



People living with a disability

2022 Quality of Life survey snapshot

8-city

Overview

People living with a disability made up 14 per cent of the overall 2022 Quality of Life sample. The 2022 survey asked respondents whether they experienced long-term and persistent difficulties with six abilities: seeing, hearing, walking or climbing steps (mobility), remembering or concentrating (cognition), self-care, and communicating in their everyday language. Those who selected 'a lot of difficulty' or 'cannot do at all' for at least one of these were classified as 'living with a disability'.

Living with a disability was more common among those aged 18-24 and 65 years and over. However, there were age differences in the types of disabilities reported. Those aged 65+ more commonly reported mobility difficulties, whereas those aged under 25 more often reported cognitive difficulties. Living with a disability was also more common among Māori and Pacific respondents.

Two-thirds (65%) of those who reported living with a disability indicated that their overall quality of life was good. They tended to report poorer physical and mental health outcomes than the rest of the sample.

Those with a disability also more often reported experiencing a range of economic challenges, compared to those that did not have a disability. For instance, many reported being unable to work due to their health challenges, were more likely to report they did not have enough money to meet their everyday needs and were also less likely to be living in a high-income household. This resulted in other challenges, such as with housing costs.

Despite these challenges, those living with a disability were well-connected to their communities and had a high level of social participation. They also reported that they had good access to support systems.

More detail is provided in the following pages.

People with a disability in Aotearoa

According to Stats NZ's 2013 Disability Survey, about one-quarter of New Zealanders have a physical, sensory, learning, mental health, or other disability. As a significant segment of Aotearoa New Zealand's population, it is essential to understand their needs, issues, and opportunities.

Many local councils are committed to improving outcomes for people living with a disability and have mechanisms in place to facilitate this, such as advisory panels, strategies, and action plans.

This is the first time that disability statistics have been collected in the Quality of Life survey, which will enable local councils to understand the wellbeing of their citizens living with a disability.

Rangahau te Korou o te Ora/The Quality of Life (QoL) survey

The QoL survey is a collaborative local government project initiated 20 years ago, in response to the impacts of urbanisation on the wellbeing of New Zealand residents and communities. It is undertaken every two years.

In 2022, 7518 New Zealanders aged 18 years and over completed the survey – 6906 across the eight participating councils, of whom 934 were identified as having a disability (using the [Washington Group Short Set on Functioning](#)). Fieldwork took place from March to June 2022.

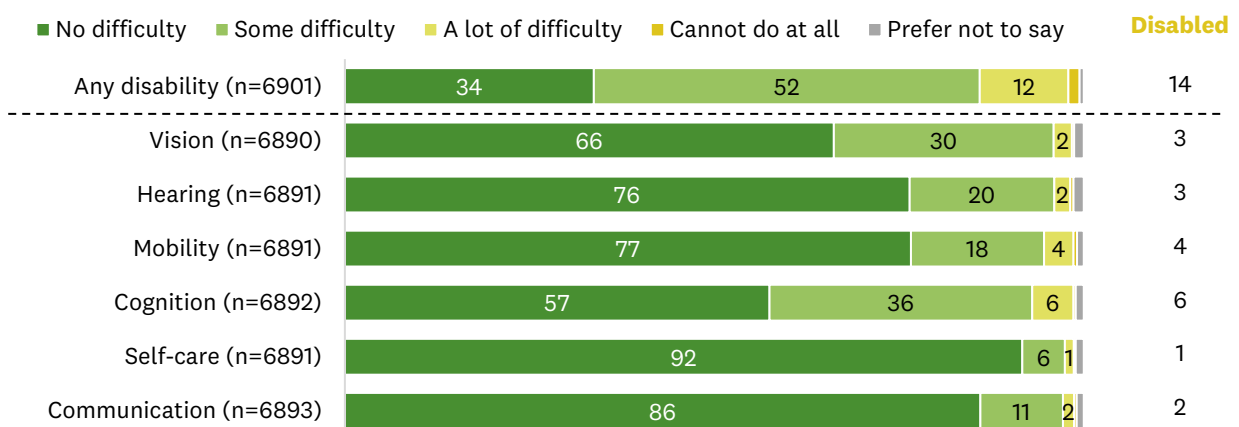
To find out more, go to www.qualityoflife.govt.nz

One in ten respondents were living with a disability

In 2022, we used the Washington Group Short Set, an internationally recognised set of six questions asking respondents whether they experienced ‘long-term and persistent difficulties’ with six abilities: seeing, hearing, walking or climbing steps, remembering or concentrating, self-care, or communicating in their everyday language. Respondents could select their level of difficulty for each: ‘no difficulty’, ‘some difficulty’, ‘a lot of difficulty’ or ‘cannot do at all’. According to the recommended interpretation, those who selected ‘a lot of difficulty’ or ‘cannot do at all’ for at least one of the abilities should be classified as ‘living with a disability’.

Over the eight-city sample, 14 per cent (934 people) were classified as living with a disability, based on the recommended identification. This group are the focus of this snapshot. We refer to them throughout as people living with a disability, although we acknowledge that this is a diverse group and not everyone will identify as being disabled.

The most common difficulty was ‘remembering or concentrating’ (cognition) (6%), followed by ‘walking or climbing steps’ (mobility) (4%), ‘seeing’ (3%), ‘hearing’ (3%), ‘communicating in your everyday language’ (2%), and ‘self-care, like washing all over or dressing’ (1%).



Some groups were more likely to report having long-term difficulties

Living with some form of disability was more common among the oldest and youngest respondents. One in five of those aged 18-24 (21%) and 65+ (20%) indicated they were facing some kind of long-term difficulty. There were also ethnic group differences, with 22 per cent of Māori and 20 per cent of Pacific respondents reporting they lived with a disability.

Notably, there were age-related differences in the type of disability reported, suggesting diversity in the experiences and worldviews of this overall group. Those aged 65+ (11%) were more likely to report experiencing mobility difficulties (compared to 4% of the total disabled sample), while those aged 18-24 (14%) were more likely to experience cognitive difficulties (compared to 6% of the total disabled sample). There were no ethnic group differences in the types of difficulties reported.

Of those reporting experiencing a long-term difficulty, three-quarters (74%) reported having just one only. Around one-fifth (18%) said they had two disabilities and 7 per cent reported three or more. Slightly more Pacific respondents (13%) reported they had three or more disabilities.

Those with a disability were generally positive about their quality of life

Around two-thirds (65%) of respondents living with a disability reported they had a good overall quality of life. This was significantly lower than the rest of the sample (86%). They were also more likely to rate their quality of life as poor (15%, compared to 3% of the rest of the sample).

When asked about changes in their quality of life in the 12 months prior to the survey, 16 per cent of those living with a disability said it had increased and half (48%) said it had decreased (14% said it stayed the same). Comments highlighted declining health or poor health as the foremost reasons for the decrease in quality of life. COVID-19 lockdowns had exacerbated this for many.

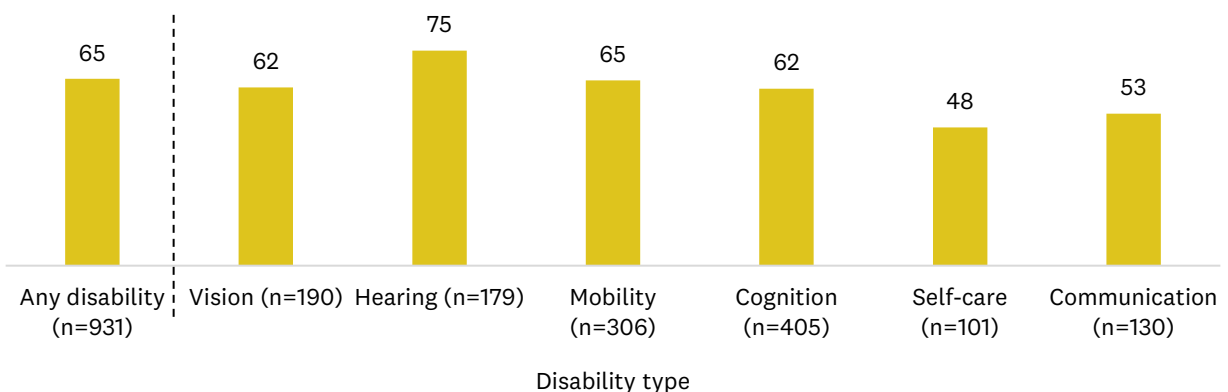
Can't receive healthcare I so desperately need to improve my health and quality of life. So much so that my life, and the life of my family, has been at risk due to delayed healthcare. (Hutt City, 25-39 years)

Because of my [disease], which has made life a little hard as I've had to comply with COVID... I can't stand wearing face masks as I struggle to breathe... So when I have to get petrol for my car or do my shopping it's a constant struggle for me. (Porirua, 50-64 years)

I have chosen to utilise my time wisely and spend it with people I care about. I am focussing more on what is beneficial to me mentally and because the world is pretty crazy with all this COVID stuff, I want to be able to make memories with the great people around me because we don't know what can happen next. (Auckland, 18-24 years)

There were some differences in reported quality of life based on the type of difficulties that respondents experienced. Three-quarters (75%) of respondents with a hearing difficulty reported that their overall quality of life was good. Meanwhile, around half of those with self-care (48%) and communication (53%) said their quality of life was good. There were no other differences in overall quality of life for respondents with seeing, mobility, or cognitive disabilities.

% of people with a disability reporting 'good' overall quality of life



The number of disabilities reported also impacted overall quality of life. Over two-thirds (70%) of those with just one disability said their quality of life was good, compared to 53 per cent of those living with two or more disabilities.

Those with a disability faced significant health challenges

Around half (45%) of those with a disability rated their physical health as good. One-fifth (21%) rated it as poor (compared to 4% of the rest of the sample). Fewer respondents with a mobility difficulty (30%) and those with a self-care difficulty (35%) reported that their physical health was good. However, more respondents with a hearing difficulty (58%) said their physical health was good.



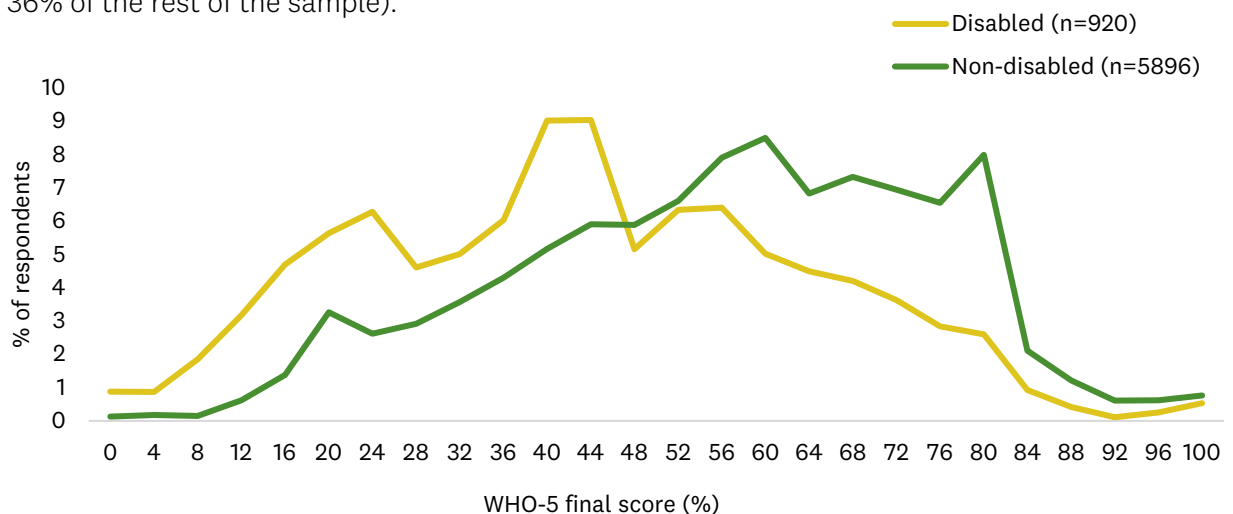
Despite the challenges they faced with their physical health, a similar proportion of those with a disability (30%, compared to 36% of the rest of the sample) said they had been physically active for at least 5 days in the previous week.



46 per cent of respondents with a disability rated their mental health as good. One-quarter (24%) rated it as poor (compared to 7% of the rest of the sample).

There were considerable differences in mental health by the type of difficulty reported. Again, more respondents with a hearing difficulty (64%) rated their mental health as good, as well as those with a mobility difficulty (56%). On the other hand, fewer respondents with a cognitive (28%) or self-care (24%) difficulty rated their mental health as good.

Lower mental wellbeing among those with a disability is reflected in their WHO-5 scores. Almost two-thirds (62%) of those with a disability had a WHO-5 score of below 52 (compared to 36% of the rest of the sample).



The WHO-5 is a measure of emotional wellbeing. A percentage score of 0 represents the worst possible emotional wellbeing while 100 per cent represents the best possible emotional wellbeing. Scores below 52 are considered indicative of poor emotional wellbeing.



Four in ten (41%) of those living with a disability reported they had ‘always’ or ‘most of the time’ felt stress that had a negative effect on them in the 12 months prior to the survey. This was much higher than the rest of the sample (25%).



Those with a disability reported a high level of access to support systems – 83 per cent said they could turn to someone for practical support and 79 per cent had access to emotional support. However, both were lower than for the rest of the sample (93% practical support, 91% emotional support).

Disabled respondents less satisfied with their housing situation



Half (53%) of disabled respondents disagreed that their housing costs were affordable, compared to 43 per cent of the rest of the sample.

Relatively large proportions of disabled respondents were satisfied with their housing and neighbourhood. Two-thirds (64%) agreed that their housing suited their needs (compared to 78% of non-disabled respondents) and 71 per cent agreed their neighbourhood suited their needs (compared to 82% of non-disabled respondents).

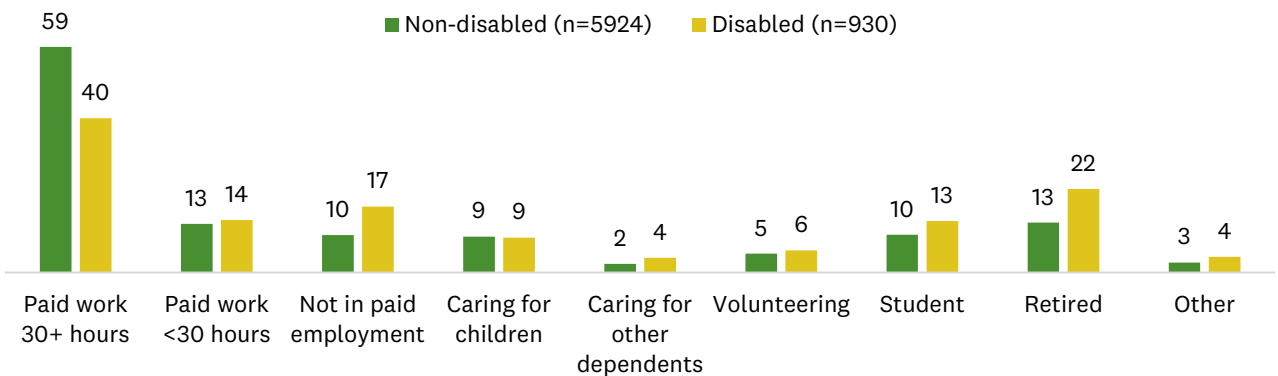
Disabled respondents more likely to face economic challenges



Disabled respondents (28%) were less likely than non-disabled respondents (49%) to say they have enough or more than enough money to meet their everyday needs. They were more likely to say they did not have enough money (33%, compared to 13% of non-disabled respondents).

Over half (54%) indicated that they were engaged in paid work – 40 per cent said they worked 30 hours or more a week and 14 per cent said they worked less than 30 hours a week. In addition, a larger proportion of disabled respondents (22%) indicated that they were retired than non-disabled respondents (13%). This is likely due to the large overlap between disabled respondents and respondents aged 65 years and over.

% employment status (multiple select, so proportions exceed 100 per cent)



Disabled respondents noted issues with using public transport

Around one-quarter (27%) of respondents living with a disability reported that in the previous 12 months, they had used public transport either ‘at least weekly’ or ‘at least monthly (but not weekly)’. They had varying perceptions of public transport.



56 per cent agreed that public transport was easy to get to – this was lower than for non-disabled respondents (63%)



36 per cent agreed that public transport was affordable



34 per cent agreed it was safe from crime or harassment – lower than for non-disabled respondents (46%)



47 per cent agreed public transport was frequent and 39 per cent agreed it was reliable



22 per cent agreed it was safe from catching COVID-19 or other illnesses

Disabled respondents felt connected to their communities but also often experienced feelings of isolation

Two-thirds (66%) of respondents living with a disability agreed that it was important to them to feel a sense of community with others in their neighbourhood. Around four in ten (44%) agreed that they did feel a sense of community with others in their neighbourhood. This follows a similar trend to non-disabled respondents.



Reflecting their high levels of social connection, two-thirds (68%) of those living with a disability said they participated in at least one type of social network or group. The most common types of social groups they participated in were hobby or interest groups (27%), faith-based groups or church communities (20%), group fitness or movement (17%), clubs and societies (17%), and professional or work networks (14%).



Despite relatively high levels of social and community connectedness, those living with a disability (28%) were more likely to 'always' or 'most of the time' feel lonely or isolated in the 12 months prior to the survey than non-disabled respondents (9%).



They were more likely to view racism and discrimination as a problem in their local area in the previous 12 months (61%, compared to 53% of non-disabled respondents).

Four in ten (42%) said they had personally experienced at least one form of prejudice, intolerance, or discrimination in their local area or city, in the previous three months, compared to 28 per cent of non-disabled respondents. The most common form of discrimination that disabled respondents personally experienced was due to a physical or mental health condition (18%), followed closely by ethnicity (17%), age (16%), and gender (15%).

Additionally, half (52%) of disabled respondents said they had witnessed at least one type of prejudice, intolerance or discrimination occurring to someone else in their local area or city in the previous three months, similar to 50 per cent of non-disabled respondents.

They were also less likely to rate their cultural identity perceptions positively



Disabled respondents (47%) were less likely to agree that they felt other people accepted and valued them and others of their identity compared to non-disabled respondents (59%).



They were also less likely to agree that they felt comfortable dressing in a way that expressed their identity in public (61%), compared to the rest of the sample (73%).



Finally, they were less likely to agree (57%) that they could participate, perform, or attend activities or groups aligning with their culture, in contrast to non-disabled respondents (70%).



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The 2022 Quality of Life snapshot reports, prepared by Auckland Council's Research and Evaluation Unit (RIMU), are part of an ongoing series covering a range of topics and demographic groups. Further snapshot reports will be released as they become available.

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