

Research Briefing

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29 July 2022

UK disability statistics: Prevalence and life experiences



Summary

- 1 Disability data: what do we know?
- 2 How many people have a disability?
- 3 Outcomes for disabled people
- 4 Disability benefits
- 5 Transport
- 6 The impact of the coronavirus pandemic

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UK disability statistics

Key facts

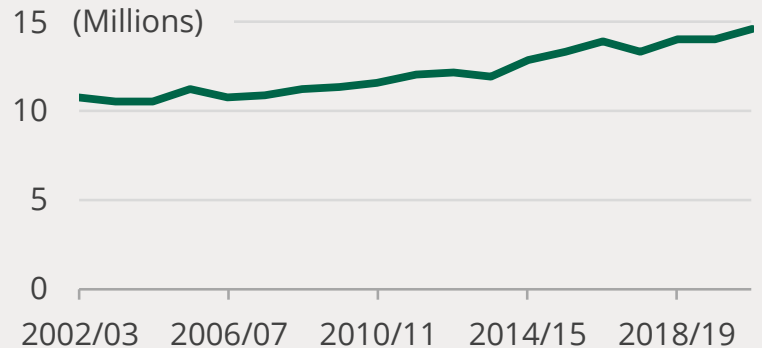
An estimated 14.6 million people in the UK had a disability in 2020/21. This represents 22% of the total population.

The prevalence of disability rises with age: in 2020/21 9% of children were disabled, compared to 21% of working age adults and 42% of adults over State Pension age.

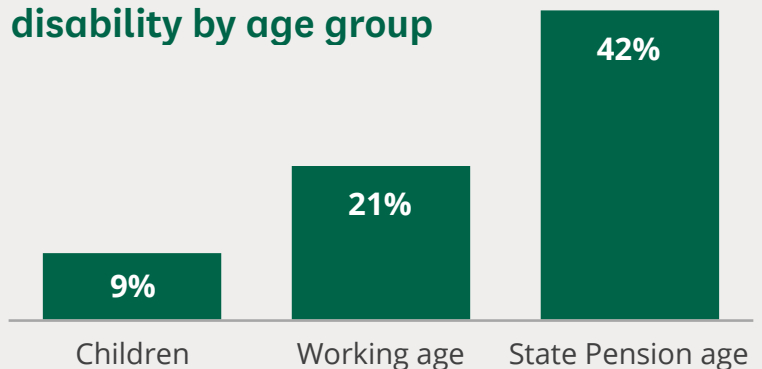
Mobility is the most frequently reported impairment type (46%), followed by stamina, breathing or fatigue (33%), and mental health (29%).

As of November 2021, there were 5.7 million people claiming an extra cost disability benefit in Great Britain, representing 8.7% of the total population.

Number of people who have a disability

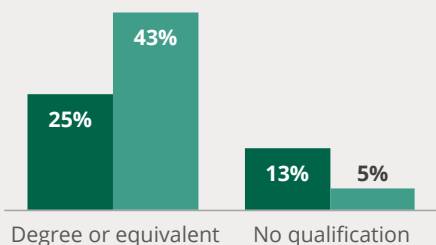


Proportion of people who have a disability by age group



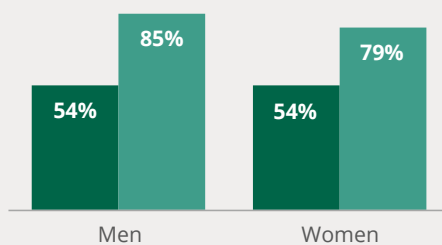
A range of inequalities exist between disabled and non-disabled people. In 2021, disabled people:

Were less likely to have a degree and more likely to have no qualifications

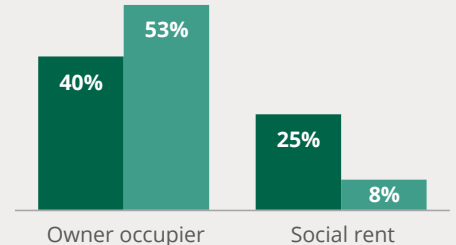


■ Disabled ■ Non-disabled

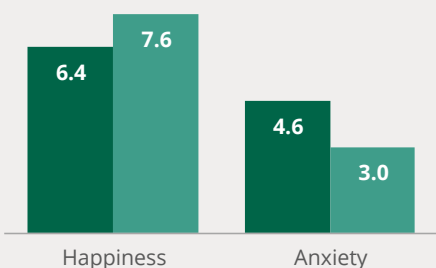
Shown lower employment rates



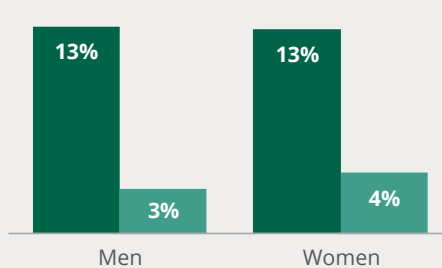
Were less likely to own their homes and more likely to social rent



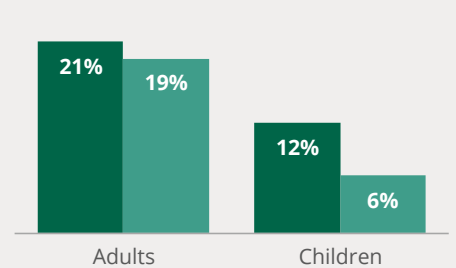
Reported lower rates out of 10 for happiness and higher for anxiety



Were more likely to report feeling lonely regularly



Were more likely to be the victim of a crime (data is for 2020)



1 Disability data: what do we know?

There is currently no national register of people with disabilities in the UK. Although some local authorities operate voluntary registers in their areas, as registration is not compulsory this information does not give a useful indication of the size or characteristics of the disabled population. This can make it challenging to measure disability prevalence.

Data on disability tends to fall into one of two categories – survey data and administrative data. These offer some insight into the UK’s disabled population, but do not provide a comprehensive measure.

Another source of disability data in the UK is the Census. While the data from the 2011 Census is over a decade out-of-date, new data from the 2021 Census is due to be published this winter. This should help to clarify some of the uncertainty surrounding present estimates.

Until recently, there was a lack of data that looked beyond estimates of prevalence and more broadly at the lives and experiences of disabled people. However, advances in promoting equality for disabled people have started to drive improvements in this area.

As part of its [National Disability Strategy](#), the Government has committed to “a multi-year programme to improve the availability, quality, relevance and comparability of government disability data”. This data is due to be made available later in 2022.

1.1 Survey data

Official statistics on disability are primarily collected through surveys, which means that disability tends to be self-reported.

The two main sources of survey data used in this briefing are the [Family Resources Survey](#) (FRS) and the [Annual Population Survey](#) (APS).

Family Resources Survey

The FRS is considered the primary measure of disability prevalence in the UK. FRS disability estimates are based on respondents self-reporting a “a physical or mental impairment” which has “a substantial and long-term

adverse effect” on their ability to carry out day-to-day activities, in accordance with the Equality Act 2010 definition (see box 1 below).¹

However, due to the survey’s sample size, the lowest geographical breakdown available is for English regions and UK nations. The FRS therefore cannot be used to produce estimates at local level.

Annual Population Survey

The APS also provides estimates for the number of people who are disabled in the UK, as defined by the Equality Act. It has the largest coverage of any household survey, which makes it more useful for precise analysis. For example, it can generate estimates for smaller geographies and population subgroups. However, this source is limited to the working age disabled population (classed as people aged 16 to 64) only.

Data on outcomes for disabled people, including any disparities, are derived from a range of survey sources (see section 3 for further detail).

Note: Estimates from survey data are subject to some statistical uncertainty and should be treated and reported as approximations.

1 Defining ‘disability’

Estimates of the number of disabled people in the UK can vary depending on definitions, context and source of information. This includes estimates derived from surveys, which are often highly dependent on the methodology used.

In an attempt to control for this variance, today most official statistics use a definition of disability that is consistent with the [Government Statistical Service’s harmonised definition](#). To measure disability based on this definition, survey respondents are asked whether they have a physical or mental health condition or illness that has lasted or is expected to last 12 months or more, and whether the condition and/or illness reduces their ability to carry out day-to-day activities. A person who answers yes to both questions is defined as disabled.²

This is designed to be consistent with [the definition that appears in legal terms](#) in the Equality Act 2010. It is also designed to reflect [the definition that appears in the Disability Discrimination Act 1995](#), which is still in place in Northern Ireland.³

¹ [Section 6\(1\) of the Equality Act 2010](#)

² Government Statistical Service, [Measuring disability for the Equality Act 2010 harmonisation guidance](#), 25 June 2019

³ [Section 6 of the Equality Act 2010](#); [Section 1 of the Disability Discrimination Act 1995](#)

1.2 Administrative data

Administrative data refers to information gathered through the operation of administrative systems. This type of data is usually collected routinely when people interact with public services. While not specifically generated for research purposes, it can serve as an information rich resource. Some administrative processes record disability status.

An advantage of administrative data for measuring disability is that it includes information on everyone who comes into contact with a public service, whereas survey data is limited to those who chose to – or can – participate, which can lead to the underrepresentation of certain groups.

One of the main sources of relevant administrative data is data on **disability benefits**. In its [2019 Welfare trends report](#), the Office for Budget Responsibility (OBR) summarised the strengths and limitations of using benefits data to measure disability prevalence.

The OBR highlights that there is greater certainty over any trends revealed through administrative data than survey data. This is because administrative data is not based on a sample. However, it notes that the extent to which benefits data captures disability prevalence is greatly influenced by the rules on who is eligible to receive benefits. It also depends on whether disabled people are willing and able to take up the support available.⁴

1.3 The Census

The Census also includes a question on disability. A major advantage of this source compared to survey data is that it gathers information from the entire population, as opposed to a sample of it. This protects it from the risk of ‘sampling error’, whereby the sample selected is not representative of the population in question, therefore produces more accurate results.

However, at present the most recent data available is from the 2011 Census, making this source over a decade out-of-date.

Initial data on disability prevalence from the 2021 Census in England and Wales will be published in late 2022, with more detailed demographic data available in 2023.⁵ This should help to clarify some of the uncertainty surrounding the estimates that are currently available, providing information for smaller geographies and more detail on specific characteristics.

Further details on the Office for National Statistics’ (ONS) [analysis proposals](#) are available on its website.⁶

⁴ OBR, [Welfare trends report – January 2019](#), p28

⁵ ONS, [2021 Census release plans](#), 24 May 2022

⁶ ONS, [Health, disability and unpaid care: Census 2021 analysis plans](#), 24 May 2022

The [first results from the 2021 Census in Northern Ireland](#) have already been published, although disability data is not due to be published until the autumn.⁷ Scotland's Census was delayed until 2022, with data not expected to be released until 2023.

Changes to question design

All UK censuses previously asked the same question regarding long-term health conditions and disabilities. This was developed before the Government Statistical Service (GSS)'s harmonised definition, and so does not align exactly with the Equality Act.

The GSS's harmonised standard has been chosen for use in the 2021 Census in England and Wales, although Scotland and Northern Ireland have chosen not to change their question on disability. This means data from the Census in Scotland and Northern Ireland will not be comparable with the Census in England and Wales. It also means that the 2021 Census in England and Wales will not be comparable with previous years.

1.4

Improving disability data as part of the National Disability Strategy

The [National Disability Strategy](#) – a cross-government strategy to improve the lives of disabled people – was published in July 2021. This includes plans for “a multi-year programme to improve the availability, quality, relevance and comparability of government disability data”. This will be led by the [Disability Unit](#), which is responsible for overseeing the strategy's implementation of the strategy.⁸

The timeline set out in the strategy is:

- By January 2022, regular disability surveys and the monitoring of public perceptions of disabled people and policies will begin.
- By summer 2022, the first in a series of cross-government harmonised disability data will be published. Wider use of the GSS's harmonised standards for [disability](#) and [impairment](#) will be encouraged to allow better comparison of data collected by different government departments.⁹

The strategy is currently subject to legal proceedings and, as a result, in June 2022 the Government said it would pause some parts of it.

⁷ NISRA, [Census 2021 population and household estimates for Northern Ireland](#), 24 May 2022

⁸ HM Government, [National Disability Strategy: Part 2](#), 28 July 2021

⁹ As above

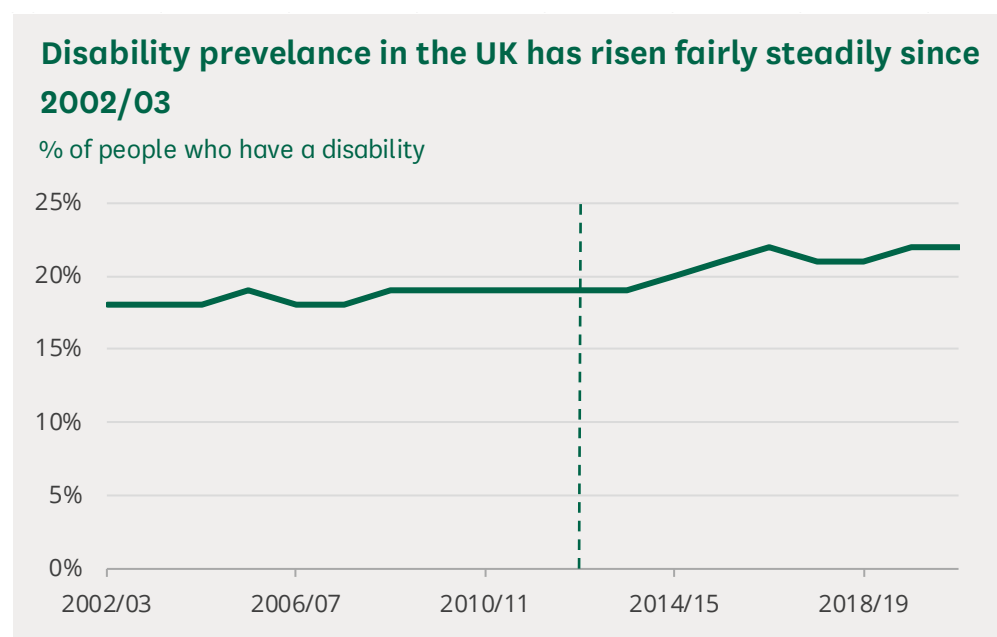
2

How many people have a disability?

Note: Unless stated otherwise, all data in this section is sourced from the Department for Work and Pensions' [Family Resources Survey 2020/21](#) (and earlier editions).

The latest estimates from the Family Resources Survey (FRS) indicate that 14.6 million people in the UK had a disability in the 2020/21 financial year. This represents 22% of the total population.

The chart below shows reported disability prevalence since 2002/03, when the FRS was extended to cover the whole of the UK.



Note: the break in the time series represents the introduction of a different definition of disability, in line with the Equality Act 2010.

Source: DWP, [Family Resources Survey](#) (various editions)

The proportion of the population reporting a disability has risen by four percentage points over this period, up from 18%. Most of this increase has been observed over the past decade, with disability prevalence up by three percentage points from 19% in 2010/11 to 22% in 2020/21.

Since 2002/03, the number of people reporting a disability has increased by 3.8 million (+35%).















The disability questions in the FRS were changed for the 2012/13 survey to comply with the GSS's harmonised standards (for further detail see box 1 in

section 1.1). This meant the definition of disability used from this point onwards was not directly comparable with that used in previous reports. Despite this, overall disability prevalence remained at similar levels.

2.1 Age and gender differences

The prevalence of disability rises with age: in 2020/21 around 9% of children in the UK were disabled, compared to 21% of working age adults and 42% of adults over State Pension age. Most people aged 80 and over reported a disability (59%).¹⁰

Disability prevalence tended to be higher among female respondents (24%) than male respondents (20%), as illustrated by the table below. The only exception was among children under the age of 15.

Disability prevalence by age and gender						
United Kingdom: 2018/19 - 2020/21						
Age	Male respondents			Female respondents		
	Number (millions)	% male population		Number (millions)	% female population	
0-14	0.6	10%		0.3	5%	
15-24	0.5	13%		0.5	14%	
25-44	1.1	13%		1.6	18%	
45-64	2.0	24%		2.6	30%	
65-79	1.6	37%		1.8	39%	
80+	0.7	54%		1.1	61%	
Total	6.4	20%		7.9	24%	

Note: Data are presented as an average over three years as there are small sample sizes for some age groups by gender.

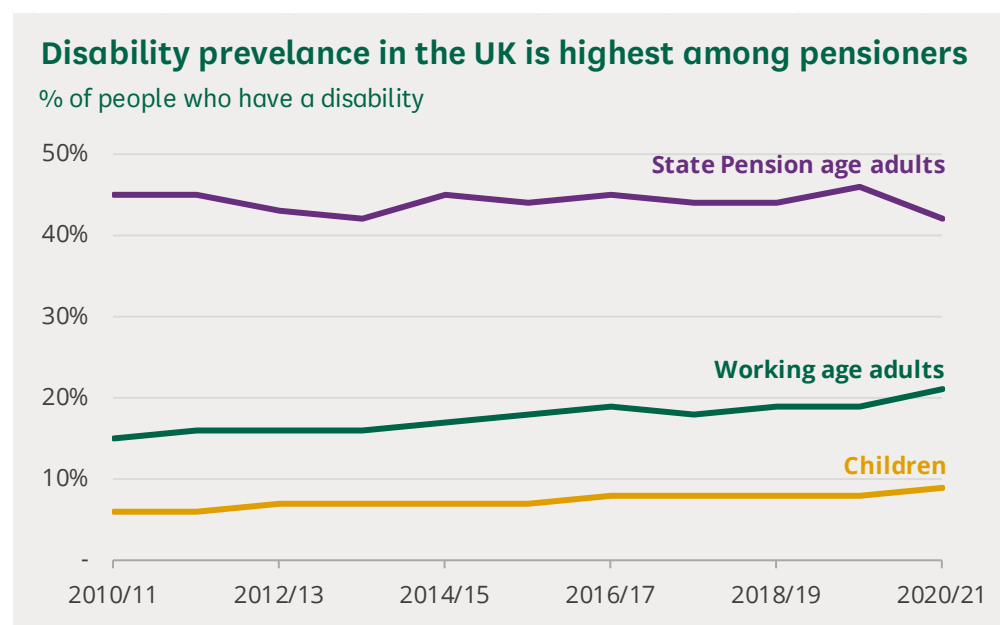
Source: DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.3

Change over time

The chart below shows changes in the number of people reporting disability by age group since 2010/11.

The proportion of children and working age adults reporting a disability has increased over the past decade, whereas the proportion of adults of State Pension age has fluctuated.

¹⁰ DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.3



Note: Since April 2010, the State Pension age has been increasing gradually for women, and since December 2018 has been increasing for both men and women. Figures from 2013 onwards are based on a different definition of disability to previous years.

DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.1

Some fluctuation may be due to changes in survey methodology, for example, the four-percentage-point decrease in State Pension age adults reporting a disability between 2019/20 and 2020/21. The introduction of Covid-19 lockdown restrictions caused a move to telephone rather than face-to-face interviews for the whole of the 2020/21 survey year, which may have served as a barrier to participation for some respondents. This explanation is supported by the observation that fewer respondents reported impairments in hearing, memory or vision.¹¹

Changes in people's behaviours and circumstances may also have affected survey results. The two-percentage point increase in working age adults reporting a disability between 2019/20 and 2020/21 – the largest increase seen in a single year for this age group – may be linked to restrictions limiting movement outside of the home and the effect on this age group's mental and physical health.¹²

2.2

Types of impairment reported¹³

The types of impairments reported in the FRS by disabled people vary by age group. The table below shows the percentage of disabled people reporting

¹¹ DWP, [Family Resources Survey: background information and methodology](#), 31 March 2022

¹² As above

¹³ The FRS collects data on different impairment types experienced as a result of a health condition or illness, in line with the Government Statistical Service's [impairment harmonised standard](#).

each type of impairment. Column totals will sum to more than 100% because respondents can report more than one impairment type.

Impairment types reported by disabled people 2020/21				
Impairment type	Children	State		All ages
		Working age	Pension age	
Mobility	15%	42%	63%	46%
Stamina/breathing/fatigue	19%	32%	38%	33%
Mental health	21%	42%	9%	29%
Dexterity	9%	22%	29%	23%
Memory	6%	12%	11%	11%
Learning	20%	12%	5%	11%
Hearing*	5%	7%	17%	10%
Vision	5%	7%	13%	9%
Social/behavioural	37%	8%	1%	8%
Other	21%	23%	23%	23%

Note: Data for the 'Hearing' category should be treated with caution due to the possible sampling limitations of interviewing by telephone this survey year.

Source: DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.6

The most common impairments among working age adults in 2020/21 were mental health and mobility (both of which were reported by 42% of disabled people in this age group).

Mobility was also the most frequently reported impairment among disabled people of State Pension age, affecting 63% of people within this group. A stamina, breathing or fatigue impairment was reported by 38% of state pensioners with disabilities.

In children, social or behavioural impairments were most common (37%), followed by mental health (21%) and 'other' impairments (21%).

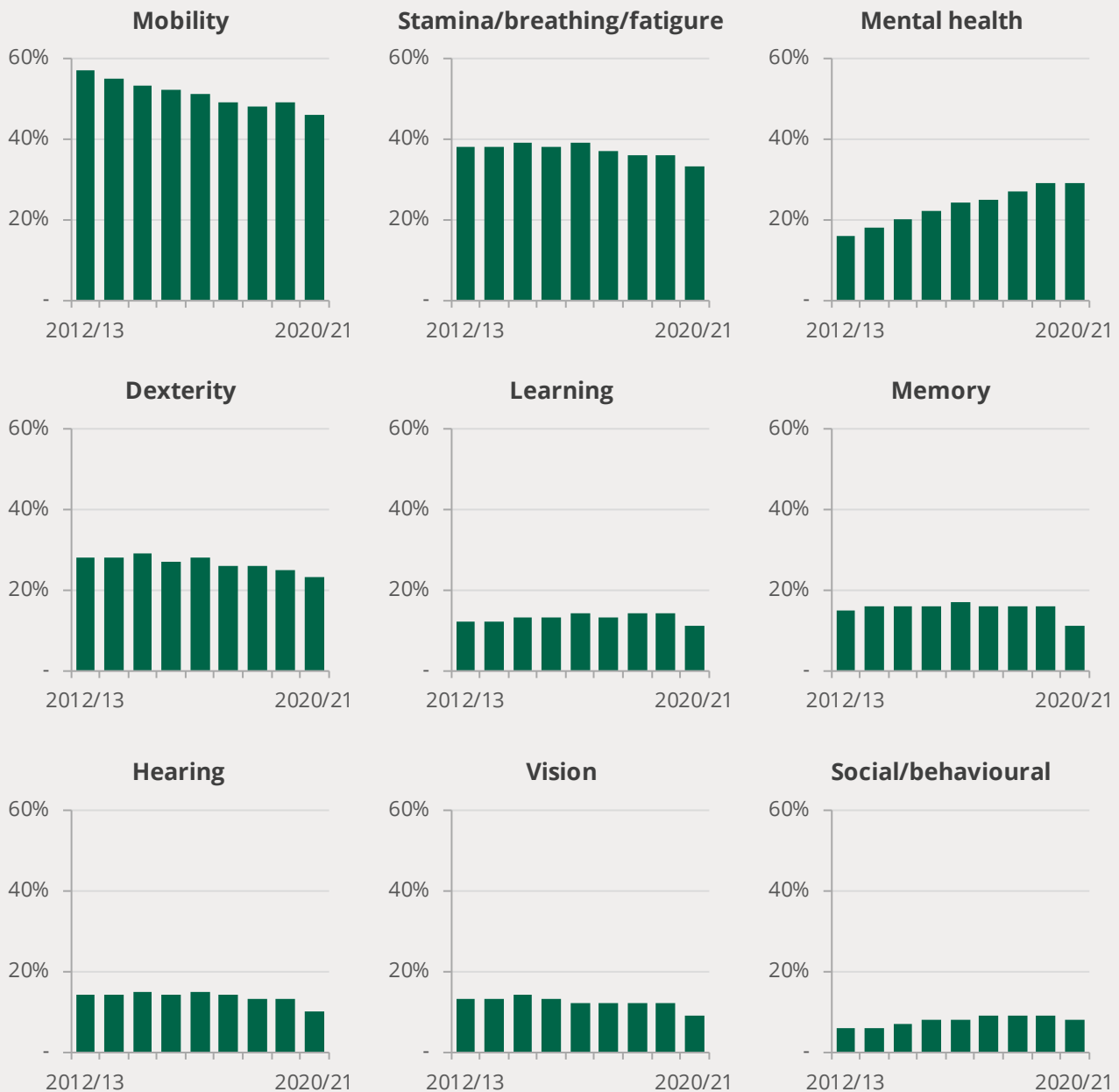
Change over time

While the overall proportion of the population reporting a disability has increased over time, patterns differ according to the types of impairment reported.

The types of impairment respondents were asked about changed in 2012/13 to reflect the GSS's harmonised standards, preventing direct comparisons with earlier years. The chart below shows the trends in the proportion of disabled people reporting the different impairment types for each year since 2012/13.

Trends in reported impairments types*

% of disabled people



*Does not include the category for all 'other' impairment types.

Source: DWP, [Family Resources Survey](#) (various editions)

The most pronounced change is the upward trend in reported mental health impairments, which increased by 13 percentage points over this eight-year period. Social or behavioural impairments also rose by three percentage points, with 9% of disabled people reporting these in 2019/20, before a one percentage point decline in 2020/21.

While mobility remains the most common impairment type, its prevalence shows a declining trend in recent years (down by 11 percentage points).

It is notable that the proportion of disabled people reporting all impairment types fell in the year from 2019/20 to 2020/21, except for mental health and 'other' impairments. This could be due to changes to the survey methodology in response to the pandemic, which may have resulted in sample bias.

The background information published with the FRS suggests the increase in the number of people who classified their impairment as 'other' (from 17% to 23%) could be related to the requirement for some people to shield in the early months of the pandemic. People who were shielding may have been more responsive to the telephone survey. Many of the conditions covered by the shielding guidance – for example, conditions causing a weakened immune system – may have been reported as 'other' because they do not fit neatly into another category of impairment.¹⁴

Changes in 2020/21 that do not follow previous trends should be interpreted with caution. Changes in the hearing category should be treated with particular caution due to the possible sampling limitations of interviewing by telephone in 2020/21 due to the pandemic.

The rise in mental health conditions

Recent growth in disability prevalence appears to be driven by an increase in mental health conditions reported among children and working-age adults.

This trend in FRS data is consistent with other indicators which show that mental health conditions area on the rise. For more on this, see the Library briefing on [Mental health statistics \(England\)](#).

Factors that may have contributed to the increased reporting of mental health conditions include:

- Increases in underlying rates of mental illness.
- Changing social attitudes towards mental health issues, which may have increased awareness of them and the willingness of individuals to report such conditions.
- An increased tendency of medical professionals to diagnose mental health issues.
- Increased provision of mental health services.¹⁵

Studies have shown that people with long-term health conditions and disabilities face an increased risk of experiencing a mental health problem. The impact of the coronavirus pandemic appears to have exacerbated this.¹⁶

¹⁴ DWP, [Family Resources Survey: background information and methodology](#), 31 March 2022

¹⁵ OBR, [Welfare trends report – January 2019](#), p27

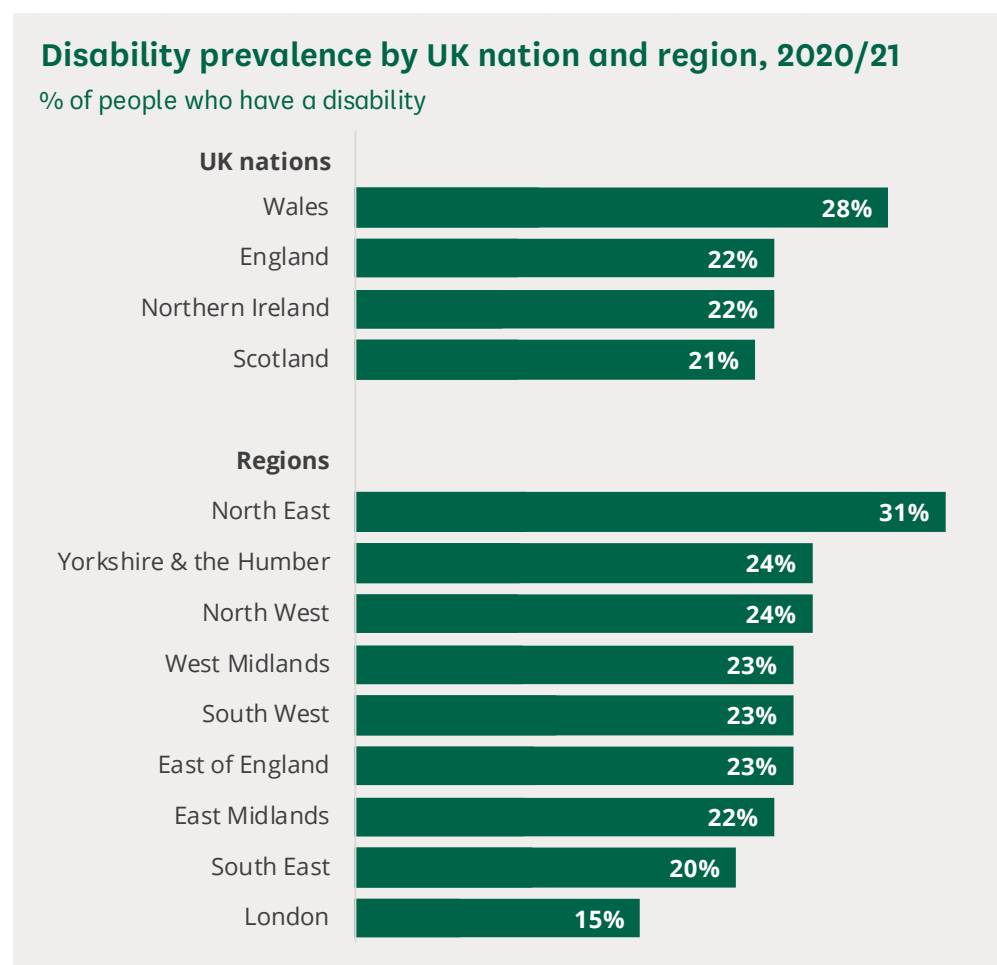
¹⁶ Mental Health Foundation, [Written evidence submitted to Women and Equalities Committee](#), 5 August 2020

2.3

Variation in different parts of the country

The prevalence of disability varies across the UK.

In Wales, 28% of people reported a disability in 2020/21, six percentage points higher than the UK national average (22%). Scotland was the only UK country to fall below the national average, with 21% of people reporting a disability. This was broadly in line with estimated disability prevalence in England and Northern Ireland, which matched the national average of 22%.

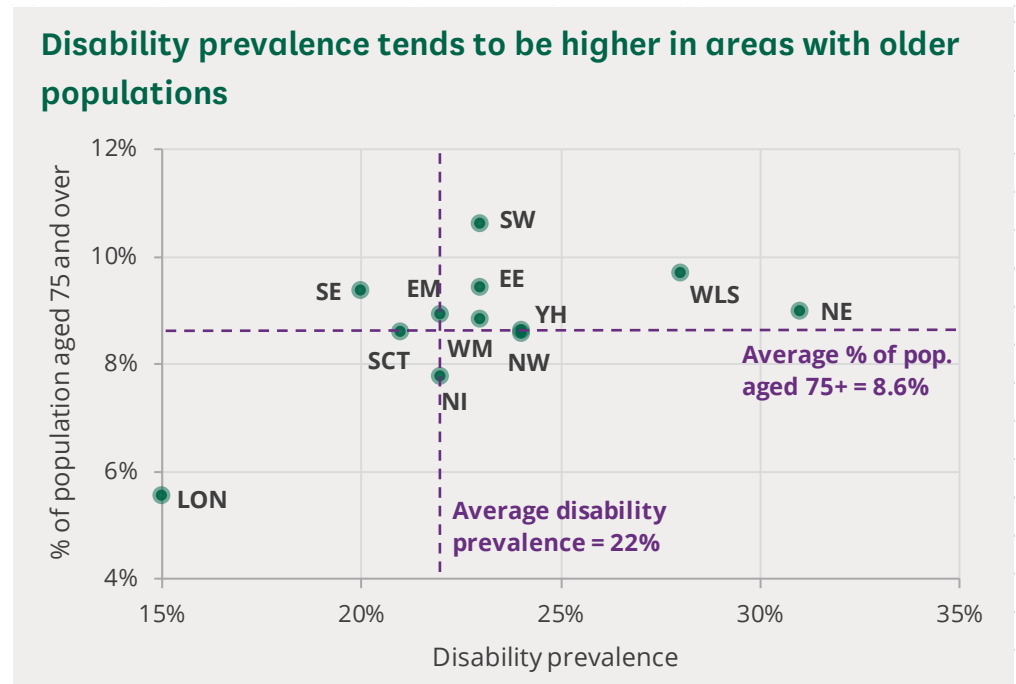


Source: DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.4

Disability prevalence is notably higher in the North East of England than in any other region (31%). London has the lowest proportion of people reporting a disability (15%).

The chart below shows that age distribution within the population appears to be an influencing factor over disability prevalence: the proportion of London's population aged 75 and over (5.6%) is far lower than the UK average (8.6%),

whereas the proportion of people of this age living in Wales exceeds this (9.7%).¹⁷



Source: DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.4; ONS Mid-2020 population estimates, accessed [via NOMIS](#)

However, the region with the highest proportion of its population over the age of 75 is the South West (10.6%), despite disability prevalence here being only slightly above average. Conversely, despite its sizeable disabled population, the proportion of population in the North East aged 75 and over is just above average (9.4%).¹⁸

Some other associated factors may include incomes and levels of deprivation.

2.4 Differences between ethnic groups

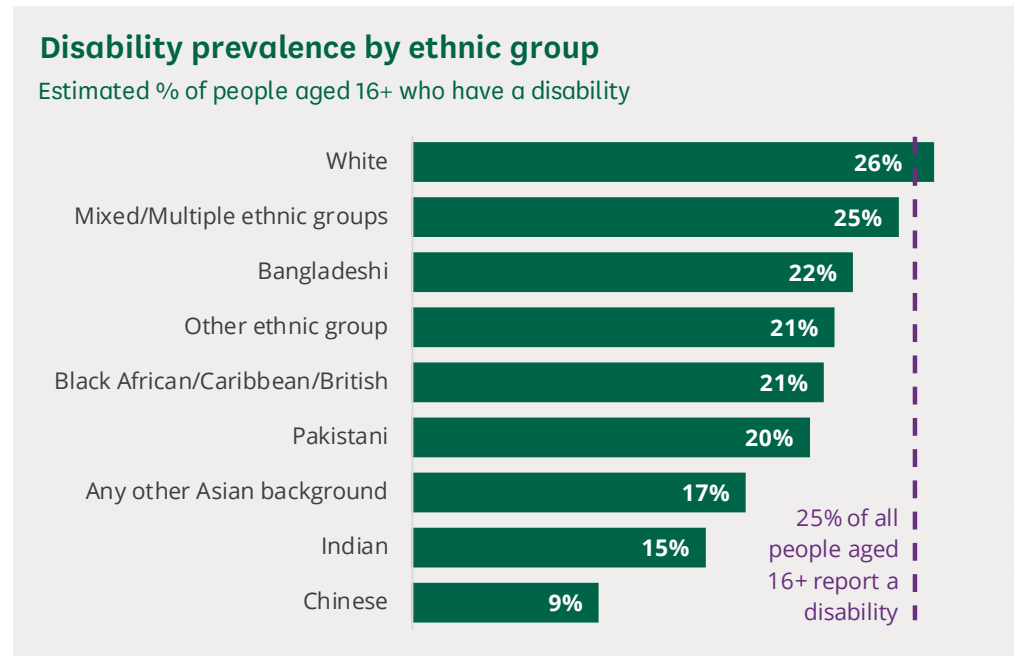
Based on data from the Annual Population Survey, an estimated 10% of disabled people aged 16 and over are from a minority ethnic background. Of these, around 4% are Asian; 3% are Black; 1% are from a Mixed or multiple ethnic background; and 1% identify as part of the ‘Other’ ethnic group. This compares to 12% of the total population aged 16 and over who are from a minority ethnic background.¹⁹

¹⁷ Calculated using ONS Mid-2020 population estimates, accessed [via NOMIS](#)

¹⁸ As above

¹⁹ House of Commons Library analysis of survey microdata. (ONS (2021). Annual Population Survey Three-Year Pooled Dataset, January 2018 - December 2020. [data collection]. 2nd Edition. UK Data Service. SN: 8855, DOI: [10.5255/UKDA-SN-8855-2](#).)

Prevalence of disability varies between ethnic groups. Disability prevalence in the UK is highest among White people: around 26% of people aged 16 and over in this ethnic group report a limiting long-term condition. On the other end of the scale, the Chinese ethnic group has the lowest proportion of people reporting a disability (9%).



Source: House of Commons Library analysis of Annual Population Survey microdata (Three-Year Pooled dataset 2018-2020).

Most minority ethnic groups have a younger age composition compared to the rest of the population, which may account for some differences in the prevalence of disability by ethnicity.

Among the White ethnic group, 21% are aged 65 and over, compared to 6% of people from all other ethnic groups. However, the Bangladeshi and Mixed or multiple ethnic backgrounds have the lowest proportion of people aged 65 and over (2% and 3% respectively), yet some of the highest rates of disability prevalence.²⁰

Overall, it is estimated that one in four people aged 16 and over have a disability.²¹

²⁰ House of Commons Library analysis of survey microdata. (ONS (2021). Annual Population Survey Three-Year Pooled Dataset, January 2018 - December 2020. [data collection]. 2nd Edition. UK Data Service. SN: 8855, DOI: [10.5255/UKDA-SN-8855-2](https://doi.org/10.5255/UKDA-SN-8855-2).)

²¹ As above

3

Outcomes for disabled people

Note: Unless stated otherwise, all data included in this section is sourced from the ONS publication, [Outcomes for disabled people in the UK: 2021](#).

Until recently, data on disabled people in the UK was limited to general prevalence estimates. Recognition of the inequalities experienced by disabled people and the need for good quality data to measure these has gained momentum since the adoption of the United Nations [Convention on the Rights of Persons with Disabilities](#), which was ratified by the UK in 2009.

The Equality Act came into force in 2010, highlighting a need for robust data to monitor equalities for the protected characteristics, which include disability. Together, these developments have led to a drive for improved data disaggregated by disability.

In 2019, the Office for National Statistics (ONS) produced a series of publications examining [Outcomes for disabled people in the UK](#), which it has updated each year since. This information is derived from various household surveys. The purpose of this research is to support a better understanding of the impact of disability, and what causes differences in life experiences between people who are disabled and people who are not.

This section analyses these findings, as well as data from other sources which give a useful insight into the experiences of disabled people.

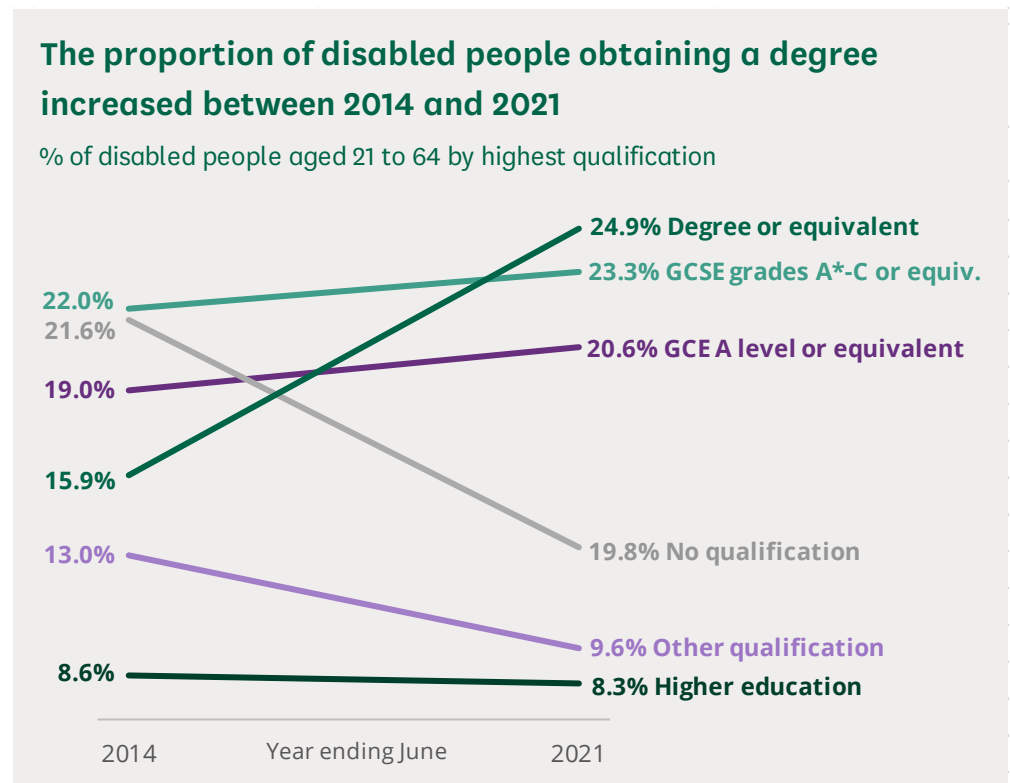
3.1

Education

The proportion of disabled people who had a degree or equivalent as their highest form of qualification increased by 1.9 percentage points in the year to June 2021. This reflects long-term increases in degree attainment, as shown in the chart below.²²

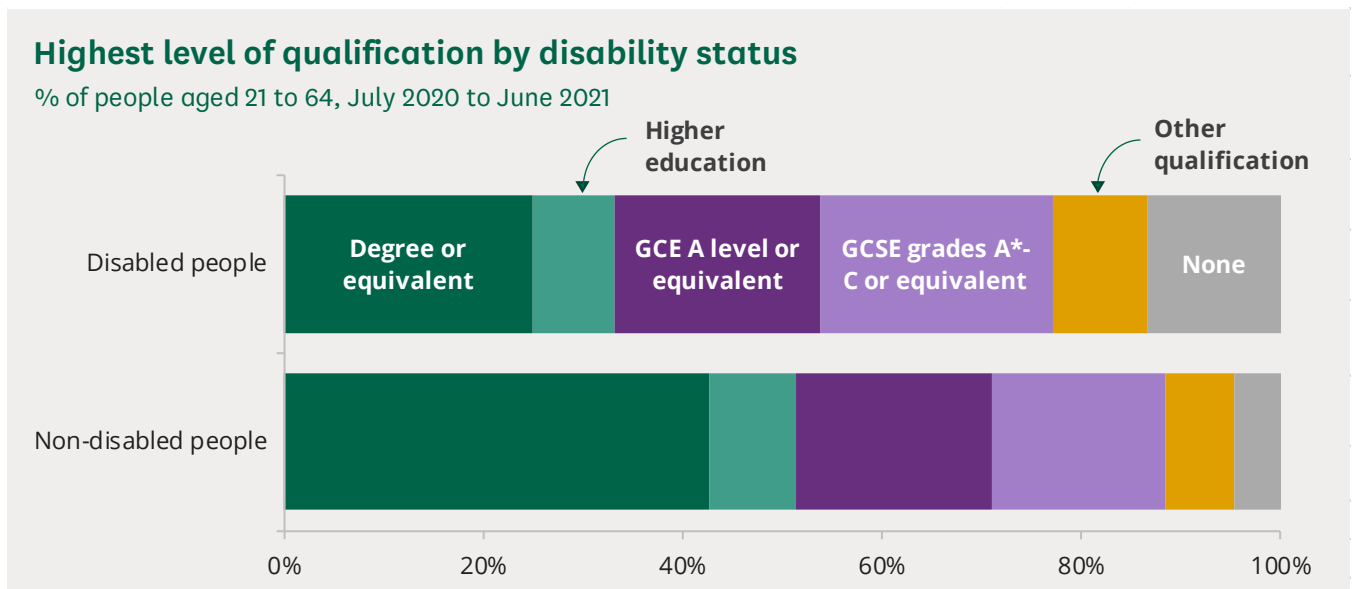
In comparison, the proportion of disabled people with no qualifications has decreased steadily in recent years.

²² The source does not specify whether degrees are undergraduate or postgraduate.



Source: ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and education dataset, Table 1

Despite these positive trends, disparities remain between the educational attainment of disabled people and non-disabled people. The greatest differences are in those attaining degree-level qualifications and those who achieved no qualifications, as shown in the chart below.



Source: ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and education dataset, Table 1

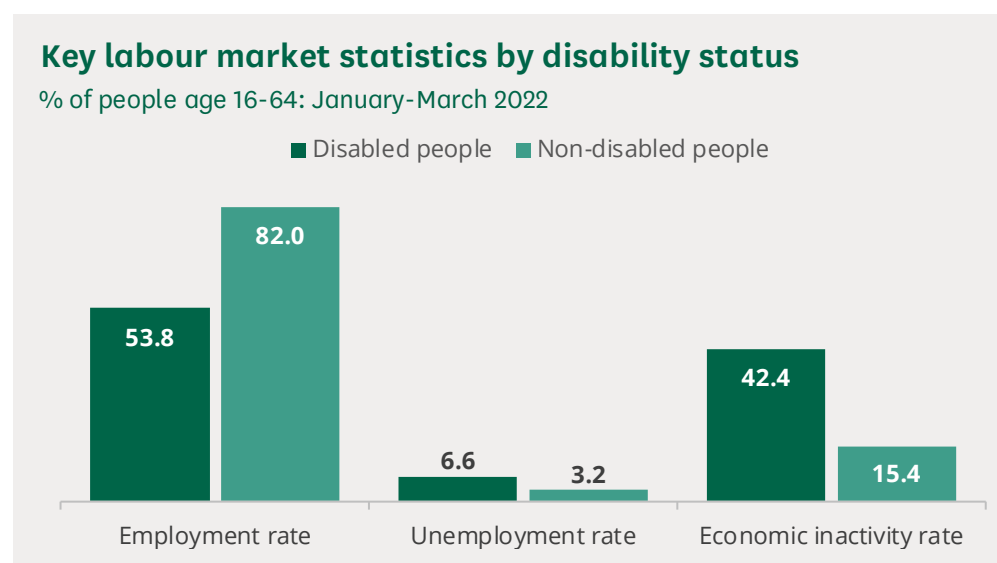
From July 2020 to June 2021, a quarter (24.9%) of disabled people aged 21 to 64 had a degree as their highest qualification, compared with 42.7% of non-disabled people. In addition, 13.3% of disabled people had no qualifications – almost three times the proportion of non-disabled people (4.6%).

Disabled people who reported that their ability to carry out day-to-day activities is “limited a lot” in comparison with “limited a little” had poorer educational outcomes. Those who said they were limited a little were twice as likely to have a degree (31.2% compared to 15.6%), whereas those who said they were limited a lot were three times as likely to have no qualification (22.2% compared to 7.3%).

3.2 Employment

According to the Labour Force Survey, 9.0 million people of working age (16-64) reported they were disabled in January to March 2022, representing 22% of the working age population.²³

The proportion of working age people reporting a disability has increased by four percentage points compared to pre-pandemic levels. In January to March 2019, 7.5 million people of working age (18%) reported they were disabled. Of these, an estimated 4.8 million were in employment. This works out as an employment rate of 53.8%, up from 51.7% in 2019.



Note: The unemployment rate is the proportion of the economically active population (those in work plus those seeking and available to work) who are unemployed.

Source: ONS, [Dataset A08: Labour market status of disabled people](#), 17 May 2022, GSS standard rates

Disabled people were considerably more likely to be economically inactive. While the economic inactivity rate for disabled people was 42.4%, the corresponding figure for those who are not disabled was 15.4%.

The high rate of economic inactivity, alongside a higher unemployment rate (6.6% for disabled people, compared to 3.2% for non-disabled people), explains why disabled people have a low employment rate.

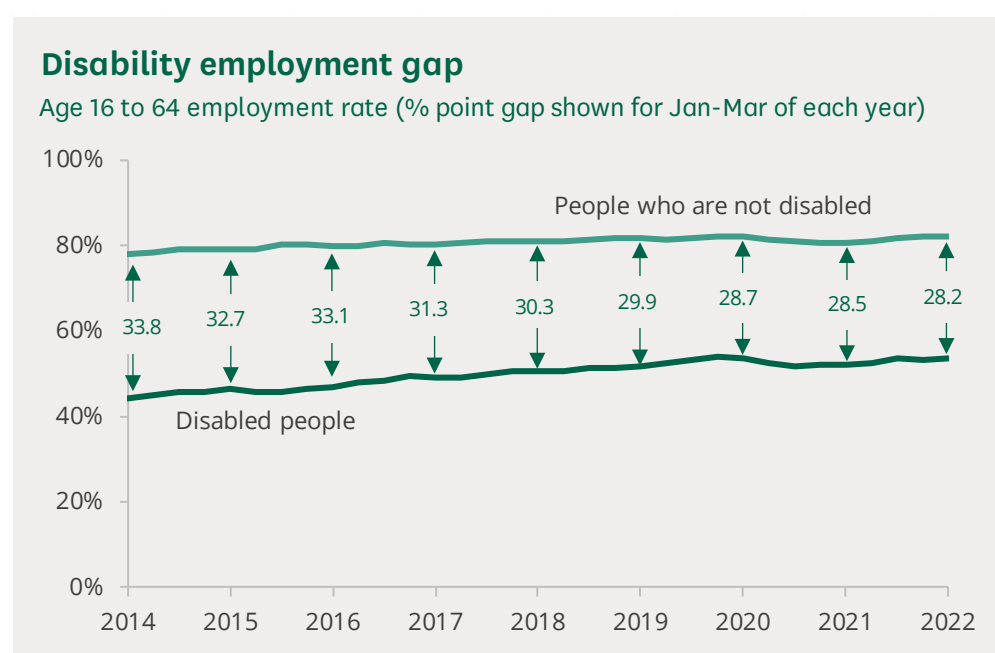
²³ ONS, [Dataset A08: Labour market status of disabled people](#), 17 May 2022, GSS standard levels

Disability employment gap

The disability employment gap is the difference in the employment rate of disabled people and people who are not disabled.

In January to March 2022, the employment rate for disabled people was 53.8% and the rate for people who are not disabled was 82.0%, meaning the gap was **28.2** percentage points.

Between January to March 2014 and January to March 2022, the disability employment gap reduced by 5.6 percentage points. This is because the employment rate for disabled people has been rising faster than the employment rate for people who are not disabled.



Source: ONS, [Dataset A08: Labour market status of disabled people](#), 17 May 2022, GSS standard levels

Disability pay gap

Not only are disabled people less likely to be in work, but they are also paid less, on average, than non-disabled people. The ‘disability pay gap’ – the gap between median pay for disabled employees and their non-disabled counterparts – was **13.8%** in 2021, with disabled people earning almost £2 per hour less.

The gap has widened since 2014, when disabled employees earned 11.7% less than non-disabled employees. However, it was slightly narrower in 2021 than it had been prior to the coronavirus pandemic in 2019 (14.1%).

The chart below shows that in each year since 2014, the disability pay gap has been wider for disabled men than for disabled women. In 2021, median pay for disabled men was 12.4% less than non-disabled men, and median pay for disabled women was 10.5% less than non-disabled women.

The disability pay gap is wider for men than for women

Median pay (£ per hour)



Source: ONS, [Disability pay gaps in the UK: 2021](#), Table 2

The median pay of women is consistently lower than that of men, whether disabled or non-disabled. The largest disparity is between non-disabled men and disabled women: in 2021 the pay gap between these groups was 23.9%.

3.3

Living standards

No breakdown of data on low-income households by disability status is available for 2020/21, so this section uses data for 2019/20.

2 Definitions and measurements

Disposable income may be measured **before** or **after deducting housing costs**. There is more inequality in income after housing costs than before, as poorer households tend to spend a higher share of their income on housing than with higher incomes.

There is no single best measure of poverty and various measures are in common use. Here we use **relative poverty**, which is when a household's income is below 60% of the median in that year.

Families that include a disabled adult or child have significantly lower median incomes than families in which nobody is disabled. This is driven in part by the barriers that many disabled people face in education and in accessing employment (see sections 3.1 and 3.2 above), and by caring responsibilities for some family members.

The most recent data shows that households with a disabled family member had a median weekly income of £406 after housing costs (in 2019/20 prices) – £94 less than households with no disabled members (£500).²⁴

²⁴ Data based on average over three years (2017/18 to 2019/20). DWP, Households Below Average Income, via [Stat-Xplore](#)

Poverty rates are higher among families where at least one member is disabled. In 2019/20, the proportion of people in relative poverty after housing costs was 27% for families where someone is disabled, compared to 19% for people living in families where no one is disabled.²⁵

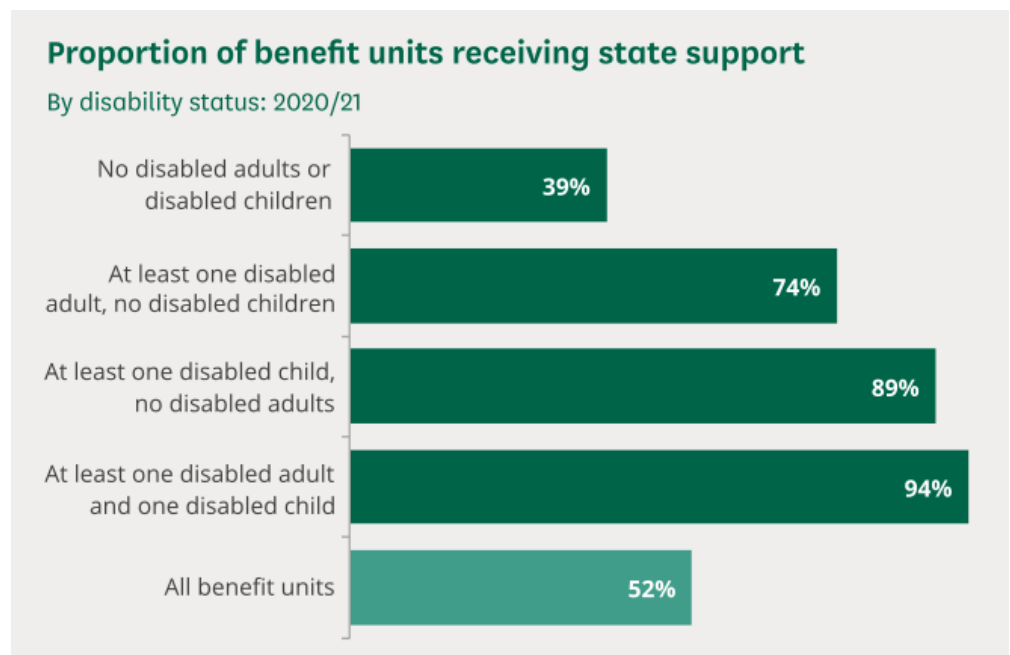
However, these figures take no account of the additional living costs that people with disabilities might face. After discounting income from benefits intended to contribute towards the extra costs of disability (which around 10% of UK families receive), more families with a disabled member are counted as being in relative poverty (31% in 2019/20).²⁶

People living in families where someone is disabled comprised 42% of all people in relative poverty after housing costs in 2019/20. This compares to 34% of the UK population living in families where someone is disabled.²⁷

Households receiving state support

Households that include a disabled person are more likely receive state support (benefits or tax credits).

The chart below shows that most households where at least one member is disabled receive state support. Households that include a disabled child are more likely to be in receipt of state support than those that include a disabled adult but no disabled children.



Note: A benefit unit is defined as a single adult or a married/cohabiting couple and any dependent children.

Source: DWP, [Family Resources Survey: financial year 2020/21](#), disability table 4.9

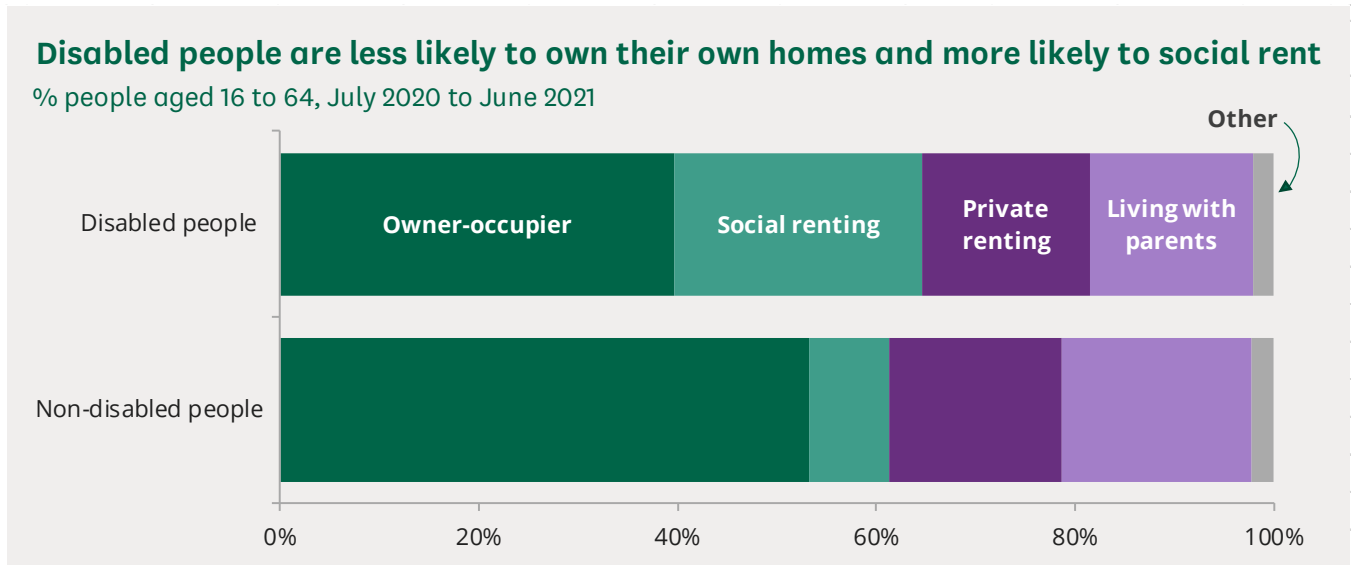
²⁵ DWP, [Households below average income](#): for financial years ending 1995 to 2020, Table 1.7a

²⁶ DWP, [Households below average income](#): for financial years ending 1995 to 2020, Table 7.3

²⁷ DWP, Households Below Average Income, via [Stat-Xplore](#)

3.4 Housing disparities

The two largest disparities between the housing situations of disabled and non-disabled people are between levels of homeownership and social renting (see chart below). In the year to June 2021, just over half (53.3%) of non-disabled people owned their own home, compared to 39.7% of disabled people. Whereas a quarter (24.9%) of disabled people rented social housing, compared to 7.9% of non-disabled people.



Source: ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and housing dataset, Table 1

In 2020/21, over half (54.6%) of households in the social rented sector included at least one person with a limiting long-term illness or disability.²⁸

Disabled people were more likely to live with parents than their non-disabled counterparts (19.2% compared to 16.4%), while non-disabled people were slightly more likely to rent privately (17.4% compared to 16.9%).

There was no significant difference in housing situation between most disability types. However, people on the autistic spectrum, or with severe or specific learning difficulties, were more likely than those with any other main disability type to be living with parents (76.0% and 65.9% respectively). People with these impairments were also less likely to own their own home (3.8% and 8.0% respectively).²⁹

One in five households including someone with a limiting long-term illness or disability whose condition made it necessary to have adaptations in their home considered their accommodation to be unsuitable in 2019/20.³⁰

²⁸ DLUHC, [English Housing Survey 2020 to 2021](#), 9 December 2021

²⁹ ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and housing dataset, Table 4

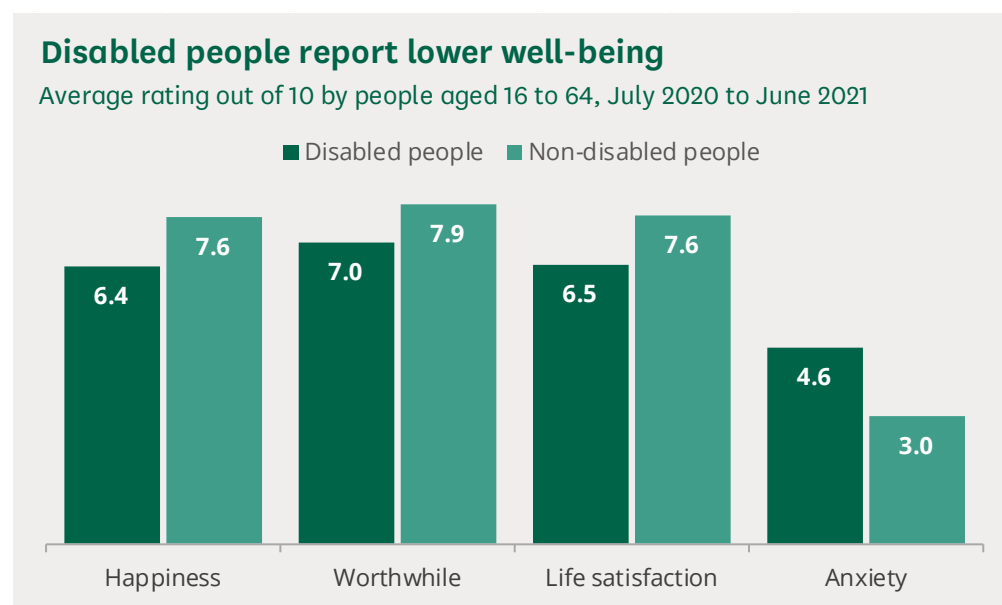
³⁰ DLUHC, [English Housing Survey 2019 to 2020: home adaptations](#), 8 July 2021

3.5

Well-being and loneliness

The Annual Population Survey uses four measures of personal well-being: life satisfaction, feeling the things done in life are worthwhile, happiness, and anxiety. Respondents are asked to rate each on a scale from 0 to 10.

The chart below shows that, on average, disabled people have poorer ratings than non-disabled people across all four measures. The greatest disparity is in average levels of anxiety experienced.



Note: Higher numbers equate to poorer well-being when considering the anxiety measure.

Source: ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and well-being dataset, Table 1

Disabled people also report higher levels of loneliness: 15.1% of disabled people reported feeling lonely “often or always” in 2020/21, compared to 3.6% of non-disabled people.³¹

Those with more severe conditions, who reported being limited a lot in their day-to-day activities, were more than twice as likely to report feeling lonely “often or always” than those who said they were limited a little (25.5% and 10.5% respectively).³²

A higher proportion of younger adults aged 16 to 24 reported feeling lonely “often or always” than those in older age groups, whether disabled or not.³³

A similar trend is seen when respondents were asked to rate their level of anxiety: the difference between disabled and non-disabled people becomes smaller in older age groups. However, differences in average ratings for

³¹ ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and loneliness dataset, Table 1

³² As above, Table 2

³³ As above, Table 3

happiness, life satisfaction and feeling that things done in life are worthwhile between disabled and non-disabled people have little variation as people get older.³⁴

3.6

Data collection for the 2020/21 Crime Survey for England and Wales was impacted by the coronavirus pandemic, so all data used in this section is for 2019/20.

Victims of crime

Note: This section covers crime in England and Wales only.

Data on crime in Scotland are available from the [Scottish Crime and Justice Survey](#), and in Northern Ireland from the [Northern Ireland Safe Community Survey](#). It should be noted that these estimates may not be directly comparable with those for England and Wales.

In the 12 months to March 2020, the Crime Survey for England and Wales (CSEW) found that 20.8% of disabled adults aged 16 and over had experienced some form of crime, compared with 19.0% of non-disabled adults. The disparity between disabled and non-disabled children was starker, with disabled children aged 10 to 15 twice as likely to have been the victim of a crime (12.0% compared to 6.3%).³⁵

The CSEW also collects information on perceptions of crime and policing. From April 2019 to March 2020:

- 51.1% of disabled adults said their local police were doing a good or excellent job, compared with 56.2% of non-disabled adults.³⁶
- 63.5% of disabled adults said they felt "very or fairly" safe when walking alone after dark, compared with 80.6% of non-disabled adults.³⁷
- 55.7% of disabled adults said they perceived local crime to have gone up "a little" or "a lot" in the past few years, compared with 50.8% of non-disabled adults.³⁸

Domestic abuse and sexual assault

Data on domestic abuse and sexual assault are collected in the CSEW self-completion module, rather than through face-to-face interviews, and so is not included in the main crime estimate. Therefore, these estimates cannot be compared with the measure of overall crime.

³⁴ ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and well-being dataset, Table 2

³⁵ ONS, [Crime in England and Wales: Annual Trend and Demographic Tables](#), year ending March 2020, Tables D1 and D5

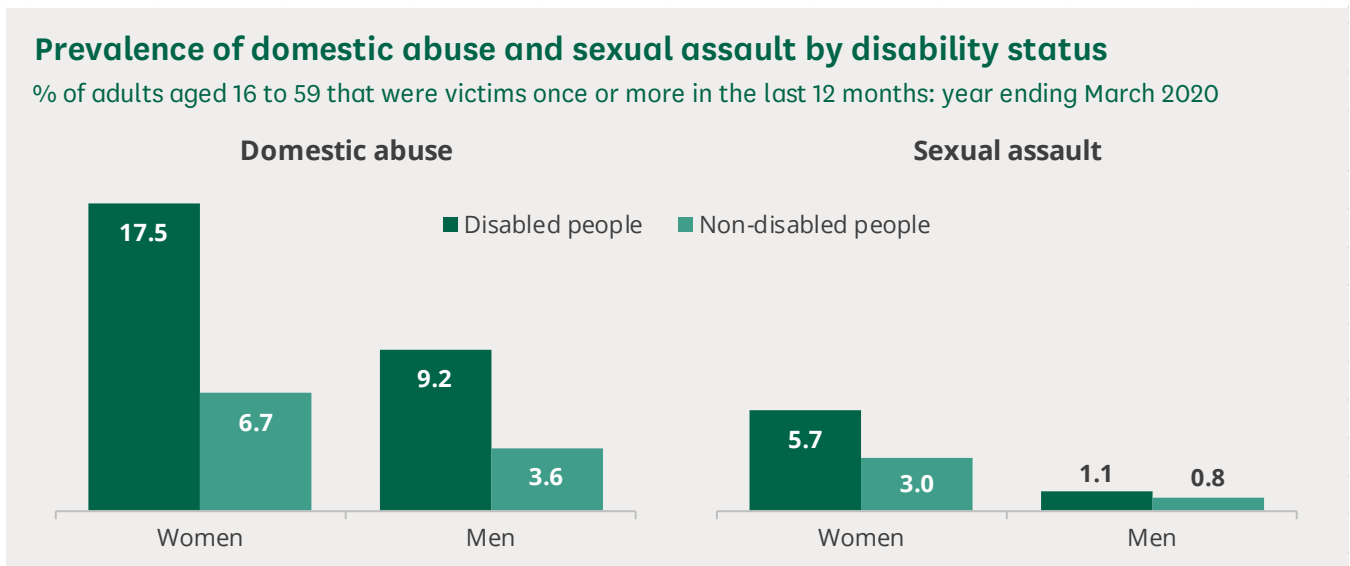
³⁶ ONS, [Crime in England and Wales: Annual Supplementary Tables](#), year ending March 2020, Table S2

³⁷ As above, Table S38

³⁸ As above, Table S29

Results from the CSEW indicate that disabled people are more likely to be victims of domestic abuse. From April 2019 to March 2020, it is estimated that around one in seven disabled people (14.3%) experienced domestic abuse on at least one occasion, compared to one in 20 non-disabled people (5.1%).³⁹

The chart below shows that disabled women were more than twice as likely to experience domestic abuse than non-disabled women (17.5% compared to 6.7%). A similarly wide disparity was reported between disabled and non-disabled men (9.2% compared to 3.6%).



Source: ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and crime dataset, Tables 7 and 11

Disabled adults were twice as likely as those without a disability to report having experienced sexual assault in this last year (3.7% compared to 1.9%). Women were more likely to have experienced sexual assault than men, regardless of disability status.

³⁹ ONS, [Outcomes for disabled people in the UK: 2021](#), Disability and crime dataset, Tables 6

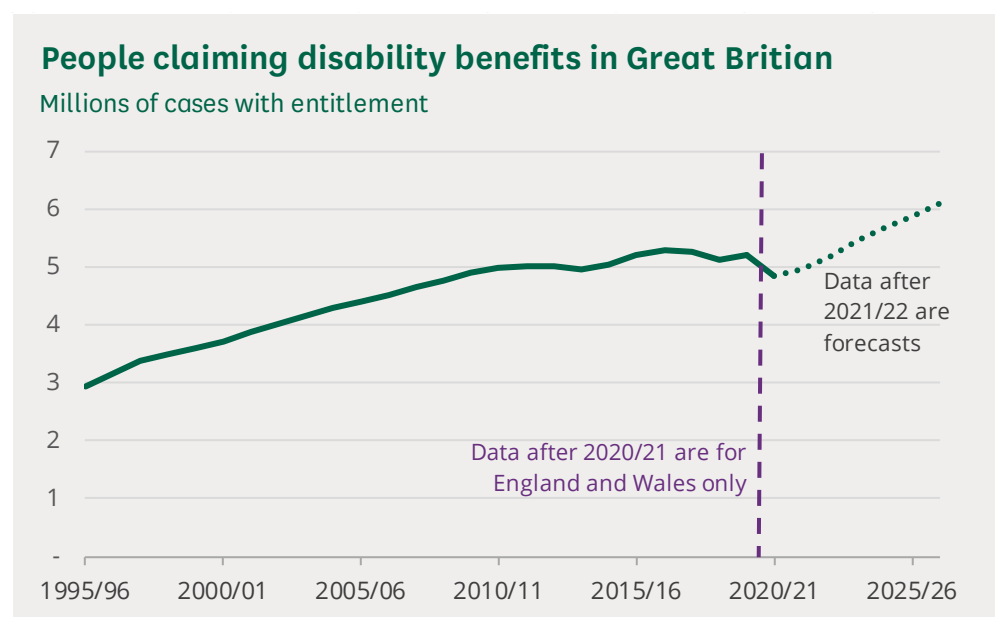
4 Disability benefits

There are three Department for Work and Pensions (DWP) benefits aimed at helping with the extra costs associated with ill health and disability:

- Disability Living Allowance (DLA)
- Personal Independence Payment (PIP)
- Attendance Allowance (AA)

Disability benefit caseloads from the DWP can indicate of trends in disability prevalence. Although it is important to note that not every person who is considered disabled under the Equality Act claims or qualifies for a disability benefit.

The number of people entitled to receive an ‘extra costs’ disability benefit in Great Britain has risen over time, from 2.9 million in 1995/96 to 5.2 million in 2019/20, and is expected to continue rising steadily.



Note: Figures up to and including 2019/20 present data for the whole of Great Britain. Figures from 2020/21 are for England and Wales only (purple line). Figures from 2021/22 are forecasts (dotted line).

Source: DWP, [Benefit expenditure and caseload tables - Autumn Budget 2021](#)

Executive competence for extra-costs disability benefits in Scotland was transferred to the Scottish Government on 1st April 2020 (see the box below for further detail). From this point, Scottish caseload data is no longer included in the DWP’s annual benefit caseload tables, causing the slight decline in the number of claimants seen in 2020/21 in the chart above.

However, caseload data for the whole of Great Britain accessed via Stat-Xplore indicates there were 5.7 million people claiming one of the three main disability benefits at the end of November 2021.⁴⁰ This represents around 9% of the population.⁴¹

Substantially fewer people receive a disability benefit than report a disability. This could reflect benefit eligibility criteria being more narrowly defined than the Equality Act definition of disability. It may also indicate less-than-complete take-up of disability benefits. It is likely that some disabled people are unaware that they would be eligible for support, while others may be deterred from claiming by the burden of the application process.⁴²

3 Devolved benefits in Scotland and Northern Ireland

Disability benefits, and most other social security powers, are devolved (or “transferred”) formally to Northern Ireland. Although by long-standing convention, Northern Ireland maintains parity with the social security system in Great Britain.

Until recently, social security was almost entirely a reserved matter in Great Britain, but the [Scotland Act 2016](#) devolved significant welfare powers to the Scottish Parliament. The Scottish Government is currently introducing a new set of extra-costs disability benefits as direct replacements for DWP benefits. These will be delivered by a new agency, Social Security Scotland.

It began full rollout of Child Disability Payment – which is replacing Disability Living Allowance for children – in November 2021. Adult Disability Payment – which is replacing Disability Living Allowance for adults and Personal Independence Payment – is currently being piloted, with national rollout scheduled for August. Pension Age Disability Payment will replace Attendance Allowance, although a rollout schedule for this benefit is yet to be announced.

For more information on the devolution of social security powers, see the Commons Library briefing on [Social security powers in the UK](#).

4.1

Main disability categories

Data on disability benefit claimants, available via the DWP’s [Stat-Xplore](#), include a breakdown by main disability or health condition. These differ from the impairment types discussed in section 2.1, which are used by most official statistics in accordance with the Government Statistical Service’s [Impairment harmonised standard](#).

⁴⁰ [DWP Stat-Xplore](#)

⁴¹ Calculated using ONS Mid-2020 population estimates, accessed [via NOMIS](#)

⁴² OBR, [Welfare trends report – January 2019](#), p30-31

PIP claimants – who are mostly of working age – are grouped into 20 broad disability categories. In November 2021, 36% of PIP claimants had a psychiatric disorder (a mental health disorder) as their main disability. This corresponds with the high levels of reported mental health impairments among this age group (for further detail, see section 2.1). A further 32% of PIP claimants had a musculoskeletal disease as their main disability, and 13% had a neurological disease.

AA and DLA claimants are classified by “main disabling conditions”. The most common conditions among AA claimants – all of whom are over State Pension age – were arthritis (31%), dementia (13%) and heart disease (7%).⁴³

Among DLA claimants, learning difficulties (27%) were most common, followed by arthritis (16%) and behavioural disorders (8%). The DLA caseload is predominantly split between children and people of State Pension age. Most claimants with learning and behavioural disorders as their main condition are children, and almost all of those with arthritis are pensioners.

4.2 Variations in caseload by local authority

The table below and map on the following page analyse the distribution of disability benefit claimants by local authority.

Proportion of the population claiming disability benefits, November 2021

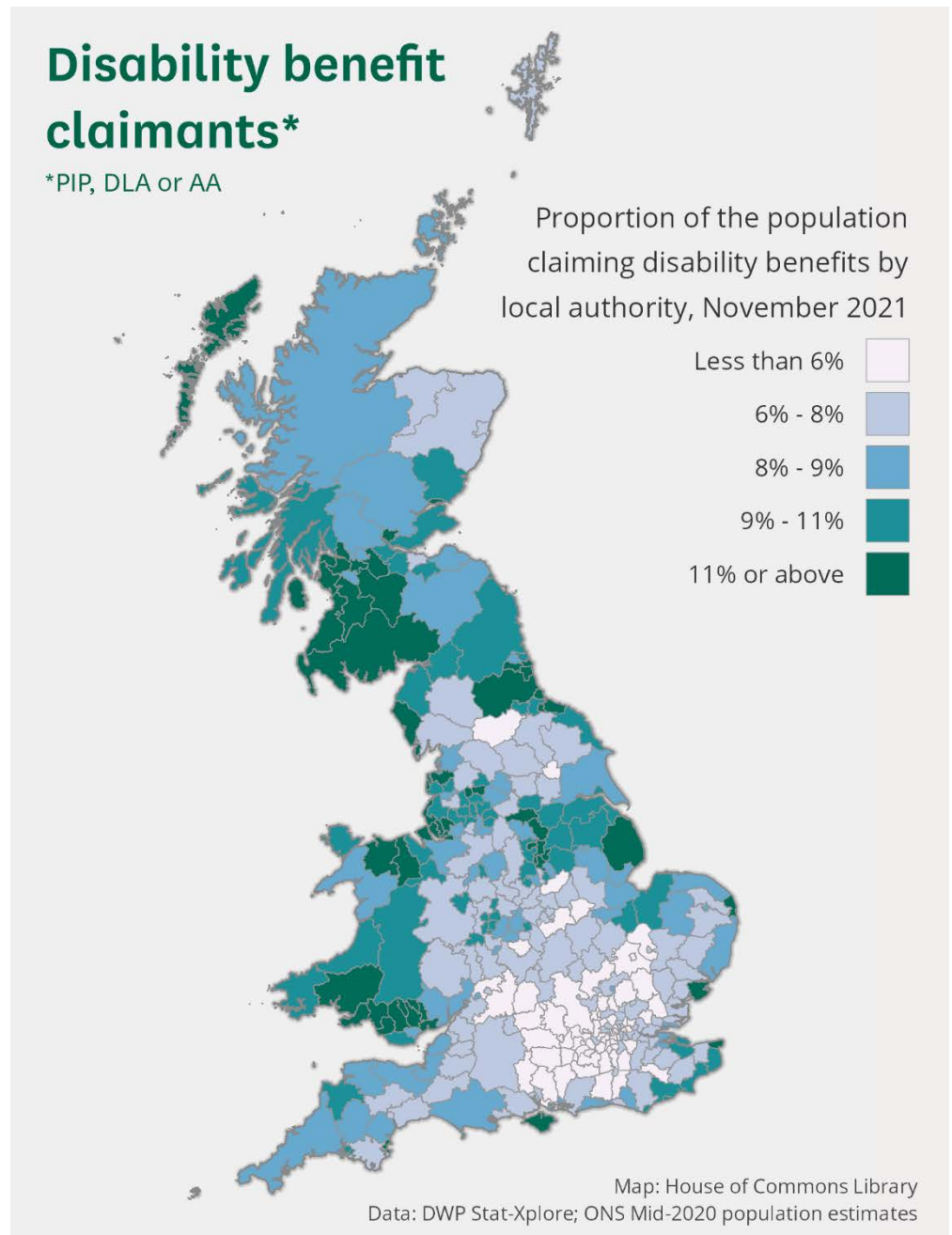
Local authorities with the lowest proportion			Local authorities with the highest proportion		
Local authority	Nation/region	%	Local authority	Nation/region	%
City of London	London	2.8%	Neath Port Talbot	Wales	16.2%
Richmond upon Thames	London	4.3%	Blaenau Gwent	Wales	15.8%
Isles of Scilly	South West	4.4%	Merthyr Tydfil	Wales	15.4%
Wokingham	South East	4.5%	Inverclyde	Scotland	15.4%
Hart	Soth East	4.6%	Knowsley	North West	15.0%
Kingston upon Thames	South West	4.8%	Blackpool	North East	14.8%
Elmbridge	South East	4.8%	Caerphilly	Wales	14.6%
Guildford	South East	4.8%	West Dunbartonshire	Scotland	14.5%
Wandsworth	London	4.9%	Rhondda Cynon Taf	Wales	14.1%
Windsor & Maidenhead	South East	4.9%	Hartlepool	North West	14.1%

Source: [DWP Stat-Explore](#); ONS Mid-2020 population estimates, accessed [via NOMIS](#)

Local authorities coloured in the two darkest shades of green on the map have higher extra costs disability benefit caseloads than the national average (8.7%).

⁴³ Excludes claimants whose main disabling condition is unknown.

Areas with the highest proportion of their population claiming extra costs disability benefits tend to be concentrated in Wales and Scotland, as well as in the North East and North West of England. Further pockets of high claimant counts are located in the East Midlands and the East of England.



The high concentration of disability benefit claimants in Scotland does not correlate with the proportion of the population who reported a disability in the 2020/21 Family Resources Survey, which was slightly below the national average (see section 2.3 for further detail).

The lowest levels are found in the South of England. The proportion of the population claiming disability benefits does not reach 8% in any of the London boroughs.

5 Transport

Transport data tends to be published separately for each UK nation. Limited data on disability and transport has been published for Wales.

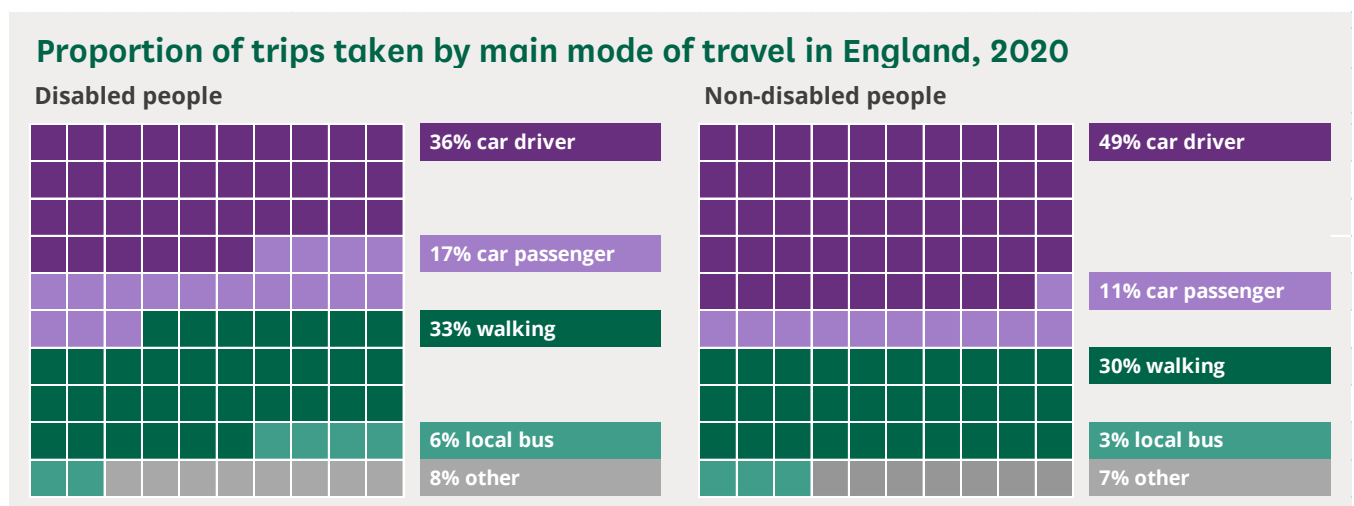
5.1 Disability and transport in England

The Department for Transport recently began publishing [transport related disability and accessibility statistics for England](#), drawn from different data sources.⁴⁴

Here, a trip is defined as a one-way course of travel with a single main purpose.

In 2020, disabled adults aged 16 and over in England made 28% fewer trips than non-disabled adults – 581 trips on average per year, compared to 803 trips respectively. Those who reported their ability to carry out day-to-day activities was limited a lot took fewer trips than those who said they were limited a little (485 trips and 664 trips respectively).⁴⁵

The chart below shows that both disabled and non-disabled adults rely predominantly on car travel: this accounted for 53% of trips taken by disabled people and 61% taken by non-disabled people in 2020. In around a third of trips where a car was the main mode of transport, disabled adults travelled as a passenger, compared to around one fifth for non-disabled adults.



Source: DfT, [National Travel Survey: 2020](#), Table NTS0711

⁴⁴ DfT, [Transport: disability and accessibility statistics](#) (collection)

⁴⁵ DfT, [Transport: disability and accessibility statistics, England: 2020](#), 22 September 2021

The second most common mode of transport for both groups was walking (accounting for 33% of trips taken by disabled people and 30% taken by non-disabled people).

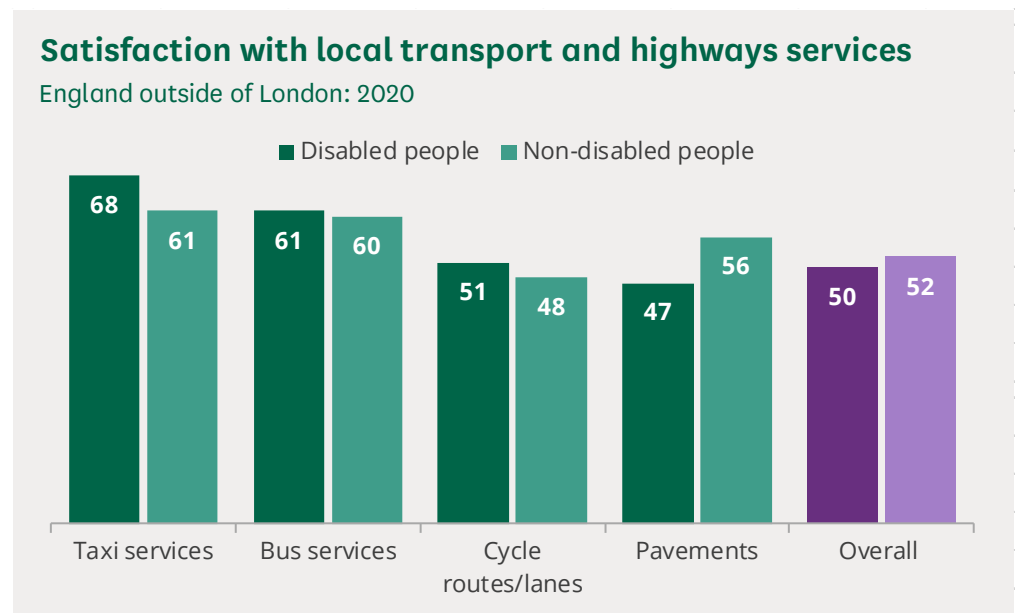
The coronavirus pandemic had a substantial impact on travel trends in 2020, and the number of trips taken by both disabled and non-disabled people reduced by around a fifth compared to 2019.

Satisfaction with local services

The National Highways and Transport Public Satisfaction Survey collects public perspectives on highway and transportation services.⁴⁶

The 2020 survey was conducted in 111 local authorities.

In the areas surveyed outside of London in 2020, on average, overall satisfaction rates with transport and highways services were 50% for disabled people and 52% for non-disabled people. This represents an increase compared to 2019, when rates were 47% and 50% respectively.



Note: People living in care homes and other such community living environments are not captured through the survey, which may impact on the satisfaction rates of the disabled.

Source: The National Highways and Transport Public Satisfaction Survey, 2020

As the chart above shows, disabled people were slightly more satisfied with local bus and taxi services, and cycle routes and lanes, but notably less satisfied with pavements compared to non-disabled people.

⁴⁶ The full results of this survey are not publicly available. A summary of the results is provided in Dft, [Transport: disability and accessibility statistics, England: 2020](#), 22 September 2021, p5-6

5.2 Disability and transport in Scotland

Transport Scotland's [Disability and Transport: Findings from the Scottish Household Survey](#) provides analysis of the experiences of disabled travellers. This uses pooled data for 2015 to 2019.

On average, disabled people in Scotland took 595 journeys per year, compared to 756 taken by people who are not disabled. Those whose condition reduces their ability to carry out everyday activities a lot have an even lower average number of journeys (496).⁴⁷

The most common mode of travel for both disabled and non-disabled people in Scotland is by car, accounting for 60% and 66% of journeys respectively. When travelling by car, disabled people were more likely to travel as a passenger (18%) than non-disabled people (12%).⁴⁸

Disabled people were more likely to walk than non-disabled people (24% compared to 21%) and to travel by bus (11% compared to 7%), but less likely to travel by rail (1% compared to 3%).⁴⁹

5.3 Disability and transport in Northern Ireland

The annual [Northern Ireland Transport Statistics](#) publication includes data on travel by mobility status, sourced from the Travel Survey for Northern Ireland.

The definition of having a mobility difficulty used here is based on having difficulties travelling on foot, by bus and/or coach, or by train. Adults who reported only having difficulties driving a car are classified as having no mobility difficulty. This differs from the definition of disability used throughout the rest of this paper (see Box 1 in section 1.1 for further information).

From 2017 to 2019 (the latest data available), 18% of adults aged 16 and over in Northern Ireland reported having a mobility difficulty.

On average, those with a mobility difficulty made 574 journeys per year, 42% less than those without a mobility difficulty (997 journeys per year).⁵⁰

Most journeys were made by car for both those with and without a mobility difficulty. However, a higher proportion of all journeys made by those with a

⁴⁷ Source gives average number of journeys per day. This has been converted to average per year to enable comparison with data for England and Northern Ireland. Transport Scotland, [Disability and Transport: Findings from the Scottish Household Survey](#), 15 July 2021

⁴⁸ As above

⁴⁹ As above

⁵⁰ NISRA, [Northern Ireland Transport Statistics 2020-21](#), 30 September 2021, Table 3.5

mobility difficulty were by car (76% of all journeys made, compared to 71% for those without).

Walking accounted for 11% of journeys for those with a mobility difficulty, which was lower than the proportion made by those without a mobility difficulty (19%).⁵¹

5.4 Blue badges and concessionary travel

Blue Badges help people with disabilities or health conditions park closer to their destination. As of 31 March 2021, there were 2.7 Blue Badges held across England, Scotland and Northern Ireland.⁵² This represents 4.3% of the total population.⁵³ Data is not available for Wales.

Concessionary travel passes allow users to travel for free or at discounted rates on most bus services and some rail services. In 2020/21 there were around 900,000 disabled passes in circulation in England.⁵⁴

In Northern Ireland, around 16,000 disabled passes were held on 31 March 2021.⁵⁵ The latest data available for Wales is from the end of March 2020, when around 55,000 concessionary passes had been issued to disabled people.⁵⁶ Data is not available for Scotland.

The Disabled Persons Railcard allows a holder to save up to 1/3 on rail travel in Great Britain. There were 218,500 Disabled Persons Railcards in circulation at the end of March 2022.⁵⁷

⁵¹ As above, Table 3.6

⁵² DfT, [Blue Badge scheme statistics, England: 2021](#), 25 January 2022; NISRA, [Northern Ireland Transport Statistics 2020-21](#), 30 September 2021; Transport Scotland, [Blue Badge](#) [undated]

⁵³ Calculated using ONS Mid-2020 population estimates, accessed [via NOMIS](#)

⁵⁴ DfT, [Concessionary Travel Statistics England 2020/21](#), 3 November 2021

⁵⁵ NISRA, [Northern Ireland Transport Statistics 2020-21](#), 30 September 2021, Table 3.1

⁵⁶ Welsh Government, [A New Wales Transport Strategy: Transport data and trends](#) (PDF), 17 November 2020, p17

⁵⁷ Office of Rail and Road, [Disabled Persons Railcards statistics](#), 7 July 2022

6 The impact of the coronavirus pandemic

The pandemic has been a particularly challenging time for disabled people in the UK. People with disabilities have faced increased risk of ill-health and death from Covid-19 when compared to the rest of the population, while also experiencing more acutely negative social impacts caused by isolation.

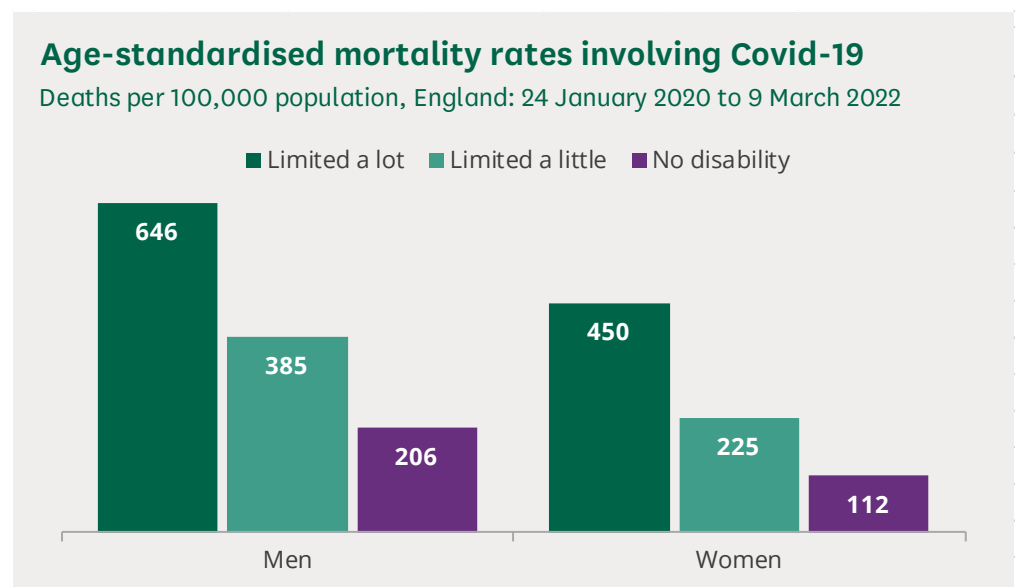
While the long-term effects of the pandemic are not yet known, data so far also appears to suggest that disability prevalence may have risen.

6.1 Increased risk of death from Covid-19

The ONS examined deaths occurring up to March 2022, linked to a person's disability status as recorded in the 2011 Census, to produce [estimates of Covid-19 mortality risk by disability status](#) for England. It found that people with disabilities had an elevated risk of death from the disease across all three waves of the pandemic.⁵⁸

Age-standardised mortality rates are used to allow comparisons between populations that may contain different proportions of people of different ages.

The chart below shows annualised age-standardised mortality rates involving Covid-19 for men and women aged between 30 and 100.



Note: Figures based on death registrations up to 23 March 2022 of people aged 30 to 100 years.

Source: ONS, [Updated estimates of coronavirus \(COVID-19\) related deaths by disability status, England, 9 May 2022](#)

⁵⁸ ONS, [Updated estimates of coronavirus \(COVID-19\) related deaths by disability status, England: 24 January 2020 to 9 March 2022](#), 9 May 2022

This shows the risk of death increases with disability severity: those who had reported being limited a lot in their day-to-day activities in the 2011 Census had a higher rate of death than those who said they were limited a little.

Disabled men whose day-to-day activities were limited a lot in the 2011 census were 3 times more likely to die from Covid-19 than non-disabled men. For disabled men whose day-to-day activities were limited a little, the mortality rate was double that of non-disabled men.

The mortality rate for disabled women who had reported being limited a lot was four times higher than for non-disabled women, while the rate for those who had reported being limited a little was twice as high as non-disabled women.

6.2 Social impacts of Covid-19 on disabled people

The ONS has also analysed [the social impact of the coronavirus on disabled people in Great Britain](#), from March 2020 to December 2021.

This showed that disabled people reported lower levels of well-being than non-disabled people throughout all stages of the pandemic. In particular, disabled people more frequently reported:

- feeling stressed or anxious (in December 2021, this was reported by 79% of disabled people, compared to 68% of non-disabled people);
- worsening mental health (50% compared to 31%);
- feeling like a burden on others (23% compared to 7%);
- feeling lonely (40% compared to 18%); and
- experiencing depressive symptoms (37% compared to 9%).⁵⁹

Alongside fears about contracting the virus and the disproportionate number of deaths among the disabled population, several other factors have affected the mental health and wellbeing of disabled people during the pandemic. For example, an academic study found that disruption to regular health and social care services and the closure of sources of social support, like day centres, led to [a loss of independence and increased dependency on caregivers](#).⁶⁰

⁵⁹ ONS, [Coronavirus and the social impacts on disabled people in Great Britain](#), 2 February 2022

⁶⁰ Shakespeare T, Watson N, Brunner R, et al. [Disabled people in Britain and the impact of the COVID-19 pandemic](#) [published online ahead of print, 2021 Aug 11]. Soc Policy Adm. 2021;10.1111/spol.12758. doi:10.1111/spol.12758

For people with intellectual and mental health disabilities, the loss of their daily routine and opportunities to engage in meaningful activities led to isolation, anxiety, and a loss of confidence.⁶¹

6.3 Long Covid and other long-term health conditions

A further legacy of the coronavirus pandemic is ‘long Covid’ – a term used to describe ongoing symptoms following Covid-19 infection which persist for more than four weeks. The ONS has produced [estimates of the prevalence of self-reported long Covid](#), using data from the Covid-19 Infection Survey.

According to the latest data, an estimated two million people in the UK were experiencing long Covid as of 4 June 2022, representing 3% of the population. Of these, around 800,000 people had symptoms that had lasted for more than a year and 400,000 had symptoms lasting for more than two years.⁶²

In a landmark decision in May 2022, a Scottish Employment Tribunal ruled that an employee suffering from symptoms of long Covid was disabled for the purposes of the Equality Act 2010. In its judgment, the panel concluded the claimant’s condition had a “substantial and long-term adverse effect” on his ability to carry out normal day-to-day activities.⁶³

With a growing number of people reporting long-term ongoing symptoms of Covid-19, disability prevalence in the UK could be set to rise further.⁶⁴

In its [2022 Welfare trends report](#), the Office for Budget Responsibility (OBR) predicted that spending on disability benefits will rise in the period up to 2024/25. This reflects growing numbers of people claiming these benefits, which is driven in part by longer-term trends of rising disability prevalence but has been further affected by the pandemic.⁶⁵ The OBR notes that economic inactivity due to long-term sickness has risen since the start of the pandemic. It expects this to remain higher than the pre-pandemic position.⁶⁶

⁶¹ Shakespeare T, Watson N, Brunner R, et al. [Disabled people in Britain and the impact of the COVID-19 pandemic](#), p109 [published online ahead of print, 2021 Aug 11]. Soc Policy Adm. 2021;10.1111/spol.12758. doi:10.1111/spol.12758

⁶² ONS, [Prevalence of ongoing symptoms following coronavirus \(COVID-19\) infection in the UK](#), 7 July 2022

⁶³ [Mr T Burke v Turning Point Scotland: 4112457/2021](#)

⁶⁴ Disability Rights UK, [Covid causing huge rise in Disability](#), 7 April 2021

⁶⁵ OBR, [Welfare trends report – May 2022](#), p9

⁶⁶ As above, p32

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