

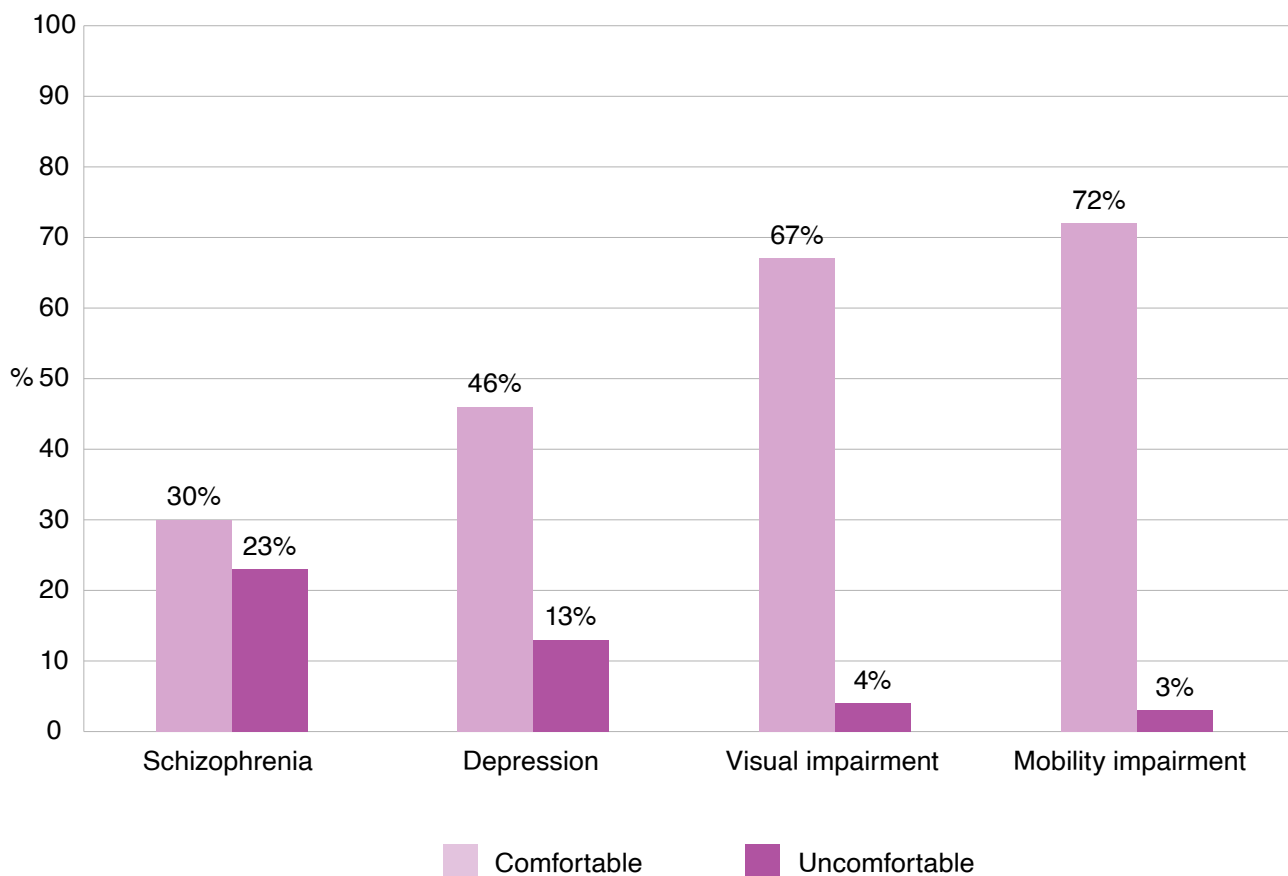
Disabled people at work

Accepted as equals?

Disabled people, who make up one in five of the working-age population, are less likely to be in employment than their non-disabled counterparts. Public attitudes, and the willingness or otherwise of employers and employees to welcome disabled people in the workplace, may be an important barrier to their employment. This chapter analyses attitudes towards disabled people in the workplace and how they vary towards people with physical impairments and people with mental health conditions.

Fewer people would be comfortable having someone with a mental health condition as their boss than someone with a physical impairment

Percentage who say they would be comfortable having a suitably qualified person with [impairment] as their boss



Source: British Social Attitudes 2021

Overview

The public support equal chances for disabled people in the workplace but would not necessarily want to work with a disabled person

The public is generally in favour of giving disabled people an equal chance in the workplace but would not necessarily be willing to have a disabled person as a colleague or their boss. This outlook may be tied to the perception that disabled people may not do as good a job as a non-disabled person.

- 49% think attempts to give people with physical impairments an equal chance in the workplace have not gone far enough.
 - 69% of the public would be comfortable having someone with a visual impairment as a colleague while 67% would be comfortable having them as a boss.
 - 41% think that in most workplaces people with a visual impairment are thought of as doing as good a job as anybody else most of the time.
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People are particularly likely to hold negative attitudes towards workers with mental health conditions

Attitudes towards people with mental health conditions, especially people with more severe and less common mental health conditions, tend to be more negative than attitudes towards people with physical impairments.

- 55% would be comfortable having someone with depression as a colleague and 39% would be happy having a colleague with schizophrenia. In contrast, 71% would be comfortable having someone with a mobility impairment as a colleague.
 - Whereas 72% would be happy having someone with a mobility impairment as their boss, only 46% would be happy having someone with depression as their boss.
 - Around one in four people say that in most workplaces people with depression (23%) and people with schizophrenia (26%) are hardly ever or never thought of as doing just as good a job as anyone else.
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People with personal experience of disability hold more positive attitudes towards disabled workers

People who have experience of disability, either as a result of being disabled themselves, or knowing someone who is disabled, would be more willing to work with disabled people. Experience of mental health conditions has a particularly strong positive impact on attitudes towards workers with mental health conditions.

- 78% of people with a physical impairment and 72% who know someone with a physical impairment would be comfortable with a boss who had a visual impairment. This falls to 61% of people who know no one with a physical impairment.
- 74% of people with a mental health condition would be comfortable having someone with depression as their boss. This compares with 46% of those who know someone with a mental health condition and only 26% of those who do not know anyone with a mental health condition.

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Introduction

The 2010 Equality Act prohibits discrimination against individuals in the workplace and society more generally on the basis of nine protected characteristics, one of which is disability. Under the Act a person is classed as disabled if they have a physical or mental impairment that has a substantial and long-term negative effect on their ability to do normal day-to-day activities. One in five of the working-age population are classed as disabled (Department for Work and Pensions, 2022a). The disability employment gap (that is the difference in employment rate between disabled and non-disabled people) has narrowed since the introduction of the Act (Department for Work and Pensions, 2022a). However, disabled people continue to be underrepresented in the workforce. While 82% of non-disabled people aged 16-64 are in employment, the same is true for only 54% of disabled people in the same age group (Office for National Statistics, 2022a). There is also a significant disability pay gap among those in employment. In 2021, median pay for disabled men was 12.4% less than non-disabled men while median pay for disabled women was 10.5% less than for non-disabled women (Office for National Statistics, 2022b). Of course, not everyone who is disabled necessarily wants to be in paid work. However, for those that do, public attitudes towards disabled people in the workplace, and the willingness or otherwise of employers and employees to make necessary adjustments to accommodate disabled workers, may be a significant barrier to employment. One study found, for example, that around half of disabled people not in employment reported that concerns about other people's views had prevented them from working (Disability Unit, 2021).

Previous research on attitudes towards disabled people highlights the potentially complex and specific nature of public attitudes towards this group. Prejudice towards disabled people tends to express itself differently than prejudice towards people with other protected characteristics. People rarely feel negatively towards disabled people or have difficulty with the idea of a disabled person marrying into their family for example. However, there is evidence of benevolent or paternalistic prejudice towards disabled people, that is, prejudice characterised by feelings of pity and sympathy (Cuddy and Fiske, 2002). Stereotypes of disabled people as less competent or productive than non-disabled people are common (Abrams et al., 2018; Dixon et al., 2018), perceptions which may in turn affect employment opportunities. Previous research has suggested that people with mental impairments may face more stigma than those with physical impairments (Dean and Phillips, 2016; Abrams et al., 2018).

The latest British Social Attitudes (BSA) survey includes a suite of questions which enable us to analyse public attitudes to disabled people in the workplace in detail. This includes general attitudes towards equal opportunities for disabled people in the workplace, perceptions of the competence of disabled people, and whether the respondent themselves would be happy to have a disabled person as their colleague and/or boss. The BSA questions ask separately for people's attitudes towards different types of impairment allowing us to examine how far attitudes differ between different types of mental and physical impairment.

The chapter first describes the current situation with regards to how people in the workplace with physical impairments and/or mental health conditions are regarded. It goes on to consider how attitudes vary by respondents' socio-demographic characteristics such as age and education, which have been linked to levels of prejudice towards other outgroups, as well as by characteristics specifically related to employment such as whether someone is in paid work. The final section of the chapter explores how attitudes vary by exposure to disabled people. Contact with members of the outgroup (that is, people with the characteristic against which there is prejudice) has been shown to reduce prejudice, including towards disabled people (Pettigrew, 1998; Pettigrew and Tropp, 2006; Wang et al., 2021) and may be important in shaping attitudes towards disabled people in the workplace, including whether employers are prepared to hire disabled people (Levy et al., 1993). The chapter considers how attitudes vary depending on whether the respondent themselves is disabled, knows someone who is disabled, or has no contact with anyone who is disabled. Again, attitudes towards people with mental and physical impairments are compared. Disabled people are not necessarily one homogenous outgroup and exposure to one type of impairment may not necessarily prevent prejudice and discrimination towards people with different impairments.

How does the public view disabled people in the workplace?

The first part of the chapter examines different aspects of the public's attitudes towards disabled people in the workplace starting with a general question about equal opportunities for disabled people in the workplace and going on to consider whether respondents themselves would be willing to work with a disabled person.

Equal opportunities for disabled people

The first set of questions designed to capture attitudes towards disabled people asks:

Have attempts to give people with [physical impairments/ mental health conditions] an equal chance in the workplace gone too far or not far enough?

Gone much too far

Gone too far

About right

Not gone far enough

Not gone nearly far enough

Respondents are asked separately about their views on equal chances for people with physical impairments and people with mental health conditions.

This question provides an indication of how aware the general public is of the barriers to employment that disabled people may face. It also provides a measure of what Abrams et al. (2018) term 'subtle prejudice'. Given that equality can only be achieved, not surpassed, people who think equality has gone too far may be indirectly expressing prejudice or resentment towards that group. Such questions may be more effective at picking up underlying prejudice than a more direct question where people would avoid disclosing hostile views towards a particular group.

As Table 1 shows, only a small minority of the public express subtle prejudice towards disabled people with seven per cent of people saying attempts to give people with physical impairments an equal chance in the workplace have gone too far and eight per cent saying the same for people with mental health conditions (see the chapter on 'culture wars' in this report to compare these figures against the public's views on equal chances for groups with other protected characteristics including race and sexuality). In contrast, around half of the population think that attempts have not gone far enough. Forty-nine per cent of the public say that attempts to give people with physical impairments an equal chance in the workplace have not gone far enough and 51% say that attempts to give people with a mental health condition an equal chance in the workplace have not gone far enough.

The relatively high support for attempts to give disabled people an equal chance in the workplace is consistent with findings from other research which has found that the public generally feel positively towards disabled people. Disabled people, along with older age groups, tend to experience benevolent prejudice and are subject to a mixture of admiration and pity which leads the public generally to be supportive of them (Abrams et al., 2018). However, while people may be supportive of equal opportunities for disabled people in the abstract, how are disabled people actually viewed in the workplace?

Table 1 Views on equal chances for disabled people in the workplace

	For people with physical impairments	For people with mental health conditions
Attempts to give disabled people an equal chance in the workplace have...	%	%
Gone much too far	2	2
Gone too far	5	6
About right	40	34
Not gone far enough	35	35
Not gone nearly far enough	13	16
<i>Unweighted base</i>	3138	3138

Perceived competence of disabled people

Research into prejudice and discrimination commonly finds that people tend to subscribe to certain stereotypes about outgroups. For disabled people, the most damaging (and common) stereotype is that they are less competent than non-disabled people (Dixon et al., 2018). Paternalistic attitudes towards disabled people, that is feelings of pity and sympathy, can lead to what has been termed benevolent prejudice whereby they tend to be viewed warmly but lacking in competence (Cuddy and Fiske, 2002; Abrams et al., 2018).

BSA asks the following question about how people with an impairment are perceived in the workplace:

Do you think that in most workplaces, [people with impairment] are thought of by their fellow workers as doing just as good a job as anybody else?

Most of the time

Some of the time

Hardly ever

Never

In recognition of the fact that people's views towards disabled people in the workplace may vary depending on the specific type of impairment in question, including whether that impairment is physical or mental, respondents were asked about one of two specific

physical impairments (a mobility issue or visual impairment) and one of two mental health conditions (depression or schizophrenia). Half of the sample was asked about visual impairment and schizophrenia and half about mobility impairment and depression.

Table 2 shows that a majority of people believe that disabled people are viewed by their fellow workers as being less capable in the workplace. Only a minority think that disabled people would never or hardly ever be viewed as doing as good a job as anybody else. However, whichever impairment is asked about, less than half think that disabled people would be viewed as doing as good a job most of the time. Perceptions vary though depending on the type of impairment. People tend to hold more positive views, that is, are more likely to think that disabled people would be viewed as doing as good a job most of the time, when asked about physical impairments than mental health conditions. Around two in five people think that people with a physical impairment would be thought of as doing just as good a job most of the time compared with one in five or fewer people who think this for mental health conditions. Around one in four people say that people with a mental health condition would hardly ever or never be seen as doing as good a job as anybody else.

Table 2 Perceived competence of disabled people with different mental and physical impairments

	Depression	Schizophrenia	Visual impairment	Mobility impairment
People with [impairment] are thought of by their fellow workers as doing just as good a job...	%	%	%	%
Most of the time	20	15	41	40
Some of the time	50	39	36	42
Hardly ever or never	23	26	11	13
Don't know	6	19	11	5
<i>Unweighted base</i>	<i>1569</i>	<i>1569</i>	<i>1569</i>	<i>1569</i>

Some conditions elicit a relatively high proportion of don't know responses. Nineteen per cent of people asked about schizophrenia and 11% asked about visual impairment say they don't know when asked if people with this impairment are viewed as doing as good a job. This compares with six per cent who say 'don't know' when asked about depression and five per cent who say 'don't know' when asked about mobility impairment. These findings probably reflect the relative incidence of these different conditions in the population and, therefore, the fact that people are less likely to have encountered someone with schizophrenia than depression.¹

¹ According to the Survey of Mental Health and Wellbeing in England (McManus et al., 2016) one in six people aged 16 and over had experienced symptoms of a common mental health problem, such as depression or anxiety, in the past week. Less than one per cent had experienced a psychotic disorder such as schizophrenia. Data from the 2020/21 Family Resources Survey show that one per cent of adults with an impairment reported vision impairments compared with seven per cent who reported mobility impairments (Department for Work and Pensions, 2022b).

The finding that the public tend to believe people with mental health conditions are viewed as less competent than people with physical impairments is confirmed if we compare the responses individuals gave when asked first about someone with a mental health condition and then someone with a physical impairment (see Table A.1 in Appendix 1). Of those individuals asked about depression and then mobility impairments, around a third report more positive views towards people with mobility impairments than those with depression while only one in ten report more positive views towards people with depression (the remainder hold consistent views across the two impairments). Findings are similar for individuals asked about schizophrenia and visual impairment.

The BSA question on capability in the workplace asks for respondents' views on how disabled people are viewed in the workplace rather than asking directly whether the respondent themselves sees disabled people as being competent or not. It is therefore intended as a measure of perceived discrimination in the workplace rather than the respondent's own prejudice. However, it is likely that the question is picking up on both things. For some people, especially those who are themselves disabled, responses to this question may reflect discrimination they themselves have witnessed/experienced but attitudes they do not necessarily share. For others, it is likely that their views on 'the workplace' will reflect attitudes they themselves hold towards disabled people. Regardless of the precise interpretation however, responses to this question do highlight that being perceived as less capable is a potential issue facing disabled people in the workplace, especially for those with mental health conditions.

It should be noted that, even after taking the type of impairment into account, some disabled people are likely to face more barriers to employment than others. For example, the disability employment gap is higher for men than for women and for older people aged 50-64 (Department for Work and Pensions, 2022a). However, BSA asks only for the respondent's attitudes to 'someone' with each of the impairments listed above. An exploration of the intersectionality of attitudes towards disability and other protected characteristics, that is, how attitudes differ towards disabled people depending on whether they are, for example, a man or a woman is therefore beyond the scope of this chapter but warrants further investigation.

Willingness to work with disabled people

The previous section highlighted the presence of potentially negative attitudes towards disabled people in the workplace. Next, we will look at people's own views on how they themselves would feel working with a disabled person. As for the previous question, respondents are asked about one physical and one mental impairment (visual impairments and schizophrenia or mobility impairments and depression). Measures of social distance, the extent to which people would be comfortable with various degrees of closeness of

relationship with members of different groups, are a well-established way of measuring prejudice and discrimination (Abrams et al., 2018). They are valuable because they tap into individuals' actual behavioural inclination rather than just general attitudes. Understanding how people might actually behave towards disabled people in the workplace is in turn important to understand the potential barriers to employment or career advancement that disabled people might face. For each of the four types of impairment (depression, schizophrenia, vision impairment and mobility impairment) BSA asked:

How comfortable or uncomfortable do you think you would feel if a suitably qualified person who has [physical or mental impairment] was appointed as your boss?

How comfortable or uncomfortable do you think you would feel if a suitably qualified person who has [physical or mental impairment] was appointed as your colleague or workmate?

Very comfortable

Fairly comfortable

Neither comfortable nor uncomfortable

Fairly uncomfortable

Very uncomfortable

We first consider people's attitudes towards having a disabled colleague. We will then turn to consider their feelings about having a disabled boss. Table 3 shows that only a small proportion of the public say outright that they would be uncomfortable having someone with any of the four types of impairment as a colleague (six per cent in the case of depression and three per cent in the case of mobility impairment for example). However, the proportion who say they would actually be comfortable with a disabled colleague does vary depending on the impairment asked about. First, people are more likely to say they would be comfortable with someone with a physical impairment as a colleague than someone with a mental health condition. For example, around four in ten say they would feel comfortable if a person who has schizophrenia was appointed their colleague whereas around seven in ten say they would feel comfortable if a person who has a mobility impairment was appointed their colleague. Second, people are more likely to say they would feel comfortable having someone with depression as a colleague (55%) than someone with schizophrenia (39%). These differences may reflect people's perceptions of the differing severity of the conditions asked about and/or their familiarity with them. As discussed above, depression is more prevalent in the population than schizophrenia.

Table 3 How comfortable people would be having someone with an impairment as their colleague or boss, by type of impairment asked about

	Depression	Schizophrenia	Visual impairment	Mobility impairment
Colleague	%	%	%	%
Comfortable	55	39	69	71
Neither comfortable nor uncomfortable	36	41	24	25
Uncomfortable	6	15	3	3
Boss	%	%	%	%
Comfortable	46	30	67	72
Neither comfortable nor uncomfortable	38	39	25	24
Uncomfortable	13	23	4	3
<i>Unweighted base</i>	1569	1569	1569	1569

Given that disabled people in the workplace are seen as being less capable (see Table 2) we might expect that, even if people are comfortable having a colleague with an impairment, they may feel less comfortable about that person being their boss, that is, being in a more responsible and senior position with authority over them. In fact, whether this is the case also depends on the type of impairment considered (Table 3). For physical impairments we find little difference between the proportion who say they would be comfortable (or uncomfortable) having someone with that impairment as their boss or having them as their colleague. Seventy-two per cent of people say they would be comfortable having someone with a mobility impairment as their boss, while similarly 71% say they would be comfortable having them as their colleague. However, when it comes to mental health conditions – either depression or schizophrenia – people are less likely to say they would be comfortable having that person as a boss than a colleague. For example, only 46% of people say they would be comfortable having a boss with depression compared with 55% who say they would be comfortable having a colleague with the same condition.

Does perceived competence influence people's willingness to work with a disabled person?

The evidence clearly points to the fact that people would feel more comfortable working with someone with a physical impairment than a person with a mental health condition, and that people would feel more comfortable with a person with a mental health condition as their colleague than their boss. As discussed, one reason why people may be wary about having a disabled person as a colleague and, especially, as their boss, is because they believe that disabled people are less competent in the workplace than those without disabilities.

The findings on people's willingness to work with a disabled person mirror what we found when asking how disabled people are perceived in the workplace, with people with a mental health condition, particularly schizophrenia, the least likely to be viewed as capable (Table 2).

As noted earlier, the BSA question on perceived competence asks about how people are viewed in the workplace in general rather than the respondent's own views on the capabilities of disabled people. Nevertheless, given the importance ascribed in the literature to the competence stereotype in driving attitudes towards disabled people, it is still interesting to examine the association between responses to the two questions. Table 4 presents evidence of a positive association between perceptions of competence and willingness to work with a disabled person. For all of the conditions asked about, people who report more positive views about how the competence of a person with that particular impairment is viewed in the workplace are also more likely to say they would feel comfortable having someone with that impairment as their boss or colleague. For example, 84% of people who say that people with visual impairments are considered by their fellow workers to do as good a job as anybody else most of the time would be happy to have someone with that impairment as a colleague, compared with just 48% of people who feel people with visual impairments are hardly ever or never seen as capable. Similarly, two-thirds of people who say people with depression are considered to do as good a job most of the time say they would feel comfortable with a colleague with depression, compared with just under half of people who feel people with depression are hardly ever or never seen as capable.

However, while perceived competence is obviously important, it is not sufficient to ensure people would feel comfortable working with someone with a mental health condition. For example, only around six in ten of those who say people with depression or schizophrenia are seen as competent most of the time would feel comfortable having someone with these conditions as their boss. This may be because, even though the respondent thinks people with this impairment are generally viewed positively in the workplace, they themselves still have concerns about competence. Alternatively, they may have other concerns not related to competence, such as being unsure about what adaptations might be needed or how they should approach someone with a mental health condition.

Table 4 Whether comfortable having a disabled person as colleague/boss, by type of impairment and how think people with that impairment are viewed by fellow workers

% saying comfortable having person with impairment as colleague/ boss	Do as good a job most of the time		Do as good a job some of the time		Do as good a job hardly ever or never	
	Boss	Colleague	Boss	Colleague	Boss	Colleague
Depression	59	67	46	56	41	49
Schizophrenia	60	63	29	43	27	34
Visual impairment	83	84	67	67	48	48
Mobility impairment	84	84	67	66	56	55

The bases for this table can be found in Appendix 1 of this chapter

In summary, the findings above highlight the ongoing potential for disabled people, particularly those with mental health conditions, to face discrimination in the workplace. Many people believe that attempts to give disabled people, be it people with physical impairments or mental health conditions, an equal chance in the workplace have not yet gone far enough. It is also the case that many people do not believe that disabled people – especially those with mental health conditions – are viewed in the workplace as being as capable as anyone else most of the time. Potentially as a result of this perception, not everyone is comfortable having a disabled person as their colleague and, in the case of mental health conditions, are even less likely to be comfortable having them as a boss.

We now go on to consider who is most likely to hold negative views of disabled people in the workplace.

How do attitudes vary by demographic characteristics?

This section of the chapter looks at how attitudes towards disabled people vary based on three demographic characteristics previously shown to be associated with prejudice towards different outgroups: age, education and sex.² Given the chapter is concerned with discrimination in the workplace, we also consider how attitudes vary depending on whether the respondent themselves is in paid work (and for whom the questions on working with disabled people are therefore most pertinent) and the type of work they do. We focus on two of the attitudinal indicators discussed in the previous section: a measure of people's general attitudes towards the outgroup (whether attempts to give disabled people an equal chance in the workplace have gone far enough) and a measure of their own willingness to work with disabled people (how comfortable they would be to have a disabled person as their boss).

² This section is concerned with how the demographic characteristics of the respondent affect their attitudes towards disabled people. It is not possible using BSA data to look at intersectionality in attitudes towards disabled people, that is how attitudes vary depending on the demographic characteristics of the disabled person asked about.

Age

Young people have been shown to be more open to and accepting of outgroups than older people with prejudice towards a variety of outgroups increasing with age (Van Hippiel et al., 2000). Our analysis suggests that the relationship between age and attitudes towards disabled people varies depending on the type of impairment asked about (Table 5).

When it comes to mental health conditions, we do find, broadly speaking, that it is the youngest age group who hold the most positive attitudes and the oldest age group the least positive. For example, 58% of people aged 18-34 say that attempts to give people with mental health conditions an equal chance in the workplace have not gone far enough. The same is true of only 50% of people 65 and over. Around two-thirds of 18-34 year olds say they would feel comfortable having someone with depression as their boss, compared with under half of those aged 35-64 and just over a quarter of people 65 and over.

Negative attitudes towards people with physical impairments are not associated with age to the same extent, however. The proportions of people aged 18-34 and aged 65 and over who think that attempts to give people with physical impairments an equal chance in the workplace have not gone far enough are similar (53% and 50%). People in the youngest age group are somewhat more likely than older age groups to say they would be comfortable with someone with a physical impairment as their boss, but the difference is less marked than is the case when asking about mental health conditions. For example, 73% of 18-34 year olds say they would be comfortable with someone with a visual impairment as their boss. The equivalent figures for 35-64 year olds and those aged 65 and older are 65% and 67% respectively. The relatively positive attitudes of the oldest age group towards people physical impairments, may potentially be explained by the fact that physical impairment is more common among older age groups. People with physical impairments are, therefore, not necessarily viewed as an outgroup by older age groups. We examine the relationship between exposure to physical and mental impairments and attitudes in the next section.

Table 5 Attitudes towards disabled people, by respondent age and impairment asked about

	18-34	35-64	65+
% saying attempts to give disabled people equal chances not gone far enough			
People with physical impairments	53	43	50
People with mental health conditions	58	48	50
<i>Unweighted base</i>	655	1654	823
% saying they would be comfortable with a boss with [impairment]			
Depression	66	46	28
Mobility impairment	76	72	67
<i>Unweighted base</i>	314	828	424
Schizophrenia	46	26	20
Visual impairment	73	65	67
<i>Unweighted base</i>	341	826	399

Education

Previous studies have also found an association between education and prejudice, with higher levels of education associated with greater acceptance of various outgroups (Carvacho et al., 2013). Our findings suggest this is also the case with general attitudes toward disabled people in the workplace. As shown in Table 6, people with higher levels of education (educated to degree level or above) are more likely than those without a degree to say that attempts to give disabled people an equal chance in the workplace have not gone far enough (57% versus 43%). The equivalent figures when asked about equal chances for people with mental health conditions are 60% and 47%.

The evidence that there is an association between education and actual behavior, that is, willingness to accept a disabled person as a boss, is more mixed, however. People without a degree are slightly less likely to say they would be comfortable having someone with a mobility impairment as their boss (70% compared to 76% of people with a degree). However, education appears to make relatively little difference to how willing people would be to have someone with a mental health condition as a boss. For example, only 31% without a degree and 29% of people with a degree say they would be comfortable having someone with schizophrenia as their boss.

Table 6 Attitudes to disabled people, by respondent education and impairment asked about

	Degree or above	Below degree level
% saying attempts to give disabled people equal chances not gone far enough		
People with physical impairments	57	43
People with mental health conditions	60	47
<i>Unweighted base</i>	1471	1639
% saying they would be comfortable with a boss with [impairment]		
Depression	49	45
Mobility impairment	76	70
<i>Unweighted base</i>	744	812
Schizophrenia	29	31
Visual impairment	70	66
<i>Unweighted base</i>	727	827

Sex

Women have generally been found to hold more positive attitudes towards outgroups than men (Bierly, 1985). Our findings also suggest that women hold more positive attitudes towards disabled people in the workplace, particularly those with mental health conditions (Table 7).

Women are more likely than men to say that attempts to give disabled people an equal chance in the workplace had not gone far enough. This is the case both when they are asked about chances for people with physical impairments (51% of women say they have not gone far enough compared with 44% of men) and chances for people with mental health conditions (54% compared with 49%). Although there is little difference between men and women in their willingness to have someone with either of the two physical impairments asked about as their boss, women are more likely than men to say that they would be willing to have someone with a mental health condition as their boss. For example, half of women say they would feel comfortable having a boss with depression compared with 43% of men. As discussed in the next section, the fact that women hold more positive attitudes than men towards people with mental health conditions in the workplace may be related to the fact that women are more likely than men to have a mental health condition.

Table 7 Attitudes to disabled people, by respondent sex and impairment asked about

	Women	Men
% saying attempts to give disabled people equal chances not gone far enough		
People with physical impairments	51	44
People with mental health conditions	54	49
<i>Unweighted base</i>	1751	1360
% saying they would be comfortable with a boss with [impairment]		
Depression	50	43
Mobility impairment	73	70
<i>Unweighted base</i>	857	698
Schizophrenia	35	26
Visual impairment	68	68
<i>Unweighted base</i>	894	662

Employment status

Given that the focus of this chapter is on attitudes towards disabled people at work, it is interesting to consider how the respondent's own work status might influence their attitudes. On the one hand, we might anticipate that people in paid work, some of who will have disabled colleagues or employees, may be more alert to the barriers disabled people face in the workplace. On the other hand, people in paid work, for whom having a disabled colleague or boss is a real rather than merely a hypothetical prospect, may be more reluctant to accept them in the workplace. At the same time, people who are not in paid work may also be more attuned to discrimination against disabled people if some of them have been prevented from taking up employment on account of being disabled.

The findings in Table 8, which show how attitudes towards disabled people at work vary among people of working age (18-64) depending on whether or not they themselves are in paid work, provide some support for the hypothesis that people not in paid work are more alert to the potential workplace barriers faced by disabled people. People not in paid work are more likely than people in paid work to say that attempts to give disabled people an equal chance have not gone far enough. For example, 58% of those not in paid work say that attempts to give people with mental health conditions an equal chance in the workplace have not gone far enough compared with 49% of those in paid work.

People not in paid work are more likely to say they would be comfortable with a boss with a mental health condition. For example, 38% of those not in paid work say they would be comfortable having a boss with schizophrenia compared with 31% of those in paid work.

However, whether this is because people not in paid work are genuinely more sympathetic to the idea of having a boss with schizophrenia, or whether they simply find it easier to assent to this hypothetical possibility in the absence of having any boss, it is not possible to tell.

We found few consistent patterns with regard to how attitudes towards disabled people at work varied by occupational class. However, it is worth noting that small employers and own account workers (that is the self-employed) are the most likely to say that attempts to give disabled people an equal chance in the workplace have gone too far (11% say this about chances for people with physical impairments and 14% for people with mental health conditions). This may be because of concerns among this group around the level of adaptation needed to employ disabled people.

Table 8 Attitudes to disabled people, by respondent employment status and type of impairment asked about

	In paid work	Not in paid work
% saying attempts to give disabled people equal chances not gone far enough		
People with physical impairments	44	53
People with mental health conditions	49	58
<i>Unweighted base</i>	1646	655
% saying they would be comfortable with a boss with [impairment]		
Depression	51	56
Mobility impairment	74	72
<i>Unweighted base</i>	830	310
Schizophrenia	31	38
Visual impairment	68	67
<i>Unweighted base</i>	816	345

The importance of exposure to disabled people

Prejudice and discrimination on the basis of protected characteristics such as disability are the result of the differential treatment of people with that characteristic (the outgroup) compared with others (the ingroup). We would expect members of the outgroup, in this case disabled people, to have more positive attitudes towards other members of the outgroup as well as, potentially, greater awareness of the challenges and discrimination they continue to face. Meanwhile, even if someone is not disabled themselves, there is considerable evidence to suggest that contact with members of the outgroup is an important factor in overcoming prejudice and discrimination.

Research suggests that this may be due to contact with outgroup members increasing knowledge about the group, helping people take the perspective of outgroup members and increasing empathy with members of the group (Pettigrew, 1998; Pettigrew and Tropp, 2006). This section considers the impact of exposure to physical and mental impairments on people's attitudes towards disabled people in the workplace. It compares attitudes towards disabled people in the workplace among members of the outgroup (that is people who are themselves disabled people), people who are not disabled themselves but know someone who is (contact with the outgroup) and people who report no exposure to disabled people. Throughout the analysis we make a distinction between physical and mental impairments, acknowledging the possibility that disabled people may not be one homogenous outgroup but several, depending on the type of impairment in question.

Who has experience of physical or mental impairments?

BSA asks respondents if they themselves, or someone they know, has a physical impairment or a mental health condition.³ Table 9 shows that one in ten people have some kind of physical impairment, nearly half know someone with a physical impairment, while around two in five report not knowing anyone with a physical impairment. The equivalent figures for mental health conditions are around one in five people who have a mental health condition themselves, just over half who know someone with a mental health condition, and just over a quarter who do not know anyone with a mental health condition (Table 10).⁴ When it comes to exposure to disabled people within the workplace, five per cent of people in paid work have a physical impairment and 17% have a mental health condition. A further 14% have a colleague with a physical impairment and 17% have a colleague with a mental health condition. It is interesting that despite people generally being less supportive of working with people with mental health conditions than physical impairments, it is more common for people to have had experience of the former than the latter.

Experience of impairment and exposure to disabled people varies significantly across the population, including by age. The overall proportion of people who have some exposure to physical impairment – either through themselves having an impairment or knowing someone with an impairment – does not vary significantly by age. However, older people are more likely to have a physical impairment themselves – 12% of people 65 and over report a physical impairment compared with seven per cent of 18-34 year olds

³ No examples of physical impairments or mental health conditions are given at these questions. It is left for the respondent to interpret this as they wanted.

⁴ The incidence of physical impairments and mental health conditions reported by BSA respondents is similar to that observed in the population as a whole (Department for Work and Pensions, 2022b).

(Table 9). Meanwhile, exposure to mental health conditions is much higher among younger age groups (Table 10). Thirty-seven percent of 18-34 year olds report having a mental health condition themselves while only 16% report not knowing anyone with a mental health condition. The figures are almost reversed for people 65 and over, only 15% of whom report having a mental health condition and 37% of whom have no contact with anyone who does.

There is no significant difference between men and women's experience of physical impairments. However, women are more likely than men to have been exposed to people with mental health conditions. Twenty-nine percent of men do not know anyone with a mental health condition compared with 22% of women.

Table 9 Whether respondent has experience of physical impairment, by sex and age

		Has a physical impairment	Knows someone with a physical impairment	Does not know anyone with a physical impairment	Unweighted base
All	%	10	48	41	3138
Sex					
Men	%	10	47	42	1360
Women	%	10	50	39	1751
Age					
18 to 34	%	7	47	44	655
35 to 64	%	10	48	40	1654
65 and over	%	12	49	38	823

Table 10 Whether respondent has experience of mental health conditions, by sex and age

		Has a mental health condition	Knows someone with a mental health condition	Does not know anyone with a mental health condition	Unweighted base
All	%	18	53	26	3138
Sex					
Men	%	17	52	29	1360
Women	%	20	55	22	1751
Age					
18 to 34	%	37	45	16	655
35 to 64	%	15	58	25	1654
65 and over	%	6	55	37	823

How exposure to disabled people affects attitudes

Our survey data show the expected association between exposure to and attitudes towards disabled people. We find that disabled people themselves hold the most positive attitudes towards disabled people (as well as being most aware of the potential for discrimination). Both disabled people and those who are not disabled themselves but who have contact with disabled people have more positive attitudes than people with no contact. Contact with someone with a mental health condition appears to be especially important in influencing attitudes towards this group.

Table 11 shows how attitudes towards equal chances for disabled people in the workplace vary depending on people's exposure to mental or physical impairment. Perhaps unsurprisingly, people who themselves have an impairment are most likely to say that attempts to give disabled people an equal chance in the workplace have not gone far enough. Fifty-six per cent of people with a physical impairment say that attempts for people with a physical impairment in the workplace have not gone far enough, whereas only 40% of people with no exposure to anyone with a physical impairment say the same. The difference is even more marked when it comes to mental health conditions. Nearly three-quarters of people with a mental health condition say that attempts to give people with mental health conditions an equal chance in the workplace have not gone far enough compared with just over a third of people with no exposure to anyone with a mental health condition.

Table 11 Views on equal chances for disabled people, by exposure to mental or physical impairment

% saying equal chances not gone far enough	For people with physical impairments	For people with mental health conditions	<i>Unweighted base</i>
Respondent...			
Has a physical impairment	56	61	297
Knows someone with a physical impairment	52	56	1556
Does not know anyone with a physical impairment	40	45	1243
Respondent...			
Has a mental health condition	62	72	549
Knows someone with a mental health condition	48	52	1750
Does not know anyone with a mental health condition	37	37	766

Non-disabled people who have had contact with a disabled person are also more likely than those without any contact to say that attempts to give disabled people an equal chance in the workplace have not gone far enough. People who know someone with a physical impairment are almost as likely as those with an impairment themselves to say that equal chances for people with physical impairments have not gone far enough (52% compared with 56% of people with a disability). Meanwhile, people who know someone with a mental health condition are not as likely as someone with a condition themselves to say equal opportunities for people who have a mental health condition have not gone far enough but are more likely than someone who does not know anyone with a mental health condition to say this.

A strong relationship between exposure to mental or physical impairment and attitudes is also observed in relation to people's willingness to work with a disabled person. The patterns observed are similar whether we ask about having someone as a boss or a colleague. Table 12 shows the findings when asking about a disabled boss. Once again, people who are themselves disabled, hold the most positive attitudes, followed by people who know someone else who is disabled. For example, 78% of people with a physical impairment would be comfortable having a boss with a visual impairment as their boss as would 72% of people who know someone with a physical impairment but only 61% of people who do not know anyone with a physical impairment. The relationship between exposure and attitudes is even more marked when it comes to mental health conditions. People who themselves have a mental health condition are much more likely to say they would be comfortable having someone with depression as their boss (74%) than someone who does not themselves have a mental health condition but knows someone who does (46%). Both groups are more willing to have someone with depression as a boss compared with someone with no exposure to anyone with a mental health condition (26%). Similarly, around half of people with a mental health condition would be comfortable having someone with schizophrenia as their boss, compared with around one in five people who do not know anyone with a mental health condition. Interestingly, people who themselves have a mental health condition are in fact the most likely to say they would be comfortable having a boss with any of the four impairments (mental or physical) asked about.

Table 12 How comfortable people would be having someone with an impairment as their colleague or boss, by impairment asked about and exposure to mental or physical impairment

% comfortable having a boss with [impairment]	Impairment			
	Depression	Schizophrenia	Visual impairment	Mobility impairment
Respondent...				
Has a physical impairment	47	38	78	73
Knows someone with a physical impairment	50	32	72	76
Does not know anyone with a physical impairment	43	27	61	66
Respondent...				
Has a mental health condition	74	52	81	82
Knows someone with a mental health condition	46	29	70	73
Does not know anyone with a mental health condition	26	21	56	61

The bases for this table can be found in Appendix 1 of this chapter

Whereas people hold similarly positive views of people with physical impairments regardless of whether their own experience is of physical impairments or mental health conditions, the same is not true in reverse. People whose experience is with physical impairments are not as positive as people whose own experience is with mental health conditions about people with mental health conditions in the workplace. For example, both 78% of those who have a physical impairment and 81% of those with a mental health condition would be comfortable having someone with a visual impairment as their boss. However, whereas 74% of people with a mental health condition would be happy having someone with depression as their boss, the same is true of only 47% of people with a physical impairment. These findings serve to emphasise that disabled people cannot be seen as one homogenous outgroup and that people with mental health conditions may face additional challenges when it comes to being accepted in the workplace.

The independent impact of exposure to mental or physical impairment on attitudes

Based on the findings above it appears that experience of disability – either through being disabled oneself or knowing someone who is disabled – may lead to more positive attitudes towards disabled people. However, as well as evidence of a strong association between experience and attitudes towards disabled people, we also know that experience of impairment varies by demographic characteristics, such as age and sex, that themselves are associated with attitudes towards disabled people. To try and isolate the independent impact of exposure on attitudes from the influence of demographic characteristics we therefore carried out a multivariate analysis.

We focus on the impact of exposure on how comfortable people say they would be having a disabled person as a boss. We ran a logistic regression that looked at the relationship between those who say they would be comfortable having a boss with an impairment and the level of exposure to impairment, controlling for age, sex, educational qualifications, occupational class and working status. We modelled the impact of exposure to mental health conditions on comfort having a boss with depression or schizophrenia and the impact of exposure to someone with a physical impairment on comfort with a boss with a visual or a mobility impairment. (see Tables A.4 to A.7 in Appendix 2 of this chapter).

After controlling for a range of demographics, exposure to disabled people and/or personal experience of impairment remains an important factor in how comfortable someone would be to have a boss with a mental or physical impairment. The strongest difference in attitudes is found between people who are themselves disabled and people who do not know anyone with an impairment. Being disabled themselves significantly increases the likelihood of someone being comfortable with a disabled boss whichever of the four conditions is asked about. However, confirming the findings from the bivariate analysis discussed above, exposure is more important in the case of mental health conditions than physical impairments. The odds of someone with a mental health condition being comfortable with a boss with depression are five times higher than the odds of someone who has had no exposure to anyone with a mental health condition. By comparison, the odds of someone with a physical impairment saying they would be comfortable having someone with a visual impairment as their boss are only two times higher than the odds of someone who has had no exposure to someone with a physical impairment.

Contact with other disabled people (as opposed to being disabled oneself) also has a significant positive effect on attitudes towards disabled people at work for two of the four conditions asked about – depression and visual impairments. People who know someone with a relevant impairment (but are not disabled themselves) are more likely than those who do not know anyone with a relevant impairment to be comfortable having a disabled boss. For example, if the respondent knows someone with a mental health condition, the odds of them being comfortable with having someone with depression as their boss are two times higher than the odds of a respondent who does not know anyone with a mental health condition. This suggests that increasing public exposure to disabled people may be one way to increase acceptance of disabled people in the workplace. For other conditions, such as schizophrenia, increasing knowledge of that particular condition may be more important. It is perhaps not surprising that we do not find a strong relationship between contact with someone with any mental health condition and schizophrenia given the relatively low prevalence of schizophrenia in the population.

For most people who have had exposure to people with mental health conditions this is unlikely to have been exposure to someone with schizophrenia.

After controlling for exposure, sex remains important in explaining attitudes towards mental health conditions but not physical impairments; women are more likely than men to say they would be comfortable having someone with depression or schizophrenia as a boss. Age also continues to be independently associated with attitudes towards disabled people at work. Young people are more likely to say they would be comfortable having a disabled boss. The effect of age is particularly strong when asking about a boss with a mental health condition. For example, the odds of an 18-34 year old saying they would be comfortable having a boss with depression are four times higher than the odds of someone aged 65 or older saying they would be comfortable. If this relationship between age and attitudes represents a generational shift towards more positive attitudes towards mental health it could mean that attitudes towards disabled people, particularly those with mental health conditions, may become more favourable over time.

Conclusions

This chapter has shown that the public is largely supportive of giving equal opportunities to disabled people in the workplace. Only a small minority believes that attempts to give disabled people an equal chance in the workplace have gone too far. Conversely, around half of people think that attempts – whether for people with physical impairments or people with mental health conditions – have not gone far enough.

Public perceptions of how disabled people perform in the workplace and people's willingness or otherwise to actually work with disabled people highlight the fact that disabled people continue to face barriers to successful employment. Many people do not believe that disabled people are viewed in the workplace as being as capable most of the time as anyone else. Potentially as a result of this perception, not everyone is comfortable having a disabled person as a colleague and, in the case of mental health conditions, even less likely to be comfortable having them as a boss. This may have a negative impact, not only on the chance of people with mental health conditions gaining employment but also on their chances of progressing in their chosen field once employed. That said, attitudes clearly vary depending on the type of impairment people are asked to consider. People are more positive when asked about working with someone with a physical impairment, a mobility impairment or visual impairment. They are less positive about working with someone with depression and least likely to be comfortable with someone with schizophrenia in the workplace.

Attitudes towards disabled people, especially those with mental health conditions, are more positive among women and younger people. These groups are more likely to report having a mental health condition and/or to know someone with a mental health condition. However, even after taking differences in exposure to mental health conditions into account, women and people aged 18-34 are generally more positive about people with mental health conditions being in the workplace and more likely to say they would be comfortable having someone with depression or schizophrenia as their boss. The positive relationship between age and attitudes gives reason to expect that attitudes towards disabled people in the workplace may become more accepting over time.

Consistent with outgroup theories of prejudice, exposure to disabled people or personal experience of impairment is an important factor in shaping attitudes towards disabled people in the workplace. Generally disabled people themselves hold the most positive views, followed by those who are not themselves disabled but know someone who is. Those with no contact with disabled people tend to have the least positive views. Contact is particularly important for positive attitudes towards those with mental health conditions. Whereas people hold similarly positive views of people with physical impairments regardless of whether their own experience is of physical impairments or mental health conditions, the same is not true in reverse. People whose experience is with physical impairments are not as positive as people whose own experience is with mental health conditions about people with mental health conditions in the workplace. These findings serve to emphasise that disabled people cannot be seen as one homogenous outgroup. Rather, disabled people may face different challenges and barriers to employment depending on the nature of their impairment.

Although many people already have some experience of disability, either first or second hand, around two in five people currently do not know anyone with a physical impairment and around one in four do not know anyone with a mental health condition. For at least some of the impairments asked about, contact with someone else with an impairment can lead to non-disabled people holding more positive attitudes towards disabled people in the workplace. This suggests that attempts to increase contact between disabled and non-disabled people may help to improve acceptance of disabled people in the workplace. Raising awareness and knowledge of less common impairments, such as schizophrenia, may also help to shift perceptions on people with these impairments.

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Appendix 1

Table A.1 Comparing individual responses to the question “Do you think that in most workplaces, [people with impairment] are thought of by their fellow workers as doing just as good a job as anybody else?” across impairments

	Depression/ mobility impairment	Schizophrenia/ visual impairment
Respondent's views are...	%	%
More positive about physical impairment	35	36
More positive about mental health condition	10	7
No difference	47	36
Don't know	8	21
<i>Unweighted base</i>	<i>1569</i>	<i>1569</i>

Table A.2 Unweighted bases for Table 4 – Whether comfortable having a disabled person as colleague/boss, by type of impairment and how think people with that impairment are viewed by fellow workers

	Do as good a job most of the time		Do as good a job some of the time		Do as good a job hardly ever or never	
	Boss	Colleague	Boss	Colleague	Boss	Colleague
Depression	314	314	788	788	361	361
Schizophrenia	240	240	618	618	398	398
Visual impairment	664	664	588	588	161	161
Mobility impairment	640	640	679	679	170	170

Table A.3 Unweighted bases for Table 12 – How comfortable people would be having someone with an impairment as their colleague or boss, by impairment asked about and exposure to mental or physical impairment

	Depression	Schizophrenia	Visual impairment	Mobility impairment
Respondent...				
Has a physical impairment	144	153	153	144
Knows someone with a physical impairment	809	747	747	809
Does not know anyone with a physical impairment	597	646	646	597
Respondent...				
Has a mental health condition	293	256	256	293
Knows someone with a mental health condition	885	865	865	885
Does not know anyone with a mental health condition	358	408	408	358

Appendix 2: Multivariate analysis

Table A.4 Logistic regression model for whether comfortable having a boss with depression

	Coefficient	Standard error	Odds Ratio	p value
Exposure (does not know anyone with mental health condition)				
Has mental health condition	**1.64	0.23	5.17	0.000
Knows someone with mental health condition	**0.71	0.18	2.03	0.000
Age (65 and over)				
18 – 34 years old	**1.39	0.23	4.00	0.000
35 – 64 years old	**0.67	0.19	1.95	0.000
Sex (male)				
Female	*0.30	0.14	1.35	0.029
Education (below degree)				
Degree	0.16	0.15	1.17	0.269
Social Class (Semi-routine or routine)				
Managerial class	0.19	0.24	1.20	0.435
Intermediate occupations	0.47	0.29	1.61	0.104
Small employers and own account workers	-0.28	0.37	0.76	0.452
Lower supervisory and technical occupations	0.52	0.33	1.68	0.113
Working Status (not working)				
Paid work, furlough or maternity leave	-0.02	0.17	0.98	0.907
Constant	-1.86	0.28	0.16	0.000
R2 (adjusted)	0.19			
<i>Unweighted base</i>	1426			

*=significant at 95% level **=significant at 99% level

Table A.5 Logistic regression model for whether comfortable having a boss with schizophrenia

	Coefficient	Standard error	Odds Ratio	p value
Exposure (does not know anyone with mental health condition)				
Has mental health condition	**0.97	0.23	2.63	0.000
Knows someone with mental health condition	0.21	0.18	1.23	0.264
Age (65 and over)				
18 – 34 years old	**0.87	0.26	2.39	0.001
35 – 64 years old	0.24	0.22	1.27	0.279
Sex (male)				
Female	**0.41	0.15	1.50	0.008
Education (below degree)				
Degree	-0.15	0.16	0.86	0.355
Social Class (Semi-routine or routine)				
Managerial class	-0.22	0.25	0.80	0.374
Intermediate occupations	-0.25	0.30	0.78	0.415
Small employers and own account workers	-0.53	0.42	0.59	0.215
Lower supervisory and technical occupations	-0.52	0.38	0.60	0.177
Working Status (not working)				
Paid work, furlough or maternity leave	-0.09	0.19	0.91	0.620
Constant	-1.31	0.29	0.27	0.000
R2 (adjusted)	0.10			
<i>Unweighted base</i>	<i>1345</i>			

*=significant at 95% level **=significant at 99% level

Table A.6 Logistic regression model for whether comfortable having a boss with visual impairment

	Coefficient	Standard error	Odds Ratio	p value
Exposure (does not know anyone with physical impairment)				
Has physical impairment	**0.73	0.28	2.08	0.009
Knows someone with physical impairment	*0.34	0.15	1.40	0.026
Age (65 and over)				
18 – 34 years old	*0.52	0.25	1.68	0.034
35 – 64 years old	0.09	0.20	1.09	0.663
Sex (male)				
Female	-0.17	0.14	0.84	0.225
Education (below degree)				
Degree	-0.02	0.16	0.98	0.891
Social Class (Semi-routine or routine)				
Managerial class	0.16	0.23	1.17	0.498
Intermediate occupations	0.48	0.27	1.62	0.071
Small employers and own account workers	0.46	0.37	1.58	0.213
Lower supervisory and technical occupations	-0.55	0.33	0.58	0.097
Working Status (not working)				
Paid work, furlough or maternity leave	-0.15	0.18	0.86	0.393
Constant	0.54	0.25	1.72	0.027
R2 (adjusted)	0.04			
<i>Unweighted base</i>	1415			

*=significant at 95% level **=significant at 99% level

Table A.7 Logistic regression model for whether comfortable having a boss with mobility impairment

	Coefficient	Standard error	Odds Ratio	p value
Exposure (does not know anyone with physical impairment)				
Has physical impairment	0.52	0.28	1.67	0.061
Knows someone with physical impairment	**0.44	0.15	1.55	0.003
Age (65 and over)				
18 – 34 years old	*0.53	0.27	1.70	0.047
35 – 64 years old	0.24	0.21	1.27	0.268
Sex (male)				
Female	0.29	0.15	1.33	0.051
Education (below degree)				
Degree	*0.32	0.16	1.38	0.040
Social Class (Semi-routine or routine)				
Managerial class	0.04	0.25	1.04	0.867
Intermediate occupations	0.54	0.32	1.71	0.090
Small employers and own account workers	-0.34	0.36	0.71	0.340
Lower supervisory and technical occupations	0.14	0.35	1.15	0.689
Working Status (not working)				
Paid work, furlough or maternity leave	-0.04	0.20	0.96	0.831
Constant	0.24	0.27	1.26	0.388
R2 (adjusted)	0.04			
<i>Unweighted base</i>	1456			

*=significant at 95% level **=significant at 99% level

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