The rationale behind the inclusion of the ad hoc module on disability in the Labour Force Survey is to meet the need for a comprehensive and cohesive dataset on the labour market situation of disabled people. The available data on the labour market situation of people with disabilities do not provide a basis for policy development or an evaluation of strategies and programmes. Therefore, the data collection in disability module would give a clear picture of employment situation of disabled people both in terms of what has been achieved and what improvements are required.

Ad hoc module on „Employment of disabled people“ carry out within the labour force sample survey in households in the 2nd quarter in 2002 in compliance with the Eurostat methodology. Ad hoc module will be complemented/enriched standard questionnaire LSF.

The target population includes every body aged 16 to 64 who is living in selected households and has had the longstanding health problem or disability.

Definitions

The methodology of the survey defines all variables in the national questionnaire in compliance with international definitions of Eurostat taking account of the national legislation.

• The health problem
  The health problem is damage of health which restricts the ability of person to do daily activities and can restrict nature, duration or quality these activities.

• The longstanding health problem
  The target population of ad hoc module include only persons with the longstanding health problem. Therefore is very important to distinguish between long and short health problem. As a general rule, longstanding health problem should refer to 6 months or more. The two situation are acceptable. The longstanding health problem is every health problem which:

  1. at the time of interview had already existed for 6 months and more
  2. or at the time of interview had existed for less than 6 months but is expected to have a least a 6 month duration

  The purpose of using this term is to distinguish between chronic conditions such a diabetes, epilepsy, schizophrenia and acute conditions such as a sprained ankle, a broken leg, appendicitis or a respiratory tract infection.
The coding instructions

1. The target of the first question is to investigate whether person has the longstanding problem or not. (see definitions above). This question assures that all persons who are not objective of this ad hoc module are excluded.

Longstanding health problems with high of frequency or prevalence by population have to be excluded for practical reasons.

For example:
- the wearing glasses or contact lenses are sufficiently effective (the 'number of dioptria' is not relevant as long as the person can see well with glasses or contact lenses)
- the wearing grommets or hearing aids are sufficiently effective
- scar and birthmarks (with high prevalence, but usually no lasting serious consequences for the people concerned)
- simple hay fever (except where it aggravates the effects of an existing condition)
- problems with blood pressure
- wrong carriage of body etc.

**Code 1** - This code includes every respondent who at the time of interview:
- has already had the longstanding health problem with minimum 6 months duration
- has had the longstanding health problem with less than 6 months duration but is expected to have at least a 6 month duration

**Example**:
- Person was on the medical check-up 2 months ago and the doctor detected him diabetes. Thought his/her disease exists only 2 months, is high probable that his/her health problem is longstanding health problem and it will be long duration that means longer than 6 months (Code 1).

- Person was on the medical check-up 1 month ago and the doctor detected him asthma. Thought his illness only 1 month is evident that the duration will run longer than 6 months (Code 1).

- The person met with severe and complicated femur shaft fracture during the traffic accident. Time of treatment was 5 month and time of rehabilitation was 3 month.

1. situation: The treatment and rehabilitation was at the time of survey. Because the time of treatment plus rehabilitation has been much than 6 months, the code should be 'yes because person has had longstanding health problem.'

2. situation: The treatment and rehabilitation was finished at the time of survey. But the person has a permanent after-effect. The code should be 'yes because person has had longstanding health problem.'

3. situation: The treatment and rehabilitation was finished at the time of survey and person has not after-effect, the code is 'no' and person does not continue in survey.

2. Reference person selects from the list of groups of longstanding health problems one group that includes his/her main longstanding health problem.

**Recommendation:**

The interviewee provides the respondent the list of groups of longstanding health problems. The respondent classes (ranges) for a consideration this list his/her main health problem to the corresponding group and the interviewee encodes his/her health problem by code according to annex 1. There is possible another alternative too. The interviewee notes down respondent’s health problem to the questionnaire during the interview and recodes this problem later. It comes to this, that the respondent do not have to name his/her health problem exactly. There is sufficient when his/her health problem classes (ranges) to the corresponding group according to annex 1.

If several codes are initially identified as representing the health problems of respondent, one code have to be chosen. The main problem is the one which respondents think limits their work activities the most.
The list of health problems:

1 - Problems with arms or hands (which includes arthritis or rheumatism)
   Should include limb or postural deformities.

2 - Problems with legs or feet (which includes arthritis or rheumatism)
   Should include limb or postural deformities.

3 - Problems with back or neck (which includes arthritis or rheumatism)
   Should include limb or postural deformities.

4 - Difficulty in seeing
   These difficulties include for example blindness, nightblindness, cataract, closed angle glaucoma, loss of eye and etc. **Difficulties in seeing should only be included if wearing glasses or contact lenses are not sufficiently effective.**

5 - Difficulties in hearing
   These difficulties include for example external ear malformation, serve hypacusia, symmetric total surdity, symmetric practical surdity and etc. **Difficulties in hearing should only be included if grommets or hearing aids are not sufficiently effective.**

6 - Speech impediment
   This group includes serve maladies of the articulation and voice; inarticulate speech, serve stuttering etc. Speech impediment does not include language problems as a result of unfamiliarity with the native language.

7 - Skin conditions, including severe disfigurement, allergies
   Severe disfigurements include scars, birthmarks, and diseases of the skin. This code exclude tattooing and body piercing.

8 - Chest or breathing problems, includes asthma and bronchitis
   Hay fever (severe allergic rhinitis) should be excluded except where it aggravates the effects of an existing condition.

9 - Heart, blood pressure or circulation problems

10 - Stomach, liver, kidney or digestive problems

11 - Diabetes

12 - Epilepsy (include fits)

13 - Mental, nervous or emotional problems
   This group include severe mental illness: psychosis (e.g. schizophrenia) affective disorders, (e.g. manic depression) and clinically recognised less severe disorders such as anxiety, depressive episodes, panic, phobias etc.. Specific learning difficulties such as dyslexia, dyscalcula are also included here. Severe learning difficulties have, in the past, been termed mental handicap, mental impairment and mental retardation.

14 - Other progressive illnesses (which include cancers NOS, MS, HIV, Parkinson’s disease)
   Progressive illnesses should be recorded if there is some effect on the respondent’s day to day activities, even if it is minor at the time of the interview. For example skin cancer is excluded to code 8 because there is progressive illnesses and we have to use this code 14.
15 - Other longstanding health problems

Code 15 includes all other longstanding health problem and diseases which are not suitable to code with preceding codes. For example alcohol and drug dependency should be included. Reproductive system problems should be recorded under this category unless appropriate under code 14.

The purpose of this question is to acquire of the information about the onset of health problem or disability.

The onset of health problem:
1. may be obvious, if it was caused by accident or injury
2. or may have a gradual onset. In such cases two guides for measuring duration are:
   - the respondent first sought medical help
   - or his/her health problem first had an effect on his/her day to day activities

The identification of a main cause of the respondent's health problem is the main objective of this question.

**Code 1** - This code includes every congenital abnormalities and perinatal condition.

**Code 2** - This code includes every accident and injuries which happened in work.

The **work-related accident** is health damage which originated by short-term, abrupt and violent influence of outside effects during the fulfilment working obligations abstractedly from respondent's free will. Vehicle accidents which occurred during the seminar, workshop and courses of work (which organised by employer in order to improve of employee skills) and industrial poisoning should included here too. The work-related accident is not the accident which happened during the respondent's way to and from work.

**Code 3** - This code includes every accident and injuries caused by traffic accident which happened during the respondent's leisure or the way to and from work. Work-related traffic accidents are excluded.

**Code 4** - This code includes every accident and injuries which occurred during the household, the respondent's leisure or the sport. The accident or injury which happened during the way to and from work is included too, excepting the traffic accident.

Příklad:
- The person suffered accident or injury during the working time on the sport event (which is organised by employer. The accident/injury is not 'work-related' (not happened while doing his/her work). Code 4 is applicable here, even if the sport event was organised during working time. But if the victim is a professional in some sport, and the accident happened when doing his/her work, then code 2.

- The employee suffered accident or injury during a business trip abroad with total time of treatment more than 6 months.

1. situation: The accident or injury occurred during working time of workshop, meeting or seminar. Because accident happened while the victim was doing his/her work, so code 2.

2. situation: The Accident or injury which occurred outside working time of workshop, meeting or seminar during leisure is code 4.

3. situation: The traffic accident during business trip for instance travel from hotel to meeting place, or from hotel to restaurant). That means traffic accidents during travel to and from work, also business travel abroad, get code 3. Only ‘traffic accidents at work’ get code 2.

**Code 5** - This code includes every work-related diseases. Work-related diseases are diseases which occurred during the fulfilment working obligation or activities and they are listed and originated in accordance with conditions in legal regulations about social security

**Code 6** - This code includes the rest of diseases which do not fulfil conditions about work-related diseases.
The purpose of this question is to investigate the information interfere with the work that they do or can do. The choose of wording „can be done“ allows the question to be asked of those who are working and those who are not working both unemployed and economically inactive.

a) The effect of respondent’s health problem on the kind of work

In first part of this question we investigate how respondent’s health problem or disability restrict his/her kind of work that they do or can do (if the person is not working kind of work which respondent can be done). The term „to restrict the kind of work,“ means health problem or disability restrict the quality respondent’s work so that he/she for example is not able to work outdoors as well as indoors; is not able to hard work as well as light work or he/she needs to sit down. It come to this, that respondent is not able perform the quality work at least like his healthy colleague or team-mate.

b) The effect of respondent’s health problem on the amount of work

In second part of this question we investigate how respondent’s health problem or disability restrict his/her amount of work that they do or can do (if the person is not working kind of work which respondent can be done). The term „to restrict the amount of work,“ means health problem or disability is cause why respondent is not able fulfil his/her working obligations at least as his healthy colleague or team-mate.

c) The effect of respondent’s health problem on the mobility to and from work

In this part of this question we investigate how respondent’s health problem or disability restrict his/her mobility to and from work that they do or can do (if the person is not working kind of work which respondent can be done).

Code 1 includes every persons who are working at least one hour for pay or profit (full-time or part-time job, temporary, causal or seasonal job) during the reference week, as well as contributing family workers, conscripts on community service. Also include persons not working in the reference week due to illness, holiday, maternity leave, study, weather conditions and strike or dispute, expect persons on long-term unpaid leave from work. Persons on additional maternity leave (parental leave) are not included among employed. This code includes all persons who answer to questions refer to employed. That is to say all persons who go to the question B6 after answers to first questions of main LFS questionnaire B (B1-B5).

Code 2 - This code includes all unemployed and economically inactive persons. That is to say all persons who go to the question B40 or B42 after answers to first questions of main LFS questionnaire B.

Warning (attention)! The question C6 was added to questionnaire only for separation of persons who had any job and business. The answer for question C6 have to be in compliance with answers in questionnaire B anyway!! Therefore the interviewee does not have to ask about question C6 but he/she have to code this question in compliance with respondent’s answer in questionnaire B.

The shelter or supported employment is performed under special conditions defined by the laws of Slovak Republic *.

Case:
- disabled person or respondents with longstanding health problem who are able to work but can not easily secure employment in open competition. The person is employed by sponsor organisation (for example by state), is placed with a host firm and received the same wages, terms and conditions as their non-disabled colleagues. The person is paid partly by the sponsor and partly by the host firm.

Code 1 - This code includes all persons who work in shelter or supported employment.

(* The employment law number 387/1996 and the regulation by § 29 až 39 social security law number 100/1998 of code)
**Code 2** - This code includes all persons who do not work in shelter or supported employment.

**Code 3** - You have to use this code if respondent does not know whether he/she works in shelter or supported employment.

The term „assistance, refer to personal assistance (direct from one person or group of persons in his/her job), the adaptation of the working place (working conditions) in order to better performance of work by persons with longstanding health problem.

**Example:**

- assistance with kind of work and adaptation of the working place (working conditions) to respondent’s health problem

- assistance with amount of work and adaptation of working amount to the respondent's health problem

- assistance with mobility to get to and from work

- assistance with mobility at work
<table>
<thead>
<tr>
<th>THE LIST OF HEALTH PROBLEMS:</th>
<th>THE CODE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Problems with arms or hands (which includes arthritis or rheumatism)</td>
<td>1</td>
</tr>
<tr>
<td>Problems with legs or feet (which includes arthritis or rheumatism)</td>
<td>2</td>
</tr>
<tr>
<td>Problems with back or neck (which includes arthritis or rheumatism)</td>
<td>3</td>
</tr>
<tr>
<td>Difficulty in seeing</td>
<td>4</td>
</tr>
<tr>
<td>Difficulties in hearing</td>
<td>5</td>
</tr>
<tr>
<td>Speech impediment</td>
<td>6</td>
</tr>
<tr>
<td>Skin conditions, including severe disfigurement, allergies</td>
<td>7</td>
</tr>
<tr>
<td>Chest or breathing problems, includes asthma and bronchitis</td>
<td>8</td>
</tr>
<tr>
<td>Heart, blood pressure or circulation problems</td>
<td>9</td>
</tr>
<tr>
<td>Stomach, liver, kidney or digestive problems</td>
<td>10</td>
</tr>
<tr>
<td>Diabetes</td>
<td>11</td>
</tr>
<tr>
<td>Epilepsy (include fits)</td>
<td>12</td>
</tr>
<tr>
<td>Mental, nervous or emotional problems</td>
<td>13</td>
</tr>
<tr>
<td>Other progressive illnesses (which include cancers NOS, MS, HIV, Parkinson’s disease)</td>
<td>14</td>
</tr>
<tr>
<td>Other longstanding health problems</td>
<td>15</td>
</tr>
</tbody>
</table>