

National Disability Survey 2006

Volume 2

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Background

In 2004, the Irish Government decided that the Central Statistics Office (CSO) would conduct a National Disability Survey (NDS) after the 2006 Census of Population. The main purpose of the NDS was to establish the severity and impact of disability.

The National Disability Authority (NDA) had commissioned research in 2003 to develop and pilot an appropriate research instrument to establish the prevalence and impact of disability in Ireland. This pilot study formed the basis for the Government decision for the CSO to conduct a National Disability Survey.

Two questions on disability had been included in the Irish Census of Population for the first time in 2002. In 2006 two slightly more detailed questions on disability were included on the Census form. The NDS sample was selected based on responses to these questions.

The NDS questionnaires were based on the *social model of disability* which defines disability as the outcome of the interaction between a person with an impairment and the environmental and attitudinal barriers s/he may face. The questionnaires were broadly divided into two parts. Section 1 of the questionnaire collected a range of data on nine specific disability types including: level of severity, age of onset of disability, aids used or needed to assist with daily life, cause of the disability and in some cases frequency of occurrence. The rest of the questionnaire dealt with topics related to activity and participation such as education, employment, transport and the built environment as well as collecting some basic demographic information.

The first set of results from the NDS focused on the nine disability types examined in the NDS. Chapter 1 discussed the overall estimated prevalence of disability arising from this analysis. Chapter 2 profiled the different disability types by severity and by demographic variables such as age, sex and region. Chapter 3 contained an overview of each of the nine disability types with more detailed breakdowns by age and sex, and analyses of disability specific variables such as aids for particular disability types and causes of disabilities.

This report presents data on areas of participation such as education, work, transport, the built environment and social participation for people with a disability. Chapter 1 outlines the contents of the report in more detail and examines issues that should be taken into account by the reader in interpreting the detailed tables.

Executive Summary

This is the second report from the National Disability Survey. The situation of people with a disability is examined in the following nine areas: Caring and help from other persons; Attitudes of other people; Transport; Built environment accessibility; Education; Work and training; Social participation; Sport and exercise; and some general issues such as use of medication, health and smoking.

The results in this report relate to the 8.1% of the population who reported a disability in both the Census of Population and in the National Disability Survey. The main findings are highlighted here and presented in more detail in Chapters 2 to 10.

Caring and help from other people

- ♦ 35% of persons with a disability had difficulty taking a bath or shower by themselves. A similar proportion of adults with a disability (34%) had difficulty staying by themselves for a few days.
- People living in nursing homes, hospitals and children's homes had higher levels of difficulty doing everyday activities. For example, 86% had difficulty taking a bath or shower by themselves compared with 31% of persons in private households.
- Around 56% of persons with a disability in private households received help with their everyday activities. The most common source of help was from family members who lived with the person 42% of persons in private households who had a disability received such help.

Attitudes of other people

- ♦ Three-quarters (76%) of adults with a disability never avoided doing things because of the reactions of other people, 17% sometimes avoided doing things and 7% frequently or always avoided doing things. Older people were less affected by the attitudes of others, 89% of persons aged 75 & over never avoided doing things. Around 17% of persons with Emotional, psychological & mental health as their main disability frequently or always avoided doing things.
- ♦ A high proportion of adults with a disability in private households felt supported by the attitudes of their Family (90%), Health and care staff (87%) and Friends (79%).

Transport

- ♦ Around 18% of persons with a disability said that they did not drive a car because of their disability while 8% said that they did not regularly travel as a passenger because of their disability. Difficulty getting in and out of a car was the reason cited by 47% of adults in private households who did not use or who had difficulty using a car due to their disability. The next most common reason was needing someone to accompany them (44%).
- Difficulty getting on and off public transport vehicles was given by 16% of persons aged 5 years & over in private households as a reason for not using or having difficulty using public transport. Difficulty transferring from one service to another was the next most cited reason (12%) while difficulty getting to the bus or LUAS stop or the DART or train station was reported by 9%. Around 22% of persons in private households aged 5 & over with Mobility & dexterity as their main disability said that they did not regularly use public transport because of their disability.

Built environment accessibility

 One-third of adults with a disability in private households had some difficulty doing routine tasks inside their home because of their disability, while a further 19% had a lot of difficulty. Overall, 43% of men had difficulty compared with 59% of women.

- Bathroom adaptations were the most used adaptation in the home with 20% of persons with a disability in private households using them. This proportion rose to 45% of persons aged 75 & over. A further 12% of persons with a disability in private households needed but did not have bathroom adaptations.
- A lack of money was the most common reason given for not having specialised features in the home. Over half (52%) of adults in private households with a disability cited *Do not have the money* as the reason for not having at least one of the listed specialised features (kitchen and bathroom adaptations, stair-lift, visual and audio warning devices) installed in their home.
- Over one-third of adults in private households had access difficulty with Socialising in public venues (37%), Moving out and about in their local area (36%), and Availing of general services such as shopping and banking (37%). These proportions increased to around 60% for persons aged 75 & over. Around 35% of adults with a disability in private households reported that Steps or stairs in other people's homes caused them problems. Similarly, 29% had difficulty with Footpaths in their community area.

Education, Work and training

- Around 28% of all persons with a disability were limited or affected by their disability before they completed their full-time education. Around 95% of persons with Intellectual & learning as their main disability reported that they were affected before they completed their full-time education. Fourteen per cent of persons aged 5 & over were affected before school age (17% of males and 12% of females).
- Just under one third (32%) of respondents aged 5 & over whose disability limited or affected them
 before they completed their full-time education indicated that they had stopped their education
 earlier than they intended because of their disability.
- Around 48% of adults whose disability limited or affected them before the age of 65 were Unable to work due to permanent illness or disability.

Social participation, Sport and exercise

- People with a disability in private households were much more likely than people living in nursing homes, hospitals and children's homes to have: Gone out to a social venue with family or friends (61% versus 22%); Visited family or friends (72% versus 19%); or Phoned, texted, written to or emailed family or friends (80% versus 24%). There was much less difference for the category Have friends or family to your home for a social visit (81% versus 72%). Around 82% of children reported that they had engaged in Spending time with friends for recreation/play over the four weeks prior to the Survey.
- Family (87%) and Other friends (67%) provided the main social company for people with a disability living in private households. People in nursing homes, hospitals and children's homes depended much more on Carers/disability service providers (82%) and Friends with a disability (47%) for social interaction. Children with a disability reported that their main social activity was with School friends (69%), Other friends (65%) and Friends with a disability (23%).
- Around 56% of persons with a disability in private households experienced difficulty with Going to town shopping, Going away for a break or holiday (53%), Taking part in community life (54%) and Socialising in a public venue (49%). Just over one-third had difficulty Visiting friends (34%) and Attending religious ceremonies (34%).
- Overall, 45% of males with a disability participated in sports or physical exercise in the previous four weeks compared with 36% of females. Just over 17% of males with a disability exercised 5 or more

times per week compared with 11% of females. The next most popular frequency for participation in sport/exercise was 1-2 times per week (13% of males and 12% of females).

General

- People with a disability were asked to rate their general health on a five-point-scale ranging from Very good to Very bad. The most common responses were Good (35%) and Fair (38%). Around 10% reported having Bad health while a further 3% of persons indicated that their health was Very bad. A higher proportion of those living in private households reported that their health was Very good (16% compared with 6% in nursing homes, hospitals and children's homes).
- ◆ Twelve percent of persons with a disability indicated that their stamina was Very good. A further 30% said that their stamina was Good, Fair (38%), Bad (15%) and Very bad (5%).