



# Disability prevalence and disability-related employment gaps in the UK 1998–2012: Different trends in different surveys?



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## ABSTRACT

The persistently low employment rate among disabled individuals has been an enduring concern of governments across developed countries and has been the subject of a succession of policy initiatives, including labour market activation programmes, equality laws and welfare reform. A key indicator of progress is the trend in the disability-related employment gap, the percentage point difference between the employment rate for disabled and non-disabled individuals. Confusingly for the UK, studies undertaken between 1998 and 2012 have simultaneously reported both a widening and a narrowing of the gap. The source of the discrepancy can be found in the choice of survey, the General Household Survey (GHS) or the Labour Force Survey (LFS), although both use a common conception of disability and collect self-reported information from a random sample of households. The literature has analysed these surveys separately from each other and ignored inter-survey differences in findings. The Health Survey for England (HSE), a third national household survey, replicates the GHS questions on disability but has had limited use in this context. This empirical study compares the trends in disability prevalence and the disability-related employment gap across the three surveys using a three-stage harmonisation process. The negative relationship between the prevalence of disability and the employment gap found in cross-section inter-survey comparisons prompts an initial focus on differences in the definition of disability as an explanation of the discrepancy. This is broadened to include differences in survey methods and sample composition. Differences in the trend in disability prevalence and the employment gap remain following harmonisation for definition, survey method and sample composition. It is the LFS, the main policy-influencing and policy-assessment survey, which generates outlying results. As such, we cannot be confident that the disability-related employment gap has narrowed in the UK since 1998.

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## 1. Introduction

The employment of disabled individuals of working age is of long-standing interest in medicine (Bartley and Owen, 1996; Minton et al., 2012; Marmot, 2010; and Black, 2008) and across multiple social science disciplines (Colella and Bruyere, 2011: 473; and Schur et al., 2013: 4). Trends in the disability-related employment gap – the percentage point difference between the employment rate for disabled and non-disabled individuals – provides a key indicator of progress towards the inclusion of disabled people and provides the means to evaluate the successive efforts of

governments to increase the employment of disabled people (see Department for Work and Pensions (DWP), 2013: 15; and Schur et al., 2013: 222). Policy in the UK has focussed on labour market activation, welfare reform and legal intervention through equalities legislation. Examples of evaluation have included the impact of changes in eligibility and employment support within the main out-of-work disability benefit, Employment and Support Allowance (Grover and Piggott, 2013) as well as the UK Disability Discrimination Act (DDA) (Bell and Heitmueller, 2009; and Jones, 2006).

In contrast to consistent trends in employment gaps reported in US studies (Weathers and Wittenburg, 2009: 117), UK studies have reported conflicting trends. As Governments have celebrated success in raising employment rates for disabled groups (Black, 2008; DWP, 2013), especially when compared to other OECD countries (Schur et al., 2013: 38), influential authors (Berthoud, 2011; Minton

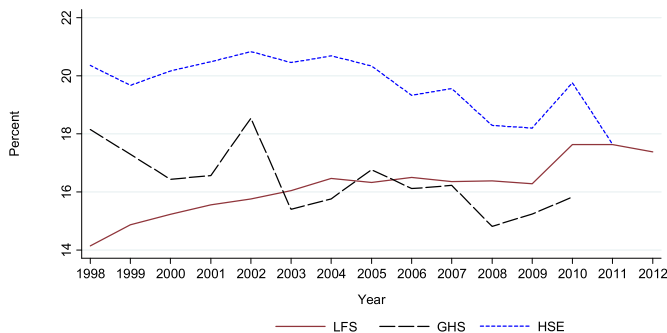
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et al., 2012; and Pope and Bambra, 2005) have provided contrasting evidence. The contradiction is related to choice of survey: studies based on the General Household Survey (GHS) report widening gaps whereas those based on the Labour Force Survey (LFS) consistently report narrowing ones. Both are official data collected and published by the Central Statistical Office for the UK, the Office for National Statistics. Despite this inconsistency in the literature, and the frequent use of both GHS and LFS data in research, no previous study has noted the divergence in trends or investigated its origins. As Hancock et al. (2013: 1) observe in relation to disability research, 'it is rare for [researchers] to investigate the robustness of their findings with respect to their choice of survey data'.

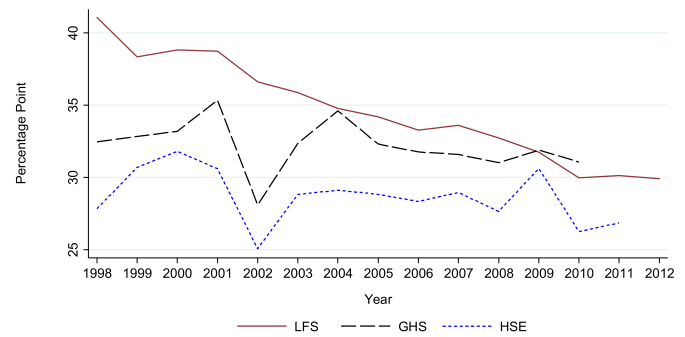
The few cross-survey comparisons that exist in the UK are limited to studies of cross-sections at a point in time. Blackaby et al. (1999) provided a first indication of differences between the GHS and LFS, with the employment gap greater in the LFS and attributed to differences in the definitions of disability between the surveys. Bajekal et al. (2004) extended the comparison to include five cross-sectional surveys in 2001, again concluding that differences in the measurement of disability were central to differences in disability prevalence and employment rates. It has been argued that the constraints imposed by inter-survey comparability should be less binding when looking at trends rather than levels. Weathers and Wittenburg (2009: 117) report consistent trends in prevalence rates and employment gaps across surveys for US data, even in the face of wide discrepancies in individual years, and conclude that 'findings for trends are not sensitive to disability conceptualisation'. The discrepancy in the trend in the disability-related employment gap reported for the UK therefore presents quite a puzzle, one which is explored here in the context of the impediments to inter-survey comparability in the field of disability research.

We select three cross-sectional data sources which have been fielded in a largely consistent manner over an extended period, namely the LFS (1998–2012), GHS (1998–2010) and the Health Survey for England (HSE) (1998–2011). The first two are included given their extensive use in the literature and the emergence of apparently contradictory trends. The latter is under-utilised in research on disability-related employment gaps but provides a useful benchmark in this comparative study. Each survey uses a well-known and widely-used definition of disability, long-standing illness or impairment which limits activity. Figs. 1 and 2, which we discuss in detail in Section 5, present trends in the prevalence of disability and the disability-related employment gap (1998–2012) and clearly illustrate the discrepancy between the surveys noted above, namely that the increasing prevalence of disability and declining employment gap evident in the LFS are not replicated in either of the other two surveys.



Notes: *Sample 1* contains all respondents of working age and are weighted. A discontinuity occurs in the LFS between 2009 and 2010. 2002 is observed as an outlier in the GHS although there is no reference to a discontinuity.

Fig. 1. LLSI Prevalence by Survey (*Sample 1*) (1998–2012).



Notes: See notes to Figure 1.

Fig. 2. LLSI Employment Gap by Survey (*Sample 1*) (1998–2012).

The cross-sectional literature outlined below identifies three potential explanations for inter-survey differences in disability prevalence and employment gaps, including definitions of disability (and employment), survey methods and sample composition. These explanations are used to construct our three-stage harmonisation process in the context of inter-survey differences in trends. This is followed by a concise review of previous single-survey trend-based studies on disability prevalence rates and employment gaps in the UK covering the period 1984–2012. Our analyses focus on the period from 1998 for which we have consistent and comparable disability definitions and where the trend in the disability-related employment gap shows the greatest divergence between surveys. We find that differences in trends in disability prevalence and the disability-related employment gap between the LFS and the GHS/HSE remain after harmonisation.

## 2. Inter-survey differences in measuring disability and employment

### 2.1. Defining disability and employment

The definition of disability is key to understanding differences in prevalence rates (Houtenville et al., 2009) and employment gaps (Weathers and Wittenburg, 2009). However, the appropriate definition will depend on the particular policy context or research question. Altman (2014: 148) uses a flow chart to demonstrate how additional questions put to those who have a long-standing illness/condition successively tighten the definition and reduce the prevalence rate. In a similar exercise, Burkhauser et al. (2014: 196) use the analogy of an archery target in which progressively smaller concentric rings represent tighter definitions and smaller population sub-sets. So, for example, the outer-ring may comprise those who identify a health condition or pathology (for example, glaucoma), of which those who report impairment (low vision) are a subset. Those identified as having functional difficulties (for example, unable to read regular-sized print) which arise from impairment are a smaller subset still. Those who have activity limitation (unable to read books, instructions etc. in regular-sized print) or participation limitations (unable to work in jobs which require reading regular-sized print) are a subset of those with functional impairment. For Altman (2014: 148), it is the limitation of activity or participation which defines disability and this arises from interactions between personal characteristics (including functional limitation) and environmental barriers and supports (for example, accommodation through job description and/or adjustment to equipment (in this case, vision aids)). Disability, with its

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