



**Victorian Gender Equality Strategy
Consultation Paper**

Carers Victoria

Submission 18 March 2016

About Carers Victoria

Carers Victoria is the state-wide peak organisation representing people who provide unpaid care. We represent more than 700,000 family carers across Victoria including people caring for ageing parents, children with disabilities, and partners with chronic or mental illness.

Carers Victoria is a member of the National Network of Carers Associations, and the Victorian Carer Services Network. Carers Victoria is a non-profit association which relies on public and private sector support to fulfil its mission with and on behalf of carers.

Carers Victoria is a membership based organisation. Our members are primarily family carers, who play an important role in informing our work, contributing to advocacy and strategic aims, and distributing information more widely to other carers.

This submission was prepared by Carers Victoria's Policy Team.

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Recommendations

Carers Victoria presents the following recommendations to the Victorian Government for consideration:

Recommendation: The Victorian Gender Equality Strategy recognises female carers¹ as a group who experience additional disadvantage compared to females who do not have a caring role. In addition, the Strategy recognises the specific needs and experiences of female carers from groups who can experience additional disadvantage² and female carers from diverse communities, backgrounds, sexualities, gender identities and body experiences.

Recommendation: The Victorian Government develop a whole-of-government state-wide Victorian Carer Strategy through genuine consultation, collaboration and co-design with relevant stakeholders and specific carer communities.

Recommendation: The Victorian Government provide adequate funding to support organisational capacity building for genuine and appropriate consultation with all carers, including carers from groups who can experience additional disadvantage, and carers from diverse communities, backgrounds, sexualities, gender identities and body experiences.

Recommendation: The Victorian Government invest in carer identification, tailored information and advocacy services to support all carers, in particular female carers, along with carers from groups who can experience additional disadvantage, and carers from diverse communities, backgrounds, sexualities, gender identities and body experiences.

Recommendation: The Victorian Government continues to support Carers Victoria's carer supports and programs.

¹ The terms 'carers', 'family carers' and 'caring family/ies' used in this submission includes the diverse range of people in care relationships, including carers and people receiving care in same-sex families, 'families of choice', friends and others who provide unpaid care.

² Including Aboriginal and Torres Strait Islander carers, carers from culturally and linguistically diverse communities; young carers; carers from rural and remote areas; and lesbian, gay, bisexual, trans/gender diverse, intersex and queer (LGBTIQ) carers.

Introduction

Carers Victoria welcomes the opportunity to provide input to the Victorian Government in response to the consultation paper 'Gender Equality Strategy' (the consultation paper) released in January 2016.

The consultation paper seeks input from the community and stakeholders on the challenges and priorities for women in Victoria, and encourages views on how best gender equality can be achieved.

Background – carers and the role of Carers Victoria

Carers provide unpaid care and support to a family member or friend needing assistance with a disability, mental illness, chronic health condition or age-related frailty. Carers come from all walks of life, across all age groups and all cultures. Not all carers identify themselves as carers, and may instead identify themselves in terms of their family and friend relationships.

There are an estimated 773,400 informal carers in Victoria, which is 13.6 per cent of the Victorian population. Of these, 217,800 (3.8 per cent of the Victorian population) are primary carers, defined as providing the majority of ongoing care to the person requiring assistance. Women are more likely to be carers than men, with 70 per cent of primary carers being women³.

Carers Victoria supports caring families through information, online and face to face training and education programs, respite support, counselling and systemic advocacy. Carers Victoria had 28,545 interactions with carers through our carer advisory line, counselling and other support services during 2013-14.

The cost of providing care

In a report prepared for Carers Australia by Deloitte Access Economics, it was estimated that in 2015 informal carers in the community provided 1.9 billion hours of care in Australia. Deloitte Access Economics conservatively estimates it would cost \$60.3 billion per year if all informal community care was delivered through formal care systems⁴.

Caring can have negative effects on the carers' own financial situation, retirement security, physical and emotional health, housing arrangements, social networks and career. The impact is particularly severe for carers of people who have complex chronic health conditions and both functional and cognitive impairment.

³ ABS (2012) Survey of Disability, Ageing and Carers, Cat. No. 4430.0.

⁴ Deloitte Access Economics for Carers Australia (2015) The Economic Value of Informal Care in Australia in 2015.

The impact of caring

Caring can have profound social, physical, emotional and financial effects on carers and their families and/or other support people. Carers are more likely to be in the bottom two income quartiles of equivalised gross household income compared to non-carers⁵, and can experience poorer physical and mental health^{6,7}.

Carers are less likely to be employed in paid work compared to people who do not have a caring role, and those carers who are employed are more likely to be working part-time. Out of all the carers in Victoria, 52.4 per cent combine their caring role with full-time or part-time work. Nearly one-quarter of primary carers who are employed spend on average 40 hours or more a week providing care⁸. Research by the Australian Institute of Family Studies using longitudinal data from the Housing Income and Labour Dynamics in Australia (HILDA) found that approximately 3-4 per cent of Australian employees become carers each year and of these around 10 per cent left the workforce⁹.

International and Australian research suggests that carers can be significantly impacted by associated 'indirect' social costs, such as reduced employment opportunities, lack of time for leisure and other activities and declining general health¹⁰. In addition, 'direct costs' of having caring responsibilities include a reduced income, the subsequent lack of financial security and an increase in living, medical and transport expenses¹¹.

⁵ ABS (2013) *2012 Survey of Disability, Ageing and Carers Australia*, Cat. No. 4430.0

⁶ Cummins, R., and Hughes, J. (2007) *The Wellbeing of Australians: Carer Health and Wellbeing, Australian Unity Wellbeing Index Survey 17.1*, Deakin University, Geelong

⁷ Edwards, B., Higgins, D., Gray, M., Zmijewski, N., Kingston, M. (2008) *The nature and impact of caring for family members with a disability in Australia*, Australian Institute of Family Studies, Melbourne

⁸ ABS (2013) *2012 Survey of Disability, Ageing and Carers Australia*, Cat. No. 4430.0

⁹ Hill, T., Thomson, C., Bittman, M., and Griffiths, M. (2008) 'What kind of jobs help carers combine care and employment?' *Family Matters*, No. 80

¹⁰ SPRC, 2011, *The costs of caring and the living standards of carers*, http://webcache.googleusercontent.com/search?q=cache:9wQ8xdT1JZoJ:https://www.dss.gov.au/sites/default/files/documents/06_2013/sprp_43.docx+&cd=2&hl=en&ct=clnk&gl=au

¹¹ Cummins, R., and Hughes, J. (2007) *The Wellbeing of Australians: Carer Health and Wellbeing, Australian Unity Wellbeing Index Survey 17.1*, Deakin University, Geelong

Carers Victoria – responding to the consultation paper

Gender equality and disadvantage

The consultation paper requests input on the challenges and priorities for women in Victoria, and encourages views on how best gender equality can be achieved. Carers Victoria believes achieving gender equality requires significant improvement in the outcomes for female carers. Improving outcomes for female carers will require concerted effort to address the additional barriers they face across a range of life domains, including economic, social, financial and emotional domains, due to their caring role and responsibilities.

In addition, Aboriginal and Torres Strait Islander carers; carers from culturally and linguistically diverse communities; young carers; carers from rural and regional areas and lesbian, gay, bisexual, trans/gender diverse, intersex and queer (LGBTIQ) carers can all experience additional disadvantage and vulnerability resulting in poor outcomes across a range of life domains^{12, 13, 14}. Therefore, achieving gender equality for female carers will require concerted effort to meet the specific needs and experiences of carers from groups experiencing disadvantage and carers from diverse communities, backgrounds, gender identities and body experiences.

While acknowledging the requirement for significant improvement in the outcomes for women to achieve greater gender equality, we would also encourage the Victorian Government to consider gender beyond the male/female binary to encompass various expressions of gender identity; gender expression; biological sex; and sexual and romantic attraction. As gender diversity is not captured in large data sets, the disparity across a range of life domains for gender diverse groups is not always reported or addressed. However, it would be expected that LGBTIQ carers would experience greater disparity across a range of life domains. Further research, including improved data capture of the experience of LGBTIQ carers, along with carers from groups that can experience additional disadvantage, would assist to develop the evidence base.

The aim of Carers Victoria is to provide services that are respectful and inclusive of all carers. We recognise that every caring situation is unique and that a person's health and wellbeing depends on having their specific needs acknowledged. A lack of recognition of a person's experience, identity, relationships and caring role can add particular stress to an already challenging role.

¹² Cass, B., Smyth, C., Hill, T., Blaxland, M., and Hamilton, M. (2009) *Young carers in Australia: understanding the advantages and disadvantages of their care giving*, Social Policy Research Paper No. 38, FAHCSIA.

¹³ Hill, T., Thomson, C., Cass, B. (2011) *The costs of caring and living standards of carers*, Social Policy Research Paper No. 43, FAHCSIA.

¹⁴ Val's Café (2015) An extra degree of difficulty.

The gendered nature of caring

As described in the introduction to this submission, caring can have profound physical, social, emotional and financial effects for all carers and their families, regardless of their gender. However, females are more likely to take on caring responsibilities, more likely to have a caring role during their prime working years, are less likely to have high levels of educational attainment, are likely to have a disability themselves, are less likely to be employed and are less likely to have savings for retirement.

This section of the submission concentrates on presenting data on the gendered nature of caring by outlining the differences between male and female carers. These categories will be used as the 2012 ABS Survey of Disability, Ageing and Carers collects data for the demographic variable of 'sex' using the categories of male and female.

The intention of this section of the submission is to demonstrate female carers as a group experience additional disadvantage across a range of life domains, and this should be recognised and reflected in the Victorian Government Gender Equality Strategy.

A whole-of-government Victorian Carer Strategy, along with funding to build organisational capacity to enable genuine consultation with all carers, combined with carer identification, information and advocacy and adequate carer support services are all required to ensure all carers, but in particular female carers; carers from groups that can experience additional disadvantage; and carers from diverse communities, backgrounds, gender identities and body experiences can enjoy good health; social and economic wellbeing; and participate in family, social and community life, employment and education. All of these factors will lead to the achievement of greater gender equality in Victoria.

Female carers experience social and economic disadvantage

Women are more likely to take on caring responsibilities

In 2012, 55.9 per cent of all carers in Victoria were female. However, when considering primary carers (those who provide the most substantial amount of care to another individual) the gender disparity is starker, as around 71 per cent of all primary carers in Victoria are female.

Around 15 per cent of all women in Victoria (432,100) were carers in 2012, and 5.4 per cent (155,100) were primary carers. This compares to 12.1 per cent of men in Victoria (341,200), with 2.3 per cent of men (65,100) primary carers.

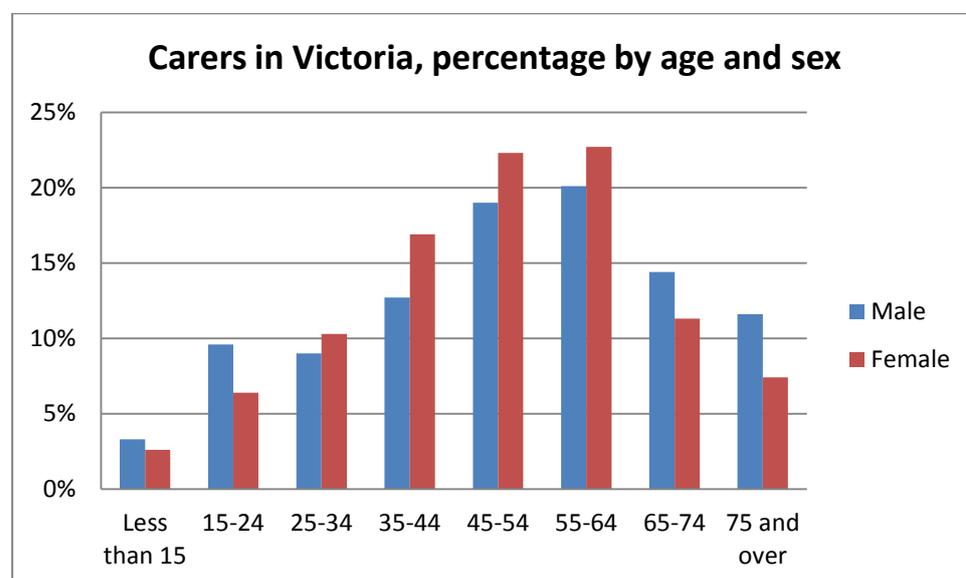
In Victoria, female carers are more likely to be recipients of the Carer Payment (70 per cent) and the Carer Allowance (73 per cent) than male carers¹⁵.

Caring during the prime working and saving years

Around 45 per cent of all female carers in Victoria are between the prime working ages of 45 and 64 years, compared to 39 per cent of male carers. Male carers are more likely to take on a caring role later in life, usually after retirement. This reduces the capacity of female carers in their prime working years when they have the greatest earning potential to accumulate financial assets, including a reduced capacity to contribute to superannuation. **Table 1** shows the difference in the distribution of male and female carers by age groups.

¹⁵ Carers Victoria analysis of Department of Social Services data (June 2015) accessed at data.gov.au

Table 1: Distribution of carers in Victoria by age and sex



Source: Carers Victoria analysis of 2012 ABS Survey of Disability, Ageing and Carers, Victorian data tables, accessed at abs.gov.au.

Female carers and income

As presented in **Table 2**, female carers are more likely to be employed in part-time rather than full-time work compared to male carers, and are more likely to have their main source of income coming from government pension and allowances rather than wages and salary, in comparison to male carers. Female carers also have a lower median gross weekly personal income compared to male carers.

Table 2: Selected characteristics, carers in Victoria, by sex, 2012 (per cent)

	Male carers	Female carers
Employment status		
Full-time	43.8%	20.5%
Part-time	12.7%	27.7%
Source of income		
Wages or salary	43.8%	20.5%
Government pension or allowances	12.7%	27.7%
Weekly income amount		
Median gross weekly personal income	\$500	\$422

Source: Carers Victoria analysis of 2012 ABS Survey of Disability, Ageing and Carers, Victorian data tables, accessed at abs.gov.au.

Caring can be intense and protracted for female carers

Female carers are more likely than male carers to provide a significant level of care, with 43 per cent of female carers in Australia providing over 40 hours of care per week, compared to 34 per cent of male carers¹⁶.

Carers who provide a significant amount of care often have a caring role for extended periods of time, with over one-third (34.1 per cent) of primary carers having provided care for 10 years or more¹⁷.

Unpaid carers who have been caring for a substantial period of time can be left with little relevant employment experience or education and training to allow them to transition into the workforce when their caring role ceases or is reduced. Many carers are therefore on income support for long periods of time.

Females involuntarily retire to take on caring roles

The Productivity Commission¹⁸ estimated just under one half of all Australians who retired between the ages of 45 and 70 did so involuntarily. The dominant factor for individuals who retire involuntarily is either their own ill health or that of a spouse or family member. For males, it is largely their own ill health that drives the decision to retire, while for females the most important driver is the need to care for a spouse or family member. Those who involuntarily retire generally have lower levels of accumulated assets than those who retire voluntarily, and have less scope to change their behaviour in response to policy changes.

¹⁶ ABS (2013) Survey of Disability, Ageing and Carers, accessed at abs.gov.au.

¹⁷ Ibid.

¹⁸ Productivity Commission (2015) Superannuation Policy for Post-Retirement www.pc.gov.au/research/completed/superannuation-post-retirement

What is needed

The Victorian Gender Equality Strategy to recognise female carers as a disadvantaged group

As presented in this submission, caring can have profound social, physical, emotional and financial effects for all carers and their families regardless of their gender. However, females are more likely to take on caring responsibilities and the often intense and protracted nature of the caring role can leave female carers without income, savings or secure housing in the lead up to retirement. Female carers need to be recognised as a group who experience additional disadvantage as caring affects all areas of their lives and can lead to poor outcomes across all life domains.

Recommendation: The Victorian Gender Equality Strategy recognises female carers as a group experiencing additional disadvantage compared to females who do not have a caring role, and further recognises the specific needs and experiences of carers from groups who experience additional disadvantage groups and carers from diverse communities, backgrounds, sexualities, gender identities and body experiences.

A whole-of-government state-wide Victorian Carer Strategy

Carers Victoria believes there is an immediate need for the Victorian Government to develop a whole-of-government state-wide Victorian Carer Strategy to ensure all carers are respected and valued, while having the same rights, choices and opportunities as other members of the community.

Recommendation: The Victorian Government develops a whole-of-government state-wide Victorian Carer Strategy through genuine consultation, collaboration and co-design with relevant stakeholders and specific carer communities.

Appropriate funding for organisational capacity building to allow for genuine consultation with all carers

Carers Victoria believes in consultation processes undertaken through the principles of social inclusion, co-design and transparency. To enact these principles Carers Victoria requires appropriate funding to build organisational capacity to allow for genuine consultation with carers from disadvantaged groups, and carers from diverse communities, ages, backgrounds, sexualities and genders/body experience.

Recommendation: The Victorian Government provides adequate funding to support organisational capacity building for genuine and appropriate consultation with all carers, including carers from groups experiencing disadvantage and carers from diverse communities, backgrounds, sexualities, gender identities and body experiences.

Investment in carer identification, tailored information and advocacy

Many female carers will not be accessing support and services available to assist them in their caring role, in part because they may not self-identify, and are reluctant to seek out support for themselves. Carers may not know where to go to access carer specific information and services, or may have changing needs at different points during their caring journey. This can mean many carers are at 'crisis point' when they make contact with Carers Victoria. Investing in carer identification, tailored information and advocacy means female carers can access the right supports at the right time, building their capacity to be effective in their caring role.

Recommendation: The Victorian Government invest in carer identification, tailored information and advocacy services to support all carers, and in particular female carers, carers from groups experiencing disadvantage and carers from diverse communities, backgrounds, sexualities, gender identities and body experiences.

Continued support of carer services, supports and programs

Carers Victoria provides effective, quality services, supports and programs to carers in Victoria, including one to one and group counselling; education and training and respite services. The Carers Victoria's Carer Advisory Line is staffed by tertiary qualified advisors who provide emotional support along with practical information and referrals to services based in the carer's local region. Our advisors also provide up-to-date advice on the latest policy and service reforms to assist carers with understanding the significant changes underway in the mental health, aged care and disability service sectors.

Our comprehensive Victorian-focused carer support program must be maintained so carers can receive the emotional and practical support they need.

Recommendation: The Victorian Government continues to support Carers Victoria's carer services, supports and programs