Research report

Routes onto Employment and Support Allowance

by Paul Sissons, Helen Barnes and Helen Stevens

DWP Department for Work and Pensions

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Abbreviations

CBT	Cognitive Behavioural Therapy
CHAID	Chi-squared Automatic Interaction Detection
DWP	Department for Work and Pensions
ESA	Employment and Support Allowance
FFW	Fit for Work
GCSE	General Certificate of Secondary Education
HR	Human Resources
IB	Incapacity Benefit
IES	Institute for Employment Studies
IS	Income Support
JSA	Jobseeker's Allowance
OH	Occupational Health
ONS	Office for National Statistics
WCA	Work Capability Assessment
WFI	Work Focused Interview
WRAG	Work-Related Activity Group

Summary

Key findings

Health

- **Health condition varies considerably by demographic characteristics.** Mental health conditions (more common among women and younger people) and musculoskeletal conditions (more common among men and older people) were the mostly frequently reported health conditions among Employment and Support Allowance (ESA) claimants.
- **Many ESA claimants have multiple conditions or fluctuating conditions.** Two-thirds (66 per cent) of claimants reported that they had multiple health conditions and around half (53 per cent) had a fluctuating condition.

Pre-claim experiences

- **Around half (51 per cent) of people claiming ESA were in paid work immediately before claiming.** People who were employed prior to claiming were older, and the vast majority (85 per cent) had been in employment for most of their working lives. Almost half (49 per cent) had a condition which was of recent (2008/09) onset.
- **People who were not in work before their claim have a particularly disadvantaged socio-economic profile.** Almost one-third had never worked or were long-term unemployed, 41 per cent had no qualifications (10 per cent in the general population), 25 per cent had literacy problems, and only 23 per cent were owner-occupiers, compared with 67 per cent in the general population.

Return to work

- **Relatively few claimants had returned to work a year to 18 months after their initial claim, regardless of their employment origins.** Just over one-quarter (26 per cent) of people in employment prior to their claim who were allowed ESA (those who were in the Work-Related Activity Group (WRAG) or Support Group) had returned to work by the time of the follow-up survey, compared to only nine per cent of those who were not in employment prior to claiming.
- **Health and health beliefs are central to return to work.** Early recovery was a strong predictor of a return to employment. Change in health status was also important: for men, improved health was strongly associated with an increased likelihood of entering employment; for women, deteriorating health reduced the likelihood of being in work. Among claimants who were in work before their claim, the belief that work improves health was associated with a higher likelihood of work resumption.
- **Qualifications also play a role.** For claimants who had been in work immediately before claiming ESA, having qualifications was a significant predictor of return to work.

Research aims and methods

ESA was introduced on 27 October 2008 for new claimants to replace Incapacity Benefit (IB) and Income Support (IS) received on the grounds of incapacity. In the year to November 2010, around 650,000 people flowed onto ESA.

This report aims to meet information needs related to policy development on health and work, in particular to provide detailed information about the characteristics of people who claim ESA; to explore what steps employers might have taken to help ESA claimants with a health problem remain in employment; and to explore the short-term employment trajectories of people claiming ESA.

The findings draw on data from a two-wave survey of people claiming ESA. The baseline survey, conducted between December 2009 and February 2010, involved face-to-face interviews with 3,650 people who had claimed ESA between April and June 2009. A follow-up telephone survey was conducted with 1,842 participants who had agreed to be contacted again. Follow-up interviews were conducted between July and September 2010.

The population of Employment and Support Allowance claimants

Compared to the general working-age population, people making a claim for ESA were slightly older, more likely to be male and less likely to have qualifications.

Health

Mental health conditions (more prevalent among women and younger people) and musculoskeletal conditions (more prevalent among men and older people) were the main reported health conditions.

A substantial minority of conditions (19 per cent) were seen as work related, rising to almost a third (32 per cent) of musculoskeletal conditions. People with mental health conditions were less likely to attribute their condition to work (14 per cent). The majority of respondents (74 per cent) were receiving treatment at both waves of the survey while just under a third (30 per cent) were waiting for treatment at the time of the follow-up survey.

Work history and socio-demographic characteristics

Around half (51 per cent) of people claiming ESA were in paid work immediately before claiming. These people were older, more likely to be living as a couple (and to have a partner who was in work) and more than twice as likely to own their own home as people who were not in work prior to their claim. The vast majority of people claiming ESA from work (85 per cent) had been in employment for most of their working lives. Almost three-quarters (72 per cent) of people coming from work had a physical health condition and musculoskeletal conditions were most prevalent. Almost half of people coming onto ESA from work (49 per cent) had a condition which was of recent (2008/09) onset.

People who were not in work prior to claiming were more likely to be living alone, to be a lone parent, or to be living in some other kind of household situation, such as with parents or in a shared house. Just over half (52 per cent) of people not in employment prior to claiming had spent most of their working lives in employment, and they were less likely to have any qualifications; one-quarter (25 per cent) had a literacy problem, and 28 per cent were in a disadvantaged group. Mental health conditions were the most widespread health condition for people who were not in work prior to claiming, accounting for almost two in five of this group (38 per cent) while around one-third (32 per cent) had a health condition that had started more than six years before their claim (before 2004).

People claiming Employment and Support Allowance from work

Health

Women who were in work prior to claiming were more likely to have a mental health condition and men a musculoskeletal condition. Over one-quarter (27 per cent) of health conditions were attributed to work and men were more likely than women to identify their condition as work related.

At the follow-up survey, more people who claimed ESA from work were more likely to report improved health than those from non-work origins. Improved health was most common among younger claimants and men.

Previous employment

People who had been in work before claiming ESA had overwhelmingly been in employment in the private sector, on a permanent contract, however, around one-fifth (19 per cent) of men had been in temporary work. More than one-third (35 per cent) of people claiming from work had been employed in unskilled or semi-skilled occupations and exactly a quarter in skilled trades. Fewer than one in five (19 per cent) worked in managerial or professional occupations. Women were more likely than men to have been employed in managerial or professional posts and very much more likely to have worked in administrative or service occupations. Men were over-represented in skilled trades, unskilled and semi-skilled occupations.

Most people claiming ESA from work had been low paid. Almost three-quarters (74 per cent) of these people had earned less than £20,000 a year and nearly half (48 per cent) of women who had come from a work background had been earning less than £10,000 a year.[1]

Over half (55 per cent) of all people who had worked immediately prior to claiming had left their last job for health reasons and this was most common among women and people with a physical health problem. Exactly one-quarter (25 per cent) of people left their last job because of redundancy and a substantial minority of men (13 per cent) had left work because their temporary job ended. Just over two in five (43 per cent) people claiming ESA from work reported taking a period of paid or unpaid sickness absence before their claim.

The role of employers

Overall, just under one-quarter (24 per cent) of people who had been in employment prior to their claim reported access to Occupational Health (OH) at work. There were, however, significant differences in this pattern by sector and firm size. Access to OH was highest for claimants who had been working in the public sector. For people working within the private sector, those working in larger firms were more likely to have access to OH.

More than three-quarters of claimants who had access to OH at work had used the service (77 per cent), and one-fifth (21 per cent) had changes made to their work as a result. These were most often changes to hours and duties. Almost three-quarters (72 per cent) of people who had changes to their work believed they had helped them to stay in work for longer.

Overall 63 per cent of people who were in work before their ESA claim had discussed their condition with their line manager, and 27 per cent had discussed it with their Human Resources (HR) manager. This was most common among women and public sector workers. Mental health conditions were discussed less frequently than other conditions.

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1 By comparison 70 per cent of full-time workers in the UK in 2010 earned less than £30,000, and 40 per cent of female workers in the UK earned less than £13,500 (Office for National Statistics (ONS), 2010).

Sixty-three per cent of people who had discussed their condition with their line manager and 68 per cent of people who had discussed their condition with HR had found it helpful, with approval ratings somewhat higher in the public sector (with 73 per cent finding it helpful).

People claiming Employment and Support Allowance from non-work backgrounds

People who were not in employment prior to claiming ESA had a younger age profile, compared to those coming from work, with over two-fifths (43 per cent) aged under 35. Almost half (48 per cent) lived either alone or as a lone parent and a higher proportion lived in rented rather than owner-occupied accommodation.

Health

Mental health conditions were the most commonly reported type of health condition among people who were not working before claiming ESA. This is partly a reflection of the younger age profile of this group, as mental health conditions were more than twice as common among claimants in younger age groups. Compared with those claiming ESA from work, a higher proportion had their condition over the long term (before 2004).

People who were not in work prior to claiming were more likely to report that their health had been deteriorating, rather than improving, over the period between the baseline and follow-up surveys, but there were no notable differences in future health expectations between claimants coming from work or non-work.

Work history and return to work

ESA claimants who were not in work prior to claiming were much less likely to have been in employment for most of their working lives and those with a partner were also much less likely to have a working partner than people who were in employment prior to their claim. Compared with those from work, claimants from a non-work background had a disadvantaged employment profile, being less likely to have had managerial or professional jobs, and more likely to have had relatively low earnings of less than £10,000 a year. Many of these claimants (29 per cent) had a temporary contract in their last employment.

Among claimants who were not in work prior to their ESA claim, those who were unemployed immediately prior to claiming ESA, but who had a consistent work history had the highest return to work rates (26 per cent), which was comparable with the ESA population as whole. Claimants who were unemployed with a fragmented work history and those who were economically inactive, but had a consistent work history, had rates of return which were around half those for the ESA population as a whole (11 and 13 per cent respectively, compared to 25 per cent for the survey population). People who were economically inactive and had a fragmented work history had a very low rate of return to work. This group tended to have employability issues such as low qualification levels.

Factors influencing movements to work

Considering people who were allowed ESA and allocated to the WRAG or Support Group, just over a quarter (26 per cent) of claimants who were in work immediately prior to their claim had moved into work by the time of the follow-up survey, compared with only nine per cent of people who were not previously in work. Rates of work entry were higher for claimants in the Fit for Work (FFW) or claim closed/withdrawn groups, but a difference remained between those who were employed before claiming and those who were not.

Health status was found to be of central importance in influencing movements to work. For both men and women early recovery (not having a health condition at the time of the baseline survey) was a strong predictor of moving into employment, and it was the most important predictor for those who had been in work immediately before claiming ESA. Change in health was also important: for men, improving health between the two survey waves increased the likelihood of being in employment, while for women, deterioration in health was associated with reduced likelihood of entering employment.

Factors measuring employability were also found to be statistically significant predictors of movements to work. Men and women with recent work experience (in work prior to their ESA claim) were more likely to return to work, as were men with a consistent longer-term employment history. The presence of a qualification was also an important predictor of work resumption for people who were in employment before their claim and for men in general. Likewise, the belief that work improves health was associated with a return to work for people who been in employment prior to their claim.

Improving support for health and employability

Given that health status was found to be an important predictor of work entry, measures to facilitate access to treatment, and prevent deterioration in health are likely to be beneficial in increasing the rate of people moving off ESA and into employment.

The salience of a consistent longer-term employment history for work entry rates is notable. Claimants with a fragmented work history were more likely to face significant barriers to work, compared to claimants with a consistent work history. Avoiding long-term unemployment and inactivity, especially among younger age groups, should, therefore, be a priority. In addition, as the belief that work improves health was found to be important, encouraging people in this belief may positively influence work entry rates.

It may also be possible to improve employment outcomes by delivering targeted help to those most in need of it. For example, those in older age groups are likely to require additional assistance to return to work, especially if their ill-health persists, as there is evidence of disadvantage in entering jobs as people age. Claimants previously employed in manual occupations, who are much less likely to have formal qualifications than other claimants, may improve their employment prospects if given the opportunity to retrain for alternative occupations. The high rates of mental health conditions within the ESA population, and the continuing prejudices which exist about these conditions suggests that specific measures aimed at this group may also be of value.

1 Introduction

Key points

- Employment and Support Allowance (ESA) was introduced on 27 October 2008 for new claimants to replace Incapacity Benefit (IB) and Income Support (IS) received on the grounds of incapacity. Around 650,000 people flowed onto ESA in the year to November 2010.
- This report aims to meet information needs related to policy development, particularly to provide detailed information about the characteristics of people who claim ESA and their short-term employment trajectories.
- The findings draw on data from a two-wave survey of people claiming ESA. The baseline was a face-to-face survey of 3,650 people who had claimed ESA between April and June 2009. At the follow-up survey, 1,842 participants who had agreed to be contacted again were interviewed by telephone between July and September 2010.
- The survey covers all people who made a claim to ESA. This includes people who were allowed ESA at the Work Capability Assessment (WCA), as well as those who were either found Fit for Work (FFW) and disallowed the benefit, or whose claim had been closed or withdrawn.

This report presents findings from a two-wave survey of people who claimed ESA between April and June 2009. It examines the social characteristics of ESA claimants and their employment trajectories over a period of approximately 18 months. The aim of the report is to provide information about who flows onto, and off ESA and the reasons for doing so.

1.1 Background

ESA was introduced on 27 October 2008 for new claimants to replace IB and IS received on the grounds of incapacity. From early 2011, ESA is being rolled out to existing incapacity benefits claimants nationally.

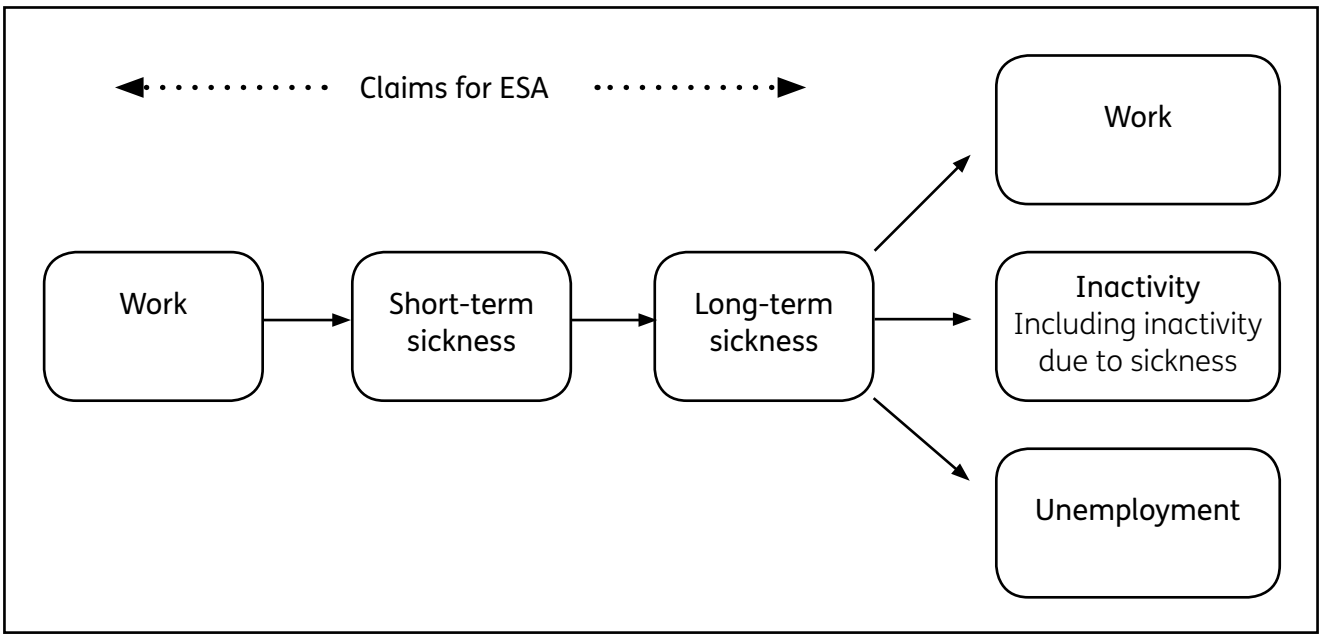
Individuals are entitled to ESA if they have limited capability for work due to illness or disability (Harrington, 2010). The majority of people who are awarded ESA are allocated to a **Work-Related Activity Group (WRAG)**[2] and are required to attend a series of Work Focused Interviews (WFIs) with an employment adviser. People whose illness or disability most severely affects their ability to engage in work-related activity are allocated to the Support Group, where participation in return to work activity is voluntary. In the year to November 2010, around 650,000 people claimed ESA.[3]

At the point of claiming ESA, customers can be viewed as occupying an intermediate position on a health and work spectrum from short-term sickness absence to long-term worklessness (Figure 1.1). Claims may be made at an earlier or later stage in the trajectory of ill-health depending on employment status and entitlement to statutory and occupational sickness pay.

2 See Appendix A for a simplified diagram of the claim process.

3 The Department for Work and Pensions (DWP), Information Directorate. Work and Pensions Longitudinal Study. Employment and Support Allowance On Flows.

Figure 1.1 Schema of ESA claims in relation to work and health trajectories



For people who were employed before claiming ESA, claims may be predated by a period of sickness pay (Statutory Sick Pay or Occupational Sick Pay), which is paid by employers.

Across this health and work spectrum, there are opportunities for government to intervene to increase the numbers of people with health conditions or disabilities who are participating in employment. Studies of unemployment and health suggest that being out of work is associated with poor physical and mental health while return to work has therapeutic benefits, though there is less evidence focusing on people who are sick or otherwise economically inactive (Mclean *et al.*, 2005). Nonetheless, there is arguably a case for government to intervene to prevent people losing paid work due to ill-health or to enable a return to work wherever possible.

Increasingly, policy is targeting intervention earlier along the health and work spectrum to prevent people from leaving employment in the first place. For example, a review of sickness absence has been announced by government (DWP, 2011) to look at how the current system of sickness pay and health benefits can be changed to help more people stay in work. Other moves toward earlier intervention include a pilot programme of Fit for Work Services and Employment Adviser job retention pilots in Improving Access to Psychological Therapy areas (DWP, n.d.).

1.2 Research aims

This research was commissioned by DWP to fill some key evidence gaps that will inform the development of policy related to health and work. Previous research (Kemp and Davidson, 2007) has examined the processes which lead people to claim Incapacity Benefit but, given substantial changes to the benefits regime, it is not known whether, and how, ESA claimants differ in terms of their characteristics, prior experiences and perceptions, and eventual employment outcomes. The objectives of this research were, therefore, to:

- Identify factors leading to ESA claims. This includes drawing out key subgroup differences (for example, by age group, gender, health condition) experiencing particular routes onto ESA.
- Provide detailed information about the social characteristics of people who claim ESA, including their employment and labour market experiences.

- Explore detailed health histories of recent claimants, including the timing of onset, the presence of multiple conditions, and the extent to which health is work-limiting.
- Explore what steps employers have taken (or might usefully have taken) to help ESA claimants with a health problem remain in or return to employment, for instance by making adjustments to working conditions or referrals to occupational health provision.
- Provide information about the short-term employment trajectories to understand what types of ESA claimants are most likely to return to work.

1.2.1 Related studies

DWP has also commissioned several other reports on ESA claimants which provide relevant information including:

- two reports on ESA claim experiences based on data from the same surveys as the present report (Barnes *et al*., 2010a; Barnes *et al*., 2011);
- two reports of qualitative research with claimants and staff, on early implementation experiences of ESA (Barnes *et al*., 2010b), and on the assessment process for ESA (Barnes *et al*., 2010c);
- a further qualitative study on the experiences of those found Fit for Work, or whose claim is closed or withdrawn before Jobcentre Plus make a decision about it, which will be published in the DWP research report series in summer 2011 (Barnes *et al*., forthcoming).

1.3 About the survey

1.3.1 Methods

This report presents findings from a two-wave survey of people who claimed ESA between April and June 2009, which was carried out by the Institute for Employment Studies (IES) and Ipsos MORI. The first wave – the baseline survey – was a face-to-face survey of 3,650 people conducted between December 2009 and February 2010, six to ten months after respondents had made their initial claim for ESA (Barnes *et al*., 2010a). Participants who agreed to be contacted again for the study were also interviewed in the follow-up survey conducted between July and September 2010, approximately six months after the baseline survey; 1,842 people took part.

At the baseline survey, the unadjusted response rate was 51 per cent. The adjusted response rate based on all eligible addresses after exclusion of invalid telephone numbers and addresses (for example, non-residential properties), ineligible respondents, people who had moved away and those who were too ill to be interviewed, was 62 per cent. At the follow-up survey, the unadjusted response rate was 61 per cent. The adjusted response rate for the follow-up survey was 70 per cent.

To make the sample representative of the ESA population as a whole and to correct for biases due to non-response and the clustered design of the sample, weighting factors have been calculated for the baseline survey. Weighting adjustments were also made to compensate for panel non-response at the follow-up survey using CHAID[4]. This approach allows for correction of panel non-response using information on initial or demographic characteristics of the sample and their responses at the baseline survey. Full details of the survey methodology are presented in a technical report on the survey (Ipsos MORI, 2011).

[4] CHAID is an acronym that stands for Chi-squared Automatic Interaction Detection. CHAID uses chi-squared statistics to identify optimal splits or groups of independent variables to predict dependent variables (e.g. whether a claimant takes part in a follow-up survey).

1.3.2 Reporting conventions

Weighted data are presented throughout this report and for simplicity only weighted bases (sample sizes) are shown. All differences described in the text are statistically significant at the 95 per cent confidence level, unless otherwise stated. Where figures in a table are enclosed by square brackets this denotes a base of less than 30.

1.3.3 Reporting by claim group

In the ESA regime, claimants are allocated to one of three different claim outcome groups, depending on the assessment of their functional capability for work. In this report, the term claim group is used to describe this allocation: people assessed as entitled to ESA are allocated into either the **Support Group**, or **Work-Related Activity Group (WRAG)**; people who are disallowed ESA are deemed **'Fit for Work (FFW)'**. Additionally, we use the description **'Claim closed or withdrawn'** to refer to cases where people did not complete a WCA for whatever reason (for example, if they had found a new job, or recovered from their illness). Finally, '**In progress'** is used to describe the group of people who were still awaiting a decision on their claims at the time they were interviewed.

At the baseline survey it was intended that respondents would be assigned to a claim group based on their responses to survey questions. However, inconsistencies between individuals' responses to survey questions and between survey responses and administrative data suggest that respondents were often confused about which claim group they had been allocated to.[5] As these discrepancies were pronounced it was decided to use linked administrative data on ESA claims held by DWP to assign cases accurately. During survey interviews, respondents were asked whether they would consent to their responses being linked to current and future benefits data, and a total of 3,075 of the 3,650 individuals who responded to the baseline survey consented to this. For people consenting to linkage, DWP administrative data, including information on the end date of the claim assessment period and the DWP Decision Maker's decision on the claim, were used to derive a respondent's claim group. For people who did not consent to data linking, responses to the survey question about their current claim group were used to indicate their claim group and in some cases were adjusted using responses to other questions in the survey. Table 1.1 shows the weighted sample sizes for each claim group at each wave of the survey, for reference.

Table 1.1 Sample sizes by claim group at baseline and follow-up surveys

	Support Group	WRAG	Fit for Work	Claim closed/ withdrawn	In progress	Total
Baseline	227	548	1,431	1,019	403	3,628[1]
Follow-up	124	429	721	528	38	1,840

[1] Of the 3,650 respondents, 22 cases could not be assigned on the basis of administrative data or survey responses.

[5] This is also consistent with the findings of the ESA evaluation early implementation study. (Barnes, H. *et al*., 2010a).

2 The Employment and Support Allowance population

Key points

- Compared to the working-age population as a whole, people who make a claim for Employment and Support Allowance (ESA) are slightly older and more likely to be male.
- ESA claimants are less likely to have qualifications than the general population: over one-third (35 per cent) of ESA claimants have no qualifications.
- Mental health conditions (more prevalent among women and younger people) and musculoskeletal conditions (more prevalent among men and older people) were the main reported health conditions. Health condition also varies by socio-economic group.
- A substantial minority of people (19 per cent) reported that their health conditions were work-related; this applied to almost one-third (32 per cent) of people with musculoskeletal conditions.
- Half (51 per cent) of people claiming ESA were in paid work immediately before claiming.
- ESA claimants who were in work before claiming were older, more likely to be living as a couple and to have a partner who was in work. They were twice as likely to own their own home as claimants not in work prior claiming ESA. The vast majority (85 per cent) had been in employment for most of their working lives.
- Claimants who had not been in work prior to claiming tended to be younger and more likely to be living alone, as a lone parent, or in some other kind of household situation, such as living with parents or in a shared house.
- About one-third of people who were in work before claiming ESA had never worked; half (52 per cent) said they had spent most of their working lives in employment. They were much less likely to have qualifications than general population and a quarter (25 per cent) had a literacy problem.
- Almost three-quarters (72 per cent) of claimants who were in work prior to claiming ESA had a physical health condition; musculoskeletal conditions were the most common main condition and half (49 per cent) had a condition which was of recent (2008/09) onset.
- Mental health conditions were the most common main health condition for ESA claimants not working before their claim, accounting for almost two in five (38 per cent) of this group. One-third (32 per cent) of claimants not working before their claim had a condition that had started before 2004.

2.1 Introduction

This chapter outlines the demographic and social characteristics of recent ESA claimants. It considers the characteristics of claimants by their employment origins, comparing those who were in work immediately prior to claiming with those who were out of work. Chapters 3 and 4 consider the experiences and trajectories of these two groups in more detail.

2.2 Age and gender

ESA claimants tend be slightly older than the general population of working age and are predominately male. The median age of ESA claimants at the baseline survey was 41 against the UK working-age average of 39 years. Almost two-thirds of ESA claimants surveyed at both waves were men (63 per cent) in contrast to a roughly even gender split among of the general population of working age.[6]

2.3 Health

2.3.1 Main health conditions reported

When participants were interviewed at the baseline survey, six to ten months had passed since they made their initial claim for ESA. During this time, 19 per cent of survey participants had experienced improvements in their health, or an early recovery, as they no longer reported a health problem, disability or long-term illness which limited their daily activity or the work they could do. Rates of early recovery appear to be influenced by age, with people in younger age groups less likely to report a health condition at the baseline survey. Overall, 92 per cent of people who were in receipt of ESA (that is, people in the Work-Related Activity Group (WRAG) or Support Group) reported that they had a limiting health problem, disability or long-term illness at the time of the baseline survey (Appendix C).[7]

All participants who reported a health problem, disability or long-term illness which limited their daily activity or the work they could do at the baseline survey were asked about the type of conditions they experienced. Participants with multiple conditions were asked about the condition they regarded as their main health condition.[8] Mental health conditions and musculoskeletal conditions (including injuries) together accounted for 69 per cent of reported main health conditions (Table 2.1). The type of main health condition reported varied by gender and age. Women were more likely to report mental health conditions as their main health condition, whereas men were more likely to report musculoskeletal conditions. Mental health conditions were more common among younger people under the age of 35, while musculoskeletal conditions were more prevalent among people aged 50 and over. The prevalence of long-term and systemic conditions rises with age among ESA claimants, while 'other' health conditions were more prevalent in younger age groups. In general, there were high rates of correspondence between the health condition identified by claimants as their main condition at the baseline survey and that recorded in DWP administrative data.

Just over half of all ESA claimants (53 per cent) said they had a fluctuating condition (Table 2.2). This was higher for women (58 per cent) than men (50 per cent), and for people under the age of 50, which is perhaps linked to the higher prevalence of mental health conditions reported among these groups. Two-thirds of claimants (66 per cent) reported that they had multiple health conditions (see Table 2.2).

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6 Appendix B provides a comparison between the ESA population and the general population of working age.

7 This includes participants who reported fluctuating conditions which were not active on the day of the survey.

8 An explanation of health conditions is provided at Appendix D.

Table 2.1 Main reported health condition at baseline survey, by age and gender

Row percentage

	Mental health condition	Musculo-skeletal condition/ injury	Long-term/ systemic condition	Other' health conditions	Don't know/ prefer not to say	Total	*Base*
Men							
16-24	36	27	10	25	[1]	100	*291*
25-34	39	39	[7]	14	[0]	100	*342*
35-49	30	41	12	14	[3]	100	*611*
50-54	19	41	21	16	[3]	100	*209*
55+	15	47	30	[6]	[2]	100	*400*
All men	28	40	16	14	2	100	*1,853*
Women							
16-24	52	[18]	[10]	[15]	[5]	100	*128*
25-34	51	28	[10]	[10]	[1]	100	*174*
35-49	40	29	19	[8]	[3]	100	*496*
50-54	26	42	[17]	[12]	[3]	100	*145*
55+	26	43	22	[7]	[2]	100	*146*
All women	39	31	17	10	3	100	*1,089*
All people							
16-24	41	25	10	22	[2]	100	*420*
25-34	43	35	8	13	[1]	100	*517*
35-49	34	36	15	12	3	100	*1,108*
50-54	22	41	19	15	[3]	100	*355*
55+	18	46	28	6	[2]	100	*545*
All people	32	37	16	13	2	100	*2,945*

Base: Respondents reporting a health condition, baseline survey.

Table 2.2 Whether health condition fluctuates and whether multiple or single condition at baseline survey, by age and gender

Row percentage

	Fluctuating health condition	Multiple health conditions	Single health condition	*Base*
Men				
16-24	49	56	44	*291*
25-34	54	70	30	*342*
35-49	52	68	32	*610*
50-54	44	60	40	*207*
55+	45	63	37	*398*
All men	50	65	35	*1,848*
Women				
16-24	63	66	34	*129*
25-34	73	69	31	*175*
35-49	58	69	31	*491*
50-54	50	63	37	*144*
55+	47	72	28	*145*
All women	58	68	32	*1,084*
All people				
16-24	54	59	41	*420*
25-34	60	70	30	*518*
35-49	55	68	32	*1,101*
50-54	47	61	39	*352*
55+	45	65	35	*542*
All people	53	66	34	*2,933*

Base: Respondents reporting a health condition, baseline survey.

2.3.2 Socio-economic differences in health

In addition to the age and gender patterns discussed, the main health condition reported by ESA claimants also varied by their socio-economic group (Table 2.3). The prevalence of mental health conditions was highest among people who were long-term unemployed or had never worked, while musculoskeletal conditions were most common among people in intermediate occupations and routine or semi-routine jobs. Age-specific rates of conditions by socio-economic group (NS-SEC) and gender are provided in Appendix E.

When asked about the cause of their health condition a substantial minority of respondents (19 per cent) reported that it was work-related (Table 2.4). People with musculoskeletal conditions were most likely to attribute their health conditions to work: 14 per cent of people with mental health conditions and 11 per cent of people with long-term or systemic conditions said their conditions were work-related, whereas 32 per cent of people with musculoskeletal conditions said that their health condition was caused by work.

Table 2.3 Main health condition at baseline survey, by socio-economic group (NS-SEC combined groups)[9]

Column percentage

	Socio-economic group (NS-SEC combined groups)				
Main health condition	**Managerial and professional**	**Intermediate occupations, small employers and own account workers, lower supervisory and technical**	**Semi-routine and routine**	**Never worked and long-term unemployed**	**All groups**
Mental health condition	31	25	32	45	32
Musculo skeletal or injury	32	43	39	23	37
Long-term or systemic condition	19	19	18	[5]	16
Other health conditions	12	11	9	23	13
Don't know/prefer not to say	[5]	[2]	[2]	[2]	2
Total	100	100	100	100	100
Base	*352*	*883*	*1,134*	*525*	*2,894*

Base: Respondents reporting a health condition, baseline survey.

Table 2.4 Reported cause of main health condition, by type of condition

Column percentage

	Main health condition					
Cause of condition	**Mental health condition**	**Musculo skeletal or injury**	**Long-term or systemic conditions**	**Other health conditions**	**Don't know/ prefer not to say**	**Total**
Born with it	7	7	13	27	12	11
Non-work related						
Accident or injury	5	26	3	7	9	13
Disease or illness	67	30	66	56	42	51
Work-related						
Accident or injury	3	22	2	2	12	10
Disease or illness	11	10	9	1	11	9
Don't know	8	5	7	7	15	6
Total	100	100	100	100	100	100
Base	*936*	*1,080*	*473*	*367*	*61*	*(2,918)*

Base: Respondents reporting a health condition at baseline survey.

[9] Information on NS-SEC definitions is available on the ONS website at: http://www.ons.gov.uk/about-statistics/classifications/current/ns-sec/index.html

2.3.3 Psychological wellbeing

Apart from collecting information on claimants reported health conditions, the baseline survey explored respondents' wellbeing using the 12-item General Health Questionnaire (GHQ-12). The GHQ-12 is a widely-used measure of psychosocial wellbeing which is accepted as a predictor of risk for developing mental health conditions. Respondents' answers to the 12 items were collated using the GHQ scoring method (Goldberg and Williams, 1991). A score of 1 or 0 was allocated for each item depending on whether the respondent had been experiencing the symptom or behaviour described. For example, respondents would score 1 if they had recently felt under constant strain 'more than usual' or 'much more than usual' and a 0 if they had recently experienced feeling under constant strain 'less than usual' or 'no more than usual'. The scores of those who answered all 12 questions were then summed to give a total GHQ-12 score for each respondent, which ranged from 0 to 12. The higher the score, the greater the indication of possible psychological distress, with a score of 4 or more usually taken as indicative of a risk factor for developing common mental health conditions (Scottish Government, 2004).

At the time of the baseline survey, ESA claimants[10] with a health condition had a higher mean GHQ-12 score (indicating greater psychological distress) than the population as a whole (Table 2.5), regardless of their main health condition. The mean scores found in the survey are consistent with other reported scores for people with a limiting health problem and claiming benefit (Barnes, 2000; The Poverty Site, n.d).

Table 2.5 Mean GHQ-12 score at baseline survey, by main health condition

	Mean GHQ score
Mental health condition	6.74
Musculoskeletal condition or injury	5.45
Long-term/systemic conditions	5.62
'Other' health conditions	5.74
All with a health condition	5.94
All respondents	5.16

Base: Respondents at baseline survey who completed all 12 items in GHQ-12 scale, 3,255 cases.

2.3.4 Changes in health

At the follow-up survey, all respondents were asked to reflect on how their health had changed and to assess whether they felt their health was broadly stable, getting better, or deteriorating. Overall, 25 per cent of people said that their health had been getting better since the baseline survey, 25 per cent said that it was getting worse, and nearly half (49 per cent) reported stable or changeable health (Table 2.6). Perhaps unsurprisingly, if we focus solely on people who reported that they had a health problem which limited their daily activities or work at the time of the follow-up survey, fewer respondents (17 per cent) reported improved health. The implications of stability and a change in health for work and benefit-claiming trajectories are discussed in greater detail in Chapters 2 and 3.

[10] It was not possible to repeat this measure at the follow-up survey, as it is not suitable for telephone interviews, due to the sensitive content of some of the questions. This was piloted, but rejected for ethical reasons.

Table 2.6 Health trajectory at follow-up survey: respondent views on change in health since baseline

Column percentage

Reported change in health since baseline	Has a health condition which limits daily activities or work at time of follow-up survey[1]	All respondents at follow-up survey[2]
Getting better	17	25
Getting worse	32	25
Staying the same	29	32
Changeable over time	20	17
Don't know	[1]	[1]
Total	100	100
Base	*1,430*	*1,842*

[1] Includes respondents who reported fluctuating conditions that were not active on the day of the survey.

[2] Includes those not reporting a health condition at follow-up survey, or who refused to answer this question.

Totals may not sum to 100 per cent due to rounding.

2.3.5 Treatment

The great majority of respondents were receiving treatment for their health conditions at both the baseline and follow-up surveys (Table 2.7), and a substantial proportion were also awaiting treatment for their main health condition at both survey waves (Table 2.8). The most commonly-reported forms of treatment were prescription drugs, physiotherapy and counselling, Cognitive Behavioural Therapy (CBT) or psychotherapy. At the time of the follow-up survey 30 per cent of respondents were still awaiting treatment for their main health condition and this was most commonly surgery or psychological therapies or counselling.

Table 2.7 Whether treatment being received at baseline and follow-up surveys and treatment type, by main health condition

Column percentage

	Main health condition					
Receipt of treatment	**Mental health condition**	**Musculo skeletal condition or injury**	**Long-term or systemic condition**	**Other health conditions**	**Don't know/ prefer not to say**	**Total**
At baseline						
Receiving treatment (%)	**86**	**75**	**88**	**77**	**86**	**81**
Of whom % receiving:						
Prescription drugs	89	79	89	88	91	86
Counselling, CBT or psychotherapy	43	5	10	17	[25]	21
Physiotherapy	6	40	[7]	11	[15]	19
Diagnostic tests	12	32	39	25	[51]	26
Base	*809*	*809*	*418*	*284*	*52*	*2,372*
At follow-up						
Receiving treatment (%)	**78**	**66**	**79**	**76**	**81**	**74**
Of whom % receiving:						
Prescription drugs	91	78	88	84	93	85
Counselling, CBT or psychotherapy	51	[6]	[10]	[15]	[25]	20
Physiotherapy	[9]	41	[12]	[15]	[16]	21
Diagnostic tests	20	30	38	31	30	28
Base	*301*	*415*	*200*	*147*	*110*	*1,174*

Base: Respondents reporting a health condition at baseline and follow-up surveys.

Table 2.8 Whether awaiting treatment at the baseline and follow-up surveys and treatment type, by main health condition

Column percentage

	Main health condition					
Receipt of treatment	**Mental health condition**	**Musculo-skeletal condition or injury**	**Long-term or systemic condition**	**Other health conditions**	**Don't know/ prefer not to say**	**Total**
At baseline						
Awaiting treatment (%)	**30**	**44**	**42**	**34**	**[35]**	**38**
Of whom % awaiting:						
Prescription drugs	15	17	15	[22]	[9]	17
Surgery	10	47	34	[20]	[25]	32
Counselling, CBT or psychotherapy	61	[4]	[7]	[21]	[25]	22
Physiotherapy	[6]	25	[3]	[13]	[4]	14
Diagnostic tests	[6]	7	[11]	[4]	[16]	7
Base	*283*	*475*	*197*	*127*	*21*	*1,102*
At follow-up						
Awaiting treatment (%)	**25**	**34**	**30**	**26**	**32**	**30**
Of whom % awaiting:						
Prescription drugs	[19]	[7]	[16]	[9]	[9]	12
Surgery	[9]	54	52	[47]	[40]	42
Counselling, CBT or psychotherapy	68	[2]	[4]	[33]	[18]	21
Physiotherapy	[2]	26	[10]	[7]	[11]	13
Diagnostic tests	[6]	[5]	[1]	[3]	[9]	5
Base	*92*	*192*	*74*	*49*	*42*	*449*

Base: Respondents reporting a health condition at baseline and follow-up surveys.

2.4 Characteristics of people claiming the Employment and Support Allowance from work or non-work backgrounds

As Table 2.9 shows, people can claim ESA directly from work (29 per cent), from work with an intervening period of sickness absence (22 per cent), or from a non-work situation, such as unemployment or family care (49 per cent). These groups vary in important ways.

This section compares some key characteristics of those who claimed ESA from work or from non-work overall, in terms of household circumstances, health, ESA claim status, and work history. Summary tables for each of these dimensions are presented later in this chapter, and an overall summary is shown in Appendix F. Chapters 3 and 4 go on to discuss the employment and social trajectories of those coming respectively from work (including those who have had a period of sickness absence) and from non-work.

Table 2.9 Employment situation immediately before claim by gender

Column percentage

Employment situation before claim	Men	Women	Total
In work	**50**	**51**	**51**
Employed by an employer	36	44	39
In work	20	24	22
Off sick and getting paid as normal	3	4	3
Off sick and getting sick pay (less than normal pay)	7	10	8
Off sick but not getting normal pay or sick pay	5	5	5
Self-employed	15	8	12
Working	10	3	7
Not working due to sickness	5	5	5
Out of work	**50**	**49**	**49**
Unemployed and looking for work	30	19	26
Waiting to take up a definite job offer, but not started yet	[0]	[0]	[0]
Temporarily sick or injured – no job to return to	5	5	5
Permanently off work because of sickness or disability	7	8	8
In training or education	3	3	3
On a government scheme	[0]	[0]	[0]
Looking after children or the home	0	8	3
Caring for someone who is frail, sick or disabled	[1]	[2]	1
Retired	[0]	[0]	[0]
Not in work for some other reason	3	3	3
Total	100	100	100
Base	*2,305*	*1,345*	*3,650*

Base: All respondents, baseline survey.

2.4.1 Household circumstances

There was no difference in gender composition between people in work and not in work immediately before their claim (respectively 63 and 64 per cent were men). People coming from work were older than those from non-work; 36 per cent were aged 50 or over compared with 22 per cent from non-work (Table 2.10). Similar proportions of both groups were in what might be regarded as being the prime working-age bracket, aged 35-49.

Claimants coming from work were more likely to be living as a couple; 54 per cent were living with a partner (Table 2.10), compared to 30 per cent of those from non-work. The partners of claimants coming from work were also more likely to be employed. Conversely, more people from non-work origins lived alone (25 per cent compared to 17 per cent of people claiming from work) or in another type of household situation, such as with parents or with friends (22 per cent compared to 15 per cent of claimants from work). Almost one-quarter (23 per cent) of people from non-work were lone parents, compared to 14 per cent of those from work.

People from work were twice as likely as people from non-work backgrounds to own their own home (47 per cent compared to 23 per cent – Table 2.11) whereas people who were not in work before claiming were more likely to live in rented housing and were almost twice as likely to have a

private landlord (20 per cent compared to 12 per cent for people claiming directly from work). They were also slightly more likely to live in some other arrangement, such as with parents. These figures suggest a more economically disadvantaged profile among the group of people who claim ESA from non-work backgrounds. People in receipt of out-of-work benefits are often entitled to Housing Benefit and ESA claimants – particularly those who were not in work before their claim – might, therefore, face uncertainty about the continuation of their Housing Benefit should they return to work.

2.4.2 Health

People who were not in work before claiming ESA were more likely to identify a mental health condition as their main condition, whereas people who were in work were most likely to report musculoskeletal conditions (Table 2.12).

People from work had generally had a limiting health condition for a shorter period than people in the non-work group. Almost half (49 per cent) of people in work prior to their claim said that their condition was of relatively recent (2008/09) onset, compared to one-third (33 per cent) of people from non-work. By contrast, around one-third (32 per cent) of people not employed prior to claiming had a condition which began before 2004, compared to around one-fifth (22 per cent) of those from work.

2.4.3 Work history, skills and employability

The vast majority (85 per cent) of people working prior to their ESA claim had been in employment for most of their working lives (Table 2.11), but this applied to only around half (52 per cent) of people not in employment prior to claiming. People from non-work backgrounds were also markedly less likely to have qualifications; 41 per cent had no qualifications compared to 28 per cent of people claiming straight from work. People from non-work backgrounds were also more likely to have a literacy problem (25 per cent) or to be in disadvantaged groups that are at risk of social exclusion (28 per cent) such as care leavers and those with convictions (Table 2.13).[11]

[11] Groups at risk of social exclusion include people who reported they had recently left care, were an offender under probation supervision, had spent criminal convictions, had unspent criminal convictions, were in contact with secondary mental health services (psychiatrist, specialist or clinic, not a GP) or had moderate to severe learning disabilities.

Table 2.10 Key demographic characteristics of ESA claimants

Column percentage

		In work before claim			Not in work before claim		
	All	**Men**	**Women**	**Total**	**Men**	**Women**	**Total**
Age							
16-24	17	11	10	**11**	25	22	**24**
25-34	18	14	18	**16**	22	15	**19**
35-49	36	35	42	**38**	30	42	**35**
50-54	12	11	16	**13**	9	10	**10**
55+	18	29	14	**23**	13	10	**12**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,635*	*1,156*	*684*	*1,841*	*1,132*	*649*	*1,783*
Household type							
Lives alone	21	19	14	**17**	26	23	**25**
Lone parent with children under 19	19	7	26	**14**	14	39	**23**
Couple with children under 19	21	25	25	**25**	18	16	**17**
Couple with no children under 19	21	32	22	**29**	15	9	**13**
Single but not alone	18	16	13	**15**	27	14	**22**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,644*	*1,160*	*688*	*1,847*	*1,134*	*650*	*1,784*
Partner's employment							
In work (and working)	54	57	69	**61**	42	44	**42**
Other	46	43	31	**39**	58	56	**58**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*1,527*	*688*	*323*	*992*	*375*	*158*	*533*

Base: All respondents, baseline survey.

'Totals' may not sum to 'All' due to missing data on gender and work status and other variables shown.

Table 2.11 Socio-economic characteristics of ESA claimants

Column percentage

		In work before claim			Not in work before claim		
	All	**Men**	**Women**	**Total**	**Men**	**Women**	**Total**
Level of highest qualification							
Degree or equivalent qualification	8	7	11	**9**	6	8	**7**
GCE A Level/Higher School Certificate	7	4	10	**6**	8	9	**8**
GCSE grades A to C or equivalent	17	19	21	**20**	15	14	**15**
GCSE grades D to E or equivalent	8	6	10	**7**	8	8	**8**
Other academic qualification	7	5	9	**6**	8	10	**8**
Work qualifications only	18	29	14	**23**	15	9	**13**
No qualifications	35	30	26	**28**	40	42	**41**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,635*	*1,164*	*688*	*1,852*	*1,136*	*651*	*1,786*
NS-SEC							
Managerial and professional	12	12	22	**16**	8	8	**8**
Intermediate occupations, small employers and own account workers, and lower supervisory and technical	31	46	26	**39**	27	14	**22**
Semi-routine and routine	40	38	44	**41**	39	42	**40**
Never worked and long-term unemployed	17	4	8	**5**	26	35	**29**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,584*	*1,150*	*678*	*1,828*	*1,112*	*634*	*1,746*
Long-term employment history[1]							
Most of life working:	69	89	78	**85**	61	36	**52**
As an employee	61	73	76	**74**	55	35	**48**
Self-employed	8	16	[2]	**11**	6	[1]	**4**
Base	*3,650*	*1,164*	*688*	*1,852*	*1,136*	*651*	*1,786*
Tenure							
Owner-occupied	35	47	47	**47**	24	21	**23**
With mortgage	23	28	33	**30**	15	14	**15**
Owned outright	12	19	13	**17**	9	6	**8**
Rented	50	39	45	**41**	54	67	**59**
Local authority	20	15	19	**16**	21	28	**24**
Housing association	14	12	15	**13**	13	18	**15**
Private landlord	16	13	11	**12**	20	21	**20**
Other arrangement	15	14	9	**12**	22	12	**18**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,644*	*1,164*	*688*	*1,852*	*1,133*	*647*	*1,781*

Base: All respondents, baseline survey.

'Totals' may not sum to 'All' due to missing data on gender, work status and other variables shown.

[1] Selected groups – column percentages do not sum to 100.

Table 2.12 Key features of ESA claimants' health

Column percentage

		In work before claim			Not in work before claim		
	All	**Men**	**Women**	**Total**	**Men**	**Women**	**Total**
Main health condition							
Mental health	32	20	36	**26**	36	42	**38**
Musculoskeletal condition	37	47	32	**41**	33	30	**32**
Long-term/systemic condition	16	19	21	**20**	12	13	**12**
Other	13	12	6	**10**	17	13	**16**
Do not know	2	[2]	[5]	**3**	[2]	[2]	**[2]**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*2,954*	*940*	*545*	*1,485*	*918*	*544*	*1,462*
Onset of condition							
Recent (2008/09)	41	52	43	**49**	36	28	**33**
Long-term (before 2004)	27	20	26	**22**	30	24	**32**
Base	*2,850*	*905*	*521*	*1,426*	*894*	*528*	*1,422*

Base: Respondents reporting a health condition, baseline survey.

'Totals' may not sum to 'All' due to missing data on gender, work status and other variables shown.

Table 2.13 Skills and employability of ESA claimants

Column percentage

		In work before claim			Not in work before claim		
	All	**Men**	**Women**	**Total**	**Men**	**Women**	**Total**
Literacy problems							
Yes	22	22	13	19	26	22	25
No	78	78	87	81	74	78	75
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,647*	*1,163*	*686*	*1,849*	*1,134*	*651*	*1,786*
Disadvantaged group[1]							
Yes	20	14	11	13	34	18	28
No	80	86	89	87	66	82	72
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*3,650*	*1,164*	*688*	*1,852*	*1,136*	*651*	*1,785*

Base: All respondents, baseline survey.

'Totals' may not sum to 'All' due to missing data on gender and work status and other variables shown.

[1] Includes people who reported they had recently left care, had a criminal conviction, were in contact with secondary mental health services or had moderate to severe learning disabilities.

3 People claiming Employment and Support Allowance from employment

Key points

- Women who had been in work prior to claiming were more likely to have a mental health condition whilst men coming from employment were more likely to have a musculoskeletal condition.
- Over one-quarter (27 per cent) of people claiming Employment and Support Allowance (ESA) from employment attributed their health condition to work. Men were more likely than women to say that their condition was work related.
- Claimants who were in work prior to their ESA claim were more likely than those who were not to report improved health at the follow-up survey. Among claimants from work, younger people were more likely to report that their health condition had been improving over the previous six months. Men were also more likely than women to report improving health.
- People who had been in employment before claiming had typically been working in the private sector, on a permanent contract although 15 per cent of people coming from work had been in temporary posts.
- Over one-third (35 per cent) of people in employment had worked in unskilled or semi-skilled occupations and exactly a quarter in skilled trades. Fewer than one in five (19 per cent) had worked in managerial or professional occupations. Women were more likely than men to have worked in managerial or professional posts and six times as likely to have worked in administrative or service occupations, while men were over-represented in skilled trades, unskilled and semi-skilled occupations.
- Most of those claiming from work had been low paid with almost three-quarters (74 per cent) earning less than £20,000 a year. Nearly half (48 per cent) of women who claimed ESA following employment had been earning less than £10,000 a year. Less than ten per cent of people in employment prior to claiming had earned more than £30,000 a year.
- Over half (55 per cent) of people who had been in work before claiming had left their last job for health reasons and 25 per cent because of redundancy. Women and those with a physical health problem were more likely to have left their job because of ill-health. A substantial minority of men (13 per cent) had left work because their temporary job ended.
- Public sector employees were most likely to have discussed a health condition with their line manager or Human Resources (HR) and women were more likely to have done so than men. People with mental health conditions discussed their health condition less frequently than people with other conditions. People who had spoken to an employer about their health condition had generally found this helpful.

3.1 Introduction

This chapter looks in more detail at the work and health trajectories of people claiming ESA from work. It first considers claimants' health, and then moves on to examine their work histories.

3.2 Health status

As noted in Chapter 2 (Table 2.10), musculoskeletal conditions were the most commonly reported conditions among people who were claiming ESA from work, with 41 per cent reporting such conditions. However, as Table 3.1 shows, there were gender differences in the main reported health condition. While men coming from a work background most commonly reported musculoskeletal conditions, women from work were more likely to report a mental health condition as their main condition. For both men and women claiming ESA from work, the likelihood of reporting a mental health condition declined with age.

Table 3.1 Main reported health condition: people in work before claim, by age and gender

Row percentage

	Main health condition						
	Mental health condition	**Musculo-skeletal condition or injury**	**Long-term/ systemic condition**	**Other health conditions**	**Don't know/ prefer not to say**	**Total**	***Base***
Men							
16-24	[32]	36	[20]	[12]	[0]	100	*88*
25-34	26	57	[7]	[10]	[0]	100	*133*
35-49	22	47	14	16	[2]	100	*327*
50-54	[14]	42	[23]	[16]	[5]	100	*113*
55+	15	46	30	[6]	[3]	100	*275*
All men	20	46	19	12	[2]	100	*936*
Women							
16-24	[49]	[8]	[10]	[17]	[16]	100	*39*
25-34	44	33	[15]	[6]	[2]	100	*96*
35-49	37	29	25	[5]	[4]	100	*243*
50-54	35	37	[17]	[8]	[3]	100	*85*
55+	[19]	47	[25]	[5]	[4]	100	*78*
All women	36	32	21	6	[4]	100	*540*
All people							
16-24	37	27	[17]	[13]	[5]	100	*127*
25-34	34	47	[11]	[8]	[1]	100	*229*
35-49	28	39	18	11	[3]	100	*570*
50-54	23	40	21	[12]	[4]	100	*197*
55+	16	46	29	[6]	[3]	100	*352*
All people	26	41	20	10	3	100	*1,476*

Base: Respondents reporting a health condition, baseline survey.

Looking at reported causes of health conditions (Table 3.2), most people who were in employment prior to claiming ESA did not attribute their health condition to work. Forty-seven per cent of people claiming ESA from employment said that the cause of their illness or disease was non-work-related, and this was even more so among women (60 per cent). Traffic accidents, and sporting and leisure accidents, accounted for almost one-quarter (23 per cent) of health conditions among people aged under 25, but declined steadily in line with age.

Over one-quarter of people who were working prior to claiming ESA reported that their condition was work-related; with 14 per cent reporting a work-related accident or injury, and 13 per cent a disease or illness caused by work. Work-related disease or illness increased with age, presumably in part due to delayed onset, but accident and injury rates were similar across age groups. Men who claimed ESA from work were almost three times as likely as women to report that a work accident was the cause of their condition (19 per cent compared to seven per cent).

Table 3.2 Cause of condition: people in work before claim, by age and by gender

Column percentage

	Age group					Gender		
Cause of condition	**16-24**	**25-34**	**35-49**	**50-54**	**55 +**	**All men**	**All women**	**Total**
Born with it or birth injury (including heredity illnesses)	[15]	[13]	9	[6]	[5]	8	10	**9**
Work-related accident or injury (including traffic accidents at work)	[6]	16	16	[12]	14	19	7	**14**
Non-work related traffic accident or injury	[12]	[10]	6	[6]	[4]	9	[3]	**7**
Household, leisure and sports accident or injury (non-work related)	[11]	[6]	[4]	[3]	[3]	5	[3]	**4**
Work-related diseases and illnesses	[3]	[6]	14	[12]	19	14	10	**13**
Non-work-related diseases and illnesses	45	44	44	54	49	39	60	**47**
Don't know	[8]	[5]	8	[7]	[5]	7	6	**7**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*127*	*225*	*560*	*196*	*346*	*926*	*537*	*1,463*[1]

Base: Respondents reporting a health condition, baseline survey.

[1] Base total by age is 1,454 due to missing data on age in nine cases.

3.2.1 Changes in health and health expectations

At the follow-up survey, people were asked about changes in their health status and about their expectations of future health. People who were in work before claiming ESA were more likely to report improved health in the six months since the baseline survey (29 per cent compared with 21 per cent of people who were not in work prior to claiming ESA).

Table 3.3 shows that changes in health and views on health prospects among those in work before their claim differed by age and gender. Younger people in this group were more likely to report an improvement in health and older people a deterioration (46 per cent of people aged 25-34 reported health improvements compared to 18 per cent of those aged 55 or more). Over one-third (34 per cent) of people aged 50 and over said that their condition was deteriorating, compared to exactly one-quarter of people aged 35-49.

Men who had worked prior to claiming were more likely to reflect positively on how their health had changed since the baseline survey: 31 per cent of men compared to 25 per cent of women said their health had improved – despite them being less likely to report that they were receiving treatment (69 per cent compared with 85 per cent of women). Women who had worked before their ESA claim were more likely to report that their condition was changeable over time (19 per cent compared with 11 per cent of men), which may be linked to higher rates of mental health conditions among women, but there was little difference between the overall proportions of men and women coming from work who felt their health had deteriorated.

At the follow-up survey, respondents were also asked to assess how they felt their health would progress in the following six months. Older people aged 50 and over who had been in employment prior to claiming ESA, generally had more negative health expectations: two in ten of these people reported that they expected their health to deteriorate (20 to 23 per cent across age groups), compared to less than one in ten people in younger age groups (zero to eight per cent). Less than one-quarter (20 to 24 per cent) of people over 50 expected that the health would improve over the following six months compared with approximately one-third (31 to 36 per cent) of those under 50.

Table 3.3 Recent health, treatment status and health expectations at follow-up survey: people in work before claim, by age and gender

Column percentage

	Age group					Gender		
	16-24	**25-34**	**35-49**	**50-54**	**55 and over**	**All men**	**All women**	**Total**
Change in health								
Getting better	[36]	46	30	[20]	18	31	25	**29**
Getting worse	[4]	19	25	34	34	25	28	**26**
Staying the same	52	20	26	33	37	33	27	**31**
Changeable over time	[8]	[13]	18	[13]	[11]	11	19	**14**
Don't know	[0]	[2]	[1]	[0]	[0]	0	[1}	**[1]**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*75*	*160*	*350*	*128*	*221*	*586*	*347*	*933*
Currently receiving treatment?[1]								
Yes	[62]	66	79	76	76	69	85	**75**
No	[38]	34	21	[24]	23	31	16	**25**
Don't know	[0]	[0]	[0]	[0]	[1]	0	0	**[0]**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*37*	*130*	*292*	*99*	*179*	*460*	*278*	*738*
Currently awaiting treatment?[2]								
Yes	[22]	32	26	30	30	27	31	**29**
No	[78]	67	73	68	69	73	70	**70**
Don't know	[0]	[1]	[0]	[2]	[1]	0	[2]	**[1]**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*36*	*130*	*291*	*99*	*179*	*458*	*278*	*736*
Health expectations for six months' time								
Better than now	[31]	36	32	[20]	24	30	27	**29**
Worse than now	[0]	[4]	[8]	[23]	20	13	10	**12**
About the same as now	64	40	43	41	44	45	43	**44**
Don't know	[5]	19	17	[16]	[12]	13	19	**15**
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Base	*75*	*160*	*348*	*128*	*222*	*586*	*347*	*933*

Base: Respondents reporting a health condition, follow-up survey.

[1] Currently receiving treatment relates to all conditions.

[2] Currently awaiting treatment relates to main health condition only.

3.3 Work experience and work history

3.3.1 Work history

The vast majority (81 per cent) of people claiming ESA from work had been employed in the private sector (Table 3.4), but there were gender differences. Working in the private sector was more common among men (88 per cent) than women (67 per cent). A higher proportion of men were also self-employed (32 per cent) compared with women (18 per cent).

ESA claimants' employment prior to claiming appears to tend towards more insecure work with waged low-paid jobs[12]:

- Over one-third (35 per cent) were employed in unskilled or semi-skilled occupations and a quarter in skilled trades.
- Fewer than one in five had worked in managerial or professional occupations, but these occupations were more common among women (25 per cent) than men (16 per cent).
- Most men had been employed in skilled trades (36 per cent) or unskilled and semi-skilled occupations (41 per cent) and one in five men had been on a temporary or fixed term contract.
- Almost three-quarters (74 per cent) had earned less than £20,000 a year, and nearly half (48 per cent) of women had been earning less than £10,000 a year. Only nine per cent had earned more than £30,000 a year.
- Women were six times more likely to have worked in administrative, personal service or sales occupations (47 per cent compared with seven per cent of men) and were more likely to be employed by large organisations (31 per cent compared with 22 per cent of men).

Table 3.5 considers the main reasons why claimants left employment to claim ESA. Over half (55 per cent) reported their health as one of the reasons. People not spontaneously reporting that their health played a part were then asked directly whether it had been a factor in their job coming to an end and 50 per cent reported that it had.

Ill-health was a more common driver for leaving employment for women (62 per cent) than for men (51 per cent) and for a higher proportion of claimants with physical health conditions (62 per cent) than for those mental health conditions (53 per cent). It was also important for a higher proportion of public sector workers (70 per cent) than private sector workers (52 per cent).

Exactly one-quarter of people working prior to claiming reported redundancy or company closure as a reason for leaving their last job. This was more common for men (28 per cent) than for women (19 per cent) and for people in certain types of jobs. For example, people who were employed in the private sector (28 per cent), and those working in skilled trades, semi-skilled and unskilled occupations were among the most likely to report redundancy as a reason for leaving work. Likewise, those in skilled trades and those working in the third sector were more likely to report leaving work because their job was temporary.

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12 Due to the way the questionnaire was structured, some information on employment prior to the claim for ESA was not collected from all respondents. This is because some of employment questions, about sector, occupation and firm size, were asked about respondents' current job if they were in work when interviewed or their most recent job if not. Therefore, where individuals had started a different job after their claim, information on the characteristics of their employment prior to claiming was not collected. On this basis, 14 per cent of 'from work' group cases were excluded from this analysis.

Table 3.4 Previous employment: people in work before claim, by gender

Column percentage

	Men	Women	All
Sector			
Private sector	88	67	81
Public sector	11	30	18
Charity/voluntary sector	[1]	[3]	[1]
Total	**100**	**100**	**100**
Base	*973*	*535*	*1,508*
Occupation			
Managerial, professional, and associate professional	16	25	19
Administrative, personal service and sales	7	47	21
Skilled trades	36	[4]	25
Semi-skilled and unskilled	41	23	35
Total	**100**	**100**	**100**
Base	*990*	*544*	*1,534*
Firm size			
Micro (1-9 employees)	15	14	15
Small (10-49 employees)	11	18	14
Medium (50-249 employees)	13	14	13
Large (250+ employees)	22	31	25
Do not know	6	6	6
Self-employed	32	18	27
Total	**100**	**100**	**100**
Base	*1,053*	*573*	*1,626*
Type of contract			
Permanent	81	92	85
Temporary, seasonal or casual	10	5	8
Fixed term	6	3	5
Other non-permanent	3	1	2
Total	**100**	**100**	**100**
Base	*570*	*300*	*870*
Annual earnings			
Less than £10,000	21	48	30
£10,000 to £19,999	46	40	44
£20,000 to £29,999	23	7	17
More than £30,000	11	[5]	9
Total	**100**	**100**	**100**
Base	*520*	*266*	*786*

Base: Respondents in work immediately before claiming ESA, baseline survey.

Table 3.5 Reason last job ended: people in work before claim, by selected characteristics

Row percentage

	Ill-health	Redundancy	Job was temporary	Other	*Base*
Gender					
Male	51	28	13	14	*297*
Female	62	19	[2]	25	*158*
Main health condition					
Physical health condition	62	25	[9]	12	*297*
Mental health condition	53	16	[5]	33	*95*
Sector					
Private sector	52	28	9	19	*362*
Public sector	70	[7]	9	[19]	*66*
Charity/voluntary sector	[77]	[19]	[16]	[0]	*7*
Occupation					
Managerial, professional, and associate professional	65	15	[8]	[21]	*87*
Administrative, personal service and sales	60	22	[5]	[16]	*112*
Skilled trades	49	[33]	[16]	[11]	*91*
Semi-skilled and unskilled	49	[27]	[8]	22	*165*
All from work	**55**	**25**	**9**	**18**	**455**
All people (ESA sample)	**45**	**27**	**8**	**27**	**1,026**

Base: Respondents in work immediately before claiming ESA, who had not returned to work at baseline survey and responded to follow-up survey. 'Reason last job ended' was asked at the follow-up survey. It is a multiple response question, does not sum to 100.

3.3.2 Comparing the self-employed and employed

People who were self-employed prior to their claim tended to be older (Table 3.6). A higher proportion were aged 55 and over (29 per cent compared with 21 per cent of employees) and a lower proportion were aged 16 to 26 (five per cent compared to 12 per cent of employees).

Differences in gender can also be seen between the types of employment. Men accounted for over three-quarters (77 per cent) of the self-employed, but the gender divide is slightly more even among employees; 58 per cent of this group were men. This is similar to the UK population, of which 71 per cent of the self-employed are men and 51 per cent of employees are men[13].

A slightly higher proportion of those who were self-employed reported a physical health condition; exactly three-quarters compared with 71 per cent of employees.

Looking at the level of qualifications held by claimants in work prior to their claim, more of those who were self-employed sit at either end of the spectrum, with 12 per cent reporting holding a degree or equivalent qualification (compared with eight per cent of employees), but also 33 per cent claiming to have no qualifications (compared with 27 per cent of employees).

13 Labour Force Survey, July-September 2011.

When considering employment characteristics, Table 3.7, shows that the majority of people who were self-employed prior to their claim to ESA worked in the private sector (93 per cent) compared with 78 per cent of employees. The skilled trades seems to be the dominant occupation for self-employed people, with 45 per cent working in these occupations. People who were employees prior to claiming ESA were more likely to be in semi-skilled and unskilled occupations, and administrative, personal service and sales jobs (38 per cent and 24 per cent respectively).

Table 3.6 Self-employed and employed: people in work before claim, by individual characteristics

Column percentage

	Employment status immediately before claim		
Claimant characteristics	**Employed (including off sick)**	**Self-employed (including off sick)**	**Total**
Gender			
Male	58	77	63
Female	42	23	37
Total	100	100	100
Base	*1,408*	*444*	*1,852*
Age			
16-24	12	[5]	11
25-34	15	17	16
35-49	37	40	38
50-54	15	8	13
55 and over	21	29	23
Total	100	100	100
Base	*1,402*	*438*	*1,841*
Main health condition			
Mental health condition	29	25	28
Physical health condition	71	75	72
Total	100	100	100
Base	*1,098*	*342*	*1,440*
Qualifications			
Degree or equivalent qualification	8	12	9
GCE A Level/Higher School Certificate	7	[5]	6
GCE O Level/GCSE grades A to C or equivalent	21	16	20
GCE O Level/GCSE grades D to E or equivalent	8	[5]	7
Other academic qualifications	6	[7]	6
Work qualifications	23	24	23
No qualifications	27	33	28
Total	100	100	100
Base	*1,408*	*444*	*1,852*

Base: Respondents in work immediately before claiming ESA.

Table 3.7 Self-employed and employed: people in work before claim, by characteristics of employment

Column percentage

	Employment status immediately before claim		
Characteristics of claimant's job	**Employed including off sick**	**Self-employed including off sick**	**Total**
Sector			
Private sector	78	93	**81**
Public sector	21	[6]	**18**
Charity or voluntary sector	[1]	[1]	**[1]**
Total	**100**	**100**	**100**
Base	*1,158*	*351*	*1,509*
Occupation			
Managerial, professional and associate professional and technical	19	21	**19**
Administrative, personal service and sales	24	11	**21**
Skilled trades	19	45	**25**
Semi-skilled and unskilled	38	24	**35**
Total	**100**	**100**	**100**
Base	*1,180*	*354*	*1,534*
Annual earnings			
Less than £10,000	29	33	**30**
£10,000 to £19,999	46	33	**44**
£20,000 to £29,999	17	[19]	**17**
More than £30,000	8	[15]	**9**
Total	**100**	**100**	**100**
Base	*677*	*110*	*786*

Base: Respondents in work immediately before claiming ESA.

3.3.3 Sickness absence

Some people who were employed prior to claiming ESA reported that they had had a period of paid sickness absence before their claim. This section looks at the proportions of employees who took a period of sickness absence in between working and claiming, and explores the characteristics of these different groups, looking first at their individual characteristics and then at the characteristics of the job.

Forty-three per cent of people who were employed prior to their claim reported taking a period of paid or unpaid sickness absence before claiming ESA: 30 per cent had a period of paid sickness absence, during which they either received normal pay, or a reduced rate of pay and 13 per cent reported that they had had a period of unpaid sickness absence (Table 3.8 and Table 3.9).

Individual characteristics did not appear to play a major role in determining access to paid sickness absence. Employed men and women were equally likely to have gone straight from work to claiming ESA without a period of sickness absence. Employed people in younger age groups were less likely than people in other age groups to report having a period of paid or unpaid sickness absence

immediately before their claim. Having been in self-employment, rather than employment, for most of one's working life greatly increased the probability of going straight from work to ESA, without an intervening period of sickness absence (77 per cent, compared to 56 per cent).

In terms of employment characteristics affecting access to paid sickness absence, sector was an important factor. Nearly two-thirds (61 per cent) of public sector workers reported having a period of paid or unpaid sick leave before claiming ESA compared to 39 per cent of private sector workers. Organisation size was also important; 57 per cent of people who worked for a large employer (250 or more employees) reported having access to paid or unpaid sick leave, compared to 29 per cent of those working for micro employers (with less than ten employees).

Employees in permanent jobs were much more likely than those with temporary contracts to have had a period of sickness absence before claiming ESA; 43 per cent of those with a permanent contract reported this, compared with between 19 and 23 per cent of those with various temporary contracts. Interviewees in skilled trades were least likely to have had a period of sickness absence compared to other occupational groups.

Table 3.8 Sickness absence status before claim, by claimant characteristics: people in work before claim

Row percentage

	Employment situation immediately before claim				
Claimant characteristics	**In work (not off sick)**	**Off sick and getting paid as normal or getting sick pay**	**Off sick but not getting normal pay or sick pay**	**Total**	***Base***
Gender					
Male	57	29	14	100	*822*
Female	56	32	12	100	*586*
Total	**57**	**30**	**13**	100	*1,408*
Age					
16-24	71	[12]	[17]	100	*170*
25-34	61	23	16	100	*214*
35-49	56	31	12	100	*516*
50-54	48	40	[12]	100	*206*
55 and over	58	38	11	100	*295*
Total	**57**	**30**	**13**	100	*1,402*

Continued

Table 3.8 Continued

Row percentage

Claimant characteristics	Employment situation immediately before claim: In work (not off sick)	Off sick and getting paid as normal or getting sick pay	Off sick but not getting normal pay or sick pay	Total	*Base*
Main health condition					
Mental health	54	32	15	100	*305*
Musculoskeletal condition or injury	53	34	13	100	*458*
Long-term/systemic condition	58	32	[11]	100	*219*
Other health conditions	42	28	30	100	*116*
Don't know/prefer not to say	[50]	[42]	[9]	100	*34*
Total	53	33	14	100	*1,132*
Onset of condition[1]					
Recent 2008/09	56	32	12	100	*534*
Long-term before 2004	50	31	19	100	*234*
Total	53	32	15	100	*1,085*
Work history					
Spent most of working life as an employee in steady jobs	56	32	11	100	*1,144*
Spent most of working life self-employed	77	[9]	[15]	100	*64*
Have mainly done casual, freelance or short-term work	[56]	[15]	[29]	100	*44*
Have spent a lot of time out of work because of sickness or injury	[56]	[10]	[34]	100	*34*
Have spent a lot of my adult life looking after family or the home	54	[97]	[9]	100	*69*
Have spent more time unemployed than in work	[56]	[29]	[15]	100	*31*
Have never really had paid employment	[8]	[37]	[55]	100	*13*
Don't know	[89]	[0]	[11]	100	*9*
Total	57	30	13	100	1,408

Base: Employees in work before claim (excludes self-employed).

[1] Interim years of onset of condition not shown.

Table 3.9 Claimant characteristics, by sickness absence status before claim: people in work before claim

Column percentage

	Employment situation immediately before claim			
Claimant characteristics	**In work**	**Off sick and getting paid as normal or getting sick pay**	**Off sick but not getting normal pay or sick pay**	**Total**
Gender				
Male	59	56	61	**58**
Female	41	44	39	**42**
Total	**100**	**100**	**100**	**100**
Base	*798*	*426*	*184*	*1,408*
Age				
16-24	15	[5]	[16]	**12**
25-34	17	12	18	**15**
35-49	37	38	35	**37**
50-54	12	19	[14]	**15**
55 and over	19	26	18	**21**
Total	**100**	**100**	**100**	**100**
Base	*793*	*426*	*184*	*1,402*
Main health condition				
Mental health	27	26	27	**27**
Musculoskeletal condition or injury	41	42	35	**40**
Long-term/systemic condition	21	19	[14]	**19**
Other health conditions	8	9	21	**10**
Don't know/prefer not to say	[3]	[4]	[2]	**[3]**
Total	**100**	**100**	**100**	**100**
Base	*601*	*369*	*163*	*1,132*
Onset of condition[1]				
Recent 2008/09	51	50	40	**49**
Long-term before 2004	20	21	28	**22**
Base	*580*	*345*	*160*	*1,085*

Continued

Table 3.9 Continued

Column percentage

Claimant characteristics	Employment situation immediately before claim: In work	Off sick and getting paid as normal or getting sick pay	Off sick but not getting normal pay or sick pay	Total
Work history				
Spent most of working life as an employee in steady jobs	80	87	71	81
Spent most of working life self-employed	6	[1]	[5]	5
Have mainly done casual, freelance or short-term work	[3]	[1]	[7]	3
Have spent a lot of time out of work because of sickness or injury	[2]	[1]	[6]	2
Have spent a lot of my adult life looking after family or the home	5	[6]	[4]	3
Have spent more time unemployed than in work	[2]	[2]	[2]	2
Have never really had paid employment	[0]	[1]	[4]	[1]
Don't know	[1]	[0]	[1]	[0]
Total	100	100	100	100
Base	*798*	*426*	*184*	*1,408*

Base: Employees in work before claim (excludes self-employed).

[1] Interim years of onset of condition not shown.

Table 3.10 Sickness absence status before claim, by characteristics of claimant's job: people in work before claim

Row percentage

	Employment situation immediately before claim				
Characteristics of claimant's job	**In work**	**Off sick and getting paid as normal or getting sick pay**	**Off sick but not getting normal pay or sick pay**	**Total**	***Base***
Sector					
Private sector	60	29	10	100	*899*
Public sector	38	47	14	100	*244*
Charity or voluntary sector	[70]	[21]	[8]	100	*16*
Total	**56**	**33**	**11**	100	*1,158*
Firm size					
Micro: 1-9 employees	72	18	[11]	100	*237*
Small: 10-49 employees	62	25	[13]	100	*222*
Medium: 50-249 employees	52	35	[13]	100	*214*
Large: 250+ employees	43	45	12	100	*412*
Do not know	65	[27]	[9]	100	*98*
Total	**56**	**32**	**12**	100	*1,183*
Occupation					
Managerial, professional and associate professional and technical	51	35	14	100	*224*
Administrative, personal service and sales	56	37	[7]	100	*285*
Skilled trades	65	22	[13]	100	*221*
Semi-skilled and unskilled	57	31	11	100	*449*
Total	**57**	**32**	**11**	100	*1,182*
Type of contract					
Permanent one	56	32	11	100	*654*
Temporary, seasonal, temporary or casual	80	[12]	[8]	100	*55*
Fixed term	[77]	[18]	[5]	100	*23*
Other non-permanent	[81]	[17]	[2]	100	*11*
Don't know	[76]	[0]	[24]	100	*2*
Total	**59**	**30**	**11**	100	*745*

Base: Employees in work before claim (excludes self-employed).

3.3.4 The role of employers in helping people remain in work

Employers have a potential role to play in helping people remain in work and this section looks at whether Occupational Health (OH) was available to ESA claimants coming from work. It also looks at the characteristics of people who had discussed their condition with line managers or HR departments, and how helpful they had found these discussions.

Overall, just under one-quarter (24 per cent) of people who had been in employment prior to their claim reported having access to OH at work. There were, however, significant differences in this pattern by gender, sector and firm size (Table 3.11):

- More women than men reported access to occupational health services (31 per cent of women compared to 19 per cent of men).
- Access to OH was highest for claimants previously working in the public sector, with 66 per cent of women in the public sector, and 60 per cent of men having access to OH compared to just 16 per cent of women, and 14 per cent of men, who were working in the private sector.
- For people working within the private sector, those working in larger firms were more likely to have access to OH; the proportion of men and women with access to OH at larger employers was just over one-quarter (27 and 26 per cent respectively) compared to less than eight per cent of women and four per cent of men working at small firms.

For people who had access to OH at work, more than three-quarters had used it (77 per cent), and around a fifth (21 per cent) had changes made to their work as a result. The changes that were made related most often to changes to hours and duties. Almost three-quarters (72 per cent) of people who had made changes believed they had helped them to stay in work for longer.

Table 3.11 Access to occupational health services: people in work before claim, by sector, gender and firm size

Row percentage

	Access occupational health services?				
	Yes	**No**	**Don't know**	**Total**	**Base**
Gender and sector of employment					
Women in public sector	66	[26]	[7]	100	*140*
Men in public sector	60	39	[1]	100	*83*
Women in private sector	16	77	[7]	100	*266*
Men in private sector	14	82	[4]	100	*546*
Gender and firm size (private sector only)					
Women in large firms with 250+ employees	[26]	60	[14]	100	*73*
Men in large firms with 250+ employees	27	66	[8]	100	*155*
Women in small firms with less than 50 employees	[8]	87	[5]	100	*127*
Men in small firms with less than 50 employees	[4]	95	[1]	100	*232*
All men	19	77	4	100	*673*
All women	31	61	8	100	*460*
All	24	71	5	100	*1,132*

Base: Respondents in work immediately before claiming ESA.

Sector, gender and firm size were all key determinants of whether a health condition had been discussed with an employer (Table 3.12):

- Women in the public sector were slightly more likely to report doing so; 82 per cent reported discussing their condition with their line manager compared to 79 per cent of men in this sector.
- Men in the private sector were least likely to report that they had discussed their condition with their line manager, at 58 per cent.
- People in larger private sector firms were only slightly less likely than those in the public sector to have discussed their condition with their employer.

Smaller proportions (27 per cent, overall) of employees had discussed their condition with someone in HR:

- Women in the public sector were most likely to discuss their health condition with HR (50 per cent).
- The lowest rates of consultation with HR were in the private sector (24 per cent for women and 22 per cent for men).
- In the private sector, rates of consultation with HR differ greatly by firm size. A far higher proportion of those in large firms reported discussing their health with HR (45 per cent of women and 41 per cent of men), compared to those in small firms (14 per cent of women and seven per cent of men). This is likely to reflect the absence of a dedicated HR function in smaller private sector firms.

The type of health condition also made a difference to whether or not health was discussed with a line manager or HR:

- Mental health conditions were discussed least often (53 per cent of people with a mental health condition had discussed this with their line manager and only 21 per cent with HR).
- Musculoskeletal conditions were discussed most often (66 per cent of people with a musculoskeletal condition had discussed this with a line manager and 29 per cent with HR).

Table 3.12 Whether health condition was discussed with employer: people in work before claim, by sector, gender, firm size and main health condition

Row percentage

	Discussed health condition with line manager	Discussed health condition with HR
Gender and sector of employment		
Women in public sector	82	50
Men in public sector	79	42
Women in private sector	68	24
Men in private sector	58	22
Gender and firm size (private sector only)		
Women in large firms (250+ employees)	77	45
Men in large firms (250+ employees)	65	41
Women in small firms (less than 50 employees)	62	14
Men in small firms (less than 50 employees)	60	7
Main health condition		
Mental health condition	53	21
Musculoskeletal condition	66	29
Long-term/systemic conditions	63	27
Other condition	57	23
All men	56	24
All women	67	30
All	61	26
Base	*1,331*	*1,331*

Base: Respondents in work immediately before claiming ESA.

Around two-thirds of people who had discussed a condition with their line manager had found this helpful (69 per cent of those in the public sector and 63 per cent of those in the private sector). Similarly, 68 per cent of people who had discussed their condition with HR had found it helpful, with approval ratings somewhat higher in the public sector (where 73 per cent had found it helpful, compared to 65 per cent in the private sector).

4 People not in employment before claiming Employment and Support Allowance

Key points

- Mental health conditions were the most commonly reported types of condition among people who were not in work prior to claiming Employment and Support Allowance (ESA). This may be partly a reflection of the younger age profile of this group, as mental health conditions were more than twice as common among younger age groups.
- ESA claimants who were not in employment prior to making their claim were more likely to report an earlier onset for their main condition, with almost one-third (32 per cent) reporting that their condition began before 2004 compared with just over one-fifth (22 per cent) of those claiming from work.
- Only a minority of claimants not in employment prior to claiming (11 per cent) identified their condition as work related. The prevalence of birth defects or hereditary conditions was higher among this group.
- A higher proportion of people not in employment prior to claiming reported that their health had deteriorated rather than improved between the two waves of the survey.
- When looking to the future, nearly three-quarters of people who were not in work prior to claiming (73 per cent) expected their health to either be stable or improved. Only ten per cent predicted deterioration in their health in six months' time.
- Claimants not in work prior to their claim were also much less likely to have been in work for most of their working lives and were much less likely to have a working partner than those in employment prior to claiming.
- In their most recent employment, people claiming ESA from non-work backgrounds were more likely to have worked in lower skilled occupations and temporary, seasonal or casual contracts and were less likely to have earned high salaries than people in employment directly prior to their claim. They were also less likely to have been employed in the public sector.

4.1 Introduction

Almost half (49 per cent) of those claiming ESA were not in employment before their claim. This chapter describes the characteristics of this 'from non-work' group and discusses their employment history and trajectories.

4.2 Health status

Table 4.1 looks at some key health variables for people who claim ESA from non-work backgrounds. As noted in Chapter 2, mental health conditions were the most commonly reported types of conditions among those who were not in employment prior to claiming, accounting for 38 per cent

of the total. This is in stark contrast to just over one-quarter of the total of those claiming from work (26 per cent). This may be partly a reflection of the younger age profile of the non-work group. Mental health conditions were more than twice as common among younger age groups, accounting for between 40 and 51 per cent of main health conditions for those aged 16-49, but only one in five for the over 50s.

Musculoskeletal conditions were the second most common health conditions among the non-work group with 32 per cent of people who had not been in employment prior to claiming ESA reporting these as their main health conditions (compared to 41 per cent of people claiming ESA from work). Again, this may be partly a reflection of the younger age profile of the non-work group as the proportion of people with musculoskeletal conditions rises with age (23 per cent of people in this group aged under 24 reported musculoskeletal conditions compared to 45 per cent of those aged 55 and over). There was no gender difference in the proportions reporting musculoskeletal conditions as their main health condition among this group, unlike people coming onto ESA from work.

Long-term and systemic conditions affected just over one in ten claimants who come from a non-work background (12 per cent) compared to two in ten (20 per cent) of people claiming from work. Again these differences may partly reflect the younger age structure of the non-work group as these types of condition also appear to rise steadily with age, accounting for around one-quarter (26 per cent) of main health conditions for people aged 55 and over. The prevalence of long-term and systemic conditions was similar for men and women among the non-work group.

Other conditions were also more common among the non-work group of claimants (16 per cent) than those claiming from work (ten per cent), but in both groups more men than women reported other health conditions (17 per cent compared with 13 per cent in the non-work group and 12 per cent compared to six per cent of people claiming from work).

Looking at the onset of their main health condition (Table 2.10), a higher proportion of people who were not in employment prior to claiming reported that their condition was long term compared with people who were claiming ESA from work. Almost one-third (32 per cent) of people in the non-work group reported that their condition had begun before 2004, in comparison with just over one in five (22 per cent) people who were working prior to claiming. Correspondingly, a smaller proportion, exactly one-third of those from non-work, reported that their main condition started recently (2008/09), compared to almost half (49 per cent) of people claiming from work.

Table 4.12 shows the cause of health conditions for people in the non-work group. Only a minority of claimants from this group (11 per cent) identified the cause of their condition as work related compared to over one-quarter of those claiming from work (27 per cent). The largest single cause of people's health condition was non-work-related disease or illness, with 56 per cent of people from non-work backgrounds stating this to be the case, and exactly two-thirds of women doing so. Thirteen per cent of people from non-work backgrounds said that their condition was a birth defect or hereditary condition, and this was higher among younger people (exactly one-quarter of conditions among the under 25s was reported to have been due to a birth defect or a hereditary condition). The prevalence of birth defects or hereditary conditions was lower among those claiming from work (nine per cent).

Table 4.1 Main reported health condition at baseline survey: people not in work before claim, by age and gender

Row percentage

	Main health condition						
	Mental health condition	**Musculo skeletal condition or injury**	**Long-term/ systemic condition**	**Other health conditions**	**Don't know/ prefer not to say**	**Total**	**Base**
Men							
16-24	38	24	[6]	31	[1]	100	*203*
25-34	48	28	[7]	17	[0]	100	*209*
35-49	39	35	10	12	[4]	100	*284*
50-54	[24]	40	[19]	[17]	[0]	100	*95*
55+	[13]	49	29	[7]	[2]	100	*124*
All men	36	33	12	17	[2]	100	*915*
Women							
16-24	54	[22]	[10]	[14]	[0]	100	*89*
25-34	60	[21]	[4]	[15]	[1]	100	*79*
35-49	41	30	14	12	[3]	100	*250*
50-54	[14]	[50]	[17]	[19]	[1]	100	*59*
55+	[35]	[38]	[18]	[9]	[0]	100	*66*
All women	42	30	13	13	[2]	100	*544*
All people							
16-24	43	23	[7]	26	[1]	100	*293*
25-34	51	26	[6]	16	[1]	100	*287*
35-49	40	32	12	12	[3]	100	*534*
50-54	20	44	18	[18]	[0]	100	*155*
55+	21	45	26	[8]	[1]	100	*190*
All people	38	32	12	16	[2]	100	*1,459*

Base: Respondents reporting a health condition, baseline survey.

Table 4.2 Cause of condition reported at baseline survey: people not in work before claim, by age and gender

Column percentage

	Age group					Gender		
Cause of health condition	**16-24**	**25-34**	**35-49**	**50-54**	**55 and over**	**All men**	**All women**	**Total**
Born with it or birth injury (including heredity illnesses)	25	13	10	[10]	[3]	12	13	13
Work-related accident or injury (including traffic accidents at work)	[1]	[3]	7	[9]	[10]	7	[3]	5
Non-work related traffic accident or injury	[6]	[9]	7	[4]	[4]	7	6	6
Household, leisure and sports accident or injury (non-work related)	[10]	[9]	6	[11]	[3]	9	[4]	8
Work-related diseases and illnesses	[1]	[4]	7	[10]	[11]	8	[2]	6
Non-work-related diseases and illnesses	51	57	57	51	61	50	66	56
Don't know	[6]	[6]	7	[5]	[7]	6	6	6
Total	100	100	100	100	100	100	100	100
Base	*289*	*282*	*532*	*152*	*189*	*910*	*539*	*1,449*[1]

Base: Respondents reporting a health condition.

[1] Base total by age is 1,444 by age, due to missing data on age in five cases.

4.2.1 Changes in health between baseline and follow-up survey waves

At the follow-up survey, exactly one-third of people who were not in work immediately prior to their claim reported no change in their health in the six months since the baseline survey. A higher proportion of this group reported that their health had deteriorated (25 per cent) rather than improved (21 per cent) between the two survey waves compared to people who claimed ESA from employment (Table 4.3). Interestingly, this is the case in spite of the younger age profile of people who claimed ESA from non-work backgrounds, as the number reporting a deterioration in their condition increases with age, and the proportion reporting an improvement is highest among the under 25s (30 per cent). This is the opposite of people claiming from work, among whom a greater proportion reported an improvement rather than deterioration in their health. Among both groups, men were more likely to report improvement in their health and women deterioration.

Twenty per cent of people who were not working prior to claiming ESA said that their health was 'changeable over time', compared to only 14 per cent of people claiming ESA from employment. As was the case for people claiming ESA from work, among those from non-work backgrounds women were more likely than men to report a changeable condition.

Just under three-quarters (72 per cent) of people from non-work were receiving treatment for their health condition at the follow-up survey and just under one-third (31 per cent) were waiting for treatment to start. A higher proportion of women in the non-work group were receiving treatment (80 per cent) than men (68 per cent), and those aged under 25 were the least likely to be receiving treatment.

When looking to the future, nearly three-quarters of people who were not in employment prior to claiming ESA (73 per cent) expected their health condition to be stable or improve. A higher proportion of men (32 per cent) in this group than women (27 per cent) predicted an improvement in their health, and a higher proportion of women (45 per cent) than men (41 per cent) predicted no change in their condition. Only ten per cent of claimants from non-work expected their health to deteriorate in six months time. Health expectations did not differ notably between claimants from work and those from non-work.

Table 4.3 Recent health, treatment status and health expectations at follow-up survey: people not in work before claim, by age and gender

Column percentage

	Age group					Gender		
	16-24	25-34	35-49	50-54	55 and over	All men	All women	Total
Whether health improving								
Getting better	30	19	19	[18]	[14]	23	18	21
Getting worse	[12]	23	28	33	43	22	29	25
Staying the same	35	36	32	[30]	33	36	28	33
Changeable over time	21	21	21	[18]	[10]	18	23	20
Don't know	[2]	[1]	[0]	[0]	[0]	[0]	[1]	[1]
Refused	[0]	[0]	[0]	[0]	[1]	[0]	[0]	[0]
Total	100	100	100	100	100	100	100	100
Base	242	177	286	87	110	579	324	902[1]
Currently receiving treatment								
Yes	58	69	82	71	78	68	80	72
No	42	31	18	[29]	[22]	32	20	28
Total	100	100	100	100	100	100	100	100
Base	172	154	257	80	102	493	272	765
Currently awaiting treatment								
Yes	27	33	34	[30]	[27]	31	30	31
No	72	66	62	70	72	68	67	67
Don't know	[1]	[1]	[4]	[0]	[1]	[1]	[3]	[2]
Total	100	100	100	100	100	100	100	100
Base	173	154	252	80	102	489	270	761
Health expectations for six months' time								
Better than now	35	32	30	27	21	32	27	30
Worse than now	[2]	[9]	11	[13]	[20]	9	10	10
About the same as now	48	44	36	47	43	41	45	43
Don't know	14	[16]	23	[14]	[16]	18	18	18
Total	100	100	100	100	100	100	100	100
Base	243	177	287	88	110	579	325	905

Base: Respondents reporting a health condition.

[1] Base for whether health improving does not sum by age group due to missing data on age in one case.

4.3 Work experience and work history

As noted in Chapter 2, people who were not working prior to claiming were less qualified and more likely to have literacy problems compared to the ESA population as whole. Slightly over half (52 per cent) of the non-work group had spent most of their working lives in employment, whether as an employee or self-employed, which is markedly lower than people in the 'from work' group, 85 per cent of whom had been in work for the majority of their working lives (Table 2.12).

Table 4.4 Economic activity immediately before ESA claim by gender: people out of work before claiming

Column percentage

Economic activity immediately before claim	Men	Women	Total
Unemployed	60	40	53
Temporarily or permanently sick	25	27	25
Looking after home/family	[]	17	6
Caring for someone who is frail sick or disabled	2	3	3
In training or education	5	5	5
Others	7	8	8
Total	100	100	100
Base	*1,136*	*650*	*1,786*

Base: Respondents not in work before claiming ESA, baseline survey.

About half (53 per cent) of people who were not in work before claiming ESA had been unemployed though this differed by gender (60 per cent of men, 40 per cent of women); 17 per cent of women (but few men) also reported that they had been looking after the home or family (Table 4.4). One-quarter of claimants who were not in work before their ESA claim, reported that they were out of work due to temporary or permanent sickness, five per cent were in education or training, and around three per cent were informal carers.

An analysis of the most recent employment among people who were not in work immediately prior to their ESA claim shows that this group were more likely to have worked in lower skilled occupations and temporary, seasonal or casual contracts, and were less likely to have earned high salaries than people in employment directly prior to their claim (Table 4.5). They were also less likely to have been employed in the public sector (12 per cent compared with 18 per cent from work). In both groups, a higher proportion of men were employed in the private sector and a higher proportion of women in the public sector.

Almost half (45 per cent) of people in the non-work group had been employed in semi-skilled and unskilled occupations, compared to 35 per cent of those claiming directly from work. People from non-work backgrounds were less likely to have worked in managerial, professional or associate professional occupations most recently (12 per cent) compared with people claiming from work (19 per cent) and almost one-third (29 per cent) of the non-work group had been on some form of temporary employment contract in their most recent job. Eight out of ten (79 per cent) claimants in the non-work group had been earning less than £20,000, and over one-third (35 per cent) were earning less than £10,000.

Table 4.5 Characteristics of previous employment: people not in work before claim, by gender

Column percentage

	Men	Women	All
Sector of employment			
Private sector	90	79	86
Public sector	9	19	12
Charity/voluntary sector	[1]	[2]	[1]
Total	100	100	100
Base	*797*	*410*	*1,207*
Occupation			
Managerial, professional, and associate professional	12	12	12
Administrative, personal service and sales	12	50	25
Skilled trades	26	3	19
Semi-skilled and unskilled	50	35	45
Total	100	100	100
Base	*823*	*412*	*1,234*
Type of contract			
Permanent	70	71	70
Temporary, seasonal or casual	16	19	17
Fixed term	9	4	8
Other non-permanent	3	4	4
Total	100	100	100
Base	*713*	*379*	*1,092*
Annual earnings			
Less than £10,000	24	61	35
£10,000 to £19,999	50	32	44
£20,000 to £29,999	18	5	14
More than £30,000	8	3	6
Total	100	100	100
Base	*576*	*265*	*842*

Base: People not in work immediately before claiming ESA.

'Don't know' not shown – totals may not some to 100 per cent in some instances.

Table 4.6 considers the main reasons why last jobs ended for people not in employment prior to their ESA claim. Ill-health was the most commonly stated reason, mentioned by 37 per cent of men and 39 per cent of women in the non-work group. This is a lower proportion than reported by people in work prior to their claim. The proportions mentioning ill-health did, however, vary by type of condition, sector and occupation. A slightly higher proportion of people whose main condition affected their mental health (46 per cent), than people whose main condition affected their physical health (41 per cent) said their employment had come to an end due to their health, as did a higher proportion of workers in the public sector (48 per cent) than in the private sector (36 per cent). Ill-health was also most commonly mentioned by people working in administrative, personal service and sales occupations (51 per cent) as their reason for leaving employment.

The number of people moving onto ESA from non-work backgrounds who mentioned redundancy as the reason their employment ended varied by gender, health condition and occupation. Over one-third of men (35 per cent) in the non-work group mentioned redundancy, and this was higher than reported by men in work prior to their claim (28 per cent). In contrast, only 18 per cent of women in the non-work group gave redundancy as the reason why their employment ended, which was the same as women who had worked immediately prior to claiming ESA. Within the non-work group, people with a physical health condition were slightly more likely to mention redundancy than those with a mental health condition (29 per cent compared to 24 per cent). Over half (52 per cent) of people in the non-work group who had previously worked in managerial, professional and associate professional occupations reported that their last job had ended because of redundancy.

Table 4.6 Reason last job ended: people not in work before claim, by selected characteristics

Row percentage

	Reason last job ended				
	Ill-health	**Redundancy**	**Job was temporary**	**Other**	***Base***
Gender					
Male	37	35	[8]	29	*361*
Female	39	18	[7]	43	*207*
Main health condition					
Physical health condition	41	29	[6]	30	*300*
Mental health condition	46	24	[5]	39	*186*
Sector					
Private sector	36	31	8	32	*467*
Public sector	48	[13]	[3]	42	*73*
Charity/voluntary sector	[38]	[31]	[10]	[21]	*9*
Occupation					
Managerial, professional, and associate professional	[28]	52	[4]	[27]	*67*
Administrative, personal service and sales	51	[12]	[15]	29	*164*
Skilled trades	[27]	32	[8]	41	*92*
Semi-skilled and unskilled	36	33	[3]	35	*236*
All from non-work	**38**	**29**	**8**	**34**	*568*
All people (ESA sample)	**45**	**27**	**8**	**27**	*1,026*

Base: People not in work at baseline survey and who responded to follow-up survey. 'Reason last job ended' was asked at the follow-up survey.

Multiple response question, does not sum to 100.

5 A typology of groups flowing onto Employment and Support Allowance

Key points

- A typology of Employment and Support Allowance (ESA) groups was designed using information on claimants' route onto ESA, longer-term employment history and duration of health condition.
- The profile of the groups differs significantly in terms of age, main health conditions and qualifications.
- Almost one-fifth (19 per cent) of people flowing onto ESA were out of work before their claim and had a fragmented longer-term employment history. This group tended to be poorly qualified and more likely to report mental health conditions. Many of the claimants in this group were likely to face significant barriers to work.
- A significant proportion of ESA claimants (17 per cent) were unemployed immediately prior to their claim, but had a consistent longer-term employment history
- The groups had very different rates of entry to employment following their ESA claim. Non-manual workers who flowed onto ESA from work had the highest subsequent employment entry rates. People who flowed onto ESA from non-work and who had a fragmented longer-term work history were least likely to have gone into employment.

5.1 Introduction

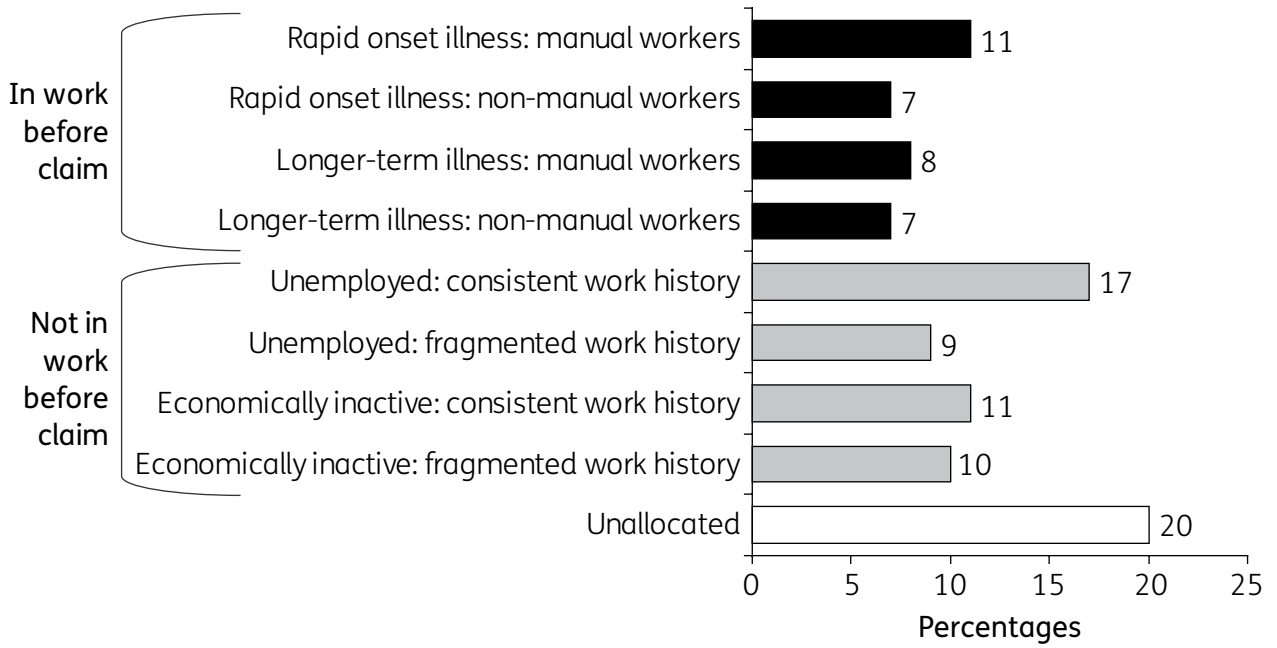
This chapter describes a typology of ESA claimants based on employment history and health that consists of eight distinct groups. The primary distinction used to classify people in the typology was employment origin – whether or not people were in work immediately before their claim to ESA. Within the two broad categories of people with work and non-work origins, distinct groups were identified based on:

- type of occupation;
- longer-term employment history[14];
- duration of illness (whether their illness began more or less than two years before the baseline survey).

The typology is used to present more detailed information about large groups of claimants with similar experiences. Taken together the groups comprise 80 per cent of respondents – the remaining 20 per cent of respondents were unallocated using the classification variables (Figure 5.1).

[14] For respondents with work origins, only people with a consistent work history are included in the typology as there were few respondents who had interrupted careers.

Figure 5.1 Typology of ESA claimants



Base: All respondents.

The characteristics of each group are discussed in more detail in the remainder of this chapter.

5.2 Groups in work before claiming

Among people with work origins, four groups were distinguished each comprising at least seven per cent of the total population of ESA claimants.[15] Table 5.1 shows selected characteristics for each group, and the estimated numbers of people flowing onto ESA annually within each group.

[15] For people from work origins the information includes those who still have a health condition at the baseline survey only, as only those with an illness were asked the subset of questions about type of condition and period of onset.

- **Rapid onset illness: manual workers** constitute 11 per cent of the survey suggesting an annual ESA inflow of around 65,600.[16] The majority of this group have musculoskeletal conditions (57 per cent), and there are large numbers who have either no qualifications (35 per cent) or who have qualifications linked to work only (30 per cent). A significant proportion (38 per cent) of this group is over 50. By the follow-up survey, 28 per cent of this group were back in employment, of whom 17 per cent had returned to the same job.[17] More than one-third (35 per cent) had worked at some point since their claim. The figures suggest that where a return to their previous work is not possible, individuals in this group may require help in a number of different areas, including their health and potentially their skills and qualifications, in order to return to work.
- **Rapid onset illness: non-manual workers** account for seven per cent of the survey sample, equivalent to an annual ESA inflow of around 43,200. This group have a more even spread of different conditions, though the largest proportion reported mental health conditions and they are more likely to be aged between 35 and 49. This group tends to have higher levels of qualification than ESA claimants as whole: a quarter have qualifications at A level or above and a further third at General Certificate of Secondary Education (GCSE) A-C. People in this group were more likely to be back in employment at the follow-up survey than the survey population as a whole (30 per cent were back in work).
- **Longer-term illness: manual workers** account for eight per cent of respondents to the survey, implying an annual ESA inflow of around 50,300. People in this group are generally much older, with 35 per cent aged 55 or over. Almost half (49 per cent) have a musculoskeletal condition. There are large numbers within this group who have either no qualifications (32 per cent) or who have qualifications linked to work only (35 per cent). As with rapid onset illness manual workers, the figures suggest that where a return to their previous work is not possible, individuals in this group may require help in a number of different areas, including health as well as potentially their skills and qualifications in order to return to work. Overall, this group was about as likely as the survey population as a whole to be back in work at the follow-up survey.
- **Longer-term illness: non-manual workers** account for seven per cent of survey respondents which would imply an annual ESA inflow of around 39,000. Thirty-eight per cent of this group is aged over 50, and more than a third have a musculoskeletal condition. This group tends to have achieved higher qualification levels than the ESA survey population as whole: around half (49 per cent) have either A-levels or above, or GCSEs at A-C. They were more likely to be back in employment at the follow-up survey than the survey population as a whole (30 per cent were back in work). Only around a third of those in work at the follow-up survey had returned to the same job.

16 On-flow figures based on Department for Work and Pensions (DWP) official estimates, see Doran (2011).

17 Figures given on employment at the baseline and follow-up surveys relate to people who had a job and were working at the time. This narrower definition of employment, excludes people who reported having a job but who were off work sick. It is felt to be a more precise indicator of work resumption because some people may have had a job that remained open to them while claiming ESA, even if they did not attend work. Significant numbers of self-employed people who were not working had might also have occupations they might return to in the future.

Table 5.1 Estimated ESA on-flow: people in work before claim with consistent employment histories[18]

Column percentage and frequencies (on-flows)

	Rapid onset illness: manual workers		Rapid onset illness: non-manual workers		Longer-term illness: manual workers		Longer-term illness: non-manual workers	
	%	On-flow[1]	%	On-flow	%	On-flow	%	On-flow
Total, all groups	100	65,600	100	43,200	100	50,300	100	39,900
Age at baseline								
16-24	8	5,500	[8]	3,400	[3]	1,600	[5]	1,900
25-34	15	9,700	12	5,300	14	7,200	19	7,200
35-49	39	25,600	45	19,400	36	18,100	39	15,500
50-54	12	7,900	16	6,900	12	5,800	[13]	5,000
55 and over	26	16,900	19	8,200	35	17,600	25	9,900
Main health condition at baseline								
Mental health condition	20	13,200	37	16,000	20	9,900	25	9,900
Conditions relating to bones, muscle problems or physical injury	57	38,000	31	13,500	49	24,700	36	14,600
Long-term conditions that affect major organs or the whole body	19	12,800	25	10,600	23	11,600	23	9,200
Other condition or disability	[3]	2,100	[7]	3,100	[8]	4,300	15	5,800
Qualifications at baseline								
A levels or above	7	4,400	25	10,700	[8]	3,900	31	12,300
GCSE A-C	16	10,500	33	14,400	18	9,100	18	6,900
Other academic	13	8,900	13	5,300	[7]	3,700	21	8,200
Work qualifications only	30	19,600	14	5,900	35	17,600	16	6,400
No qualifications	35	22,900	16	6,900	32	16,000	15	5,900
Employment status at baseline survey								
In work	23		16		23		23	
Not in work	77		84		77		77	

Continued

[18] Excludes those from work who did not report a health condition at the baseline survey (19 per cent of cases).

Table 5.1 Continued

Column percentage and frequencies (on-flows)

	Rapid onset illness: manual workers		Rapid onset illness: non-manual workers		Longer-term illness: manual workers		Longer-term illness: non-manual workers	
	%	On-flow[1]	%	On-flow	%	On-flow	%	On-flow
Employment status at follow-up survey								
In work[2]	28		30		24		30	
Returned to the same job[3]	*17*		*[20]*		*[12]*		*[10]*	
Not in work	72		70		76		70	
Worked between baseline and follow-up	*[4]*		*[2]*		*[2]*		*[3]*	
Had worked at all since claim[4]	35		32		29		35	

1 On-flows grossed up using official statistics from June 2009 to May 2010 (Doran, 2011). The annual on-flow over this period was 649,200.

2 Excludes those who reported being off work sick.

3 Includes people who reported that they had returned to the job they occupied before claiming ESA at baseline or follow-up.

4 Includes people who were at work (not off sick) at baseline or follow-up surveys, or who had worked in the intervening period.

5.3 Groups not in work before claiming

Table 5.2 provides information about some of the noteworthy groups of ESA claimants who were not in employment prior to claiming.

- **Unemployed: consistent work history** account for 17 per cent of the survey sample which would imply an annual ESA inflow of around 107,100. It is the largest group in the typology. A significant proportion of this group of claimants did not report having a health condition at the baseline survey (27 per cent). Among those reporting a health condition the numbers were relatively evenly split between mental health and musculoskeletal conditions (35 and 37 per cent respectively). This group have qualifications which are somewhat higher than for the overall survey population; around one-third (34 per cent) have qualifications at GCSE A-C or above. Overall, this group was about as likely to be in work at the follow-up survey as the broader survey sample[19], and 31 per cent had done some work since their claim.

19 This analysis is based on those who were in work and attending work. It excludes people off sick from work.

- Unemployed: fragmented work history account for nine per cent of the survey sample which would imply an annual ESA inflow of around 61,200. This group tends to be young, with 43 per cent under 25, and have a very high incidence of mental health conditions (45 per cent). More than half of this group have no qualifications. The figures suggest that individuals in this group may require significant help with several areas, including their health and potentially their skills and qualifications, in order to return to work. Fifteen per cent of this group had worked at some point since their claim.
- Economically inactive: consistent work history: account for 11 per cent of the survey sample, which suggests an annual ESA inflow of around 75,600. This is likely to be a relatively diverse group as people are inactive for a range of different reasons. The group has a relatively even age spread and people within it are slightly more likely to have a 'long-term or systemic condition' than the broader survey population. Overall, they are slightly better qualified than the broader survey population at the top end (A-Levels or above). This group were just over half as likely as the broader ESA population to be in work by the time of the follow-up survey.
- Economically inactive: fragmented work history account for ten per cent of the survey sample which would imply an annual ESA inflow of around 64,900. This group tends to be relatively younger and includes high proportions with mental health conditions (45 per cent). This group tends to have low qualification levels relative to the ESA survey population as a whole, with 60 per cent having no qualifications. People in this group are likely to be a considerable distance from the labour market and are likely to require very significant support with health and employability. This group were much less likely to be in work at the baseline and follow-up surveys (only five per cent reported being in employment at the follow-up survey).

Table 5.2 Estimated ESA on-flows: people not in work before claim, by position prior to claim and longer-term employment experiences[20]

Column percentage and frequencies (on-flows)

	Unemployed: consistent work history		Unemployed: fragmented work history		Economically inactive: consistent work history		Economically inactive: fragmented work history	
	%	On-flow[1]	%	On-flow	%	On-flow	%	On-flow
Total, all groups	100	107,100	100	61,200	100	75,600	100	64,900
Age at baseline								
16-24	19	20,100	43	26,100	12	8,700	26	19,900
25-34	22	23,500	20	12,500	17	13,000	17	11,400
35-49	33	35,200	30	18,300	39	29,600	39	25,400
50-54	13	14,100	[6]	3,400	10	7,800	9	5,900
55 and over	13	14,200	[1]	900	22	16,600	8	5,500
Main health condition at baseline								
Mental health condition	35	27,900	45	20,800	32	21,100	45	27,200
Conditions relating to bones, muscle problems or physical injury	37	29,300	27	12,600	35	23,500	29	17,100
Long-term conditions that affect major organs or the whole body	15	11,700	[8]	3,700	18	12,100	[6]	3,900
Other condition or disability	11	9,100	19	8,700	14	9,200	19	11,200
Qualifications at baseline								
A-levels or above	16	17,300	[9]	5,200	20	15,500	12	7,600
GCSE A-C	18	19,600	14	8,500	17	13,300	[7]	4,400
Other academic	16	17,300	20	12,100	14	10,700	17	10,700
Work qualifications only	19	20,500	[6]	3,700	18	13,600	[5]	3,000
No qualifications	30	32,500	52	31,700	31	23,300	60	39,000
Employment status at baseline survey								
In work[1]	11		[3]		8		[*]	
Not in work	89		97		92		100	
Employment status at follow-up survey								
In work[2]	26		[11]		[13]		[5]	
Not in work	74		89		87		95	
Worked between baseline and follow-up	*[5]*		*[4]*		*[1]*		*[1]*	
Had worked at all since claim[3]	31		[15]		[14]		[5]	

1 On-flows grossed up using official statistics from June 2009-May 2010 (Doran, 2011). The annual on-flow over this period was 649,200.

2 Excludes those who reported being off work sick.

3 Includes people who were at work (not off sick) at baseline or follow-up surveys, or who had worked in the intervening period.

20 Includes survey participants who did not report a health condition at baseline survey.

6 Routes off Employment and Support Allowance

Key points

- Just over a quarter (26 per cent) of people who were in employment before claiming who were allowed Employment and Support Allowance (ESA) (that is, were in the Work-Related Activity Group (WRAG) or Support Group) were back in employment at the time of the follow-up survey compared to just nine per cent of people from non-work backgrounds who allowed ESA.
- Rates of return to work were higher for people in the Fit for Work (FFW) or claim closed/ withdrawn groups, but a strong difference remained between those who had been in employment before claiming and those who had not; around half of people from work (48 per cent), and one-fifth (21 per cent) of people not from work had returned to work.
- For men, the likelihood of a return to work was strongly associated with health improvements (recovery by the time of the baseline survey, improving health between the baseline and follow-up surveys). It was also influenced by recent work experience, longer-term employment history and having qualifications.
- For women, early recovery, health and recent labour market experience again emerged as important factors for a return to work, but with some key differences. Age and deteriorating health had an independent effect in reducing the likelihood of being in work for women. Having qualifications was not a significant predictor of a return to work for women.
- Among claimants who had been in work immediately before claiming ESA, early recovery and changes in health emerged as the most important predictors of a return to work. Believing that work improves health and having some qualifications were also significant.

6.1 Introduction

This chapter compares trajectories onto, and off, ESA, for people claiming ESA from a work or non-work background and looks in detail at the factors influencing a return to work (Table 6.1).

6.2 Employment outcomes

Overall, people who were not working immediately prior to claiming ESA were much less likely than people who had been in employment to have returned to work. By the time of the baseline survey, only six per cent of those coming from non-work backgrounds prior to their claim reported being in work and working, compared to 30 per cent of people who had been in employment before claiming ESA. If people who reported that they had a job but were off sick at the time of the baseline survey are included, these figures rise to 12 per cent and 50 per cent.[21] By the follow-up survey, 15 per cent of claimants from non-work backgrounds were in employment and working compared with 35 per cent of claimants who were in work prior to their ESA claim. If those off sick are included, these figures rise to 18 per cent and 44 per cent respectively. Overall exactly a quarter (25 per cent) of the whole ESA sample were in work and working at the follow-up survey.

[21] The narrower measure of having a job and being in work is given first as this is felt to measure trajectories more accurately.

Table 6.1 Employment outcomes, by route onto ESA

Column percentage

	Employment situation before claim		
Employment outcome	**In work before claim**	**Not in work before claim**	**Total**
At baseline survey			
In work and working	30	6	18
In work including off sick	50	12	32
Base	*1,852*	*1,786*	*3,639*
At follow-up survey			
In work and working	35	15	25
In work including off sick	44	18	31
Base	*934*	*904*	*1,838*

6.3 Claim trajectories

Figures 6.1 and 6.2 summarise the claim trajectories for claimants coming from work and non-work backgrounds respectively, showing their employment situation immediately before claiming, their ESA claim status at the baseline survey, and their employment situation at the follow-up survey. The statistics in bold font within boxes show what proportion of claimants were in a particular category at each point in time (before the claim, at the baseline survey and at the follow-up survey). The arrows show the employment status of claimants at the follow-up survey according to their claim status. Appendix G provides a summary of the trajectories described and a more detailed breakdown of flows onto, and off ESA.

Figure 6.1 shows the trajectories of claimants from work backgrounds. Twenty-two per cent of people who made a claim to ESA from work were awarded the benefit and allocated to either the Support Group or the Work-Related Activity Group (WRAG), while 69 per cent of claimants either closed their claim or were found Fit for Work (FFW).[22] Just over one-quarter (26 per cent) of people who were allowed ESA were back in work by the follow-up survey: the other three-quarters (74 per cent) remained out of work (including remaining on ESA). Almost half of people who either withdrew or closed their claim or were found FFW were back in employment by the follow-up survey (48 per cent).

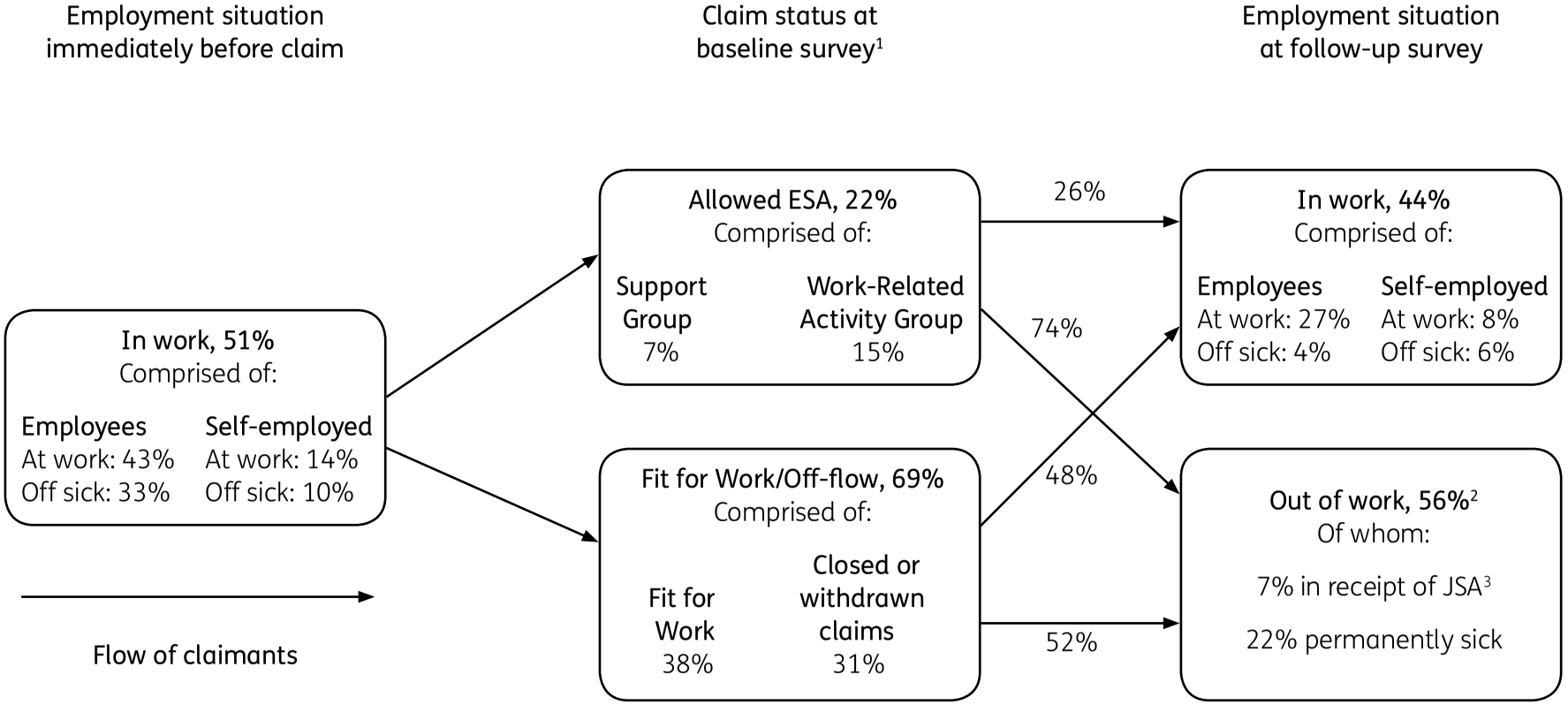
Overall, 40 per cent of people who were in work prior to their ESA claim had worked at some point since their claim (not shown in Figure 6.1).[23] Looking in more detail at the type of work being done by all those who had returned to work, just over half (51 per cent) had returned to the same job.[24]

22 Among those with origins in work immediately before claiming ESA, nine per cent of claims were still 'in progress' at baseline survey.

23 Includes people who were in work and working at the baseline or the follow-up survey as well as those who had done some work in-between.

24 Includes people who had returned to the same job either at the baseline or follow-up survey or in-between, whether or not they were still in that post.

Figure 6.1 Employment trajectory of claimants with work origins[25]



Notes:
[1] Claim status at baseline excludes cases that were still in progress (nine per cent of all claimants who were in work before claiming ESA).
[2] Out of work at follow-up survey includes people who were receiving ESA.
[3] Percentage receiving JSA is based on cases with linked administrative data only.

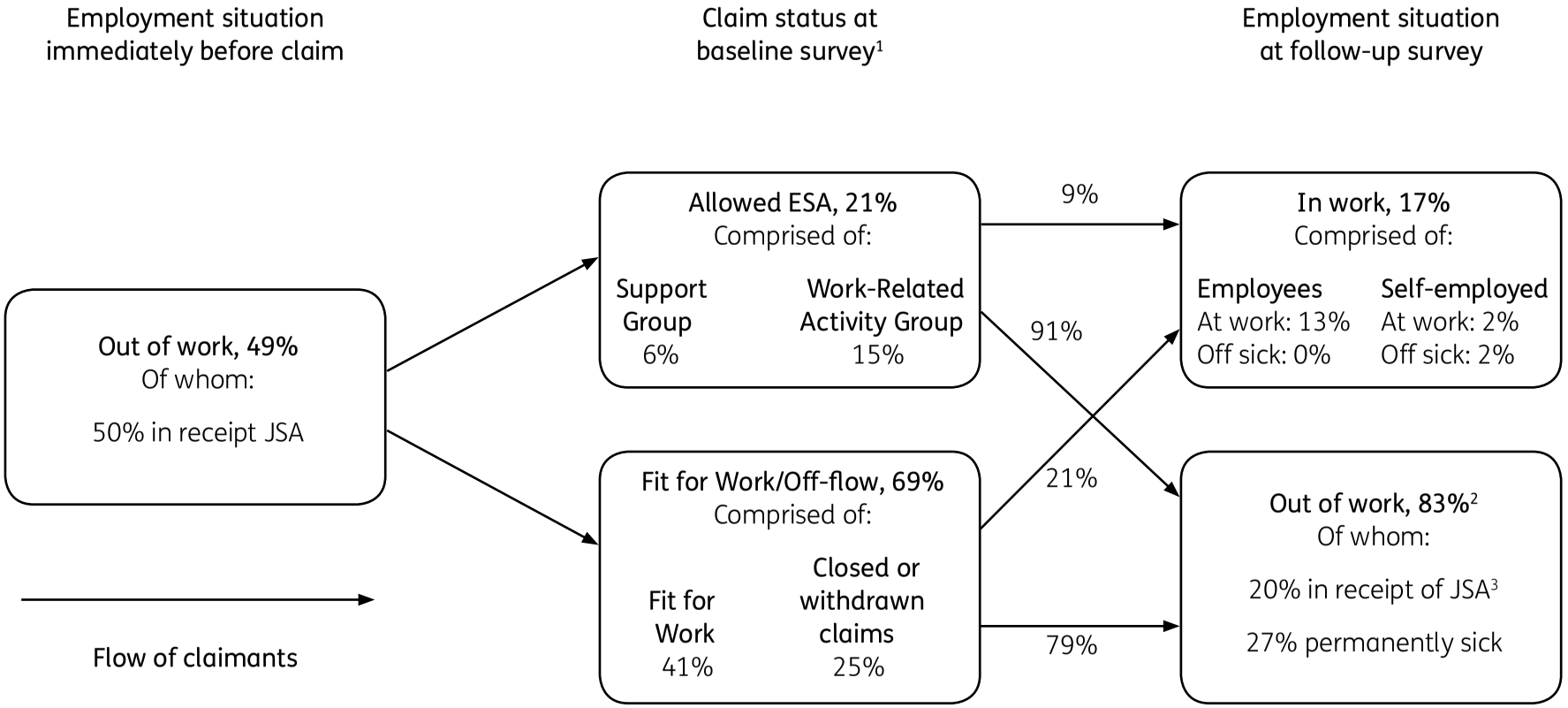
25 Percentages in bold give proportions of all claimants with work origins with a particular status at the given point in time.

Figure 6.2 illustrates that people who were not in employment prior to claiming ESA tended to have very different employment trajectories from those who were previously in work. People within this group were awarded ESA in almost identical proportions to people who claimed from work (with 21 per cent receiving ESA). However, in terms of the rate of return to work, their trajectories diverge markedly. Nine per cent of claimants accepted onto ESA who were not in work before their claim were in employment by the follow-up survey. This is almost three times less than people who claimed ESA from work. For people who were not accepted onto the benefit (those who closed or withdrew their claims or who were found FFW), the likelihood of being in work by the follow-up survey was also much lower, with around one-fifth (21 per cent) being in employment. Overall, only 18 per cent of people who were not in work prior to their claim had worked at some point since their claim[26].

The flows depicted highlight the central role which routes onto the benefit play in influencing the rate at which claimants move into work; crucially this is true whether or not they have been awarded ESA following assessment.

[26] Counts those who were in work and working at the baseline or the follow-up survey as well as those who had done some work in-between.

Figure 6.2 Employment trajectory of claimants with non-work origins[27]



Notes:
[1] Claim status at baseline excludes cases that were still in progress (13 per cent of all claimants who were in work before claiming ESA)
[2] Out of work at follow-up survey includes people who were receiving ESA.
[3] Percentage receiving JSA is based on cases with linked administrative data only.

[27] Percentages in bold give proportions of all claimants with non-work origins with a particular status at the given point in time.

6.4 Factors influencing entry to work

This section explores the factors influencing work entry by the follow-up survey using logistic regression. Logistic regression allows us to show the individual effect of a range of explanatory variables on an outcome variable. The results from a number of regression models are summarised here (with the full output in Appendix H). These models explored the factors influencing the likelihood of being in employment for both men and women who had claimed ESA, and for the group of claimants who had been in employment immediately prior to their claim.

The regression models include a range of explanatory variables which relate to individuals' health, demographics, qualifications and employment experiences. They also include a variable reporting which claim group respondents were in at the baseline survey, in order to adjust for the influence which this has on return to work rates. As would be expected, the models show that claim group has a strong influence on entering work with those in the claim closed or withdrawn group, or those found FFW, being significantly more likely to move into employment.[28] The remainder of this section will concentrate on the impact which the other explanatory variables, relating to personal characteristics, have on the likelihood of moving into work.

6.4.1 Factors associated with entry to work for men claiming ESA

Box 6.1 shows the factors related to male ESA claimants having moved to work by the time of the follow-up survey. The outcome variable is whether, at the time of the follow-up survey, claimants have been in work at any time since their claim[29]; with not having worked being the reference category.

A range of explanatory variables were used to assess their impact on the likelihood of claimants having worked between their claim and the follow-up survey. The factors which were assessed as important were health status, employment position prior to claim and highest qualification level.

Health was found to be a very important predictor of a work entry. Recovering shortly after claiming (not having a health condition at the time of the baseline survey) was highly significant in increasing the likelihood of being in employment. There is little in the descriptive data which suggests the characteristics that drive early recovery. The rate of recovery is somewhat lower among people in the NS-SEC group who had 'never worked and were long-term unemployed' and, as might be expected is somewhat higher among those aged 16-24.

Changes in health between the baseline and follow-up surveys were also important predictors of a return to work. Men who reported that their health was improving were more likely to have entered employment. There were also differences between types of health conditions. Men with musculoskeletal or long-term/systemic conditions were more likely to have entered employment than men with mental health conditions.

Factors measuring employability – both employment history and qualification level – were also significant. Men who were economically inactive immediately prior to their ESA claim were significantly less likely to have been in work since their claim compared to those who were in work before their claim. Having some qualifications also increased the likelihood of being in work, as did having a consistent longer-term work history.

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28 Although there was no observed independent difference in employment outcomes between the Support Group and the WRAG.

29 This includes people who were in work and working at the baseline survey, the follow-up survey or who worked in-between.

Overall, the logistic regression model underlines the central importance of health and recovery in influencing a return to work. It also shows the importance of recent and past labour market experience and qualifications.

Box 6.1: Factors associated with increasing the likelihood of male ESA claimants being in work by the follow-up survey

After taking into account claim group and the presence of health conditions the factors most strongly associated with a return to work were:

- Being in employment immediately prior to their claim.
- Health 'getting better' between baseline and follow-up surveys.
- Having some work or academic qualifications.
- Having a musculoskeletal or long-term/systemic condition.
- Having a consistent longer-term work history.

The reference category is those who have not worked since their claim. All factors are significant at 95 per cent level.

6.4.2 Factors associated with entry to work for women claiming ESA

Box 6.2 shows the predictors of employment status for women by the follow-up survey. Again, health status and changes in health, and economic position prior to claim were the factors that strongly influenced work entry. The outcome variable is again whether, at the time of follow-up survey, claimants have been in work at any time since their claim; with not having worked being the reference category.

Early recovery (that is those not reporting a health condition at the baseline survey) was again a very strong predictor of going into work. Change in health was also important, although for women the most significant predictor here was deterioration in health, which was associated with a reduced likelihood of entering employment. In contrast to men, the type of health condition reported was not a significant predictor of a return to work for women.

Economic position immediately prior to claim was also important. Women who were unemployed or economically inactive immediately prior to their ESA claim were significantly less likely to have been in work by the follow-up survey compared to those who were in work before their claim. Age was also significant for women, with those aged 35-54 more likely to be in employment (relative to the reference category of women aged over 55). Qualifications did not appear to have an independent effect, nor did having a partner in work.

Box 6.2: Factors associated with increasing the likelihood of female ESA claimants being in work by the follow-up survey

After taking into account claim group and the presence of health conditions, the factors most strongly associated with return to work were:

- Health was not 'getting worse' between baseline and follow-up surveys.
- Being in employment immediately prior to their claim.
- Being aged 35-54.

The reference category is those who have not worked since their claim. All factors are significant at 95 per cent level.

6.4.3 Factors associated with return to work for the 'from work' group of ESA claimants

Box 6.3 shows the factors associated with having worked by the follow-up survey for people who had been in work before claiming ESA.[30] A range of explanatory variables were entered to assess their impact on the likelihood of being back in employment since their claim and again, the most significant role was played by health factors.

Early recovery (not having a health condition at the time of the baseline survey) was a very strong predictor of a return to work. Health trajectory was also significant (a reported deterioration in health reduced the likelihood of being back in work) but the type of health condition was not significant.

Attitudes towards health and work were also found to be important. People agreeing that being in work helped their health were more likely to have returned to work. Having some qualifications was also again found to have an independent effect in raising the likelihood of being in work.

Other possible factors, which were tested but found not to have an independent statistically significant impact on the return to work for this group included occupation, sector of employment, work orientation questions (other than health), age and gender.

Box 6.3: Factors associated with increasing the likelihood of the 'from work' group being in work by the follow-up survey

- Not reporting a health condition at the baseline survey.
- Agreeing that 'being in work helps my health'.
- Having some qualifications.

The reference category is those who have not worked since their claim. All factors are significant at 95 per cent level.

30 Including those off sick from work.

7 Conclusions

7.1 Overview of findings

7.1.1 The population of Employment and Support Allowance claimants

Compared to the working-age population as a whole, Employment and Support Allowance (ESA) claimants are more likely to be male and less likely to have any qualifications. The health conditions reported by claimants were influenced by gender, age and socio-economic group. The prevalence of mental health conditions was higher among women, younger people and people who were long-term unemployed or had never worked. Musculoskeletal conditions were more common among men and older people. Around one in five conditions (19 per cent) were seen as work related, rising to around a third (32 per cent) of musculoskeletal conditions.

Around half (51 per cent) of those claiming ESA were in employment immediately prior to their claim; 29 per cent claimed directly from work and 22 per cent had a period off sick from work first.

7.1.2 People claiming from employment

People who were in employment immediately prior to their claim for ESA tended to be older. The vast majority had been in employment for most of their working lives and most of this group had been in stable permanent employment, although around one-fifth (19 per cent) had most recently been in temporary work. A large proportion of people claiming ESA from work had come from manual occupations. Over one-third (35 per cent) had been employed in unskilled or semi-skilled occupations prior to their claim and exactly a quarter were from skilled trades.

Employees working in the public sector were most likely to have discussed their health condition with a line manager or Human Resources (HR) department, and they were also more likely to have received support through Occupational Health (OH) services.

Over two in five (44 per cent) ESA claimants who were in employment immediately prior to their claim had returned to work by the time of the follow-up survey.

7.1.3 People not in employment prior to claiming

People who had not been in employment immediately prior to claiming ESA tended to be younger. They were less likely to have any qualifications and more likely to have employability issues. Exactly one-quarter had literacy problems and 28 per cent were in a disadvantaged group at risk of social exclusion such as care leavers and those with criminal convictions. Mental health conditions were more prevalent among people who had not been in work before claiming and a higher proportion of this group reported deterioration, rather than improvement in their health between the baseline and follow-up surveys.

People who were not in work prior to claiming ESA were more likely to have been in lower skilled occupations and on temporary, seasonal or casual contracts in their most recent employment. Only 17 per cent of claimants from non-work origins were in employment at the follow-up survey, considerably less than half the rate of people who claimed ESA from a work background. People who were not in employment prior to claiming and had a fragmented long-term work history were least likely to have gone into employment, and people in this group were also much more likely to have no qualifications and to report mental health conditions.

7.1.4 Influences on entering work after ESA claims

Our logistic regression analysis highlights the importance of both health and human capital characteristics in explaining the likelihood of moving into work. Health recovery and health trajectory were shown to be strong predictors of moving into work. Employment experiences immediately prior to a claim (and for men, longer-term work history) were also found to be important predictors. Having qualifications (rather than no qualifications) was also an important determinant for men, as well as for predicting a return to work among people who were in employment prior to claiming. This shows that while health is the central factor influencing a return to work, other factors which measure employability and distance from the labour market are also important in explaining the future employment trajectories of ESA claimants.

7.2 Policy implications of findings

7.2.1 Factors influencing work entry

Work entry rates were highest among claimants in the claim closed or withdrawn group, suggesting that recovery from short-term health conditions is often a trigger for moving into employment among this group.

Among the wider survey population, improvements (or stability) in health are central to a return to work, so measures to facilitate access to treatment and prevent deterioration in health are likely to improve return to work rates.

Work histories, both immediately prior to the claim for ESA, and over the longer-term have been shown to be important influences on returning to work. This suggests that there are employability issues for many claimants with which they will require support to facilitate a move into work.

Qualifications were also found to be a strong predictor of returning to work. Assisting people without qualifications to obtain them may also be of value, although the return on later qualifications is not identical to those obtained earlier in life (Blanden *et al*., 2005).

Taken together, the human capital factors of employment experiences and qualifications are likely to influence an individual's belief about how likely it is that they will move into employment and over what time-period. Among claimants coming from employment, attitudes to work emerged as important influences on work resumption. As such, encouraging people in the belief that work helps their health may also play a role in promoting return to work.

People in older age groups are likely to require additional assistance to return to work, as there is clear evidence of disadvantage by age, especially if people continue to have a health problem over time.

7.2.2 Support for people with employability and health needs

It may be possible to improve employment outcomes by delivering targeted help to people who are in most need of it. The typology of claimants provides potential pointers for doing so, as it identifies discrete subgroups of ESA claimants who may require contrasting approaches and interventions. For example, people coming from manual occupations and with long-term conditions may benefit from career change support, while those with limited employment histories and low qualifications may need more intensive support around employability.

For people who are inactive or unemployed, the salience of previous work history is notable. Claimants with a fragmented work history were more likely to face significant barriers to work, compared to claimants with a consistent work history. Avoiding long-term unemployment and inactivity, especially among younger age groups, should, therefore, be a policy priority. Given the high rates of mental health conditions in some claimant groups, and the continuing prejudices attached to these health conditions, specific measures aimed at people with mental health conditions may also be of value.

Appendix A
The Employment and Support Allowance claim process (simplified)

Customer makes a claim for ESA

Most claims to the Employment and Support Allowance (ESA) are made by phone. The adviser will give basic information about Pathways to Work. The adviser will explain that the customer may be required to attend Work Focused Interviews (WFIs).

Benefit payments start

For the first 13 weeks of a claim, customers receive benefit at the assessment rate, which is the same as the Jobseeker's Allowance (JSA) rate.

First Work Focused Interview

At the time of this research, customers were required to attend an interview with a Jobcentre Plus Personal Adviser at around week eight of their ESA claim.

Work Capability Assessment and ESA50 form

The customer is sent an ESA50 form to complete and return. This is a questionnaire which asks about the impact of their health condition or disability on their day-to-day activities.

The customer or their treating physician can also provide further medical evidence they feel is relevant.

Customers with the most severe functional limitations are placed in the Support Group on the basis of the ESA50 form and/or other medical evidence they supply.

Most customers will attend a face-to-face Work Capability Assessment (WCA) with a healthcare professional (this is usually a doctor or nurse). This happens at about week 9 of the claim.

This process helps determine entitlement to ESA and, for those entitled, whether the customer is placed in the Work-Related Activity Group (WRAG) or Support Group.

Benefit decision

Jobcentre Plus use the information from the WCA to make a decision about the customer's entitlement to ESA. This should happen at about week 13 of the ESA claim.

Customers who are entitled to ESA are placed in the Support Group or WRAG.

Customers who disagree with the decision they are Fit for Work (FFW), or in the WRAG rather than the Support Group, can appeal against this decision. ESA continues to be paid at the assessment rate, while an appeal outcome is awaited.

Customers who are found FFW and not entitled to ESA can claim JSA. There is some flexibility in JSA to get earlier support and/or to tailor the requirements for disabled people. For those entitled to ESA, a higher rate of payment starts at week 14 of the claim.

Support Group

Customers with the most severe health conditions or disabilities are placed in the Support Group. They receive higher rates of benefit. There is no requirement for them to attend WFIs, but all customers can volunteer for back-to-work support.

Work-Related Activity Group

Those who can prepare for a return to work are required to attend three further WFIs, where steps the customer can take to prepare to move towards such (such as training) are discussed.

Further WFIs may take place with Jobcentre Plus or with a Pathways to Work Provider, who conduct WFIs on behalf of Jobcentre Plus in some areas.

Appendix B
Comparisons of the Employment and Support Allowance population with the general population

Table B.1 ESA claimants, compared with the general population of working age at time of baseline survey: selected characteristics

	Percentage with characteristic (column %)	
	ESA claimants	**General population of working age[1]**
Gender		
Male	63	52
Age (years)		
Median	41	39
Household type		
Lives alone	21	11
Tenure		
Owner occupied	35	67
Rented	50	33
Qualifications		
No qualifications	35	10
NS-SEC		
Semi routine and routine	40	21

[1] Source: Labour Force Survey, January to March 2010.

Appendix C
Limiting health problems at baseline and follow-up surveys

Table C.1 Limiting health problems at baseline and follow-up surveys, by age

	Percentage of each age group with a health condition (column %)						
	16-24	**25-34**	**35-49**	**50-54**	**55+**	**Total**	**Base**
Had a health problem which limits daily activities or work at baseline survey	67	81	84	85	85	81	3,635
Had a health problem which limits daily activities or work at follow-up survey	57	82	83	80	81	78	1,840
Had a health problem which limits daily activities or work at follow-up survey, people in receipt of ESA (WRAG or Support Group)	91	94	92	93	93	92	552

Base: All respondents. Includes participants who reported fluctuating conditions that were not active on the day of the survey.

Appendix D
Health conditions

Mental health conditions

A. Stress or anxiety

B. Depression

C. Fatigue or problems with concentration or memory

D. Other mental health conditions

Conditions related to bones muscle, problems or physical injury

E. Problems with your arms or hands

F. Problems with your legs or feet

G. Problems with your neck, shoulders or back

H. Pain or discomfort

I. Any other condition related to bone or muscle problems or physical injury

Long-term conditions that affect major organs or the whole body

J. Problems with your bowel, stomach, liver, kidneys or digestion, including Crohn's disease

K. Chest or breathing problems, including asthma

L. Heart problems or blood pressure, including angina

M. Skin conditions or allergies

N. Cancer

O. Other long-term condition (please specify)

Other condition or disability

P. Difficulty in seeing

Q. Difficulty in hearing

R. Dizziness or balance problems

S. Diabetes

T. Problems due to alcohol

U. Problems due to illegal use of drugs

V. Epilepsy

W. Learning difficulties, including dyslexia

X. Aspergers syndrome or autism

Y. Progressive illness not covered above

Z. Other health problem or disability (please specify)

Appendix E
Age-specific prevalence of health conditions

Table E.1 Proportion with each condition by age group and NS-SEC, people with a health condition only, men (column percentages)

	16-24	25-34	35-49	50-54	55+
Managerial and professional					
Mental health conditions	28.6	44.8	34.7	9.6	24.6
Conditions relating to bones, muscle problems or physical injury	13.4	33.0	37.4	33.9	39.2
Long-term conditions that affect major organs or the whole body	29.8	12.2	8.8	34.5	29.1
Other condition or disability	28.2	10.0	19.2	22.0	7.1
Intermediate occupations, small employers and own account workers, and lower supervisory and technical					
Mental health conditions	9.7	30.3	27.9	17.9	12.8
Conditions relating to bones, muscle problems or physical injury	41.6	51.5	44.7	48.2	53.4
Long-term conditions that affect major organs or the whole body	18.2	3.2	15.2	16.6	28.7
Other condition or disability	30.4	15.1	12.2	17.3	5.1
Semi-routine and routine					
Mental health conditions	39.8	45.6	31.9	20.9	14.0
Conditions relating to bones, muscle problems or physical injury	37.7	36.8	42.1	42.7	44.8
Long-term conditions that affect major organs or the whole body	16.4	9.6	14.5	21.6	33.5
Other condition or disability	6.2	8.1	11.5	14.8	7.7
Never worked and long-term unemployed					
Mental health conditions	45.4	40.9	33.3	9.7	0.0
Conditions relating to bones, muscle problems or physical injury	17.5	26.3	36.4	48.9	91.8
Long-term conditions that affect major organs or the whole body	3.5	5.4	0.5	20.3	8.2
Other condition or disability	33.6	27.4	29.7	21.2	0.0

Table E.2 Proportion with each condition by age group and NS-SEC, people with a health condition only, women (column percentages)

Column percentage

	16-24	25-34	35-49	50-54	55+
Managerial and professional					
Mental health conditions	77.1	52.4	40.1	29.2	32.6
Conditions relating to bones, muscle problems or physical injury	22.9	33.9	26.5	43.1	49.8
Long-term conditions that affect major organs or the whole body	0.0	10.9	22.1	24.4	11.6
Other condition or disability	0.0	2.7	11.3	3.3	6.0
Intermediate occupations, small employers and own account workers, and lower supervisory and technical					
Mental health conditions	39.2	40.7	45.2	31.5	29.2
Conditions relating to bones, muscle problems or physical injury	12.3	29.1	19.9	50.1	34.4
Long-term conditions that affect major organs or the whole body	48.5	23.3	24.0	10.4	32.9
Other condition or disability	0.0	6.9	10.9	8.0	3.5
Semi-routine and routine					
Mental health conditions	43.0	40.3	36.0	26.4	26.2
Conditions relating to bones, muscle problems or physical injury	26.5	36.2	35.9	42.3	47.6
Long-term conditions that affect major organs or the whole body	18.0	6.5	22.5	16.5	21.3
Other condition or disability	12.5	17.0	5.6	14.8	4.9
Never worked and long-term unemployed					
Mental health conditions	62.6	71.9	52.0	17.5	21.4
Conditions relating to bones, muscle problems or physical injury	14.5	14.9	30.4	33.4	39.7
Long-term conditions that affect major organs or the whole body	2.5	4.1	7.9	21.2	19.8
Other condition or disability	20.3	9.1	9.7	27.8	19.1

Appendix F
Summary of key characteristics

Table F.1 Summary table of selected characteristics of ESA claimants by employment situation prior to making claim for ESA

Column percentage

	In work before claim	Not in work before claim
Gender		
Male	63	64
Age		
16-24	11	24
55+	23	12
Household type		
Lives alone	17	25
Partner's employment		
In work (and working)	61	42
Main health condition		
Mental health	26	38
Musculoskeletal condition	41	32
Onset of condition		
Recent (2008/09)	49	33
Disadvantaged group[1]		
In a disadvantaged group	13	28
Qualifications		
No qualifications	28	41
NS-SEC		
Semi routine and routine	41	40
Never worked and long-term unemployed	5	29
Tenure		
Owner occupied	47	23
Rented	41	59
Long-term employment history		
Spent most of life working	85	52

[1] Disadvantaged group related to old PSA16 indicators for adults at risk of social exclusion. http://webarchive.nationalarchives.gov.uk/+/http://www.hm-treasury.gov.uk/media/3/9/pbr_csr07_psa16.pdf

Appendix G
Summary of trajectories

Table G.1 Summary of trajectories

Row percentage

	Employment situation at follow-up survey				
	In work				
Employment situation before claiming and claim group at baseline survey	**At work (employee or self-employed)**	**Off-sick**	**Not in work**	**Total**	***Base***
In work before claim					
Employees (including off sick)					
Support Group	16	16	67	100	*49*
WRAG	9	8	83	100	*127*
Fit for Work	32	5	63	100	*318*
Closed/withdrawn	51	1	48	100	*200*
Claim in progress	36	12	52	100	*58*
All employees	33	6	62	100	*752*
Self-employed (including off sick)					
Support Group	19	31	50	100	*16*
WRAG	22	28	50	100	*18*
Fit for Work	33	31	36	100	*67*
Closed/withdrawn	69	3	27	100	*62*
Claim in progress	33	44	22	100	*18*
All self-employed	43	23	34	100	*181*
Not in work before claim					
Support Group	2	2	96	100	*49*
WRAG	6	5	89	100	*132*
Fit for Work	16	2	81	100	*373*
Closed/withdrawn	22	2	77	100	*241*
Claim in progress	13	4	83	100	*108*
All not in work	15	3	82	100	*903*

Appendix H
Logistic regression

Logistic regression is used to predict an outcome variable using a range of explanatory variables. It allows us to disentangle the individual effect of the explanatory variables by testing each one while holding the others in the model constant. The explanatory variables which have been chosen are those which the descriptive analysis suggests are likely to be relevant factors influencing employment outcomes.

The key statistic reported here is the odds ratio [Exp(B)] which expresses the direction and strength of an individual factors association with the outcome variable. An odds ratio above one indicates an increased likelihood, below one a reduced likelihood. The odds ratio is expressed relative to a base case or reference category, for which the odds ratio is 1.

Three regression models are presented here:

- factors influencing whether male Employment and Support Allowance (ESA) claimants had been in work since their claim (by the time of the follow-up survey);
- factors influencing whether female ESA claimants had been in work since their claim (by the time of the follow-up survey);
- factors influencing whether the from-work group of claimants had been back in work since their claim (by the time of the follow-up survey).

The significance (p) values for each association are provided in the tables; a value of less than 0.05 indicates the relationship is statistically at the 95 per cent confidence level, a value of less than 0.01 indicates significance at the 99 per cent level.

Factors influencing the employment status of men between their claim and the follow-up survey

Table H.1 Factors associated with male ESA claimants being in work, by the follow-up survey

	Odds ratio	p
Claim group at baseline survey		
Support Group (reference)	1.000	.
WRAG	.793	.651
Fit for Work	3.389	.001
Closed or withdrawn	9.975	.000
In progress	2.878	.037
Health change since baseline survey		
Staying the same (reference)	1.000	.
Changeable	1.102	.837
Getting worse	.823	.588
Getting better	3.660	.000
Economic position immediately before claim		
Employed (reference)	1.000	.
Unemployed	.750	.348
Inactive	.181	.003
Longer-term work history		
Consistent work history (reference)	1.000	.
Fragmented work history	.292	.030
Age		
55 and over (reference)	1.000	.
50-54	.997	.994
35-49	1.021	.950
25-34	.668	.347
16-24	.459	.148
Main health condition at baseline survey		
Mental health condition (reference)	1.000	.
Conditions relating to bones, muscle problems, physical injury	3.275	.003
Long-term conditions affecting major organs or whole body	2.498	.054
Other condition	1.884	.346
No condition	9.541	.000

Continued

Table H.1 Continued

	Odds ratio	p
Qualifications		
No qualifications (reference)	1.000	.
Work qualifications only	2.321	.021
Other academic qualifications	5.166	.000
GCSE A-C	3.894	.001
A-levels or above	2.968	.004
Whether has a partner in work		
Does not have a partner in work (reference)	1.000	.
Has a partner in work	1.579	.108

Base: 962 men who were surveyed at baseline and follow-up.
Initial pseudo -2 log likelihood 1377.97; final pseudo -2 log likelihood 930.40; df =636.00.
F = 5.34, P<.001; R^2 .33 (Cox and Snell), .47 (Nagelkerke).

Factors influencing the employment status of women between their claim and the follow-up survey

Table H.2 Factors associated with female ESA claimants being in work, by the follow-up survey

	Odds ratio	p
Claim group at baseline survey		
Support Group (reference)	1.000	.
WRAG	1.582	.274
Fit for Work	3.372	.002
Closed or withdrawn	4.344	.002
In progress	3.791	.009
Health change since baseline survey		
Staying the same (reference)	1.000	.
Changeable	1.469	.308
Getting worse	.283	.001
Getting better	2.100	.051
Economic position immediately before claim		
Employed (reference)	1.000	.
Unemployed	.372	.022
Inactive	.150	.000
Longer-term work history		
Consistent work history	1.000	.
Fragmented work history	.717	.312

Continued

Table H.2 Continued

	Odds ratio	p
Age		
55 and over (reference)	1.000	.
50-54	2.282	.042
35-49	2.460	.015
25-34	.896	.804
16-24	.503	.346
Main health condition at baseline survey		
Mental health condition (reference)	1.000	.
Conditions relating to bones, muscle problems, physical injury	1.585	.166
Long-term conditions affecting major organs or whole body	1.984	.134
Other condition	.984	.979
No condition		.000
Qualifications		
No qualifications (reference)	1.000	.
Work qualifications only	1.412	.381
Other academic qualifications	.750	.470
GCSE A-C.	1.501	.380
A-levels or above	1.491	.282
Whether has a partner in work		
Does not have a partner in work (reference)	1.000	.
Has a partner in work	.731	.292

Base: 791 women who were surveyed at baseline and follow-up.
Initial pseudo -2 log likelihood 776.36; final pseudo -2 log likelihood 550.97; df = 566.00.
F = 4.12, P<.001; R^2 .30 (Cox and Snell), .42 (Nagelkerke).

Factors influencing the employment status of the 'from work' group between their claim and the follow-up survey

Table H.3 Factors associated with 'from work' ESA claimants being in work, by the follow-up survey

	Odds ratio	p
Claim group at baseline		
Support Group (reference)	1.000	.
WRAG	.801	.545
Fit for Work	2.217	.014
Closed or withdrawn	4.941	.000
In progress	1.763	.207
Health change since baseline		
Staying the same (reference)	1.000	.
Changeable	1.056	.892
Getting better	.606	.093
Getting worse	1.743	.059
Employment position immediately before claim		
Self-employed (reference)	1.000	.
Employed	.739	.265
Main health condition at baseline		
Mental health condition (reference)	1.000	.
Conditions relating to bones, muscle problems, physical injury	1.504	.637
Long-term conditions affecting major organs or whole body	1.191	.187
Other condition	1.000	.999
No condition	5.443	.000
Attitude towards work and health		
Disagrees that 'being in work helps my health' (reference)	1.000	.
Agrees that 'being in work helps my health'	2.856	.000
Qualifications		
No qualifications (reference)	1.000	.
Some qualifications	.518	.011

Base: 1,013 people who were in work before claiming ESA and surveyed at baseline and follow-up.
Initial pseudo -2 log likelihood 1225.53; final pseudo -2 log likelihood 919.27; df = 636.00.
F = 7.13, P<.001. R^2 .29 (Cox and Snell), .39 (Nagelkerke).

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Employment and Support Allowance (ESA) was introduced in October 2008 to replace Incapacity Benefit (IB) and Income Support (IS) received on the grounds of incapacity.

This report presents the findings from a two-wave survey of ESA claimants providing detailed information about the characteristics of claimants and their short-term employment trajectories over a period of around 18 months.

The research involved face-to-face interviews with a sample of 3,650 people who claimed ESA between April and June 2009, and follow-up telephone interviews with 1,842 participants who agreed to be contacted again.

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