

**JUST.**

# CARE REPORT 2025

13th Edition



**Social care reform - stuck in the waiting room**

Ailing social care system still waiting for treatment



# NO SIGN OF A CURE FOR SOCIAL CARE ILLS

## Adult social care has long been ripe for reform.

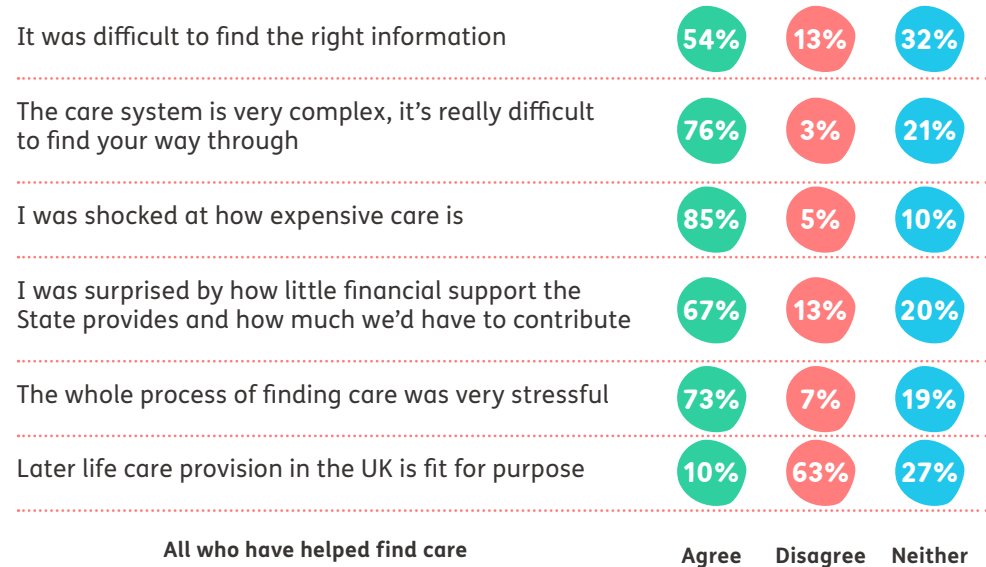
Successive governments have promised to fix a system seen as increasingly overstretched, underfunded and inconsistent. Our Care Report has captured the knowledge and thoughts of over-45s on adult social care since 2012. Each year we pay special attention to the experience of the one-in-five who have had a hand in finding care for an ageing relative. How did it go for them?

Their answers paint a picture of poor levels of support and high levels of stress, along with huge expense. Nearly two-thirds of those with experience of the care system don't believe later life care provision is fit for purpose.

Few of us will entirely avoid interacting with care services at some point in our lives. Most of us will either help loved ones and perhaps then later need care ourselves. It's estimated four in five people aged 65+ will need care before they die but they have no idea how much care they will need or what it will cost.<sup>1</sup>

This report details the environment in which we find ourselves. But it also shows how that environment can be navigated most effectively, to make the best of a bad set of circumstances.

## Do you agree or disagree with the following statements on the care system?



# FOREWORD

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## If knowledge is power, then advice from experts has the potential to be a superpower.

They say patience is a virtue but in terms of social care reform, it's starting to look like government neglect. We once again find ourselves waiting for political will to catch up with the public need for a care system that is fit for purpose.

But beyond waiting and hoping, what practical steps can individuals and families take today to protect themselves against the uncertainty of tomorrow?

Welcome to the Care Report 2025, the 13th edition of a research series dating back to 2012. In this issue we reveal how over-45s think and feel about today's adult social care system and take a look at the tangible actions people can take to better navigate it.

We hear from professionals who work every day with those facing care challenges — not only the older people needing support, but also the families who shoulder much of the responsibility. Each one of them is trying to find their way through a system struggling to balance increasing demand with diminishing resources.

In January this year, the government announced yet another independent commission on adult social care reform in England, chaired by Baroness Casey, heralded as “the first step towards delivering a National Care Service.”<sup>2</sup> It is the third such commission in thirty years, following the Royal Commission on Long Term Care (1999) and the Dilnot Commission (2011).

With an interim report expected in 2026 and final recommendations in 2028, meaningful reform could still be a decade away. The barriers are not about understanding the challenges — they are about finding the political will to act. Many are calling for Baroness Casey to set out a clear vision before the next general election.

Meanwhile, the cost of inaction is mounting. Two million people are not receiving the care they need. Around 1.5 million unpaid carers provide over 50 hours of care a week,<sup>2</sup> often at the expense of their own jobs. Local authority budgets are stretched to breaking point, care providers are under pressure from staff shortages and rising costs, and the ripple effects reach an NHS already struggling to keep its head above water. Then there is the impact on the wider economy through lost productivity and lower tax revenues.

One practical step that could make a difference now would be a “Care Wise” service — modelled on the successful “Pension Wise” — to help people understand their options and plan ahead with confidence.

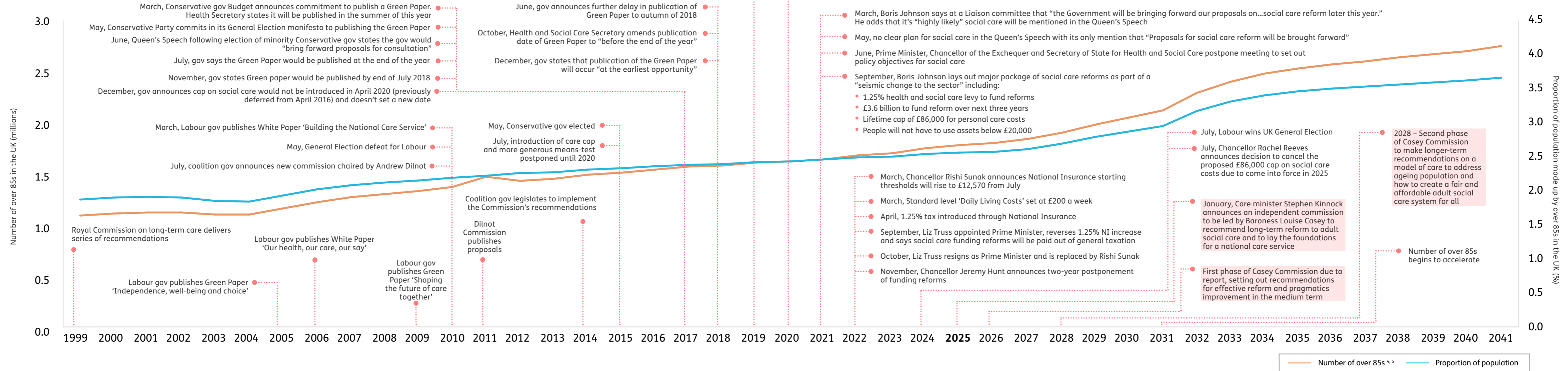
While reform remains a distant possibility, many individuals and families do not have the luxury of being able to wait. Those with imminent needs must play the hand they are dealt. We look at how some of the thousands set to access care in the coming months could gain the knowledge, tools and confidence to take control of their own care futures. The system may be slow to change, but often the need to act is pressing.

**Stephen Lowe**  
Group Communications Director

Just Group plc



# A TIMELINE OF SOCIAL CARE POLICY<sup>3,4</sup>



## FAIR CARE FUNDING

About 176,000 care home residents pay all their own care costs with a further 41,000 paying some of their costs.

Currently taxpayer support is 'means-tested' so that those in England with assets valued at more than £23,250 (which may or may not include their home depending on circumstances) are expected to pay their own residential care costs in full.

Industry figures suggest average costs to a self-funder are £1,278 a week in a residential home and £1,594 in a nursing home. About 135,000 receive state funding while 33,000 have their costs met by the NHS due to serious health issues.<sup>5</sup>

Our survey results show strong support for the state stepping in when someone can't afford to pay for themselves – more than two-thirds (68%) agreed compared to just 7% who disagreed.

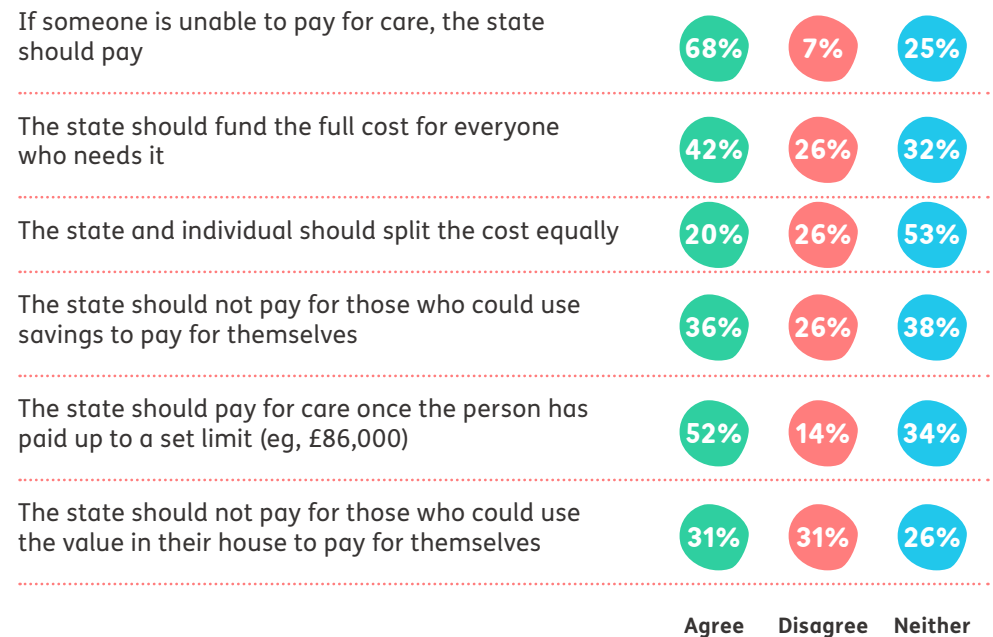
However, when it comes to universal state funding, support is more divided. This perhaps reflects a more pragmatic rather than an ideological stance.

Only four in 10 (42%) agreed that the state should fund the full cost for everyone. There was an almost even split (36% for and 38% against) on the question of whether the state should not pay for care if people could use their own savings.

Ironically, of all the funding options other than the state paying for everyone, the most support was given to the idea of a cap on care costs. This was first proposed by the Dilnot Commission in 2011 and was finally due to be implemented in October 2025, before being ditched by the Labour government soon after its election victory.

Half (50%) of over-45s believed it true that there is a maximum amount people are expected to pay before the local authority steps in to provide funding. In reality, people needing care in England (and Northern Ireland) remain self-funders until their capital falls below £23,250 (the means-testing rules are different in Scotland and Wales).

Do you agree or disagree with the following about who should be responsible for paying for long-term residential care?



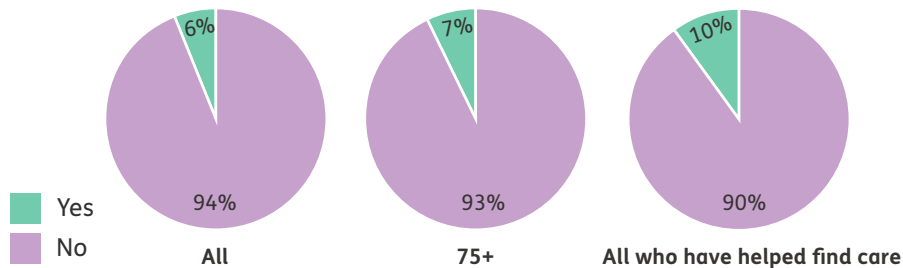
# CARE - THE BLIND SPOT IN FINANCIAL PLANNING

Financial planning typically involves contributing to pensions, purchasing life or health insurance, and arranging legal documents such as wills and powers of attorney. However, it is very rare for people, even those approaching an age where care may soon be needed, to make specific plans for funding long-term care in later life.

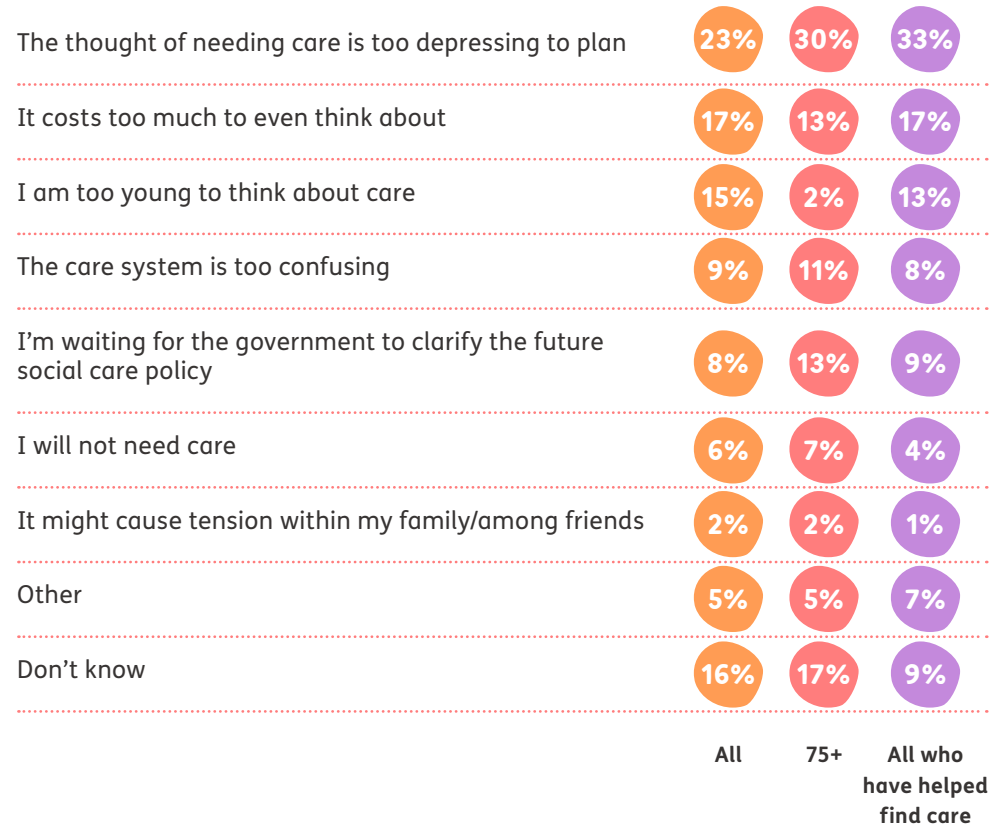
Part of the problem is that care costs are unquantifiable in advance and there is no current method to spread or 'pool' the risk across the population. The government estimates about one in seven people will need to spend more than £100,000 on later life care, while others will spend more modestly or avoid costs altogether.

But the cost is just one of many impediments. Three-quarters (73%) of over-45s said they had not thought about care, planned for it or spoken to family about it. Of this group, 23% said the main reason they gave was that 'the thought of needing care is too depressing to plan', rising to 30% of those aged 75+. The figure is even higher for those who had helped a loved one find care, perhaps hinting at how that experience affected them.

**Have you made any specific provision to cover the cost of care for yourself?**



**What's the main reason you have not thought about care, planned for it, or spoken to family about it**



# SHOCK AND AWE

Many people will go through life without thinking about the care system – right up to the point they need to organise care for themselves, a partner or other relative.

This can often come at a traumatic time such as after incapacitation due to illness or injury when the individual needing care can no longer cope for themselves.

Without planning, navigating the care system can be a steep learning curve. For example, the means-test limit of £23,250 of assets in England comes as a surprise to many who have never been involved in organising care.

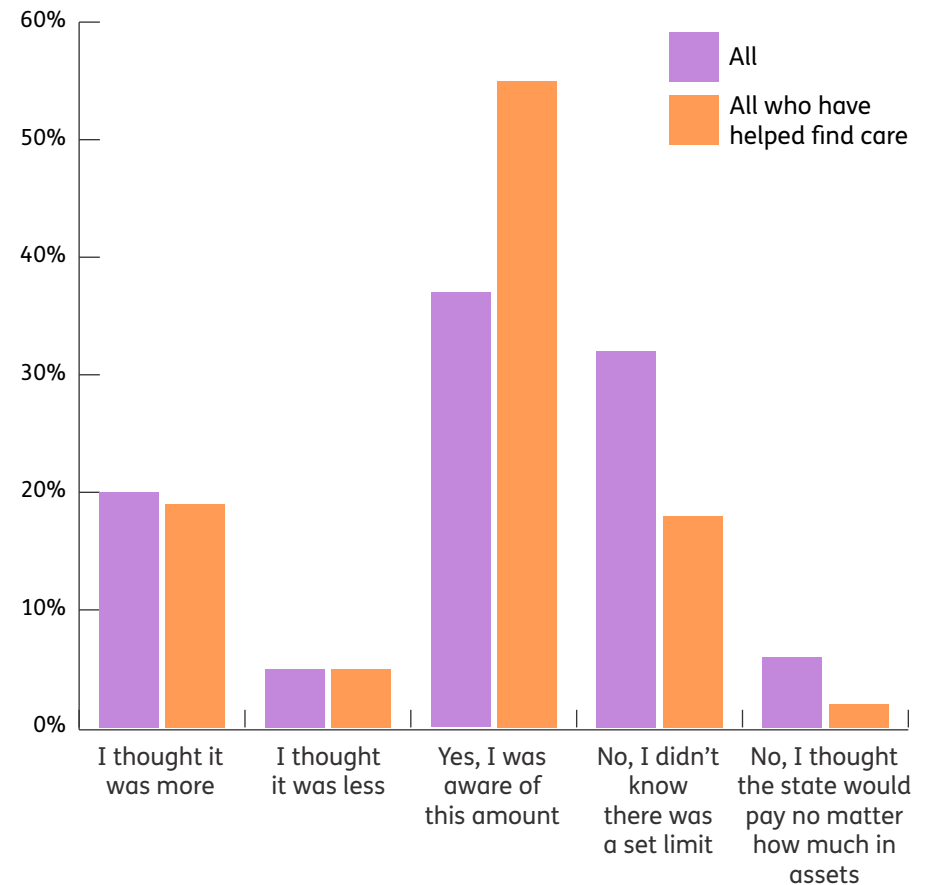
### Where do people think they could find this amount of money?

Homeowners are most likely to say the money would come from selling their house (39%), slightly more than those who said would come from savings (38%) or pension income (31%) or pension lump sums (8%). Among renters, 44% thought the state would pay. Worryingly, a quarter of homeowners (24%) and a third of renters (35%) said they did not know.

### DO YOU KNOW THE COST OF CARE?

It's common for people to underestimate the cost of care. Six in 10 (60%) thought the cost of a year in a care home would be less than £60,000 a year whereas industry figures reveal the average self-funder is paying nearly £66,500 in a residential home and nearly £83,000 in a nursing home.

Were you aware that if a person has savings over £23,250 they will have to use their own money to fund care fees?



# FAMILY TIES

**Our findings show a strong desire among over-45s for independence in later life — and a reluctance to lean too heavily on family.**

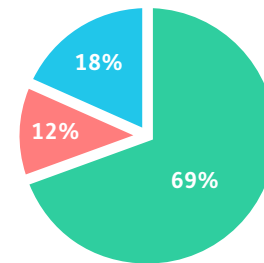
Only one in five respondents (20%) said they would like to live with their children if they couldn't manage alone, while over half (52%) rejected the idea outright. This suggests that for many older adults, moving in with family feels less like comfort and more like surrendering autonomy.

Almost seven in ten (69%) said they do not want their children to have to care for them, underscoring how deeply the fear of being a burden runs. With younger generations juggling work, housing costs and supporting children, many parents appear unwilling to add to that strain. Instead, they see professional or residential care as a fairer, if sometimes lonelier, solution.

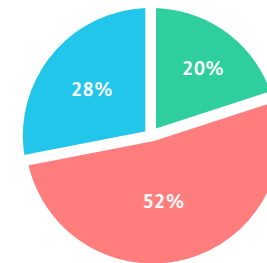
Yet independence doesn't mean isolation. Most (71%) said they would want to live near their family if they went into a care home, and many still expect their children to have some say in their care decisions. The message is clear: older people want closeness without dependence — family in reach, but not on call.

Having choice over when and how you receive the care you need is not a given. It takes thoughtful financial planning to make that independence possible.

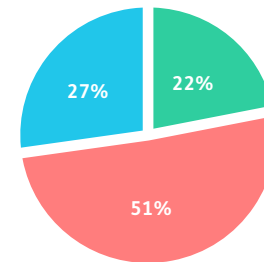
**How do you feel about going into long-term residential care yourself later in life?**



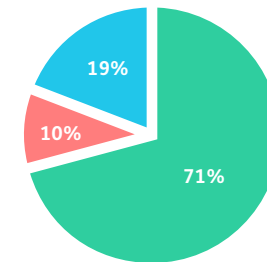
I do not want my children to have to care for me themselves



I would like to live with my children if I can't cope in my own home



I would rely on my children to decide on my care arrangements



I would want to live near my family if I go into a residential home

■ Agree   
 ■ Disagree   
 ■ Neither

Percentage of parents

## COPING WITH THE COST OF CARE

**Care is expensive - very few older people receive sufficient pension income to fully cover the costs and in many cases the local authority will not contribute.**

Among the over-45s who had helped find care for a loved one, nearly half (46%) said the person needing care was entirely funding their own care, while another third (32%) said they were providing some of the funds. Only 16% needing care were having their care costs paid by the taxpayer.

For those paying some or all of their own costs, nearly six in ten (59%) were covering them from savings and investments and 48% using pension income.

Proceeds from selling a house was the next most likely source of income (36%). Selling a home is a topic that sharply divides opinion with some people believing the home value should be protected while others believe some or all of the value should be available to pay for care if required.

Homeowners entering care homes can, in some cases, defer selling their home by entering a Deferred Payment Agreement (DPAs) with their local council. The council pays the care costs but recoups the money when the home is eventually sold. In 2023-24 there were 6,815 DPAs compared to a self-funder care home population of about 176,000.

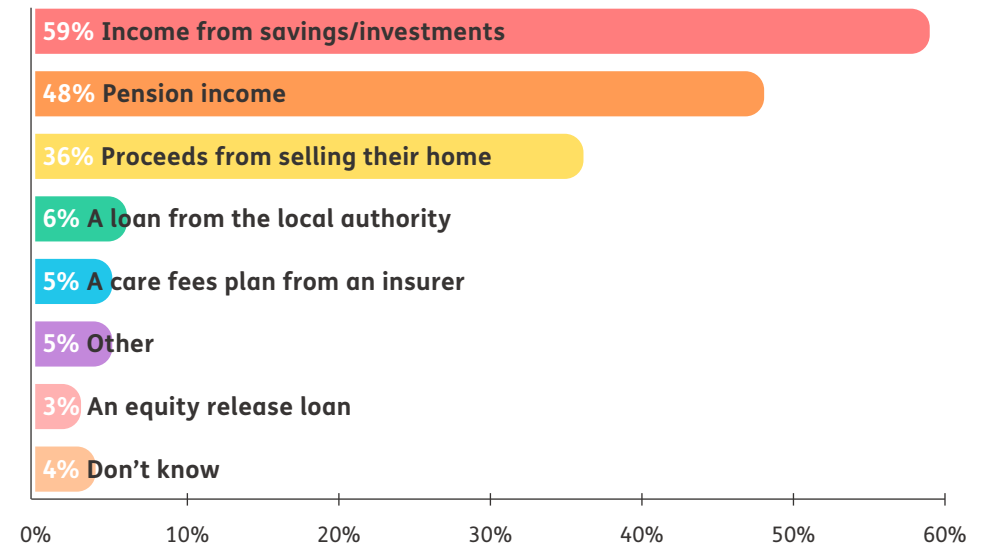
Our research suggested loans from local authorities/DPAs were used in about 6% of cases. That compares to 5% using a care fees plan from an insurer (such as an Immediate Needs Annuity) or 3% using equity release.

### TRUE OR FALSE:

**Can you be forced to sell your home to pay for care?**

While there is no rule that forces people to sell a home to pay for care, self-funders do have to find the money somewhere and often a home sale is the only practical solution. Our research found that 79% of over-45s thought it was true that you can be forced to sell your home to pay for care, against 21% who thought it false.

**How has this person paid/how are they paying for their care?**



All who have helped find care for someone who is fully or partially paying for their own care

## NATIONAL CARE SERVICE

### Public opinion on a National Care Service reveals both broad support for reform and deep uncertainty about how it should be funded.

Most over-45s (71%) were positive about the proposal. Within this group opinions diverged in two areas – whether the care should be free to all or means-tested, and whether people were willing or not to pay extra tax to pay for a National Care Service.

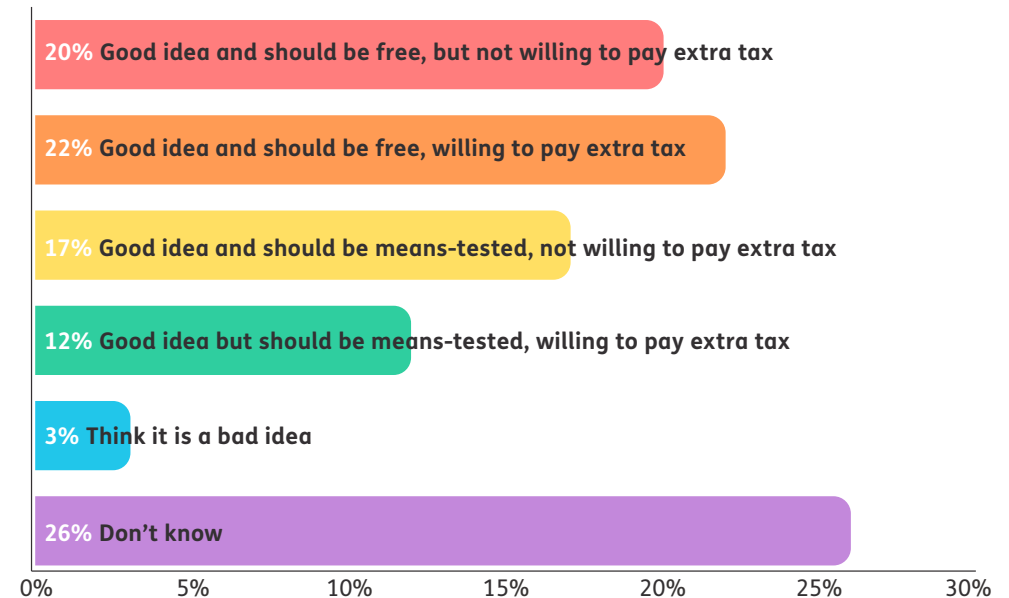
The findings highlight a familiar tension in social care policy: people want a fairer, more reliable system, but there is limited appetite to pay more tax to achieve it. Even among those who support a fully free National Care Service, only around half are willing to see their taxes rise to fund it. This suggests that while the principle of universal care enjoys moral and emotional support, the financial realities make consensus harder to reach.

A significant proportion (26%) said they didn't know what approach they preferred. This underlines the lack of public understanding around how care is funded today and what a reformed system might involve. It points to the need for clearer public information and open debate — not just about how to fix social care, but about the trade-offs required to make it sustainable in the long term.

### WHAT IS THE PROPOSED NATIONAL CARE SERVICE?

Labour's vision unveiled in 2019 was for a universally-available social care service, with personal care provided free at the point of use and funded through general taxation. Pronouncements since taking power have contained little detail on either funding models or timescales for reform.

### Which of the following statements best describes your initial reactions to a National Care Service?



# TUNING OUT – IS PUBLIC INTEREST IN CARE FADING?

**Is public engagement with social care on the wane? More than half (53%) of over-45s said they were interested in the debate about who should pay for long term care, but this is the lowest proportion for more than five years.**

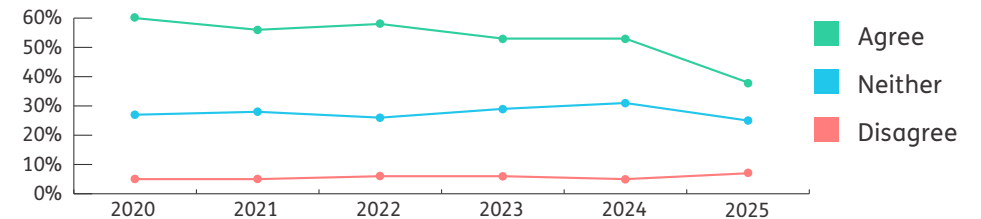
Those agreeing they were confused by government announcements on the funding of social care was also down to 38% in 2025, a sharp drop on top of a steady decline from 60% in 2020. Potentially this is because, soon after coming into power, Labour scrapped the proposed cap on care costs due to come into effect this autumn and hasn't yet announced a replacement policy.

Overall, after years of stalled proposals and abandoned plans, people appear to be tuning out — not because the issue has become less important, but because they have stopped believing that progress is possible.

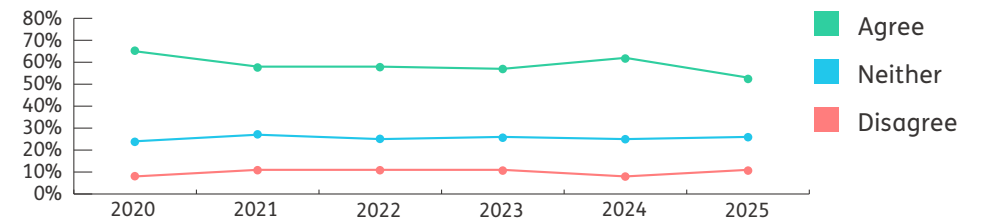
A consistent proportion of respondents continue to delay making financial plans for care — 45% in 2025, down only modestly from 58% in 2020. This steady reluctance points to a public aware they will need to contribute to their own care but who see little point planning in a policy environment that lacks clarity.

In one area there is strong appetite for coherence. Support for a unified approach to care across the UK has surged to a new high (86%) in 2025. There is an awareness of inconsistent policy across England, Scotland, Wales and Northern Ireland which public opinion does not support.

**I will delay making financial plans for any residential care I might need until new plans for funding long-term care have been introduced**



**I think the UK should have one unified approach to care as the different rules across England, Scotland and Wales can make it difficult**



# PUBLIC SCEPTICISM GROWS OVER HOPES FOR SOCIAL CARE REFORM

**After decades of promises and little action, public confidence in the latest government's ability to fix adult social care is waning. Many believe the situation is getting worse, not better.**

Labour's 2024 election manifesto promised "deep reform" to ensure consistent standards across the sector and to deal with chronic staff shortages, with the longer term aim of creating a National Care Service. Along with announcing the commission on social care, it has pledged an additional £4 billion of funding to local councils by 2028-29 compared to this year, of which £500m is earmarked for a Fair Pay Agreement to set fair pay and conditions. Critics suggest it's not enough.

What do the public think of Labour's efforts over the first year of its government? Our research suggests few are convinced that positive steps are being taken.

Four in 10 adults aged 45+ (42%) believe the problems facing social care have worsened since the new government took office while only one in five (20%) disagree.

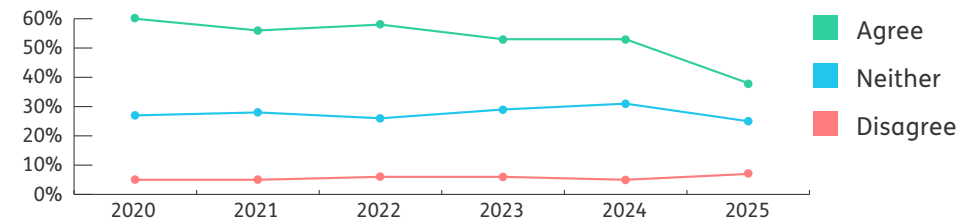
Only 8% thought the government is doing a good job on adult social care compared to 62% who disagreed.

Only one in ten (10%) agreed that the government will fix the long-term problems in adult social care, with 68% disagreeing.

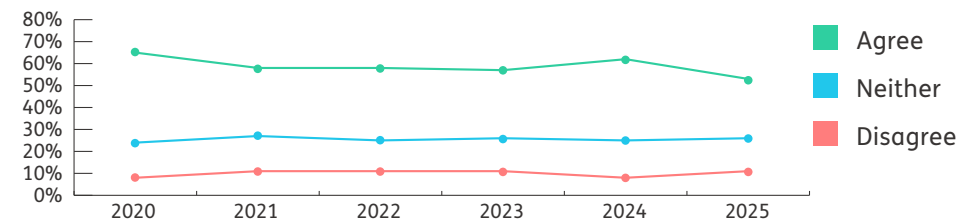
Public scepticism could harden further if there are no visible signs of improvement soon. With demand for care expected to rise sharply over the coming decades as the population ages, the stakes are high. History tells us that regardless of how well a government commission can identify problems and propose solutions, the main stumbling block to change is political will. Fixing the crisis in care will be costly and politically unpopular with those asked to foot the bill.

While we look forward to the social care commission's report next year, without clear funding commitments or political consensus, observers fear it may become the latest in a long line of reports to gather dust. After years of stalled reforms and empty pledges from successive administrations, many people appear to have concluded that no government is truly willing—or able—to confront the care crisis.

**I was confused by the Government announcements on the funding of residential care**



**I am interested in the debate about who should pay for long-term care**



# SEVEN QUESTIONS TO PREPARE FOR CARE

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**With no clear plan for reforms on the horizon, it is sensible people think ahead about their own potential future care needs.**

Jacqueline Berry, founder of UK care navigation specialist My Care Consultant, suggests some key questions everyone needs to think about:

## 1. How does the care system work?

Social care isn't free. It's means-tested, which means the amount you pay depends on your income and savings. Understanding how local authorities assess what support you get — and what you'll need to fund yourself — is a good first step to preparing for the future

## 2. How much could care cost me?

Care costs vary according to the amount of support required and whether the care is being given in your own home, or in a residential or nursing home. Costs also vary in different parts of the UK and based on the standard of care required. Planning can give more choices if care is eventually required.

## 3. What money could I use to pay for care?

Those receiving professional care are expected to contribute what they can from income or savings. It's important to take stock of what income and assets you have now and are likely to have in the future in order to understand where you might source funds for care if needed.

## 4. Could my home help fund future care?

Your home may well be your largest asset and will be included in a means-test unless a spouse, partner or dependent relative lives there or care is needed at home. Thinking early about whether you might downsize, rent it out or use equity release could give you more choices later, rather than making decisions under pressure.

## 5. Have I talked to my family about care?

It can be a difficult subject but discussing your wishes and what's affordable helps everyone prepare. Open conversations now can prevent confusion or disagreement in the future.

## 6. Are my legal documents up to date?

Putting Lasting Powers of Attorney in place for both finances and health, and keeping your will current, ensures that your wishes are respected if you can't make decisions yourself. It's a vital part of future planning.

## 7. Who can I turn to for expert advice and why?

Specialist later-life financial advisers can help you structure your finances to cover care costs efficiently. Only a qualified financial adviser can advise on all ways of paying for care, including products that guarantee to pay for care for life. They can also check you're claiming all the benefits and entitlements available to you, helping your money go further for as long as care is needed.

**Jacqueline Berry** is the Founder and CEO of **My Care Consultant**, a nationally recognised care navigation firm in the UK. With over 19 years of experience in financial services and the care sector, she launched the company in 2016 to make independent, reliable care advice more accessible.



# CREATING A CULTURE OF CARE PLANNING

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**Public confidence in the care system is alarmingly low – only one in 10 (10%) over-45s who have helped find care for a relative or friend think it is fit for purpose.**

The government's performance is not seen as a success. Successive governments have failed to plan and invest adequately, and individuals have not been made aware of their responsibilities.

The result is a system that people can ignore until they suddenly can't — when the need for care arrives as a shock. The lack of early planning leaves families exposed and forces many to make rushed decisions at moments of crisis.

Even with the new care commission looking at the options, many experts believe meaningful reforms to how care is structured and funded remain at least a decade away.

Whatever shape the care system ultimately takes, the financial responsibility is highly likely to be shared between the state and the individual in some way. Public funding can provide a safety net but those who can afford to will always be expected to contribute something. The real question is how much, and how fairly that burden is distributed.

That being said, the government could implement policies right now to start to build a long-term culture of care planning — one that empowers individuals to take responsibility early and relieves pressure on public finances.

The current generation approaching retirement cannot afford to wait for political will to catch up. Evolving the care system to better meet the needs of an ageing population requires honesty, foresight, and long-term commitment — government needs to confront reality rather than avoid it.

The sooner we encourage people to plan for their future care, the more choice, dignity and stability we can secure for everyone.

## Practical solutions to build a fairer care system

### 1. Create clarity and raise awareness

The government must clarify its contribution to individual care costs and stress that social care isn't free at the point of use like the NHS.

### 2. Create a "Care Wise" guidance service

A source of practical information modelled on the free and impartial Pension Wise guidance service and available to all

### 3. Incentivise planning ahead

Encouraging saving for care through the tax system and employment rules, helping people build funds over time.

### 4. Make housing wealth work smarter

Promote safe ways to use property wealth — such as downsizing, equity release or deferred payment agreements — to earmark funds for future care.

### 5. Encourage financial planning

Ensuring employers and financial advisers include later-life care in midlife reviews, so planning begins well before care is needed.

### 6. Support unpaid carers

Strengthen workplace flexibility and improve financial support to recognise the vital contribution of informal carers.

### 7. Normalise conversations about care

Run public awareness campaigns to make planning for care as routine as saving for a pension — reducing fear, confusion, and crisis-driven decisions.

## RESEARCH FOR THIS REPORT

**This report is the 13th in our series of Care Reports designed to provide a snapshot of what people aged 40 and older in England and Northern Ireland know and think about the later life care system.**

In the course of our research we have conducted consumer polling with around 30,000 people. Unless a footnote references an external source, the data we use in this report is taken from our own online research conducted in 2025. Where we have used our own historical research data from 2012 - 2024 we mark which year's data we reference. Note on the data presented: In some instances, the sum column/row values don't add up to exactly 100% because of rounding.

### We conducted research in 2012-2025 as follows

**2025** – online survey among 2,500 adults aged 45 years and older in England and Northern Ireland, conducted 26 August – 12 September 2025 by Opinium.

**2024** – online survey among 2,500 adults aged 45 years and older in England and Northern Ireland, conducted 9-16 August 2024 by Opinium.

**2023** – online survey among 2,500 adults aged 45 years and older in England and Northern Ireland, conducted 31 July -9 August 2023 by Opinium.

**2023** – supplementary data: online survey among 1,400 UK homeowners aged 65 years and older, conducted 7-15 August 2023 by Opinium.

**2023** – supplementary data: online survey among 200 IFAs in the UK, conducted 10-15 August 2023 by Opinium.

**2022** – online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 7-11 July 2022 by Opinium.

**2022** – supplementary data: online survey among 1,087 adults aged 45 years and older in England and Northern Ireland, conducted 8-12 July 2022 by Opinium.

**2022** – supplementary data: online survey among 207 IFAs in the UK conducted 7-13 July 2022 by Opinium.

**2021** – online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 7-13 April.

**2021** – by Opinium. **2021** – supplementary data: online survey among 1,014 adults aged 45 years and older in the UK, conducted 13-18 May 2021 by Opinium.

**2021** – supplementary data: online survey among 214 IFAs in the UK conducted 14-17 May 2021 by Opinium.

**2020** – online survey among 1,002 adults aged 45 years and older in England and Northern Ireland, conducted 30 January -3 February 2020 by Opinium.

**2020** – Covid-19 supplementary data: online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 4-7 May 2020 by Opinium.

**2019** – online survey among 1,001 adults aged 45 years and older, conducted 4-11 March 2019 by Opinium.

**2017** – online survey among 1,088 adults aged 45 years and older in England and Northern Ireland, conducted September 2017 by Opinion Matters.

**2016** – online survey among 1,005 adults aged 40 years and older in England and Northern Ireland, conducted April 2016 by Opinion Matters.

**2015** – online survey among 1,592 adults aged 40 years and older in England and Northern Ireland conducted, December 2014 by Opinion Matters.

**2014** – online survey among 1,005 adults aged 40 years and older.

**2013** – online survey among 841 adults aged 45 years and older.

**2012** – online survey among 894 adults aged 40 years and older.

1. **House of Commons committee report**, Adult Social Care Reform: the cost of inaction (May 2025)

2. **Department of Health and Social Care**, New reforms and independent commission to transform social care (January 2025)

3. **ONS**, National population projects (January 2025)

4. **ONS**, Population estimates for the UK (September 2025)

5. **Laing & Buisson**, Care Homes for Older People UK Market Report 35th Edition (February 2025)



## ABOUT JUST

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Just (Just Group plc) is a FTSE-listed specialist UK financial services company.

A leader in the individual retirement income, care and defined benefit de-risking markets. Just has over 700,000 customers, is trusted to manage more than £27 billion of customers' retirement savings and has helped customers release over £7 billion from their properties.

Just provides a wide range of products, advice and professional services to individual customers, financial intermediaries, corporate clients and pension scheme trustees.

## FURTHER INFORMATION

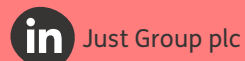
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