NSI of Bulgaria
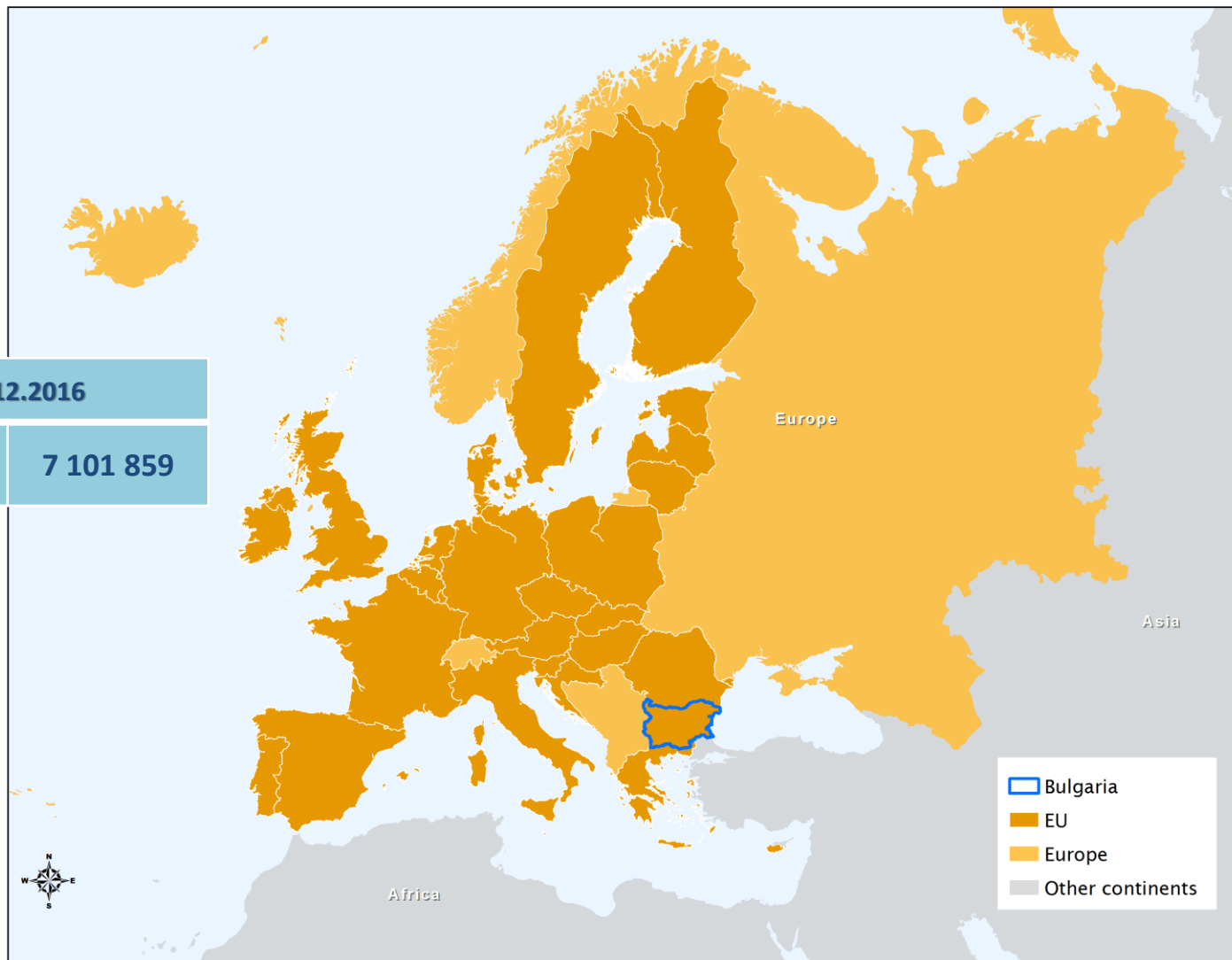**National practice of Collection of data on disability – data sources**

UN Regional Meeting
6-8 June 2017, Almaty, Kazakhstan

Republic of Bulgaria

As of 31.12.2016	
Population	**7 101 859**

Legend:
- Bulgaria
- EU
- Europe
- Other continents

Europe

Asia

Africa

September 11-12, 2013, Daejeon, Republic of Korea

UN AND EU REGULATIONS AND REQUIREMENTS

- **United Nations Convention on the rights of persons with disabilities - entered into force in May 2008**

- The Convention is intended as a human rights instrument, with an explicit social development dimension. Its purpose is to 'promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity'; it also sets out a code of implementation.

- **Article 31** of the Convention refers to statistics and data collection.

States undertake to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies

- **Article 33 -** Treat national implementation and monitoring -States shall maintain a framework to promote and monitor implementation of the Convention.

- **Medical and social disability models**

- The medical model focuses on a health condition — a disease, illness, injury or health problem — of an individual which directly causes the disability of that individual, potentially impacting on that individual's quality of life. As a consequence, medical intervention may be required to identify and treat the disability, and/or to maintain or increase functioning.

- The social model focuses on socially-created barriers. These barriers may be physical or concern attitudes and other social features that do not accommodate the variety of abilities of the population.

- Information for persons with disabilities has national importance in the formation of policies on the integration of people with disabilities and their families in economic and social life.

- In order to collect information concerning the number of people with disabilities in the country, there are national sources used for the estimation of disability prevalence.

- The main types of surveys for collecting data about persons with disabilities are:

- **Population censuses**

- **Households based Sample surveys (either general social surveys or specific health and disability surveys)**

- **Administrative data sources**

- Each of these tools can be used to measure aspects of disability in a population and each has its strengths and weaknesses.

The Population Census as a data source

- In the period 1-28 February 2011, the 17th census in the demographic history of the Republic of Bulgaria was successfully carried out.

- For the first time the Census was done by eGovernment service – electronic enumeration via Internet (eCensus– web-based application), for the period February 1st – 9th., and from February 10th until the 28th - through face-to-face interview with enumerators.

- The responsible institution for conducting the Population and Housing Census is National Statistical Institute of Bulgaria (BNSI).

- **The 2011 Population Census as a data source**
- 2 questions are asked:

Do you have assigned by medical commission percentage of reduced working capacity (persons 16 and over)

- 1. No
  - 2. Up to 50%
  - 3. From 50 to 70% (III group)
  - 4. From 71 to 90% (II group)
  - 5. Over 90% (I group)
- The question refers to persons aged 16 and above.
- The percentage of the lost working capacity or degree of disability ся assigned by a Territorial Expert Medical Commission (TEMC) or by the National Expert Medical Commission (NEMC) is indicated.
- The degree of disability/degree of lost working capacity is defined as percentage of the capacity of a healthy person.
- The degree of disability/ degree of lost working capacity is grouped according to national legislation.
- This answering to disability question is voluntary, i.e. the person may not answer if he/she does not want to.

- 2. Assigned by Children medical commission reduced capacity for social adaptation
- (persons under 16)
- 1. No
- 2. Up to 50%
- 3. From 50 to 90%
- 4. Over 90%

- The question refers to persons under 16 years old and the answer is indicated either by the parents or by an authorized person in case of collective household. The degree of disability assigned by Children's Expert Medical Commission (CEMC) or by the National Expert Medical Commission (NEMC) is indicated.

- The degree of disability is defined as percentage of the capacity of a healthy person.

- The degree of disability is grouped according to the national legislation as of 01.02.2011.

- The answering is voluntary, i.e. the person may not answer if he/she does not want to.

Medical concept – data source is the medical expertise

- In accordance to the Health Act medical expert opinions and reports shall be given to establish the extent of loss of working capacity or a degree of disability.

- Disability means any loss or impairment in the anatomical structure, physiology or mental health of an individual.

- Person with permanent disability mean a person, whose capacity to perform activities, in the way and to the level, possible for the healthy person have been permanently reduced, as a result of anatomical, physiological or mental disability, and who has been certified by the medical expert bodies with level of reduced capacity for work or a specific type and degree of disability 50 and above 50%.

Medical concept – data source is the medical expertise

- According to the legislation no form of discrimination, neither direct nor indirect is allowed against people with disabilities.

- Persons with disability or loss of working capacity are persons 16 years and over who have a document for recognition of the disability issued by a Territorial Expert Medical Commission (TEMC) or a National Expert Medical Commission (NEMC).

- Children under 16 years old with a degree of disability are the children who have a document for recognition of the disability issued by a Territorial Expert Medical Commission (TEMC) or by the National Expert Medical Commission (NEMC).

The Population Census as a data source
Persons with disability by degree of disability/ loss of capacity to work as of 1.02.2011
 Data source: NSI

Degree of disability/ loss of capacity to work	Number	Share - %
Persons over 16 years of age - total	465 228	100.0
Under 50%	38 846	8.3
50 - 70%	110 528	23.8
71 - 90%	184 556	39.7
Over 90%	131 298	28.2
Children (persons under 16 years) - total	9 039	100.0
Under 50%	1 964	21.7
50 - 90%	4 040	44.7
Over 90%	3 035	33.6

The Population Census as a data source

- For analysis of the distribution of the number of disabled people by different socio-demographic characteristics intensity ratios are calculated. The indicator represents the number of persons with disabilities per 1 000 individuals from the population, voluntary response the question.

- The Population Census certainly has the main advantage of providing complete population coverage.

- It is difficult to collect accurate information about disability in a census since time constraints make it unlikely that more than a few general disability questions can be asked.

- For a crude measure of disability the census is useful exhausted data source.

- **Household based sample surveys**
- The following surveys provide data corresponding to different aspects of the European Disability Strategy:
- • The EU Statistics on Income and Living Conditions (SILC) instrument collects annually data on long-standing activity limitation due to health problems and provides information on income, social inclusion and living conditions (from 2004 onwards)
- • The European Health Interview Survey (EHIS) collects every 5 years data on the level of functioning and activity limitations in the population and provides other information on health status, health determinants and health care use
- • The European Health and Social Integration Survey (EHSIS) collected data in 2012/2013 on the barriers to participation in different life areas for people having a health problem or a basic activity difficulty
- • The Labour Force Survey (LFS) collected in 2002 and 2011 data on the situation of disabled people on the labour market within specific ad-hoc modules.
- • The European System of Integrated Social Protection Statistics (ESSPROS) has also some data dedicated to disabled people, in particular disability benefits and disability pensions.

Administrative data sources

- The administrative source is the register of units and data associated with an administrative regulation (or group of regulations), viewed as a source of statistical data.

- Administrative data refer to the set of units and data derived from an administrative source.

- Administrative data collection refers to the set of activities involved in the collection, processing, storage and dissemination of statistical data from one or more administrative sources. It is comparable to a survey but with the source of data being administrative records rather than direct contact with respondents.

Administrative data sources

- Administrative collections and registers are composed of data that is collected as part of the normal operation of some service or programme.

- These collections provide useful information on the characteristics of people accessing disability services as well as details about the services provided.

- They cannot give an accurate measure of disability prevalence since there is no guarantee of coverage and they tend to incorporate double counting.

- The quality of administrative register data is closely related to the aims of the administrative system, in particular, how well it has been maintained and how closely the concepts align with the disability concepts of interest.

- METHODOLOGICAL APPROACH
- Statistics from a variety of different sources of administrative data are likely to be based on a variety of different definitions and classification systems.
- Definitions and criteria for disability can also vary according to policy objectives, legislation and administrative standards.
- Inside the same country, different definitions can be used by different Ministries according to their needs.

- The main sources of administrative data used in Bulgaria are:

❑ National Social Security institute and Ministries in order to collect data on people receiving disability pensions and benefits.

❑ Ministry of Labour and Social Policy in order to identify people receiving benefits in cash or in kind.

❑ Ministry of Education - in order to collect data on the number of pupils with specific educational needs in special schools and in the general education system

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❑ The National Center of Public Health and Analyses (NCPHA) is the responsible institution for collecting and reporting data on primary disability of persons over 16 years of age as well as under 16 years of age (persons with recognized disability for first time). Information by classes of diseases (ICD X), loss of capacity as well as the term of the decision on the degree of disability is available.

❑ The data is available for the primary disabled persons by ICD disease classes on an annual basis.

- **Social Care**
- The number and characteristics of persons in social care institutions specialized for physically and mentally ill are used in the national practice also.
- The administrative data are provided from the Ministry of Labour and Social Policy.
- The data collection focuses on statistics in a particular year or at a particular date (stock). In some cases, only flow data (i.e. new beneficiaries during the year) are available.
- In addition to quantitative data, descriptive information was also collected to provide a full picture of the situation.
- In order to be able to compute the total number of people receiving disability benefits in a particular country, the issue of double-counting needs to be addressed.

- Education

- The stated policy in all Member States is integration into the ordinary education system as a priority.

Ordinary education- The definitions used by Member States differ significantly (see annex) and the data are therefore only indicative.

Special education

- Data on special education are more numerous. Interpretation of the data, however, is difficult as a large number of children in special schools might imply either a lack of integration measures or the development of specialised schools providing relevant support for children who might otherwise have left the education system. The way that children's educational needs are defined and assessed differs across countries, which complicates comparisons.

- The most frequently used categories for special educational needs include:

- - Psychic and behavioural disorders

- - Sensory disorders (e.g. visual, hearing)

- - Physical disorders

- - Intellectual disorders

- - Learning difficulties

- ## Labour market

- Over the past decade, an increasing emphasis has been placed in the EU MS on strengthening the social and labour market inclusion of people with disabilities. The approaches followed can be divided into two broadly defined groups:

- contributory benefits transfer programmes (passive measures)

- employment measures to enhance employability and integrate people with disabilities into the labour market (active measures).

- ## Employment incentives

- Action has also been taken in EU Member States, in the form of subsidies to employers, to adapt places of work for people with disabilities.

- MAIN FINDINGS

- Theme I – Disability pensioners

- The number of disability pensioners of working age varies sharply across countries as a result of different eligibility criteria (notably the minimum reduction in working capacity which is specified). The proportion in EU Member States ranges from 2% to 11%.+BG

- In a number of countries, a distinction is made between disability pensions granted by social security (contribution related) and social assistance (non-contribution related). This implies a less favourable treatment for example for people who are not active on the labour market, notably women with disabilities (especially in countries where labour participation is low).

- The main disability pensions granted to adults in the Member States can be summarised in four types:

- - invalidity pensions: they are granted in the framework of social security; they often cover persons satisfying minimum insurance affiliation periods who are victims of an accident or a disease not related to work. However, certain Member States do not make a distinction according to the origin.

- - disability allowances: they are granted in the framework of social assistance, are noncontributory and impose a means test. They often cover people with congenital impairments and/or people in institutions. In certain countries, there are no specific non-contributory invalidity allowances (e.g. Sweden, Luxembourg). In these countries, the general scheme for guaranteed minimum income covers people excluded from the contributory scheme.

- pensions for occupational accidents and diseases: in the majority of Member States an accident or disease at work gives rise to a financial compensation. Contrary to the previous schemes, a low degree of disability may give rise to a once and for all grant or an annuity.

- - war pensions: they are granted following a war or violent event which resulted in an invalidity. The number of direct beneficiaries is decreasing continuously.

- It is interesting to compare administrative data with data collected through surveys. The SILC survey reports the number of people who receive a disability benefit. The results however show a significant difference between the two sources (administrative and survey data). In just over half of the countries considered, the recipiency rate obtained from the SILC data was lower in comparison with that from administrative data

- Data concerning the total number of invalidity pensions are published regularly in the MS. There is however a certain number of minor problems on:

- - the timeliness of publications: some data might be published with a long delay;

- - some social security funds publish the number of pensions instead of the number of recipients.

- Data on age distribution are available for almost all Member States although published data do not always adopt the same age groups. Data by gender are not always published (though

- administrations ought to have them).

- Generally, available data on social security and social assistance make it possible to make a reasonable estimation of the total number of recipients of benefit aged 25 to 64.

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- Thank you for your attention!

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- Information on disability:
- http://ec.europa.eu/eurostat/statistics-explained/index.php/Category:Disability
- http://ec.europa.eu/eurostat/statistics-explained/index.php/Statistics_in_focus
- http://ec.europa.eu/eurostat/statistics-explained/index.php/Disability_statistics_-_prevalence_and_demographics
- http://ec.europa.eu/eurostat/statistics-explained/index.php/Health_in_the_European_Union_%E2%80%93_facts_and_figures