

Compendium

# An executive summary

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# 1 . Life Opportunities Survey – Executive summary

The Life Opportunities Survey (LOS) is a large-scale longitudinal survey of disability in Great Britain. It is the first major social survey in Great Britain to explore disability in terms of the social barriers to participation that people experience. The LOS compares the experiences of people with and without impairments across a range of areas, including education and training, employment, transport, leisure, social and cultural activities, and social contact.

The survey is wholly funded by the Department for Work and Pensions (DWP) and is carried out by the Office for National Statistics (ONS).

The LOS is a longitudinal survey in that it follows respondents over time and collects information on changes in the respondents' situations and experiences. Respondents were interviewed 3 times between June 2009 and September 2014:

- for the first time at Wave One (June 2009 to March 2011)
- for the second time at Wave Two (June 2010 to March 2012)
- for the third time at Wave Three (October 2012 to September 2014)

Each wave of the survey spanned 2 years. Respondents were followed up approximately 1 year after their initial interview, and then interviewed again around 2 and a half years later. This report focuses on answers given at Wave One and Wave Three.

The LOS follows the [social model of disability](#) and does not equate having an impairment with being disabled. People may have impairment(s) without being limited in their activities and therefore they may not consider themselves as disabled.

In this report, an adult is defined as having an impairment if they indicated that:

- they experience moderate, severe or complete difficulty within at least one area of physical or mental functioning
- certain activities are limited in any way as a result - "activities" refer to different areas of physical or mental functioning, such as walking, climbing stairs or reading a newspaper

For further background information on the survey, its development and definitions, please see [Chapter 1: Introduction](#).

## 2 . What does the report examine?

This report is based on data collected at Wave One and Wave Three of the Life Opportunities Survey (LOS). Adults were interviewed at Wave Three approximately 3 and a half years after their first interview. Building on [earlier reports](#), it updates previous analysis to consider responses at Wave Three. It first looks at how individuals experienced impairment at Wave One and Wave Three and any changes that took place between waves. The report then considers how individuals' work status changed between Wave One and Wave Three, before looking at characteristics by economic activity status at Wave Three.

Finally, the report considers in more detail life areas not covered by previous reports. Specifically, it looks at whether adults' participation in the life areas of leisure and social contact was restricted and if so, the barriers they experienced. An adult has a participation restriction if he or she experiences a barrier to taking part in a life area.

The report looks at these topics for four groups of adults:

1. adults with impairment at both waves: adults who had at least 1 impairment at Wave One and at Wave Three
2. offset adults: adults who had at least 1 impairment at Wave One but no impairments at Wave Three
3. onset-acquired adults: adults who did not have any impairment at Wave One but had at least 1 impairment at Wave Three
4. adults without impairment at both waves: adults who did not have any impairment at Wave One or at Wave Three

### 3 . Impairment transitions

[Chapter 2](#) examines changes in impairment status and impairment types that occurred between Wave One and Wave Three (approximately 3 and a half years).

#### Main Findings

##### Adults with impairment at both waves:

- For all adults with impairment at both waves, the number of impairments reported was relatively stable between Wave One and Wave Three
- Adults with impairment at both waves were more likely to have multiple impairments than a single impairment
- Adults aged 65 and over were more likely to report 3 or more impairments than those aged 16 to 64
- For adults with impairment at both waves there appears to be an association between age and reporting the following impairment types: mobility, dexterity, sight and hearing

##### Offset and onset-acquired adults:

- Just over a third (35%) of adults who reported impairment at Wave One did not report impairment at Wave Three (offset rate)
- Offset rates varied by age and impairment type with working age individuals almost twice as likely to have offset from impairment as adults aged 65 and over
- Around 1 in 6 people (18%) who did not report any impairment at Wave One reported at least 1 impairment at Wave Three (onset-acquired rate)
- Adults aged 65 and over were twice as likely to onset as adults aged 16 to 64
- Long-term pain had a high offset and onset rate, suggesting that adults' experience of long-term pain can fluctuate

#### **Severity of impairment:**

- Reported severity of impairment was different for those with impairment at both waves and those who acquired impairment (onset) at Wave Three
- For those with impairment at both waves, impairment severity was similar across the 4 main impairment types: long-term pain, chronic health condition, mobility and dexterity - with approximately two-thirds reporting "moderate difficulty" for each impairment
- A lower percentage of adults who were onset-acquired reported "severe" difficulty and frequency as "always" than adults with impairment at both waves. This was true for the 4 main impairment types

## **4 . Work status**

[Chapter 3](#) looks at changes in work status between Wave One and Wave Three by the 4 analysis groups. It then considers a range of characteristics for these 4 groups, such as education level by economic status at Wave Three. Finally, it looks at caring responsibilities by economic status at Wave Three.

#### **Main Findings**

- Working age adults without impairment at both waves were twice as likely to be employed at both Wave One and Wave Three than working age adults with impairment at both waves – 69% (this figure has been corrected from 66%) compared to 33%
- Working age adults with impairment at both waves were less likely to have a degree level qualification and more likely to have no formal qualifications than those without impairment at both waves. This was true for both employed and inactive adults
- Working age adults with impairment at both waves were more likely to work in semi-routine and routine occupations than those without impairment at both waves and were less likely to work in higher, managerial and administrative and professional occupations
- For employed adults, those with impairment at both waves were more likely to have caring responsibilities than those without impairment at both waves
- The majority of adults with caring responsibilities spent between 0 and 19 hours a week caring, regardless of impairment status

## 5 . Participation restrictions

An adult is considered to be restricted in participating in a life area if he or she experiences at least 1 barrier in that area. The type of barriers reported may differ depending on the life area and are not necessarily related to impairment. For example, "too expensive" may be a barrier to participating in certain leisure activities. [Chapter 4](#) looks at participation restrictions for the 4 groups of adults aged 16 and over, with a particular focus on the life area of leisure.

### Main Findings

- Adults with impairment at both waves and onset-acquired adults were more likely to report participation restrictions at both Wave One and Wave Three in nearly all life areas covered by the survey
- The majority of adults faced a participation restriction to leisure, more so than any other life area. This was regardless of impairment status
- Adults with impairment at both waves and onset-acquired adults reported that a health condition, illness or impairment was a barrier to participation in the life areas of leisure and social contact
- The majority of adults felt they had choice over how they spend their free time, regardless of impairment status
- Adults with impairment at both waves were more likely to report having little or no choice over how they spend their free time than other groups
- Having a health condition, illness or impairment was the top barrier to playing sport for adults with impairment at both waves
- Having a health condition, illness or impairment was also a barrier to playing sport for adults without impairments at both waves

## 6 . Social contact

[Chapter 5](#) explores how adults experienced participation restriction to social contact, and the barriers they faced. The chapter then looks at whether adults experience difficulties getting in or out of the home, as this may affect the level of social contact an individual has. Comparisons by age are made across the 4 analysis groups.

### Main Findings

- Having an impairment appears to be associated with lower levels of social contact
- Around a fifth of adults, regardless of impairment status, felt they had less contact in the last week with those they felt close to than they would like
- Adults aged 16 to 64 were more likely than those aged 65 and over to say they had seen people they felt close to less than they would like in the last week. This was true regardless of impairment status
- There appears to be an association between having an impairment and adults reporting seeing people they felt close to less than they would like in the last week. This association appears to be stronger for adults aged 65 and over than for adults aged 16 to 64
- Lack of time is a common barrier to social contact for all adults, but for adults with impairment at both waves "other people too busy" was a more common barrier than not having enough time themselves
- Around 1 in 10 adults with impairments at both waves reported difficulty getting in or out of the home

## 7 . Conclusion

This report has reinforced findings from [a previous LOS report](#), that adults' experience of impairment changes over time. While some adults experience impairment at both waves, a substantial minority of adults offset from impairment or onset to impairment. Impairment types can change over time, with some impairment types appearing particularly dynamic. For example, this report found that long-term pain as an impairment type had high onset and offset rates, suggesting that adults' experience of long-term pain can fluctuate. This dynamic nature of impairments means that personal perception is likely to play an important role in how impairments are experienced.

Age appears to be an important factor in how adults experience impairment. Adults aged 65 and over were more likely to onset to impairment and less likely to offset than adults aged 16 to 64. Those aged 65 and over with impairment at both waves were also more likely to report a higher number of impairments. This report also found evidence of an association between age and reporting certain impairment types: mobility, dexterity, sight and hearing.

As found in [an earlier LOS report](#), the majority of adults faced a participation restriction to at least 1 life area. Leisure was the life area where restriction was most commonly reported. This report showed evidence of an association between impairment and restriction to participation. Adults with impairment at both waves experienced restriction to participation to a greater extent than other groups. They were also more likely to report a health condition, illness or impairment as a barrier to participation.

It is important to bear in mind that the population covered by the LOS form a very diverse group with respect to the impairments and the severity of these impairments they report. The relationships between impairment and participation restrictions and impairment and general outcomes are also complex. For example, this report has found age may influence an adult's experience of impairment. Findings from the LOS should further be considered in the context of other research on disability to inform policy development.

## 8. Background notes

1. Details of the policy governing the release of new data are available by visiting [www.statisticsauthority.gov.uk/assessment/code-of-practice/index.html](http://www.statisticsauthority.gov.uk/assessment/code-of-practice/index.html) or from the Media Relations Office email: [media.relations@ons.gsi.gov.uk](mailto:media.relations@ons.gsi.gov.uk)