

Bulletin

Institute for
Employment
Research

THE INCIDENCE OF DISABILITY

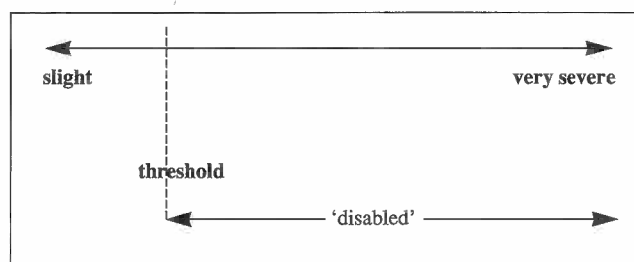
The Employment Department runs a full range of training programmes and initiatives, delivered through a network of TECs in England and Wales (LECs in Scotland). Under their operating agreements all TECs are obliged to make provision for individuals with special training needs – including people with disabilities, those with needs for basic literacy/numeracy support, and people with special language needs (notably English for speakers of other languages). In this Bulletin some information from key data sources on one of these groups – the disabled – is presented.

Definition and measurement of disability

Estimates of the numbers of disabled and the incidence of disability among the population vary depending on the definitions adopted, and the scope and coverage of the statistical source used. There is no single, most appropriate definition of disability for use in all circumstances. Indeed, it is misleading to think of people as either disabled or not disabled. It is more helpful to think of disability along a continuum from slight to very severe disability – with the definition of disability being determined by where on the continuum the threshold level is set above which people are included as 'disabled' (as indicated in Figure 1).

The International Classification of Impairments, Disabilities and Handicaps (ICIDH) distinguishes between impairment, disability and handicap (see Box 1 for definitions). These disability-related concepts are often used interchangeably or inconsistently, thus leading to confusion.

Figure 1
The Continuum of Severity of Disability



Perhaps it is most useful to conceptualise the definitions of disability and their coverage in the way outlined in Figure 2. The third panel of the diagram shows that for those with disabilities distinctions may be made between disabilities which restrict activity, job-limiting disabilities, long-standing health problems and the registered disabled; (different data sources adopt different definitions). These groups are overlapping rather than coincident; hence, the different estimates of the prevalence of disability derived using different data sources. Those with disabilities are a sub-set of those with health problems (see second panel of diagram). For those with health problems a distinction may be made between self-reported problems and medically assessed problems: again, the groups are overlapping rather than coincident. Those with health problems are in turn a sub-set of the population as a whole (see first panel of diagram). From an employment and training perspective the main interest is in that portion of the population of working age.

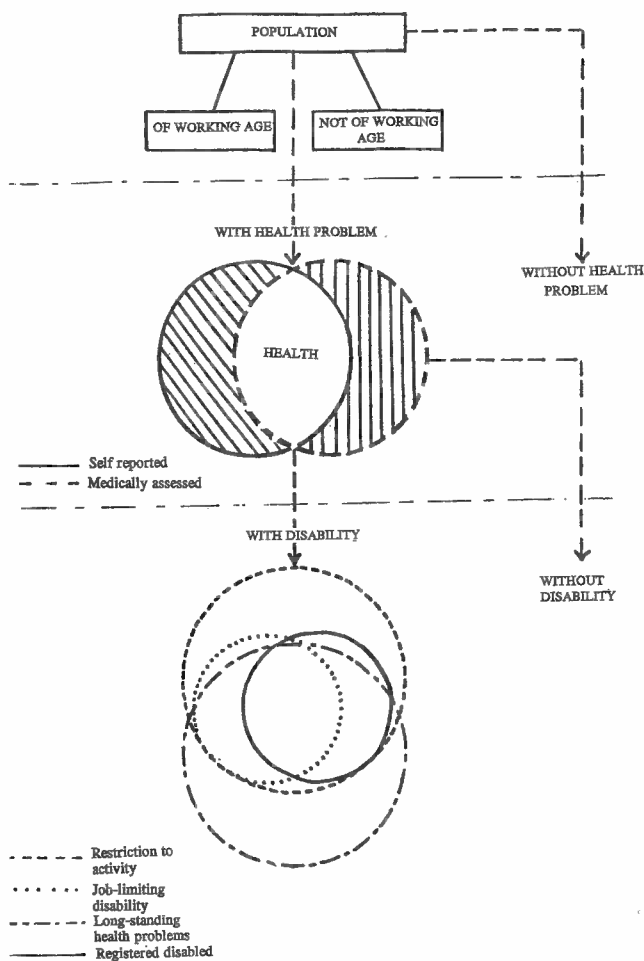
Box 1: Definitions of impairment, disability and handicap

impairment: any loss or abnormality of psychological, physiological or anatomical structure or function (i.e. this deals with parts or systems of the body that do not work);

disability: any restriction or lack (resulting from impairment) of ability to perform an activity in the manner or within the range considered normal for a human being (i.e. this deals with things people cannot do);

handicap: a disadvantage for a given individual, resulting from an impairment or disability, that limits or prevents the fulfilment of a role (depending on age, sex, and social and cultural factors) for that individual (i.e. this is in relation to a particular environment and relationships with other people).

Figure 2
Disability: Definition and Coverage



Data sources for measuring prevalence of disability

There are a number of data sources including information on disability. Key facts on the numbers and prevalence of disability from some of the major 'official' sources are outlined below, while details of the scope and coverage of the information sources are summarised in Box 2.

OPCS surveys of disability in Great Britain

According to the OPCS surveys of disability (using the ICIDH definition of disability) undertaken in the late 1980s it is estimated that there are 6.2 million disabled adults in Great Britain (14.2 per cent of the adult population). There are fewer people in the higher severity categories than the lower severity categories: 210 thousand adults suffered the most severe level of disability (category 10), compared with 1.2 million in category 1 (least severe disability). The numbers of disabled increase with age, both in total and in each severity category. Of the 6.2 million disabled adults, 3.3 million are aged 16-59 years.

At the sub-national scale, the absolute number of disabled would be expected to vary by area in line with population size, so prevalence rates are of greater interest. In order to take account of inter-area differences in the age structure of the population rates of disability may be standardised for age. Table 1 shows both standardised and unadjusted prevalence rates, along with estimates of the numbers of disabled adults in private households by region. The Northern region and Wales exhibit the highest prevalence of disability, while London, the South East and East Anglia display the lowest.

Table 1: Estimates of numbers of disabled adults in private households by region

Region	Rate per 1000 (standardised by age)	Rate per 1000 (unadjusted)	Disabled adults ('000s)
North	162	162	389
Wales	160	164	359
Yorkshire & Humberside	148	148	566
GREAT BRITAIN	135	135	5,780
West Midlands	131	128	541
Scotland	131	147	587
North West	131	130	644
East Midlands	131	128	387
South West	124	135	480
East Anglia	123	127	194
South East	123	124	1,007
London	119	117	628

Source: OPCS Disability Survey, adapted from Martin *et al.* (1988)

Box 2: Scope and features of major 'official' sources of information on disability

OPCS surveys of disability in Great Britain

Timing: between 1985 and 1988 OPCS carried out four separate surveys

Purpose: to provide up-to-date information about the number of disabled people in Great Britain with different levels of severity and their circumstances for the purposes of planning benefits and services

Scope: detailed information about severity and types of disability, as well as use of health and social services, social activities and employment position

Spatial disaggregation: regional scale

Employment and Handicap survey

Timing: undertaken by Social and Community Planning Research on behalf of the Employment Service in 1989

Purpose: to estimate the size and regional distribution of people registrable under the Disabled Persons (Employment) Act (1944) (for further details see Box 3), to provide estimates of the number of people eligible for sheltered employment, and to provide information which would permit an assessment of the effectiveness of current provisions for disabled persons

Methodology: a two-stage methodology was employed:

- i. a representative sample of 40 thousand private households was selected, and a short sift interview was carried out
- ii. full interviews were undertaken with anyone found to be of working age, economically active and having a health or disability problem that might lead to an occupational handicap, (there were 1,446 such interviews)

Spatial disaggregation: regional scale

General Household Survey

Timing: an annual survey of approximately 10,000 households.

Purpose: to derive information on a wide range of social and economic circumstances of households – including disability: estimates of disability are derived from answers to two questions:

- i. do you have any long-standing illness, disability or infirmity? (by long-standing I mean anything that has troubled you over a period of time or that is likely to affect you over a period of time)
- ii. does this illness or disability limit your activities in any way? (question 'ii.' is asked only if the first question is answered positively; those answering "Yes" to both questions are included in estimates of the disabled)

Spatial disaggregation: regional scale

Labour Force Survey

Timing: conducted quarterly since 1992 (previously annual)

Purpose: to collect information on economic activity, employment, occupation, unemployment, education, training and individual characteristics – a series of questions are included (in the Summer and Winter quarters only) about health problems and disabilities which limit the kind of work individuals can do, and the nature of such health disability problems (see Box 4 for a list of the types of problems identified)

Spatial disaggregation: regional scale (for disability information)

1991 Census of Population

Timing: decennial

Purpose: to collect information on the demographic, economic and social structure of the population – including (for the first time a question on "limiting long-term illness": does the person have any long-term illness, health problem or handicap which limits his/her daily activities or the work he/she can do? (the question was intended to provide general information on the incidence of morbidity, rather than being concerned with specific illnesses, health problems, handicaps or disabilities)

Spatial disaggregation: Local Base Statistics – ward scale; wards can be aggregated to other areas – including TEC areas

Box 3: Registrable disability

The 1944 Disabled Persons (Employment) Act defines a “disabled person” as a person who, on account of injury, disease or congenital deformity, is substantially handicapped in obtaining or keeping employment, or in undertaking work on his/her own account, of a kind which apart from that injury, disease or deformity would be suited to his/her age, experience and qualification. The Act established the Register of Disabled Persons.

Box 4: Types of work-limiting health or disability problems identified in the Labour Force Survey

- Problems or disability connected with arms, legs, hands, feet, back or neck (including arthritis or rheumatism)
- Difficulty in seeing
- Difficulty in hearing
- Skin conditions, allergies
- Chest or breathing problems, asthma, bronchitis
- Heart, blood pressure or blood circulation problems
- Stomach, liver, kidney or digestive problems
- Diabetes
- Depression, bad nerves
- Epilepsy
- Other health problems or disabilities

Employment and Handicap survey

This survey, undertaken in 1989, estimated that there were 1.27 million people in Great Britain who were economically active and occupationally handicapped, of whom 987 thousand were in work. Using the survey data, 3.1 per cent of the working age population were judged to be registrable under the terms of the 1944 Disabled Persons (Employment) Act.

Due to the large costs involved in conducting surveys such as the OPCS disability surveys and the Employment and Handicap Survey, as well as competing pressures on available resources, there are no plans for repeat surveys at the current time. Hence, researchers and labour market analysts are reliant on information from other sources for a more up-to-date picture.

General Household Survey

According to General Household Survey (GHS) estimates approximately 8.7 million people have a limiting long-term illness – compared with 6.2 million in the OPCS Disability Surveys. For those aged 16-59 years in private households in 1985, the prevalence of long-standing disability by age was 139 per thousand, compared with 58 per thousand in the OPCS Disability Surveys. This larger estimate of disability in the GHS was to be expected because of the broader scope of the question.

Labour Force Survey

Estimates from the 1992 Labour Force Survey (LFS) suggest that there are 4.7 million people of working age

with a health problem or disability which limits the kind of work they can do. Of the types of problems (identified in Box 4), musculo-skeletal and similar problems are the most prevalent, followed by respiratory and circulatory problems.

For the labour market analyst the LFS is a useful information source because of the potential for cross-tabulating information on the experiences of people with disabilities in the labour market, their education and training, and their regional distribution, by age and gender.

Figure 3
Limiting long-term illness –
age structure: Great Britain

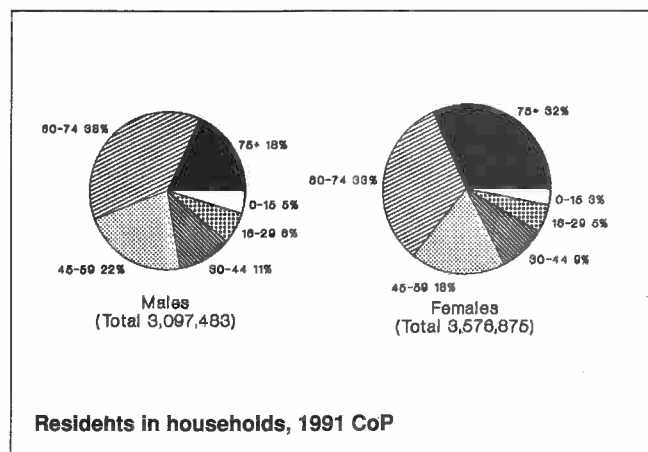
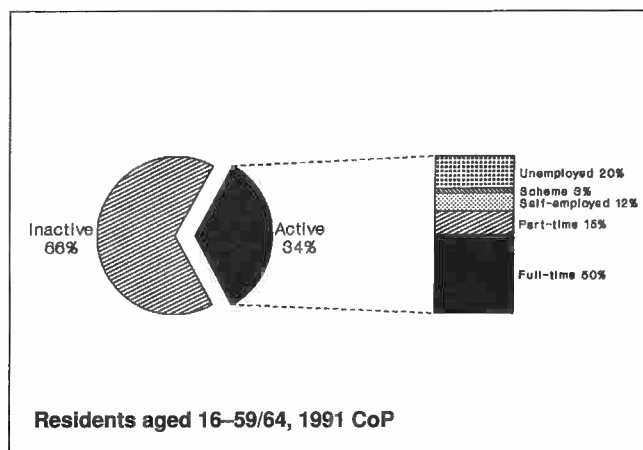


Figure 4
Limiting long-term illness –
economic position: Great Britain



1991 Census of Population

Overall, 6.7 million people in Great Britain are recorded in the 1991 Census of Population as suffering limiting long-term illness, of whom 2.4 million (36 per cent) are aged 16-59 years. The incidence of disability tends to increase with age. Overall, 60 per cent of those suffering limiting long-term illness are aged over 60. Figure 3 shows the distribution of limiting long-term illness by age for males and females, and reveals that nearly a third of females suffering limiting long-term illness are aged 75 and over (there are more older women than older men in the population). In the working age groups, the majority of those with limiting long-term illness are aged 45 and over.

Figure 4 shows the economic position and employment status of those aged between 16 and pensionable age suffering limiting long-term illness. Clearly, only a minority (about a third) of those with limiting long-term illness are economically active. Of those who are economically active, more are unemployed than the population as a whole. This underlines the labour market disadvantage of the disabled (which can be examined in greater detail using LFS data).

The key advantage of the Census of Population compared with other sources is that it provides information at the local scale. Across the 82 TECs in England and Wales, the economic activity rate for those of working age suffering limiting long-term illness ranges from 18.9 per cent in Mid Glamorgan to 48.1 per cent in the area covered by Thames Valley Enterprise. Table 2 provides a more detailed employment status breakdown for these two TEC areas. In both TEC areas just over half of the economically active are full-time employees. In Mid Glamorgan four out of five of those suffering limiting long-term illness are economically inactive, and only three in four of those who are economically active are in employment.

Assessment

This Bulletin has attempted to provide an introductory insight into some of the issues relating to the measurement of, and some of the data sources providing information on, disability. For local level information the 1991 Census of Population is the key data source, while there is considerable potential for analyses using the LFS to examine changing characteristics and trends over time.

Table 2: Long-term limiting illness by employment status
(economically active aged 16 to pensionable age)

Category	Mid Glamorgan	Thames Valley
Economically active	10,183 18.9%	19,473 48.1%
Full-time employees	5,359 52.6%	10,968 56.3%
Part-time employees	1,265 12.4%	3,030 15.6%
Self-employed	912 8.9%	2,454 12.6%
On government scheme	319 3.1	364 1.9%
Unemployed	2,328 22.9%	2,657 13.6%
Inactive	43,826 89.1%	20,973 51.9%

Source: Local Base Statistics, 1991 Census of Population, Crown Copyright.

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