



“ Society is the disability ”

Disabled Women and Work

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‘Society is the Disability’

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1. Introduction

‘Society’s the disability.’ – Cardiff focus group participant

Since Chwarae Teg was established in 1992, gender equality in Wales is closer to being realised. Women in Wales share many of the same challenges in their working lives, but are not a homogenous group. Opportunities and experiences at work are shaped by gender, and factors such as having an impairment or a long-term health condition, ethnicity, nationality, and age. Much work still needs to be done to ensure equality of outcome for all women in Wales, particularly disabled women.¹

Disabled women are disadvantaged in the labour market because of assumptions, stereotypes, and biases about their gender and their impairment and health condition. Disabled women are less likely than non-disabled women and men to be employed; 50% of disabled women in Wales are employed, compared to 52% of disabled men, 78% of non-disabled women, and 85% of non-disabled men.² Despite being highly qualified, disabled women have lower participation rates in higher skilled occupations and are less likely to advance in their careers.³

¹ The research process revealed the debate around terminology and inclusive language. Section 3 explains our adoption of the Social Model of Disability. Using the guidelines from Disability Wales, I use identity-first language where appropriate throughout this report to emphasise that people with impairments are disabled by barriers in society. I recognise that not every person – including some of our research participants - with an impairment or health condition will refer to themselves in this way. I use the terms disabled women, and conversely non-disabled women to refer to women who do not face these barriers. <http://www.disabilitywales.org/socialmodel/inclusive-language-and-imagery/> Accessed 27/03/2020.

² Annual Population Survey (APS), Table TO2a Economic Activity by Disability (Equality Act), October 2018-September 2019, 16-64 year olds.

³ European Parliament (March 2017), Directorate-General for Internal, Policy Department, Economic and Scientific Policy, ‘Study on Discrimination and Access to Employment for Female Workers with Disabilities. Case Study: The United Kingdom’, IP/A/EMPL/2016-20 PE602.67, p5 [https://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN05\)_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN05)_EN.pdf) Accessed 04/04/2020

There is a pronounced disability pay gap (DPG) which intersects with, and is exacerbated by the gender pay gap (GPG).⁴ In 2018, the DPG in the UK was 12.2% and in Wales was 9.9%.⁵ Women are consistently paid lower than men on average, and disabled women are paid the least.⁶ While the DPG in Wales is wider for men (11.6%) than for women (10.1%)⁷, it intersects with the GPG, which is currently 14.5% in Wales.⁸

The experiences of disabled women can vary considerably, and age, ethnicity, education level and other factors shape their experiences in the workplace. The disability employment gap varies by region and widens in regions with low employment rates. In Wales, the disability employment gap is 42%.⁹ The specific impairment or health condition that women have is also a factor in women's experiences. For instance, a D/deaf¹⁰ woman who communicates through British Sign Language (BSL) will likely require different adaptations from a woman with a long-term health condition, such as endometriosis. Research suggests that in the UK, women with a mental health condition are at more of a labour market disadvantage than disabled women in general.¹¹ People's attitudes to impairment and long-term health is also important. Women with visible impairments – such as using a wheelchair or communicating through BSL – experience different reactions and have different expectations placed upon them than women with invisible or

⁴ Pay gaps are the percentage difference between the average (median) hourly pay of two groups, such as disabled and non-disabled workers.

⁵ Office for National Statistics (ONS), 'Disability Pay Gaps in the UK 2018' (December 2019), p11. <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/articles/disabilitypaygapsintheuk/2018?uri=peoplepopulationandcommunity/healthandsocialcare/disability/articles/disabilitypaygapsintheuk/2018> Accessed 04/04/2020.

⁶ ONS, 'Disability Pay Gaps 2018', p12.

⁷ ONS, 'Disability Pay Gaps 2018', p12.

⁸ Chwarae Teg, 'State of the Nation 2020', p5 <https://chwaraeteg.com/wp-content/uploads/2020/01/State-of-the-Nation-2020.pdf> Accessed 04/04/2020

⁹ Citizens Advice, 'Halving the Disability Employment Gap' (April 2017), p6 <https://www.citizensadvice.org.uk/Global/CitizensAdvice/Families%20Publications/Halvingthedisabilityemploymentgap.pdf> Accessed 31/03/2020

¹⁰ I use the term D/deaf to refer to people who are Deaf (sign language users) and deaf (who are hard of hearing but who have English as their first language and may lip-read and/or use hearing aids), and to reflect some Deaf people's emphasis of that identity. <https://www.gre.ac.uk/study/support/disability/staart/ddeaf> Accessed 14/04/2020.

¹¹ European Parliament, 'Study on Discrimination and Access to employment for female workers with Disabilities', p15-16 and TUC, 'Disability and Employment: A Social Model Study of the Employment Experience of Disabled People in Great Britain, with a Focus on Mental illness', TUC Economic Report Series 2015. <https://www.tuc.org.uk/sites/default/files/DisabilityandEmploymentReport.pdf> Accessed 05/04/2020

fluctuating conditions. Occupation and type of workplace is significant too. The adaptations required in an office will differ from those required in a shop or factory, depending on the employee's specific impairment or health condition.

There cannot be a one-size-fits-all approach to disability. It is imperative that businesses and employers listen to disabled women and their needs when making adaptations and introducing new policies and procedures. Disabled women should be heard and inform policy and practice in the workplace and in the Welsh and UK governments. Appointing and promoting more disabled women in businesses across Wales, and ensuring they are represented at all levels of government is central to this approach.

Women's voices and words are central to this research. They discuss the challenges they have faced as job seekers, in starting new jobs, progressing in their careers, in self-employment, and accessing support services. Underpinned by labour market data, and quantitative analysis of survey responses, qualitative research methods (survey and focus groups) elicited rich and emotive evidence of the lived experiences of disabled women's working lives.

The insights and recommendations will be valuable to employers and policy makers alike. Disabled women make clear the challenges that they face in their working lives: discrimination and bullying, being disbelieved and de-valued by management, colleagues, and recruitment panels. Even small changes can make a significant difference in disabled women's working lives.

Positive experiences of work are also captured through listening to disabled people, and best-practice examples are shared in this report. Having well-trained, knowledgeable, and empathetic staff at all levels who are open to adapting working practices to recruit and retain the best staff is important. However, disabled people's experiences in work should not depend on individual staff. Robust, effective policies for Welsh and UK governments, and within business are needed to guarantee consistency across the board.

At Chwarae Teg, we work to use our position to amplify women's voices, especially those women whose interests are not always adequately represented, as we strive to create a truly equal Wales. We seek to do justice to the women and men who have generously shared their experiences with us, and to fully and accurately represent their interests. We commit to using our position and influence for all women.

2. Disability, Gender and Employment

This section provides an overview of disabled women's economic activity and employment rates and demonstrates the gap in economic activity and employment rates between disabled women and disabled men, and non-disabled people.

Half of the 1.9 million working age people in Wales are women.¹² A quarter of the working age population has an impairment or a long-term health condition.¹³

Disabled women comprise 14% of the total working age population. There are more working age disabled women (55%) than disabled men.

2.1 Economic Activity

Table 1 shows that a higher percentage of non-disabled women and men are economically active¹⁴ than disabled women and men. Non-disabled men have the highest economic activity rates at 88%, while disabled women are least economically active, at 54%. These statistics do not account for unpaid but economically important activities, such as care.

¹² APS Table T02a October 2018-September 2019

¹³ Working age population is 16-64 years old.

¹⁴ Economic activity includes activities involved in producing, buying or selling products or services. These statistics do not account for the unpaid activities which are essential intermediaries in the economy, such as housework and childcare.

Table 1 – Economic activity among disabled and non-disabled females and males

	Female		Male	
	Disabled	Non-disabled	Disabled	Non-disabled
Economically Active	53.7	79.8	57.2	87.8
Economically Inactive	46.3	20.2	42.8	12.2
Total number of demographic group	257200	208600	692600	735800

i. Calculated as a percentage of total disabled and non-disabled working age population

A larger proportion of disabled men are economically active than disabled women (57% and 54%). However, in terms of actual figures, there are more economically active disabled women than disabled men (138,100 disabled women and 119,300 disabled men). Table 2 shows that a larger proportion of economically active disabled people are female, reflecting that there are more disabled women than men.

Table 2 – Economic activity of disabled people by gender

	Female	Male
	%	%
Economically Active	53.7	46.3
Economically Inactive	57.2	42.8
Total of all economically active disabled people	55.2	44.8

i. Calculated as a percentage of all economically (in)active disabled people

2.2 Employment Status

Only 50% of disabled women and 52% of disabled men are employed. By comparison, 78% of non-disabled women and 85% of non-disabled men are employed. The larger disability employment gap among men is largely due to non-disabled men's higher employment rates.¹⁵ Table 3 shows that more disabled people in Wales are unemployed, especially disabled men, than non-disabled men and women.

Table 3 – Employment status of all disabled and non-disabled females and males

	Female		Male	
	Disabled	Non-disabled	Disabled	Non-disabled
Employed	50.0	77.5	51.5	84.5
Unemployed	3.7	2.2	5.7	3.3

i. Calculated as a percentage of total disabled and non-disabled working age population

The vast majority of all employed people are employees rather than self-employed, and this is particularly pronounced for women. Disabled people are more likely to be self-employed than non-disabled people. Table 4 shows that more men, especially disabled men – close to 20% – are self-employed, which suggests a clear gender difference.

¹⁵ ONS, 'Disability Pay Gaps 2018', p6.

Table 4 – Employees and self-employed as a percentage of total employed

	Female		Male	
	Disabled	Non-disabled	Disabled	Non-disabled
Employees	90.2	91.2	78.7	82.5
Self-employed	8.9	8.4	19.5	16.9

i. Calculated as a percentage of employed

Further research is warranted into why men have higher rates of self-employment, and whether this is due to occupation, caring issues, or factors such as confidence. Section 7 explores how far self-employment is a positive choice or an adaptation to limited or unsuitable employment options among disabled women.

A complex picture emerges of disabled women's employment. There are more working-age disabled women in Wales than disabled men. Consequently, while a smaller proportion of disabled women are economically active, in real terms, a larger number of disabled women than men are economically active. A smaller proportion of disabled women are employed and self-employed than other groups, pointing to the barriers disabled women face in accessing paid work. The words of disabled women in this report illuminate where those barriers are and what form they take.

3. Defining Disability: the Social Model of Disability

‘Disability is the inequality, disadvantage, disempowerment or discrimination which may affect people with impairments as a result of barriers to access and inclusion’.¹⁶

Historically, disability in the UK was based on the Medical Model of Disability (MMoD), in which a person’s impairment or health condition is seen as disabling,¹⁷ and prevents them from doing tasks in the same way as someone without an impairment or health condition. In contrast, under the Social Model of Disability (SMoD), disability is caused by how society is organised.¹⁸ The impairment or health condition itself is not the disability. Disability is the barriers that people with impairments and long term health conditions experience in their day-to-day life. These barriers can be attitudinal, institutional, communication and/or environmental.¹⁹

While the MMoD believes that ‘impairments or differences should be ‘fixed’ or changed by medical and other treatments,²⁰ the SMoD places the emphasis on removing the barriers within our society that disable people. Removing these barriers becomes a collective and societal responsibility, rather than an individual one.

Barriers can only be successfully removed when the varied experiences of disabled people are fully understood, actively considered and used in the evidence based policy making.²¹ Adopting the SMoD requires a shift in attitudes, culture, and in how

¹⁶ Welsh Government, Consultation Document, ‘Action on Disability: the Right to Independent Living’ (October 2018), p11. <https://gov.wales/sites/default/files/consultations/2018-10/181018-action-on-disability-consultation-v1.pdf> Accessed 31/03/2020

¹⁷ Welsh Government, ‘Action on Disability’.

¹⁸ Welsh Government, ‘Action on Disability’ and European Parliament, ‘Study on Discrimination and Access to Employment for Female Workers with Disabilities’.

¹⁹ Welsh Government, ‘Action on Disability’, p12-13

²⁰ Disability Nottinghamshire, ‘The Social Model vs The Medical Model of Disability’ <http://www.disabilitynottinghamshire.org.uk/?s=social+model> Accessed 31/03/2020

²¹ Welsh Government, ‘Action on Disability’, p12

work is organised. What this shift looks like is examined in depth in the 'Gender Equality Review' by Chwarae Teg. There is a need for an equalities mainstreaming approach which is built on an equity model, moves beyond legal minimum requirements, and which 'recognises that there are structural inequalities that could prevent people from participating.'²²

3.1 Gender and Disability

This research makes apparent where and how disability and gender intersect, exploring the points of convergence and divergence between disabled women and disabled men, and non-disabled women. Disabled women and men face many of the same barriers when trying to access work. However, these barriers can impact women and men differently, and some barriers are unique to disabled women. In a similar way, while all women face inequalities in labour market participation, career progression, occupational segregation in low-paid sectors, unequal outcomes, and a persistent gender pay gap, disabled women encounter barriers and have experiences which are not shared by non-disabled women. Gender and disability intersect with other protected characteristics, such as race or ethnicity.

An intersectional approach is necessary to understand the experiences of disabled women in Wales. Intersectionality is a framework for understanding how social and political identities combine to create unique modes of discrimination. Power structures based on factors such as gender, race, sexuality, disability, class, age and faith interact with one another and create inequalities, discrimination and oppression. One single form of discrimination cannot and should not be understood in isolation from another.²³

²² Davies, Natasha and Furlong, Cerys, (June 2019), 'Deeds not Words. Review of Gender Equality in Wales (Phase Two)', p16-17. <https://chwaraeteg.com/wp-content/uploads/2019/09/Deeds-Not-Word-full-report.pdf> Accessed 14/04/2020.

²³ Davies and Furlong, 'Deeds not Words', p13.

Disabled women experience 'combined discrimination'.²⁴ Disabled women face sexist and ableist attitudes both separately and together. A UN report underlines that disabled women face significantly more difficulties accessing adequate housing, health, education, vocational training and employment, and are more likely to be institutionalised. Disabled women are treated unequally in recruitment, promotion rates, and pay, access to training, credit and other productive resources, and participate less in economic decision-making.²⁵

Opportunity Now explored the tensions women aged 28 to 40 experience in the workplace and found that while more than half of the women surveyed (52%) have experienced bullying or harassment at work, 71% of disabled women reported instances of bullying or harassment in the workplace.²⁶ A Welsh Government study shows that disabled people view negative attitudes of some employers and co-workers as the main barrier to employment.²⁷

Disability and gender pay gaps mean that disabled women are paid less on average than women on average, and disabled and non-disabled men. Disabled women are paid £9.93 an hour on average, which is less than non-disabled women (£11.05), disabled men (£11.67), and non-disabled men (£13.20).²⁸ There is a 11.3% pay gap between disabled women and non-disabled men. Among disabled people with certain impairments, the pay gap can be as large as 18.9%.²⁹

Disabled women's inequality in the labour market causes a barrier to their ability to live independently and avoid segregation and isolation in their communities. It increases the risk of abuse and violence at home, in the workplace, or when

²⁴ Waters, C., 2018. 'The 'double whammy' of being a disabled woman in the UK', EHRC Blogpost. <https://www.equalityhumanrights.com/en/our-work/blogs/%E2%80%98double-whammy%E2%80%99-being-disabled-woman-uk> Accessed 31/03/2020.

²⁵ UN Department of Economic and Social Affairs, 'Women and Girls with disabilities' <https://www.un.org/development/desa/disabilities/issues/women-and-girls-with-disabilities.html> Accessed 31/03/2020

²⁶ Business in the Community and PricewaterhouseCoopers (PwC), (2014). 'Opportunity Now - Project 28-40: The Report' <https://ftsewomenleaders.com/wp-content/uploads/2015/08/Opportunity-now-Project-28-40.pdf> Access 05/04/2020

²⁷ 'Action on Disability'. *Op cit*.

²⁸ ONS, 'Disability Pay Gaps 2018', p11.

²⁹ ONS, 'Disability Pay Gaps 2018', p2.

socialising.³⁰ Research by Disability Wales and Welsh Women's Aid shows that disabled women can be in situations where they are more vulnerable to domestic abuse and violence.³¹

Healthcare is another concern. Periods, reproductive health, endometriosis, and menopause which can affect women's health and day-to-day activities, are often considered taboo topics. Women's health is not openly talked about in the workplace. Disabled women face serious barriers in accessing information about sex and making choices about contraception. In addition, disabled pregnant women do not always receive the appropriate support.³²

Disabled women therefore experience multiple discrimination in many aspects of their lives, but especially in work. The evidence in this report further illustrates how this affects disabled women's experiences with work, and shows how important an intersectional approach is to understanding experiences and identifying barriers to labour market participation.

³⁰ ONS, 'Disability Pay Gaps 2018', p11.

³¹ Disability Wales and Welsh Women's Aid, 'Supporting disabled people experiencing violence against women, domestic abuse and sexual violence in Wales' (May 2019), <https://www.welshwomensaid.org.uk/2019/05/welsh-womens-aid-and-disability-wales-report/> Accessed 31/03/2020

³² Waters, 'The 'double whammy' of being a disabled woman in the UK'.

4. Disability and Public Policy

This section provides an overview of the current policy landscape regarding disabled people and paid employment. Policy interventions are identified, especially those which were discussed by research participants, and assessed in terms of their current responsiveness to disabled women's needs.

The 2010 Equality Act is the key legislative intervention safeguarding disabled people's rights. Under this Act, employers and service providers have a duty to remove the barriers disabled people face.³³ Employers must make 'reasonable adjustments' for disabled employees, so that they are not disadvantaged compared to non-disabled people. Reasonable adjustments include a phased return to work, time off for medical treatment or counselling, assigning tasks to other employees, providing practical aids and technical equipment.³⁴

Interventions largely fall under two categories: supporting disabled people at work, and encouraging disabled people into work. The efficacy of these programmes is further discussed in Section 8 which discusses research participants' experiences with support programmes. However, three main issues may be raised about how responsive these policies are to the needs of disabled women.

Firstly, policies and welfare reforms tend to target those most distanced from the labour market, such as unemployed people, to encourage them into work. Many programmes are open to, but not specifically designed for disabled people, raising questions about their suitability in removing the barriers disabled people face in accessing paid work. The biggest barriers for disabled women are come from businesses, employers and other staff, who do not adjust roles and workplaces to be sufficiently accessible and inclusive. Interventions targeted at the individual will not break down these barriers. Research by DRILL and Cardiff University highlights the dearth of research on disabled people in professional occupations which is

³³ Welsh Government, 'Action on Disability', p11

³⁴ UK Government, 'What to do if you become disabled' <https://www.gov.uk/if-you-become-disabled/if-youre-in-employment-and-become-disabled> Accessed 30/03/2020 and 'Disability Rights', <https://www.gov.uk/rights-disabled-person/employment> Accessed 30/03/2020

subsequently reflected in social employment policy, 'which has concentrated on the entry of disabled people into 'any work', often meaning low skilled and low paid jobs, instead of starting from the assumption that the labour market is failing to utilise untapped talent.'³⁵

Secondly, programmes aimed at upskilling and training will not be an appropriate intervention for all disabled people. Many schemes are targeted at people, for example, with few or no qualifications, or who are long-term unemployed. Lack of skills or training is not the issue preventing highly qualified and skilled disabled women from accessing quality employment. For example, the conditionality element of Universal Credit requires claimants to increase their income through doing more hours or moving into higher paid work; this will be ineffective if these roles are not available. A key barrier to UC claimants with a conditionality element is the absence of more or better paying work in their local area.³⁶ There must be a balance between policy commitments to increase the number of disabled people in work with commitments to equality of outcome, to reducing disability and gender pay gaps, and ensuring disabled people can pursue and be successful in their career of choice.

Thirdly, many disabled women are also carers and need support to access suitable childcare. While schemes are available to provide funding for childcare for parents, including those who are disabled, they may not meet the childcare needs of disabled women. Chwarae Teg has previously raised concerns that the current 30-hour childcare offer is not working well for women in paid work.³⁷ Many of the disabled women who participated in the research said that part-time or flexible employment works better for them, and any childcare offer has to be responsive to these needs.

³⁵ Foster, Debbie and Hirst, Natasha (January 2020), DRILL and Cardiff University, 'Legally Disabled? The career experiences of disabled people working in the legal profession', p7. <http://legallydisabled.com/wp-content/uploads/2020/01/Legally-Disabled-full-report-FINAL.pdf> Accessed 15/01/2020

³⁶ Citizens Advice, 'Citizens Advice response to the Work and Pensions Select Committee consultation on In Work Progression' (May 2019), p3 [https://www.citizensadvice.org.uk/Global/CitizensAdvice/welfare%20publications/Surveys%20and%20consultation%20responses/Citizens%20Advice%20response%20to%20the%20Work%20and%20Pensions%20Select%20Committee%20consultation%20on%20In%20Work%20Progression%20\(May%202019\).pdf](https://www.citizensadvice.org.uk/Global/CitizensAdvice/welfare%20publications/Surveys%20and%20consultation%20responses/Citizens%20Advice%20response%20to%20the%20Work%20and%20Pensions%20Select%20Committee%20consultation%20on%20In%20Work%20Progression%20(May%202019).pdf) Accessed 31/03/2020

³⁷ Davies, Natasha (August 2018), 'Childcare Briefing' <https://chwaraeteg.com/wp-content/uploads/2019/01/Briefing-Paper-childcare-Aug-2018.pdf> Accessed 04/04/2020

It is worth reiterating one of the main recommendations of the 'Gender Equality Review', which calls for a move towards an equalities mainstreaming approach, built on an equity model.³⁸ Such an approach would ensure that public policy is more responsive to the needs of diverse groups, highlights potential differential impacts, and identifies opportunities to address historical inequalities.

4.1 Welfare system: Disability Benefits

The welfare system is essential to most people with impairments and long-term health conditions both in and out of work. The UK Government acknowledges that the 'welfare system plays a vital part in supporting disabled people and those with health conditions into work.'³⁹ Citizens Advice has emphasised that:

'Without a secure income to cover extra costs and a reliable financial safety net, many disabled people find it difficult to maintain work or focus on moving into work. People may struggle to cover the costs of getting to work or be left without enough income during critical periods such as temporary sickness or recovery following a medical procedure.'⁴⁰

In 2013, Disability Wales warned that welfare reforms would have a disproportionate impact on disabled people in Wales:

³⁸ Davies and Furlong, 'Deeds not Words', pp15-16.

³⁹ Department for Work & Pensions and Department of Health, 'Improving Lives, The Future of Work, Health and Disability', Cm 9526 (November 2017) p20.
<https://www.gov.uk/government/publications/improving-lives-the-future-of-work-health-and-disability>
Accessed 31/03/2020

⁴⁰ Citizens Advice, 'Halving the Disability Employment Gap', p6.

'The welfare reforms that the UK government are currently implementing will have a huge impact on disabled people in Wales. Disabled people across the UK will bear the brunt of cuts to the welfare budget, with disabled people in Wales being particularly hard hit.'⁴¹

Disability Wales, Citizens Advice and other organisations have provided evidence on the effect of welfare reforms on disabled people in the UK more broadly.⁴² The Women's Budget Group has shown that disabled people have been disproportionately affected by austerity cuts since 2010, with disabled lone mothers affected the most.⁴³

Disabled people are at a higher risk of poverty.⁴⁴ In the UK in 2018, 30% of people with an impairment or health condition were living below the national poverty line compared to 19% of people without impairments or health conditions.⁴⁵ There are reports from charities that some disabled women are turning to sex work when they are in a no-win situation where barriers are preventing them from working, and

⁴¹ Disability Wales, 'Cap in Hand? The impact of Welfare Reform on disabled people in Wales' (April 2013) p4 <http://www.disabilitywales.org/wp-content/uploads/2018/03/Welfare-Reform-final-English-1.pdf> Accessed 31/03/2020

⁴² Disability Wales, 'Cap in Hand?'. Citizens Advice, 'Citizens Advice response to the Work and Pensions Select Committee'. Citizens Advice, 'PIP and ESA Assessments Inquiry: Evidence from Citizens Advice', (c2017/2018) p26
<https://www.citizensadvice.org.uk/Global/CitizensAdvice/welfare%20publications/Surveys%20and%20consultation%20responses/PIP%20and%20ESA%20Assessments%20Inquiry-%20Evidence%20from%20Citizens%20Advice.pdf> Accessed 31/03/2020, Citizens Advice, 'Citizens Advice response to the Social Security Advisory Committee consultation on the Universal Credit Claimant Commitment' (April 2019), p2
[https://www.citizensadvice.org.uk/Global/CitizensAdvice/welfare%20publications/Surveys%20and%20consultation%20responses/Citizens%20Advice%20response%20to%20the%20SSAC%20call%20for%20evidence%20on%20the%20Claimant%20Commitment%20in%20Universal%20Credit%20\(April%202019\)%20\(1\).pdf](https://www.citizensadvice.org.uk/Global/CitizensAdvice/welfare%20publications/Surveys%20and%20consultation%20responses/Citizens%20Advice%20response%20to%20the%20SSAC%20call%20for%20evidence%20on%20the%20Claimant%20Commitment%20in%20Universal%20Credit%20(April%202019)%20(1).pdf) Accessed 31/03/2020

⁴³ Women's Budget Group, 'Disabled Women and Austerity. Briefings from the UK Women's Budget Group on the impact of austerity on disabled women' (October 2018), p1
<https://wbg.org.uk/analysis/2018-wbg-briefing-disabled-women-and-austerity/> Accessed 04/04/2020

⁴⁴ Women's Budget group, 'Disabled Women and Austerity', p1

⁴⁵ <https://www.disabilitydataportal.com/explore-by-country/country/United+Kingdom/> Accessed 15/04/2020

where Universal Credit and/or Personal Independence Payment (PIP) does not provide a living wage.⁴⁶

Austerity has also ushered in negative attitudes and charges of ‘benefit scrounging’ towards disabled people from the media and individuals, including in the workplace. While not all disabled people claim benefits or PIP, this helps contextualise disabled women’s experiences in and out of work, their hesitancy at disclosing impairments and health conditions, and the importance of ensuring that, whether in work or not, disabled women have a sufficient and secure income.

There is a broadly even gender split in entitlements to benefits which support and provide an income for disabled people, and over half of **Personal Independence Payment (PIP)** and **Universal Credit (UC)** claimants are women.

Since April 2013, **Disability Living Allowance (DLA)** for working age people has been gradually replaced by **Personal Independence Payment (PIP)**. In August 2019, 104,968 people in Wales received DLA, and 47.8% were women.⁴⁷ There were 174,916 PIP cases in January 2020, and 53.7% were women.⁴⁸

PIP and **Employment and Support Allowance (ESA)** are important sources of income for claimants.⁴⁹ The benefit cap affects those who are ineligible for PIP or the support group component of ESA.⁵⁰ Disability Wales have highlighted that PIP has tighter assessment criteria than DLA, and the removal of DLA’s indefinite awards mean that many people have lost the assurance of long-term support.⁵¹ Research by Citizens Advice strongly suggests that PIP and ESA Assessments are regularly inaccurate.⁵² In particular, claimants with mental health and invisible or fluctuating conditions are most at risk of inaccurate assessments.⁵³

⁴⁶ Ryan, Frances (Verso, London, 2019) ‘Crippled: Austerity and the Demonization of Disabled People’, Extract republished on <https://www.theguardian.com/society/2019/jun/05/austerity-forcing-disabled-women-into-sex-work>. Accessed 17/03/2020.

⁴⁷ DLA Cases with Entitlement (May 2018), Retrieved from Stat-Xplore

⁴⁸ PIP Cases with Entitlement (January 2020), Retrieved from Stat-Xplore

⁴⁹ ‘PIP and ESA Assessments Inquiry’, p26.

⁵⁰ Disability Wales, Cap in Hand?, p4

⁵¹ Disability Wales, ‘Cap in Hand?’, p4

⁵² Citizens Advice, ‘PIP and ESA Assessments Inquiry’, p1

⁵³ Citizens Advice, ‘PIP and ESA Assessments Inquiry’, p2

Incapacity Benefit (IB) is paid to people assessed as incapable of work, and who meet certain contribution conditions. IB was replaced by ESA which has subsequently been merged into **Universal Credit (UC)**. In August 2019, 137,127 people in Wales received ESA.⁵⁴ **Severe Disablement Allowance (SDA)** is paid to those unable to work for 28 consecutive weeks or more because of illness or impairment. Until 2001, people incapable of work who did not meet the conditions for IB could claim SDA, but new SDA claims are no longer possible.

Roll out of Universal Credit in Wales began in April 2017, and is scheduled to be completed in 2023. Some people still receive legacy benefit. The principles underlying UC are to simplify the benefits system and ensure that work always pays.⁵⁵ Currently 5.2% of all UK households receiving UC are in Wales. 151,330 people in Wales receive UC, and over half (55.7%) are women.⁵⁶

Disability Wales considers that ‘the financial impact of Universal Credit on disabled people in Wales is substantial’.⁵⁷ Under UC, the Severe Disability Premium is abolished and there is ‘very little assistance’ for disabled people with ‘lower levels of impairment’.⁵⁸ Analysis by Citizens Advice shows that disabled people on UC gain less from moving into work as Working Tax Credits and the Severe Disability Premium are cut: ‘Wider cuts to Universal Credit work allowances have worsened work incentives still further for disabled people.’⁵⁹

Citizens Advice has researched conditionality – the receipt of benefits in exchange for fulfilling requirements to prepare for and look for work – and have critiqued the impact of this component on disabled people, and especially disabled women with caring responsibilities.⁶⁰ Citizens Advice have questioned the effectiveness of work conditionality in supporting people into sustainable employment, such as disabled

⁵⁴ ESA Data from May 2018. Retrieved through Stat-Xplore

⁵⁵ ‘Citizens Advice response to the Work and Pensions Select Committee’, p1

⁵⁶ Households on Universal Credit (November 2019) and People on Universal Credit (February 2020) Retrieved through Stat-Xplore

⁵⁷ Disability Wales, ‘Cap in Hand?’, p4

⁵⁸ Disability Wales, ‘Cap in Hand?’, p4

⁵⁹ Citizens Advice, ‘Halving the Disability Employment Gap’, p6

⁶⁰ Citizens Advice, ‘Citizens Advice response to the Work and Pensions Select Committee’, p1

people and people with childcare responsibilities, for whom there are specific barriers to entering, staying and progressing in the workplace. Conditionality affects around a quarter of a million UK claimants. UC claimants can recoup 85% of their childcare costs, but they need to pay upfront. The reimbursement process is complex, forming another barrier for disabled parents in work.⁶¹

UC claimants can be sanctioned if they do not satisfy the conditional agreements. Citizens Advice has argued that sanctions are not appropriate for disabled people. Sanctions are ineffective at increasing economic activity and cause considerable hardship to claimants, particularly disabled claimants who face extra costs.⁶² Evidence from Citizens Advice suggests that some UC claimants are signing claimant commitments in stressful, pressurised situations:

‘...people in vulnerable situations sometimes feel they have no choice but to sign up to commitments that don’t appropriately reflect their personal barriers to work, and may place them at unnecessary risk of sanctions as a result.’⁶³

This disproportionately affects people learning disabilities and/or mental health conditions.⁶⁴

More generally, Citizens Advice have flagged that some disabled people are fearful of and do not trust the DWP as an institution. Some disabled people see engagement with the DWP negatively, because of their experiences of claiming disability benefit: ‘people who are fearful are unlikely to take up the support that is accessed there or engage constructively with a work coach.’⁶⁵

⁶¹ Citizens Advice, ‘Citizens Advice response to the Work and Pensions Select Committee’, p1-4

⁶² Citizens Advice, ‘Citizens Advice response to the Work and Pensions Select Committee’, p2, 7

⁶³ ‘Citizens Advice response to the Social Security Advisory Committee’, p2

⁶⁴ Citizens Advice, ‘Citizens Advice response to the Work and Pensions Select Committee’, p9

⁶⁵ Citizens Advice, ‘Halving the Disability Employment Gap’, p13

4.2 UK Government Support Programmes

Current UK government policy is to increase the number of disabled people in employment. The 2017 Conservative Party Election Manifesto pledged to increase the number of disabled people in work by one million by 2027⁶⁶ and by 2019 pledged to reduce the disability employment gap.⁶⁷ 'Improving Lives. The Future of Work, Health and Disability' (2017) by the Departments for Health and Work and Pensions sets out plans to achieve this target.⁶⁸ Policy interventions to increase the number of disabled workers must be attuned to the needs of disabled women as actual and potential workers.

Some schemes specifically targeted at disabled people are no longer available. For example, **Specialist Employability Support (SES)** was designed 'to support those furthest away from the labour market for whom other provision is not suitable due to complexity of barriers'. Through Jobcentre Plus, SES offered intensive support and training for 12 months to help disabled people into work.⁶⁹ SES came to an end in October 2018.

Disabled people can receive advice and support through the Jobcentre Plus with a **Disability Employment Adviser**, who can provide advice on job seeking, training, and gaining new skills.

If the help a disabled employee needs is not covered by reasonable adjustments under the Equality Act, **Access to Work** can support employees.⁷⁰ Funded by the UK Government, Access to Work is designed to facilitate the employment of disabled people across the UK, and is discussed frequently by our research participants. The

⁶⁶ The Conservative and Unionist Party, 'Forward, Together. Our Plan for a Stronger Britain and a Prosperous Future', The Conservative and Unionist Party Manifesto (2017), p57 <https://s3.eu-west-2.amazonaws.com/conservative-party-manifestos/Forward+Together+-+Our+Plan+for+a+Stronger+Britain+and+a+More+Prosperous....pdf> Accessed 21/03/2020

⁶⁷ The Conservative and Unionist Party, 'Get Brexit Done. Unleash Britain's Potential', The Conservative and Unionist Party Manifesto (2019), p17 https://assets-global.website-files.com/5da42e2cae7ebd3f8bde353c/5dda924905da587992a064ba_Conservative%202019%20Manifesto.pdf Accessed 21/03/2020

⁶⁸ Department for Work & Pensions and Department of Health, 'Improving Lives. The Future of Work, Health and Disability'.

⁶⁹ DWP and DoH, 'Improving Lives', p23, 60

⁷⁰ UK Government, 'What to do if you become disabled'.

type of support available includes purchasing or adapting equipment, money towards extra travel costs, and support at job interviews such as a BSL interpreter.⁷¹

Access to Work Mental Health Support Service is a DWP programme, delivered by Able Futures, a specialist partnership to help people with mental health difficulties.⁷² Businesses can receive advice and support on how to help their staff cope with mental health issues, and to improve mental wellbeing at work.⁷³

Fit for Work (FfW) was supports GPs, employers, and employees to help people in work with health conditions or who are off sick. Funded by the UK government, it is a free service that offers expert and impartial work-related health advice. FfW is designed to work alongside occupational health service and employer sickness absence policies.⁷⁴ GPs and employers can refer employees to FfW once an employee has been off work for 4 weeks. As it cannot be accessed before this point, FfW is not a preventative measure.⁷⁵ Many employers have not heard of FfW, or confuse it with Fit Notes, while employers who have used it described it as overly bureaucratic and not fit for purpose.⁷⁶

The **Work and Health Programme** –a combination of the Work Programme and Work Choice Programme – launched in November 2017. A scheme for people receiving ESA/UC, it is voluntary, unless an individual has been out of work and claiming unemployment benefits for 24 months. Specialist support is targeted at those ‘likely to be able to find work within 12 months.’ The programme provides support, through local organisations, for around 200,000 disabled people.⁷⁷

⁷¹ UK Government, ‘Access to Work: factsheet for customers’ (July 2019) <https://www.gov.uk/government/publications/access-to-work-factsheet/access-to-work-factsheet-for-customers> Accessed 24/03/2020 and UK Government, ‘Get support in work if you have a disability or health condition (Access to Work)’ <https://www.gov.uk/access-to-work/what-youll-get> Accessed 24/03/2020.

⁷² Able Futures, ‘How Able Futures and the Access to Work Mental Health Support Service can help you and your employees’ <https://able-futures.co.uk/mental-health-support-for-employers/> Accessed 24/03/2020

⁷³ ‘How Able Futures and Access to Work Mental Health Support Service can help you and your employees’ <https://able-futures.co.uk/mental-health-support-for-employers/> Accessed 24/03/2020

⁷⁴ ‘Fit for Work’ <https://fitforwork.org/> Accessed 21/03/2020

⁷⁵ Citizens Advice, ‘Halving the Disability Employment Gap’, p22

⁷⁶ Citizens Advice, ‘Halving the Disability Employment Gap’, p22

⁷⁷ DWP and DoH, ‘Improving Lives’, p18, 54

4.3 Welsh Government

The Welsh Government has committed to ensuring that disabled people fulfil their potential and achieve their ambitions. The key document outlining initiatives available in Wales, is 'Action on Disability: The Right to Independent Living' (2019)⁷⁸ which replaces the previous 2013 'Framework for Action on Independent Living'. The 2018 Welsh Government Employability Plan outlines the commitment to increase the number of employers who have created inclusive and supportive workplaces, and the number of disabled people in work.⁷⁹

Welsh Government defines Independent Living as 'all disabled people having the same freedom, dignity, choice, and control as other citizens at home, work, in education and in the community.'⁸⁰ The Welsh Government emphasises that not all disabled people are able to do paid employment, but all should have the opportunity to lead meaningful lives.⁸¹

Communities for Work started in June 2015. Though not specifically targeted at disabled people, it offers one-to-one tailored support to assist individuals into employment, including advisers and mentors. Figures from May 2019 suggest that 29% of people who engaged with the programme had work limiting health conditions, and 12% were disabled people.

Communities for Work Plus provides specialist employment advice and support, and mentoring to people in or at risk of poverty. It is designed to fill the gap and provide support for those ineligible for Communities for Work, Parents Childcare and Employment (PaCE) or other European Social Fund programmes. Targeted at people who have complex barriers to employment and training, support includes mentorship, confidence building, gaining work experience, learning new skills, and help to re-write a CV.

⁷⁸ Welsh Government, 'Action on Disability'

⁷⁹ Welsh Government, 'Employability Plan' (2018) WG34775

<https://gov.wales/sites/default/files/publications/2019-03/employability-plan-2.pdf> Accessed 31/03/2020

⁸⁰ Welsh Government, 'Action on Disability', p6

⁸¹ Welsh Government, 'Action on Disability', p20

Parents, Childcare and Employment (PaCE) is funded by the Welsh Government and the European Social Fund, and runs in partnership with the DWP. PaCe targets economically inactive and young parents Not in Education, Employment or Training (NEET) for whom childcare is the main barrier to employment, education or training. PaCE offers funding for childcare, guidance about benefits, CV writing advice, help to find and apply for training, help to find a job, and advice about training and qualifications for particular roles. Open to qualifying disabled parents, 13% of the 3,951 people who engaged with this programme have a work limiting health condition, and 6% are disabled as of April 2019.

Priority 1 of the 'Our Valleys, Our Future: Delivery Plan' is 'good quality jobs and the skills to do them' to tackle unemployment in the Valleys. **Better Jobs, Closer to Home** is a response to a Wales Trades Union Congress campaign which called on the Welsh Government to use the spending power of public procurement and reserved contracts to create jobs in areas of high employment need. Two pilots in the delivery plan include social enterprises which employ disabled people in industry. One of these social enterprises went into administration, and it is unclear how many jobs have been created for disabled people, and women in particular in the other.⁸²

Active Inclusion (Strands 1 and 2) is managed by the Wales Council for Voluntary Action (WCVA) with European Structural and Investment Funds. Active Inclusion aims to reduce economic inactivity in Wales, and improve the employability of disadvantaged people. Active Inclusion Wales gives local organisations the chance to support economically inactive and long term unemployed people back to employment. Interventions include, help to develop work skills, provide qualifications, and paid, supported employment placements. Funding is available to employers to support people with complex barriers back into work.

The Employability Skills Programme supports unemployed people to improve their employability skills and gain sustainable employment. Support and training includes

⁸² Welsh Government, 'Our Valleys, Our Future: Delivery Plan 2019-2021' <https://gov.wales/sites/default/files/publications/2019-11/delivery-plan-2019-2021.pdf> Accessed 05/04/2020

quality work experience, expert help and advice on preparing for work, and employer specific training to develop essential skills. The work placement is over 6 months for between 120 and 240 hours.⁸³ Eligible participants must not have a qualification over Level 2 or equivalent, and have had little or no work experience in the preceding 3 months. Through the local Jobcentre Plus, businesses can be put in touch with a training provider, who will work to identify a suitable individual to do a work placement with the business. At the end of the work placement, the business can offer that individual a job, or provide a good reference to help them move into employment.

Working Wales is delivered by Careers Wales, and funded by the Welsh Government and European Social Fund. While not solely targeted at disabled people, the scheme offers specialist support to disabled people and those who have health conditions, including work advice, funding for training, help with childcare, redundancy support, courses, help to learn new skills, and for school-leavers.

Jobs Growth Wales offers a 6-month paid work opportunity. Funded by the Welsh Government and supported by the European Social Fund, Jobs Growth Wales jobs are available to 16 to 24-year-old people living in Wales, who are NEET, not doing the UK Work and Health Programme or another Welsh Government work-based learning programme. Individuals can complete only one Jobs Growth job. This is a mainstream programme, but young people in Wales with an impairment or health condition or facing other barriers can receive additional help and mentoring in the job.

Disabled people are not represented proportionately in mainstream **apprenticeship** schemes.⁸⁴ Welsh Government has committed to improving access, equality and

⁸³ Welsh Government, Government Social Research, 'Mid Programme Review of the Employability Skills Programme' (February 2019) p39 <https://gov.wales/sites/default/files/statistics-and-research/2019-02/evaluation-of-the-employability-skills-programme-mid-programme.pdf> Accessed 31/03/2020

⁸⁴ Welsh Government, 'Inclusive Apprenticeships. Disability Plan for Apprenticeships 2018-21' (2018) WG36564, p5 <https://gov.wales/sites/default/files/publications/2018-11/inclusive-apprenticeships-disability-action-plan-for-apprenticeships-2018-21-1.pdf> Accessed 31/03/2020

equity of opportunity in apprenticeships.⁸⁵ Disabled apprentices are entitled to technological or human support through the Additional Learning Support (ALS) fund.⁸⁶ The UK Government has taken steps to create Accessible Apprenticeships through an Apprenticeship Levy to encourage employers to invest in accessible apprenticeships.⁸⁷

A number of schemes are offered to support businesses to recruit and retrain disabled employees. Through **Business Wales' Skills Gateway**⁸⁸, businesses can find information about schemes such as Access to Work, Fair Work, and other specialist schemes. Advice and support is also available about starting a business. The **In-Work Support Service** offers free and confidential support for people facing barriers to stay in work due to specific health problems, namely, musculoskeletal and mental health problems. Occupational therapy, physiotherapy, and psychological therapy services are tailored to help people back to work, or to manage a health condition in work. Free support and training is offered to small and medium sized businesses in the private and third sector. This service is part-funded by the European Social Fund, through the Welsh Government.

⁸⁵ Welsh Government, 'Aligning the Apprenticeship Model to the Needs of the Welsh Economy' (February 2017) WG30448 <https://gov.wales/sites/default/files/publications/2018-03/aligning-the-apprenticeship-model-to-the-needs-of-the-welsh-economy.pdf> Accessed 04/04/2020

⁸⁶ Welsh Government, 'Inclusive Apprenticeships', p11

⁸⁷ DWP and DoH, 'Improving Lives', p60

⁸⁸ Business Wales, 'Employing Disabled People' <https://businesswales.gov.wales/skillsgateway/employing-disabled-people> Accessed 05/04/2020

5. Methodology

5.1 Research questions

This report addresses the following research questions:

1. What are the experiences of disabled women in accessing and progressing in work/Welsh economy?
2. What does the statistical evidence demonstrate about disabled women's participation in the Welsh economy?
3. What are the barriers that disabled women experience in participating in the economy?
4. How accessible and inclusive are employability and careers support programmes for disabled women?
5. What are the gaps that disabled women experience in accessing the current support programmes?
6. What changes do disabled women in Wales suggest are necessary to address the barriers they experience?

These questions are answered by focussing on the following topics:

Experiences of disabled women	Evaluation of policies and programmes
<ul style="list-style-type: none"> • Job seeking • Recruitment processes • Remaining in work <ul style="list-style-type: none"> ○ Accessible workplaces ○ Flexible working ○ Workplace relations • Career pathways 	<ul style="list-style-type: none"> • Evaluation of the use of employment policies and programmes delivered by the UK and Welsh governments: <ul style="list-style-type: none"> ○ Employability programmes targeting disabled people ○ Accessibility of mainstream employability programmes to disabled women.

5.3 Research methods

Data was gathered using an online survey and a series of focus groups.

Online Survey: An online survey carried out in September-October 2019 with disabled women and men, to capture the different experiences of women and men

Focus Groups: Three focus groups were organised across Wales: Cardiff, Swansea and Wrexham. Disabled women from all backgrounds were invited to the focus groups through disability organisations and social media.

5.4 Survey Demographics

The following is a brief analysis of the key demographics of the survey respondents.

- 318 people who have an impairment and/or health condition engaged with the survey, and 195 of them completed or semi-completed the survey.
- 70% of the survey participants are women, and 30% are men.
- Only 5 women survey participants come from a BAME background
- Most women respondents have a long-term health condition (63%), followed by a physical impairment or mobility issues (56%), and a mental health condition (39%).
 - Many survey respondents have more than one impairment or health condition.
 - Nine women have long-term health conditions which exclusively or predominantly affect cis-women, such as Endometriosis or Turner Syndrome.

- 59% of women have caring responsibilities, compared to 34% of men.
 - 4 women are not seeking work because of their caring responsibilities

- 90% of women are educated beyond secondary level.
 - A third have a post-graduate qualification.
 - More men had vocational qualifications (30%).
 - 3% of survey respondents have no formal education or qualifications.

- 66% of women are employed
 - Most work in the third or public sector, or in professional and technical occupations which require a degree
 - 24% of women are out of work including 18% who had previously worked and are not able to anymore
 - 34% of men had worked but are not able to anymore
 - 16% are unemployed and looking for work: 12% of men and 4% of women.

- 79% of survey takers are working full-time and 29% work part-time
 - 45% of women and 34% of men are working full-time
 - 21% of women and 8% of men work part-time

- 83% of employees work in a professional or technical occupation (47% of women and 36% of men)
 - 35% work in administrative or secretarial occupations
 - 29% work as a manager, director or senior official
 - 23% work in caring, leisure and other service occupations.

This demographic and employment data is important to understand the roles, industries, and sizes of workplaces in which disabled people are working. A larger percentage of women survey respondents with impairments and health conditions are employed, whereas more men are unemployed or unable to work, reflecting the statistics outlined in Section 2. The women who took the survey are educated to

degree-level, and concentrated in professional and semi-professional roles in the third and public sector, as well as caring and service occupations.

The survey was designed to facilitate a comparative analysis of the experiences of disabled women and men. A greater percentage of women participated than men, and the women who responded tended to be younger on average. While there are limits to this comparative approach, the survey responses indicate that disabled women and men have had different experiences along gender lines.

5.5 Focus group demographics

Focus groups were facilitated by Chwarae Teg's Research Partner, Dr Hade Turkmen, who was supported in each focus group by a colleague. Less detailed demographic data was able to be collected about the women who participated in the focus groups than the surveys. However, the women in the focus groups are also mostly reflective of the population of disabled women as a whole.

- There were 15 participants in total: 7 in Cardiff, 4 in Swansea and 3 in Wrexham.
- There was a BSL interpreter in each focus group who shared both their professional and, where relevant, personal experience. Only 2 of the 15 participants did not disclose a health condition or impairment.
- 8 women have a health condition and 6 have an impairment – at least 3 women have a health condition and an impairment, and many women mentioned multiple conditions.
- 10 women are employed. 3 are not, and 2 of those are volunteering. 2 women's employment status is unclear.

- Most of the employed women work in the third sector or for a charity, one works for a local authority and 1 for a university. Two of the women not in work were former professionals in the education and medical fields.

6. Experiences of Disabled Women in Employment

47% of women, and 55% of men, say that they have found it difficult to secure employment because of their impairment or health condition. This section presents and analyses the data collected through the survey and the focus groups, examining disabled women's experiences through their employment journey, and seeks to understand what is happening behind that statistic.

Starting with disabled women's experiences of searching for and applying for jobs, and recruitment processes, this section concludes with women's own recommendations of changes that employers can make to improve the inclusiveness and accessibility of their recruitment processes.

6.1 Job Seeking and Recruitment

6.1.1 Confidence and Self-esteem

Lack of confidence and self-esteem is a theme that emerged in this research. As this report will show, barriers to disabled women's employment come from external sources. Confidence is, however, an important issue because it is lessened through repeated negative experiences. Initiatives to build up disabled women's confidence need to be accompanied by knocking down barriers.

Losing confidence and finding it difficult to regain was an experience that women in the focus groups talked about extensively. One woman with a long-term health condition whose effects fluctuate brought attention to the difficulties that she had when trying to return to work:

'I've changed careers and I've got to a stage where I feel like I'm on the scrapheap...I think once you've been out of work as well it's very difficult to get back in' – Cardiff focus group participant

Another woman said that negative experiences she had had in work, and her current experiences out of work, have knocked her confidence:

'I've found that the experiences I've had, have destroyed my confidence and I feel pretty useless.' – Cardiff focus group participant

'I think if people could understand how much it can destroy your life in terms of your confidence and your ability to feel that you're actually a valuable functioning human being.' – Cardiff focus group participant

Disabled women's lack of confidence partly stems from their prior negative experiences as employees and job seekers. Repeated knocks to an individual's confidence and self-esteem can be exhausting, and this makes it harder for disabled women to challenge employment barriers.

'...there's only so many times you want to actually try to do something before you give up, before you feel worthless, before you feel useless, that you are a problem, that you...you are the problem.'

– Swansea focus group participant

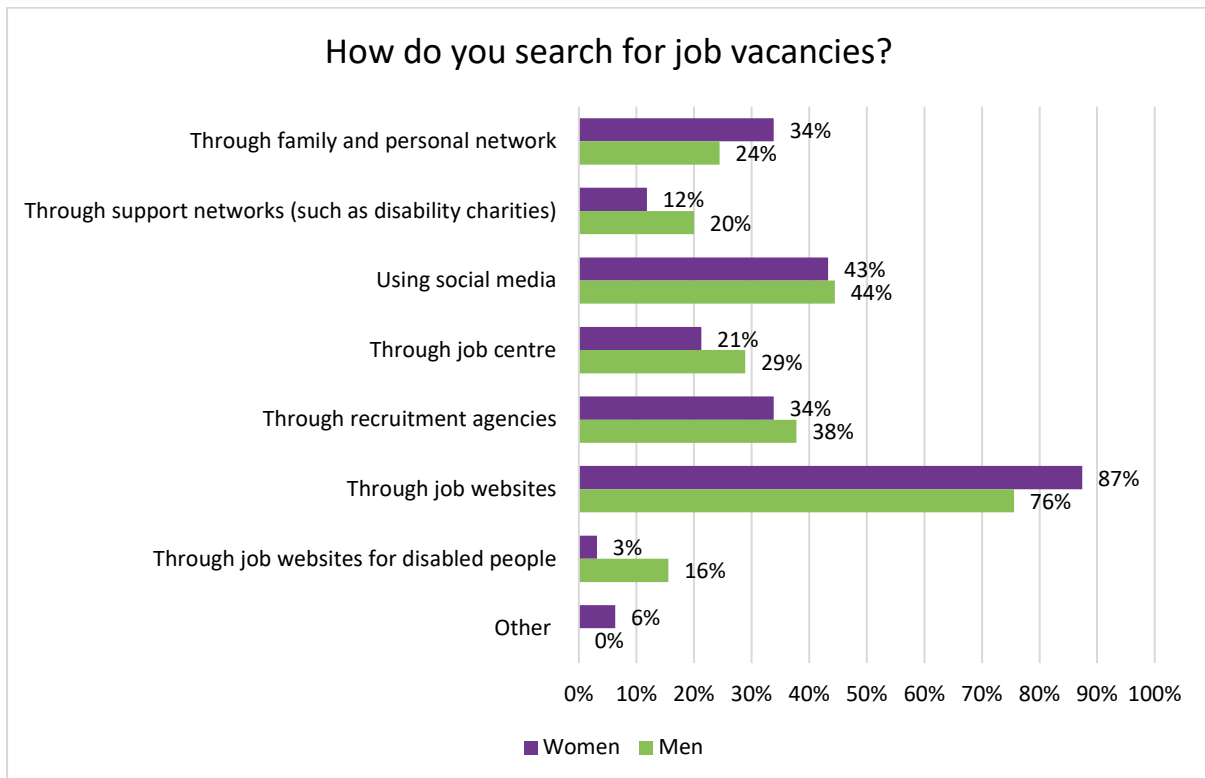
‘...how the hell are we supposed to motivate ourselves and to put our voice out there, because we’re too damn shattered?’ – Cardiff focus group participant

Combined with the symptoms of their impairment/health condition, disabled women looking for work and trying to navigate exclusive and inaccessible recruitment processes are demotivated by their prior experiences.

6.1.2 Searching for a Job

This section discusses how disabled women and men search for jobs. Over 50% of men and 32% of women who participated in the survey said that they had applied for a large number of jobs before securing their current or previous employment.

Survey respondents were asked how they searched for a job. Figure 1 below shows that 87% of women (127 responses), and 76% of men (45 responses) use job websites to search for jobs. Social media was the second most popular option. Men are more likely than women to use job websites for disabled people while women are slightly more likely than men to use family and personal networks to find a job. Other methods that women used to find employment included leaving CVs with local businesses, using council and government websites, perusing local press and newspapers, looking on employers’ websites, and through volunteering.

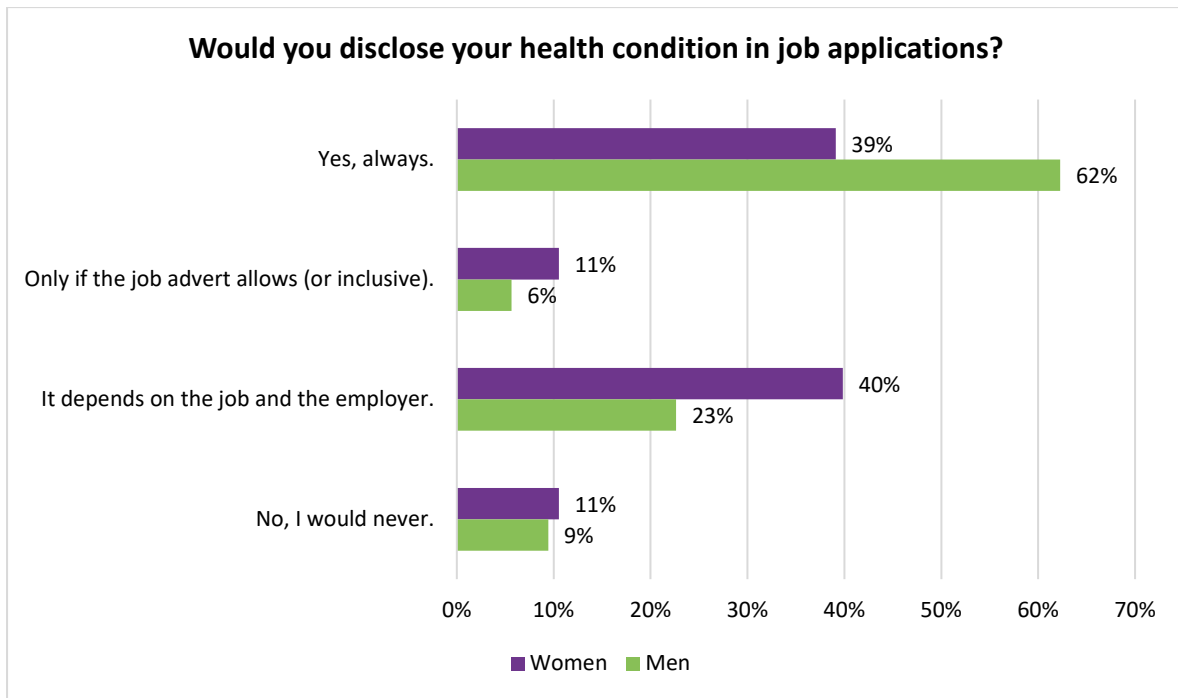
Figure 1 – Searching for Job Vacancies

6.1.3 Disclosing an Impairment or Health Condition

‘Even though I'd been working in a medical field I didn't want to have to reveal all of my medical information to my employers.’ – Wrexham focus group participant

Men are more likely than women to always disclose that they have an impairment or health condition on job applications. Women are marginally more likely to never disclose at application stage than men. Women's decision to disclose was more conditional than men's, with 51% of women, and 29% of men saying that disclosing depends on the job advert, the job, or the employer.

Figure 2 – Disclosing Impairment/Health Condition on Job Application



The gender difference in responses are more stark when disaggregated by impairment and health condition. In each impairment and health condition category, over 50% of men always disclose, ranging from 55% of men with physical impairments or mobility issues to 100% of men with specific learning difficulties.

Disaggregated in the same way, there was a less clear pattern among women. While women with some conditions tended towards always disclosing, women with other conditions continued to disclose depending on the job and the employer.

There is little correlation based on impairment/health condition categories. The strongest yes/always response was from men with a specific learning difficulty (100% always disclose), whereas only 36% of women with a specific learning difficulty always disclose. The largest proportion of yes/always responses came from women have a visual impairment (50% always disclose) and this was the second lowest percentage among the men survey participants.

This suggests that gender is an important factor shaping if, and in what circumstances, disabled people disclose their impairment or health condition to a potential employer. Men may be more confident or secure disclosing their impairment or health condition to employers at an early stage in the application process. It might also be the case that disabled women are more cautious about disclosing because they face multiple discrimination when applying for a job.

However, once they have secured employment, women are more likely to discuss their impairment or health condition with their employer. Table 5 shows that 85% of women and 62% of men have discussed their impairment or health condition with their employer. Men are more likely to disclose on their initial job application, but they are less likely to disclose overall. It is noteworthy and concerning that 16% of women and 29% of men have not discussed their impairment or health condition with their employer.

Table 5 – I have discussed my impairment/health condition with my employer

		I have discussed my impairment and / or health condition with my employer			
		Women	%	Men	%
Yes	Before I received the formal offer of employment	37	29	14	11
	After I received the formal offer of employment	72	56	25	51
No		20	16	14	29
Total		129	100	49	100

Further investigation into the gender difference of disclosures would offer important insights into why and in what circumstances people with impairments or health conditions make a disclosure and what is preventing disabled people from talking

about their health condition or impairment, and help employers and organisations become more accessible and inclusive.

6.1.4 Recruitment Process

This section examines recruitment processes. 48% of women and 37% of men disagree or strongly disagree that job application and interviews are accessible to and inclusive of disabled people.

Accessible and inclusive recruitment processes will be ineffective if jobs and career pathways are not developed with the needs of disabled staff at the forefront. A woman survey respondent highlighted that the starting point in any recruitment process is 'to identify ways they [employers] can make the role more accessible and offer flexibility'. Another woman suggested that recruitment processes (and indeed, businesses more generally) should be staffed by 'people who see the worth disabled people bring to the employment market.' Throughout the research it is clear that there is 'no one size fits all' solution to make recruitment more accessible for and inclusive of disabled candidates. Two survey respondents noted that adjustments will depend on the impairment and health condition. One survey respondent said that one of the most important changes a HR team can make is to 'ask if there is anything needed to make me comfortable.'

The voices of disabled people must be central in any strategies to make recruitment processes inclusive and accessible. This is apparent when listening to women's experiences. A woman in the Cardiff focus group talked about a negative recruitment experience she had, when assumptions were made about her abilities:

'I did apply for a job a few years ago which was with another disability group and the interview process was going to be part face-to-face question/answers conversation and then there was also a letter, written-type test. Before I'd even got to the interview I'd had an email back saying we're going to allow you extra time for the written, for the typing part of the interview question, which kind of surprised me first of all because in my application I'd said I'd been using a qwerty keyboard since the age of seven and it just kind of really shook me and actually kind of took me aback a little bit. Needless to say, I didn't get the job but when they called me to say that I didn't have the job and I asked for some feedback the response I got was that it has nothing to...it had no resemblance on my disability, the reasons why I didn't get the job...And for me, I think it kind of put me back...I was horrified and I'd never had that before...I think as a disabled person I think you know your limits of what you are capable of and it's not as if I was going for a warehouse job...it was the fact that I thought I'm going for a job that's an admin-based job that I'm currently doing.' – Cardiff focus group participant

What troubled this woman was the assumptions made about her, and that the recruiter did not ask if she needed extra time for this task.

Several responses from women critiqued organisations who profess to be accessible and inclusive, but in practice create unfriendly and unwelcoming environments.

'Even when you go for a job interview and you say you're in a wheelchair, and [they say], 'we're accessible, yes', you can get in the door, but then you're given like a table that you can't get up to.' – Swansea focus group participant

A BSL interpreter in the Swansea focus group drew attention to a lack of knowledge and understanding around deafness and the adjustments that are appropriate for people with different impairments:

[Employers] will say, 'oh, we've got a loop system, well, we've got a sticker'. Does it work, where is it?

Participant 2: How do you use it?

A Loop system's no good to a profoundly deaf person anyway.' –
Participants in the Swansea focus group

Her years of experience working with D/deaf people suggests that this was not a unique event, and indicates that even well intentioned employers need further education and training, to develop inclusive and accessible workplaces.

Inclusive and accessible recruitment processes should ask applicants, who disclose an impairment or health condition, what support and adjustments they need to perform at their best. Assumptions about disabled applicant's needs disadvantage them.

The UK government Guaranteed Interview scheme was replaced November 2016 by Disability Confident. Employers who sign up to be Disability Confident commit to 'offering [disabled people] an interview if they declare they had a disability and meet the minimum criteria for the job.'⁸⁹ Many employers offer a similar scheme and will offer interviews to applicants who disclose an impairment or health condition and meet the essential criteria. Disability Confident is an important scheme that can

⁸⁹ UK Government, 'Disability Confident: how to sign up to the employer scheme' <https://www.gov.uk/guidance/disability-confident-how-to-sign-up-to-the-employer-scheme> Accessed 21/02/2020

impact on disabled women's employment. Close to half of women (46%) and 27% of men look for disability confident or disability friendly employers when they are searching for a job. However, women's experiences have not been entirely positive, particularly when employers use Disability Confident as a 'tick-box' scheme and do not back this up with robust policies.

The BSL interpreter in the Swansea focus group noted that while offering a Guaranteed Interview ensures that D/deaf people are not overlooked for interview, these schemes can be ineffective at counteracting the prejudices and barriers to employing disabled people:

'I know so many deaf people have got degrees but whenever they send in an application for a job, they're dismissed. The only time they would be offered an interview is if they've got the green tick – Disability Confident. But as soon as they find out that they're profoundly deaf and they need an interpreter, even though we explain there's Access to Work, [employers are] very fearful and they just see difficulties, they see problems straightaway and they don't want to know, basically they see employing a deaf person as problem.' – Swansea focus group participant.

A woman in Cardiff felt that being invited to interview in an organisation with a Guaranteed Interview scheme was tokenistic:

‘I was applying for a job in a police station and I didn’t hardly fill out any of the forms because I was like, oh, I’m not going to get this at all, and sometimes when you even tick the guaranteed interview scheme you don’t even get it. I have had that. So I had a ‘phone call saying you’ve got a job interview and I thought, oh, and I didn’t really put anything on there but what have I got to lose, I suppose? But it was just a case of them ticking the box to make them look good that they’ve got somebody in who’s disabled. I was in that interview, I am not kidding you, about two minutes.’ – Cardiff focus group participant

Interventions such as Guaranteed Interview, must be used authentically to support people with disabilities into the workplace, and not as a ‘tick-box’ exercise, and need to be consistently evaluated and adapted.

Some employers have taken steps to offer adjustments in interviews as a matter of course. However, women fear that asking for adjustments will unfairly prejudice their chances. As we saw earlier, disabled women are less likely to disclose their impairment or health condition before receiving a job offer. Employers need to guarantee that asking for adjustments will not affect outcomes.

One woman was invited to an interview in London for a job based in Cardiff, with a UK-wide organisation. The interview panel offered to do the interview by Skype so that she did not have to travel:

‘I spoke to my manager and I was going, I know that over Skype, I won’t get the job, because you can’t engage with the people [on the panel] – you feel less confident. And you feel like you haven’t given the effort.’ – Cardiff focus group participant

This negatively affected this woman's experience, and left her torn between travelling to London with the knock-on health impact, or doing the interview by Skype and lacking confidence in how that will be perceived. Interviewing applicants in the same location as where the role will be based, or ensuring that interviews over video-link or by telephone are assessed equally are a step to prevent disadvantaging candidates with impairments/health conditions.

Survey respondents and focus group participants made suggestions about what they would like to see change in recruitment processes. Businesses can make straightforward changes to improve accessibility and inclusiveness when recruiting, such as letting candidates know where the toilets are in the building when they arrive for their interview. This adjustment was suggested by a number of women survey respondents.

Businesses inviting a disabled candidate should be proactive and ask if adjustments are needed to enable the candidate to perform at their best. Ideally, this conversation should be initiated by a named staff member who is not on the recruitment panel, such as a 'Disability Champion' who is suitably trained.

Collecting and monitoring equalities and diversity data is important in effecting real change. Women were to some extent split over best practice in collecting equalities data. One woman reiterated that interview panels should have no access to monitoring data throughout the shortlisting, interviewing, and decision process. Another suggested that statistics should only be collected after the job has been allocated, and a third suggested that questions about disability should be removed from equal opportunities portions of the application pack altogether. Research evidence suggests that collecting equalities data for monitoring, and preventing the recruitment panel from accessing that data is best practice. The collection of data is not an end in itself, but aids recruitment monitoring and enables effective changes to be made to increase conversion rates.

Increasing and improving the level of training and information available to all staff, and particularly HR teams and staff involved in shortlisting and interviewing was a key theme. This should supplement ongoing equality and diversity, and unconscious

bias training. Respondents are keen that staff and managers need education on different impairments and health conditions, and this should be led by people with lived experience of that condition.⁹⁰ This is especially important for invisible disabilities. One man who responded to the survey highlighted that having someone on the interview panel who has an impairment and/or health condition would be advantageous, not only to put candidates at ease, but contributing to a more open and positive attitude to workers with impairments and long-term health conditions. Hiring staff with impairments and long-term health conditions who are then integral to recruitment processes will increase disabled applicants' confidence and trust in the recruitment process, and that the organisation they have applied to supports disabled staff.

Women made recommendations around the criteria on job descriptions and how unconscious bias seeps in, and poses a barrier before job seekers have even opened the application form. Essential and desirable criteria are listed in application packs. Applicants are expected to demonstrate in their application how they meet these criteria, which form the basis for shortlisting by recruitment teams. Women and men flagged how 'standard' criteria, which appear regularly in job descriptions, can exclude disabled applicants. Essential criteria may not actually be essential to the role, for example, office based roles where a driving license and access to a car are listed as essential. An example offered by a woman participant is that 'being highly organised' deters applicants with ADHD (Attention Deficit Hyperactivity Disorder) like herself from applying, as she fears she will not be successful.

Rigid qualification criteria can also be exclusionary – a survey respondent flagged that this could negatively affect BAME applicants. One woman suggested that lived experience could be comparable to, or more relevant to some roles, than qualifications such as 'A' levels or degree-equivalent qualifications. A BSL interpreter

⁹⁰ Among trainers, there is debate about the best approach to disability training. This largely focuses on Disability Equality Training (DET) which 'explores the concept of people being disabled by society's barriers and attitudes' and Disability Awareness Training (DAT) which may involve an element of simulation, and inviting a non-disabled person to gain some experience of having an impairment. For a fuller discussion of this debate, see: Bestic, Penni, 'Simulation or Imitation. Training for Equality', *More than Words. The Journal of Disability Wales* (2007), pp10-12. Bestic convincingly argues that DET is the preferable form of training, and this is borne out by the research respondents in this report, who emphasized that training should be led by disabled people.

highlighted how criteria such as ‘verbal/oral communication skills’ excludes highly qualified D/deaf applicants:

‘[employers] think, oh, we’ll need somebody to use the ‘phone, well, that shouldn’t be a barrier, there is equipment out there, there are alternative ways of communicating, but that’s always an excuse, oh, I’m sorry, we need somebody to be able to use a ‘phone, so they’re dismissed straightaway. And if you look at any job, the majority of them say, must be able to communicate verbally, efficient communication or something like that and that’s in a lot of job descriptions...It’s discrimination at the end of the day.’ – Swansea focus group participant

Survey respondents suggested revisiting whether essential criteria are the measures by which the ‘best’ or ‘most suitable’ candidate for the job is selected. One woman suggested, for example, that employers:

‘...should look more at people’s values and not just their skills or knowledge (you can learn skills and knowledge on the job, values are not so easy to learn but add something really important to the employers’ culture!)’ – Woman survey respondent

Unconscious bias present in some job descriptions deters otherwise qualified and suitable candidates. Essential criteria should be genuine requirements for the job, rather than a wish-list, and alternative forms of evidence should be considered in the recruitment process. This connects to comments made by participants that employers should ensure that all their roles are accessible and inclusive, and subsequently reflected in job descriptions.

Alongside these broad themes and fundamental changes to the ethos of recruitment, research participants made numerous practical, specific suggestions for making the recruitment process more inclusive for disabled people. The richness of women's free-text responses to questions about recruitment indicate how strongly women survey takers feel about this issue, and the depth of their desire to see real changes. These have been categorised below, around different aspects of the recruitment process. However, as discussed above, there is no one size fits all solution to improving accessibility – consultation with disabled people should guide recruitment processes.

Suggestions made by survey respondents for how employers can improve their recruitment processes:

Throughout the recruitment process and HR policy changes:

1. Provide clear details of the organisation's flexible working practices, not only stating that flexible working is available.
2. Offer support, such as Supported Employment
3. Make clear and in a prominent place in the advertisement or application form how a candidate can request reasonable adjustments
4. Be open about their sickness policies
5. Include statements welcoming applicants with impairments and/or health conditions. Statement should make clear what that commitment means in practical terms, going beyond the 'disability friendly' statement
6. Designate a disability liaison in the workplace for recruitment matters, name a member of staff in the application pack, who is not involved in shortlisting or on the interview panel, whom candidates can contact to discuss the role and access issues which might prevent them from completing the application or attending interview.

Job Advertisements and Application Forms:

1. Make application packs accessible. Advertisements, application forms, and any written materials before and after the interview should be available in different formats.
 - a. Specific adjustments named by women survey respondents include large print, plain and accessible language.
 - b. Application forms should be in a Word or Plain Text format, 'which can easily be adapted to meet access needs.'
 - c. Introducing a variety of ways for candidates to apply for roles
2. Some survey respondents preferred that offline application processes are available, while others wanted more options for digital input.
3. Streamline the application process. Avoid overly lengthy application forms
4. Offer assistance or extra time to candidates to complete application forms

Interviews:

1. Use alternative assessment methods, such as work trials, job shadowing, more informal conversations and 'opportunities to meet'.
2. The Guaranteed Interview Scheme should be used more widely; tokenism should be avoided.
3. Survey respondents gave useful suggestions of the types of information that they need before an interview to make the process more accessible including:
 - a. Providing information about stairs and steps and offering interviews in step-free locations; making the layout of the building available to candidates.
 - b. Establishing whether candidates have an impairment and/or health condition, and ask candidates about their access needs to make reasonable adjustments. Interviews should allow extra time for disabled candidates who request this.
 - c. Giving clear instructions about the location of the interview.
 - d. Making the time of interviews accessible, taking account of challenges with morning routines and travel.
 - e. Providing details of parking availability.
 - f. Making BSL (British Sign Language) interpreters available.
 - g. The location of toilets and/or quiet spaces should be clearly communicated to candidates at interviews, who should be given the opportunity to use these facilities when necessary.
4. Some survey respondents said that recruiters should not use telephone and video chat interviewing, such as Skype.
5. A more relaxed interview atmosphere, such as with refreshments, would lessen the pressure on disabled candidates and enables those with, for example anxiety and social/communication impairments to perform at their best.
 - a. Distributing interview questions and details of what the candidate will be asked to do in the interview, in advance to all candidates would allow those with impairments and/or health conditions to perform at their best in the interview.
 - b. Building allowances for candidates' impairments and/or health conditions in interview scoring.
 - c. Avoiding overly long interview questions.
6. Providing full feedback after interview, highlighting both where the candidate performed well and what they could improve would assist disabled candidates to secure employment at a subsequent interview.

6.2. Experiences as Employees

This section focusses on disabled women's experiences as employees. Overall, women and men have had positive experiences in their workplace (Table 6). However, disabled women have had negative experiences in their current and previous roles.

Table 6 – Positive/Negative Experiences at Work

	Female		Male	
	Number	%	Number	%
Positive	81	69	29	64
Negative	37	31	16	36
Total	118	100	45	100

What made women's experiences in their workplace positive?

The key words which emerge from women's words about what has made their experiences at work positive include:

Understanding
Supportive
Valued
Respectful
Inclusive
Open
Accepting
Fair
Equitable
Honest
Aware
Welcoming
Friendly
Helpful

Disabled women have positive experiences in work when they have flexibility in their role, adaptations that enable them to do their job to the best of their ability, good communication with managers and HR, and a satisfying job in a company with shared values.

Some women wrote glowingly about the organisation they work for, about individual managers, and about their colleagues. One woman who works as a civil servant wrote about the positive aspects of her job:

‘Current employer has been very accommodating of my need to work flexibly. There is a disability support group on site plus regular communications. I feel my employer ‘walks the walk’ on things like this, whereas previous employer[s] have been quite immature about it. I feel valued for the work I do and they essentially get out of my way to let me do it.’ – Woman survey respondent

Women value supportive and understanding managers and colleagues. 40% of women and 51% of men agreed or strongly agreed that their employer and colleagues understand their impairment or health condition when it causes issues at work, and that they deal with it appropriately. However, 40% of women disagreed or strongly disagreed, suggesting that there is room for improvement. Free-text responses from women survey respondents reveal what being supportive and understanding looks like, and how influential this can be on women’s overall experience of work:

‘My line manager is very understanding of my condition (endometriosis), values me and says I am a respected member of the local authority. He has always worked with me to manage my condition and work and has never made me feel anything other than wholly competent to carry out my role.’

‘When I identify an aspect of work which is not inclusive, my employer is willing to listen and, depending on the cost, will try and implement my ideas.’

‘I have had very understanding bosses and they have understood that I need to work flexibly to attend appointments and are respectful and open and honest about my condition.’

‘My employer is understanding and wants me to be the best I can be at work regardless of my impairment.’ – Women survey respondents

Women talked about the different types of adjustments and accommodations employers have implemented to make working a more positive experience.

‘Manager is always happy to help and ensures in winter I’m warm enough so the pain in my knees doesn’t get worse.’

‘My current employer, despite wanting someone who could drive, has enabled me to prove how I get around things that they thought were essential and regularly ask about my health in an informal context so that I am safe and others are safe. I have been included in people’s induction to share and answer questions about my condition (because I am willing to).’ – Women survey respondents

It is important that all staff and managers are understanding and supportive, including making additional adjustments and maintaining good communication, such as checking in regularly with employees. Openness and willingness to learn, adapt, and listen to disabled employees about the best way to support them has a big impact on disabled women’s experiences.

Other aspects of work – communication, respect, and social aspects – bear on disabled women’s experiences. Women’s survey responses suggest improvement in these areas is needed.

53% of women and 49% of men agreed or strongly agreed that there is good communication in their workplace, and that they receive constructive feedback about their work; 27% of women and 19% of men disagree or strongly disagree.

55% of women and 53% of men feel that their opinions are treated with respect at work, and around a quarter (25% and 23%) disagree or strongly disagree.

Optimistically, the largest percentage of survey respondents reported that they are invited to join in with social activities with their colleagues. 69% of women and 57% of men have the opportunity to socialise with work colleagues.

What made women's experiences of employment negative?

The key words which emerge from women's words about what has made their experiences at work negative include:

Attitudes
Bullying
Condescension
Awkward
Inconsiderate
Thoughtless
Tokenism

Negative responses predominated in women's free text responses and positive and negative experiences were often mixed together.

One woman wrote at length about the open discrimination and bullying she had experienced in her previous employment with a charity which supports people with her health condition:

'...on the whole they have a charity/medical model view of the people we support. They see us as people who aren't capable, don't have any power and need things done for us. They see me in the same light even as an employee/senior colleague...When I have worked in the office the leadership has complained about my reasonable adjustments, discussed my condition and adjustments openly in front of colleagues and in public spaces outside the office. My [condition] is a "problem" in the workplace which they feel slows things down especially when they insist everything is done in a way that isn't accessible...There's a hierarchy of disability in my workplace...Overall there's an ableist culture that outwardly likes being able to showcase their disabled employees to their service

users but inwardly expects us to work in a toxic, inaccessible environment with little understanding or support of our needs.’ –

Woman survey respondent

Employers who do not think through the impact of decision making and policy change on colleagues with impairments and health conditions negatively affect disabled employees. One woman in the Cardiff focus group was impacted negatively when the organisation she worked for moved building. This move meant there were now limited parking spaces. Instead of prioritising blue badge holders for these spaces, the organisation told staff with blue badges to park on the street because staff without would have had to move their cars around parking restrictions. The result of this decision was that this woman with a physical impairment had to cross a busy street to get to work, creating an environmental barrier in her usual working routine.

Just as a supportive manager and helpful colleagues could make women’s work experiences positive, a change in personnel could sour that experience. As one survey respondent explained:

‘I have had a change in manager, which has led to a negative change in attitude. I don’t believe that individual needs should be affected in this way. Employer policies should protect a person’s access needs, particularly when these have been formally established. A manager’s individual ignorance or prejudice should not impact on equality or good practice.’

A good manager cannot counteract the negative effects of unsuitable policies or institutional problems. Having a good manager does not necessarily guarantee that employment is a positive experience, as these women survey respondents describe:

‘My immediate line managers are understanding and willing to learn, the policies however make things very hard and I have had to drop hours from full time to part time’

‘The senior staff and my colleagues are extremely supportive and helpful. However, they haven’t asked how I’m coping and how they can improve my conditions since I’ve been working there, despite knowing I have a disability.’

‘Over the years I have had good support from my managers and Head Office but recently there has been a change of staff in head office. I am currently off work with stress due to their behaviour.’

One focus group respondent summarised, ‘It’s luck of the draw, isn’t it, on who the manager is.’ It is clear from these statements how important are good policies mainstreaming inclusivity and accessibility alongside personnel who are willing and able to implement those policies fully.

Not being believed, listened to, or respected at work made women’s experiences negative, and this is a particular issue for women with invisible impairments and health conditions. Women who responded to the survey and in the focus groups talked about how not being believed impacted them.

‘I suffer from chronic pain which is invisible. I work hard not to let it affect my work and I am accomplished at appearing normal [sic]. This made it very difficult to be believed and taken seriously.’

‘My boss didn’t believe I was poorly and said I ‘played on’ my disabilities. She wanted proof from a doctor.’

‘When doing my job my boss doesn’t listen to me and turns away when I talk.’

‘Was made to feel that I was making up my illness, my employer at the time told me they don’t have to take any notice of my Dr note to reduce my hours temporarily, and that they wouldn’t do so! Going through a difficult period of ill health I needed to reduce my hours in order to remain in work. I was told (screamed at) by my manager that she knew people with my condition who work full time so why can’t I?! She continued that I was only making up being ill’ – Women survey respondents

‘A manager when I was teaching said to me, well, could you let us know, say on the Friday, if you’re going to be ill on the Monday. And he kept telling me I was hiding behind my disability.’ – Cardiff focus group participant

A lack of knowledge, awareness, and training about disability, and ineffective policies are creating an accessibility gap:

‘The firm I work for has no disability policy and another employee (with Diabetes) and I have to explain our requirements if the need arises. Recently I needed time off for a medical appointment and I had to point out that I was allowed to do so and did not have to ‘make up the time’ as this was connected with my disability.’ – Woman survey participant

‘...lack of awareness and more importantly lack of disability training, using tick-box exercises that help no-one and do nothing for the real life experience of working with impairments.’ – Woman survey participant

Good quality, ongoing training for staff at all levels was frequently highlighted as essential. Women emphasised that disabled people need to be at the heart of training on disability:

‘It's education, isn't it? You know, education to promote equality from day one across the board – Swansea focus group participant

‘I think you have to use, as part of the training, the disabled people who have got the conditions. So I always find that it's more powerful if ...somebody's lived experiences comes to the table’ – Cardiff focus group participant

‘...it's all well and good training them but as soon as there's a turnover and you've got new people coming in, it's got to be re-done again, so it's something that needs to be embedded, something that is continuously done or a training course every year’ – Cardiff focus group participant

‘...this idea of being able to support managers and workplaces with training and things, but use real disabled people with real-life scenarios, who people might not even appreciate are disabled, I think is really important’ – Cardiff focus group participant

‘It should be done yearly, just like the fire testing and the health and safety is done on a regular basis because, like you said, the turnover of staff.’ – Swansea focus group participant

6.2.1 Discrimination

'I work at a wonderful university and I am discriminated against on a daily basis.' – Wrexham focus group participant

58% of women and 42% of men who completed the survey have faced prejudice or inappropriate attitudes from their employer and/or colleagues on their impairment or health condition. Women were split in their views about whether their employer resolves issues relating to disability related prejudice well; 33% agreed or strongly agreed, 33% neither agreed nor disagreed, and 35% disagreed or strongly disagreed.

Women wrote and spoke at length about the discrimination, prejudice and bullying they have experienced in their roles and in recruitment:

'My previous two jobs were very negative. I was discriminated [against] on two occasions and had to enter litigation. This was very difficult as being disabled and not being able to afford legal fees there was absolutely no help or support for being a disabled person fighting a disability discrimination claim which is extremely complex in the legal arena. I had to still prove I was disabled even though I had medical evidence. I had to give up fighting because it affected my health.' – Woman survey participant

‘My experience with regard to employment and reasonable adjustments etc. has been positive, however I have faced prejudice and workplace bullying from a few colleagues in my team who gang together and target me due to my disability and reasonable adjustments, which they do not agree with, and have told me on several occasions, and have even confronted me in front of an office full of people. This has been reported several times but has yet to be addressed. This goes against our Code of Conduct for Employees and our Dignity at Work policy (as well as the Equality Act).’ –
Women survey participant

‘I’ve experienced employers turn around to applicants saying we can’t employ you because of health and safety.’

‘I was actually told I could be a fire hazard.’ – Swansea focus group participants

Discrimination thrives when negative attitudes towards disabled people go unchecked. One focus group participant in Cardiff described ‘attitudes that are filtering down’ from, for example, the media. Disabled women are trying to work, to manage their impairments and health conditions, whilst counteracting discriminatory and bullying attitudes from individuals, in work and society, whose views are supported and moulded in newspapers and other media, and from policies which test disabled people’s right to financial and other forms of support, such as PIP. On top of these structural, practical barriers, individuals’ personal prejudices add another hurdle in disabled women’s lives.

'I've had such horrible experiences being bullied and having to take my employer to tribunal and bits and pieces like that. I know how nasty and how vicious and personal these things get.' – Cardiff focus group participant

'...they're putting down copies of the Daily Mail on your desk about benefit fraud and things, you're like, oh God's sake, here we go again...' – Cardiff focus group participant

'...you've still got a couple of females that I know that have gone into the office place in wheelchairs, some of the blokes still think it's quite funny to try and get them to make teas and coffees for the team, you know, just to watch them, they feel as if it's just to watch them, struggle with an unsuitable kitchen area.' – Swansea focus group participant

'...one day I crossed my legs whilst sitting on my wheelchair and someone said "she's not paralysed" as though you have to be paralysed to be in a wheelchair and you know, and then particularly the political... I think there is a political agenda to make out the people with disabilities scrounging the system.' – Wrexham focus group participant

People and organisations discriminate against disabled women because of their gender as well as their impairments and health conditions. This stems from wider ideas and assumptions about women and gender roles which pervade society and which potentially affect all women. One woman in the Cardiff focus group encapsulates the intersection between these two protected characteristics:

‘So you’d say, well, I want support and I want a career, I want to be able to have a house...I want that, why can’t I have it, why can’t I be putting into a pension, and the answer is because you’re never going to earn enough because you’re not in a situation where you can work like that. I said to my boss once, because there was a male colleague who wasn’t doing what I was doing, and I said, ‘where’s my pay rise? I’ve been here longer’, and he said, ‘Well, you live with your partner, don’t you’ – which I didn’t – and he said, ‘so you know, they can look after you.’...I think gender is a big thing.’ –

Cardiff focus group participant

‘There is still this... there is still a huge gender identification problem in society and men are still deemed to...Have to be the ones that go out and to provide and a young man who doesn't have a job is vilified more than a young woman who doesn't have a job. –

Swansea focus group participant

In addition to framing the expectations and assumptions made about disabled women’s abilities and motivations for working, gender shapes the types of support activities that disabled women and men do within some support organisations:

‘...there is still a huge difference between the way that we meet up; women will quite often still, especially like my members, the females will quite happily go off to have a chat over a cup of tea, or a coffee or a cake whereas with the boys it's going to the football, going to the rugby, going to the pub. There's still this masculinity and femininity side of things.’ – Swansea focus group participant

These ideas about gender form additional barriers to employment for disabled women, who are, in these examples, perceived to not need to work because they are both women – provided for by a (male) partner at home – and disabled – provided for by the state and cared for. The latter would be especially acute under a Medical Model of Disability. An attitudinal change would recognise disabled women as independent, primary earners in their own right, and would support them in that capacity.

Being over-protected is related to these more overtly negative and discriminator experiences. One woman used the phrase ‘being wrapped up in cotton wool’ to describe well-meaning colleagues and managers who question her ability to do particular tasks and doubt her abilities, with a view to protecting her from harm. While well-intentioned, this originates with the same assumptions about disabled women’s abilities. This emphasises the importance of avoiding a ‘one-size-fits-all’ approach and of trusting disabled employee’s judgements and knowledge of their conditions.

One focus group participant in Cardiff works for an organisation supporting children with her condition, and said that while the therapists with whom she works trust her judgement about her capabilities, for example, with lifting and carrying items, her manager questions her. A symptom of MS (Multiple Sclerosis) is falling more frequently. Focus groups participants with MS shared their experiences of falling at work, and discussed their colleagues’ uncertainty of what to do when they fall at work:

‘...some people are completely shocked and they don’t know what to do, other people are just like, oh, shall we help her, they’re all just like, what do we do.’ – Swansea focus group participant

There is lack of knowledge and understanding about how best to support disabled people in the workplace, and fear and anxiety about ‘getting it wrong’. Well directed training and education, led by disabled people, and listening to disabled women and implementing their recommendations will enable colleagues and managers to support employees appropriately and effectively.

6.2.2 Workplace Adjustments and Inclusiveness in Work

The 2010 Equality Act requires employers and service providers to make reasonable adjustments to remove barriers for people with impairments and long-term health conditions. Employers who fail to make reasonable adjustments may be contravening this legislation. Any adjustments required that are not covered under reasonable adjustments can be claimed under Access to Work. Reasonable adjustments are the minimum to ensuring that disabled women and men can thrive and achieve their potential in the workplace. This is ineffective when tokenistic, or where disabled people are not involved in decision making.

Proportionally more women than men have requested workplace adjustments; 76% of 119 women and 57% of 44 men who took the survey. 50% of women and 42% of men agreed or strongly agreed that their employer has made appropriate, reasonable adjustments. The majority of requests are for workstation adjustments and equipment, and flexible working arrangements as Table 7 shows.

Table 7 – Workplace Adjustments

Type of Request	Number of Survey Participants	
	Female	Male
Work station adjustment/equipment	50	11
Flexible working	41	9
Office accessibility arrangement	21	5
More/improved breaks	7	0
Access to software/hardware	3	3
Assistant	2	2

Most adjustments related to the working environment, such as ‘a decent chair to support my back injury’, ‘wrist rests for my arthritic hands’, ‘my computer screens at the correct height’, ‘noise cancelling headphones’, ‘an office in which I could turn the lights off’, ‘large print’, ‘ability to work in a quiet area’, ‘appropriate position within the office away from crowding/noise’, ‘large screen monitors’, and ‘accessible doors’.

Other women had requested changes to their working pattern or role. Several women had asked for ‘flexible working hours’, ‘ability to work from home’, ‘to be able to work part-time’, a ‘phased return following time off because of my condition’, and ‘for my role to be changed slightly.’

A number of women have had negative experiences where employers have refused to make reasonable adjustments. For example, in Cardiff one woman’s supervisor in a laboratory refused to arrange a suitable chair for her:

‘I had a hard stool and my supervisor said, ‘I’ve got a bad back, I don’t see why I should have to fork out for a chair for you’ and, it was horrendous, it was absolutely horrendous.’ – Cardiff focus group participant

Spurious comparisons – between an impairment and a bad back – are unhelpful and show a lack of due consideration for the importance of access requirements.

Failure to implement accessibility throughout the workplace causes issues for physically disabled workers:

‘On the side of more physically disabled people, those that are in a wheelchair, they’re often the...the career type you are looking for is targeted to an office. If you are in a wheelchair and you wish to be a chef you’ve got to open up your own catering business because no one is going to be prepared to put things in position for that. The other big obstacle that a lot of my members find that are in a wheelchair is they don’t even feel welcome even if the place is accessible because the accessibility is the tradesman’s entrance, the delivery door...they’re not coming in and out the main door with everybody else so they feel discriminated against straightaway. And even when you do have things in place, you know, like a nice disabled toilet, it’s normally in a very awkward place or it might be opposite a team that are going to laugh when you can’t open the door properly or get in...Because although they may put ramps in, they may put nice wide doors in, they don’t change the worktops, and this is happening in quite a lot of different places. I mean, how many wheelchair people have you actually seen working in [a big supermarket]?’ – Swansea focus group participant

One woman in a focus group shared this experience. Working in a medical practice as a GP, she often works after hours because of the demands of the job. She wasn't permitted to use the main accessible door to the building when she requested, but instructed to use the fire door at the side of the building. Even with a temporary ramp, the door was heavy, difficult to navigate and opened onto a gravel car park. This failure to make an adjustment – allowing her to use the main door after hours – was one of a series of events that resulted in this woman leaving the practice and taking her employer to a tribunal.

Making changes to improve accessibility, without integrating accessibility and inclusivity throughout every aspect of the workplace can mark disabled people as 'different':

'But to me, I kind of think, well, if they've got accessible toilets for disabled [people] then surely they should stop making disabled people different...

And all toilets should be individual with the hand washing basin inside and every toilet should be accessible. You know, because even in school it's like, well, you've got to have a disabled... you've got to have a special disabled toilet.' – Swansea focus group participant

Failure to integrate accessibility and inclusivity into workplace design and policy can have very serious implications for the health and safety for disabled staff. One woman who uses a wheelchair flagged how poor access considerations impacted on her health and safety at work:

'I also had to wait for a long time for a ramp to get out at the closest fire exit so I had to either wait in the building if there was a fire or go a long way round to get out of the building.' – Woman survey participant

There is an imperative for employers to rethink accessibility and inclusivity and to include disabled people at every stage of the process, and to consistently monitor and evaluate the efficacy of design changes, processes and policies.

Research participants described the challenges they face in highlighting barriers at work, especially when requests for reasonable adjustments are not accommodated:

'If you don't explain these problems to people, they're not going to get it at all. It's quite hard, isn't it, it's difficult to speak up for yourself and go, right, okay, I'm going to have to have help with the door or I'm going to have to have somebody to do this. One problem that I experience now, I haven't got access to go to the kitchen in the council, you know, disability confident and that, make myself a cup of water and go back to my desk, I can't do that, the doors are too heavy, can't do it, I have to ask somebody to do it for me and I said, simple problem, just keep the doors open and I can do it...[they said] we can't for health and safety reasons.' – Cardiff focus group participant

Lived experience like this demonstrates how vital the social model of disability is. This woman is capable of fetching herself a glass of water. The problem is that the doors are too heavy, the health and safety policy is too rigid and no reasonable alternative solutions have been implemented to enable this employee to use the kitchen facilities. In consequence, this woman's experience of working is clouded.

This example illustrates too how challenging it can be for disabled employees to raise and to have their concerns heard and actioned. There is no guarantee that highlighting an accessibility issue will result in change, even in organisations which are, on paper, accessible and inclusive.

6.2.3 Flexible Working

‘Everybody should be able to have the ability to work in a way that they can work.’ – Cardiff focus group participant

Flexible working is a way of working that suits an employee’s needs. All employees have the legal right to request flexible working.⁹¹ In July 2019, there were expectations that a new law ensuring the right to flexible working would be passed.⁹²

As Table 8 below shows, 52% of women and 39% of men who completed the survey have made a flexible working request. 76% of flexible working requests were accepted. Around a quarter of disabled women and men work in an organisation that routinely offer flexible working.

⁹¹ UK Government, ‘Flexible Working’.

⁹² Schofield, Claire, ‘Flexible working could soon be offered to all by employers under new law’, <https://inews.co.uk/inews-lifestyle/work/flexible-working-offered-by-all-employers-new-law-498049> Accessed 14/04/2020.

Table 8 – Flexible Working Requests

Have you made a flexible working request?				
	Female		Male	
	Number	%	Number	%
I made a request and it has been accepted.	47	39	12	27
I made a request but it has been rejected.	15	13	5	11
I haven't made a request as my workplace embraces flexible working.	27	23	11	25
No, I haven't made any request and I am not working flexibly.	30	25	16	36
Total	119	100	44	100

When disaggregated by impairment and health condition, women with long-term health conditions made the most requests for flexible working (35%), followed by women with physical impairments or mobility issues (26%), and by women with mental health conditions (24%). This pattern was the same for men, but in smaller numbers.

When disabled employees make flexible working requests, they are overwhelming accepted by employers; 76% of women's and 71% of men's flexible working requests have been accepted. This should be further encouraged, and policies strengthened to enable more employers to accept requests.

Flexible working takes many different forms and Table 9 below shows the different types of flexible working that disabled women and men are doing. Most women with flexible working in place are working from home or have flexitime arrangements, and/or are working part-time. Among men, most have flexitime, are working from home, part-time, or compressed hours.

Table 9 – Types of Flexible Working

Type of flexible working				
	Female		Male	
	Number	%	Number	%
Flexitime	32	23	8	22
Working from home	31	23	7	19
Part-time	30	22	7	19
Compressed hours	10	7	4	11
Annualised hours	2	1	1	3
Term-time working	0	0	0	0
Structured time of in lieu	3	2	1	3
Career break	3	2	0	0
Job-sharing	2	1	0	0
Varied-hours working or time banking	9	7	3	8
Hot-desking	5	4	3	8
Mobile Working	7	5	2	5
Results-only working	3	2	1	3
Total	137	100%	37	100%

Technology facilitates flexible working, and a suite of software are now available to enable employees, for example, working from home to remain connected to their colleagues in other locations. 50% of all survey respondents agreed or strongly agreed that their workplace has embraced technology to support flexible working, comprising 53% of women and 43% of men.

Survey participants emphasised that they want the flexibility to attend their medical appointments without taking time off or using sick leave. Disabled employees have the right to time off for medical treatment or counselling as a reasonable adjustment under the 2010 Equality Act.⁹³ Many women drew attention to situations where their employer may be contravening the Act, by not allowing this time off, marking this

⁹³ UK Government, 'What to do if you become disabled'.

time as a sickness absence, or requiring the employee to make the time up. While many employers are generally supportive of flexible working, this particular aspect which affects disabled employees could be improved.

Disabled women want employers to honour their right to attend appointments connected with their impairment or health condition. One woman requested 'acknowledgement of my right to time off for medical appointments without having to make time up' and this issue came up frequently in the focus groups.

'You can say, 'I'm disabled and therefore this relates to my disability so you have to take that out of the equation', but actually putting that into practice and having to fight with HR time and time again, well, how do you know it's because of your disability, are you sure because it seems there's a pattern here and we've looked at 20 Tuesdays, and it's like, well, yeah, because that's when the clinic's on.' – Cardiff focus group participant

Leave and absence policies need to account for the multiple adjustments and support that disabled employees will need, and which will change and vary. Impairment and health conditions need to be treated equitably, as this survey respondent explains:

'[My employer accepted and implemented the recommendations made through Access to Work] But it was all office based changes. They couldn't support me through hospital stays and this is why I lost my job. The employers all seem supportive of disability, but not illness. There's a huge difference between needing wheelchair access etc., to an illness whereby you have to be in hospital a lot. Disability and illness are very different.' – Woman survey respondent

Personnel are again integral to women's experiences, and a good manager who understands reasonable adjustments can support the employee. However, this needs to be backed up by policies embedded in organisations that reflect legislation.

'I have quite a lot of appointments for different things to do with my health conditions and its sort of like down to the discretion of the manager as well. My line manager's really, really good basically and she knows why I'm going and it's not...I've had a lot of time off sick and it hasn't been escalated yet, but I think I'm supported because they know why and they've got my back.' – Cardiff focus group participant

Even where time off in relation to women's impairments or health conditions is recognised, some women said they feel guilty for taking this essential time off to manage their condition.

'I still feel guilty. I had an appointment...but I still have to work all my flexing hours to make sure that I could make that appointment but I felt the need to say I have to have that day off because I had a hospital appointment, even though I made up those hours already, but I still felt really, really guilty.' – Cardiff focus group participant

'I still feel that I need to explain myself all the time.' – Cardiff focus group participant

‘I used to be explaining myself 20 million times as well’ – Cardiff focus group participant

‘You feel you’ve got to justify yourself. Because you want people to understand.’ – Cardiff focus group participant

The pressure to live up to society’s expectations and norms can be deeply ingrained. Policies to guarantee disabled people’s rights at work that are followed and enforced within workplaces are an important step to ensure that, disabled women and men can exercise their rights and manage their conditions at work, until working cultures and society’s expectations shift.

6.2.4 Career Progression

‘I used to work with a young lady, she, I can’t...thalidomide drug. So she was about my age...in a wheelchair...her brain was fantastic, she was brilliant at her job but she was bypassed for promotion on a number of occasions and one of the main things that stopped her getting a promotion was because they put the interview in the manager’s office, which was up a flight of stairs. The people that got the promotion above her tended to be friends of the manager.’ – Swansea focus group participant

Survey respondents were asked about their career progression, and whether their progression had been slowed by attitudes to their gender and/or their impairment/health condition.

There is a gender difference in women and men's experiences of promotion. An equal percentage of men and women (24%) agreed or strongly agreed that they have a clear progression path. However, 41% of women and 31% of men disagreed or strongly disagreed, with the remainder unsure. Women (46%) felt more strongly than men (35%) that they had been treated less favourably as a result of their impairment and/or health condition.

More women than men agreed or strongly agreed that they had been treated less favourably because of their gender; 32% of women compared to 6% of men. However, 46% of women disagreed or strongly disagreed that they had been treated less favourably because of their gender compared to 55% of men.

Table 10 – Fair and Timely Promotion

I have been promoted fairly and when I expected to be during my employment.				
	Female		Male	
	Number	%	Number	%
Yes	39	31	18	38
No	46	37	18	38
I wasn't expecting to be promoted.	40	32	11	23
Total	125	100	47	100

Out of 85 women and 36 men who had expected to be promoted in their current or previous employment, 54% of women and 50% of men had not been promoted fairly and when expected.

In the focus groups, women discussed the barriers that had impacted on their career progression. One woman in the Cardiff focus group has been long-term unemployed

and has found it difficult to return to work because of a lack of understanding about her health condition:

‘I felt it gave me a massive set-back in my career and I kind of had to find my feet again. I did start doing voluntary work in the time that I wasn’t in work. I was right at the bottom of the ladder and there wasn’t really any support to sort of help me progress into where I wanted to be and no understanding or awareness of the health condition I have and what support could be put in place to support me.’

Periods out of paid work make it difficult to return to work at a previous level and this is more acute for disabled people because of issues around job seeking and recruitment. Insufficient support to help disabled women progress in their career, coupled with lack of understanding about impairments and health conditions, creates a situation where women are unable to progress as they should.

6.2.5 Training and Education

Access to training and education is important to enable employees to establish themselves and progress in their careers. 47% of women and 49% of men agreed or strongly agreed that they have had equal access career development programmes and training in their current or previous job, while 25% of women and 22% of men disagreed or strongly disagreed. This section highlights issues pertaining to training and education that came out from the research.

A number of university courses now offer work placements with a view to increasing the employability of their students. Disabled students can be disadvantaged if placement hosts do not offer an accessible and inclusive placement:

‘Some universities are okay, they have good accessibility and they have lifts up and down to things so getting the education, once you can get into university and some of them, there are often things in place so they can get the qualification. They can’t get the work experience, so if they want to do one of the sandwich courses where they do a year in industry it’s...because you have to find your own placement.’ – Swansea focus group participant

There is an imperative here for organisations to proactively create inclusive working practices, so that they can benefit from a student placement, and retain the next generations of qualified and passionate employees to stay in their chosen sector. ‘Change 100’ organised by Leonard Cheshire is an example of a successful work placement scheme designed for disabled students.

Technology helps deliver training and professional development courses, including through distance learning. A professional BSL interpreter illustrated how technology is not automatically accessible or inclusive, but that accessibility and inclusivity has to be embedded in all pedagogies:

‘There’s another thing with training, the deaf friends that I have that have got jobs, and there’s eLearning is very hot and cheap, and okay, I want to do eLearning, there’s no subtitles or there’s no interpreter on the screen so they’ve got to watch a video and they haven’t a clue what’s being said. For a culturally deaf person they would struggle to understand what somebody is saying so you would need the option of a little interpreter in the corner or book an interpreter, you know, which we regularly do anyway. But a lot of companies still think, oh yeah, you go on [the] computer, do your eLearning.’ – Swansea focus group participant

A final issue to emerge from the focus group discussions concerns British Sign Language and the Welsh language. Welsh language skills are essential in many public facing and public sector roles. A Petition submitted to the National Assembly in February 2019 by Deffo! – a forum for D/deaf young people – demonstrated that education provision for D/deaf or hard of hearing learners is inconsistent across Wales.⁹⁴ Furthermore, D/deaf people do not have equal access to Welsh language learning in some places. Resources to enable D/deaf pupils to attend Welsh medium schools are not available.

‘I don't know one deaf person who speaks Welsh or understands Welsh because they're not allowed to learn language. As soon as they're diagnosed with deafness, profound deafness, no, you're not allowed to go to a Welsh school’. – Swansea focus group participant

There are similar barriers for adult learners:

‘I've got another friend lives in Powys, went to Aberystwyth University, I was interpreting the meeting for her and ...she's [a] very intelligent woman, very intelligent and she said I would like to go on this Welsh course, I'd like to learn to speak Welsh, to read Welsh and they said, well, there's an oral module in this course and you can't speak so we can't accept you on the course.’ – Swansea focus group

⁹⁴ Hughes, Siân (2019), ‘Education and services in British Sign Language: Assembly Members to debate Petition Committee's report’ <https://seneddresearch.blog/2019/02/01/education-and-services-in-british-sign-language-assembly-members-to-debate-petition-committees-report/> Accessed 28/02/2020

British Sign Language is a visual, spatial language that has its own grammatical structure and syntax.⁹⁵ Welsh government has recognised BSL as a language in its own right since January 2004, and the Welsh language has been an official language in Wales since 2011. Research participants with experience of BSL as interpreters stressed that while many profoundly and culturally D/deaf people have limited comprehension of English as a written language, many D/deaf and hard of hearing people have English reading and writing skills that they use at work.

The Welsh Government's Petitions committee has recommended that BSL be recognised as the first language of D/deaf children.⁹⁶ There is an urgent need to increase the number of teachers of the D/deaf. Going forward, it is important that equal access is offered to D/deaf pupils to be taught and supported by qualified teachers in Welsh medium schools. The Welsh government target of One Million Welsh speakers by 2050 should include non-spoken forms of the Welsh language.

⁹⁵ Hughes, 'Education and services in British Sign Language'.

⁹⁶ 'British Sign Language 'should be the first language of deaf children in Wales', <https://www.itv.com/news/wales/2018-10-05/british-sign-language-should-be-first-language-of-deaf-children-in-wales/> Accessed 03/04/2020

7. Disabled People in Self-employment

‘About the framework for independent living, ok? Umm and one of the thing they always talk on about: "well disabled people, they're struggling to work for an employer, they can become self-employed" And there is this total lack of appreciation of the fact that being self-employed is not an easy option.’

‘In fact, it can be even more difficult than working for an employer. Because you have all the additional stress of actually running that business yourself. You don't get any paid time off sick, you don't have any paid time, you don't get any benefits if you get pregnant... There is nothing. The whole business will collapse essentially.’ –
Wrexham focus group participants

In the previous sections, we saw that many disabled women have had positive experiences of employment, working in organisations and with managers who are supportive and understanding. Many disabled women encounter barriers finding suitable paid employment, and have had negative experiences in roles which are inflexible and inaccessible, while discrimination and prejudice affect every aspect of their working lives.

Self-employment presents itself as a potential solution to these challenges. We asked research participants about their experiences of self-employment, to ascertain whether self-employment has been a positive choice for disabled women in particular, and if entrepreneurial disabled people are being fully supported.

22% of women and 32% of men who participated in the survey have been self-employed at some point in their careers. As we saw in Section 2, 9% of disabled women and 20% of disabled men in Wales are self-employed, so self-employment is proportionately overrepresented in the survey. This offers an excellent opportunity to

examine the experiences of self-employed disabled women in Wales. Among self-employed respondents, the majority have long-term health conditions (28% of women and 36% of men).

Table 11 below shows that the majority of self-employed women and men were employed before they set up their business, and left their job to do so. 16% of men and 17% of women were unemployed before they were self-employed.

Table 11 – Women and Men Employed before Self-employment

	Female		Male	
	Number	%	Number	%
No, I was unemployed, I decided to set up my own business.	5	16.6	3	15.8
Yes, I was employed before, I have chosen to given up my job to set up my business.	17	56.6	14	73.7
Other (please specify)	8	26.6	2	10.5
Total	30	100	19	100

In the 'other' category, two women were employed and self-employed at the same time before becoming fully self-employed, two were employed and made redundant, and another was working in a different career before becoming self-employed. This suggest there is no single pathway from employment to self-employment.

7.1 Reasons for becoming Self-Employed

While the majority of self-employed women had made a positive choice to leave their previous job to start a business, a combination of factors, including unemployment, insecure employment or redundancy, alongside their impairment or health condition and caring responsibilities, made self-employment the best option for some women

to remain economically active. Self-employment should be a positive choice, with suitable support in place, and not a solution to being excluded from being an employee.

Table 12 below shows why survey participants became self-employed, organised by gender, and by impairment and/or health condition.

Table 12 – Women’s Reasons for Becoming Self-Employed

	Social/communication impairment; Neurodiversity condition	Visual Impairment	Deaf or have a hearing impairment	Long-term health condition	Mental health condition	Learning difficulty	Physical impairment or mobility issues	Prefer not to say	Total	%
Not able to find/retain a suitable job	1		1	5	2		4	1	14	18
Controlling working environment and conditions	4	1	2		4	1	5		17	22
Preference to develop career and be own manager	1			2		1	1		5	7
Sector or geographical conditions				2	1		1		4	5
Skills or experience suited to self-employment	1			2			1		4	5
Flexibility, work-life balance	2		1	6	3	1	5		18	24
Caring responsibilities	2			2	1	2	3		10	13
Have an (extra) income, welfare or social security considerations		1		2			1		4	5
Total	11	2	4	21	11	5	21	1	76	100

There is clearly no single reason for becoming self-employed among disabled women. Certain reasons, such as wanting flexibility and a work-life balance, to have greater control over the working environment and conditions, and not being able to find or retain a suitable job, emerged repeatedly from men and women.

A gender difference is apparent. While men tended to give only one reason for being self-employed and to be succinct in their answers, women's explanations tended to be longer, and multiple factors in their working and home lives came together to make self-employment the best option at a particular point in their career. 10% of women talked about caring responsibilities, for children, parents, or someone with an impairment and/or health condition, whereas men did not talk about caring responsibilities in the context of self-employment. 18% of men talked about self-employment as a preference and wanting to develop their career – frustration with working for someone else, and wanting to be one's own manager were prominent among men. By comparison, just 7% of women talked about preferring self-employment.

Women's reasons for going into self-employment are best illuminated through their own words. In free-text responses they talk about how their need for a suitable working environment interacts with their career goals and their caring responsibilities. One woman explained that she had been 'employed in temporary jobs, but that wasn't an option when my coping/self-care broke down after having a baby' and another said 'I was employed before I fell ill, and saw self-employment as the only possible way to remain economically active'.

Being self-employed enables women to work in a way that suits them while managing impairments and health conditions.

'To manage my health. There are periods of 6 weeks where I unable to work or my mobility is impaired and can impact on my ability to drive or concentrate.' – Woman survey respondent

‘I could work around my caring responsibilities, and could work when my mental health, sensory needs, and fatigue allowed.’ – Woman survey respondent

Self-employment prevented one woman’s mental and physical health from worsening when her job searches were unsuccessful and circumvented the unwillingness of employers to accommodate employees’ health conditions and impairments:

‘I have skills that I can use for being self-employed. When no employer would take me with my health issues, I changed to being self-employed. Only a few hours a week. I figured I might be able to earn and keep economically active as not doing so effected my mental health which knocked onto my physical health.’ – Woman survey respondent

One of the focus group respondents – now retired – had been self-employed. Despite being a qualified chef, she could not find accessible employment. She was only able to pursue her profession because her partner was able to purchase and adapt a café/hotel. She and her daughter explained her situation:

‘we had to buy the hotel because nobody would employ me but
never mind, I still worked’

‘She hasn’t worked properly forever and she’s a chef by trade, this is
what she wanted to do. The college was very accommodating and
very good to do this but nobody would employ her so my dad bought
her own café and had it adapted so that it was useable.’ – Swansea
focus group participants

Being self-employed gives women control over their own working environment,
without having to make requests for adjustments from employers. For one woman,
self-employment enables her to use text-based communication, such as email, while
others commented that self-employment was the ‘easiest way to control my
environment and stay well’, and the ‘only way to get work because of my need to
control my environment in order to be functional’.

For other women, returning to work after having children or taking on other caring
responsibilities prompted a change in their careers:

‘After my children were born, I did not want to return to my previous
work (television production) and did not know what to do. I started
making jewellery and found people wanted to buy it.’ – Woman
survey respondent

‘Been employed and then looked after parents. The translation
profession was developing and I saw the opportunity to become a
freelance translator.’ – Woman survey respondent

Flexibility is an important consideration for professional, health and caring reasons and is invaluable for people – particularly women – who have caring responsibilities:

‘It lets me be flexible in when and how I work. I can choose which jobs I want to do.’ – Woman survey respondent

‘I couldn’t get a job with enough flexibility for my disability and wanted to be able to choose where and who I worked with, because of my disability.’ – Woman survey respondent

‘Self-employment provided more flexibility to enable me to take care of my son without relying on childcare.’ – Woman survey respondent

For other women, choosing self-employment reduced the risk of discrimination and avoiding the challenges of disclosing an impairment or health condition and seeking adjustments.

‘I thought there would be less barriers to self-employment (I could work from home, flexible hours, didn’t need to disclose my disability or explain long gaps on my CV due to health or face discrimination. I didn’t think anyone would want to employ me.’ – Woman survey respondent

Some reasons women gave are shared by all self-employed people, for example, earning money was a factor in many women's decision to become self-employed, with typical responses including 'to achieve a realistic income' and 'to earn extra cash.' For some disabled women, having an income from self-employment is also about navigating the social security system:

'I had pressure from the Job centre to take up "work related activity". I was also in the "benefits trap" of not [being] able to work full time physically but also not able to afford working over a small number of hours/receiving over a certain level of earnings without it affecting my benefits.' – Cardiff focus group participant

Income from self-employment can be highly insecure. By one measure, the average median annual earnings from self-employment in the UK in 2013/14 were £10,800, and for self-employed women closer to £5,500.⁹⁷ Disabled women can be in a difficult balancing act between pressure to work from Jobcentre Plus, not wanting to jeopardise their benefits and the relative security this provides, and not being in a position to work standard hours.

The absence of employment opportunities in a particular location or particular sector conditions can also cause women to become self-employed:

'I wanted to continue to work in PR and marketing but there weren't enough opportunities where I lived' – Woman survey respondent

⁹⁷ Department for Business Innovation & Skills, 'The income of the self-employed' (February 2016), p8 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/500317/self-employed-income.pdf Accessed 31/03/2020

‘In the Arts it’s easier to be self-employed and invoice companies as no one employs on a permanent contract basis. I also subsidised self-employed income with PAYE positions.’ – Woman survey respondent

‘[My] job was only available via self-employment’ – Woman survey respondent

While some of these reasons for being self-employed are shared by women and other self-employed people across Wales, these reasons cannot be detached from, and indeed are exacerbated by, women’s wider experiences with impairment and health conditions. For example, a woman living in an area where suitable employment opportunities are not available might not be able or willing to move away from an existing support network to find work.

Survey participants were asked about how their experience as an employee impacted on their decision to become self-employed; 60% of self-employed women and 37% of men said that being employed affected their decision. The majority said that the lack of flexibility, support and understanding or the high level of stress, affected their decision to become self-employed. The free-text responses further illuminate what lack of flexibility looks like and how this affected women’s decision making. This offers useful insights into the negative experiences of work, among a group of disabled women who felt that they needed to leave employment.

‘No flexibility, high stress environment, colleague’s lack of awareness and understanding of my condition, environmentally unfriendly as an autistic person.’

‘I realised that despite over ten years work in local government, my employers weren’t willing to support me through my illness and disability so going into self-employment, I at least could earn some [money] throughout lengthy hospital stays, and ‘keep my head in the game!’.’

‘I needed flexibility that my employer wouldn’t give me. I needed to be able to rest, and go to hospital appointments as a patient and a carer without being chastised.’

‘Being employed was very stressful because it was inflexible and I had to take time off for sickness as a self-employed person I could work when it suited me.’ – Women survey respondents

Men did not respond as fully as women, but these main themes centred on the lack of flexibility and understanding around their health condition/impairment, and general dissatisfaction with hierarchical manager/employee relationship.

Demonstrating the internalisation of norms around employment, two women responded that they do not feel they are suited to employment because of their impairment or health condition and this was again related to the inflexibility in employee roles:

‘I felt a burden to my employers. I felt this was a creative way to support my health and manage my condition and to allow me periods of illness to take the time I need in order to manage my condition.’

‘I wouldn’t have wanted to employ me; I wouldn’t have been happy with being an employee.’ – Women survey respondents

While the majority of responses tell of the negative impacts of being an employee, one women responded being employed boosted her confidence which helped her when she became self-employed:

‘Helped me with confidence and communication skills. Provided me with a very supportive local network.’ – Women survey respondent

‘Push’ and ‘pull’ factors are present in women’s reasons for becoming self-employed. Self-employment is standard in some employment sectors and is a positive decision, framed in terms of choice for many disabled women. Self-employment enabled disabled people to be their own boss, work when and for whom they want, and to

control their working environment. It allows those with caring responsibilities to work without relying on childcare, and to move their career in a different direction.

However, many disabled women also felt that self-employment was the only viable option that enabled them to work. Some are setting up their own business because of pressure from the welfare system to work when employers are unwilling to employ them or they feel they cannot do a job with set hours. Underpinning the decision to 'go self-employed' for a number of women is the lack of flexibility and accessibility of working for someone else. Women who are carers are navigating inaccessible or inflexible childcare. In other words, some disabled women are having to take responsibility for navigating the barriers to secure employment put up by employers and society.

7.2 Challenges in Self-Employment

'I couldn't just become self-employed because there is no back up for me if it fails.' – Wrexham focus group participant

Setting up a business and becoming fully self-employed comes with additional risks that are prohibitive to disabled women. This section explores the challenges that self-employed disabled women encounter.

The biggest barriers affecting self-employed disabled women relate mostly to the unique challenges of self-employment; confidence, managing finances, lack of financial security, finding clients and work, and the working hours. There are challenges that relate to women's impairments and health conditions, such as continuing to work with health issues, and the lack of support available to disabled people, including formal sick leave or sick pay.

The biggest challenges for men were similar, but continuing to work with health issues and lack of support for disabled people were not issues raised by men

respondents. This is not to say that these are not concerns for self-employed men, but rather, perhaps these were not the most pressing issues that disabled, self-employed men wanted to raise.

One disabled self-employed woman wrote that the biggest challenge she faced is the 'lack of earnings when I was ill', and another said it was 'not having the security of sick pay.' Another said:

'Ill-health, not having sick pay when unable to work or not knowing what to do in this situation. Being paid per project rather than per hour (working more hours than I should to compensate for those times when ill health made my work take longer) not having reasonable adjustments.' – Woman survey respondent

Managing self-employment within the social security system presents challenges:

'Getting enough work to make it pay. Under Universal Credit, it's impossible to do (who can pay themselves a full time living wage?)'
– Woman survey respondent

The minimum income floor (MIF) may apply for self-employed people who claim Universal Credit and who are in the 'all-work-related' requirements group. There are some exceptions which include if 'you've been assessed as having limited capability for work or limited capability for work-related activity'. The MIF is a calculation by the DWP of how much a self-employed person would be expected to earn, based on minimum wage for their age group and how many hours they have agreed to work. For self-employed people who earn more than the MIF, their UC payment will be

worked out on their actual earnings, while for those who earn less than the MIF, their UC is based on the higher MIF.⁹⁸

Finding work is another challenge and this is compounded in businesses run by disabled women, where prejudices and biases come into play:

‘Finding support...a lot of people either aren’t interested in supporting you as a business because they see it as so competitive/not worth pursuing when you believe in yourself and know your capability it’s difficult to find people who take you seriously when it is a viable business option for you because of your talents and assets.’ – Woman survey respondent

Disabled women highlighted the lack of support available to set up and develop their business. One survey respondent wrote a substantial response detailing a dispute she is having with a housing development and the local authority about access to her house, which she uses for work. Double-yellow lines have been painted on the road outside her house, and there is no account taken of the fact that herself and her clients have blue-badges. The lack of willingness to make accommodations and adjustments has made her working life more difficult, and indicated to her the paucity of support available to self-employed disabled people. Indeed, she wrote at length about her frustrations at the disconnect between the superficial commitments to equality and diversity of the housing developers and the local authority, their actions, and reaction when challenged on their policies.

The majority of survey respondents did not receive any official support when they were setting up their business. Only 8 women (28%) and 6 men (32%) who are self-employed received support from an official body. Among those who have, third sector organisations including Shaw Trust, Federation of Small Business and Prime

⁹⁸ <https://www.citizensadvice.org.uk/benefits/universal-credit/on-universal-credit/how-the-minimum-income-floor-works-if-youre-self-employed/> Accessed 22/05/2020

Cymru were preferred by the survey participants. Most (4 women and 2 men) were supported by third sector organisations. Only 1 respondent of each gender was helped by Business Wales, a bank or financial institution, or Access to Work when they were starting out in self-employment.

For disabled women, getting to where they need to be to apply for and seek support can pose a challenge, when public transport and buildings pose environmental barriers:

‘It’s still very, very hard because even to get into the bank where you want to go for your bank loans, the banks aren’t easy to get in and out of, especially now that they’re closing them all and you’ve got to go into the city to get to a bank so you’ve now got to get on a park-and-ride bus that you can’t get on.’ – Swansea focus group participant

Becoming self-employed is not an easy decision for everyone. This section has shown that there are additional barriers and challenges for disabled women, whether becoming self-employed was a positive choice or not. Accessing support to set up a business is difficult where there is not enough dedicated support available, which is accessible to disabled women. The challenges of building a client base and attracting new work can be harder where clients do not want to do business with disabled people, and again, this can be compounded further by gender. Maintaining a steady secure self-employed income is a challenge – self-employed women generally earn less than self-employed men – and income is dependent on delivering for the client base. Periods of ill health or where an impairment worsens can threaten that income and there is no sick pay to fall back on. Managing benefits is an additional challenge when self-employed income can fluctuate month on month.

8. Disability Support Programmes

This section focusses on the employment support programmes available to disabled people and highlights how effectively they are supporting disabled women in work, and where further evaluation and review is necessary. Section 4 outlined the policies and programmes available in Wales and the UK, and this section focusses on those which research participants have used and discussed most.

A key point that disabled women raised in the research was that support schemes which focus on skills training, and particularly up-skilling, are not adequate in meeting government targets for increasing the number of disabled people in employment. A focus group participant in Cardiff, who works in an organisation which supports disabled people spoke from her personal and professional experience and emphasised that the main barriers facing disabled people are not deficiencies in their skill set:

‘...we went to a meeting with the Welsh government because they were talking about a new employability plan for people with disabilities and it was the same thing that we hear everywhere we go, which is like, oh, we’re going to do more programmes for people with disabilities to be upskilled and my manager said, you do realise it’s not the people that are the problem.’ – Cardiff focus group participant

The Social Model of Disability describes how people are disabled because society is designed for people without impairments and health conditions. As this woman makes clear, support programmes which focus on disabled people’s skills individualise societal barriers and those in the workplace.

8.1 Social Security and the Labour Market

The benefits system is the biggest and most important support system to disabled people, ensuring a consistency of income and other financial support when they are in and out of work. The key themes emerging from the focus groups and survey concern the inflexibility of the current social security system as it currently exists and how important it is that when disabled women are ready to work, that employment pays better than being on benefits.

One woman in the Cardiff focus group highlighted that other European social security systems are more flexible, and take account of how people's conditions change over time, and that this has a positive effect on disabled people's working life:

'It could be that with a lot of people that they know can only be employed for a certain amount of time and then they are likely to have to retire or come out of the workplace and yet your value is diminished, if you like, and it would be nice if some of these supposed confident-ticked employees could reflect that. And almost a bit like on the continent whereby if you are ill or disabled or things you work somewhere and it's almost a taken that you will have a certain number of days off a year because you will be too sick and things but that doesn't affect your pay or your pension or anything like that but in this country, for example, if you teach, you're not able to retire early. So even though you've got a health condition where you've been told you cannot work anymore because it's not controlled you can't retire so then you do get...end up in poverty and into this spiral of having to deal with people like the DWP that you don't really want to deal with and you end up your whole life is run by that and it's not healthy, and that's not healthy either. So it would be really nice to say, okay, you've probably got 10 years in you, if

any more that's a bonus, but that's fine, go off and enjoy it, do the best you can so you thrive.' – Cardiff focus group participant

'...there are difficulties sometimes with dealing with the system, whether it means social services, the DWP or anything like that...If you don't fit in with the workplace, if you don't fit into their neat little boxes you may as well forget it.' – Cardiff focus group participant

As with many aspects of working life, which are designed for non-disabled people's life-cycle, the social security system is not sufficiently accommodating of the needs of people whose impairments and health conditions mean that they engage with the labour market for a shorter or more fractured, and equally valuable, period of time.

Another example which highlights issues with both the benefits system and employment schemes, and how they interact in the labour market comes from a focus group participant who is a qualified medical doctor. After several years out of work due to discrimination and an employment tribunal, she was claiming Employment and Support Allowance (ESA) and 'I was put onto one of those get you back into work schemes'. She tried to return to work in the NHS, but the flexible working pattern she was offered was unsuitable. She sent out over 500 job applications for a minimum wage, part-time jobs 'because that's all you're allowed whilst on ESA. But I was overqualified and basically nobody will touch me, I didn't get a single reply to any of those job applications.' In the end, she secured a part-time, minimum wage job in a local coffee shop, having struck up a rapport with the manager. Her experience shows that the sort of work support schemes offered to benefit claimants are ineffective at helping highly qualified, professional women into work, but also highlights that employers need to make adaptations and accommodations that work for disabled women.

8.2 Access to Work

Access to Work is a publicly funded employment support programme across Britain, which aims to help disabled people to start and stay in work.⁹⁹ Through Access to Work, employees and self-employed people can apply for a grant to reimburse support costs. Support can be provided where an employee needs additional help or adaptations for their work, beyond the reasonable adjustments that employers are expected to make under the Equality Act.

If an employee has been working for an organisation for more than 6 weeks, the employer may have to share costs. The amount an employer is expected to pay depends on how many staff are in the organisation. Self-employed people do not have to cost share. The award can be reviewed every time an employee's role changes but it is not possible to appeal against the level of an award. There is, however, a reconsideration policy under which applicants have one opportunity to have their award reconsidered.¹⁰⁰

Two main criticisms of Access to Work emerged from the research. The first was that employers do not know about Access to Work and how it can help them to employ, retain and support employees with disabilities. Secondly, respondents raised concerns about the effectiveness of Access to Work in supporting employees and self-employed people in work since it has been reviewed.

Women identified that employers are not aware of Access to Work, and do not know how to apply for a grant. One woman in a focus group felt that this was a cost-cutting measure:

⁹⁹ UK Government (April 2020), 'Access to Work factsheet for employers', <https://www.gov.uk/government/publications/access-to-work-guide-for-employers/access-to-work-factsheet-for-employers> Accessed 4/3/2020

¹⁰⁰ UK Government, 'Access to Work factsheet for employers'.

‘it’s incredible how many people have never heard of Access to Work but the government like it that way, they don’t want people to know about Access to Work because it costs the government money.’ – Swansea focus group participant

The same proportions of women and men survey respondents (33%) have applied to Access to Work. Most employers (74% of women and 75% of men) have accepted and implemented recommendations made through Access to Work.

Adjustments have largely positive effects when put into place promptly. One female survey respondent explained that ‘the equipment has been priceless as [it] allows me to work.’

Putting in a successful application and being supported through the process was partly dependent on having ‘good’ personnel involved:

‘...this was generally due to being lucky enough to have a good manager. I have also had the reverse experience and have had to follow internal grievance processes in order to gain reasonable adjustments.’ – Woman survey respondent

Employers can also be reluctant to make adjustments because of the potential costs involved without the support of Access to Work:

‘there’s the fear, particularly amongst employers, of cost. And they’re not necessarily aware of Access to Work.’ – Cardiff focus group participant

Other employers' reluctance largely comes from uncertainty and lack of knowledge about Access to Work, and about disability in the workplace:

'My employer has been very slow. They have been unsure of the process and haven't known what they need to do which has slowed everything down. They've asked me to do things in the process that they should have done. And I've had to use a lot of time and energy to get them to move forward. ATW have paid 100% so the issue isn't financial, they just don't know what they're doing or understand that I can't do my job without these adjustments in the same way a wheelchair user couldn't climb steps to get into their office.'

Woman survey respondent

Access to Work is one of the biggest schemes available to support disabled people in work, and there are similar problems with other schemes. Women discussed or described other schemes and types of support, and highlighted similar issues as with Access to Work:

'...there are grants available for companies to use, there are loads of charities with good funding that will actually work with an employer and actually support somebody in a new role for months. So say somebody is profoundly deaf they could have somebody in with them for free who can communicate and help educate other people on how to communicate as part of the training process and they stay with their person until that person can do the job unaided and can communicate effectively. But the take-up of that is not...is just not used, employers aren't interested.'

Swansea focus group participant

While some issues arising from women's discussion of Access to Work have concerned the failure of some employers to engage with the process, other survey respondents were dissatisfied with the Access to Work assessment itself:

'My last AtW assessment was of a poor quality, they did not listen and what was purchased did not meet my needs, so not effective at all.' – Woman survey respondent

'Access to Work was absolutely useless. They would not listen to my job role, did not offer any suitable adjustments and were unhelpful and stressful to deal with. I cannot stress enough how incompetent and unhelpful they were on both occasions that I tried asking for assistance. I ended up having to get into debt to pay for the adjustments myself otherwise I wouldn't have been able to work.' – Woman survey respondent

'The scheme has done down the toilet' – Cardiff focus group participant

‘I was incredibly lucky that Access to Work covered the wheelchair I’ve got. I know if I work in the future they will not. They don’t anymore. And even if they did contribute, let’s say I could work 2 days a week, they might give me 2/7th of the cost of a wheelchair. But then it becomes my employer’s property, even though I paid for 5/7ths...and then you are not supposed to use it out of work.’ –
Wrexham focus group participant

Adjustments and support such as Access to Work are indispensable to disabled staff and enable them to work effectively. However, employers are not able to maximise the value from this programme because of a lack of knowledge and understanding about both managing disability at work and about using Access to Work effectively. Disabled women tell us that there are more fundamental issues with Access to Work that lessen its effectiveness in helping more disabled people to start and remain in work.

8.3 Disability Confident

The Disability Confident scheme is a UK government scheme designed to encourage employers to recruit and retain disabled people. For an organisation to become ‘Disability Confident: Committed’, an applicant organisation has to indicate their commitment to;

1. Ensure your recruitment process is inclusive and accessible
2. Communicate and promote vacancies
3. Offer an interview to disabled people
4. Anticipate and provide reasonable adjustments as required
5. Support any existing employee who acquires a disability or long-term health condition to stay in work

Level 1 of the Disability Confident scheme also requires an organisation to commit to at least one action, such as offering work experience, job shadowing, internships, and paid employment. UK Government's most recent figures suggest that over 1,000 employers in Wales are signed up to the Disability Confident scheme.¹⁰¹

Most survey respondents' employers are disability confident. 58% of women and 57% of men survey responders in employment said their employer is disability friendly or confident. When applying for jobs, close to half of women respondents (46%) look for disability confident or disability friendly employers when they are job-searching, compared to 27% of men.

The Disability Confident scheme came in for criticism from focus group participants. One participant in Cardiff was critical of the first level of the scheme – Disability Confident Committed – and perceived it as a 'box ticking' exercise:

'That will then allow you to then say that on [recruitment material] when people are going to apply for jobs. It doesn't mean that you've got any resources in place.' – Cardiff focus group participant

Other focus group participants in the Cardiff group agreed with this participant's comments that 'as far as we aware, that system doesn't work and it's not good enough.'

8.3 Work Placements and Internships

Another key form of support that disabled women talked about are placements and internships. These can provide valuable experience for disabled people if they are well implemented and supported.

¹⁰¹ UK Government, 'Disability Confident Employers that have signed up', <https://www.gov.uk/government/publications/disability-confident-employers-that-have-signed-up> Accessed 15/04/2020

One scheme research participants described is similar to Change 100 run by Leonard Cheshire, a UK charity which supports individuals 'to live, learn and work as independently as they choose'.¹⁰² This is a 3-month, paid, summer internship for 'talented students and graduates' which 'aims to remove barriers experienced by disabled people in the workplace, to allow them to achieve their potential.'¹⁰³ Successful students and graduates who apply to the scheme are placed with an employer who receives support and training to make their workplace accessible and inclusive. The student is supported to understand their impairment and health condition further in the context of work. In 2018/19, Leonard Cheshire placed 141 interns with 70 employers. In the first five years of the scheme which began in 2013, more than 400 interns have been placed with 131 employers. The majority of interns on this scheme are female. The ratio of male to female interns is 38:59. 32% of all interns come from a BAME background.¹⁰⁴

This scheme appears to be successful in terms of the number of internships offered and conversion rates to permanent employment. Testimonials suggest that a number of interns have secured permanent work in the organisation in which they did their internship, or with another organisation, after completing their internship. However, the scheme is limited to current students and not to disabled people in the general population. Focus group participants highlighted that similar schemes are offered by individual organisations, such as the Welsh Assembly and the BBC, but these are not all necessarily targeted at young people with disabilities. As Section 4 detailed, most placements are not exclusively designed for disabled people, and are aimed at people most removed from the labour market.

There is scope to introduce similar schemes for disabled women who are not students. However, to effectively support disabled women (back) into work, programme co-ordinators need to listen to disabled women. For example, focus

¹⁰² Leonard Cheshire, 'Internships for students and graduates' <https://www.leonardcheshire.org/what-we-do/working/employment-support-and-internships/internships-students-and-graduates> Accessed 05/03/2020

¹⁰³ Leonard Cheshire, 'Internships for students and graduates'.

¹⁰⁴ Leonard Cheshire (2019) 'Change 100. Five Years of Impact', p9 <https://www.leonardcheshire.org/sites/default/files/2019-04/C100%20Impact%20Report%20DIGITAL%2001-04-19.pdf> Accessed 05/03/2020

group participants highlighted how fixed-term schemes and placements can cause difficulties for women who receive social security benefits. The short-term duration of the placements can disrupt women's financial situation in the medium term.

'when you are, for example, single, living on your own, and stuck in the horrible benefits system, you can't afford to take the risk, having three months where it may or may not work out.

Participant 2: That's where the flexibility isn't there with the benefits system.

Participant 3: It's almost like you need to ring-fence your situation and say, okay, you can try it but there will be absolutely no disadvantage to you if you ring up and say it's not working out for these reasons but there's not the flexibility to do that, there's no ring fencing.' – Cardiff focus group participants

The issue is not necessarily with the schemes themselves, but rather how the schemes interact with other barriers that disabled women face, in this case, in navigating benefits.

This section has illustrated disabled women's experiences with different forms of support. It has highlighted where support is meeting the needs of disabled women and where changes need to happen. There is a paucity of support for highly qualified, trained women who have had periods out of work – very few of the programmes discussed in Section 4 were mentioned by our research participants, for example. Fixed term placements will be ineffective if the welfare system is not flexible enough to allow disabled women to seize those opportunities. Moreover, as the research has shown, disabled women need employers to make diverse roles flexible, accessible and inclusive. Programmes like Access to Work and Disability Confident require revision to support employers to achieve that and hire more

disabled women. Disabled women have expert experience in what works and have to be at the centre of policymaking and decision-making.

9. Conclusion and Recommendations

This section summarises the report's findings and further amplifies the voices of disabled women in calling for employment to be fully accessible and inclusive to all women with impairments and long-term health conditions. Our own recommendations, based on the data drawn from the online survey and the focus groups and the literature review, are outlined at the end of this section.

Disabled women make important contributions to the economy in Wales, but are being held back and excluded – inadvertently and purposely – by inaccessible employment. This has two effects; women are prevented from achieving their potential and pursuing their own career aspirations, and Welsh business and the Welsh economy misses out on the benefit of these women's qualifications, training, skills, and experience.

The Social Model of Disability helps us understand that attitudinal, institutional, communication and environmental barriers are disabling, and it is therefore possible to imagine a future where all women with impairments and long-term health conditions who wish to work will be able to do some kind of paid employment. For those, like the Welsh and UK governments who wish to increase the number of disabled people at work, there is an imperative to eradicate these barriers in workplaces and in society. The research has highlighted how some health conditions and impairments are highly variable, and can worsen requiring women to leave the labour market. Not all disabled women will always be able to engage in paid employment. Whether this is life-long or temporary, it is essential that these women are financially supported through the welfare system without conditionality and without the threat of sanction.

Women with impairments and health conditions face distinct and greater barriers to employment than women without. They have higher economic inactivity rates than both non-disabled women and disabled and non-disabled men. Proportionately more disabled women are self-employed than non-disabled women, but far fewer than

disabled and non-disabled men. This suggests that women in general face more barriers in setting up their own business, and including a limited security.

Underpinning disabled women's experiences are negative, exclusive and discriminatory attitudes about disability. The range of discriminatory comments and behaviours which women participants have personally experienced when applying for or in work, as well as in their everyday life testify to this. In the current climate, this has been exacerbated by vilification, fueled by some sections of the media, of 'welfare scroungers', which impacts on disabled people in Wales.

Programmes to increase economic activity in Wales are often not tailored towards disabled women. The research has shown how training and upskilling alone are ineffective when disabled women are coming up against barriers from employers. Disabled women cannot always pursue, for example, paid temporary employment placements because this can disrupt the benefits that provide financial security, and ultimately leave women in a worse off. The inflexibility of the welfare system came in for criticism by women with extensive experience of navigating the system.

Disabled women and women with health conditions must be at the centre of efforts to remove barriers, eliminate discrimination and entrench equality. Ideally, this should be accomplished through genuine co-production with women themselves. The 'Gender Equality Review'¹⁰⁵ includes a number of recommendations to improve how equality is considered in all of Welsh Government's work. This includes moving to an evidence-based, mainstreaming model of policy development, and beyond merely assessing impact. The recommended approach is more reflexive and encourages a constant check-back against questions of equality and wellbeing based on the evidence collected. Crucially, this approach involves active, project-based collaborations between policy-makers, academics, equality organisations and 'experts by experience', whose insights are invaluable when considering the potential impact of policy ideas and whether decisions are likely to tackle historical inequalities.

¹⁰⁵ Davies and Furlong, 'Deeds not Words' <https://chwaraeteg.com/wp-content/uploads/2019/09/Deeds-Not-Word-full-report.pdf> Accessed 14/04/2020

This approach is not only relevant for government, but could be adopted more widely. Action is needed across business, governments, trades unions, and society, and – echoing other organisations findings – our research strongly indicates that employers have a central role in increasing the number of disabled women in work.¹⁰⁶ The women at the heart of this research have explained what they need employers to do – those in positions of power need to reach out to and listen to disabled women, and implement the changes that are needed to break down the barriers.

9.1 Recommendations

9.1.1 For Businesses and Employers:

1. Commit to improve the working experience for disabled employees and to hire more disabled people. Employers should aim beyond legal minimum and for best practice. Make full use of existing employer schemes to improve the working experience of disabled people and demonstrate commitment:
 - a. Engage meaningfully and genuinely with Disability Confident and work towards Level 2 (Disability Confident) and 3 (Disability Confident Leader).
 - b. Use resources from Business Wales to support disabled employees, in particular, the ‘Good Practice Guidance Toolkit’ from Disability Wales.
2. Collect and publish equality and diversity data to ensure transparency and inform action to address inequality:
 - a. Collect data on disability and gender to monitor recruitment and retention rates.
 - b. Calculate and publish the organisations disability pay gap and work to reduce that gap.

¹⁰⁶ For example, Citizens Advice, April 2017, ‘Halving the Disability Employment Gap’, p4 <https://www.citizensadvice.org.uk/Global/CitizensAdvice/Families%20Publications/Halvingthedisabilityemploymentgap.pdf> Accessed 15/03/2020

3. Review and revise recruitment processes at all stages (Job Specification, Application, Testing, Interview) to ensure that the process is inclusive and accessible. This might include:
 - a. Appoint an independent person within the organisation with whom applicants can discuss their accessibility needs and make requests.
 - b. Ask disabled candidates what adjustments they need.
 - c. Provide information to candidates about accessing and navigating the building.
 - d. Assess inclusiveness of Job Descriptions and Person Specifications.
 - e. Staff involved in recruitment should regularly participate in equality and diversity training.
4. Improve compulsory Equality and Diversity, and Unconscious bias training and education for all staff. This should be co-produced and led by employees with disabilities and health conditions, and/or by a reputable training organisation. Steps should be taken to ensure that this does not overburden disabled staff or impede their own career progression.
5. Ensure that workplace policies are robust, consistently applied and actively promoted to staff by:
 - a. Investigating and implementing best practice across the organisation
 - b. Reviewing internal and government policies, and legislation to understand and communicate regulations to staff at all levels.
 - c. Carrying out equality impact assessments of new and existing policies.
 - d. Offering flexible working to all employees, and especially to disabled employees and those with health conditions.
6. Support disabled employees effectively by:
 - a. Making reasonable adjustments for employees, and making full use of Access to Work promptly.
 - b. Using existing employer schemes such as Access to Work
 - c. Guaranteeing disabled employees and those with health conditions their right to time off for matters relating to their impairment or health condition, including appointments.
 - d. Working with disabled employees to make the workplace and working practices accessible and inclusive to disabled employees and those with health conditions.

9.1.2 For UK Government

7. Carry out a wholesale review of Access to Work urgently to ensure it is fit for purpose to effectively support employees and self-employed people.
8. Implement a continuous and consistent review of Disability Confident to ensure it is delivering on its aims. Level 1 should be revisited to require more ambitious commitments from employers which are robustly assessed.
9. Enable disabled people to take advantage of work placements as part of a more flexible social security system. It should also account for the fluctuations in individuals' impairments and health conditions. Regulations should be changed so that disabled self-employed individuals can claim sick pay and have a secure income.
10. Meaningfully consult disabled claimants on Universal Credits rollout in Wales to ensure conditions are reasonable, and based on individuals' own assessment of their capacity and abilities. Information given to claimants must be clear and accessible to empower them on their rights and entitlements. UK Government should urgently scrap the use of sanctions with disabled claimants.

9.1.3 For Welsh Government

11. Take forward recommendations made in the Gender Equality Review to adopt an equalities mainstreaming approach.
 - a. Move to an evidence-based, equalities mainstreaming policy model.
 - b. Co-produce policies and programmes by involving the voices of diverse groups with lived expert experience at all stages.
12. Lead by example and improve diversity within the workforce and public representatives.
13. Review and extend the new childcare offer to ensure it will deliver for disabled women and women with health conditions who have caring responsibilities.
14. Urgently develop a plan to ensure an adequate supply of qualified BSL teachers to ensure consistency across Wales for all D/deaf children. Steps

should be taken to integrate BSL on the curriculum in Welsh and English medium schools.

15. Extend and reinforce commitment to equality and diversity through procurement and other spending powers, and place requirements on businesses who are recipients of Welsh Government funding and purchases.
16. Devise a scheme of targeted and specialist support for disabled women which supports career progression and those returning to work.
17. Ensure that support for businesses and self-employed disabled women – directly, and through Business Wales and Development Bank of Wales – is accessible to disabled women and meets their needs.
18. Initiate a campaign, targeting business, to nurture positive attitudes towards disabled people and people with health conditions as employees and in general.