

Article

Unpaid care by age, sex and deprivation, England and Wales: Census 2021

The provision of unpaid care at country, regional and local authority level and analysis on deprivation with comparisons to Census 2001 and 2011.

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1 . Main points

- On Census Day 2021 (21 March 2021) there were approximately 4.7 million unpaid carers in England and approximately 310,000 unpaid carers in Wales; when age-standardised this equates to 8.9% and 10.5% of the usual resident population, aged 5 years and over, in each country respectively.
- In both England and Wales, the percentage of people providing unpaid care was higher in females than males; in England 10.3% of females provided unpaid care compared with 7.6% of males, in Wales 12.0% of females compared with 9.0% of males provided unpaid care.
- In England, the region with the highest percentage of people providing unpaid care was the North East (10.1%) and the region with the lowest percentage was London (7.8%).
- There were approximately 120,000 young unpaid carers (aged between 5 and 17 years) in England (1.4% of 5- to 17-year-olds) and 8,200 in Wales (1.8% of 5- to 17-year-olds).
- There was a higher percentage of people providing unpaid care in the most deprived areas in England and Wales (10.1% and 11.5% respectively) compared with the least deprived areas, which had the lowest percentage of people providing unpaid care in both England and Wales (8.1% and 9.7%, respectively).

2 . Using the data

Census 2021 asked “Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?”. People were asked to exclude anything they did as part of their paid employment. This is different from the 2011 Census question, which began “Do you look after, or give any help or support to family members, friends, neighbours or others”. Further information about changes to the unpaid care question between 2011 and 2021 can be found in [Section 5: Comparing unpaid care in 2021, 2011 and 2001](#).

Age-standardised and age-specific percentages are used within this article. Age-standardised percentages account for different age structures in populations and are more appropriate than crude percentages when drawing comparisons over time and across areas. The numbers being reported here are the actual number who responded in each category. You can download both age-standardised and non-age-standardised data in the accompanying datasets for [England](#), [England and Wales](#) and [Wales](#). For further information on age-standardised percentages, see our [Age standardising data: What does this mean and why does it matter? blog](#).

We have already published data in our [Unpaid care, England and Wales: Census 2021 bulletin](#). This article builds on this by also analysing age-specific and age-standardised unpaid care percentages split by sex, age, and Index of Multiple Deprivation (IMD).

In England and Wales combined, an estimated 5.0 million usual residents aged 5 years and over provided unpaid care in 2021 (9.0%), a statistically significant decrease from 11.4% in 2011. Potential contributing factors for this change could include:

- coronavirus (COVID-19) guidance on reducing travel and limiting visits to people from other households
- unpaid carers who previously shared caring responsibilities may have taken on all aspects of unpaid care because of rules on household mixing during the pandemic
- there has been an increase in the percentage of people reporting [very good health](#) and a decrease in the percentage of [people that were disabled](#) in 2021 compared with 2011, which could have led to a reduction in the need for unpaid care
- [excess deaths were highest in the older population](#) and peaked at the beginning of 2021, which could have led to a reduction in the need for unpaid care
- changes in the question wording between 2011 and 2021 may have had an impact on the number of people who self-reported as unpaid carers

These differences should be considered when comparing previous Census data (both 2011 and 2001) used within this release.

3 . Unpaid care by age, sex and geography, 2021

In England and Wales there were approximately 3.0 million female unpaid carers (10.4% of the usual resident population aged 5 years and over, age-standardised) and approximately 2.0 million male unpaid carers (7.6% of the usual resident population aged 5 years and over, age-standardised).

Figure 1: In England, the highest percentage of unpaid carers was in individuals aged between 55 and 59 years for females and between 60 and 64 years for males

Age-specific percentages of unpaid carers by age group, sex and number of unpaid care hours provided per week, England, 2021

Notes:

1. Age-specific percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.

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In England, females aged between 55 to 59 years provided the most unpaid care (19.9%), while females aged between 5 to 17 years were least likely to provide unpaid care (1.5%). Males aged between 60 and 64 years were most likely to provide unpaid care (13.0%) and, as with females, those aged between 5 to 17 years were least likely to provide unpaid care (1.2%).

Females were statistically significantly more likely to provide unpaid care than males in every age group up to 75 to 79 years; however, from the age of 80 years onwards, males were statistically significantly more likely to provide unpaid care.

In both females and males, the older age groups provide the highest hours of unpaid care per week. In females, those aged between 75 to 79 years and in males, those aged between 85 to 89 years provided the highest percentage of 50 hours or more of care compared with all other age groups (5.6% and 7.4% for females and males respectively). Males in the age groups 80 to 84 years and 90 years and over were also statistically significantly more likely to provide 50 or more hours of unpaid care than females aged between 75 and 79 years (the age group in females with the highest percentage of 50 or more hours of unpaid care).

Figure 2: In Wales, the highest percentage of unpaid carers was in individuals aged between 55 and 59 years for females and between 55 and 64 years for males

Age-specific percentages of unpaid carers by age group, sex and number of unpaid care hours provided per week, Wales, 2021

Notes:

1. Age-specific percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.

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In Wales, the pattern in females matches that of England where those aged between 55 and 59 years were most likely to provide unpaid care (21.9%), and those aged between 5 and 17 years were least likely to provide unpaid care (2.0%). For males, those aged between 55 to 59 years and 60 to 64 years provided the highest amount of unpaid care (15.0%), while males aged between 5 and 17 years provided the lowest amounts of unpaid care (1.6%).

Females were statistically significantly more likely to provide unpaid care than males in every age group up to 70 to 74 years. There were no significant differences for those aged 75 to 79 years. However, from the age of 80 years onwards, males were statistically significantly more likely to provide unpaid care.

Similar to England, in Wales, the older age groups provided the highest hours of unpaid care. In females, those aged between 75 and 79 years and in males, those aged between 85 and 89 years provided the highest percentage of 50 or more hours of unpaid care compared with all other age groups (6.9% for females and 8.7% for males). Males aged between 80 and 84 years were also statistically significantly more likely to provide 50 or more hours of unpaid care than females aged between 75 to 79 years (the age group in females with the highest percentage providing 50 or more hours of unpaid care).

In both England and Wales, there was a clear pattern in females where there was an increase in the percentage of people providing unpaid care with age until 59 years, after which there was a steady decline in unpaid care provision with age. However, in males, the percentage of people providing unpaid care did not decrease with age to the same extent.

Unpaid care by English regions and Wales

Figure 3: The North East was the English region with the highest percentage of both unpaid carers, and unpaid carers providing 50 or more hours of care per week

Age-standardised percentage of people providing unpaid care by hours of care provided, England and Wales, 2021

Notes:

1. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.
4. For the total age-standardised percentage of unpaid carers in each area, each hour-breakdown percentage can be summed.

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In Wales, there was a higher percentage of unpaid care provision than in all English regions (10.5%). There was also a higher percentage of unpaid carers providing 35 hours or more of care per week (4.8%), which is approximately equivalent to a [typical full-time job](#). This was closely followed in England by the North East where unpaid care provision was 10.1%, and 4.7% were providing 35 hours of care or more per week. London had the lowest percentage of unpaid care provision (7.8%), and both London and the South East had the lowest percentage of unpaid carers providing 35 hours or more of care per week (3.2%).

Unpaid care by local authority

Figure 4: Across local authorities, St Helens had the highest percentage of people providing unpaid care in England, and Neath Port Talbot had the highest percentage of people providing unpaid care in Wales

Interactive map showing the age-standardised percentage of people providing unpaid care by care hours and sex across local authorities in England and Wales, 2021

Notes:

1. A darker colour indicates a higher percentage of people providing unpaid care.
2. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
3. Numbers represent usual residents aged 5 years and over.
4. All figures are individually rounded; totals may not sum exactly because of this rounding.
5. For the total age-standardised percentage of unpaid carers in each local authority, each hour-breakdown percentage can be summed.

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4 . Unpaid care and deprivation, 2021

The Index of Multiple Deprivation (IMD) is a measure of relative deprivation at a local level (see [Section 7: Glossary](#) for further explanation).

Figure 5: In England, there was a higher percentage of people providing unpaid care in the most deprived areas compared with the least deprived areas

Age-standardised percentage of unpaid carers broken down by hours of unpaid care provided by Index of Multiple Deprivation, England, 2021

Notes:

1. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.
4. These groupings are based on the 2019 Index of Multiple Deprivation (IMD) for England, ranging from 1 (most deprived) to 10 (least deprived).

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In England, there was a higher percentage of unpaid carers in the most deprived areas (decile 1, 10.1%) compared with the least deprived areas (decile 10, 8.1%), a statistically significant difference. People living in the most deprived areas also showed a higher percentage of 50 or more hours per week of unpaid care (4.0%) compared with those living in the least deprived areas (1.9%), which was also statistically significant. People living in the least deprived areas showed a significantly higher percentage of people providing less than 9 hours of care (3.9%) compared with those living in the most deprived areas (2.1%).

Figure 6: In Wales, there was a higher percentage of people providing unpaid care in the most deprived areas compared with the least deprived areas

Age-standardised percentage of unpaid carers broken down by hours of unpaid care provided by Welsh Index of Multiple Deprivation, Wales, 2021

Notes:

1. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.
4. These groupings are based on the 2019 Welsh Index of Multiple Deprivation (WIMD) for Wales, ranging from 1 (most deprived) to 5 (least deprived), WIMD deciles are available in the [accompanying dataset](#).

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Similar to England, there was a higher percentage of people providing unpaid care in the most deprived areas (quintile 1, 11.5%) compared with the least deprived areas (quintile 5, 9.7%) in Wales, a statistically significant difference. In the most deprived areas, there was a higher percentage of people providing 50 or more hours per week of unpaid care (4.8%) compared with those living in the least deprived areas (2.7%), which was also statistically significant. In the least deprived areas, there was a significantly higher percentage of people providing less than 9 hours of care (3.9%) compared with those living in the most deprived areas (2.4%).

Although IMD in England and Wales is based on the same concept and general methodology, there are some differences which mean the indices are not directly comparable (see [Section 7: Glossary](#)).

5 . Comparing unpaid care in 2021, 2011 and 2001

The unpaid care question was first asked in the 2001 Census. This section looks at trends in unpaid care in 2001, 2011 and 2021.

In Census 2021 we asked:

“Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?

Exclude anything you do as part of your paid employment.”

People answered the 2021 question by selecting one of six categories:

1. No
2. Yes, 9 hours a week or less
3. Yes, 10 to 19 hours a week
4. Yes, 20 to 34 hours a week
5. Yes, 35 to 49 hours a week
6. Yes, 50 or more hours a week

In the 2001 and 2011 Census we asked:

“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/disability?
- problems related to old age?

Do not count anything you do as part of your paid employment.”

People answered the 2001 and 2011 question by selecting one of four categories:

1. No
2. Yes, 1 to 19 hours a week
3. Yes, 20 to 49 hours a week
4. Yes, 50 or more hours a week

The question change in 2021 was based on research and testing, see our [Health and unpaid care question development for Census 2021 report](#). To make comparisons between 2001, 2011 and 2021 data, some of the answer categories for 2021 have been grouped to match to the four answer categories for 2001 and 2011. It should be noted that when the “provides 9 hours or less” and “provides 10 to 19 hours” of unpaid care is combined in 2021, this creates a slightly different category (“provides 19 hours or less”) to the category this is compared with in 2011 (“provides 1 to 19 hours of unpaid care”).

Figure 7: In England, most age groups showed a decrease in the percentage of unpaid carers in 2021 compared with 2011

Age-specific percentages of unpaid carers by age and sex, England, 2001, 2011, 2021

Notes:

1. Age-specific percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.

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In England, between 2001 and 2011 there was an increase in the percentage of unpaid carers for both males (9.9% in 2001, 10.0% in 2011) and females (12.5% in 2001, 12.8% 2011). In 2021 there was a decrease in the percentage for both males (7.6%) and females (10.3%) when compared with 2001 and 2011.

There was a decrease in the percentage of people providing unpaid care in 2021 compared with the 2011 Census in England across most age groups (Figure 7). This is not apparent in females aged 85 years and over, where there has been an increase from 2011 in the percentage of females providing unpaid care. In 2021, the largest fall in the percentage of people providing unpaid care between 2021 and 2011 was in the age groups that were more likely to provide unpaid care (those aged between 35 to 79 years).

Figure 8: In Wales, most age groups showed a decrease in the percentage of unpaid carers in 2021 compared with 2011**Age-specific percentages of unpaid carers by age and sex, Wales, 2001, 2011, 2021****Notes:**

1. Age-specific percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.

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In Wales, the percentage of unpaid carers for males was 11.5% in both 2001 and 2011, and for females it increased between 2001 and 2011 from 14.4% to 14.6%. In 2021, there was a decrease in the percentage of both male (9.0%) and female (12.0%) unpaid carers when compared with 2001 and 2011.

There was a decrease in the percentage of people providing unpaid care in 2021 compared with the 2011 Census in Wales across most age groups. This is not apparent in females aged 85 years and over, where there has been an increase from 2011 in the percentage of females providing unpaid care. Similar to England, the largest fall in the percentage of people providing unpaid care in 2021 was in the age groups that showed the highest percentages of unpaid care in females and males.

It is important to highlight that the results we have seen may have been influenced by Census 2021 data being collected during the coronavirus (COVID-19) pandemic and changes in question wording since 2011. For more detail, please see [Section 2: Using the data](#).

Figure 9: In both England and Wales, there was a decrease in the percentage of people providing 19 hours or less of unpaid care in 2021 compared with 2011 and 2001**Age-standardised percentages of people providing unpaid care by hours of care provided, England and Wales, 2001, 2011, 2021**

Notes:

1. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.
4. For 2001 and 2011 Census data, “19 hours or less” represents between 1 and 19 hours, for 2021 data it includes people who provide less than 1 hour of care.

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While there was a lower percentage of people providing unpaid care overall in 2021 compared with previous years, this was mostly seen in those providing 19 hours or less of care (Figure 9). In both England and Wales, there was an increase in the number (approximately 2.4 million in England and 170,000 in Wales) and percentage (4.5% in England and 5.8% in Wales) of people providing 20 or more hours of unpaid care compared with 2011 (approximately 2.0 million and 4.2% in England and 160,000 and 5.6% in Wales). This pattern could be explained by lockdown restrictions in place on Census Day and changes in the question wording (see [Section 2: Using the data](#)).

Figure 10: In 2021, there was a larger difference in the percentage of people providing unpaid care between the most and least deprived areas compared with 2011 in England

Age-standardised percentages of people providing unpaid care by hours of care provided and Index of Multiple Deprivation, England, 2011, 2021

Notes:

1. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.
4. For 2011 Census data, “19 hours or less” represents between 1 and 19 hours, for 2021 data it includes people who provide less than 1 hour of care.
5. These groupings are based on the 2019 Index of Multiple Deprivation (IMD) for England, ranging from 1 (most deprived) to 10 (least deprived).

Download this chart[.xlsx](#)**Figure 11: In 2021, there was a larger difference in the percentage of people providing unpaid care between the most and least deprived areas compared with 2011 in Wales**

Age-standardised percentages of people providing unpaid care by hours of care provided and Welsh Index of Multiple Deprivation, Wales, 2011, 2021

Notes:

1. Age-standardised percentages have been calculated using counts rounded to the nearest 5.
2. Graph represents usual residents aged 5 years and over.
3. All figures are individually rounded; totals may not sum exactly because of this rounding.
4. For 2011 Census data, “19 hours or less” represents between 1 and 19 hours, for 2021 data it includes people who provide less than 1 hour of care.
5. These groupings are based on the 2019 Welsh Index of Multiple Deprivation (WIMD) for Wales, ranging from 1 (most deprived) to 5 (least deprived), WIMD deciles are available in the [accompanying dataset](#).

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In England, in 2021, 8.1% of people in the least deprived areas provided unpaid care, compared with 10.1% in the most deprived areas, this is a difference of 2.0 percentage points. In 2011, the difference between the percentage of unpaid carers in the most and least deprived areas was just 0.4%.

A similar pattern was seen in Wales, where the percentage of unpaid carers ranged from 9.7% in the least deprived quintile to 11.5% in the most deprived quintile in 2021. This is a 1.8 percentage point difference, compared with a 0.5 percentage point difference between the most and least deprived areas in 2011.

In both 2021 and 2011 there is a general decline in the percentage of people providing 19 hours or less of unpaid care with decreased deprivation and a general increase in those providing 50 or more hours with increased deprivation.

6 . Unpaid care by age, sex and deprivation, England and Wales data

[Unpaid care by age and sex, England and Wales](#)

Dataset | Released 13 February 2023

Census data on unpaid care by age and sex in England and Wales.

[Unpaid care by age, sex and deprivation, England](#)

Dataset | Released 13 February 2023

Census data on unpaid care by age, sex and deprivation in England.

[Unpaid care by age, sex and deprivation, Wales](#)

Dataset | Released 13 February 2023

Census data on unpaid care by age, sex and deprivation in Wales.

7 . Glossary

Age-specific percentages

Age-specific percentages are used to allow comparisons between specified age groups.

Age-standardised percentage

Age-standardised percentages allow for comparison between populations over time and across geographies, as they account for differences in the population size and age structure. The [2013 European Standard Population](#) is used to standardise proportions. For further information on age-standardised percentages, see our [Age standardising data: What does this mean and why does it matter? blog](#).

Census day

In 2021, the census was conducted on 21 March. At this time, most of the coronavirus (COVID-19) lockdown restrictions were still in place in England and Wales. The coronavirus pandemic may have affected estimates of people providing unpaid care.

Index of Multiple Deprivation (IMD)

National deciles and quintiles of area deprivation are created through ranking small geographical populations known as Lower layer Super Output Areas (LSOAs). LSOAs are based on deprivation scores from most to least deprived and grouped into 10 or 5 divisions based on the subsequent ranking.

The Index of Multiple Deprivation (IMD) and Welsh Index of Multiple Deprivation (WIMD) is a score based on the area as a whole, and not everyone within a LSOA necessarily experiences the same level or type of deprivation. For example, some unemployed individuals live in less deprived LSOAs, while some higher-income individuals live in more deprived LSOAs. Similarly, deciles are a broad grouping and the levels of deprivation and the underlying factors determining the LSOA-level deprivation score will vary within the decile. Those LSOAs at the higher and lower end of each specific decile may vary considerably from each other.

The 2011 Census analysis used the 2015 IMD and the 2014 WIMD. We have used the 2019 IMD and WIMD for this article because this is the most up to date version at the time of publishing. A consultation to update the English IMD has been completed, and a response published (see the [Indices future: Updating the English Indices of Deprivation consultation](#)). There are currently no dates agreed for an update to the IMD or WIMD. The 2019 IMD and WIMD use the 2011 Census geographical boundaries instead of Census 2021 boundaries. To overcome this, the Office for National Statistics (ONS) methodology team mapped Census 2021 LSOAs to their equivalent LSOA based on 2011 boundaries. This was then used to assign a national deprivation decile or quintile, based on 2019 scores.

Statistically significant

The term “significant” refers to statistically significant changes or differences. Significance has been determined using the 95% confidence intervals, where instances of non-overlapping confidence intervals between estimates indicate the difference is unlikely to have arisen from random fluctuation. See our [statistical uncertainty](#) page.

Unpaid care

A person is a provider of unpaid care if they look after or give help or support to anyone because of long-term physical or mental health conditions or illnesses, or problems related to old age. This does not include any activities as part of paid employment. No distinction is made about whether any care that a person provides is within their own household or outside the household.

The wording of the question was changed in 2021 and used the [Government Statistical Service \(GSS\) harmonised standard for unpaid care](#). Information on steps taken to consult on question changes can be found in our [Health and unpaid care question development for Census 2021 report](#).

Usual resident

A usual resident is anyone who on Census Day, 21 March 2021, was in the UK and had stayed or intended to stay in the UK for a period of 12 months or more or had a permanent UK address and was outside the UK and intended to be outside the UK for less than 12 months.

8 . Data sources and quality

The census provides the most detailed picture of the entire population, with the same core questions asked to everybody across England and Wales. Census results can be more reliable than survey results based on a sample of the population, because the whole population is included. The UK Statistics Authority has assigned National Statistics status to Census 2021 outputs, providing assurance that these statistics are of the highest quality and value to users.

Census 2021 achieved a very high [response rate](#) of 97%. We ensure the census results reflect the whole population by using statistical methods to estimate the number and characteristics of people who were not recorded on a census response. This means that the census statistics are estimates rather than simple counts of responses, so they have some statistical uncertainty associated with them. We take numerous steps to minimise possible sources of error.

Additionally, we apply statistical disclosure control to protect the confidentiality of census respondents. Differences in the methods used for statistical disclosure control may result in minor differences in data totals between census products. As we round all figures individually, table totals may not sum exactly. Age-standardised and age-specific percentages were calculated based on these rounded numbers.

Quality considerations, along with the strengths and limitations of Census 2021, are more generally provided in our [Quality and Methodology Information \(QMI\) for Census 2021 methodology](#). For specific quality considerations related to health, disability and unpaid care, refer to our [Health, disability and unpaid care quality information for Census 2021](#). Further information on our quality assurance processes is provided in our [Maximising the quality of Census 2021 population estimates methodology](#).

9 . Related links

[Health, disability and unpaid care: Census 2021 in England and Wales](#)

Bulletin, datasets, methodology | Released 19 January 2023

Details the number of usual residents aged 5 years and over who provide unpaid care, and how many hours they provide in a typical week, Census 2021 data.

[Health, disability and unpaid care variables Census 2021](#)

Supporting information | Released 19 January 2023

Variables and classifications used in Census 2021 data about health, disability and unpaid care.

[Health, disability and unpaid care in Wales \(Census 2021\)](#)

Bulletin | Released 19 January 2023

A summary by Welsh Government of Census 2021 data about health, disability and unpaid care in Wales.

[Census maps](#)

Interactive content | Updated 19 January 2023

Interactive map tool that visualises Census 2021 data on different topics down to a local authority area and neighbourhood level.

[Quality and methodology information for Census 2021](#)

QMI | Updated 26 January 2023

Details the data strengths, limitations, uses, users and methods used for Census 2021, England and Wales.

[How we assured the quality of the 2021 census estimates](#)

Methodology | Released 7 November 2022

Details the methodology for the validation of the Census 2021 population estimates.

10 . Cite this article

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