

Institute for Public Policy Research



# **TIME TO ACT**

## **Understanding the impact of Covid-19 on disabled people in the north of England**

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## INTRODUCTION

Covid-19 has had a disproportionate impact on disabled people, with data suggesting that during the first nine months of the pandemic (March – November 2020) the risk of death was at least twice as great among disabled people compared to non-disabled people (ONS 2021f). Across the north of England<sup>1</sup>, the pandemic has also had a disproportionate impact; the total number of recorded cases per 100,000 is 20 per cent higher in the North than it is in England as a whole (authors' analysis of PHE 2021), and parts of the North have seen more prolonged restrictions than anywhere else in the country, all of which has resulted in greater disruption and ultimately greater tragedy.

Whilst the impact of the pandemic on social care - particularly for older residents in care homes - has rightly been widely publicised, there has been far less scrutiny of how working and school age disabled people have been affected. However, there is evidence that support packages for disabled people have been disrupted and reduced. For example, local councils have enacted Care Act easements, which allowed them to expedite care support without the usual assessment or review processes, in order to manage staffing shortages and increased demand (Community Care 2020).

An estimated 21 per cent of the working-age population in the north of England were disabled in 2018, compared to 19 per cent across England as a whole (authors' analysis of ONS 2019a, ONS 2020a). The North East had the highest rate of disability of any region, at 24 per cent (ibid). Even before the pandemic, disabled people in regions like the North were at a disadvantage as a consequence of the wider regional inequalities that characterise the UK's economy. These inequalities in health, income and employment have been exacerbated by austerity. Research by IPPR North in 2020, for example, showed that children with special educational needs in the North have been adversely affected. Adjusted for inflation, the per pupil figure for the High Needs Block (the funding allocated by central government to local authorities in order to meet the needs of children and young people with additional needs, including special educational needs) in the North in 2019/20 is 33 per cent lower than it was in 2013/14. It is now £17,003 per pupil versus £25,409 in 2013/14. At the England level, the fall was 29 per cent and the figure now stands at £17,737 (Johns, 2020).

This briefing paper examines the possible impact of the pandemic, following decades of increasing regional inequalities, on the lives of disabled people across the north of England. It finds that the pandemic has had a significant impact on disabled people. Not only has it amplified existing inequalities that impact disabled people; it has also brought to light new challenges in terms of access to health, education and support in the workplace. Prior to the pandemic, a concerted effort to shrink the state in the name of austerity over the course of

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<sup>1</sup> As defined by the International Territorial Level 1 (formerly NUTS1) regions of the North West, North East, and Yorkshire & the Humber. All regions referred to in this submission use ILT1/NUTS1 geographies.

the previous decade had left public services unable to properly support disabled people. The data presented here suggests that policymakers, if they are serious about 'building back better', must now create a resilient state that provides equal opportunity.

Our conclusions emphasise that now is the time for policymakers to act and ensure that disabled people have equal access to opportunity across the North and the rest of the UK.

## HEALTH

The pandemic has exacerbated existing inequalities in the UK across a range of areas, not least with regards to health outcomes.

Across the North, health outcomes across a range of measures are consistently worse than England as a whole. This is also true when examining the difference in health outcomes between disabled and non-disabled people. The Health Index for England, an experimental statistic devised by the ONS, which uses a broad definition of health including health-related behaviours and personal circumstances as well as wider determinants, suggests that people in the north of England have on average worse health than the country as a whole. The average (population-weighted) health index score for the North in 2018 was 97.3, compared to 99.7 for England as a whole<sup>2</sup> (authors' analysis of ONS 2020b, ONS 2020a).

The North East had the worst health index score, at 95.9. Within the subdomain of people who have a disability that impacts daily activity, the North fares lower still, recording scores of 80.3, 87.6 and 90.2 for the North East, Yorkshire and the Humber and the North West respectively, compared to 96.2 in England as a whole. Given the evidence that exists regarding the impact of Covid-19 among those most affected by the impacts of inequality, we would expect inequalities linked to disability and geographic region to be no exception.

Data from February 2021 (ONS, 2021g) demonstrates the impact of the pandemic on the health of disabled people; while almost one in five (18 per cent) of all people in Great Britain reported that the Covid-19 outbreak was affecting their health, this figure was significantly higher among disabled people (35 per cent). Similarly, the proportion of disabled people who indicated that access to healthcare and treatment for non-Covid-19 related issues was being affected was twice that of non-disabled people (40 per cent of disabled people compared to 19 per cent of non-disabled people). Although data is not available at a regional level, since restrictions have been tighter and more prolonged, and the outbreak more severe across the north of England, this indicates that disabled people in the North are likely to have been at best affected in the same

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<sup>2</sup> The Health Index has been scaled to a base of 100 for England, with a base year of 2015. Values higher than 100 indicate better health than England 2015 and values below 100 indicate worse health (ONS 2020b).

way as disabled people across the country as a whole, and at worse, significantly more affected.

## **Mental health**

The pandemic has not just impacted physical health, but also caused significant disruption to people's mental health and wellbeing, whether through disruption of routine, new stress and anxieties or isolation and loneliness. Prior to the pandemic, self-reported feelings of loneliness were higher among disabled people across the country; in the North, 14 per cent of disabled people reported feeling lonely "often or always", compared to 4 per cent for non-disabled people (authors' analysis of ONS 2021b, ONS 2020a). These figures were consistent across England as a whole, however, the North East stands out as an outlier where 17 per cent of disabled people reported feelings of loneliness. During the pandemic, as would be expected, feelings of loneliness increased across the population as a whole but disabled people remained significantly more likely than non-disabled people to experience these feelings of loneliness; more than four in ten disabled people across Great Britain reported feeling lonely "often or always" (43 per cent) compared to 21 per cent among non-disabled people (ONS 2021g). Projects initiated by self-advocacy groups such as the Keeping People Connected project which ran across the North East and parts of the North West and worked to support anyone registered with a GP who had a learning disability are likely to have been essential not only in providing practical but also emotional support during a distressing and potentially isolating time.

Data on self-reported wellbeing showed that, consistent with the UK overall, disabled people in the north of England reported lower levels of happiness and life satisfaction than non-disabled people; reported higher levels of anxiety; and were less likely to feel that the things they did in their life were worthwhile (authors' analysis of ONS 2021c, ONS 2020a). This finding was particularly pronounced in the North East where disabled people had the lowest levels of happiness and life satisfaction compared to disabled people in any English region; the second highest levels of anxiety, after the East of England; and were the least likely to feel that the things they did in their life were worthwhile. While these trends were identified among disabled people in the North East, the same was not true among non-disabled people in the region, indicating that these issues cannot simply be attributed to the region as a whole; in fact, the data identified that the North East region had the greatest inequalities between disabled and non-disabled people in terms of reported happiness levels, feeling that life was worthwhile and life satisfaction.

During the pandemic, approximately 1.1 million people in the North, including disabled and non-disabled people, were on the shielded patient list (NHS 2021). This equates to 7.1 per cent of the population in the North and is higher than the England average of 6.8 per cent. In addition to offering an indication of the varying health outcomes across the country, it is also possible that this may have contributed to increased mental health needs across the North, given that 35 per cent of people who were shielding reported a negative impact on their mental health (ONS 2020c).

## Social care

In 2019-20 the north of England was home to 31 per cent of the total number of working-age adults receiving long-term care in England (NHS 2020). However, the North accounted for just 26 per cent of net current expenditure on short-term care for working-age adults in 2019-20, and 28 per cent of net current expenditure on long-term care (ibid).

The table below outlines the approximate social care expenditure by local authorities per service user by region.

### **Table 1: Average spend per person on long-term care is lower in the North than England overall**

*Average spend by local authorities per person, calculated based on total spend divided by total number of people accessing long-term support during 2019-20.*

<b>England</b>	<b>23,990</b>
North East	18,690
Yorkshire and The Humber	20,251
East Midlands	21,260
North West	22,886
London	23,078
West Midlands	24,886
South West	26,809
South East	27,113
East of England	27,946
<b>North of England</b>	<b>21,254</b>

These figures conceal a number of complexities within social care provision and costs. Given that the majority of the cost of social care goes towards a service rather than a product, regional differences in wages are likely to be a factor in explaining regional differences in spend. However, this is unlikely to be the only rationale for the significantly lower spend in the North as there are numerous other variables at play, namely the role of increasingly cash-strapped local authorities in making decisions about budgets and services, as well as the lack of national oversight to ensure consistent commissioning of services. All of this means that different levels of provision are offered depending on where individuals who need this support live, resulting in a postcode lottery. Research by the Kings Fund (2020) indicates that the pandemic may have further exacerbated this lottery as different local authorities have responded to the

pandemic in different ways, and many have adapted their social care provision accordingly.

## WORK

The Covid-19 pandemic has had a significant impact on the employment prospects of disabled people. The impact hasn't just been in job losses, but also challenges around recruitment. A survey by Leonard Cheshire found that across the UK, 42 percent of employers were discouraged from hiring disabled job applicants due to concerns around supporting them properly during the pandemic (Leonard Cheshire 2020). Polling conducted by the Trade Union Congress (TUC) further highlights that 30 per cent of disabled workers reported being treated unfairly at work during the pandemic (TUC 2021). This included 8 per cent of survey respondents reporting bullying in the workplace (ibid).

While disabled people across England have faced significant challenges in terms of securing and maintaining work during the pandemic, the problem is most acute in the North. Disabled people in the North were less likely to be employed than disabled people in England as a whole – at 51 per cent and 55 per cent respectively (authors' analysis of ONS 2021e, ONE 2020a). For non-disabled people, employment rates were similar – 81 per cent in the North and 82 per cent in England as a whole (ibid).

The fact that disabled people are more likely to work part-time results in different earnings between disabled and non-disabled people. Disabled people in the North were more likely to work part-time than non-disabled people – 32 per cent of disabled people worked part-time in 2019/20 compared to 23 per cent of non-disabled people (authors' analysis of ONS 2021e, ONE 2020a). The figures were similar for England as a whole – 34 per cent and 23 per cent (ibid). In the context of reduced welfare support (see next section), part-time workers are more likely to face a significant difference in income when compared to those people able to receive full-time earnings from work.

Across the UK as a whole, median hourly pay for disabled people was 12.2 per cent lower than median pay for non-disabled people in 2018 (ONS 2019b). The North East had the second-highest disability pay gap after London, at 14 per cent, while the North West and Yorkshire and the Humber had disability pay gaps below the UK average (10.4 and 9.7 per cent respectively) (ibid). Total pay gaps would likely be larger than median hourly pay gaps because disabled people are more likely to work part-time. While the drivers of this pay gap are often complex and multi-faceted, the fact that it exists and is not adequately closed through welfare support is extremely concerning (Longhi 2017).

## WELFARE

The UK's social security system presents significant challenges for disabled people. A decade of austerity has had a corrosive effect. Many disabled people have been left feeling stigmatised by the increased policy hostility brought about by active efforts from the UK government to roll back welfare provision (Macdonald and Morgan 2020). Simultaneously the UK government has presented welfare claimants in a negative light, further adding to this

stigmatisation (ibid). The significant failings and short-comings in the Covid-19 shielding programme, including delays in identifying some of the most vulnerable people due to lack of joined up systems as well as challenges in reaching a significant number of clinically extremely vulnerable individuals highlight significant flaws in the UK government's welfare policy – failing disabled people who may be clinically extremely vulnerable (HoC Public Accounts 2021).

The reframing of welfare as a state burden was central to the UK Government's austerity agenda and its efforts to roll back the state in the 2010s (Irving 2021). These policies have had a clear impact and have resulted in both significant societal scarring and have initiated a race to the bottom in service provision. These consequences will persist, even after austerity policies have nominally ended (ibid).

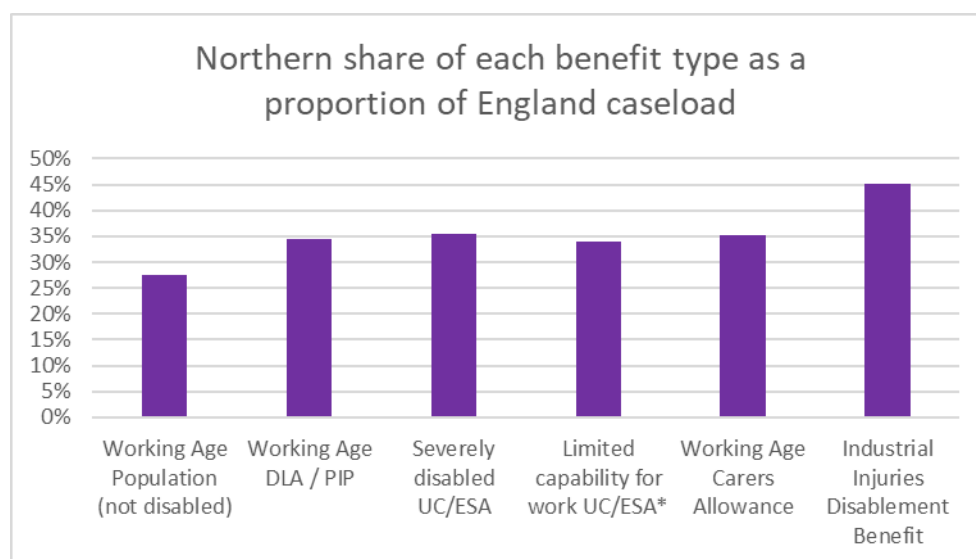
The erosion of welfare support is problematic in the context of the North given the above average number of people receiving disability benefits. In terms of Personal Independence Payments (PIP), award rates in the North over the last eight years were close to or slightly above the average for Great Britain (DWP 2021b). Mandatory reconsideration award rates were also close to average; but the rate of decisions overturned at appeal was lower in the North than in Great Britain, with three of the four lowest rates in northern regions (ibid). Average clearance times for PIP applications in the North over the past year were close to the average for Great Britain (ibid).

By analysing the total percentage of the England benefit caseload located in the north of England, we get a more nuanced picture of different benefit payments. This includes a significant number of severely disabled people. Almost half of the people receiving Industrial Injuries Disablement Benefit in England are located in the North. This likely represents the high concentration of industry in Northern regions.



## Figure 1: The North receives a higher-than-expected share of total expenditure on disability benefits across the working age population.

Percentage of England caseload for each benefit payment in the north of England.



Source: Authors' analysis of DWP (2020)

While the North has 31 per cent of England's working-age disabled population (authors' analysis of ONS 2019a, ONS 2020a), it receives a higher share of total expenditure on a range of disability benefits (see figure 1). This may be because of regional variation in the severity of disability, or in the age profile of benefit recipients. The nature of the available data makes it difficult to understand why this is the case given the lack of datasets exploring why total expenditure may vary.

Overall, understanding the mix of disability payments claimed as a percentage of the total England caseload in the North is crucial for understanding the type of disabilities people in the North have and the support they are receiving. However, the lack of available data makes it difficult to drill down further and understand precisely the different challenges faced by people experiencing different disabilities, although existing research has sought to substantiate this qualitatively (Giri et al 2021).

### Digital exclusion

The pandemic has acted as a catalyst for many services to shift from physical to digital provision. There has been no significant difference reported in access to the internet from home during the pandemic either between disabled people and non-disabled people, and between the North and the rest of England (authors' analysis of University of Essex 2021). 97 to 98 per cent of households in all groups reported having access to the internet from home. While self-reported access to the internet does not appear to have been an issue, it is likely that disabled users may have faced other challenges particularly related to use of online services, as a result of non-inclusive design, incompatibility with adaptive

hardware and software, or simply not knowing how to access the services they need (Roscoe and Johns 2021).

## EDUCATION

Disabled people in the North typically achieve lower levels of educational attainment than is typical across England. Within this context, it is necessary to explore the impacts of the pandemic on children and young people who are currently in education. During the 2019/20 academic year, there were approximately 304,000 children in the North who required special educational needs (SEN) provision, representing 12 per cent of the school population in the North (authors' analysis of DfE 2020). This proportion correlates with the proportion for England as a whole (13 per cent), as does the proportion of pupils with an education, health and care plan or a statement of SEN, which stands at 3 per cent both in the North and across England as a whole (ibid). Among higher education students, in 2018/19, 14 per cent of students enrolling in a higher education course in the UK had a known disability (HESA 2020). The most common categories of known disability among students are learning difficulties and mental health conditions (HESA 2020).

Given these not insignificant proportions of disabled people within education, it is likely that they have been significantly impacted, as indeed all students have been, throughout the pandemic. The shift from physical to online learning is likely to have caused unexpected challenges especially among disabled students.

In their report *Left In Lockdown*, the Disabled Children's Partnership (2020) highlighted a number of concerns held by parents of disabled children during the first lockdown. In relation to educational support, these challenges included concerns about how much home schooling their disabled child was getting (64 per cent), the recognition that many parents with children who were eligible for a school place had not sent their children to school due to concerns about their children's health (43 per cent of respondents who had indicated that they were not sending their child to school despite having an eligible place).

When asked if they were getting suitable specific support in relation to their child's additional learning needs, disability or special educational needs, almost a third (32 per cent) indicated that they weren't offered any specific support, and a further 17 per cent indicated that support was offered but that it wasn't suitable to their child's needs. In contrast, a quarter (25 per cent) of those surveyed indicated that they were getting good support.

Overall, 86 per cent of respondents indicated that the lockdown was having a negative impact on their child's learning and communication. Once schools fully re-opened again following the lockdowns, schools across the country saw different levels of attendance as a result of isolation rules in school. The north of England saw significantly higher proportions of pupils having to isolate than other regions of England, particularly during October and November and once schools reopened following the lockdown at the start of 2021. Given how disruptive home schooling is reported to have been for disabled children (Ibid), the isolation rules which have disproportionately impacted schools in the North

are likely to have taken a further toll on disabled children, and in turn their families, across the North.

The findings from the research by the Disabled Children's Partnership are supported by Ofsted's (2021) review of special educational needs and/or disabilities (SEND) provision. This review found that even prior to the pandemic, SEND provision was inconsistent and often insufficient due to weaknesses such as a lack of joint commissioning, lack of co-production and poor quality education, health and care plans (EHCP). Further, the review confirmed that these issues were exacerbated during the pandemic, leaving many children and young people without sufficient support to enable them to continue with their education or receive sufficient healthcare due to issues such as physiotherapy sessions ceasing, lack of speech and language therapy and a pause in the availability of respite services for families. Despite this review, as schools and local authorities work to return to a version of normality in the wake of the pandemic there is an imminent danger of further potential cuts to SEND provision in the face of funding shortfalls and increases in the number of children with EHCPs (Weale, 2021).

Of the 3.8 million people in England who were on the shielded patient list during the pandemic, almost 53 thousand were under the age of 18. While this number is comparatively small, the children and young people in this group are likely to have had even more significant disruption to their education than other non-shielding children. Given the lack of prioritisation for vaccinations, parents of shielded children and young people are likely to have faced very difficult choices around prioritising their child's education or their health even once restrictions were eased.

## CONCLUSIONS AND NEXT STEPS FOR POLICYMAKERS

The systemic barriers that disabled people faced before the Covid-19 pandemic were significant and impacted both access to public services and job opportunity. While these barriers exist across the whole country, the data presented here highlights the increased challenges disabled people in the North face.

The Covid-19 pandemic has exacerbated existing inequalities between disabled and non-disabled people. The failure of health, work, welfare and education policies to support disabled people during the pandemic has not drawn the attention that it deserves. If there is to be a public review into the UK government's handling of the pandemic, it must answer the question of why disabled people were failed across these key policy areas.

As IPPR North have previously noted, the pandemic has thrown long-term inequalities and a lack of resilience within our economy into the spotlight (Johns et al 2020). What comes next should be a concerted effort to reduce long-standing inequalities. The pandemic should not be used as an excuse to write off the challenges faced by disabled people as a consequence of an unprecedented event. There is clear evidence that disabled people struggle to access public services, be supported in work and are unable to enjoy the same level of income

as non-disabled people. These inequalities precede the pandemic and make us all poorer, whether disabled or not.

If the UK government is serious about 'levelling up', it needs to provide fair access to opportunity for everyone. It is clear that this isn't currently the case for disabled people. This can be said for a range of outcomes including health, work, welfare and education. Fundamentally, good outcomes across these policy areas are crucial for ensuring that everyone in the North has the chance to achieve the good life.

It is imperative that the UK government actively reviews and understands why disabled people continue to face significant inequalities, particularly when compared to non-disabled people. The recently released National Disability Strategy goes some way to acknowledging the inequalities that exist but falls short of addressing the interconnected inequalities which have deepened as a result of the pandemic. Addressing these interconnected inequalities is key to levelling up and creating a fairer society.

The long-standing nature of the inequalities faced by disabled people were amplified by austerity before they were amplified by the pandemic. The erosion of public service provision and imposition of a punitive welfare system has done nothing to help disabled people in the North. We echo our previous calls to end austerity for good given the damage it has wreaked on our economy and society (Johns 2020). We would also echo recommendations made by the Work and Pensions Committee that the DWP carry out a radical overhaul of employment support for disabled people and that funding for the Work and Health Programme be devolved (Work and Pensions Committee 2021). Any hope of building back better from the pandemic, not least for those disabled people, will not be credible unless we renew the state.

Given the disproportionate impact of the pandemic on disabled people in the North, it is crucial that local government and the Metro Mayors play their part in responding to the challenge. There is already promising evidence that Mayors can use their powers to promote good work through Good Employment Charters, but these initiatives must be more widespread. The introduction of a Northern Employment Charter, as recommended in previous research by IPPR North, built on the basis of individual existing initiatives and co-produced with local businesses, unions and employees would bring greater coherence across the region (Johns, Raikes and Hunter 2019). Even more importantly, ideas of good employment must reduce the systemic barriers to work faced by disabled people at their core.

Many charities, community and self-advocacy groups have gone above and beyond to support those who need it during the pandemic, including disabled people who were more likely to have been directly impacted by Covid-19 and, in a bid to avoid this, have faced greater challenges due to isolation. The government must look to this work to set the standard for the support that disabled people are offered in order to build back fairer and allow everyone, regardless of disability, to live a good life.

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