Social Portrait of People with Disabilities

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People with disabilities are one of the lifecycle groups prioritised in the *National Action Plan for Social Inclusion 2007-2016* and are central to the high level goals and the national poverty target set out in the plan.

There are particular challenges in promoting the social inclusion of people with disabilities. To inform the policy response, this 'social portrait' provides information about the social conditions of people with disabilities in an accessible manner. It is based on a model of disability that takes account of the interaction of the individual and their physical and social environment.

The research was commissioned by the Social Inclusion Division in the Department of Social Protection and undertaken by the Economic and Social Research Institute. It is the fifth lifecycle report, to go with previous portraits of children, people working age, older people and communities.

The full report and an Irish version of the research briefing are available online at http://www.socialinclusion.ie

Main Findings

- Using a variety of data sources, it is estimated that up to 800,000 people, one in five of the population, have a disability, with a core group of 325,000 people (8 per cent) reporting disability across multiple data sources. People with a disability have, on average, up to three types of disability.
- Most disability is acquired through the life course rather than being present from birth or childhood, with the exception of learning disability which is associated primarily with school years and which poses particular challenges for learning.
- Disability has multiple and reciprocal effects on people's social situation. Compared to the total population, people with disabilities are in general twice as likely to have only primary education, not to be at work or to experience a combination of low income and deprivation of basic necessities.
- Disability impacts negatively on people's social relationships and social participation. Older adults with disability are at greater risk of social isolation, an issue which may worsen with population ageing.
- People with disabilities experience most difficulty in the home. Outside the home, access difficulties are most common in public venues, general services and moving around their local area.
- The policy challenge for society, service providers and employers is to adapt to the needs of people with disabilities, enabling them to maximise their potential and their contribution to public life. This includes in-school supports, innovative job design, assistance with home living, and improvements in access to public transport and services.



Introduction

This research report details the social circumstances of people with disabilities. The concept of disability underling the report is the 'biopsychosocial model' of disability advocated by the World Health Organisation. In this model, disability is understood in terms of how the individual interacts with the physical and social environment. In order to understand what people are able to do, we need to take account of the resources available to them and the barriers placed in their environment, as well as their own physical, mental and emotional resources.

The report provides information on the number of people with disability and the impact their disability has on them. It also details the experiences of people with disabilities in the educational system and labour market, their social participation and social support and the physical environment and transport.

The report draws on a number of sources, primarily the 2006 National Disability Survey (NDS), the 2006 Census of Population, the 2009 Survey of Income and Living Conditions (SILC) and various modules of the Quarterly National Household Survey (QNHS). The

NDS is the first major survey of people with disabilities. It interviewed 14,500 people who were classified in the Census as having a disability. It also interviewed a further 1,500 people who had not recorded a disability in the Census, to check if any disabilities might have been omitted in the Census. Together, the NDS and the Census give a comprehensive overview of disability. SILC and QNHS provide additional information on poverty and employment.

Prevalence and types of disability

The best estimate of the number of people with a disability, combining information from the Census and the NDS, indicates that between one in five and one in six of the population has a long-term disability. The NDS provides detailed and reliable information on the subset of this group (about 8.1 per cent of the population) who declared a disability in both the Census and the NDS and includes the majority of those with severe disabilities.

Most disability is acquired through the life course rather than being present from birth or childhood. (FIG 1) An intellectual and learning disability is the exception in that it peaks in the early teens. This form of disability is more likely to be noted during the school years and is more frequently diagnosed now than in the past.

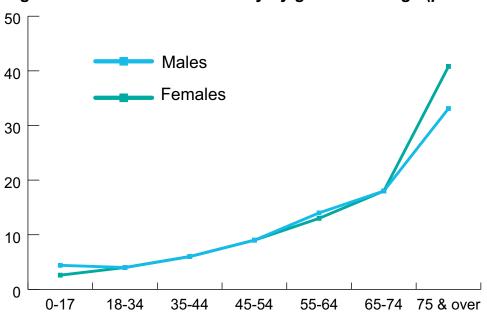


Figure 1 Prevalence of disability by gender and age (percentages)

The NDS distinguishes nine different types of disability. The average person with a disability has 2.6 of these different types. The most common disability type is mobility and dexterity disability which includes difficulties in walking, lifting and carrying things and in picking up small objects (about 184,000 people). The second most common form is pain (about 153,000 people).

Other types include remembering and concentrating disability (113,000 people), emotional, psychological and mental health disabilities (111,000 people), intellectual and learning disability (72,000 people), breathing disability (71,000 people), sensory impairments of hearing (58,000 people) and vision (51,000 people) and speech disabilities (35,000 people).

The prevalence of disability among children is lower than among adults. The NDS indicates that 3.5 per cent of children have a disability and that disability is more common among boys (4.4 per cent) than among girls (2.6 per cent). The two most common forms of disability among children are an intellectual and learning disability and a remembering and concentrating disability. These types of disability are most likely to be noted during the school years as they create a particular challenge in terms of education.

Impact of disability

About two thirds of those with a disability either have a lot of difficulty performing everyday activities or cannot perform them at all. People with a mobility and dexterity disability are most likely to experience a great deal of difficulty with everyday activities.

Most people with a disability have no difficulty with basic self-care activities such as feeding or dressing themselves, taking a bath or shower, staying alone and getting in and out of bed without help. The self-care activities most likely to cause difficulty for people with a disability are staying by

themselves (33 per cent) or taking a bath or shower (36 per cent).

The health status and the stamina of people with a disability have an important bearing on their quality of life and on their capacity to participate in work and social activities, especially for the 40 per cent whose disability is health-related. Only half of people with a disability consider their health to be good, compared to nearly nine out of ten in the general population. Only 43 per cent of people with a disability considered their stamina to be very good or good.

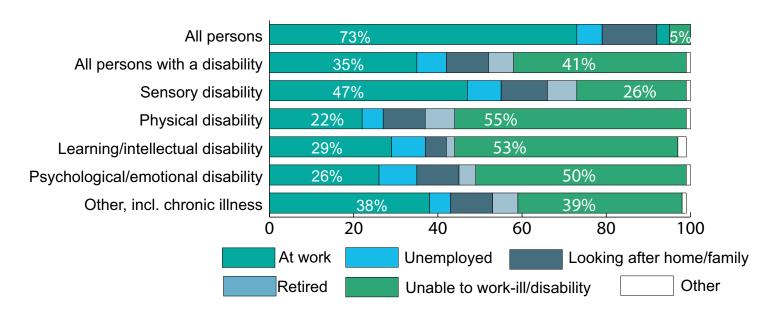
Education, work and living standards

Educational disadvantage and disability bear a reciprocal relationship. The relationship between disability and education in the youngest cohort of adults is likely to be mainly driven by the barriers to completing education associated with a disability. The pattern in the older age group is likely to be mainly a result of the negative health impact of life circumstances ensuing from educational disadvantage.

There is a strong association between disability and educational achievement for young adults. Among people with a disability aged 18 to 34, well over half were affected by their disability before finishing school or college. Over one third of young adults (aged 25 to 29) with a disability left school before completing second level compared to one in six of young adults with no disability. Among older adults with a disability, the disability was less likely to have affected them during their school years. Nevertheless over half of adults with a disability aged 60-64 have primary education or less, compared to 38 per cent of people without a disability.

Census figures indicate that people with a disability are only half as likely to be at work as the general population between the ages of 25 and 64. Among people with a disability, those with intellectual and learning disabilities are most likely to be at work and those with a pain disability are least likely to be at work. (FIG 2)

Figure 2: Principal Economic Status for All Adults and for Adults with a Disability by Type of Disability (adults aged 25 to 64, percentages)



Over one third of people with a disability who are not at work would be interested in a job if the circumstances were right. The figure rises to two thirds for young adults with a disability. Those at work or interested in work most often identified aspects of the organisation of work, such as flexible working arrangements (45 per cent) or modified job tasks (29 per cent) as important in enabling them to work.

Data from SILC shows that those who are limited in their daily activities and those experiencing chronic health problems are at a higher risk of income poverty and of being unable to afford basic goods and services. (TAB 1)

Table 1: 'At-risk-of-poverty' rate and consistent poverty rate for adults aged 16 and over in 2009 by disability status (percentages)

| | Chronic il health p | | Limited activity in last 6 months | | |
|-------------------------|------------------------|------|-----------------------------------|---------|---------------------|
| | No | Yes | Not Limited | Limited | Strongly Limited |
| At-risk of poverty rate | 12.5 | 15.2 | 12.5 | 15.2 | 17.8 |
| Consistent poverty rate | 4.4 | 5.5 | 4.3 | 5.5 | 7.8 |

Apart from reduced opportunities to earn income, the living standards of people with a disability are also affected by costs associated with the disability itself, such as health care, assistance, aids and devices.

A recent study suggests that the estimated long-run cost of disability is about one third of an average weekly income.¹

Social relationships and attitudes

People with a disability are less likely to marry. According to the 2006 Census, about half of the general population aged 25 to 44 is married, compared to just over one third of people with a disability. The gap widens further for those in the 45 to 64 year age group (72 per cent of the general population and 57 per cent of people with a disability are married).

Women with a disability tend to be older, on average, than men with a disability, and older adults are more likely to live alone or in communal establishments. One in five women and about one in six men with a disability lives alone. Women with a disability are also more likely than men to live in communal establishments (12 per cent vs. 9 per cent).

Adult women with a disability are somewhat more likely than men to receive help with everyday activities. The proportion receiving help with everyday activities rises slowly with age, reaching over three quarters of women and two thirds of men aged 75 and over.

The study examines the use of specific services by people with a disability: day care, respite services, meal or drop-in services, supported housing and long-stay residential care. Overall, 13 per cent of people with a disability used one or more of these services. The care services with the greatest level of usage were day care on less than five days a week (5 per cent); respite services (4 per cent); or day care on five or more days a week (4 per cent). Eight per cent of people with a disability in private households needed, but did not use, some of these care services. The service which people needed most often was respite care (3.7 per cent).

In general, the attitudes of other people do not stop people with a disability from doing things they would otherwise do. Almost one in seven 'frequently' or 'always' avoids doing things because of the attitudes of other people. The proportion falls with age, however. These attitudes tend to be more of an issue for young adults, particularly for men with a disability in the 35 to 44 age group.

People with a disability are more likely than non-disabled adults to report discrimination. An analysis of 2004 data found that nearly one in five people with a disability, compared to one in eight of the general population, reported discrimination.² People with a disability were even more likely to report discrimination in relation to accessing health services or in using transport services.

Most people with a disability in all age groups participate in social activities. Participation is slightly higher among women (96 per cent) than among men (95 per cent) and is slightly higher for younger adults. Among younger adults, men are more likely than women not to participate in any social activities, particularly in the 35 to 54 age group (5 to 6 per cent).

People with a disability are less likely than the general population to have participated in sports or physical exercise (38 per cent compared to 67 per cent of people without a disability). The NDS also shows that men and younger adults with a disability are more likely to participate in sports than are women and older adults with a disability.

Physical environment and transport

Women are more likely than men to report difficulty in performing routine tasks in the home. The percentages increase with age for both women and men. About 39 per cent of women in the 18 to 34 age groups have at least some difficulty. This compares to 70 per cent of women aged 75 and over. The corresponding figures for men are 27 and 59 per cent, respectively.

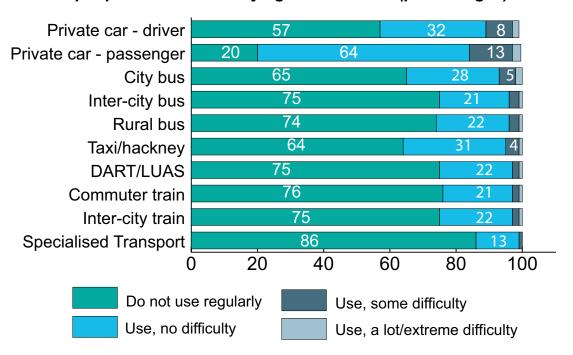
About one quarter of people with disabilities need and use specialised features around the home. Bathroom modifications are needed most frequently (one in five). However, over one in five people with a disability need modifications within the home but do not have them. The most common reason for this is that they do not have the money or are not eligible for a

grant. Fewer than 10 per cent ever received a grant for house adaptations.

Most access problems outside the home arise in three areas: when socialising in public venues, availing of general services, or moving about in the local area (36 to 37 per cent). Women are more likely to have access difficulties than men and the gap widens with age.

In terms of transport, what is striking is the level of non-use of the different modes by people with a disability, rather than the proportions who use each mode with difficulty. (FIG 3) The mode of transport used most often by people with a disability is the car, as a passenger. About 8 out of 10 people with a disability use this mode regularly. Over 6 in 10 have no difficulty as a car passenger.

Figure 3 Use and level of difficulty of different modes of transport for people with a disability aged 5 and over (percentages)



Among adults with a disability, less than half regularly drive a car, about one third do so with no difficulty and 8 per cent do so with some difficulty. Almost one person in four with a disability either does not use or has a difficulty using public transport for accessibility reasons. These include getting on or off, transferring between services, getting to the stop or station, and the availability of public transport in the area.

A similar proportion experience barriers due to service-related reasons. These include needing someone to accompany the person with a disability, overcrowding and cost. Just under one person in ten with a disability does not use or has difficulty using public transport for information-related reasons. These include difficulty in hearing announcements or seeing signs.

Policy implications

As the population ages, there is likely to be an increase in the prevalence of disability. This will heighten the challenge of facilitating the full participation of people with disabilities in social life.

The challenge for society and the educational system is to adapt to the needs of children and young people with a disability and to accept their differences, while enabling them to maximise their achievements.

Job design – including flexible hours and modification of tasks – is very important to the participation of people with a disability in work.

Since many people with a disability do not marry or have lost a partner, their need for social involvement is likely to be greater. Meeting the needs of people with disabilities is not just about help with everyday activities. It is also about companionship and social contact.

In terms of the physical environment, there is scope for either additional help or physical modifications to improve access in the home. Outside the home, there is scope for improvements in access to public venues, general services and moving about in the locality, and also in access to medical services.

Improvements to the accessibility of public transport or services, more generally, could benefit up to one in four people with a disability. Accessibility issues include getting on or off; transferring between services; getting to the stop or station; and the availability of public transport in the area. Such improvements could also benefit general users of these services.

Further research using the NDS is possible in a number of areas, including the reciprocal relationship between disadvantage (educational and labour market) and disability and the link between living arrangements and care or assistance.

Footnotes

- ¹ Cullinan, J., Gannon, B. and Lyons, S (2010), 'Estimating the extra cost of living for people with disabilities', *Health Economics*, published online June 2010; doi: 10.1002/hec.1619
- ² Russell, H., Quinn, E., King O'Riain, R and McGinnity, F. (2008), *The Experience of Discrimination in Ireland: Analysis of the QNHS Equality Module*, Dublin: ESRI and Equality Authority
- ³ 'At-risk-of-poverty' means that household income, including all social transfers, is below 60 per cent of the median equivalised household income. 'Consistent poverty' means the household is below 60 per cent of median equivalised income and lacking two or more of 11 basic deprivation items.

The Social Inclusion Division of the Department of Social Protection commissioned this research report from ESRI, to support the implementation of the National Action Plan for Social Inclusion 2007-2016. The report the fifth social portrait of the lifecycle groups identified in the plan, the others being children, people of working age, older people and communities.

The report is jointly published by the Department and the ESRI, as part of the Social Inclusion Research Report series. The authors are solely responsible for the views expressed and for the accuracy of the research. The views are not attributable to the ESRI, which does not itself take institutional policy positions, nor to the Department. The contributions of various stakeholders on earlier drafts of the report are acknowledged.

Department of Social Protection and the Economic and Social Research Institute