DELNI Economic Inactivity Strategy: Literature Review Project

FINAL REPORT
to the
Department for Employment and Learning Northern Ireland

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Executive Summary

This report presents the results of the research project titled: DEL Economic Inactivity Strategy: Literature Review Project. It was commissioned by the Department for Employment and Learning Northern Ireland and carried out by the Employment Research Institute of Edinburgh Napier University.

The overarching aim of the research is to: provide a detailed understanding of how multiple cross-cutting issues prevent the economically inactive from seeking work, in order to better inform the Departmental Strategy on reducing economic inactivity. Specifically, the review considers two groups: those with family commitments; and the long-term sick and disabled.

The literature review summarises primarily academic findings around the multiple and cross-cutting barriers to employment for the long-term sick and those with family responsibilities. For those with family commitments, it seeks to identify the characteristics of those least able to work: what kind of dependents they are caring for; what this entails in practical terms; and how this impacts their ability to work. The report also seeks to identify best practices in policy interventions aimed at helping these groups into the labour market.

Both disabled people and those with caring responsibilities face significant inequalities together with high economic inactivity rates. The barriers to employment facing disabled people and those with caring responsibilities are on the face of it very different, because it is a different life circumstance that is creating this barrier for them. It must also be remembered that there are great differences within each of these groups and so policies, and their implementation, need to be targeted very precisely to particular sub-sections of each group. While most policy responses will target each separately, there are a number of similarities in what the literature suggests are the main barriers to employment and the general principles of policy responses:

Qualifications and skills. Lack of qualifications and skills is a crucial barrier to employment among those two groups of clients. Three quarters of disable people with tertiary level of educational qualifications are in employment compared to a one third disabled people without qualifications in employment. However, the issue of those disabled people leaving compulsory education with low qualifications needs to be tackled as this group may be distinct from those with qualifications and a career who become disabled later in life. Among those with caring responsibilities, the evidence suggests that again those with no qualifications find it particularly difficult to enter the active labour force. Care responsibilities (especially early motherhood) and disability impede the individual from gaining qualifications. More support is needed to enable these groups to undertake qualifications, but it might also be a case of tackling this at an earlier stage than after they become unemployed adults.

Employer attitudes. Both groups potentially face discrimination from employers, who may perceive their additional needs as too great a burden, and anti-discrimination legislation does not necessarily overcome this. There is a need to increase awareness and understanding of legislation, but also respond to employers’ concerns about the cost of compliance, and offer support for adjustments to
working hours or premises. In addition to public bodies raising awareness, employer or employer organisation initiatives to convince others to take on more people can help raise awareness, although their success is not often evaluated rigorously.

**Personal attitudes and efficacy.** These are linked to employer and wider societal attitudes. Some clients may not necessarily have the belief that they can find and sustain employment. They may perceive the obstacle created by their disability or caring responsibilities is too great. They may also perceive that there is a lack of suitable jobs and responsive employers.

**Financial incentives.** These appear to be effective particularly for those already contemplating employment. This may suggest in some cases that low pay for the jobs that people can enter is an issue limits their ability to take up employment.

**Lack of policy integration, joined up thinking in service provision.** Health professionals and childcare providers do not necessarily have employment in mind when delivering services, but they potentially have a role to play in increasing it. Similarly, employment services workers often do not understand the whole scope of the caring responsibilities of their clients, and may not be sufficiently equipped with specialist knowledge to understand fully the specific problems that face their clients with disabilities. Hence it is important that policies have clear specific objectives that embrace both employability support and specialise support for those with caring responsibilities or with disabilities. Targeted initiatives with clear outcomes may be appropriate, with key workers who can flexibly help in meeting client needs (directly or through working with other bodies). In addition, better communication between specialist support services (for caring and/or disabilities) and employability service providers might improve efficiency and effectiveness.

**The biggest effects are sometimes at the margin.** There is a balance between the levels of support for those closest to the labour market anyway, who need the least intervention but are most likely to move into the labour market, and levels of support for those farthest from the labour market. Decisions need to be taken on where to set the balance.

**Sustainability of employment.** The kind of jobs that these two client groups often end up in – specially created jobs for the disabled, or ‘flexible’ low-paid work for those trying to reconcile work and care – may not necessarily have a sustainable impact on future employment prospects, as they tend to be low skilled and with limited progression. Clients may end up back in inactivity, or requiring a great deal of in-work support.

Evaluation of the efficiency of employment services for those two groups should focus more on the sustainability of jobs as well as job entry (as has happened in, for instance, the Work Programme). This requires monitoring of those clients who started to work and supporting them further in addressing the problems they face as the result of the intersection of their specific needs (caring responsibilities/disability) and their employment.

**Policy lessons.** The policy evaluation literature has suggested aspects of initiatives to get the disabled and those with care responsibilities into work that have enjoyed some limited success (some of the points relate to both groups). Of course the specific local circumstances and contexts of
initiatives and their delivery etc. are fundamental to their success, but the literature suggests some general principles around successful initiatives.

What appears to effective for supporting disabled people:
- a focus on workplaces; making them more aware of legislation but also more knowledgeable about what adjustments disabled people actually need, and what support might be available to them to make adjustments;
- improving awareness about the programmes, and coverage and uptake of programmes aimed at supporting disabled people into employment, including expanding beyond those most work-ready and tackling the harder to reach;
- increasing the employability of disabled people through equipping them with better qualifications and skills;
- an integrated approach to each of the policy elements, including health support, skills development, job placement and support after employment.

What appears to effective for supporting those with care responsibilities:
- the importance of integrating childcare (or other care) with employability support;
- effective partnership working between agencies and with employers;
- there is a need for more childcare that is affordable even to those on the lowest incomes;
- affordable transport that facilitates the journeys between home, work and childcare providers;
- holistic support that recognises and responds to the needs of the individual, and is delivered by a well-trained and sympathetic advisor;
- policy stability that ensure longer term funding, as start-up costs are often large and effectiveness in achieving outcomes can be low in the early stages of a new policy.
1. Introduction

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The overarching aim of the research is to provide the Department of Employment and Learning with a detailed understanding of how multiple cross-cutting issues prevent the economically inactive from seeking work, in order to better inform the Departmental Strategy on reducing economic inactivity. Specifically, the review considers two groups: those with family commitments; and the long-term sick and disabled.

The literature review summarises primarily academic findings around the multiple and cross-cutting barriers to employment for the long-term sick and those with family responsibilities. For those with family commitments, it seeks to identify the characteristics of those least able to work: what kind of dependents they are caring for; what this entails in practical terms; and how this impacts their ability to work. The report also seeks to identify best practices in policy interventions aimed at helping these groups into the labour market.

Caring responsibilities are just one of a number of barriers to employment for those who are inactive mainly due to caring responsibilities or disability. Therefore, it is important to consider the additional barriers to employment that they face, such as lack of qualifications and skills, lack of confidence, personal problems such as alcohol or drug addiction, lack of motivation, together with labour demand factors including the attitudes and flexibility of employers and the spatial mismatch of employment opportunities. So how such factors interact with caring responsibilities or disability is important. The review encompasses not just the barriers to seeking work, but also, within the time available, literature on the national and international evidence on policies that have been applied to help tackle these issues.

1.1. Search methods and sources

The main methods used are through desk research review of the academic literature, together with analysis of related statistical information within a context of the Northern Ireland labour market. The literature was taken from a number of sources, especially the academic literature. Focused search terms identified relevant literature across a range of on-line databases available through Edinburgh Napier University, including for instance, ABI/INFORM Global, Expanded academic ASAP, Ingenta Connect, ScienceDirect (Elsevier) and journal publishers. This search was informed, but not limited, by the factors that have been identified as important in the analysis of contextual statistical material in Chapter 2.
The quality and rigor of peer-reviewed research makes it a reliable source on which to make evidence based policy, although care also needs to be taken of its limitations. However, useful contributions to this subject are not confined to peer reviewed journals and policy research documents.

Other sources of literature included: advocacy organisations that work on behalf of groups facing barriers to employment; organisations such as the Joseph Rowntree Foundation, who commission research in this area; and supranational bodies such as the European Union and Organisation for Economic Co-operation and Development, which commission relevant research on the European economy, labour market and economic inactivity.

1.2. Outline of the report

The remainder of this report is made up of four chapters:

- Chapter 2 provides some background on the labour market context in Northern Ireland;
- Chapter 3 reviews the literature on those with caring responsibilities and inactivity, and the policies aimed at activating this group;
- Chapter 4 carries out a similar review of the literature for disability and inactivity;
- Chapter 5 provides a brief summary and discussion.

The subsequent appendix provides more detailed information about some of the literature and policies discussed in the report.

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1. For instance, quantitative academic literature often focuses on the statistical significance of results rather than on the importance of impacts, such as the scale and relative numbers affected, which may be of interest to policy making (see for instance, Ziliak and McCloskey 2008).

2. For example, the UK Department for Work and Pensions has an extensive series of research reports: http://research.dwp.gov.uk/asd/asd5/rrs-index.asp.
2. Context

This section provides some statistical background on economic inactivity in Northern Ireland (NI). The statistical information relates primarily to the economically inactive, and particularly to benefit recipients and households with dependents. This purpose of this information is to set the context and inform the literature review, and to act as a bridge between the literature, which draws on work from the UK and other relevant jurisdictions, and the phenomenon of economic inactivity as it operates in Northern Ireland.

The Labour Force Survey (LFS) was the principal data source used to analyse employment and economic inactivity patterns within different subgroups of the population in NI, in particular for people with caring responsibilities and those who have long-term illnesses/disabilities. To correct sampling errors and represent the entire population we used a sampling weight for the LFS, although care should be taken when considering small groups in the population, due to small sample sizes and sampling error. Other data sources included: the 2011 Census, the NI Claimant Count, NI Quarterly Employment Survey and the Annual Survey of Hours and Earnings and Department for Social Development (DSD), NI Benefits Statistics Summary.

Unless otherwise stated the figures relate to the Working Age population (16-64 years old for men and 16-59, for women). In the Census, the population 16+ was used, as the data for the working age population is not yet available.

2.1 Population in Northern Ireland

According to the 2011 Population Census in NI, the population of NI is at present 1,810,863. 98% of those who are 16 and over live in households. 53% live as a couple (47% are married couples) and the rest live alone (although a small percentage among the latter category, 4%, is still legally married or in a registered partnership). Data for the working age population is not yet available (Figure 2.1).

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3 The 2011 Census provides background information on the NI population, such as its gender structures, household composition by type of families, general population health and disability.

4 Published data from http://www.detini.gov.uk/deti-stats-index/stats-surveys/stats-claimant-count.htm


6 Published data http://data.gov.uk/dataset/annual_survey_of_hours_and_earnings_northern_ireland

7 http://www.dsdni.gov.uk/index/stats_and_research/benefit_publications.htm

8 This is the pension age in NI for he most of the considered, period, i.e. 2001/2006-2012. Currently in UK, for men born before 6 December 1953, the current State Pension age is 65. For women born after 5 April 1950 but before 6 December 1953, their State Pension age is between 60 and 65. Under the Pensions Act (Northern Ireland) from 2012 women’s State Pension age will increase to 65 between April 2016 and November 2018. From December 2018 the State Pension age for both men and women will start to increase to reach 66 by October 2020.

2.1.1. Changing population composition

Table 2.1 summarises changes between 2006 and 2012 in the composition of the population of NI according to age, gender, disability, marital status and dependent children, using LFS data\textsuperscript{10}. During this period there was a slight decrease in the size of younger age groups (25 and under), both in absolute numbers and proportions, and a correspondent increase in the older age groups (50 and older). Some 18.85\% have a self-reported disability (a slight increase from 18.41\% in 2006). There was a 1.5\% point increase in the share of single (never married) individuals in the population and almost a 3\% point decrease in the share of those who were married (or living in a civil partnership) (see Table 2.1 for the NI/GB comparison).

Between 2006 and 2012 the number of married/co-habiting couples with dependent children decreased from 43\% to 37\%; at the same time there was a 1.3\% increase (from 8\% to 9\%) in the share of lone parents (some of this change may be due to increased separation of couples or some sampling errors). The numbers without dependants rose slightly from 49\% to 50\%. The Labour Force Survey data show that overall, there was a one percentage point decrease in the share of population of children under 16 (compared with a 0.6\% point decrease in GB, while the share of the older age (59+ for female and 65+ for male) dependent population increased from 15.7\% to 17.0\% during this period (the rate of increase in GB was the same, 1.3\% points - see Table 2.1 for the NI/GB comparison). The young age dependency rates\textsuperscript{11} figures show that there was a 1.23\% point decrease in the rates of the young dependency (from 35.7\% to 34.5\%), however, the share of households with old age dependents increased from 25.3\% to 27.4\% during this period. For a comparison, in GB the

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\textsuperscript{10} 2006-2012 is the period used for statistics below and covers the period just before the start of the recession (2008) to the latest data available at the time of writing this report.

\textsuperscript{11} Estimated as a proportion of population below 16 out of the working age population.
decrease in the youth dependency during the same period was from 30.8% to 30.2%, while the increase in the old age dependency rate was from 29.2% to 32.0%.

The Census data show that the total number of households with young dependents was around half, while the number with older dependents was around a quarter. Those receiving Disability Living Allowance (DLA) made up 9% of the working age population (10.5% of the total population, i.e. including those over State Pension Age). Those receiving Disability Living Allowance (DLA) made up 9% of the working age population (10.5% of the total population, i.e. including those over State Pension Age). This figure is twice as high for NI as for the rest of GB, where the DLA recipients made up less than 5% of the working age population during the same period.

According to The Poverty Site (http://www.poverty.org.uk/i15a/index.shtml), part of the explanation for higher DLA recipiency rates in Northern Ireland lies in its worse levels of ill-health. For example, in 2001, 17% of the working-age population described themselves as suffering from a limiting long-standing illness, compared with 14% for Great Britain. Across the regions in Great Britain, there was a link in 2001 between self-reported limiting long-standing illness and DLA recipiency (ranging from 18% and 6% respectively for Wales, to 10% and 2.5% respectively for the South East of England). Northern Ireland, though, does not fully fit this pattern, having a higher rate of DLA recipiency than any UK region but a rate of limiting long-standing illness that is lower than both Wales and the North East of England. The rate of limiting long-standing illness depends in part on the age distribution of the population. Since Northern Ireland has a young population, its age-standardised rate of limiting long-standing illness is on a par with that in Wales, which itself has the highest age-standardised rate of any Great Britain region. Standardising for age, however, does not affect the ratio between DLA recipiency and limiting long-standing illness, which therefore remains high for Northern Ireland. Other research (e.g. Rosato and O’Reilly 2006; O’Reilly and Stevenson 2004) confirms the impression that receipt of DLA in Northern Ireland is high relative to the levels of mortality and limiting long-standing illness. One possible explanation is that, because of the Troubles, the nature of 'limiting long-standing illness' is more severe in Northern Ireland while another is that social and institutional factors mean that a higher proportion of those who would qualify for DLA actually claim the benefit in Northern Ireland (Ibid).
## Table 2.1: Summary of changes in the NI population between 2006 and 2012

<table>
<thead>
<tr>
<th></th>
<th>Percentage of total population of NI</th>
<th>Percentage of total population of GB</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Q1 2006</td>
<td>Q2 2012</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>51.50%</td>
<td>51.70%</td>
</tr>
<tr>
<td>Female</td>
<td>48.50%</td>
<td>48.30%</td>
</tr>
<tr>
<td><strong>Disability</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disabled</td>
<td>18.41%</td>
<td>18.3%</td>
</tr>
<tr>
<td>Not disabled</td>
<td>81.59%</td>
<td>81.7%</td>
</tr>
<tr>
<td><strong>DLA recipients (%total)</strong></td>
<td>10.3%</td>
<td>10.5%</td>
</tr>
<tr>
<td><strong>DLA recipients (% working age)</strong></td>
<td>9.0%</td>
<td>9.0%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16-17</td>
<td>4.9%</td>
<td>4.4%</td>
</tr>
<tr>
<td>18-24</td>
<td>16.4%</td>
<td>15.6%</td>
</tr>
<tr>
<td>25-49</td>
<td>56.3%</td>
<td>56.3%</td>
</tr>
<tr>
<td>50-64</td>
<td>22.4%</td>
<td>23.7%</td>
</tr>
<tr>
<td><strong>Dependent children</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married/co-habiting dependent children</td>
<td>42.94%</td>
<td>40.1%</td>
</tr>
<tr>
<td>Lone parent dependent children</td>
<td>7.90%</td>
<td>9.3%</td>
</tr>
<tr>
<td>No dependents</td>
<td>49.16%</td>
<td>50.05%</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single, never married</td>
<td>39.07%</td>
<td>41.48%</td>
</tr>
<tr>
<td>Married, living with husband/wife, civil partner</td>
<td>52.30%</td>
<td>49.40%</td>
</tr>
<tr>
<td>Married, separated from husband/wife, divorced, widowed, separated from civil partner</td>
<td>8.62%</td>
<td>9.13%</td>
</tr>
<tr>
<td><strong>Total dependent</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population under 16 (share in total population)</td>
<td>22.2%</td>
<td>21.3%</td>
</tr>
<tr>
<td>Dependency rate (share of working age population)</td>
<td>35.7%</td>
<td>34.5%</td>
</tr>
<tr>
<td>Population over 59 for female and 64 for male (share in total population)</td>
<td>15.7%</td>
<td>17.0%</td>
</tr>
<tr>
<td>Dependency rate (share of working age population)</td>
<td>25.3%</td>
<td>27.4%</td>
</tr>
</tbody>
</table>

Sources: Quarterly LFS, DSDNI Benefit publications

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2.1.2. Economic employment and unemployment by age and gender in NI (LFS)

According to the LFS\textsuperscript{14}, in the second quarter of 2012 economic activity figures for the working age population\textsuperscript{15} in Northern Ireland were 79% for men and 69.6% for women. For men current economic activity rates were at the same level as in 2006-2007. After a decrease in the levels of economic activity after the last quarter 2008 to the first quarter 2010 (the lowest level of economic activity for men during this period was 75% in the second quarter 2009), the levels of economic activity for the working age male population in NI increased, and stabilised around the level of 78.6%.

For women, the current level of economic activity is among the highest since the first quarter of 2006. Before the recession the levels of female economic activity were 68.5% at the highest point (first quarter 2007), then they decreased and at the lowest point reached 65% (second quarter 2009); the level of working age female economic activity gradually increased since then and reached its highest level 71% in the third quarter 2011, and decreased by 1.5% since.

Among the economically active, employment rates in the second quarter 2012 were 71.2% for men (aged 16-64) and 65.5% for women (aged 17-59). These employment rates were lower than before the recession for both men and women. However, men experienced a sharper decline in the rate of employment between the second quarter 2008 and the second–third quarter 2009 (6.2% decline, from 75.1% to 68.9%), while for women the decline in the level of employment started from the third quarter of 2008 and the employment level dropped by 4% between then and the second quarter 2009. Since the second quarter of 2009 the employment levels for men and women increased at rather similar rates and there were fewer gender differences in the levels of employment than before the recession.

2.1.3. Economic inactivity by age and gender in NI (LFS)

Inactivity rates vary considerably by age. For the prime working age group (25-49 years) men consistently have lower inactivity rates than women (Figure 2.2), but inactivity appears to be falling for both genders in recent years. Among younger people (16-24 years) inactivity appears to be rising, although education influences the figures (as students who are non-employed or seeking work are classified as inactive) and males appear to have higher inactivity rates. For the 50+ year olds, the female rates appear lower (possibly as the age range is 50-59 for women, with early retirement likely to be greater among men aged 60-64 years) but for both males and females inactivity rates appear to be falling slightly over recent years.

\textsuperscript{14} Weighted data
\textsuperscript{15} Working age for men is 16-64, for women 16-59
2.1.4. Comparing between the economic inactivity trends in NI and Great Britain

This section compares trends in employment, unemployment and inactivity in Northern Ireland and the rest of the UK. Figure 2.3 shows the ratio of the rates in NI to those in GB.

Employment rates were very similar over time and between NI and GB (i.e. the ratio is near 1) for males and females who are in the 25-49 year old age group. The spike in inactivity for 25-49 year old males may be due to small sample sizes people stopping looking for work for a short period in NI although we do not have evidence for this latter possibility. For younger (16-24 year olds) males and females the ratio is below one and decreasing over time – i.e. young men and women in NI are more likely to be in employment than in the rest of the UK. For older people (50-65 years) the ratio is below 1 but approaching 1 in recent years (i.e. the rates are above GB but now almost the same as GB). Unemployment among females in NI is consistently lower than in GB for all age groups. For men the rate moves around the GB rate, except for older men where the rate has moved from well below to well above the GB rate. It should also be remembered that employment rates (71.4% in GB and 66.6% in NI in Q1 2012) are considerably larger than inactivity rates (23.9% and 28.9% respectively) and far greater than the unemployment rates (4.6% and 4.5% respectively), then relatively small changes in unemployment rates may change the ratios with NI much greater a comparative percentage point change in employment. Also, for older men this may be due differences in the moves, and their timings, between employment, unemployment and inactivity rates in GB and NI. From Quarter 1 2008 to Q1 2010, for GB men aged 50-64, the inactivity rates remained almost constant, but employment fell and unemployment rose (each by approximately 2% points), while in NI there was little change in unemployment (a 0.3% point rise), but employment rates rose by 1.2% points and inactivity fell by 1.4% points (figures are rounded). Hence the ratio of NI to GB rose for inactivity. However, from Q1 2010 to Q1 2012, all three figures remained fairly stable in GB (no change in employment rates and a small 0.2% point fall in unemployment and 0.1% point rise in inactivity) while in NI employment rose by 2.2% points, unemployment by 2% points and inactivity fell by a large 4.2% points. This may be due to demographic cohort changes with more inactive men leaving the age group with more economically active ‘younger’ men joining it each year, but it should be noted that the total numbers in this age group rose in both GB and NI. In
summary the inactivity rate in GB did not change significantly, but it fell greatly in NI over the period since 2008, suggesting that this is not just a cyclical issue (inactive numbers and rates did rise in NI from 2006-2008 when the economy was actually quite buoyant), but rather may potentially be one of a more structural decrease in NI inactivity towards the GB rate.

Northern Ireland inactivity rates compared to GB appears to be changing for much of the population. There are some decreasing trends in the levels of economic inactivity for the group of older workers, both men and women (since late 2009). For the core 25-49 year old groups, both male and especially female economic inactivity rates appear to be falling compared to the rest of the UK. Indeed female rates appear to be below that of GB. Also for those 50+ ratios have been declining since 2009 (i.e. NI rates have been moving towards GB levels). Care should be taken as there also appears to be some cyclical element and there is the possibility of sampling errors due to the relatively small sample sizes. For younger people (16-24 years) the ratios seems to be relatively horizontal/stable. Overall, women aged 24-49 years appear to be doing relatively well compared to women in GB. However, compared to men, women in both GB and NI have higher inactivity rates, which is unsurprising given that caring responsibilities still fall mainly on women.
Figure 2.3: Age, Gender and Economic activity, NI/GB ratios
2.2. Households with Dependents

2.2.1. Economic activity by dependency status

In 2011 among the lone parent households with dependent children, 91.5% were female lone parents. Although differences in the employment rate between lone male and female parents were not very large (44% and 47% respectively for women and men), there were profound gender differences in the type of employment – only 19 per cent of the female but 43 per cent of the male lone parents had full-time employment (Figure 2.4).

Figure 2.4: Lone parents and employment (2011)

Economic activity and employment rates are highest among the married (or co-habiting) working age population with dependent children (74% in 2012). The employment figures for this group increased by 4 percentage points during 2006-2012. Unemployment rates increased for this group slightly, from 2.1% to 3% over the same period, while the rates of economic inactivity decreased from 27.5% to 23% (Figure 2.5).

Lone parents with dependent children have a much higher level of economic inactivity than the former group. The extent of economic inactivity among lone parents is a subject to significant fluctuations from year to year; for example, it was 50% in 2011 and 40% in 2012 (with an overall decrease from 53% to 40% over the period 2006-2012), although this may be linked to small sample sizes. The share of lone parents with dependent children in employment changed from 45% in 2006 to 52% in 2012. The unemployment rates for this group are the highest (7.5% in 2012, a 2% drop from 2011) (Figure 2.5).
Figure 2.5: Economic activity by dependency status

Figure 2.6 compares the trends in economic activity of women in NI with those in the rest of the UK, according to age and caring responsibilities. Among married (and cohabiting) women with dependent children, for the age group 25-49 the employment rates are similar across the UK. For this age group, levels of economic inactivity also used to be very similar across the UK until the fourth quarter of 2009, however since then inactivity rates increased for NI compared to the rest of the UK. Unemployment used to be lower in NI but there seems to be some trend towards convergence between NI and the rest of the UK.

The trends for younger (16-24) married women with dependent children include higher levels of economic inactivity, and lower levels of both employment and unemployment in Northern Ireland compared to the rest of the UK. For older women from this category, comparative employment rates were slightly lower, while inactivity rates used to be higher in Northern Ireland, however, there is convergence between Northern Ireland and the rest of the UK for this age group (but care is needed due to relatively small sample sizes).

Female lone parents aged 24-49 have rather similar employment rates across the UK, which increased slightly since 2009, with a simultaneous decrease in the levels of economic inactivity. Among younger lone mothers (16-24) since the end of 2009 inactivity has been higher in Northern Ireland, while employment decreased compared to GB. For females without caring responsibilities, employment rates across the UK were very similar for the two younger age groups, but older women (50-64) had a lower employment rates in NI. However, women of any age without caring responsibilities generally have higher economic inactivity rates in Northern Ireland, although for the core 25-49 year olds the inactivity rates fell below GB’s in recent quarters. It is uncertain why this is the case although it may be linked to cultural factors or more limited opportunities in the labour market.
Figure 2.6: Age, Caring responsibilities and Economic activity among women – comparing trends in NI and GB
2.2.2. Pay rates by dependency status

The LFS data also show that when employed, married workers with dependent children tend to have the highest net weekly pay, while lone parents have the lowest. Over the time the weekly wage gap between lone parents with dependent children and other groups of workers has widened, with the exception of the last year (2011) when lone parent wages increased at a higher rate than the wages of other workers (Figure 2.7a). These differences in the weekly pay rates seem to be partly due to lone parents working a lesser number of weekly hours (Figure 2.7b). However, our calculations of per-hour net pay for different categories of workers from the LFS data show that lone parents with dependent children have the lowest pay rates per hour, which is about two thirds of the correspondent pay of married workers with dependent children (Figure 2.7c). From the LFS data it is apparent that the increase in the weekly net wages of lone parents during 2011-2012 is due to an increase in the number of hours of work per week for this population category.

Figure 2.7a: Pay by dependency status

![Weekly net wages from main job by dependency status](image)

Figure 2.7b: Weekly work hours by dependency status

![Weekly work hours by dependency status](image)
Net weekly wages are the highest for married workers with dependent children and are the lowest for lone parents.

Workers without any dependents and married (and cohabiting) workers with dependent children work, in 2012, 5 hours more per week than lone parents on average, with the gap between lone parent and other workers increasing over time.

Lower weekly wages of lone parent do not result, however, only from them working less hours – the consideration of the net per hour pay rates show that on average lone parents are being paid 75% of the pay of other categories of workers.

**Figure 2.7c: Per hour gross pay by dependency status**

![Gross per hour pay by the dependancy status](chart)

**Figure 2.7d: Per hour net pay by dependency status**

![Net per hour pay by the dependency status](chart)
2.3. Disability and Inactivity

2.3.1. Disability and illness

According to the 2011 Census (2011) 14.9% of the population in NI have “fair health” while 4.5% report bad health and 1.2% very bad health. Among the working age population (16-64) 9.6% reported that their day-to-day activities were limited a lot and further 7.4% reported that these activities were limited a little by long-term illness or disability. 31.4% of population reported disabilities/ill health conditions (some reported multiple disabilities). The most commonly reported conditions were mobility/dexterity difficulties (11.4%), long-term pains (10%), respiratory system problems (8.75) and chronic illnesses (6.6%) (Figure 2.8). However, care must be taken as some disability data (especially self-reported) may be unreliable.

Figure 2.8: Population of NI by health condition

Source: Census 2011

Data for the working age population are not available at the time of writing.
2.3.2. Multiple disadvantages: disability/long-term illness and caring responsibilities

13.5% of households in NI have dependent children 0-4 years of age, and a further 20% of households have dependent children aged 5-15. 40% of all households in Northern Ireland have at least one person with a long-term health problem or disability, and 9% of the households have a person with a long-term health problem or disability and dependent children. 35% of all households in NI have no adults in employment and 6% of the household have no adults in employment and dependent children.

Table 2.2 compares economic activity between disabled and non-disabled individuals in different types of household. The Labour Force Survey data show that in 2012 in NI among disabled individuals who were married (or cohabiting) with dependent children, 6.4% were unemployed compared to 2.6% of those without disabilities and married (or cohabiting) (the respective figures for GB are 5.6% and 5.3%). Furthermore, among disabled married (or cohabiting) individuals with dependent children in NI, 39.8% were economically inactive compared with 20.4% of those married (or cohabitating) with dependent children without disabilities (the respective figures for GB are 33.8% and 17.6%). Among lone parents, there is virtually no different in the unemployment rates of those with and without disabilities, but inactivity is higher for disabled lone parents (69.4%) than it is for non-disabled lone parents (46.4%).

<table>
<thead>
<tr>
<th></th>
<th>Married/co-habiting dependent children</th>
<th>Lone parent dependent children</th>
<th>No dependents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Disabled</td>
<td>Not disabled</td>
<td>Total</td>
</tr>
<tr>
<td>Great Britain</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In employment</td>
<td>60.6%</td>
<td>77.0%</td>
<td>74.7%</td>
</tr>
<tr>
<td>ILO unemployed</td>
<td>5.6%</td>
<td>5.3%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Inactive</td>
<td>33.8%</td>
<td>17.6%</td>
<td>19.9%</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In employment</td>
<td>53.8%</td>
<td>77.1%</td>
<td>74.3%</td>
</tr>
<tr>
<td>ILO unemployed</td>
<td>6.4%</td>
<td>2.6%</td>
<td>3.0%</td>
</tr>
<tr>
<td>Inactive</td>
<td>39.8%</td>
<td>20.4%</td>
<td>22.7%</td>
</tr>
</tbody>
</table>
2.3.3. Overall Prevalence of disability

Sources of data on people with disabilities in Northern Ireland, such as the Northern Ireland Survey of Activity Limitation and Disability\textsuperscript{17}, show that, in 2006/07, 18% of all people living in private households in Northern Ireland had some degree of disability (the prevalence rate for adults was 21% and 6% for children). According to the LFS, in the second quarter of 2012, 18.9% (19% and 18.5% for male and female respectively) of the working age population in NI reported some kind of disability. The percentage of people with disabilities is distributed unevenly by age. In 2012 the smallest share of disabled is found among 16-24 year olds (8.3%); this share reaches 16% among 25-49 years old, and is the highest among working age men and women aged 50 or older (35%)\textsuperscript{18}.

2.3.4. Economic activity by disability status

Data from the LFS were used to examine the patterns of economic activity among people with disabilities. The LFS uses the DDA definition of disability, which defines as disabled a person with a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day-to-day activities. Disability is also self-reported in the LFS in response to a question which asks the respondent if they have a work limiting disability or are disabled according to the DDA. Hence the LFS provides data on those classified as: DDA only (a very small group); DAA plus a work limiting disability; having a (self-reported) work limiting disability only; and those with no (work related) disability. Therefore here we both contrast those who have any type of disability as a single group, compared to those without disabilities (see Figure 2.9a-c), but also consider the differences in the patterns of the labour market activities by the type of disability available from the LFS.

There are profound differences in economic activity level and employment rates between people who are disabled and those who do not report any type of disability/long-term health conditions. Figure 2.9a compares the employment rates of those who are disabled and are not disabled. It should be borne in mind that many do not declare themselves as being disabled when they have a disability. Around 80% of working age population without disabilities were employed, while among people with disabilities the employment rate is around half of this at 38.6 per cent.


\textsuperscript{18} Source: Labour Force Survey.
The unemployment rate for those with a disability (Figure 2.9b) was generally similar to that of those without a disability, although it was somewhat more volatile (perhaps due to the effects of a smaller sample size leading to larger sample errors each month). The increase in unemployment might also represent a movement of people from IB/ESA to JSA, in addition to those leaving work.

56.2% of people with disabilities were economically inactive in the second quarter of 2012; however, it is important to note that the proportion of economically inactive disabled people has decreased significantly since the last quarter of 2009, when the corresponding figure was 64.5% (Figure 2.9c). This decrease in the rate of economic inactivity among the disabled was accompanied by a similar increase over the same period of time the in their employment (8.5% increase), but also by a slight increase in unemployment among this group. The reasons for this are unclear and warrant further investigation.
research, but may be related to changing policies (such as Pathways to Work) or application of disability tests.

**Figure 2.9c: Inactivity Rates by Disability in NI 2006-2012**

It is worth unpacking the disabled category to provide some additional insights. Figure 2.10a compares the employment rates of the different sub-categories of disabled. Non-disabled employment rates were fairly constant, falling very slightly over time. The employment rate of DDA only (a very small group) moved slightly more than 10%\(^{19}\); DAA plus those with a work limiting disability rates were overall were fairly constant; having a (self-reported) work limiting disability only showed a fall to 2009 and then rose slightly before slightly falling recently\(^{20}\) (see Figure 2.10a). However, the sample numbers are quite small and some of these work limiting disability people may have moved on to being DDA registered or inactive, so further research is required.

There are large differences between genders (Figure 2.10b), with female DDA registered people much more likely to be inactive than men.

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\(^{19}\) The sample sizes are very small and so some of the movement may be due to sampling issues.

\(^{20}\) Care must be taken as the sample sizes are fairly small.
Sample sizes for the DDA disabled for every quarter are small compared to any other disability status group, therefore results for this group should be interpreted with caution.
2.3.5. Comparing inactivity in NI and the rest of the UK: Age and Disability

In Northern Ireland, people with disabilities have over time lower employment rates and higher inactivity levels than disabled people in GB (Figure 2.11a). The differences in the employment levels and rates of inactivity are especially large for two groups of older workers, 24-49 and 50-64 years old where the ratio of disabled people in NI who are inactive is much greater than in GB. For non-disabled people (Figure 2.11b) there are relatively small differences between NI and GB.

Figure 2.11a: Age, Disability and Economic Activities, Ratios NI/GB - Disabled

Figure 2.11b: Age, Disability and Economic Activities, Ratios NI/GB – Non-disabled
2.3.6. Pay and disability

The LFS data show that on average in 2012 disabled people worked only two hours less weekly than workers without disabilities. However, over the time the number of weekly hours of work among disabled people was a subject to significant fluctuations due to the small sample size and/or possibly the recession leading to shorter hours for disabled people (Figure 2.12). There do not appear to be major differences in pay or pay per hour between disabled and non-disabled workers (Figure 2.13).

![Hours worked by disability](image)

2.3.7. Disability and benefits

In 2012, 200,000 people, about 11% of the population in NI, were Disability Allowance recipients. The Disability Allowance recipient numbers increased steadily over the period of six years, although their proportion in the overall population has changed only slightly (Fig. 2.14a), meaning that the growing numbers of disabled people is in line with general population growing trends. The data from the Labour Force Surveys and the data from the Department for Social Development NI presented in Table 2.1 show that the percentage of disabled people grew on 0.5 per cent between 2006 and 2012, and the percentage of disability living allowance recipients grown on 0.2% over the same period; however if only working age population is considered the proportion of disability living allowance recipients remains stable at 9%.

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Figure 2.13: Pay and disability

Net weekly payment in main job by disability

Gross per hour pay by the disability status

Net per-hour pay by the disability status
In 2012, over three quarter of DLA recipients had received it for over five years, and a further 15% had received it for between two and five years. The proportion of disabled people who were on long-term (5+ years) disability benefits has grown over time, from 69% in 2006, with a correspondent decrease in the share of those who were receiving disability benefits from 2-5 years (Fig. 2.14b).

The type of disability with the largest numbers was ‘other mental health’ (Figure 2.14c) (over 40,000). However, some care should be taken as the physical disabilities are divided into a number of detailed ailments. For instance, arthritis, back ailments and muscles/joint/bone issues are together greater in number than learning difficulties and ‘other mental health’ combined. So ‘primarily’ physical disabilities are extremely important.

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More women than men appear to receive disability living allowance (respective numbers in 2012 were 98,201 and 90,320) (Figure 2.15). However, there are more significant differences in the numbers of the benefit recipients according to age groups. For example, among under 16s in 2012, twice as many males as females were receiving disability benefits. However for the oldest age category, 65 years of age and older, 26,000 males but 32,000 females received disability benefits. Over the years the numbers of disability benefits recipients has remained more or less constant for all age groups except for those 65+. For the latter group, the numbers of disability benefits recipients increased significantly during the six-year period, from 24,486 to 32,360 for women and from 18,590 to 25,020 for men.
The average amount of weekly benefits increased from £64 to £84 between 2006 and 2012, both for men and women (Figure 2.16). A majority of disabled people face problems in more than one area. Around 16% of the adult population have disabilities in more than one area, and over 5% of the adult population have disabilities in five or more areas\(^{24}\).

Between 2010 and 2012 there was a considerable increase in the number of people who were receiving multiple disability benefits – the increase of 20,000 people during these last two years is notable because during the preceding five (2005-2009) years there was no change in the number of multiple disability benefits recipients (Figure 2.17).

\(^{24}\) Source: The Prevalence of Disability and Activity Limitations amongst adults and children living in private households in Northern Ireland: First Report from the Northern Ireland Survey of people with Activity Limitations and Disabilities.
2.3.8. Unpaid care provision

According to the 2011 Census, 19% of the population in NI (17-74 years of age) provide between 1-19 hours of unpaid care per-week, and further 5% on unpaid care from 20 to 50 hours per week.
2.3.9. Carer allowance claimants

Carer’s Allowance (CA) is a non-contributory benefit for people who look after a severely disabled person for at least 35 hours a week, are not gainfully employed and who are not in full-time education. People are eligible for Carers Allowance if they care for someone who is getting one of the following benefits: Attendance Allowance, Disability Living Allowance at the middle or highest rate for personal care, Constant Attendance Allowance at or above the normal maximum rate with an Industrial Injuries Disablement Benefit, or basic (full day) rate with a War Disablement Pension. People cannot get CA if they earn more than £100 a week after National insurance, income tax and pension contributions. Between 2006 and 2012 there was an increase in the total number of those who claim or received Carers Allowance in NI (Figures 2.18a, b). Although the majority of claimants were women, over time the number of male claimants increased at a higher rate than female claimants. Only 75% of all claimants are qualified and in receipt of the allowance. The level of benefits has slightly increased over time and at present the weekly amount on average is £36.50 (Figure 2.18c).

Figure 2.18a: Carer’s Allowance Claimants, 2006-2012

![Carer’s allowance claimants graph]

Figure 2.18b: Carers Allowance Recipients 2006-2012

![Carer’s allowance recipients graph]

Source: DSD benefits summary statistics

2.3.10. Summary of benefits

The total numbers on various benefits are shown in Table 2.3. Job Seekers Allowance numbers rose considerably from 2006-11, while the absolute numbers on other allowances generally did not increase greatly, with small absolute increases in disabled and carer numbers.

Table 2.3: Summary of benefit recipients in NI

<table>
<thead>
<tr>
<th>Date</th>
<th>Job Seeker</th>
<th>Employment and Support Allowance and incapacity benefits</th>
<th>Lone Parent</th>
<th>Carer</th>
<th>Others on income related benefit</th>
<th>Disabled</th>
<th>Bereaved</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>February</td>
<td>27,780</td>
<td>128,420</td>
<td>29,900</td>
<td>26,650</td>
<td>5,820</td>
<td>19,270</td>
<td>3,650</td>
</tr>
<tr>
<td>2007</td>
<td>February</td>
<td>25,120</td>
<td>126,610</td>
<td>29,220</td>
<td>25,480</td>
<td>5,240</td>
<td>19,460</td>
<td>3,450</td>
</tr>
<tr>
<td>2008</td>
<td>February</td>
<td>23,680</td>
<td>126,150</td>
<td>27,890</td>
<td>25,410</td>
<td>4,400</td>
<td>19,570</td>
<td>3,310</td>
</tr>
<tr>
<td>2009</td>
<td>February</td>
<td>41,420</td>
<td>125,260</td>
<td>28,030</td>
<td>25,790</td>
<td>4,490</td>
<td>19,730</td>
<td>3,060</td>
</tr>
<tr>
<td>2010</td>
<td>February</td>
<td>55,000</td>
<td>124,560</td>
<td>26,180</td>
<td>26,770</td>
<td>4,330</td>
<td>20,480</td>
<td>2,830</td>
</tr>
<tr>
<td>2011</td>
<td>February</td>
<td>58,450</td>
<td>124,450</td>
<td>23,420</td>
<td>27,850</td>
<td>4,460</td>
<td>21,210</td>
<td>2,850</td>
</tr>
</tbody>
</table>

Source: DSD benefits summary statistics
3. Literature on those with caring responsibilities and inactivity

Most of the literature refers to mothers as they make up the majority of those with caring responsibilities, although there are increasing numbers of fathers and also of working aged people who are caring for elderly relatives. This chapter firstly examines factors associated with the likelihood of employment for mothers and other carers. It considers the practical, demographic and socioeconomic factors, together with the complex relationship between employment behaviour and attitudes to work. It also considers specifically the barriers to employment for the low-income parents who are particularly key in any economic inactivity strategy. A summary of the key correlates with economic activity is given in Box 3.1.

The chapter then considers and some policy responses to these issues. Tables A2 and A3 in the appendix provide further detail on the source, data, methodology and findings of the literature discussed in this chapter.

3.1. Some barriers to employment for those with caring responsibilities

3.1.1. Mothers and return to work

The statistics presented in chapter 2 show the extent of economic inactivity among those with caring responsibilities. They also suggested that inactivity may vary within this group, for example by marital status. The literature on the labour market participation of mothers in the UK suggests a number of important factors that are associated with the likelihood that she will return to work.

Data from the Millennium Cohort Study\textsuperscript{26} suggests that the probability of a mother returning to work by the time her child is three is positively associated with being employed during pregnancy, especially in a managerial or professional position (Fagan et al. 2012). It is less likely in women who are Pakistani, Bangladeshi or mixed race. Lone mothers, and mothers with a partner who works long hours, are also less likely to be in employment.

Analysis of the Maternity and Paternity Rights and Women Returners Survey\textsuperscript{27} has found that the factors most strongly associated with the return to work are: working in the public sector; working for a larger employer; (longer) duration of job pre-birth; generous maternity pay, particularly occupational provision in addition to the statutory entitlement; being partnered rather than single; and being highly qualified (Chanfreau et al. 2011).

\textsuperscript{26} The Millennium Cohort Survey is a nationally representative survey that follows a cohort of children born around the year 2000 in the UK. The analysis by Fagan et al. (2012) uses data from the first two sweeps of this survey, carried out in 2001-02 and 2003-04. Mothers sampled at both constitute a sample of 14,651.

\textsuperscript{27} The Maternity and Paternity Rights Survey 2009-10 interviewed 2,000 mothers with children aged 12 to 18 months, who had worked before their child’s birth.
3.1.2. Unpaid care and employment

Children are not the only source of care responsibilities; those with responsibilities for infirm or disabled relatives may also find it difficult to work. It is difficult to quantify these effects with national-level survey data, as the sample of carers even in a large survey is likely to be small. Milne et al. (2012) draw on a specific survey of carers, the 2005 Health and Lifestyle Survey, to explore factors correlated with employment. They find that the two key triggers for carers leaving employment are the intensity of the care provided, and the impact of caring on the carer’s own health.

28 The Health and Lifestyle Survey was a survey carried out in Kent. The achieved sample size was 5,800, of whom 1,142 identified themselves as carers.
The 2001 Census revealed that 10% of the population in Northern Ireland supported a family member, friend or neighbour with a health problem, disability or problem related to old age; this proportion providing rises to 22% of both men and women in the 50-59 age bracket (DHSSPS 2009). A quarter of those reporting care responsibilities reported providing 50 or more hours of unpaid care per week (Ibid.), which is likely to make paid employment very difficult. Research carried out in England suggested that providing just 10 hours of care per week is the key threshold at which carers are at risk of leaving employment (NIHR 2011). The impact of caring responsibilities can be seen in the lower activity rates of carers; 64% of male carers were in full-time paid work and 6% were in part-time jobs, and that 35% of female carers were in full-time paid work and a further 25% part-time (DHSSPS 2009). The limited research that exists on informal care as a barrier to work shows a clear negative impact on both participation and pay, although the direction of causality is not clear; economic participation may reduce willingness to care as well as care responsibilities affecting ability to work (Heitmueller and Inglis 2007; Carmichael et al. 2008, 2010).

3.1.3. Attitudes and employment

Whether or not a person with family care responsibilities is in employment depends in part on their own characteristics and personal and financial circumstances, but it also depends on how they feel about returning to work. The relationship between employment attitudes and behaviours is complex and reciprocal. Research using the British Household Panel Study (BHPS)39 by Himmelweit and Sigala (2004) found that decisions are constrained by external circumstances and personal identities, but neither of these are fixed; they adjust to behaviours, and vice versa. Berrington et al. (2008), again using the BHPS, also find evidence of effects flowing in both directions, and that experiences shape attitudes more than the reverse.

The research suggests that attitudes towards employment are also strongly associated with an individual’s characteristics such as age and educational level. The results of Berrington et al. (2008) confirmed that gender attitudes differed systematically by age, education and whether the respondent’s own mother worked. The size of the impact of attitudes may also vary along these dimensions. A cross-national study by Steiber and Haas (2009), using data from the International Social Survey Programme (ISSP)30, finds that attitudes are more strongly associated with outcomes among more educated women. They suggest that this may be because more educated women are more likely to have the resources to exercise their preferences. Indeed, another cross-national study by Doorewaard et al. (2004) finds that the least educated women, and those with financial difficulties, are more likely to state that their orientation to return to work is monetary, whilst older and more highly educated women are more likely to give job-related reasons for wanting to return.

The interaction between employment and attitudes, personal attributes and structural barriers is illustrated in research with lone parents. A survey of 2,779 lone parents in Great Britain (Coleman

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39 The British Household Panel Study (BHPS) is a longitudinal study of members of households in Great Britain that has been carried out every year since 1991, with an initial sample of 5,000 households.
30 Steiber and Haas (2009) use the 2002 module of the ISSP on family and gender roles, with a sample of 1,309 women from 26 countries, who live with a partner and have children.
and Lanceley 2011) explored lone parents’ attitudes towards work. These results suggested that, on the whole, lone parents do wish to work, but that they are only willing to do so if this can be reconciled with their caring responsibilities, and they face considerable barriers to employment. 10% of respondents were in work at the time of the survey, 38% were looking, 41% intend to look in future, and only 9% did not intend to look. Of those not in work, 78% expressed a wish to enter employment at some stage over the next few years. Those not currently looking were more likely to cite a number of barriers to employment, for example to: have a health problem; have more and younger children; have little work experience; hold no formal qualifications; be older lone parents; and not have English as their first language. Respondents cited a range of personal and circumstantial barriers to work; the biggest seemed to be lack of accommodating workplaces, lack of qualifications, and not being any better off in work, in addition to the usual issue of lack of childcare. Although 61% believed that working mothers provide positive role models, 71% believe that it is always better for a parent to look after a child themselves, and those favouring parental care were more likely to be those with less work experience and longer benefit histories, larger families and low qualifications.

Qualitative research has also explored the impact of attitudes to work on employment decisions. Innes and Scott (2003) find that both care of children and paid work are valued – it is not necessarily a case of not wanting to work, although care of children takes priority – but mothers face a dilemma over how they should be reconciled, and considerable practical obstacles in their ability to do so. Collard and Atkinson (2009) interviewed partnered but inactive mothers about their reasons for not wanting to work. Most cited a belief in staying at home with children, and negative views about leaving children with other adults, as the key motivating factor. Few cited partner attitudes or potential loss of benefits as a factor. These findings suggest that policy might be able to encourage some low-income mothers into work with practical support, but a key reason that they do not work is their beliefs about what is right for their children. The importance of policy in taking account of beliefs about parenting is discussed further below.

Finally, it is worth mentioning that it is not just the attitudes of the potential employee towards work that affects whether they enter employment, but also the attitudes of employers towards employing them in a way that is sensitive to their caring responsibilities. A government survey of 1,462 employers found that 95% offered some form of flexible working provision, with part-time hours being the most common of these, although only a slim majority offer flexitime (55%) and only a quarter allow employees to work from home (Hayward et al. 2007). This suggests that workplaces are increasingly receptive to the flexible working practices that those with care responsibilities need, but that access to these is not a given. A survey of 800 carers (Yeandle et al. 2007) found that two thirds reported that their employers were supportive and ‘carer-friendly’, although only about half of those working in the private sector felt that this was the case. A lack of suitably flexible employment has also been cited as a key barrier to employment in research with lone parents (Gingerbread NI 2009). Taking into account potentially negative employer attitudes is therefore part of understanding low activity (and employment retention) rates among those with care responsibilities.
3.1.4. Low-income parents

Low-income parents face considerable practical barriers to taking up employment, or improving their economic situation with more hours or a better paid job. Qualitative research with low-income families (McQuaid et al. 2010; Collard and Atkinson 2009; Innes and Scott 2003) has established a number of such barriers, which are generally multiple and interacting:

- Labour supply; employability is negatively affected by low levels of education and skills, a lack of confidence, and ill health and disability.
- Labour demand; a struggle to find a job at all (the experience of redundancy and high local unemployment are common factors), but also to find a job that is sufficiently flexible to reconcile with care responsibilities, and sufficiently well-paid to offset additional childcare costs and make the balancing act of work and care worthwhile.
- The costs of employment; childcare, transport, and in-work costs such as clothing or uniforms, are difficult to afford on a low wage.

These issues may be particularly salient in the case of single parents, although there is diversity within this group, and not all single parents are low-income. However, they often are, and in addition to the difficulties outlined above, they also experience the specific difficulty of being a lone parent. As the sole carer of their children, the extent to which they are able to work is even more limited by their caring responsibilities. Many are reliant on having a sensitive employer, with whom they can negotiate working hours and patterns compatible with childcare, and the necessary emergency time off (Gingerbread 2012).

Another theme that emerges in exploring the experiences of low-income parents is the problem of management and control of their family’s economic situation. Low-income parents have the fewest resources at their disposal to offset the care obligations that are preventing them from working (Breitkreuz et al. 2010). There is a high level of dependence on informal networks to provide childcare, as formal provision is still unfeasible for those with low, insecure sources of income, despite the increase in state support (Dean and Shah 2002). Particularly problematic are emergency disruptions; organising contingency arrangements is complicated and may require more resources than low-income families have at their disposal, for example the use of a taxi in the event of a car breakdown or public transport failure (Innes and Scott 2003). Reconciliation of work and care is a complex balancing act that even better off families experience difficulty with; for low-income parents, it may be, or appear to be, simply impossible.

In addition to these important barriers to labour market re-entry for economically inactive people with caring responsibilities are a range of factors, such as labour demand, employer practices etc., some of which are discussed in the following section on policies. One important issue is transport and travel to work. In a study of over 12,000 disadvantaged parents in Scotland, McQuaid (2009) found that characteristics associated with being less likely to be willing to travel to work for at least an hour (roundtrip) included: being a women; being out of work; having children under 5; being a lone parent and using formal childcare (as informal childcare may be more flexible); and not being in the professions and associate professions. In terms of location, those in accessible small towns and rural areas were willing to travel more than those in larger urban areas and those in remote rural
areas willing to travel most. McQuaid and Chen (2012), using Labour Force Survey data, found that travel to work times, and hence access to employment opportunities, were considerably influenced by age, having children and the age of the youngest child, occupation, weekly pay, and mode of transport (with public transport being associated with long commutes), although in Northern Ireland there were no significant differences for travel times of part-time female workers compared to most of the rest of the UK.

3.2. Reconciling work and care: policy interventions

This section considers the way in which policy might help overcome the barriers to employment facing those with care responsibilities. Firstly, it considers what the literature says about the deficiencies in current policy and thinking. It then considers the literature that evaluates specific policy initiatives and their impact on employment. The focus is initially and principally on the UK policy context, but lessons from international experience are also considered.

3.2.1. Some issues with existing policy

As well as identifying barriers to employment and training for those with care responsibilities, the literature also makes a number of suggestions, based on its findings, about what government might do to help. This literature (e.g. Milne et al. 2012; Collard and Atkinson 2009; Gingerbread 2012; One Parent Families Scotland 2008; Hinton-Smith 2007) suggests that those with care responsibilities need:

- access to services that relieve some of their responsibilities, i.e. childcare, or social care services and respite in the case of carers;
- information and advice about the support available to them to help reconcile work and care, the financial implications of work or training, and how to find suitable jobs;
- a package of support that is holistic and joined up, addressing totality of support needs (potentially from a number of different sources and agencies) and responsive to individual circumstances;
- employers and education/training providers who make practical changes in their approach to dealing with parents and carers – such as greater flexibility – and underpin these with cultural changes in their attitudes to those with care responsibilities.

Inadequate childcare is often cited in the literature as a barrier to work for parents, and this is a key issue facing mothers in Northern Ireland; not just low-income mothers, but the majority, given the high cost of childcare relative to average wages. Families spend an average of 45% of one parent’s net salary per child (Dennison and Smith 2012); thus, having to pay for childcare for two children effectively negates the financial benefits of having a second earner. Certain groups in particular

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31 The LFS is a quarterly sample survey of households living at private addresses in the United Kingdom collected by the Office for National Statistics with a sample size of around 53,000 households each quarter.
struggle to afford or find childcare. One such group is lone and low-income parents – ironically those most in need of an income – who have been particularly badly hit by recent reductions in childcare subsidies through the tax credit system (Save the Children and Daycare Trust 2011). Families that struggle to find childcare at all include those in rural areas (Rural Childcare Stakeholder Group 2008), and parents with disabled children (Dillenburger and McKerr 2011).

A lack of childcare has also been highlighted as a key barrier to work and training in research by Gingerbread Northern Ireland with lone parents in Northern Ireland (Gingerbread NI 2009), who also note the lack of public transport to get to interviews, work or training (more than half of LP families in Northern Ireland do not have a car). There are issues of availability and affordability in both of these practical barriers. Another key issue flagged in this research is the failure of programmes such as NDLP to achieve sustainability of employment, even where they manage to achieve entry into it. This is attributed to: low pay – especially in part-time jobs in the kind of occupations in which women are concentrated (i.e. the kind of jobs that single parents do) – and lack of training to a level that might secure a better-paid job; inflexible workplaces that cannot accommodate caring responsibilities; a lack of development and ongoing support when in work; and the ‘work-first’ ethos of the NDLP, which prioritises getting into employment over its suitability or sustainability.

The literature exploring the employment motivations of low-income mothers has also put forward explanations for the failure of existing policy to activate large numbers of economically inactive carers. Firstly, it fails to appreciate or take into account the needs of low-income women and their families; it mandates employment activity without supporting it adequately, with services failing to help women into the suitable, secure and sustainable employment that they need to support their family (Grant 2009; Breitkreuz et al. 2010). Secondly, it does not allow for heterogeneity of preferences. The marginal financial benefits of low-wage employment will have little or no impact on the labour market behaviour of a woman who believes that the best thing for their child is to look after them at home, and thus the women that policy is targeting will not respond to it (Rafferty and Wiggan 2011; Bashir et al. 2011; Duncan et al. 2003). Policy needs to be connected with the lived experiences of low-income families.

3.2.2. The policy evaluation literature

There is a range of approaches that attempt to explore or quantify the impact of particular activation policies or policy packages. In particular, initiatives aimed at encouraging lone parents into work have received considerable attention, and researchers have also been interested in the aggregate and individual-level impact of changes to the tax and benefits system (see discussion of this literature below). Not all of the literature adopts a formal evaluation approach of directly measuring the cost and benefit per participant, although some studies do, and they are reviewed here. Some studies look more generally at the changes that have occurred in the target groups, and some explore through qualitative work why policy did or did not have the intended effect on participants. All of these approaches generate useful insights for policymakers, and practitioners who implement the policies, attempting to improve upon existing provision.
The review also considers some of the lessons that policymakers might learn from elsewhere. There is a cross-national comparative literature that examines the association between policies and employment outcomes, whilst trying to control as far as possible for other differences between countries, although some will inevitably remain. There are also policy evaluations and detailed policy case studies from other countries that may provide some ideas even if direct policy transfer is impossible because of institutional differences between countries.

**UK policies aimed at activating lone parents**

This section considers developments in UK policy programmes aimed at activating those with caring responsibilities. It is focused on policies aimed at lone parents, as this is where much of the activation activity has been directed, but some of the policies such as the Working Family Tax Credits affected all low-income families. Details of these policies, and the associated evaluation literature, are given in Table 3.1. More information about this evaluation literature, including data and methodology, is provided in Table A3 in the appendix.

**The New Deal for Lone Parents**

The New Deal for Lone Parents (NDLP) was initially piloted, in eight areas, in 1997. Evaluations of these pilots (Hales et al. 2000, 2000a; Hasluck et al. 2000) suggested that they had a small positive impact on employment outcomes, although the economic returns were calculated to be slightly less than the cost of the prototype. Key lessons from these evaluations included the importance to the lone parent clients of a supportive adviser, and the need to work in a joined up manner with other services. In parallel to the NDLP, the (then) Department of Social Security awarded contracts to voluntary sector organisations to run innovative schemes designed to help lone parents into work, but adopting different strategies to those of the New Deal (Woodfield and Finch 1999). These schemes enjoyed varying degrees of success, but key success factors were found to be: flexible, tailored, holistic services rather than a one-size-fits-all approach; strong organisation; schemes with an element of group or peer support; schemes that made links with other services and employers; help with the skills needed to find work (e.g. CVs, interviews); and the availability of childcare provision whilst participating in the scheme.

The NDLP was rolled out nationally in 1998. The official evaluation suggested that 24% of lone parents participating had found work who would not otherwise have done so (Lessof et al. 2003). Similarly, for exits from Income Support (IS), NDLP was found to increase the rate at which lone parents left the benefit, with participants leaving more quickly on the whole than non-participants (Ibid.). Furthermore, these positive effects were found to constitute a net saving to the Exchequer (Evans et al. 2003). Where the programme failed to have an impact was on lone parents’ perceptions of barriers to employment, which were no different after participation, and on entry to training (Lessof et al. 2003). The evaluation also noted that the observed changes in employment rates of lone parents after the introduction of NDLP were due to a package of improved support to find, and in, work (Evans et al. 2003).
<table>
<thead>
<tr>
<th>Year</th>
<th>Programme</th>
<th>Target group</th>
<th>Programme details</th>
<th>Summary of evaluation</th>
<th>Evaluation literature</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>Working Families Tax Credit</td>
<td>Families with at least one adult in paid employment for at least 16 hours per week, with at least one child under 16 (or 19 if in FT education).</td>
<td>Means tested in-work benefit and support for childcare (up to 70% of costs).</td>
<td>Positive impact on lone parent employment.</td>
<td>Cebulla et al. 2008; Brewer et al. 2006; Gregg et al. 2009</td>
</tr>
<tr>
<td>2005</td>
<td>New Deal Plus for Lone Parents:</td>
<td>Initially lone parents (as with NDLP above), extended to couple parents.</td>
<td>Offered an enhanced NDLP support package, with various extra elements (detailed below).</td>
<td>Additional initiatives enjoyed mixed success.</td>
<td>Brewer et al. 2007, 2009; Hosain and Breen 2007; Griffiths 2011; Ray et al. 2007; Sims et al. 2010; Jenkins 2008; Thomas and Jones 2006</td>
</tr>
</tbody>
</table>

**QWFI**

Mandatory for all lone parents whose youngest child is aged 12 or above, and who have been claiming IS/JSAs for at least 12 months.

Interview that aims to encourage and assist lone parents to address barriers to work and move towards employment.

Too prescriptive; not necessarily useful to have quarterly interviews.

**Action Plans**

ND+FLP participants and those attending mandatory WFs

Compulsory action plan to be completed at each WFI.

Used as an aide memoire for advisers rather than an enforcement tool.
<table>
<thead>
<tr>
<th><strong>Childcare Assist</strong></th>
<th><strong>ND+LP participants</strong></th>
<th><strong>Tasters offer up to one week childcare placement to lone parents who are considering entering employment but are apprehensive about using formal childcare. The aim is to increase the parents’ willingness to use childcare. Allows for the payment of formal childcare during the week immediately before the customer starts work.</strong></th>
<th><strong>Not useful, did not help lone parents to secure suitable, affordable childcare.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Work Search Premium</strong></td>
<td><strong>All lone parents who have been claiming IS/JSA for at least 12 months and participate in the New Deal for Lone Parents (NDLP), and who voluntarily engage in job search activity.</strong></td>
<td><strong>Weekly payment of £20 that is available for up to 6 months.</strong></td>
<td><strong>Useful bonus for those already engaged in this activity anyway.</strong></td>
</tr>
<tr>
<td><strong>In-Work Credit</strong></td>
<td><strong>All lone parents who have been claiming income support (IS) or jobseeker’s allowance (JSA) for at least 12 months, and who stop claiming benefit and move into work of at least 16 hours per week.</strong></td>
<td><strong>Weekly payment of £40 that is available for up to 12 months.</strong></td>
<td><strong>Provided financial leverage for those keen to work but unsure of financial implications.</strong></td>
</tr>
<tr>
<td><strong>In-Work Emergencies Fund</strong></td>
<td><strong>Single parents who have come off benefits and started working at least 16 hours per week.</strong></td>
<td><strong>Fund provides financial help for first 26 weeks of employment, to overcome unexpected financial barriers which might prevent them from remaining in the job.</strong></td>
<td><strong>Helped to smooth the initial stages of employment but could have been more widely deployed.</strong></td>
</tr>
</tbody>
</table>
Over the next decade the implementation of NDLP developed but although other studies have also found a positive and significant impact of NDLP, the estimated size of this impact varies. Dolton et al. (2006) question whether the impact was in fact as large as 24%, putting this figure at 14% after revisiting the original data and methodology. Another point worth noting is that apparent early impacts of the project may have been artificially high; the impact was greatest on the group of lone parents that had been inactive for some time, and had not previously been the target of this sort of activation policy. Thus, the rapid activation of this ‘stock’ of claimants may have constituted a one-off ‘windfall’, with future impact likely to be lower (Dolton and Smith 2011). On the other hand, over time the implementation of the policy may possibly have improved, based on learning and earlier evaluations.

The Department for Social Development Northern Ireland commissioned an evaluation of the impact of NDLP on clients in Northern Ireland (PwC 2002). Although the quantitative aspect yielded an insufficient sample on which to estimate the size of the impact on labour market participation or IS exit, the evaluation, which interviewed both lone parent advisers and lone parents themselves, provided some insights into the successes and deficiencies of the programme. It suggested that – where advisors were committed, empathetic and knowledgeable – lone parents found that engaging with NDLP gave them confidence and helped them to access the training or employment they wanted. However, the programme could only help those already motivated to work, and could not address wider structural barriers to employment for lone parents, such as low wages, a lack of employment and training opportunities, and a lack of affordable childcare.

Three years after the national roll-out of NDLP, the UK Government introduced Work Focused Interviews for lone parents (LPWFIs), which became mandatory on entry to Income Support and at intervals thereafter. The impact of this policy alone was small; for new/repeat lone parent IS claimants, there was no statistically significant effect, while for those with ongoing claims, there was a modest impact of raising IS exits by 1 percentage point at six months, and 2 percentage points after 12 months (Knight and Lissenburgh 2005). The true value of LPWFIs seems to be in their ability to engage lone parents with the (voluntary) NDLP, which is the stronger policy instrument in getting lone parents off IS and into work (Cebulla et al. 2008). The combined impact of LPWFI and NDLP for new/repeat claimants was insignificant for the first year, but then positive starting at two and rising to four percentage points at 18 months (Knight et al. 2006). For lone parents with ongoing claims, the impact varied and was not always positive, but at 18 months, the impact was positive and 10 percentage points (Ibid.).

Although the combination of LPWFI and the NDLP appeared to have some impact on lone parents’ economic activity, there is little to suggest that such policy initiatives changed their underlying motivations towards work. Around 3000 lone parents were surveyed before and after participating in the LPWFI; the results of this survey suggested little evidence of a difference in attitudes to work between the pre-WFI and post-WFI surveys (Coleman et al. 2003). A third of participants reported that they found the experience motivating, but these were likely to be lone parents closer to the labour market; those further away were less likely to engage with the process (Ibid.). This finding is supported by qualitative work on lone parents’ motivations to work, which is synthesised in Thomas (2007); although the LPWFIs have had some success in changing attitudes towards JobCentre Plus services, they do not challenge lone parents’ attitudes to work.
The NDLP programme evolved over the time it was in existence, piloting (and sometimes rolling out) new initiatives designed to help lone parents overcome specific barriers to entering, keeping and progressing in employment. An early such pilot was the In-work Training Grant, which lone parents returning to work could claim to cover the costs of training that might ultimately lead to promotion or a better job. A qualitative evaluation of this initiative, based on interviews with 72 lone parents and 15 advisers, (Lakey et al. 2002) suggested that it had mixed results. Although the lone parents who accessed it found that it gave them increased confidence and job satisfaction, it could be difficult to access. There were several barriers to uptake: the return to work was overwhelming enough for some lone parents without the burden of additional training; jobs did not always last long enough to organise training; not all training could be completed within the specified 12 week maximum; employers had the ability to veto the plans even if training occurred outside work hours; lone parents struggled to find suitable childcare to undertake any training outside work hours; and awareness of eligibility was low. Thus, although the policy attempted to respond to a genuine need (for lone parents to be able to earn more), it was not organised in such a way to meet this need.

A number of new elements of the support package for lone parents were piloted in 2004 and 2005 under the auspices of the New Deal Plus for Lone Parents (ND+fLP), an extension of the support available under NDLP. Evaluation of these policies in totality, using administrative data that covered the whole population of actual and potential recipients, (Brewer et al. 2007, 2009) found these to have a positive, but modest, impact on IS exits and entry into employment:

“1.6 percentage points more potentially eligible lone parents were no longer receiving an out-of-work benefit after 12 months’ exposure to the pilots (from a base of 16.6 per cent). Based on Phases 1 and 2 (which cover a longer period than the other phases), it is estimated that 2.0 percentage points more lone parents were no longer receiving an out-of-work benefit after 24 months’ exposure (from a base of 23.9 per cent). The equivalent estimates for being in work are 1.0 percentage points from a base of 13.3 per cent and 1.4 percentage points from a base of 15.3 per cent” (Brewer et al. 2009).

Qualitative evaluations of these initiatives have explored why this effect was so modest, and which policies might have been more successful than others. Perhaps the biggest ‘success’ was found in initiatives that exerted some financial leverage on those at the margin; those most ready and willing to work, but unsure that it would make them any better off financially (Hosain and Breen 2007). Such clients were most receptive to policies such as In Work Credit (IWC), which could make a low-wage job more financially attractive, and the In Work Emergency Fund (IWEF), which helped them to meet upfront costs. While these initiatives offered support or reassurance to parents wanting to move into work, they did not incentivise those who were reluctant to move into work (Griffiths 2011). Brewer et al. (2009) estimated that 80% of IWC recipients would have entered work anyway, and the qualitative work with clients and lone parent advisers confirms that, for many lone parents, the additional money was a bonus for doing something they wanted to do anyway rather than an incentive to work (Ray et al. 2007; Sims et al. 2010). Similarly for the Work Search Premium (WSP), a bonus for engaging in job searching activities, advisers were reluctant to offer this to clients not
engaging in this activity anyway, and clients again saw it as a bonus rather than an incentive (Jenkins 2008).

Lone parent advisers noted that one consequence of IWC was that lone parents were able to widen the range of jobs they would consider, including lower-paid jobs, because of the additional income they would receive from IWC (Sims et al. 2010). However, because IWC was only paid for a year, lone parents faced a considerable drop in income once the benefit was withdrawn, and there was little evidence of the in-employment progression that might have offset this (Griffiths 2011). Furthermore, any increase in income would be offset against reductions in other benefits such as Housing Benefit, thus acting as a disincentive to increase earnings (Ibid.). However, the loss of IWC itself did not necessarily precipitate job loss; lone parents reported that they could manage the income loss, and that leaving employment was more likely to be associated with the failure of childcare arrangements or a change in the hours they were expected to work (Sims et al. 2010).

This underscores the importance for lone parents of being able to find suitable childcare, and working hours that can be reconciled with this, in order to be able to move into employment. A lack of affordable childcare was not something that Childcare Assist was able to address (Hosain and Breen 2007). Its offer of subsidised childcare the week before the lone parent started employment was not necessarily what was needed; the first week (or more) of employment may have been more useful, as it is difficult to meet the upfront cost of fees when salaries are paid in arrears (Thomas and Jones 2006). Nor does it help parents to secure a suitable childcare provider in the first place, which is a key barrier that they face (Jenkins 2008).

Some of the limited impacts of the new initiatives were due to the way in which they were implemented and resourced. The large number of extra elements on top of the basic NDLP provision were not necessarily well understood or uniformly implemented by advisers, who complained that the guidance they were provided with was insufficient or too complex (Jenkins 2008). To take a specific example, although IWEF could potentially help sustain lone parents in work, advisers reported that the criteria for its use were inflexible and not entirely clear; this limited their willingness to offer it, and thus how many lone parents it could help (Thomas and Jones 2006). There was also a high demand among lone parents for training up to NVQ3 level, and those who were able to access it reported that it helped them, but only a small number of providers offered it (Ibid.). The literature reviewed above suggested that low qualifications were a key aspect of the poor employability of this group, so this type of provision is potentially highly important, but is yet to be delivered on a sufficient scale or in a way so as to make a significant impact on the numbers of lone parents out of work.

*European Social Fund projects*

It addition to mainstream government-funded policies such as NDLP, there are other funding sources to assist inactive parents; e.g. private or third sector organisations which are funded by the European Social Fund (often co-financed by the government) to run projects aimed at this group. These usually have a different monitoring and evaluative process to the government initiatives, but basic information is available about the project outcomes. A summary of these projects and their recorded impacts is given in table 3.2.
<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Timeframe</th>
<th>Geography</th>
<th>Organisation</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive Futures for Parents</td>
<td>Provides unemployed and economically inactive parents with one-to-one support as well as the skills, confidence and motivation necessary to find sustainable jobs.</td>
<td>July 2008 - July 2011</td>
<td>South West England</td>
<td>Tomorrow’s People (Bristol)</td>
<td>Positive Futures for Parents has engaged 669 clients and achieved 125 paid jobs outcomes as at November 2010.</td>
</tr>
<tr>
<td>Prepare Access and Success for Parents Returning to Work</td>
<td>Individualised support packages to long-term unemployed parents in south London. The project combines proactive engagement with local community organisations and businesses to identify work experience and employment opportunities, with advice, mentoring, employability skills and qualifications training, and follow-on support while participants are in work.</td>
<td>April 2010 - September 2012</td>
<td>London</td>
<td>Kaleidoscope</td>
<td>The initial pilot welfare-to-work project aimed to support 20 lone parents back into sustainable employment within a six month period. Kaleidoscope successfully placed all of them in local schools and nurseries, over 95% remained in this employment for more than one year. Since then they have delivered job outcome rates of 85% on all of the job brokerage services they provide to the economically disadvantaged groups with whom they work.</td>
</tr>
<tr>
<td>From Playground to Payslip</td>
<td>Targets mothers at the school gates and supports them to prepare for work. It also provides a 'matching' service with a wide range of employers looking for quality staff, and a recruitment agency.</td>
<td>not available</td>
<td>London</td>
<td>Women Like Us</td>
<td>Over 700 employers have successfully used Women Like Us to source and recruit part-time staff. They include a number of public and voluntary sector bodies: • Mayors Fund • A number of small and medium charities • London Borough of Newham • London Borough of Islington.</td>
</tr>
<tr>
<td>Break Through Project</td>
<td>Engaging NEETs, most of whom are young parents, into flexible learning. The 22-week training programme offers accredited and non-accredited training and focuses on one-to-one support to build confidence and skills to enable the young person to progress into further training or learning, or employment.</td>
<td>November 2008 - December 2010</td>
<td>London</td>
<td>YMCA training</td>
<td>96 starts, only 4 participants have not completed. Literacy and numeracy targets at Entry level, level 1 and level 2 have been exceeded. Achievements on Young Parent to Be, Arts and Crafts, Food Hygiene, Childcare and First Aid (accredited and non-accredited) are on target. 25 participants have progressed into further learning or training. 24 participants completed a work placement.</td>
</tr>
</tbody>
</table>
ESF Horizon  Offers a range of support, carefully adapted to the unique needs and particular barriers of each individual, emphasising the importance of skills and qualifications. Training is offered to those who require it, with both in-house staff and other specialists offering appropriate packages. Financial aid for qualifications, childcare and travel is also available to give participants the optimum level of support back into work.  June 2008 - December 2010  North East England  A4e  The project was tasked with 50 job outcomes per month: the contract manager believes they will be close to this target (on average) by the end date. Some months have proved challenging, especially those immediately after Christmas 2009, when bad weather intervened. However, figures are now on the increase, and in some months targets have been exceeded.

Family Focus  Tries to make sure that being in work really pays, emphasising the wider social benefits and sustaining employment with additional support once work has been found. The project increasingly champions the flexibility of self-employment to fit around family life and commitments for those with the drive to succeed.  July 2008 - December 2010  South West England  Shaw Trust South West  Year 1  Profiled starts: Target 247 / Actual: 360  Profiled job outcomes: Target 99 / Actual: 80  Year 2  Profiled starts: Target 333 / Actual: 379  Profiled job outcomes: Target 115 / Actual: 164

Family Links  Targeted economically inactive homeless families in East London, with an individually tailored, bespoke service to support them back into sustained employment or further job search and learning.  April 2011 - March 2012  London  Community Links  Target:  • 137 enrolled across four Boroughs  • 100 participants receive six hours of one-to-one support  • 29 jobs  • 15 jobs sustained for six months  • 57 participants progressed into further job search and training.  Actual to date Sept 2011:  • 165 enrolled  • 116 receiving six hours of one-to-one support  • 25 jobs  • 5 sustained  • 37 further jobsearch and training.  (Target/Achieved)  New Starts: 157/170  Employment within six weeks of leaving project in a job lasting 8 or more hours per week: 30/38  Further jobsearch and training: 37/46  Work placement: 38/40  Employment six months after leaving the project: 20/24
<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Dates</th>
<th>Location</th>
<th>Working Links</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marks &amp; Start</td>
<td>Three-day pre-employment programme and a two-week work placement at Marks &amp; Spencer’s Croydon branch, followed by six weeks of intensive jobsearch support.</td>
<td>July 2008 - June 2011</td>
<td>South East England</td>
<td>Working Links</td>
<td>Numbers recruited to programme between September 2009 and May 2010: 82 Number of job starts: Total 48 (38 with Marks &amp; Spencer’s and 5 in other employment - a further 5 have started work, but job outcome has not yet been verified by employers).</td>
</tr>
<tr>
<td>Young Mums Will Achieve</td>
<td>Closely targeted tailored learning provision and intensive personal support. The project directly tackles barriers to learning, working with a strong partnership team of key agencies.</td>
<td>November 2009 - July 2011</td>
<td>South West England</td>
<td>Cornwall Council</td>
<td>At the start of the project, EET engagement of young parents in Cornwall was less than 20%. By June 2010 it had risen to 24%. Cohort 1 and 2 had 25 starts. 24 achieved either Literacy or Numeracy qualifications (96%) With 40% Entry level, 28% level 1, and 28% level 2. 84% starts achieved a level 1 Step Up programme. 90% retention rate on programme. Forty-seven participants in cohort 3, now running in six venues across the county. The Young Mums Will Achieve project was awarded the National ESF Equal Opportunities Mainstreaming Leader Award at the England ESF conference in November 2010.</td>
</tr>
</tbody>
</table>

Source: [www.esf-works.com](http://www.esf-works.com)
**Tax Credit Reform**

At the same time that NDLP was introduced, reforms to the tax credit system also affected lone parents’ incentives to work. Working Families Tax Credit (WFTC) replaced Family Credit as the in-work benefit available to working parents, and was more generous than its predecessor due to higher credits and a lower withdrawal rate, and additional support for childcare (Cebulla et al. 2008). The availability of this in-work support increased income in employment, in the same way as IWC described above, although available to all parents and not time limited to one year.

Estimates of the increases in the employment rates of lone parents as a result of WFTC varied depending on the estimation method, data, and time period under consideration, but estimates were broadly similar, generally between 3.4 percentage points and 4.8 percentage points (Cebulla et al. 2008). Employment increases as a direct result of WFTC were similarly estimated to range between 50,000 and 60,000 lone parents (Ibid.).

Brewer et al. (2006) argue that the impact of WFTC itself was in fact far greater than this, but was offset by other competing changes to the tax and benefit system, which offered greater support to parents regardless of their employment status (such as Child Benefit and the child tax credit). Thus, although WFTC increased the employment rate of lone mothers by 5.11 percentage points compared with Family Credit, other changes to the tax and benefit system meant that the net change was 3.72 percentage points.

As well as an increase in the employment rates of lone parents, WFTC affected the hours worked by lone parents, as support was conditional on working at least 16 hours per week. Gregg et al. (2009) find that on average lone mothers in employment increased their usual weekly hours by just over three hours. They also note other benefits to the policy in addition to purely employment related outcomes, such as less decline in income and mental health after partnership breakdown, and better mental health among adolescents in lone parent families.

**Policy Reform**

Further changes have occurred to support for lone parents since 2008 (table 3.3), although there is scarce evidence available on the impact of these changes because they are still comparatively recent, and it takes time to collect and process data, and observe policy impact. In 2009, the Flexible New Deal replaced all existing New Deal programmes, including the NDLP. In Great Britain, this was subsequently replaced with the Work Programme in 2011. Northern Ireland has taken a slightly different approach since 2008, implementing the Steps to Work programme as its main employment programme, aimed at all unemployed people including those with caring responsibilities. It remains to be seen what will happen after 2013, with the introduction of Universal Credit.

A key difference for lone parents in recent years is the increasing conditionality, as the age at which their youngest child must reach before they are obliged to seek work has been progressively lowered. In November 2008, this age was 12; by 2012 it was 5.
Table 3.3: Changes in support for those with caring responsibilities who are out of work

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>Steps to Work introduced in Northern Ireland</td>
</tr>
<tr>
<td>2009</td>
<td>Flexible New Deal introduced in GB</td>
</tr>
<tr>
<td></td>
<td>Lone parents with youngest child aged 10+ moved to JSA</td>
</tr>
<tr>
<td>2010</td>
<td>Lone parents with youngest child aged 7+ moved to JSA</td>
</tr>
<tr>
<td>2011</td>
<td>Work Programme replaces New Deal in GB</td>
</tr>
<tr>
<td>2012</td>
<td>Lone parents with youngest child aged 5+ moved to JSA</td>
</tr>
<tr>
<td>2013</td>
<td>Universal Credit due to be piloted in April and rolled out nationally in October - will replace most existing in and out of work benefits</td>
</tr>
</tbody>
</table>

Source: Adapted from Whitworth (2012)

The Working for Families Fund for disadvantaged parents/ carers

The Working for Families Fund (WFF) is particularly interesting as many of its target group were economically inactive carers (McQuaid et al. 2009, 2006). Its key success factors are summarised in Box 3.2.

It operated in Scotland from 2004-08, invested in initiatives to remove childcare barriers and improve the employability of disadvantaged parents who have barriers to participating in the labour market, specifically to help them move towards, into, or continue in employment, education or training. The programme was administered by 20 local authorities (which covered 79% of Scotland's population), operating through around 226 locally based public, private and third-sector projects with a total budget of £50m (£46m actual spend).

It was a voluntary scheme on the part of clients. Support focused on helping the parents find sustainable childcare solutions and providing or accessing other relevant employability-related support and services. In rural areas, support also combated barriers created by poor transport, limited services and the lack of a critical mass of clients.

A total of 25,508 clients (with 42,214 children aged below 18) received support from WFF. 13,594 clients (53%) achieved ‘hard’ outcomes, such as employment, and a further 3,283 (13%) achieved other significant outcomes (training, distance travelled, e.g. improved confidence). So two-thirds of all clients achieved measured progress. 24% (6000) of clients had exited or become inactive (i.e. were no longer receiving support) without achieving any of the above outcomes.

A follow-up of a sample of 1476 clients moving into employment showed that three months after this Transition was achieved the vast majority (92%) were still in work. Six and twelve months after the Transition into employment 90% (from 346 responses) and 89% (263 responses) of clients were still in employment.
Allowing for what would have happened without the programme (using a comparator group and propensity score matching using BHPS data) the analysis concludes that the WFF policy was effective. The costs per client who had a Transition (into work, education etc.) were £3,382 over the four years (falling to only £2,587 by the last year). Assuming only 50% additionality, in other words including just the estimated additional clients achieving an outcome, the average cost rises to £6,764 per client over 2004-08, falling to £5,174 by the final year.

WFF successfully reached a wide variety of clients, in different circumstances and with different individual aims and resources. Some key characteristics of WFF clients were:

- Most were female (89%) or lone parents (71%).
- 65% lived in households where nobody was in paid employment, i.e. workless households.
- Most lived on a very low household income with 66% either claiming Income Support or having a partner/spouse claiming Income Support.
- The income of those in employment, at the time of first registering with WFF, was low with 83% earning £200 or less take-home pay per week and 37% earning £100 or less per week.
• Clients’ economic activity, when they first registered, varied with 36% of clients ‘at home, caring for children’, 24% in employment (either full-time or part-time), 28% registered unemployed, and 6% in training or education.

• Their children were relatively young with 62% having one or more children aged under 5 years living in the household, compared to just 21% of households with children in Scotland. 92% had a child under 12 years.

• They had low levels of qualifications compared to the Scottish average. 69% of clients had qualifications equivalent to SVQ Level 2 or lower and 34% had either no qualifications or qualifications below SVQ Level 1 (compared to around 15-16% with no or below SVQ Level 1 qualifications in Scotland during the WFF period).

• Of the 76% who were not in paid employment at the time of their registration, most had been unemployed for a considerable time, with 54% not having worked for over two years compared to the Scottish average of 34%.

• A significant proportion (43% of those who received sustained support from WFF) indicated at least one additional stress, e.g. mental or physical health problems, debt or money issues, housing problems, criminal record, etc.

• 46% of WFF clients lived in the most deprived data zones compared to 15% for Scotland as a whole. WFF successfully targeted pockets of deprivation, however the projects were client group-led, not postcode-led, and this has allowed disadvantaged parents in most local authorities to be supported regardless of where they live.

In terms of childcare the lack of capacity and gaps in provision (evenings, weekends, for children with additional needs, geographical) were common problems for accessing childcare, creating a barrier to jobs and other opportunities. The price of childcare was also stated as a major barrier for parents (e.g. deposits/registration fees, etc.) and the mismatch between clients starting work, being paid and having to pay for childcare upfront.

Clients were helped to improve their employability by establishing goals and producing a personal action plan that linked them to the various types of employability support available locally. Support included personal development courses to boost confidence and self-esteem, education and training to improve skills and qualifications (including help in obtaining driving licences in rural areas), careers advice, money advice, and work experience – all helping the client to progress towards or into work. Generally this was provided through a key worker model.

A second key element of WFF support was helping clients to identify and access the childcare they needed at each stage. Often this comprised information and advice, linking them to an existing childcare place, but it might also involve setting up additional, more flexible childcare, or providing financial assistance (e.g. paying one-off, ‘upfront’ nursery registration fees, paying for childcare while a parent attended education or training, or for a short time until tax credits came through).

Characteristics associated with a reduction in a client’s likelihood of having a Transition were being in rented, council, hostel or supported accommodation (i.e. non-owner occupier); having been out of employment for 2 months or more (especially over 6 months); being aged under 20 years old;
being over 45 years old; being self-identified as disabled; having other household stresses (such as drug misuse); being pregnant; having more than 2 children; and/or having a disabled child.

**International policy approaches**

The cross-national literature finds a strong link between the social policy environment and mothers’ employment. The availability of part-time work is positively associated with employment, as it is easier to reconcile with care responsibilities (Gutiérrez-Domènech 2005), although not if the part-time hours come at a cost of poorer pay and conditions (Del Boca et al. 2008). The strongest association seems to be with childcare; publicly funded childcare is positively associated with maternal employment (Del Boca et al. 2008; Gutiérrez-Domènech 2005; De Henau et al. 2010). This research also suggests that there is an educational gradient in the impact of these policies; that impact is greater among less educated mothers, as they are the most sensitive to the way in which the policies affect income and prices (Del Boca et al. 2008), although even the most highly educated mothers need publicly funded childcare to maximise their participation (De Henau et al. 2010). It is also worth noting that state level provision interacts with support at other levels; publicly funded childcare is important, but so are supportive arrangements in the workplace for employees with care responsibilities, and help for the mother from their partner and other family members (Abendroth et al. 2012).

**The International Evidence**

It is beyond the scope of this review to conduct any systematic review of the international literature on activating parents, but this section will draw on some international evidence to make some illustrative points.

A recent attempt at synthesis for a selection of countries has been made by Finn and Gloster (2012), who compare work obligations on lone parents, and assess whether these can be associated with reductions in welfare caseloads or improved employment outcomes. It is impossible to truly compare such obligations due to differences between welfare regimes and tax systems in the overall package of support and obligation facing lone parents. However, table 3.4 shows by way of a comparison the age at which lone parents are assessed on their ability to work, and potentially obliged to undertake job search activities if found able, in order to remain eligible for welfare payments.

The literature reviewed in Finn and Gloster (2012) appears to suggest a number of factors that might precipitate success or failure in engaging lone parents in the labour market. Firstly, that although mandatory programmes naturally engage more clients than voluntary ones, if they are to be effective they must offer different services to clients according to their distance from the labour market; job search support for those closest, basic skills and addressing barriers for those furthest away. The bigger the pool of clients, the more diverse their needs; it is also worth noting that, over time, those closest to employment will move into it, and the remaining pool of clients will be the hardest to help. Secondly, studies have observed an ‘anticipation effect’ of policies – that lone parents respond to planned changes in policy before actually being required to do anything – and it
is interesting that this can constitute a substantial part of the final impact on welfare reduction or employment. Finally, policymakers have found that their target of getting lone parents into a job does not in itself guarantee financial savings, as they tend to enter low-paid occupations, and the in-work support they receive is very expensive for the state. As such, they are investigating whether some investment in occupational skills training may be necessary as well, to enable clients to move off in-work support by securing a better paid job or progressing within their job.

Table 3.4: Work tests for lone parents in selected OECD countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Work test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td>When youngest child is 7</td>
</tr>
<tr>
<td>Belgium</td>
<td>Subject to discretion of case manager</td>
</tr>
<tr>
<td>Denmark</td>
<td>Subject to childcare</td>
</tr>
<tr>
<td>France</td>
<td>When youngest child is 3</td>
</tr>
<tr>
<td>Germany</td>
<td>When youngest child is 3</td>
</tr>
<tr>
<td>Ireland</td>
<td>When youngest child is 18 (or 22 if in FT education)</td>
</tr>
<tr>
<td>Japan</td>
<td>Subject to discretion of case manager</td>
</tr>
<tr>
<td>Luxembourg</td>
<td>When youngest child is 6</td>
</tr>
<tr>
<td>New Zealand</td>
<td>When youngest child is 16</td>
</tr>
<tr>
<td>Norway</td>
<td>When youngest child is 3</td>
</tr>
<tr>
<td>Portugal</td>
<td>None</td>
</tr>
<tr>
<td>Spain</td>
<td>None</td>
</tr>
<tr>
<td>Switzerland</td>
<td>When youngest child is 3</td>
</tr>
</tbody>
</table>

Source: adapted from Finn and Gloster (2012)

To briefly take some specific examples of the impact of policies aimed at activating lone and low-income parents:

**USA**

The key policy was the reform to the Earned Income Tax Credit, which aimed to incentivise work by boosting in-work income (see table A1 in the Appendix). This has been found to have precipitated an increase in single mothers’ employment, although its impact is difficult to disentangle from the contemporaneous welfare reform, which increased the requirements on lone parents, and the economic conditions (Millar and Evans 2003). Noonan et al. (2007) argue that, although their analysis attributes a smaller proportion of the change to economic conditions than EITC reform, the resulting increase in employment could not have happened without good economic conditions.

**Canada**

In Newfoundland, lone parents have access to a support package called the Single Parent Employment Support Program (see table A1 in the Appendix), which offers support to find employment and potentially an income supplement once in employment. An evaluation of this programme (Don Gallant and Associates 2002) found that participants exited welfare and entered employment at a faster rate than the comparison groups over the life of the project (41 months), with cost neutrality achieved within around 30 months. The evaluation also stressed the importance of a service that can address barriers to employment and work effectively with the third sector.
Australia
The tax system in Australia was reformed in 2000 in a way that reduced the marginal tax rates that lone parents were subject to, allowing them to retain more of their income without losing as much benefit entitlement (see table A1 in the Appendix). Cai et al. (2008) find that the result of this was a modest positive impact on labour supply; an increase in lone parent participation by 6.3 percentage points.

New Zealand
In 2004 the New Zealand government introduced Working For Families (see table A1 in the Appendix), which increased in-work support for low income families, including additional support for childcare and accommodation costs. The project was expensive, costing NZ$1.5bn in the first four years, but starting to achieve its desired outcomes by 2007 (Dalgety 2010). However, these gains were largely eroded by the economic downturn, and over a longer period, evaluation suggests that it has failed to address its intended problems in a cost-effective way (St John and Dale 2012).

Denmark
Unusually, Ingold (2011) focuses on policies aimed at the activation of partnered women rather than lone parents. However, her findings are not hugely different regarding key programme success factors: the provision of suitable childcare; the provision of personalised and responsive services; and decentralisation of labour market policies, which allows frontline staff to link up with other local services to help clients overcome barriers to work.

The Netherlands
Millar and Evans (2003) also raise the issue of personalisation of services, although are more critical of it in the Dutch context, arguing that it is not always sufficient. There was argued to be no institutionalised involvement of clients in activation processes; whether this results in low quality service delivery depends on the individual social worker administering the program, and how they balance institutional and individual concerns.

The Nordic countries
The Nordic countries (Sweden, Norway, Denmark, Iceland and Finland) have high rates of maternal labour force participation. Datta Gupta et al. (2008) attribute this to: a strong right to return to work after childbearing and high replacement rates for parental leaves; high coverage of subsidised childcare (organised and paid through municipalities although provided by both public and private sectors); and shared parental leaves (between mothers and fathers). However the schemes are expensive - tax rates are high - and there is a high degree of labour market gender segregation due to long leaves (which are still taken predominantly by mothers not fathers) and the tendency of returning women to concentrate in particular sectors (especially the public sector).
3.3. Summary: employment and caring responsibilities

Those with care responsibilities face a number of barriers to employment posed by the care responsibilities themselves, but also by the individual and household circumstances that inactive carers are likely to be experiencing. This chapter has explored the literature around these barriers, and on the policy initiatives that have tried to help them into employment.\textsuperscript{32}

Barriers to work

It is particularly hard for low-income women to reconcile work and care responsibilities. There is a reason for the correlation between a woman’s job before having children, and whether and when she returns to work. Those who were in higher status occupations are more likely to have maternity leave provision in excess of the statutory minimum, and to be able to afford childcare, and thus they will find it easier to make their exit temporary, and to maintain a fairly strong connection with the labour market. Lower income women are less likely to have such opportunities.

The literature suggests that the key constraining factors for lone and low-income parents seeking work are: low employability due to personal factors such as low qualifications or health problems; lack of labour demand, particularly a lack of jobs that can be readily reconciled with care responsibilities; and a difficulty in managing the costs and practicalities of employment, such as travel and uniform costs, and making suitable childcare arrangements. These issues are magnified in the case of lone parents, partly by virtue of a lack of another adult with whom to share the burden of earning and caring.

The return to work is not solely a practical decision, but depends on the individual’s attitudes to work and preferences regarding the appropriate care of young children. Although surveys have suggested that most lone parents want to work, this is on the proviso that it can be reconciled with what they regard as suitable care for their children, which may be staying at home until they are at school, or it may be finding a childcare provider that they trust.

Attitudes are not fixed, and there is some interaction between constraints, opportunities, preferences and attitudes. External circumstances constrain possibilities, which can in turn shape preferences, but the ability to act according to preferences depends on the absence of constraints in doing so. Those with care responsibilities who do not want to work actually fall into at least two categories: those who do not want to work under any or most circumstances; and those who report not wanting to work because they have been discouraged by a lack of job opportunities and suitable childcare. Any attempt to address inactivity in this group needs to recognise this distinction.

\textsuperscript{32} It is recognised that the review focuses heavily on low-income, and particularly lone, mothers. Little evidence was found in the time available on those with care responsibilities for other family members or non-relatives, or about the specific situation of lone fathers.
What is needed from policy

The evaluation of policy initiatives to date has suggested a number of important factors for success:

**Holistic and tailored support.** Services need to be offered on the basis what individual lone or low-income parents need. It is much more effective to offer a tailored package from a menu of services, than offering the whole menu to every client. It is important to provide integrated support for both employability and care issues.

**Partnership working** with local training providers, employers and childcare providers. Those delivering employment services have a brokerage role in negotiating training and employment opportunities that are suited to those with care responsibilities, and helping clients to find suitable local childcare.

**The importance of a good adviser.** Engagement is most productive when advisers are both well-trained and supportive. They should be well-informed about the package of support available, so that initiatives can be effectively implemented, and should be able to build trust with the client as an important ‘soft’ element of the process. A key worker model with one contact worker who can provide support directly or through referrals appears to be effective.

**Training and qualifications.** Given the impact of lack of qualifications on employability, this is something to be targeted. Low income and especially lone parents find that care responsibilities constrain their ability to get qualifications, both as adults and potentially at school in the case of early motherhood. They need courses that fit around care responsibilities, childcare, and support with fees and course costs.

**Making work pay.** This is also linked to the issue of qualifications; better qualifications mean being able to get a job at more than minimum wage, or to progress within employment. However, a key policy tool is in-work financial support, which can convince those who are sceptical of the financial benefit of taking up a low-paid job. In-work support might also take the form of non-financial support and after care, to try to improve sustainability of employment.

**The limits of policy.** Although most do, not all of those with care responsibilities want to work, and nothing that has been tried so far has managed to truly engage them or change their orientation to work. It should also be noted that the prevailing economic conditions play an important role in the inactivity rate, and that those furthest from the labour market are even more unlikely to find work in a downturn.
4. Literature on those with disabilities and inactivity

In many OECD countries over the last decades, disability and long-term sickness related unemployment and economic inactivity are becoming a widespread problem and a key economic and welfare policy concern. People with disabilities are under-represented in the workforce and over-represented among the poor. The number of people receiving long-term sickness and disability benefits continues to grow and more and more people of working age rely on sickness and disability benefits as their main source of income. In 2008 on average about 6% of the working-age population received a disability benefit on average in OECD countries. The corresponding figure for the UK in 2008 was about 7% (OECD 2010), while in Northern Ireland 9% of working age population was receiving Disability Living Allowance in 2008 (the figure is the same for 2012)\(^3\). Chapter 2 set out some of the context for Northern Ireland.

This chapter considers the impact of disability on employment and the socio-economic well-being of individuals, and considers the policy interventions that have been targeted at this group to help them into employment.

4.1. Some barriers to employment for those with disabilities

Disability and sickness related economic inactivity have negative consequences for individuals, families, economy and society. For individuals, not being able to work because of illness often means poverty, benefit dependency, isolation from society, and triggers mental and further health problems (Weston 2012). The OECD findings (2010) show that despite the availability of sickness and disability benefits, on average 22% of people with a disability were living in poverty\(^34\) compared with an income-poverty rate 14% for people without a disability. There is research evidence indicating that being out of job due to long-term sickness or disability is associated with health risks, future serious illness and even an increased mortality risk (Anema and van der Beek 2008).

For families, it can mean additional economic burdens, psychological and physical stress, impacts on the ability of other members of family to work, and a risk of poverty. For society, it means having a less productive workforce, and to have people who may be poorly integrated in society and suffering from multiple disadvantages of ill health/disability and health related poverty, which may be reproduced between generations.

Finally, a large proportion of economically inactive people in the population means a permanent cost to public finances, in the form of healthcare, benefits, foregone tax revenues and other spending. The fiscal cost of paying disability benefits to an average of 6% of the working-age population is large. Average public expenditure across the OECD countries on these benefits is about 2% of gross domestic product (GDP), equivalent to nearly 30% of expenditure on old age and survivors’ pensions.

\(^3\) [http://www.ukpublicspending.co.uk/spending_chart_2001_2011Ni.pdf_12c11i111mcn_47t](http://www.ukpublicspending.co.uk/spending_chart_2001_2011Ni.pdf_12c11i111mcn_47t)

\(^34\) The OECD defines poverty as living in a household with an income of below 60% of the median.
In countries with a widespread receipt of benefits – such as the Netherlands, Norway and Sweden – spending can reach as much as 4%-5% of GDP. In Northern Ireland average public spending on non-employment benefits was 0.6% of GDP in 2008 and it increased to 0.8% of GDP in 2011 (correspondent figures for the UK were 1.4 and 1.8 per cent of GDP).  

In Britain, the Equality and Human Rights Commission’s first Triennial Review: *How Fair is Britain?* mapped progress on equality in Britain for people with protected characteristics. Among the issues that need to be addressed most urgently, the closing the employment gap for disabled people was identified as one of the most important.

This section examines factors associated with the likelihood of employment for people with long-term illnesses and disabilities. It considers existing research evidence on the economic activities of disabled people, attitudes to employment of disabled people and the various barriers to employment for disabled people.

### 4.1.1. Equality legislation in the UK


In the UK the Disability Discrimination Act (DDA) was first passed in 1995 then extended in 2005. The DDA sought to eliminate discrimination, by giving disabled people additional rights in their employment and education and placing duties on their employers and educational institutions. In 2009 the UK government also ratified the UN Convention on the Rights of Persons with Disabilities. The Office for Disability Issues (ODI) within the Department of Work and Pensions was established, based on the strategic report *Improving the Life Chances of Disabled People* (PMSU 2005) as a collaborative effort between different government departments, which aims to eliminate inequality that results from disability, to improve quality of life and opportunities of disabled people and promote better social inclusion of disabled people.

Since 2006, the Disability Equality Duty has obliged public bodies to produce Disability Equality Schemes and Action Plans, and requires government ministers to report on progress in the areas for which they are responsible towards equality of opportunity between disabled persons and other persons, both their staff and their customers. As a result many organizations have been required to

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35 [http://www.ukpublicspending.co.uk/spending_chart_2001_2011Nip_12c1li111mcn_47t](http://www.ukpublicspending.co.uk/spending_chart_2001_2011Nip_12c1li111mcn_47t)


37 Department of Work and Pensions, Department of Health, Department Education and Skills, and the Office of the Deputy Prime Minister
reconsider their approach to working with disabled people, and to produce evidence of their practice (Riddell et al. 2010).

4.1.2. Labour market disadvantage of disabled people in the UK

Despite the positive trend in the UK legislation, there is evidence that the labour market situation of disabled people has not improved over that last twenty years, and indeed has worsened, especially for those with low qualifications. The analysis of the National Equality Panel (NEP 2010) and the evidence from Labour Force Survey (LFS) data shows that employment rates for disabled are half those of people without disabilities. According to the LFS, in Northern Ireland in 2012, 56% of disabled people were economically inactive, this figure was down from 64.4% in the third quarter of 2009 (see Figure 2.9c in Chapter 2). Riddell et al. (2010) found that in GB, although on average the employment rate of disabled people is 50%, there were significant spatial variations, with disabled people having the highest employment rate in Southeast England (59.6%), and the lowest in Wales at 39.9%. In Northern Ireland the average employment rate of disabled people appears to be even lower than in Wales –37.8% in 2008, 31% in 2009 and then 38.6% in the first quarter 2012 (LFS 2006-2012, see figure 2.9a in Chapter 2).

When disabled people are in work, they have jobs which are less stable and lower paid compared to people without disabilities (e.g. Meager and Hill 2005). There is a large pay gap between disabled and non-disabled people (the median hourly wages are 20% lower for disabled women and 12% lower for disabled men according to the 2010 Report for the Equality and Human Rights Commission (Riddell 2010)). Some of it is explained by a larger proportion of part-time workers among the disabled (according to the LFS 87% of disabled men and 51% of disabled women work full-time compared with 93% of non-disabled men and 57% of non-disabled women (Rigg 2005)). In Northern Ireland, disabled workers and workers without disabilities worked on average the same amount of hours per week between the second quarter 2009 and the second quarter 2010 (43 hours) (Figure 2.12). There is evidence that that hourly rates for disabled people are lower than for people without disabilities (e.g. NEP 2010) and that overall, disabled people tend to be less educated, to have fewer qualifications and to be over concentrated in low skilled and low paid jobs (Burchardt 2005; Rigg 2005). In Northern Ireland the LFS data show that although weekly wages of disabled workers were similar to, or lower than, the wages of workers without disabilities over the period 2008-2012, the hour pay gap was become very small after the first quarter 2010 (see Figure 2.13 in Chapter 2).

Over time there were some improvements in the employment rates of disabled people, but the extent of this improvement vary significantly by the type of impairment. Thus, among people with mental health conditions, employment increased from 12% to 13% between 2002 and 2008, the rates of employment for people with visual impairments went up from 36% to 47%, while the rates of employment for people with speech impairments decreased from 37.5% to 31.4% over the same period (Riddell et al. 2010).

38 However, the average number of weekly working hours for disabled people dropped by four hours over 2010 and then increased gradually after early 2011, and almost caught up again with the number of weekly working hours of those without disabilities by early 2012 (this may be influenced by sampling error, Figure 2.12).
Rigg (2005) analysed the LFS and found that the earning gap existed across the entire earnings distribution but was greatest at the lower levels of earnings and greater for men than for women. Furthermore, the pay gap varies according to the severity of impairment and it increases with the length of the period of disability (e.g. Rigg 2005; Burchardt 2000a). Thus, Burchardt (2000a) finds from the Health and Disability Survey that disabled men earn from 14% (for those with the least severe impairments) to 40% per cents less (for those with a higher degree of impairments).

Because different surveys define disability in different ways, the estimated disability pay gaps vary from one study to another (see Metcalf 2009). Sub-populations of disabled workers may also vary from one study to another. Thus, the only study that finds that the disability earning gap does not exist (Longhi and Platt 2007) considers a specific cohort of disabled workers – 34-37 year old men and women, with established disability at age 16 or 26 and excludes those who have learning difficulties. These variations in finding across different studies are presented in Table 4.1. Overall, there is evidence that disability results in greater labour market disadvantage for men than for women (Berthoud and Blekesaune 2007; Blackaby et al. 1999).

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### Table 4.1 Summary of the labour market disability gaps in gross hourly pays and employment rates

<table>
<thead>
<tr>
<th>Study</th>
<th>Data source</th>
<th>Study period</th>
<th>Definition of disability</th>
<th>Gender</th>
<th>Severity</th>
<th>Percentage difference in gross hourly earning</th>
<th>Percentage point difference in employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blackaby et al. (1999)</td>
<td>Labour Force Survey</td>
<td>1992/3-1995/6 (Winter)</td>
<td>Work-limited (Health problems or disabilities that limit the kind of work that respondents can do)</td>
<td>M</td>
<td>F</td>
<td>-21 -13</td>
<td>-17 -10</td>
</tr>
<tr>
<td>Blackaby et al. (1999)</td>
<td>Labour Force Survey</td>
<td>1992/3-1995/6 (Winter)</td>
<td>Long-standing work-limited (work-limited expected to last more than one year)</td>
<td>M</td>
<td>F</td>
<td>-11 -6</td>
<td>-10 -2</td>
</tr>
<tr>
<td>Berthoud and Blekesaune (2007)</td>
<td>General Household Survey</td>
<td>1981-1991</td>
<td>ADL (Long-standing illness, disability or infirmity that limits the respondent’s activities)</td>
<td>M</td>
<td>F</td>
<td>-3 -2</td>
<td>-6 -2</td>
</tr>
</tbody>
</table>

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39 The Health and Disability Survey included 108 questions on daily activities to assess disability under the ADL definition.

40 Source: Metcalf 2009
Table 4.1 **Summary of the labour market disability gaps in gross hourly pays and employment rates across the research literature (continued)**

<table>
<thead>
<tr>
<th>Source</th>
<th>Year</th>
<th>Disability follow up</th>
<th>ADL/DDA: Health problems or disabilities expected to last more than one year that substantially limit the respondent’s ability to carry out normal day-to-day activities.</th>
<th>M</th>
<th>F</th>
<th>All</th>
<th>Category 1-2 (least severe)</th>
<th>Categories 3-10 (more severe)</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burchardt (2000a) (wages and employment)</td>
<td>1996-1997</td>
<td>ADL</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burchardt (2005) (wages and employment)</td>
<td>1996</td>
<td>ADL/DDA: Health problems or disabilities expected to last more than one year that substantially limit the respondent’s ability to carry out normal day-to-day activities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Longhi and Platt (2008)</td>
<td>2004-2007</td>
<td>Work-limited (Definition: Those with physical/sensory impairments at age 16&amp;26 and born in 1970. People with learning difficulties were excluded from the analysis)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

41 Source: Metcalf 2009
4.1.3. Attitudes of disabled people towards employment

Whether or not people with long term illness or disability are in employment depends in part on the type and extent of their condition, their level of skills, the opportunities that local labour market offers to them, societal attitudes and the attitudes of employers towards disabled workers. The attitudes of disabled people to employment are very important factor that affect their likelihood of employment (e.g. Burchardt 2000).

Burchardt (2000) finds that disabled people make up half of those who are not employed and not actively looking for employment but would like to work. Meanwhile, working disabled people express very positive views about how work has contributed to their lives. Williams et al. (2008) reported that over 90% of disabled people in employment agreed that: work keeps them active; gives them financial independence; enables them to meet new people; and makes them feel as if they are contributing to society.

Among those not in work, a smaller proportion of disabled people than non-disabled are looking for work, however, nearly 1 in 3 disabled people not looking for work reported that they would like a job, compared to 1 in 4 non-disabled people (Burchardt 2000). In Northern Ireland between 2009 - 2012 from two in five to one in three disabled people said that they want to work, according to the LFS data. Their reasons for not looking for work included poor health, caring responsibilities, fear of loss of benefits and a belief that there were no suitable jobs available (Boylan and Burchardt 2002). Eighty-six per cent of people with mental health conditions not currently in employment would like to be in work (Stanley and Maxwell 2004). Adams and Oldfield (2011) report that disabled people stressed the value of work to them and unanimously stated a desire to be in work. In the USA, Ali et al. (2011) also find that relative to their nondisabled counterparts, non-employed people with disabilities are: as likely to want a job but less likely to be actively searching; as likely to have prior job experience; and are similar in their views of the importance of income, job security, and other valued job characteristics.

These results indicate that the low employment rate of people with disabilities is not likely to be due to their reluctance to work or to them having different job preferences. The low rates of employment among disabled people are attributed in part to the nature of their impairment with many disabled are being genuinely unable to participate in paid employment. However, a large part of the economic inactivity of disabled people is due to barriers to employment.

Findings from the Life Opportunities Survey show that 50% of adults with impairments report that they have at least at least one barrier to employment (compared with 29% of those without

43 In 2009-2012 the Office for National Statistics (ONS) conducted the Life Opportunities Survey (LOS), a new large scale longitudinal survey of disability in Great Britain, commissioned by the Office for Disability Issues. This was the first major social survey which explored disability in terms of the social barriers to participation that people experience and compares the experiences of disabled people with those of nondisabled people. The last major survey of disability in Great Britain was the Disability Follow-up to the 1996/97 Family Resources
impairments). Although the most frequently cited barrier to employment for people with impairments is their health condition/disability (43%), there are many other factors which disabled people face perceive as barriers to employment. Thus, people with impairments need more frequent assistance (10%) and are more likely to have difficulties with transport (31%), lack qualifications and skills (27%), and suffer from anxiety and lack of confidence (16%), compared to their non-impaired counterparts. An eighth of people with disabilities worry that their benefits would be negatively affected by employment (13%), and they mention the prejudice and attitudes of employers as a barrier to employment (13%), which is approximately double the rates adults without impairment.

Table 4.2: Perceptions of disabled people of barriers to employment

<table>
<thead>
<tr>
<th>Barriers</th>
<th>Adults without impairment (%)</th>
<th>Adults with impairment (%)</th>
<th>All adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least one barrier to employment</td>
<td>29</td>
<td>50</td>
<td>35</td>
</tr>
<tr>
<td>Lack of job opportunities</td>
<td>41</td>
<td>41</td>
<td>41</td>
</tr>
<tr>
<td>Family responsibilities</td>
<td>36</td>
<td>28</td>
<td>33</td>
</tr>
<tr>
<td>Difficulty with transport</td>
<td>27</td>
<td>31</td>
<td>28</td>
</tr>
<tr>
<td>Lack of qualifications/experience/skills</td>
<td>21</td>
<td>27</td>
<td>23</td>
</tr>
<tr>
<td>A health condition, illness or impairment</td>
<td>10</td>
<td>43</td>
<td>23</td>
</tr>
<tr>
<td>Other reasons</td>
<td>27</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>Anxiety/lack of confidence</td>
<td>7</td>
<td>16</td>
<td>10</td>
</tr>
<tr>
<td>Caring responsibilities</td>
<td>9</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Affects receipt of benefits</td>
<td>7</td>
<td>13</td>
<td>9</td>
</tr>
<tr>
<td>Attitudes of employers</td>
<td>7</td>
<td>13</td>
<td>9</td>
</tr>
<tr>
<td>Lack of help or assistance</td>
<td>6</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>A disability</td>
<td>1</td>
<td>16</td>
<td>7</td>
</tr>
<tr>
<td>Difficulty getting into buildings</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Difficulty using facilities</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Attitudes of colleagues</td>
<td>-</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Lack of special aids or equipment</td>
<td>-</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

4.2. Disability and employment: policy interventions

This section considers the way in which policy might help overcome the barriers to employment facing those with disabilities. It considers what the literature that identifies the current policy approaches and programmes, the literature that evaluates specific policy initiatives and their impact on employment. The focus is principally on the UK policy context, but lessons from international experience are also considered.

Conditionality is the principle that entitlement to benefits should be dependent on satisfying certain conditions. The aim of conditionality is to influence the behaviour of working age benefit recipients and to move them into work (DWP 2008). The main assumptions of conditionality are that: while there are many disabled people who cannot work, there is also a significant number of disabled people who are capable of work but need help in getting into employment – for these people incapability benefits are a replacement of unemployment benefits; secondly, being economically active is good both for people’s health and well-being and therefore people should be encouraged to take any employment rather than being dependent on benefits; thirdly that people’s attitudes may prevent them from moving from benefits into employment. Therefore, conditionality stresses the obligations of benefit recipients to behave in a way that brings them closer to employment; in turn they are being offered support to build a route back into employment (Gregg 2008). Many Western countries have introduced conditions applied to the receipt of the out-of-work benefits, to tackle the problem of the growing number of people of working age who are permanently outside the labour market and are dependent on benefits.

The occupational handicap of disabled people occurred at the junction of two problems: first, a disability (physical or mental) affecting on individuals; and second the failure of the labour market to offer them an appropriate job (Dalley 1991). Ways in which physical or mental impairment might immediately affect individuals’ capacity to earn their living include: some individuals facing barriers in terms of access and/or communication but who would be capable of fully productive work if those barriers were eliminated. Another group might be those who can work, but whose output is limited to varying degrees compared to that of other people. Lastly, some disabled people may be wholly unable to take employment (Dalley 1991).

In Britain, under the Universal Credit, conditionality is being extended to those who belong to the first two groups. According to the DWP there are four broad conditionality groups with many disabled people being moved from the group to which conditionality is not applied to the group for whom the benefits payments are conditional on the requirement for clients to take steps towards improving their employability through e.g. skills development, etc. Under the Universal Credit reform there are four following conditionality groups:

- **full conditionality** (active job search and availability for work) – those claiming Jobseekers Allowance;

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• **work preparation** (required to take steps to prepare to work) – people with a disability or those with a health condition which means they have limited capability for work at the current time;

• **keeping in touch with the labour market** (required to attend work focused interviews) – lone parent or lead carer in a couple with a child over age one but below age five; and

• **no conditionality** – people with a disability or health condition which prevents them from working, carers, lone parents or lead carers with a child under the age of one.

However, barriers for employment of disabled people are usually multiple and structural and solving the problems with accessibility and communications for disabled people is not enough to bring them into employment. According to Patrick (2012), successful welfare-to-work programmes for disabled people are informed by the social model of disability (e.g. Barnes and Mercer 2003). This model defines disability as the barriers which operate to prevent disabled people from participating as equals in society. Its application to employment focuses on the societal barriers faced by disabled people seeking work, while the medical model concentrates on an individual’s impairment(s) and work-readiness (Roulstone 2004). Thus, this model is in a sharp contrast with the medical model of disability which individualises the ‘problem’ of disability (Patrick 2012). Therefore policies on disability and employment should balance the measures that are aimed at disabled individuals (improving their access to employment through training, rehabilitation and job finding services) with the “environmental” measures that are aimed at the wider societal context.

Eurofound (2012) argued that good practice in initiatives to support young people with disabilities into the labour market included:

- An integrated approach to skills development, training and job placement is needed for the transition to employment.
- After training, rapid placement in a real job must be ensured if momentum is to be maintained and skills are to remain relevant.
- Individuals must be empowered to take control of their career path and to make real choices over its direction.
- Employers need support with the recruitment, training and retention of staff with disabilities.
- All projects should aim ultimately at open labour market participation for those who are able and who are interested.
- Good projects evolve over time to conform to the active inclusion approach.

They argued that young people were being missed by policies and practice, data collection needed to be improved, the role of mental health needed to be addressed more effectively, service systems need to be better integrated (within government and with other bodies) and their case studies provide some further insights into improving policy (Eurofound, 2012). The emphasis upon empowerment to take control of their career path possibly reflects moves to a more Capabilities Approach to giving beneficiaries a greater voice and assisting them to achieve what they value (Hoywood et al 2012).

The problem of economic inactivity of long-term sick and disabled individuals cannot be solved solely through changing the behaviour of disabled/long-term ill benefit recipients. The barriers to employment for these people are often structural and go far beyond the individual level.
characteristics of the benefit recipients. Therefore together with support that improves the employability of disabled people and helps them to access employment, policy interventions should be directed towards:

- developing an integrated policy approach to job placement, skills development, training, job placements and in-work job support;
- ensuring rapid movements from training to job placement to maintain momentum;
- developing financial and other help for people to allow them to make the transition from benefits to paid work;
- introducing and further developing fiscal measures that support the employment of disabled individuals;
- creating incentives for employers to hire disabled people;
- subsidising employers’ adjustment in the workplace according to needs of disabled workers and providing other relevant support to employers;
- creating a societal climate of acceptance and support for the employment of people with disabilities;
- improving anti-discriminatory legislation;
- increasing the awareness of disabled people and employers of anti-discriminatory legislation;
- improving cooperation between different stakeholders; employers, employment services, health services and social services.

Policies to bring disabled people into sustainable employment which are discussed in this literature review are built around three main themes:

1. Policies to increase the employability of people with disabilities;
2. Characteristics of the employment environment which make them disability friendly/unfriendly and policy interventions directed towards making the employment environments more suitable for disabled individuals;
3. Disability legislation and awareness of disabled people, employers and the general public about this legislation; attitudes towards disability among employers and general public and policy initiatives directed towards changing these attitudes.

4.2.1. Compensation and integration dimensions of social policies on disability

A recent OECD (2012) report compared the disability policies in OECD on two dimensions, compensation and integration. The Compensation dimension includes subjective indicators of disability and sickness benefit values and availability. It includes, for example, measures of the strictness of medical and vocational tests plus the duration and permanence of benefit entitlements. Public spending on disability is dominated by “passive” payments of benefits. Integration policies are characterised with active spending. Although in many OECD countries there has been a shift from “passive” spending towards and “active” labour market policies over recent decades, these are increasingly focused on disability, such as investment in employment support and vocational rehabilitation. The share of active spending is generally small, around 4% or less of general spending
on disability benefits in 15 OECD countries including the UK, with more in those countries with a relatively higher proportion of working age population on disability benefits and also countries where disability numbers have grown fastest, such as Ireland, New Zealand and the United States (OECD 2010). Only in Belgium, Denmark, Germany, the Netherlands and Norway was active spending more than 10 per cent of passive spending.

Detailed econometric analysis in the OECD report finds significant effects of changes in benefit or compensation policies on the number of working-age people claiming disability benefit. For example, changes in ‘gate-keeping’ have generally been successful in curbing flows of people onto disability benefits. The effect holds even when differences in demographic, economic and labour market conditions are taken into account. However, report finds that integration policy taken as a whole has merely a modest, statistically insignificant effect on the numbers on disability benefits.

The report concludes that the main reason as to why more employment-oriented approaches have not, so far, improved labour market outcomes of people with disability are related to:

- slow implementation,
- lack of resources,
- lack of employment opportunities for longer-term disability beneficiaries;
- lack of financial incentive for employers;
- insufficient coordination between different stakeholders.

Therefore there are the areas that policies aiming at disability and employment should address to improve the likelihood of their success (OECD 2010).

4.2.2. Individual level barriers and policies which target these barriers

Individual level intervention policies target those characteristics of disabled people which prevent them from looking for job, being hired, or sustaining employment. Many such policy interventions to bring disabled people back in the employment are based on the social model of disability, which attributes exclusion from labour force of disabled people to systematic barriers rather than seeing this exclusion as a result of physical and functional limitations exposed on people by disability (Bell and Heitmueller 2009).

Disabled people and qualifications

One of the main barriers is the poor employability of disabled people, who often have low level of qualifications and skills and also lack confidence (see for instance, McQuaid and Lindsay (2005) who stress the individual characteristics, personal circumstances and external factors in influencing a person’s employability). This poor employability makes it difficult for disabled people to find a job in contemporary highly comparative dynamic and technologically advanced labour markets.
The OECD data (2010) show that in all OECD countries for which that data are available people with disabilities have lower levels of education and twice as many of them have lower than upper-secondary education than the population without disabilities.

An important policy implication of this is how to improve qualifications, especially at school level, but also post-compulsory education. In the UK young people with disabilities are significantly less likely than non-disabled people to have good secondary level qualifications and to enter higher education; they are twice as likely as non-disabled people to have no qualifications (EHRC 2010). Disabled people in the working-age population are less likely to have gained any qualifications compared with non-disabled people and far fewer disabled people in the GB working-age population have obtained a degree level qualification compared with nondisabled people (11.4 per cent compared with 21.8 per cent in 2008) (Riddell et al. 2010). The LFS data for Northern Ireland show that although between 2006 and 2012 the proportion of working age disabled people without qualifications decreased by a quarter, and the proportion of those with a degree level qualifications increased over the same period, still in 2012 compared with people without disabilities, people with disabilities were three times less likely to have a degree level qualifications, and 2.5 time more likely to have no qualifications (see chart 2.9 in Chapter 2). The labour market position of disabled people with no qualifications has declined dramatically over time. In 1974-76, more than three quarters of this group were in employment, compared with just over a third in 2001-2003 (source LFS data for Great Britain from Office for Disability Issues, cited from Riddell et al. 2010).

This decline in the labour market prospects of people with no qualifications has had a much more adverse effect on disabled people than others. Thus, during 2001-2003 while among those with tertiary level of qualifications, 75% of men with disabilities were in employment as opposed to 93% of men without disabilities, among the men without any qualifications only 38% with disabilities were in employment compared to 85% of men without disabilities. Using the National Equality Panel data from 2010 Riddell et al. (2010) also shows that that the majority of men with no limiting long-standing illness are in work, those with the highest qualifications are slightly more likely than those with lower qualifications to be in work and those with no qualifications are least likely to be in work.

Disabled graduates achieve similar, but slightly lower degree and labour market outcomes overall compared with non-disabled students. However, there are considerable differences in labour market outcomes depending on impairment. For example, graduates with dyslexia are most likely to be in full-time employment (52.9%) compared with 37.5% of graduates with mental health conditions (AGCAS 2009).

Other policies that target individual level barriers to employment

Comparative analyses of different welfare-to-work policies or active labour market polices distinguish between “work-first” model (typical for the USA) which is based on the assumption that any work is better than no work, because work discourages dependency and promotes responsibility and therefore prioritised a labour market attachment, and a “human capital” model (used in Nordic and continental European countries) which stresses on the necessity to help welfare recipients who
are isolated from the society to re-integrate back in the society through the labour market integration (Dean 2003; Lindsay et al. 2007). International examples of welfare-to-work programmes include:

1. Education, training and work trial (improve claimants’ skills, education and training to increase ‘employability’); labour market agreements for persons with disabilities (Canada); Job Preparation Premium; Permitted Work Rules (UK); Resting Disability Pension (Sweden).
2. Offering financial incentives/disincentives for welfare claimant’s to increase incentives to gain employment (Tax credits (UK); Return to Work Credit (UK), Permitted Work; Job Preparation Premium)
3. Health condition/impairment management; Medical rehabilitation and/or advice on health condition management to improve fitness to work (Medical/vocational rehabilitation (Canada, Denmark, Norway, Sweden), Dagmar (Sweden), Condition Management Programme (UK)) (see Table 4.3 for more details).
4. Individualized case management and job search assistance, individualized vocational advice/job search assistance on a case management basis (Canada Pension Plan Disability Vocational Rehabilitation Program (Canada), New Deal for Disabled People, Pathways to Work (UK))

Historically UK welfare-to-work programmes were based on a mixed model – while they have emphasis on moving into jobs benefit recipients, they also offer education, training, advise, etc. (Dean 2003) to improve their employability and to offer suitable and sustained employment. The “active” policy initiatives are directed at improving level of qualifications and skills and providing people with financial support during financial problems related to transition from benefits to paid work include such elements as:

- Professional rehabilitation programmes;
- Employment programmes;
- Supported and subsidised employment;
- In-work benefits.
### Table 4.3: Examples of policies aimed at targeting disabled individuals that focus on potential employee behaviour

<table>
<thead>
<tr>
<th>Type of intervention</th>
<th>Examples of interventions and years of operation</th>
<th>Logic/specific content</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individualized case management and job search assistance</td>
<td>Canada Pension Plan Disability Vocational Rehabilitation Program</td>
<td>Individualized vocational advice/job search assistance on a case management basis</td>
<td>Canada</td>
</tr>
<tr>
<td></td>
<td>New Deal for Disabled People, Pathways to Work</td>
<td></td>
<td>UK</td>
</tr>
<tr>
<td>Offering financial incentives/disincentives for welfare claimants</td>
<td>Tax credit</td>
<td>Financial incentives/reduced benefit generosity increases incentives to gain employment</td>
<td>Canada, UK</td>
</tr>
<tr>
<td></td>
<td>Job Grant, Return to Work Credit, Job Preparation Premium; Permitted Work Rules</td>
<td></td>
<td>UK</td>
</tr>
<tr>
<td></td>
<td>Resting Disability Pension</td>
<td></td>
<td>Sweden</td>
</tr>
<tr>
<td>Education, training and work trial</td>
<td>Labour Market Agreement for Persons with Disabilities</td>
<td>Improve claimants’ skills, education and training to increase ‘employability’</td>
<td>Canada</td>
</tr>
<tr>
<td></td>
<td>Employers’ duty to provide</td>
<td></td>
<td>Denmark</td>
</tr>
<tr>
<td></td>
<td>Residential Training</td>
<td></td>
<td>UK</td>
</tr>
<tr>
<td>Health condition/impairment management</td>
<td>Medical/vocational rehabilitation</td>
<td>Medical rehabilitation and/or advice on health condition management to reduce employment limitations</td>
<td>Canada, Denmark, Norway, Sweden</td>
</tr>
<tr>
<td></td>
<td>Dagmar</td>
<td></td>
<td>Sweden</td>
</tr>
<tr>
<td></td>
<td>Condition Management Programme</td>
<td></td>
<td>UK</td>
</tr>
</tbody>
</table>
Box 4.1: Assistance with improving employability: UK examples

One Advisory Service (2000-2002) integrated the Employment Service and Benefits Agency into a single point of contact tailored to the needs of individuals. In 12 pilot areas new and repeat claimants were assigned a Personal Adviser (PA) to process their benefit claim and some point were required, through work-focused interviews, review their job readiness, options for work, and barriers to work (see Table 2B). Such services as a better-off calculation and advice about in-work benefits were also provided. There is no conclusive research evidence that this programme improved labour market outcomes of disabled people.

New Deal for Disabled People (1999-) Under the New Deal, claimants of incapacity benefit voluntarily undertake work-focused interviews to access an individualised package of job search activities, access to appropriate training and other employment advice (including in-work support for those gaining employment) delivered through a network of private, voluntary or public sector Job Brokers. Again, there is no conclusive evidence that this programme has a positive impact on the employability and subsequent employment of disabled people. Many studies provide evidence of selection into the programme and of a very low up-take, as a result of low levels of awareness about the programme among eligible individuals and employers (see Table 4.4 for further details).

Pathways to Work (2003-) new and repeat IB claimants were required to go through mandatory work-focused interviews eight weeks into their claim, with the possibility of five more at monthly intervals. (Pathways was also open to existing claimants a voluntary basis, although take up from this group was very low.) Personal Advisors provided individualised advice and support to facilitate claimants’ return to work. Evaluation studies show that participation in the programme increases the probability of employment, increased monthly earnings and reduced the probability of claiming incapacity benefits again. However there is also some evidence the programme helped mostly those who already were “close” to the labour market (see Table 4.4 for more details of these programmes evaluations).
Table 4.4: Policy evaluation examples from the UK

<table>
<thead>
<tr>
<th>Sources of evaluations review</th>
<th>Programme evaluation</th>
<th>Country/years of operation</th>
<th>Focus/Content/delivery</th>
<th>Evaluation</th>
<th>Main problems /Conclusions</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>ONE Advisory Service evaluations</td>
<td>UK; introduced between 1999 and 2001 in 12 pilot areas.</td>
<td><strong>Focus</strong>: Disabled people who claim benefits; since 2001 sick/disabled claimants in pilot areas were required to attend a work-focused meeting&lt;br&gt;<strong>Content</strong>: Integrated the Employment Service and Benefits Agency into a single point of contact tailored to the needs of individuals; Personal Advisors support tailored to needs of specific clients&lt;br&gt;<strong>Delivery</strong>: Basic; Call Centre; Private/Voluntary Sector</td>
<td>(5 studies)&lt;br&gt;<strong>Cohort study</strong> (n= 4783) did not find a statistically significant increase in the employment rates between control and comparison zones (from 4 to 5 per cents increase in both zones).&lt;br&gt;<strong>Repeated cross-sectional survey</strong> of 5% sample of UK benefit claimants did not find statistically significant, probability than disabled person would leave benefits as a result of the programmes.</td>
<td>Evidence from qualitative studies:&lt;br&gt;(103 clients and 72 staff) although both groups viewed the new approach as improvements, many problems were identified.&lt;br&gt;1. focus of sorting out benefit claims&lt;br&gt;2. shortage of time for work related activities&lt;br&gt;3. limited advice about or referral to external sources of work training&lt;br&gt;4. lack of skills to work with disabled people&lt;br&gt;5. creation of Jobcentre plus pathfinders in 2002 impacted negatively on outcomes</td>
<td>Green et al. 2003, Osgood et al. 2002, Kirby et al. 2003, Kirby 2004, Kelleher et al. 2002</td>
<td></td>
</tr>
<tr>
<td>New Deal for Disabled People pilot</td>
<td>UK; piloted in 1999, extended nationally in 2001</td>
<td><strong>Focus</strong>: Disabled people who claim benefits&lt;br&gt;<strong>Content</strong>: voluntary job interviews to access i. individualised job search activities&lt;br&gt;ii. employment advise and training&lt;br&gt;<strong>Delivery</strong>: through a network</td>
<td>(12 studies)&lt;br&gt;<strong>Retrospective controlled cohort</strong> (5222,596 interventions; 44,049 control) found statistically significant increase in employment rates (11% for existing and 7% for new claimants) and significant reduction in benefit recipient (16% for existing and 13% for new claimants). For long term claimants and those &quot;hard to</td>
<td>Selection bias due to voluntary nature of interviews – those who co-operated on a voluntary basis were probably closer to employment/ wanted to work.</td>
<td>Adelman et al. 2002, Ashworth et al. 2003, Kazimirski et al. 2005, Corden et al. 2003, Lewis et al.</td>
<td></td>
</tr>
</tbody>
</table>
of private, voluntary or public sector Job Brokers place”, from more disadvantaged areas the positive effect was stronger. No differences by Job Brokers were found.

**Uncontrolled longitudinal analysis of 4082 New Deal registrants:**

<table>
<thead>
<tr>
<th>Study</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aston et al.</td>
<td>2003 2005</td>
</tr>
<tr>
<td>Davis et al.</td>
<td>2006</td>
</tr>
<tr>
<td>Heenan et al.</td>
<td>2003</td>
</tr>
<tr>
<td>Pires et al.</td>
<td>2006</td>
</tr>
<tr>
<td>Woodward et al.</td>
<td>2003</td>
</tr>
</tbody>
</table>

**Pathways to Work pilot**

**UK (2003-)**

**Focus:** all new and repeat IB claimants

**Content:** The programme involves mandatory meetings (Work Focused Interviews (WFIs)) with an Incapacity Benefit Personal Adviser (IBPA) and specialist services focusing on work and health aimed at helping incapacity benefit claimants back into work.

(10 studies)

**A prospective controlled cohort study** (n=8035 in 7 pilot areas)-reported that after 10,5 months intervention groups shown increase in both the probability of being employed (9% increase) and the monthly earnings (£71) and reduction in the probability claiming IB. In 18 month follow up study (n=5,784) found 7% increase in the likelihood of employment (especially for women/with dependent children) was found, but no increase in earning.

**Selection bias** (new claimants are only 10% of all claimants)

Qualitative studies found: importance of structured attention provided by PA.

However mostly those clients who were closer to employment stated that they benefited from the participation.

Longitudinal qualitative study found that according to the clients, the program did not manage to overcome the main barrier – weak local labour markets and attitudes of employers.

Further studies revealed that PA indeed tailored their support according to the proximate of the client to the labour market (because PA wanted to be cost effective).

**Program was not able to provide long term engagement with the labour market**

Adam et al. 2006; Bewley et al. 2007; Barnes et al. 2006; Dickens et al. 2004a 2004b; Dixon et al. 2007; Knight et al. 2005; Corden and Nice 2006a 2006b 2006c; Corden et al. 2005;
**Interventions offering financial incentives for disabled people**

| Return to Work Credit | RWC was introduced in 2003 as a part of Pathways. | RWC consists of a payment of £40 per week for up to 52 weeks to new IB claimants returning to work for 15+hours per week and earning less than £15,000 p.a. | (6 Studies) Some reported Positive impact of RWC – assists lasting transition from benefits to work, boosting people’s confidence about their financial situation | Some concerns were expressed that Credits support low paid work; **Longitudinal qualitative study** reported a limited uptake (mostly women working part-time on low paid jobs) that Credits provide support for clients who are close to employment or already returned to work; decision about returning to work does not depend on Credits. Findings indicate that Single people faced a benefit trap as the threshold earnings cut off for Working Tax Credit was higher for couples, which made working over 16 hours more viable for them | Barnes et al. 2006; Dixon et al. 2007; Knight et al. 2005; Corden and Nice 2006a 2006b 2006c; Dewson et al. 2005 |
| Permitted Work (PW) | 2002 | PW rules allow IB claimants to work up to 16 hours per week and earn up to £88.50 per week for up to 52 weeks (or earn £20 per week indefinitely) without losing benefits. | (2 studies) Uncontrolled and unrepresentative sample of 1435 PW claimants found that at the final interview 58% of respondents were in work, 33% of whom were still claiming incapacity benefit under Permitted Work | Tax Credit was higher for couples, which made working over 16 hours more viable for them | Dixon et al. 2007; Corden et al. 2005; Corden and Nice 2006; Barnes and Hudson 2006 |

**Management of health conditions to improve fitness at work**

| The Condition Management Programme (CM Programme) | Designed to address the three main conditions reported by those claiming incapacity benefit - mental health issues, cardiovascular & musculoskeletal problems Attempted to tackle such issues, as anxiety, pain management, lack of confidence. | 7 evaluation studies. All studies concluded that the programme helped the clients to move closer to if not into employment. A study that matched existing IB claimants with PA reported that PA viewed this program as the most appropriate for those who are furthers away from the LM; helped clients to deal with their health conditions in day to day life. | PA often did not have sufficient knowledge of health conditions, particularly mental health conditions, which could lead to inappropriate referrals and unsuccessful outcomes. Indication that the CM programme is more useful if undertaken along with other interventions (e.g. JobCentre Plus). Little evidence was found that this programme had an effect on the probability of clients to return to work. | Dixon et al. 2007; Corden et al. 2005; Corden and Nice 2006; Barnes and Hudson 2006 |
4.2.3. Wider level barriers and policies addressing these barriers

Wider barriers to the employment of disabled people include such factors as local labour market conditions as well as macroeconomic conditions. Employability of disabled people is being affected by macro-economic factors to a greater extent than of the other workers. The global economic trends are also not in favour of people with disabilities. The global shift towards high skill economy and contraction of low skilled labour market coupled with people with low level of qualifications who being overrepresented among those disabled results in an extra labour market penalty. Indeed, among disabled people without qualifications, employment rates halved between the mid-1970s and the early 2000s - over this period employment rates among disabled men with tertiary qualifications reduced from 95 to 75 %, while among disabled men without any qualifications the employment rate reduced from 77 % to 38% (Riddell 2010). Furthermore, in the current climate of economic downturn and austerity, with cuts in the public sector (where many disabled people work), and reduction in/making more restrictive an access to the income replacing benefits, (which many disabled people rely on as their main/only source of income), there is a real risk that disabled people are those who are being hit hardest and their labour market disadvantage which is great as is, may grow further. The evidence suggests that people with disabilities are the most vulnerable to the labour market fluctuations and experience the strongest negative impact of economic recessions (OECD 2010). Therefore during the period of economic downturn it may be difficult to implement effective programmes which increase the labour market participation of disabled people – those receiving disability benefits may be unlikely to give up these benefits and exchange them for a uncertainties related to having a paid job (which could be short-term and/or low paid) for risk of unemployment, in an unstable labour market, during the period of economic turmoil.

At the societal level disabled individuals face multiple barriers to employment. These barriers include prejudice and discrimination against disabled people, lack of suitable jobs, lack of commitment from employers, etc. Policies that target the societal barriers include anti-discriminatory legislations, policies developing coordination between services that aim at increasing employability of disabled and employers, and policies that create incentives for employers for hiring disabled people, etc.

Anti-discriminatory legislation, awareness and attitudes of employers

Examples of anti-discriminatory legislation in five countries are given in Table 4.5 According to the different studies in the UK (Roberts et al. 2004; Kelly et al. 2005; Simm et al. 2007; Loretto 2010) about three quarters of employers are aware about the anti-discriminatory legislation, however the level of the awareness is higher among the public sector employers, large employers and those who already employ disabled people. The studies also find that there was a low level awareness among the employers about the DDA main provision – to make reasonable adjustments for disabled employers. According to the studies, although a majority of employers stated that all employers in their workplace had equal opportunities, at the same time around the half of them admitted that it would be difficult to recruit and retain disabled employees because of the existing workplace practices. Some studies suggest that the lack of action of employers when workplace adjustments are considered is due to the lack of sanctions (Holmgren et al. 2007; Selander et al. 2007).
Table 4.5. Anti-discrimination legislation in 5 countries focused on employer behaviour

<table>
<thead>
<tr>
<th>Examples of interventions and years of operation</th>
<th>Logic/specific content</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Rights Act</td>
<td>Prohibits employment</td>
<td>Canada</td>
</tr>
<tr>
<td>Employment Equity Act (1986,1996)</td>
<td>discrimination and covers workplace adjustment</td>
<td></td>
</tr>
<tr>
<td>Prohibition of Discrimination in Working Life of People with Disability Act (1999)—</td>
<td>Prohibits employment discrimination against disabled people in recruitment/employment and workplace adjustments</td>
<td>Sweden</td>
</tr>
<tr>
<td></td>
<td>discrimination against disabled people in recruitment/employment and workplace adjustments</td>
<td></td>
</tr>
</tbody>
</table>

Four mixed methods studies examined the awareness of employers of the DDA and their attitude to its implementation. No evidence of improvement in employment rates at the population level for people with limiting long-term illness was found; however some evidence was presented that the employment situation had worsened for some groups after DDA was introduced (women, low skilled, mental health problems) although it was not possible to attribute these to the operation of DDA (Bambra and Pope 2007; Bell and Heitmueller 2005; Jones et al. 2005; Pope and Bambra 2005; Roberts et al. 2004; Simm et al. 2007).

Goldstone (2003) analysed barriers to the employment of disabled people and analysed employers’ attitudes and practices towards the employment of disabled people, based on the Wave 1 data from Multi-purpose Survey of Employers (1996). Below are his findings in more detail.

- **Attitudes:** The findings demonstrate that majority of employers had a positive attitude towards the employment of disabled people. A substantial majority of the respondents (from 75% to 84%) disagreed with statements that disabled employers are inappropriate for customer-facing employment, that they may make other staff feel uncomfortable or less they are less productive with 55% of the employers agreed that the employment of people with disabilities was widely seen as beneficial for other people and to have a positive impact on staff and morale.

- **Awareness about anti-discriminatory legislation.** The survey’s data show that the vast majority (73%) of employers were aware about anti-discriminatory legislation, and in particular about the 1995 Disability Discrimination Act. They were also were aware about employment programmes for disabled people, such as the New Deal for Disabled People.
(NDDP) (35%), then for Access to Work Programme (26%), the Disability Service Teams (DST), and the Supported Employment Programme (SEP) (16%). Half of the surveys organisations had a policy which covered the employment of disabled people and in 65% of organisations there was at least one disabled employee. Among organisations with disabled employers 72% recruited disabled employees and 37% had one or more workers who became disabled when already employed.

- **Adjustment at workplace**: Many employers reported about workplace adjustments which they made to meet need of their disabled employees. The most common adjustments were provision of special equipment, modification of the workplace and allowing flexible hours. Other, less common adjustments included the job support, training and counselling for disabled people, although these were not usually seen as adjustments. However, most adjustments were more commonly reported in larger workplaces with only a quarter of employers viewed the additional cost related to the workplace adjustments for disabled people as normal.

**Policies directed towards adjustments at workplace**

These policies aim at improving workplace/employment accessibility and include legal or financial measures to remove or reduce barriers to accessibility of work and employment for disabled/chronically ill people. Workplace adjustments include changes to work organisation, such as reducing working hours, flexible working times, or reduced working hours, as well as adaptations to the building, provision of workers with special equipment and/or support workers, etc.

Examples of these initiatives can be found in different countries:

- **UK - Access to Work (AtW)** programme provides advice and financial support for travel to work, workplace aids and workplace adjustments (up to 100%). It can help meet the costs of such things as workplace adjustments, support workers and travel to work to help a disabled person take up or retain paid work. Applications are made by individual disabled people who are entering, or already in, paid work, including self-employment (see Table 4.5 for more details and the evaluation).

- **Canada** - Most costs for the workplace adjustment for the needs of disabled employees are covered by employers. Some time-limited support is available through the Labour Market Agreement for People with Disabilities (LMAPD) and the Opportunities Fund. Provincial Workers’ Compensations Boards provide support for reasonable adjustments for workers injured within workplace.


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46 According to the DDA.
47 Studies of employers’ attitude towards hiring disabled people conducted elsewhere report very similar findings about the employers’ awareness about the disability issues and their attitudes towards the employment of disabled people (e.g. Able Trust, 2003). This study included 306 businesses in Florida. The response rate was low, 5.7% (5358 questionnaires were sent out by post) therefore generalizations to populations of employers are problematic.
• **Sweden** – The workplace adjustments for disabled are regulated through the Working Life Fund/duties in Work Environment Act (1977). Ordinances provide public financial support to employers to facilitate provision of working aids and workplace adjustments (Sweden).

There are studies that find that these policies play important role in the labour market integration of disabled people. Thus Johanson et al. (2006) find that opportunities to adjust one’s workspace to one’s state of health are positively related to return to work after a long term illness. UK studies (Beinart et al. 1996; Hilage et al. 1998; RNIB 2004; Thirnton et al. 2002) also find that workplace adjustments play an important role in the decision to return to work of disabled employers. However, Clayton et al. (2011) find some evidence that the workplace adjustments are being offered to a selective group of disabled employers (e.g. to those who are in highly valued jobs, young people, or to those with particular disabilities, etc.) and therefore it is difficult to make general conclusions about the relationship between the work-place adjustments and return to work of disabled people.

Clayton et al. (2011) concluded from the review of the evaluation literature that overall there is evidence from the UK and elsewhere that workplace adjustments, when existing, improve the employment chances of disabled people. However, to have an impact on the overall level of employment of people with disabilities, they need to be introduced on a much larger scale and to be available for disabled people with different level of skills, and especially for disabled people with a low level of skills and with a wide range of disability conditions.

**Employer targeting policies: Subsidised employment schemes**

These policies aim at increasing job opportunities of disabled workers through job creation or financial incentives to employers to employ disabled or chronically ill people and intend to help to employers to overcome the costs (potential, real, or perceived) of employing a disabled worker. In different countries these initiatives include;

• **UK** - Job subsides for disabled are provided through **Job Introduction Scheme**, 13-week flat-rate (modest) subsidy to employers hiring benefit recipients with a disability/chronic illness. **Work Trial** 15-day unsalaried work trial for disability benefit recipient (who continued receiving incapacity benefits).

  - **Remploy** provide sheltered employment, rehabilitation and training for disabled workers and to increase the employment opportunities of disabled people and those who experience complex barriers to work. It consists of the factory network (**Remploy Enterprise Businesses**) and **Remploy Employment Services** support disabled people into work with mainstream employers (see Table 4.6 for further details and the programme’s evaluation).

• **Canada** – There are various provincial level time-limited schemes supported through **Opportunities Fund** and the **LMAPD** to provide wage subsidies to hire people with disabilities

• **Denmark** – Wage of disabled people are being subsidised through **Flexjobs** (Box 4.2) - national programme that enables employers of people with disabilities to claim up to two-thirds of the disabled employee’s wages as a subsidy, Icebreaker.

• **Norway** – The programme Active Sick Leave (**ASL**) allows workers with a reduced work capacity to return to work with 100% wage subsidy.
In the UK two qualitative studies which looked at the experiences of those enrolled in “Job Introduction Programme” and “Work Trial” find that disabled people viewed the wage subsidy too small to act as an incentive (Scheel et al. 2002a, Atkinson and Kodz 1998) and that employment obtained as the result of these programmes was low paid and low skilled.

Datta Gupta and Larsen (2008) conducted an evaluation of the effects of the Danish ‘flexjob’ programme on the employment of 18- to 59-year old disabled people with and without reduced working capacity compared with a control group of non-disabled people. The study found that there was improvement in employment for the 35-44 years old disabled people with reduced work capacity. However, it was also found that wage subsidies are available for mostly for low skilled and low paid jobs. According to evaluation reviews (Clayton et al. 2011) work subsidies work as incentive if they are generous enough, however, they may also have an adverse effect, if they are too high relatively to the level of the job. The latter could create a segregated form of employment for disabled workers and further social exclusion.

In Norway, Active Sick Leave (ASL) is universally available, however, only 1% of eligible individuals took up the programme. Large study that used cluster-randomized controlled trial of two strategies aimed at improving the use of ASL found that the intervention increased the uptake to 18% with different categories of the ASL clients returning to work on higher rates than those who did not take up ASL (Scheel et al. 2002b, Hohnen 2001).

Financial incentives have been used both to assist disabled and long-term sick benefit recipients in returning to work, and to maintain their income while in work. This type of intervention intends to assist people with a transition from benefits to paid employment and/or to support people who moved from benefits to a part time and/or low income job (Clayton et al. 2011). In the UK there are two types of financial incentives for disabled people in employment:
- Return to Work Credit and
- Disabled Person’s Tax Credit.

The Return to Work Credit (RWC), introduced as part of Pathways to Work and consists of a payment of £40 per week for up to 52 weeks to new IB claimants returning to work for 15+ hours per week and earning less than £15,000 p.a.

All evaluation studies found that RWC undoubtedly assists with transition from benefits to work. However, the studies also indicate that the RWC provide an incentive or support for claimants already thinking about returning to work. No clear evidence was found that return to work of IB client was dependent upon RWC (Corden et al. 2006). Similar findings were reported for the Disabled Person’s Tax Credit. Although it provided them with extra money when they moved into work, they do not impact the decision to move into employment (Corden and Nice 2006a, 2006b).
Recent directions for disability employment programmes in the UK

The most recent examples of policies of the UK policies aimed at activating disabled people are examined and evaluated in the Sayce Review (2011) on recent directions for disability employment programmes in the UK. Sayce considered four programmes which DWP fund to support disabled people to get back into employment: Access to Work, Remploy, Residential Training Colleagues and Work Choice and Work Programmes.

Box 4.2: Flexjob

In Denmark the “Flexjob” programme introduced wage subsidies for working age disabled people. Under this scheme, jobs are both subsidized and associated with special working conditions, e.g. reduced working hours, adapted working conditions, and restricted job demands. Employers, who hire eligible workers, are entitled to a partial wage subsidy – graduated according to the degree of reduction of working capacity – corresponding to either ⅓, ½ or ⅔ of the wage up to a cap of the minimum negotiated wage as stipulated in the relevant collective agreement. The wage paid is for full-time work even though a reduction in hours can be negotiated with the employer. Unlike many other wage subsidy programs, the subsidy is unlimited in duration, existing as long as the worker retains the subsidized job. To be eligible for a subsidized job, the individual must have suffered a permanent reduction in working capacity and must have exhausted all other avenues of obtaining unsubsidized employment as determined by the competent local government authorities.

Evaluations of this programme found some evidence that as the result of the programme the probability of employment increased for disabled people 35-44 years of age with reduced work capacity and for all age groups (but in particular for the oldest age) among disabled people without reduced work capacity (see Table 3). However, evaluation studies shown that studies that the programme was not very successful in terms of utilising the human capital of disabled people with many of them being side-tracked into low paid and low skilled jobs. The association between disability and characteristics of jobs which disabled people performed could influence the way how employability of disabled people were perceived by other employees and society in general may limit the effectiveness of subsidized employment in terms of social inclusion.

The evaluation studies also show that the majority of subsidized jobs through the Flexjob programme went to disabled people who would find a job even in the absence of this programme. The studies show that the programme does not have any built in skills training and has a very low cost effectiveness in particular compared with programmes that are directed towards that skill training. Also although the introduction of the FlexJob-scheme seems to improve employment for long-term disabled individuals with partial working capacity, it does not reduce their use of disability pension.

**Access to Work** is a specialist disability employment programme delivered by Jobcentre Plus. It can help meet the costs of such things as workplace adjustments, support workers and travel to work to help a disabled person take up or retain paid work. Applications are made by individual disabled people who are entering, or already in, paid work, including self-employment. The support is flexible and personalised to meet individual need, and there are no upper limits on support or any maximum duration for support.

**Remploy** is a non-departmental public body sponsored by the DWP to provide sheltered employment, rehabilitation and training for disabled ex-servicemen and to increase the employment opportunities of disabled people and those who experience complex barriers to work”. Remploy receives Grant-in-Aid each year to deliver a range of employment and development opportunities to disabled people mainly under the Government’s Work Choice programme. It consists of the factory network (Remploy Enterprise Businesses) and Remploy Employment Services support disabled people into work with mainstream employers The network of **Residential Training Colleges** provides their clients with holistic supports and a highly-specialised services which deal with vocational training, independent living skills and adapting to being disabled. **Work Choice Programme** was launched in October 2010 and is designed to help people facing complex disability-related barriers find and sustain work. The **Work Programme**, launched in June 2011, is helping a wide range of disabled people and people with health conditions in flexible and innovative ways, which respond to each individual’s personal circumstances to address the barriers they face in the labour market.

The Review (Soyce 2011) made a large number of recommendations based on the programmes evaluations. The main theme was that the resources should be directed towards disabled people themselves, rather than the institutions, giving them maximum choice and control in the services they receive. The government followed these recommendations with public consultations, during which more than 1,400 individuals and organisations had responded. In Table 4.6 we summarise the characteristics of programmes reviewed, recommendations made by Sayce’s Review, some responses from public consultations and proposed responses by the Government.

As the result of the report the Government aims to establish a system of specialist employment support that meets the needs and aspirations of disabled people now and in the future. In particular, Access to Work programme will be reformed so that it will target also small employers and under-represented groups, such as young people, those with learning disabilities or mental health conditions. Remploy programme was also reformed (see Table 4.6) and the money freed from Remploy was to be channelled into Access to Work and other programmes.

**Policies toward better coordination/cooperation**

Some policies aim to improve co-ordination and co-operation between health services, welfare services, employment agencies and employers to improve health conditions of employers and enhance labour market re-integration of long-term sick and disabled people.

These policies exist in many countries and play important role in engaging people who became long term sick or disabled with employment. They require a highly developed coordination between
employers, health services and social welfare workers; a poor coordination may hinder the return to work of people with disabilities.

Many existing policies are successful but mostly directed at those who were employed and became sick/disabled. For example, in some countries there are requirements for employers to engage in return-to-work planning to speed up and improve process of return to work for sick-listed people who may lose contact with work environment if absent for long periods. However policies that target those long-term sick and disabled people who never worked are less developed (Clayton et al. 2011).

Examples of these policies include:

- The Condition Management Programme in the UK (Box 4.4);
- Glasgow Works (Box 4.5) - aims to improve employability and chances of sustained employment of long-term unemployed and those who never had a paid work through provide ongoing support to help clients not only to get a job but also to adjust to working, and help ensure that clients are placed in suitable jobs, rather than job placement by itself being the target. Glasgow Works contains many strands, including programmes for long-term disabled people, young offenders, young parents, people with learning disabilities, and the Roma community.
- Under Workers’ Compensation (for work-injured employees only) employers obliged to initiate and lead the development of an individual return-to-work plan (Canada);
- ASL programme requires employers to initiate rehabilitation assessment after 4 weeks of sick leave in cooperation with the health and medical care system (Norway).
- Enhanced return-to-work planning and improvement in coordination between employers, health-care professionals and social security office (Sweden)).

In Sweden, where the emphasis is on the early intervention and the responsibility of occupational rehabilitation of disabled employee is placed with employer Karrholm et al. (2006) used 64 matched pairs (the employment and length of sick leave of the intervention group was compared with clients undertaking rehabilitation in the normal fashion), and found that the intervention group had substantially less sick leave than the comparison group. Qualitative studies from Sweden (Nordqvist et al. 2003; Gard 2004; Holmgren 2007; Ostlund 2001) found that sick-listed employees viewed support from the employer as a vital element of the rehabilitation process. However, despite legislation requiring employers to engage in return-to-work planning, other studies (Marnetoft et al. 1997; Selander et al. 1998) found that only a few employers were indeed engaging in such rehabilitation.
BOX 4.3 Factors that affect the employability of those with long term illnesses and disabilities

INDIVIDUAL LEVEL

Individual characteristics:
- A health condition, illness or impairment
- Employability factors such as age, qualifications, skills, labour market experience

Benefits barriers – fear to lose benefits without a guarantee of making a sustainable transition to paid employment

Lack of confidence, anxiety

Attitudes: Beliefs about the availability of appropriate work, attitudes to work, perceptions of the level of discrimination towards disabled, perceptions about societal attitudes toward disabled; awareness of disabled people about anti-discriminatory legislation.

HOUSEHOLD LEVEL

Household
- Caring responsibilities
- Availability of help and support
- Availability of other income

WIDER ECONOMY AND SOCIETY

Employer
- Employer’s attitude to employment of people with disabilities and to flexibility and workplace adjustment for those with disabilities
- Size and sectors of employers

Local area
- Local labour market demand and jobs offered (e.g. pay, flexibility)
- Transport and isolation (both rural and deprived communities within urban areas)
- Access barriers (lack of suitable personal transport, etc.)

National level:

Policies towards disabled:
- State legislation on disability and disability benefits
- Services that manage health conditions, occupational rehabilitation services
- Welfare to work programmes (e.g. financial help for people to allow them to make the transition from benefits to paid work)
- Programmes that target the employability of disabled people (skills development, work experience) and create work places for disabled people
- Programmes that help disabled people with access to work and work place adjustments
- Programmes that target employers (create incentives for employers to employ people with disabilities through wage subsidies, funding of work place adjustment, etc.) and the provision of work place adjustment for disabled people
- Cooperation among health care, employment services and employers
- Prevailing economic conditions
<table>
<thead>
<tr>
<th>Name of Programmes</th>
<th>Content</th>
<th>Scope</th>
<th>Problems identified</th>
<th>Recommendation</th>
<th>Proposed response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Work</td>
<td>Access to Work is a specialist disability employment programme delivered by Jobcentre Plus. It can help meet the costs of such things as workplace adjustments, support workers and travel to work to help a disabled person take up or retain paid work. Applications are made by individual disabled people who are entering, or already in, paid work, including self-employment. The support is flexible and personalised to meet individual need, and there are no upper limits on support or any maximum duration for support. Access to Work is available to disabled people whose jobs are temporary and/or part time, and people who are getting benefits and participating in permitted work can be eligible for support (DWP 2011). Employers share the costs of some elements for applicants who have been in a job for more than six months.</td>
<td>In 2010/2011 35,000 disabled workers received help</td>
<td>• Many employers are not aware about this programme; • Helps only those who already in employment • It tends to help those who work for large employers (large public or third sector organisations).</td>
<td>The programmes should become available for more people, for a wider range of people, and with a wider range of employers; access to information about the programme should be improved; Since this programme is highly cost effective its funding should be increased through redirecting sources from less cost-effective programmes</td>
<td>To undertake feasibility studies and work with disabled people • to establish how to implement the recommendations • to streamline the Access to Work assessment process • improve the support for disabled people getting into employment • to support young disabled people • to reach under-represented groups, such as those with mental health conditions and learning disabilities, as well as reaching smaller employers.</td>
</tr>
</tbody>
</table>
weeks\(^48\) with larger employers paying more than smaller employers. No contribution is required from very small employers or from self-employed people.

<table>
<thead>
<tr>
<th>Remploy</th>
<th>Remploy is a non-departmental public body sponsored by the DWP to provide sheltered employment, rehabilitation and training for disabled ex-servicemen and to increase the employment opportunities of disabled people and those who experience complex barriers to work. Remploy receives Grant-in-Aid each year to deliver a range of employment and development opportunities to disabled people mainly under the Government’s Work Choice programme. It consists of the factory network (Remploy Enterprise Businesses) and Remploy Employment Services</th>
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<tr>
<td></td>
<td>2,200 disabled individuals are employed in Remploy Enterprise Businesses; 5,000 disabled individual were helped to find employment the Remploy Employment Services in 2009/10. Many Remploy factories are economically not sustainable and not cost effective; subsidy per job is around £25,000 per disabled person; in 2009/2010 the Remploy Enterprise Businesses operated with a loss £63 million. In was recommended to introduce a new model for Remploy, with Government funding being invested in effective support for individuals rather than subsidising factory businesses. Viable Remploy businesses could be given the opportunity to exit government ownership, including under employee-led alternative business models such as employee-led mutual, or sold; and non-viable businesses should be</td>
</tr>
<tr>
<td></td>
<td>- To begin collective consultation on the proposed closure of non-viable Remploy factories</td>
</tr>
<tr>
<td></td>
<td>- To Identify possibilities to exist government ownership for remaining businesses</td>
</tr>
<tr>
<td></td>
<td>- To offer any employees made redundant a comprehensive personalised package of support to help them into alternative employment and help meet individual needs.</td>
</tr>
</tbody>
</table>

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\(^48\) More information can be found at [www.direct.gov.uk/en/DisabledPeople/Employmentsupport/WorkSchemesAndProgrammes/DG_4000347](http://www.direct.gov.uk/en/DisabledPeople/Employmentsupport/WorkSchemesAndProgrammes/DG_4000347)
| **Residential Training Colleges** | The Network of Residential Training colleges provides their clients with holistic supports and a highly-specialised services which deal with vocational training, independent living skills and adapting to being disabled. | Most are concentrated in East/South England | In comparison to the level of the Department’s Specialist Disability Employment Programmes (SDEP) budget, Residential Training Colleges help relatively few people into employment at relatively high cost. | Residential Training Colleges should seek funding from a range of sources for their expertise in learning, independent living and employment, and no longer be funded as a distinct employment programme directly by the DWP | • to further reduce unit costs and improve employment outcomes.  
• to examine how best to diversify funding streams  
• to explore how to utilise mainstream provision more effectively. |
| **Work Choice and Work Programmes** | In October 2010, the Government launched Work Choice – a new programme of specialist support designed to help customers facing complex disability-related barriers find and sustain work. The Work Programme, launched in June 2011, is helping a wide range of disabled people and people with health conditions in flexible and innovative ways, which respond to | | The Programmes should be carefully monitored When Work Choice contracts expire, supported business places should not receive ongoing special protection. Any funds released as a result could be used on other aspects of specialist disability | Views from consultation events: Supported businesses should be used for short-term training and work experience paces, to allow individuals to move towards open employment; there was a strong consensus among most that it was a
each individual’s personal circumstances to address the barriers they face in the labour market.

Employment support. In the longer term, govt should consider integrating **Work Choice** and **Access to Work** into a single employment programme delivered through individual budgets.

Good idea to merge Work Choice and Access to Work into a single programme delivered through individual budgets.
Box 4.4: The Condition Management Programme, which was introduced as part of Pathways to Work, was designed to address the three main conditions reported by those claiming incapacity benefit - mental health issues, cardio-vascular and musculoskeletal problems. CM Programme attempts to tackle deep-seated issues such as anxiety, pain management and lack of confidence, with programme delivery and content varying according to local needs. Evaluation studies show that the programme helped the clients to move closer to employment because it helped clients to deal with their health conditions in day to day life, but there is no evidence found that it had an effect on the probability of clients to return to work.

However, a conclusion from different evaluation studies was that the program was the most appropriate for those who were further away from the LM; However, little evidence was found that this programme. Evaluations studies arrived to a conclusion that this (A) more co-operation is needed between Personal Advisors and health professional who have specialist knowledge about specific conditions and needs of disabled people; and (B) the evaluation studies also found that the programme has more positive effect on the likelihood of employment of the IB claimants if undertaken with other programs such as JobCentre Plus.
Box 4.5: Glasgow Works

Glasgow Works was launched in 2008. Targeting those who had dropped out of work - including but not limited to those receiving IB - contracts were awarded to five local regeneration authorities (LRAs), and a total of £24 million was invested over three years (£10 million from DWP supplemented by City Council funds and the European Social Fund).

The aim of Glasgow Works was to change how employability services were delivered in the city. Previously, service providers had been assessed primarily on the numbers of clients they helped move into jobs. With people on IB, however, this approach was often ineffective or even counter productive. To meet targets, clients were frequently ‘pushed’ into jobs for which they were unsuitable. Particularly for those with mental health problems, this risked aggravating the illness and anyway was unlikely to result in sustainable employment. Therefore long-term unemployed and those who never had a paid job were not likely to sustain employment and they drifted further away from the possibility of re-engaging in work and in wider society.

Glasgow Works adopted a new approach, with softer targets complementing the harder, job-focused goals. Clients were moved along a pathway, and LRA were being paid for each stage the client reached. For example, engaging with a service would be a point along the pathway, as would taking part in preparation for work activities or in voluntary work. This approach encourages even the hardest to reach clients to participate in meaningful activities, and moves them closer to the ultimate goal of work.

Once they have found a job, moreover, there are further targets for Glasgow Works in terms of whether employment is sustained over 13 weeks and then 26 weeks, and whether the client gains an additional qualification or a promotion while in work. These targets require Glasgow Works to provide ongoing support to help clients adjust to working, and help ensure that clients are placed in suitable jobs, rather than job placement by itself being the target.

Glasgow Works contains many strands, including programmes for long-term disabled people, young offenders, young parents, people with learning disabilities, and the Roma community. All of these seek to move clients who are cut off from the workplace along a pathway towards employment.

**Showing the value of work:** at the beginning of their engagement with Glasgow Works, all clients receive a “Better off in Work” calculation, showing them the economic benefit to them of moving off benefits and into employment.

**The importance of soft targets:** rewarding providers not just for employment outcomes but for achieving steps on the way to employment means that those furthest from the labour market are less likely to be neglected. Employment targets for the Bridging Service are not as high as those for other employability services.

**Continued follow-up:** targets do not stop with the acquisition of a job; they continue for several months afterwards. This reduces the risk of clients being placed in unsuitable jobs in order to ‘tick off’ employment targets, while also assisting client and employer to adjust to the working environment.

**Outcomes.** Over the first three years of the scheme, from July 2008 to June 2011, 6,900 clients who were on IB were engaged (that is, they registered and had at least two appointments) and 900 moved back into work. Incapacity benefit rates in the city have declined from 19% in 2000 to 12% in 2011.

**The importance of long-term funding:** after two years of the Glasgow Works programme, results were unimpressive – it was only in the third year that large benefits were seen in terms of people returning to work or achieving important steps along the way to employment.

**Source:** Weston and Manning (2012).
Review of policies towards work related health and health related worklessness in Scotland, Wales and Northern Ireland

In 2011 in Scotland 8.3% (down from 10.1% in 1991) of the working age population were claiming health-related benefits (ONS 2011). Overall 50% of working age disabled people are in work (compared with 80% of non-disabled working age population; the employment rate among disabled people with mental problems is 21% (NHS Greater Glasgow and Clyde 2011). There are spatial variations in the proportion of health related benefits claimants - while in 2009 on average in Scotland 16% of 55-59 years old were claiming incapacity benefit, in Glasgow the proportion was 30% (Brown et al. 2011). In 2011 9.4% (down from 12.1%) of working-age population in Wales were claiming health-related benefits. The decrease in numbers of disability benefits recipients indicates that there might be some policy interventions which led to this decrease.

In 2012 Manning and Weston (2012) conducted an evaluation study of policies which target work related health and health related economic inactivity among three home countries, Scotland, Wales and Northern Ireland. The study gathered lessons from three home countries to make recommendations for newly established Health Boards in England. The methodology involved literature review, relevant case studies; seventeen in-depth telephone interviews with high-level stakeholders, a field visit, and final workshop with stakeholders.

The findings from the review are summarised in Table 4.7. The review concludes that to reduce sickness related worklessness in England and in the devolved Nations it is important to have:

1. Strong leadership from the centre (such as in Wales and Scotland)
2. Clear national strategies that lead to the establishment of effective national bodies to promote workplace health and return to work services (such as in Scotland and Wales)
3. Involving a range of stakeholders in the development of policies and the delivery of programmes
4. Consistent communications between government, relevant stakeholders and different audiences
5. “One-stop-shops”-a single point contact to which people can turn for assistance and information and which can direct them to all relevant services.
6. National “ Hub” which collect analyse and disseminate evidence and case studies on the effectiveness of different programmes
7. Inclusion of cost-benefit analysis in evaluations: although the majority of existing projects have been rigorously evaluated very few analysis consider benefits of projects against their costs
8. Prevention and early intervention are vital to reducing sickness-related worklessness
9. Care and guidance should not stop when a client returns to work, moreover – the steps on the road back to employability should be valued and built into targets, and continued assistance in the period after re-employment reduces the risk of clients being placed in unsuitable jobs in order to meet targets, and helps with adjustments that lead to sustained employment.
<table>
<thead>
<tr>
<th>Programme</th>
<th>Year</th>
<th>Home country</th>
<th>Focus</th>
<th>Aim</th>
<th>Details/ Output</th>
<th>Scope/Problems / potentials</th>
<th>ref</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy working life: a Plan for Action</td>
<td>2004</td>
<td>Scotland</td>
<td>Working age population out-of-work; employers</td>
<td>to maximise the functional capacity of those of working age, help employers to promote a healthy workplace, and promote employability among those who are out of work</td>
<td>In 2006 a national centre of expertise on workplace health, SCHWL, was established, helps employers to hire people with health conditions</td>
<td>SCHWL does not cover those out of work</td>
<td>(Scottish Centre for Healthy Working Lives, SCHWL 2010)</td>
</tr>
<tr>
<td>Better Health, Better Care Action Plan</td>
<td>2007</td>
<td>General population</td>
<td></td>
<td>To reduce health inequalities, to raise awareness about the importance of obtaining and staying in employment</td>
<td>Scottish Government is developing a set of outcomes and performance measures that can assist in monitoring and evaluation of these projects</td>
<td></td>
<td>Manning and Weston 2012</td>
</tr>
<tr>
<td>Equally Well</td>
<td>2008</td>
<td>General population</td>
<td></td>
<td>Scottish Government health inequalities strategy</td>
<td></td>
<td></td>
<td>Manning and Weston 2012</td>
</tr>
<tr>
<td>Health Works</td>
<td>2009</td>
<td>Public sector bodies and employers</td>
<td></td>
<td>To reduce sickness related worklessness</td>
<td></td>
<td></td>
<td>Welsh Assembly Government 2011</td>
</tr>
<tr>
<td>Working Health Services Scotland (WHSS)</td>
<td></td>
<td>Small firm employees with health problems</td>
<td></td>
<td>to assist employees of firms with less than 250 staff to stay in work or return rapidly to work after a health problem develops (2-12 weeks programmes)</td>
<td>The clients were allocated a case manager, who could refer a client to local services: physiotherapy, occupational therapy, counselling or other employability services; referral to he services made by employers, GPs, or self-referral. Pilot was</td>
<td>Measurable indicators were included in the programme from the start, including rates of return to work, use of medication and GP visits. These were developed and are evaluated by a group including policy leads in the Scottish</td>
<td>NHS Health Scotland 2011; Manning and Weston 2012; Glasgow City Council 2011</td>
</tr>
<tr>
<td>Fife Job Retention pilot</td>
<td>Employees and unemployed with mental health issues</td>
<td>The project aimed to help NHS Fife and Fife Council employees with mental health problems to stay in their jobs, and to help unemployed people with mental health problems to find work with NHS Fife and Fife Council</td>
<td>Each client was allocated an individual rehabilitation consultant who brought together key stakeholders such as the line manager, a human resources officer and an occupational health clinician to draw up an action plan with the client based on a workplace assessment.</td>
<td>Evaluation of job retention scheme: among 35 individual completed the pilot; 8 were at work but 6 of them performed restricted/alternative duties’. Participants reported significant improvements in psychological functioning and occupational performance and satisfaction.</td>
<td>WHSS website, cited from Manning and Weston 2012</td>
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</tr>
<tr>
<td>Glasgow Works</td>
<td>Those how dropped out of work (not only benefits recipients):</td>
<td>The aim of Glasgow Works was to change how employability services were delivered in the city. They divided pathway to employment into small phases,</td>
<td>This provides ongoing support to help clients adjust to working, and help ensure that clients are placed in suitable jobs,</td>
<td>The importance of the evaluation shows the importance of long-term funding: after two years of the Glasgow Works</td>
<td>Manning and Weston 2012</td>
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<td></td>
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</tbody>
</table>
£10 million from DWP supplemented by City Council funds and a grant from the European Social Fund).

complemented the main job-focused goal with “softer” targets, participate in meaningful activities; they paid clients for each phase. Ones found a job they still remained clients and were further encouraged to more along pathway to sustained employment and further qualification.

rather than job placement by itself being the target.

programme, results were unimpressive – it was only in the third year that large benefits were seen in terms of people returning to work or achieving important steps along the way to employment.

Glasgow’s Regeneration Agency Bridging Service, part of Glasgow Works

Difficult to reach sector

Funded by Glasgow works and NHS; employability programme supported by health or social care services and local employers;

This work was supported by ‘Keep Well,’ a programme to deliver employability training to healthcare professionals, and by liaison work with Jobcentres

Manning and Weston 2012

Our Healthy Future 2009 Wales

General population

A strategic public health framework for Wales; improving health at workplace is one of ten priority outcomes

Targets people who are already in employment

Welsh Assembly Government 2011

Small Workplace Health Award

programme for businesses and organisations employing fewer than 50 people

Awards for promoting the health and well-being of employees; free support and advise to develop workspace health and well-being initiatives;

ibid
| Pathways to work (UK wide scheme) | 2003 NI Benefit Claimants | Job Centre Employment service: helping individuals to choose among pathways, including financial support to return to work or attend job interviews; Condition Management Programme - a 12 week course run by health professionals who advise participants on how to manage their condition so that they can return to work. | According to Manning and Weston (2012) Northern Ireland has structures in place that are likely to facilitate effective policy implementation due to integration of health and social care vs Health and Social Care trusts. If health-related worklessness can be raised up the Northern Irish policy agenda, its integration into existing policies is likely to be smoother than in the other home nations. | Department for Employment and Learning 2008. |
| Disability Employment Service | Employers, disabled people | Support employer to recruit and retain people with health problems/disabilities; helps disabled people find employment | Consists of Job induction Scheme (13 weeks trial for disabled employers) Access to work payments (to assist disables people to travel to work and to make modification at workplace); Workable – a scheme that provides longer term support to overcome employment barriers | Addley, et al. 2010 |
| Direct Access Occupational Physiotherapy Treatment pilot | Northern Ireland Civil Service employees NICS | Occupational physiotherapy programme Employees accessed the treatment service by self-referring to it through their line manager. A course of treatment containing up to six sessions was provided, Majority began the programme while still in work; significant improvements were reported. Only a very small number of people | Laurie et al. 2008 Addley et al. 2010 |
with an average of five sessions. absent from work were treated but they reported that the programme accelerated their return to work
4.3. Self-employment among disabled people

Disability employment policy has tended to concentrate on moving disabled people from benefits into paid work as employees. There is a little policy effort to promote self-employment among the disabled. The lack of appropriate policy attention to the self-employment of disabled people is surprising. Self-employment has potential for some disabled people because it offers flexible employment conditions, which is crucial for disabled people since the nature of their physical impairment may prevent them from working standard hours under regular employment conditions. Furthermore, similarly to other groups, which are disadvantaged in the labour market, e.g. ethnic minorities/recent immigrants, self-employment may shelter disabled people from the labour market competition and discrimination (Boylan and Burchardt 2002).

Existing research on self-employment among disabled people is also limited. In 2002 Small Businesses Service commissioned the report “Barriers to self-employment for disabled people” (ibid), which found that among those who were looking for work disabled people were slightly more likely to be open to the idea of self-employment: 19% of disabled men say they are looking for self-employment or have no preference, compared to 15 per cent of non-disabled men, and 9 per cent of disabled women are open to the idea of self-employment compared to 8 per cent of non-disabled women (ibid). The likelihood of considering self-employment was found to be higher among disabled men out of work who were receiving Income Support Benefits (31%) or Incapacity Benefits (23%) (Ibid).

4.3.1. The nature and extent of self-employment among disabled people

The evidence from the LFS (for 2000-2001) and Family Resources Survey (FRS) (for 1998/9 and 1999/00), shows that of those in paid work, 18 per cent of disabled men and 8 per cent of disabled women are self-employed, compared to 14 per cent and 6 per cent of non-disabled men and women respectively. These differences between the self-employment rates of disabled men and those without disabilities disappear if differences in age and the level of qualifications between these two groups are being taken into account; however, even after accounting for these differences, disabled women have higher chances to be self-employed that women without disabilities. It indicates that higher self-employment rate among disabled men can be attributed to their older age profile and lower level of qualifications, rather to the disability status itself.

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49 Disabled people tend to be older and have fewer qualifications (Boylan and Burchardt 2002)
50 The mean age of disabled self-employed men is 49, compared to 44 for disabled male employees. For women, the mean age among the self-employed is 45, compared to 42 among employees (ibid). The rates of self-employment are particularly high among men with i) degree level qualifications, ii) vocational qualifications and iii) no formal qualifications (a proportion among those disabled people who are in paid work 20%).
4.3.2. The barriers encountered by disabled people seeking to enter self-employment

The barriers to starting a business for disabled people can be grouped into three categories: lack of financial and other support, access problems, and unhelpful attitudes of advisers, professionals and the general public. Such barrier as a lack of start-up capital is similar to those that is experienced by non-disabled people who want to start a business, however, for disabled this problem may be more acute because many of them are likely to be workless for a long time and have a poor credit and therefore it would be more difficult for them to receive a business loan from bank (Boylan and Burchardt 2002).

Disabled people seeking to become self-employed sometimes experience discriminatory attitudes on the part of business advisers who have stereotypical views of what a disabled person may or may not be able to do. Disabled people suffer from lack of access to appropriate training and support. Enterprise training, when available, could be in a format unsuitable for disabled people. These include: a lack of information in suitable alternative formats, lack of transportation/ funding for transportation; and a lack of arrangements for disabled people to access the training in the building, etc.

Disabled self-employed people are likely to be in low status occupations and to have relatively low income (given their older age and lower level of qualifications than that of people without disabilities). Therefore, they often need an access to in-work benefits. However, Boylan and Burchardt (2002) found that many disabled people who wanted to start a business did not know about Disabled Persons Tax Credit, Access to Work, or the Permitted Work Rules. According to their study many disabled people indicated the lack of awareness of in-work support through the benefit system. This awareness is crucial. For example, disabled self-employed, if they are aware about such programmes as Access to Work, can benefit from it because they to it to get equipment that they need, employ assistants or for travel to work.

Therefore, to help disabled to make a transition from benefits into sustainable self-employment, it is important to make available for them business start-up finance, to provide disabled entrepreneurs-to-be with enterprise training and support, which is tailored to their specific needs, and to raise their awareness about available help and support including the system of in-work benefits and programmes which aim to facilitate the access to work for disabled people.

4.4. Summary: employment and disability

Active labour market programmes which aim at bringing into employment those people with disabilities and impairments, who are in receipt of incapacity benefits, but are able to work, need to target multiple barriers disabled people face on their way to employment. Indeed, the problem of economic inactivity of long-term sick and disabled individuals cannot be
solved only through changing the skills, attitudes and behaviour of disabled/long-term ill benefit recipients, e.g. through improving their qualifications. The barriers to employment for disabled these people are structural and go far beyond the individual level characteristics of the disability benefit recipients. Therefore together with a support that changes attitudes and improves employability of disabled people and helps them to find a job, policy interventions should be directed towards:

- developing an integrated policy approach to job placement, skills development, training, job placements and in-work job support
- ensuring rapid movements from training to job placement to maintain momentum;
- developing financial and other help for people to allow them to make the transition from benefits to paid work;
- introducing and further developing fiscal measures that support the employment of disabled individuals;
- creating incentives for employers to hire disabled people;
- subsidising employers’ adjustment in the workplace according to needs of disabled workers and providing other relevant support to employers;
- creating a societal climate of acceptance and support for the employment of people with disabilities;
- improving anti-discriminatory legislation;
- increasing the awareness of disabled people and employers of anti-discriminatory legislation;
- improving cooperation between different stakeholders; employers, employment services, health services and social services.

Increase and make less selective the up-take of programmes which are directed to support people with disabilities to find employment. Although many evaluation studies found some positive effect from the different programmes which target employability of disabled people this positive effect is often relatively modest. Overall the evidence from evaluation studies show that these programmes are best able to help those who were closer to employment, while programmes that target people who are harder to place are need to be developed.

Uptake of programmes directed at supporting people with long-term illnesses/disabilities to get into employment is usually selective and low. Some interventions favour the more advantaged disabled people and those closer to the labour market because the personal adviser are pressurized to be cost effective and invest efforts in clients who are more likely to find a job. Thus, in the UK there is evidence that Access to Work grants tended to support particular groups of disabled people – they are likely to be young married, have to have a sensory or mobility impairment, be public sectors employers, work in professional occupation (Hillage et al. 1998). Similarly, the Danish ‘flexjobs’ scheme appeared to be assisting those disabled people without reduced work capacity, who perhaps needed the initiative least. Thus, in Norway, only 1% of those who were eligible took up the Active Sick Leave Programme (Scheel et al. 2002a).
Supporting the whole range of jobs rather than low-skilled/low paid jobs. Many evaluation studies found that subsidised jobs for employment of disabled people tend to be low skilled and low paid (e.g. Clayton et al. 2011a, 2012; Hohnen 2001). A danger of channelling disabled people into this type of jobs is that instead of greater inclusion in the society, this would isolate them even further. The evaluation studies also show that policy interventions that create financial stimuli for incapacity benefits recipients (IB) cannot be shown to have a positive effect on the likelihood of disabled people getting employment; these incentives have some positive effect, because they provide a safety net during the period of transition from benefits to paid job, but mostly for those who are already close to employment. However, some studies show that IB claimants view these incentives as a way to support low paid jobs, and express concern that these incentives might create a trap through preventing them from working longer hours or from looking for better paid jobs.

Change programmes’ effectiveness assessment criteria There are indications that assessment of intervention programmes based on the number of Incapacity Benefit recipients who get into a job at the end of the programme, are misleading because usually people who were outside the labour market for a prolonged period of time are not able to sustain employment without addition help and advice. Therefore a good indicator of the effectiveness of such intervention programmes may be the number of clients who managed to get employment and sustain it. For this reason, a client support should be extended beyond the moment when a IB claimants finds a job, to encourage them to be responsible employees, to acquire further skills and qualifications, etc.

Increase the up-take of Workplace adjustment programmes. Effect of workplace adjustment (such as reduced hours, flexible work schedules, special training, modified workplaces, light duties, etc.) has positive effects on employment of disabled people (Butler et al. 1995; Johansson et al. 2006). However, at the moment these programmes have a relatively small uptake and target selective groups of disabled employers, in particular younger workers, those with good skills, or those whose disability related needs are relatively easy to accommodate. To have a significant impact on the employment of disabled people these programmes need to target significantly larger and non-selective segment of disabled people.

Improve communication, coordination and cooperation between employment services for disabled people and employers and health services. Many evaluation studies show that Personal Advisors who work with IB recipients in employment services often lack specialist knowledge to assess specific needs of people with particular disabilities and therefore they cannot provide client tailored support. This highlights the importance of coordination between Social services and health serviced. Overall, the evaluation studies stress the importance of coordinated effort between all relevant stakeholders – government agencies, health and welfare services, employment services and employers to achieve positive outcomes of policy interventions.

Evaluation studies show that effort directed at employers does not really result in a higher intake of disabled people. Overall conclusion that can be made from the review of
evaluation studies that many intervention initiatives which aimed to changing the behaviour of employers and making the work environment more disability friendly characterised by low awareness and low take-up and are unable to make a population level impact.
5. Summary and Conclusions

Both disabled people and those with caring responsibilities face significant inequalities together with high economic inactivity rates. The barriers to employment facing disabled people and those with caring responsibilities are on the face of it very different, because it is a different life circumstance that is creating this barrier for them. It must also be remembered that there are great differences within each of these groups and so policies, and their implementation, need to be targeted very precisely to particular sub-sections of each group. While most policy responses will target each separately, there are a number of similarities in what the literature suggests are the main barriers to employment and the general principles of policy responses:

Qualifications and skills. Lack of qualifications and skills is a crucial barrier to employment among those two groups of clients. Three quarters of disabled people with tertiary level of educational qualifications are in employment compared to a one third disabled people without qualifications in employment. However, the issue of those disabled people leaving compulsory education with low qualifications needs to be tackled as this group may be distinct from those with qualifications and a career who become disabled later in life. Among those with caring responsibilities, the evidence suggests that again those with no qualifications find it particularly difficult to enter the active labour force. Care responsibilities (especially early motherhood) and disability impede the individual from gaining qualifications. More support is needed to enable these groups to undertake qualifications, but it might also be a case of tackling this at an earlier stage than after they become unemployed adults.

Employer attitudes. Both groups potentially face discrimination from employers, who may perceive their additional needs as too great a burden, and anti-discrimination legislation does not necessarily help overcome. There is a need to increase awareness and understanding of legislation, but also respond to employers’ concerns about the cost of compliance, and offer support for adjustments to working hours or premises. In addition to public bodies raising awareness, employer or employer organisation initiatives to convince others to take on more people can help raise awareness, although the success of them is not often evaluated rigorously.

Personal attitudes and efficacy. These are linked to employer and wider societal attitudes. Some clients may not necessarily have the belief that they can find and sustain employment. They may perceive the obstacle created by their disability of caring responsibilities is too great. They may also perceive that there is a lack of suitable jobs and responsive employers.

Financial incentives. These appear to work particularly for those already contemplating employment. This may suggest in some cases that low pay for the jobs that people can enter is an issue.
Lack of joined up thinking in service provision. Health professionals and childcare providers do not necessarily have employment in mind when delivering services, but they potentially have a role to play in increasing it. Similarly, employment services workers often do not understand the whole scope of caring responsibilities of their clients, and may not be sufficiently equipped with specialist knowledge to understand fully the specific problems that face their clients with disabilities. Hence it is important that policies have clear specific objectives that embrace both employability support and specialise support for those with caring responsibilities or with disabilities. Targeted initiatives with clear outcomes may be appropriate, with key workers who can flexibly help in meeting client needs (directly or through working with other bodies). In addition, better communication between specialist support services (for caring and/or disabilities) and employability service providers might improve efficiency and effectiveness.

The biggest effects are sometimes at the margin. There is a balance between the levels of support for those closest to the labour market anyway, who need the least intervention but are most likely to move into the labour market, and levels of support for those farthest from the labour market. Decisions need to be taken on where to set the balance.

Sustainability of employment. The kind of jobs that these two client groups often end up in – specially created jobs for the disabled, or ‘flexible’ low-paid work for those trying to reconcile work and care – may not necessarily have a sustainable impact on future employment prospects, as they tend to be low skill and limited progression. Clients may end up back in inactivity, or requiring a great deal of in-work support.

Evaluation of the efficiency of employment services for those two groups should focus more on the sustainability of jobs as well as job entry (as has happened in, for instance, the Work Programme). This requires monitoring of those clients who started to work and supporting them further in addressing the problems they face as the result of the intersection of their specific needs (caring responsibilities/disability) and their employment.

Policy lessons. The policy evaluation literature has suggested some aspects of initiatives to get the disabled and those with care responsibilities into work that have enjoyed some limited success (some of the points relate to both groups). Of course the specific local circumstances and contexts of initiatives and their delivery etc. are fundamental to their success, but the literature suggests some general principles around successful initiatives.

What appears to be effective for supporting disabled people:

- a focus on workplaces; making them more aware of legislation but also more knowledgeable about what adjustments disabled people actually need, and what support might be available to them to make adjustments;
- improving awareness about the programmes, and coverage and uptake of programmes aimed at supporting disabled people into employment, including expanding beyond those most work-ready and tackling the harder to reach;
- increasing the employability of disabled people through equipping them with better qualifications and skills.
- an integrated approach to each of the policy elements, including skills development, job placement and support after employment.

What be effective for supporting those with care responsibilities:
- the importance of integrating childcare (or other care) with employability support;
- effective partnership working between agencies and with employers;
- there is a need for more childcare that is affordable even to those on the lowest incomes;
- affordable transport that facilitates the journeys between home, work and childcare providers;
- holistic support that recognises and responds to the needs of the individual, and is delivered by a well-trained and sympathetic advisor;
- policy stability that ensure longer term funding, as start-up costs are often large and effectiveness in achieving outcomes can be low in the early stages.
References


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people with learning disabilities: Local Area Co-ordination and in-between spaces of social inclusion. *Geoforum, 43, 1276–1286*
http://dx.doi.org/10.1016/j.geoforum.2012.03.015


Rosato, M. and O'Reilly, D., 2006. Should uptake of state benefits be used as indicators of need and disadvantage?, Health and Social Care in the Community 14(4), 294-301.


Appendix

Table A1: International policies aimed at lone parent or low-income families

<table>
<thead>
<tr>
<th>Programme</th>
<th>Programme details</th>
<th>Evaluation</th>
<th>Type/methods</th>
<th>Focus/results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Earned Income Tax Credit (USA)</td>
<td>In-work support available to low-income families with dependent children, similar to UK’s WFTC. Has existed since 1975 but crucially it was expanded in the early 1990s; credits increased, larger credits for larger families, remove requirement to provide half of support through earnings, and remove offset against food stamps and other family assistance.</td>
<td>Noonan, M. C., Smith, S. S., &amp; Corcoran, M. E. (2007). Examining the impact of welfare reform, labor market conditions, and the Earned Income Tax Credit on the employment of black and white single mothers. <em>Social Science Research, 36</em>(1), 95–130. doi:10.1016/j.ssresearch.2005.09.004</td>
<td>Type: Quantitative Data: Current Population Survey 1991-2003 (N=35,000) Methods: Hierarchical Linear Modelling</td>
<td>Focus: Impact of EITC expansion on employment of single mothers Results: EITC explained most of the increase in single mothers’ employment, although labour market conditions and welfare reform also accounted for 6-12% each, and employment increase could not have happened without a strong economy. Stronger impact of policy and labour market on those with no qualifications, unmarried and urban.</td>
</tr>
<tr>
<td>Program</td>
<td>Description</td>
<td>Methodology</td>
<td>Focus</td>
<td>Results</td>
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<tr>
<td>Single Parent Employment Support Program (Newfoundland, Canada)</td>
<td>Six week training program in job search and employment preparation, followed by four week job search period with continued transport and childcare supports and access to help and advice. Potential eligibility for an income supplement once in employment.</td>
<td>Type: mixed methods Date: interviews with 17 officials, survey of 156 clients, cost-benefit analysis based on administrative data</td>
<td>Focus: does SESP assist participants in preparing for, obtaining and maintaining employment? Results: Participants exited IS and entered employment at a faster rate than comparison groups over the life of the project (41 months), with cost neutrality achieved within around 30 months. Evaluation also stressed the importance of a service that can address barriers to employment and work effectively with the third sector.</td>
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<tr>
<td>Working for Families (New Zealand)</td>
<td>Increased in in-work tax credit and family entitlements, with additional support for childcare and accommodation costs.</td>
<td>Type: Quantitative Data: Mixture of administrative dataset, specially commissioned surveys and large scale existing survey datasets. Methods: Difference in difference, Survival and Panel regression models.</td>
<td>Focus: assess impact on employment outcomes of adults in recipient families Results: By 2007, the employment rate of sole parents was six percentage points greater and the percentage of sole parents in paid work for more than 20 hours a week was nine percentage points greater than they would have been without WFF changes. These changes happened at a cost of $1.5bn March 2004-March 2008. The economic downturn has since eroded much of these benefits.</td>
<td></td>
</tr>
</tbody>
</table>

**Type:** Synthesis of evidence about WFF

**Focus:** What does the evidence say about the effectiveness of WFF?

**Results:** "If the IWTC is judged against the criteria of efficiency, equity and administrative simplicity, and for cost-effectiveness in addressing the identified problem, the available empirical evidence suggests that it has been a failure. It only marginally increased employment for sole parents, and that increase has not been sustained."

Note the absence of qualitative evidence on how families' well-being was affected by the policy.
**Table A2: Literature in this review**

<table>
<thead>
<tr>
<th>Reference</th>
<th>Source</th>
<th>Question</th>
<th>Geography</th>
<th>Data and method</th>
<th>Key findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abendroth, A.-K., Van der Lippe, T., &amp; Maas, I. (2012). Social support and the working hours of employed mothers in Europe. <em>Social Science Research</em>, 41(3), 581–597. doi:10.1016/j.ssresearch.2011.12.008</td>
<td>peer-reviewed academic journal, IF 1.994</td>
<td>studies the influence of state, workplace, and family support on the working hours of employed mothers and how these different support sources interact</td>
<td>Europe (23 countries)</td>
<td>European Social Survey 2003/4, N=3036, HLM</td>
<td>Leave arrangements and publicly funded child care increase the chance of labor market participation of mothers. Child benefits are not related to the labour market participation of mothers. State, workplace and family support are complementary in their effect on mothers' working hours.</td>
</tr>
<tr>
<td>Bashir, N., Crisp, R., Gore, T., Reeve, K., &amp; Robinson, D. (2011). <em>Families and work: Revisiting barriers to employment</em>. DWP Research Report No. 729. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/reports2011-2012/rrep729.pdf">http://research.dwp.gov.uk/asd/asd5/reports2011-2012/rrep729.pdf</a></td>
<td>working paper, research commissioned by DWP</td>
<td>explores whether increased incentives to work for parents were helping them to overcome barriers to participation</td>
<td>England</td>
<td>re-analysis of interview data from 67 interviews, and additional interviews (12 repeat and 38 new)</td>
<td>Reasons for not working are moral as well as related to personal barriers (e.g. health, skills). Interviewees not averse to work, but saw care and wellbeing of children as their first priority, and not all agree that it is suitable to return when their child is seven. No policy will have any effect on parents' labour market participation if the parent does not feel that returning to work is the best thing for the child. Ability to return to work constrained by lack of childcare and job hours that can be reconciled with care available. Personal support networks a huge factor in getting back into work, but more work experience and training would help ease the transition as well.</td>
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<tr>
<td>Author(s)</td>
<td>Title</td>
<td>Year</td>
<td>Country</td>
<td>Methodology</td>
<td>Findings</td>
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<tr>
<td>Breitkreuz, R. S., Williamson, D. L., &amp; Raine, K. D. (2010)</td>
<td>Dis-integrated policy: welfare-to-work participants’ experiences of integrating paid work and unpaid family work. Community, Work &amp; Family, 13(1), 43–69. doi:10.1080/13668800902923753</td>
<td>2010</td>
<td>Canada</td>
<td>three interviews, six months apart, with 17 parents of preschool children (2001-02)</td>
<td>Unpaid care work takes a lot of time and energy, and it is difficult to find paid employment as well, especially that which fits around care obligations. These obligations are particularly hard for low-income families, who lack the resources to offset them. The dis-integrated nature of W2W policies overlook the realities of low-income parents' lives (e.g. by mandating employment without supporting it and allowing for family responsibilities), and thus fails to achieve successful labour force attachment.</td>
</tr>
<tr>
<td>Chanfreau, J., Gowland, S., Lancaster, Z., Poole, E., Tipping, S., &amp; Toomse, M. (2011)</td>
<td>Maternity and Paternity Rights and Women Returners Survey 2009/10 - Research Report No. 777. London: Department for Work and Pensions.</td>
<td>2011</td>
<td>UK</td>
<td>Maternity and Paternity Rights Survey 2009, N=2000 mothers and 1200 fathers, descriptive but also some regression and latent class analysis</td>
<td>Factors most strongly associated with return to work are: public sector, larger employer, duration of pre-birth job, generous maternity pay esp. OMP, partnered mother, highly qualified. Mothers who did not return to work fell into several clusters: those who cannot find flexible jobs or childcare but happy in principle to work; family oriented with some obstacles; carer by choice; few obstacles and looking for work; and multiple obstacles.</td>
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</table>

Working paper, research commissioned by govt (DWP) examines the work decisions of the non-working parent in single earner couple families (where household income is below 60% of median)

England 50 interviews Reasons for not being in work (but wanting to); redundancy, health issues (self and child or other family member), lack or prohibitive cost of childcare. Reasons for not wanting to work; belief in staying at home with children, negative views about leaving children with other adults. Few cite partner attitudes or potential loss of benefits as a factor. Support needs for parents seeking work; increasing employability and confidence, finding appropriate work, help calculating financial implications incl. deducting childcare cost from potential income, help arranging childcare.


Peer-reviewed academic journal, IF 0.617 examines impact of child-related public policies on women’s employment

Europe ECHP 1994-2001, (N=16,800), recycled predictions method Policy with the strongest impact on labour market access is childcare, important in itself and in making other policies (e.g. parental leave) effective in facilitating maternal employment. Parental leave itself and cash benefits have the opposite effect. Poorly educated mothers most responsive to public policies.


Peer-reviewed academic journal, IF 1.113 looks at the employment experiences of low-income working families

England 47 interviews with low-income working families in 1999 Low-income families lack control over their economic survival due to low wages and economic insecurity. High dependence on informal networks - state provision not meeting needs - but these do not always exist. Low-income families unable to profit from the trend towards ‘work-life balance’ - formal childcare still unaffordable even with tax credits. The working conditions that low-income families are willing to accept in order to get the flexibility and accommodation they need from employers is potentially exploitative.
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<tr>
<td>peer-reviewed academic journal, IF 1.112</td>
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<tr>
<td>explores the impact of social policies and labour market conditions on women’s decisions on work and childbearing</td>
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<tr>
<td>Europe (6 countries)</td>
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<td>ECHP 1999, N=10321 women age 21-45 married or cohab, bivariate probit models</td>
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<td>Social policies have a significant and large impact on the probability of women being in employment. Childcare availability has the strongest and least ambiguous effect compared to other policies. The availability of part-time work conditional on ‘good quality’, contract type, childcare, optional parental leave, as well as child allowances all influence labour market participation. The impact of social policies differs with women’s level of education - other things have stronger influence for less educated.</td>
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<tr>
<td>working paper, research funded by OFMDFM</td>
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<td>investigates the experiences of parents with disabled children</td>
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<td>Northern Ireland</td>
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<td>interviews with parents (N=20) and service providers (N=13), and focus groups with 9 parents and 9 young adults</td>
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<td>With regard to accessing childcare (that might facilitate employment), a number of issues were identified; expense (and high reliance on informal/voluntary services), worries about safety and sensitivity to child’s individual needs, worries about quality, lack of trained childminders. Other problems that impact likelihood of employment among parents with disabled children; high divorce rates, high stress, poverty and social exclusion.</td>
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<tr>
<td>peer-reviewed academic journal, IF 1.239</td>
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<td>analyses the work orientations of women who return to work</td>
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<td>Europe (15 countries)</td>
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<tr>
<td>Work Options of the Future 1997-98, N=25269 (2803 female returners), logistic regression</td>
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<td>Return to work is not just about woman’s preferences - work orientations are shaped by personal, financial and family constraints. A ‘money’ orientation for returning is more likely among less educated women and those with financial difficulties - better off and better educated women tend to (re)enter the labour market for ‘job’ reasons. Older women and those forced to leave their jobs are more likely to return for ‘people’ reasons. Presence of young children seems to exert a practical constraint, but does not seem to affect the orientation of mothers to work.</td>
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<td>Author(s)</td>
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<tr>
<td>Duncan, S., Edwards, R., Reynolds, T., &amp; Aldred, P. (2003).</td>
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<td>Fagan, C., &amp; Norman, H. (2012).</td>
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<td>Fortin, N. M. (2005).</td>
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<td>Author</td>
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<td>Gingerbread. (2012)</td>
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<td>Grant, L. (2009)</td>
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<td>Gutiérrez-Domènech, M. (2005)</td>
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<td>Author(s)</td>
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<td>Haux, T.</td>
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<td>Hennig, M., Gatermann, D., &amp; Hägglund, A. E.</td>
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<td>Himmelweit, S., &amp; Sigala, M.</td>
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<td>Hinton-Smith, T.</td>
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<td>Reference</td>
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<tr>
<td>Ingold, J. (2011).</td>
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Persistent poverty is higher in NI - high worklessness, high disability and poor health, low wages, poor quality of PT jobs.

Main barriers to working that were identified; no/low qualifications, disincentives in the benefit system to working 1-15hrs per week, lack of affordable childcare.


A key finding from both Australia and Denmark was that to engage with partnered women and assist them into work requires them to be given access to means-tested social assistance as individuals, not as dependent partners. Can be difficult to challenge established gender roles within a couple, and benefit system may reinforce them. It is also essential that good quality, affordable childcare is available as a foundation for active labour market policies.

Benefit systems are too standardised - cannot treat partnered woman same as other jobseekers, need to build on activities they are already undertaking and be sensitive to their caring responsibilities. Mothers need personalised pathways into work.

The decentralisation of labour market policies in Denmark provides an important focus on the local labour market context which benefits partnered women as well as employers. Devolution to this level allows frontline staff to link up with other local services to assist this group in overcoming their barriers to work.
<table>
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<tr>
<th>Author(s)</th>
<th>Year</th>
<th>Title</th>
<th>Type</th>
<th>Description</th>
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<tbody>
<tr>
<td>Innes, S., &amp; Scott, G.</td>
<td>2003</td>
<td>“After I’ve Done the Mum Things’: Women, Care and Transitions. Sociological Research Online, 8(4). Retrieved from <a href="http://www.socresonline.org.uk/8/4/innes.html">http://www.socresonline.org.uk/8/4/innes.html</a></td>
<td>peer-reviewed academic journal, IF unknown</td>
<td>looks at transitions to the labour market of low-income women in Scotland, 12 interviews with 12 mothers. Highlights the importance of emergency disruptions such as illness - organising contingency arrangements is complicated and low income women may lack the resources. Both care and paid work are valued - the dilemma is how to reconcile them. The main factors identified as affecting actual and preferred transition to education or employment were: finding local, good quality, affordable childcare; managing other family/domestic roles and responsibilities; the job opportunities available, their hours of work and locality; social pressures and pressures and support or discouragement from a partner and/or other family members. Childcare was seen as the main thing that had to be taken into account because what was possible depended on obtaining it.</td>
</tr>
<tr>
<td>McLaughlin, H.</td>
<td>2009</td>
<td>Women Living in Disadvantaged Communities: Barriers to Participation. Belfast: Women’s Centres Regional Partnership. Retrieved from <a href="http://www.wrda.net/Document/Barriers_to_Participation_-_Final_March_2009_version_2.pdf">http://www.wrda.net/Document/Barriers_to_Participation_-_Final_March_2009_version_2.pdf</a></td>
<td>working paper, research commissioned by advocacy group (WCRP)</td>
<td>examines barriers to work facing women living in disadvantaged areas in Northern Ireland. A lit review/synthesis - no original research. (Lack of) childcare is the biggest barrier to participation, others are poverty, low skills and confidence, lack of flexibility in work and training, gendered career pathways, transport, health and well-being issues.</td>
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<tr>
<td>Source</td>
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<td>Title</td>
<td>Authors</td>
<td>Overview</td>
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<tr>
<td>Mcquaid, R., Fuertes, V., &amp; Richard, A. (2010). How can parents escape from recurrent poverty? York: Joseph Rowntree Foundation.</td>
<td>working paper, research commissioned by JRF</td>
<td>explores barriers to escaping the low-pay/no-pay cycle</td>
<td>Scotland</td>
<td>focus groups with 33 disadvantaged parents and 27 professionals, database of unemployed parents (N=12000) - descriptive analysis</td>
</tr>
<tr>
<td>Milne, A., Brigden, C., Palmer, A., &amp; Konta, E. (2012). The intersection of employment and care: evidence from a UK case study. European Journal of Social Work, 1–20. doi:10.1080/13691457.2012.724388</td>
<td>peer-reviewed academic journal, IF 0.581</td>
<td>looking at the impact of caring on employment and what facilitates employment for carers</td>
<td>Kent</td>
<td>Kent 'Health and Lifestyle Survey' 2005, N=5800 cross-tabs and chi-square tests</td>
</tr>
<tr>
<td>Noonan, M. C., Smith, S. S., &amp; Corcoran, M. E. (2007). Examining the impact of welfare reform, labor market conditions, and the Earned Income Tax Credit on the employment of black and white single mothers. Social Science Research, 36(1), 95–130. doi:10.1016/j.ssresearch.2005.09.004</td>
<td>peer-reviewed academic journal, IF 1.273</td>
<td>exploring the reasons for the increase in lone mothers' employment over the 1990s</td>
<td>USA</td>
<td>Current Population Survey 1991-2003, N=35,000, multilevel modelling</td>
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<td>Reference</td>
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<td>One Parent Families Scotland. (2008). Recommendations: Research on One Plus Mentoring &amp; Sustainable Employment Service. Glasgow: OPFS. Retrieved from <a href="http://www.opfs.org.uk/files/research_200811_lone-parents-and-employment-in-glasgow.pdf">http://www.opfs.org.uk/files/research_200811_lone-parents-and-employment-in-glasgow.pdf</a></td>
<td>research carried out by advocacy group (One Parent Families Scotland)</td>
<td>recommendations from an evaluation of services for lone parents</td>
<td>Scotland</td>
<td>focus groups/consultation with 62 lone parents and seminar/consultation with 92 frontline workers</td>
</tr>
<tr>
<td>Rafferty, A., &amp; Wiggan, J. (2011). Choice and Welfare Reform: Lone Parents’ Decision Making around Paid Work and Family Life. Journal of Social Policy, 40(02), 275–293. doi:10.1017/S004727941100002X</td>
<td>peer-reviewed academic journal, IF 1.113</td>
<td>examining the barriers to employment facing the lone parents who have been targeted by recent activation reforms</td>
<td>UK</td>
<td>Labour Force Survey (Q4 2006 and 2007). N=19376 coupled mothers and 6036 lone mothers, logistic regression</td>
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<tr>
<td>Study</td>
<td>Authors</td>
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<td>Study Focus</td>
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<tr>
<td>Save the Children, &amp; Daycare Trust. (2011). Making work pay – the childcare trap: Northern Ireland Briefing. Retrieved from <a href="http://www.savethechildren.org.uk/sites/default/files/docs/Making_Work_Pay_NI_briefing.pdf">http://www.savethechildren.org.uk/sites/default/files/docs/Making_Work_Pay_NI_briefing.pdf</a></td>
<td>advocacy organisation - not necessarily neutral</td>
<td>looking at the link between childcare costs and economic activity of parents</td>
<td>Northern Ireland</td>
<td>collates literature and stats</td>
</tr>
<tr>
<td>Steiber, N., &amp; Haas, B. (2009). Ideals or compromises? The attitude-behaviour relationship in mothers’ employment. Socio-Economic Review, 7(4), 639–668. doi:10.1093/ser/mwp015</td>
<td>peer-reviewed academic journal, IF 1.780</td>
<td>to what extent do mothers’ attitudes affect their employment behaviour</td>
<td>23 OECD countries</td>
<td>ISSP 2002, (N=1309), multilevel modelling</td>
</tr>
<tr>
<td>Valentova, M. (2006). Labour market inactivity due to family care in Luxembourg. Equal Opportunities International, 25(5), 389–406. doi:10.1108/02610150610706717</td>
<td>peer-reviewed academic journal, IF unknown</td>
<td>explores economic inactivity of women aged 16-65 due to family care responsibilities</td>
<td>Luxembourg</td>
<td>EU-SILC-PSELL data 2002-03, N=2300, logistic regression</td>
</tr>
<tr>
<td>Van Ham, M., &amp; Büchel, F. (2006). Unwilling or unable? spatial and socio-economic restrictions on females’ labour market access. Regional Studies, 40(3), 345–357. doi:10.1080/00343400600632663</td>
<td>peer-reviewed academic journal, IF 1.187</td>
<td>examines relationship between regional unemployment, local childcare density, and mothers’ employment</td>
<td>West Germany</td>
<td>GSOEP 2001, N=5508, probit selection model</td>
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<tr>
<td>peer-reviewed academic journal, IF 0.643</td>
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<td>considers employment trends and policy developments relevant to parents’ and carers’ capacity to combine work and care in Leeds</td>
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<td>Leeds</td>
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<tr>
<td>draws on ONS statistics and policy documents</td>
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<td>Combination of a buoyant labour market and increased support for working parents made it easier for mothers to work in the first half of the 00s, but the recession and reductions in this support has undermined the supportive local infrastructure.</td>
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<tr>
<td>working paper, prepared for Department for Work and Pensions</td>
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<tr>
<td>examines the nature and impact of policy across a number of countries that are also exploring ways to increase the employment rates of lone parents</td>
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<tr>
<td>USA, Netherlands, New Zealand</td>
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<tr>
<td>review of lit/evidence</td>
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<tr>
<td>USA: Economy played a role in increased employment of single mothers, although this cannot be full explanation, as there was no corresponding rise for married mothers or single non-mothers. Hard to be certain which policies mattered the most, but the mixture of requirements and support available to lone parents did seem to reduce welfare caseload and increase employment (although some of this reduced caseload did not enter employment - concern about well-being of such families). Policies also prioritise entry into employment over progression. Netherlands: Success of activation services depends on their responsiveness to the needs of the client, but there is no institutionalised involvement of clients in activation processes - whether this results in low quality service delivery depends on the social worker administering the program and how they balance institutional and individual concerns. New Zealand: Success relative to the UK may be due to softer, more holistic approach, lack of unfeasible targets, and better community provision of services.</td>
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<tr>
<td>peer-reviewed academic journal, IF 0.643</td>
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<tr>
<td>how do Nordic welfare policies facilitate employment, and at what cost</td>
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<td>Nordic countries (Denmark, Finland, Iceland, Norway and Sweden)</td>
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<td>reviews existing studies and uses macro-level data, mostly from the OECD, on policy environment and employment rates</td>
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<tr>
<td>Key success features: strong right to return and high replacement rates for parental leaves; high coverage of subsidised childcare; shared parental leaves (between mothers and fathers). However the schemes are expensive - tax rates are high - and there is a high degree of labour market gender segregation due to long leaves (which are still taken predominantly by mothers not fathers) and the tendency of returning women to concentrate in particular sectors.</td>
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Data: Family Resources Survey 1995-2003 (N=12,729 lone parents and 31,403 couples with children)  
Method: Structural equation modelling, simulation | Focus: Impact of the introduction of WFTC on labour supply of parents.  
Results: WFTC increased the employment rate of lone mothers by 5.11 percentage points compared with the programme it replaced (Family Credit). Estimated that LFP would be 10ppts lower in absence of any policy. For couples WFTC reduced employment rate of mothers by 0.57ppts, and increased fathers’ by 0.75ppts.  
As well as increased generosity, the employment effect may also have been due to reduced participation costs in WFTC relative to FC.  
However, other changes to the tax and benefit system reduced parents’ LFP, such that net change was +3.72ppts for lone mothers, and -0.40 and -0.49 for mothers and fathers in couples. |
Data: Administrative data - 100% sample of individuals affected by the pilots, plus a comparison group  
Method: difference-in-differences (DiD) estimates | Focus: Impact of a number of pilots aimed at lone parents on benefit exit and employment.  
Results: On average, the pilots had small, positive impacts on both work and benefit outcomes. For those already eligible (i.e. on IS for >12 months) when the pilots were introduced, an average of 0.6 percentage points more lone parents have left benefit after 12 months of being potentially eligible, rising to 1.20 ppts after 24 months, and between 0.26 and 1.11 ppts more are in work six months after the introduction of the pilots.  
The impact on those who became eligible for the pilots after their introduction was not statistically significant. |

(see title of paper)

Type: Quantitative

Data: Administrative data - 100% sample of individuals affected by the pilots, plus a comparison group

Method: difference-in-differences (DiD) estimates and survival models

Focus: Update to Research Report No. 415, plus investigates labour market behaviour of IWC recipients vs. other LPs who leave IS, and estimates some survival models.

Results: 1.6 percentage points (ppts) more potentially eligible lone parents were no longer receiving an out-of-work benefit after 12 months' exposure to the pilots (from a base of 16.6 per cent). Based on Phases 1 and 2 (which cover a longer period than the other phases), it is estimated that 2.0 ppts more lone parents were no longer receiving an out-of-work benefit after 24 months' exposure (from a base of 23.9 per cent). The equivalent estimates for being in work are 1.0 ppts from a base of 13.3 per cent and 1.4 ppts from a base of 15.3 per cent. IWC recipients (cf other LPs who leave IS) are more likely to have been on NDLP, less likely to be disabled or have a child under three, and tend to have fewer children. There are higher levels of job retention for the majority of IWC recipients who are able to maintain an IWC claim for the full 12 months.
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<tr>
<td>NDLP, Work Focused Interview, WFTC</td>
<td>Type: Review; compares findings of existing evaluations</td>
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<td>Data: 17 studies included in review (out of a possible 24 studies)</td>
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**Focus:** What was the impact of NDLP/WFI/WFTC, according to the evaluations.

**Results:** High consistency in adopted methods and estimated impacts of the evaluations.

NDLP has positive impact on exits from IS and entry into employment, while WFI impact IS exit but not entry into work. The lone parents likely to benefit most from NDLP tended to be younger, have younger children, have had less employment experience and had been in receipt of IS for longer. Lone parents with few or no O-Level grades were particularly likely to move into work as a result of NDLP. Similarly, LPWFIs appeared to be more likely to assist claimants who were further removed from the labour market or faced greater barriers to job entry. LPWFIs maintain an important role in referring lone parents to NDLP, which was the more effective of the two policy instruments.

The principal impact of NDLP was to increase exits from IS among all lone parents by about two percentage points, or by over one-quarter among lone parents participating in the programme.

Estimates of the increases in the employment and employment rates of lone parents, regardless of hours worked, as a result of WFTC ranged from 3.4 percentage points to 4.8 percentage points, for variable periods of time between 1998 and 2001. Employment increases as a direct result of WFTC were similarly estimated to range between 50,000 and 60,000 lone parents, depending on the estimation method and on the data used for the estimation.
| Coleman, B. N., Rousseau, N., & Laycock, M. (2003). National Evaluation of Lone Parent Personal Adviser Meetings: Findings from a longitudinal survey of clients (Research Report W172). Department for Work and Pensions. Retrieved from http://research.dwp.gov.uk/asd/asd5/working_age/wa2003/172rep.pdf | Work Focused Interview | Type: Quantitative Data: Longitudinal (two wave) survey of LPs who had attended a PA meeting (N=2818 responded at both waves) Method: Descriptive statistics | In the year or so following the initial PA meeting, 23 per cent of clients started a job. A third said that the meetings had increased their motivation to find a paid job. In addition, some respondents who had found work since the meeting said that the PA meeting process had been a factor in them applying for and/or getting the job. The jobs that clients started after the initial PA meeting were similar to those they had done previously; the PA meeting process is not necessarily opening new work options to clients, nevertheless, clients were positive about the work they had started, and the majority said they were better off than on benefits. The survey can provide little evidence of any change in the culture or mindset of lone parents following attendance at PA meetings. Overall impressions of the initial PA meeting, the annual review meeting and voluntary meeting were all positive, even where they did not think the timing was right. Positive views were expressed by clients in all different sub-groups. For those who are further from the labour market, there is no clear evidence that the PA meeting process has made a significant difference, and some clients with serious barriers to work were less likely to engage in the PA meeting process. |

| Dolton, P., & Smith, J. (2011). The Impact of the UK New Deal for Lone Parents on Benefit Receipt (DP No. 5491). Bonn: Institute for the Study of Labor. Retrieved from http://ftp.iza.org/dp5491.pdf | New Deal for Lone Parents | Type: Quantitative Data: Administrative data on lone parents on IS and eligible for NDLP (N=64973) Method: Propensity score matching, participants matched with non-participants with similar characteristics (e.g. age and number of children, region, benefit history) | Focus: Impact of NDLP participation on benefit receipt. Results: NDLP modestly reduces benefit receipt among participants. Impact is larger for lone parents who participate during a long spell of IS receipt; this is a one-off ‘windfall’ of pushing those nearest the margin into employment. The impact of NDLP fades over time, as non-participant benefit receipt falls, suggesting that some of the effect of NDLP is to speed up exits that would otherwise occur. |

NDLP
Type: Quantitative
Data: Administrative and survey data (N=69,829)
Method: Propensity score matching (matching recipients to similar non-recipients)
Focus: Evaluates the original NDLP evaluation and provides impact estimates of its own.
Results: Finds that previous estimates of the effect of NDLP (26%) were too high - preferred estimate is 11%.


NDLP
Type: Review; reviews the reports and data that have been created to date
Data: synthesis of reports, admin data, case studies, quant surveys and qualitative studies.
Focus: what does evaluation say about impact of NDLP
Results: Overall, since October 1998 51 per cent of all leavers from the programme and 41 per cent of all participants have had such outcomes. There is evidence of increased outcome performance in the second and third years of operation of the programme and the numbers leaving the programme for work were over 56 per cent in the year April 2001 to March 2002. Entering NDLP from a PA meeting is associated with lower outcomes when compared to participants who entered the programme through other means. Jobs gained by NDLP leavers were of better quality and sustainability and gave better satisfaction overall. Even so, estimates are that after two and three-quarter years of leaving NDLP around 41 per cent of participants who found jobs would return to benefit. Overall estimates of counterfactual impact on the IS population suggest a small but significant reduction in IS lone parent numbers of between 1 and 2 percent over a four to six month period. Other impact results of this kind show improvements in in-work benefit awareness, job-search, and on job quality and sustainability and some lowering of barriers to work. Cost-Benefit Analysis shows that NDLP is cost-effective and provides a net saving to the Exchequer. These estimates are maintained even with lower assumptions about additionality, in part because of the low unit costs of the programme. NDLP has been one part of an improved policy package for lone parents during a time of employment growth.
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<th>Reference</th>
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<th>Data</th>
<th>Focus</th>
<th>Results</th>
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<tr>
<td>Goodwin, V. (2008). The effects of benefit sanctions on lone parents' employment decisions and moves into employment (Research Report No. 511). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep511.pdf">http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep511.pdf</a></td>
<td>Work Focused Interview</td>
<td>Qualitative</td>
<td>Impact of sanctions (for non-compliance with WFI) on labour market behaviour.</td>
<td>Imposing a sanction had only a negligible effect on customers' labour market decisions, little evidence that sanctions promoted job-seeking behaviour. Failure to attend a WFI was normally due to ill health or caring responsibilities, and most LPs wanted to attend. Sanction recipients demonstrated higher levels of ill health, both of themselves and of their children, and greater prevalence of debt.</td>
</tr>
<tr>
<td>Gregg, P., Harkness, S., &amp; Smith, S. (2009). Welfare Reform and Lone Parents in the UK. The Economic Journal, 119(535), F38–F65. doi:10.1111/j.1468-0297.2008.02226.x</td>
<td>WFTC, NDLP and WFI</td>
<td>Quantitative</td>
<td>Assessing impact of package of policy reforms aimed at reducing worklessness among lone parents.</td>
<td>Policies have raised employment rates of lone parents by around 5 percentage points. Also an increase in number of hours worked from below 16 to 16 or more. Also find quality of life benefits in addition to employment outcomes (less of a decline in income and mental health after partnership break up, healthier adolescents in LP families).</td>
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<tr>
<td>Griffiths, R. (2011). Helping more parents move into work: an evaluation of the extension of New Deal Plus for Lone Parents and In Work Credit: Final report (Research Report No. 732). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2011-2012/rrep732.pdf">http://research.dwp.gov.uk/asd/asd5/rports2011-2012/rrep732.pdf</a></td>
<td>NDLP, IWC</td>
<td>Qualitative</td>
<td>Exploring the work-related decisions and experiences of parents who had moved off benefits and into work, especially role of IWC in parents' decision to leave benefits. Secondary objective was to explore childcare issues and work life balance once in work.</td>
<td>IWC improved incomes of parents who would have left benefits for work anyway (virtually all wanted to), rather than encouraged parents to move into work, although some parents were reassured by IWC that their income would not suffer from moving into work. Impact of IWC is temporary - parents cannot progress in work (low quality jobs, labour market conditions) to earn more money to offset loss of IWC, thus no less likely to experience poverty in future. However also noted that higher income would reduce entitlement to HB, thus no incentive.</td>
</tr>
<tr>
<td>Source</td>
<td>NDLP</td>
<td>Type: mixed methods evaluation</td>
<td>Data: qualitative interviews, surveys, administrative data, labour market data (few details given)</td>
<td>Focus: evaluating outcomes of NDLP participants (early evaluation of the initial prototype)</td>
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<td>Hales, J., Lessof, C., Roth, W., Gloyer, M., Shaw, A., Millar, J., Barnes, M., et al. (2000). Evaluation of the New Deal for Lone Parents: Early lessons from the Phase One Prototype - Synthesis Report (Research Report No. 108). Department of Social Security. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rrep108.pdf">http://research.dwp.gov.uk/asd/asd5/rrep108.pdf</a></td>
<td>NDLP</td>
<td>Type: mixed methods evaluation</td>
<td>Data: qualitative interviews, surveys, administrative data, labour market data (few details given)</td>
<td>Focus: evaluating outcomes of NDLP participants (early evaluation of the initial prototype)</td>
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</table>

Type: review/synthesis of evidence
Focus: what does the evidence say works in helping LPs into work
Results: LPs tell evaluations that they find the advice and guidance aspect of policy (i.e. LPWFI) helpful, but also that barriers to employment must be practically addressed as well. Parents appreciate confidence boost and demonstrating that work pays is also effective.
Limited evidence that LPWFI has a positive effect on IS exit, unlikely to affect entry to employment. Best outcome of LPWFI is that it is likely to lead to NDLP participation, which has a higher success rate on IS exit and employment outcomes. Concerns about effectiveness of NDLP in facilitating suitable training.
LPs unlikely to consider self-employment as a route into work. Little robust evidence on effectiveness of in-work support (e.g. IWEF) - potentially not meeting needs.
Advisors believe that it is the package of support that is important rather than individual elements.
Self-selection into the voluntary NDLP makes it difficult to gauge impact - participants keen to work and probably close to it.


Type: Quantitative
Data: Administrative/survey
Methods: Logistic regression models
More detailed findings than presented in Hales et al. (2000)
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<tr>
<th>Author(s)</th>
<th>Title</th>
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<th>Data</th>
<th>Focus</th>
<th>Results</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Jenkins, S. (2008).</td>
<td>Extension of the New Deal Plus for Lone Parents Pilot to Scotland and Wales: Qualitative evaluation (Research Report No. 499). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep499.pdf">http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep499.pdf</a></td>
<td>NDPLP</td>
<td>Interviews with 90 managers and administrators of the scheme</td>
<td>determine effectiveness of the pilot in moving lone parents towards work</td>
<td>Staff reported that enhanced training was not particularly tailored to working with LPs. Guidance from head office was too long and complicated. Slow and bureaucratic procurement procedures limited effective use of marketing budget. Action Plans from WFIs more of an aide memoire for advisors than something LPs really use. Strengths of the pilot felt to be IWC, Flexible Provision and IWEF - helps lone parents with the transition to a salary. Childcare Assist was not considered an effective way to secure suitable childcare. WSP is just a bonus for those engaged in jobseeking activity anyway - does not induce jobsearch. Not all the extra elements of NDPLP were well understood by advisors.</td>
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<td>Author(s)</td>
<td>Title</td>
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<td>Knight, G., &amp; Lissenburgh, S. (2005).</td>
<td>Evaluation of the extension to Lone Parent Work Focused Interviews eligibility: administrative data analyses (Research Report No. 237). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2005-2006/rrep237.pdf">http://research.dwp.gov.uk/asd/asd5/rports2005-2006/rrep237.pdf</a></td>
<td>WFI</td>
<td>Administrative data (i.e. population)</td>
<td>difference-in-differences (DiD) models</td>
<td>Impact of extending eligibility for LPWFI on IS exits</td>
<td>No statistically significant effect on new or repeat claimants. However for LPs with ongoing claims, the LPWFI extension was found to raise IS exits by 1 ppt at six months, and 2 ppts after 12 months. This impact was also significant for all ages of youngest child (not really any pattern by age of child).</td>
</tr>
<tr>
<td>Knight, G., Speckesser, S., Smith, J., Dolton, P., &amp; Azevedo, J. P. (2006).</td>
<td>Lone parents Work Focused Interviews/New Deal for Lone Parents: combined evaluation and further net impacts (Research Report No. 368). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2005-2006/rrep368.pdf">http://research.dwp.gov.uk/asd/asd5/rports2005-2006/rrep368.pdf</a></td>
<td>New Deal for Lone Parents and Work Focused Interviews</td>
<td>Administrative data from the New Deal Evaluation Database, N=78418 new/repeat claimants and 82802 existing claimants</td>
<td>Propensity score matching, participants matched with non-participants with similar characteristics (e.g. age and number of children, region, benefit history)</td>
<td>Impact of programme participation (NDLP&amp;WFI) on benefit exit.</td>
<td>For new/repeat claimants, the combined effect on benefit exit of LPWFI and NDLP was insignificant in size for the first year, but then positive starting at two and rising to four percentage points at 18 months. For existing claimants, the combination of LPWFI and NDLP had an impact on benefit exit rates that varied and was not always positive, but at 18 months was positive and ten percentage points. The medium term impact of the NDLP programme is reasonable in size. At 48 months after NDLP participation, the impact of NDLP raised the proportion off benefit by about 20 percentage points, once remaining differences were adjusted for. This effect ranged from an increase of 22 percentage points for those with youngest child aged 11 to 16 years to 18 percentage points for those with youngest child aged zero to three years.</td>
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<tr>
<td>Lakey, J., Parry, J., Barnes, H., &amp; Taylor, R. (2002).</td>
<td>New Deal for Lone Parents: A Qualitative Evaluation of the In-Work Training Grant Pilot (IWTG) (Research Report WAE119). Department for Work and Pensions. Retrieved from <a href="http://statistics.dwp.gov.uk/asd/asd5/working_age/wa2002/wae119rep.pdf">http://statistics.dwp.gov.uk/asd/asd5/working_age/wa2002/wae119rep.pdf</a></td>
<td>IWTG</td>
<td>Interviews with 15 personal advisers and 72 lone parents</td>
<td></td>
<td>Whether IWTGs were beneficial</td>
<td>Some barriers to uptake; returning to work can be overwhelming, jobs may not last long enough to organise training; restrictive having to complete training within 12 weeks; lack of awareness of eligibility; employers have power to veto training plans even if pursued in own time; lack of childcare to train outside working hours. Perceived benefits; more confidence, greater job satisfaction, helps set goals, possibility of promotion.</td>
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Pilot putting work-focused services in children’s centres (just a baseline study, to provide a comparison for the subsequent evaluation)


Pilot putting work-focused services in children’s centres

Type: Mixed methods

Data: Interviews with 61 children’s centre users (36 followed up) and 64 stakeholders across 10 case study sites (42 followed up), survey of children’s centre users (1177 at baseline, 1123 at follow up). Plus research at comparison sites (13 stakeholders, a survey).

Focus: establishing whether putting services in children’s centres improved engagement - more accessing, change in attitudes towards services, greater service integration

Results: Success in engaging non-traditional Jobcentre customers (30% of pilot starts not benefit claimants or partner of), take up of JCP services increased fourfold, engagement of parents with multiple and complex barriers to work (especially through intensive and tailored support), integration of work-focused activity delivery and children’s centre services.


(see title of paper)

Type: Qualitative

Data: Interviews with 70 LPs (40 of whom followed up 3-4mths later), and visits/interviews/focus groups with staff

Focus: assess impact of the pilots on the attitudes, motivations and actions of LPs

Results: QWFI. Advisors thought regular meetings good for rapport, but mandatory quarterly is too inflexible. LPs who entered work were generally positive, while those who did not felt that their needs were not addressed. Did not make LPs more receptive to work, but helped those who already were.

WSP. Advisers did not like the mandatory element and found it bureaucratic, tended to offer only to those engaging in required jobsearch anyway. LPs liked the money but little impact on commitment to seek work.

IWC. Staff felt that it was a powerful incentive, but LPs did not feel that it had much impact on their work related decisions. Evaluation also suggested that current provision is not effectively meeting needs of those furthest from labour market, and that advisers may need greater training/incentives to help this group. Key problem for LPs is managing practicalities of being in work, JCP services could better assist.
<table>
<thead>
<tr>
<th>Authors</th>
<th>Study Title</th>
<th>Methodology</th>
<th>Sample</th>
<th>Focus</th>
<th>Results</th>
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<tbody>
<tr>
<td>Sims, L., Casebourne, J., Bell, L., &amp; Davies, M.</td>
<td>Supporting lone parents’ journey off benefits and into work: a qualitative evaluation of the role of In Work Credit (Research Report No. 712). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2009-2010/rrep712.pdf">http://research.dwp.gov.uk/asd/asd5/rports2009-2010/rrep712.pdf</a></td>
<td>Qualitative</td>
<td>126 LPs and 3 focus groups with JCP staff.</td>
<td>Explore impact of IWC on attitudes, motivations and actions of LPs</td>
<td>IWC was generally found not to incentivise LPs to work - more important were motivation to work and ability to overcome constraints - although some LPs did report that IWC was a incentive, especially those out of the labour market for some time. Another impact of IWC was to expand types of work that LPs would consider, including temporary and lower paid work. IWC did help with transition to work, and most LPs managed to deal with it ending after a year - end of IWC not a key cause of leaving job, more likely to be because hours change or childcare arrangements failed. Once in work, LPs tended not to progress or receive pay rises.</td>
</tr>
<tr>
<td>Smith, F., Barker, J., Wainwright, E., Marandet, E., &amp; Buckingham, S.</td>
<td>A new deal for lone parents? Training lone parents for work in West London. <em>Area</em>, 40(2), 237–244. doi:10.1111/j.1475-4762.2008.00796.x</td>
<td>Qualitative</td>
<td>61 training coordinators, 8 focus groups with 58 mothers (lone and partnered) in total</td>
<td>Did the initiatives help/encourage mothers to undertake training in childcare</td>
<td>[very little detail given but] suggested that mothers concerned primarily with fitting employment around their childcare responsibilities, occupations such as childminding might facilitate this, although some women wanted to escape from spending all day with children, and the initiative does nothing to challenge occupational segregation and low pay in the sector.</td>
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<tr>
<td>Thomas, A.</td>
<td>Lone Parent Work Focused Interviews : Synthesis of findings (Research Report No. 443). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep443.pdf">http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep443.pdf</a></td>
<td>Synthesis</td>
<td></td>
<td>What does evaluation to date say about effectiveness of WFi in convincing LPs that they would be better off in work and helping them into it</td>
<td>LPs generally positive about the trust and rapport they have with advisers. Existing claimants more resistant to attending - feel far from work or prefer not to with young children - but new/repeat claimants are generally more accepting. Three quarters of LPs find the meetings helpful. Lack of consistency in central elements - only a third discuss childcare, only 30% offer BOC. WFi can change LPs attitudes towards JCP services, but ineffective at challenging attitudes to work. Most likely to start work are those with recent work experience who are looking for work, younger lone parents, and those with youngest child over 9 and less than 3 children.</td>
</tr>
<tr>
<td>Thomas, A., &amp; Jones, G. (2006). Work Focused Interviews and lone parent initiatives: further analysis of policies and pilots (Research Report No. 319). Department for Work and Pensions. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rreports2005-2006/rrep319.pdf">http://research.dwp.gov.uk/asd/asd5/rreports2005-2006/rrep319.pdf</a></td>
<td>WFIs, Mandatory Action Plans, Childcare Assist, NVQ3 training, IWEF</td>
<td>Type: Qualitative Data: Interviews with LP advisers (N not stated)</td>
<td>Focus: what impact have the new measures had on WFIs and the LP group Results: MAPs successful in helping to measure progress between meetings. Childcare Assist not meeting needs - should cover first week in work, not week prior. IWEF can help sustain LPs in work, but lack of clarity in when it can be used inflexible criteria limit how many it can help. High demand for NVQ3 training, and helped those who could access it, but only small number of providers offering it.</td>
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<td>Wiggan, J. (2010). Managing time: the integration of caring and paid work by low-income families and the role of the UK’s tax credit system. <em>Policy Studies, 31</em>(6), 631–645. doi:10.1080/01442872.2010.511527</td>
<td>WFTC and WTC</td>
<td>Type: Qualitative Data: Interviews with 21 families (17 followed up at end of year)</td>
<td>Focus: impact of tax credits on employment decisions of low-income working families Results: The tax credit system helped LPs sustain employment - gave them the financial security to fit their participation in paid work to their care responsibilities. Benefits less clear for couple families - weak incentives for second earners.</td>
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<td>Woodfield, K., &amp; Finch, H. (1999). New Deal for Lone Parents: Evaluation of the voluntary sector innovative schemes (Research Report No. 89). Department of Social Security. Retrieved from <a href="http://research.dwp.gov.uk/asd/asd5/rrep089.pdf">http://research.dwp.gov.uk/asd/asd5/rrep089.pdf</a></td>
<td>Schemes run by voluntary organisations that were set up in parallel with the New Deal for Lone Parents.</td>
<td>Type: Qualitative Data: Interviews with 95 lone parents who participated in the schemes, and 14 scheme organisers.</td>
<td>Focus: Evaluates 'innovative schemes' run alongside NDLP by voluntary organisations. Assesses perceived usefulness of these schemes, was found to vary. Employer information booklet. Employers found that it provided useful information on issues relating to lone parents and work-life balance, but lacked practical implementation advice and a convincing business case. Telephone advice line. Valuable service although could be more locally tailored. <strong>Job Guidance Approach.</strong> Lone parents appreciated the free childcare, travel allowances, jobsearch skills, benefit advice, IT access and group support. However scheme was poorly organised, and links with employers were unsatisfactory. <strong>Job Club Approach.</strong> Appreciated jobsearch skills and business advice, but perceived as insensitive to LPs' needs and diversity, lacked practical support (e.g. childcare) and limited follow up. <strong>Tailored Menu Approach.</strong> Emphatically positive - well organised, good onsite training opportunities and work experience, good peer support. Follow up slightly variable. <strong>Motivational Approach.</strong> Emphatically positive - begins with</td>
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fostering confidence before job-related activities, tailored and responsive, onsite crèche.

**Key success factors** - flexible, tailored, holistic, well organised, group support, links with other services and employers, jobsearch skills enhancement, childcare provision.

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<td>NDLP</td>
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<td>Focus: impart of NDLP leaving IS, taking up/increasing work, job search, job readiness and training/education</td>
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<td>Results: NDLP appears to have had a large positive impact on entries into work. After six months, 43 per cent of participants had entered full-time or part-time work compared to 19 per cent of matched non-participants. This suggests that 24 per cent of lone parent participants had found work who would not otherwise have done so. Similar effects were observed when looking at the exit rate from Income Support: NDLP appears to dramatically increase the rate at which lone parents leave benefit. on the whole, participants left jobs less quickly than non-participants. The programme did not appear to have had a measurable impact on entries into training, nor on perceived barriers to work.</td>
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