DISABILITY, SKILLS AND EMPLOYMENT

A review of recent statistics and literature on policy and initiatives

A project undertaken for the Equality and Human Rights Commission

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- age population with degree level qualifications Proportion of men with limiting long standing illness who are in work, by highest educational qualification 23 32
- Proportion of men without limiting long standing illness who are in 24 33 work, by highest educational qualification

Glossary of acronyms

AGCAS ASN BIS BME CREID CSP DCSF DDA DEA DIUS DOH DSA DWP EHRC ESA EU HESA HR IB IEP ILO JCP JSA LFS LLSI LSC MCMC NAS NDDP NEET NEP NMW ODI ONS PMSU RNID RON SEN SFA SIMD UN UKCES WAG	Association of Graduate Careers Advisory service Additional Support Needs Department for Business, Innovation and Skills Black and Minority Ethnic Centre for Research in Education, Inclusion and Diversity Co-ordinated Support Plan Department for Children, Schools and Families Disability Employment Adviser Department for Innovation, Universities & Skills Department of Health Disabled Students' Allowance Department for Work and Pensions Equality and Human Rights Commission Employment and Support Allowance European Union Higher Education Statistics Agency Human Resources Incapacity Benefit Individualised Educational Plan International Labour Office Jobcentre Plus Job Seeker's Allowance Labour Force Survey Limiting Longstanding Illness, disability or infirmity Learning and Skills Council More Choices More Chances National Apprenticeship Service New Deal for Disabled People Not in Education, Employment or Training National Equality Panel National Equality Panel National Equality Panel National Minimum Wage Office for Disability Issues Office of National Statistics Prime Minister's Strategy Unit Royal National Institute for Deaf people Record of Needs Special Educational Needs Skills Funding Agency Scottish Index of Multiple Deprivation United Nations United Kingdom Commission for Employment and Skills Welsh Assembly Government
UKCES	United Kingdom Commission for Employment and Skills
WLD YPLA	Work-Limiting Disability Young People's Learning Agency

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Executive Summary

The Equality and Human Rights Commission ('the Commission') recognises that many disabled people experience barriers in entering and succeeding in employment, and wishes to take a strategic and evidence-based approach to influencing policy and practice. The Centre for Research in Education, Inclusion and Diversity (CREID), University of Edinburgh was commissioned to review the current literature, statistics and debates, to inform the Commission's work aimed at narrowing the employment and skills gap between disabled and non-disabled people.

Recent years have brought some encouraging legislation for disabled people: the Disability Discrimination Acts (1995 & 2005), the ratification of the UN Convention on the Rights of Persons with Disabilities (2009) and the establishment of the Office for Disability Issues (ODI). Nevertheless the National Equality Panel (NEP, 2010) found that employment rates for disabled people were still less than half those of non-disabled people. Change has also characterised employment policy for disabled people, both in terms of benefits for those who cannot work and support for those who wish to work. Important features include the *New Deal for Disabled People* (NDDP), the introduction of the Employment and Support Allowance (ESA) with the requirement of a Work Capability Assessment (WCA) and sanctions for those who do not attend WCA and other interviews; increased personal help through *Pathways to Work* and a range of specialist support and programmes.

The report has two main strands: statistics and literature review. Chapter 2 provides statistical information and Chapters 3-5 give a review of recent policy and practice and related literature, with conclusions in Chapter 6. The report is based primarily on desk research, but has been enriched by a series of interviews with ten key informants who work closely with disabled people, whose insights have influenced our approach to the literature review.

In **Chapter 2**, analysis of statistics demonstrated that, overall, disabled people have much lower employment rates and are more likely to be economically inactive than non-disabled people. There has, however, been a slight improvement in employment rates over recent years, coupled with a decline in the proportion of people claiming Incapacity Benefit (IB)/ESA. There are important intersections between area deprivation and disability benefits status, with a high proportion of men in areas of long term industrial decline claiming IB/ESA. Educational qualifications appear to be of critical importance to disabled people in terms of influencing future life chances. Data on qualifications, educational outcomes and skills all show a disadvantage for those disabled at an early age. Across Great Britain, pupils with special needs achieve fewer qualifications than those with no special needs and pupils in more deprived areas in England and Scotland are more likely to be identified as having additional needs but less access to targeted support. They are also more likely to have other types of social disadvantage, such as being looked after by the local authority.

Disabled undergraduate students supported by the Disabled Student Allowance are least likely to drop out, whilst disabled students lacking such support are most likely to drop out. Those that graduate achieve similar degree and labour market outcomes overall compared with those of nondisabled students. However, there are considerable differences in labour market outcomes depending on impairment. Graduates with dyslexia (by far the largest group) have employment rates close to those of non disabled students; those with mental health difficulties or those who are mobility impaired/wheelchair users have the lowest employment rates.

Disabled people with no qualifications fare particularly badly in the labour market and their position has worsened in the period 1974 to 2003. Clearly, there are important intersections between social class, disability and gender with regard to educational and employment outcomes. Disabled HE students are significantly more likely to be male and from middle class backgrounds than non-disabled students,

There are concerns about the impact of the recession on disabled people, since previous recessions have affected this group particularly badly. Recent analysis conducted by the Government Equalities Office (2009) suggested that disabled people have so far not been affected more adversely than non-disabled people, possibly as a result of the protective effect of anti-discrimination legislation. However, it was also noted that disabled people may be more vulnerable to future job losses should the economy be slow to recover.

In **Chapter 3**, we note how responsibilities for equality, employment and skills are shared between Westminster and the devolved administrations. The Disability Discrimination Acts (1995 & 2005) cover England, Scotland and Wales: the power to pass equality legislation is reserved to Westminster, but the Scottish Government and the Welsh Assembly Government have a duty to encourage equal opportunities and meet the requirements of equality law. Some aspects of responsibility for skills, training and local economic development are devolved to Scotland, Wales and the English regions. The skills and training framework is extremely complicated, making cross-GB comparisons difficult. However, it is evident that disabled people's participation rates on some programmes are very low. For example, disabled young people make up only 0.23 per cent of trainees on the Skillseekers Programme in Scotland, and only 0.34 per cent of participants on Modern Apprenticeships and Adult Modern Apprenticeships (Edward *et al.*, 2008).

The provisions of the DDA (2005), with the Disability Equality Duty coming into force in 2006, the ratification by the UK Government in 2009 of the UN Convention on the Rights of Persons with Disabilities (UN, 2008), the cross-government report, *Improving the life chances of disabled people* (PMSU, 2005) and the establishment of the Office for Disability Issues all mark progress on the equality policy front.

Skills policies throughout Great Britain have been heavily influenced by the Leitch (2006) review, urging the development of higher level skills to ensure economic growth and competitiveness. The new UK Commission for Employment and Skills (UKCES) is supplemented by local Employment and Skills Boards, and local employment partnerships, with knowledge of local labour markets: but it has also called for a radical simplification of the skills landscape (UKCES, 2009b). Although the Leitch review acknowledges that some programmes, such as those for disabled adults with learning difficulties, cannot become 'demand-led', there is perhaps need for continuing vigilance to ensure that provision for higher level, economically valuable skills does not threaten provision for those who are disadvantaged in the labour market. The impact of the recent replacement of the Learning and Skills Council by the Young People's Learning Agency and the Skills Funding Agency cannot yet be fully assessed, but it will be important in future to ensure that training opportunities, especially apprenticeships, are equally available to disabled people. The Welsh Assembly Government and Skills Development Scotland have their own programmes of careers advice and skills development for disabled people moving into the labour market or to further training.

Chapter 4 opens with a broad review of employment policy in the last few years, including the introduction of ESA and related requirements, which appears to have been driven by the need for the UK to move closer to full employment, the belief that work is good for everyone, and the personalisation agenda, linked to conditionality. The aim to offer personalised support for disabled people to return to the workforce is linked to sanctions for those who do not co-operate. In the critical literature, tensions between the social inclusion agenda and the country's economic needs are highlighted. The concentration of interventions on the supply, rather than the demand side of the labour market, is also questioned, suggesting that there is a need for more engagement with employers in order to change their attitudes to employing disabled people. The influence of reports from Gregg (2008) on conditionality and from Black (2008) and the Marmot Review (DoH, 2010a) on links between employment and health policies is also noted.

We then review the roles, programmes and initiatives in place to put these policies into action. Evaluations suggest that these initiatives may be helpful in supporting disabled people to enter, or re-enter, the labour market, but also that DEAs and Personal Advisers in Jobcentre Plus may sometimes be constrained in their pivotal role of supporting and advising disabled people, acting as gatekeepers to *Pathways to Work* and other options available to customers. Literature about these initiatives also expresses concerns about increased conditionality and the privatisation of job placement services.

In **Chapter 5**, we discuss first the limitations of considering disabled people in groupings, despite the fact that some policy initiatives are targeted at specific groups. Bearing in mind that any group sharing the same medical diagnosis will contain very different individuals, with differences in their skill levels, experience, severity of illness or disability, levels of support and other factors which may affect their readiness to work, we then consider in turn two sets of groupings, by medical diagnosis and by age and stage of working life.

For the medical groupings, we first note the impact of the DDA 1995 and 2005 on employees with physical and sensory impairments, in terms of employer awareness of the requirement to accommodate their needs. We turn then to three groups who are severely disadvantaged in the labour market, for whom specific strategies have been developed. The Perkins *et al* (2009) review of employment support for people with mental health conditions makes important suggestions for improving support to enable those with fluctuating conditions to enter, and remain in employment, through, for example, building more effective links between DWP and health and social services and addressing misunderstandings among employers.

For people with learning disabilities, the cross-government strategy (DoH, 2009), *Valuing employment now*, also stresses the need to demonstrate to employers the value of employing people with learning difficulties; to improve support, especially for young people in transitions; and to encourage people with learning disabilities and the agencies who work with them to raise their expectations of the work they might do. The final group considered is adults with autism, who, as reported in the new DoH (2010b) strategy, *Fulfilling and rewarding lives*, may have been 'missing out because they don't fall into either the learning disability or mental health 'box' (2010b, p.19). Research suggests that people with autistic spectrum disorders may be particularly disadvantaged in finding even supported employment and may also suffer from the negative attitudes and low expectations of those who support them.

Finally, we review support strategies for three 'age and stage' groups. Young disabled people, leaving school and at risk of being not in education, employment or training, may be helped by policies in place to cover all potentially NEET groups, although they may need additional support to review their options and keep their expectations high. Preparation should begin while they are still in school, to avoid 'stalled transitions' (Weedon & Riddell, 2010). Disabled young people in higher education are supported by the introduction of the Disabled Students' Allowance, although some may discard their 'disabled' identities when they begin to seek employment, which makes it harder to track their subsequent career progress. We note, however, recent research (Sayce, 2009) into high-earning disabled employees, who cite mentoring and support from senior staff as factors which allowed them to progress. Our final example is of older people of working age who require support, understanding, adjustments and flexibility from their employer to remain in work after the onset of ill health or a progressive disease, or to return to the workforce after a prolonged absence.

Common themes across these groups include the importance of high expectations, both for disabled people and for those who support them; the need for good information about possible options, and appropriate transitional support when embarking on a new life phase, be it entry to university, taking on a new role in supported or open employment, or adapting to coping with the onset of a disabling disease while still trying to remain in employment. The last, and most important theme, is the need for understanding and flexibility from employers.

In Chapter 6, our conclusions discuss four key themes:

- the heterogeneous nature of the disabled population and the significance of intersectionality;
- the need for harmonisation of categories, since disabled people are defined differently by a range of agencies and for different administrative purposes;
- the importance of supporting disabled people through transitions;
- the need for joined-up working between agencies to maximise the impact of skills, employment, welfare and health policies.

We also highlight some tensions in employment policy, some of which might be lessened, if not removed, by better information for employers and Jobcentre Plus staff, both Advisers and their managers, about the benefits of employing disabled people and the flexibility and/or support they may need to cope with their conditions.

Future priorities for monitoring and research include the impact of new equality policy and legislation, especially the Equality Act 2010; social mobility and the position of disabled people; the aftermath of the recession and the public spending squeeze; and the impact of future tax and benefits policies.

1. Introduction

1.1 The project

One of the current priorities of the Equality and Human Rights Commission ('the Commission') is to work to create a fairer Britain, with equal life chances and access to services for all. The Commission recognises that many disabled people experience barriers in entering and succeeding in employment, and wishes to take a strategic and evidence-based approach to influencing policy and practice. The Centre for Research in Education, Inclusion and Diversity at the University of Edinburgh was therefore commissioned to review the current literature, statistics and debates, in order to inform the Commission's work aimed at narrowing the employment and skills gap between disabled and non-disabled people. In particular, we have been asked to consider:

- disabled people's employment rates and skill levels
- the legislative and policy framework in England, Wales and Scotland
- the position of specific groups of disabled people in the three countries, including young disabled people not in education, employment or training (the NEET group), people with sensory impairments, physical impairments, mental health problems and learning difficulties, and older disabled workers
- disabled people's current access to the professions and seniority in employment
- current pay gap figures and related factors which may affect disabled people's pay and progression
- issues of intersectionality between disability and other equality strands or factors such as race, parental status or age.

Our brief was to concentrate on the statistics, policy documents and related literature, to minimise overlap with another piece of forthcoming research commissioned simultaneously by the Commission, by Sally Neville and a team at Office for Public Management, *Working better for disabled people: a review of the aspirations, experiences, barriers and solutions for improving labour market opportunities for disabled people.* That report will focus on the perspectives of disabled people, as part of the Commission's *Working Better* project, which has also included reviews of the needs of parents, carers, young people and older workers, exploring how the needs of these employees can be matched creatively with the needs of employers.

1.2 Trends in equality legislation

The last fifteen years have brought many changes to legislation with the potential to improve the position of disabled people. The Disability Discrimination Act (DDA) 1995 sought to eliminate discrimination, and has been extended, notably by the DDA 2005, giving disabled people additional rights in their employment and education and placing duties on their employers and educational institutions. The UK Government has ratified the UN Convention on the Rights of Persons with Disabilities (2009). Four Government departments - Work and Pensions, Health, Education and Skills and the Office of the Deputy Prime Minister - collaborated on a strategy for *Improving the life chances of disabled people* (PMSU, 2005), establishing the Office for Disability Issues (ODI), within the Department of Work and Pensions and working towards achieving the vision that

by 2025, disabled people in Britain should have full opportunities and choices to improve their quality of life and will be respected and included as equal members of society.

(PMSU, 2005, p.7)

The ODI is taking that work forward with its Roadmap 2025 (ODI, 2009b). Moreover, since 2006, the Disability Equality Duty now obliges public bodies to produce Disability Equality Schemes and Action Plans, and requires government ministers to report on progress in the areas for which they are responsible towards equality of opportunity between disabled persons and other persons, both their staff and their customers. In short, as will be discussed more fully in Chapter 3, many organisations have been required to reconsider their approach to working with disabled people, and to produce evidence of their practice.

But has the position of disabled people improved? Meager & Hill (2005) analysed secondary data sources, including the Labour Force Survey (LFS), and demonstrated that disabled people are disadvantaged in the labour market, with a higher probability than non-disabled people of not being in work at all, and, if they are in work, having jobs which are less stable and lower paid. The report of the National Equality Panel (NEP, 2010) found that employment rates for disabled people were less than half those of non-disabled people, with median hourly wages 20 per cent lower for men and 12 percent lower for women. They concluded that the disability 'penalty' had grown over the last 25 years, particularly for those with low or no qualifications.

1.3 Trends in employment and benefits legislation

Change has also characterised the provision of support for disabled people of working age, both in terms of benefits for those who cannot work and of support for those who wish to work. The complexity of the motives for these changes will be discussed more fully later: here we note simply that they can be seen as part of the social inclusion agenda, seeking to improve the employment chances of disabled people and combating poverty, and also as part of the drive to raise the overall employment rate in the UK and to reduce the level of public expenditure on social benefits. Developed at a time when unemployment rates were falling, and there was a potential need for a 'reserve army of labour' (Grover & Piggott, 2005), the changes have continued to roll out despite the recession which began in 2008. The policies and individual programmes will be discussed in more detail in Chapter 4, but in outline, the new structures affecting disabled people include:

- New Deal for Disabled People (NDDP), introduced in July 2001. Largely provided by the voluntary and private sector, NDDP gives access to job-broking advice and support to Incapacity Benefit (IB) and subsequently Employment and Support Allowance (ESA) claimants and other disabled people looking to re-enter the labour market (DWP, 2008d)
- ESA (DWP, 2009b), which was introduced to replace IB and Income Support paid on incapacity grounds in October 2008. All new claimants will have a Work Capability Assessment (WCA) by an approved healthcare professional (doctor or nurse) and those currently on benefits are to be assessed as the programme rolls out (DWP, 2009a);
- applying sanctions to those who do not attend the WCA (unless exempted), or other interviews and transferring those who are assessed as capable of work to Job Seekers' Allowance (JSA) or other benefits;
- increasing personal help through *Pathways to Work*, a programme providing a single gateway to a range of support and advice with a personal adviser helping each individual consider their options and needs and increasing health support for those on JSA;
- offering a range of specialist support, including Access to Work, Disability Employment Advisers, Workstep and Work Preparation, for people with mental health conditions, learning disabilities or multiple disadvantages, including a network of mental health co-ordinators in JobCentre Plus to co-ordinate mental health and employment support for individuals and help employment providers. To simplify and streamline support, Work Choice will replace Workstep, Work Preparation and the Job Introduction Scheme, from October 2010.

1.4 Definitions of disability

One of the major problems in any discussion of disabled people and their skills and employment is defining the disabled population for consideration. Disability is defined in *Improving the life chances of disabled people* (PMSU, 2005) as

disadvantage experienced by an individual resulting from barriers to independent living, or educational, employment or other opportunities that impact on people with impairments and/or ill health.

(PMSU, 2005, p.8)

This broad definition takes account of the social model of disability (Barnes, 1991; Oliver 1996) and acknowledges that barriers may be attitudinal, policy, or physical. There are, however, many other ways in which disabled people are defined, both for statistical purposes and when being assessed for state benefits.

Bajekal *et al.* (2004) highlight the difficulties in even trying to identify how many disabled people there are in the UK, with published survey estimates ranging from 8.6 million to 11 million. They conclude that 'much of this variation arises from differences in the definitions of disability being used, the age range of the populations to which they apply (working age, all adults or total population), or differences in how definitions are operationalised in surveys' (2004, p.2). Three main types of definition are identified: self-reported limiting longstanding illness, disability or infirmity (LLSI); work-limiting disability (WLD), which may be revealed by asking a person what they might or could do; and the definition from the DDA (1995) 'a physical or mental impairment which has a substantial and long-term adverse effect on (a person's) ability to carry out normal day to day activities'.

Self-reporting of disability raises further problems, in that older people may see their difficulties as a factor of age, rather than disability, and fears about the social costs of identification may inhibit some responses. Research on the Disability Equality Schemes and annual reports of public bodies in Scotland (Edward et al., 2008) revealed that many employers suspected that their statistics of disabled staff were too low, because of reluctance to disclose an impairment, particularly mental health difficulties. Equality Forward (2007) used interviews with disabled staff in colleges and universities to explore ways in which social stigma about disability is reflected or challenged. Staff may have felt that they had much to lose by disclosure, and nothing to gain. Conversely, and still in a higher education setting, Fuller et al. (2009a) found students who were willing to disclose their disability while at University in order to receive additional support, but chose not to disclose to a subsequent employer. Morris & Turnbull (2007) describe similar behaviour among nurses with dyslexia who chose not to confide in their line managers. Any study of disability and employment is therefore complicated, not only by the plethora of possible definitions of disability, but also by the impossibility of collecting accurate statistics, if people with an unseen disability choose not to disclose it. Conversely, benefit claimants who disclose a disability may find that selfdefinition is challenged by a nurse or doctor employed by the DWP to carry out a Work Capability Assessment.

Finally, Macpherson & Bond (2009) warn against the dangers of simply counting disabled people and their conditions, noting that current data do not tell us about the impact on individuals of acquiring a health condition or impairment, and its effect on their ability to sustain or return to employment:

The focus in much analysis tends to be on disability as a stagnant and unchanging condition, while the evidence tells us that impairment /ill health is something that affects people differently at different times.

(Macpherson & Bond, 2009, p. 71)

They argue that research should engage with disability and age as interrelated issues.

1.5 Methods

This report has two main strands. First, we consider the statistics. Chapter 2 provides statistical information in relation to disability and employment for men and women of working age, including an overview of the prevalence of disability, key labour market statistics and statistics on uptake of welfare benefits. School leavers' qualifications and outcomes, outcomes for disabled graduates and skills in the working age population are also examined.

In the later chapters, we review the literature on recent policy and practice. Chapter 3 reviews policy developments on the equality and skills of disabled people; Chapter 4 focuses on employment policy and the structures of benefits available to those who are not in work, including not only the official documents, but also recent academic literature on disabled people and employment, and initiatives, both national and local, which have been designed to put these policies into action. In Chapter 5, we consider some specific groupings of disabled people for whom policies or initiatives have been designed. These groupings necessarily overlap, and we cannot claim that the list is comprehensive, but we have tried to take into consideration:

- some groups defined by their main impairment, seen or unseen, e.g. learning difficulties, sensory impairments, mental health difficulties, mobility difficulties, and the support available to them.
- disabled people who are in employment; those who are not in employment, but hope to work again; and those who do not expect to be able to work again;
- young people not in education, employment or training (the NEET group) and the assistance available to support their skill development and transition into adulthood;
- disabled people in further or higher education and their transition into, and progress within, the workforce;
- older people in poor health who may or may not aspire to return to the workforce, but may face barriers to further employment;

In Chapter 6, we attempt to draw together the findings, and to suggest what might inform the future focus of strategy on employment and disabled people.

In addition to desk research, we undertook a series of telephone interviews with ten key informants who work closely with disabled people, investigating their current concerns about the direction of policy or its implications for disabled people. Their insights have influenced our approach to the literature review and our findings, and references to key informants' perspectives have been incorporated throughout the report.

2. Disability and employment statistics

This chapter provides statistical information in relation to disability and employment. We begin by providing an overview of prevalence of disability in the working age population by region, followed by key labour market statistics: employment rate; unemployment rate; economic activity rate; and economic inactivity rate. Duration of work, levels of pay and access to high level employment are then considered, as is uptake of key welfare benefits by region, with particular reference to Incapacity Benefit (IB) and Employment and Support Allowance (ESA)¹. The educational outcomes of school leavers with special educational needs (SEN) in England and Wales and additional support needs (ASN) in Scotland are presented. In the final section, outcomes for disabled graduates and skill levels in the working age disabled population are examined.

The key labour market statistics are drawn from Labour Force Survey (LFS) data accessed through Nomis, a web-based database of labour market statistics run by the University of Durham on behalf of the Office for National Statistics (ONS). Wherever possible, regional data are presented. Other data come from the Office for Disability Issues (ODI), the National Equality Panel report (NEP, 2010), the Welsh and Scottish Government statistical websites and the Association of Graduate Careers Advisory Service (AGCAS). In some cases, these data are derived from the LFS. Where the term 'working age population' is used, it refers to men aged 16-64 and women aged 16-59.

2.1 Disabled people in the working age population

Table 1 shows that just over 18 per cent of the working population is categorised as disabled; however, there is regional variation, with the North East and Wales having the highest percentage of disabled people and London the lowest, reflecting its younger population. People are categorised as disabled if they report on the LFS that they have a substantial disability which limits their ability to perform normal day to day activities (DDA disabled), and/or have a disability which limits their ability to work (work limiting disabled). The following section discusses key labour market indicators in relation to disability at a regional level.

¹ Employment and Support Allowance (ESA) replaced both Incapacity Benefit (IB) and Income Support (IS) paid on grounds of incapacity for new claims on 27th October 2008.

Table 1:	Number and percentage of the working age
population who are	disabled, 2009

Country/ Region	Not disa	bled	Disat	oled	DDA work li		DDA only		Work limiting only	
	Nos ¹	%	Nos ¹	%	Nos ¹	%	Nos ¹	%	Nos ¹	%
Great Britain	30,083.8	81.8	6,698.9	18.2	4,019	10.9	1,553.5	4.2	1,126.4	3.1
England:										
East	2,851.6	82.7	594.5	17.3	331.8	9.6	150.5	4.4	112.2	3.3
E Midlands	2,210	81.0	519.9	19.0	306.3	11.2	123.2	4.5	89.7	3.3
London	4,335.4	85.0	786.7	15.0	469.7	9.2	163.2	3.2	135.8	2.7
North East	1,241.7	78.0	350.5	22.0	216.4	13.6	74.5	4.7	59.6	3.7
North West	3,405.2	80.4	831.2	19.6	537.7	12.7	172.3	4.1	121.2	2.9
South East	4,242.9	83.8	823.2	16.2	436.2	8.6	229.1	4.5	157.8	3.1
South West	2,520.9	81.8	561.1	18.2	310.3	10.1	127.8	4.1	122.9	4.0
W Midlands	2,669.5	81.3	613.5	18.7	386.3	11.8	129	3.9	98.2	3.0
Yorks &	2,595.5	80.5	628.4	19.5	381.7	11.8	147.8	4.6	99	3.1
Humber										
Scotland	2,587.2	80.6	622.2	19.4	388.9	12.1	151.8	4.7	81.5	2.5
Wales	1,405	78.4	386.6	21.6	253.7	14.2	84.3	4.7	48.6	2.7

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010 ¹ All numbers indicate thousands

2.2 Labour market indicators

Tables 2a and 2b shows that there is a difference of nearly 30 per cent in employment rates² between disabled people and the total working age population. It also shows the difference between those that are both DDA and work limiting disabled in comparison to those that are DDA only or work limiting only. Clearly those that are DDA and work limiting, a group which includes those that are severely disabled, are at the greatest labour market disadvantage.

The tables also indicate regional variation, with disabled people in the East of England having the highest employment rate (57.4 per cent) and those in Wales the lowest (39.9 per cent). There appears to be an inverse relationship between the proportion of the population categorised as disabled and the proportion of disabled people in employment, so that regions with a high proportion of disabled people tend to have low disability employment rates.

² The employment rate refers to the number of people in employment expressed as a percentage of the working age population. Using the International Labour Office definition, the unemployment rate is defined as the percentage of the working age population who do not have a job but are actively seeking employment. The economic activity rate refers to the percentage of the population who are employed or actively seeking work. Those who are out of work and not actively seeking employment (including IB/ESA claimants) are deemed economically inactive.

Table 2a:Employment numbers¹ and rates of disabled and
non-disabled people, July 2008 - June 2009

Country/Region	l	Not disabled		Disabled		
	Total Nos	Nos in work	%	Nos	Nos in	%
					work	
Great Britain	30,083.8	23,635.3	78.6	6,698.9	3,343.6	49.9
England:						
East	3,446.1	2,851.7	82.7	594.5	341.2	57.4
East Midlands	2,210.7	1,763.5	79.8	519.1	289.2	55.7
London	4,353.4	3,199.7	73.5	768.7	342.6	44.6
North East	1,241.7	953.3	76.8	350.5	158.1	45.1
North West	3,405.2	2,633.3	77.3	831.2	365.9	44.0
South East	4,242.9	3,467.2	81.7	823.2	490.6	59.6
South West	2,521.0	2,076.2	82.4	561.1	306.9	54.7
West Midlands	2,669.5	2,026.9	75.9	613.5	287.9	46.9
Yorks & Humber	2,595.5	2,006.9	77.3	628.4	314.1	50.0
Scotland	2,587.2	2,108.7	81.5	622.2	292.6	47.0
Wales	1,405.0	1,088.4	77.5	386.6	154.4	39.9

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010

¹All numbers indicate thousands

Table 2b:Employment numbers¹ and rates of differentcategories of disabled people, July 2008 - June 2009

Country/ Region	DDA and work limiting			DDA only			Work limiting only		
	Total Nos.	Nos. in work	%	Total Nos.	Nos. in work	%	Total Nos.	Nos. in work	%
Great Britain	4,019	1,342.5	33.4	1,553.5	1,253.0	80.7	1,126.4	748.0	66.4
England:									
East	331.8	138.7	41.8	150.5	124.4	82.7	112.2	78.1	69.6
East Midlands	306.3	120.8	39.5	123.2	104.6	85.0	89.7	63.7	71.0
London	140.3	342.6	29.9	163.2	118.4	72.5	135.8	84.0	61.8
North East	216.4	60.7	28.0	74.5	60.8	81.6	59.6	36.6	61.4
North West	537.7	148.6	27.6	172.3	143.8	83.5	121.2	73.6	60.7
South East	436.2	189.2	43.4	229.1	186.3	81.3	157.8	115.1	72.9
South West	310.3	115.3	37.2	127.8	101.0	79.0	122.9	90.6	73.7
West Midlands	386.3	123.8	32.0	129.0	103.4	80.1	98.2	60.8	61.9
Yorks &									
Humber	381.7	130.1	34.1	147.8	118.5	80.2	99.0	65.5	66.2
Scotland	388.9	112.5	28.9	151.8	127.5	83.9	81.5	52.6	64.5
Wales	253.7	62.6	24.7	84.3	64.2	76.2	48.6	27.6	56.8

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010

¹ All numbers indicate thousands

Disabled people who are not in employment often claim IB/ESA rather than Jobseekers Allowance (JSA), and are therefore classified as economically inactive rather than unemployed. Nonetheless, as shown in tables 3a and 3b, disabled people have higher unemployment rates compared with the total working age population. Disabled people in the West Midlands and Wales have the highest unemployment rates, while those in the South East and South West have the lowest. The discrepancy between the unemployment

rates of disabled people and the total working age population is greatest in the East, London, the West Midlands and Wales.

Country/Region	No	n-disabled		Disabled			
	Total Nos ¹	Nos	%	Nos	Nos	%	
		unemployed			unemployed		
Great Britain	25,299.5	1,664.2	6.6	3,730.1	386.5	10.4	
England:							
East	2,441.3	130.1	5.3	379.2	38.1	10.0	
East Midlands	1,890.4	126.8	6.7	317.9	28.7	9.0	
London	3,472.2	272.5	7.8	393.2	50.6	12.9	
North East	1,044.3	91.0	8.7	178.0	19.9	11.2	
North West	2,841.8	208.5	7.3	410.8	44.9	10.9	
South East	3,640.4	173.3	4.8	531.7	41.1	7.7	
South West	2,186.3	110.1	5.0	336.0	29.1	8.7	
West Midlands	2,207.6	180.7	8.2	331.4	43.5	13.1	
Yorks &							
Humber	2,166.2	159.3	7.4	352.7	38.6	10.9	
Scotland	2,236.2	127.5	5.7	321.6	29.0	9.0	
Wales	1,172.7	84.3	7.2	177.4	23.0	13.0	

Unemployment numbers¹ and rates of economically Table 3a: active disabled people and non-disabled people, July 2008 - June 2009

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010 ¹All numbers indicate thousands

Unemployment numbers¹ and rates of different Table 3b: categories of disabled people, July 2008 - June 2009

Country/	Country/ DDA and work limiting				DDA only		Work limiting only			
Region	Total	Nos. un-	%	Total	Nos. un-	%	Total	Nos. un-	%	
	Nos	employed		Nos.	employed		Nos.	employed		
Great Britain	1,562. 2	219.7	14.1	1,320. 8	67.8	5.1	847.0	99.0	11.7	
England:										
East	159.6	20.9	13.1	130.0	5.5	4.3	89.7	11.7	13.0	
East Midlands	138.6	17.8	12.8	110.4	5.7	5.2	68.9	5.2	7.5	
London	168.9	28.6	16.9	129.1	10.8	8.3	95.2	11.2	11.8	
North East	72.4	11.8	16.2	63.4	2.6	4.1	42.1	5.5	13.1	
North West	175.4	26.8	15.3	149.6	5.8	3.9	85.8	12.2	14.3	
South East	207.4	18.2	8.8	196.9	10.5	5.4	127.4	12.3	9.7	
South West	131.1	15.8	12.0	107.3	6.3	5.9	97.6	7.0	7.2	
West Midlands	147.7	24.0	16.2	110.2	6.8	6.2	73.5	12.7	17.3	
Yorks & Humber	154.3	24.3	15.7	124.6	6.1	4.9	73.7	8.2	11.2	
Scotland	131.8	19.2	14.6	130.8	3.3	2.5	59.1	6.5	11.0	
Wales	75.0	12.4	16.6	68.5	4.2	6.2	33.9	6.4	18.7	

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010 ¹ All numbers indicate thousands

Tables 4a and 4b indicate that there is a difference of nearly 30 per cent in the economic activity rate (see earlier definition) of disabled people and the total working age population. The difference is greatest in the North East, North West, Scotland and Wales.

)isabled		
	Total Nos	Nos Econ	%	Total Nos	Nos Econ	%		
		Active			Active			
Great Britain	30,083.8	25,299.5	84.1	6,698.9	3,730.1	55.7		
England								
East	2,851.7	2,441.3	85.6	594,5	379,2	63.8		
East Midlands	2,210.7	1,890.4	85.5	519.1	317.9	61.2		
London	4,353.4	3,472.2	79.8	768.7	393.2	51.2		
North East	1,241.7	1,044.3	84.1	350.5	178.0	50.8		
North West	3,405.2	2,841.8	83.5	831.2	410.8	49.4		
South East	4,242.9	3,640.4	85.8	823.2	531.7	64.6		
South West	2,521.0	2,186.3	86.7	561.1	336.0	59.9		
West Midlands	2,669.5	2,207.6	82.7	613.5	331.4	54.0		
Yorks & Humber	2,595.5	2,166.2	83.5	628.4	352.7	56.1		
Scotland	2,587.2	2,236.2	86.4	622.2	321.6	51.7		
Wales	1,405.0	1,172.7	83.5	386.6	177.4	45.9		

Table 4a: Economic activity numbers¹ and rates of disabled people and non-disabled people, July 2008 - June 2009

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010

¹All numbers indicate thousands

Economic activity numbers¹ and rates of different Table 4b: categories of disabled people, July 2008 - June 2009

Country/ Region	DDA and work limiting			C	DA only		Work limiting only			
	Total Nos	Nos Econ	%	Total Nos	Nos Econ	%	Total Nos	Nos Econ	%	
Great Britain	4,019.0	Active 1,562.2	38.9	1,553.5	Active 1,320.8	85.0	1,126.4	Active 847.0	75.2	
England:	,	,		,	,		, -		_	
East	331.8	159.6	48.1	150.5	130.0	86.4	112.2	89.7	80.0	
East Midlands	306.3	138.6	45.3	123.2	110.4	89.6	89.7	68.9	76.8	
London	469.7	168.9	36.0	163.2	129.1	79.1	135.8	95.2	70.1	
North East	216.4	72.4	33.5	74.5	63.4	85.1	59.6	42.1	70.7	
North West	537.7	175.4	32.6	172.3	149.6	86.9	121.2	85.8	70.8	
South East	436.2	207.4	47.5	229.1	196.9	85.9	157.8	127.4	80.7	
South West	310.3	131.1	42.2	127.8	107.3	84.0	122.9	97.6	79.4	
West Midlands	386.3	147.7	38.2	129.0	110.2	85.4	98.2	73.5	74.9	
Yorks &										
Humber	381.7	154.3	40.4	147.8	124.6	84.4	99.0	73.7	74.5	
Scotland	388.9	131.8	33.9	151.8	130.8	86.1	81.5	59.1	72.5	
Wales	253.7	75.0	29.6	84.3	68.5	81.3	48.6	33.9	69.9	

Source: LFS, May 2009, accessed through Nomis, 2nd February 2010

¹All numbers indicate thousands

Table 5 provides a comparison of employment rates for disabled people with different types of impairment, which vary substantially. The employment rate

of people with diabetes has risen over the period 2002 to 2008. Employment rates for people with diabetes and skin conditions/allergies are only slightly below those for the working age population (see table 6). This is in stark contrast with people who have mental illness, depression or learning difficulties. Only 13 per cent of people with mental illness are in employment.

Table 5:Employment rates (percentages) for working-age disabled people by impairment type, Great Britain,2002-2008 showing 95% confidence interval¹

Impairment	2002 %				2004 %		2006 %			2008 %		
	Low	Mid point	High	Low	Mid point	High	Low	Mid point	High	Low	Mid point	High
Arms, hands	38.9	42.8	46.7	42.7	46.6	50.5	42.2	46.2	50.2	42.4	46.4	50.4
Legs or feet	32.3	34.9	37.4	38.0	40.9	43.7	37.2	40.0	42.7	39.1	42.1	45.1
Back or neck	36.0	38.1	40.2	37.8	40.1	42.3	40.1	42.5	44.9	40.5	43.1	45.6
Difficulty in seeing	28.3	35.9	43.5	34.0	42.0	49.9	31.0	39.0	46.9	39.2	47.2	55.2
Difficulty in hearing	47.1	55.7	64.2	49.6	58.5	67.4	49.3	58.3	67.2	48.3	57.8	67.3
Speech impediment	9.9	37.5	65.1	5.0	29.4	53.8	2.1	25.3	48.4	2.8	31.4	60.0
Skin conditions, allergies	63.8	71.2	78.6	56.2	64.0	71.8	62.4	70.7	79.0	61.8	69.3	76.8
Chest, breathing problems	59.9	62.3	64.8	59.6	62.3	64.9	61.7	64.4	67.0	60.0	62.8	65.5
Heart, blood pressure, circulation	47.6	50.1	52.5	53.5	56.1	58.6	56.2	58.8	61.4	56.7	59.4	62.1
Stomach, liver, kidney, digestion	49.6	53.8	57.9	50.6	54.8	58.9	55.9	59.9	63.8	53.9	58.1	62.3
Diabetes	61.9	65.5	69.1	64.2	67.6	71.0	65.2	68.6	71.9	67.8	71.1	74.4
Depression, bad nerves	20.5	23.6	26.6	18.0	20.8	23.5	20.4	23.4	26.3	23.3	26.4	29.5
Epilepsy	39.1	45.0	50.9	28.7	34.8	40.8	35.8	42.1	48.4	34.6	40.8	46.9
Learning difficulties	9.1	13.7	18.3	16.0	21.5	26.9	8.7	13.4	18.0	14.7	20.0	25.2
Mental illness, phobia, panics	8.7	12.0	15.2	9.3	12.9	16.4	8.2	11.5	14.7	9.8	13.0	16.1
Progressive illness	34.9	38.7	42.5	40.3	44.2	48.0	33.9	37.7	41.5	37.7	41.6	45.4
Other problems, disabilities	50.5	53.6	56.7	51.1	54.3	57.5	51.9	55.1	58.2	51.8	55.0	58.2
Non-disabled ¹		80.3			80.3			79.8			79.5	

Source: Office for Disability Issues, <u>http://www.odi.gov.uk/docs/res/annual-report/indicators/b2.pdf</u>, accessed 27 January 2010; based on Labour Force Survey, 2nd quarter

Note: a wider confidence interval (e.g. for speech impediment) indicates a small sample size: these figures should be treated with caution.

1. Source: Local area labour force survey (2002), Annual Population Survey (2004-2008), accessed through nomis, 14 May 2010

Table 6:Overall employment rate 2004, 2006, 2008 and 2009

Year	UK (%)	England (%)	Northern Ireland (%)	Scotland (%)	Wales (%)
Sep 2004 – Nov 2004	74.8	75.1	68.4	75.2	72.2
Sep 2006 – Nov 2006	74.6	74.8	69.7	75.6	71.6
Sep 2008 – Nov 2008	74.2	74.4	69.4	75.5	70.7
Sep 2009 – Nov 2009	72.4	72.7	67.2	74.0	69.1

Source: LFS, accessed through Nomis, 2nd February 2010

2.3 Type of employment, earnings and access to high level work

This section explores differences between disabled and non-disabled people in relation to the type of economic activity they engage in, their earnings and access to high level work.

Table 7:Economic activity of disabled1 and non-disabled2people in Great Britain, 2002 - 20083

	Employee		Self employed		Unemp	loyed	Inactive		
Year	Disabled	Non-	Disabled	Non-	Disabled	Non-	Disabled	Non-	
		disabled		disabled		disabled		disabled	
2002	38.4%	70.5%	5.7%	9.1%	6.9%	4.9%	52.2%	15.8%	
2004	39.8%	69.8%	6.6%	9.7%	6.4%	4.6%	50%	16.1%	
2006	40.3%	69.8%	6.8%	9.5%	8.4%	5.2%	48.2%	15.9%	
2008	41.1%	69.4%	6.7%	9.7%	8.6%	5.1%	47.1%	16.1%	

Source: LFS data from Office for Disability Issues, <u>http://www.odi.gov.uk/docs/res/annual-report/indicators/b3.pdf</u>, accessed 27 January 2010.

1. percentage based on total disabled working age population

2. percentage based on total non disabled working age population

Table 7 shows that, as discussed above, disabled people are not only less likely to be employees than non-disabled people, but they are also less likely to be self-employed. The unemployment rate of both disabled and non-disabled people rose between 2002 and 2008, while the economic inactivity rate of disabled people declined.

³ Please note that there are slight difference in the rates presented here and those shown in tables 3 and 5. This is due to the data coming from slightly different quarters of the LFS.



Figure 1:A comparison of average hourly wage rates of
disabled and non-disabled working age people, 2002-2008

Source: LFS data for Great Britain from Office for Disability Issues, http://www.odi.gov.uk/docs/res/annual-report/indicators/b2.pdf, accessed 27 January 2010

Figure 1 shows a pay gap of slightly less than a pound in the hourly pay rates of disabled and non-disabled working age people. Whilst average hourly pay rates rose between 2002 and 2008, the gap remained constant. Figure 2 shows that people who are both DDA and work-limiting disabled have lower hourly pay rates than others, and disabled women in all categories earn less than disabled men (Conn, 2009). Figure 3 shows that across the life course (child, working age and pensioner) disabled people consistently earn less than non-disabled people.

Figure 2: A breakdown of hourly pay rates by gender and disability status



Source: National Equality Panel, 2010

Figure 3: Equivalent net income by disability status, UK 2007-08 (£)



Source: National Equality Panel, 2010

According to LFS data published on the ODI websiteⁱ, about eight per cent of both disabled and non-disabled people of working age have never worked and about ten per cent of both groups would like to work more hours than they currently do. In 2008, a slightly higher proportion of disabled compared with non-disabled people indicated that they would like to work more hoursⁱⁱ.

Finally, figure 4 shows that a higher proportion of non-disabled compared with disabled people are in high level employment. The gap has remained at around six - seven percentage points with a marginal increase in 2008.

Figure 4: Percentage of disabled and non-disabled employed working age people in high level employment¹



 High level employment includes managers or senior officials, professional occupations, associated professionals or technical professionals or work in skilled trade occupations.
Source: LFS data for Great Britain from Office for Disability Issues, http://www.odi.gov.uk/docs/res/annual-report/indicators/b4.pdf accessed 27 January 2010

2.4 Benefit claimants

It can be seen from table 8 that there is considerable variation across Great Britain in terms of the percentage of the working age population claiming particular benefits. The North East of England, followed by Wales and the North West, has the highest proportion of claimants, while the South East and East regions have the lowest. Around half of all benefit claimants are in receipt of IB/ESA.

	Total claimants (%)	Job seekers (%)	ESA & IB (%)	Lone parents (%)	Carers (%)	Others on income- related (%)	Disabled (%)	Bereaved (%)
Great Britain	15.7	3.9	7.1	1.9	1.1	0.5	1.0	0.2
England:								
East	12.5	3.3	5.2	1.6	0.9	0.4	0.9	0.2
E Midlands	15.0	3.9	6.5	1.7	1.1	0.4	1.1	0.2
London	15.2	4.0	6.1	2.8	0.8	0.6	0.7	0.2
North East	20.5	5.1	9.6	2.2	1.5	0.7	1.1	0.3
North West	19.2	4.4	9.3	2.2	1.3	0.5	1.1	0.3
South East	11.3	2.8	4.7	1.5	0.8	0.4	0.9	0.2
South West	13.2	2.9	6.3	1.4	1.0	0.4	1.0	0.2
W Midlands	17.9	5.2	7.3	2.2	1.3	0.6	1.1	0.3
Yorks & Humber	16.7	4.5	7.2	1.9	1.3	0.5	1.1	0.2
Scotland	17.6	3.8	9.0	1.8	1.1	0.5	1.1	0.3
Wales	20.2	4.1	10.5	2.0	1.5	0.5	1.3	0.3

Table 8:Percentage of working age population claimingparticular benefits by region, May 2009

Source: May 2009, LFS accessed via Nomis, 2nd February, 2010

Table 9 shows that men are particularly likely to be claiming IB/ESA in areas of the country where there has been long-term industrial decline, such as the Welsh Valleys, the North East, the North West and Glasgow and the west of Scotland. For example, whilst on average 7.1 per cent of the GB population claim IB/ESA, in Merthyr Tydfil and Easington, 18 per cent of the male working age population claim this benefit. Table 9 shows that, in line with government policy objectives (DWP, 2002), there has been a marked decline in levels of IB/ESA claims between 2002 and 2009. However, by and large, claimants remain concentrated in certain parts of the country.

Figure 5 shows that between 2002 and 2004 there was a decline in the proportion of working age men claiming JSA in particular areas, in 2004 the rate reached its lowest point and from then there was a small rise which accelerated in 2008. This could suggest that new claimants are being channelled towards JSA rather than ESA.

Table 9:Male ESA/IB claimants 2009² comparison with thosethat had the highest percentage of claimants according to districts,August 2001¹

Rank 2001	Location	% male working age population, 2001	Rank 2009	% male working age population, 2009
1	Merthyr Tydfil	26.9	2	18.1
2	Easington	26.2	1	18.7
3	Glasgow	20.7	6	15.4
4	Blaenau Gwent	19.8	3	17.4
5=	Liverpool	18.9	10	14.4
5=	Neath Port Talbot	18.9	4=	16.0
7	Rhondda Cynon Taff	18.2	4=	16.0
8	Caerphilly	18.0	7	15.1
9	Knowsley	17.8	9	14.7
10	Inverclyde	17.4	8	15.0
11	Wear Valley	17.1	11	13.7
12	Torfaen	16.2	14	12.8
13=	Barnsley	16.1	12	13.4
13=	Manchester	16.1	16=	11.9
15	Gateshead	15.9	16=	11.9
16	Carmarthenshire	15.8	13	13.0
17	North Lanarkshire	15.4	15	12.1
18	South Tyneside	15.3	18	11.6
19	Anglesey	15.2	20	10.4
20	St Helens	16.2	19	12.6

1. Data from Beatty, Fothergill, Gore and Green, 2002, cited in Riddell et al. 2005b, p.15

 February 2009, LFS accessed via Nomis, 2nd February, 2010; Percentage is based on male working age population within that area.

Figure 5:Percentage of men of working age claimingJobseekers Allowance in given areas, 1992 to 2010



Source: LFS accessed via Nomis, 1st March, 2010

2.5 School leaver qualifications and destinations

This section examines the qualifications of pupils with special educational needs (SEN) (England and Wales) and additional support needs (ASN) (Scotland). In England and Wales, pupils with special educational needs are those who require special support as a result of a learning difficulty or disability. Following assessment, pupils with SEN are allocated different levels of support. Pupils with the most significant needs requiring high levels of multi-disciplinary input are issued with Statements of Need. Pupils requiring some degree of multi-disciplinary support are placed on School Action Plus programmes and pupils requiring additional support from within-school resources are placed on School Action programmes. Data are gathered on the attainment of pupils in these different categories.

In Scotland, the term 'additional support needs' includes pupils who have additional difficulties in learning for any reason, including learning difficulties, disabilities and wider social factors such as poverty or being looked after by the local authority. In England, Wales and Scotland, disabled pupils represent a sub-set of all pupils with SEN/ASN. Although local authorities have a duty to know which pupils are disabled under the terms of the DDA, data are generally still collected in relation to those with SEN and ASN.

2.5.1 ASN school leavers' qualifications and destinations, Scotland

This section examines attainment and destinations of pupils who have been identified as having ASN in Scotland. The achievements of those with ASN are markedly lower than those without support needs. As figure 6 shows, in Scotland, over 80 per cent of non-ASN pupils achieve 5 or more qualifications

at Standard Grade/Intermediate 2, compared with 30 per cent of those with ASN. While one might expect pupils with certain types of cognitive difficulty to achieve less well than their peers, this is not the case for pupils with sensory or physical difficulties, unless they have additional learning difficulties.

Figure 6: A comparison of school leavers with and without ASN attaining 5+ at SCQF¹ level 4² or higher qualifications, Scotland, 2006-2007 and 2007-08



Source: Scottish Government (2009a).

1. SCQF refers to the Scottish Credit and Qualifications Framework

2. This includes Intermediate 2 at A-C grade and Standard Grade 3-4

Figure 7 illustrates that pupils with additional support needs are more likely to be identified in the most socially deprived areas. However, as shown by Figure 8, the association between social deprivation and type of difficulty varies. Six times as many children in the most deprived areas are identified as having social, emotional and behavioural difficulties compared with the least deprived areas, whereas hearing impairment is only slightly more likely to be identified among children living in more deprived areas. There are also strong associations between gender and types of difficulty (see table 10). Eighty per cent of children with social, emotional and behavioural difficulties are boys, whereas only slightly more boys than girls are identified as having visual or hearing impairments. These patterns occur in England as well as Scotland (Keslair and McNally, 2009).

Figure 7: Percentage of pupils with ASN by Scottish Index of Multiple Deprivation decile, 2009



Source: Riddell *et al.* (2010), using Scottish Government data Notes: Pupils are recorded as having additional support needs if they have a Record of Needs, Co-ordinated Support Plan and/or Individualised Education Plan. Figures do not include pupils in grant aided special schools. SIMD = Scottish Index of Multiple Deprivation. Category 1 = least deprived, category 10 = most deprived.

Figure 8: Percentage of Scottish school population within each Scottish Index of Multiple Deprivation (SIMD) decile by type of difficulty (percentages in each group in stacked bar)



Source: Scottish Government, 2009; SIMD = Scottish Index of Multiple Deprivation. Category 1 = least deprived, category 10 = most deprived.

Table 10:Reasons for support for pupils with AdditionalSupport Needs, by gender, 2006

Occurrence (Pupils with more	Num	ber of pu	pils	Rate pe	er 1,000 p	oupils
than one reason for support will	Female	Male	Total	Female	Male	Total
appear in each row)						
Pupils for whom reason for support						
is reported	5,744	13,378	19,122	16.6	37.5	27.2
Learning disability	1,581	3,018	4,599	4.6	8.5	6.5
Dyslexia	573	1,717	2,290	1.7	4.8	3.3
Other specific learning difficulty						
(e.g. numeric)	553	1,108	1,661	1.6	3.1	2.4
Visual impairment	236	340	576	0.7	1.0	0.8
Hearing impairment	226	287	513	0.7	0.8	0.7
Deafblind ¹	15	15	30	-	-	-
Physical or motor impairment	637	1,033	1,670	1.8	2.9	2.4
Language or speech disorder	643	1,491	2,134	1.9	4.2	3.0
Autistic spectrum disorder	359	2,084	2,443	1.0	5.8	3.5
Social, emotional and behavioural						
difficulty	875	3,368	4,243	2.5	9.4	6.0
Physical health problem	368	526	894	1.1	1.5	1.3
Mental health problem	26	71	97	0.1	0.2	0.1
Interrupted learning	86	143	229	0.2	0.4	0.3
English as an additional language	143	216	359	0.4	0.6	0.5
Looked after	170	267	437	0.5	0.7	0.6
More able pupil	17	60	77	_	0.2	0.1
Other	1,351	2,474	3,825	3.9	6.9	5.4
Not known/not disclosed	41	67	108	0.1	0.2	0.2

Source: Scottish Government (2007a)

1. a dash indicates the it is nil or rounds to nil

Pupils with ASN are also more likely to be looked after by the local authority. Figure 9 shows that pupils who are looked after by the local authority and have additional support needs have particularly low levels of attainment.





Source: Scottish Government (2009a). Note: The box plot shows 50% of tariff score with the middle value shown at the line between the yellow and red; the line above the box shows the

maximum value, the line below the minimum value. The size of the box indicates the spread within the group – a larger box denoting a greater spread in scores.

Data are published by the Scottish Government on the destinations of disabled school leaves. Figure 10 shows that, compared with their nondisabled peers, a lower proportion of disabled school leavers move into higher education and employment, while a much higher proportion move into further education. It should be noted that some of these students will be taking special rather than mainstream programmes, with a focus on developing social and life skills rather than vocational qualifications.



Figure 10: Destinations of disabled and non-disabled school leavers, 2008-09, Scotland

Source: Scottish Government (2009b)

2.5.2 SEN school leavers' qualifications, England and Wales

In England in 2007-08, nearly 74 per cent of those without SEN achieved 5 or more GCSEs at grades A* to C, compared to around 30 per cent of those with SEN but without a Statement and 11 per cent of those with SEN and with a Statement (see figure 11).



23.1

2006-07

SEN without a statement

92

29.6

2007-8

No SEN

10.7

Figure 11: A comparison of pupils in England with and without



50

rcentage 0

20

10

0

19.8

2005-06

■ SEN with statement

8.7

As mentioned in the previous section, pupils in Scotland with additional support needs are more likely to be identified in the most socially deprived areas. This is also the case in England as shown in Figure 12. The chart shows that the percentage of children on Special Educational Needs programmes are nearly three times as high in the most deprived areas compared to the least deprived ones as measured by the IDACI index⁴. However, the proportion of children of children in poorer areas identified for support is no higher than in less deprived areas suggesting they are not getting access to the support they need.

⁴ The Income Deprivation Affecting Children Index (IDACI) measures the proportion of children under 16 in each area that are eligible for certain income-related benefits. The index is measured from 1 (least deprived) to 10 (most deprived).
Figure 12: Percentage of children with SEN by deprivation category by IDACI decile, England



Source: Keslair and McNally, 2009

Figure 13 shows that, as for Scotland, certain types of SEN are more prevalent in deprived areas. Moderate learning difficulties, behavioural emotional and social difficulty and speech language and communication needs are more likely to be found in areas of deprivation.





Source: Keslair and McNally, 2009

IDACI = Income Deprivation Affecting Children Index

Category 1 = least deprived, category 10 = most derived

The Welsh data compare those with SEN to all pupils (see figure 14). In 2008, about 57 per cent of Welsh pupils achieved 5 or more GCSEs at grades A* to C. By way of comparison, this level was achieved by 18 per cent of those on School Action programmes, 16 per cent of those on School Action Plus programmes and around 10 per cent of those with Statements. There was an improvement in attainment for all pupils, but not for pupils with SEN.





Source: Welsh Assembly Government (2009)

2.6 Disabled people and higher education

Statistics on disabled students in higher education are collated on a UK wide basis by the Higher Education Statistics Agency (HESA), which records all students who disclose a disability on their UCAS form (about 8 per cent of first degree full time students – see table 11) and those who are in receipt of DSA (around 4.5 per cent of full time first degree studentsⁱⁱⁱ).

Table 11: Number of first degree graduates in 2006-2007, UK

No. of graduates (excluding those listed as unclassified)		No of non- disabled graduates		No of disabled graduates		No of unclassified graduates (not known if disabled or non-disabled)		% of disabled graduates from total of all graduates with known classification	
2006	2007	2006	2007	2006	2007	2006	2007	2006	2007
187,755	189,510	172,860	173,070	14,895	16,435	575	880	7.9	8.7

Source: Association of Graduate Careers Advisory Service (AGCAS) (2009)

According to the Office for Disability Issues, during 2003 - 04, 28 per cent of disabled 19 year olds from England and Wales had participated in higher education, compared to 41 per cent of non-disabled people of similar age. Figure 15 shows that English disabled students not supported by DSA are the most likely to drop out, while those who receive DSA are less likely to drop out than non-disabled students.





Source: Office for Disability Issues, <u>http://www.odi.gov.uk/docs/res/annual-</u> <u>report/indicators/a10.pdf</u>, accessed 27th January 2010; Data based on Higher Education Statistics Agency records

Note: Disability is self-reported for students not receiving DSA; young students are those under 21, mature students those over 21 on 30th September on year of entry

There is little difference between disabled and non-disabled first degree qualified students in terms of degree classification (figure 16).

Figure 16: Outcomes for first degree qualifiers: a comparison of disabled and non-disabled UK students attaining a first or upper second class degree



report/indicators/a9.pdf, accessed 27th January 2010; Data based on Higher Education Statistics Agency records

The majority of disabled students in higher education have a diagnosis of dyslexia, and an analysis of HESA data showed that this group of students was significantly more likely to be male and from middle class backgrounds compared with non-disabled students (Riddell *et al.*, 2005b).

Table 12:First degree disabled students by specific disability,UK

Disability	20	06	2007		
	Nos	% ¹	Nos	% ¹	
Dyslexia	8490	56.9	9515	57.9	
Blind/Partially Sighted	305	2.0	330	2.0	
Deaf/Hearing Impairment	505	3.4	545	3.3	
Wheelchair User/Mobility Difficulties	405	2.7	435	2.6	
Personal Care Support	15	0.1	15	0.1	
Mental Health Difficulties	455	3.1	590	3.6	
Autistic Spectrum Disorder	40	0.3	90	0.5	
An Unseen Disability	2560	17.2	2715	16.5	
Multiple Disabilities	580	3.9	715	4.4	
A Disability Not Listed Above	1540	10.3	1485	9.0	
Total	14,	895	16,435		

Source: Association of Graduate Careers Advisory Service (AGCAS) (2009) ¹Shows percentage of disabled student population

Figure 17 shows the destinations of first degree graduates using the categories used by AGCAS in their analysis of HESA data. Around half of all first degree graduates, but a slightly smaller proportion of disabled graduates,

move into full time paid work compared with non-disabled graduates. The gap between disabled and non-disabled graduates in relation to full time paid employment had been narrowing, but in 2007 it increased slightly (AGCAS, 2009). A slightly higher proportion of disabled graduates (8.2 per cent) move into part-time paid work compared with non-disabled graduates (7.6 per cent).

Figure 17: A comparison of destinations of first degree disabled and non-disabled graduates, 2007, UK



Source: Association of Graduate Careers Advisory Service (AGCAS) (2009)

It can be seen from figure 18 that more than 60 per cent of graduates move into a graduate level occupation, and there is little difference between disabled and non-disabled graduates. Statistics on annual salaries are gathered through the Destination of Leavers from Higher Education Survey, which shows few differences between disabled and non-disabled students. However, these data are based on a small number of responses and should therefore be treated with caution (AGCAS, 2009).

Figure 18:Percentage of first degree disabled and non-disabledgraduates gaining graduate level occupations, 2003-2007, UK



Source: Association of Graduate Careers Advisory Service (AGCAS) (2009)

Despite the overall similarities between disabled and non-disabled students' outcomes, there are some important discrepancies linked to type of impairment (see figure 19, which presents data for the two most common graduate destinations by impairment). Graduates with dyslexia are most likely to be in full time employment (52.9 per cent) compared with 37.5 per cent of graduates with mental health difficulties.

Figure 19: Most common destinations of disabled graduates by impairment compared to non-disabled graduates, UK, 2007



Source: Association of Graduate Careers Advisory Service (AGCAS) (2009)

2.7 Employment and skills

Disabled people in the working age population are less likely to have gained any qualifications compared with non-disabled people, as shown in figure 20. The gap has decreased very slightly between 2002 and 2008 but still stood at around 14 percentage points in 2008. There are also differences in the extent to which disabled working age people have achieved Level 2 qualifications, which includes GCSE A*-C, Higher Diploma and equivalent. Figure 21 shows that working age disabled people are also less likely to have gained such qualifications.

35 29.9 30 28.2 26.4 24.3 25 20 Dercentage 10 13.1 12.1 10.9 10 5 0 2004 2006 2008 2002 Non disabled ∎Disabled

Figure 20: A comparison of disabled and non-disabled people in the working age population with no qualifications

Source: LFS data for Great Britain from Office for Disability Issues, <u>http://www.odi.gov.uk/docs/res/annual-report/indicators/b8.pdf</u>, accessed 27 January 2010

Figure 21: A comparison of disabled and non-disabled people in the working age population with level 2 qualifications



Source: LFS data for Great Britain from Office for Disability Issues, http://www.odi.gov.uk/docs/res/annual-report/indicators/b8.pdf, accessed 27 January 2010

Figure 22 shows that far fewer disabled people in the GB working age population have obtained a degree level qualification compared with nondisabled people (11.4 per cent compared with 21.8 per cent in 2008).



Figure 22: A comparison of disabled and non-disabled people in the working age population with degree level qualifications, 2002-2008

Source: LFS data for Great Britain from Office for Disability Issues, http://www.odi.gov.uk/docs/res/annual-report/indicators/b8.pdf, accessed 27 January 2010 As noted by the National Equality Panel, the labour market position of disabled people with no qualifications has declined dramatically over time. In 1974-76, more than three quarters of this group were in employment, compared with just over a third in 2001-2003 (see figure 23). This decline in the labour market prospects of people with no qualifications has had a much more adverse effect on disabled people than others.

Figure 23: Proportion of men with limiting long standing illness who are in work, by highest educational qualification



Source: National Equality Panel, 2010

Figure 24 shows that the majority of men with no limiting long standing illness are in work, those with the highest qualifications are only slightly more likely than those with lower qualifications to be in work and those with no qualifications are least likely to be in work. However, as figure 23 shows, even among those with no qualifications, 85 per cent are in work during 2001-03, in contrast with only 38 per cent of disabled people with no qualifications.

Figure 24: Proportion of men without limiting long standing illness who are in work, by highest educational qualification



Source: National Equality Panel, 2010

2.8 Summary

Overall, disabled people have much lower employment rates and are more likely to be economically inactive than non-disabled people. However, there has been a slight improvement in employment rates over recent years, coupled with a decline in the proportion of people claiming IB/ESA. There are important intersections between area deprivation and disability benefits status, with a high proportion of men in areas of long term industrial decline claiming IB/ESA.

Educational qualifications appear to be of critical importance to disabled people in terms of influencing future life chances. Data on qualifications, educational outcomes and skills all show a disadvantage for those disabled at an early age. Across Great Britain, pupils with special needs achieve fewer qualifications than those with no special needs and pupils in more deprived areas in England and Scotland are more likely to be identified as having additional needs but have less access to targeted support. They are also more likely to have other types of social disadvantage, such as being looked after by the local authority.

Disabled undergraduate students supported by the Disabled Student Allowance are the least likely drop out, disabled students lacking such support are most likely to drop out. Those that do complete their degree achieve similar degree and labour market outcomes overall as non-disabled students; however, there are considerable differences in labour market outcomes depending on impairment. Graduates with dyslexia have employment rates close to non disabled students; those with mental health difficulties or those who are mobility impaired/wheelchair users have the lowest employment rates.

Disabled people with no qualifications fare particularly badly in the labour market and their position has worsened in the period 1974 to 2003. Clearly, there are important intersections between social class, disability and gender with regard to educational and employment outcomes. Disabled HE students are significantly more likely to be male and from middle class backgrounds than non-disabled students.

There are concerns about the impact of the recession on disabled people, since previous recessions have affected this group particularly badly. Recent analysis conducted by the Government Equalities Office (2009) suggested that disabled people have so far not been affected more adversely than nondisabled people, possibly as a result of the protective effect of antidiscrimination legislation. However, it was also noted that disabled people may be more vulnerable to future job losses should the economy be slow to recover.

3. Equality and skills policy and legislation

3.1 The legislative and policy framework in England, Wales and Scotland: responsibilities for equality and skills

Responsibility for equality legislation is shared between Westminster and the devolved administrations. The Disability Discrimination Acts (DDA, 1995 and DDA, 2005) cover England, Scotland and Wales, and the power to pass equality legislation is reserved to Westminster, but the Scottish Government and the Welsh Assembly Government have a duty to encourage equal opportunities and to ensure that they meet the requirements of Great Britain equality law.

Some aspects of responsibility for skills, training and local economic development are, however, devolved: for example, in Scotland, Scottish Enterprise and Highlands and Islands Enterprise, work with public and private sector partners to develop the business environment in Scotland, and are therefore an influence on the labour markets. Similarly in England, the nine Regional Development Agencies (RDAs), such as One North East and Northwest Regional Development Association, have produced their own regional economic strategies, and the Learning and Skills Council, with responsibilities for post-16 skills and training - although it is being replaced in 2010 – has had a similarly devolved regional structure. North *et al.* (2007) in their study of political devolution, regional governance and tackling problems of deprivation reached very critical conclusions about the effectiveness of regional structures:

The regional tier's effectiveness has been limited by its lack of strong leadership and agenda-setting powers and its lack of legitimacy with other stakeholders. ... The role of the RDAs in England is constrained by their limited power, budgets and capacities, and in some cases by the lack of relationship between regional boundaries and the operation of labour markets and local / regional economies.

(North *et al*., 2007, p.3)

RDAs and other regional bodies do, nevertheless, seek to encourage economic development and labour market expansion in their regions. How long they will continue to have a role in relation to skills will depend on whether future governments accept the recommendation of the UK Commission for Employment and Skills (UKCES), which was established on the recommendation of the Leitch Review of Skills (Leitch, 2006). UKCES (2009b) calls for a radical simplification of the skills landscape, including:

reviewing and clarifying the future roles (if any) of, and relationships between, Regional Development Agencies, Regional Skills Partnerships, Multi-Area Agreements, Employment and Skills Boards, Neighbourhood Renewal Programmes arrangements and Local Authorities, in relation to skills provision and funding – simplifying the range of organisations involved in shaping skills provision, removing duplication in the system, eliminating unnecessary structures, and unifying funding and contractual requirements.

(UKCES, 2009b, p.34)

UKCES is supplemented by local Employment and Skills Boards. The Wales Employment and Skills Board (2009) is tasked with strengthening the employer voice in Wales, giving expert advice to Welsh ministers and helping Wales develop a high skills economy. Skills Development Scotland has a broader role, encompassing advice, funding and training, as well as work with employers. In England, Croden & Simmonds (2008) demonstrate how Employment and Skills Boards are developing along different lines in different regions, and in urban and rural settings.

Having noted the some of the complexity of agencies with responsibilities for equality and skills for disabled people, we turn now to examine in more detail the relevant policies in the core areas of equality and skills.

3.2 Equality legislation affecting disabled people

In 2009 the UK Government ratified the United Nations Convention on the Rights of Persons with Disabilities (UN, 2008), and the associated Optional Protocol which allows individuals who believe their rights have been breached to bring complaints to the UN Committee established to monitor the Convention. O'Reilly (2003) and the International Labour Office guidelines, Achieving equal employment opportunities for people with disabilities through legislation (ILO, 2004) shed light on the process of international negotiation on employment rights. The Convention, which covers many areas of life besides employment and skills, including access to justice, personal mobility, health and recreation, will be binding on the UK as a matter of international law, and although it will not form part of domestic law, it may have an interpretative influence in particular in human rights cases and before the European Court of Human Rights and the European Court of Justice. The Convention adopts a broad categorization of persons with disabilities, clarifying how all categories of rights apply to persons with disabilities and identifying areas where adaptations have to be made for persons with disabilities to exercise their rights effectively.

The DDA (1995) made it unlawful to discriminate against disabled people and makes it the duty of the employer to make reasonable adjustments to the workplace to remove the disadvantage. Riddell *et al.* (2005a, p. 27-33) review the provisions and impact of the DDA (1995), highlighting the low success rate of DDA cases brought against employers deemed to have failed to make reasonable adjustments for disabled employees or to have discriminated in their recruitment, retention, promotion, transfers, training and development, or in the dismissal process. Jones & Jones (2008) and Acemoglu & Angrist (2001) report that after similar legislation in the USA, the employment rate for disabled people dropped because employers were wary of additional costs. In the UK, Bell & Heitmueller (2005) also found a negative employment effect of the DDA, but Jones, Latreille & Sloane (2006), using data from the LFS

1997 and 2003, reported that the employment rate of work-limited disabled people had grown and that earnings discrimination against disabled men had fallen. Andrews *et al.* (2006) concluded that although performance over time from 2001 to 2003 on measures of gender and minority ethnic representation on council workforces improved, performance on measures of disabled people's representation 'has not improved and remains weak' (2006, p. 297).

In Scotland, the Scottish Parliament Equal Opportunities Committee (2006) produced a substantial report, Removing barriers and creating opportunities, presenting the findings of their enguiry begun in 2004 into issues affecting disabled people in Scotland, including access to work, access to further and higher education and access to leisure. One important work-related issue that they noted was a lack of person-centred support to enable disabled people to get work and stay in work: for example, they recommended that disabled people be given support for a time period that is appropriately flexible to cater for their individual circumstances, based on an assessment of the support they require, and that more should be done to help disabled people sustain employment if their circumstances change (Scottish Parliament, 2006, recommendation 12). Other issues highlighted in their report include: a lack of resources to make provision for the different types of support required at work; the steering of disabled people towards voluntary work, instead of open employment; employers' reluctance to take on people with certain disabilities; lack of information and support for employers to employ disabled people; and lack of flexibility in working hours and recruitment practices.

Following the DDA 2005, the Disability Equality Duty came into force in 2006, requiring public servants to consider the impact of their work on disabled people, both employees and customers, and to take action to tackle Key Secretaries of State and Ministers in the devolved inequality. administrations are also required to publish reports every three years, showing progress made towards disability equality across their sectors and making proposals for co-ordinated action to make further improvements. This exercise has had the effect of encouraging public servants at all levels to consider disability, and the first tranche of disability equality schemes, annual reports and action plans have been the focus of a number of recent studies, including Office for Disability Issues (2008); Ferrie et al. (2008); Arshad et al. (2008); Edward et al. (2008) and OSDC ltd (2009). These cannot be Many examples of good practice have been examined in detail here. identified, and the reports contain ample evidence of progress in awareness raising and efforts to involve disabled people in planning, but the reports also highlight many areas where further progress is required. Some organisations have also struggled to provide baseline data against which future progress might be assessed - in some cases because of employees' reluctance to disclose their disability to their employer. Winkler (2009) edits a substantial review of literature relating to equalities in Wales, finding that research suggests that employers in Wales are not fully aware of their responsibilities in respect of disability and other equalities (2009, p.vii).

Finally, in this section on equality legislation, the collaborative report, *Improving the life chances of disabled people* (PMSU, 2005), produced by

four Government departments - Work and Pensions, Health, Education and Skills and the Office of the Deputy Prime Minister - took a broad look at four key areas: independent living; families with young disabled children; smooth transition into adulthood; and support and incentives for getting into and staying in employment. It stressed the need to increase the number of disabled people in employment, while providing support and security for those unable to work, advocating improved incentives for both employees and employers and raising both support for disabled people and expectations of what they can do. Effective early intervention, steps to improve employability through skill development and *Access to Work* funding, better information for employers on the business benefits of employing disabled people and more personalised support are all recommended, and the establishment of the Office for Disability Issues is intended to ensure co-ordination of disability policy across Government.

3.3 Skills policies

This section aims to discuss the skills policies impacting on disabled people in the three countries, bearing in mind that skills policies, economic policies and, as Dame Carol Black's (2008) report has shown, even health policies are all intertwined. The agenda for skills was set by the Leitch (2006) review, *Prosperity for all in the global economy: world class skills,* produced for the UK Treasury. Lord Leitch makes an explicit connection between skills and economic growth, and suggests that if deficiencies in these areas are addressed, social benefits will follow:

Our nation's skills are not world class and we run the risk that this will undermine the UK's long-term prosperity. Productivity continues to trail many of our main international comparators. Despite recent progress, the UK has serious social disparities with high levels of child poverty, poor employment rates for the disadvantaged, regional disparities and relatively high income inequality. Improving our skill levels can address all of these problems.

(Leitch, 2006, p.1)

The principles he suggests include the sharing of responsibility:

Employers and individuals should contribute more where they derive the greatest private returns. Government investment must focus on market failures, ensuring a basic platform of skills for all, targeting help where it is needed most.

(Leitch, 2006, p. 3)

There is also a resolute focus on economically valuable skills:

Skill developments must provide real returns for individuals, employers and society. Where ever possible, skills should be portable to deliver mobility in the labour market for individuals and employers.

(Leitch, 2006, p. 3)

Nevertheless, there are some references to the needs of disabled people within the report, including the admission that

skills are not always the magic bullet for improving employment and career progression. ... For example, the employment rate for those with no qualifications and no disability is around 59 per cent, but falls to around 21 per cent for those who are both disabled and unqualified.

(Leitch, 2006, p. 121)

A key element in the vision of the Leitch review is a 'demand-led' system, in which employers and individuals should have a strong voice:

As far as possible, funding should be routed through mechanisms which put effective purchasing power in the hands of customers. This will give training providers a real incentive to deliver the skills that employers and individuals need, flexibly and responsively. If providers do not deliver, they will not receive public funding. This will ensure that providers deliver training that directly reflects demand from local employers and individuals.

(Leitch, 2006, p. 17-18)

In proposing a 'demand-led' system for most training, however, he also acknowledges that there are some programmes, such as those for disabled adults, which cannot be made wholly demand-led (2006, p. 17). Public sector funding is needed to meet the needs of those learners.

Although Leitch covers the UK as a whole, some of his recommendations relate to England alone, because, as we noted in the introduction to this chapter, the devolved administrations in Scotland and Wales each have some responsibility for post-16 education and training. Separate responses to Leitch have therefore been made in England, Scotland and Wales, and these will be our starting point for considering skills policies in each of the countries.

In **England** the responses (DIUS, 2007; DWP/DIUS, 2007) focus on skills for the whole workforce. *Opportunity, employment and progression* (DWP/DIUS, 2007) stresses five core principles: a stronger framework of rights and responsibilities; a personalised and more effective approach; not just jobs, but jobs that pay and offer retention and progression; partnership, with the private, public and third sectors working together; and targeting areas of high worklessness by devolving and empowering communities (2007, p.7-8). Building on the success of the *Skills for Life* programme, Skills Health Checks are announced for all JSA applicants, and disabled people on benefits are referred to only obliquely:

It is estimated that around 16% of ESA claimants will have basic skills needs. ESA claimants will be subject to a similar screening regime to JSA claimants with a screen soon after the start of their claim, and, where, appropriate, a mandatory skills health check at a later point in their claim. However, we recognise that their skills needs will need to be addressed in a way that support measures taken to overcome health problems which in many cases may be the critical barrier preventing the claimant from returning to work. So alongside an intensified focus on skills, we will also test improved support for those with mental health problems.

(DWP/DIUS, 2007, p.17)

New features were to be established in the already complex learning and skills landscape in England (see Coffield *et al.*, 2008): the UK Commission for Employment and Skills (UKCES), supplemented by local Employment and Skills Boards; Local Employment Partnerships with responsibilities for training; and a new Adult Advancement and Careers Service, bringing together Learndirect and Nextstep services and Skills Accounts for all adults, in or out of work, whatever their skills level. Key policies themes in 2007, before the global recession began, were predominantly about economic growth and competitiveness in the world economy - supporting employers with workplace training through the *Train to Gain* programmes, investing in skills. There was, however, recognition that the exceptions to the 'demandled' system proposed by Leitch should not be ignored. While employers might be using *Train to Gain* to develop the higher level skills of their staff, there remained a need to

concentrate public funding on those who need it most, including low skilled people and those who are disadvantaged in the labour market. We have made it clear in the recent annual grant letter to the LSC that colleges and providers will need to ensure that the opportunities offered to adults are tailored to meet personal circumstances, and that learning is used to help people on the journey to sustainable employment.

(DWP/DIUS, 2007, p.20)

UKCES has pushed forward with the skills agenda, producing Ambition 2020: World class skills and jobs for the UK (UKCES, 2009a), which noted that disabled people are among the most disadvantaged groups in the labour market, but also, in their analysis of participation in training, that there is little different in the receipt of training between disabled employees and their nondisabled colleagues (2009a, 76-77). Later that year, they produced a further document of 'expert advice to UK governments', settling out proposals to improve the United Kingdom's chances of becoming a world class leader in employment and skills by 2020 (UKCES, 2009b). Their vision for 'a more strategic, agile and labour market-led employment and skills system' includes a call for drastic simplification of the system and the organisations involved in employer engagement, planning, funding, performance management and quality improvement within it, but contains no explicit mention of disabled people. It stresses putting responsibility on employers to work collaboratively to identify future skill requirements and priorities and ensure that employment and skills providers respond to those needs, although noting that

public funding is prioritised towards (i) basic skills, employability, lower level skills and those facing significant disadvantage in the labour market; and (ii) stimulating greater co-investment with employers and individuals in higher level and strategic skills. (UKCES, 2009b, p. 5)

The Learning and Skills Council (LSC) was also active in promoting and improving provision for learners with learning difficulties and disabilities. Following consultation on the report of the Steering Group for the Strategic Review of the LSC's Planning and Funding of Provision for Learners with Learning Difficulties and/or Disabilities across the Post-16 Learning and Skills Sector, *Through inclusion to excellence* (LSC, 2005), a national strategy for these learners, *Learning for living and work* (LSC, 2006) was produced. Their *LSC mental health strategy: the way forward* (LSC, 2009) draws on the experience of *Learning for living and work* to discuss issues such as learner involvement; working with partners, in particular community teams in mental health trusts, work-based-learning providers and the DWP; and, above all, progression, either to work or to further learning, for learners with mental health difficulties.

The Learning and Skills Council has now been closed. It was replaced in April 2010 by the Young People's Learning Agency (YPLA), which is charged with helping local authorities to collaborate on provision for the 14-19 age group; and the Skills Funding Agency (SFA), designed to oversee the development of the further education sector, to route funding effectively to where it is most needed and to administer the new National Apprenticeship Service (NAS). In the White Paper which announced these changes, *Raising Expectations*, issued jointly by DCSF and DIUS (2008), the importance of the NAS for young people was stressed:

A key part of the new national curriculum and qualifications entitlement is that from 2013 every suitably qualified young person should be entitled to an Apprenticeship place. Local demand will be identified by each local authority, aggregated within the region and agreed with the NAS. It will then be the task of the NAS to provide the necessary Apprenticeship places (through contracting with employers and training providers) to deliver the entitlement in every part of the country.

(DCSF/DIUS, 2008,p. 9)

The government's strategy for the future of Apprenticeships in England was set out in another joint paper, *World-class apprenticeships: unlocking talent, building skills for all* (DIUS/DCSF, 2008). Of particular relevance in this context is the admission that *'although Apprenticeships are popular, disappointingly, not everyone benefits equally from the opportunities they offer'* (2008, p.45). They note Ullman and Deakin's (2005) finding of a 40% average pay differential between male and female Apprentices, the predominance of male apprentices at advanced level, and the underrepresentation of black and minority ethnic and disabled people in Apprenticeships. To address these issues of segregation by gender, ethnicity and disability, NAS is to be asked to implement a programme of positive

action, with 'critical mass' pilots in targeted areas for gender atypical, BME and disabled learners and their employers. NAS will also work with employers offering Apprenticeships to develop *'recruitment policies that truly deliver equality of access'* (DIUS/DCSF, 2008, p.48).

It is too soon to assess how the transition from the LSC to the two new bodies will affect opportunities for disabled people, and indeed whether the age division between their customer groups will help or hinder transitions for young disabled people. Nor is it clear yet how they will manage to defend their budgets in times of recession and spending cuts, but their respective investment strategies are available for scrutiny. The agenda for YPLA is outlined in the 16-19 Statement of priorities and investment strategy 2010 (DCSF/LSC, 2010), foregrounding the ambition to raise the participation age to 17 by 2013 and 18 by 2015. It notes how the September Guarantee of a suitable place in learning has, since 2007, contributed to record levels of participation by 16 and 17 year olds; and outlines the intended impact of the strategy to increase the proportion of 16-24 year olds in education, employment and training (DCSF/DWP/BIS, 2009) - which will be discussed more fully in our consideration of the NEET group in chapter 5. Among the other priorities, including increased Apprenticeship numbers, developing Diplomas, Foundation Learning and community service opportunities, the only specific mention of disabilities relates to learners with learning difficulties and/or disabilities (LLD), since local authorities have responsibilities for all services for learners with LLD aged 0-19, and for those aged 19-25 who are subject to a learning difficulty assessment. The Skills Investment Strategy 2010-11 (BIS, 2009) likewise makes no explicit mention of learners with other disabilities.

In **Wales**, the Welsh Assembly Government's economic strategy, *Wales: a vibrant economy* (WAG, 2005) stresses the need for sustainable economic growth, but also describes the problems of high unemployment and steps being taken, with the support of regeneration funding, to address them. In addition to *Pathways to Work*, the EU-funded *Want2Work* initiative aims to engage thousands of people on a range of incapacity and disability benefits to help them move into employment. The Welsh Assembly Government has also produced its skills and employment strategy and action plan, *Skills that work for Wales* (WAG, 2008), and notes among its key challenges in its *Social Justice Report* (WAG, 2006) the high number of people classified as 'economically inactive but wanting work' and the high prevalence of ill health across people of working age. The Wales Employment and Skills Board (2009) seeks to advise the Government on employment and skills policies in an economic climate very different from that prevalent when Leitch (2006) reported on the need to develop a high skill economy.

Scotland also has its own policy structures, supplementing those from the Department of Work and Pensions. *The Government Economic Strategy* (Scottish Government, 2007b) puts 'Learning, skills and well-being' as the first of five priorities seen as critical to economic growth, and the fifth of those priorities, 'Equity', including provision of 'opportunities - and incentives - for all to contribute to Scotland's sustainable economic growth' also has relevance to

the employment of people with disabilities. The main thrust of the document, however, was on generating wealth and prosperity, making Scotland more competitive and attracting investment, drawing on the lessons of the then successful small independent economies of Norway, Finland, Iceland, Ireland and Denmark. Skills also figure, although perhaps less prominently, in *The Scottish Economic Recovery Plan* (Scottish Government, 2010). There is, however, mention of the launch of the Supported Employment Framework and Implementation Group to assist disabled people who want to work (2010, p.43) and a reference to enhanced collaboration between Jobcentre Plus and Skills Development Scotland (SDS) which may help some disabled people with low skills to keep in touch with the labour market:

many people with low or no skills, who may in the past have moved in and out of short-term employment, find it particularly hard at present to return to employment. Both groups risk entering long-term unemployment. In the coming months we will build on last year's successful pilots to integrate the employment and skills services of Jobcentre Plus and SDS by rolling this service out across the whole of Scotland. The integration of these key services will ensure easy access to skills assessments and careers advice, and will help the newly unemployed and the low-skilled unemployed to quickly improve their skills and move more quickly back into employment.

(2010, p.42)

Skills for Scotland: a lifelong skills strategy (Scottish Government, 2007c) was inspired by a vision for

a smarter Scotland with a globally competitive economy based on high value jobs, with progressive and innovative business leadership. (Scottish Government, 2007c, p. 4)

Workforce Plus (Scottish Executive, 2006b) set out an employability framework for Scotland, acknowledging that the Scottish Executive shared a common agenda with the UK Government to promote economic growth and sustainable development, to reduce disadvantage and inequality, and to end child poverty. It aimed to improve co-ordination of funding and co-operation between agencies in supporting individuals to move from benefits into work, by establishing local employment partnerships to deliver services at a local level, taking account of the circumstances of the local labour market. Scottish Enterprise and Highlands and Islands Enterprise also work with public and private sector partners to develop the business environment, seeking to influence economic growth and labour markets.

Skills Development Scotland (SDS) was created as a non-departmental public body in 2007, to follow through the strategy set out in *Skills for Scotland*. Its broad role, ranging from careers advice services to funding, training and work with employers, combines some key elements of Scotland's learning and skills sector, including Careers Scotland, some areas previous covered by Scottish Enterprise and Highlands and Islands Enterprise, and the Scottish University for Industry. SDS also manages Individual Learning Accounts, as well as Careers Scotland, *Learndirect Scotland* and the literacy and numeracy programme, *The Big Plus*. The training role of SDS includes responsibility for a number of skills and training programmes, including *Get Ready for Work*, Modern Apprenticeships, *Skillseekers* and *Training for Work*, which will be discussed further in Chapter 4.

3.4 Summary

Responsibilities for equality and skills are shared between Westminster and the devolved administrations. The Disability Discrimination Acts (1995 & 2005) cover England, Scotland and Wales: the power to pass equality legislation is reserved to Westminster, but the Scottish Government and the Welsh Assembly Government have a duty to encourage equal opportunities and meet the requirements of equality law. Some aspects of responsibility for skills, training and local economic development are devolved to Scotland, Wales and the English regions. The skills and training framework is extremely complicated, making cross-GB comparisons difficult. However, it is evident that disabled people's participation rates on some programmes are very low. For example, disabled young people make up only 0.23 per cent of trainees on the Skillseekers Programme in Scotland, and only 0.34 per cent of participants on Modern Apprenticeships and Adult Modern Apprenticeships (Edward et al., 2008).

The provisions of the DDA (2005), the ratification by the UK Government in 2009 of the UN Convention on the Rights of Persons with Disabilities (UN, 2008), the cross-government report, *Improving the life chances of disabled people* (PMSU, 2005) and the establishment of the Office for Disability Issues all mark progress on the equality policy front.

Skills policies throughout Great Britain have been heavily influenced by the Leitch (2006) review, urging the development of higher level skills to ensure economic growth and competitiveness. The new UK Commission for Employment and Skills (UKCES) is supplemented by local Employment and Skills Boards, and local employment partnerships, with knowledge of local labour markets; but it has also called for a radical simplification of the skills landscape (UKCES, 2009b). Although the Leitch review acknowledges that some programmes, such as those for adults with learning difficulties, cannot become 'demand-led', there is perhaps need for continuing vigilance to ensure that provision for higher level, economically valuable skills does not threaten provision for those who are disadvantaged in the labour market. The impact of the recent replacement of the Learning and Skills Council by the Young People's Learning Agency and the Skills Funding Agency cannot yet be fully assessed, but it will be important to ensure that training opportunities, especially apprenticeships, are equally available to disabled people.

4. Employment policy and programmes

4.1 Introduction

This chapter reviews recent developments in employment policy, with related literature, before considering specific programmes and initiatives for the support of disabled people in or seeking employment.

The impact of devolution on employment policy and programmes is less marked than on skills. For employment and social security policy, responsibility rests with Westminster, and JobCentre Plus, which brings together the functions of the former Employment Service and the Benefits Agency, controls the distribution of benefits, including Incapacity Benefit (IB) and Employment and Support Allowance (ESA), and provides guidance and employment support services throughout England, Scotland and Wales. There is, however, some scope for local initiatives to help people into employment, which will be discussed in Section 4.3.

4.2 Employment policy in Great Britain

The last five years have brought a series of papers and consultations from the Department of Work and Pensions, in which three strong themes have been identified:

• the **belief that work is good for everyone**, expressed most clearly in the DWP report on Disability Equality (DWP, 2008a):

The Department believes that work is good for people: good for individuals of all ages, for families and for society as a whole. That is why the Department is aiming to reduce the numbers on incapacity benefits by one million people through the new Employment and Support Allowance and Pathways to Work Programme.

(2008a, p.11)

By 2009, this belief has become firm knowledge:

Too many disabled people and people with a health condition are out of work ... we know that work is generally good for people, whether they are disabled or not.

(DWP, 2009a, p.68)

 the need for personalised support for disabled people to return to the workforce, coupled with the expectation that those offered support will take active steps towards employment. In the consultation paper, *No one written off*, the policy intentions are clearly stated:

We want to provide support that is tailored to each person's need and to give everyone the opportunity to develop skills

so that they can find, and get on in, work. In return, we will require people to make full use of the support from which they could benefit.

(DWP, 2008b, p.11)

Linked to personalised support, however, is the concept of personalised conditionality (DWP, 2008c), following the publication of the Gregg report (2008) which proposes a personalised conditionality and support regime in three broad groups: a 'work-ready group' (with a regime akin to the current JSA regime, rules based and self-directed with standard jobsearch requirements); a 'progression to work group' (aimed at those who need time, encouragement, and support to return to work); and a 'no conditionality group' (to include severely disabled people, those receiving Employment and Support Allowance, lone parents and partners with youngest child under one, and certain carers). The same White Paper (DWP, 2008c) associates personalised support with devolving power to private, voluntary and public providers at a local level; 'giving greater flexibility to Jobcentre Plus Personal Advisers, to tailor the support they offer to individuals' needs and circumstances' (DWP, 2008c, p.12). It also announces the piloting of a 'Right to control' scheme in which disabled people are given the power to take, as an individual budget, a range of funding streams to which they are entitled, such as Access to Work, specialist employment programmes, including Workstep and Work Preparation, the Independent Living Fund, Disabled Facilities Grant, Disabled Students' Allowance and Community Care. This scheme is now being trailblazed in around eight local authorities in 2010 and ODI (2009b) expresses the hope that it will give disabled people greater choice and control over funding and services they receive to go about their daily lives.

• the need for the country to move closer to full employment, and to reduce the costs of benefits, by measures designed to encourage people on long-term incapacity benefits to prepare for, and achieve, their return to the workforce, and sanctions for those who are reluctant to engage with the *Pathways to Work* programme or undergo the Work Capability Assessment (DWP, 2006). While clarifying that there will be some people exempt from the obligation, the consultation paper in July 2008 reinforces the message:

> The most severely disabled people or others with full-time caring responsibilities would not be required to look for work. We will, however, expect everyone else to take active steps towards employment and to take suitable jobs. ... The longer people claim benefits, the more they will be expected to do.' (DWP, 2008b, p.12)

Even after recession had brought a rise in unemployment, the White Paper, *Building Britain's Recovery* (DWP, 2009a), reiterated the ambition that eight out of ten people of working age should be in employment, and included the employment of disabled people as an

important part of that goal. Plans were announced to roll out ESA and Work Capability Assessment schemes to those currently on benefits, to review *Pathways to Work*, expand *Work Choice* and *Access to Work* to help move people into jobs, and introduce a network of mental health co-ordinators in Jobcentre Plus. The aim was to develop a range of specialist support, noting that

Disability Employment Advisers, Workstep, Work Preparation are the three key components, and have helped 17,000 into supported employment and 1,500 into open employment in 2008-09.

(DWP, 2009a, p.68)

The encouragement of more disabled people into employment have been driven by the social inclusion agenda, aimed at ensuring that no one is written off, and the welfare to work agenda, geared towards reducing levels of expenditure on benefits (Meager & Hill, 2006). There are potential tensions between these two agendas, since employment may not be the best option for every individual, and some disabled people will require very high levels of investment to get and keep a job, which may be deemed non cost-effective if judged in purely monetary terms. Meager & Hill (2006) note the emphasis on supply-side interventions, as if the disadvantages that disabled people face in finding work can be removed by training alone. They question

whether such a purely supply-side orientation would be sufficient to raise the employment rate of disabled people, given pervasive evidence also of demand-side barriers (in particular the attitude and behaviour of employers towards recruiting and employing disabled people, and the fact that a significant proportion of economically inactive disabled people are concentrated in parts of the UK where jobs are relatively scarce).

(Meager & Hill, 2006, p. 5)

The wide variations between regions shown in the statistics in Chapter 2, Tables 3a and 3b, appear to support their arguments.

Danieli & Wheeler (2006) look at historical precedents for dividing disabled people into those capable of work and those not capable of work. They observe that the investment in programmes like *New Deal for Disabled People* and *Workstep* to enable the transition between sheltered and open employment has failed to deliver the expected reduction in unemployment for disabled people, and that current proposals are seeking to differentiate between those who are unable to work and those who are seeking employment and need assistance. They draw parallels with, for example, Thermega, an organisation established after World War 1 to provide employment for some of the disabled war survivors, to facilitate their movement from sheltered employment to employment in open industry, while others were deemed incapable of being productive and consigned to institutional care. They suggest there are echoes of this in the current policy

focus on the supply side of the market, on developing the skills of prospective employees, without setting targets for employers on the demand side.

Beatty & Fothergill (2005) also argue that the problem is not one of labour supply, but of labour demand, citing the large numbers of non-employed adults on sickness benefits, with a marked concentration in Britain's older industrial areas. They note that in times of recession, job losses have fallen disproportionately on less healthy workers, who may be older and less well gualified and may struggle to compete for re-employment. In earlier papers, the same authors had suggested that the high numbers of IB claimants in areas of industrial decline might to some extent reflect a deliberate policy in the 1980s to encourage people to claim IB rather than register as unemployed, in order to mask the true rate of unemployment (Riddell et al., 2005a). Beatty & Fothergill (2005) show how, as the UK moved towards fuller employment, the rate of increase of IB claimants slowed, but it did not drop. Presenting their analysis by regions, they suggest that the claimant rates reflect two overlapping influences: the demand in the sub-regional labour market and 'residential sorting' within that labour market, inner urban districts with a high proportion of lower skill jobs and less healthy workers having higher rates than middle-class commuter districts.

Grover & Piggott (2005) suggest that the policy changes have been aimed at reconstructing non-employed disabled people as an important part of the reserve army in a period when labour markets were becoming tighter. The receipt of benefits has increasingly been linked to a 'work first' conditionality, managed through a casework approach. While accepting that there may be in these policy developments some recognition of the social model of disability. they too see problems in the focus on the supply side, on the attitudes and behaviour of the workless. Jones et al. (2006) used Labour Force Survey data to examine the impact of disability on labour market outcomes in the wake of the DDA 1995 and other Government incentives to work which had been introduced by then, such as the Disabled Person's Tax Credit and the NDDP. They found substantial differences in both the likelihood of employment and the level of earnings, especially for those with mental health difficulties, and that the 'penalty' for work-limiting disability had fallen slightly for men, but increased for women. Bambra (2008) expresses concerns about the social justice of the conditionality regime:

The discourse around "fake" claimants (usually people with a diagnosis of a mental health problem) has popularised the view that some types of illness, and therefore some patients, are less deserving of state support than others. Such concerns are reflected in the employment support allowance's separation of health based claims into two distinct categories: people considered sick but able to work (undeserving poor) will receive lower levels of benefit unless they participate in compulsory employability programmes, whereas those considered to have a more severe illness or disability (deserving poor) will receive a higher rate of unconditional benefit. (Bambra, 2008, p. a1452)

Further research focuses on employers, their attitudes and their practices. For example, Woodhams & Corby (2007) investigated employers' human resource (HR) management practices in respect of disability equality in 1995 and again in 2003. They found that the proportion of disabled employees had risen in the eight years to 2003, and noted that proactive HR measures to encourage employment of disabled people, including positive discrimination, had a significant impact on employment rates of disabled people in 1995, whereas measures centring on managerial responsibilities and making adaptations had a similar result in 2003. They argue that HR departments should employ the full range of HR measures that are available, and that this approach should be underpinned by enforcement measures.

Others take a more pessimistic view of employers' attitudes: in research produced for Scope, *Ready, willing and disabled*, Daone & Scott (2003) found that disabled people made an average of 2.5 times as many job applications as non-disabled people, but received fewer offers of work and that four out of five disabled people thought employers were deterred by the assumption that disabled employees would need support from their colleagues. Roberts *et al.* (2004) conducted a telephone survey in 2003 of over 2,000 employers, before the final part of the Disability Discrimination Act 1996 came into force in 2004, requiring service providers to remove, alter or avoid physical barriers or provide alternative means of using the service, where physical features of their services make access for disabled people unreasonably difficult or impossible. They found

a lack of knowledge about disability on the part of employers, in particular small employers, who have not employed a disabled person. ... Disability still carried connotations of physical and visible impairments. There are misunderstandings and prejudices around mental illness.

(Roberts *et al.*, 2004, p.7)

Subsequently, Kelly *et al.* (2005), investigating small employers' awareness and responses to the DDA (1995) and the October 2004 duties, found that overall, awareness of DDA legislation had increased and negative attitudes to disabled people had declined, but positive attitudes were still far from universal. Measures aimed at improving employers' understandings of disability will be discussed further in Section 4.3.

The impact of the recession on labour markets may also limit opportunities for disabled people, although it is perhaps too soon to have a clear picture of this impact, because of changes in definitions of disability and the fact that DDA legislation, which was not in place during previous recessions, may be having some mitigating effect. Hogarth *et al.* (2009) reported that, before the last recession, the wage gap between disabled and non-disabled people had narrowed, but, following that recession, the wage gap widened and struggled to return to its pre-recession level. They also noted that recessions increase the levels of disabilities reported, with a rise in work-related disability resulting from psychological problems. Research by the Government Equalities Office (2009) suggests that disabled people have so far not been affected more

adversely than non-disabled people, although they may be more vulnerable to future job losses if recovery is slow.

The National Minimum Wage (NMW) was introduced in April 1999, and perhaps no longer counts as a recent change in the employment policy landscape. Fears that its introduction might encourage employers to replace disabled workers, on the ground that non-disabled workers might be more efficient, appear to have been unfounded. Burchardt & McKnight (2003) reported that employment retention rates for low paid disabled workers improved over the period of the introduction of NMW, although low paid disabled men tended to reduce their hours of work (Riddell et al., 2005a). Schneider et al. (2001) also found that paid hours of work of disabled people had been reduced, without an overall increase in earnings. Schneider & Dutton (2002) surveyed 100 employers of disabled people and a similar number of Disability Employment advisers (DEAs), finding differences between employers' and DEAs' views on the costs and obstacles to employers of taking or retaining disabled staff, the problems presented by specific disabilities and the motivation shown by disabled staff. There was, however, general agreement that the NMW had benefited disabled people by making jobs better paid, although a minority of respondents thought it had created additional obstacles to employment for disabled people.

Finally, in this section on employment policy, we note two reports which explicitly link the employment, health, economic growth and social justice agendas. Firstly, Dame Carol Black's (2008) report, Working for a healthier tomorrow, asserted that improving the health of the working age population is critically important to secure both higher economic growth and increased social justice. Her vision for health and work in Britain was described as requiring a new approach with 'a robust model for measuring and reporting on the benefits of employer investments in health and well-being' to improve employers' understanding of the business case for investment. She proposed a 'business-led health and well-being consultancy service' (2008, p.11) to offer advice and occupational health support, especially for smaller organisations. She deplored the fact that few organisations have sickness management policies, although early, regular and sensitive contact with employees during sickness absences may encourage an early return to work. General Practitioners, she suggested, are often over-cautious about encouraging patients to return to work. Finally, the report made a case for occupational health to be brought into the mainstream of healthcare provision. working closely with public health, general practice and vocational rehabilitation to meet the needs of all working age people. The second report is the Marmot Review of Health Inequalities (DoH, 2010a) which noted that people in more socially advantaged areas lived longer, and also enjoyed more disability-free years of life. The Marmot report advocated early intervention in areas of social disadvantage to prevent child illness and disability; and improved employment support programmes and better levels of benefit in order to prevent the social creation of disability.

4.3 Employment agencies, programmes and initiatives

In this section, we review programmes and initiatives to support and encourage the growth of the employment of disabled people, concentrating on the DWP service, but also including local initiatives in Scotland, Wales and England.

The provision of **Disability Employment Advisers** (DEAs) is intended to smooth the progress of disabled people either into work or into an alternative programme. Their role includes offering employment assessments, referring where appropriate to programmes such as *Work Preparation*, the *Job Introduction Scheme*, *Workstep* or *Access to Work*, or to a *Pathways to Work* personal adviser, or to a work psychologist. Liaison with local employers is also an important feature of their role, raising awareness of the needs of disabled people and building up the local knowledge which will help them match customers to appropriate employment opportunities.

Goldstone (2008) studied how the role was operating in fifteen districts. finding that only large Jobcentres had a full-time DEA. Elsewhere the DEA might be peripatetic or have a role merged with that of a personal adviser, with a number of days allocated to DEA role. Several concerns were raised by DEAs, including the perceived tendency of managers to ask DEAs to prioritise other work over their DEA role. Managers' knowledge and understanding of the DEA role varied; some DEAs thought managers had unrealistic expectations of the DEA in terms of the numbers of interviews they could complete or put them under pressure to restrict those parts of their role, such as networking with employers, which took them out of the office and also did not count towards performance management targets. Goldstone found that some DEAs lacked confidence in their work with employers, and that there was a demand for networking meetings for potentially isolated DEAs. Training and mentoring support was valued by the DEAs, and appeared to be necessary for some of their managers, if DEAs are to have the time and flexibility to develop their specialist role. Riddell (2002) found a wide spread of qualification and skill levels among staff, including DEAs, working in vocational rehabilitation, and noted that people often have a background in social care, and are appointed because of a desire to work with disabled people, rather than their knowledge of work adjustments and the processes of vocational rehabilitation. She contrasts this with university-based provision in the USA and Australia, and notes the call of the British Society of Rehabilitation Medicine (2000) for better training and accreditation of the vocational rehabilitation workforce, including job coaches working with disabled people. This, coupled with Goldstone's (2008) findings, suggests that better qualification routes and career structures and more clearly defined role descriptions and career structures for DEAs might help them deliver a better service.

Access to Work gives disabled people and their employers advice and support with extra costs which may arise because of their needs. Bell & Heitmueller (2009) applauded the way that *Access to Work* schemes can help with practical support, but noted that disabled persons needed first to find an

employer in order to be eligible for help. The DWP website clarifies that they must be in a paid job, about to start one or a work trial, or be self-employed. ODI (2009b) notes that the budget for *Access to Work* will be doubled, from £69 million in 2008-09 to £138 million in 2013-14. This commitment was first made in the Green Paper, *No-one written off* (DWP, 2008b) and was reaffirmed in the White Paper (DWP, 2008c), where it was also noted that responses to the Green Paper had confirmed that people with a fluctuating condition, including a fluctuating mental health condition, frequently lacked the support they needed in the workplace. Pilots of flexible *Access to Work* provision were consequently established, for people with a fluctuating mental health condition, with support workers who work with employers to develop solutions adapted to the needs of each person and to provide support when needed if the employee's mental health deteriorates or problems emerge.

Reform of the Access to Work programme also features in the recommendations of Perkins *et al.* (2009) who note that in 2008-09 only 210 of the 31,920 people helped by Access to Work had a mental health condition. They report the encouraging findings of the pilot being run my Hammersmith and Fulham Mind, and recommend further that initial offers of support should be reviewed after six months to determine whether ongoing support is required; that the provision of funding for cover of prolonged condition-related absences of employees from small businesses should be considered; and that a maximum budget for Access to Work awards for individuals should be set, to ensure that as many people as possible can benefit from support.

An evaluation of Access to Work for the DWP by Dewson et al. (2009), based on over a hundred interviews with customers, employers, Jobcentre Plus and DWP staff, and NDDP and WORKSTEP providers, revealed weaknesses in its marketing, in that customers often said they had found out about the scheme by accident, and awareness among employers was low, with large companies, public sector and charities employers more likely to know about it. Even Jobcentre Plus staff did not always know enough about it, although DEAs knew more than other frontline staff. Despite some problems in getting support in place in time, customers and employers were generally happy with the application and assessment process. Employers said they had learned a lot about ways of supporting employees, although some customers highlighted that the assessment process worked better for people with a physical impairment, but less well for those with mental health difficulties and unseen impairments. Other problems mentioned included delays in getting support in place; inability to use support because of lack of training or incompatibility with other practices; and paperwork. Some customers were confused about what would happen if they changed their job. On the whole, however, customers, employers and staff were satisfied and could point to benefits such as reduced sickness and absenteeism, savings on work-related expense and staff retention.

New Deal for Disabled People (NDDP) is a programme of advice and practical support designed to help people move from disability and health-related benefits into paid employment. In operation since 2001, as a relatively

late addition to the set of New Deal programmes, it is largely provided by the voluntary and private sector, giving access to job-brokers' advice and support to IB claimants and other disabled people looking to re-enter the labour market (DWP, 2008d). The support from job brokers may include looking at the disabled person's skills and abilities to help identify job opportunities, advice in writing CVs, help with the application process including preparing for interviews, identifying and meeting training needs and support during the first six months of work, where they may be able to arrange extra support in the workplace.

NDDP is not available in all areas of the country, but similar help and advice is now available from *Pathways to Work*, which, following piloting, was rolled out over the whole country in April 2008. The programme provides a single gateway to a range of support and advice for people receiving ESA or IB, with a personal adviser helping each individual consider their options and needs. Pathways to Work aims to offer an individual service, but customers will usually be invited to six work-focused interviews with a personal adviser within the first seven months of their claim, to help them remain focused on their ability to work, to develop a personal action plan, to discuss work opportunities, explain the support that may be available for health-related and other obstacles, and to explain the financial benefits (e.g. Return to Work Credit) of returning to work. The personal adviser can also refer to a Condition Management Programme, or a provider-led package of employment, training and rehabilitation. Evaluations of the outcomes of the pilots of Pathways (Bewley et al., 2007; Bewley et al., 2009) are inconclusive: the later study did not find any statistically significant impact of participation in Pathways on work, earnings and self-reported health outcomes.

Further evaluations have been undertaken by Sejersen *et al.* (2009) and Hudson *et al.* (2009), who investigated the experiences of people with mental health conditions using *Pathways*, discovering, among other issues, concerns about the compatibility of NHS treatment and the work-focused interviews and condition management programme. They also encountered concerns about the adequacy of training and support for Jobcentre Plus staff; fears of the influence of Jobcentre Plus performance targets on implementing client-centred ways of working; complaints of lack of privacy for the interviews; the need for the personal advisers to have good communication skills and the ability to address their customers' health conditions sensitively and appropriately; and the need for better communication and information exchange between personal advisers and NHS staff. While many mandatory clients felt the work-focused interviews came at the wrong time for them, voluntary clients were more positive.

The role of the Jobcentre Plus-based personal advisers is clearly pivotal, if they are to act as reliable and well-informed gatekeepers to opportunities, and the need for substantial additional training for these people - and their managers - was acknowledged at the outset of the programme (DWP, 2003, p.22). The findings of Nice *et al.* (2009), however, suggest that training needs remain, that the flow of information between Jobcentre Plus staff and training providers may be insufficient, in both directions, and that there is some

confusion over case management issues when the client is referred to a provider after an initial work-focused interview. As in Goldstone's (2008) study of the DEA role, Nice *et al.* (2009) suggest that performance targets may have dysfunctional impacts on the delivery of *Pathways* and on client progress, if those targets put DEAs under pressure to increase the numbers of interviews completed per day, or to refer clients to the cheaper forms of provision. They also have serious concerns about whether personal advisers have the time to develop sufficient awareness and in-depth understanding of all available provision, in order to be able to give customers appropriate advice. Nice *et al.* (2009) recommend that DEAs should have support in developing this essential expertise, or mechanisms for sharing information.

Among the options which a *Pathways to Work* personal adviser may offer are Workstep, the supported employment programme designed to support disabled people with complex barriers to getting and keeping a job; and Work **Preparation**, for those returning to the workforce after a long period of sickness or unemployment. *Residential training* may be offered to disabled adults to help them secure and maintain jobs or self-employment, and a further option is the **Job Introduction Scheme**, which pays a weekly grant to a disabled person's employer for the first six weeks of their employment to help towards employment costs. Workstep, Work Preparation and the Job Introduction Scheme are all long-standing schemes (see Wilson et al., 2000; Riddell, 2002), which from October 2010 will be replaced by a new specialist disability employment programme, entitled *Work Choice*. ODI (2009a) characterises Work Choice as providing more personalised and flexible support for those with the highest support needs, helping them to move into employment and to retain their jobs.

Wistow & Schneider (2007) identify some important areas for development required in supported employment services, if these are to work effectively to help disabled people to get and keep jobs. They include provision of reliable accessible benefits advice; greater awareness of the scope and aims of supported employment - not just in employment settings, but across health, social care and education; a more stable and reliable funding system; and improved leadership and resources.

However helpful the Jobcentre Plus staff may be, a good experience of *Pathways to Work* for a disabled person seeking to return to the labour market will depend on the quality of the training, support and work experience available through the providers to whom they may be referred. As the roll-out of ESA continues and existing claimants of sickness and disability benefits can expect to be re-assessed for ESA, some concerns have been expressed in the literature about the impact of these changes. Piggott & Grover (2009) argue that the introduction of ESA is an example of the retrenchment of benefits for the majority of sick and disabled people and creates a group of disadvantaged people through which the private sector can benefit. They fear that privatising job placement services for *Pathways* will mean that

sick and disabled people will be commodified as a resource that can be traded between private sector placement services and employers. In this sense, not only are sick and disabled people increasingly defined as unemployed labour, they are a resource for private sector companies to profit from; they are a commodity to be traded.

(Piggott & Grover, 2009, p.165)

They also cite concerns about private companies being able to tell disabled people that they have to apply for a job or lose their benefit, or to pressure them into work before they are ready to cope with it. Other dangers lie in 'creaming', where companies concentrate on the people who are the easiest to help get back to work, and 'parking', where private providers ignore those who are likely to find it hardest to find employment. They conclude that the combination of increased conditionality and the privatisation of job placement services is at odds with the government's concern - as expressed, for example, in PMSU (2005) - with the social exclusion of sick and disabled people.

It is too soon to know what the impact of rolling out ESA will be, but Bambra *et al.* (2005) attempted to review the effectiveness of welfare-to-work programmes for people with a disability or chronic illness in the 1990s. Their systematic review of the evidence on UK policy initiatives concluded that the proportion of participants gaining employment after involvement ranged from 11 per cent to 50 percent, depending on characteristics such as 'job-readiness', as well as the wider labour market context. Evidence of wider impact, such as the numbers of people taking up the schemes as a proportion of the total target population, was weak.

In Wales, the European Union-funded *Want2Work* initiative aims to help thousands of people on a range of incapacity and disability benefits to move into employment. Delivered through a partnership of Jobcentre Plus, local health boards and the Welsh Assembly Government, it offers: advice and support from Jobcentre Plus advisers; access to a bespoke training package; access to two financial incentives, a Job Preparation Premium and a Return to Work Credit; and advice from a health professional working alongside Jobcentre Plus services. 'Of the 6,677 people who participated in the scheme between September 2004 and June 2008, 2,146 secured and entered full time work' (WAG, 2008).

In Scotland, *Get Ready for Work* is open to all 16-19 year olds, who are paid a training allowance, given help to identify their individual needs and offered training in a number of skill areas, such as interview techniques, computer skills, confidence-building, work tasters. The individualised approach, and the availability of a *Lifeskills* strand (Smart Consultancy and Eddy Adams Consultants (2006a; 2006b) suggest that this programme has the flexibility to support young disabled people in transition.

Figures reported by Scottish Enterprise (2007) for participation of disabled people in *Training for Work* programmes (13.8% in 2005-06; 12.7% in 2006-07) suggest that this programme of support for unemployed people seeking work was attracting a reasonably healthy level of participation by disabled people (Edward *et al.*, 2008). On the other hand, Cambridge Policy

Consultants (2006), in their evaluation of *Skillseekers* and *Modern Apprenticeships* for Scottish Enterprise, reported that disabled people were severely under-represented, with only 0.23% of participants on the *Skillseekers* programme and 0.34% on the *Modern Apprenticeships* programmes.

4.4 Summary

For employment and social security policy, responsibility rests with Westminster, and JobCentre Plus, which brings together the functions of the former Employment Service and the Benefits Agency, controls the distribution of benefits, including Incapacity Benefit (IB) and Employment and Support Allowance (ESA), and provides guidance and employment support services throughout England, Scotland and Wales.

Employment policy in the last few years, including the introduction of ESA and related requirements, appears to have been driven by the need for the country to move closer to full employment, the belief that work is good for everyone, and the aim to offer personalised support for disabled people to return to the workforce, with sanctions for those who do not co-operate. In the critical literature, tensions between the social inclusion agenda and the country's economic needs are highlighted, and the approach of concentrating on interventions with labour market supply, rather than on the demand side, is also questioned, suggesting that there is need for more engagement with employers, in order to change their attitudes to employing disabled people. We note too the influence of the reports from Gregg (2008) on conditionality and from Black (2008) and the Marmot Review (DoH, 2010) on links between employment and health policies.

The final section of this chapter examines in turn the roles, programmes and initiatives in place to put the policies into action. Evaluations suggest that these initiatives may be helpful in supporting disabled people to enter, or reenter, the labour market, but also that DEAs and Personal Advisers in Jobcentre Plus may sometimes be constrained in their pivotal role of supporting and advising disabled people, acting as gatekeepers to *Pathways to Work* and other options available to customers. Literature about these initiatives also expresses concerns about increased conditionality and the privatisation of job placement services.

5. Specific groups of disabled people

5.1 Problems of groupings

Our brief is primarily to look at policy and practice relating to disability and employment, rather than at the individual experiences and perspectives of disabled people themselves. In this chapter, we consider some policy documents and initiatives which target groups of people with particular health conditions, or disabled people in particular age-groups or situations. First, however, it is important to note that there are many people with health conditions which may affect their employment who do not fit neatly into any of these categories. Moreover, some individuals may fit into several categories and face more than one set of barriers to employment. Some disabled parents of disabled children or individuals with low skills or low socioeconomic status or both, for example, may need more support from policy initiatives than others who share their medical condition. Ethnicity and cultural and linguistic problems may also prove additional hurdles for disabled people attempting to claim benefits, as recent DWP research reports on ethnic minority customers' experiences (Jones & Tracy, 2010) and on the causes of their lower satisfaction (Stockley et al., 2010) demonstrate.

Moreover, within any of the 'medical' categories, there will be a range of individual perceptions of what the condition or disability means and the impact that it has on everyday and/or working life. Consideration of the 870 responses to the RNID (2006) survey about the employment experiences of deaf and hard of hearing people provides a useful illustration of the diversity of aspirations to employment and of employment related activity within a group who share the same broad medical diagnosis of hearing loss. The RNID found that 63 per cent of their respondents were in work, in a wide range of professional, administrative, clerical and other posts, in a variety of sectors. Of those who were not in work, 60 per cent said they were looking for work, while 40 per cent were not. Of those who said they were looking for work, over a guarter had not applied for any jobs in the previous 12 months, while 23 per cent had applied for more than ten jobs, including four per cent who had applied for more than forty. The range of responses to these survey questions is surprisingly wide. Without considering any of the factors - such as age, the severity of the hearing loss, the age at which it developed or the presence of other complications or additional disabilities - which may be making the job search harder for some of these respondents, the survey response numbers alone appear to vindicate the policy of taking a personalised approach to supporting disabled people to enter employment. There is no one-size policy or practice which will fit all. Moreover, in some cases it may be the employer, rather than the employee, who needs support and intervention to remove barriers to employment.

Finally, we note the impossibility of attempting to cover, in this brief report, all groups of disabled people. The Disability Alliance has almost 300 member groups, many of them charities and support groups for named conditions. Even within this report, we can see the problems in defining groups of

disabled people by contrasting Table 5 with Table 12 and Figure 19, which use quite different categories. Moreover, some categories overlap (for example, in Figure 19, 'unseen disability' may overlap with 'dyslexia' and 'mental health difficulties') and some individuals may fit into two or more of the categories used. For reasons of space, we have had to restrict our coverage to a few examples, including groups who are affected by the general policy initiatives already outlined, but have also been the focus of specific interventions. Bearing in mind, therefore, the dangers of over-reliance on the medical model to categorise disabled people and the complexity of other factors influencing their employment, we focus on a few examples from each of two sets of groupings: by medical condition and by age and career stage.

5.2 Groupings by medical condition

For employers, improving access and premises to meet the needs of employees and/or customers with **physical and sensory disabilities** appears to have been stimulated by the introduction of disability equality schemes, action plans and annual reports in the public sector. Reporting on the progress of all public authorities in Scotland towards equality of opportunity between disabled persons and other persons, Arshad *et al.* (2008) note that

without exception, local authorities list access to their own buildings as a concern raised by disabled people that they propose to address in their disability equality scheme. These concerns are nearly always reflected in a statement of intent, or a formal target in the action plan to improve the accessibility of the local authority's building stock. (2008, p. 38-39)

This progress in the public sector may not necessarily be matched in the private sector, despite the requirements of the DDA. Roberts *et al.* (2004) conducted over 2,000 interviews with employers and reported a lack of knowledge about disability, which still carried connotations of physical and visible impairments. Where adaptations had been made,

typically, the DDA was not a key motivating factor in making adjustments; although it was more influential in changes made for customers than employees.

(Roberts *et al.*, 2004, p.2)

Making physical adaptations to workplaces to accommodate the needs of employees with physical or sensory impairments must, of course, be accompanied by involvement of disabled people in the decision making and understanding of their needs. Ferrie *et al.* (2008) reported that the introduction of the Disability Equality Duty also drew attention to broader equality issues, by placing greater emphasis on the involvement of disabled people. Nevertheless, Law *et al.* (2007) reported that even supportive employers may lack understanding of communication support needs and make only limited adjustments, leading to gradual withdrawal of people with such needs from the workforce. Similarly, Meager & Carta's (2008) analysis

of LFS data revealed that overall, the employment rate of people with seeing difficulties was 62 per cent, well below the employment rate for everyone of working age, which was 75 per cent. The rate dropped lower for those disabled by their seeing difficulty, and lower still for those with additional disabilities or health problems. Nevertheless, they found that people with seeing difficulties were relatively well qualified, with a higher than average proportion of those in work being employed in high level occupations. Moreover, a significant proportion of people currently economically inactive because of their seeing difficulty said that they would like to work.

When we asked the ten key informants we interviewed whether they felt that any particular impairment group had been missed out of current legislation or policy, they did not single out any group of disabled people. There was, however, consensus that **people with mental health conditions** were often left behind in practice. Perkins *et al.* (2009) preface their review of employment support for people with a mental health condition with the observation that such people are

among the most excluded within our society. And nowhere is this exclusion more evident than in the workplace. Over one million people with mental health conditions are on welfare benefits and the total number who are out of work is probably double this figure. (Perkins et al., 2009, p.10)

They acknowledge that it may be harder for an employer to make adjustments for the less tangible obstacles that a person with a mental health condition may face, given that mental health conditions may fluctuate unpredictably, affect a person's ability to negotiate the social, as opposed to the physical, world of work, and may attract fear because of the myths and stereotypes that surround them. They propose actions to help those who require more specialised services than are currently available to get into work, by building more effective links between DWP, health and social services, by improving training and ensuring privacy and continuity of advisers and supporting initiatives to address misunderstandings among employers, employees and the services that support them. Their aim is to decrease the gap between the employment rates for the general population and for those with mental health conditions, not least because 'appropriate employment actively improves mental health and well-being' (2009, p.10).

Durie (2005) estimated that in Scotland, only one person in fourteen who was unemployed with a mental health problem could find a service to promote their employment, although Coutts (2005) discerned some optimism about the impact of *Pathways to Work* and *Workforce Plus*. Both Durie (2005) and Coutts (2005) identified barriers for people with mental health problems, often deriving from employers' lack of awareness and lack of preparedness for identifying and managing mental health problems at work.

Sainsbury *et al.* (2008) drew on research with 60 current or former IB recipients and 52 representatives of employing organisations to explore understandings of mental health conditions in the workplace. They
highlighted the barriers faced by people recovering from mental health conditions, and seeking to return to the workplace:

People did not always feel that a complete 'recovery' from a mental health condition was necessary before they returned to work. Many people felt that some kind of work was possible, but emphasised the need for a job that could be managed alongside any ongoing effects of a condition. Part-time work or a job that allowed flexible hours were cited as appropriate and helpful options. Gaps in employment due to mental ill health were an obstacle some people faced, along with perceptions of prejudice or discrimination around mental ill health.

(Sainsbury *et al*., 2008, p.8)

They also noted that with very few exceptions, people who had returned to employment after a period of mental ill health had taken up work with a new employer, in preference to returning to the job they had had before. Reasons given for this choice included recollection of the impact that the previous job had had upon their mental health, and while some continued to seek work in the same broad field, others

deliberately made a more 'radical' shift in the type of work they took up, sometimes influenced by their experiences of leaving work due to job-related stress.

(Sainsbury *et al.*, 2008, p. 108)

People with learning disabilities are another severely disadvantaged group, as Riddell *et al.* (2001) demonstrate. The cross-government strategy, prepared with the involvement of the Office for Disability Issues, *Valuing employment now: real jobs for people with learning disabilities* (Department of Health, 2009), notes that while the employment rates of all disabled people have risen, people with learning difficulties have not benefited and remain heavily excluded. The aspiration is for people with moderate and severe learning difficulties to work for at least 16 hours a week. The emphasis is on real jobs, contrasting with Holmqvist's (2009) analysis of sheltered employment for disabled people in Sweden as associated with 'dirty work'.

The strategy outlined in *Valuing employment now* focuses on effective use of existing resources, including education, adult learning and employment support. A long list of proposed changes includes:

- growing the presumption of employability, through cultural change, campaigns with parents, workforce, building on good practice
- joint working between statutory, voluntary and private agencies to create employment paths for individuals
- better work preparation at school, college, adult learning
- developing personal budgets and social care using direct payments
- increasing high quality job coaching
- clearing up confusion about the benefits system
- promoting self-employment

- encouraging employers to see the business case (with the Civil Service and National Health Service leading by example)
- better support for the most excluded adults with complex learning disabilities.

Much has been learned from *Getting a Life*, a three-year cross-government programme, involving the Department of Health (DoH), DWP, DCSF, BIS and ODI, to identify how to ensure that young people with severe learning disabilities achieve paid employment and full lives (DoH, 2009, p. 24). It aims to identify barriers to employment; to develop a model pathway into employment and equal citizenship, bringing together assessment and funding streams from across the whole system; and to share the learning from the sites across the country. In its first year, it revealed the lack of a clear path to employment for young people with severe learning disabilities; the low work expectations for them among all the key agencies; and lack of knowledge throughout the system about how to make reasonable adjustments to help people with learning disabilities plan for work; and that there is significant scope to improve the capacity and skills to provide employment support throughout the transition period (DoH, 2009, p. 24-25).

Also relevant here is *Project Search*, an internship programme that has been running in Norfolk and Leicester since 2008. Over the course of a year, students with learning disabilities rotate through a series of job sites, offering on-the-job experience of work skills combined with classroom tuition, and many gain permanent work with the host employer at the end of the course. Other graduates of the scheme are supported to use their skills to find jobs with different employers. The project, based on an American model, is reported to drive real culture change, as staff and customers see people with learning disabilities performing in a variety of valued roles. It requires partnership between the host employer, and organisations, including voluntary bodies and colleges, providing job coach and job tutor. The Government believes the model has great potential (DoH, 2009, p.29). We note, however, the doubts expressed by Redley (2009):

Neither New Labour's policies of social inclusion through employment nor its personalisation of social care quite captures the challenges of improving the lives of citizens with learning disabilities. A model of citizenship, and hence of social inclusion, framed exclusively in terms of individual autonomy and choices in public services is inappropriate for many men and women with learning disabilities, for it places insufficient value on the relational and convivial aspects of inclusion and participation.

(Redley, 2009, p. 497)

The White Paper, *New opportunities: fair chances for the future* (Cabinet Office, 2009a) has a wide focus on ensuring opportunities for all, including many disadvantaged groups, but makes special mention of adults with moderate to severe learning disabilities who 'have a lower employment rate than any other disability group' (2009a, p. 74). The White Paper announces

the publication of a new cross-governmental strategy on helping this group, and the introduction of 'support brokers' to help them to access the most relevant employment support for them, and to use their social care personal budgets alongside appropriate disability employment funding.

A specific strategy has also been developed for **adults with autism** (DoH, 2010b), focusing on five core areas of activity: increasing awareness and understanding of autism among frontline professionals; developing a clear, consistent pathway for diagnosis, followed by an offer of a personalised needs assessment; improving access to the services and support which adults with autism need to live independently; helping adults with autism into work; and enabling local partners to plan and develop appropriate services for adults with autism to meet identified needs and priorities (DoH, 2010b, p.18-19). The approach aims to identify how to make existing policies work better, reporting that some adults with autism have been

missing out because they don't fall into either the learning disability or mental health 'box'. This is unacceptable.

(DoH, 2010b, p.19)

The strategy appears to fill an important gap, since Dewson & Tackey (2010), reporting on a study of the impact of changes in further education provision for adults with learning difficulties and/or disabilities, concluded that although all providers work with local partnership organisations to plan and assess future demand, partnerships do not take a particularly strategic approach to meeting the needs of those learners. Their evidence, drawn from LSC-funded providers and learners, suggests there is a lack of clarity around responsibility for provision for this group, which creates uncertainty and a desire for a stronger LSC regional strategy for adults with learning difficulties and/or disabilities (Dewson & Tackey, 2010, p. 2-3).

In Scotland, too, the employment of people with learning disabilities and autistic spectrum disorders (ASD) has received specific attention, through the work of *The same as you*? National Implementation Group. The Scottish Executive (2000) review of services for people with disabilities was followed by a report, *Working for a change*? (Scottish Executive, 2003) from a working group looking at the provision of supported employment. They highlighted some important practical and attitudinal barriers:

People with a learning disability are often put off work because the benefits system is complicated. They don't know if they would be better off in work, and they are not sure they would get back on benefits if they lost their job. Another problem is that lots of people don't think people with a learning disability can work - sometimes people themselves don't have the confidence, sometimes their families don't think they could do a real job. Also, many professionals don't think about work at all when they are planning the future with people - and sometimes discourage people when they say they want a job.

(Scottish Executive, 2003, p. 1)

Their recommendations include providing all school leavers with a learning disability with access to a personal key worker to help them through the transition from school to post-school employment, education or training, and financial resources to provide a positive post-school option to suit the young person's aspirations, be it paid work, training, volunteering or an integrated college course. They also recommend further research into supported employment, subsequently provided by Ridley et al. (2005), who demonstrated that employers' initial anxieties about the process proved largely unfounded. Their survey found that over 3,000 adults with learning disabilities and/or ASD were in paid or unpaid supported employment, but that few of those were people with more complex needs or ASD. Among the barriers they identified were lack of national leadership for supported employment; lack of a consistent framework for commissioning and auditing its performance; and negative attitudes and low expectations among those supporting people with learning disabilities.

5.3 Groupings by age and stage

Again, we have had to select from many possible groupings for consideration. To try to cover the life course, we focus on three groups:

- young people leaving school and therefore at risk of joining the NEET group;
- disabled students and graduates entering and hoping to develop careers; and
- older workers with disabilities, who are either trying to stay in employment as their condition deteriorates or seeking to re-enter the workforce after a period of enforced absence.

Difficulties in transition from education into employment face many young disabled people, who without assistance may end up as 'not in education, employment or training' (the NEET group). For reasons of space, we describe here the policy and practice for the NEET group in Scotland, outlined in the document More Choices, More Chances (Scottish Executive, 2006a), although similar arrangements are in place in other parts of the UK. Between five and sixteen per cent of young people in Scotland are described as being 'in need of more choices and more chances' (MCMC) at any one time, about 9 per cent of whom are inactive as a result of illness or disability. The strategy, developed after considering the needs of a number of groups of young people, including disabled young people (Scottish Executive, 2005), is closely linked to Workforce Plus: an employability framework for Scotland (Scottish Executive, 2006b) which set ambitious targets for moving people from benefits to work. Her Majesty's Inspectorate of Education also contributed to the debate about children at risk, for whatever reason, of missing out on educational opportunities (HMIE, 2006).

In *More Choices, More Chances*, priority is given to progressing young people who are NEET into education and training, rather than into jobs without training, to improve their chances of sustainable and fulfilling engagement in the labour market. Steps to prevent young people becoming NEET begin while they are still at school, with programmes such as *Determined to*

Succeed, and *Skills for Work*, which aims to help young people develop skills and knowledge in a broad vocational area, and an understanding of the workplace, employability skills, and progression to further learning or training (see Spielhofer & Walker, 2008). Once the young people leave school, other options such as *Get Ready for Work, Lifeskills*, apprenticeships and *Skillseekers*, are available, with financial incentives for participation, and support for those in transition.

Disabled young people may be in particular need of such support, at a time of transition when they also risk losing contact with specialist health and social care services (Knapp *et al.*, 2008; Ko & McEnery, 2004). Riddell (1998) noted that in the 1960s, the vast majority of school leavers from special schools moved into full time employment, but in 2009, only 4 per cent of this group found post-school employment, compared with 26 per cent of the mainstream school population (Weedon & Riddell, 2010). They describe young disabled people as particularly vulnerable to 'stalled transitions and social exclusion' and at risk of becoming trapped in an extended childhood in the parental home or in a hostel, whereas a successful move into a workplace, paid or unpaid, supported or unsupported, will allow them to develop independent relationships and achieve the transition into adulthood.

Discussion of **disabled young people in higher education** is complicated by differences in the way that statistics of disabled students and disabled people of working age are compiled. In their study of disabled young people in universities throughout the UK, Weedon & Riddell (2010) note that disabled young people in higher education would appear to have better life chances than other disabled young people. They report that premium funding which universities have received since 2000 for students who receive Disabled Students' Allowance has encouraged recruitment of disabled students and also a more rigorous approach to assessment of their needs. Although before the 1990s, little provision was made in universities for disabled students, their numbers have more than doubled between 1994-95 (11,162) and 2004-05 (26,085) (Fuller et al., 2009a, p.9). As explained in Chapter 2, students are not obliged to disclose a disability, but are motivated to do so by the possibility of applying to be assessed for a Disabled Student Allowance. Direct comparisons between statistics of disabled students and graduates (Table 12 and Figure 19) and statistics of working age disabled people produced by the Labour Force Survey (Table 5) are complicated by the fact that for nearly three in five of the students disclosing a disability, that disability is dyslexia. Riddell et al. (2005b) found that disabled students were significantly more likely to be male and from middle class backgrounds than non-disabled This was largely explained by the preponderance of disabled students. students with a diagnosis of dyslexia, who are particularly likely to be male and middle class.

Weedon & Riddell (2009) found that most of the students they interviewed did not consider themselves as disabled, particularly those with unseen impairments, adopting the label pragmatically in order to access support. One student regarded 'disabled' as: a 'transitory' label which she used throughout her university career to access some extra time in exams and technological support; however she discarded it when entering the labour market. (Weedon & Riddell, in Fuller et al., 2009a, p.134-135)

Like the dyslexic nurses interviewed by Morris & Turnbull (2007), she chose to disguise her impairment. Fuller *et al.* (2009b) also highlight the additional hurdle of fitness to practise standards which disabled students face, and call for

greater awareness among staff of the extent to which an impairment will actually impact on a student's ability to become an effective practitioner within their chosen profession.

(Fuller *et al*., 2009b, p. 3)

The statistics collected by AGCAS as discussed in Chapter 2 cover disabled students' first destinations after graduation, but tracking their future career progress is more difficult. RADAR, the Disability Network, set out to address questions about seniority and disability, in a survey (Sayce, 2009) including 911 people with ill-health, injury and disability. They too discovered that many disabled people chose not to reveal their impairment: 62 per cent of their disabled respondents said that they had that option, and 75 per cent of those said that they sometimes or always chose not to disclose. They found that people with mental health difficulties, and people working in the private sector, were less likely to be open about their disability, for reasons which included fear, or experience, of discrimination. Although they found that disabled people were at a disadvantage in terms of career progression, they also identified a pool of very senior, high-earning, disabled people, including 110 earning £80,000 or more. Having a mentor and support from senior staff were seen as the factors associated with high earnings and career progression.

Particular difficulties are also faced by **older disabled people of working age** who may be established in a career and trying to remain in the workforce after the onset of a disabling illness, or are seeking to return to the workforce after a period of absence. For those already working, but struggling to remain in work because of health problems, it may be harder to access the advice about their options which is available through Jobcentre Plus, and guidance may come from health professionals, or from charities and support groups. *Access to Work* figures prominently, for example, in two of the brochures issued for members by the Multiple Sclerosis Society (2008) and the Parkinson's Disease Society (2008) - both conditions which may require employees in the early stages of the disease to request their employers to make adjustments in the workplace. Goldstone with Meager (2002), investigating barriers to employment for disabled people, report from their employer interviews that

there was some indication that employers of all types found it easier to make adjustments for new recruits with a health problem or disability than for existing employees who became disabled. Just under half of those making adjustments for new recruits considered this very easy compared with three in ten who rated adjustments as very easy for existing employees.

(Goldstone with Meager, 2002, p. 3)

Mercer (2005) discusses the barriers to job retention for disabled people, and the strategies which disabled people have adopted to assert their support needs and rights in employment (Roulstone *et al.*, 2003). One option for such workers may be shortening their hours of work. Jones (2007) poses an interesting question: does part-time employment provide a way of accommodating a disability, rather than reflecting marginalisation of disabled people by their employers? Evidence from the Labour Force Survey revealed that 11 per cent of disabled male employees work part-time, compared with five per cent of non-disabled male employees; and 49 per cent of disabled female employees.

The policy implications of this depend crucially on whether the reasons underlying this represent constrained or voluntary choices for the disabled.

(Jones, 2007, p. 696)

For a person in the early stages of a degenerative disease, part-time work may be the optimum level of work which the disabled person feels capable of undertaking and a means of staying in touch with working life, postponing the option of early retirement. It may be evidence of a flexible and accommodating employer, demonstrating that the worker is still valued despite his or her declining health. For some other disabled workers, however, part-time work may be a poverty trap, a second-best option, interpreted as an indication that they will not have the same chances to develop a career as staff employed on full-time contracts. In short, part-time work may in itself be a blessing or a curse. What disabled workers need is a policy which allows them to move from full-time to part-time employment, and vice versa, if their health deteriorates or improves. As the Equality and Human Rights Commission's (2009) Working better study has demonstrated, permitting flexible working brings benefits to both employer and employees, and if flexibility were an option for all employees, those whose working life is disrupted by poor health, or indeed by parenthood, would be less likely to 'pay a career penalty for working flexibly' (2009, p.10).

Turning now to the older people who are seeking to re-enter the workforce, Beatty & Fothergill (2005) note the large number of older adults on sickness benefits in older industrial areas of Britain, and that job losses in previous recessions have fallen disproportionately on this group. Their problems may be exacerbated by lack of the skills wanted in the current labour market in those areas, even in times of labour market buoyancy. Burchardt (2003) analysed factors associated with increased risk of leaving employment following onset of sickness and disability and found that people who had been on benefits were less likely to return to the workforce if they were aged 45 or over and living in a region with a low labour demand. Although they may qualify for New Deal on two counts, NDDP and New Deal 50 Plus, older disabled people may face even greater challenges than young people in gaining the skills and the confidence to re-enter the labour market.

5.4 Summary

We discuss first the limitations of considering disabled people in groupings, even though some groups may be covered by specific policy initiatives. Bearing in mind that any group sharing the same medical diagnosis will contain very different individuals, with differences in their skill levels, experience, severity of illness or disability, levels of support and other factors which may affect their readiness to work, we then consider in turn two sets of groupings, by medical diagnosis and by age and stage of working life.

For the medical groupings, we first note the impact of the DDA 1995 and 2005 on employees with physical and sensory disabilities, in terms of employer awareness of the requirement to accommodate their needs. We turn then to three groups who are severely disadvantaged in the labour market, for whom specific strategies have been developed. The Perkins (2009) review of employment support for people with mental health conditions makes important suggestions for improving support to enable those with fluctuating conditions to enter, and remain in employment, through, for example, building more effective links between DWP and health and social services and addressing misunderstandings among employers.

For people with learning disabilities, the cross-government strategy (DoH, 2009), *Valuing employment now*, also stresses the need to demonstrate to employers the value of employing people with learning difficulties; to improve support, especially for young people in transitions; and to encourage people with learning disabilities and the agencies who work with them to raise their expectations of the work they might do. The final group considered is adults with autism, who, as reported in the new DoH (2010b) strategy, *Fulfilling and rewarding lives*, may have been 'missing out because they don't fall into either the learning disability or mental health 'box' (2010b, p.19). Research suggests that people with autistic spectrum disorders may be particularly disadvantaged in finding even supported employment and may also suffer from the negative attitudes and low expectations of those who support them.

Finally, we review support strategies in place for three 'age and stage' groups. Young disabled people, leaving school and at risk of being not in education, employment or training, may be helped by policies in place to cover all potentially NEET groups, although they may need additional support to review their options and keep their expectations high. Preparation should begin while they are still in school, to avoid 'stalled transitions' (Weedon & Riddell, 2010). Disabled young people in higher education are supported by the introduction of the Disabled Students' Allowance, although some may discard their 'disabled' identities when they begin to seek employment, which makes it harder to track their subsequent career progress. We note, however, recent research (Sayce, 2009) into high-achieving, high-earning disabled employees, who cite mentoring and support from senior staff as the factors which allowed them to progress. Our final example is of older people of working age who require support, understanding, adjustments and flexibility from their employer to remain in work after the onset of ill health or a progressive disease, or to return to the workforce after a prolonged absence.

Common themes across these groupings include the importance of high expectations, both for disabled people and for those who support them; the need for good information about possible options, and appropriate transitional support when embarking on a new life phase, be it entry to university, taking on a new role in supported or open employment, or adapting to coping with the onset of a disabling disease while still trying to remain in employment. The last, and most important theme, is the need for understanding and flexibility from employers.

6. Conclusions

6.1 Key themes

6.1.1 The heterogeneous nature of the disabled population and the significance of inter-sectionality

In this concluding chapter, we summarise the over-arching themes which have emerged from the review, examine some emerging policy tensions and finally outline some of the key areas which require future monitoring and research by the Equality and Human Rights Commission.

It is evident that disabled people should not be thought of as a homogeneous group, but as groups divided by type of impairment, gender, age, social class, level of education, geographical location and so on. For example, in Chapter 2, we drew attention to the different experiences of people with a range of impairments with regard to educational outcomes and labour market participation. Pupils living in disadvantaged areas are more likely to be identified as having SEN/ASN, but, with regard to particular groups, there are very wide variations. So for example, the association between social deprivation and being identified as having social, emotional and behavioural difficulties is very marked. By way of contrast, the association between area deprivation and sensory impairment and physical impairment is much less strong. Inter-sectional differences relating to gender and ethnicity are also evident. Seventy six per cent of those identified with social, emotional and behavioural difficulties in both England and Scotland are boys, compared with 59 per cent of those with moderate learning difficulties (MLD) and 58 per cent with physical disabilities. Eight per cent of Black Caribbean children are identified with behavioural, emotional and social difficulties in England, compared with under four per cent of White children and two per cent of Pakistani children. However 11 per cent of Pakistani children are identified with moderate learning difficulties. Official data often fail to reflect these important differences, often publishing only the headline figure comparing children with SEN/ASN with others.

These differences are also evident when people move from education into the labour market. Some groups (e.g. people with diabetes) have employment rates which are very close to those of the total working age population, whilst others, particularly people with mental health difficulties, strongly associated with social disadvantage, have much lower employment rates. There are also important connections between area deprivation, disability benefits status, gender and age. Older men living in areas of industrial decline are particularly likely to be claiming IB/ESA, and to have experienced long-term dislocation from the labour market.

Educational outcomes, which are both a cause and an effect of an individual's social status, appear to be particularly significant for disabled people, who are less likely to have degree-level qualifications than non-disabled people and more likely to have no qualifications at all. Disabled graduates fare only marginally worse than non-disabled graduates in terms of level of degree and

obtaining high level employment. Whilst an employment penalty exists for disabled graduates, it is much less than that incurred by disabled people with no qualifications. The employment rate of the latter group has halved in the last twenty five years, indicating a deterioration of their economic position over time.

As pointed out by the National Equality Panel, whilst there are marked differences **between** disabled people and non-disabled people, the differences **among** disabled people across a range of dimensions are much greater. Rather than assuming that disabled people have similar economic experiences and outcomes, it is necessary to understand the fine-grained detail of intersecting social variables and devise policies accordingly.

6.1.2 The need for harmonisation of categories

As is evident from the discussion above, disabled people are defined differently by a range of agencies and for different administrative purposes. Schools and local authorities, for example, continue to use the categories of SEN/ASN, although they are under a legal obligation to gather data in relation to disabled children. The Scottish Government has requested schools to report on disabled children as part of the annual schools census, but the published data only relate to about one per cent of the school population, a considerable under-estimate of the disabled child population. It is very difficult to trace the progress of disabled people through school into post-school provision and thence into the labour market, since different categories are applied at different stages and individual level data are not available. Furthermore, Scotland uses different definitions in relation to the school-aged population compared with England and Wales, so cross-border comparisons are difficult. A simplification and harmonisation of categories would lead to a better understanding of the experiences of different groups of disabled people across the life-course.

6.1.3 Supporting disabled people through transitions

It is evident that transitions for disabled children and adults may be particularly complex, in part because they involve interactions with many different agencies, but also because they involve the renegotiation of a disabled identity over time. Transitional points for disabled people involve life course shifts which are common to all, for example, into work on leaving school or leaving university. However, points of transition may also occur when a disabled person faces a change in circumstances, either moving towards work or moving from work to joblessness, which may become a transition into longterm unemployment or premature retirement. The policy of early intervention during extended absences from work through ill-health, to encourage planning for return to work, may not always be welcomed by IB/ESA claimants, and in some cases may be premature, but it can be seen as an attempt to slow the process of losing confidence in the possibility of ever working again. Intervention may also be required with their employer, to ensure that they know their responsibility to make reasonable adjustments in order to enable their employee to return to work. If the likelihood of working again is negligible, for example, in the case of a serious injury or degenerative disease, even more support is required to help the person adjust to new circumstances and understand the financial support that will be available to them.

Successful transitions into work for disabled people depend on support at many levels. There are battles to fight on four fronts. First, the prospective workers need high quality support from well-trained Jobcentre Plus (JCP) Personal Advisers and DEAs, to learn what their options are, and, if necessary, acquire the additional skills and the confidence required to proceed into employment or self-employment. Concerns expressed in some of the research reports reviewed in Chapter 4 (Goldstone, 2008; Nice et al., 2009) about the quality of training for such staff, and the amount of time they are permitted to spend working with disabled claimants, point to potential weaknesses in the system. Secondly, there is a need to ensure that employers have the confidence to employ disabled workers and know what adjustments they may need to make and the support that may be available through Access to Work and supported employment schemes. The third and most difficult task, perhaps, is to shift attitudes in the wider public - both among families and friends who may have low expectations of what a disabled person can achieve, and in workplaces where disabled employees may still face stigma. Finally, there is a need to ensure that the benefits system is sufficiently flexible to enable a disabled people to move into employment or increase the number of hours worked, without fearing that his or her benefits package will have to be renegotiated from scratch if the attempt fails, with attendant insecurity.

6.1.4 Joined up working: the impact of skills, employment, welfare and health policies

A major theme of government policy is the need to achieve better articulation between the policies and working practices of different agencies. The review conducted by Riddell et al. (2005b) noted the problems of a lack of articulation between the programmes run by JCP, often focusing on disabled adults already in work or attempting to enter the labour market for the first time, and the programmes funded through national and local economic development initiatives. DEAs and voluntary agencies often struggled to create a coherent programme for disabled clients with high support needs, drawing down funds from different sources and moving individuals from one short-term scheme to another. Efforts have been made to co-ordinate programmes more effectively, for example, JCP in 2010 amalgamated three existing programmes (Workstep, Work Preparation and the Job Introduction Scheme) into a new programme entitled Work Choice, which is intended to provide more personalised and flexible support for those with the highest support needs. There also appears to be better co-ordination between programmes funded by DWP and other sources. For example, the Welsh Assembly Government has used EU structural funds to enhance support provided under the DWP-funded New Deal for Disabled People. Whilst there is still room for better coordination of programmes, progress is clearly evident in this area.

As noted above, the ability of disabled people to move into full-time or parttime work is clearly contingent on the flexibility of the benefits system. For at least ten years, the Government has striven to ensure that positive rather than negative incentives exist, so that disabled people will be encouraged rather than deterred from dipping a toe into the world of work. However, evaluations of the *New Deal for Disabled People* (Stafford, 2005) indicated that disabled people who had put considerable energy into securing a complex benefits package were reluctant to jeopardise it by indicating a willingness to work. Linking rules were intended to allow a disabled person to work for a given period of time, with a guarantee that their benefits package would not be withdrawn if the job could not be sustained. Whilst there has been a fall in the number of people claiming IB/ESA over recent years, there continue to be high claimant rates in areas of industrial decline. In the present economic climate, with widespread fears over job security, there is a danger that disabled people with higher support needs will decide to remain on benefits as the least risky option. Even greater flexibility in the benefits system is therefore required, although this will prove difficult to achieve if a culture of mistrust of benefits claimants is encouraged.

The Marmot Review of Health Inequalities (DoH, 2010a) took a very broad view of the causes and consequences of ill-health, arguing that high levels of economic inequality led to greater morbidity and mortality in the population. The report noted that people living in more socially advantaged areas lived longer, and also enjoyed more disability-free years of life. The report promoted the need for early intervention in areas of social disadvantage to prevent child illness and disability; and for improved employment support programmes and better levels of benefit in order to prevent the social creation of disability.

Over the past ten years there has been a growing emphasis on the need for elements of public policy to be seen as inter-connected entities, rather than separate silos. The merger of the Employment Service with the Benefits Agency to produce Jobcentre Plus, discussed in Chapter 3, formed an early part of this process, and there are now calls for even closer linkages to be made between education, training, employment, benefits and health policies. The intention of the *Total Place* initiative is to find ways of delivering better coordinated and more cost-effective services, particularly in areas of social deprivation. The impact of such initiatives, and their implications for disabled people, clearly requires careful monitoring over time.

6.2 Policy tensions

We draw together here some of the tensions in the discussion about employment policy and disabled people. While some of these – such as the first – are perhaps unavoidable, some others may be lessened, if not removed, for example, by better information for employers, Jobcentre Plus staff, both Advisers and their managers, and for colleagues of disabled employees, about the benefits of employing disabled people and the support they may need to cope with their conditions.

Perhaps the most salient theme is the **policy tension between the social inclusion agenda, and the needs of the UK economy**, which runs through so many of the policy documents discussed in Chapter 4. Are we more concerned about including disabled people in opportunities to work, thereby avoiding the dangers of poverty and social exclusion? Or is the main concern ensuring that all groups who are currently economically inactive, including disabled people, are encouraged back into the workforce, in order to raise the overall employment rate, reduce public expenditure on benefits and support economic growth? Even the Perkins *et al* (2009) review of employment support for people with a mental health condition acknowledged the need for financial limits on how much can be spent on support for any one individual.

A related question is whether unemployment for disabled people arises from a problem in labour supply or in labour demand. Concentrating on the labour supply, preparing people through courses for jobs which do not exist, or for which competition is intense, may seem less worthwhile in times of recession than it did when vacancies were plentiful, particularly for those providers whose fees for provision are linked to their success rates in placing trainees in paid work. The long-term view is, of course, to prepare trainees for work which may be available in future, and to acknowledge – as some of our key informants did in their interviews – that the process of training has value in itself, building the confidence of trainees and showing them that life can be different. At the same time, there is a need to acknowledge that finding paid work may take rather longer when jobs are scarce. Some of our key informant interviewees were concerned, however, that whereas voluntary work may have a role to play in the transition, it is important that people do not 'get stuck working in charity shops'. Strategies for increasing the labour demand for disabled workers are harder to implement, but projects such as *Project Search* have helped awareness-raising among employers. Public sector organisations have led the way in encouraging employment of disabled people, but some of our interviewees expressed concerns that they will consequently be disproportionately affected by the recession and forthcoming public sector cuts.

A further tension can be identified, between the desire to create a clear and fair benefits system, with carefully specified rules, responsibilities and conditionality for claimants, and the desire to demonstrate personalisation, with flexibility to take into account the needs and aspirations of individuals. We noted in Chapter 4 how Bambra (2008) perceived a division in policy-makers' thinking between the deserving and the undeserving poor, and many people currently on IB face some uncertainty as to how they will be perceived when required to undertake the Work Capability Assessment. For some, there will be a move towards greater flexibility and support, with schemes such as direct payments (DoH, 2003; DoH, 2007) or the 'Right to control' scheme in which disabled people are given the power to take a range of funding streams to which they are entitled as an individual budget. For others, there may be conditionality, penalties and pressure.

We also note a **tension between a centralised system and devolution of responsibilities** - devolution not just to the Welsh Assembly Government and the Scottish Government, but also at regional and sub-regional levels throughout Great Britain. Again, some of our key informants echoed this concern. While benefits, rules, responsibilities and conditionality remain centralised within the DWP, policy documents frequently acknowledge the value of local knowledge of local labour markets and employers. In all three countries, local bodies and partnerships – such as, for example, local employment and skills boards in England or Workforce Plus partnerships in Scotland - have involvement in stimulating employment and supporting unemployed people, including disabled people, to move towards employment. This is also mirrored within the DWP, with the move to give greater flexibility to Jobcentre Plus Personal Advisers to take account of the needs and aspirations of individual customers, as well as its involvement in local partnerships. At best, this devolution should allow job seekers to tap into the best of local expertise; at worst – and we note the reservations of North *et al.* (2007) about the effectiveness of regional and subregional institutions – it might mean a postcode lottery, limiting equality of opportunity for disabled people seeking employment across the UK.

Finally, there may also be tension between offering Jobcentre Plus disabled customers a personalised service, and the target-driven culture of the organisation, if local managers insist on limiting time for each intervention to meet targets. Similar tensions may arise in provider organisations, since the system of funding rewards those who move customers through training into jobs quickly – at a speed which some disabled customers may find hard to achieve. The consequences of a payment by results regime is that it disincentivises engagement with people who are furthest away from the labour market, leading to 'creaming'. The White Paper, Building Britain's Recovery (DWP, 2009a), notes this problem and suggests that in the future job broking organisations may be required to work with all clients, irrespective of their benefits status. Unfortunately, it may be possible for employment agencies to get round these requirements, by 'parking' clients who are unlikely to find jobs, and investing most time and energy in those whose employment chances are better.

6.3 Future priorities for monitoring and research

In this final section, we indicate some of the areas which it will be necessary for the EHRC to monitor closely over the coming years.

6.3.1 The impact of new equality policy and legislation

Since 2005, public bodies in England, Wales and Scotland have been required to produce Disability Equality Schemes and annual reports to monitor the extent to which progress towards equality of opportunity for disabled people is being made achieved. In the context of the emphasis on mainstreaming equality, public bodies will, in the future, be producing single equality schemes covering many areas of social policy including education, training and employment. The impact of the mainstreaming approach in capturing and promoting progress in the area of employment for disabled people requires close scrutiny.

The Equality Act 2010 also attempts to tackle disability discrimination in recruitment. In the future, it is expected that health questionnaires and, possibly, medical screening, will only take place once a candidate has been

selected for employment. It is further recommended that references should only be taken up after interview, and that a job offer should be made subject to suitable references being obtained. Finally, under the terms of the new legislation all public sector bodies will be required to publish information on the employment rates of disabled employees. The extent to which these measures are successful in enhancing disabled people's chances of obtaining employment, and how they apply to specific groups, should be investigated.

6.3.2 Social mobility and the position of disabled people

There are currently major concerns with regard to social mobility, prompted by evidence that the rate of social mobility has stagnated. The Millburn Report on fair access to the professions (Cabinet Office, 2009b) noted a growing tendency for children of the middle classes to increasingly dominate all professions, including nursing and teaching, which have traditionally been seen as routes towards social mobility. A Commission on Social Mobility has been set up to track progress in this area, and it will be important to ensure that the social mobility of specific groups of disabled people is monitored over time, paying particular attention to the way in which social capital is deployed in order, for example, to access prestigious internships.

6.3.3 The aftermath of the recession and the public spending squeeze

As noted in Chapter 2, research by the Government Equalities Office (2009) suggests that disabled people have, to date, not been disproportionately adversely affected by the recession. However, at the time of writing, it is evident that all mainstream political parties are planning to make cuts in public expenditure. There is a need to evaluate the impact of such reductions in public expenditure on the training and employment programmes which help disabled people, and on disabled employees. The rhetoric of government employment and skills strategies is to channel resources in the direction of young people, to ensure that they do not become disconnected from the labour market at an early stage. Since rates of disability increase with age, there is a danger that such priorities might result in the downscaling of efforts to get older disabled people back into employment. The impact of public sector cuts on the employment prospects of disabled people, which of course may be unintended consequences rather than deliberate policy objectives, therefore requires close scrutiny.

6.3.4 Impact of future tax and benefits policies

A key finding of the National Equality Panel was that Government fiscal policy since 1997 has been broadly redistributive, arresting the rapid growth in economic inequality which began in the 1980s. The White Paper *Building Britain's Recovery: achieving full employment* (DWP, 2009a) sets out some of the employment and fiscal policies which will have a future impact of the economic position of disabled people. There is a longer term ambition to create a single out of work benefit, thus abolishing the division between JSA and IB/ESA. If this change takes place, it will be important to track its impact on disabled people. Currently, JSA claimants generally receive lower rates of benefit than IB/ESA claimants. The creation of a single benefit, if this were to result in a levelling down, might therefore result in a deterioration of the already precarious financial position of disabled people and their children.

Another measure proposed in the 2009 White Paper is to explore the possibility of assisting ESA claimants to access the disabled worker element of Working Tax Credit. The overall impact of particular tax and benefit regimes in encouraging disabled people into employment, particularly those who have been out of work for some time, clearly requires investigation.

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