

Disability in LMICs: Measurement, challenges and opportunities

Wednesday 3 September, 9am

Spatial Disparities in Disability Prevalence at the District Level in Sub-Saharan African Countries

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The World Health Organization estimates that the highest prevalence of disability among individuals below age 60 years is observed in sub-Saharan Africa. Yet, knowledge of disability remains limited in the region, which is partly due to the lack of robust and comparable measurements of disability. In Sub-Saharan Africa, sub-national and comparable estimates of disability prevalence are limited.

This paper aims to use comparable sources of data to estimate and construct an atlas of sub-regional disability prevalence. We take data from the Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Surveys (MICS) which use the Washington Group on Disability Statistics (WG) short set of questions, which is designed to be a 'culturally neutral' disability screening tool. The questionnaire assesses limitations across six functional domains (seeing, hearing, walking, cognition, communication and self-care). We have data for a total of 26 Sub-Saharan African countries which were collected between 2016 and 2022. We aim to estimate the age-specific prevalence of functional limitation in the population aged 15-49 at the second subnational administrative division level in each country. Given the instability of direct estimates at the subnational level, we use recently developed small area estimation techniques that borrow strength over age and space. From our estimates we compute age standardized prevalences of limitation to facilitate comparison between regions and countries. Preliminary results show large heterogeneity between and within countries, but the amount of within-country differences varies from country to country.

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Cognitive interviews to test the translation of international disability measures

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To answer to the pressing global need for reliable and comparable disability statistics for both policy and research, the Washington Group on Disability Statistics (WG) has developed a standardized short set of questions (abbreviated as WG-SS) to measure disability, focusing on the ability in six domains: seeing, hearing, walking, cognition, self-care, and communication (Madans et al. 2011). However, only nine officially validated translations of these WG-SS questions are available on the official website – none of them covers a local African language.

Previous research has compared results from different, nationally representative population surveys in Cameroon that lead to different prevalence levels of disability (Simo Fotso et al. 2019). The nature of the term used (i.e. "disability" vs "handicap") and the condition of the interview explain a part of the discrepancy but differences may also result from translation issues from the French or the English versions (the two official languages in a country with multiple local languages).

Our objective is to translate the WG-SS into three Zambian local languages (Bemba, Chewa/Nyanja, Nsenga) and to test the quality of these translations through 60 cognitive interviews obtained via a quota, convenience sample. Cognitive interviewing employs techniques such as probing and thinking aloud with the aim to uncover the respondent's cognitive processes in responding and to identify potential misunderstandings connected to translation. The results of the cognitive interviews will inform the translation of an extended questionnaire based on the WG-SS for a survey experiment administered via telephone.

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Rethinking Disability Measurement: Tools, Data Sources, and Variations in Estimates of Disability Prevalence in Indonesia

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Good quality disability data are urgently needed to address barriers faced by disabled people and provide targeted support for those who need it most. In Indonesia, data on disability have been collected through censuses and population surveys conducted by government institutions. However, different institutions use different tools to measure disability, which reflect varying perspectives on disability conceptualisation and who is classified as disabled. This inconsistency creates challenges in determining which data should be used when estimating the disability prevalence for the Indonesian population and to aid further analysis aiming to provide support for the disabled population.

This study analyses two nationally representative cross-sectional surveys conducted on the same participants in 2018. The National Socio-Economic Survey (SUSENAS) was conducted by Statistics Indonesia (BPS), and the National Basic Health Research (RISKESDAS) was conducted by the Ministry of Health (KEMENKES). This was the last wave of the integrated survey, creating a unique opportunity to compare multiple tools used to measure disability.

The two surveys produced significantly varied estimates of disability prevalence (2.8% using SUSENAS and 15.2% using RISKESDAS). Furthermore, both surveys are not capturing the same group of disabled people, as some individuals are classified as disabled in one survey but not in the other (only a 3% overlap between them). Both surveys have been used to assess disability status in Indonesia, with their data informing academic research and policy analysis. However, without understanding the distinct approaches adopted by the tools and surveys, further analysis risks misinterpreting the data.

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