DISABILITY & SOCIOECONOMIC STATUS











SOCIOECONOMIC STATUS

Socioeconomic status (SES) encompasses not just income but also educational attainment, financial security, and subjective perceptions of social status and social class. Socioeconomic status can encompass quality of life attributes as well as the opportunities and privileges afforded to people within society. Poverty, specifically, is not a single factor but rather is characterized by multiple physical and psychosocial stressors. Further, SES is a consistent and reliable predictor of a vast array of outcomes across the life span, including physical and psychological health. Thus, SES is relevant to all realms of behavioral and social science, including research, practice, education, and advocacy.

SES AFFECTS OUR SOCIETY

SES affects overall human functioning, including our physical and mental health. Low SES and its correlates, such as lower educational achievement, poverty, and poor health, ultimately affect our society. Inequities in health distribution, resource distribution, and quality of life are increasing in the United States and globally. Society benefits from an increased focus on the foundations of socioeconomic inequities and efforts to reduce the deep gaps in socioeconomic status in the United States and abroad.

SES IMPACTS THE LIVES OF PEOPLE WITH A DISABILITY

Although the Americans with Disabilities Act assures equal opportunities in education and employment for people with disabilities and prohibits discrimination on the basis of disability, people with disabilities remain overrepresented among America's poor and undereducated. According to the U.S. Department of Labor's (2017) Office of Disability Employment Policy, the labor force participation rate for people with disabilities (including physical, intellectual and developmental,

sensory, and other disability categories) aged 16 and over is 20.1% as compared to 68.6% for people without disabilities of the same age. Disabilities among children and adults may affect the socioeconomic standing of entire families. In 2015, roughly 38,601,898 people in the United States had a disability (U.S. Census Bureau, 2015).

Income and Poverty for People With a Disability

The federal government has two major programs to assist persons with disabilities. Social Security Disability Insurance (SSDI) is an insurance program for workers who have become disabled and unable to work after paying Social Security taxes for at least 40 quarters. In this program, a higher income yields higher SSDI earnings. Supplemental Security Income (SSI) is a traditional welfare program for individuals with low income, fewer overall resources, and typically no or an abbreviated work history. The current federal benefit for a single person utilizing SSI is \$735 a month. Furthermore, in many states, SSI recipients automatically qualify for Medicaid. Despite these and other forms of assistance, persons with disabilities are more likely to be unemployed and live in poverty. The American Association of People with Disabilities estimates that two thirds of people with disabilities are of working age and want to work. The high incidence of poverty among persons with a disability fuels doubts about the sufficiency of public assistance to these individuals and incentives to help people return to work.

 Results from the American Community Survey (Americans With Disabilities Act Participatory Action Research, 2014) reveal significant disparities in the median incomes for those with and without disabilities. Median earnings for people with no disability were over \$30,469, compared to the \$20,250 median income reported for individuals with a disability (U.S. Census Bureau, 2015).

- In an effort to investigate unemployment disparities, a study surveyed human resources and project managers about their perceptions of hiring persons with disabilities. Results indicated that these professionals held negative perceptions related to the productivity, social maturity, interpersonal skills, and psychological adjustment of persons with disabilities (Chan, 2008).
- For individuals who are blind and visually impaired, unemployment rates exceed 70% (American Psychological Association Task Force on Socioeconomic Status, 2007); for people with intellectual and
- developmental disabilities, the unemployment rate exceeds 80% (Butterworth et al., 2015).
- Nearly 1 in 10 veterans with disabilities are not employed (Bureau of Labor Statistics, 2011).

Education Barriers for People With a Disability

- Disparities in education have been ongoing for generations. In a large study of individuals 65 years and older, 20.9% of those without a disability failed to complete high school, compared to 25.1% and 38.6% of individuals with a nonsevere or severe disability, respectively, who failed to complete high school (Steinmetz, 2006).
- Great disparities exist when comparing the attainment of higher degrees. According to the 2015 Census, about 15.1% of the population age 25 and over with a disability have obtained a bachelor's degree or higher, while 33% of individuals in the same age category with no disability have attained the same educational status (U.S. Census Bureau, 2015).

Health and Well-Being

- Lower levels of SES have consistently been correlated with poor health and lower quality of life. The existence of a disability can contribute to emotional instability for individuals and the families responsible for their care. Individuals with a disability and their families are at increased risk for poor health and quality-of-life outcomes when their disability status affects their socioeconomic standing.
- Research on disability and health care suggests that individuals with a disability experience increased barriers to obtaining health care as a result of accessibility concerns, such as transportation, problems with communication, and insurance (Drainoni et al., 2006).
- Research with adults with mobility impairments indicates that health promotion interventions targeted at persons with a disability can increase quality of life and control health care costs (Ravesloot, Seekins, & White, 2005).
- Research on medication adherence for disabiled Medicare beneficiaries illustrates the effects of economic strain on the health of disabled persons. Of disabled beneficiaries, 29% skipped medication, reduced the dosage, or failed to fill prescriptions because of the medication's cost (Soumerai et al., 2006).

 A substantial body of research shows that family members who provide care to individuals with chronic or disabling conditions are themselves at risk. Emotional, mental, and physical health problems can arise from complex caregiving situations and the strains of caring for frail or disabled relatives (National Center on Caregiving, 2017).

GET INVOLVED

- Consider SES in your education, practice and research efforts.
- Stay up to date on legislation and policies that explore and work to eliminate socioeconomic disparities. Visit the Office on Government Relations for more details: http:// www.apa.org/about/gr/pi/
- Visit APA's Office on Socioeconomic Status (OSES) website: www.apa.org/pi/ses
- Visit APA's Office on Disability website: http://www.apa.org/ pi/disability/

References can be found at http://www.apa.org/pi/ses/resources/publications/fact-sheet-references.aspx.