

2007 Review of Retirement Income

Background Paper

Disabled People and Provision for Retirement

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DISABLED PEOPLE AND PROVISION FOR RETIREMENT

Introduction

In 2003, background papers to the review of retirement income policy noted that comment was required on the issues faced by disabled people¹ just as they were for the other groups facing low lifetime income. The terms of reference for the 2007 Review of Retirement Income Policy include disabled people in its scope. This focus has been welcomed by disabled people as many face an uncertain and impoverished old age and would welcome disability specific policy initiatives.

In the New Zealand population, an average of one in five has a disability, according to post census surveys². Like other New Zealanders, disabled people aspire to a good life³ throughout the lifespan, including during old age. But for disabled people, the chances of a comfortable retirement income are considerably lowered. Disabled people have low personal incomes, are less likely to be in the workforce, are more likely to be occupationally segregated, and are paid at a lower rate than their non-disabled colleagues. In addition home ownership appears to be lower than for non disabled people. As a further complicating variable, there is a gap between disabled men and disabled women, who are more disadvantaged.

This background paper therefore is a start in addressing the issue by providing an overall picture. Detail is often unavailable because disability research is limited overall but particularly underdeveloped in relation to retirement.

The paper is in four sections. The first examines the current situation, describes interrelated factors in retirement savings for disabled people and considers future developments. A second section considers barriers, risks and opportunities in the situation. The third section looks at the implications for policies, and a final section makes suggestions for further relevant actions.

¹ Ministry of Social Development. (2003). A Description of New Zealand's Current Retirement Income Framework.p15. On: http://www.retirement.org.nz/prg_2003_report.html

² Conducted by Statistics New Zealand, and intimately connected to the regular censuses (upon which they rely for inception). Post census surveys, the results of which are published as 'Disability Counts', have followed censuses in 1996, 2001 and 2006.

³ See Whakanui Oranga- The NZ Disability Strategy, 2001 for a fuller explanation of this.

1. THE CURRENT SITUATION

This section begins with a brief discussion about data and a snapshot of disabled people in New Zealand. It then moves to outline the factors that impact on the extent to which disabled people can save to accumulate a retirement income. Key factors identified in this are labour force participation, employment, unemployment, occupation, income and home ownership.

About Disability Data

Reliable and comparable research about disability has been very limited. Varying definitions of disability, and a tendency to focus on impairment-specific groups⁴ in conjunction with small sample size has made it difficult to draw sound conclusions about how an issue impacts on disabled people as a group.

However, the 1996 inception of post-census disability surveys made a much broader range of data available. Because the data collected is fairly consistent with general census data it is possible to make comparisons with data for non-disabled people. The survey sample is large and across the range of impairment, age, and geography. Further the questions asked change little between surveys that when they are asked at repeated time intervals, so there is comparability. For these reasons the post-census surveys have been used here as the main source for information about disabled people and retirement income.

The definition of disability used in the New Zealand Surveys⁵ has grown out of the functional limitation-definition used in the Canadian census. It is also reasonably consistent with the legislative definition used in the Human Rights Act 1998, which is usually regarded as one of the more comprehensive legislative definitions. In New Zealand, the definition is used as part of a two-stage process First, in the preceding census everyone is asked whether a health condition or disability limits their ability to do everyday things, communicate or socialize, and that condition or disability has lasted 6 months or more⁶. Then from those responding yes to those questions, a representative sample of (in 2001 38,000 people) are asked a much larger range of questions.

⁴ Although these surveys often capture very useful data, the generalisability of, for example, barriers to education for blind people to a broader group is limited.

⁵ Disability is defined as a “self-perceived limitation in activity resulting from a long term condition or health problem, lasting or expected to last six months or more”. Disability Counts 2001

⁶ Thus ruling out temporary health conditions or impairments

Data from the third disability survey in 2006 is not yet available, so the main source used is the 2001 disability survey data. However it is not anticipated that the results will change markedly⁷.

Disabled People in New Zealand

An overall picture of disabled people in New Zealand shows:

- An average of 20% of the New Zealand population is disabled. In 2001 there were 743,800 disabled people in New Zealand.
- Two thirds (65%) of disabled adults have some kind of physical impairment, followed by 41% experiencing sensory (sight, hearing) impairment
- Disability increases with age. It rises from 11% of children between 0 and 14 to 13% of adults 15-44 and then to 25% of adults 45-64. The rate then rises steeply to 54% of those 65 and over⁸.
- Over half (57%) of disabled people have multiple impairments⁹. The most common kind of impairment is mobility (12%) with agility (10%) and hearing (8%) the next most commonly experienced¹⁰.
- The most common cause of disability for adults living in households is disease or illness (40%) with the next most common being accident or injury (34%). Women are more likely to be disabled from disease or illness and males from accident or injury¹¹.
- Ten percent of disabled adults had a disability from birth but there is a much higher proportion of disabled-from-birth among disabled children (41%)¹².
- Most disabled people (60%) have more than one impairment
- The vast majority (96%) live in households, and of those in residential facilities, 92% are aged 65 and over.
- Fifty nine percent of those living in households were partnered, and were more likely to live in a one-person household than non-disabled people¹³

⁷ Statistics NZ undertakes modeling of the anticipated results that takes factors such as an increase of numbers of older disabled people

⁸ All Disability Counts 2001

⁹ The likelihood of multiple impairments increases with age. Living with Disability in New Zealand p25

¹⁰ Ibid pp 27-31

¹¹ Ibid pp 44-50

¹² Ibid

¹³ 18% of disabled and 7% of non-disabled people lived alone. Disability Counts 2001, p 17

- There are, overall slightly more disabled females than males. There Disabled males are more common in younger than older age groups. The opposite is true for women¹⁴
- A greater proportion of Maori are disabled than the national rates, and this is consistent throughout all of the age groups¹⁵. Fifteen percent of disabled people are Maori. An estimated 4% of Pacific People were disabled and 3% of Asian/other ethnicities were disabled.
- Overall the ethnic composition of the disabled population is similar to the ethnic composition of the population as a whole¹⁶

The above picture of disabled people as a group gives context to the following sections where the focus is more specifically on the key factors influencing their retirement income

Labour force Participation

From the total disabled population, 411,000 (55%) were of working age i.e. between 15 and 64 and living in households¹⁷. There are slightly more disabled females than males of working age but the difference is slight; it becomes increases with age¹⁸.

Labour force¹⁹ participation for that working age disabled population, was at a very much lower rate than for non disabled people of working age. Over a third (36%) of disabled adults of working age were not in the labour force²⁰ which is twice as high as the rate for non-disabled people (18%)²¹.

¹⁴ Disabled males 0-14 are 13% of the total disabled population while only 9% of the same-age disabled population is female. At age 65 and over 51% are male, and 56% are female Disability Counts 2001 Table 1.01a

¹⁵ At age 0-14 15% of Maori compared with 11% of all children were disabled. At 45-64 34% of Maori were disabled (ave. 25%) Over 65 the Maori rate of 41% was higher than the average of 51%. Disability Counts 2001

¹⁶ Living With Disability in New Zealand p21.

¹⁷ Living With Disability in New Zealand: Summary (2005) p 38. The calculations used are for the population living in households. They do not include the 2,200 disabled adults 15 to 64 who live in residential facilities.

¹⁸ Two of the more important reasons for this is that women have greater rates of disability arising from illness and age, and that women have a longer life expectancy

¹⁹ Not in the labour force is defined as a person who is neither employed for financial gain nor unemployed and actively seeking work. It also includes students, parents or carers of young children and people doing unpaid housework. Living with Disability in New Zealand (2004) p 457. .

²⁰ Living With Disability in New Zealand (2004) Appendix Table 5.1

²¹. Ibid. Disability Counts 2001(p17) elaborates to say 44% of disabled adults were in the labour force, compared to 74% of non-disabled adults.

There are some variations. Disabled women 15-64 were more likely than disabled men to not be in the labour force (43% females, 29% males)²². Maori, Pacific, Asian and other ethnicities disabled people were also more likely not to be in the labour force than non disabled people of the same ethnicities²³. Disabled people whose disability came from illness or disease were more likely not to be in the labour force than those whose disability had been present from birth²⁴.

Of those disabled people not in the labour force an estimated 45% were willing and able to work (22,000 adults)²⁵. Most (61%) had no special requirements, and of those with special requirements, the largest group (21%) required only modified working hours²⁶.

Unemployment

The 263,300 disabled labour force participants of working age in 2001 represented an increase of 31,600 the 1996 figure of 231,700²⁷. Despite the increased numbers though, employment was no easier to obtain. Instead, the unemployment rate for disabled adults rose from 7.7% in 1996 to 9.2% in 2001. This represents a 19.5% increase during the five year interval. In contrast the unemployment rate for non-disabled people was 5.9% in 1996 and still 5.9% in 2001.

A higher proportion of disabled job-seekers were unemployed for longer. Of disabled adults seeking work, 22% had been looking for work for over a year, with a further 25% seeking work for 6-12 months²⁸. Clearly remunerated work is harder to obtain for disabled people.

Employment

In 2001, disabled people were 15% of all adults in employment (i.e. working age adults with and without disabilities). But for disabled adults in the labour force employment was substantially lower than for non-disabled counterparts. Only 40% of them were employed, compared with 70% of non-disabled adults²⁹. The highest rate of

²² Living With Disability in New Zealand (2004) Appendix Table 5.1

²³ Labour force non-participation rates for disabled Maori were 41% (25% non disabled); Pacific people 47% (29%); Asian/other ethnicities 57% (36%) *ibid*.

²⁴ 48% of adults disabled by illness or disease were not in the labour force while 33% of adults disabled from birth were not in the labour force. Living with Disability in New Zealand Appendix table 5.2

²⁵ Living With Disability in New Zealand (2004) p220.

²⁶ Living With Disability in New Zealand (2004) Appendix table 5.14

²⁷ Disability Counts 2001 Tables 4.02a and 4.02b

²⁸ Living With Disability in New Zealand (2004) p 217

²⁹ *Ibid*

employment was for those in the 25-44 age group, with people 15-24 and 45-64 less likely to be employed.

Disabled adults whose disability was the result of an accident were most likely to be employed (62%), followed by adults disabled since birth (57%). Adults disabled from disease or illness were least likely to be employed (47%)³⁰.

Most disabled people in employment were paid employees (54%)³¹, although a sizable proportion were self-employed (17% total)³² either on their own account or had their own business (9%).

The largest occupational grouping for disabled people was in elementary occupations. Seventeen percent performed tasks such as delivering messages, collecting refuse, cleaning, packing and moving goods³³. Of the other occupations there was an even spread (10-12%) across trades, technicians and associate professionals, plant and machine operators, service and sales, clerks administrators and managers, and professionals³⁴.

Although employed disabled people were in a range of occupations, there was a large grouping in elementary occupations which are less well remunerated. This implies a likelihood that disabled people in employment would have lower levels of income³⁵.

Disabled women were almost half as likely again as their male counterparts to not be in the labour force³⁶. Disabled women were unemployed at a higher rate³⁷. Employed disabled women were more likely than men to have more than one job³⁸, and if in employment for wages, were more often plant operators, technicians, professionals or clerks than disabled men although they too were most often employed in elementary occupations³⁹.

For adults over 65 there is a similar pattern of marked disabled-non-disabled difference: 93% of disabled over 65s were not in the labour

³⁰ Ibid. Appendix table 5.2

³¹ Living with Disability in New Zealand (2004) Appendix table 5.5

³² Ibid

³³ Living with Disability in New Zealand (2004) Appendix table 5.8

³⁴ Ibid

³⁵ Disability survey data is not provided with a breakdown by income level against employment status.

³⁶ 43% compared with 29%. Living with Disability in New Zealand (2004) Appendix table 5.1

³⁷ Ibid

³⁸ Living with Disability in New Zealand (2004) p210

³⁹ Ibid , Appendix Table 5.8

force compared with 78% of non-disabled adults⁴⁰. Employment rates were 6% for disabled adults 65 and over while the non-disabled rate was 16%.⁴¹ 24% of the over 65s were paid employees, 21% owned their business and employed others.⁴²

Income

Whether employed or unemployed, disabled adults have, on average, a very low level of annual personal income. Over half (56%) have an annual income of \$15,001 or less, and only 5% have an annual personal income at or above \$50,000. By comparison 40% of non-disabled adults are on or below \$15,001 per annum⁴³ and 13% of non-disabled adults have more than \$50,000⁴⁴.

While almost half of disabled adults 15-64 (48%) get their income from wages or salaries⁴⁵, a further 26% of disabled adults derive their income from non ACC government benefits⁴⁶. The largest proportion of this non ACC group is for invalid's benefit 7% and of this total number disability present since birth is the largest proportion (19%). People with intellectual (27%) and psychiatric (19%) impairments are the most common users of this benefit⁴⁷. ACC payments constitute 4% of the total of income sources, while superannuation, veterans or other pensions constitute 38%.

Although income source against income level is not matched in survey tables it is possible to make an educated guess from two different sets of data set alongside a considerable body of anecdotal data from disabled people over a number of years.

Because a substantially larger proportion of disabled people derive their income from various government benefits compared to non-disabled people⁴⁸ the large group deriving income from this source is

⁴⁰ Living With Disability in New Zealand (2004) p 208

⁴¹ *ibid*

⁴² *Ibid* 210

⁴³ Disability Counts 2001, p 17

⁴⁴ *Ibid*

⁴⁵ Living with Disability in New Zealand (2004) p 220 ⁴⁵

⁴⁶ For disabled adults this comprises the following: community wage-job seeker 5%, sickness benefit 4%, domestic purposes benefit 4%, invalid's benefit 7%, student allowance 1% other government benefit 5%. Superannuation is not included in these figures, and it is noted that the total may be greater than 100% as income may have come from more than one source. Living with Disability in New Zealand (2004) Appendix table 5.17.

⁴⁷ All Living with Disability in New Zealand (2004) Appendix table 5.19

⁴⁸ 17% of non disabled people have non-ACC sources of government-benefit income Living with Disability in New Zealand (2004) Appendix table 5.17.

a part of an explanation for the high proportion of disabled people on an income of \$15,000 or less: however it is not the whole picture.

Of the 177,100 disabled adults of working age who receive an annual personal income of \$15,000 or less, an estimated 128,500 disabled people receive non ACC non superannuation or pension benefits⁴⁹. A further 48,600 disabled adults not on benefits have \$15,000 or less in annual personal income. This represents 11.8% of the working age disabled population and it seems likely that a reasonable proportion of this number are in employment, but on very low wages. As noted above, anecdotal evidence reports that many disabled people in work experience low wages, and survey data that notes the large proportion of employed disabled adults in elementary or other low-paid occupations (see footnote 33).

So although employment is experienced by many disabled people, it does not automatically mean that saving for retirement income is realistic for them. Both for the considerable numbers on benefits and for those in employment and on low incomes, the ongoing provision of superannuation will be necessary in the absence of retirement savings, unless substantial policy changes impact on employment and income for disabled people. Because survey data does not provide a breakdown of income-band against age bracket it is difficult to fully elaborate on the implications for retirement savings for disabled people.

However since disabled adults 15-24 are the most likely to not be in the labour force and have the lowest employment rate⁵⁰, future planning that focuses on this age group would probably be particularly beneficial. It would, however be of considerable benefit not to continue a low-income pattern that seems to be an overall feature of disability employment...

Home ownership

The last key aspect that can impact on retirement income is home ownership. Just over half (52%) of disabled adults own or partly the houses in which they live⁵¹. The rate of home ownership for disabled people is less than for non disabled people in all age groups. Home ownership is lower for younger people⁵². This is highlighted by the

⁴⁹ These figures for disabled adults of working age have been calculated from the data in Appendix table 5.17. Living With Disability In New Zealand (2004)

⁵⁰ Ibid Appendix table 5.1

⁵¹ Living with Disability in New Zealand (2004) Appendix table 6.7

⁵² 39% of disabled people 25-44 and 49% of non disabled adults 25-44 own their homes.

differing rates of home ownership from different causes of disability. Of adults with age-related disability, 66% owned or partially owned their own home, compared to the 27% whose disability had been present from birth⁵³. While home ownership as a useful adjunct to retirement savings is not a current problem, there will be lower rates in the future if these trends are sustained.

It is also significant that there are high number of disabled people in home ownership, but on very low incomes- disabled home owners are heavily represented in the bottom two income bands⁵⁴. This seems likely to have ongoing implications for home ownership and thus retirement income, as there may be a very limited capacity for disabled people to continue to service mortgages, thus not continuing to have what is useful to a stable retirement.

A third of the disabled adults rented, which is slightly lower than for non-disabled adults⁵⁵. Compared with disabled Europeans, (16%) Maori (36%) and Pacific (43%) disabled adults live in rented accommodation at a much higher rate. The largest source of rental accommodation used is Housing New Zealand.

Summary

From the data above there is evident disadvantage for disabled people that will have effects on retirement. Of these interconnected aspects, the following are of particular significance:

- Disabled people participate in the labour force at a very low rate (under half) and of those who do participate; they are less likely to be in employment. A relatively high proportion are unemployed.
- Although there was an increase in the numbers of disabled in the labour force between 1996 and 2001, there was not an increase in the rate of employment. Instead unemployment

Ibid

⁵³ Living with Disability in New Zealand (2004) Appendix table 6.8

⁵⁴ 60% of disabled home owners are on an income of \$15,001 or less, and 61% have an income between \$15,001 and \$30,000. Comparative figures for non-disabled home owners are 44% and 49% respectively. Living with Disability in New Zealand (2004) Appendix table 6.7

⁵⁵ Ibid

rates for disabled people rose by 19.5%, although overall unemployment rates remained the same.

- Of the relatively lower numbers of disabled people who were employed, a significant number were in elementary occupations that are unlikely to attract a high level of pay.
- Whether disabled people were or were not in employment, a majority were on the lowest level of income (\$15,001 or less). For almost half, this income came by some form of government benefit.
- Disabled people own homes at a lower rate than non-disabled people, and have a much larger proportion on low incomes. This means ongoing home ownership levels for disabled adults may fall if it proves too difficult to maintain mortgage payments. Home ownership is lower among younger adults, and those whose disability has been present from birth.

Future Developments

Population growth in New Zealand is gradually slowing: from 11% between 1986 and 1996 to 9% between 1996 and 2006. The number of children will only increase slowly⁵⁶. At the same time there is a large population bulge, corresponding to the post-war baby boom that is reaching retirement age.

Disabled people will constitute upwards of 20% of the population bulge: their numbers will increase, and as well because the rate of disability increases with age. This could be of considerable significance: there will be greater numbers of older people who are disabled who are reaching or about to reach the retirement age. Many will be women, and whether or not they have lived with disability for some time, they are likely to have had other gender-based disadvantage.

A majority of disabled people will have little or no retirement savings, and as their numbers increase, superannuation costs are likely to rise as will associated costs such as healthcare and transport.

⁵⁶ From the increase of 37,095 children between 1986 and 1996, the increase for the next ten years may be as low as 3,693. Disability in New Zealand (1998) p 28

2. BARRIERS RISKS OPPORTUNITIES

Barriers

The major barrier towards disabled people being able to accumulate retirement savings would seem to be the low income levels at which most exist.

Low incomes are further stretched by the extra costs of disability and how that might be adequately addressed. Extra costs of disability devolve from policies practices and environments that disabled people can only access on more costly terms. Such costs include transport, housing, healthcare electricity and communication. Disabled people consistently rate it as an income concern⁵⁷.

The original attempt to address the extra cost of disability, via a means tested disability allowance became increasingly complex as the definition increasingly focused on healthcare equipment and medication. In 2004, comprehensive research was instigated from an intersectoral government and consumer representatives⁵⁸.

The report from this research will probably be available early in 2008, but any uptake into income and employment policy is unlikely to be immediate. That the issue of extra costs of disability which is a remains unaddressed is an ongoing barrier. DPA regularly receives calls, e-mails and letters about this issue⁵⁹

Of the kinds of extra costs of disability, health needs are one of the more prominent. There is a substantial level of use of health services, as well as a considerable level of unmet need for health services⁶⁰. The extent of the unmet need combined with a use of health services implies a regular financial outgoing on this aspect to a greater extent for disabled people. However there is little research evidence for this although it is expected that the costs of disability research will improve this. Again, the policy implementation will be important.

⁵⁷ For example in the submissions on Whakanui Oranga, the NZ Disability Strategy, the costs of disability were reiterated as causing considerable concern and strain

⁵⁸ Funding for the research has mainly come via the Health Research Council's Partnership Initiatives Fund

⁵⁹ Personal communication to the author from Gary Williams, CEO of DPA, 2007.

⁶⁰ 21% of disabled adults 15-24 years and 24% aged 25-44 reported unmet health need. This drops with age. It is higher for females than males and higher on average for Maori and Pacific. The highest need was for doctors and dentists Living with Disability in New Zealand (2004). P 127 and Appendix tables 3.160, 3.161

Risks and Opportunities

This report focuses on risk and opportunity at two levels: societal and individual, acknowledging that these two levels will necessarily overlap.

The risks at an individual level include:

- A larger number of poor disabled people who haven't been able to save, and who have no income beyond superannuation
- A potential need to relinquish home ownership because of an inability to pay for rates, utilities maintenance out of minimal income,
- Increasing numbers of people who do not own homes and struggle to find adequate accommodation and security of tenure
- Greater levels of deprivation and ill health, arising from minimal income and savings, inability to afford enough health care and inadequate housing exacerbating existing conditions or fostering others.

Societal level risks include:

- Ongoing and high levels of financial assistance needed to provide assistance to disabled older people. This includes health services, community support services, transport options or residential support services, rates or utilities subsidies.
- Increasing pressure on Government to ensure it is consistent with Whakanui Oranga, the NZ Disability Strategy⁶¹
- Negative consequences for the economy in failing to employ the skills of disabled people, particularly during times when labour is scarce
- Negative consequences to society from any increase in inequalities
- Increase to levels of debt could leading to lower standards of living

Individual and societal opportunities are also similar. Opportunities to individuals would arise as a consequence of being able to be employed at levels of remuneration adequate enough for retirement savings. There would be greater opportunities for better health and participation in society. The opportunity to work would also present society with the opportunity to use more fully the skills of a wider pool of workers who would be contributing financially and paying more tax.

⁶¹ Notably Objective 4 (Opportunities in employment and economic development), Objective 7 (Long term support systems), Objective 9 (Quality Living in the Community), and Objective 10 (Collect and use information about disability).

3. POLICY DEVELOPMENT

Changes to current settings around employment for disabled people would be a priority area for policy change.

There has been considerable focus on encouraging disabled adults to work, notably in relation to encouraging disabled beneficiaries into the workforce⁶² and in other schemes targeted at intensively supporting disabled people into jobs⁶³.

However there has been minimal policy work aimed at encouraging employers to employ disabled people. Many of the submissions to Whakanui Oranga identified the inimical employer attitudes and negative stereotypes as impediments to obtaining, retaining, and progressing in employment. Over the last decade, the largest number of complaints to the Human Rights Commission have been about employment discrimination on the grounds of disability.

It is noted that some employers adhere voluntarily to good-employer practices, and there has been a very large amount of effort, principally disabled people led, directed at educating employers. But just as voluntary savings towards retirement income has not been as widely supported as would be desired, leading to changes in the policy mix; such initiatives have not been productive of the widespread change that is needed. Policy options that more strongly lead employers to take on disabled people into jobs where adequate remuneration can be obtained and thus be available for retirement savings would be the most useful policy focus.

The disability survey highlights, that 61% of unemployed disabled adults wanting to work have no special workplace requirements and a further 21% have no requirements beyond modified working hours. Since disabled people seeking employment are regularly told it would cost too much extra to employ them, policy that more firmly addresses this incorrect perception would prove useful to increasing employment and addressing discriminatory barriers.

It would be important to aim policies towards employment that is not at the low paid end of the job. Since many disabled people in

⁶² Eg EmployAble, Jobs Jolt and Working New Zealand initiatives that have been run by MSD

⁶³ Eg specialised disability employment organisations such as Workbridge, supported employment agencies such as Emerge, or schemes such as Mainstream

employment are in basic low paid occupations, the incentive to save on such low pay is very little.

A further direction for policy is in housing Complementary to those policies focused on adequately remunerated employment is policy initiatives to grow home ownership among disabled adults, focusing particularly on younger disabled people. For the older single men and women access to secure and adequate rental situations for the complete range of disabled people⁶⁴ is needed.

A last, very broad policy direction is to address the precarious and often elusive access to money that disabled people have in a holistic fashion. Disabled people will not be assisted by incoherent and rigid policies, and an over-regulated individualistic approach is, as Lunt and Pernice (1999) note not beneficial

⁶⁴ The situation of focusing on disabled people with high and complex needs or significant impairments has created a 'quiet desperation' underclass of disabled people with milder impairments who do not make it onto priority queues and have few options

4. Further research

This paper has been able to draw on a limited amount of research, which has limited its scope. While the census data is very useful, and the release of disability data from the 2006 post-census disability survey will provide additional help, particularly in enabling trends to emerge, it is not enough. There are many relevant aspects of retirement income for disabled people that are not known, and the following research suggestions would more adequately enable the Retirement Commission to monitor trends and establish priorities in disability retirement income.

This paper has noted the absence of ability to link categories of employment with a range or average rate of pay. Also noted is a lack of research to establish the impact of levels of income on home ownership.

A further absence is an inability to link income levels by numbers in employment, self employment or on various benefits. There is no ability in the present data available to check out the comparative hourly pay rates between disabled and non-disabled people with a breakdown on this by gender

For non-disabled people there are more regular household surveys to gather some of the data mentioned above. It would be very useful for a partnership with the Department of Statistics to be formed to explore how some of these data issues might be addressed. This was done with very productive results before the post census disability Surveys began.

A final area for research relates to the sizeable group of disabled people who are self employed (17%) and about whom little is known, eg types of occupations and levels of income.

Further research initiatives are needed, and a useful start to this would be to establish a research agenda whose development has been led by disabled people. Until more is known, it will continue to be easy to underestimate the size of the issue for retirement savings that disability constitutes and misconstrue its implications.

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