

Dynamics of Disability and
Employment in Ethiopia and
Uganda.

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Outlines

1. Motivation
2. Research question
3. Data and methods
4. Empirical results
5. Implications for policy and research

1. Motivation

According to common wisdom: disability is particularly relevant to public policy in aging high-income countries where:

- There is a high prevalence (1 in 5 adults in the U.S.)
- It is strongly correlated with poverty and inequalities (e.g. employment, education)
- there are anti-discrimination legislations (e.g. ADA) and social safety nets (e.g. SSDI, SSI)

This common wisdom is:

- supported by the expansion of morbidity theory and
- in line with lack of attention in development economics (e.g. de Janvry & Sadoulet 2015), development practice (World Bank 2016) and global health (WHO 2015).

1. Motivation (Cont.)

How about in the context of low-income countries?

- Widespread poverty but less inequality
- Emerging anti-discrimination and other policies in the past decade (since 2008 Convention)
- Very limited access to health care services and safety nets
- Premature mortality

1. Motivation (Cont.)

It is unclear what to expect in low-income countries:

- Correlation with poverty? Mixed evidence so far.
- Causal links? Evidence from malnutrition/poverty to disability
- Prevalence? Ethiopia: Estimates range from 1% (Census) to 18% (World Bank-WHO 2011)

1. Motivation: why this book?

What we have:

- Better data (panel data)
- Better tools (functional difficulties question set, internationally tested)

What we need:

- Evidence in low-income countries to inform new policies and programs

2. Research Question

What are the economic consequences of functional difficulties?

3. Data and Methods

- Two panel household survey datasets collected as part of the Living Standard Measure Study (LSMS) of the World Bank.

Ethiopia (2011/12, 2013/14)

Uganda (2009/10, 2010/11)



3. Data and Methods: Measures

The data includes the Washington Group on Disability Statistics (Altman 2016) recommended short set of questions on limitations in:

- seeing;
 - hearing;
 - walking/climbing steps;
 - self care ;
 - concentrating/remembering;
 - communicating.
-
- Each of the questions has a four point answer scale: (1) No difficulty; (2) Yes – some difficulty; (3) Yes a lot of difficulty; (4) Cannot walk at all.

This research uses two measures:

- Three categories: Severe; Moderate; None
- Functional score = $(\text{Sum} - \text{MinSum}) / (\text{MaxSum} - \text{MinSum})$

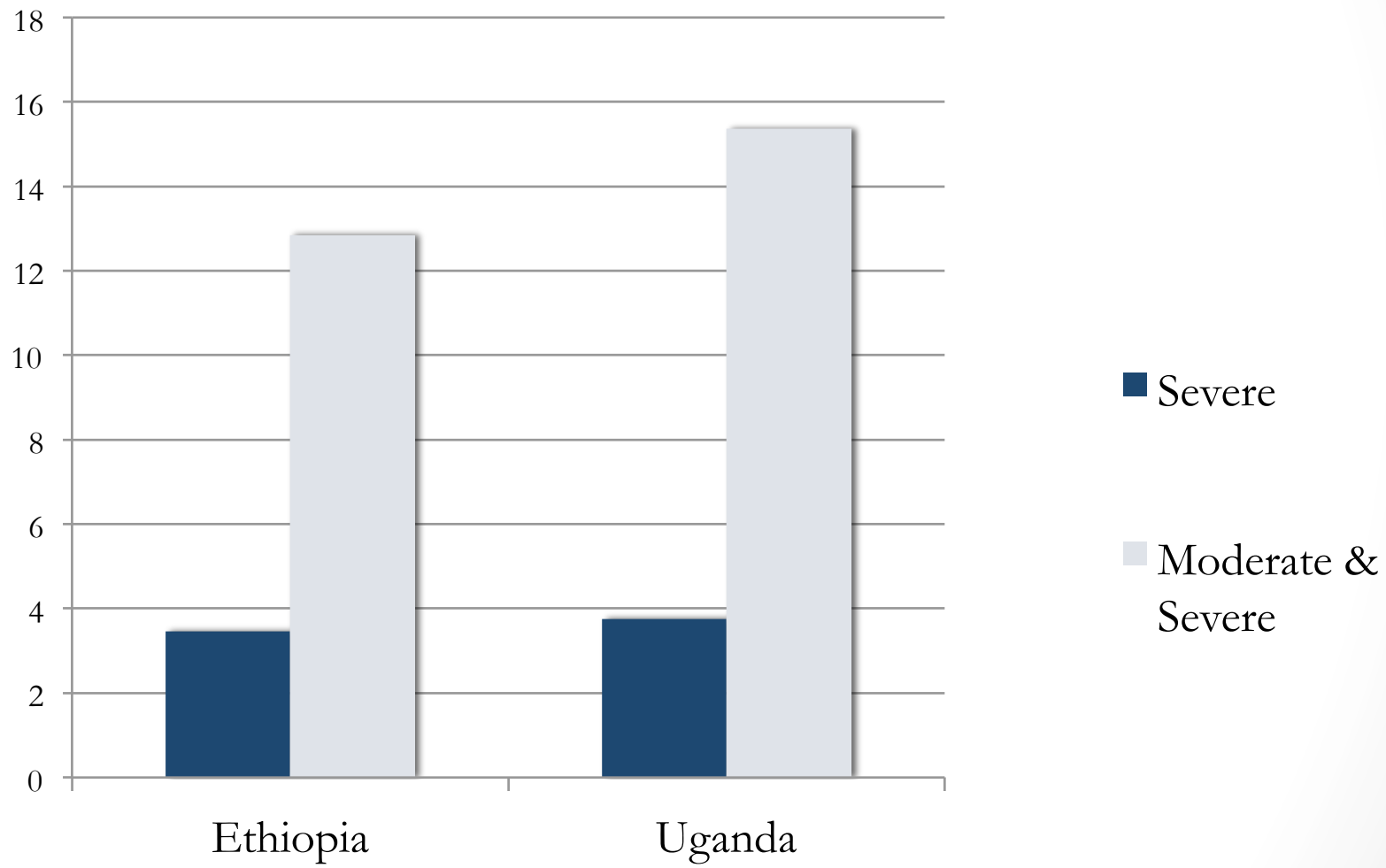
3. Data and Methods

- ✓ Descriptive Statistics
- ✓ First-difference model of work status

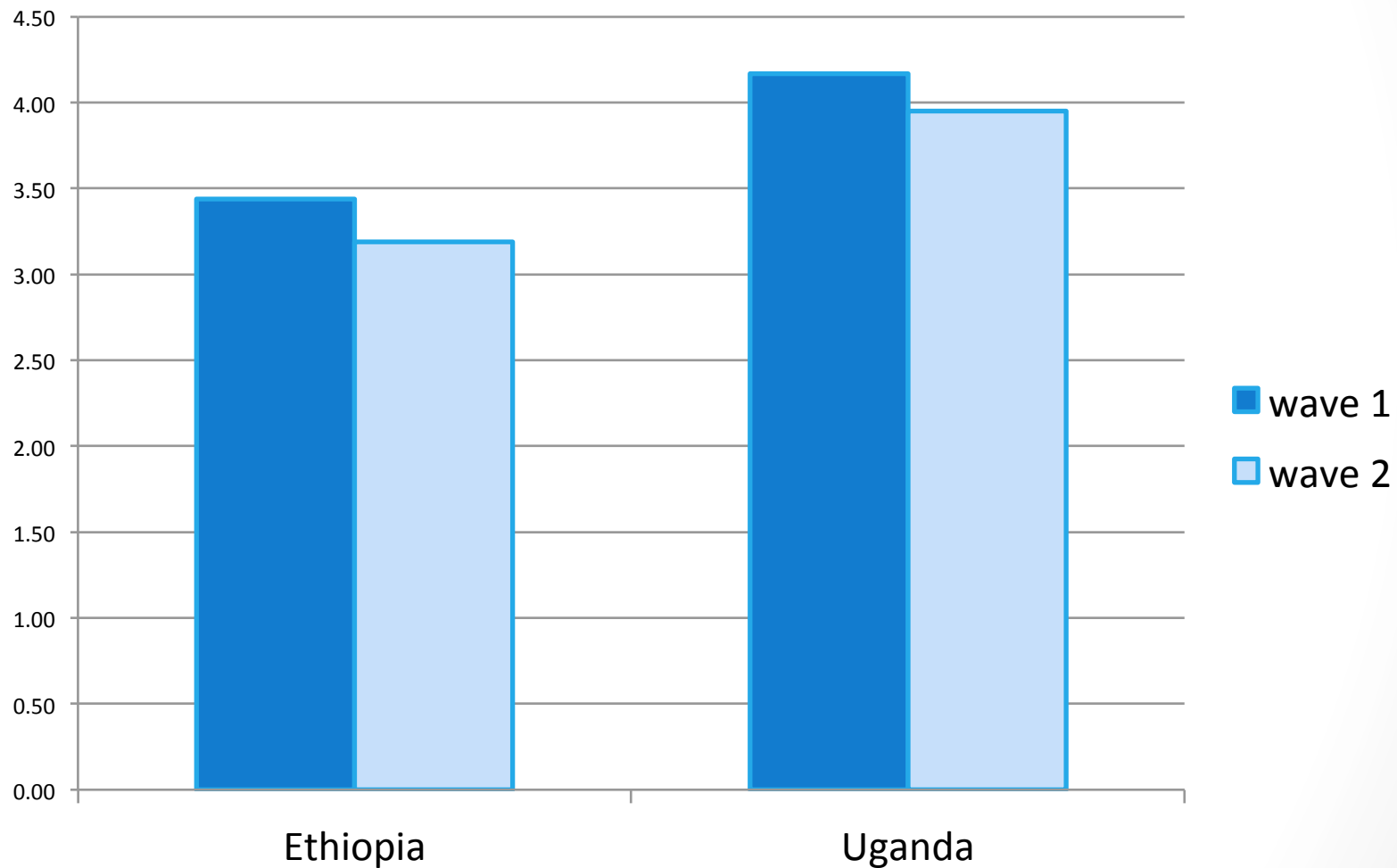
$$\Delta y_i = \beta \Delta F_i + \sum_{k=1}^5 \gamma_k \Delta x_{k,i} + \Delta \varepsilon_i$$

4. Empirical Findings

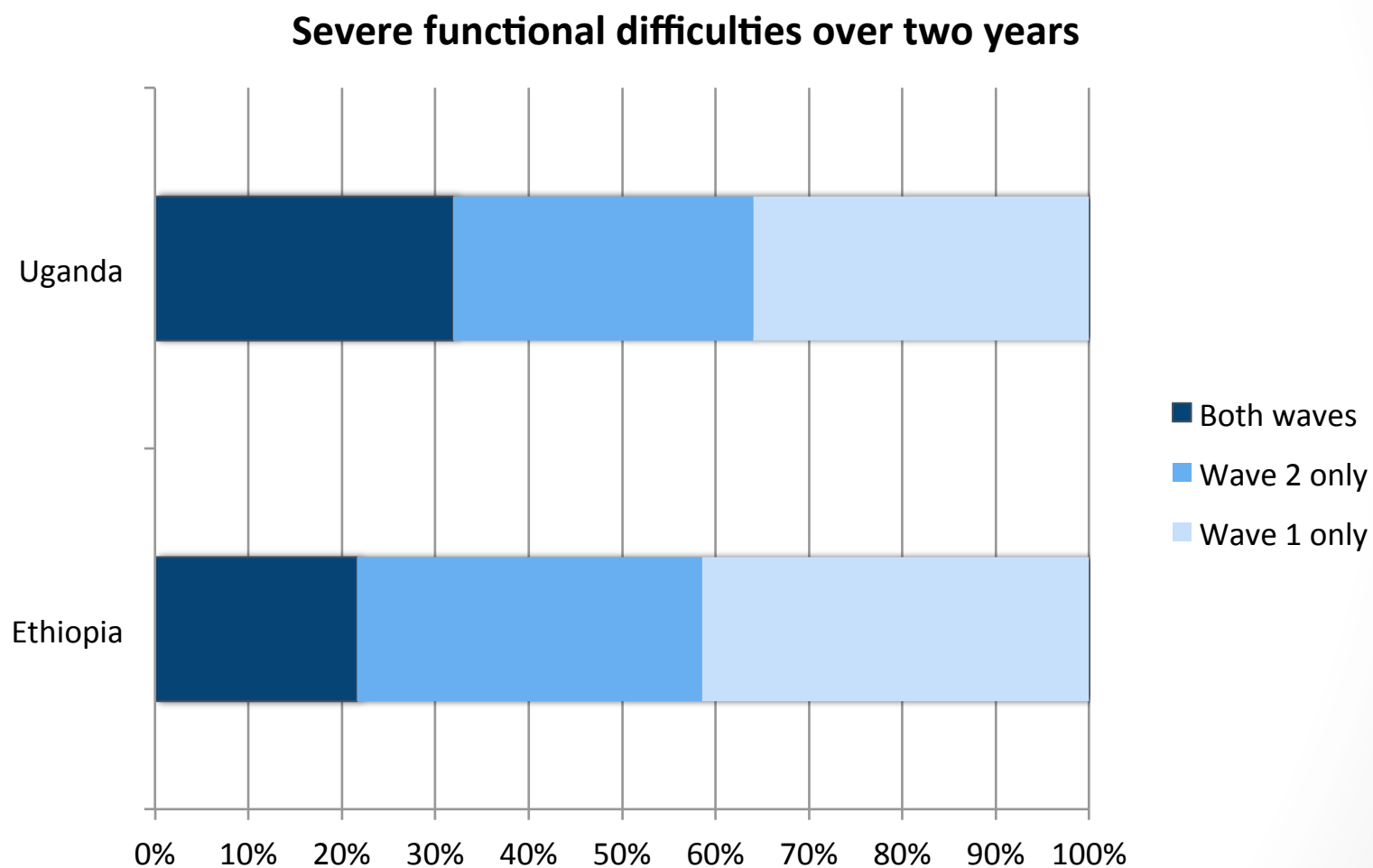
Functional difficulties prevalence in wave 1



Severe functional difficulties prevalence in waves 1 & 2



Functional difficulties are not static



Increasing functional difficulties

- The model gives a significant association between increased functional difficulty and rising odds of a work exit.
- For instance, for Ethiopia, having a new severe functional difficulty is associated with having 1.7 times higher odds of leaving work.
- In contrast, for both countries, when all new functional difficulties, whether moderate or severe, are considered, no significant association is found for the entire sample and all subsamples except persons 50 and older in Ethiopia and persons 15 to 49 in Uganda.

Decreasing functional difficulties

- In both countries, no longer experiencing a functional difficulty in wave 2, whether of any degree or severe only, is significantly associated with higher odds of working in wave 2.
- For Uganda, persons who no longer experience a functional difficulty have odds of working in wave 2 that are 2.7 times higher than persons who still have a functional difficulty.

Does this model identify the causal impact of functional difficulties on work?

- The model removes the potential bias of omitted variables associated with time-invariant characteristics (e.g. personality traits such as low self-esteem).
- However, there is still the possibility that these estimates are biased by other factors that change over time, affect both functional difficulties and work status and are not measured here (e.g. exposure to violence).
- In addition, in each wave, the data on functional difficulties and work were collected at the same time.

5. Implications for policy and research

- Highlights challenges around staying at work/return to work).
- Functional difficulties are relevant to development policy (work, poverty, inequality).
- A development approach using exclusively a minority group approach (e.g. SDGs) is not appropriate.

It does not cover the many people with moderate, temporary difficulties or late life onsets who may not self-identify as disabled and are not connected to disabled-people organizations.

Thank you!

E book is available open access at:

<http://www.palgrave.com/de/book/9781137536372#>

Thank you! Comments, feedback welcome.

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