

EU Strategy on Care – Call For Evidence

Care Alliance Ireland Submission

March 2022

We are pleased to have this opportunity to make a short submission on the topic of the upcoming EU Strategy on Care.

Care Alliance Ireland is the national network of voluntary organisations supporting family carers in Ireland. We exist to enhance the quality of life for family carers. We achieve this by supporting our member organisations in their direct work with family carers through the provision of information, developing research and policy, sharing resources, and instigating opportunities for collaboration.

We are members of EuroCarers, and in addition to the material contained in this submission we would like to take this opportunity to support the points made by EuroCarers in their recent submission to this process.

Throughout this document, we will be using the term 'family carer' in place of the term 'informal carer', which appears to be the more widely used term at EU level. We do this not merely to be contrarian, but to highlight the strong view amongst family carers in Ireland that there is nothing 'informal' about the responsibilities that those who care for their loved ones have, and the care work that they do¹.

We are focussing our comments on some key areas which will be important for the Commission to be aware of as part of this submission, particularly focussed on care across the life cycle and connecting family carers with the formal labour market.

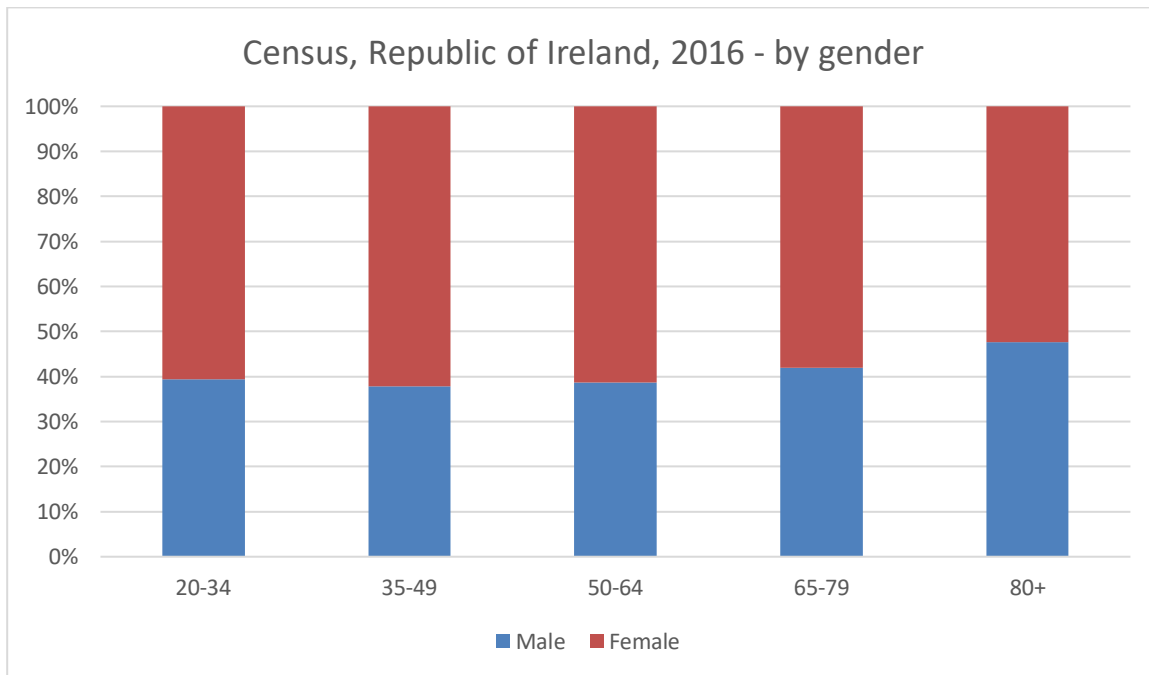
¹ Care Alliance Ireland, "The Right Not to Be Called an Informal Carer. Care Alliance Ireland: Position Statement on Language Use" (Care Alliance Ireland, 2017), [http://www.carealliance.ie/userfiles/file/CAI_Position_Paper_On_Language_Use_\(2017\).pdf](http://www.carealliance.ie/userfiles/file/CAI_Position_Paper_On_Language_Use_(2017).pdf).



Gender and Care - Demographics of Identification

There are a number of assumptions that are often made when thinking about gender and family caring, not all of which are accurate.

In general, the image that most often comes to mind when asked to think of a family carer, is a woman in her 40's – 50's, caring for an ageing parent, and who is often also raising her own children – with or without the help of a partner. This is borne true in the official statistics from Ireland, and likely across the EU. There is a high concentration of female carers in the 40-50 age group according to the most recent Census of Population in Ireland². This cohort of carers are often described as sandwich carers. However, when looking at carers who are older than this, the gender gap begins to close;



Internationally and historically, caring has been a gendered activity. That much is clear from the demographics outlined above. Care and caring has long been established as a predominantly female occupation, with the work of caring and the attributes of caregivers being feminised and consequently of low status, and

² Central Statistics Office, "Census 2016 Summary Results - Part 2" (Central Statistics Office, 2017).

receiving little recognition³. Whilst this is changing, there is still a strong element of gendering involved in how caring is viewed.

Traditionally, care work is often seen as 'women's work' – indeed much of the modern 'carers movement' has developed from a push to have the value of the work of female family carers recognised⁴. Due to this feminisation of caring, and the resultant lack of status and recognition for caregiving activities, male family carers may experience significant stigma, not unlike the stigma faced by fathers who wished to become more involved in their children's care and development in previous decades. There are many who see a man who engages in caregiving activities as weak, or feminine, regardless of the relationship to the cared-for person. In addition, there have been cases of young male carers experiencing homophobia (regardless of their sexuality) due at least in part to their caregiving role^{5 6}.

Ribeiro, Paul and Nogueira's study⁷ indicated that men fail to identify with the term 'carer', seeing the tasks and status involved in caring duties as part of a relationship. In that study, participants integrated their 'caring' identity with their sense of masculinity, taking pride in that role. In other studies, male carers appear to have developed a vision of masculinity that not only de-emphasised certain traditionally 'masculine' elements (such as not revealing emotions etc.), but which also emphasised others, such as taking charge, and 'male-to-male' bonding⁸. More recent work in Ireland has shown that male carers, when telling their personal stories, were resisting traditional discourses surrounding masculinity. For example, they expressed satisfaction in skills learnt as part of their caring role which are traditionally not associated with masculine behaviour, such as dealing with household tasks. The gentle and tender way in which men

³ Niall Hanlon, "Masculinities, Caregiving & Equality" (20 Years of Family Carer Research in Ireland, Dublin, November 21, 2015),

<http://carealliance.ie/userfiles/file/Masculinities%20&%20Care%20in%20Personal%20Life;%20Hanlon.pdf>.

⁴ Victoria Molyneux et al., "Reconsidering the Term 'Carer': A Critique of the Universal Adoption of the Term 'Carer,'" *Ageing and Society* 31, no. 3 (2011): 422–37.

⁵ Care Alliance Ireland, "We Need to Talk About It' – Stigma and Family Care," 2016.

⁶ Zoe Hughes, "Family Caring and Minority Populations" (Care Alliance Ireland, 2018), https://www.carealliance.ie/userfiles/file/Family_Caring_Minority_Populations_CAI_2018.pdf.

⁷ O Ribeiro, C Paul, and C Nogueira, "Real Men, Real Husbands: Caregiving and Masculinities in Later Life," *Journal of Aging Studies* 21, no. 4 (2007): 302–13.

⁸ L Campbell and M Carroll, "The Incomplete Revolution: Theorizing Gender When Studying Men Who Provide Care to Aging Parents.," *Men and Masculinities* 9, no. 4 (2007): 491–508.

described their involvement with and responsibility for intimate personal care also de-emphasised the more traditional views of masculinity⁹.

Irish Citizen Views on Care And Caring

At national level in Ireland, a nationally representative Citizens Assembly is convened, on the direction of the government, to make recommendations on matters of national policy. The most recent iteration of this Assembly voted overwhelmingly to support the idea of gender equality across care work. In addition, the Citizens made a series of recommendations which we feel it is useful for the Commission to be aware of.

These points may form a basis for some elements within the EU Strategy on Care.

- *"Reform Carers' Allowance by:*
 - *Increasing the level of the income disregard.*
 - *Reimbursing the direct and additional costs associated with caring.*
 - *Increasing the ceiling on the number of hours in paid work outside the home.*
 - *Providing access to State employment and training programmes."*

Recently completed and published research commissioned by the Dept. of Social Protection found that for households with a person with a disabled person, there was an additional cost of between €8,700 and €12,300 per annum¹⁰. This does not include the loss of income, and the opportunity costs for family carers who find themselves with family care responsibilities. As such, it is vital that in order to reimburse the direct and additional costs associated with caring, per the above recommendation, these issues are addressed. By enabling family carers to enter the paid labour market or enter education for more hours, it would allow for some of these economic impacts to be addressed. These changes must also ensure that an increase in hours does not negatively impact their eligibility for Carers Allowance (and the subsequent other qualifying supports).

⁹ Ann Stokes, "A Never-Ending Love Story: A Narrative Exploration into the Experiences of Men Who Provide Care in the Context of Dementia" (Unpublished PhD Thesis, Dublin, University of Dublin, Trinity College Dublin, 2015).

¹⁰ Indecon International Research Economists, "The Cost of Disability in Ireland," 2021, <https://bit.ly/3HrLA4s>.

- *"Improve respite provision for carers by:

 - *Increasing the level of the Carers' Support Grant in the next Budget and keeping it under review to ensure it keeps pace with other increases in social protection payments.*
 - *Providing adequate access to a range of respite services to meet individual needs."**

In 2021, we in Care Alliance Ireland partnered with the Institute for Social Science in the 21st Century in University College Cork (ISS21), to undertake research with family carers and interested stakeholders in reviewing the objectives of the Irish National Carers Strategy (2012). Unsurprisingly, the top three priority action areas identified by both family carers and other stakeholders (i.e., policymakers, service providers, staff in the not-for-profit sector and researchers) were income supports, supports and services, and respite¹¹. This shows a clear need, not just coming from the recommendations of the Citizens Assembly, but also from family carers themselves, along with professionals working in the area, for real reform of the existing systems of respite. This has become even clearer as we emerge in some form from the Covid19 pandemic and have an opportunity to rethink how respite is accessed, and in what forms.

Respondents in the above study made particular reference to residential or overnight respite for those providing intense levels of care; this kind of respite was reported to be limited, and often crisis driven rather than planned. There should be no requirement for a crisis point to be reached for either carer or cared-for person, in order for respite to be available. Indeed, ensuring regular access to respite can be a protective factor against family carer burnout.

- *"Lifelong care for persons with disabilities who need it should be seamless and there should not be any break in services provided or need to reapply for support when a person turns 18."*

Feedback from our member organisations, parents and family carers of people with disabilities consistently report that the experience across transition points in life is particularly challenging. We welcome this recommendation and we include the caveat that lifelong care, in this instance, is not and should not be

¹¹ Maria Pierce et al., "A Review of The National Carers' Strategy (2012): How Relevant Are the Actions In 2021 and for the Future?" (Care Alliance Ireland and Institute of Social Science in the 21st Century, University College Cork., 2021), <https://bit.ly/3K4umMf>.

seen as the sole responsibility of disability specialists. We consistently hear reports of ongoing siloing of age, health, mental health and disability services, which can often lead to individuals and families 'falling between the cracks'. This is unacceptable in 2022, when a holistic approach across the life course is critical to successful ageing.

- *"Make special efforts to improve the visibility of men performing caring roles."*

Caring is a gendered activity, and much of the devaluing of care work in Irish society can be traced back to this. According to the latest Census figures, approximately 40% of family carers in Ireland are male. However, the majority of research, the supports available, and the publicity around caring treat female care as the 'standard'. To truly understand the diversity of care provided across Ireland, and to create the correct supports, it is important to acknowledge this. Increasing the visibility of male and non-binary family carers will contribute to addressing the stigma that some non-female carers experience. Read more in our publications on the topic of stigma as related to family care at <https://bit.ly/2QE5Hb8>, and on minority caregivers at <https://bit.ly/3tW0ASI>.

- *"Adopt a fully individualised social protection system to reflect the diversity of today's lives and to promote an equal division of paid work and care."*

We understand that the key target of this particular recommendation relates to parenting; however, we see scope for this recommendation to work across care in ageing, mental health and disability. In many families it is expected that should care be needed, one of the adult children – usually an unattached daughter – will step in to provide it. We are not suggesting that families be forced into organising care in a specific way; however, working to ensure a more equitable sharing of care between couples and within families is likely to create more positive caring situations for all involved.

Increasing the Labour Market participation of Family Carers

In keeping with a key objective of the EU Strategy on Care, namely to increase labour market participation, and the associated demonstrated benefits of this (income, work life balance, future pensions, well-being) we wish to share in this submission, the interim report from a novel intervention our organisation has been delivering since 2021. This intervention has demonstrated a very significant and ongoing positive impact in the area of family carer labour market

participation, employment readiness, life satisfaction and social supports, together with significantly reduced levels of reported isolation and loneliness. The interim report on our *Kaleidoscope Project – Guiding family carers back to paid employment* can be read at <https://bit.ly/3IMyLIN>.

Conclusion

We are pleased to have this opportunity to make a submission into the planning of the EU Strategy on Care. Along with our colleagues in Eurocarers and other organisations across the EU, we look forward to the development of the Strategy in due time. We remain open to working with the Commission in whatever ways are relevant and appropriate to ensure that Ireland’s 500,000 family carers, along with all those across member states, benefit from the Strategy and international collaboration on this issue.

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