	2.30
Northampton	16859	1866	11.07	641	18.95	9.01	2.10
South							
Northamptonshire	7281	588	8.08	168	16.57	6.84	2.42
Wellingborough	6896	741	10.75	252	20.29	9.86	2.06
Nottinghamshire							
County	81563	10145	12.44	3760	22.01	11.57	1.90
Ashfield	12416	1828	14.72	705	23.52	13.56	1.73
Bassetlaw	12055	1558	12.92	621	22.64	12.98	1.74
Broxtowe	11426	1358	11.89	495	23.00	10.48	2.19
Gedling	12242	1381	11.28	437	19.85	10.17	1.95
Mansfield	11451	1712	14.95	707	24.41	14.99	1.63
Newark and							
Sherwood	11496	1323	11.51	532	21.09	11.09	1.90
Rushcliffe	10493	978	9.32	264	16.66	8.11	2.05
The former county of Derbyshire	107913	13853	12.84	5081	22.96	12.01	1.91
The former county of Leicestershire	91084	9810	10.77	3243	18.94	9.71	1.95
The former county of Nottinghamshire	104816	13790	13.16	5170	22.24	11.97	1.86
WEST MIDLANDS	546015	66907	12.25	24929	21.07	11.66	1.81
Herefordshire;							
County of UA	17243	1780	10.32	604	18.33	9.63	1.90
Stoke-on-Trent UA	26341	4249	16.13	1786	25.51	15.45	1.65
Telford and							
Wrekin UA	15351	2067	13.46	833	21.89	11.22	1.95
Shropshire County	29366	3016	10.27	977	18.01	9.81	1.83
Bridgnorth	5582	533	9.55	151	16.52	9.44	1.75
North Shropshire	5794	601	10.37	203	17.56	9.92	1.77
Oswestry	3845	431	11.21	143	18.62	10.25	1.82
Shrewsbury							
and Atcham	9704	964	9.93	311	17.99	9.56	1.88
South Shropshire	4449	486	10.92	168	19.60	10.33	1.90
Staffordshire							
County	88045	9859	11.20	3535	20.36	10.50	1.94
Cannock Chase	9920	1272	12.82	522	22.62	12.33	1.83

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
East Staffordshire	10174	1078	10.60	391	19.05	9.46	2.01
Lichfield	10111	1055	10.43	341	18.76	9.23	2.03
Newcastle-under-Lyme	13822	1722	12.46	690	24.03	12.72	1.89
South							
Staffordshire	12559	1243	9.90	415	18.85	9.25	2.04
Stafford	13013	1300	9.99	388	16.99	9.45	1.80
Staffordshire							
Moorlands	11143	1245	11.17	402	19.57	10.99	1.78
Tamworth	7322	948	12.95	384	21.65	10.55	2.05
Warwickshire	52271	5426	10.38	1789	19.08	9.50	2.01
North							
Warwickshire	6917	824	11.91	296	20.70	10.82	1.91
Nuneaton and							
Bedworth	12980	1564	12.05	594	20.60	11.89	1.73
Rugby	8877	883	9.95	285	18.68	9.07	2.06
Stratford-on-Avon	11383	1014	8.91	291	16.95	7.91	2.14
Warwick	12143	1152	9.49	330	17.94	8.39	2.14
West Midlands							
(Met County)	261397	34959	13.37	13561	21.93	13.03	1.68
Birmingham	95163	13611	14.30	5349	22.47	13.50	1.66
Coventry	29168	3824	13.11	1429	22.33	12.12	1.84
Dudley	34428	4118	11.96	1455	20.21	12.02	1.68
Sandwell	29443	4193	14.24	1725	22.26	14.60	1.53
Solihull	20638	2170	10.51	748	19.72	9.49	2.08
Walsall	27430	3645	13.29	1481	22.00	13.44	1.64
Wolverhampton	25124	3397	13.52	1371	22.30	14.28	1.56
Worcestershire							
County	55990	5558	9.93	1843	18.06	9.26	1.95
Bromsgrove	9924	925	9.32	286	17.96	8.69	2.07
Malvern Hills	7983	770	9.65	241	18.20	9.46	1.92
Redditch	7728	809	10.47	291	18.71	9.45	1.98
Worcester	8533	872	10.22	280	16.23	9.20	1.76
Wychavon	11551	1052	9.11	378	18.19	8.58	2.12
Wyre Forest	10291	1126	10.94	374	19.29	10.30	1.87
Herefordshire and							
Worcestershire	73233	7339	10.02	2448	18.13	9.35	1.94
Former county of							
Shropshire	44725	5082	11.36	1805	19.55	10.31	1.90
Former county of							
Staffordshire	114384	14095	12.32	5321	21.83	11.63	1.88
EAST	509135	51262	10.07	17358	18.19	8.89	2.05
Luton UA	15615	1704	10.91	590	17.91	9.73	1.84
Peterborough UA	14380	1717	11.94	636	20.21	10.08	2.00
Southend-on-Sea							
UA	15694	1783	11.36	631	19.70	10.89	1.81
Thurrock UA	13049	1361	10.43	511	17.75	9.53	1.86
Bedfordshire							
County	35112	3164	9.01	1009	17.09	7.97	2.14
Bedford	14159	1359	9.60	422	17.50	8.65	2.02
Mid Bedfordshire	10928	905	8.28	261	15.78	6.96	2.27
South Bedfordshire	10032	892	8.89	318	17.28	8.15	2.12
Cambridgeshire							
County	49143	4663	9.49	1481	17.36	7.84	2.22

Table 2: Continued

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Cambridge East	8234	858	10.42	230	18.78	7.62	2.46
Cambridgeshire	6908	655	9.48	227	18.87	8.05	2.34
Fenland	7944	993	12.50	405	20.61	10.84	1.90
Huntingdonshire	13466	1216	9.03	389	15.68	7.28	2.15
South							
Cambridgeshire	12583	938	7.45	224	13.70	6.61	2.07
Essex County	126879	12783	10.07	4439	18.49	8.95	2.07
Basildon	15418	1806	11.71	696	19.72	9.86	2.00
Braintree	12171	1051	8.64	329	15.19	8.22	1.85
Brentwood	6776	554	8.18	176	17.00	7.74	2.20
Castle Point	8845	956	10.81	350	18.71	9.36	2.00
Chelmsford	14692	1176	8.00	349	15.98	7.18	2.23
Colchester	14168	1422	10.04	496	19.31	8.42	2.29
Epping Forest	12049	1130	9.38	358	17.63	8.71	2.02
Harlow	6856	835	12.18	286	19.90	9.62	2.07
Maldon	6110	543	8.89	178	17.28	8.44	2.05
Rochford	7922	759	9.58	258	17.77	8.47	2.10
Tendring	15337	2072	13.51	820	21.49	12.77	1.68
Uttlesford	6533	469	7.18	134	15.01	6.89	2.18
Hertfordshire	94226	8409	8.92	2578	16.82	7.69	2.19
Broxbourne	7803	725	9.29	252	16.81	8.26	2.04
Dacorum	12758	1098	8.61	330	16.36	7.55	2.17
East Hertfordshire	11271	919	8.15	246	15.48	6.64	2.33
Hertsmere	8744	770	8.81	229	16.23	7.81	2.08
North Hertfordshire	10821	996	9.20	316	18.39	7.70	2.39
St. Albans	12039	911	7.57	254	14.92	6.87	2.17
Stevenage	6831	703	10.29	246	16.67	8.84	1.88
Three Rivers	7981	654	8.19	165	14.72	7.65	1.92
Watford	6712	720	10.73	244	19.97	7.85	2.54
Welwyn Hatfield	9272	928	10.01	290	18.51	8.67	2.14
Norfolk	79971	9255	11.57	3288	19.69	10.37	1.90
Breckland	11514	1238	10.75	458	18.25	9.76	1.87
Broadland	12447	1209	9.71	341	16.55	8.78	1.88
Great Yarmouth	9433	1273	13.50	567	23.34	12.59	1.85
King's Lynn and West Norfolk	14200	1803	12.70	683	20.51	11.10	1.85
North Norfolk	10527	1161	11.03	387	17.66	10.64	1.66
Norwich	10458	1472	14.08	521	22.47	11.36	1.98
South Norfolk	11436	1109	9.70	339	18.12	8.73	2.08
Suffolk	65063	6426	9.88	2196	17.65	9.09	1.94
Babergh	8461	693	8.19	216	15.16	8.31	1.82
Forest Heath	4224	425	10.06	140	16.26	8.32	1.95
Ipswich	11065	1211	10.94	448	18.96	10.23	1.85
Mid Suffolk	8449	717	8.49	217	15.66	7.65	2.05
St. Edmundsbury	8870	816	9.20	252	15.91	7.99	1.99
Suffolk Coastal	12137	1152	9.49	380	18.01	8.61	2.09
Waveney	11837	1408	11.89	535	19.97	11.42	1.75
Former county of Bedfordshire	50732	4868	9.60	1596	17.35	8.53	2.03
Former county of Cambridgeshire	63510	6367	10.03	2115	18.12	8.33	2.18
Former county of Essex	155631	15924	10.23	5577	18.53	9.19	2.02

Table 2: Continued

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LONDON	593045	69973	11.80	23150	19.69	9.66	2.04
Inner London	200679	27406	13.66	9005	21.31	10.34	2.06
Camden	14819	2057	13.88	555	21.46	10.44	2.06
City of London	581	60	10.33	15	17.65	7.81	2.26
Hackney	14785	2270	15.35	782	22.64	13.00	1.74
Hammersmith and Fulham	11229	1469	13.08	425	21.95	9.12	2.41
Haringey	15465	2080	13.45	675	21.39	10.45	2.05
Islington	13213	2043	15.46	637	23.42	12.54	1.87
Kensington and Chelsea	10908	1204	11.04	310	20.60	8.39	2.45
Lambeth	17912	2428	13.56	672	19.78	9.29	2.13
Lewisham	19154	2434	12.71	811	19.30	9.86	1.96
Newham	19839	2909	14.66	1144	21.64	12.84	1.68
Southwark	17880	2454	13.72	826	20.32	10.26	1.98
Tower Hamlets	16020	2497	15.59	1035	22.73	12.41	1.83
Wandsworth	16693	1999	11.98	679	21.45	7.65	2.80
Westminster	12130	1468	12.10	428	20.08	9.48	2.12
Outer London	392366	42567	10.85	14145	18.77	9.22	2.04
Barking and Dagenham	15487	2258	14.58	954	21.94	13.22	1.66
Barnet	27458	2756	10.04	882	19.44	8.35	2.33
Bexley	21017	2141	10.19	744	18.01	8.90	2.02
Brent	22191	2639	11.89	828	18.44	10.16	1.81
Bromley	27902	2613	9.36	835	17.35	8.04	2.16
Croydon	28766	2958	10.28	929	17.92	8.93	2.01
Ealing	25024	2933	11.72	953	19.27	9.54	2.02
Enfield	23885	2688	11.25	916	19.11	10.03	1.91
Greenwich	18308	2452	13.39	914	21.18	11.06	1.91
Harrow	20068	1837	9.15	540	15.61	8.42	1.85
Havering	22845	2454	10.74	847	18.21	9.70	1.88
Hillingdon	22526	2309	10.25	758	17.68	8.79	2.01
Hounslow	18392	2120	11.53	685	19.29	9.48	2.04
Kingston upon Thames	12008	1059	8.82	269	15.21	7.16	2.13
Merton	14824	1581	10.67	522	20.02	8.08	2.48
Redbridge	23249	2565	11.03	929	19.93	10.02	1.99
Richmond upon Thames	14284	1274	8.92	331	17.57	6.68	2.63
Sutton	15756	1534	9.74	472	17.19	8.23	2.09
Waltham Forest	18378	2401	13.06	830	20.01	10.58	1.89
SOUTH EAST	720525	68777	9.55	22130	17.19	8.21	2.09
Bracknell Forest UA	8046	681	8.46	198	14.64	6.54	2.24
Brighton and Hove UA	21243	2741	12.90	877	21.29	10.03	2.12
Isle of Wight UA	13943	1576	11.30	530	16.38	11.05	1.48
Medway UA	20978	2330	11.11	841	17.80	9.03	1.97
Milton Keynes UA	16964	1937	11.42	704	20.45	8.36	2.45
Portsmouth UA	14573	1847	12.67	690	20.46	9.91	2.06
Reading UA	10621	1102	10.38	345	16.85	7.37	2.29
Slough UA	9900	1104	11.15	362	18.28	9.43	1.94
Southampton UA	17653	2110	11.95	788	20.04	10.05	1.99
West Berkshire UA	11822	952	8.05	252	14.19	6.37	2.23

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Windsor and Maidenhead UA	11233	918	8.17	258	15.40	6.71	2.30
Wokingham UA	11983	839	7.00	213	12.82	5.41	2.37
Buckinghamshire County	42891	3342	7.79	939	15.10	6.74	2.24
Aylesbury Vale	13961	1113	7.97	323	14.71	6.76	2.18
Chiltern	8625	560	6.49	125	12.35	6.26	1.97
South Bucks	5885	481	8.17	129	16.13	6.73	2.39
Wycombe	14385	1171	8.14	353	16.13	6.98	2.31
East Sussex County	49870	5610	11.25	1816	18.77	10.22	1.84
Eastbourne	8512	1072	12.59	360	19.91	11.27	1.77
Hastings	8471	1249	14.74	425	21.58	12.67	1.70
Lewes	9510	1024	10.77	312	18.77	9.70	1.93
Rother	9324	963	10.33	334	18.18	10.62	1.71
Wealden	14040	1313	9.35	390	16.32	8.19	1.99
Hampshire County	111476	9765	8.76	3159	16.06	7.64	2.10
Basingstoke and Deane	12428	1082	8.71	321	15.49	6.91	2.24
East Hampshire	9979	723	7.25	204	13.36	6.85	1.95
Eastleigh	10588	976	9.22	313	17.04	7.46	2.29
Fareham	9891	831	8.40	284	16.95	7.69	2.20
Gosport	6369	722	11.34	256	17.08	9.13	1.87
Hart	6882	489	7.11	117	12.39	5.56	2.23
Havant	11294	1269	11.24	471	17.94	9.99	1.79
New Forest	17422	1604	9.21	538	16.60	8.65	1.92
Rushmoor	6794	628	9.24	216	17.14	7.29	2.35
Test Valley	10112	797	7.88	238	14.58	7.11	2.05
Winchester	9698	634	6.54	190	14.16	6.81	2.08
Kent County	125737	13259	10.55	4634	18.49	9.37	1.97
Ashford	9488	924	9.74	303	16.49	8.64	1.91
Canterbury	12996	1489	11.46	498	18.76	9.98	1.88
Dartford	7605	793	10.43	262	17.97	8.46	2.12
Dover	10526	1216	11.55	478	20.42	11.14	1.83
Gravesham	8891	917	10.31	317	18.00	9.45	1.91
Maidstone	13066	1204	9.21	391	17.58	8.00	2.20
Sevenoaks	10707	933	8.71	278	17.06	7.62	2.24
Shepway	9830	1137	11.57	390	18.44	10.94	1.68
Swale	11001	1141	10.37	474	17.46	9.87	1.77
Thanet	13116	1905	14.52	721	21.30	12.89	1.65
Tonbridge and Malling	9553	852	8.92	299	18.58	7.61	2.44
Tunbridge Wells	8970	760	8.47	239	17.69	7.51	2.35
Oxfordshire	51710	4476	8.66	1368	16.55	7.15	2.31
Cherwell	11127	980	8.81	323	16.49	7.22	2.28
Oxford	9834	1059	10.77	322	19.43	7.88	2.47
South Oxfordshire	11532	850	7.37	236	14.08	6.60	2.13
Vale of White Horse	10574	864	8.17	264	15.68	6.86	2.29
West Oxfordshire	8624	717	8.31	220	17.25	7.16	2.41
Surrey	97599	7541	7.73	2037	14.58	6.85	2.13
Elmbridge	10885	838	7.70	187	13.05	6.39	2.04
Epsom and Ewell	6486	519	8.00	142	15.24	6.90	2.21
Guildford	11658	942	8.08	273	16.33	6.68	2.44
Mole Valley	8099	543	6.70	129	12.30	6.93	1.77

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Reigate and Banstead	11564	921	7.96	271	16.34	6.93	2.36
Runnymede	6812	575	8.44	167	15.36	7.21	2.13
Spelthorne	8606	728	8.46	208	15.29	7.78	1.97
Surrey Heath	6914	504	7.29	141	13.66	5.95	2.30
Tandridge	7590	548	7.22	138	12.26	7.05	1.74
Waverley	11016	816	7.41	207	13.98	6.83	2.05
Woking	8017	652	8.13	197	17.00	6.86	2.48
West Sussex	72285	6657	9.21	2120	16.89	8.49	1.99
Adur	6031	691	11.46	245	20.48	9.94	2.06
Arun	14525	1503	10.35	525	17.30	10.39	1.67
Chichester	10493	884	8.42	270	15.97	8.11	1.97
Crawley	8660	919	10.61	282	17.07	8.34	2.05
Horsham	11344	816	7.19	232	15.06	6.61	2.28
Mid Sussex	11862	865	7.29	246	15.14	6.60	2.29
Worthing	9367	987	10.54	337	18.43	10.20	1.81
Former county of Berkshire	63623	5597	8.80	1631	15.53	6.91	2.25
Former county of Buckinghamshire	59826	5265	8.80	1635	16.94	7.23	2.34
Former county of East Sussex	71094	8343	11.74	2693	19.53	10.16	1.92
Former county of Hampshire	143722	13737	9.56	4638	17.19	8.22	2.09
Former county of Kent	146710	15580	10.62	5468	18.36	9.32	1.97
SOUTH WEST	484290	53233	10.99	18633	19.26	9.80	1.96
Bath and North East Somerset UA	15822	1540	9.73	440	16.99	8.54	1.99
Bournemouth UA	15019	1892	12.60	622	19.97	10.62	1.88
Bristol; City of UA	34549	4633	13.41	1747	22.44	10.69	2.10
North Somerset UA	19082	2048	10.73	667	19.13	9.66	1.98
Plymouth UA	23436	3053	13.03	1245	21.13	11.87	1.78
Poole UA	14041	1603	11.42	520	18.88	9.96	1.90
South Gloucestershire UA	23612	2267	9.60	754	18.80	8.16	2.30
Swindon UA	15427	1810	11.73	650	20.56	8.86	2.32
Torbay UA	13574	1843	13.58	757	21.34	12.78	1.67
Cornwall and the Isles of Scilly	54618	6935	12.70	2688	20.59	11.80	1.74
Caradon	8664	1086	12.53	405	20.14	10.76	1.87
Carrick	9526	1139	11.96	411	19.56	10.96	1.78
Kerrier	10359	1403	13.54	572	21.86	12.78	1.71
North Cornwall	8681	1084	12.49	411	20.69	11.19	1.85
Penwith	7122	987	13.86	362	21.08	13.50	1.56
Restormel	10137	1242	12.25	523	20.05	12.04	1.67
Isles of Scilly	178	12	6.74	3	10.71	5.36	2.00
Devon County	71335	7565	10.60	2635	18.40	9.74	1.89
East Devon	13592	1413	10.40	487	19.22	9.69	1.98
Exeter	9582	1104	11.52	378	18.82	9.47	1.99
Mid Devon	6820	667	9.78	237	18.15	8.99	2.02
North Devon	8780	972	11.07	326	18.00	10.06	1.79

Table 2: Continued

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
South Hams	8927	865	9.69	299	18.61	9.24	2.01
Teignbridge	12473	1353	10.85	496	18.54	10.15	1.83
Torrige	6107	721	11.81	259	18.66	11.03	1.69
West Devon	5076	488	9.61	157	15.59	9.28	1.68
Dorset County	41165	4069	9.88	1326	16.98	9.69	1.75
Christchurch	5105	618	12.11	211	19.04	11.05	1.72
East Dorset	9193	846	9.20	267	15.95	9.04	1.76
North Dorset	5738	504	8.78	145	14.19	8.55	1.66
Purbeck	4755	438	9.21	148	17.54	9.68	1.81
West Dorset	9833	918	9.34	302	17.55	9.43	1.86
Weymouth and Portland	6562	774	11.80	254	17.66	11.04	1.60
Gloucestershire	54622	5316	9.73	1738	18.84	8.81	2.14
Cheltenham	9602	968	10.08	309	19.36	8.40	2.31
Cotswold	7584	602	7.94	182	16.40	7.53	2.18
Forest of Dean	8342	924	11.08	336	20.86	10.00	2.09
Gloucester	10198	1194	11.71	452	23.00	10.19	2.26
Stroud	11262	941	8.36	262	15.48	8.44	1.83
Tewkesbury	7630	685	8.98	194	15.51	8.16	1.90
Somerset	49110	5228	10.65	1740	18.60	9.65	1.93
Mendip	9778	958	9.80	324	18.70	9.09	2.06
Sedgemoor	10614	1279	12.05	469	20.17	10.55	1.91
South Somerset	14972	1514	10.11	488	18.03	9.21	1.96
Taunton Deane	10029	1067	10.64	331	18.13	9.46	1.92
West Somerset	3724	412	11.06	132	16.92	10.99	1.54
Wiltshire County	38885	3439	8.84	1114	16.74	7.81	2.14
Kennet	6450	521	8.08	174	16.28	7.29	2.23
North Wiltshire	11072	971	8.77	322	17.18	7.19	2.39
Salisbury	10533	940	8.92	280	15.94	7.97	2.00
West Wiltshire	10820	1001	9.25	330	16.99	8.62	1.97
Bristol/Bath area	93080	10482	11.26	3605	20.17	9.49	2.12
Former county of Devon	108340	12455	11.50	4635	19.51	10.58	1.84
The former county of Dorset	70214	7564	10.77	2470	18.06	9.97	1.81
The former county of Wiltshire	54303	5253	9.67	1757	17.92	8.12	2.21
Dartmoor National Park	3526	338	9.59	122	18.94	9.32	2.03
Exmoor National Park	1144	95	8.30	33	17.37	9.95	1.75
Lake District National Park	4344	411	9.46	100	15.20	8.83	1.72
Northumberland National Park	184	19	10.33	3	14.29	7.08	2.02
North York Moors National Park	2720	268	9.85	76	17.04	9.56	1.78
Peak District National Park	4503	456	10.13	104	16.94	9.02	1.88
The Broads National Park	704	77	10.94	37	25.69	9.50	2.70
Yorkshire Dales National Park	2053	166	8.09	41	14.70	8.34	1.76

Table 3: Scotland - number and percentages of carers aged 16 + in poor health by number of hours cared, compared with non-carers in poor health. Final column shows the difference in health between non-carers and those providing over 50 hours care per week. Source: Census 2001

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Scotland	468715	57618	12.29	23668	15.42	11.94	1.29
Aberdeen City	16349	1853	11.33	639	11.04	9.43	1.17
Aberdeenshire	16539	1481	8.95	507	9.79	7.60	1.29
Angus	9273	959	10.34	344	11.83	9.28	1.27
Argyll & Bute	8166	876	10.73	320	12.42	10.47	1.19
Clackmannanshire	4657	568	12.20	274	15.95	13.47	1.18
Dumfries & Galloway	13666	1561	11.42	675	12.66	10.97	1.15
Dundee City	13563	1847	13.62	816	20.53	13.01	1.58
East Ayrshire	12081	1465	12.13	660	12.40	12.98	-1.05
East Dunbartonshire	11332	1111	9.80	379	11.38	9.54	1.19
East Lothian	8648	925	10.70	372	11.08	10.39	1.07
East Renfrewshire	9012	825	9.15	308	12.69	9.04	1.40
Edinburgh City	37856	4048	10.69	1481	15.18	8.99	1.69
Eilean Siar	2737	206	7.53	75	12.87	10.50	1.23
Falkirk	14567	1741	11.95	695	17.41	12.48	1.39
Fife	32919	3896	11.84	1456	14.04	11.24	1.25
Glasgow City	54930	9855	17.94	4487	21.32	18.55	1.15
Highland	17916	1667	9.30	609	12.80	9.27	1.38
Inverclyde	7998	1086	13.58	506	15.12	13.93	1.09
Moray	6574	626	9.52	234	11.51	8.55	1.35
North Ayrshire	13110	1690	12.89	754	13.21	13.11	1.01
North Lanarkshire	32421	4678	14.43	2152	17.12	15.54	1.10
Orkney Islands	1653	137	8.29	44	10.87	8.00	1.36
Perth & Kinross	11780	1066	9.05	411	14.71	8.77	1.68
Renfrewshire	17591	2209	12.56	855	14.62	12.85	1.14
Scottish Borders	8948	888	9.92	323	15.45	8.64	1.79
Shetland Islands	1901	137	7.21	42	7.14	8.23	-1.15
South Ayrshire	11146	1216	10.91	478	12.53	11.24	1.11
South Lanarkshire	31173	4088	13.11	1720	15.87	13.56	1.17
Stirling	7876	825	10.47	344	13.74	9.96	1.38
West Dunbartonshire	9588	1340	13.98	543	15.51	14.81	1.05
West Lothian	14758	1838	12.45	809	14.64	11.45	1.28
Midlothian	7987	912	11.42	358	12.57	10.84	1.16

Table 4: Northern Ireland number and percentages of carers in poor health by number of hours cared, compared with non-carers in poor health. Final column shows the difference in health between non-carers and those providing over 50 hours care per week. Source: Census 2001

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Northern Ireland	179071	18956	8.86	8234	17.9	13.7	1.30
Antrim	4643	452	9.74	215	17.59	10.92	1.61
Ards	8782	818	9.31	313	15.43	12.53	1.23
Armagh	5446	459	8.43	183	14.25	12.32	1.16
Ballymena	5528	420	7.60	167	12.05	10.09	1.19
Ballymoney	2456	177	7.21	82	11.80	12.28	-1.04
Banbridge	4294	373	8.69	132	13.24	11.42	1.16
Belfast	31590	4462	14.12	2128	23.57	18.35	1.28
Carrickfergus	4159	438	10.53	192	19.59	12.45	1.57
Castlereagh	8298	917	11.05	403	21.71	12.66	1.71
Coleraine	5210	447	8.58	167	12.93	10.81	1.20
Cookstown	3235	289	8.93	118	14.25	15.67	-1.09
Craigavon	8616	1004	11.65	435	18.87	15.36	1.23
Derry	10683	1318	12.34	600	18.52	16.23	1.14
Down	6752	631	9.35	256	15.08	11.68	1.29
Dungannon	4836	413	8.54	174	13.08	13.86	-1.06
Fermanagh	5528	406	7.34	183	13.04	10.82	1.21
Larne	3398	339	9.98	138	17.12	12.16	1.41
Lirnavady	2791	228	8.17	104	13.40	12.21	1.10
Lisburn	12042	1266	10.51	553	18.78	12.36	1.52
Magherafelt	3631	334	9.20	141	15.84	12.00	1.32
Moyle	1600	140	8.75	54	12.74	12.74	1.00
Newry	8683	797	9.18	350	14.02	13.91	1.01
Newtownabbey	8977	1011	11.26	401	19.60	12.96	1.51
North Down	9459	947	10.01	346	18.98	10.85	1.75
Omagh	4595	377	8.20	158	14.39	13.44	1.07
Straband	3757	443	11.79	220	18.77	17.04	1.10

Table 5: Wales - number and percentages of carers aged 16 + in poor health by number of hours cared, compared with non-carers in poor health. Final column shows the difference in health between non-carers and those providing over 50 hours care per week. Source: Census 2001

	Total no. of carers	Total no. of carers not in good health	% of all carers not in good health	No. of carers providing 50+ hrs of care per week in poor health	% of carers providing 50+ hrs of care per week in poor health	% non-carer population in poor health	Difference in likelihood
Wales	332907	49180	14.77	21113	23.74	15.11	1.57
Blaenau Gwent	8520	1540	18.08	731	28.14	20.80	1.35
Bridgend	15840	2435	15.37	1063	24.21	16.76	1.44
Caerphilly	20387	3578	17.55	1566	26.21	18.66	1.41
Cardiff	30263	4101	13.55	1690	23.26	12.27	1.90
Carmarthenshire	21272	3178	14.94	1475	23.78	17.09	1.39
Ceredigion	7588	983	12.95	410	20.87	11.88	1.76
Conwy	12052	1643	13.63	695	21.56	13.39	1.61
Denbighshire	10413	1506	14.46	662	24.15	13.61	1.77
Flintshire	16103	1947	12.09	791	21.01	11.77	1.78
Gwynedd	11010	1275	11.58	523	16.63	11.50	1.45
Isle of Anglesey	7110	924	13.00	380	19.33	12.46	1.55
Merthyr Tydfil	6922	1296	18.72	608	28.29	23.22	1.22
Monmouthshire	9369	1113	11.88	420	21.17	11.30	1.87
Neath Port Talbot	18536	3235	17.45	1470	26.10	20.11	1.30
Newport	15007	2219	14.79	935	24.05	14.75	1.63
Pembrokeshire	13216	1691	12.80	704	20.38	13.56	1.50
Powys	13800	1627	11.79	601	19.38	11.99	1.62
Rhondda; Cynon; Taff	28336	5028	17.74	2319	26.68	19.64	1.36
Swansea	27779	4208	15.15	1798	24.19	16.07	1.51
Torfaen	11251	1877	16.68	785	26.82	17.09	1.57
The Vale of Glamorgan	13531	1857	13.72	698	22.74	12.39	1.84
Wrexham	14588	1925	13.20	804	23.86	13.42	1.78
Brecon Beacons National Park	3893	487	12.51	178	20.46	12.86	1.59
Pembrokeshire Coast National Park	2763	319	11.55	128	20.29	12.33	1.64
Snowdonia National Park	2549	250	9.81	86	13.27	9.24	1.44

CARERS UK 20/25 Glasshouse Yard, London EC1A 4JT

Tel: 020 7490 8818 • Fax: 020 7490 8824

E-mail: info@carersuk.org • Website: www.carersuk.org • CarersLine: 0808 808 7777

Telephone advice line open 10 – 12 and 2 – 4pm daily on Wednesday and Thursday

CARERS NORTHERN IRELAND 58 Howard Street, Belfast BT1 6PJ

Tel: 028 9043 9843 • Fax: 028 9032 9299

E-mail: info@carersni.demon.co.uk • Website: www.carersni.org

CARERS SCOTLAND 91 Mitchell Street, Glasgow G1 3LN

Tel: 0141 221 9141 • Fax: 0141 221 9140

E-mail: info@carerscotland.org • Website: www.carerscotland.org

CARERS WALES River House, Ynys Bridge Court, Gwaelod y Garth, Cardiff CF15 9SS

Tel: 029 2081 1370 • Fax: 029 2081 1575

E-mail: info@carerswales.org • Website: www.carerswales.org

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