

# The 'tipping point'

When unpaid carers can no longer combine caring with paid employment

An analysis of the key factors leading to carers giving up work to care





# Contents

Executive summary 04

---

About this report 08

---

Literature review 10

---



State of Caring 2025 survey: Key findings

---



The tipping point in giving up employment: Detailed findings from the State of Caring 2025 survey

---



The tipping point in giving up employment: Interviews with carers

---



What can prevent the tipping point: Support from employers

---

Conclusion and recommendations 52

---

# Executive summary

This report, based on new Carers UK research conducted in 2025-26, examines the 'tipping point' at which unpaid carers feel they can no longer combine caring with paid employment. It provides a rich picture of lived experience and the intersecting pressures that can push carers out of the labour market, as well as exploring the practical support that can prevent carers from reaching a tipping point.



Across the UK, nearly 3 million unpaid carers are working in paid employment. However, juggling work and care can be stressful, and many carers feel they are no longer able to remain in paid employment, when they do not receive sufficient support. Previous research by Carers UK found that a staggering 2.6 million people – over 600 people every day – have given up work to care.<sup>1</sup> This has a significant impact on people's income, health and wellbeing, and life chances.

To explore the tipping point at which people feel they can no longer remain in paid employment, Carers UK carried out a survey with over 10,500 carers, interviews with 17 carers, and a literature review.

47%

of carers who are employees are considering reducing their working hours or giving up work



<sup>1</sup> Carers UK (2019) [Juggling work and unpaid care](#)

## Key insights

The research found that carers often want to remain in work, not only for income but because employment can protect their wellbeing. Carers described work as respite or 'me-time', that improves self-esteem, provides structure and improves social connection. Those who had left employment reported missing these benefits and experiencing knock-on impacts on their confidence and sense of purpose.

However, carers also described a set of interlocking factors that build pressure over time and can culminate in a tipping point. 71% of carers who had given up work said they had felt stressed or anxious about caring when they were in employment. This was often due to the unpredictability of caring, escalating needs of the person cared for, and lack of support from services. Nearly half (48%) of carers who had given up work did not feel comfortable speaking to their line manager about challenges they faced in combining work and care, indicating that workplace culture is as important as formal policy. Where line managers were unsupportive, carers described additional stress, delayed adjustments, or feeling pushed out. In contrast, when line managers were empathetic and understanding, carers felt better able to remain in employment. This was often because carers felt valued and understood, and comfortable asking for support, rather than feeling guilty or judged.

A recurring tipping-point driver is insufficient workplace flexibility and leave. 43% of carers who had given up work said their employer did not have policies in place to support carers. These carers reported being unable to meet rigid employer requirements (for hours, shift patterns, or office attendance), difficulty arranging leave, and failed attempts to negotiate reduced hours or alternative working patterns. Conversely, flexible working and hybrid/home working, Carer's Leave, carer passports (documents that identify carers and set out what support is needed), and carers networks, can be 'lifesavers' that prevent carers from reaching the tipping point. In particular, carers said that flexible working helped reduce stress, by enabling them to attend appointments, respond to crises and manage fluctuating needs.

Crucially, carers' employment decisions are shaped by the availability and reliability of support services. When services are absent, intermittent, or hard to navigate, carers not only provide more direct care but also spend time 'battling' systems – amplifying stress and reducing capacity for work.



71% 

of carers who had given up work said they had felt stressed or anxious about caring when they were in employment



48% 

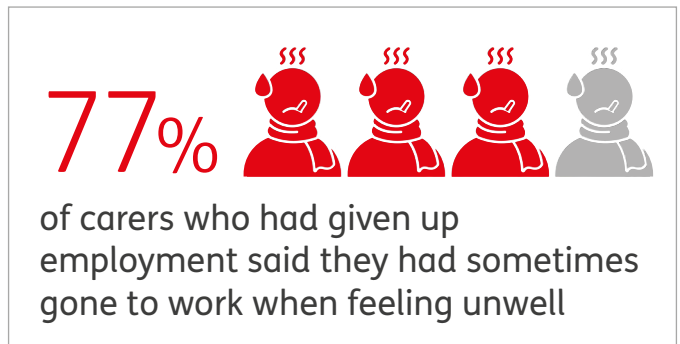
of carers who had given up work did not feel comfortable speaking to their line manager about challenges they faced in combining work and care

The most commonly cited factor that would have helped carers stay in work was more affordable, accessible, or reliable social care services. 35% of carers who had given up employment said this would have prevented them from reaching a tipping point. Parent carers in England also frequently reported a lack of support from schools, with insufficient SEND provision leading to parents giving up work to provide more care themselves.

Carers find it more challenging to remain in employment when they are struggling with poor mental or physical health. Several carers reported anxiety, depression or physical health impacts caused by caring, and some had taken extended sick leave from work. Those who felt unsupported by their employer on return from sick leave were more likely to reach a tipping point. 77% of carers who had given up employment said they had sometimes gone to work when feeling unwell. It is vital that carers can access help and support from the NHS with their own health. When carers experience long wait times, delays or lack of a flexibility in making healthcare appointments this can make it more difficult to resolve any health issues. Carers also often feel stressed when they do not receive enough information or advice from healthcare professionals about how to support the person they care for. When carers are having to spend an increased amount of time on NHS-related admin, such having to repeat information, ask updates on progress, or ensure that services are joined-up, this can increase stress and make it harder to focus on employment.

Concerningly, this research found that many carers felt they had no choice but to leave their employment. While some said that it was their own decision and that providing full-time care was something that they personally wanted to do, many carers felt that leaving work felt like their only option. For those carers, the tipping point came when multiple pressures accumulated over time and became too difficult to manage, resulting in burnout.

Carers who had given up paid employment were facing immediate income loss as well as long-term financial insecurity, and a negative impact on their wellbeing. The consequences of carers leaving employment also impacts businesses, through employee turnover and lost productivity, and the Exchequer through higher benefit spending and forgone taxes. Recent government analysis suggests there are productivity costs of £37 billion per year when carers are leaving work.<sup>2</sup>



<sup>2</sup> Department for Work and Pensions (2025) [The cost of working age ill-health and disability that prevents work](#)

## Key recommendations arising from this research

These findings come within a live policy context, when there are many ongoing reviews affecting carers. The review of social care in England through the Independent Commission led by Baroness Louise Casey and similar activity in Northern Ireland, Scotland and Wales, represents an opportunity to develop long term social care workforce strategies that ensure that there are enough skilled staff to provide social care, with less pressure placed on unpaid carers. It is vital that carers have genuine choice in the amount of care they provide, and support services they can rely on, so they can remain in paid employment if they wish to do so. The Casey Review in England, and similar reviews in the Nations, are an opportunity to recognise social care as a fundamental condition for carers to be able to work, in the same way that childcare has been essential for parents', particularly women's, participation in the labour market.

There is an opportunity to strengthen support for carers through the Government review of workplace rights for carers. It is clear from this research that many carers would find paid Carer's Leave beneficial, helping them manage caring responsibilities and avoid reaching burnout. The UK was the first adopter of many policies to support unpaid carers and was emulated by other countries and carers' organisations around the world. However, the UK has now fallen behind other nations in the support that carers receive to help them juggle paid employment and unpaid care. A growing number of countries now offer statutory paid Carer's Leave. Carers UK would like to see the Government legislate for five days of statutory paid Carer's Leave by the end of this Parliament, building on the Carer's Leave Act 2023.

There are further opportunities to support carers to remain in employment through the Keep Britain



Working programme which is led by Sir Charlie Mayfield and is focusing on ill-health, disability and the labour market, and the Pensions Commission review of retirement outcomes. These reviews should consider interventions that help carers remain in employment and protect their future pension contributions.

The Government is also implementing the NHS 10 Year Plan in England. Through this and similar work by the devolved governments, Carers UK would like to see a 'fresh approach' to how the NHS engages, interacts, supports and involves carers. This should include a recognition that the ways in which services are organised, and the extent to which carers are supported, make a critical difference to whether carers reach a tipping point. Carers UK would like to see systematic identification of unpaid carers within the NHS so that people can get the support they need, and more consultation with carers at hospital discharge so people have a genuine choice in whether they take on caring responsibilities.

Preventing carers from reaching the tipping point requires coordinated action across employment, social care, the NHS, the education system, and the social security system. Carers UK would therefore like to see the development of a new cross-Government Action Plan for carers, spanning 2026-2028, which then acts as a stepping stone to a more ambitious and fully funded National Carers Strategy. Such an Action Plan should clearly set out the Government's current and future commitments to supporting carers to remain in or return to paid work. It is important that Governments in Scotland, Northern Ireland and Wales commit to a similar Action Plan and strategy, where these do not currently exist, and work closely with the UK Government on reserved areas of responsibility such as employment to develop a whole system plan.

Our detailed recommendations can be found in the Conclusion section of this report.

# About this report

This research considers the tipping point at which carers feel they need to give up work to care. It explores the key drivers for the tipping point, both within the workplace, and across health and social care systems. It also considers the policies and practice that can prevent the tipping point from being reached.

While previous studies have looked at the challenges of juggling work and care, less research has fully explored the reasons why carers give up paid employment, and how the different factors influencing carers' decisions to leave work intersect. This research, which is predominantly qualitative, takes a holistic approach by considering, for the first time, how support from health and social care services, alongside support from employers, can prevent carers reaching a tipping point.

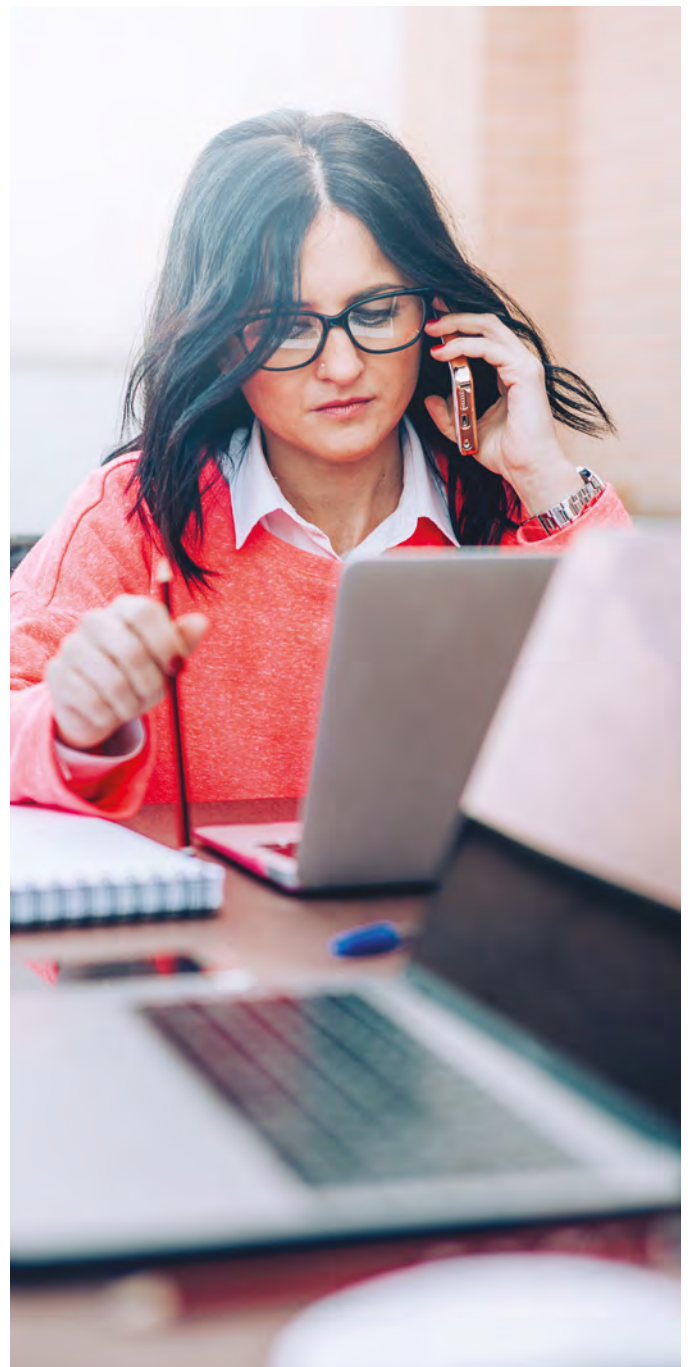
This research was guided by the following key questions:

- What are the different factors that influence the tipping point and when it occurs?
- How does carers' physical and mental health and wellbeing, including stress, interact with the tipping point?
- What support do carers need to prevent this tipping point from being reached?

This research is particularly timely, given that unpaid carers are providing more hours of care and are struggling to get the support they need from social care services.

**As life expectancy increases and people are living longer with more complex health conditions, more of us will be providing unpaid care in the future.**

It is vital that people have a genuine choice in whether they provide care, and are able to maximise their income and protect their health and wellbeing through paid employment, if they wish to do so.





The publication of this report coincides with several ongoing Government reviews which offer many opportunities to strengthen support for carers. These include a review of workplace rights for carers, reviews of pensions and the State Pension age, the Keep Britain Working review, a review of disability benefits, delivery of the NHS 10 Year Plan, and the Independent Commission on social care led by Baroness Louise Casey.

**Carers UK will share the findings of this research with the relevant Government departments. We hope it will provide useful evidence for policymakers and practitioners on how to prevent carers from reaching a tipping point.**

Carers UK is grateful to Standard Life who have generously funded and supported this research project as part of the Caring for Carers partnership. Standard Life has been working to raise awareness of the challenges faced by working carers and has taken a number of steps to support its colleagues, which it encourages other businesses to consider too. These include ten days of paid carer's leave and a Carers Network for colleagues.

## Methodology

This report is based on Carers UK research conducted in 2025-2026, including:

- Carers UK's State of Caring 2025 survey, which over 10,500 carers across the UK took part in. The survey was promoted extensively amongst both carers and organisations supporting carers. It was shared on the Carers UK website, on Carers UK social media channels, and with Carers UK members, volunteers, previous survey respondents, campaigners, affiliates, Employers for Carers members, and other organisations. This survey is not a representative survey.

57% of working-age carers who responded to the survey are in paid employment. 43% of working-age carers are not in paid employment:

- » 28% are looking after the home and family full-time,
  - » 7% are unable to work due to sickness or disability,
  - » 6% are retired,
  - » 1% are unemployed and looking for work, and
  - » 1% are in education.
- Interviews with 17 carers from across the UK. These interviews were semi-structured, conducted either through video calls or over the telephone. Carers who took part in the State of Caring survey and had indicated they were interested in participating further research were invited to take part.
  - Literature review of research about giving up work to provide unpaid care.

We are very grateful to our members and other carers for sharing their experiences.

# Literature review

Across the UK, 5.8 million people are caring for a family member or friend who is disabled, older or has a chronic health condition and needs support.<sup>3</sup> Caring is something that will affect many of us, with UK adults having a 65% chance of providing unpaid care at some point in their life.<sup>4</sup> As life expectancy increases and people live longer with more complex health conditions, the number of unpaid carers is expected to rise even further, with an estimated 1 million more people providing care by 2035.<sup>5</sup>

Caring responsibilities can also change and fluctuate over time. Centre for Care research found that more than 1.9 million people in paid employment become carers every year.<sup>6</sup> There are also gender inequalities. Women are more likely to care: they have a 50:50 chance of being a carer by the age 46, while men have the same 50:50 chance by age 57 – 11 years later.<sup>7</sup> Women are more likely to reduce their working hours to provide care, and to work in low paid and precarious sectors.<sup>8</sup>



## The employment status of unpaid carers

Census data shows that there are nearly 3 million people in the UK who are working in paid employment whilst also providing unpaid care. This equates to 1 in 10 people in the workplace. Many of these people are providing a significant amount of unpaid care: over half a million (509,000) people in employment in the UK are caring for 50 or more hours per week.

Census data also shows that 2.7 million carers are not in paid employment. Many of these carers are retired. When analysing the data for 'working-age' carers only (aged 18-65), the Census shows that about a third – 1.6 million people – are not in paid employment.

Many carers reach a tipping point where they no longer feel able to juggle work and care. A survey commissioned by the Centre for Social Justice found that 41% of carers in employment were considering leaving the labour market or reducing their hours over the coming year.<sup>9</sup>

New research by the Resolution Foundation found that 34% of carers in poorer homes say they 'can't work at all' because of their duties, and of those who do work, 41% report being able to work less than they might like.<sup>10</sup> Polling of the general public commissioned by Carers UK in 2019 found that an estimated 2.6 million people have given up work to care, and 2 million have reduced their working hours to provide care.<sup>11</sup>

<sup>3</sup> Carers UK analysis of ONS Census data

<sup>4</sup> Zhang, J. and Bennett, M. (2019) [Will I care?](#)

<sup>5</sup> Joseph Rowntree Foundation (2024) [The future of care needs: a whole system approach](#)

<sup>6</sup> Petrillo, M., Bennett, M. and Pryce, G. [Cycles of caring: transitions in and out of unpaid care](#)

<sup>7</sup> Zhang, Y. and Bennett, M. (2019) [Will I care?](#)

<sup>8</sup> McMunn, A. (2025) [Unpaid work – the missing link in the gender gap](#)

<sup>9</sup> Centre for Social Justice (2024) [Creating a Britain that works and cares](#)

<sup>10</sup> Resolution Foundation (2025) [Unsung Britain: a portrait of Britain's poorer half](#)

<sup>11</sup> Carers UK (2019) [Juggling work and unpaid care](#)

## The challenges of juggling work and care

Previous research has found that carers can often find it difficult to juggle work and care, and that providing just five hours of care per week can have an impact on carers' employment.<sup>12</sup> Caring can be unpredictable and responsibilities can change on a daily basis. Research by the Institute for Employment Studies found that the unpredictability of caring was a key barrier to employment, with carers often unsure when they would be available for work.<sup>13</sup>

Caring responsibilities can also be wide-ranging and varied: as well as personal care and support with daily living activities, carers often need to attend a significant number of medical appointments, manage a substantial amount of admin for the person they care for, and provide emotional support.

Dealing with a range of different and often complex caring responsibilities can lead to stress and tiredness, making it harder to juggle work and care. Carers UK's State of Caring 2025 survey found that 68% of carers who are employees said they felt stressed or anxious at work.<sup>14</sup> A University of Sheffield survey in 2020 found that 44% of working carers said they found it difficult to combine paid employment with their caring responsibilities, and 28% said that they felt too tired after work to do some of their caring tasks at least once a week.<sup>15</sup>



A study with working carers in the Netherlands found that juggling different demands led to fatigue and limited time for relaxation: many felt unable to switch off from caring.<sup>16</sup> A scoping review by the University of Sheffield in 2019 found that one of the key challenges of juggling work and care was being able to manage high and/or competing demands.<sup>17</sup>

Dealing with a range of different and often complex caring responsibilities can also make it harder for carers to concentrate and focus at work. The State of Caring 2025 survey found that 64% of carers who are employees found it difficult to concentrate at work and be as productive as they would like.<sup>18</sup>

It can also be more difficult for carers to participate in opportunities such as training courses and networking events that can help them develop new skills and build relationships in the workplace. Research by the Learning and Work Foundation found that carers can find it more difficult to attend in-person meetings, travel for work, or attend work social or networking events without a substantial amount of planning.<sup>19</sup>

Research suggests that there are a number of reasons why juggling work and care can become stressful. These are summarised below.

<sup>12</sup> Carers UK and Age UK (2016) [Walking the tightrope: the challenges of combining work and care in later life](#)

<sup>13</sup> Institute for Employment Studies (2025) [Working carers: helping carers get into work and stay in work](#)

<sup>14</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>15</sup> University of Sheffield (2020) [Supporting working carers](#)

<sup>16</sup> Vos et al. (2021) [It's like juggling, constantly trying to keep all balls in the air: a qualitative study of the support needs of working caregivers taking care of older adults](#)

<sup>17</sup> Spann, A. et al. (2019) [Challenges of combining work and unpaid care, and solutions: a scoping review](#)

<sup>18</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>19</sup> Learning and Work Foundation (2025) [Balancing work and care: approaches to improving support](#)

## i) Carers can struggle when insufficient support is provided by employers

Support from employers can make a real difference to carers. Conversely, a lack of support can make juggling work and care more difficult. In the Carers UK State of Caring 2024 survey, several carers said that their request for flexible working had been turned down, that they had been criticised for taking time away from work to provide care, or that their line manager had been unemphatic about their situation.<sup>20</sup> A scoping review by the University of Sheffield found that whether or not carers were able to access support often depended on individual line managers, who were 'gatekeepers' to workplace support but variable in terms of their levels of empathy and understanding.<sup>21</sup>

Many carers are worried about talking about their caring responsibilities in the workplace. The University of Sheffield's survey found that 28% of carers had not spoken to anyone at work about their caring role,<sup>22</sup> and this was often because they didn't think anything would change if they did so, or that it wasn't the sort of thing people talk about in the workplace. Similarly, an evaluation of the Government-commissioned Carers in Employment project found that there was an issue of 'hidden carers' who do not disclose their caring responsibilities to their employer.<sup>23</sup>

Because of the challenges of combining work and care, many carers feel unable to focus on their career: some feel they're not in a position to apply for promotion, while others choose jobs, often low paid or insecure, that suit their caring role rather than their skills and experience. This means carers are often unable to maximise their income,<sup>24</sup> and it can also lead to feelings of dissatisfaction at work. Carers UK's Cost of Caring report, published in 2025, found that 61% of carers in employment said caring has affected the type of employment they've taken on, and a fifth (21%) said they had taken on a lower paid or more junior role that fitted better with caring.<sup>25</sup>

Many carers are working below their potential. Learning and Work Foundation analysis of Understanding Society data found that a smaller proportion of carers work in managerial or senior roles compared to non-carers, while a higher proportion of carers work in elementary roles (eg cleaning, and manual labour) that may offer greater flexibility, but less job satisfaction.<sup>26</sup> Carers can also face discrimination: Carers UK research found that some carers had been discouraged by managers from applying for more senior roles, or turned down for promotion.<sup>27</sup>



# 21%

of carers who are employees said they had taken on a lower paid or more junior role that fitted better with caring



<sup>20</sup> Carers UK (2024) [State of Caring: the impact of caring on employment](#)

<sup>21</sup> Spann, A. et al. (2019) [Challenges of combining work and unpaid care, and solutions: a scoping review](#)

<sup>22</sup> University of Sheffield (2020) [Supporting working carers](#)

<sup>23</sup> Institute for Employment Studies (2018) [How can working carers be supported effectively? A new IES evaluation](#)

<sup>24</sup> Heitmueller, A. and Inglis, K. [The earnings of informal carers: wage differentials and opportunity costs](#)

<sup>25</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>26</sup> Learning and Work Foundation (2025) [Balancing work and care: approaches to improving support](#)

<sup>27</sup> Carers UK (2024) [Making caring a protected characteristic](#)

## ii) Carers can find it hard to combine work and care without good quality, available and affordable social care services

Social care services can play a key role in supporting carers to remain in work. Research by the LSE found that when the person being cared for was receiving at least one paid service, such as home care, a personal assistant, day care, or meals on wheels, carers caring for 10 or more hours per week were more likely to be in employment.<sup>28</sup>

However, it is clear that local authorities are struggling to meet demand for support. Care needs are becoming increasingly complex and more carers are caring for someone with dementia, a mental health condition or a learning disability in the last 10 years.<sup>29</sup> As a result of this increased complexity of need, 89% of Directors of Adult Social Care Services are concerned about increased costs, and many are unable to meet the growing demand for support.<sup>30</sup>

As a result, more responsibility is being placed on unpaid carers.<sup>31</sup> Census data in England, Wales and Northern Ireland shows that the number of hours of unpaid care has increased over the past 10 years,<sup>32</sup> while in Scotland the overall number of carers has increased by 27.5%.<sup>33</sup>

Many carers would find it beneficial to have more support from social care services so they can take a break when they're not working, and be better able to organise replacement care, allowing them to remain in employment. However, carers are often unable to find any suitable support, or the costs are prohibitive.<sup>34</sup> When carers experience long waiting times for support, or are dissatisfied with the quality of services, they often feel that they have no choice but to provide the majority of care themselves.<sup>35</sup> Research by the Learning and Work Foundation found that carers who had given up work to care said that leaving their employment felt like their only option,

as they needed to be on call 24/7.<sup>36</sup> Similarly, research for Carers Week found that 62% of current and former carers said that they had no choice in taking on the role because no other care options were available.<sup>37</sup>

## iii) Carers can find it hard to combine work and care without support from the NHS that is flexible, joined-up, and recognises the impact of caring on carers

Under the Health and Care Act 2022 in England, and the Carers (Scotland) Act 2016, carers should be consulted at hospital discharge. However, in practice this is not always happening: Carers UK surveys have consistently found that carers are not asked about their willingness and ability to care and often feel under pressure to care.<sup>38</sup> When carers have to provide additional care when they did not expect to have to do so, this can impact on their employment.

Carers UK research has also found that carers spend a substantial amount of time on NHS-related administration. Our 2024 survey with carers about the NHS found that 34% of carers were spending 10 or more hours per month on NHS admin related to the person they care for.<sup>39</sup> This can add to stress and make it more difficult to focus on employment.



<sup>28</sup> Pickard, L. et al. (2015) [The effectiveness of paid services in supporting unpaid carers' employment in England](#)

<sup>29</sup> Joseph Rowntree Foundation (2024) [The future of care needs: a whole system approach](#)

<sup>30</sup> Directors of Adult Social Services (2025) [2025 Spring Survey](#)

<sup>31</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>32</sup> Office of National Statistics (2023) [Unpaid care, England and Wales: Census 2021](#); NISRA (2022) [Main statistics for Northern Ireland: Statistical Bulletin Health, disability and unpaid care](#)

<sup>33</sup> National Records Scotland (2025) [Scotland's Census 2022: Health, disability and unpaid care](#)

<sup>34</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>35</sup> Carers Week (2024) [No choice but to care](#)

<sup>36</sup> Learning and Work Foundation (2025) [Balancing work and care: approaches to improving support](#)

<sup>37</sup> Carers Week (2024) [No choice but to care](#)

<sup>38</sup> Carers UK (2025) [A fresh approach to supporting unpaid carers](#)

<sup>39</sup> *ibid*

#### iv) Parent carers can face specific challenges which affect their ability to remain in employment

Parent carers of disabled or chronically ill children can face specific challenges that can impact on their ability to combine caring with paid employment. Research by the Family Fund found that over a quarter (29%) of parent carers said that better access to childcare for children with complex needs would enable them to work more.<sup>40</sup> As well as a lack of availability, many carers said they were not confident in the quality of childcare services and ended up providing more care themselves because of this.

Parent carers can also find it difficult to focus on employment if their child is struggling and not being adequately supported at school. In England, applying for an Education, Health and Care Plan can be time-consuming and difficult. Many local authorities are not providing the support that children with significant needs are entitled to due to funding constraints.

Support for special educational needs and disabilities (SEND)/additional support needs (ASN) is currently insufficient, with services unable to keep up with rapidly rising demand.<sup>41</sup> Many parents are battling for support, and describe being locked out of discussions and decisions about their child's education.<sup>42</sup> A recent survey by Sense found that a third of parents of disabled children have had to leave their job because they couldn't get adequate support, and 47% said that they are worried their child's support will be taken away when the Government implements reforms to SEND provision.<sup>43</sup>

Research by the Disabled Children's Partnership found that parents can also face long wait times for educational psychologists, occupational therapists and speech and language therapy, leading to increased caring responsibilities.<sup>44</sup>

#### v) Carers' health and wellbeing can be impacted by caring

Caring can have a negative impact on carers' own mental and physical health, and this affects people's ability to stay in paid employment. Carers are more likely than those without caring responsibilities to have poor health,<sup>45</sup> and caring has been established as a social determinant of health.<sup>46</sup> The State of Caring survey found that 35% of carers said their mental health was bad or very bad, 30% said their physical health was bad or very bad, and 65% said they find it hard to get a good night's sleep because of their caring role.<sup>47</sup>

Because carers are often unable to take a break and prioritise their own health, health issues can remain unresolved. Carers Week research found that 40% of current carers said they had postponed or cancelled a medical appointment, test, scan, treatment or therapy because of caring.<sup>48</sup> Research by the University of York for the Department of Work and Pensions found that carers' perceptions of their own health and wellbeing were very important considerations in decisions about whether to work.<sup>49</sup>



<sup>40</sup> Family Fund Trust (2025) [The cost of caring 2025](#)

<sup>41</sup> IFS (2025) [England's SEND crisis: costs, challenges and the case for reform](#)

<sup>42</sup> Education Select Committee (2025) [Solving the SEND crisis](#)

<sup>43</sup> Sense (2026) [Nearly half of all parents fear educational support will be taken away from their disabled children](#)

<sup>44</sup> Disabled Children's Partnership (2025) [Fight for ordinary](#)

<sup>45</sup> ONS (2024) [Unpaid care expectancy and health outcomes of unpaid carers](#)

<sup>46</sup> Public Health England (2021) [Caring as a social determinant of health: review of evidence](#)

<sup>47</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>48</sup> Carers Week (2025) [Caring about equality](#)

<sup>49</sup> University of York (2005) [Carers' aspirations and decisions around work and retirement](#)

## The impact of giving up work to care

If carers reduce their working hours, or give up work completely, this can lead to significant financial pressures, particularly if they live with the person they care for and that person has also had to give up work. WPI Economics research for Carers UK found unpaid carers who are not in paid employment have a substantially higher rate of poverty than those who manage to remain in employment.<sup>50</sup> It also found that being out of work is the single strongest quantitative predictor of poverty for unpaid carers. As well as lost earnings, carers who are not in employment often struggle due to insufficient support from the social security system. Carer's Allowance (Carer Support Payment in Scotland) is the lowest benefit of its kind at just £86.45 per week (2026/27 rate) and, even when enhanced by a supplement (as in Scotland) fails to safeguard carers against poverty. Many unpaid carers experience financial hardship, particularly when there are additional costs of care such as higher electricity bills.<sup>51</sup>

Carers are also less able to pay into a private pension or save for the future. Carers on low incomes may not be auto-enrolled into their employer's pension scheme if they do not meet the minimum income threshold (£10,000 a year in 2026/27). Others may reduce their pension contributions if they are struggling financially. This means that carers are often under pensioned for many years.



Research commissioned by Standard Life Centre for the Future of Retirement (previously known as Phoenix Insights) found that nearly half (47%) of carers aged 60-65 have no private pension savings,<sup>52</sup> while Pensions Policy Institute research found that carers are retiring with 80% of the UK average pension income, placing them among the most underpensioned groups in the UK.<sup>53</sup> As women are more likely to provide care, this is increasing existing income inequalities between genders, and heightening women's risk of poverty in later life.

Giving up work to care can also have a negative impact on carers' health and wellbeing, particularly as being in paid employment is important to carers' sense of identity, self-worth, and social life.<sup>54</sup> A Healthwatch survey found that carers who had given up work reported negative impacts, such as feeling socially isolated with a lack of purpose, or experiencing a decline in their self-confidence/self-worth.<sup>55</sup>

When people give up work to care there are also wider implications for the economy, which depends on businesses and employers retaining skilled and knowledgeable staff. The peak age for caring can often coincide with the peak of an individual's career, meaning that employers are at risk of losing talented people in whom they have invested considerable time and money. When valued employees have to give up work to care, businesses bear the costs of recruitment and lost productivity.

There is also a significant impact on the economy through increased spending on social security benefits for people who have left their jobs, as well as taxes forgone on lost earnings. Research by the DWP estimated that the productivity costs to the economy of carers falling out of work was a staggering £37 billion a year.<sup>56</sup> This analysis looked at the difference between current economic output, and the potential economic output if unpaid care provision was not limiting or preventing work.

<sup>50</sup> WPI Economics (2024) [Poverty and financial hardship of unpaid carers in the UK](#)

<sup>51</sup> Carers UK (2025) [State of Caring 2025: The cost of caring – the impact of caring across carers' lives](#)

<sup>52</sup> Standard Life Centre (2025) [Changing journeys: how we save, work and retire](#)

<sup>53</sup> Pensions Policy Institute (2025) [Champions of Change: the underpensioned report 2025](#)

<sup>54</sup> Learning and Work Foundation (2025) [Balancing work and care: approaches to improving support](#)

<sup>55</sup> Healthwatch in Devon, Plymouth and Torbay (2024) [The impact of providing unpaid care at home](#)

<sup>56</sup> Department of Work and Pensions (2025) [The cost of working age ill-health and disability that prevents work](#)

## The impact that support from employers has in helping carers to remain in paid employment

Research suggests that supportive workplace policies can play a key role in enabling people to combine caring with paid employment.

### Paid Carer's Leave

The Carer's Leave Act 2023 gave carers a legal right to take five days of unpaid Carer's Leave per year. Although unpaid Carer's Leave can be beneficial, some carers cannot afford to take this.

Evidence from employers, including members of Carers UK's employer forum Employers for Carers shows that introducing a statutory right to paid Carer's Leave would provide vital support to carers and help employers retain experienced staff. Centre for Social Justice research found that more than 40% of working-age carers not in paid employment would go back to work if their employer granted them five days paid leave.<sup>57</sup>



### Flexible working

The Flexible Working Act 2023 gave employees the right to request flexible working from day one of their employment. This right was strengthened by the Employment Rights Act 2025 which made it harder for employers to refuse requests. Research has found that flexible working is important to carers. A University of Sheffield survey found that 95% of those who could work from home, and 95% of those able to use flexitime said their caring role was easier as a result.<sup>58</sup> The Taylor Review of Modern Working Practices, undertaken on behalf of the UK Government found that 42% of carers said flexible working was important in comparison to 29% of those without caring responsibilities,<sup>59</sup> while University of York research found that flexibility was a key factor in enabling carers to combine work and caring.<sup>60</sup>

Offering flexible working could result in net gains for employers through improved staff retention. Research by Standard Life (previously known as Phoenix Group) found that nearly two thirds (65%) of working carers would look for a new job if their current employer limited their ability to work flexible hours.<sup>61</sup> Centrica – a company which offers significant support to employees who are carers – estimate that if employers support carers by adopting flexible working policies, this could result in savings of up to £4.8 billion a year in unplanned absences and a further £3.4 billion in improved employee retention.<sup>62</sup>

<sup>57</sup> Centre for Social Justice (2024) [Creating a Britain that works and cares](#)

<sup>58</sup> University of Sheffield (2020) [Supporting working carers](#)

<sup>59</sup> Taylor, M. et al (2017) [Good work: the Taylor Review of Modern Working Practices](#)

<sup>60</sup> University of York (2005) [Carers' aspirations and decisions around work and retirement](#)

<sup>61</sup> Standard Life (2025) [Two in five working carers would not have a job without flexible working](#)

<sup>62</sup> Centrica (2018) [Centrica and Carers UK write to the UK's largest employers to encourage more support for carers](#)

## Carer policies

Despite the above support, carers are not always aware what their rights are in the workplace. The Carers UK State of Caring 2024 survey found that many carers were not aware of new employment rights for carers: 36% were not aware of the right to ask an employer for flexible working from day one of employment, and 34% were not aware of the right to take five days unpaid Carer's Leave.<sup>63</sup> Written policies are helpful in clarifying what support is available. A Carers UK Employers for Carers survey with employers in 2024 found that since the legislation on unpaid Carer's Leave had come into force, 51% of organisations now had a dedicated Carer's Leave policy in place.<sup>64</sup> This is encouraging, as earlier research by CIPD found that only a quarter (26%) of employers had a carer policy.<sup>65</sup>



## Line manager support

Evidence suggests that training for line managers can be helpful in raising awareness and understanding about caring and carers' rights. Currently, many line managers are unaware what support carers are entitled to: for example, the Carers UK Employers for Carers survey found that 76% employers had not specifically raised awareness or provided training to managers about the Carer's Leave Act.<sup>66</sup> Carer Champions can also help advocate for carers: a scoping review by the University of Sheffield found that having a Carer Champion in the workplace was helpful in ensuring policies were being adhered to by line managers.<sup>67</sup>

Other research has highlighted the importance of line managers demonstrating compassion. University of York research found that sympathetic line managers and colleagues were important in helping carers combine work and care successfully,<sup>68</sup> while an academic study in the US found that having emotional support in the workplace reduced the extent to which female carers were struggling to combine work and care.<sup>69</sup> Previous research by Carers UK and Age UK on older working carers found that the attitudes of managers and other staff were as important a factor in carers' decisions around work and care as formal carer policies.<sup>70</sup>

<sup>63</sup> Carers UK (2024) [State of Caring: the impact of caring on employment](#)

<sup>64</sup> Employers for Carers (2024) [The Carer's Leave Act 2023: Six months on](#)

<sup>65</sup> CIPD (2016) [Creating an enabling future for carers in the workplace](#)

<sup>66</sup> Employers for Carers (2024) [The Carer's Leave Act 2023: Six months on](#)

<sup>67</sup> Spann, A. et al. (2019) [Challenges of combining work and unpaid care, and solutions: a scoping review](#)

<sup>68</sup> University of York (2005) [Carers' aspirations and decisions around work and retirement](#)

<sup>69</sup> Gordon, J. et al. (2020) [Balancing caregiving and work: role conflict and role strain dynamics](#)

<sup>70</sup> Carers UK and Age UK (2016) [Walking the tightrope: the challenges of combining work and care in later life](#)

# State of Caring 2025 survey: key findings

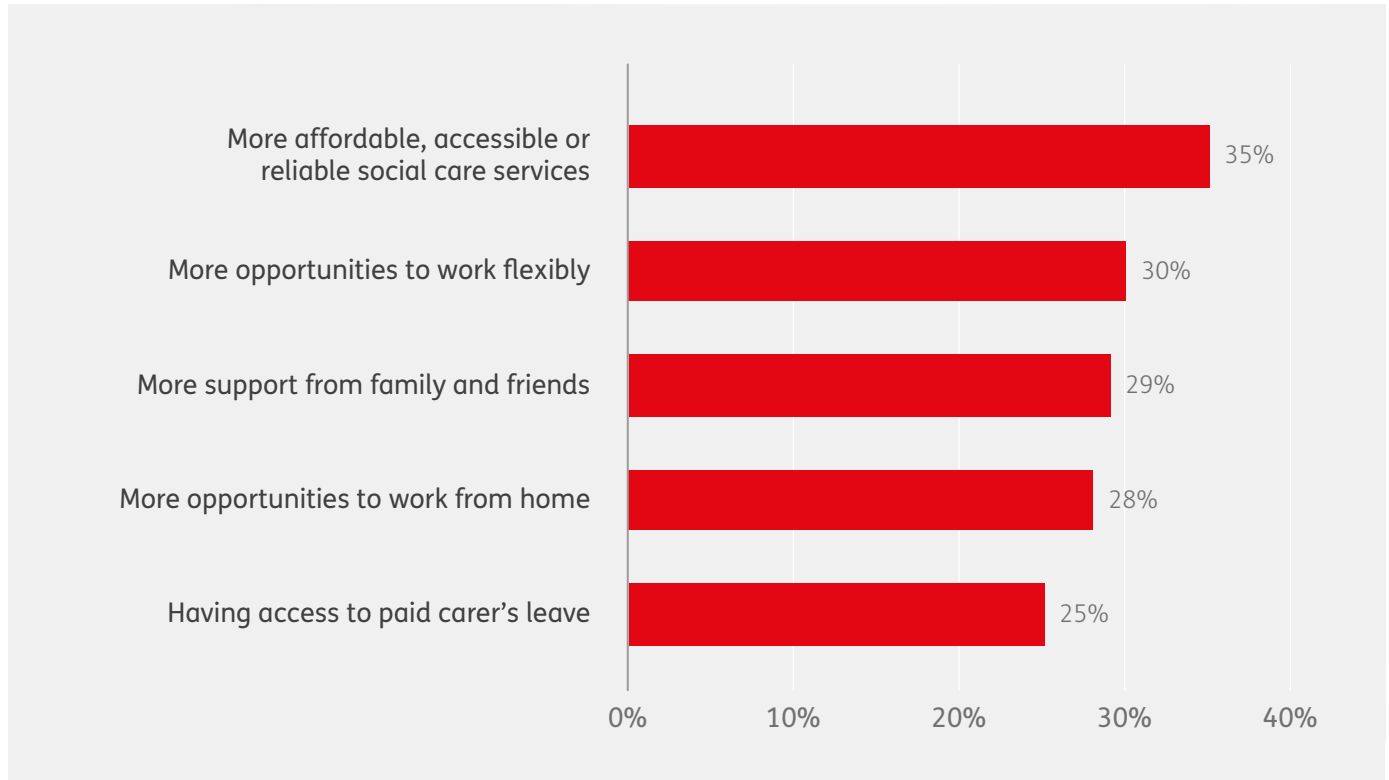
Carers were asked several questions about the tipping point in the 2025 State of Caring survey. This section summarises the key findings from this new research.



- **Employment is beneficial for wellbeing.** Carers who are currently in paid employment said that work has a positive impact on their health and wellbeing. 74% said their employment positively supports their wellbeing.
- **However, juggling both caring and employment is pushing many carers to the edge.** Nearly half (47%) of carers who are employees are considering reducing their working hours or giving up work.
- **Carers often struggle to juggle work and care when they feel stressed and/or exhausted.** 71% of carers who had given up work said they had felt stressed or anxious about caring when they were in employment, and 77% said they had sometimes gone to work when feeling unwell. Some carers said that they often had to use their annual leave for caring, which reduced their opportunities to take a break and improve their wellbeing. Others said they struggled to get a good night's sleep, and often felt exhausted, particularly when they were dealing with multiple caring responsibilities.

- **Carers' own health affects their ability to stay in work.** 1 in 8 (12%) of carers said they have a health condition caused by caring which makes work harder, and around 1 in 6 (18%) have a health condition made worse by caring which makes work harder. 57% of carers who have a health condition which makes work harder said they were considering reducing their working hours or giving up work.
- **The tipping point is rarely one thing: it is a combination of factors.** When asked what the tipping point was that led to them giving up work to care, carers mentioned several interrelating factors, which fell into four broad categories:
  - 1 A lack of support from their employer:**
    - » having an unsupportive line manager
    - » not being able to work flexibly and finding it difficult to meet their employers' requirements
    - » not having supportive and well-embedded policies for carers within the workplace
    - » a poor understanding of caring within the workplace, including from colleagues.
  - 2 Insufficient support from services:**
    - » not being able to find suitable social care services to provide replacement care and alleviate some of the stress of caring
    - » not being able to access co-ordinated support from the NHS
    - » experiencing issues with SEND provision in schools or lack of suitable childcare services for disabled children.
  - 3 Their own worsening health, or the declining health of the person they care for:**
    - » feeling increasingly stressed and tired as a result of juggling multiple responsibilities
    - » declining physical or mental health.
  - 4 Increasing caring over time:**
    - » caring responsibilities increasing due to the condition of the cared-for person worsening over time
    - » carers having to care for more people.
- **Many carers reached a tipping point when they were experiencing a combination of factors.** Some described how they were 'spinning plates' and having to deal with multiple challenges at once. When the stress of dealing with many different issues at once became too much, carers reached a tipping point.
- **Many carers did not want to leave their employment, but felt they had no choice.** Some said they had requested flexible working or changes to their working hours, but this had not been possible. Others said they had not received the support they needed from services, and felt they had no choice but to provide care themselves.
  - “ My caring role is 24/7 and the person I care for has no support at all from support services therefore I have no choice.”
  - “ SEND needs failing to be met in school. School actively ignoring both kids' EHCPs/actively trying to force them out. My kids' mental health was destroyed by their experiences in mainstream school so I had no choice left but to give up my job to care for them.”
- **Giving up work hits health and finances hard.** Working age carers who were not in employment were more likely to report bad or very bad mental health than those in employment (46% vs 35%), and much more likely to be struggling to make ends meet (36% vs 19%).
- **Support from social care services has a key role in enabling carers to remain in paid employment.** 67% of carers who said their employer was carer friendly have still felt stressed at work, often due to challenges with support services. Carers who had given up work said that the main thing that would have prevented this was more support from social care services. 35% of carers said more affordable, accessible or reliable social care services would have helped prevent them from reaching a tipping point. Many carers said they couldn't get the support they needed from social care, which caused stress and resulted in them taking on more caring responsibilities. For some carers, when this became too difficult to manage, they reached a tipping point.

Figure 1: The five most reported types of support that would have prevented carers from giving up employment



- **Support from the NHS is also important.** Nearly a quarter (23%) of carers who had given up work said that more support with caring from the NHS (eg more guidance and advice about the condition of the person they care for, and/or how to care safely) would have helped prevent them from reaching a tipping point. Several carers said it was difficult to juggle work and care when they had multiple healthcare appointments, often in locations far from home.
  - **Support from employers is crucial in preventing the tipping point.** 43% of carers who had given up work said their employer did not have policies in place to support carers.
  - **Whether or not carers reach a tipping point can depend on line manager support.** Many of the carers who had given up work did not feel comfortable speaking to their line manager about their health (48%) or about challenges they faced in combining work and care (48%). Some had found their manager to be unempathetic, while others said that although their employer had carer friendly policies, line managers were not always enacting them.
- “At the moment it depends on how sympathetic your individual manager is to your situation, they can make it very difficult and unpleasant or as per my current manager – allow flexibility.”
- **Unpaid Carer's Leave has been beneficial.** The proportion of working carers who have taken unpaid leave (23%) has increased since the previous year (15%). Over a third (36%) of carers said unpaid Carer's Leave had made it easier for them to stay in work, and 32% said it had made it less stressful.
  - **However, paid Carer's Leave could make a significant difference.** Many carers said they cannot afford to take unpaid Carer's Leave and would find paid Carer's Leave more helpful. 60% said that paid Carer's Leave would make them feel less stressed, and 45% said they would be more likely to remain in paid employment.

# The tipping point in giving up employment: detailed findings from the State of Caring 2025 survey

In the State of Caring 2025 survey, carers who had given up work to care were asked a new open question about what the tipping point was. This was the first time that carers were invited to explain, in their own words what led to their decision to leave employment. Their responses are summarised below.



## Factors leading to the tipping point

### Lack of support from employer

#### 1. Not having the right flexibility, job design or Carer's Leave

Some carers said they had left their employment because there was no support available, such as flexible working or Carer's Leave.

“The role was very demanding, I was not offered any support, and I was unable to provide all the care that was needed – which meant my cared-for deteriorated. I had also changed jobs, and there was not the support I had in my previous job – the previous employers let me have long periods time off work during crises (4-10 weeks), and to have a phased return – working reduced hours.”

“I was unable to arrange any sort of leave quickly – it all had to be booked at least a month or more in advance. It was untenable.”

Some carers said that they were unable to meet their employers' requirements (eg working a certain number of hours or days, or working in the office), and felt they had to leave employment because of this.

“Employer constantly changing my working hours (on a weekly basis) this included reducing and increasing hours despite contracted 30 and changing finishing times which clashed with school drop off.”

“My work went from hybrid (3 days per week in the office) to fully remote during COVID. I was initially exempted from return to work due to my caring responsibilities, but as the return-to-work process intensified it was stated ‘all existing arrangements would be put under review’ as they intended to implement a 15 days per month in office mandatory target.”

“The decision was taken for me as I worked in the NHS and during the pandemic I was to be re-deployed from my role within School Nursing to a hands on nursing role (even though I am not trained) caring for Covid patients, which I felt would put my disabled husband at risk. I had no choice but to resign.”

Several carers said they had tried to remain in employment by requesting changes to their working patterns, but that these requests had been declined.

“I was not allowed to reduce my hours or to work differently (for example working in the evening after [my daughter] was asleep). I had to continue to work 45-50 hours per week in my job or leave – that was the option, even though they knew my daughter is severely disabled. There was no choice, I had to leave.”

“I tried to negotiate with my employer, 16 hours per week on fixed days but was flat out refused part time hours and set days/time.”

#### 2. Feeling unsupported by a line manager

Many carers who had given up work to care described issues they had experienced with line managers not being understanding and empathetic.

“Partner became ill in 2019, asked employer if I could reduce hours they said yes but my manager made it difficult. Waited for over 9 months then I had to leave as partner began to deteriorate.”

“I kept cutting my hours, but my wife's seizures got worse. Her parents had cancer, my mum had cancer. Both my children were waiting for autism assessment. I couldn't cope. My manager got more frustrated with me. I couldn't concentrate in work. So felt pressed to leave work and become a full time carer for multiple family members.”

Some carers said that they felt bullied by their manager, while others said they had faced disciplinary procedures for taking time off work to care. In some cases, this lack of support from their manager had led to them leaving their employment.

“Line manager wouldn't support my caring role, appointments had to be made out of working day...[they were] unsupportive & bullying.”

“When I had to take time off I was placed on disciplinary and given a warning as my child was an adult I was not seen as having a caring role or needing time off for attending medical appointments.”

## Lack of support from schools and childcare providers

### 3. Poor quality Special Educational Needs and Disabilities (SEND)/Additional Support Needs (ASN)

Many parent carers said that insufficient SEND provision in their child's school meant they had to provide more care themselves, making it harder to remain in employment.

- “ My kids' school failed to meet their SEND needs, even with both kids having an EHCP. The kids mental health collapsed, they could no longer attend school so I needed to be at home/a full time carer.”
- “ Both my sons have autism and challenging behaviour and their special schools could not manage them and eventually excluded them.”
- “ My daughter had to leave mainstream education at 13 years old. She is autistic sensory had a terrible secondary school experience. She developed chronic anxiety and fatigue and could not return. I support my daughter with a EHCP and a personal budget for her education. I am her mother, I have found and set up all her education with private tutors with no help from the [local authority]. I am now the implementor and monitor of her education. I am her PA... Sendco, driver, administrator, 5 days a week term times. I want to work but unable to because I am supporting my daughter with her needs.”

Several carers also said they received frequent phone calls from the school while they were at work, and often had to leave work to resolve issues.

- “ My daughter wouldn't settle in education and I was getting called most days to go collect her.”
- “ My son is autistic and when he started high school he was very unsettled didn't cope in a classroom environment which led to him having violent outburst which I had to be called from work to go and collect him which was causing me lots of stress and anxiety.”

### 4. Difficulties finding specialist childcare services

Some carers said they found it difficult to find specialist childcare services that met their child's needs, which meant they had to provide more care themselves.

- “ Had a baby with disabilities and could not afford the specialist childcare he would need...Work became impossible as my son's needs increased.”
- “ This was a massive life changing event, I didn't want to give up my job of 17 years, but I had no choice. Childcare isn't available & especially hard to get for kids with special needs. I miss going to work & the social element.”
- “ My husband's job took us to a place where adequate childcare was non-existent...By the time we were moved by his employers we had realised that something was different about our child... By the time my children were school age I was attending more dr/ hospital appointments, SEN school appointments. No SEN care during school breaks meant I could not return to work. This has been ongoing for the entirety of my child's life”.



## Insufficient support from the NHS

### 5. Having to attend multiple healthcare appointments

Some carers said that having to attend a high number of healthcare appointments, and not being given much flexibility about when these were, made it difficult to prioritise their employment.

“When my daughter was a child she had to attend a lot of appointments and therapy. Each department had days they could offer appointments. Therefore it felt that whatever days I worked I was unable to attend one or other appointment. It felt like I had to make a choice between work and my daughters needs.”

“I could not work and attend the many appointments at the same time. Most of the times if that particular appointment wasn't taken they would not have anymore for several more weeks even months.”

“My daughter has needed care since she was 3 years old. I have spent many months in hospital with her, I have also spent most of the past 30 years attending hospital appointments/stays/assessments with her. She has been ill many times.”

Several carers said it was particularly difficult to fit appointments into the working day when the hospital was located far from home or their workplace.

“Some of [my daughter's] appointments were also in a specialised hospital so had to travel over an hour there and back.”

“[My son] needed dialysis 3 or 4 times a week at a hospital over 60 miles away.”

### 6. The person being cared for not receiving enough support from the NHS

Some carers said they had to give up work because the person they care for was not receiving sufficient support from the NHS.

“If my wife had been assessed for NHS funded care I could have carried on working. We were told that she would not be eligible and only after I fought the county council was the matter resolved in our favour. Sadly by then I had lost my business.”

“I was guilt tripped into giving up my career because I was told the NHS did not have the money or resources to care for my ex-wife”.

“My partner has been very ill and in hospital for months as a result of neglect from NHS. The trust in health care was gone and we both questioned every decision they made. That's when it was I made the decision to look after him myself. Work could not keep my job open indefinitely therefore they had to let me go”.



## Lack of support from social care services

### 7. Not being able to find suitable replacement care services

Many carers said they needed more support from social care services. Some said that because it was difficult to find available and affordable social care services, they were having to take on more caring responsibilities themselves. As a result, carers often decided to reduce their working hours to make their caring role more manageable, and many ended up giving up work completely.

- “There was no care available. The information I was given was pre covid and had not restarted after covid...”
- “No help available to care for the person despite trying to employ someone- meant I had to give up a job I loved – it helped me mentally to get a break from my caring role and feel normal. I resent my caring role.”
- “My son was in hospital and out of education more than in. As soon as he reached adulthood, social services have tried to remove his support and left him at home. With his fluctuating ill health, hospital appointments, a single parent, I am exhausted and unable to juggle work.”
- “I couldn't find suitable day care for my sister who has learning disabilities. She wasn't able to be away from home for more than 4 hours due to the day centre being unable to take her to the toilet due to no wheelchair accessible toilet. Sister also couldn't deal with day centre every day as it was too overwhelming for her.”

Many carers also said they weren't happy with the quality of social care services, and didn't trust that paid care workers would be able to meet the needs of the person they cared for. This meant they made the decision to take on most of the caring responsibilities themselves, resulting in them giving up paid employment.

- “Cared- for needed consistency to maintain even adequate mental health on top of life changing physical health issues and we could not find any other person/organisation who could provide the level of consistency that was, and still is required.”

- “The care agency carers were constantly complacent and could only be counted on to provide the most basic care. Therefore I couldn't trust them to do more specific tasks such as manage medications if one changed.”

Some carers also said that there was a lack of understanding or knowledge amongst health and social care professionals about the condition of the person they care for. This meant it was even harder to find suitable support.

- “My daughter's needs are complex and it is very difficult to find [paid] carers who can support her on their own.”
- “Fighting for services has been so challenging. Professionals having little to no knowledge on PICA. My child eats through wood window sills and nobody could help me...my whole house is destroyed. It took me a year of constant phone calls...to even get a disability social worker. My child went to school for 2 hours and I spent this time on the phone begging people to help me. Still to this day I have no help...he needs constant attention [so] that he does not eat non food items...”

Several carers said they could not afford to pay for social care services, and that it wasn't possible to cover the cost of care through their salary alone.

- “My decision to give up work was financial as my husband needed looking after full time and we could not afford to pay for a carer whilst I worked.”
- “The person I care for deteriorated to the extent that she needed full time care and supervision. So my choice was: give up work and care for her myself, or put her in a Care Home. Giving up work was less costly than Care Home fees and I could be more confident of the standard of care if I did it myself.”
- “My salary simply wouldn't cover all outgoings and the cost of having paid carers coming in. On paper I had a decent salary but once my husband was too unwell to work my earnings alone didn't cover everything.”

## 8. The person being cared for not wanting support from social care services

Some carers said they had not considered getting support from social care services because the person they cared for was not comfortable receiving external help. This led to carers taking on more responsibilities themselves, and in some cases giving up work.

- “My mum didn't want any strangers coming into her house due bad experiences with her brother's home helps prior to his passing.”
- “I had no choice but to give up work, [when the person] who I care for refused to have [paid] carers visit the home. Because they need round-the-clock care I had to do it.”
- “Daughter became unable to attend school and was too anxious to be cared for by any other person than me...”
- “Unfortunately it was due to my father not wanting paid carers in the house...I can understand why he would not want strangers in but it has put pressure on me.”

## 9. Caring responsibilities increasing due to the condition of the cared for person worsening over time, or having to care for more people

Many carers said the condition of the person they cared for was complex, and that they needed 24/7 care.

- “Having a child with such significant care and support needs is the main reason I gave up work. There is no way I could have balanced the two and I still couldn't.”
- “My son requires 24 hour care after suffering a Traumatic Brain Injury. He is slowly improving, but I could not leave him on his own for any length of time.”
- “My husband needed 24/7 support and care, his needs are unpredictable and it would have been impossible to juggle full time work and maintaining his care and safety.”

Several carers said that they had reached a tipping point when the condition of the person they cared for had worsened. In some cases, this happened quickly, for others it was a more gradual process.

- “The person I care for was so unwell they couldn't be left alone. It seriously affected my work. I had to make the choice to leave and care for them as they were a serious suicide risk.”
- “It just slowly happened as mother's abilities deteriorated. I worked for myself and it just slowly went till I was caring full time.”
- “I wasn't prepared to leave my mother alone for an extended period of time, as her needs were inevitably increasing over time; the risks felt too high.”

Some carers said they had started caring for additional family members, and that caring for more than one person became too difficult to combine with employment.

- “My mother and mother-in-law were both needing care at the same time. I couldn't provide this and run 3 households without giving up work.”
- “Had first child diagnosed with autism at the age of 4. But when second child was born with down syndrome with medical health complications, I had to give work up.”



## The impact of caring on carers' own health

### 10. Stress and tiredness due to juggling multiple responsibilities

Many carers said it was challenging to combine work with paid employment due to the amount of responsibilities they had to manage on a daily basis. Some carers said it was difficult to focus on work when they had to support the person they cared for.

“My Dad was ringing me during my working hours as well as at night, disturbing my sleep and working day. He was started to walk around by himself at night, he needed extra care and I was knackered juggling his health, my family's needs and a high pressured job. Something had to give and unfortunately it was me.”

“I could not focus on my work. My partner's dementia meant that he would randomly appear with an issue but as he's non verbal it's difficult to understand what he wants.”

Many carers said they often felt tired, particularly if they had had little sleep.

“I was exhausted and had no support with caring for my 2 disabled adult sons. I've not had an unbroken nights sleep in 31 years and as I got older and their needs increased, I had no choice but to leave and care full time.”

“My Mother was becoming increasingly distressed and unsettled at night so I was not getting any sleep.”

For many carers, juggling multiple responsibilities became increasingly stressful and exhausting. Several carers felt that 'something had to give' – that if they didn't leave their employment, they would reach crisis point. Some said they had already been going to work despite feeling burnt out or stressed. This was particularly common amongst carers who did not feel supported by their employer.





“I was becoming ill trying to juggle the responsibilities of caring and the responsibilities of my job role and my employers weren’t understanding.”

“I was working nights, coming home, taking kids to school, sorting out my wife’s breakfast then sleeping for a couple of hours, getting up for lunch then sleeping for another couple of hours, picking the kids up, do dinner then going to work. I was a walking zombie then one day I fell asleep behind the wheel of the car on the way home – I didn’t crash, no one was hurt but enough – I couldn’t do it anymore.”

“I have been head of a very stressful household with multiple neurodivergent children with unmet needs for over 12 years and I just couldn’t go to work one day. It was just too much.”

“I was working 60+ hours per week in paid employment (doing the full-time role I was hired for, plus two and a half additional roles because our team was understaffed, and on top of that being part of the core team involved in a transformation project), and then being an unpaid carer working over 35hrs+ per week on top of that. I was juggling both for over a year and a half. I was high-functioning on zombie mode with very little sleep, and often falling sick or feeling physically sick as a result. I had no choice but to give up work as it was not sustainable to do both.”

Some carers said that because they were stressed they found it harder to focus, and were worried about making mistakes. Some said that they weren’t able to be as productive at work as they would like, which affected how they felt about employment – that if they weren’t able to do a good job, it would be better for them to leave. It’s important to note that these are carers’ own personal reflections – they may have been doing a good job but lacked confidence or had low self-esteem. Line managers have an important role here in providing support and reassurance if carers are worried about doing their job effectively.

“I had a very responsible and stressful job with a difficult boss. My husband was contacting me more and more at work because of dementia. I gave up work because I was worried my boss would be difficult with me and it was becoming harder to juggle the job and issues at home. I was afraid I would make mistakes at work which would result in negligence claims and ultimate dismissal from my job.”

“My role (office based) was very busy and demanding and required focus and concentration. This became more and more difficult particularly at times when the two people I care for had episodes which required me to take time away from work (for appointments at hospital, physio and Occupational Therapy visits etc.) Even though work were supportive it got to the stage where I felt that I was compromising both my work and my caring responsibilities and could not maintain both. Therefore I took the decision to retire earlier than I would normally have done...”



## 11. Declining mental and/or physical health as a result of caring

Some carers said that their physical health had deteriorated – often as a result of caring – and this affected their ability to remain in paid employment.

- “Ongoing caring responsibilities exacerbated my health condition (ME/Chronic Fatigue Syndrome) to the extent that I became too ill to work.”
- “My own health was suffering due to osteoarthritis in both hips and chronic pain in lower back and having osteoarthritis in right shoulder plus looking after my wife whilst struggling to work and with my own health my choice was to give up work due to my own disabilities as well as my wife disabilities.”
- “Due to my own disability I suffer with chronic fatigue and brain fog which lead me to forgetting everything. I used to work from home for 18 years but because of my condition I had to give up work and just look after my mother full time.”

Many carers said that their mental health had deteriorated, and that issues such as anxiety or depression prevented them from working.

- “In addition to the guilt I felt for having to leave [my daughter when I was at work], when I was at home I could not get adequate rest...which led to exhaustion which in turn led to the fear of making a potentially fatal mistake at work. This developed into severe anxiety, OCD, and insomnia. The work culture was also toxic and management were less than helpful with shift allocation despite knowing my situation. I developed PTSD, developed suicidal ideation, and had to be signed off work during which time I chose to hand in my notice because I realised I can't cope in such a high stress job and be a full time carer at the same time.”
- “I had a breakdown, caring for my son and my terminally ill mother, I could no longer juggle full-time employment with my increased caring leading to my own health problems.”
- “I was having panic attacks at work and stopped going into work- probably a build up of stress caused by both caring and working.”



Some carers who were struggling with their own health issues said that their line manager or colleagues did not support them with this.

- “My employer wasn't helping with my disability and I was managed out of the company.”
- “My mental health was getting worse & so was my cared for's mental health being stuck home all day on his own. I was worried every time I went to work incase something happened, plus my managers were not very supportive when I ended up being signed off work sick after having a mental breakdown...”
- “My mental health majorly suffered...I didn't feel my employer were understanding of chronic health conditions or mental health, I didn't get support I got disciplined for absence.”

# The tipping point in giving up employment: interviews with carers

Interviews were conducted by Carers UK with 17 carers.\*

Of those:

- six have given up work to care
- five are currently in employment but are considering giving up work
- six are currently in employment and have received positive support.

The interviews highlighted the complex interplay of personal, workplace and systemic factors that contribute to a tipping point at which carers reduce their hours or leave paid employment altogether. While most carers valued work and wanted to

remain employed, cumulative pressures can make combining work and care untenable. This shows that preventing the tipping point requires coordinated workplace flexibility, supportive management cultures and reliable social care provision.



\* Some names and identifying details have been changed to protect carers' privacy

## Summary

### Employers are critical to whether carers reach a tipping point – and can prevent or reduce the likelihood of carers giving up work to care

- **Employment was widely described as beneficial to wellbeing.** For many, work offered respite from caring, improved self-esteem and valuable social contact. It provided structure, purpose and a feeling of being treated 'as a person' rather than just solely as a carer. Some carers also found their jobs intrinsically rewarding. Those who had left employment often reflected on the loss of these benefits, including diminished confidence and sense of identity.
- **Employer support emerged as a decisive factor in whether carers stayed in work.** Flexible working arrangements, hybrid or home working, carer passports, paid and unpaid Carer's Leave, and supportive HR policies were frequently described as lifesavers. These measures enabled carers to attend appointments, respond to crises and manage fluctuating needs without impacting their employment. In several cases, access to flexible working prevented reductions in hours or withdrawal from the labour market. Conversely, workplaces characterised by long-hours cultures, rigid expectations or an absence of carer policies contributed directly to carers having to leave roles. Some carers reached a tipping point when they asked for support (eg flexible working), but this was not provided.
- **Line managers played a critical role in shaping carers' experiences.** Supportive managers who encouraged open conversations, conducted wellbeing check ins and proactively offered flexibility helped carers feel valued and understood. In contrast, managers who lacked understanding of caring responsibilities or mental health issues and neurodiversities exacerbated stress and isolation, sometimes precipitating resignation.
- **Carer friendly workplaces help carers feel more comfortable about asking for support.** Even when employers had policies in place, many carers reported feelings of guilt, anxiety and fear of being judged by colleagues. Some felt that caring was less socially accepted than childcare, and that stigma – particularly around mental health or male caring – limited openness, and made them feel more reluctant to ask for help.
- **Career progression was another area of disadvantage.** Many carers had altered career paths, declined promotions or limited professional ambitions to accommodate their caring responsibilities. Some remained in unsatisfying roles due to concerns about not being able to find supportive policies elsewhere.

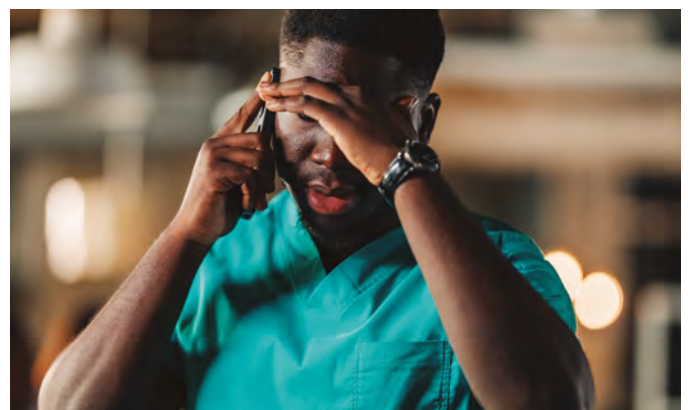


## Support from health and social care services can also affect whether carers reach a tipping point

- **A lack of adequate social care provision significantly intensified pressures.** Difficulties accessing respite, inconsistent support and adversarial interactions with services negatively affected carers' mental health and reduced their capacity to remain in employment. Some carers reached a tipping point when dealing with services became too stressful, or when they couldn't find any suitable support, and combining work and care became too difficult to manage. Conversely, carers who were receiving support from social care services said it helped them to juggle work and care, by taking some of the pressure away and reducing stress.
- **The lack of recognition and support for carers within the NHS created additional challenges.** Some carers described having multiple appointments that they had to manage alongside work, while others said they were unsatisfied with the quality of care the person they care was receiving, which created additional stress or increased the amount of care they were providing.
- **Not knowing where to go to access support, or dealing with additional administrative duties due to services not being joined up, created additional stress.** Several carers said they were unsure where to go for help, or had to spend extra time chasing things, or researching things, because they had not received any advice. This meant they had less time to relax outside work, because they were dealing with admin, and more tired and 'on edge' at work because they hadn't had a break.
- **Parent carers reported a lack of support from schools.** Some described frequent school-related issues, such as their child being removed from class, as a trigger for leaving work.

## Carers reached a tipping point, or came close to a tipping point, when dealing with multiple challenges at once became too stressful

- **The unpredictability of caring and escalating needs of the person being cared for contributed to stress.** Some carers found it hard to concentrate at work, particularly when they were having to manage multiple appointments and deal with unforeseen challenges. These pressures could build and develop over time, and result in carers' own health and wellbeing worsening.
- **Many carers described feeling 'burnt out' as a result of 'spinning plates' and managing many different responsibilities.** When this became too much, and carers felt that no support was available, some reached a tipping point.
- **Several carers had taken periods of sick leave from work, before they reached a tipping point.** Many carers reported anxiety, depression or physical health impacts, as a result of dealing with multiple pressures, and some had taken extended sick leave. Where employers supported their health and wellbeing – through occupational health, employee assistance programmes or adjustments – carers were more likely to remain in work.



## Detailed analysis

### Many carers want to be in paid employment because of the positive benefits it can have, particularly in improving wellbeing

Most carers felt that being in paid employment had a positive impact on their lives. For some carers this was because it was a break from caring: for Charlotte it was an “escape” from her caring role, while Veronica said that being in the office “removes” her from her “home situation” and gives her “a bit of a break.” Aaron also described work as a “respite” because it “takes your mind off the issues you have.”

Being able to focus on something other than caring has also been beneficial for carers’ self-esteem. Clara said it was: “really nice to have something that is kind of mine” and that having “that bit of time where I feel I can do something well other than caring” is “really important.” Similarly, Hazel said her employment was “me-time” where she was treated “as a person.” Some carers also said that work gave them a sense of purpose or structure. Hope said that she would “probably have a meltdown” if she wasn’t in work: “if I had a job without purpose, I think I would be in a bad place”. Similarly, Janice said she would be “ill” if she wasn’t working and that she “couldn’t not have that structure in my day.”

A few carers highlighted the social benefits of being in employment. Celia said her employment allows her to “connect” with people, while Abigail said she enjoys the “social aspect” and “getting to talk to people.” Other carers said they found the job itself rewarding: Jeremy said he “takes pride” in the support he provides to junior staff, while for Cathy, working in care felt like a “natural place to go” and she enjoyed helping people.

Those who had given up work to care were aware of the benefits of being in employment but felt they had no choice but to leave work to care full-time. Some said they were now missing the positive benefits they had gained from employment. As Suzy explained:

“I was highly qualified and my job was very much tied into my self-esteem. I was really good at my job, and I liked working with people, I love people. So that has had a knock-on effect, yeah.”

### Support from employers (eg flexible working, and Carer’s Leave) can make a fundamental difference to whether carers reach a tipping point

Carers described how the support available from their employer had played a key role in their decision-making around whether to remain employment. Abigail said that working flexible hours, having a carer passport, and having a generous annual leave allowance has kept her in her current role: “I can pretty much do my hours whenever I want. We get fairly good holiday so I’ve stayed for all those reasons.” Janice said that hybrid working has been “a lifesaver” for her: “I’m so grateful for that because if I had to be in an office like 9.00 to 5.00, I would have to have given my job up.” She is also able to work flexible hours which helps her attend support sessions with her son, and she has a carer passport which she finds helpful. She said her employer has been “absolutely second to none”. Having the autonomy to manage her own working hours has also made her feel “engaged and motivated.”

For Hope, it is paid Carer’s Leave that has been a “lifesaver,” helping her attend appointments with her mother: “it makes things so much easier to plan and manage because it’s such a formal supportive system.” She also finishes early on a Friday, can work from home, and has a carer passport which is “useful”. Hope said that the support provided by her employer has been crucial in enabling her to stay in work:

“If it weren’t for these offerings, I’d probably be in a really bad place mentally and I’d probably be looking to work part-time somewhere because without this flexibility, there’s no way I could take the time or the space to give my mum what she needs all the time.”



Alice also talked about how the support from her “brilliant” employer has helped her to stay in employment. She has found having a flexible start time really helpful as her husband often has seizures when he wakes up. She is also able to work from home, and has found unpaid Carer’s Leave beneficial in enabling her to visit her husband in hospital. Without this support, her situation would be “very, very different”: if her employer had not been “so understanding and flexible then I wouldn’t have a job.”

Similarly, Aaron said that the ability to work flexibility has been crucial in enabling him to remain in work: “without the flexible working arrangement, it would have been difficult, and maybe I would have been out of work or doing a different job somewhere else with low pay.” Aaron also has a carer passport, which has been helpful in preventing him from having to tell his story “over and over again.”

Other carers said that the support they had received from their employer prevented them from having to reduce their working hours. Annabelle said that paid Carer’s Leave had been particularly helpful in supporting her parents with their medical appointments, and that she “would have gone into considering doing three days a week as opposed to four days a week if I couldn’t have that Carer’s Leave.” Similarly, Clara explained that the support she has received from her employer, such as being able to work from home, has been crucial in helping her work full-time, and that she would reach a tipping point if this was no longer available.

**“***If it was a case of ‘you need to be in the office five days a week’ that to me would be ‘I can’t do that’ because then I would be dropping the ball, and I would be letting my husband down to do that. And yes, I might be at work, but equally, they wouldn’t be getting the best of me at that point, because I would kind of be there under forced circumstances and I would be, my brain would be elsewhere. At that point, I think I would probably need to be looking at either going part time... or potentially giving up work altogether.”*

In contrast, those who felt that support was not available from their employer said this had made them consider giving up work. In Celia’s workplace, there is “a real long-hours culture”, and “an expectation you’re always on call.” Other than flexible working, there isn’t “any real practical support” and unpaid Carer’s Leave is not actively encouraged.

Celia had requested part-time hours but her employer declined. With the support of her GP she was able to get a reduction in working hours, but this did not lead to a reduction in workload. Celia is reluctant to put her “head above the parapet” and challenge this, as she worries it will “create even more stress for me.” She said that if there were more cuts and redundancies in her workplace, then she would reach tipping point as the pressure of combining care with a demanding role would become too much.

Sara also said that her working environment was demanding, and that even when she reduced her working hours, “at no point did they reduce the amount of work I had to do.” She took on another role, working non-contracted bank hours for another service, but has no employee benefits such as annual leave or sick pay, and feels like she has no security. Jeremy would also like more support from his employer: there is limited information about support available to carers in workplace policies, and a carers’ support group was only set up after he asked what help was available.

Some carers said the lack of support from their employer had resulted in them leaving work altogether. For Salima, it was when her request to change her working hours was not accepted that she felt that “part of me just didn’t want to be at work anymore, I didn’t feel they supported me.” Similarly, Suzy explained that within her previous workplace there was “no carers policy there, there is no carers network... no training for staff to be carer aware.” When she suggested to HR that additional support could be provided for carers, such as Carer’s Leave, no further action was taken. Although she had an informal agreement in place with her employer to work more flexible hours, in practice she was working longer hours to “try and make up the workload.”



## Line managers can make a big difference in how carers feel about juggling work and care

Carers who felt positively about their employer often had a supportive line manager. Having the opportunity to talk openly about caring had an impact on how carers felt about juggling work and care, and whether they felt comfortable asking for more support. Alice said her manager is “so compassionate,” while Hope felt “very lucky” that all her managers over the last few years have “wanted to focus on making me the best me I can be... that when I bring myself to work, I’m bringing the carer side of me and they will do anything they can to support that.”

Some carers said their manager had supported them with their health and wellbeing. Clara has a health passport at work, which has given her “reassurance.” Although she doesn’t need to use it that much, having that conversation with her manager “where we sat and down and agreed what everything would look like” has “taken a bit of a weight off”. Janice said her manager ensures they have “lots of wellbeing check ins”, and if she notices that “things are difficult” then “they say, you know, do you want to take some time out?”

Similarly, Veronica said her manager has been “incredibly supportive” and understanding when she needs to take time away from work to care, and had intervened when it was clear she was struggling:

“It had all got a bit much and so [my boss] just said to me...I want you to stop for the day at lunchtime

*and I want you to not work the rest of the day...Or, if I am struggling or feeling particularly anxious – which also happened one day last week – I just sort of need to say [him], I’m struggling a bit. I’m going to take an hour out now and I’ll be back...It’s not a problem, so I am incredibly lucky.”*

In contrast, carers who had struggled to juggle work and care often had a manager who was not supportive. Cathy described how her manager lacked understanding around neurodiversities and mental health, which meant she often felt unsupported. Although her manager was aware she had a diagnosis of a borderline personality disorder at the time, she “didn’t really feel heard”. Similarly, Sara felt the lack of support she’d had from her manager was partly due to their “total lack of understanding” about caring. She recalled an occasion when her manager compared her caring responsibilities to her own difficulties organising the school run, which Sara felt demonstrated that “she did not have an understanding of what it’s like to be parenting children with neurodiversity.”

Suzy described how her experience at work changed for the worse when a different manager took over. Her previous manager had been “very supportive” when she needed to attend appointments with her daughter, and had felt “much more of a friend.” In contrast, her new manager was “a bit of a control freak” and although she was “supportive up to an extent, not somebody you would want to confide in.” Hope also noticed that although her own line managers had been supportive, in other teams, where there were “rigid objectives and KPIs”, line managers were “less consistent in being supportive and implementing and backing what [our employer] is giving to our carers.”



## Even when support is available at work, carers often worry or feel guilty about asking for help, and some feel judged by colleagues

Some carers said they felt guilty about missing meetings or work events, and worried that they weren't doing a good enough job. Hazel was concerned about what colleagues thought when she had to leave work to deal with issues at her child's school: *"they were good, they kept on saying 'yeah that's fine' but in the end you just think I'm pushing my luck here. Nobody ever says anything to you but you can see that (sigh) here we go again"*. She was worried colleagues might think she was *"taking the mickey."* Hazel said that one of the reasons why she gave up work to care was because she felt she was *"letting people down all the time."*

Annabelle described similar feelings of guilt. She said she often worries about what people think, and this makes her question whether she is doing a good enough job.

**“***It's always been on my mind, that people may think that I'm not doing my job to the best of my ability or not doing my fair share...I'm really lucky to be with employees that have been amazing. But it's still there...at the back of my mind...am I good enough? What I'm doing – is that of value? Is it enough?...Are people going to think that I'm not putting my weight? There are all these fears and concerns every time I go into work every day.***”**

Other carers felt judged by colleagues. Charlotte often had to leave work to deal with issues at her son's school, and when her employer was short-staffed she *"felt the pressure"* and noticed some colleagues were *"pretty annoyed about it."* Cathy also felt that colleagues were annoyed with her: *"I could see the rolling of eyes."* When she was struggling with her mental health and ADHD at work, she *"always felt people didn't really understand, or that what you're saying is maybe exaggerating and [you should] just get on with it, 'cause they get on with their thing that they're dealing with."* As a result, she felt *"uncomfortable"* at work, and *"didn't feel like I could be myself"*. For Cathy, feeling *"judged"* directly contributed to her decision to leave employment: *"if I'd felt that I was understood and that they knew I wasn't really coping, and I wasn't feeling judged, and I was feeling supported when I went to work...then I would have stayed."*

Several carers said that colleagues lacked understanding of what caring involves. Salima said that unless people have caring experience, they can be *"quick to judge"* others. Jeremy also said that he found it harder to talk to colleagues because *"people don't understand what my life is like anymore."* When he returned to work after taking time off to care and shared with colleagues what had happened, no-one responded: *"that silence is interesting, because sometimes it's easier not to talk about it."* Gary felt that there isn't always much understanding around male carers: as a freelancer he did not work for any clients who had thought much about caring.

He said that because there is often an assumption that it is a woman's responsibility to provide care, *"there is less room"* given to thinking about what support men might need: *"it's kind of unusual, so as a result people are maybe a bit blindsided by it...I don't think they lend it the same weight [as parental care]"*.

Some carers felt there was more understanding shown in the workplace when parents of non-disabled children needed to take time off for childcare. Clara said that *"people juggling childcare is much more acceptable socially."* She explained that although having a carer passport is helpful in highlighting that she isn't *"taking the mick"*, she still worries what colleagues think when she has to miss team away days because she is unable to travel: *"I think some people won't understand and on face value, it could just look like, well, I'm choosing not to be included"*. Celia said that in her workplace there is *"a stigma around being a carer and a stigma around the idea of mental health creeping into work culture."* As a result, she didn't think there was a culture where people would feel comfortable about asking for things like compassionate leave. Celia felt there is *"an inconsistency with the way Carer's Leave might be seen and something like maternity leave"*. When she requested part-time hours this was declined, yet her employer offered part-time hours to another recently hired member of staff, who had young children.

Several carers said that carers networks helped create an environment where they felt more comfortable about sharing their experiences. Veronica chaired a network for parents of neurodivergent children: *"I do that because it's really important to me that other parents know that there are parents like them and that we're all there to help each other."* Hope said her workplace has a carers network which offers *"solace"* and allows people to *"get advice"* from fellow carers. The group has also played an important role as *"a driving force"* for certain policies to be introduced, such as paid Carer's Leave. Aaron said the carers network where he works has helped carers *"meet each other"* and also self-identify as a carer for the first time.

## Even when carers have the support they need to remain in employment, some feel disadvantaged in relation to career progression

Some carers said that although they had received support at work, and were able to manage caring alongside paid employment, they were still missing out on opportunities and were less able to progress in their career. Although job satisfaction may not directly lead to a tipping point of giving up work to care, it may play into decision-making around whether to remain in employment. If carers are having to take on a more junior role, or work in an area that fits with caring but doesn't offer much job satisfaction, this could contribute to the tipping point.

Annabelle described how she had changed career completely due to caring. Because her previous role involved a lot of travel and was *"intense mentally and emotionally"* she had a *"career pivot"* into something *"a little bit more stable."*

Similarly, Alice said that when her husband's health declined she took a sabbatical from work, and on her return her employer supported her to move into a less pressured role. She said if she hadn't been a carer she would *"probably be Chief Executive"* by now.

Celia said that her *"potential for promotion"* had been affected, partly because she was less able to network at social events: *"there's a whole kind of social life around those senior roles... There are conferences and the sort of outside work 'golf-club mentality'."* Aaron said he had had to turn down promotion opportunities in the past because of caring, and that he tries to *"remain the background"* rather than taking on anything too challenging, in case his son becomes unwell: *"if you take the lead in something and then you go off, that's it."*

Gary described how voice acting has been his main source of income for the last few years, but because of his caring role he is only able to do the *"odd little job every now and again."* He often has to turn down opportunities, particularly when they involve travel, which he finds *"very frustrating."* He has also had to significantly cut back on his freelance graphic design work as he is reluctant to commit to opportunities when he might not be able to fulfil them.

**“***If I'd worked harder to pursue more work I could get more work, but there's this weird balance...I'm always a bit cautious of getting too much work, because in the past when I have it becomes more stressful trying to balance looking after my mum, getting time to myself...And there's always the risk that if you take on a client and say 'oh I can do this thing' and then discover it's too much of a struggle, then you alienate that client, and you lose that opportunity forever, and I kind of feel like I'd rather hold back on opportunities until I've got more time to do them”.*

Some carers said they were only staying in their current role because of the support they had from their employer: they didn't want to risk looking for another role elsewhere where there might be less understanding. Abigail said that although she *"hates"* her job, she hasn't looked for another role because of the support that is currently provided *"it's a bit like putting your life on hold for the benefit of somebody else because it makes everything easier."* Similarly, Janice said she has had to *"kind of tread water"* and *"not take on too much."* Because she is supported in her current role she *"can't really move on elsewhere"* and thinks *"it's better the devil, you know, in a way. So, I stay put with my employer."*



## Social care services can play a crucial role in supporting carers to remain in work, while a lack of support can have a negative impact on carers' mental health, making it more difficult to remain in employment

Some carers said that when they had received support from social care services, this helped them to stay in employment and was beneficial for their health and wellbeing. Hope's mother receives some support from a care worker, and although this is just a brief visit each day to prepare her food, Hope said it takes *"a bit of a mental burden off me"* and means she can focus on a meeting *"rather than postpone it and come downstairs."* Clara's husband receives support from a Personal Assistant twice a week which she finds *"massively helpful"* and *"a big part of being able to stay in employment."* One of the benefits for her is being able to better manage her husband's medical appointments, as the PA can support with these when she needs to be in the office.

In contrast, some carers described how a lack of support from social care services impacted on their ability to juggle work and care. They explained that this caused them stress or made it more difficult to take a break, which then affected their wellbeing at work. Charlotte said her mental health *"took a real downturn"* as she was unable to get any help with caring from social care services, who did not accept her son had support needs: *"I was getting pushed from pillar to post, a referral here and a referral there, and those people would send you back somewhere else – it was just a constant 'where am I going? Who is actually going to help?'"* Although Charlotte was *"desperate for support"*, social services only provided this when she reached crisis point, and her mental health had *"completely crashed and burned."* If she had had more support, she may not have given up employment: *"the whole way through I was just asking for respite and every time they were like 'we can't give you this'."*

Hazel gave up paid employment several years ago and feels uncertain about returning due to the lack of support she has had from social care services in the past. Previously, her local council withdrew day services for her son, despite his substantial health issues, and she is worried this might happen again. In addition, Hazel experienced a significant decline in her mental health when she had to resolve these issues with her local council. When she challenged the withdrawal of her son's support, the council accused her of being abusive. The case went to court,

and the judge found in Hazel's favour; however, the impact on her health was *"devastating"* and she was left feeling suicidal: *"I lost a lot of weight, my hair was falling out, I bit my nails out of existence...as soon as we came out of court I went down with shingles, my body just collapsed."* Because she feels she *"lost"* herself *"well and truly"* during this time, she feels she is not in a position yet to return to work, and needs to *"build back up."*

Carers who are currently in employment have also experienced issues with social care services. Celia said her husband's support has been *"really intermittent"*, and although he has recently been offered six months of fortnightly therapy, they are not eligible for additional support: *"it's been really challenging. You know there's no respite care, no residential offering, no regular peer support, no ongoing social care. Just because we're not in crisis, we've not been deemed eligible for anything like that."* Celia had found the lack of support *"quite isolating"* and previously had *"three or four mental health and anxiety episodes"* when things became too much. She said if there was more support from health and social care services, this would allow carers to concentrate on the caring role itself, and their employment, rather than *"trying to do battle with health and social care."*

Sara said she had tried to access social care support for her sons but was told that her sons' needs could only be met by community services, which *"involves one person coming in to speak to the boys about their feelings on a Monday afternoon for one hour."* Because she has had to provide care herself, with no support available, she has now reduced her working hours from five days to three, which has had a significant financial impact.

Gary had made the decision to care for his mother full-time because social care services were not providing enough support. His mother used to receive a visit from a care worker, but this was detrimental to her wellbeing: it was unsettling for her as they *"couldn't ever guarantee the time that they would be here"* and *"a lot of the time it was a different person."* Essentially, Gary felt that *"people would be coming in and then not really doing anything"* and there was *"no point"* paying somebody to do what he could do himself.

## Parent carers can find it difficult to juggle work and care when they are called away by their child's school to deal with issues

Parent carers described how they had found it increasingly difficult to focus on their employment when they were receiving constant phone calls from their child's school. Charlotte had reached a tipping point when she was being called away "lots of times a day" to resolve issues at school, which became increasingly stressful. Her son "really struggled" at school and was "in a corridor for two years." She felt this was because there was a lack of SEND support within the mainstream school he attended:

**“...they had not a single clue, the SENCO there was terrible, she always said there was nothing wrong. It got to the point where he was trying to hang himself, trying to cut his hands on guillotines. He was seven at that point.”**

During this time, there were “endless calls, endless exclusions, endless meetings” and this was “just so stressful.” Charlotte worried about the impact that taking unpaid time off work was having on her income, and she also felt that she wasn't able to focus, and give the children she worked with the “stability” they needed. Although her employer was supportive, she ended up leaving her employment to “focus on my own child, sort out the issues there, focus really hard on getting his EHCP, and obviously my mental health.”

Hazel described her employment history as “patchy”: she has moved in and out of work over the years as her son's needs have fluctuated. In one of her previous jobs, she often had to leave work to deal with issues at his school, and once received a call when she was in a meeting that her son was throwing chairs out the window. Hazel found that these issues made it hard to focus: “when you're picking up messages like that, you're only 50/50 there.” When her son was “kicked out of school” she left work for a few years. Although her employer had been supportive, she worried that juggling work and care meant she was “cutting corners” – she didn't like having to miss meetings or events, or rush things to provide care: “if you're going to do a job you want to do it to the best of your ability, instead it was ‘oh that will do’.”

Carers who are currently in employment have also experienced issues when their children have struggled at school. Sara said that she frequently gets phone calls from the school because her son has “become so distressed, he's threatened other



children, he's punched other children.” Janice said her son struggled with communication, and because he would sometimes lash out when he was frustrated he was “very quickly labelled the naughty boy.” She spent a lot of time researching how to support neurodiverse children at school so she could “teach the teachers and then collectively work together in order to have this really comprehensive support plan.” She said that doing this alongside her employment was challenging.

## Caring is often challenging, and dealing with competing responsibilities can become stressful, making it harder to remain in employment

Carers described some of the key challenges of caring, which can make it difficult to juggle work and care. Several carers said that caring is unpredictable and can change on a daily basis. Abigail said her caring role is “not a structured thing... it's as and when,” and she is often anxious “when the phone rings... I'm frightened of what [my mum] is going to be saying.” Jeremy said his wife's condition is “quite fluctuating, so the responsibilities on a day-to-day basis are also quite fluctuating.” Similarly, Alice described her caring role as “like being on a roller coaster” where sometimes “things are going OK” and other times her husband is in hospital as his medication has stopped working. As a result, she finds that “life is really hard.”

Other carers said that things have become harder as the condition of the person they care for has worsened over time. Jeremy said his caring role has “fully ramped up” as his wife's needs have increased, while Hope said her mother is now housebound and “can't even stand up for more than 10 seconds.”

*She's often passed out for hours at a time due to how bad the pain is.*" Dealing with increased caring responsibilities is particularly difficult for carers who are not receiving much support, or unaware of what support might be available. Suzy said that her caring role has increased, but getting support for herself as a carer had taken a while. Following a Carer's Assessment, she was sent a lot of information to review, which she found overwhelming: *"if you're tired or whatever and you've got other responsibilities you don't want to wade through loads of things."*

For some carers, finding support with caring is one of the biggest challenges. Salima said that not knowing what support she is entitled to is the main cause of stress, as information and advice is *"not always clear cut"* and communication with services can be poor: *"you just want everything to be in one place where you can access it, under one umbrella."* Charlotte also described how she had *"had to do a lot of research and a lot of digging to find out what is available."* She was recently given a Direct Payment, after a three year battle to get support as a carer, but there was *"no context, no guidance...other than 'you need to set up an extra bank account and you use it for respite... So I've had to work it out myself and read more policies and procedures..."*

Other carers also said they felt like they were always having to battle for support, which took a toll on them. Annabelle said that the main thing that would make juggling work and care easier would be if her *"interaction with different agencies"* was *"streamlined."* She said that if there was *"one app, one portal where all the agencies could communicate with each other or upload documents"* that would *"take a huge weight off my mind."* Alice explained how one of the challenges for her has been getting to speak to healthcare professionals and navigate an inflexible appointments system where *"if you phone at five past eight, all the appointments are gone."*

Several carers said that dealing with their caring responsibilities made it difficult to concentrate and focus at work. Jeremy said that juggling work and care has affected his *"cognitive capacity"* at work and he finds it difficult to retain information. He also worries about his wife when he is working long shifts, as she struggles at home on her own. For Veronica, it can be hard to maintain concentration at work when her daughter is struggling to regulate her emotions. If her daughter has been *"very quick to anger"* then it can be *"incredibly difficult"* for Veronica to *"move on"*, and she finds she has to *"kind of reset myself"* in order to concentrate. She also has to deal with unexpected issues during the day, if her daughter gets *"very agitated"* and needs her

help with something. Janice also mentioned that concentration can be difficult, particularly when she is working from home: *"my days are interrupted...and [my son] doesn't always understand that Mum's at home working...so that's difficult."*

One of the key challenges carers highlighted was having to frequently attend hospital appointments. Hazel said she often had to change her working days to attend appointments, and on one occasion was updating her employer about work while she was at the hospital and her son was unconscious. Salima described how her father was having around four appointments per week at one point, which she had to keep track of. She also found it difficult to focus on work when her father was in hospital: *"until I knew he was OK I would struggle to think."* When her father returned home from hospital, she then felt like the stress caught up with her, and she *"felt worn out."*

Other carers said they found it very tiring to juggle work and care. Annabelle said that although she receives support from her employer it can be hard to find the *"time and energy"* needed. She said that because she feels *"tired and exhausted all the time"*, her *"energy levels have dipped"* and it is hard to maintain her enthusiasm for work. Salima said that because caring *"takes it out of you energy wise, sometimes all I want to do is get some sleep."* Similarly, Aaron said his sleeping time is usually between midnight and 2am which affects his concentration at work, and makes him feel *"sleepy, irritated, tired."*

Some carers have struggled to go into work when they hadn't had enough sleep. Hazel said she sometimes had to call in sick because she'd had so little sleep: *"I'd just have to phone them up and say I'm so sorry but I've had one hour's sleep, I just can't do it, I can't do it today."* Sara said she often struggled to get a good night's sleep: she recently had to call NHS 24 (in Scotland) on a couple of occasions at night when she *"just couldn't get [her son] to calm down,"* and has had to cancel her planned shifts when she had been awake most of the night.

Several carers said that juggling multiple things at once has been stressful. Celia described how she has struggled in the past when dealing with several issues at once, causing *"emotional stress on all fronts"*, with no-one else to help her manage these *"crisis situations."* Similarly, Alice said things became stressful when she was *"spinning all the plates on my own."* Because of her husband's condition, she has often *"needed to pick up the slack"* when it comes to looking after their children, and she sometimes

feels like a “lone parent.” This makes her feel “a huge amount of pressure.” Jeremy also described how he had struggled with “keeping on top of things” at home, and when he felt “things at home weren’t to an acceptable standard” he could “see burnout coming.” For Clara, because she is “a bit of a perfectionist” she wants to do everything to the best of her ability, but worries constantly that she might “drop the ball at home” and “something could go seriously wrong.”

Some carers had reached a tipping point when juggling multiple things had become too stressful to manage. Salima made the decision to leave employment as she felt “something has to give”: there were “too many things” she was trying to combine at once, and she hadn’t “got the energy anymore.” Suzy said it eventually became too difficult to combine work with caring: “the two things aren’t compatible.” Although she loved her job, in the end she was “glad to leave”. Hazel also left her employment when the “constant juggling” made her feel exhausted, torn between wanting to do a good job at work, while also prioritising her son’s needs:

“I’m doing all of this and yet I’m absolutely knackered trying to satisfy everybody, is it worth it? And the answer kept on coming back – not really. You’re stressing yourself out so much.”

For Gary, it was no longer “tenable” to take on freelance graphic design work when he was caring for his mother. One of the issues was having to deal with multiple things throughout the day. Because his working days were frequently interrupted with caring responsibilities, he ended up working very long hours: “it eats into your day, although I was kind of doing a 9-5 job, because I was having to fit in bits of caring and real life in the middle, I was working from 6, 7 o’clock in the morning till 11 o’clock at night.”

Other carers said they have come close to the tipping point when juggling multiple things has become very stressful. Abigail said that when she was on sick leave from work, she thought about “not coming back and actually just quitting”, rather than starting “the whole process all over again and be stuck in trying to deal with everything and juggle everything”. Although she has returned to work, she worries her caring responsibilities will increase after her mother’s surgery, and is concerned that her mother will receive poor quality care in hospital, like her father did.



## Many carers said that caring had affected their mental health, making it harder to remain in employment

Several carers described the negative impact caring has had on their own health and wellbeing, and how it had made it more difficult to remain in employment. One of the main issues was carers not being able to have a proper break from work at the end of the working day, or at the weekend, because they are so busy caring. Annabelle said “that whole self-care thing has been really hard to do” because of a lack of time: not being able to exercise and socialise is her “biggest bugbear.” Celia explained that she isn’t “able to take proper breaks” due to a lack of support, while Gary said because his mother feels anxious when he leaves the house, he doesn’t tend to do so, and his general level of fitness is “lower than it’s ever been.” Ideally he would like to see a doctor about his own health, but “can’t be bothered with it right now. It would be one more thing to worry about.” As a result, his own needs are “on the back burner a bit.”

Although most carers said there were specific activities that they did to improve their wellbeing, many said they find it hard to relax and take a break. As Cathy explained:

“[Caring] is mentally exhausting...I feel responsible, I’m feeling stressed constantly to be honest, I feel like if I wasn’t a carer I could switch off more, and think more about myself, but I think about everyone else too much and don’t look after myself enough.”

Hazel said she felt her caring role was “*a different ball game*” to others’ due to her son’s high level of need, and that “*your life isn’t your own life anymore.*” Janice described how she has “*no downtime*” for herself because she is often researching her son’s condition and how to support him. She would “*like some time just for me*” but because her son is “*very codependent*” with her, she “*can’t have adult conversations because he’s with me all the time.*” At social events she said she felt “*like Cinderella. You rush away and you’ve got to be back quickly.*”

The situation is worsened by the fact that carers are often using their own annual leave for caring, rather than to take a break. Clara said she doesn’t want her employer to “*suffer*” as a result of her caring role, so she tries to keep her work life and caring responsibilities “*quite well separated*” so they are “*shielded from the impact.*” As a result, she uses her annual leave when her husband has been in hospital or if there are any longer-term needs. Janice also had a similar concern: she is reluctant to take paid Carer’s Leave because she doesn’t want to “*abuse*” her benefits. As a result, she sees paid Carer’s Leave as more of a “*cushion*” and tends to use flexible working or annual leave to manage her caring responsibilities. Aaron also said he uses annual leave for caring which means he has less time to himself to relax. His employer offers unpaid Carer’s Leave but Aaron found this had a negative financial impact, which was a “*big stressor*” given the cost-of-living increase.

Some carers also said that caring has caused them so much stress that they have developed health issues. Alice has anxiety which she thinks is partly because of “*all those years...fighting the system, you know, banging my head against the wall trying to get support for my children in school.*” Clara also has anxiety which stems from “*a lack of being in control*”, and she suffers from stress-induced chronic migraines.

Some carers said that their mental health had worsened to the extent at which they felt unwell at work. Charlotte said she wanted to work, as it helped her to cope with stress, but sometimes wasn’t well enough to be there: “*they would send me home sometimes and say ‘you can’t be here.’*” She found that the lack of support from social care services, and from her son’s school, plus the everyday responsibilities of caring, was taking its toll on her health, affecting her “*general mood*” and how she would interact with people. In the end she “*just could not function.*”

Many of the carers interviewed for this research said they had taken extended periods of sick leave. Janice was on sick leave for 12 weeks due to stress, while

Abigail was off sick from work for nine months, when she had “*just stopped functioning...I was really ill*”.

Some carers said they were not supported by their employer when they were on sick leave. Jeremy had taken four months off when he reached a point where he felt he “*couldn’t keep going to work anymore*” and was “*on the edge of burnout.*” On his return to work, he requested adjustments to his working pattern to avoid long clinical shifts which he felt weren’t “*feasible*”. However, his employer was keen for him to keep the same shifts. With the support of his union, Jeremy was able to challenge this, and once HR were involved his manager’s approach “*changed quite drastically.*”

For some carers, the lack of support during sick leave was a key factor in reaching a tipping point. Cathy said that after being on sick leave for six weeks, she was meant to have a phased return to work, but this didn’t happen: she was also given a difficult client to deal with, and a planned meeting with her line manager was cancelled: “*I never got my meeting to see how it was going, I felt like they didn’t care at all.*” Following a misdiagnosis of borderline personality disorder, Cathy had been diagnosed with ADHD and as part of that had “*really bad rejection sensitive disorder*” which affected her relationships. For Cathy, the lack of support following sick leave was the final straw and she left her employment as she “*didn’t feel supported in the slightest.*” Salima also said she wasn’t supported when she had to take sick leave due to poor mental health. This led to her becoming “*unhappy with work*” as it demonstrated to her that her employer was not supportive of her caring role.

In contrast, some carers described the positive support they had had from their employer in relation to their health and wellbeing. Annabelle had received support from a clinical psychologist as part of her workplace employee assistance programme, and this had been “*really useful*”, particularly as her father reaches the end of his life. Abigail said that when she was on sick leave for several months she was referred to Occupational Health which was helpful, while Aaron has used an employee helpline which was beneficial in being able to talk to “*somebody neutral*” who is “*listening to you without any prejudice*”. For Hope, who has depression, the support she has received from her employer “*has been pivotal*” in helping her to quickly access resources, “*rather than be on a waiting list for a year.*” Hope is also autistic, and has had some adjustments made at work for this, including being given a noise cancelling headset. Without this support, “*it’d be a different story.*”

# What can prevent the tipping point – support from employers

There are many ways that employers can provide support for employees who have caring responsibilities. Many employers, including Standard Life and Employers for Carers members, have already taken positive steps to support people to combine work and care. This research, together with previous evidence, suggests that the following types of support make a difference in preventing carers from reaching a tipping point.



## i) Carer’s leave

Carers UK and Standard Life strongly supported and welcomed the passage of the Carer’s Leave Act 2023 which gave carers a legal right to take five days of unpaid Carer’s Leave per year.

Many carers in employment have found this beneficial: over a third (36%) said it had made it easier for them to stay in work, and 32% said it has made it less stressful to juggle work and care.

**Table 1: The five most commonly reported benefits of unpaid Carer’s Leave for carers who are employees (Carers UK State of Caring 2025 survey)**

Benefit	% of carers who responded
<i>It has made it easier for me to stay in paid employment</i>	36%
<i>It has made it less stressful to combine caring with paid employment</i>	32%
<i>It has led to me taking paid carers' leave or using flexible working</i>	20%
<i>It has made me realise I am a carer</i>	18%
<i>It has increased my understanding and awareness of unpaid carers in the workplace</i>	16%

The Government recently announced a review of workplace rights for carers which will consider how unpaid Carer’s Leave is working, and explore the benefits of paid Carer’s Leave.<sup>71</sup> Carers UK and Standard Life welcome this review, as many carers cannot afford to take unpaid Carer’s Leave, or find that taking unpaid leave has a negative financial impact. Introducing statutory paid Carer’s Leave would bring significant benefits for working carers and the UK economy, far outweighing the modest costs of its introduction.

This research found that 60% of carers who are employees said that paid Carer’s Leave would make them feel less stressed, and 45% said they would be more likely to remain in paid employment.

Many employers, including Employers for Carers members have already gone above and beyond the Carer’s Leave Act 2023 by offering paid carer’s leave to employees.

“ [Paid leave] would take some of the huge pressure off, and the feelings of guilt in having to approach my employer to ask for yet more time off (ie asking to work flexibly and make up time later) to attend appointments, etc as my role as a carer would be legitimised.”

“ It would just give me some leeway to take some time to care for myself or my child. It would just make things so much easier...It would provide relief and comfort.”

**Table 2: The benefits of paid Carer’s Leave (Carers UK State of Caring 2025 survey)**

Benefit	% of carers who responded
<i>I would feel more valued by the Government</i>	60%
<i>I would feel less stressed about caring</i>	60%
<i>I would feel more valued by my employer</i>	56%
<i>I would be more likely to remain in paid employment</i>	45%
<i>I would feel more confident about telling my employer and/or colleagues I am an unpaid carer</i>	44%
<i>I would be more likely to remain in my current organisation</i>	41%
<i>I would be able to concentrate more at work and be more productive</i>	40%
<i>I would be more likely to increase my working hours or apply for a higher level job</i>	17%

<sup>71</sup> Department for Business and Trade (2025) [Employment rights for unpaid carers review: terms of reference](#)

## Good practice example: Standard Life's paid Carer's Leave provision

Standard Life recognises that many colleagues balance work alongside caring responsibilities, often during periods of significant personal challenge. Supporting working carers is an important part of building an inclusive workplace and enabling people to thrive at work, whatever their circumstances.



Standard Life has taken a long-term, practical approach to supporting colleagues with caring responsibilities, informed by listening to colleagues and understanding the realities of caring. The organisation actively encourages other employers to consider similar measures to help carers remain in work and feel supported.

### Key elements of Standard Life's approach include:

- 10 days' paid carer's leave, available since 2020, providing colleagues with dedicated time to manage caring responsibilities when they arise.
- Up to 5 days' unpaid carer's leave, reflecting the Carer's Leave Act 2023 and ensuring colleagues can access additional flexibility where needed.

- Flexible working arrangements, introduced in 2022, enabling colleagues to shape how, when and where they work to better balance caring and family responsibilities.
- A colleague-led Carers Network, established more than 10 years ago, which provides peer support, shared learning and a sense of community for colleagues who are caring for someone.

Together, these measures help create an environment where carers feel able to speak openly about their needs, access practical support, and remain engaged in their roles. Standard Life believes that normalising conversations about caring, alongside offering clear and consistent support, is key to retaining talent and building a more inclusive workplace.

## ii) Flexible working

Carer friendly policies (such as flexible working hours and the ability to work from home) help people fit their caring responsibilities around their employment more easily. Carers UK and Standard Life welcomed the Flexible Working Act 2023 which gave employees the right to request flexible working from day one of their employment. This right was strengthened by the Employment Rights Act 2025 which made it harder for employers to refuse requests.

Many carers are benefiting from flexible working: for some, this is the main factor enabling them to remain employment. Others said it can help to reduce stress, by allowing them to attend hospital appointments or deal with unforeseen issues. Some carers also find it helpful to work from home.

“My employer is flexible. I could not work without them giving me the flexibility they currently provide.”

“I am much more productive working from home and able to much better balance my caring responsibilities.”



## iii) Developing and promoting policies supporting carers

Positive attitudes in the workplace are essential in encouraging carers to request flexible working and Carer's Leave, and reducing the guilt that carers sometimes feel about asking for support. Awareness raising sessions in the workplace can help increase understanding of caring and the challenges it can bring. Written policies are also helpful in clarifying what support is available, and ensuring carers are aware of their rights. In this research, carers said it was important that policies are actively promoted and shared with employees, including line managers.

“[Employers should be] actually promoting the flexible working policy and being an advocate for it more openly, not just 'because it's in the policy'.”

By publishing policies, providing information on a staff intranet, or actively promoting flexible working or unpaid Carer's Leave in HR updates, employers can also help people to realise that they are caring. Many people take several years to identify as a carer, and are therefore unaware of what support might be available: Carers UK research found that over a third (38%) of carers take three years or more to recognise their caring role.<sup>72</sup> If carers are more aware of what support is available, they are more likely to talk openly about caring at work, request support such as flexible working and unpaid Carer's Leave, understand what they are legally entitled to, and challenge employers who do not provide this.

**Support is available for employers who want to develop carer friendly policies through Carers UK's Employers for Carers and Carer Positive (Scotland) programmes. More information can be found at [employersforcarers.org](https://employersforcarers.org) or [carerpositive.org](https://carerpositive.org)**

### Top tip

To help create a carer friendly workplace, employers could consider running an internal awareness campaign during Carer's Week (an annual campaign led by Carers UK and other charities) or holding a specific 'lunch and learn' type event to highlight what unpaid caring is, and what support is available in the workplace. Communication channels could also be used to share carer's stories.

<sup>72</sup> Carers UK (2024) [Less than half of us know how to identify an unpaid carer as millions miss out on support](#)

## iv) Line manager support, carer passports and carer champions

This research has shown that flexible working and Carer's Leave are not always enough on their own to prevent carers from giving up work to care. Having an empathetic line manager can make a huge difference to carers' decision-making around whether to remain in employment. Those who feel supported are more comfortable about asking for support, and less likely to be worried about facing negative consequences for taking time away from work. Many carers said they would like more opportunities to talk openly about caring at work with their line manager.

“ [Would like] 1:1 regular checks to be given the chance to discuss current situation and how your feeling.”

“ [Would like manager to be] aware that I am a carer in the first place as there is not opportunity to discuss this despite me having odd days off due to my son's condition.”

In this research, one of the issues carers highlighted was a discrepancy in the amount of support line managers were providing within the same organisation. Training for line managers can help ensure that policies are applied consistently in the workplace, by increasing manager's understanding of caring and carers' rights in the workplace. Line managers can also play an important role in ensuring carers have equal access to developmental opportunities. Carers often have many valuable skills as a result of caring, from the ability to deal with multiple responsibilities at once, to being able to cope under pressure.

Some employers also use carer passports to support better communication between carers and their managers, and to promote a more consistent approach to caring issues. Others appoint a Carer Champion to advocate for carers in the workplace and ensure that policies are being enacted. This might be someone in the HR team, or an employee with caring responsibilities.

### Good practice example: Centrica's carer passport

Centrica are passionate about supporting carers in the workplace and have worked with Carers UK for many years to develop and enhance their support.

Centrica's Carer's Passport, introduced in 2019, is a tool that allows employees to formally document caring responsibilities and required flexible working arrangements. The passport resides on the employee's HR profile so that people do not have to repeat conversations when changing roles, and to ensure consistency across the organisation.

“ The carer passport encourages our carers to have that open conversation with their manager. It also saves our carers repeating themselves in event of manager change etc.”

– Centrica



## v) Carers networks

Carers networks and peer support groups within the workplace can reduce feelings of isolation by allowing carers to share their experiences with others in similar situations. They can also be helpful in supporting people to self-identify as a carer and investigate what support is available both in and outside the workplace. Many carers said they would find these groups helpful:

“It would be nice to have a carers coffee morning or meetup where I could meet others in the organisation with caring responsibilities.”

“It would be great to have a group at work with others who care for parents. Most people my age have younger parents so I feel that people don't appreciate the toll it takes on you. It would be good to talk to others who understand this.”

### Good practice example: Leonardo's carers network

Leonardo in the UK is a member of Employers for Carers and is recognised as a Carer Confident employer. The Leonardo Carers Network group is run by a small number of employees with caring responsibilities across all of the company's UK sites. The network helps to support employees with caring responsibilities, to raise awareness of the issues they face, and ensure the company is delivering its inclusion objectives.

During 2026, the network will be marking several events, including Young Carers Action Day, Carers Week and Carers Rights Day. The Leonardo Carers Network will also be collaborating with other Inclusion & Diversity networks to support National Inclusion Week and Human Rights Day.

More information is available here: [uk.leonardo.com/en/people/life-at-leonardo/inclusion-and-diversity/network-groups/carers](https://uk.leonardo.com/en/people/life-at-leonardo/inclusion-and-diversity/network-groups/carers)

## vi) Data and monitoring – identifying carers in the workplace

Capturing data on employees' caring responsibilities can increase employers' understanding of their workforce. While the provision of this information should be optional for employees, if employers were to ask a question about caring through an internal HR self-identification system or via a staff survey this would help demonstrate a recognition of caring and the impact it can have. It would also allow employees with caring responsibilities to tell their employer about the policies and practices they would like to have. Tracking take-up of Carer's Leave and flexible working arrangement is also helpful in enabling employers to see whether policies and practices need to be promoted more.

A Carers UK survey of employers found that 51% of organisations said they monitor how many of their employees are carers.<sup>73</sup> This is promising, but it also shows that many employers are still unaware of the number of carers in their organisation, and therefore less able to judge what and how much support is needed.

### Top tip

Many people do not always realise they are caring, and see themselves as a parent, spouse, partner, daughter, son, family member, friend or neighbour. When asking employees whether they are an unpaid carer, it can be helpful to describe the type of activities that caring can include, and who might be receiving this care. Carers UK has further guidance on the definition of a carer on the Employers for Carers website: [employersforcarers.org](https://employersforcarers.org)



<sup>73</sup> Employers for Carers (2024) [The Carer's Leave Act 2023: Six months on](#)

## vii) Signposting carers to other support

Carers are often unaware of what support they might be able to access outside the workplace, such as financial benefits or help from social care services. The State of Caring 2025 survey found that 55% of carers needed to know what support they are entitled to and how to access it.

Employers can play an important role in signposting employees to advice and information offered by charities such as Carers UK.

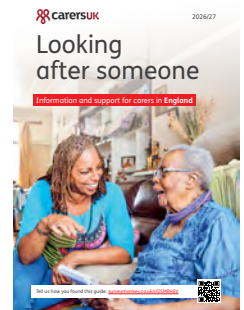
Some employers also offer an Employee Assistance Programme to help employees who are struggling with stress.

### Top tip

Carers UK offers a *Looking after someone* guide setting out the different benefits and support available to carers.

This is available to download on the Carers UK website:

[carersuk.org/LAS](https://carersuk.org/LAS)



## Carers UK's Ladder of Support Model

This new model, developed by Carers UK, sets out the different layers of support that employers can provide to carers, to prevent them from reaching a tipping point.

It is colour coded to show increasing levels of assistance, resources, or intervention based on carers' needs. The most intensive or specialist support is at the top of the ladder (dark red), and the universal support is at the bottom of the ladder (light red).

When carers provide an increasing amount of care or take on more complex and demanding responsibilities, they usually require more intensive support. If this support is not provided, carers can reach a tipping point and fall off the ladder.

It is important to remember that:

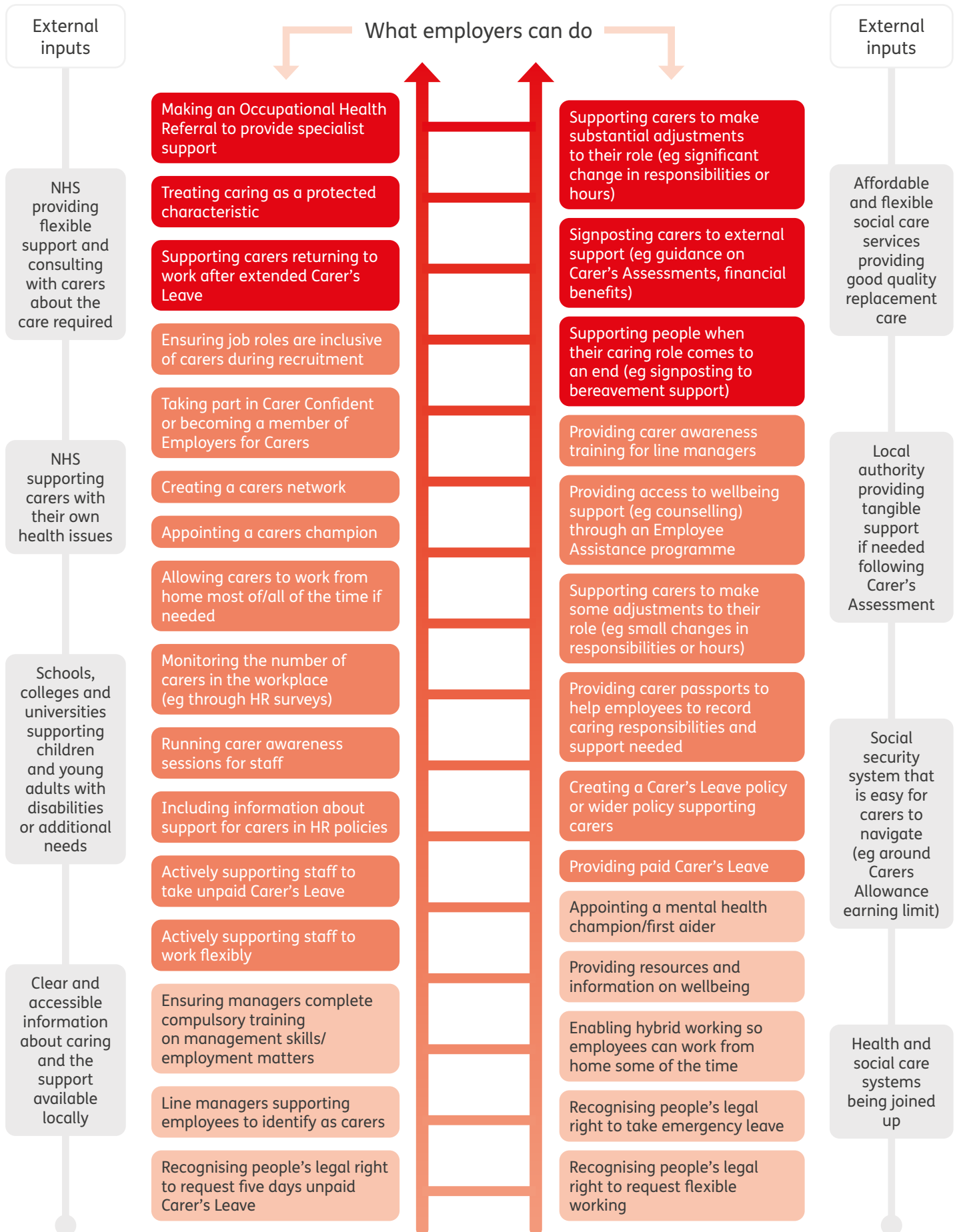
- some people may take on a very demanding caring role immediately and need substantial support from the beginning
- some people may have a less demanding caring role and require less intensive support, but may still reach a tipping point if the universal support is not provided.

The interviews conducted for this research found that carers who had received the types of support listed on the ladder, when they needed it, had not reached a tipping point.

While this model is designed to support employers, we know that there are many other factors affecting people's ability to juggle work and care, such as support from health and social services. These factors are depicted in boxes below the ladder to recognise the wider context.



## Carers UK's Ladder of Support Model



## Conclusion and recommendations

As this research has made clear, there are multiple factors that can make it difficult for carers to juggle work and care. Unless urgent action is taken, an increasing number of unpaid carers will reach a tipping point and give up paid employment, affecting their income, pension, ability to manage financially in the future, and their health and wellbeing. There are also wider implications for the economy when people give up employment to care, with the cost to the economy of carers not being in paid employment estimated to be £37 billion per year.<sup>74</sup>



Given the negative impact that giving up work to care can have, coupled with the fact that more of us will be providing unpaid care in the future, supporting carers to remain in paid employment should be a significant concern for the Government and for society as a whole. By acting now, we can not only improve the lives of millions of carers, but strengthen our economy for the future.

This research has shown that support from employers, such as flexible working, paid Carer's Leave, carer passports, carers networks, and dedicated carer policies can help prevent carers from reaching a tipping point. Similarly, when good quality replacement care services are available, and when carers receive support from the NHS when they need it, they are better able to maintain their health and wellbeing, prioritise their own needs, and remain in paid employment if they wish to do so.

<sup>74</sup> Department for Work and Pensions (2025) [The cost of working age ill-health and disability that prevents work](#)

# 1. Vision and strategy

Carers UK and Standard Life would like to see a future where carers are able to work in paid employment if they would like to do so, and live their life in the best possible health. Our goal is to see a reduction in the number of carers who give up work, a reduction in the number of carers in poverty, and an increase in the number of carers with adequate pensions. We would also like to see employers retain and nurture talented employees who have caring responsibilities. Preventing or delaying the tipping point is key to delivering this vision. Supporting unpaid carers to remain in work will have positive benefits for businesses and employers, with improved productivity rates, improved pensions, as well as many key benefits for families and the relatives and friends they support.



## Government

- The UK Government should use cross-government and cross-nation working to create a new Government Action plan to support unpaid carers. This should have a clear goal to promote good quality employment opportunities for unpaid carers, and a recognition of the link between a lack of social care provision, carers' declining mental health, and carers' ability to remain in employment when the amount of care increases. This Action Plan should act as a stepping stone to a more ambitious and fully funded Carers Strategy. This strategy should recognise the role of the devolved Governments and their own carers strategies. Nation governments should develop their own carers strategies where these do not currently exist.
- Governments across the UK should treat the retention of carers in employment as an economic priority, given the estimated productivity costs of carers leaving work.
- Governments across the UK should take a life course approach to understand the impact that providing unpaid care has. This includes recognising the support that is needed at different stages, and ensuring appropriate support is provided to help mitigate the negative costs of caring.
- Governments across the UK should take a strategic approach to the funding of social care, recognising that it is a fundamental factor in whether carers are able to combine caring with paid employment.
- Governments across the UK should develop an employment strategy looking at the over-50s in particular – the peak age of caring – to help carers remain in employment.
- The UK Government should amend the Equality Act 2010 to include caring as the 10th protected characteristic to improve equity between non-carers and people who have unpaid caring responsibilities. The Northern Ireland Executive should amend its legislation to effect a similar change.

## 2. Employment



It is clear from this research that many carers would find paid Carer's Leave beneficial. If the UK Government was to legislate to introduce a new statutory right to five days of paid Carer's Leave per year by the end of this UK Parliament, this would make it easier for carers to juggle work and care. Carers UK's previous report on paid Carer's Leave estimated that the benefits of introducing this would far outweigh the modest costs of its introduction.<sup>75</sup>

This research also demonstrated that carers often reach a tipping point when they feel unsupported by their employer. Several carers said they had tried to remain in employment by requesting changes to their working pattern or working hours but had been unsuccessful. Others said their line manager had been unempathetic, making it harder to request support they are entitled to, like unpaid Carer's Leave, and causing them additional stress. It is in employers' interest to help unpaid carers remain in employment, as losing employees (who are often at the peak of their career) is costly, and affects wider employee morale.

### Government

- The UK Government should use the opportunity presented by the review of employment rights for carers to legislate to introduce a new statutory right to five days of paid Carer's Leave per year by the end of this Parliament. This would build on the current right to unpaid leave secured through the Carer's Leave Act 2023.

- The UK Government should explore opportunities to provide employees with the right to take a longer period of unpaid Carer's Leave of up to six months so people do not fall out of the labour market when they have particularly complex and intense periods of unpaid care – for example, when providing end-of-life care.
- Government across the UK should work with employers to maximise carers' take up of the existing right to unpaid Carer's Leave and continue to promote good practice with regards to supporting carers in employment. This might include more guidance on job design, different forms of flexible working, and signposting to specific support.
- Governments across the UK should encourage employers to go one step further and implement paid Carer's Leave – setting this out in Equality Action Plans.
- Governments across the UK should ensure that the new Make Work Pay initiatives to support return to work identify unpaid carers, build in tailored support and advice for them and measure outcomes on carers' journeys to allow services to continue to learn, build and improve support for unpaid carers.
- The UK Government, working in partnership with the devolved Governments, should develop a focused piece of work as part of Sir Charlie Mayfield's review, working with vanguards on how to support carers, including in relation to carers' health and wellbeing.
- Governments across the UK should encourage more organisations to become Carer Confident employers by undertaking the Employers for Carers or Employers for Carers Wales benchmarking scheme (or become Carer Positive – a scheme in Scotland supported by the Scottish Government). These initiatives help employers to build supportive and inclusive workplaces for staff who are, or will become, carers and make the most of the talents that carers can bring to the workplace.
- Governments across the UK should lead by example, with all Government Departments becoming Carer Confident (or Carer Positive in Scotland) by 2028.

<sup>75</sup> Carers UK (2024) *Taking the next step for working carers: introducing a new right to paid Carer's Leave*

### To prevent or delay the tipping point for carers, employers should:

- Consider introducing at least five days of paid Carer's Leave. Carers UK's report on paid Carer's Leave has more information on this.<sup>76</sup>
  - Continually raise awareness of employees' rights under the Carer's Leave Act and wider flexible working rights within the workplace.
  - Provide training for line managers on how to support carers in the workplace.
  - Introduce carer passports as a tool to support employees with unpaid caring responsibilities.
  - Strengthen workplace culture around unpaid carers through internal support mechanisms such as a carer champion and carers network.
  - Take part in Carers Rights Day and Carers Week to encourage carer identification, greater understanding of in-work support and to foster support amongst colleagues.
  - Collect data on unpaid carers in the workforce to understand the challenges faced by carers, and promote solutions to support them.
- Recognise the valuable skills that carers can bring, often linked to their caring role (eg the ability to manage multiple responsibilities, advocate and communicate effectively, and cope with pressure) and ensure there are equal opportunities for carers to progress and develop in their career.
  - Promote positive practice, and share learning on what support has been effective, to encourage other employers to offer support for carers. This might include taking part in employment conferences, employer surveys, or including information online about the support provided and how it has helped.
  - Signpost carers to trusted sources of information, such as Carers UK, so that carers better understand the entitlements they have.
  - Ensure there are clear links with occupational health to support carers if needed.
  - Join Employers for Carers or Employers for Carers Wales to continue to develop good practice, or take part in Carer Confident in the UK, and/or Carer Positive in Scotland to benchmark, enhance and spread good practice.



<sup>76</sup> Carers UK (2024) [Taking the next step for working carers: introducing a new right to paid Carer's Leave](#)

### 3. Social care

Social care services have a key role in supporting carers to remain in paid employment. If carers are confident that good quality replacement care is being provided then they worry less about the person they care for, feel less stressed, and are better able to concentrate at work. In this research, many carers said that when they do not receive the support they need from social care services, this causes them additional stress, and results in them taking more time away from work to resolve issues which arise. Several carers also said they were simply unable to find any affordable or suitable social care services, meaning they were having to take on more caring responsibilities themselves.

This research has underlined the critical link between social care support and carers' ability to take on paid work. Social care needs to be seen as a fundamental condition for carers to be able to work, in the same way that childcare has been essential for parents, particularly women's, participation in the labour market. The Government commissioned review of adult social care conducted by Baroness Casey is an opportunity to recognise the economic impact of social care: the fact that good quality social care services can help people remain in employment.

It is vital that local authorities across the UK have sufficient and sustainable funding to enable them to fulfil their duties to carers under the Care Act 2014 (or Carers Scotland Act 2016, Social Services and Wellbeing Act 2014 in Wales, and Carers and Direct Payments Act 2002 in Northern Ireland). Currently, too many carers are only receiving signposting information rather than practical support. Carers need breaks so they feel rested when they are not in employment and able to focus on their own needs. Carers UK would like to see all governments across the UK increase funding for mental health support, breaks, and respite services to help carers better look after their own health and wellbeing.

#### Government

- Governments across the UK should ensure that local authorities have sufficient and sustainable funding to enable them to fulfil their legal duties to carers.
- The UK Government should ensure that any future reforms made to the Better Care Fund account in England for the importance of this funding for local authorities in providing support for unpaid carers.



- In Scotland, the Scottish Government should ensure that Carers Act funding is enhanced and ringfenced and at least 20% is provided directly to local carer services.
- The UK Government should quickly develop a social care workforce strategy to run alongside the NHS workforce strategy to ensure that there are enough skilled staff to provide social care. Each nation should ensure that their health and care workforce strategy meets similar aims.
- The UK Government should ensure that any recommendations relating to unpaid carers that are put forward by Baroness Casey during her ongoing Commission into adult social care reform are implemented swiftly and in full. Nation governments should consider the recommendations and lessons that can be adopted to support improvements for carers across Scotland, Wales and Northern Ireland.
- The UK Government and nation Governments should ensure there is a clear understanding of the impact that rising costs of purchasing formal care services has on unpaid carers and their families and take steps to mitigate negative outcomes.

#### Local authorities should:

- Ensure that social care and carers' employment are linked, by embedding specific actions within strategic plans.

## 4. Support with carers' own health and wellbeing, including more support from the NHS

This research found that many carers reached a tipping point when the stress of combining multiple caring responsibilities with employment became too much to manage. In some cases, carers had experienced a significant decline in their mental and/or physical health. Given the widespread evidence on the negative impact that caring can have on carers' own health, it is vital that carers get the support they need with this.

Many carers have also said that a lack of support from healthcare professionals makes it harder for them to provide care, and creates additional stress, affecting their wellbeing at work. Carers UK has long called for the NHS to transform how it works with and supports unpaid carers. Research consistently shows carers want and need more recognition, better support, and stronger involvement within the NHS.

Carers UK would like to see strategic planning within the NHS which recognises that the ways in which services are organised, and the extent to which carers are supported, makes a critical difference to carers being able to juggle work and care. This should include systematic identification of unpaid carers within the NHS to help health professionals determine levels of risk and where support needs to be concentrated. The NHS App and Single Patient Record have the potential to help with this.

It is also important that people have a genuine choice in whether they take on caring responsibilities. The Carers UK State of Caring 2025 survey found that, despite the existing duty on NHS Trusts and Foundation Trusts to involve carers, where appropriate, in planning for hospital discharge as soon as is feasible, only 14% of carers were asked about their ability and willingness to provide care at hospital discharge.<sup>77</sup>

Carers UK would like to see compulsory carer awareness training for all healthcare professionals to ensure that staff are aware of the law on carers' rights, and that the provisions for carers in the Health and Care Act 2022 are enacted in full. Greater carer awareness amongst professionals would also ensure carers are treated with respect and empathy, and signposted to available support, improving carers' wellbeing as a result.

There is a key opportunity to progress this through the forthcoming NHS workforce strategy. This would also ensure that the 1 in 3 NHS employees who are carers feel supported at work.<sup>78</sup>

### Government

- The UK Government should deliver a fresh approach to supporting unpaid carers through delivery of the NHS 10 Year Plan in England, transforming the way the NHS interacts with unpaid carers to make it the most carer friendly health service in the world by the end of the next decade. Detailed recommendations on this can be found in Carers UK's report on the NHS, published in September 2025.<sup>79</sup> Nation governments should ensure that the delivery of strategic improvements to the NHS is delivered in such a way that removes the barriers that too many carers face in accessing support for their own health.
- Governments across the UK should use legislation to ensure the NHS recognises and supports carers better.
- The UK Government should invest in carers' breaks and legislate so that carers have a statutory right to regular and meaningful breaks. In Scotland, where legislation has been passed to deliver a right to a break for carers, the new Scottish Government must ensure that sufficient investment is delivered to ensure that this right is meaningful.
- Governments across the UK should invest in a programme of activities to improve carers' mental health and address other factors which affect carers' mental health such as poverty, discrimination, housing and other related issues.

### Health services should:

- Ensure that there are clear carer identification programmes, and support available for carers' health and wellbeing, to help keep carers in employment.

<sup>77</sup> Carers UK (2025) [A fresh approach to supporting unpaid carers](#)

<sup>78</sup> Carers UK analysis of NHS staff survey

<sup>79</sup> Carers UK (2025) [A fresh approach to supporting unpaid carers](#)

## 5. Financial support

Carers who have no choice but to care should not be penalised for doing so. Research has shown that when carers reach a tipping point, this can have a profound financial impact, not only affecting carers' ability to meet the everyday costs of care, but making it harder to save for the future. When carers are under pensioned this can lead to people struggling to manage financially in retirement.

It is also important that the social security system does not create additional barriers. Carer's Allowance eligibility rules can act as a barrier, for example, as many carers are fearful of misunderstanding the rules and being faced with an overpayment.

In the Government's response to the independent review of Carer's Allowance overpayments, it committed to improving support for carers, such as updating internal guidance to help DWP staff to properly record and explain wage averaging decisions. The Government also committed to hiring additional staff to process earnings notifications more quickly, and ensuring letters to unpaid carers clearly explain what changes need reporting to DWP.<sup>80</sup> Government also said that it would consider a taper, removing the cliff edge which acts as a large disincentive to carers who want to juggle work and care. Implementing these recommendations and improving the current system should make it easier for more carers to remain in paid employment.

Our goal is to ensure that the tax and benefit system supports carers to work in paid employment and build up pensions for retirement, as well prevent carers who cannot work from falling into poverty. The following recommendations seek to do both

### Government

- The UK Government should review the current support provided to unpaid carers through the social security system, including setting objectives for carers' social security benefits as well as timescales and options for change. This includes working with the nation governments on devolved benefits to reduce barriers for carers of claiming social security support.
- Increase the level of Carer's Allowance by at least £11.72 a week in England, Wales and Northern Ireland (at 2025/26 rates) to match the effective rate in Scotland.
- The Scottish Government should increase the value of Carer Support Payment and expand eligibility to enable more carers to claim the benefit, including to support paid employment alongside caring.
- The UK Government should implement swiftly and in full, the recommendations in the final report of the Independent Review into Carer's Allowance overpayments led by Liz Sayce. Carers UK welcome that the Government has accepted, or partially accepted, 38 of the 40 recommendations in the Independent Review's final report and committed £75 million for delivery over the next three years.
- Governments across the UK should seek to maximise the impact of the Carer's Allowance (Carer Support Payment in Scotland) earnings limit rise that was announced at the 2024/2025 Autumn Budgets, to support those who are undertaking part-time work alongside their caring responsibilities while claiming Carer's Allowance.
- The UK Government should ensure that unpaid carers and carers' organisations are fully consulted as part of the Timms Review into Personal Independence Payments (PIP). The Government should also engage fully with nation governments on the implications of any changes to devolved social security benefits in Scotland and Northern Ireland.
- In the context of the State Pension Age review, recognise that carers are a group particularly at risk of being under pensioned as a result of their pre-retirement caring responsibilities and take steps to close the gap between carers and non-carers
- Ensure that the Pensions Commission review of the pensions system, and the review of the State Pension age, both have clear lines of inquiry into the experiences of unpaid carers, so that carers receive the support they need in planning for their future.

<sup>80</sup> Department for Work and Pensions (2025) Government response to the independent review of Carer's Allowance overpayments

## 6. Support for parent carers of children with special educational needs or disabilities

This research found that many parent carers had reached a tipping point when their child's school did not provide sufficient support for children with special educational needs and disabilities. Several carers said they were often called away by the school to resolve issues, making it harder to juggle work and care. Others said that their caring responsibilities had increased because their child had been excluded, or they had taken the decision to withdraw them. Some carers in England also said they had tried to apply for an Education, Health and Care (EHC) plan but had found this process very difficult and time-consuming.

With a significant increase in the number of children and young people identified with SEND,<sup>81</sup> it is vital that mainstream schools are inclusive and consistent in the level of support provided to children with special educational needs and disabilities.

### Government

- Governments across the UK should ensure that front-line staff within schools have the training, resources, and support they need to respond effectively to the needs of children with special educational needs or disabilities, reducing the demands on parent carers.



<sup>81</sup> House of Commons Education Committee (2025) [Solving the SEND crisis](#)

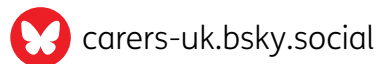


Across the UK today, 5.8 million people are carers – supporting a loved one who is older, disabled or seriously ill. Carers UK is here to listen, to give carers expert information and tailored advice. We champion the rights of carers and support them in finding new ways to manage at home, at work, or in their community.

**We're here to make life better for carers.**

Carers UK 20 Great Dover Street, London, SE1 4LX

T 020 7378 4999 | E [info@carersuk.org](mailto:info@carersuk.org)



Carers UK is a charity registered in England and Wales (246329) and in Scotland (SC039307) and a company limited by guarantee registered in England and Wales (864097). Registered office 20 Great Dover Street, London SE1 4LX.

© Carers UK. May 2026 | Publication code: UK4153\_0526 | ISBN 978-1-918310-00-9

**[carersuk.org](https://carersuk.org)**