

Working carers in the Ministry of Justice: Summary of research findings



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Working carers in the Ministry of Justice: Summary of research findings

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Camille Allard is a PhD student based in the Department of Sociological Studies at the University of Sheffield. Her research project looks at how working carers can be supported in their daily lives in their workplace. Camille works with organisations which have implemented different schemes of care leave to support carers. She works to assess how this can enhance carers' ability to incorporate paid employment and mutually benefit employees and employers. Camille's main interest is how supporting working carers can contribute to better quality jobs and increased wellbeing and fairness at work.

INTRODUCTION

How best to support people who combine paid work with caring for a family member or friend is an urgent issue. The number of working carers has been rising as demand for care (more people living with disability, poor health, or into extreme old age) has increased, while public funding for care services has been sharply reduced. As workers are urged to stay in work for longer, the need to combine work and care will only increase. Today, according to Carers UK, already 1 in 7 workers combine work and care (Carers UK, 2019).

Working carers make a major contribution to society. It is important to understand the pressures they experience and the impact working and caring has on them and their families, so that employers can offer them good support in their daily lives.

Through its membership of the *Employers for Carers Forum*, the Ministry of Justice (MoJ), was invited to contribute to an ESRC-funded research programme based at the University of Sheffield, the *Sustainable Care: connecting people and systems* programme. This explores how care arrangements can be made sustainable. It focuses on adults living at home with chronic health problems or disabilities and their families, carers and paid workers. It is delivered by eight universities and Carers UK, led at the University of Sheffield by Professor Sue Yeandle.

This report was written by PhD candidate Camille Allard, based on a case study of the MoJ, conducted under the supervision of Professor Sue Yeandle and Professor Jason Heyes.

CONTEXT AND RESEARCH DESIGN

Context

The case study conducted within the MoJ aimed to understand what constitutes good workplace support for carers in employment, and to what extent this support is accessible to all MoJ employees (who are also UK civil servants).

The research is part of the work of the research team *Combining Work and Care: How do workplace support and technologies contribute to sustainable care arrangements?* The case study of the Ministry of Justice (MoJ) is part of a doctoral study investigating organisational policies and practical provisions put in place by employers, and the impact these policies have on working carers' lives.

The research questions addressed in this report focus on the MoJ's policies on working carers:

1. How aware are employees of the support the MoJ offers to its working carers?
2. To what extent are these policies accessible to all staff, for those at all job grades and with different gender and ethnic characteristics within the MoJ?
3. What is the impact of these policies on MoJ employees' caring and working lives?

The case study also explored why and how the policies were introduced in the MoJ; this aspect of the study will be reported separately.

Research design

The case study presented in this report aimed to explore how working carers in the MoJ are supported in combining their caring responsibilities with paid employment. It comprised two main elements: a survey of MoJ employees who were working carers and interviews with selected MoJ staff. The MoJ supported the research by:

- Sharing information about MoJ policies on working carers, including its care leave and carer passport policies.
- Distributing the survey about working carers' experiences among MoJ employees.
- Supporting the researcher to arrange interviews with working carers and other staff with experience of these policies.

The research for the case study was conducted between April 2019 and November 2019.

ABOUT THE SURVEY

The survey questionnaire explored respondents’:

- care situation
- work circumstances
- awareness of the policies to support working carers
- personal characteristics.

It was distributed online to MoJ employees who were currently caring for an older, ill or disabled relative. The **320 survey participants** included staff in the following civil service grades:

- Administrative Officer/Administrative Assistant (**AO/AA**)
- Executive Officer (**EO**)
- Senior Executive Officer/Higher Executive Officer (**SEO/HEO**)
- Grades 6 and 7 (**6/7**)
- Senior Civil Service (**SCS**)

Responses to the survey were analysed to reveal working carers’ experiences and their level of awareness of the policies intended to support them, in regard to their job grade, gender, ethnicity and co-residence with the person cared for. Readers should note that completion of the survey was optional, and findings may not be fully representative of all working carers employed at MoJ.

KEY FINDINGS

Care situations of respondents

- Many respondents had been caring for over 5 years (49%).
- Almost half (47%) of working carers in the MoJ survey provided care for 20 or more hours a week.
- Nearly half of working carers lived with the person they care for (45%).
- More men lived with the person they care for than women (58%).
- More women had provided care for 10 years or more (28%).

Awareness and access to support

- “Flexi-time”, “reduced hours”, “carer special leave for emergency” and “compressed hours” were the forms of support most likely to be requested by working carers.
- “Carer special leave for family emergency” was more likely to be used than “carer special leave for medical appointments”.
- Fewer women than men ask for support.
- Working carers from a Black background were less likely to ask for support in comparison to participants from other ethnic backgrounds.

Level of confidence and wellbeing

- 32% of participants felt confident about their future, 33% felt neutral about their situation and 34% were not confident about their future.
- Although most working carers agreed that they feel confident they could talk about care responsibilities with their manager, 16% (a worrying 21% among working carers in the AO and AA grades) disagreed or strongly disagreed with this statement.
- Although women ask less for support, men feel less confident than women that they can talk about care responsibilities with their manager (18%).
- Working carers from a Multiple/Mixed ethnic background (17%) and from a Black British / Other Black background (22%) felt less confident that they could talk with their managers about their care responsibilities.
- More than half of respondents suffered from problems linked to their mental and physical health.

INFOGRAPHIC

The case study conducted within the MoJ aimed to understand what constitutes good workplace support for carers in employment, and to what extent this support is accessible to all MoJ employees (who are also UK civil servants).

CARE SITUATION

Many respondents (49%) had been caring for over 5 years



Almost half (47%) of working carers had provided care for 20 or more hours a week



Nearly half (45%) of working carers lived with the person they care for



More men (58%) lived with the person they care for than women



More women (28%) provided care for 10 years or more



AWARENESS AND ACCESS TO SUPPORT

"Flexi-time", "reduced hours", "carer special leave for emergency" and "compressed hours" were the forms of support most likely to be requested



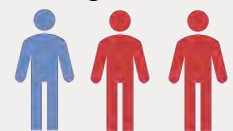
"Carer special leave for family emergency" was more likely to be used than "carer special leave for medical appointments"



Fewer women than men ask for support



Working carers from a Black background are less likely to ask for support in comparison to participants from other ethnic backgrounds



CONFIDENCE AND WELLBEING

Only 32% of participants felt confident about their future situation



16% weren't confident that they could talk about their care responsibilities with their manager



Men felt less confident than women that they could talk about care responsibilities with their manager



Those from a Multiple/ Mixed ethnic or Black British / Black background felt less confident that they can talk with managers about care responsibilities



More than half suffered from problems linked to their mental and physical health



Caring situation of survey respondents

This part of the report looks at participants' circumstances of care: how long they have been providing care, and the number of hours of care provided per week by job grade, gender, ethnicity and co-residence with the person cared for.

Almost half the working carers who responded to this question had been caring for over 5 years (49%). Some had been providing care for between 6 months and 5 years (40%). A few (5%) had been caring for less than 6 months.

Figure 1. How long respondents have been providing care in MoJ (%)

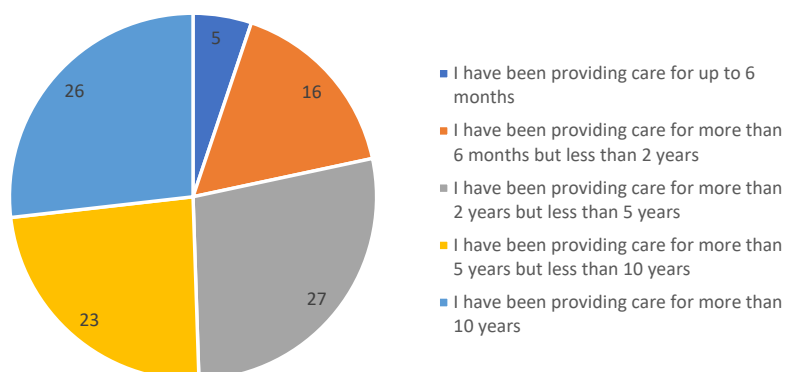


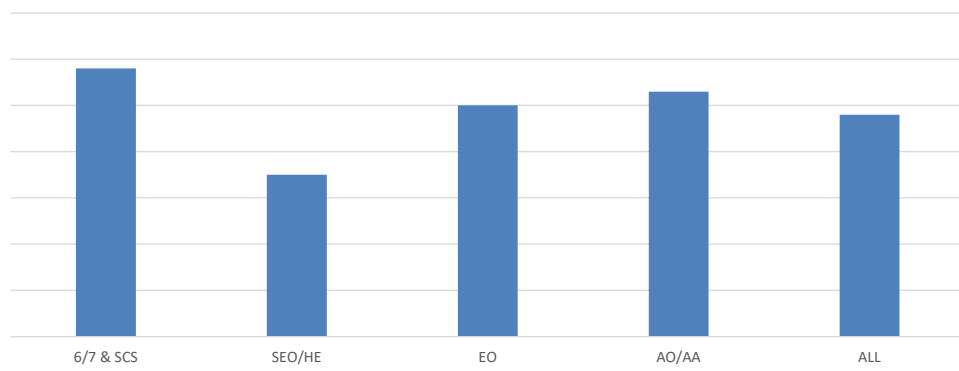
Table 1: How long respondents have been providing care, for each job grade (%)

Circumstances of respondents; I have been providing care for:	6/7 & SCS	SEO/HE	EO	AO/AA	ALL
<i>N=number of participants</i>	<i>N=19</i>	<i>N=66</i>	<i>N=74</i>	<i>N=136</i>	<i>Nn=320</i>
Up to 6 months	0	9	9	0	5
More than 6 months but less than 2 years	21	14	14	20	16
More than 2 years but less than 5 years	26	24	18	26	27
More than 5 years but less than 10 years	26	24	18	26	23
For more than 10 years	26	26	27	27	27

A similar percentage of working carers across all job grades provided care for more than 10 years.

Caring situation of survey respondents

Figure 2: Respondents living with the person cared for, by job grade (%)



Nearly half of working carers who responded lived with the person they care for (48%). More than half of respondents on grades 6/7 & SCS and AO/AA lived with the person cared for.

Figure 3: Number of hours of care provided per week by respondents (%)

Almost half (47%) of working carers who responded to this question provided care for 20 or more hours a week. 53% of working carers at AO/AA level who responded provided care for 20 or more hours a week. Working carers at other grades also provided care for 20 or more hours per week: 6/7 & SCS (49%), EO (45%) and SEO/HEO (34%).

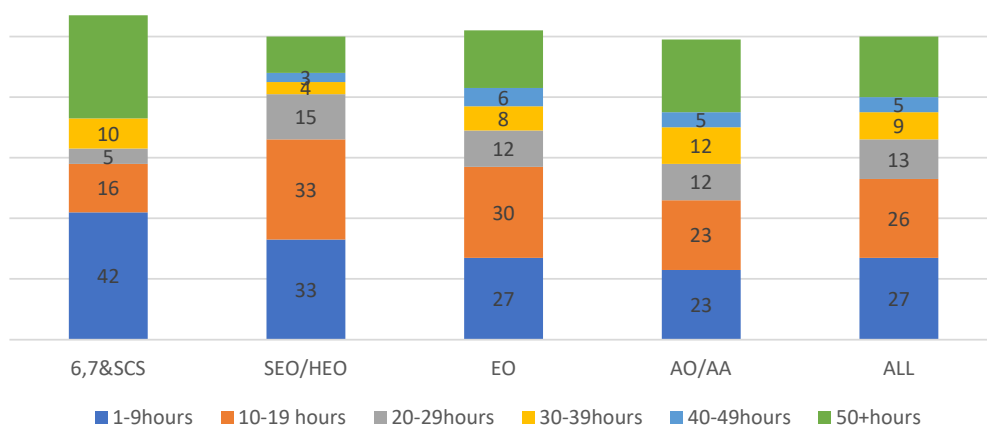


Table 2: How long respondents have been providing care, by gender (%)

Circumstances of respondents; I have been providing care for:	Women	Men
<i>N=number of participants</i>	<i>N= 235</i>	<i>N= 57</i>
Up to 6 months	5	4
More than 6 months but less than 2 years	18	14
More than 2 years but less than 5 years	27	30
More than 5 years but less than 10 years	23	30
For more than 10 years	28	23

More women provided care for longer than 10 years (28%).

Caring situation of survey respondents

More men lived with the person they care for than women (58%).

Figure 4: Respondents living with the person cared for, by gender (%)

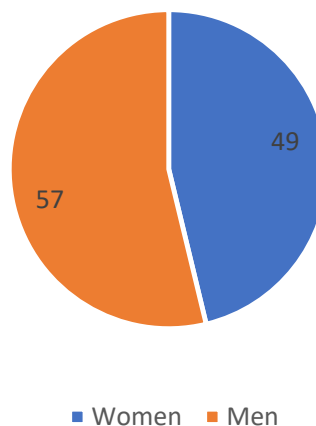


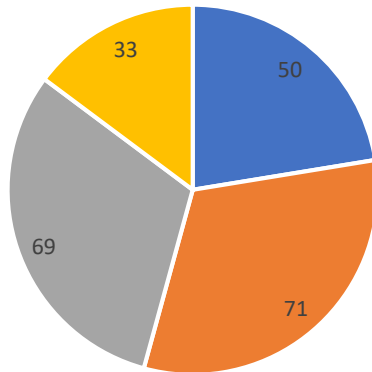
Table 3: How long respondents had been providing care, by ethnicity (%)

Circumstances of respondents I have been providing care for:	White British/ Other White background	Mixed/ Multiple ethnic groups	Asian British/ Other Asian background	Black British/ Other Black background
<i>N=number of participants</i>	<i>N= 252</i>	<i>N= 7</i>	<i>N= 16</i>	<i>N=9</i>
Up to 6 months	4	0	0	11
More than 6 months but less than 2 years	16	14	25	11
More than 2 years but less than 5 years	30	43	6	0
More than 5 years but less than 10 years	24	29	37	22
More than 10 years	26	14	31	44

Working carers from an Asian British/Other Asian background (31%) and working carers from a Black British/Other Black background (44%) were more likely than respondents from other ethnic groups to have provided care for more than 10 years.

Caring situation of survey respondents

Figure 5: Respondents living with the person cared for, by ethnicity (%)



- White British/ Other White background
- Mixed/Multiple ethnic groups
- Asian British/Other Asian background
- Black British/Other Black background

Ethnicity is based on survey respondents' self identification choice.

Working carers from a Mixed/Multiple ethnic group (71%) and working carers from an Asian British/Other Asian background (69%) who responded were more likely than any other ethnic groups to live with the person cared for.

Respondents' work situation and awareness of working carer support policies

This part of the report looks at participants' working circumstances in terms of their employment status; awareness of the policies and support at MoJ; use of the policies by job grade, gender, ethnicity and co-residence with the person cared for; and help received because of the policies and confidence to talk with their manager about care responsibilities.

Figure 6: Employment status of respondents (%)



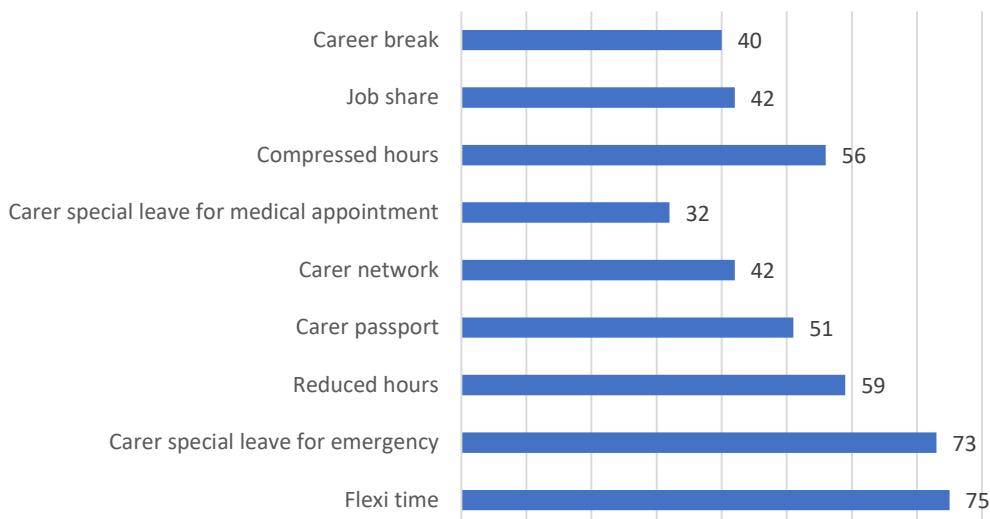
Table 4: Employment status of respondents by co-residence with the person cared for (%)

Job status	Participants living with the person cared for	Participants not living with the person cared for
<i>N=number of participants</i>	<i>N= 155</i>	<i>N= 156</i>
I work full-time	64	70
I work part-time	34	29

Respondents at AO/AA level were more likely than other respondents to be working part-time. Respondents living with the person cared for were slightly more likely to be working part-time and less likely to be working full-time.

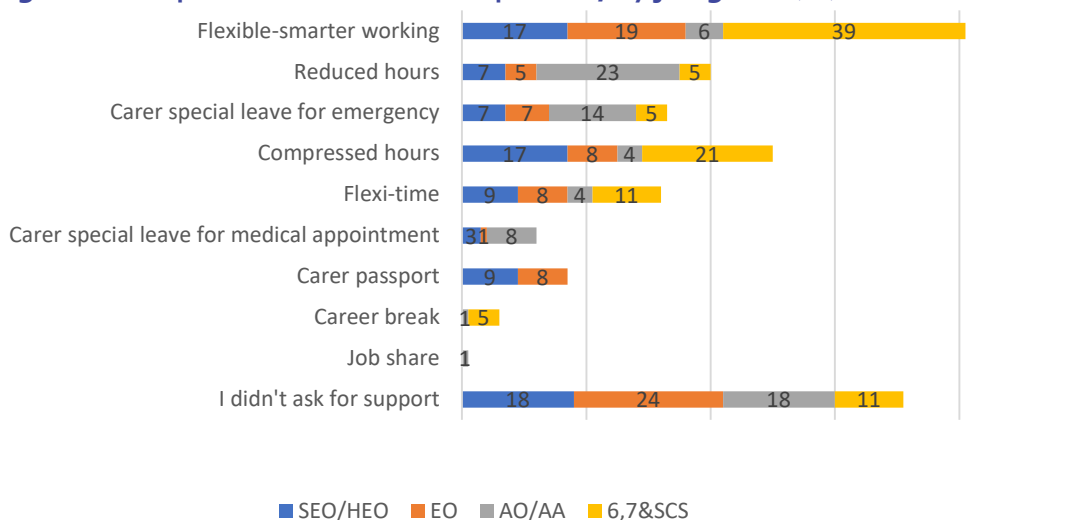
Respondents' work situation and awareness of working carer support policies

Figure 7: Policies and supports for working carers that respondents are aware of (%)



Working carers were most aware of the “MoJ’s flexitime” (75%), “special leave for emergencies” (73%), “reduced” (59%) and “compressed hours” (56%), and “carer passport” (51%) policies. They were less likely to be aware of the “job share” (43%), “carer network” (42%), “career break” (40%) and “carer special leave for medical appointments” (32%) policies. “Carer special leave for family emergency” was much more likely to be used by working carers than “carer special leave for medical appointments”.

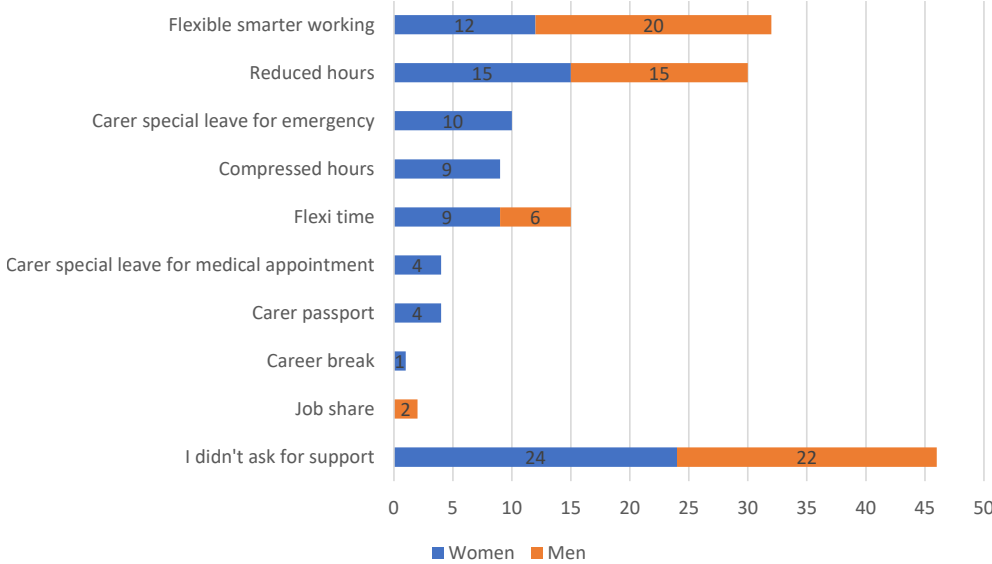
Figure 8: Respondents' use of MoJ's policies, by job grade (%)



- “Flexible-smarter working” and “Flexi time” were most likely to be used by respondents on 6/7 & SCS (39% and 11%), while “reduced hours” were most likely used by respondents at AO/AA level (23%).
- Respondents at AO/AA level were also most likely to use “Carer special leave for medical leave” (8%); none of them used the “Carer passport”. Increasing awareness about the Carer passport among staff at AO/AA level could potentially help them avoid reducing their working hours.
- Staff at EO level were the least likely to ask for support (24%).

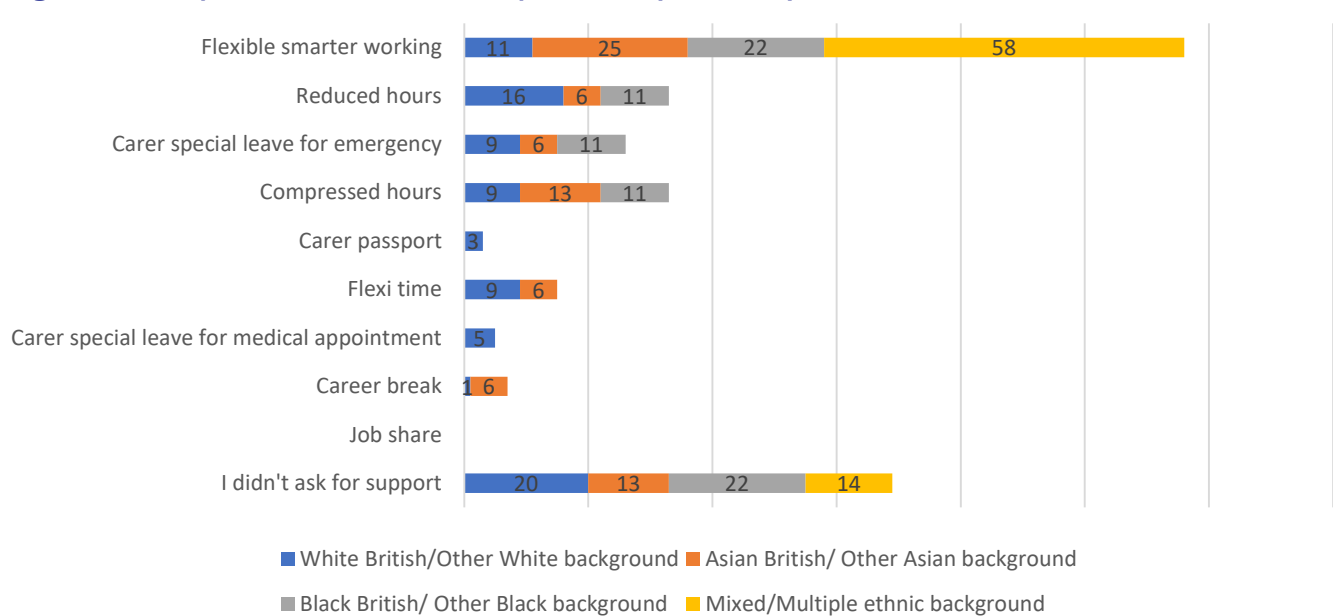
Respondents' work situation and awareness of working carer support policies

Figure 9: Respondents' use of MoJ's policies, by gender (%)



“Flexible smarter working” was mostly used by men while “reduced hours” was mostly used by women. “Compressed hours”, “carer special leave for medical appointment”, “carer passport”, “career break’s policies” were also used by women but not men. The findings also show that fewer women asked for support than men.

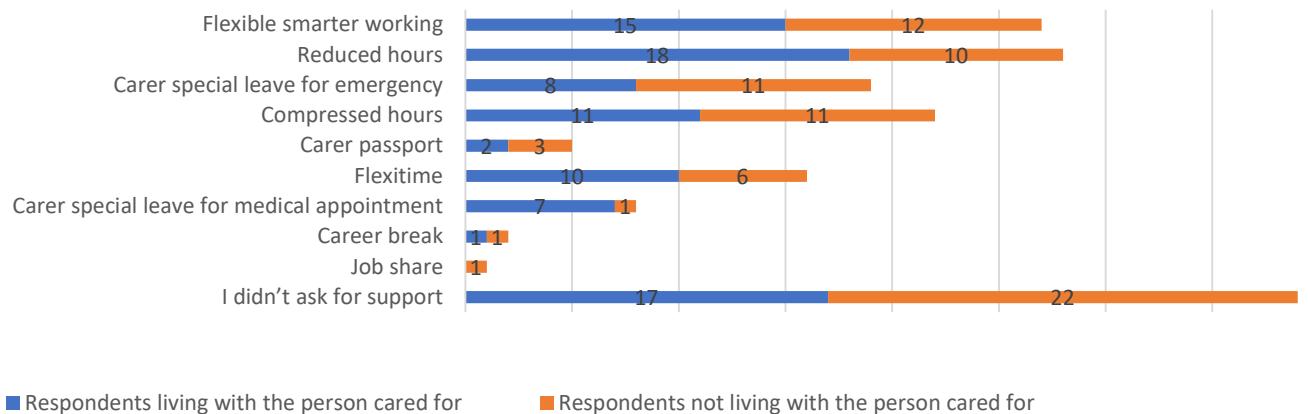
Figure 10: Respondents' use of MoJ's policies, by ethnicity (%)



“Carer special leave for medical appointment” was only requested by working carers from a White background. “Reduced hours’ policies” were the most used by working carers from a White background while “flexible smarter working” policies were mostly used by working carers from other ethnic groups. Working carers from a Black background were less likely to ask for support than other ethnic groups.

Respondents' work situation and awareness of working carer support policies

Figure 11: Respondents' use of MoJ's policies, by co-residence with the person cared for (%)



The most used policy by working carers living with the person cared for is “reduced hours”. Others mostly used “flexible smarter working”. Working carers living with the person cared for were more likely to use the “carer special leave for medical appointment” than working carers not living with the person cared for. Overall, working carers living with the person cared for were more likely to ask for support, in comparison with working carers not living with the person cared for.

Table 5: Help from MoJ's policies, by job grade (%)

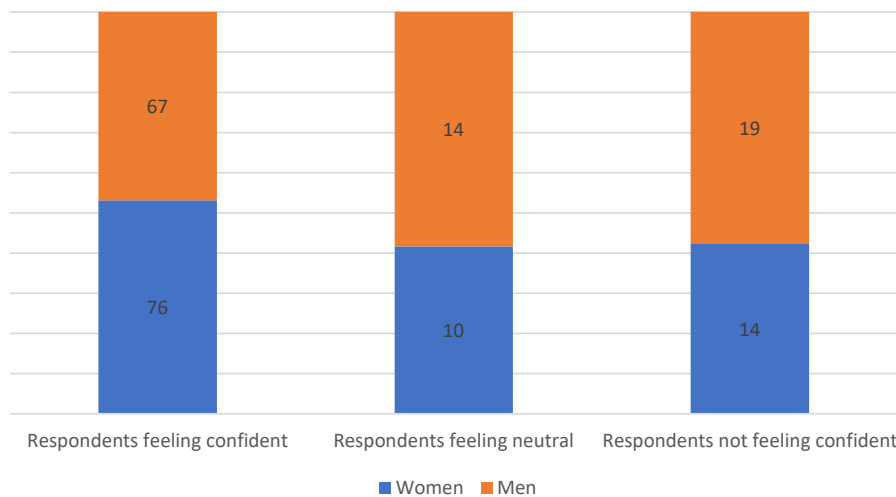
The policies and supports help me ...	6/7 & SCS	SEO HEO	EO	AO/AA	ALL
N=number of participants	N= 19	N= 66	N= 74	N= 136	N=260¹
A lot	63	44	27	43	42
A little	5	21	21	20	23
Not at all	10	1	5	9	8

Most participants (65%) found that the policies helped them either a lot (42%) or a little (23%). Only a few (8%) said the policies did not help them at all.

¹ In table 5, only those participants who had requested support are included.

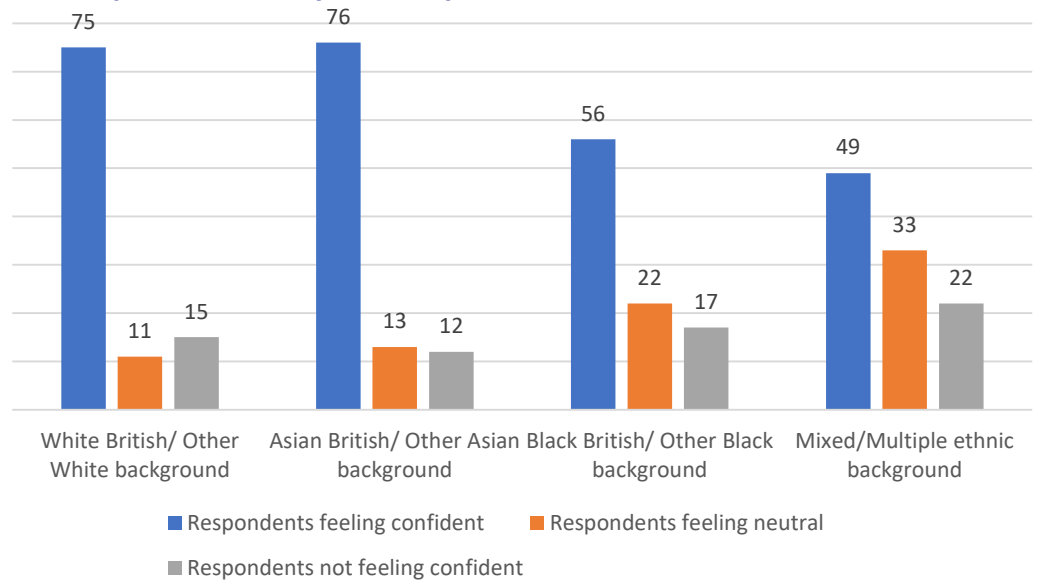
Respondents' work situation and awareness of working carer support policies

Figure 12: Respondents' confidence to talk with their manager about their care responsibilities, by gender (%)



When asked whether they are confident in talking to their managers about their care responsibilities, fewer men (67%) report feeling confident than women (76%). Men could face stigma due to assumptions about gender roles when trying to disclose their care responsibilities with their managers.

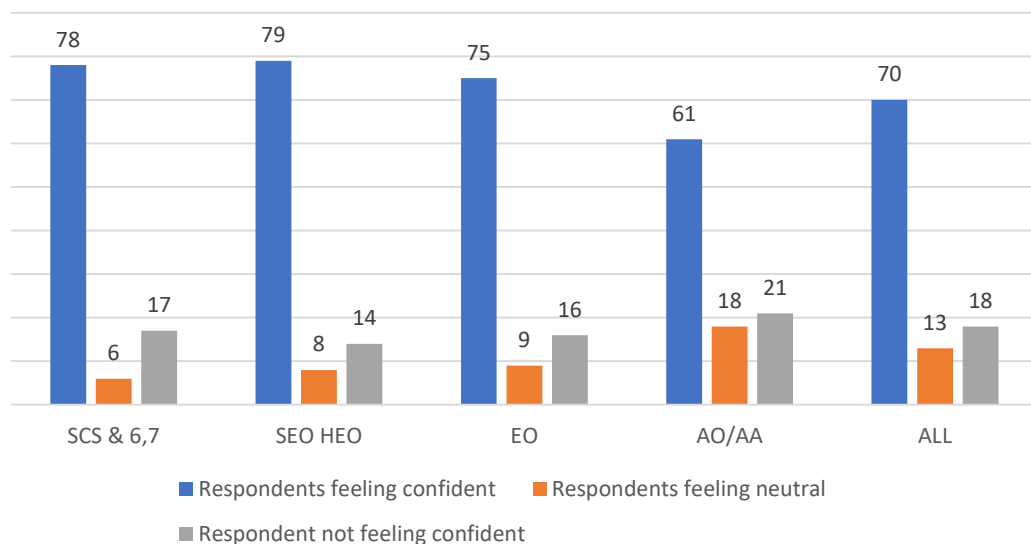
Figure 13: Respondents' confidence to talk with their manager about their care responsibilities, by ethnicity (%)



Participants from Multiple/Mixed ethnic background (17%) and from a Black British/Other Black background (22%) were less confident that they could talk with their managers about their care responsibilities.

Respondents' work situation and awareness of working carer support policies

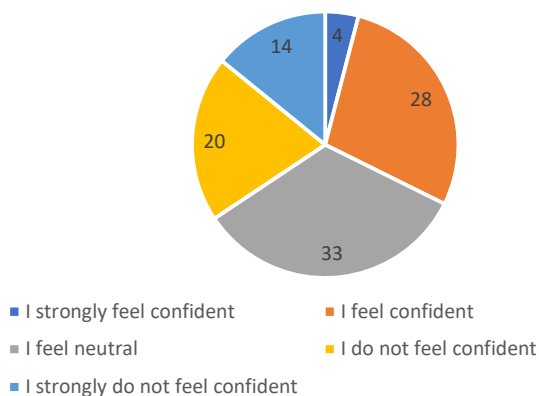
Figure 14: Respondents' confidence to talk with their manager about their care responsibilities, by job grade (%)



Most participants agreed that they felt confident to talk with their managers about their care responsibilities, however 18% disagreed with this statement, including 21% among participants at AO/AA grade level.

Although 32% of participants felt confident about their future, 34% did not agree with this statement, and 33% felt neutral about their situation.

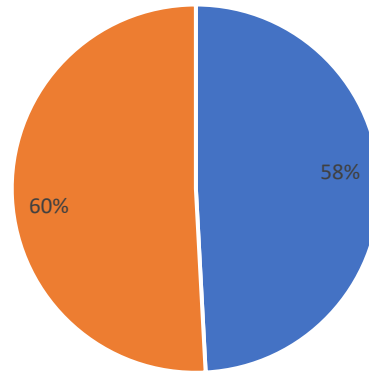
Figure 15: Respondent's overall level of confidence about their care and work situation (%)



Respondents' work situation and awareness of working carer support policies

The findings indicate that more than half of respondents who participated in the survey suffered from problems with their mental and physical health.

Figure 16: Respondents' mental and physical health (%)



- I have some problems with my own mental health (e.g. stress, fear, gloominess, depression, concern about the future)
- I have some problems with my own physical health (e.g. more often sick, tiredness, physical stress)

Findings from the interviews²

The case study also included 17 interviews with MoJ staff - a mix of managers, working carers and union representatives. The interviews aimed to gather information about working carers' experiences, the support they needed, and any obstacles to getting this support.

Some interviewees were unaware of the "carer special leave" policy, **and said it was hard to know where to find support online.**

"I didn't realise that there's the carer special leave to attend medical appointments out there. I didn't know anything about that and that came through the questionnaire that I completed that led to this today. I didn't know anything about that, and it's alright, if you've got the time to go through. Nothing's straightforward on that website. To me, there should be like a hub of information that you could just go to and everything you need to [know] about, no matter who you're caring for."

Joe, employee

Some interviewees expressed concerns about the limited amount of time off allowed within the "special carer leave for medical appointments" policy and **said that it was not sufficient to support them with their own health issues and their care responsibilities:**

"It is just difficult when you can get time for your own appointments but can't get time for mum's appointments. So, I have to use my flexi time for those appointments. And I find that difficult because it's difficult to pay back the flexi, if you're not always managing to get in early. I think they could be a bit more flexible on that side of things really. People with children get time to take their children to appointments."

Laura, employee

Some interviewees expressed concerns about insufficient support from line managers. **A lack of training for managers, some felt, could prevent carers from using "carer special leave":**

"And I asked for two days special leave to care for my mother and to be able to take her to hospital to visit him {my dad}. And they were refused. I can't remember many more stressful moments in my life than having to go through all this procedure to ask for two days off to support someone that had raised me as a child [...] and was having major, major cancer surgery."

Janine, employee

² Interviewees have been given anonymised names.

Findings from the interviews

Trained managers were seen as essential, as they could help carers by discussing and finding with them the best way to support their working and caring lives.

“When I came back, I explained that our life had turned upside down. I didn’t know how to control this situation or help. When I came back to work, we had a meeting and we agreed that, due to my personal circumstances, it would be easier for me to finish early so I can have some time, not only to then assist them with the hospital and do all that, but have some of my own time, you know, if I wanted to sit down for five minutes.”

Jane, employee

Some interviewees indicated **that they were made to feel guilty by their co-workers when trying to access support, and/or felt their situation as a carer was disregarded**:

“The guilt is massive, comments like ‘you are never here’, or ‘your life is one big holiday’, leave you unwilling to talk or share.”

Robert, employee

Participants also talked about the importance they attached to paid care leave. **One participant explained that having to take unpaid time off (rather than having paid care leave) could lead to financial distress**:

“When I take unpaid leave, something has to give. So, for instance when I took time off for my mum, not too long ago, I had to take three days of unpaid leave to support her while my stepfather was in hospital again. Well, that meant, when we were together as a family, me and my children and my wife, there was a little bit less we could do on a weekend because, you know, I had less money coming in at the end of the month.”

Sean, employee

Conclusion:

Why supporting carers at work is important

The survey showed that the MoJ's policies for working carers had a positive impact for carers and supported many of them to combine work and care more effectively. Over half of respondents found the policies helpful. The 'care leave for emergencies' and 'care leave for medical appointments' were however less used than the "flexi-time", "compressed hours" and "reduced hours" policies. Moreover, there were some significant differences in terms of access to support for participants concerning their job grades, gender, ethnicity and situations of care. For example, in terms of job grade, employees at AO/AA level feel less confident to talk with their managers about their caring situation and they were least likely to request a "carer passport". In terms of gender differences, men feel less confident than women that they could talk about care responsibilities with their managers, but fewer women asked for support. Participants from a BAME background were also less likely to request "carer special leave" than participants from a White background. These findings are crucial, as they provide a better understanding of the obstacles carers may face when requesting support for their care responsibilities.

Interviewees' stories equally shine a light on their experiences as working carers in MoJ. Some said they were unclear about where they could find information and support online, which could explain why policies such as "care leave for emergencies" or "care leave for medical appointments" were the least used by the survey participants. Others felt their caring situation had been disregarded by their line manager or other co-workers. A majority of interviewees felt it was essential for managers to receive more training about working carers. They also pointed out that taking unpaid time off (rather than being able to take paid care leave) could cause financial distress, which could have an impact on their mental and physical health and level of confidence about the future.

Key elements and recommendations in supporting working carers at MOJ

The case study findings suggest that the following are crucial in supporting working carers within MoJ:

- Ensure all managers receive training in relevant issues about working carers.
- Raise awareness among all staff about policies for employees with caring responsibilities, especially staff at AO/AA level.
- Help co-workers understand how caring responsibilities may affect their colleagues.
- Increase awareness of situations in which paid care leave can be taken and "carer passport" requested, especially for participants from BAME backgrounds and staff at AO/AA level.
- Extend paid carer leave for medical appointments to allow carers to take care of their own mental and physical health too.

About the research

Sustainable Care

The *Sustainable Care: connecting people and systems* programme is a multi-disciplinary Economic and Social Research Council-funded research programme (2017-2021) exploring how care arrangements, currently 'in crisis' in parts of the UK, can be made sustainable and deliver wellbeing outcomes.

It aims to support policy and practice actors and scholars to conceptualise sustainability in care as an issue of rights, values, ethics and justice, as well as of resource distribution.

Sustainable Care is a collaborative research programme, bringing together academics from eight universities and Carers UK, and works with an extended network of national and international policy, practice and academic partners.

About the report

The report was written by Camille Allard.
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