



2018 HEREFORDSHIRE QUALITY OF LIFE SURVEY RESULTS

FOCUS ON: UNPAID CARERS
(v 1.0)



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Acknowledgements

Thanks to the **National Lottery Awards4All** programme for contributing to the 'Better Data, Better Lives' project to run the Quality of life survey, and for funding this report.

1. CONTEXT

1.1 Background

This report gives an in-depth analysis of a 'quality of life' survey of Herefordshire residents undertaken in spring 2018, with a focus on unpaid carers. The survey is part of a project called 'Better data, better lives', It is unique, having been entirely driven and managed by the community and voluntary sector in Herefordshire. It will fill gaps where there is currently no recent data available for the county, so that hundreds of voluntary and community organisations can target their services and resources to the people and places most in need. Please see the headlines and full report for more detail on other aspects, which can be found on the Data Orchard website.

1.2 Aim

To provide evidence for voluntary and community sector organisations who support and rely on unpaid carers to allow Herefordshire to meet the needs of those cared for as well the carers themselves. Unpaid carers are a valuable resource in the county, but little recent evidence is available. This report is hoping to fill that gap and provide evidence needed to develop services and apply for the relevant funding to provide this support.

2. Methodology

2.1 Random sample postal survey

The Quality of life survey was posted out to a random sample of 4,125 residential households in April 2018 to achieve a representative sample of Herefordshire's adult population. Any member of the household aged 16 years or over could respond anonymously and post the survey back in the Freepost envelope supplied. A reminder letter was sent after 3 weeks with a deadline of 6 weeks after the initial mailout. Postal returns were accepted up until 9 weeks after the mailout.

There were 644 responses, lower than the target but possibly a result of the partner organisations not being as well-known as Herefordshire Council, who ran the previous survey in 2012. It was also at the time that 'Cambridge Analytica' was in the news, which caused some anxiety about personal data as evidenced by some of the comments back from residents - despite this survey being anonymous.

2.2 Weighting

There was an over-representation of older respondents compared with the resident population, so the results were weighted to account for this and also size of the household. In other words, responses from younger respondents were given more weight to account for the lower number of responses from this age group. Larger households were weighted accordingly too. More detail on the weighting method can be found in the Technical report.

2.3 Confidence Intervals

This survey uses the views of the responses achieved from those sampled to estimate the views of the wider population, such as all adults aged over 16 in the county, or in some cases sub groups of the wider adult population, such as those adults who live in rural areas of the county. As such there is a margin of uncertainty about the result, known as a confidence interval which can be calculated. This confidence interval has been inflated to account for the effects of weighting and the effective sample size.

Quality of life survey: Spotlight on unpaid carers

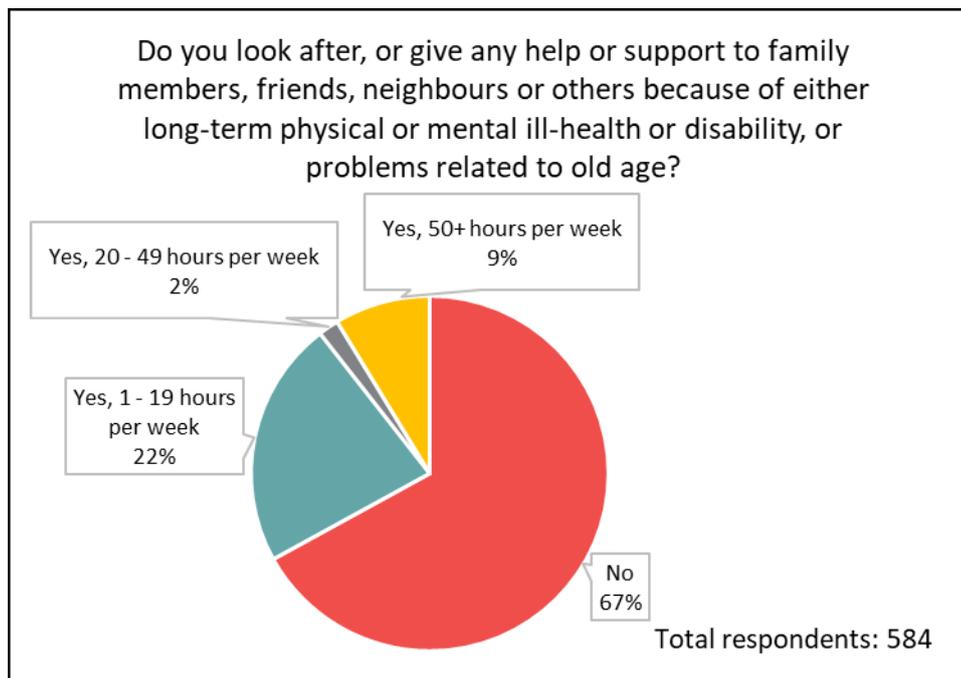
The worst-case inflated confidence interval for this survey when estimating the views of the adult population of Herefordshire = + / - 5.32%. This means that there is a 95% probability that the true figure for the views of the adult population lies within the range of the estimated figure plus or minus the 5.32%. More detail on confidence intervals can be found in the Technical report.

3. Results: focus on unpaid carers

3.1 UNPAID CARERS IN HEREFORDSHIRE

Question 22. CARING FOR OTHERS: Do you look after, or give any help or support to family members, friends, neighbours or others because of either long-term physical or mental ill-health or disability, or problems related to old age? (Do not count anything you do as part of your paid employment). *Tick one box only.*

A third of respondents provide unpaid care to friends and family because of long-term ill-health or disability, or problems related to old age. 22% provide unpaid care for between 1-19 hours a week; 9% provide 50 hours or more per week and 2% provide between 20 - 49 hours a week.



The proportions who provide unpaid care has remained largely the same as 2012, when it was 34%. However, there was an increase in the proportion providing 50+ hours of unpaid in 2018 as shown in the table below.

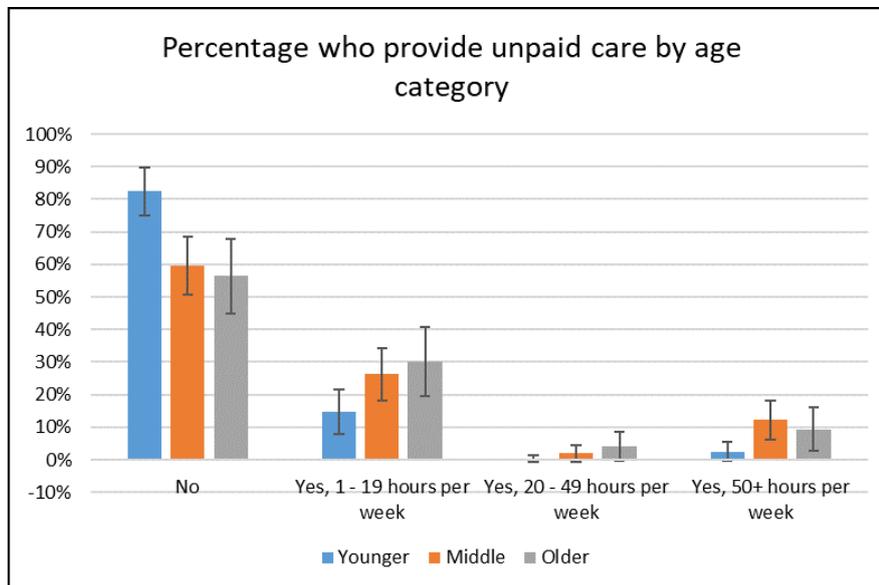
Options	Count (2018)	% of responses 2018	% of responses 2012
No	391	67%	66%
Yes, 1 - 19 hours per week	131	22%	26%
Yes, 20 - 49 hours per week	11	2%	4%
Yes, 50+ hours per week	51	9%	4%
Any hours of care	193	33%	34%

3.1.1 Differences by age, geography and disability

The data suggests that those living in more rural areas (Villages; Hamlets and Isolated Dwellings) have higher rates of unpaid care provision than those in more urban areas (Cities and Towns). However, given the small numbers in each group and therefore larger confidence intervals we cannot say this for certain.

Quality of life survey: Spotlight on unpaid carers

Younger people (aged 18 to 44 years old) were more likely to say they did not provide any unpaid care, compared to those who were middle aged and older. There was also a lower proportion of younger respondents providing high levels of care a week (50 hours or more). Please see the chart below.

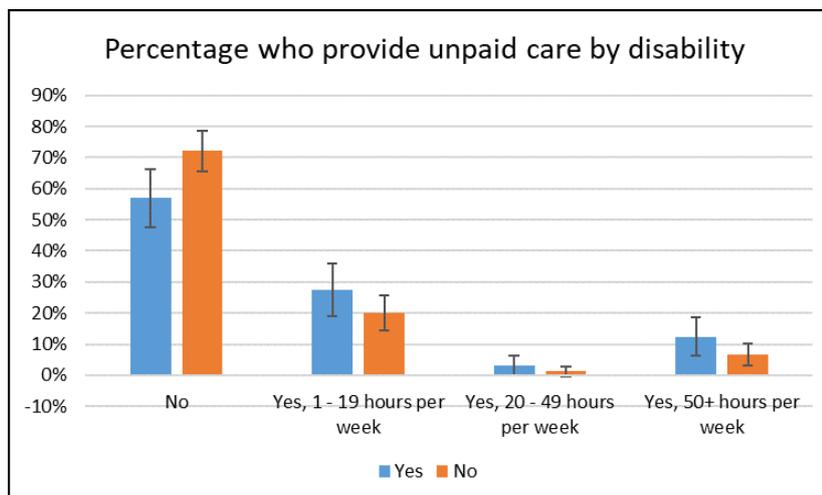


A higher

without a

proportion of respondents disability or long-term illness, did not provide any unpaid care. In other words, those with a disability or long-term illness are more likely to provide some unpaid care, compared to those without a disability/illness.

proportion of respondents disability or long-term illness



3.2 ABOUT AREA

Respondents several

relation to their local area (as defined within 20 minutes' walk from their home). They were:

- how satisfied/dissatisfied they are with their local area as a place to live and with their home as a place to live;
- how safe/unsafe they felt in their local area in the day or after dark;
- to what extent they agree/disagree that their local area is a place where people from different backgrounds get on well together, or how much of a problem there is with people not treating each other with respect, dignity and consideration;
- whether they agree/disagree they can influence decisions affecting their local area.

THE LOCAL

were asked questions in

Analysis of the data did not reveal any differences between respondents depending on whether they provided unpaid care or not.

3.3 ACCESS TO SERVICES

High proportions of respondents found green open space, shops and postal services **easy to access**. Services that respondents found **difficult** to access were banking services, museums, art galleries, cultural/heritage centre and cinema, film or theatre. There were no differences found based on whether the respondents provided unpaid care or not.

Respondents were also asked to describe (if appropriate) how access to services had changed over the last five years. Unpaid care was not mentioned in any of these comments.

The survey also asked about barriers to accessing services. Getting there and back (transport), opening or operating hours and parking availability and cost were the most common barrier.

There was no difference found based on whether respondents provided unpaid care or not.

3.4 ARTS, CULTURE, HERITAGE, OUTDOORS & WELL-BEING

3.4.1 Frequency of visit by type of activity

High proportions of respondents had visited the following places **at least once** over the past year:

- ▶▶▶▶ Natural heritage place i.e. park or garden (78%)
- ▶▶▶▶ Film or play (77%)
- ▶▶▶▶ Historic place e.g. historic house or museum (68%)

The following places were visited more frequently (**at least every few months**):

- ▶▶▶▶ films or plays (62%)
- ▶▶▶▶ a natural heritage place (63%)

The events/places that most had **not** been to over the past year were:

- ▶▶▶▶ A live dance event (75%)

3.4.2 Visits - differences by unpaid care provision

There were some differences found by whether respondents provided any **unpaid care** compared to all respondents:

For visiting an art or craft exhibition:

- Respondents who provide unpaid care were more likely to go to an art or craft exhibition every few months, compared to those who are not carers.

For going to a place of worship:

- There was a higher rate of respondents who provide unpaid care who visit a place of worship every few months and a corresponding lower rate who never visit compared to all respondents.

3.5 PARTICIPATION IN ACTIVITIES

3.5.1 Time spent outdoors

60% cent of respondents spent time outdoors daily (excluding shopping trips/chores or time spent in their garden). This compares with 13% who spent no time outdoors in the last seven days. **There were no differences found based on whether respondents provided unpaid care or not.**

3.5.2 Frequency by type of activity

The activities that most respondents **did at least once** over the past year were:

- ▶▶▶▶ A walk of at least 10 minutes (97%)
- ▶▶▶▶ Reading (95%)
- ▶▶▶▶ Gardening (89%)
- ▶▶▶▶ Sport or fitness activity (74% per cent)

Over 90% of those that had taken part in these activities, felt that it 'made them feel better' both physically and mentally.

The activities that most respondents **had not done** over the past year:

- ▶▶▶▶ Taken part in a performance e.g. dance, film, poetry, theatre (88%)
- ▶▶▶▶ Creative writing (83%)
- ▶▶▶▶ Created music (82%)
- ▶▶▶▶ Digital creative activity e.g. blogging, vlogging, gaming (74%)

There were no differences found based on whether respondents provided unpaid care or not.

3.6 BARRIERS TO DOING ACTIVITIES

Q18. If appropriate, what stops you from doing any of the activities mentioned in this section? Please give details:

There were four sections to this question where respondents could give open or 'free text' responses.

3.6.1 Barriers to going to cultural or heritage places

There were 283 comments given to describe barriers to going to cultural or heritage places, which were categorised and summarised in the table below. The most frequently mentioned barriers were time constraints and access (getting there and back, parking and physical access). **4% said being a carer was a barrier to going to cultural or heritage places.**

Categories of barriers to cultural activities	Count of mentions	%
access (transport, parking, physical access)	87	31%
old age	11	4%
carer	10	4%
ill-health/disability/limited mobility	31	11%
don't want to go on own/bereaved	5	2%

Quality of life survey: Spotlight on unpaid carers

busy/time constraints/work	90	32%
cost	56	20%
limited choice	9	3%
not interested	16	6%
nothing	8	3%
other	24	8%
Base = 283		

3.6.2 Barriers to taking part in creative activities

There were 250 comments given to describe barriers to taking part in creative activities. The most frequently mentioned were time constraints (25% of comments), not interested (20%) and health/disability/mobility (12%). 6% mentioned that being a carer was a barrier to taking part in creative activities as shown in the table below.

Categories of barriers to creative activities	Count of mentions	%
access	16	6%
availability	25	10%
age	12	5%
carer	14	6%
health/disability/mobility	29	12%
busy/time constraints/work	63	25%
cost	13	5%
limited choice	0	0%
only do at home	4	2%
not interested/not my thing	51	20%
nothing	10	4%
not creative	20	8%
other	10	4%
Base = 250		

3.6.3 Barriers to doing sports or physical activity

There were 274 relevant comments given to describe barriers to doing sports or physical activity, which were categorised and analysed. The most frequently mentioned barriers were health/disability/mobility (28% of comments), time constraints/work (18%); and age (16%). 3% cited being a carer was a barrier to doing sports or physical activity. The following table shows the categories of comments made and further detail about other barriers.

Categories of barriers to doing sports or physical activity	Count of mentions	%
access	1	0%
age	44	16%
availability locally	14	5%
time constraints/work	50	18%
carer	8	3%
childcare	9	3%
confidence/ability	2	1%
cost	22	8%
getting there, parking	19	7%
health/disability/mobility	77	28%
limited choice	0	0%
motivation/too lazy	10	4%
not interested/not my thing	22	8%
nothing/already do	25	9%
other	8	3%
Base = 274		

3.6.4 Barriers to spending time outdoors

There were 162 relevant comments given to describe barriers to spending time outdoors. The most frequently mentioned barriers were time constraints (27% of comments); health/disability/mobility (19%) and the weather (18%). **7% cited being a carer was a barrier to spending time outdoors.** The following table shows the categories of comments made and further detail about other barriers.

Categories of barriers to spending time outdoors	Count of mentions	% of comments
busy/time constraints/work	44	27%
health/disability/mobility	31	19%
weather	29	18%
nothing	14	9%
carer	11	7%
age	10	6%
travel/parking	10	6%
Access	5	3%
cost	5	3%
not my thing	5	3%
confidence/on own	4	2%
other	13	8%
Base = 162 comments		

3.7 WELL-BEING & UNPAID CARERS

Overall, levels of contact with family, friends or neighbours and loneliness remain level with 2012 and national rates.

- 60% of respondents were in **contact with family, friends or neighbours** most days; 34% at least weekly but 6% were only in contact once a month or less. This did not vary with age. *There was no difference found in the responses depending on whether unpaid care was provided or not.*
- 26% of respondents felt lonely some of the time during the past week. 8% felt lonely most or all of the time. *The data indicates that those who provide unpaid care had slightly higher rates of those who felt lonely - however, the numbers are small with corresponding large confidence intervals so we cannot say this for certain.*

Self-reported measures of how people are feeling give an indication of personal well-being. Here we present the results of measures at either end of the answer scale ranging from zero (not at all) to ten (completely).

10% of respondents gave low **life satisfaction** scores compared to 5% cent in the UK. 31% gave very high **life satisfaction** scores, similar to the UK. On average life satisfaction in the county is similar to nationally. *The data indicates that those who provide unpaid care had lower life satisfaction scores - however, the numbers are small with corresponding large confidence intervals so we cannot say this for certain.*

13% of respondents gave low ratings of **how worthwhile they feel their life is**, considerably above the UK rate of 4%; and 21% gave high ratings, much lower than the UK rate of 35%. Overall this indicates lower levels of how worthwhile people in Herefordshire feel their life is compared to national levels. *There were no differences found by whether respondents provided unpaid care or not.*

9% of respondents gave low **happiness** scores, similar to the UK (8% in 2017). 40% of respondents gave very high happiness scores, compared to the UK rate of 35%. Overall this indicates slightly higher levels of happiness in the county compared to nationally. *The data indicates that those who provide unpaid care had lower happiness scores - however, the numbers are small with corresponding large confidence intervals, so we cannot say this for certain.*

4% of respondents had very high **anxiety levels**. 22% had some anxiety and 51% had very low anxiety scores. On average levels of anxiety in Herefordshire are similar to UK levels. *The data indicates that those who provide unpaid care had slightly higher anxiety scores - however, the numbers are small with corresponding large confidence intervals, so we cannot say this for certain.*

3.8 MORE ABOUT UNPAID CARERS

In terms of managing everyday costs, about half of all respondents find energy, food, clothing and transport costs manageable. 46% found mortgage/rent costs manageable and a quarter found this tight. *The data indicates that **unpaid carers** struggle more than those who don't provide unpaid care to manage mortgage/rent, energy and transport costs - however, the numbers are small with corresponding large confidence intervals, so we cannot say this for certain.*

In terms of managing everyday costs, 63% of all respondents never have to choose between paying mortgage/rental costs, energy costs, transport cost, food and clothing costs. However, 16% did have to choose about once a year, 15% did so monthly and 5% had to choose between these costs weekly or daily. *There were no real differences by unpaid care provision found.*

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The majority (56%) of respondents felt their health was **good**, a quarter thought it was **fair** and 20% reported their health to be **bad**. The data indicates that those who provide **unpaid care** had a higher proportion who reported **bad/very bad health** compared to those who do not provide any unpaid care.

There were no 'any other comments' related to carers.

Other demographic information about all the respondents:

- 644 residents of Herefordshire returned the questionnaire. There was an over-representation of older respondents compared with the resident population, and results were weighted to account for this.
- 90% identified as white British (compared with 94% at the 2011 Census)
- For nationality, 61% identified as English and 24% as British (compared with 72% as English and 21% as British in 2012).
- 94% identified as heterosexual or straight.
- 60% identified as Christian and 28% had no religion/belief (compared with 68% as Christian and 23% as no religion/belief in 2012).