UK Disability Survey Research Report June 2021

Report contributors:

Dr. Rohan Allen, Dr. Jason Olsen, Dr. Armineh Soorenian, Dr. Marc Verlot

Analysts Foreword

This report summarises responses to the Disability Unit's UK Disability Survey used to inform the National Disability Strategy, from 15th of January 2021 up to and including the 28th of February 2021.

A total of 14491 respondents were included.

The survey remained open until the 23rd of April 2021, and received a total of 16651 responses. All responses received up to this date will be used to inform the delivery of the National Disability Strategy.

This survey was designed as a vehicle for disabled people, carers of disabled people, and members of the general public with an interest in disability, to share their lived experiences or views with the Disability Unit to inform the development of the National Disability Strategy. This survey represented one of a number of ways of engaging with stakeholders used by the Disability Unit to inform the National Disability Strategy. This was a self-selecting survey, designed as such so all those who wish to share their lived experience or views with the Disability Unit had the opportunity to do so. This meant that participants independently decided whether they wished to participate in the survey or not. Consequently, the participant population was not representative of the national population.

For all quantitative questions, respondent numbers were rounded to the nearest ten, and percentages rounded to one decimal place, to protect the anonymity of participants. Respondents who did not provide an answer to a given question were excluded prior to the calculation of percentages. Responses to qualitative questions were analysed using a combination of manual coding and topic modelling, themes identified through both analyses were integrated and reported.

For convenience, this report refers to disabled people, carers, and members of the general public throughout. More precisely this means respondents to the survey who are responding in the capacity of one of these groups (as determined in Q16a). For example '54% of disabled people reported that they either own their home outright, were buying with the help of a mortgage, or part owned and part rented...' more precisely means '54% of respondents answering this survey as disabled people (Q16a) reported that they either own their home outright, were buying with the help of a mortgage or part owned and part rented...'.

Contents

- 1. Executive summary
- 2.<u>Methods</u>
- 3. Quantitative insights
- 4. Qualitative insights

Executive summary

Responses to the UK Disability Survey received up to the 28 February 2021 formed a key part of insight gathering for the development of the National Disability Strategy.

The UK Disability Survey provided valuable insights across a wide range of topics, including perceptions and discrimination, housing, employment, education, shopping, leisure, and public services.

The survey identified that public perceptions of disabled people were a significant barrier to participation in areas including employment and education, and that the majority of disabled respondents to the survey felt that public attitudes towards disabled people were unhelpful. These findings underscore the need to improve public understanding and awareness of disability, to improve public attitudes towards disabled people, and to inspire social change across the UK.

Over half of disabled respondents reported worrying about being insulted or harassed in public places, and a similar proportion reported being mistreated because of their disability. Stronger measures are needed to tackle disability discrimination and hate crime.

Many disabled people and carers reported that they live in homes which do not meet their needs to live independently or to provide care, or that they have needed to make significant adjustments to their homes to meet accessibility requirements. Steps must be taken to boost the supply of accessible, affordable, homes - including supported housing, to help more disabled people and carers live in homes that meet their needs.

Accessibility challenges extend beyond the home, to public buildings and spaces. Over a quarter of disabled respondents often had difficulty accessing public buildings, while one in three disabled respondents often had difficulty accessing public spaces. Accessibility barriers faced by disabled people ranged from a lack of disabled or changing places toilets to a lack of ramps. Shops, bars, restaurants, and cafes were venues where accessibility barriers were commonly encountered. It is important to drive forward improvements to the accessibility of public buildings and spaces, including making high streets more accessible for disabled people.

Many disabled people and carers who had experienced difficulty accessing public buildings also reported difficulty accessing important public services. These findings highlighted the need to make accessing public services, including online services, as smooth and easy as possible.

Only one in ten disabled respondents to the UK Disability Survey agreed that disabled people are given the educational opportunities they need to thrive in society. This demonstrates the need for greater support to help disabled children and young people reach their full potential in the education system, and to transition smoothly into adulthood.

Finally, over half of disabled respondents not in employment reported that they would like more help finding and keeping a job. Of those in employment, half of disabled respondents felt their employer was flexible and made sufficient reasonable adjustments, and half of carers felt their employer was supportive of their caring responsibilities. Only a quarter of disabled people and carers felt they had the same promotion opportunities as their colleagues. These findings highlight the need to improve support for disabled people to start or stay in work, to create more inclusive workplaces where disabled employees have equal chance to progress, and to strengthen rights in the workplace for both disabled people and carers.

Taken together, the findings of the UK Disability Survey formed an important component of placing the lived experience of disabled people at the heart of developing the National Disability Strategy.

Methods

The Disability Unit opened the UK Disability Survey on 15th January 2021. The survey was open for a total of 14 weeks. Responses up to 28th February 2021, a total of 14491 responses, were used to inform the development of the National Disability Strategy. All responses up to 23rd April 2021, a total of 16651 responses, will be used to inform the delivery of the National Disability Strategy.

The UK Disability Survey targeted three groups:

- Disabled people
- People with caring responsibilities (i.e. carers)
- Members of the general public with an interest in disability

Survey design

The design of the UK Disability Survey was informed by two rounds of quasi-ethnographic research conducted by the Disability Unit and Policy Lab. This research was conducted between June and September 2019, and July and September 2020, respectively.

Researchers conducted the quasi-ethnographic research using open and reflexive interviewing techniques rather than a set of predefined questions or scripts. This allowed participants to guide the conversations and inform interpretations being made by the researchers. This method allowed participants to illustrate their complex thoughts, feelings, and experiences of disability. The full research methods used are outlined in the quasi-ethnographic research reports, published alongside this UK Disability Survey report.

Prior to launch the survey was tested with disabled people and organisations including the Royal National Institute of Blind People (RNIB).

The survey was estimated to take 20 to 30 minutes to complete.

Survey dissemination

The UK Disability Survey was delivered online through the Citizen Space platform.

The survey was promoted through a mixed communications approach with coordinated activity on social media, traditional media, and through newsletters. This included promotion via emails, Twitter, blog posts, Facebook, Instagram, and Linkedin. Government news items and media articles announced the launch of the survey. The survey was also promoted through the Disability Unit's stakeholder networks.

The survey, landing page, and privacy notice were made available in Welsh translation, Easy Read, and BSL video formats. The Welsh translation was checked for accuracy by a stakeholder in the Welsh government. The BSL videos were checked for accuracy with the subtitles, prior to embedding and the launching of the survey.

Support in completing the survey was made available directly from the Disability Unit through a dedicated survey mailbox. The Royal National Institute of Blind People also offered support and advice in completing the survey.

Those unable to complete the survey were invited to submit statements of no more than 250 words directly to the Disability Unit by email or post. Insights from these statements were incorporated into the qualitative analysis section.

Data analysis

Quantitative analysis

Respondents were asked to specify how they would like to respond to the UK Disability Survey; either as a disabled person, as a carer of a disabled person or people, or as a member of the general public with an interest in disability.

Analysis of each question was conducted independently for those answering the survey as disabled people, carers of a disabled person or people, and members of the general public with an interest in disability. This was informed by the respondent's answers to Question 16a ('How are you answering this survey?'). Notably, respondents may belong to multiple groups, however answers were processed according to the capacity in which each respondent had selected to answer the survey.

To protect the anonymity of respondents, the number of reported responses were rounded to the

nearest 10, and all percentages were rounded to one decimal place. As a result of this rounding, the sum of percentages is not always 100.

Some questions offered a free-text box for those responding 'other'. These answers were manually coded for all respondents up to 28th February 2021. All personally identifying information included in responses to these questions was removed in order to maintain the anonymity of the data.

Qualitative analysis

The UK Disability Survey included four openformat questions. Each open-format question stated an unenforced word limit ranging from 100 to 250 words. However, all answers were considered in their entirety. A total of 33,796 responses were provided to free-text questions with single responses up to 1,118 words in length.

Due to the large number of free-text responses received, a combined approach of manual coding and topic modelling was implemented to analyse responses.

Manual coding

A subset of 500 free-text responses (300 from those answering the survey as disabled people, 100 each from those answering the survey as carers of disabled people or members of the public with an interest in disability) were selected independently for each of the four open-format questions using random stratified sampling to increase representativeness across demographic characteristics of sex, age, ethnicity, educational attainment, and impairment type (disabled respondents only).

Thematic analysis was used in the analysis of participant responses utilising Braun and Clarke's stages of thematic analysis.¹

Qualitative data analysis software was employed to aid in an evaluation of data. As the focus of the research was on the lived experience of disabled people the initial coding of data began with those who responded to the survey as disabled people. This was followed by coding of answers from those who responded to the survey as carers, and those

¹ Braun, V. and Clarke, V. (2013). Successful qualitative research. London: SAGE.

responding to the survey as members of the general public.

Data was evaluated following an open inductive coding process to ensure that themes truly emerged from the data. The process began with the researcher utilising selective coding in conjunction with semantic codes. Emergent themes were identified and the coding for each topic was refined.

A second researcher evaluated the coding, categorisations, and themes identified from the data. This analysis supported the initial analysis, but expanded the number of sub-themes that were identified. The first researcher agreed with this recommendation.

Topic modelling

Topic modelling is a method of machine-assisted reading of text data, used to identify topics from free-text responses to open-format questions. Topic modelling was performed using a structural topic model, implemented through the *stm* package in R.² This method clusters responses according to a predefined number of topics, resolves the association of words with each topic, and resolves the association of each answer with each topic. The method allows answers to be associated with multiple topics, reflecting the structure of the questions in the survey.

The optimal number of topics for each question was determined by iteratively generating models ranging from 10 to 100 topics in size, and using model diagnostics to identify the optimal number of topics. For each of the four free-text questions, 60 was determined to be the optimal number of topics.

The theme of each output topic was determined by researchers based on the words most strongly associated with the topic and the answers most strongly associated with the topic.

Integrating the analyses

Themes identified through manual coding and topic modelling were cross-referenced. Although

² Roberts, M. E., Stewart, B. M., & Tingley, D. (2019). stm: An R package for structural topic models. *Journal of Statistical Software*, *91*(1), 1-40.

these analyses were conducted independently, a high degree of similarity was found between the two approaches. The union of themes identified through manual coding and topic modelling was reported, with representative quotes related to each topic provided. When reporting the findings of this qualitative analysis, we have indicated the relative frequency of each theme in broad terms. The prevalence of each theme was categorised as being raised by many respondents, a moderate number of respondents, or some respondents. The order in which each theme appears is not indicative of its prevalence.

Quantitative insights

Respondents characteristics

Key findings

74% of respondents completed the survey as disabled people (n = 10780), 18% completed the survey as carers (n = 2600), and 8% completed the survey as members of the general public (n = 1120; Q16a).

Disabled people

 87% of disabled respondents were aged 16-64 years, while only 13% were 65+ years (Q1). Older disabled people are underrepresented in the survey population relative to the disabled population of the UK, where 38% of the disabled people are 65+ years.³

³ Family Resources Survey: financial year 2018/19

- 27% of disabled respondents were male (Q2) and are underrepresented as males make up 45% of the disabled population of the UK.
- 94% of disabled respondents identified as white, 1% identified as Asian and Asian British, 1% identified as Black, African, Caribbean, Black British, 3% identified as mixed and multiple ethnic groups, and 1% identified as other ethnic groups (Q4).
- 49% of disabled respondents identified as having no religion, compared with 25.1% of the overall population of England and Wales. Fewer than 1% of disabled respondents identified as Muslim, Hindu, or Sikh, respectively. These groups were all substantially underrepresented relative to the overall population of England and Wales (Q6).⁴
- 47% of disabled respondents had a degree or equivalent qualification, while 5% had no qualifications (Q10).
- 42% of disabled respondents report they were employed either full time or part time,

⁴ Exploring religion in England and Wales

this figure rose to 47% for those aged 16 to 64 (Q47).

73% of disabled respondents who have a physical or mental health condition or illness lasting or expected to last for 12 months or more had an impairment related to mobility, 57% had an impairment related to mental health, 54% had an impairment related to stamina, breathing or fatigue, 53% had an impairment related to dexterity (Q15).

Carers

- 34% carers reported a physical or mental health conditions or illnesses lasting or expected to last for 12 months or more (Q11), and of these, 71% stated that their condition or illness reduced their ability to perform day to day activities (Q13). This highlights that many carers are also disabled people.
- Carers were overwhelmingly female (85%; Q2) and of white ethnicity (94%; Q4).

General public

 Those answering the survey as members of the general public were similarly biased towards younger respondents (83% aged 16-64 years; Q1), females (68%; Q2), those of white ethnicity (94%; Q4), those with no religion (53%; Q6), and those educated to degree level or equivalent (61%; Q10).

Taken together, these findings highlight that the survey population for disabled people, carers, and the general public deviated substantially from disabled population of the UK and the overall population of the UK. Emergent themes and experiences identified in this survey should be interpreted with consideration of the demographic characteristics of the survey population. For example, 47% of disabled respondents had a degree or equivalent qualification, compared with 23% of the disabled population aged 21 to 64 in the UK. Employment outcomes for disabled people are known to differ according to educational attainment,⁵ and therefore the experiences of the survey population with employment may not be representative of the experiences of the disabled population of the UK. More broadly, it should be

⁵ The employment of disabled people 2019

noted the findings of this self-selecting survey may not be representative of the experiences of all disabled people, carers, and members of the general public throughout the UK.

Accessing the built environment

Key findings

Disabled people

- 54% of disabled people reported that they either own their home outright, were buying with the help of a mortgage, or part owned and part rented (shared ownership; Q17). This figure fell to 51% for disabled respondents aged 16 to 64, but remained greater than the proportion of owner occupiers in the disabled population of the UK aged 16 to 64 (40.9%).⁶
- 53% of disabled people said that their home met their needs to live independently 'completely' or 'to a large extent'. This highlights that many disabled people are still living in homes which do not

⁶ Outcomes for disabled people in the UK: 2020

comprehensively meet their needs to live independently (Q18).

- 47% of disabled people reported that it required at least 'some effort' getting in and out of where they live (Q19).
- 34% of disabled people had to make 'a lot' or 'a moderate amount' of adjustments to their home over the past 5 years to support independent living (Q21), and these changes were most frequently self-funded (58%) or paid for by contributions from family or friends (12%). Only 16% of disabled people who had made adjustments received funding to pay for their adjustments (Q22), and 61% said that more adjustments are required to meet their needs (Q23).
- 31% of disabled people had difficulty using public spaces 'all the time' or 'often' (Q24).
 Similarly, 28% had difficulty accessing public buildings 'all the time' or 'often' (Q25). Of those who had reported having difficulty accessing public buildings at least 'sometimes', the buildings respondents had most frequently been unable to access or had extreme difficulty accessing were shops and shopping centres (78%), and pubs, bars,

restaurants, and cafes (66%) highlighting the need to make these venues more accessible and gather high quality data on their accessibility. 46% were unable to access or had extreme difficulty accessing medical facilities (Q26).

• Of those who had reported having difficulty accessing public buildings at least sometimes, the activities which disabled people have most frequently been unable to take part in due to accessibility issues are going on holiday (57%), visiting friends (50%) and going to the theatre, cinema, or arts (48%; Q27).

Carers

- 68% of carers either own their home outright, were buying with the help of a mortgage, or part owned and part rented (shared ownership; Q64).
- 88% of carers live with the person they care for at least 2 days per week (Q65).
- 49% of carers said their home meets their needs to provide care 'completely' or 'to a large extent' (Q66).

- 41% of carers had made 'a moderate amount' or 'a lot of' alterations or adjustments to where they live to support the person for whom they care (Q69). These adjustments were predominantly self-funded (61%) or paid for by contributions for family or friends (6%; Q70). 56% of carers said that more adjustments are required to meet their needs (Q71).
- 38% of carers said they had difficulty using public spaces 'all the time' or 'often' when with the person for whom they care (Q72), and 33% reported difficulty accessing public buildings 'all the time' or 'often' when with the person for whom they care (Q73). Shops and shopping centres (72%), and pubs, bars, restaurants, and cafes (64%) were the buildings that carers most frequently reported being unable to access or had extreme difficulty accessing while with the person for whom they care (Q78). This reflected the experiences of disabled respondents.
- The activities which carers were most frequently unable to take part in with the person for whom they care due to accessibility issues were going on holiday

(58%), visiting friends (47%) and going to the theatre, cinema, or arts (48%), reflecting the experiences of disabled respondents (Q74).

Inclusive Products and Services

Key findings

Findings reported in the previous section highlight that disabled people and carers frequently encounter accessibility issues at public buildings, and are often excluded from activities due to accessibility issues (Q24-27,Q72,Q73,Q78).

Disabled people

Technical note: those who had not accessed specific services were excluded prior to calculating the proportion of people who experience difficulties, consequently percentages reported in this text will differ from data tables.

- Of those who had reported having difficulty accessing public buildings at least 'sometimes', 78% of disabled people who had accessed health services had experienced at least some difficulties (Q28a).
- Of those who had reported having difficulty accessing public buildings at least 'sometimes', 58% of disabled people who

had accessed justice services had experienced at least some difficulties (Q28b).

- Of those who had reported having difficulty accessing public buildings at least 'sometimes', 80% of disabled people who had accessed benefit and pension services had experienced at least some difficulties (Q28c).
- Of those who had reported having difficulty accessing public buildings at least 'sometimes', 90% of disabled people who had accessed culture, sport, and leisure services had experienced at least some difficulties (Q28d).
- Of those who had reported having difficulty accessing public buildings at least 'sometimes', 74% of disabled people who had accessed social services had experienced at least some difficulties (Q28e).
- Of those who had reported having difficulty accessing public buildings at least 'sometimes', 51% of disabled people who had accessed tax services had experienced at least some difficulties (Q28f).

Carers

- The responses of carers reflected the experiences of disabled respondents.
- 83% of carers who had accessed health services on behalf of the person for whom they care had experienced at least some difficulties (Q77a).
- 52% of carers who had accessed justice services on behalf of the person for whom they care had experienced at least some difficulties (Q77b).
- 73% of carers who had accessed benefits and pension services on behalf of the person for whom they care had experienced at least some difficulties (Q77c).
- 88% of carers who had accessed culture, sport, and leisure services on behalf of the person for whom they care had experienced at least some difficulties (Q77d).
- 79% of carers who had accessed social services on behalf of the person for whom they care had experienced at least some difficulties (Q77e).
- 47% of carers who had accessed tax services on behalf of the person for whom

they care had experienced at least some difficulties (Q77f).

Supporting independent living

Key findings

Disabled people

- 52% of disabled people receive support with their care needs at least once a week (Q38). Of these, 75% received support with care from family and friends who live with them (either paid or unpaid), while 19% had support with care from paid carers, nurses, or other professionals (Q39).
- Of disabled people who received informal (unpaid) support with care, 24% said this support made them feel 'more in control' or 'much more in control' of their lives (Q41). Of those who received formal paid support with care from public services, 45% said this support made them feel 'more in control' or 'much more in control' of their lives (Q42).
- 42% of disabled people found paying their usual living expenses 'quite difficult' or 'very difficult' before COVID-19 (Q43b), compared with 51% during COVID-19 (Q43a). Of those who found paying their usual living expenses

'quite difficult' or 'very difficult', limited income was most frequently reported as the main reason for these difficulties (41%; Q44).

- Of those disabled people who found paying their usual living expenses 'quite difficult' or 'very difficult', 88% who had applied for and/or received financial support found this experience 'quite difficult' or 'very difficult' (Q45).
- 42% of disabled respondents report they were employed either full time or part time, this figure rose to 47% for those aged 16 to 64 (Q47).
- 56% of disabled people who are not employed but are either actively seeking employment or are interested in employment 'agree' or 'strongly agree' that they would like more support in finding a job (Q48a), 60% 'agree' or 'strongly agree' that they would like more support in keeping a job (Q48b).
- 24% of disabled people who are employed 'agree' or 'strongly agree' that their promotion opportunities are the same as their colleagues (Q49a). 48% 'agree' or 'strongly agree' that their employer is flexible and

makes sufficient reasonable adjustments for disabled people (Q49b).

Carers

- 84% of carers reported that all the care they provide is unpaid (Q56). 65% of carers managing someone's care found it 'quite difficult' or 'very difficult' before COVID-19 (Q59b), compared with 86% during COVID-19 (Q59a).
- 38% of carers found paying their usual living expenses 'quite difficult' or 'very difficult' before COVID-19 (Q60b), compared with 52% during COVID-19 (Q60a). Of those carers who found paying their usual living expenses 'quite difficult' or 'very difficult', limited income (61%) and costs relating to caring for someone with a health condition or disability (60%) were most frequently reported as the main reasons for difficulties paying usual living expenses (Q61).
- Of those carers who found paying their usual living expenses 'quite difficult' or 'very difficult', 65% who had applied for and/or received financial support found this experience 'quite difficult' or 'very difficult',

while fewer than 1% found this experience 'very easy' (Q62).⁷

- 48% of carers were in full time or part time employment (Q87).
- 15% of carers who are not employed 'agree' or 'strongly agree' they would like more help finding a job (Q88a), 18% 'agree' or 'strongly agree' they would like more help keeping a job (Q88b).
- 54% of carers who are employed 'agree' or 'strongly agree' their employer is supportive of their caring responsibilities (Q89a). However, only 26% 'agree' or 'strongly agree' that their promotion opportunities are the same as their colleagues (Q89b).

General public

 Of members of the general public who work with other people, 65% work with at least one person who they know is a disabled person (Q100). Respondents (excluding those stating they do not work with other people)

⁷ Question 62 (carers) is not directly comparable to question 45 (disabled people) due to differences in answer coding.

reported that barriers such as accessible transport or access to public buildings (51%) or negative attitudes towards disabled people (39%) are the main reasons that they believe there are not many disabled people in their workplace (Q101).

All respondents

- 27% of disabled people, 21% of carers, and 44% of general public respondents 'agree' or 'strongly agree' that disabled people are able to live full, independent lives (Q110b).
- 4% of disabled people, 4% of carers, and 6% of general public respondents 'agree' or 'strongly agree' that disabled people have sufficient financial support to meet their needs (Q110d).
- 5% of disabled people, 6% of carers, and 9% of general public respondents 'agree' or 'strongly agree' that in general, the government provides a good level of support to disabled people (Q110e).
- 10% of disabled people, 8% of carers, and 14% of general public respondents 'agree' or 'strongly agree' that disabled people are

given the educational opportunities they need to thrive in society (Q110f).

- 5% of disabled people, 3% of carers, and 8% of general public respondents 'agree' or 'strongly agree' that disabled people are given the employment opportunities they need to thrive in society (Q110h).
- 91% of disabled people, 89% of carers, and 96% of general public respondents 'agree' or 'strongly agree' that employers should be flexible in making workplace adjustments for disabled people (Q110i).
- 12% of disabled people, 11% of carers, and 18% of general public respondents 'agree' or 'strongly agree' that employers are flexible in making workplace adjustments for disabled people (Q110j).
- 88% of disabled people, 90% of carers, and 94% of general public respondents 'agree' or 'strongly agree' that employers should be flexible in making workplace adjustments for those that care for disabled people (Q110k).
- 10% of disabled people,13% of carers, and 15% of general public respondents 'agree' or 'strongly agree' that employers are flexible in

making workplace adjustments for those that care for disabled people (Q110I).

- 8% of disabled people, 8% of carers, and 14% of general public respondents 'agree' or 'strongly agree' that disabled people are given the support they need to develop in the workplace (Q110m).
- 85% of disabled people, 84% of carers, and 91% of general public respondents 'agree' or 'strongly agree' that promotion opportunities for disabled people should be the same as their colleagues (Q110n).

Access to justice and rights

Key findings

Disabled people

- Disabled people reported feeling unsafe in their neighbourhood (45%; Q50d), worrying about being insulted or harassed in the street or any other public place (54%; Q50e), or worrying about being physically attacked by strangers (45%; Q50f) at least 'some of the time'.
- Disabled people reported people mistreating them because of their disability (58%; Q50g), people being hostile to them online because of their disability (31%; 50h), or experiencing violence because of their disability (15%; Q50i) at least 'some of the time'.
- 21% of disabled people reported feeling unsafe inside where they live at least 'some of the time' (Q50j), and amongst those, the most frequently reported reasons for feeling unsafe inside where they live were worries about intruders (48%) and difficulty accessing immediate help (37%; Q51).

 Of the disabled people who had experienced events related to bullying, harassment, or violence based on their disability, 29% had officially reported it (Q52), and only 15% of those were 'satisfied' or 'very satisfied' with the end result of the reporting (Q53).

Carers

- 42% of carers reported worrying about being insulted or harassed in the street or any other public space when with the person they provide care for at least 'some of the time' (Q92c). Carers reported experiencing people mistreating them (29%; Q92e), or being hostile to them (31%; Q92f), because they were caring for someone, at least 'some of the time'.
- 89% of carers 'agree' or 'strongly agree' that they would feel confident to speak up⁸ if they witnessed a friend or family member treating a disabled person unfairly (Q91a). 73% 'agree' or 'strongly agree' that they would feel

⁸ Speak up is defined in the survey as informally getting involved during or after an incident, either by engaging with the perpetrator or the recipient of unfair treatment.

confident to speak up if they witnessed unfair behaviour towards a disabled person in a public place (Q91b). 83% 'agree' or 'strongly agree' that they would feel confident to speak up if they witnessed a colleague treating a disabled person unfairly at work (Q91c).

- 71% of carers 'agree' or 'strongly agree' that they would feel confident formally reporting unfair behaviour towards a disabled person to the police or local authorities (Q91d), while 78% 'agree' or 'strongly agree' that they would feel confident formally reporting unfair behaviour towards a disabled person to their manager at work (Q91e).
- Of the carers who had experienced events related to bullying, harassment or violence based on their caring responsibilities, 22% had officially reported it (Q94), and of those only 16% were 'satisfied' or 'very satisfied' with the end result of the reporting (Q95).

General public

 92% of the general public 'agree' or 'strongly agree' that they would feel confident to speak up if they witnessed a friend or family member treating a disabled person unfairly (Q105a). 70% 'agree' or 'strongly agree' that they would feel confident to speak up if they witnessed unfair behaviour towards a disabled person in a public place (Q105b). 89% 'agree' or 'strongly agree' that they would feel confident to speak up if they witnessed a colleague treating a disabled person unfairly at work (Q105c).

 72% of the general public 'agree' or 'strongly agree' that they would feel confident formally reporting unfair behaviour towards a disabled person to the police or local authorities (Q105d), while 88% 'agree' or 'strongly agree' that they would feel confident formally reporting unfair behaviour towards a disabled person to their manager at work (Q105e).

Changing perceptions

Key findings

Disabled people

- 71% of disabled people 'agree' or 'strongly agree' that people don't care if disabled people have to wait longer than everyone else to get what they need (Q54a).
- Over half of disabled people who are not employed but are actively seeking employment or are interested in employment (51%) 'agree' or 'strongly agree' that concerns about other people's views of them have stopped them from working (Q48c).
- Disabled people reported that concerns about other people's views have stopped them from seeking education (38%; Q50a), relaxing (71%; Q50b), or from going outside (62%; Q50c) at least 'some of the time'.

Carers

 74% of carers 'agree' or 'strongly agree' that people don't care if disabled people have to wait longer than everyone else to get what they need (Q96a).

 12% of carers who are not in employment 'agree' or 'strongly agree' that their concerns about other people's views of them have stopped them from working (Q88c).

General public

- 69% of the general public had been in contact with at least one disabled person over the past week (Q99).
- 75% of the general public would feel 'comfortable' or 'very comfortable' engaging with a disabled person who was someone they met in the street (Q102a), 83% would feel 'comfortable' or 'very comfortable' engaging with a disabled person who was their work colleague (Q102d), and 74% would feel 'comfortable' or 'very comfortable' engaging with a disabled person who they met in a social context like a bar or club (Q102o).
- 64% of the general public said that they had no difficulty engaging with disabled people, but the main concerns raised by those who did have difficulty were worries that disabled

people will be offended if they say something wrong (22%), and worries that they will not be able to effectively communicate with a disabled person (18%; Q103).

All respondents

- 16% of disabled people, 18% of carers, and 23% of general public respondents 'agree' or 'strongly agree' that people understand the term 'disabled people' (Q110a).
- 8% of disabled people, 8% of carers, and 12% of general public respondents 'agree' or 'strongly agree' that the views held by members of the public about disability are generally helpful for disabled people (Q110c).
- 59% of disabled people, 52% of carers, and 75% of general public respondents 'agree' or 'strongly agree' that disabled people disabled people can contribute in the same way as non-disabled people in the workplace (Q110g).
- 19% of disabled people, 24% of carers, and 53% of general public respondents 'agree' or 'strongly agree' that disabled people are valued in their workplace (Q110o).

- 9% of disabled people, 10% of carers, and 14% of general public respondents 'agree' or 'strongly agree' that disabled people are generally treated fairly (Q110p).
- 65% of disabled people, 57% of carers, and 56% of general public respondents 'agree' or 'strongly agree' that they would feel comfortable in an intimate relationship with a disabled person (Q110r).
- 87% of disabled people, 84% of carers, and 90% of general public respondents 'agree' or 'strongly agree' that they would like to see disabled people standing for elected office (Q110s).

Well-being

Key findings

Disabled people

- 32% of disabled people reported that they hadn't been in contact with anyone that they did not live with, who they were close to, in the past week (Q31).
- Of disabled people stating that they had been in contact with someone they do not live with, but are close to, in the past week, 45% 'agree' or 'strongly agree' that they have enough close friends/family that they can depend on to get the support they need (Q33).
- Of disabled people stating that they had been in contact with someone they do not live with, but are close to, in the past week, 76% reported that they would like 'a little more' or 'a lot more' contact with those they are close to (Q34). Of disabled people who would like more contact, COVID-19 restrictions or concerns (96%) and not feeling well enough (54%) were most frequently reported to have

made it more difficult to make more contact (Q35).

- 43% of disabled people report feeling lonely (Q36a), and 55% report feeling isolated from others (Q36b) 'always' or 'often'.
- 21% of disabled people 'agree' or 'strongly agree' that they feel able to achieve what they want for their future (Q54b). While 82% 'agree' or 'strongly agree' that they moderate their expectations of the future because of their disability (Q54c).
- The average score⁹ for life satisfaction (10 highest, 0 lowest) reported by disabled people was 4.1 (Q55c) compared with 5.1 at this time last year (Q55a). The average score for the extent to which things you do in your life are complete was 4.3 (Q55b). The average score for the extent to which things you do in your life are worthwhile was 5.4 this time last year (Q55d).¹⁰

⁹ Average score represents the mean, calculated as the sum of scores divided by the total number of scores.

¹⁰ There is a discrepancy in phrasing between Q55b and Q55d, where 'worthwhile' is replaced with the 'complete', thus these questions should not be directly compared.

Carers

- 78% of carers reported caring responsibilities impact activities they would like to participate in personally 'all the time' or 'often' (Q75b), and 93% have been prevented from participating in activities they would have liked to participate in due to their caring responsibilities (Q76).
- 22% of carers 'agree' or 'strongly agree' that they have enough close contacts that they can rely on to get the support they need (Q83).
- 37% of carers had not been in contact with someone that they don't live with but are close to them in the past week (Q81).
- 87% of carers report that they would like 'a little more' or 'a lot more' contact with those they are close to (Q84). Of carers who said they would like more contact, COVID-19 restrictions/concerns (96%), caring responsibilities (76%), and not having enough time (41%) were most frequently reported as making it more difficult to make more contact (Q85).

- 46% of carers reported feeling lonely (Q86a) and 59% reported feeling isolated from others (Q86b) 'often' or 'always'.
- 20% of carers 'agree' or 'strongly agree' that they feel able to achieve what they want for their future (Q96b). While 86% 'agree' or 'strongly agree' that they moderate their expectations of the future because of their caring responsibilities (Q96c).
- The average score for life satisfaction (10 highest, 0 lowest) reported by carers was 4.6 (Q97a) compared with 5.8 at this time last year (Q97b). The average score for the extent to which things you do in your life are worthwhile was 5.9 (Q97c), compared with 6.5 this time last year (Q97d).

General public

The average score for life satisfaction (10 highest, 0 lowest) reported by the general public was 6.2 (Q106a) compared with 7.2 at this time last year (Q106b). The average score for the extent to which things you do in your life are worthwhile was 7.0 (Q106c), compared with 7.4 this time last year (Q106d).

COVID-19

Key findings

Disabled people

- 45% of disabled people managing their own care found it 'quite difficult' or 'very difficult' before COVID-19 (Q40b), compared with 65% during COVID-19 (Q40a).
- 42% of disabled people found paying their usual living expenses 'quite difficult' or 'very difficult' before COVID-19 (Q43b), compared with 51% during COVID-19 (Q43a).
- Of disabled people stating that they had been in contact with someone they do not live with, but are close to, in the past week, 76% of disabled people reported that they would like 'a little more' or 'a lot more' contact with those they are close to (Q34). Of disabled people who would like more contact, COVID-19 restrictions or concerns (96%) were most frequently reported to have made it more difficult to make more contact (Q35).

The average score¹¹ for life satisfaction (10 highest, 0 lowest) reported by disabled people was 4.1 (Q55c) compared with 5.1 at this time last year (Q55a). The average score for the extent to which things you do in your life are complete was 4.3 (Q55b). The average score for the extent to which things you do in your life are worthwhile was 4.3 this time last year (Q55d).¹²

Carers

- 65% of carers managing someone's care found it 'quite difficult' or 'very difficult' before COVID-19 (Q59b), compared with 86% during COVID-19 (Q59a).
- 39% of carers found paying their usual living expenses 'quite difficult' or 'very difficult' before COVID-19 (Q60b), compared with 52% during COVID-19 (Q60a).

¹¹ Average score represents the mean, calculated as the sum of scores divided by the total number of scores.

¹² There is a discrepancy in phrasing between Q55b and Q55d, where 'worthwhile' is replaced with the 'complete', thus these questions should not be directly compared.

- Before COVID-19, 63% of carers had witnessed people being unkind or rude to disabled people or the person assisting them, and 62% had witnessed people ignoring disabled people or the person assisting them (Q90b). Fewer carers reported witnessing these behaviours during COVID-19, which may be partially explained by less frequent interactions with strangers (Q90a).
- 87% of carers report that they would like 'a little more' or 'a lot more' contact with those they are close to (Q84). Of carers who said they would like more contact, COVID-19 restrictions/concerns (96%), caring responsibilities (76%), and not having enough time (41%) were most frequently reported as making it more difficult to make more contact (Q85).

All respondents

 64% of disabled people reported that some of their answers are different as a direct or indirect result of the COVID-19 pandemic and the government response, compared with 66% or carers, and 44% of general public respondents (Q107). The topics where answers were most frequently affected by the COVID-19 pandemic were meeting people, accessing society and doing things, and life satisfaction, for all groups (Q108).

Qualitative insights

Question 109. Briefly detail how your experiences now are different to prior to the COVID-19 pandemic and government response, relating to all the topics(s) you previously selected.

Question 109 was asked to all survey respondents who had reported that their answers to some parts of the survey would have differed prior to the COVID-19 pandemic (Respondents answering 'Yes' to Question 107 only). Answers were analysed using a combination of topic modelling and manual coding.

Not being able to meet friends and family. This was the most frequently raised topic by disabled people, carers, and the general public. Many disabled people reported not being able to see friends and family, or being able to socialise with friends and family, for example for a meal or a coffee. Some disabled people reported that their friends and family live far away, or were not part of their bubble. This led to increased feelings of isolation and vulnerability, due to being disconnected from family and other support networks.

"I am not able to physically meet up with family and friends, including two new Great Nieces. My next of kin, my brother lives over 200 miles away, so I have no bubble as all my friends have their own family and I live on my own, so if anything goes wrong, there is no-one."

Disabled person, 65 to 74, South East

Negative impacts of mental health and wellbeing

Disabled people reported negative impacts of mental health as a result of the COVID-19 pandemic. The reasons underpinning the negative impacts of the pandemic on mental health are diverse, and include restrictions preventing disabled people from socialising with friends and family, isolation, anxiety related to employment, and disrupted access to mental health support. "my job role stopped and I am issolated [sic] physically my disability issolates [sic] me mentaly so both togther [sic] impact my mental health"

Disabled person, 45 to 54, Yorkshire and the Humberside

Many carers reported that the pandemic had negatively impacted their mental health. Carers mental health was often associated with the mental health of the person for whom they care.

"My daughter who I care for mental health has deteriorated considerable because of pandemic [sic] and as a result my own mental health is suffering."

Carer, 55 to 64, Northern Ireland

Many members of the general public reported that their mental health had been affected by the pandemic, and similarly to carers, raised concerns about the adequacy of support services in light of the mental health issues arising from the pandemic. **Disruption to medical appointments** was reported by many disabled people and carers, but was not a frequently raised topic among members of the general public.

Disabled people reported that both appointments and medical treatments had been delayed or cancelled as a result of the pandemic. In some cases, disabled people had already been waiting for long periods of time for medical treatment. This disruption to healthcare services has led to a deterioration of disabled people's health, and some feel neglected by the NHS.

"I've had two medical surgeries cancelled, one of which I've been waiting for for [sic] over 3 years."

Disabled person, 55 to 64, South East

Carers reported that trying to access healthcare services for the people that they care for had been increasingly difficult, and often had to be conducted over the phone. They felt it had become more challenging to get access to medical advice, access to care and access to social support services. In some cases, both disabled people and carers have had to resort to expensive private treatment to meet their needs or the needs of the person for whom they care.

Isolation and Ioneliness was a topic raised by many disabled people, carers, and members of the general public.

Disabled people, carers, and members of the general public reported feeling lonely and isolated more often than before the pandemic. This was driven by being unable to go out and socialise or to receive visitors. Disabled people expressed frustration that other people's lives will improve at the conclusion of the pandemic, but that many disabled people will still be isolated.

Barriers to food shopping was a topic raised by many disabled people and some carers, but was not frequently raised by members of the general public.

Disabled people reported that online delivery slots for grocery shopping were often completely booked up which disrupted access to essential goods or forced them to risk shopping in person. Using public transport to access shops has become increasingly difficult. Shops have become more inaccessible during the pandemic, due to disabled toilets being closed, seating areas being cordoned off, sanitisation products often being in inaccessible places, disabled parking being disrupted, and having to queue for long periods to enter shops.

"Hard to get delivery slots so have to risk shopping in person. Can't shop independently. Can't grocery shop online. Goods I need aren't available, have been hiked 300% in price. Shops I liked to visit now closed, out of business. Using public transport impossible. People not obeying distance of face cover rules."

Disabled person, 55 to 64, South East

Carers reported that grocery shopping had become more difficult. This was driven by shops not allowing multiple customers to enter simultaneously or in groups, unavailability of online delivery slots for grocery shopping, risk of exposure to COVID-19 when shopping in person, and limitations to the items that can be purchased online.

Facemasks had a negative impact on people's ability to communicate, particularly for this reliant on lip reading, and was also a source of abuse for disabled people. This topic was raised by many disabled people, a moderate number of carers, and some members of the general public.

Disabled people reported being directly harassed as a result of not wearing a mask in public, despite being exempt and in some cases wearing a Sunflower lanyard. This particularly impacted those with invisible disabilities. Furthermore, disabled people reported being refused entry to businesses and to public transport as a result of not wearing a mask.

"Due to my ASD and sensory problems I cannot wear face masks. I have face [sic] a lot of abuse because of this. I have been refused entry to shops, banned from one shop, had to argue with bus drivers to get on buses to and from work. I have been physically assaulted by a bus driver because I was not wearing a mask. I have faced abuse from private citizens whilst on buses."

Disabled person, 45 to 54, South West

Some members of the general public directly reported witnessing discrimination towards disabled people due to not wearing a mask, while other members of the general public reported that the misuse of the Sunflower lanyard meant that some disabled people were being unfairly questioned or targeted for not wearing a facemask. Carers highlighted that public campaigns encouraging people to wear a mask had inadvertently stigmatized disabled people.

Disabled people who have hearing impairments reported that masks severely impacted their ability to communicate, particularly for those who rely on lipreading.

"I have a severe hearing loss (borderline profoundly deaf) and wear hearing aids in both ears. I am fairly fluent in lip reading and depend heavily on being able to see lips move. Face masks make it nearly impossible to speak to anyone unless the person is wearing a clear mask/face shield."

Disabled person, 45 to 54, East Midlands

Carers reported that wearing a mask can inhibit their ability to communicate with the people for whom they care, and members of the general public reported that it has been particularly challenging to communicate with disabled people effectively and with dignity in both a professional and social context while wearing a mask.

Homeworking and employment was a topic raised by a moderate number of disabled people, carers, and members of the general public.

Some disabled people reported that their employment had improved as they now work from home and/or are able to work flexible hours. This has improved well-being by increasing the control disabled people have over their lives and condition or illness. Some disabled people also reported feeling safer in their own home than having to travel to work.

"I am happier because I now work from home and can control my lifelong medical condition in my own environment instead of stressing out to fight against other colleagues in the office environment. It has also given me more control over how I react to my condition and not worry about what other people are thinking or saying, and thinking I have to adapt to keep everyone happy at the expense of my health and life"

Disabled person, 55 to 64, East Midlands

However, other disabled people highlighted that their home space was less suitable for work and therefore home working had negatively affected their productivity. Similarly, some disabled people reported that the pandemic had made their job more challenging (for example, teaching online). Others reported that the pandemic had led to job loss, furloughing, and a lack of new employment opportunities.

Some disabled people reported that communicating through video calls and phone calls was more accessible for them than meeting in person, due to limiting sensory overload, a lack of need to enter inaccessible venues, and closed captioning of video calls. For some carers, working from home has been impossible either due to the nature of the job or due to unsupportive employers. As caring demands have increased during the pandemic (for example due to school closures), being unable to work from home has created challenges for some carers, especially when the person for whom they care was shielding.

Some carers reported that they were having to manage working full time and caring full time, as caring support or schools had been disrupted. While other carers found that working from home had reduced pressure and improved their work life balance.

Members of the general public reported that managing working from home alongside home schooling was a significant challenge. They also highlighted that the pandemic has changed their perceptions towards disability in the UK.

"I have been far more aware that disabled people are as much disabled by society than by a physical issue. Remote working is totally possible if we'd just allow it as we have during the pandemic. Also, all the talk around being locked down and the impact it has on our mental health- I now realise that it's like that all the time for some people with disabilities. We need to do better."

General Public, 35 to 44, South West

Further topics: Social distancing and contact, education, government response, life satisfaction, leaving the house, support bubbles, increased living costs, transport, and travel.

Question 111. Thinking about your life, what are the top 3 changes that would make your life better/or improve your life?

All respondents were able to answer Question 111. Responses to Question 111 were predominantly very succinct.

Better financial support was a key topic raised by many disabled people and carers, and a moderate number of members of the general public. This included easier access to financial support, rather than having to navigate challenging processes and appeals to access support, and access to support for those with invisible disabilities.

Carers similarly stated that better financial support for carers would significantly improve their lives. This included making processes for accessing financial support easier.

Members of the general public also called for more financial support for healthcare and education services.

Accessible housing was a key topic raised by many disabled people and carers, but was raised less frequently by members of the general public.

Disabled people reported that fully adapting their homes would significantly improve their lives, by increasing their independence and safety. Some disabled people reported that moving to accessible housing would improve their lives. They cited that the high cost and low availability of accessible housing are often prohibitive towards reaching this goal. Furthermore, disabled people indicated that being able to buy their own homes, and make adaptations that meet their needs, would mean they would not have to move in future.

Carers reported that moving to more appropriate accommodation, or adapting current housing, to meet the needs of the person or people for whom they care would significantly improve their lives. Faster access to adaptations and accessibility equipment would have a positive impact.

Improvements to the benefits system was a key topic raised by many disabled people, a moderate number of carers, but was raised less frequently by members of the general public.

Disabled people reported that reforming the benefits system to one that places trust in disabled people and that was more compassionate would improve their lives. They proposed that this could be accomplished through an easier and clearer benefit processes that includes clear instructions and support, reduced benefit review frequency (particularly for those with long-term impairments), and a better coordination of benefit schemes by government employee relying on doctors' evaluations for eligibility (and not private contractors relying on pan-medical professionals).

Disabled people and carers also reported that increasing benefit payments to reflect a living wage (including adjustments to account for additional costs of disability) would improve their lives.

"Much higher benefit payments for sick and disabled people. support and care for all disabled people to be free of charge irrespective of income etc. less pessure [sic] from the dwp with a fairer benefits system and with the dwp wanting to help rather than withholding benefits and punishing claimants."

Disabled person, 55 to 64, North West

Disabled people and carers reported that the fear of benefits being removed negatively impacts their lives, and in some cases discourages them from looking for work.

Carers called for a fairer and simpler system for claiming disability benefits, and reform of benefit assessments which can cause severe stress to disabled people. Improving the accessibility of public spaces and buildings was a topic raised by many disabled people, and a moderate number of carers and members of the general public.

Disabled people and carers highlighted many potential improvements to public spaces, including; improving the accessibility of footpaths, ensuring dropped kerbs are available, preventing cars from parking on pavements, removing unnecessary street furniture, and ensuring pavements do not have a steep camber.

Disabled people and carers also highlighted improvements to accessibility which could be made in public buildings, including: increased availability and improved cleanliness of disabled toilets, more seating, wider doorways, fewer heavy doors, use of ramps rather than stairs, accessible lifts and signs at visible heights.

Members of the general public called for improved accessibility of public buildings and spaces, and the consideration of accessibility by design.

"All new and future designs (public buildings and infrastructure) should consider disabled people and make them naturally more accessible"

General public, 55 to 64, South East

Improved mental health support and services was a topic raised by many disabled people, carers, and members of the general public.

Disabled people reported that better mental health support, and decreased stigmatisation of mental health conditions, would significantly improve their lives. Some disabled people suggested greater funding for mental health services, while others said they would like more mental health support resources. Some disabled people highlighted that mental health should be considered as important as physical health.

"More support for mental health, less stigma around mental health. Even I sometimes struggle to collate mental health and disability, but it is a disability, it's disabling. Everyone is different and more information and less stereotyping and stigma would go a long way"

Disabled person, 25 to 34, South West

Similarly, carers reported that better access to mental health services (for both the people for whom they care, and themselves) would improve their lives. Carers said that greater understanding of mental health issues, and training for schools to identify children with mental health issues would be beneficial.

Members of the general public also called for better access to mental health support.

Improved access to care and healthcare

services was a key topic raised by many disabled people, carers, and members of the general public.

Disabled people reported that improved access to care and healthcare services would improve their lives. This included access to GPs, surgeries, mental health services, therapies, medical facilities, and appropriate equipment (e.g. wheelchairs, hearing aids, personal care products). Some respondents stated that having medical professionals who were more knowledgeable about disabled people's needs and their individual impairments would be valuable. Respondents also reported that they would like to see more medical research being conducted to aid in maintaining their health

Blue badges and parking was a topic raised by many disabled people, and was raised less frequently by carers or members of the general public.

Disabled people reported that more disabled parking spaces for blue badge holders, and greater enforcement of misuse of disabled parking spaces, would improve the accessibility of towns and shopping areas. Disabled people reported that the availability of disabled parking spaces has been particularly affected by the COVID-19 pandemic.

Reasonable adjustments and employment was

a topic raised by many disabled people, a moderate number of members of the general public, and some carers.

Disabled people stated that greater (and simpler) enforcement of rights to reasonable adjustments, and protections for disabled employees, would significantly improve their lives. Furthermore, many disabled people called for employers to be more knowledgeable about disability employment. They reported wanting access to increased training and education, more employment opportunities, fairer wages, greater rights to disability leave, and mandatory reporting of the disability pay gap.

A moderate number of carers wanted their caring duties to be considered as employment. This included the provision of a liveable wage for the services they provide.

Members of the general public also called for strengthening of Equality Act 2010 enforcement, and for it to be made more difficult for employers or providers of services to ignore reasonable adjustments.

Transport was a topic raised by many disabled people. It was raised less frequently by carers or members of the general public.

Respondents stated that improved access to transport would improve their lives. This included more accessible stations (e.g. bus and train stations), more affordable public transport or the implementation of a free transport scheme for disabled people, more accessible taxis and buses, access to personal transport (e.g. motability schemes, driving instruction, person vehicles), and enforcement of reserved seating for disabled people on transport.

"A much improved public transport system both locally and nationally as I never will be able to drive. I would still very much like to travel sbd [sic] be independent ."

Disabled person, 65 to 74, South West

Improving perceptions of disability was a topic raised by a moderate amount of disabled people and was raised less frequently by carers or members of the general public.

Respondents stated that better social understanding of disability, including invisible disabilities and chronic illness, would improve their lives. This includes but is not limited to providing better education to the public about disability in a concerted effort to reduce stigma and exclusion.

"Make strong laws, to stop cease those who care not one jot about disabled people in general. I've been so deeply shocked by attitude by people towards disabled people. I was a military serviceman, my freak accident made me disabled, yet many times I've wanted to die because of treatment."

Disabled person, 65 to 74, East of England

Disabled people and carers have also stated that they would like more interaction with society and access to participate fully in it.

Education was a topic raised by many carers and by some disabled people and members of the general public.

Carers stated that improving supports for SEN students and making schools more inclusive would improve their lives. Disabled people reported that they would like to be able to access more support and experience fewer barriers when pursuing higher education.

"Have Opportunities to go into higher education/apprenticeships for a more independent and better future and less impact on my disability by choosing the right education for the line of work for my disability !! and also without being financially worse off or getting penalised by dwp by being labelled as fit for just any work !"

Disabled person, 35 to 44, East Midlands

Improving the government's understanding of disability and disabled people's needs was a topic raised by many disabled people and some carers and members of the general public.

Participants stated that increasing the governments (including councils) understanding of disability would improve their lives. They also wanted to see disabled people in decision making positions.

"Disabled peoples should be in influential positions in Equality, diversity and inclusivity policy and practice,"

Disabled person, 65 to 74, South West

Disabled people and Carers both wanted to see the government issuing positive messages about disabled people and carers and to consult more thoroughly with them. Some people from the general public also stated that they wanted to see more equality efforts being made by the government.

Additional topics: Accessible communication (including digital access), income, exercise.

Question 112. If you feel we have missed any issues or barriers, can you please set these out here?

Question 112 asked respondents if we had missed any issues or barriers. This question provided an opportunity for respondents to highlight any issues or barriers which they are facing, which they have not been able to mention elsewhere in the survey.

Accessible buildings, homes, and adaptations was an issue raised by many disabled people, carers, and members of the general public.

Disabled people call for all public buildings to be accessible, and the legal enforcement of these requirements. This includes ensuring accessible toilets and changing places toilets are available, ramps and lifts are available where necessary, and that the accessibility of buildings is accurately communicated to allow disabled people to plan effectively.

"All restaurants, shops and public places should be accessible. I have had many embarrassing experiences when people say their building is accessible when it isn't. People do not understand the limitations that some disabled people have."

Disabled person, 45 to 54, South West

Disabled people also highlighted the importance of improving housing accessibility.

Carers and members of the general public similarly call for public building accessibility to be improved. Particularly making accessible toilets and changing places toilets more accessible, and designing buildings to be accessible from the beginning.

Accessible public spaces was an issue raised by many disabled people and carers, and a moderate number of members of the general public.

Similarly to responses to previous free-text questions, disabled people and carers called for greater accessibility of public spaces (including green spaces), including dropped kerbs, prevention of parking on pavements, removal of unnecessary street furniture, accessible footpaths and maintenance of pavements.

Mental health services was an issue raised by many disabled people, carers, and members of the general public.

Disabled people, carers, and members of the general public reported that improvements need to be made to mental health services for disabled people and that these services should be better funded. It was also suggested that more questions about mental health would have benefitted the survey.

Financial support for carers and parents was an issue raised by many carers, disabled people, and members of the general public.

Disabled people and carers indicated that increasing carers allowance would have a significant effect on their household.

Carers also said that greater support to allow carers and parents to take breaks is necessary to improve the well-being of carers.

Invisible disability and chronic illness was a topic raised by many disabled people, and a moderate number of carers and members of the general public. It was suggested that the survey should have asked about invisible disabilities and chronic illness, as experiences of those with visible and non-visible disabilities can differ.

"Disabilities are often ignored because they are seemingly invisible, so people affected by these suffer silently."

General public, age unknown, South East

Disabled people and carers reported that invisible disability and chronic illness contributed to it being harder to access financial support, social services, employment, reasonable adjustments, and care. They reported that a lack of understanding, and stigma, create consistent barriers in their lives.

"People who are disabled by an invisible condition can really struggle. Benefit assessors are trained to make outrageous assumptions and are so traumatised by the assessments often end up living in poverty. Employers usually do not understand how a simple reasonable adjustment can make a huge difference to a disabled employee."

Disabled person, 65 to 74, North West

Benefits system was a topic raised by a many disabled people and carers, and a moderate number of members of the general public.

Disabled people reported that benefit assessment processes should be made fairer, more accessible, and less duplicative when accessing more than one benefit.

Disabled people also indicated that assessors were not perceived to be sufficiently knowledgeable about their conditions.

Carers similarly highlight that PIP assessments can be stressful, and that applying for benefits should be made easier.

Members of the general public also highlighted that the benefits system is challenging to navigate.

Reasonable adjustments and employment was a topic raised by many disabled people and

members of the general public, and a moderate number of carers.

Disabled people highlight that workplaces often do not make reasonable adjustments for disabled people, and that the consequences of failing to implement reasonable adjustments are not severe enough to ensure employers are compliant. Furthermore, disabled people report that workplace discrimination is widespread.

"The employment and discrimination laws are okay, but the consequences of breaking them are not sufficiently significant to prevent unscrupulous employers from breaking them: especially bigger businesses that practically can bully disabled staff."

Disabled person, 45 to 54, South West

Many disabled people and carers reported that perceptions of disabled people by the general public and employers in particular hindered disabled people's employment opportunities. A moderate amount conveyed that improved flexibility in benefit systems would allow them to obtain employment (even if part time). Some discussed that the current benefit systems instils a fear of trying to work as it may be seen as a reason for a removal of benefits.

"One person in local council told me we would get more money if I quit my job which is ridiculous - we are punished because I want to work and he is unable to. He wants to do some form of education so he can have a job counselling people but he cannot afford to save enough to pay for a course."

Carer, 25 to 34, North West

Some members of the general public suggested increasing funding to help employers provide reasonable adjustments in their workplaces.

Additional topics: Transport (including parking), accessible communication, medical care and treatments, societal attitudes towards disability, education, equality act enforcement.

Question 113. Building on your experience or insights, can you suggest any solutions to issues raised or how to remove barriers?

Question 113 provided an opportunity for respondents to suggest any solutions to issues raised, or suggestions towards the removal of barriers.

Disability education and awareness was a topic raised by many disabled people, carers, and members of the general public.

Disabled people, carers, and members of the general public alike suggested raising awareness and providing better education about disability. This includes educating the public about disability from primary school age, and raising awareness of disability in the workplace. It is crucial to raise awareness of invisible disability, alongside visible disability, and promoting an understanding of the diversity of disability. Furthermore, raising awareness and providing better education should consider the barriers faced by disabled people in their day to day lives, in addition to understanding of long-term health conditions and/or impairments.

"Public awareness is improving but there are a lot of invisible disability's [sic] which the public should be made aware of."

Disabled person, 55 to 64, Scotland

"More visibility of people with all types of disability. I have never seen a child with profound disabilities like my son on tv or in the public eye. More education in school about people with disabilities and how we are all different."

Carer, 25 to 34, East of England

"Disabled people are still treated as second class citizens. Hidden disabilities are not understood. We as a society need to educate and be educated, starting at school."

General public, 35 to 44, North East

Disabled people, carers, and members of the general public raised the need to reduce stigma

towards mental health conditions, through increased awareness and education.

"More needs to be done to take away the stigma of mental health issues. While some work has been successful, there is still to much disinformation about mental health issues."

Disabled person, 45 to 54, South East

Respondents suggest that more positive messaging and positive appearances of disabled people in the media would help to increase understanding and awareness.

"There are no where near enough adverts (to promote something) with a fair share of positive disabled images. They aren't seen in a positive light. I think there needs to be more actors too with a disability as this would be more realistic of real life. Needs to be more examples of all disabilities not just wheelchair bound- so showcasing more long term mental health issue and long term conditions such as ME, musculoskeletal conditions etc, shown in all aspects, advertising, dramas, films, spokespeople, MP's, social media, local council representatives. Etc!"

Disabled person, 35 to 44, South West

"Positive role models, but showcasing "ordinary" disabled people doing "ordinary" things rather than exceptional Paralympians etc."

General public, 35 to 44, South West

Respondents also highlighted the need to treat disabled people with respect and empathy, which would be support by increased understanding and awareness.

"Treat everyone with respect as you wish to be treated yourself. Accept that a person may communicate non verbally but should still be spoken to in a normal pitch, tone and speed. Ask how communication is preferred eg large print, makaton (where appropriate). Have a See the Person, Not the Wheelchair campaign."

Carer, 65 to 74, Wales

Improving understanding of disabled people's lived experience was a topic raised by many disabled people, carers and members of the general public.

Respondents highlighted that many solutions to barriers could be found by talking to disabled people to establish their wants and needs, and trusting the information provided by disabled people. In particular, talking to disabled people in local communities (for example in focus groups) would improve understanding of the day to day experiences of disabled people. It is also important to listen to a diverse and intersectional range of disabled people's voices.

"Everything hinges on understanding. If people understand, then they can more easily see why changes are worthwhile and deserved. If they understand, they judge less. If they understand, then I am not so alone."

Disabled person, 35 to 44, South East

"Listen to the widest range of disabled and chronically ill people possible including across race, gender, sexuality and socioeconomic ranges."

Disabled person, 35 to 44, London

Improving education was a topic raised by some carers and a moderate amount of disabled people and members of the general public.

Participants stated that children should have adequate provisions to obtain needs assessments, to meet their special educational needs and to attend mainstream schools if desired. They also suggested that continuing education should be both supported and accessible for disabled people.

"Provide more money for education of children with SEND. It is simply not enough, despite what the government says. Again investing now will improve job prospects and then tax revenues later on."

General public, 35 to 44, North West

Finally, respondents suggested that greater inclusivity and integration at all levels of education, from nursery onwards, would foster a greater awareness and understanding of disability throughout society.

"More inclusive nurseries and schools so that disability becomes a part of normal society not something to be stared at or be scared of . We are all people and the younger disability becomes part of the norm the more inclusive society will be"

Disabled person, 65 to 74, South East

Engaging with disability expertise was a topic raised by many disabled people, carers and members of the general public.

Participants stated that disabled people's voices should be utilised in the creation of policy through co-production and consultation. They also conveyed that disabled people, and their expertise, should be employed in the decision-making processes concerning issues that impact them.

"Create more spaces to allow disabled people to give their input on changes that may affect their lives."

Carer, 16 to 24, South East

"The slogan of the disability rights movement is 'Nothing About US, Without Us' . You need to get expertise from Disabled People themselves in the very early stages of planning a survey such as this. By definition, disabled people have access needs and may need things [e.g. consultation exercises] doing differently. Standard methodology runs a very high risk of proving inaccessible to most Disabled people."

Disabled person, 55 to 64, London

"Make people who actually know things about the subjects make decisions about the subjects and not just politicians with their agendas."

General public, 35 to 44, East of England

Benefit applications and assessment was a topic raised by many disabled people, carers, and members of the general public.

Many disabled respondents called for reform to the benefit assessment process, to make assessments fairer and more compassionate. Disabled people reported negative experiences with PIP assessments, which could be distressing, and felt that assessors lacked the clinical understanding to make accurate assessments. Reassessments could be a source of stress, and were seen as particularly unnecessary for those with long-term impairments.

Benefit applications and assessment was an important topic for carers, who highlighted that forms should be made easier to complete, and that benefits should be awarded for longer terms to those with long-term impairments.

"Make forms easier to complete, make awards of disability benefit for longer terms for those with life long disabilities."

Carer, 35 to 44, North East

The general public highlighted that the benefit system should be easier to use and more support should be provided for applicants. Some members of the general public felt benefit fraud was a negligible issue, while others suggested that preventing fraudulent claims of disability benefit would reduce negative attitudes towards genuine benefit claimants. "Much less gate keeping in terms of disability benefits. My mum dreads her benefit assessment appointment because despite having her condition (which is permanent) for over 20 years, the non-disabled assessors often ask ridiculous questions and she is made to feel like a liar. Benefit fraud is almost negligible compared to the amount of disabled people who are intimidated at these appointments."

General public, 25 to 34, East Midlands

Many carers and disabled people stated that there needs to be better access to medical equipment is required, and that means testing for benefits should cease. They also conveyed that one streamlined way to report to all necessary agencies that a change of circumstances or other event has occurred is necessary, as is a continuation of benefits while these changes are reviewed.

"The finacial [sic] support should be fairer. The need for equipment should be based on the

childs needs not the finacial [sic] situation of a family."

Carer, 35 to 44, South West

All three groups stated that doctors should be relied upon in assessing disability as opposed to medical assessors. All three groups also stated that benefits should be increased for carers and disabled people, and that there should be more flexibility in the benefits system should either group wish to pursue employment..

"DLA & PIP assessments conducted by medical professionals with experience of working with disabled people/disability rights advocates. Acknowledge disability benefit fraud is very low and the bar is set unattainably high causing further damage."

General public, 25 to 34, South East

Improved accessibility of public buildings, public spaces, and homes was a topic raised by many disabled people, carers, and members of the general public. Many disabled people called for improvements to the accessibility of public buildings, including widening of doorways and hallways, increased space for wheelchairs (for example between clothing racks in shops), ramps and lifts, and disabled toilets maintained to a high standard. Providing accessibility statements, particularly at transport terminals, would be beneficial, as would other means of clear information sharing. Disabled people highlighted that consistently considering accessibility from the design stage would have a positive impact.

"Have a enforceable guidelines or framework for public buildings to follow, door width, ramps at a suitable angle, accessible disabled toilets, clothes shop with space to browse without a face full of clothes."

Disabled person, 25 to 34, West Midlands

Carers similarly called for more accessible public buildings and the necessity to consider accessibility from the design stage. Carers also suggested consulting with disabled people about the accessibility of buildings at the design stage. Good practice examples were highlighted such as the National Memorial Arboretum.

"At the planning stage, public buildings should be completely accessible, and if not, be sent back to the drawing board."

Carer, 45 to 54, Yorkshire and the Humberside

Respondents suggest improving the accessibility of public spaces through ensuring pavements and paths were even and sufficiently wide for wheelchairs and mobility scooters, providing more seating in public spaces, increasing the number of disabled toilets in public spaces, and providing wheelchairs and mobility scooters in areas such as town centres.

Respondents also suggested increasing the accessibility of parks, playgrounds, and beaches (for example through the provision of rubber matting and beach wheelchairs).

"Repair of uneven pavements/roads. When taking my Father out in a wheelchair, it is very difficult to navigate pavements. Lack of dropdown at kerbside. People are generally very kind and will assist if they see you struggle. Railway stations are particularly difficult to navigate with lack of lifts for wheelchairs."

Carer, 55 to 64, South East

"Changing places grade toilet facilities in many many more public spaces. Accessible parks and playgrounds for wheelchair users."

Carer, 45 to 54, South East

Respondents conveyed that there should be more accessible housing and that it should be affordable. Furthermore, many disabled people gave examples of adaptations which would improve the accessibility of their homes and offer solutions to challenges they face on a day-to-day basis. Greater funding and support for adapting existing housing was suggested. Disabled people also highlighted that new-build housing should be accessible by design, mandated by law, and made affordable for everyone - particularly younger disabled people.

Carers and members of the general public also suggested increasing Disabled Facilities Grant funding, increasing the availability of social housing, and ensuring that new homes are accessible by design.

"Home Adaptations grants and rules about what adaptations works can be conducted in renovations of existing properties needs radical and national overhaul being able to access one door of a property is not acceptable to home owners. New housing estates must supply an affordable and accessible house option possibly with shared ownership options. Disabled people especially those of working age must be able to live independently in their homes as much as they require/desire."

Disabled person, 35 to 44, Yorkshire and the Humberside

Transport was a topic raised by many disabled people, carers, and members of the general public.

Respondents stated that public transportation should be available and accessible for all. They conveyed that stronger laws, step free rail, subsidised transportations costs, easier access to arranging travel, clearer information about travel, and more access to motability cars could aid disabled people and carers in equalising access to transportation.

"Improvements to accessibility regulations to mandate improved access to public buildings and transportation."

Carer, 16 to 24, North East

"Train companies trying to say you need to give 24 hors [sic] notice to access their services. Why shouldn't I be able to get up. Think, a lovely day I shall go for a day out. Able bodied people do not have to give 24 hours notice. This action is discriminatory."

Disabled person, 65 to 74, Yorkshire and the Humberside

"I also know very poor mobile people have become house bound [sic] as mobility car has been removed. Many of us too proud and try to be indipendant [sic] but are not recognised."

General public, 55 to 64, West Midlands

Increased disabled parking was a topic raised by many disabled people and carers, and a moderate number of members of the general public.

Respondents suggested increasing the number of disabled parking spaces, and removing parking charges for blue badge holders (for example in hospital carparks). Furthermore, respondents highlighted that disabled parking bays should be made sufficiently large to allow users to take wheelchairs and mobility scooters out of their vehicles effectively. Respondents also stated that there should be greater policing and enforcement against those illegally parking in disabled bays.

Some carers suggested updating the blue badge system to incorporate a range of categories reflecting the diverse and varying needs of blue badge holders, and highlighted that such a development may combat hostility faced by some blue badge holders.

"Instead of just blue badges maybe have a range of colour coded ones instead. I have seen a lot of verbal abuse towards disabled people by members of the public as the disabled person have parked in a blue badge space and has been shouted at for not "looking disabled". People are very narrow minded and think all disabilities are physical. If someone has a disabled badge they should not have to argue and justify their disability to another member of the public. That is why there should be different colours or something to that extent. I don't mean specific disabilities being colour coded but maybe generalised"

Carer, 35 to 44, South East

Stronger equality laws was a topic raised by many disabled people, carers and members of the general public.

Respondents stated that current legislation needed to be stronger. They suggested that this could be accomplished through either newer legislation or robust enforcement of current legislation. This feedback focused upon the Equality Act and particularly on the topics of accessible buildings, employment, and access to redress when violations occur.

"There needs to be accountability, meaning enforcement of the Equality Act. Employers need to be held to account better in their provision of reasonable adjustments, as do businesses. There should be regular access audits carried out of workplaces and businesses that have premises that are visited by customers/clients e.g. shops."

Disabled person, 25 to 34, South East

Improved support for carers, parents, and families was a topic raised by a large number of carers.

Carers indicated the need for a reduction in redtape and an increase in financial support for unpaid carers, more financial support to cover the cost of paid carers, and financial support for families who had reduced income as a result of caring commitments. Statutory pay was suggested for periods when carers need to take time out of their employment to fulfil caring responsibility. Paying carers minimum wage as opposed to carers allowance was also suggested. Carers also said that greater support for residential short breaks and respite care to give family carers a break, and the provision of mental health support for carers, would be beneficial. "More financial assistance for carers to be paid for. More residential short break schemes to give parents a break."

Carer, 35 to 44, South West

Increased funding for social care was a topic raised by many carers, disabled people and members of the general public.

Disabled people, carers, and members of the general public indicated that social care is difficult to access, placing pressure on unpaid carers. Increased funding for the social care system, and the prevention of further funding cuts for the social care system, would be beneficial. Some respondents suggested that the social care system should be funded similarly to the NHS. Some respondents also suggested improving funding for the NHS and for occupational therapy in their answers.

"Social Care has always been at the bottom as far as adequate funding is concerned. This must be addressed and if necessary more income tax must be charged and ringfenced for social care to support the most vulnerable people in society. Social care cannot continue to be so underfunded."

Carer, age unknown, East of England

Improved access to healthcare was a topic raised by many carers and disabled people and some members of the general public.

Disabled people and carers conveyed that they would like better access to healthcare for themselves or the person they care for. They wanted this care to be provided from medical professionals who were trained on, and sensitive about, disability. All three groups discussed that disabled people should have improved access to needed equipment and aids.

"Wheelchair provision needs to be overhauled too. Disabled people should be offered chairs that maximise independence and quality of life, not the bare minimum needed to scrape by."

Disabled person, 25 to 34, South East

"More support for disabled people to provide the most suitable equipment to help with their quality of life and independence - regardless of their access to funding to support them (although more financial support would also be beneficial, too)."

General public, 35 to 44, West Midlands

Employment of disabled people and reasonable adjustments was a topic raised by many disabled people and members of the general public, and a moderate number of carers.

Disabled people, carers, and member of the general public suggested providing financial incentives to employers to help get more disabled people into employment. Furthermore, training should be provided for employers on how to get the most out of their disabled employees, and how to eliminate workplace prejudice towards disabled people. It was also suggested that more employers should join the Disability Confident employer scheme and that those that do should demonstrate their expertise in disability employment.

Greater clarity or a framework of what constitutes reasonable adjustments, greater enforcement of reasonable adjustments including consequences for employers, and training for disabled people on how to request for reasonable adjustments, were suggested.

A desire for employer accountability concerning equality in workforce representation was presented from all groups. Stronger rights to disability leave, and greater acceptance of home working would help to remove barriers to work for disabled people.

Disabled people and carers also conveyed that having access to employers' buildings can be a key barrier to employment.

Mandatory reporting of the disability pay gap, and reporting of the proportion of employees who are disabled would increase transparency. It was suggested that the proportion of disabled employees should be taken into account when evaluating bids from companies for government contracts.

"Increased employment of disabled people by: 1. linking government contracts to the proportion of disabled individuals employed by contracting firms. 2. mandatory disability employment and disability pay gap reporting by employers. 3. quota schemes for employers specifying a minimum proportion of disabled employees"

Carer, 45 to 54, London

"More directive instructions from government to employers and education institutions as "Reasonable Adjustments" is too little. The Equality Act 2010 does not provide a time frame with which these providers (employers and education institutions) can be measured against. It takes too long to make adjustments."

Disabled person, 45 to 54, East of England

"Encourage employers to employ disabled people and teach them how to make reasonable adjustments and also educate disabled people on what to ask for and how"

Disabled person, 25 to 34, South West

Respondents also highlighted that access to educational and training opportunities is

fundamental to disabled people garnering employment.

Greater communications accessibility was a topic raised by moderate number of disabled people and members of the general public, and a small number of carers.

Respondents suggested BSL interpreters, professional lip speakers, and live subtitling for all government broadcasts. Furthermore, respondents suggested that greater support for those with hearing loss to learn BSL or lip reading would be beneficial.

"Make BSL accessible and free to those with hearing impairments. If you become blind you are taught to read Braille. If you lose your hearing and hearing aids are not an option, you have to pay to attend sign language courses."

Disabled person, 55 to 64, South East

Additional topics: Masks, Local Councils, Governance, Hate crime and prejudice