

Disabled women and Covid-19 - Research evidence

I. Key facts

This briefing reports on analysis of a survey of 3,280 individuals, including 678 disabled people (377 women and 301 men), conducted in April 2020. For further details see the methodology section below. It finds that:

Poverty and debt

- **Disabled people were most likely to say that they will come out of the coronavirus outbreak in more debt.** 34.2% of disabled women said their household had already run out of money, compared to 24.4% of non-disabled women.

Time use and unpaid work

- **Women reported doing more of the housework and work to look after their children, and this was no different for disabled women.** 68.0% of disabled women reported doing the majority of the housework, and 72.8% reported doing the majority of work to look after their children.
- A quarter (25.5%) of disabled women and 22.3% of disabled men said they had not left their home in the past week.
- **A somewhat higher proportion of disabled people working from home, but particularly disabled women, reported spending more time working now** compared to before the crisis. These disabled women were also more likely to report that they are finding it more difficult to focus at work, and that they are finding work more stressful.

Parenting and childcare

- **Over a third (37.7%) of disabled mothers said they were struggling to feed their children,** compared to 16.7% of non-disabled mothers.
- **39.7% of disabled mothers reported that their children did not have access to the equipment they needed to study at home,** compared to 24.2% of non-disabled mothers.
- 58.8% of disabled mothers said they were struggling to go to the shops or do other tasks because their child/ren were at home, 59.6% said they were struggling to balance paid work and looking after their children, and 63.0% said they were struggling to cope with all the different demands on their time.

Access to support

- **1 in 5 disabled women reported losing support from the government** (20.0%), and 2 in 5 (42.9%) reported losing support from other people.
- **A third (32.3%) of disabled women said they were not sure where to turn to for help** as a result of the coronavirus outbreak.

Mental health and wellbeing

- **56.4% of disabled women reported finding social isolation difficult to cope with**, compared to 41.6% of non-disabled women.
- **Disabled women were slightly more likely to say that the current situation was causing a strain in their relationships**; 42.2% said that social isolation was making relationships at home more difficult, compared to 37.0% of non-disabled women.
- **Just 24.9% and 28.9% of disabled women reported having high (7 or above on a 0-10 scale) life satisfaction and happiness respectively**, compared to 38.6% and 39.9% of non-disabled women.
- Anxiety was highest among women overall, but particularly disabled women. **Over half of disabled women (53.1%) reported high anxiety.**

2. Introduction

The COVID-19 pandemic is a unique combination of both an unprecedented health crisis and an economic crisis. Evidence from the global financial crash of 2008 showed us that disabled people are more likely to bear the brunt of economic crises.¹ Disabled people are less likely to have a financial cushion to protect themselves and their families from impacts of job or earnings loss, and rely more on public services.

Disabled women face specific issues during this time.² Women are more likely to be disabled than men, and disabled women were at heightened risk of poverty, insecure and low paid employment, and of domestic violence before the crisis compared to non-disabled people and men.³ Nonetheless, many of the issues caused by the crisis, particularly those relating to finances and poverty, impact disabled women and men equally.

¹ Equality and human Rights Commission (2020), *The equality impacts of the current recession. Research report 47* https://www.equalityhumanrights.com/sites/default/files/research-report-47_the-equality-impacts-of-the-current-recession_0.pdf

² Sisters of Frida (2020), *The Impact of COVID 19 on Disabled Women from Sisters of Frida*. <http://www.sisofrida.org/wp-content/uploads/2020/05/The-impact-of-COVID-19-on-Disabled-women-from-Sisters-of-Frida.pdf>

³ Women's Budget Group (2018), *Disabled Women and Austerity* <https://wbg.org.uk/wp-content/uploads/2018/10/Disabled-women-October-2018-w-cover-2.pdf>

The consequences of unequal impacts are expected to be stark and long-lasting. After the 2008 recession, the previously converging disability pay gap widened and funding for many essential services for disabled people was cut. However, unequal economic impacts are by no means inevitable and can be ameliorated or (as is more often the case) worsened by policy decisions.

This crisis also poses a greater threat to the health of disabled people. Disabled people are more likely to be required to shield themselves for the entirety of the crisis - meaning greater restrictions on socialising, exercise, and completing basic tasks like shopping outside the home. Disabled women who cannot work outside the home will also face additional restrictions on the paid work they can do.

There have been some positive responses by communities to create networks of support for people who cannot rely on family or friends. But this response comes in the context of reduced statutory support for disabled people. The Coronavirus Act 2020 included a suspension of duties upon council social care services to meet the essential care needs of disabled people, and a relaxation of the thresholds of detention on mental health grounds.⁴ These changes, combined with the economic vulnerability of many disabled people, raise concerns that they will be left behind, unable to access the most basic support or essentials. Furthermore, there are safeguarding concerns around the replacement of statutory services with potentially unvetted volunteers,⁵ and emerging reports that criminals are exploiting vulnerable people.⁶

Considering the unique position disabled people are in during this crisis, relatively little attention has been paid to their experiences. This is partly due to a lack of data and information published. Coronavirus mortality data with splits by disability and/or impairment type have not yet been published (although this is expected in June).⁷ The findings below provide a snapshot of the experiences of disabled people in the first months of the crisis, and the ways their experiences have differed from non-disabled people.

For analysis in this briefing, we grouped respondents as disabled if they said that they were disabled, or had a physical or mental health condition that limits their activities. 678 respondents selected this option, comprising 377 women and 301 men.

3. Income and employment

Responses to the survey indicate that disabled people are bearing the brunt of the economic impacts of the crisis. Higher proportions of disabled people report being hit financially compared to non-disabled people. Disabled people were most likely to say that they will

⁴ Disability Law service (2020), *Coronavirus act threatens care for disabled people*
<https://dls.org.uk/coronavirus-act-threatens-care-for-disabled-people/>

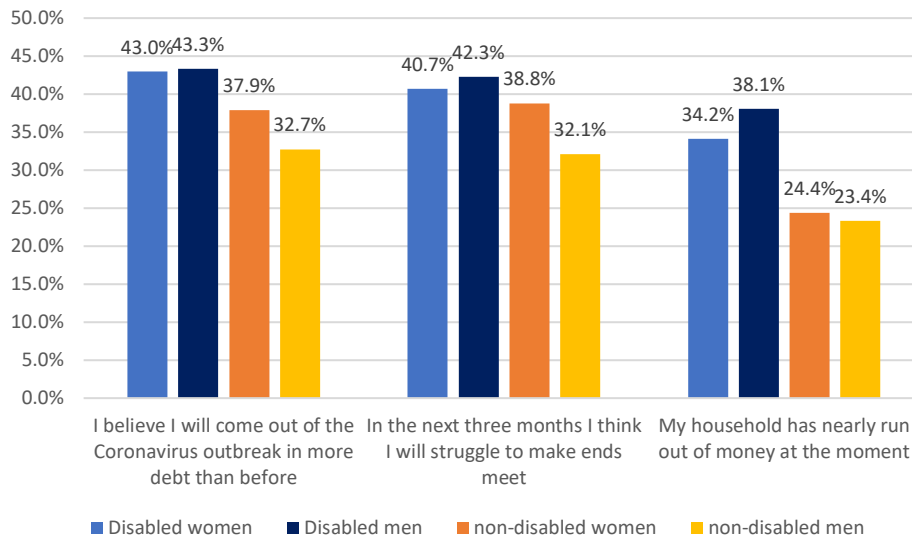
⁵ Sisters of Frida (2020), *The Impact of COVID 19 on Disabled Women from Sisters of Frida*.
<http://www.sisofrida.org/wp-content/uploads/2020/05/The-impact-of-COVID-19-on-Disabled-women-from-Sisters-of-Frida.pdf>

⁶ The Guardian (April 2020), *Fraudsters exploiting Covid-19 fears have scammed £1.6m*
<https://www.theguardian.com/world/2020/apr/04/fraudsters-exploiting-covid-19-fears-have-scammed-16m>

⁷ Disability News Service (May 2020), *Coronavirus: 'Long delayed' data on disabled people's deaths to be published*
<https://www.disabilitynewsservice.com/coronavirus-long-delayed-data-on-disabled-peoples-deaths-to-be-published/>

come out of the coronavirus outbreak in more debt. Strikingly, 34.2% of disabled women said their household had already run out of money, compared to 24.4% of non-disabled women.

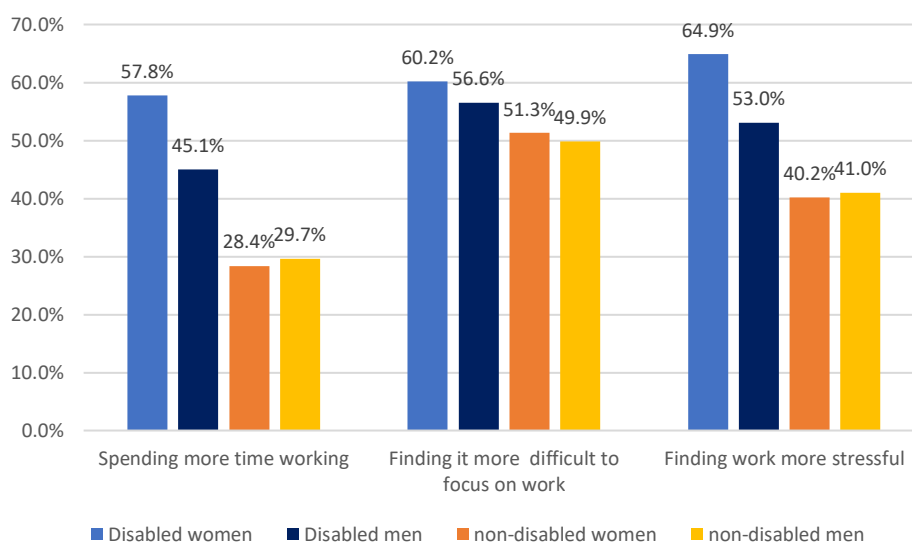
Figure 1: Impact on finances of disabled and non-disabled women and men



N (N disabled) = 3,186 (655), 3,188 (660), 3,227 (669)

Disabled women in employment were no more or less likely than non-disabled people to have moved to working from home during lockdown. But for disabled women who are working from home, the pressures are considerable. A higher proportion of disabled people who are working from home, and particularly disabled women, reported spending more time working now compared to before the crisis.

Figure 2: Experiences of working from home among disabled and non-disabled women and men



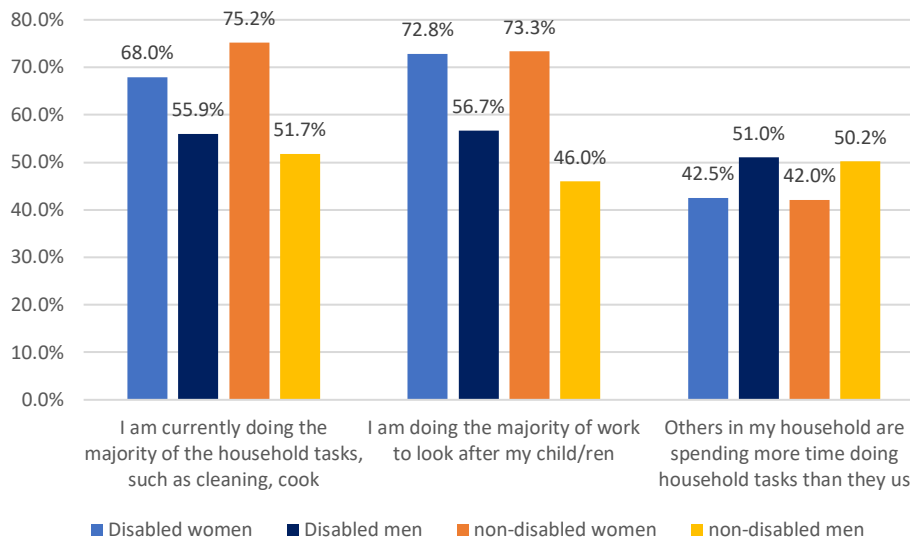
N = 1,151 (216), 1,147 (216), 1,148 (217)

Disabled women were also more likely than non-disabled women and men to report that they are finding it more difficult to focus at work, and that they are finding work more stressful. At the same time, disabled people report feeling more productive at work in higher proportions than non-disabled people, perhaps related to the fact that they are working more. These differences were statistically significant, albeit with quite a wide margin of error in the findings given smaller sample sizes.

4. Time use and activities

Women reported doing the majority of housework and looking after children, and this was also true for disabled women. 68.0% of disabled women reported doing the majority of the housework, and 72.8% of those with children under 11 reported doing the majority of work to look after their children. The proportions of disabled women with other adults in their households who reported that other household members were spending more time doing household tasks were also similar (42.5% and 42.0%).

Figure 3: Household and childcare work by disabled and non-disabled women and men

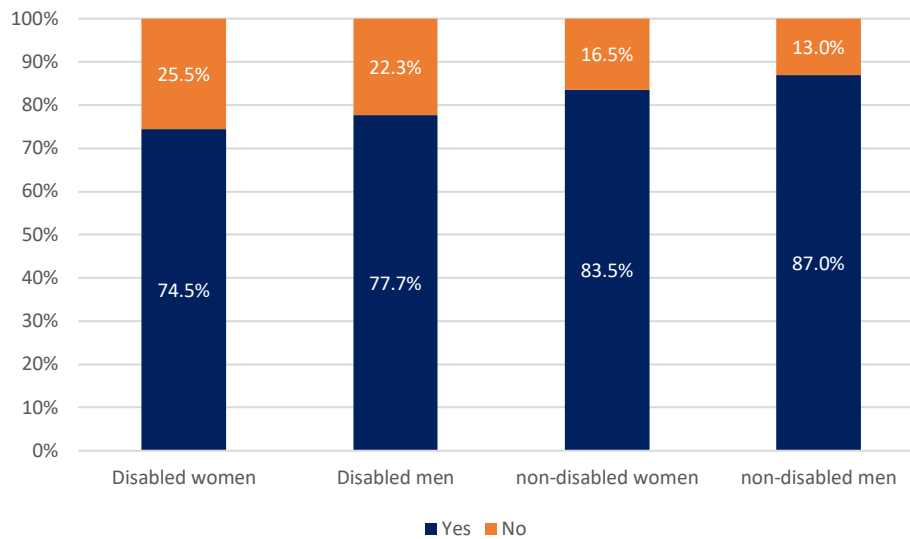


N = 3,259 (672), 1,630 (316), 2,643 (534)

Many disabled people face additional restrictions on their activities and freedoms due to being at higher risk of more severe impacts of coronavirus and needing to shield completely. Overall, disabled people were more likely to spend extended periods without leaving their home. The proportion of people who said they had not left the house to go for a walk, exercise or go shopping in the last week was high at 16.6%; however, this rose to 25.5% of disabled women and 22.3% of disabled men.

Ensuring that clinically vulnerable people isolate at home is an essential part of the coronavirus response. But going for extended periods without leaving the house could have significant impacts on mental and physical health, and our data suggests this is likely to have particularly impacted disabled people.

Figure 4: Have respondents left the home (for example to go for a walk, to exercise, or to go shopping) by gender and disability



N = 3,280 (678)

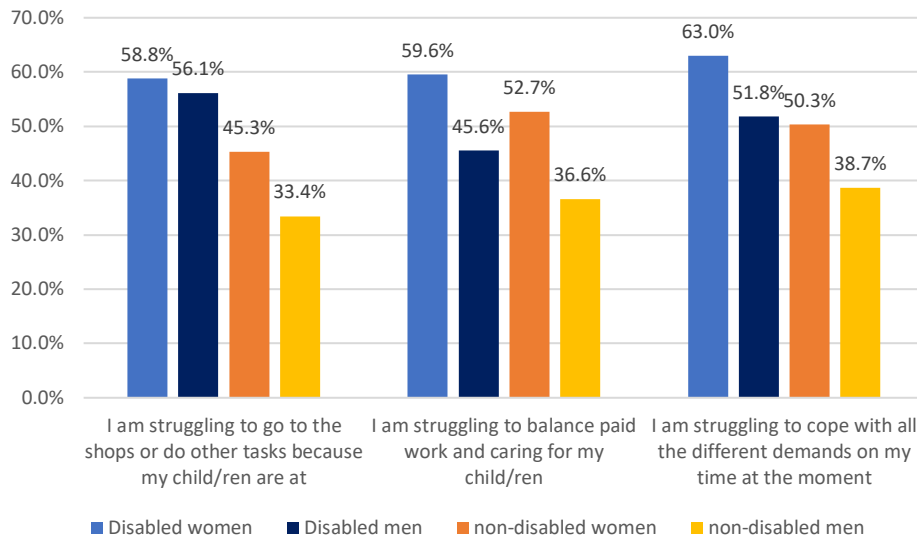
5. Parenting and childcare

As with all disabled people, disabled parents were disproportionately hit by the financial implications of the coronavirus compared to non-disabled parents. While sample sizes are small for this group,⁸ meaning there is a wider margin of error in the findings, the differences we report are statistically significant. Over a third, 37.7%, of disabled mothers with children aged under 11 said they were struggling to feed their children, compared to 16.7% of non-disabled mothers. Access to technology vital for the switch to home-schooling was a particular problem for this group of disabled parents. 39.7% of disabled mothers reported that their children did not have access to the equipment they needed to study at home, such as a computer or printer, compared to 24.2% of non-disabled mothers.

The closure of schools and requirement for parents to home-school their children put considerable additional pressure on mothers of younger children. Disabled mothers were especially likely to say they were struggling to juggle childcare, work and all other responsibilities during this time. 58.8% of disabled mothers said they were struggling to go to the shops or do other tasks because their child/ren were at home, which was significantly different to non-disabled parents. 59.6% said they were struggling to balance paid work and looking after their children, significantly more than non-disabled men; and 63.0% said they were struggling to cope with all the different demands on their time, significantly more than each other group.

⁸ See sample sizes in figure 5 below

Figure 5: Pressures on parents of under-11s, by gender and disability



N = 1,283 (274), 897 (168), 1,280 (273)

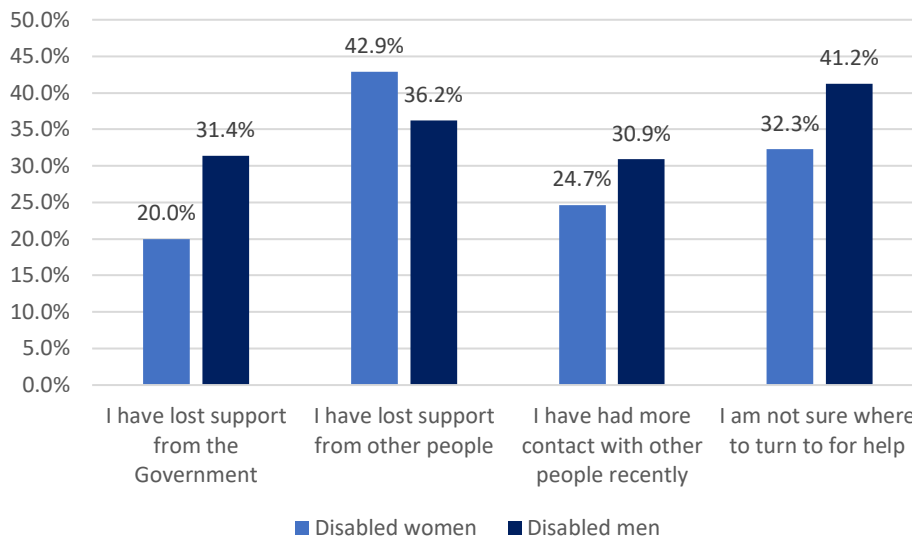
Around half of all parents reported that they were worried about their children’s mental health at this time. Disabled women were most likely to report worrying about their children’s mental health (66.9%), followed by disabled men (57.0%), and non-disabled women (48.8%) and men (40.3%).

6. Access to support

Our survey asked disabled people (and retired people) a set of questions about whether they had lost support from different sources. Responses revealed that 1 in 5 disabled women reported losing support from the government (20.0%), and 2 in 5 (42.9%) reported losing support from other people during the coronavirus outbreak. Rates of lost support were similar, and on some measures a little higher, for disabled men. Loss of support is likely both a consequence of the implementation of rules around social distancing and of the changes to legislation outlining expectations for the care and support of disabled people.

High proportions of disabled people said they didn’t know who to turn to for help, suggesting that the increase in informal provision has not closed this gap. More than 1 in 10 (11.4%) disabled women said they strongly agreed they were not sure where to turn as a result of the coronavirus outbreak. This increased to a third (32.3%) of disabled women when including those who said they somewhat agreed. Despite this loss in support, 24.7% of disabled women said they now had more contact with people than prior to the coronavirus outbreak.

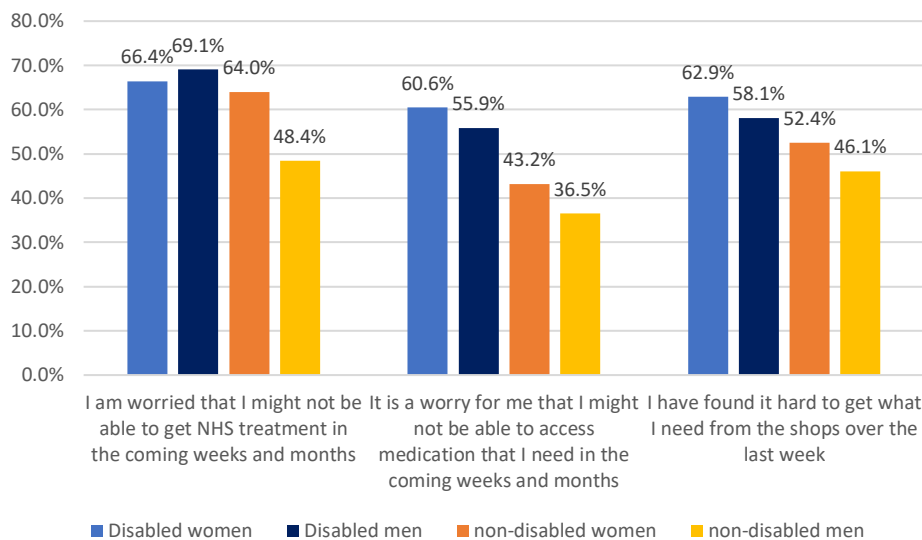
Figure 6: Access to government and social support for disabled people, by gender



N = 655, 668, 673, 660

A key concern about the response to the coronavirus crisis is the potential knock-on effect that redirecting resources to fight the disease will have on the resources available for healthcare for unrelated conditions. This will be of greater concern for many disabled people who rely on these services.

Figure 7: Concern about access to healthcare and resources, by gender and disability



N = 3,225 (665), 3,227 (669), 3,250 (671)

Concern about access to NHS treatment not related to COVID-19 was high for all respondents, but lowest for non-disabled men. Around 2 in 3 women (disabled and non-disabled), and disabled men, were worried about access to NHS treatments during the coronavirus outbreak, compared to 48.4% of non-disabled men. In contrast, concern about

access to medication was higher among disabled people. Access to medication was a concern for 60.6% of disabled women, compared with 43.2% non-disabled women.

7. Mental health and wellbeing

Mental health has been raised as a major concern for everyone during this time. Everyone is learning to cope with the unfolding situation without physical contact with those outside their household. Reviews of the impacts of quarantine report negative psychological effects including post-traumatic stress symptoms, confusion, and anger.⁹ The previous sections have shown that disabled people are more likely to have lost financial and practical support, to be struggling financially, and to report worries about access to healthcare. Disabled people are also less likely to have left the house in the last week, with many required to adopt stricter forms of social distancing. All of these concerns are likely to additionally impact disabled people's mental health considerably.

When asked specifically about mental wellbeing, 56.4% of disabled women reported finding social isolation difficult to cope with, compared to 41.6% of non-disabled women. Disabled women were also slightly more likely to say that the current situation was causing a strain in their relationships; 42.2% said that social isolation was making relationships at home more difficult, compared to 37.0% of non-disabled women.

Life satisfaction and happiness were both lower among disabled men and women. Just 24.9% of disabled women reported having high life satisfaction, and 28.9% high levels of happiness, compared to 38.6% and 39.9% for non-disabled women. Non-disabled people overall, but particularly men, reported higher life satisfaction and happiness. Anxiety was highest among women overall compared to men, but particularly disabled women, with over half of disabled women (53.1%) reporting high anxiety.

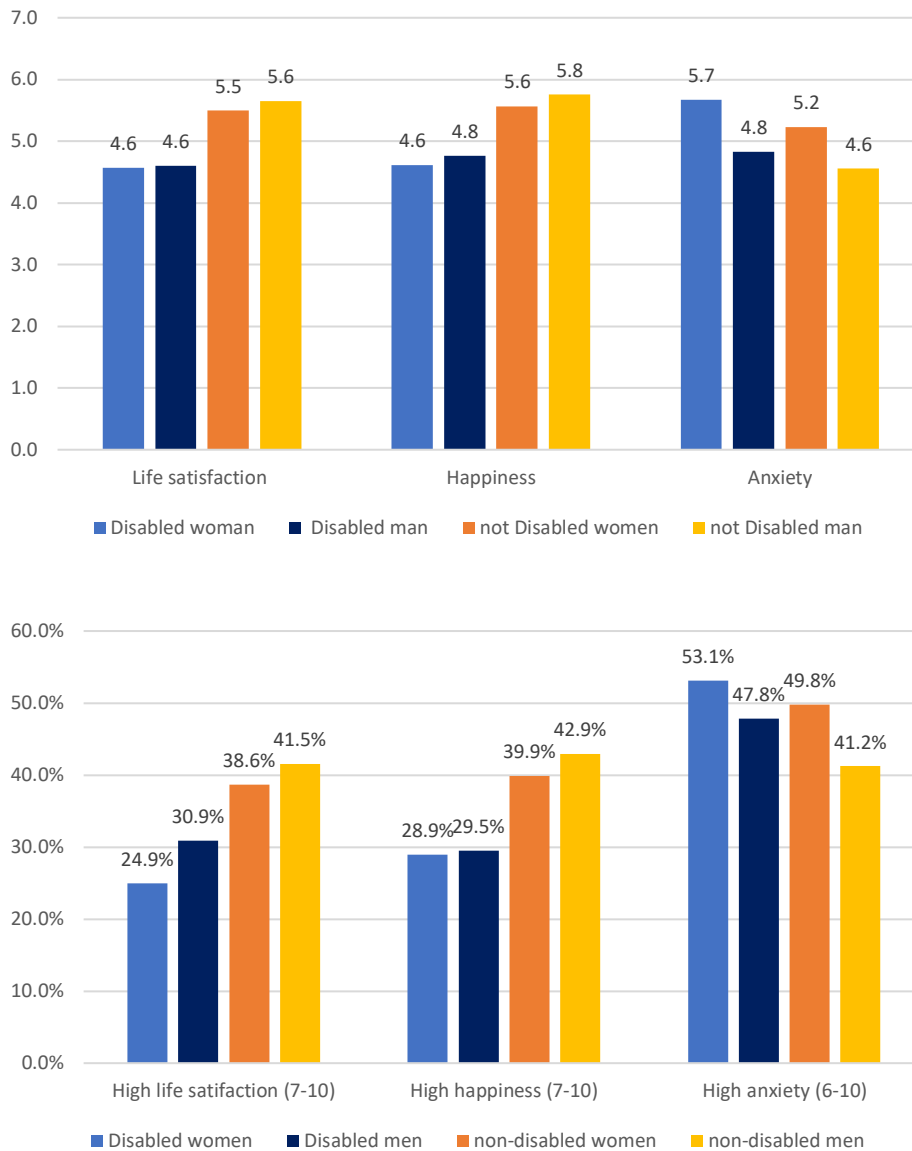
The survey did not include measures of personal wellbeing before the coronavirus outbreak, but average responses were all considerably lower (or higher in the case of anxiety) than ONS estimates from late 2019 and similar to current ONS survey estimates. Average life satisfaction, happiness, and anxiety in the period July to September 2019, across the whole population, were 7.7, 7.5 and 2.9).¹⁰ This is compared to 6.9, 6.4, and 5.2 in the most recent period covering the coronavirus crisis.¹¹

⁹ Brooks S, Webster R, Smith L, Woodland L, Wessely S, Greenberg N, Rubin G (2020), 'The psychological impact of quarantine and how to reduce it: a rapid review of the evidence' *The Lancet*
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30460-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30460-8/fulltext)

¹⁰ ONS (2019), *Personal and economic well-being in the UK: November 2019*
<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/bulletins/personalandeconomicwellbeinginthekuk/november2019>

¹¹ ONS (2020), *Personal and economic well-being in Great Britain: May 2020*
<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/bulletins/personalandeconomicwellbeinginthekuk/may2020#elevated-levels-of-anxiety>

Figure 8: Scores for life satisfaction, happiness and anxiety, by gender and disability



N = 3,257 (674), 3,261 (676), 3,252 (671)

8. Recommendations

Our research identifies that disabled women are facing serious crises of financial support. They are more likely to say that their household had already run out of money. Disabled women are more likely to report increased strain in home relationships, which suggests an additional domestic abuse risk when viewed in tandem with existing evidence about the higher risks disabled women face. Relevant Government departments should take the following steps to alleviate these pressures, which could particularly support disabled women:

- Increase Employment Support Allowance payments in line with the rise in Universal Credit and Working Tax Credit: at present, up to 2m¹² disabled people have been left behind by the necessary and welcome increase in payments for other benefits, for no reason other than that they have the misfortune to be on legacy benefits.
- End the two-child limit and make advance payments of Universal Credit grants instead of loans. Abolish the benefits cap to ensure households with disabled people claiming benefits get the support they need.
- Ensure that all workers have access to statutory sick pay and increase the level it is paid at.
- Increase Local Housing Allowance to the 50th percentile to support disabled renters.
- Disabled people are less likely to have left their homes, and more likely to have struggled to access shops. This raises serious concerns about hunger and food security. It is vital that the government and local councils work with supermarkets to ensure that disabled people's needs for groceries and shopping are prioritised.

Our research found significant particular pressures on disabled parents, with, for example, more disabled mothers report struggling to feed their children. Government should:

- Work with local councils to assess and provide sufficient support for those disabled parents facing increased pressures as a result of school closures and other effects of lockdown. Work with schools to support shielding families to continue their children's education.
- Immediately increase child benefit to £50 per child per week to help get support to those who need it most and support with home schooling costs.

Disabled women are already known to be at higher risk of domestic abuse, and our research suggests that household relationships are under additional strain for many of them:

- Require Local Authorities to be more flexible about care packages (portability of care packages) for disabled women trapped in social isolation and in danger from domestic abuse.

Many disabled people have been at the sharp end of the failure to limit the spread of Covid-19 in care homes while others may have had home support arrangements compromised. Many disabled women in our survey reported losing Government and community support. Sisters of Frida, a disabled women's collective, recommends¹³ the following action be taken:

- Ensure supplies of PPE and testing to care home staff as well as domiciliary carers and personal assistants/carers.
- Test patients before discharging from hospital to care home.
- Stop the use of 'blanket' Do Not Attempt to Resuscitate orders (DNARs.)
- Require any councils enacting Care Act easements to release a document showing how they are continuing to deliver their duty of care to disabled people and how they made the decision to take that option and when it will be reviewed.
- The government should review the suspension of Care Act duties no less than every three months, reviewing its impact for disabled people who receive care funded by

¹² DWP (2020), 'DWP benefits statistical summary, February 2020, accessed at <https://www.gov.uk/government/publications/dwp-benefits-statistics-february-2020/dwp-benefits-statistical-summary-february-2020>

¹³ <http://www.sisofrida.org/wp-content/uploads/2020/05/The-impact-of-COVID-19-on-Disabled-women-from-Sisters-of-Frida.pdf>

social services. This should also assess how the suspension is impacting those who have multiple protected characteristics, such as disabled BAME women.

As well as facing reduced support from the state and their community, many disabled people face a lack of information due to policy decisions around the Covid-19 response. It is vital that disabled people and their needs are addressed:

- Ensure information is available in accessible formats, Easy read, Large print, and in British Sign Language (BSL) and in different national languages.
- Ensure all essential public broadcasts are simultaneously translated into BSL.
- Ensure people are aware of the alternative services, volunteer programmes, and how to access them including for those not able to access the internet.
- Provide information and guidance with sufficient response time for disabled people to react and take action accordingly. The notice given for schemes such as the CJRS has been too short, especially for disabled people.
- Increase funding to both women's organisations and mental health service providers working directly with disabled women, and provide training on their complex needs, to help disabled women access the support they need at this psychologically challenging time.

This includes specifically ensuring that disabled people are able to have their personal assistants with them when needed, and that guidance addresses the safety aspects of personal assistants' roles.

- Ensure that personal assistants or family carers are allowed to accompany a disabled person with other physical or communication support needs at any time they are in hospital.
- Comprehensive guidance should be released advising people on how to prevent the spread of COVID-19 while using care/personal assistant services, whether the care is funded by direct payments or provided by volunteers such as family members.

9. Methodology

Our research is drawn from data collected via online panel by Survation on behalf of the Fawcett Society, with fieldwork conducted 15 – 21 April 2020. Invitations to complete surveys were sent out to members of online panels. Differential response rates from different demographic groups were taken into account.

The survey population was drawn from two sources: firstly, an overall nationally representative sample of 1,7830, and then a number of additional filtered booster samples drawn from online panels used to ensure sample sizes for populations of interest were robust. These populations included parents with at least one child aged 11 or under, people with low income (below the median), and BAME respondents. With these booster samples included, the total sample comprised 3,280 respondents. This included 377 disabled women and 301 disabled men, and 1,382 non-disabled women. The authors of this report then weighted the data to the current Labour Force Survey on the basis of age, gender, region, and education for each population, and conducted analysis.

For the majority of questions included in the survey, respondents were asked to respond on a 5-point Likert scale: 'Strongly agree,' 'Somewhat agree,' 'Neither agree nor disagree,' 'Somewhat disagree,' or 'Strongly disagree.' Throughout this briefing, responses strongly agree and somewhat agree were combined for parsimony in reporting results.

Only results that are statistically significant are highlighted in the text throughout this report. Because only a sample of the full population was interviewed, all results are subject to margin of error, meaning that not all differences are statistically significant. For example, in a question where 50% (the worst-case scenario as far as margin of error is concerned) gave a particular answer, with the sample of disabled women (377) it is 95% certain that the 'true' value will fall within the range of 4.8% from the sample result. With larger samples there is more precision in the estimates; with the sample of 1,382 non-disabled women it is 95% certain that the 'true' value will fall within the range of 2.0% from the sample result.

About us

The Fawcett Society is the UK's leading membership charity campaigning for gender equality and women's rights at work, at home and in public life. Our vision is a society in which women and girls in all their diversity are equal and truly free to fulfil their potential creating a stronger, happier, better future for us all.

The Women's Budget Group (WBG) is an independent network of leading academic researchers, policy experts and campaigners that analyses economic policy for its impact on women and men and promotes alternatives for a gender equal economy. Our work on Covid-19 can be accessed at: <https://wbg.org.uk/topics/covid-19/>

Queen Mary University of London is a research-intensive university that connects minds worldwide. A member of the prestigious Russell Group, we work across the humanities and social sciences, medicine and dentistry, and science and engineering, with inspirational teaching directly informed by our world-leading research.

In the most recent Research Excellence Framework we were ranked 5th in the country for the proportion of research outputs that were world-leading or internationally excellent. We have over 25,000 students and offer more than 240-degree programmes. Our reputation for excellent teaching was rewarded with silver in the most recent Teaching Excellence Framework.

Queen Mary has a proud and distinctive history built on four historic institutions stretching back to 1785 and beyond. Common to each of these institutions – the London Hospital Medical College, St Bartholomew's Medical College, Westfield College and Queen Mary College – was the vision to provide hope and opportunity for the less privileged or otherwise under-represented.

Today, Queen Mary University of London remains true to that belief in opening the doors of opportunity for anyone with the potential to succeed and helping to build a future we can all be proud of.

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