

Living conditions and quality of life
**People with disabilities and the
COVID-19 pandemic:
Findings from the *Living,
working and COVID-19* e-survey**



When citing this policy brief, please use the following wording:

Eurofound (2022), *People with disabilities and the COVID-19 pandemic: Findings from the Living, working and COVID-19 e-survey*, COVID-19 series, Publications Office of the European Union, Luxembourg.

Author: Daphne Ahrendt

Research manager: Daphne Ahrendt

Research project: Services for people with disabilities (190806)

Luxembourg: Publications Office of the European Union

This policy brief and any associated materials are available online at <http://eurofound.link/ef22019>

It is part of Eurofound's COVID-19 series. See the full series at <http://eurofound.link/efs023>

© European Foundation for the Improvement of Living and Working Conditions, 2022

Reproduction is authorised provided the source is acknowledged.

For any use or reproduction of photos or other material that is not under the Eurofound copyright, permission must be sought directly from the copyright holders.

Cover image: © Михаил Решетников/Adobe Stock Photos

Other images: p. 1 © Drazen/Adobe Stock Photos; p. 2 © Lisa F. Young/Adobe Stock Photos;

p. 5 © Africa Studio/Adobe Stock Photos; p. 20 © Vergani Fotografia/Adobe Stock Photos;

p. 22 © Thomas Bethge/Shutterstock

Any queries on copyright must be addressed in writing to: copyright@eurofound.europa.eu

Research carried out prior to the UK's withdrawal from the European Union on 31 January 2020, and published subsequently, may include data relating to the 28 EU Member States. Following this date, research only takes into account the 27 EU Member States (EU28 minus the UK), unless specified otherwise.

The European Foundation for the Improvement of Living and Working Conditions (Eurofound) is a tripartite European Union Agency established in 1975. Its role is to provide knowledge in the area of social, employment and work-related policies according to Regulation (EU) 2019/127.

Print: ISBN 978-92-897-2259-9 ISSN 2599-8110 doi:10.2806/927877 TJ-AR-22-001-EN-C

PDF: ISBN 978-92-897-2254-4 ISSN 2599-8153 doi:10.2806/146029 TJ-AR-22-001-EN-N

European Foundation for the Improvement of Living and Working Conditions

Telephone: (+353 1) 204 31 00

Email: information@eurofound.europa.eu

Web: www.eurofound.europa.eu



Introduction

Improving the situation of people with disabilities is high on the EU political agenda as they are one of the most disadvantaged groups in the EU: people with disabilities participate less in the labour market, work fewer hours and are more socially excluded compared to the population as a whole.

The COVID-19 pandemic has exacerbated the situations of various groups of citizens who were already disadvantaged prior to the crisis, as several recent Eurofound studies have found. The report *Impact of COVID-19 on young people in the EU* highlights that the pandemic seems to have had a more direct impact on young people's mental well-being, not only because they lost jobs and missed out on educational opportunities but also because restrictions on social gatherings reduced their social contacts and delayed future plans. The joint policy brief with the European Institute for Gender Equality (EIGE), *Upward convergence in gender equality: How close is the Union of equality?*, concluded that developments stemming from the COVID-19 crisis threaten to roll back recent achievements in gender equality, especially in the domains of work and time in the Gender Equality Index.

It has been shown that people with disabilities are disproportionately impacted by crises, including health emergencies, and crisis responses are not always inclusive or accessible (Hillgrove et al, 2021). The COVID-19 pandemic multiplied the challenges that people with disabilities face in the different, yet interconnected, spheres of their lives – their health, their social circumstances and their labour market situation. The continuing lack of fairness in society is possibly one of the reasons why people with disabilities have been more severely affected by the crisis.

This policy brief compares the situation of people with and without disabilities during the COVID-19 pandemic. It looks at a range of social indicators that were included in the third round of Eurofound's *Living, working and COVID-19* e-survey. This e-survey investigates the economic and social impact of the pandemic on Europeans. The third round took place in February and March 2021, when most Member States were once again under strict lockdowns in response to a second or third wave of the pandemic.



Policy context

The EU is anchored in the values of equality, social fairness, freedom, democracy and human rights. Through the new European Disability Strategy 2021–2030 and the European Pillar of Social Rights, the EU has intensified its focus on achieving more effective rights for EU citizens. Principle 3 of the Pillar commits the EU to promoting equal opportunities for underrepresented groups, stating that

regardless of gender, racial or ethnic origin, religion or belief, disability, age or sexual orientation, everyone has the right to equal treatment and opportunities regarding employment, social protection, education, and access to goods and services available to the public.

Principle 17 specifically states that people with disabilities ‘have the right to income support that ensures living in dignity, services that enable them to participate in the labour market and in society, and a work environment adapted to their needs’.

In 2010, the Commission presented the European Disability Strategy 2010–2020 as the policy framework through which the EU would deliver the commitments made under the 2006 United Nations Convention on the Rights of Persons with Disabilities, in line with the competences provided for in the treaties and taking into account the experience of the Disability Action Plan (2004–2010). The 2010–2020 strategy succeeded in improving accessibility for people with disabilities and placed disability high on the EU agenda. Despite the efforts made under the strategy, however, people with disabilities continue to be at a disadvantage in many areas of life.

The new strategy, entitled *Union of equality: Strategy for the rights of persons with disabilities 2021–2030*, aims to improve the lives of Europeans with disabilities in the coming decade. It asserts that it is time to scale up action, as the COVID-19 pandemic and its economic consequences have increased the urgency to tackle inequality. It promotes an intersectional perspective, addressing the

specific barriers faced by people with disabilities who are at the intersection of identities (gender, racial, ethnic, sexual and religious) or in a difficult socioeconomic or other vulnerable situation.

It will be important to regularly measure the progress made over the coming decade. The data reported in this policy brief informs policymakers about the situation of people with disabilities at the start of the new strategy.

Key findings

- The *Living, working and COVID-19* e-survey, fielded in spring 2021, shows that the social and financial situation of people with disabilities in the EU is significantly worse than that of people without disabilities. This finding holds, without exception, across five country clusters analysed in this study and sociodemographic breakdowns by age, gender, education and economic status.
- During the COVID-19 pandemic, many respondents with disabilities had a need for healthcare that went unmet. The unavailability of appointments was the most important reason for this, for respondents both with and without disabilities; however, significantly more people with disabilities mentioned cost as an important reason. The analysis also shows that unmet healthcare needs reduced trust in the healthcare system.
- In spring 2021, many respondents with disabilities reported poor mental well-being. On average, 7 out of 10 were at risk of depression, according to the WHO-5 Mental Well-being Index. Loneliness was particularly widespread among the youngest age cohort (aged 18–34 years) and unemployed respondents, a large proportion of whom also said they felt left out of society.
- Respondents with disabilities were in a more financially precarious position than their non-disabled counterparts. Even when in work, they were more likely to be financially insecure. The e-survey found that significantly more working respondents with disabilities reported difficulty making ends meet than those working without disabilities.
- Being in a disadvantaged social and financial situation heavily impacts how people with disabilities see the future, with only 3 out of 10 respondents expressing an optimistic outlook. In all country clusters and for all sociodemographic groups, they are significantly less likely to be optimistic about their future than those without disabilities.
- The survey highlights the difficult situation of young people with disabilities. For five of the nine indicators analysed in this brief (trust in the healthcare system, loneliness, feeling left out of society, financial fragility and optimism about the future), the gap between those with and without disabilities was largest among the youngest age group. The survey findings also highlight the particularly vulnerable position of unemployed people with disabilities.
- The survey finds large disparities between respondents with and without disabilities in the Nordic Member States (Denmark, Finland and Sweden). On many of the indicators, some of the largest differences were found in this country cluster.



Exploring the evidence

Introduction

This policy brief explores the situation of people with disabilities during the COVID-19 pandemic by zooming in on four areas where the pandemic has impacted people's lives: access to healthcare, mental well-being, financial situation and optimism about the future.

Data and indicators

The evidence comes from nine social indicators that were included in the third round of Eurofound's *Living, working and COVID-19* e-survey, conducted in spring 2021, in which more than 45,000 respondents from across the EU Member States participated.

The analysis compares the responses of people with and without disabilities at EU27 level and also breaks these down by five country clusters:

- **Baltic:** Estonia, Latvia and Lithuania
- **Central and Eastern European (CEE):** Bulgaria, Croatia, Czechia, Hungary, Poland, Romania, Slovakia and Slovenia

- **Continental:** Austria, Belgium, Germany, France, Luxembourg and the Netherlands, as well as Ireland, which has been added to this group following the exit of the United Kingdom from the EU
- **Mediterranean:** Cyprus, Greece, Italy, Malta, Portugal and Spain
- **Nordic:** Denmark, Finland and Sweden

The study looks at variation across four sociodemographic variables: gender, age group, education and economic activity.

In addition, a gap analysis of each indicator compares either the percentages or mean scores for people with and without disabilities.

Where available, the situation of Europeans with and without disabilities prior to the COVID-19 pandemic is also referred to, using data from the European Union Statistics on Income and Living Conditions (EU-SILC) survey or Eurofound's 2016 European Quality of Life Survey (EQLS).¹

1 Detailed results of the analyses are available on request.

The Global Activity Limitation Indicator (GALI) was used to identify respondents with disabilities, defined as those who indicated in the survey that they have a long-standing physical or mental health problem, illness or disability and are severely or somewhat limited in their daily activities. This subjective evaluation is a common approach to measure disability in large-scale surveys (Van der Zwan and de Beer, 2021). According to this measurement, 29% of the e-survey respondents had a disability.

Access to healthcare

First, we look at how people with disabilities connected with the healthcare system during the pandemic by examining the results for two indicators: unmet healthcare needs and trust in the healthcare system.

Unmet healthcare needs

EU-SILC data show that, in 2019, four times more people with disabilities reported unmet healthcare needs than those without

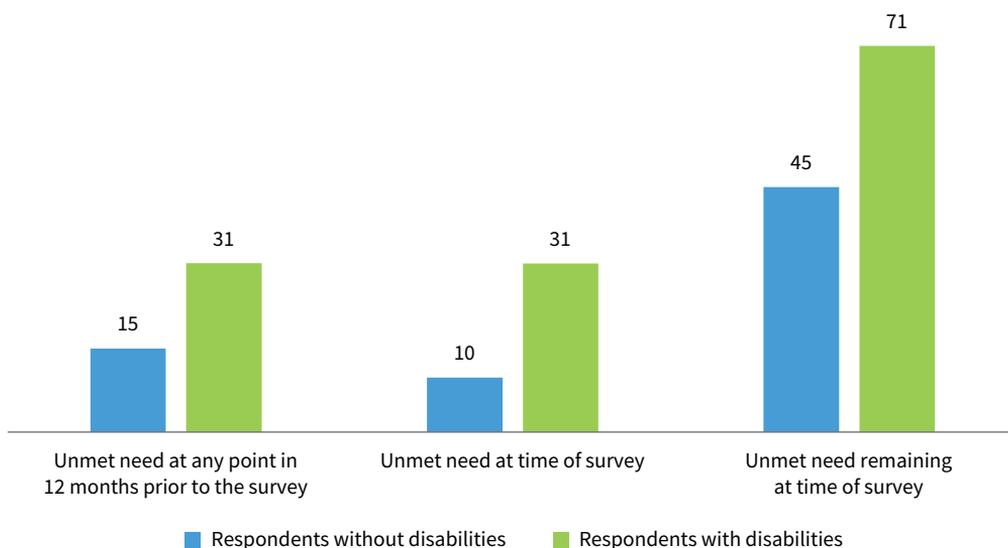
disabilities (4.9% and 1.1%, respectively; Eurostat, 2021a).

The e-survey measured the unmet healthcare needs of Europeans from the onset of the pandemic in March 2020 until March 2021, asking whether, in the 12 months prior to the survey, respondents needed a medical examination or treatment that they had not received. A further question asked whether respondents had any unmet healthcare needs at the time of the survey.

Unmet healthcare needs were much higher among respondents with disabilities

Respondents with disabilities reported that they had unmet healthcare needs in the 12 months prior to March 2021 twice as often as those without disabilities (Figure 1). This figure rose to three times as many when respondents were asked to report their current situation. In fact, of the respondents with disabilities who reported having an unmet need at any point in the 12 months prior to the survey, 71% were still in that situation at the time of the survey.

Figure 1: Unmet healthcare needs of respondents with and without disabilities (%), EU27



Source: *Living, working and COVID-19 e-survey; author's calculations*

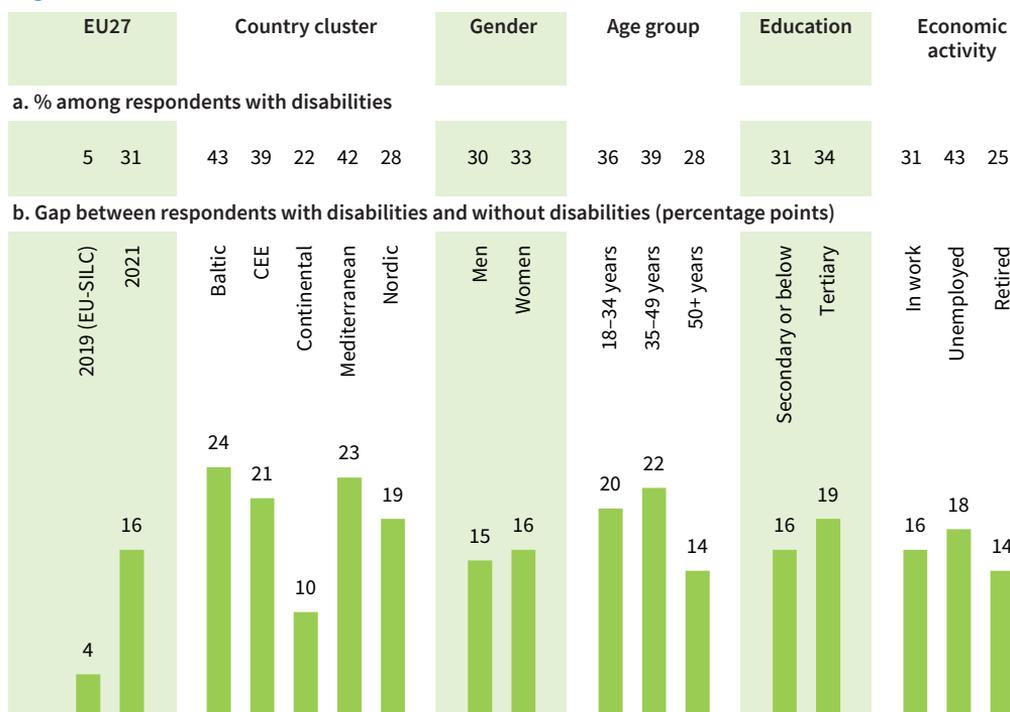
In the 12 months preceding the e-survey, unmet healthcare needs among respondents with disabilities were particularly widespread in the Baltic (43%), Mediterranean (42%) and CEE (39%) country clusters, as shown in Figure 2a. In terms of sociodemographics, unmet needs were very prevalent among unemployed respondents (43%) and more widely reported among younger respondents than older ones (36% of 18- to 34-year-olds and 39% of 35- to 49-year-olds compared to 28% of those aged 50 years and over).

Looking at the gaps between people with disabilities and those without in relation to healthcare need (Figure 2b), the largest gaps are evident in the Baltic and Mediterranean clusters and in the 35–49 years age bracket.

The gap between those with and without disabilities is smallest in the Continental country cluster.

On the question of why their healthcare need was not addressed, more respondents with disabilities cited the cost of care as a reason than those without disabilities (36% and 25%, respectively), as shown in Table 1. This was not, however, the main reason given for the lack of healthcare access, which among respondents both with and without disabilities was the unavailability of appointments due to the pandemic, followed by waiting lists.

Figure 2: Unmet healthcare needs, EU27



Note: The 2019 EU-SILC results are shown for reference only and cannot be compared with the e-survey results.
Source: EU-SILC [hlth_silc_08] and Living, working and COVID-19 e-survey; author's calculations

Table 1: Reasons for unmet healthcare needs, respondents with and without disabilities compared, EU27

	Respondents with disabilities (%)	Respondents without disabilities (%)	Percentage point difference
Appointment not available	74	71	4
Waiting list	53	46	8
Cost	36	25	12
Risk of COVID-19	30	27	3
Other reason	29	21	7
Too far	21	14	7
No time	14	11	3

Note: Percentages have been rounded, accounting for small discrepancies in percentage point differences.

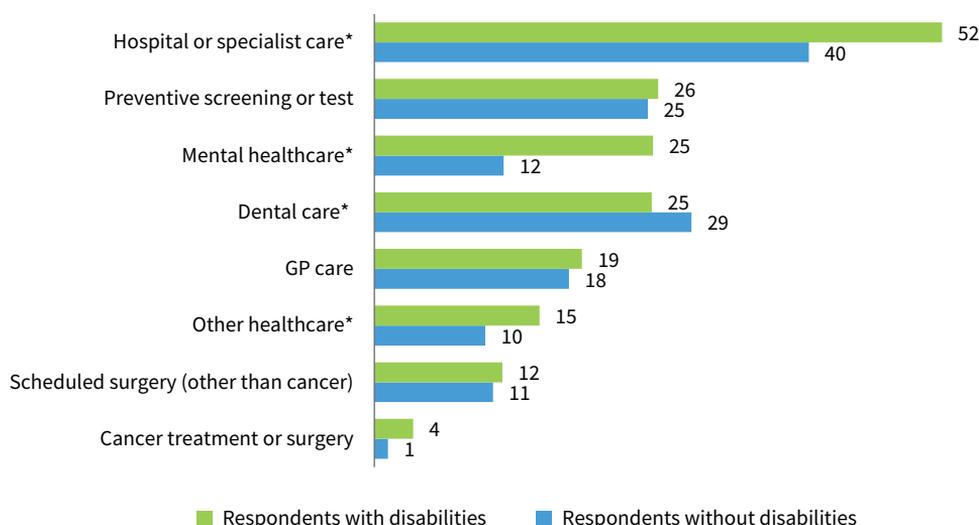
Source: Living, working and COVID-19 e-survey; author’s calculations

In spring 2021, one in four respondents with disabilities could not receive mental healthcare when they needed it

As noted earlier, at the time of the survey in February–March 2021, respondents with disabilities were three times more likely than those without disabilities to have a medical issue for which they could not get treatment. Figure 3 illustrates the most common types of

unmet healthcare needs measured at the time of the survey, for respondents with and without disabilities. For almost all types, more people with disabilities had an unmet healthcare need than those without disabilities, particularly with regard to hospital or specialist care and mental healthcare. For the latter, one in four respondents with disabilities were unable to access care in spring 2021, compared to 12% of those without disabilities.

Figure 3: Unmet healthcare needs (%), by type of healthcare, respondents with and without disabilities compared, EU27



* denotes a statistically significant difference ($p < 0.05$) between respondents with and without disabilities.

Source: Living, working and COVID-19 e-survey; author’s calculations

Table 2: Trust in the healthcare system during the pandemic (mean scores), respondents with and without disabilities compared, EU27

	With unmet healthcare needs	Without unmet healthcare needs
Respondents with disabilities	4.7	5.8
Respondents without disabilities	5.2	6.3

Source: Living, working and COVID-19 e-survey; author's calculations

Trust in the healthcare system

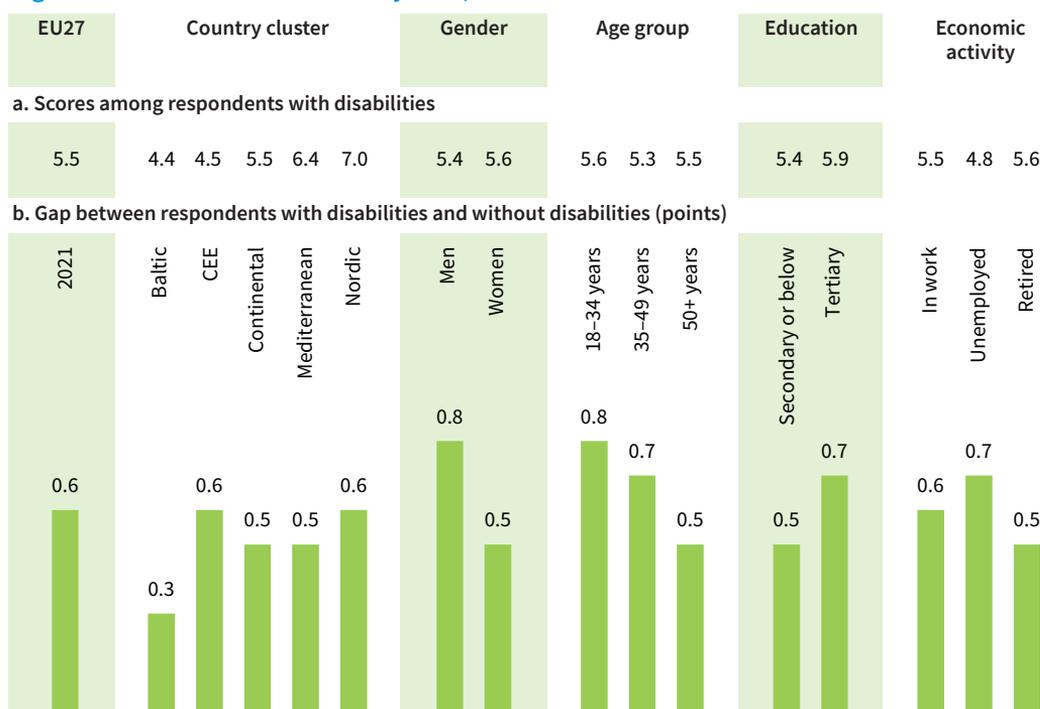
Unmet healthcare need reduces trust

Having an unmet healthcare need reduces people's trust in the healthcare system. In the e-survey, respondents were asked to rate their trust in their country's healthcare system, along with seven other institutions, on a scale of 1–10. The mean score of respondents with unmet healthcare needs during the pandemic was significantly lower than for those without such needs (Table 2). This is true for people both with and without disabilities.

Overall, respondents with disabilities had lower trust in the healthcare system than their counterparts without disabilities; the average scores for both groups on a scale of 1–10 are 5.5 and 6.1, respectively. This gap in trust relating to the healthcare system (a difference of 0.6 points) is the largest found out of the eight institutions included in the e-survey.

While the lowest trust level among respondents with disabilities was noted in the Baltic cluster (Figure 4a), the gap between those with and without disabilities is largest in the youngest age group and among men (Figure 4b).

Figure 4: Trust in the healthcare system, EU27



Source: Living, working and COVID-19 e-survey; author's calculations

Mental well-being

This section turns to the mental well-being of people with disabilities during the pandemic, looking at three indicators: risk of depression, self-reported loneliness and feeling left out of society. All three indicators were included in the 2016 EQLS, the results of which are referred to here to indicate the pre-pandemic situation.

Risk of depression

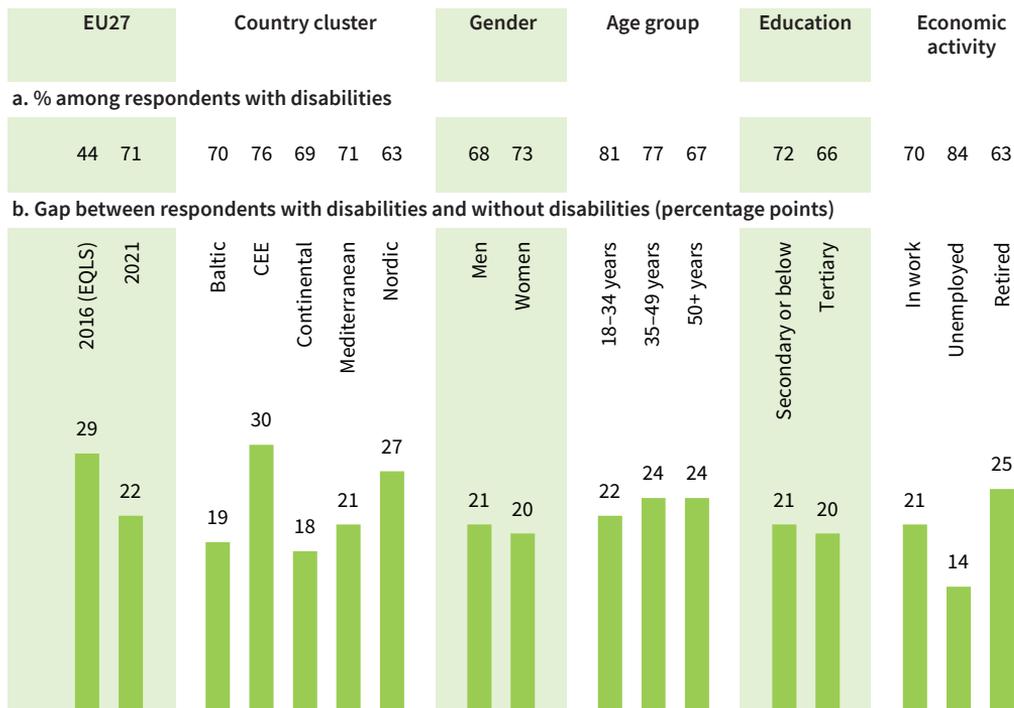
The risk of depression indicator is based on the WHO Mental Well-being Index (WHO-5). People with a WHO-5 score of 50 or lower, on a scale of 0–100, are considered to be at risk of depression. It is a useful tool for comparing population groups, including people with and without disabilities. In 2016, 44% of people with disabilities were at risk of depression (in other words, 44% had a mean score on the WHO-5 of 50 points or less) compared to 16% of people without disabilities, according to the EQLS.

Over four out of five unemployed people and younger people with disabilities were at risk of depression during the pandemic

On average, 71% of respondents with disabilities were at risk of depression at the time of the *Living, working and COVID-19* e-survey, which makes the high level of unmet mental healthcare need in this group, reported above, all the more alarming.

Across the country clusters, percentages range from 63% in the Nordic cluster to 76% in the CEE cluster (Figure 5a). Women were somewhat more at risk of depression than men (73% and 68%, respectively), while the risk was particularly widespread in the youngest age group (81%). Among all the sociodemographic breakdowns of people with disabilities, however, those who were unemployed were the largest risk group, with 84% scoring under 50 on the WHO-5.

Figure 5: Risk of depression, EU27



Note: The 2016 EQLS results are shown for reference only and cannot be compared with the e-survey results.

Source: EQLS 2016 and *Living, working and COVID-19* e-survey; author's calculations

Large gaps between people with and without disabilities were found in the CEE and Nordic country clusters

A much greater proportion of respondents with disabilities were at risk of depression than their non-disabled counterparts, with a gap of 22 percentage points between the scores of the two groups. As Figure 5b shows, the situation of people with disabilities was worse across all the subgroups included in the analyses. The largest gaps between those with and without disabilities were found in the CEE and the Nordic clusters. The next largest gap occurs among retired respondents: 63% of those with disabilities were at risk of depression, compared to 37% of those without disabilities.

Loneliness

A second indicator of mental health measures the proportion of individuals who are lonely, based on self-reported feelings. Prior to the pandemic, people with disabilities were already more likely to feel lonely. In the 2016

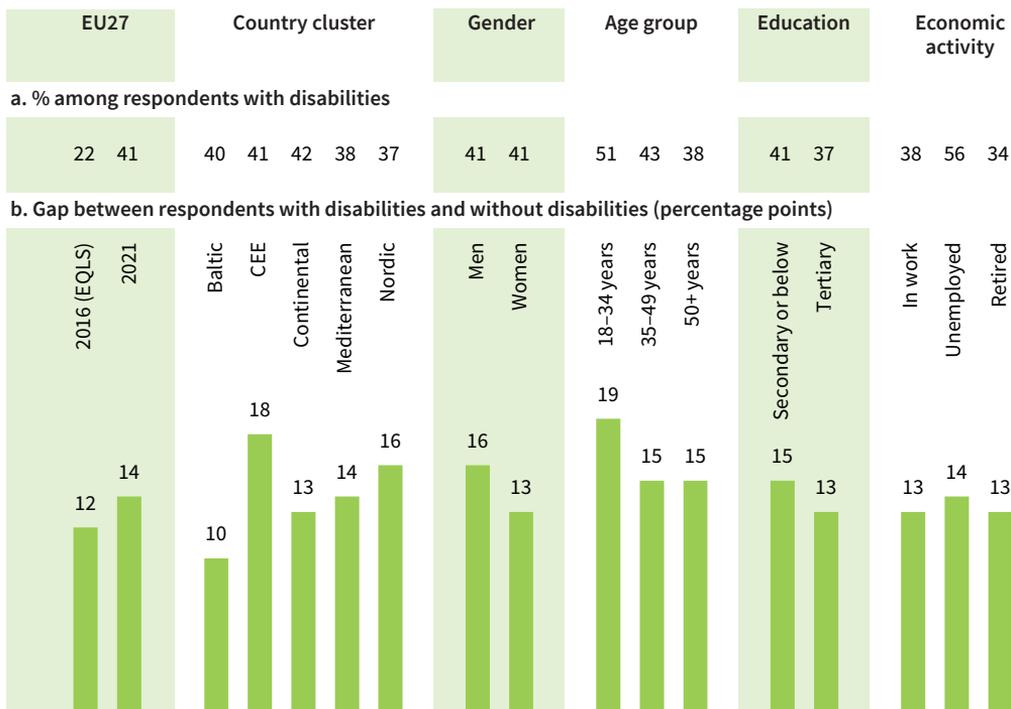
EQLS, 22% of Europeans with disabilities reported feeling lonely, compared to 10% of those without disabilities.

Over half of unemployed and younger people with disabilities were lonely

More than two out of five (41%) respondents with disabilities reported feeling lonely during the pandemic (Figure 6a).

The Eurofound report *Impact of COVID-19 on young people in the EU* has documented how the lockdowns and restrictions particularly affected young people. The e-survey shows that among respondents with disabilities more of those in the youngest age bracket (51%) reported feeling lonely than their older counterparts. Furthermore, they were much more likely to feel lonely than those in the same age bracket without disabilities, by a margin of 19 percentage points (Figure 6b). The sense of loneliness was most prevalent among respondents with disabilities who were unemployed (56%).

Figure 6: Self-reported loneliness, EU27



Note: The 2016 EQLS results are shown for reference only and cannot be compared with the e-survey results.

Source: EQLS 2016 and Living, working and COVID-19 e-survey; author's calculations

Social exclusion

The third indicator measures social exclusion, asking respondents whether they felt left out of society. In 2016, 14% of Europeans with disabilities felt excluded, compared to 6% of those without disabilities.

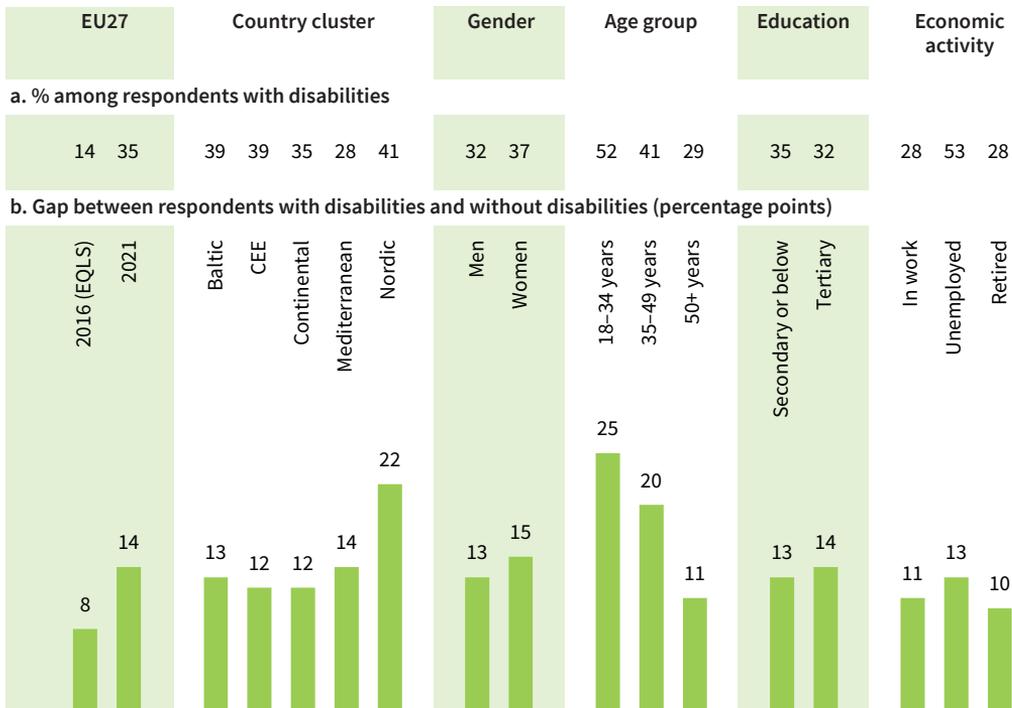
Over a third of respondents with disabilities felt left out of society

This was another area where people with disabilities fared less well during the COVID-19 pandemic: in spring 2021, 35% reported feeling left out of society, compared to 21% of respondents without disabilities. Again, this feeling was most widespread among unemployed respondents with disabilities (53%, Figure 7a).

Notwithstanding the gap between people with and without disabilities, being in work had a positive impact for both groups, as lower proportions (28% and 17%, respectively) reported feeling left out of society.

According to the e-survey, the sense of feeling left out of society was nearly twice as common among younger people who had a disability than those who did not (52% and 27%, respectively). A very large gap between those with and without disabilities is also found in the Nordic cluster (41% vs 19%).

Figure 7: Feeling left out of society, EU27



Note: The 2016 EQLS results are shown for reference only and cannot be compared with the e-survey results.

Source: EQLS 2016 and *Living, working and COVID-19* e-survey; author's calculations

Financial situation

To gain an insight into the financial situation of people with disabilities during the pandemic, we look at three indicators: difficulty making ends meet, financial fragility and arrears in household payments. The first and third of these were included in the 2019 EU-SILC survey, so the situation of Europeans with disabilities with regard to these indicators prior to the COVID-19 pandemic can be indicated.

Difficulty making ends meet

The first indicator – difficulty making ends meet – measures the extent to which people live in households whose financial resources do not cover their everyday necessary expenses. Prior to the pandemic, in 2019, EU-SILC data showed that 57% of adults (aged 16 or over) with disabilities lived in a household that had at least some difficulty making ends meet, compared with 43% of the adult population with no disability (Eurostat, 2021b).

Nearly 6 out of 10 respondents with disabilities lived in a household with difficulty making ends meet

In spring 2021, 57% of e-survey respondents with disabilities lived in a household that had difficulty making ends meet, while this was the case for 39% of respondents without

disabilities. Across the country clusters, the proportions range from 39% in the Nordic cluster to 77% in the Baltic cluster.

Among the respondents with disabilities, 34% were in work, either employed or self-employed.² Of those who were employed, difficulty making ends meet was significantly more prevalent among those who were in temporary rather than permanent employment (54% and 44%, respectively; Table 3). Contract type did not lead to significant differences in this indicator among the sample without disabilities.

People with disabilities often have a more precarious employment situation, which may have a bearing on the survey finding that, among working respondents, more workers with disabilities (47%) than workers without disabilities (34%) lived in a household that had difficulty making ends meet, a gap of 13 percentage points (Figure 8b). Among the unemployed sample, difficulty making ends meet was very prevalent among people both with and without disabilities (86% and 79%, respectively).

As Figure 8b shows, there are large gaps in this indicator between respondents with and without disabilities for most of the subgroups, with the largest gap in the Nordic cluster.

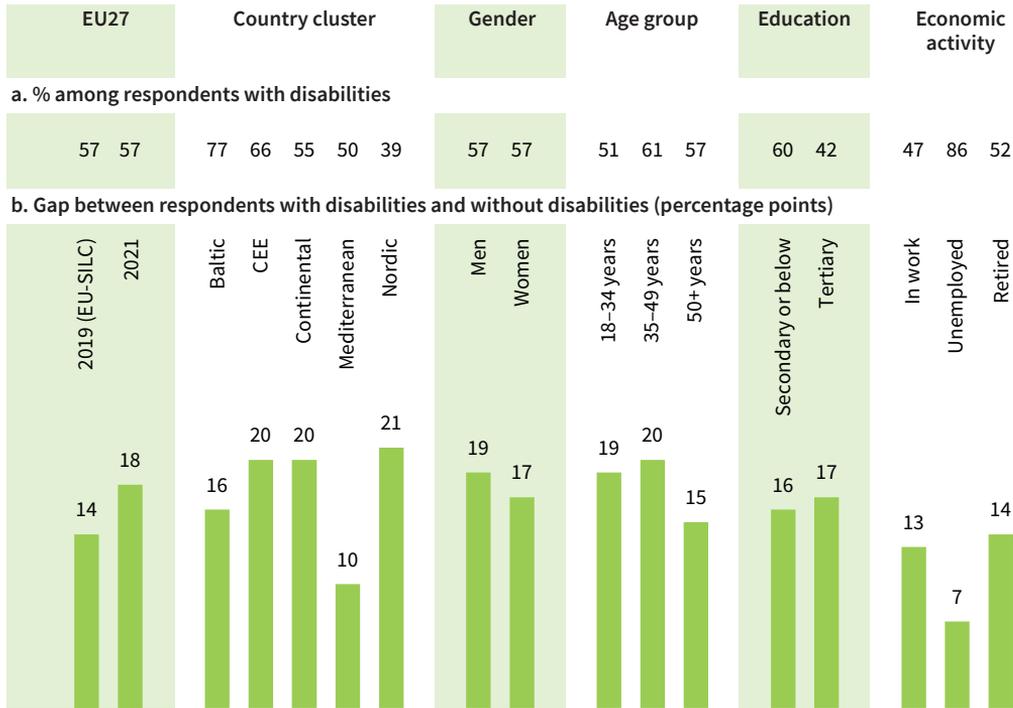
Table 3: Difficulty making ends meet (%), by employment contract type, respondents with and without disabilities compared, EU27

	Respondents with disabilities		Respondents without disabilities	
	Permanent contract	Temporary or no contract	Permanent contract	Temporary or no contract
Difficulty	44	54	32	32
No difficulty	56	47	68	68

Source: Living, working and COVID-19 e-survey; author's calculations

² 34% of e-survey respondents with disabilities of working age (18–64 years) were in work, compared to 61% of those without disabilities; the employment gap was 24.4 percentage points. The latest available official data, from the 2019 EU-SILC, indicated the same employment gap among Europeans aged 16–64 years.

Figure 8: Difficulty making ends meet, EU27



Note: The 2019 EU-SILC results are shown for reference only and cannot be compared with the e-survey results.
Source: EU-SILC [hlth_dm060] and *Living, working and COVID-19* e-survey; author's calculations

Financial fragility

To measure the extent of financial fragility among Europeans, respondents were asked how long they would be able to maintain their current standard of living without an income.³

Two-thirds of respondents with disabilities were financially fragile

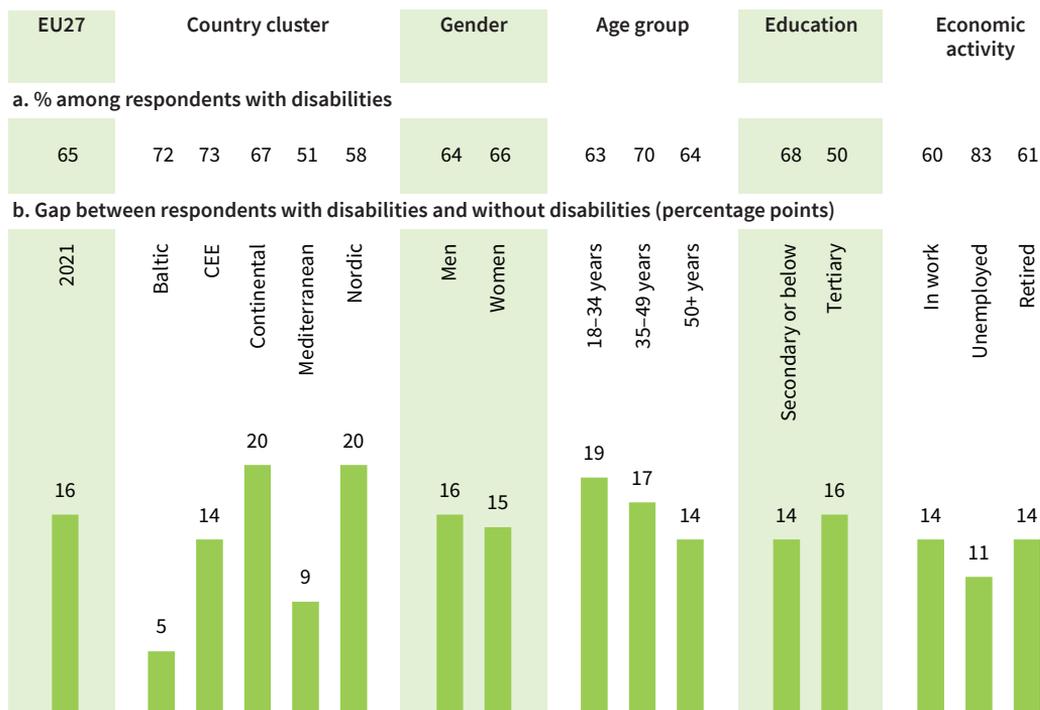
Two out of three respondents with disabilities (65%) indicated that if their household lost its income, they would be able to maintain the same standard of living for less than three months; this was the case for around half of respondents without disabilities (49%). This financial fragility ranged from 51% in the Mediterranean cluster to over 70% in the Baltic (72%) and CEE (73%) clusters (Figure 9a). Large differences were also noted among respondents with different educational attainment levels: 50% of those who had

completed tertiary education and 68% of those with no more than secondary education were in a financially insecure situation. This measure of financial fragility was most widespread among unemployed respondents, both among those with disabilities (83%) and those without (72%).

There is significant variation in the gaps between people with and without disabilities across the various subgroups included in the analyses and particularly between the country clusters (Figure 9b). The gaps are smallest in the Baltic and Mediterranean clusters and are largest in the Nordic and Continental clusters, where respondents with disabilities were far more likely to have reported living in a financially insecure household. The survey also shows that far more younger people with disabilities were at risk than their non-disabled counterparts.

³ The question was included in the EU-SILC 2020, but results were not available at the time of writing.

Figure 9: Able to maintain standard of living without an income for no more than 3 months, EU27



Source: Living, working and COVID-19 e-survey; author’s calculations

Arrears in household payments

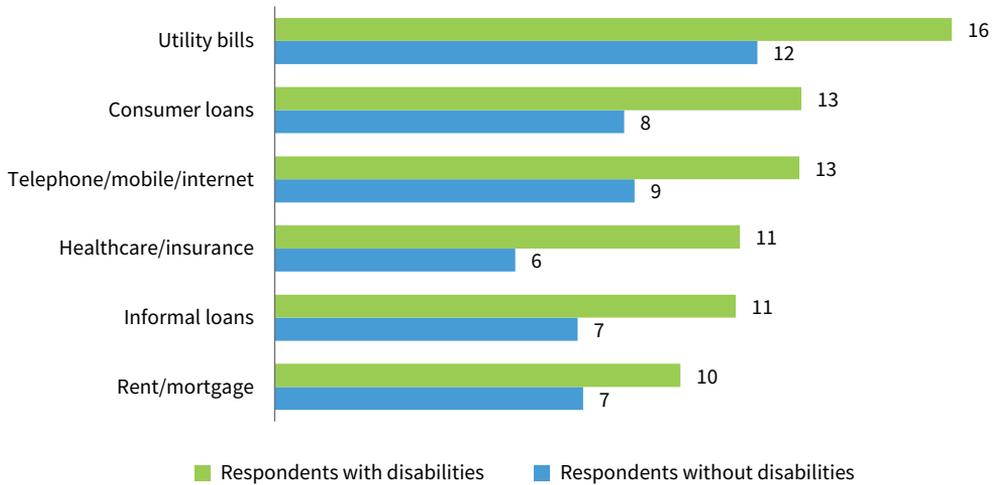
The third indicator of people’s financial situation – being behind with household payments relating to a mortgage or rent, utility bills or hire purchases – measures whether the household of the respondent has been in arrears at any time in the three months prior to the survey. In 2019, people with disabilities were slightly more likely to be in arrears than people without disabilities: 9.1% of adults with disabilities in the EU lived in households that were behind with their

payments in the 12 months prior to being surveyed, compared with 7.2% of the adult population with no disabilities (Eurostat, 2021c).

More respondents with disabilities reported being in arrears

In comparison to respondents without disabilities, payment problems were more common among those with disabilities for all six types of arrears that were measured by the e-survey (Figure 10).

Figure 10: Proportion reporting arrears (%), by type of arrears, respondents with and without disabilities compared, EU27



Source: *Living, working and COVID-19 e-survey*; author's calculations

It is evident that having a job is important for people's ability to make household payments, although even among respondents who were employed or retired, more of those with disabilities reported arrears than other respondents. Earlier reporting, in the

factsheet *Living, working and COVID-19 (Update April 2021)*, showed that the proportion of respondents reporting payment problems was highest among the unemployed. As Table 4 shows, having a disability clearly adds another layer of disadvantage.

Table 4: Arrears among respondents with and without disabilities (%), by type of arrears and employment status, EU27

	Not unemployed		Unemployed	
	Respondents without disabilities	Respondents with disabilities	Respondents without disabilities	Respondents with disabilities
Utility bills	9	13	37	42
Telephone/mobile/internet	7	10	29	33
Informal loans	6	8	21	32
Consumer loans	7	11	23	29
Healthcare/insurance	5	9	16	26
Rent/mortgage	6	8	22	24

Source: *Living, working and COVID-19 e-survey*; author's calculations

Table 5: Percentage of respondents with disabilities in arrears (%), by type of arrears, EU27

	Rent/ mortgage	Utility bills	Consumer loans	Telephone/ mobile/ internet	Informal loans	Healthcare/ insurance
EU27	9.7	16.1	12.6	12.5	11.0	11.1
Country cluster						
Baltic	12.7	27.5	20.4	23.2	18.8	18.8
CEE	13.3	17.7	14.6	16.6	15.0	12.4
Continental	7.0	12.0	10.0	9.0	8.0	10.0
Mediterranean	12.1	20.1	14.5	12.6	11.1	9.5
Nordic	8.0	11.0	10.0	8.0	11.0	11.0
Gender						
Men	10.8	16.8	14.0	13.3	12.1	11.4
Women	8.7	15.6	11.4	11.8	10.0	10.7
Economic activity						
In work	7.6	11.7	11.8	9.4	9.3	9.4
Unemployed	24.0	42.0	29.0	33.0	32.0	26.0
Retired	5.8	10.1	7.3	7.5	5.5	7.0

Source: Living, working and COVID-19 e-survey; author's calculations

An examination of the results by country cluster indicates that, in the Nordic cluster, below 5% of respondents without disabilities had arrears, while among the group of respondents with disabilities, as Table 5 shows, it was as high as 11% in the case of utility bills, informal loans, and healthcare/insurance costs. The likelihood of being behind with rent

or mortgage payments was nearly three times as high among respondents with disabilities (8%, compared to 3% for those without disabilities).

There are also larger gaps in the Nordic cluster than in the other clusters between respondents with and without disabilities for four of the six types of arrears (Table 6).

Table 6: Gap between respondents with and without disabilities (percentage points), by type of arrears, EU27

	Rent/ mortgage	Utility bills	Consumer loans	Telephone/ mobile/ internet	Informal loans	Healthcare/ insurance
EU27	2.3	4.6	4.2	3.9	3.8	5.4
Country cluster						
Baltic	1.1	2.6	2.3	2.7	4.2	6.3
CEE	5.0	7.0	6.8	7.5	6.9	7.0
Continental	1.4	4.7	4.1	3.7	3.3	4.2
Mediterranean	2.7	5.4	4.3	2.9	1.9	5.3
Nordic	5.5	7.1	6.1	5.0	8.3	7.9
Gender						
Men	3.7	5.7	5.1	5.0	5.4	5.9
Women	4.6	3.7	3.5	3.1	2.2	4.6
Economic activity						
In work	1.6	2.5	4.0	2.3	2.8	4.2
Unemployed	2.0	5.0	6.0	4.0	11.0	10.0
Retired	1.0	2.9	3.3	3.5	1.7	4.0

Source: Living, working and COVID-19 e-survey; author's calculations

Optimism about the future

Finally, for insight into how the pandemic affected the well-being of people with disabilities, we examine their level of optimism about their future. This measure of eudaemonic well-being (or good positive functioning) is one of the strongest determinants of higher levels of life satisfaction and happiness (Eurofound, 2017). In 2016, 46% of Europeans with disabilities were optimistic about their future, compared to 66% of those without disabilities, according to the EQLS.

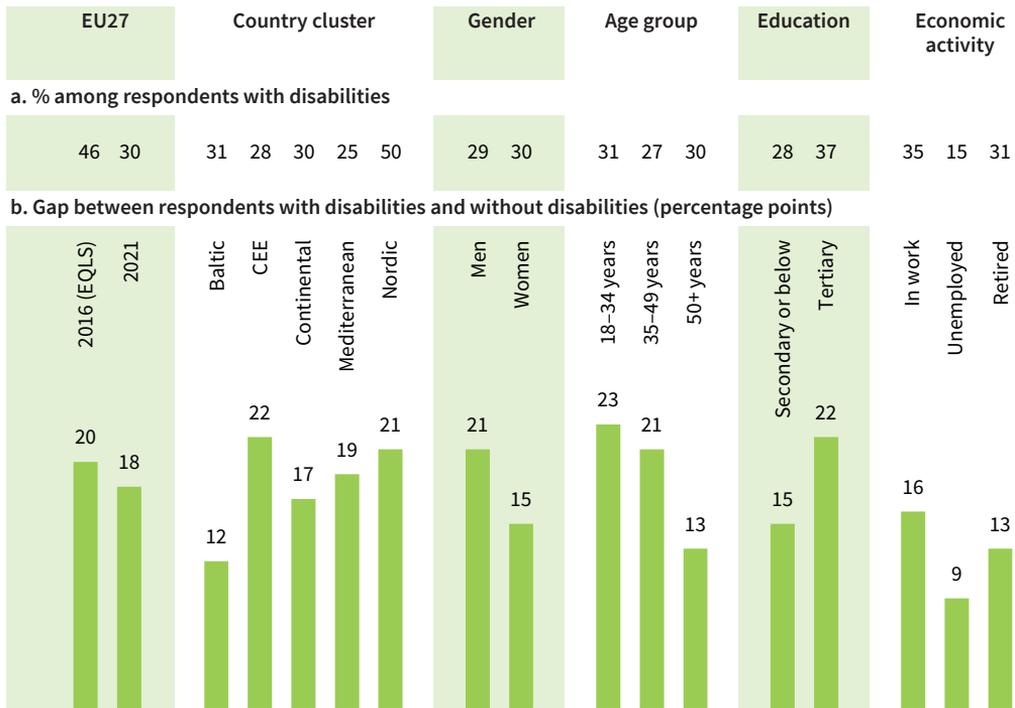
Only 3 out of 10 respondents with disabilities were optimistic about their future

In spring 2021, close to one-third of respondents (30%) with disabilities were optimistic about their future, whereas this was the case for nearly half of respondents without disabilities (47%). In all country clusters and for all sociodemographic groups examined, significantly smaller proportions of people

with disabilities were optimistic about their future than those without disabilities.

While having a disability influences people's view about their future, further analyses show that other factors also matter. Optimism was lowest among unemployed respondents, both with and without disabilities (15% and 24%, respectively). It was highest in the Nordic cluster, the only cluster where among the respondents with disabilities, those who were optimistic equalled those who were not (Figure 11a). However, the gap in optimism levels between those with and without disabilities is high in this cluster, as 71% of respondents without disabilities expressed optimism about their future. As Figure 11b shows, large gaps are found in the first two age groups, in some of the country clusters and among men. Whereas among respondents without disabilities, men were more optimistic than women, there were no differences between men and women among respondents with a disability.

Figure 11: Optimism about one's future, EU27



Note: The 2016 EQLS results are shown for reference only and cannot be compared with the e-survey results.

Source: EQLS 2016 and Living, working and COVID-19 e-survey; author's calculations



Policy pointers

- The findings from the *Living, working and COVID-19* survey support the call made in the new European Disability Strategy to scale up action on improving the living conditions of people with disabilities. In many areas of life, their situation continues to be significantly worse compared to that of other Europeans.
- Stakeholders have long called for timely and disaggregated disability data. The *Living, working and COVID-19* e-survey provides a useful stocktake for policymakers at the start of the new disability strategy. It is also the only EU-wide survey to offer a detailed picture of the social and financial situation of people with disabilities during the COVID-19 pandemic.
- The data highlight the importance of affordable healthcare, as many people with disabilities were unable to get medical treatment during the pandemic. The data also show an urgent need to improve access to mental healthcare services, as a quarter of respondents with disabilities reported unmet needs in this area.
- Poor mental health affects a large proportion of people with disabilities and requires urgent attention to reduce the widespread risk of depression among this group of citizens. Measures are needed to mitigate the factors that lead to poor mental health, particularly because the COVID-19 pandemic and the social isolation restrictions have affected people with disabilities more than the population at large. The reported high levels of social exclusion demand measures that enable people with disabilities to be fully part of their community, and to enjoy the liberty to choose with whom and how they live.
- In a fair and social Europe, people with disabilities must be able to enjoy the same standard of living as everyone else. The data show a large gap in the financial situations of people with and without disabilities, with larger numbers of people with disabilities reporting difficulty making ends meet, financial fragility and arrears. People with disabilities are more likely to be out of work, for instance, which adds an additional layer of disadvantage. Increased participation in employment is needed to reduce the large financial inequalities between those who have and those who do not have a disability.

- But even for those in work, the findings from the e-survey highlight significant gaps between people with and without disabilities. This underscores the need for more action to improve the working conditions of people with disabilities. One promising way forward is the European Pillar of Social Rights Action Plan for the Social Economy, which aims to tap into the potential of the social economy to create quality jobs and contribute to fair, sustainable and inclusive growth.
- This policy brief has identified issues that call for more tailored approaches to improve the situation of people with disabilities. For young people with disabilities, for instance, action is needed to increase their sense of belonging, whereas retired people with disabilities would benefit more from actions that reduce the risk of depression.



Resources

All Eurofound publications are available online at www.eurofound.europa.eu

Eurofound topic 'Disability and chronic disease':

<https://www.eurofound.europa.eu/topic/disability-and-chronic-disease>

Eurofound topic 'COVID-19': <https://www.eurofound.europa.eu/topic/covid-19>

Eurofound (2017), *European Quality of Life Survey 2016: Quality of life, quality of public services and quality of society*, Publications Office of the European Union, Luxembourg, available at <http://eurofound.link/ef17033>.

Eurofound (2018), *The social and employment situation of people with disabilities*, Publications Office of the European Union, Luxembourg, available at <http://eurofound.link/ef18023>.

Eurofound (2021a), *Impact of COVID-19 on young people in the EU*, Publications Office of the European Union, Luxembourg, available at <http://eurofound.link/ef20036>.

Eurofound (2021b), *Living, working and COVID-19 (Update April 2021): Mental health and trust decline across EU as pandemic enters another year*, Publications Office of the European Union, Luxembourg, available at <http://eurofound.link/ef21064>.

Eurofound and EIGE (2021), *Upward convergence in gender equality: How close is the Union of equality?* Publications Office of the European Union, Luxembourg, available at <http://eurofound.link/ef21041>.

European Commission (2021a), *Union of equality: Strategy for the rights of persons with disabilities 2021–2030*, Publications Office of the European Union, Luxembourg.

European Commission (2021b), *Economic policy coordination in 2021: Overcoming COVID-19, supporting the recovery and modernising our economy*, COM(2021) 500 final, Brussels.

Eurostat (2021a), *Self-reported unmet needs for medical examination by level of activity limitation, sex and age*, data table, EU-SILC, hlth_dh030.

Eurostat (2021b), *Ability to make ends meet by level of activity limitation, sex and age*, data table, EU-SILC, hlth_dm060.

Eurostat (2021c), *Arrears (mortgage or rent, utility bills or hire purchase) by level of activity limitation, sex and age*, data table, EU-SILC, hlth_dm050.

Hillgrove, T., Blyth, J., Kiefel-Johnson, F. and Pryor, W. (2021), 'A synthesis of findings from "rapid assessments" of disability and the COVID-19 pandemic: Implications for response and disability-inclusive data collection', *International Journal of Environmental Research and Public Health*, Vol. 18, No. 18, p. 9701.

Van der Zwan, R. and de Beer, P. (2021), 'The disability employment gap in European countries: What is the role of labour market policy?' *Journal of European Social Policy*, Vol. 31, No. 4, pp. 473–486.

Getting in touch with the EU

In person

All over the European Union there are hundreds of Europe Direct information centres.

You can find the address of the centre nearest you at:

https://european-union.europa.eu/contact-eu_en

On the phone or by email

Europe Direct is a service that answers your questions about the European Union.

You can contact this service:

- by freephone: 00 800 6 7 8 9 10 11 (certain operators may charge for these calls)
- at the following standard number: +32 22999696
- by email via: https://european-union.europa.eu/contact-eu_en

Finding information about the EU

Online

Information about the European Union in all the official languages of the EU is available on the Europa website at: <https://europa.eu>.

EU publications

You can download or order free and priced EU publications at: <https://op.europa.eu/en/publications>.

Multiple copies of free publications may be obtained by contacting Europe Direct or your local information centre (see https://european-union.europa.eu/contact-eu_en).

EU law and related documents

For access to legal information from the EU, including all EU law since 1952 in all the official language versions, go to EUR-Lex at: <http://eur-lex.europa.eu>

Open data from the EU

The EU Open Data Portal (<http://data.europa.eu/euodp>) provides access to datasets from the EU. Data can be downloaded and reused for free, both for commercial and non-commercial purposes.

A new European Disability Strategy was launched in 2021 with the aim of intensifying progress on ensuring the full participation of people with disabilities in society. The increase of EU policy focus on people with disabilities is timely: the COVID-19 pandemic magnified the challenges they faced in many spheres of their lives.

This policy brief explores the situation of Europeans with disabilities during the pandemic. Using data from the third round of the *Living, working and COVID-19* e-survey, conducted in February–March 2021, it compares the situation of respondents with and without disabilities in four areas: access to healthcare, mental well-being, financial situation and optimism about the future. The analyses show that on all indicators the situation of people with disabilities was significantly worse.

The European Foundation for the Improvement of Living and Working Conditions (Eurofound) is a tripartite European Union Agency established in 1975. Its role is to provide knowledge in the area of social, employment and work-related policies according to Regulation (EU) 2019/127.

