



State of Israel, Ministry of Justice

The Commission for Equal Rights
of Persons with Disabilities

Persons with Disabilities

Israel - 2006

Edited by:
Dr. Dina Feldman¹
Dr. Eliahu Ben Moshe²

¹ Commissioner

² Counselor

Table of Contents

Opening remarks	5
Dr. Dina Feldman, Commissioner for Equality for Persons with Disabilities	5
Main findings	9
<i>Frequency</i>	9
<i>Selected characteristics</i>	9
<i>Inclusion</i>	10
<i>Family and society</i>	10
<i>Daily functioning and health condition</i>	11
<i>Children with disabilities</i>	12
<i>Disabilities and aging</i>	12
<i>Answers</i>	13
Main conclusions	15
1. Introduction	17
1.1 The need for systematic information	17
1.2 Purpose of the report	17
1.3 Information sources	17
2. Background: the Equality Law; definition, frequency and types of disability	19
2.1 The international perspective	19
2.2 The Equal rights for persons with disabilities Law, 5758 - 1998	19
2.3 Who are persons with disabilities	20
2.4 Definition of disabilities according to the social survey	20
2.5 Frequency of disabilities	22
2.6 Types of disabilities	24
3. Disabilities and population characteristics	27
3.1 Disability, age and gender	27
3.2 Disability, marital status and fertility	28
3.3 Disability in the Arab sector	30
3.4 New immigrants and disabilities	31
3.5 Disability and ethnicity	31
3.6 Disability and religiousness	32
3.7 Disability, learning and education	33
3.8 Disability and economic status	34
3.9 Disability and housing conditions	36
3.10 Disability and family and social ties	37
3.11 Disability, loneliness, reliance on others and satisfaction with life	38
3.12 Selected properties of persons with disabilities - summary	39
4. Children with disabilities	41
4.1 Definition of children with disabilities	41
4.2 Size of the population of children with disabilities by severity	41
4.3 Types of disabilities	41

4.4	Disability by age and gender	42
4.5	Gaps between children from the Jewish and Arab sectors	43
4.6	Gaps by area and socioeconomic status	44
4.7	Gaps between needs and answers	44
4.8	Children with disabilities - summary	46
5.	Persons with disabilities at working age	47
5.1	Service in the Israeli Defense Forces	47
5.2	Employment and work conditions	48
5.2.1	Participation in the labor force	48
5.2.2	Working conditions	50
5.2.3	Safety and health conditions at workplace	52
5.2.4	Job security	53
5.2.5	Income and salary	53
5.2.6	Job satisfaction	54
5.2.7	Employment and work conditions - summary	54
5.3	Health, functional and psychological states and medical services consumption	55
5.3.1	Daily functioning	55
5.3.2	Emotional states	57
5.3.3	Evaluation of health status and need for medical services	58
5.3.4	Health status and consequences - summary	59
5.4	Inclusion of persons with disabilities in other activities	59
5.4.1	Leisure and holidays Activities	59
5.4.2	Use of communication technology – disability and the digital gap	60
5.4.3	Public attitudes towards persons with disabilities	62
5.4.4	Inclusion of persons with disabilities in various activities – summary	62
6.	Persons with disabilities at old age	63
6.1	Aging and disability	63
6.2	Expected accelerated increase in the number of persons with disabilities	64
6.3	Demographic characteristics of persons with disabilities at old age	64
6.4	Economic status in old age	65
6.5	Work at advanced age	66
6.6	Residency patterns and housing conditions	67
6.7	Assistance at home and from relatives	68
6.8	Leisure and other activities	69
6.9	Health condition and its functional and psychological consequences	70
6.10	Disability at old age - summary	71
7.	The government and persons with disabilities	73
7.1	Social security	73
7.1.1	The National Insurance Institute	73
7.1.2	The Ministry of Defense	74
7.1.3	The Ministry of Finance	74
7.1.4	Other ministries	75
7.1.5	Persons with disabilities and disability allowance recipients	75
7.1.6	Social security – summary	76
7.2	Special services	77
7.3	Employment in the civil service	78
8.	Summary and conclusions	81
9.	Bibliography	83

Opening remarks

Dr. Dina Feldman, Commissioner for Equality for Persons with Disabilities

Hundreds of thousands of persons with physical, sensory, cognitive, intellectual, mental and other disabilities live in Israel. The State provides a wide range of benefits and services in the fields of health, rehabilitation, welfare and social security. In spite of this, as in many other countries, still many persons with disabilities do not reach full and equal social integration. For many years, it has been assumed that this is just a result of their own impairments. Today, it is agreed that this reality is a combination of (restrictions arising from) individuals' impairment, together with a set of external social factors. These factors include social stigma, an absence of awareness regarding the human rights of persons with disabilities and a lack of respect for their wishes and needs. Indeed, the right to accessibility, inclusion, responsibility-taking and active involvement in all fields of life cannot be still taken for granted.

Because of this dire universal situation, the United Nations adopted an International Convention on the Rights of Persons with Disabilities that was completed in December 13, 2006. Its aim is to promote, protect and ensure the full and equal enjoyment of human rights and fundamental freedoms by all persons with disabilities and to promote respect for their inherent dignity. Israel has undertaken to adopt the convention, while its main principles have already been included within the Israeli 'Equal Rights of Persons with Disabilities Law, 5758 – 1998', and other laws dealing with social equality.

This Equal Rights Law aims to protect the dignity and freedom of persons with disabilities and vest their right to participate in society equally and actively in all fields of life. It also intends to provide an appropriate answer to the special needs of persons with disabilities, in a manner that will allow persons with disabilities to live their lives with maximum independence, privacy and dignity, while fulfilling their inherent capabilities, including their right to make their own decisions on matters related to their personal lives, based on their wishes and preferences.

The law also determines principles for rights-realization and services-provision for persons with disabilities, that should be carried out while respecting their dignity, freedom and privacy. These should be accomplished as part of the services provided and intended for the general public, with adaptations of proper quality being made, within reasonable time

and at reasonable distance from their place of residence.

At this stage, the law discusses in detail: the right to employment, the right to accessibility to public transport, buildings, infrastructures, open environment and services (both new and existing), and the set up of the Commission for Equal Rights and its Advisory Committee. The stated role of this Commission is to promote the basic principles of the Equal Rights Law, and its specific duties are to promote equality, prevent discrimination and encourage the full inclusion and active participation in social life of persons with disabilities.

Nevertheless, mere legislation is not enough. In order to lead to the desired change, it is necessary to ensure proper implementation of the law. Moreover, some questions need to be answered: i.e., how will a country and society know that the implementation is effective and is yielding the desired results? In other words, how the progress (or regression) in the situation of persons with disabilities over all the parameters set by the law, such as: “equal participation”, “active participation”, “maximum independence”, “privacy”, “dignity”, “fulfillment of capability” can be measured, and how should these parameters be defined in operational terms. In addition, needs to be determined who would be responsible for the conduction of such evaluation and what role this evaluation would play in the formulation of actual policy.

Chapter 33 of the International Convention gives some answers to the above mentioned questions by stating that every state should authorize a government agency that will be responsible of promoting the values of equality and of tracking the progress of the social reform based on scientific analysis and systematic databases. Accordingly, the Israeli government has authorized the Commission for Equal Rights to coordinate the staff work in order to set up a strategic plan for establishing such a national database.

The proposal of the ad hoc committee established for this purpose asks from the Israeli Central Bureau of Statistics to lead the process by setting up a database that will allow investigating the situation of persons with disabilities in Israel. This database will be based on data from population censuses, dedicated surveys and existing governmental sources. This effort will be undertaken while strictly respecting the secrecy and privacy of individuals' data. Aggregated statistical information from this database would be made available to policymakers, researchers and the public. According to the requirements of the Convention, these and other aspects of the creation of the database should be formalized in the legislation in collaboration with the relevant stakeholders, including persons with disabilities.

The current report, which is based mainly on the yearly Social Survey that was performed by the National Bureau of Statistics during the years 2002-2005, is aimed to illustrate the value of quantitative information for documenting the situation of persons with disabilities within society. We hope that it will serve also as the first layer for further developing an “Equality Index” which will facilitate the monitoring of the progress in the inclusion of persons with disabilities in our society.

The present report shows that although many efforts have been invested by the State to supply basic social security, health and rehabilitation to persons with disabilities, still there is plenty of work to transform the Israeli society into an accessible and inclusive society, based on the new equal rights legislation and the increasing importance of the self-advocacy movement. We hope this report will encourage policy makers and the public to invest more in learning from systematic information in order to define action plans that will open the gates of society to persons with disabilities and by that will improve the quality of life of our whole society.

Main findings

Frequency

- There are **1.36 million persons with disabilities** (24% of the population) living in Israel
- There are more than **600 thousand persons with severe disabilities**, constituting 9% of the population living in Israel, of which about 240 thousand are of working age, 175 thousand are children under the age of 18, and 185 thousand are old aged (65+)
- **About a fifth of Israelis (19%) provide assistance to a family member with a severe disability**
- **Most disabilities are acquired** – the congenital disability rate at birth is less than 2% while this rate reaches 50% at age 65-74 and more than 60% at age 75 and over (half of them suffering from severe disabilities).
- **Israelis cope with disabilities of different types, both intellectual and physical** – as opposed to a popularly held notion, most disabilities are not “visible” disabilities.

Selected characteristics

- **Gender: women constitute the majority among persons with disabilities** – over the age of 40, the disability rate of women is much higher than that of men: The greatest discrepancy is found at age 75+, where women constitute 70% of persons with severe disabilities.
- **Age: most adults with disabilities are of working age** – in 2006, there are more than 700 thousand persons of working age (20-64) with disabilities, constituting 19% of the total population at this age; close to 300 thousand of them are younger persons of working age (20-44), constituting 12% of the population at this age.
- **Sector: in the Arab sector, the disability rates are very high** – almost doubling those of Jews: 17% compared to 8%. Similar gaps are found in all age groups.
- **Immigrants: new (Jewish) immigrants have higher disability rates** than those of the rest of the Jewish population
- **Marital status, family size, ethnic origin, etc: disabilities do not overlook any group** – men and women, married and single, large and small families, Jews and Arabs, Ashkenazi and Oriental, religious and secular: **all have significant disability rates**

Inclusion

Disability is correlated with lower inclusion in society

- **Education: Persons with disabilities have much lower education** than the rest of the population, while educational levels decrease with the increase in the severity of the disabilities: The lowest education levels are found among persons with severe disabilities.
- **Employment: employment rates of persons with disabilities are very low** when compared to the rest of the population, and unemployment rates are two times higher.
 - ✦ **Working conditions:** persons with disabilities work more often than others in **part time positions, lower paying** occupations, and seem to receive **less professional training**
 - ✦ **Income from work and job security: Income from employment and job security are very low** compared to their partners without disabilities
 - ✦ **In old age, the employment rates of persons with disabilities are negligible** compared to 20% that are employed among the rest of the population at the same ages
- **Income:** the economic situation of persons with disabilities is more difficult – for example, among persons with severe disabilities, 69% lived in 2005 in households with a low per capita income (less than 2,000 shekels per person) and 56% of those with moderate disabilities did so; compared to only 41% among those without disabilities. These gaps stay the same and even worsen at old age.
- **Housing: the housing conditions of persons with disabilities are inferior and are not properly adapted to their special needs** – they live in smaller, more crowded homes and suffer from problems resulting from lack of suitable access to their own homes. Such gaps are found both at working age and at old age.

Family and society

- **Family** - persons with disabilities maintain **strong ties with their family** alike the rest of the population
- **Society** - persons with disabilities are **more socially isolated**
 - ✦ Among persons with severe disabilities, **35% report a shortage of friends**, (21% among those with moderate disabilities) compared to only 9% among

the rest of the population.

- ✦ A frequent **sense of loneliness** is reported by 32% (only 10% among the rest of the population)
- ✦ The **lack of a person on whom to rely in case of emergency** is reported by 23% (compared to 10% among the rest of the population)
- ✦ **Leisure activities and holidays:** persons with disabilities participate less in leisure activities and go on holiday less than the rest of the population.
- ✦ **Digital gap:** the accessibility of persons with disabilities to digital media and their use thereof are much limited than among the rest of the population, at all age groups.

■ **Contribution to society**

- ✦ **The rate of persons serving in the Israeli defense Forces (IDF) is close to the rate in the whole (Jewish) population** – among persons with severe and moderate disabilities, the rate of men who have served in the military reaches 68% and 74%, respectively, only slightly lower of the 80% recorded for the rest of the (Jewish) population.

■ **Public attitude towards persons with disabilities** – even though most of the public is aware of the special needs of persons with disabilities, society is still prejudiced against them:

- ✦ A significant proportion (more than 40%) of the public does not believe that persons with disabilities can: raise a family, integrate in the mainstream education system, or integrate in and contribute to work - like others do.
- ✦ A similar rate does not believe that they are entitled to accommodations, exemptions or preferential treatment.
- ✦ A fifth of the public does not believe that persons with disabilities can function independently, and almost the same proportion believes that persons with disabilities are “dangerous and disturbing”.

Daily functioning and health condition

■ **Daily functioning** – a high proportion of persons with disabilities report difficulties in performing basic actions, such as: walking outside or (even) inside their home, and some need assistance in daily activities such as bathing or dressing.

■ **Emotional state and attitudes towards life**

- ✦ **Depression, stress, inability to concentrate and insomnia** are very

frequent conditions among persons with severe disabilities, and, to some lesser degree, among those with moderate disabilities.

- ✦ 18% of persons with severe disabilities are **dissatisfied with their life** compared to only 2% among those without disabilities (8% among those with moderate disabilities)
- ✦ Persons with disabilities are **less optimistic** – 28% expect their situation to worsen in the future, compared to 8% among the rest of the population (12% among those with moderate disabilities).

■ **Health condition** - persons with disabilities report severe health problems and need prescription drugs and medical treatment much more than others.

- ✦ **Effect of economic situation on medical treatment:** In 2003, not less than 37% of persons with severe disabilities and 23% of those with moderate disabilities have been forced for economic reasons to renounce to prescription drugs, compared to 10% among the rest of the population (while more than 90% of persons with disabilities need prescription drugs).

Children with disabilities

■ **Frequency:** in Israel, there live currently **290 thousand children with special needs (13% of all children)**, 175 thousand of which (8%) need support/treatment on a regular basis.

■ **Types of disabilities:** half of the children with special needs that need regular treatment have difficulties in the field of **learning/behavior** (diagnosed by a professional), 16% have **chronic diseases of different types**, 14% have **physical disabilities**, 11% have **sensory disabilities**, and 6% have **mental disabilities**.

■ **Gender, age, sector:**

- ✦ **Male-children have higher disability rates**, with a higher frequency of learning/behavioral problems.
- ✦ **At primary school age, disability rates are higher** than among both younger and older children ages
- ✦ **The Arab sector:** Arab children have **higher disability rates**

■ **Needs–answers gap:** there is an **identified and measured gap** (in 1995) between the special needs of children and the answers provided for them

Disabilities and aging

■ **Frequency:** the rate of persons with disabilities **reaches more than 55% at the age**

of 65 and higher (nearly half of them with severe disabilities), representing some **400 thousand persons in 2006**. In the next decades, an increase in the number of persons with disabilities is expected due to the predictable increase of the elderly population: in 2015, the half million threshold will be crossed, and this number **can be expected to reach 650 thousand by 2025**

- **Assistance at home:** only 40% of persons with disabilities employ an assistant/caregiver, 20% of the adult population **provide assistance to a parent with disabilities**

Answers

- **Social security** – three main parties are involved in ensuring social security for persons with disabilities:
 - ✦ **The National Insurance Institute:** recognizes allowance-eligibility due to disability for some 228 thousand persons, including: 171 persons receiving a General Disability Allowance, 21 thousand receiving a Disabled Child Allowance. In addition, the NII provides allowances for assisting a person with disabilities for functioning in its home (Special Services Allowance), Mobility Allowance (for functioning outdoors), Work-Disability Allowance, Hostile Action Victim Allowance and Ringworm Victim Allowance.
 - ✦ **The Ministry of Defense:** in 2004, the Rehabilitation Division recognized more than 50 thousand IDF disable (mostly with 20% disability or less)
 - ✦ **The Ministry of Finance:** Recognizes about 53 thousand persons, mainly Nazi persecution victims entitled to receive a special allowance
 - ✦ **Allowance recipient rate:** fewer than half of the persons with disabilities (severe or moderate) are entitled to receive an allowance from one of the institutions mentioned above.
- **Additional services:** persons with disabilities, mainly those who are recognized by the institutions mentioned above, receive assistance in the form of additional services. These include: **rehabilitation services** (Ministry of Wellbeing, National Insurance Institute, Ministry of Health, Ministry of Defense); **assistance in housing** (Ministry of Construction and Housing); **funding of accessories, rehabilitation and healthcare services** (Ministry of Health); **assistance for immigrants with disabilities** (Ministry of Immigration of Absorption); **discounts for public transport and entitlement to parking badges** (Ministry of Transport); **special**

education services for children with special needs (Ministry of Education);
exemptions and discounts for municipal tax and income tax, etc.

Main conclusions

- 1. Disabilities are a highly significant phenomenon both in social and economic terms**
- 2. Disabilities affect all fields of life**
- 3. Disabilities are correlated with a harsher social, emotional and economic situation**
- 4. Disabilities, combined with other social variables, such as: gender, age or ethnic affiliation, increase the risk for lower inclusion**
- 5. The lack of inclusion causes a waste of valuable human capital, mainly at working ages**
- 6. Investments in social security and in care services are not enough: there is a need to make society, and facilities, accessible to all.**
- 7. Quantitative information on persons with disabilities reflects their difficult social situation in its various aspects**

Therefore:

- 1. Inclusion and social responsibility must be implemented from early childhood in both the private and public spheres.**
- 2. Mechanisms of affirmative action must be adopted, especially in the field of high and vocational education and employment**
- 3. Investments in education and in breaking physical and social barriers are worthwhile not only from the social but also from the economic point of view**
- 4. There is an urgent need for social programs aiming to increase the inclusion of groups with disabilities at high risk**
- 5. There is a need for establishing a reliable database which will enable to develop and monitor evidence based policy and practice.**

1. Introduction

1.1 The need for systematic information

In order to advance social policy, there is a need for available, current, systematic and reliable information that will allow the identification of the gaps between needs and answers with the aim of promoting an overall action strategy that will provide effective answers with maximum efficiency.

For many years, the problem in Israel has been identified as a substantial lack of systematic information on the population of persons with disabilities, and so the need to implement a national program for setting up a national database on persons with disabilities³. The activity on the issue is underway and should be completed within a few years. This report is part of the effort to expose decision makers and the general public to the data that already exists.

1.2 Purpose of the report

“Persons with Disabilities in Israel – 2006” is the second report of the Equality Commission⁴, which is intended to provide quantitative information on the

situation, needs and challenges of persons with disabilities in their attempt to integrate into Israeli society. In addition, data on the answers given by governmental and other entities is presented. The data has been gathered from existing information sources in Israel.

1.3 Information sources

The chosen mainstay of this publication is the social survey that has been conducted by the Central Bureau of Statistics since 2002 (the last published conducted in 2005), including a number of questions that provided for the identification, however partially, of persons with disabilities and for a comparison of their situation to this of other parts of the population. The use of the survey’s data requires a compromise on the issue of the definition of disabilities, knowing that many persons with disabilities (particularly of a mental nature) may not be included in the definition used for the survey (the same applying to those in chronic care institutions, which are not included in the survey population).

As these figures are based on a sample survey, it has been verified that the data shown in the publication has only small sampling errors (up to 25%, unless

³ See details in “Persons with disabilities in Israel – 2004”, part 1, pp. 5-7

⁴ See “Persons with disabilities in Israel – 2004” (2 parts)

otherwise stated).

The use of the social survey data with data from other sources (see list of sources in the bibliography) allows a preliminary quantitative review of the population of persons with disabilities in Israel. The report extensively surveys the characteristics and state of persons with disabilities in Israel, focusing on various different aspects of life.

The last chapter includes an attempt to provide as comprehensive a picture as possible of the answers provided to the needs of this population.

As the social survey only covers adults aged 20 and older, the data on children has been taken (mainly) from the only existing national survey on the issue held by the Brookdale Institute and the National Insurance Institute in 1995 in a representative sample of children aged 0-17⁵.

⁵ See “Children with special needs: An assessment of needs and coverage by services”, January 2000, JDC – Brookdale Institute – National Insurance Institute

2. Background: the Equality Law; definition, frequency and types of disability

2.1 The international perspective

For three decades, the international community has been acting to promote the full inclusion of persons with disabilities in society. This long-lasting activity formed in the UN, in August 2006, into an International Convention on the Rights of Persons with Disabilities. The aim of the convention 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**”. Israel actively participated in the drafting of this convention and contributed its experience and activity on the issue. In this convention - like in others which include references to the population of persons with disabilities as the convention on women’s rights and the convention on children’s rights - great emphasis has been placed on the need for local monitoring of the progress

of the social process, as well as on the systematic evaluation of the state of persons with disabilities in every society. Israel is preparing for the development of a monitoring system of this type based on measurable criteria, with the intent of developing a measurable “equality index” that can give a comparative picture about different aspects of the situation of persons with disabilities in Israel.

2.2 The Equal rights for persons with disabilities Law, 5758 - 1998

In 1998, The Equal Rights for Persons with Disabilities Law, 5758 - 1998 passed in the Knesset (Equality Law). This law defines the rights of persons with disabilities and the commitment of Israeli society to these rights.

By the law, the Commission for Equal Rights of Persons with Disabilities was founded in August 2000. This Commission is charged with implementing the law and advancing the inclusion of persons with disabilities in Israeli society in all fields of life based on a philosophy of human rights. The law includes chapters on principles, employment, public transport and establishing the Equality Commission along with an advisory committee. In March 2005, a chapter on accessibility

was added. Additional amendments to this law and others will be adapted to the requirements of the International Convention on the rights of persons with disabilities.

Basic principles

1. Basic principle

The right of persons with disabilities and the commitment of society in Israel to provide these rights are based on the recognition of the principle of equality, a recognition of the value of human life and the principle of respect for others.

2. Purpose

This law is intended to protect the dignity and freedom of persons with disabilities and vest their right to participate equally and actively in society in all fields of life, and therefore given an adequate answer to their special needs in a manner that will allow them to live their lives with maximum independence, privacy and dignity, while fulfilling their potential.

3. Corrective preference

An action that is intended to amend a previous or existing discrimination against persons with disabilities or that is intended to advance equality of persons with disabilities is not considered to be undue discrimination.

4. The right to make decisions

A person with disabilities is entitled to make decisions concerning his life, based on his wishes and preferences, as provided for in the law.

(from: the Equal Rights for Persons with Disabilities Law, 5758 – 1998, chapter 1: basic principles)

2.3 Who are persons with disabilities

Gathering of information on persons with disabilities faces an initial practical problem: how to define “persons with disabilities”. This problem is universal.

Many countries have tried to cope with it at the local level and in international forums. In 2001, the World Health Organization adopted the “International

Classification of Functioning, Disability and Health” (ICF⁶), which provides potential tools for standardization of definitions at the national and international level. However, this classification requires unique data gathering that is only possible in a survey dedicated to the issue of disabilities, that has yet to be undertaken in Israel, although one is planned⁷.

The Equality Law defines persons with disabilities based on the guiding principle of a disability that substantially restricts functioning. This disability can be physical, mental or cognitive.

“Person with a disability” - a person with a physical, mental or cognitive disability, permanent or temporary, owing to which his functioning is substantially limited in one or more major life fields
(from: definitions, in the Equal Rights for Persons with Disabilities Law. 5758 - 1998)

2.4 Definition of disabilities according to the social survey

In the social survey, the definition is slightly different to that of the law and focuses on an answer to a question concerning the existence of a ‘health or physical problem that disrupts daily functioning and exists at least 6 months’.

⁶ International Classification of Functioning, Disability and Health

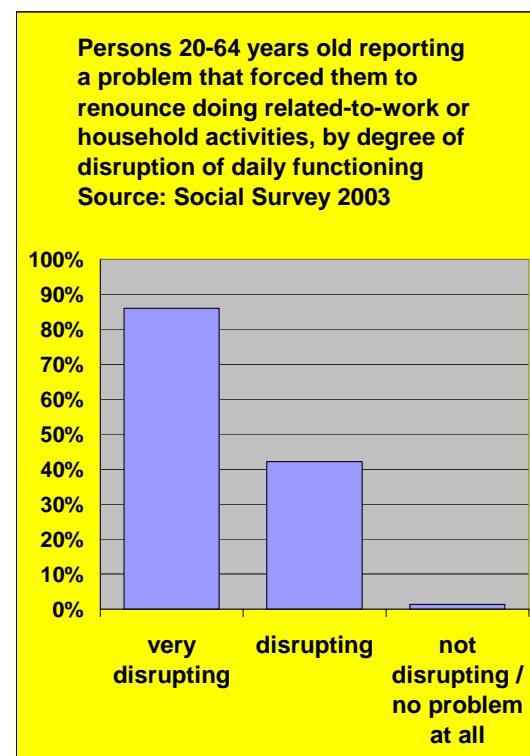
⁷ The Central Bureau of Statistics is examining the conducting of a dedicated survey on the issue in addition to the possibility of expanding the study of the issue in current surveys such as the labor force survey.

It is noted that this definition may exclude many persons with mental or cognitive disability who do not necessarily define their disability as a health problem, as well as others, such as residents of long-term stay institutions who are not included in the social survey. Another methodological problem is related to the survey being based on self-assessment by respondents, meaning that it is subject to problems related to differential subjective interpretation of respondents. However, this questioning method is currently accepted throughout the world for research in the field of disabilities.

The survey gives the respondent a number of options as an answer to a question on ‘a disability that is related to a health of physical problem that disrupts daily functioning and exists at least 6 months’: a) A problem that is very disruptive, b) A problem that is (only) disruptive c) A problem that is not to disrupting of daily functioning, and d) The problem is not disrupting at all or there is no problem of this type. It appears that persons reporting a very disruptive problem are closely matched to the definition of persons with disabilities in the law. However, persons who report that the problem is only disruptive of daily functioning are only partly consistent with this definition. It is

worth emphasizing that the question relates only to a disability that lasts six months or longer, meaning that it does not cover persons with temporary disabilities.

In order to examine the degree to which the last group is substantially limited in functioning (as defined in the law), a number of examinations have been held based on cross classifying the question on disability with other questions in the same survey.



The findings show that among those who report a disability that (only) disrupts daily functioning (rather than being very disruptive), there are some who appear to be consistent with the definition of the

law. For example, about 10% of them define themselves in other questions as sick/disabled, compared to 1% among those who reported that their disability does not disrupts their daily functioning or who have no disabilities at all, and 30% among those whose disability is very disrupting (data from surveys in 2002-2004); 45% of them report that they have had to give up actions related to work or housekeeping due to their disability/disorder (survey of 2003, the only one in which this question was asked) compared to less than 1% among those whose disability did not disrupt daily functioning or who have no problem at all and 86% among those whose disability is very disrupting of daily functioning.

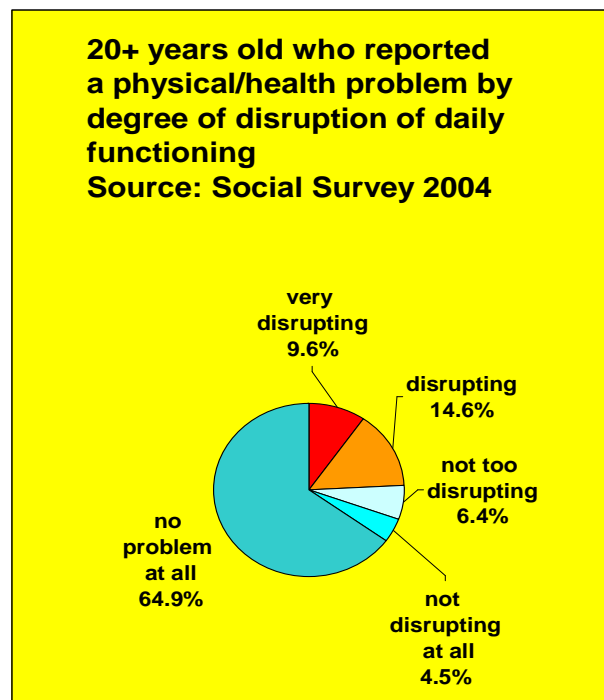
The conclusion from these checks is that many of those who reported a physical health problem that only disrupted their daily functioning (rather than greatly disrupting it) should be included in the definition of persons with disabilities as stated in the law, albeit this not being the case for all of them.

In view of this, later in this publication, we sometimes differentiate between **persons with severe disabilities** – those who have reported a disability that disrupts (challenges) their daily functioning greatly and **persons with moderate disabilities** who have reported

a disability that (only) disrupts their daily functioning.

2.5 Frequency of disabilities

According to the social survey (average for 2002-2004), 24% of adult Israelis (aged 20+), i.e. almost one in four, report a health or physical problem that has existed for 6 months or more “that disrupts their daily functioning”. Out of these, nearly 10% report that the problem is very disrupting of daily functioning (whom we refer to as persons with severe disabilities). The others report a problem, probably less severe, which still disrupts (but is not very disruptive of) daily functioning (whom we classify as persons with moderate disabilities).



Among children (aged 0-17), the rate of children with disabilities is estimated at about 13%: 8% need chronic care and 5% do not (according to a sample survey held in 1995⁸).

According to these rates, it can be estimated that in 2006, there were 1,360 thousand persons with disabilities (health/physical) in Israel, of whom 630 thousand had severe health/physical disabilities that greatly disrupted their daily function, divided into nearly 175 thousand children and about 430 thousand adults (aged 20+). Another 730 thousand reported a less severe health/physical disability⁹.

In view of the size of the population that reports disabilities, it is not surprising that in the national health survey that was held in 2003-2004 it was found that slightly less than 19% of adults in Israel (aged 21 and older) - i.e. more than 740 thousand persons - reported 'a family burden which affected their lives to a great or moderated extent due to caring for a relative with a physical or mental illness/disability, acute or chronic'¹⁰.

⁸ See "Children with special needs: An assessment of needs and coverage by services", January 2000, JDC – Brookdale Institute – National Insurance Institute, pp. 7-8.

⁹ It is mentioned that these estimates do not necessarily include persons with mental disabilities

¹⁰ National Health Survey 2003/2004 – Selected

Many Israelis cope with disability: as persons with disabilities or as caregivers of family members with disabilities.

Among adults, the number of persons with disabilities increases with age from levels of less than 10% at an age of 20-34 to very high rates at more advanced ages: nearly 50% at the age of 65-74 and more than 60% at the age of 75 or more. About 40% of all persons with disabilities (at all ages) live with severe disabilities that greatly challenge their daily functioning (social survey 2004¹¹).

Exceptions in the age increase trend are children (aged 0-17), for whom relatively high rates have been noted. This fact can be the result of children in educational settings being diagnosed more than adults are. Indeed, one of the most common disabilities among children is related to learning and behavior. This explains to a certain degree the fact that the disability rate of boys is higher than girls at these ages, as boys are diagnosed with learning and behavioral disabilities twice (and more) than girls are.

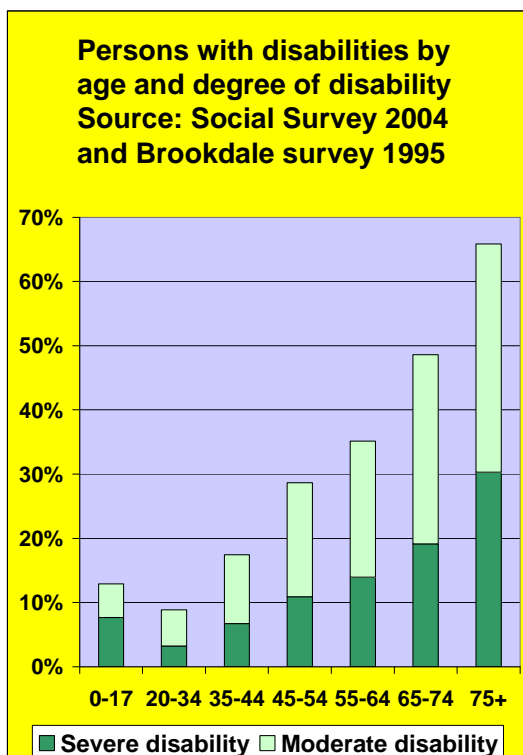
To this it can be added that the disability rates at birth are much lower. This is indicated by figures on congenital defects that are identified at birth, which have an

Findings, Central Bureau of Statistics – Ministry of Health, June 2006

¹¹ These rates have varied very little over the four years of the survey

indicated rate of about 1.5% in neonates¹². While the rate of pregnancies in which congenital defects are discovered in the unborn child double this rate, about 60% of these pregnancies are terminated with the approval of pregnancy termination committees (and 17% of approved terminations of pregnancy are performed according to 'embryo physical or mental defect' clause)¹³.

- **Most disabilities are not congenital but are acquired during life.**
- **Most of us may expect to cope with a disability of some kind during the course of life**



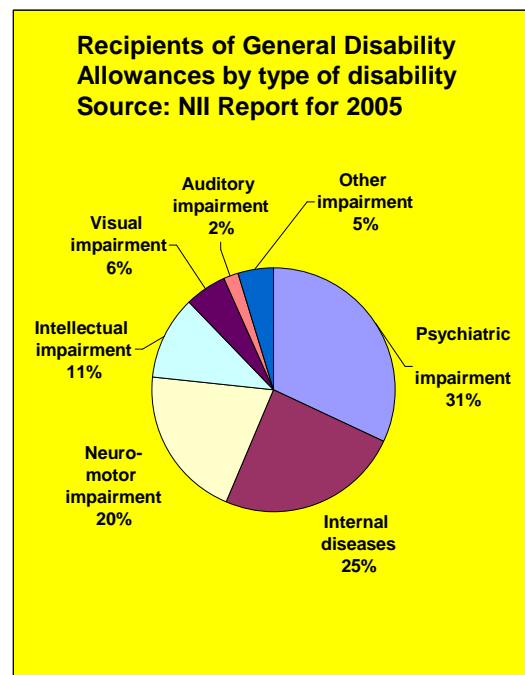
¹² Statistical Abstract of Israel 2006 – Central Bureau of Statistics, figure 6.15

¹³ Statistical Abstract of Israel 2006 – Central Bureau of Statistics, figure 3.19

Further to this, due to the aging process of the population, the population of persons with disabilities is expected to increase significantly (see the chapter on disabilities in old age).

2.6 Types of disabilities

The types of disabilities that Israelis cope with are very diverse. National surveys do not yet provide information on disabilities by type. However, a partial picture of disability types may be gleaned from the National Insurance Institute report for 2005¹⁴.



These figures relate to adults from the age of 18 to retirement who receive

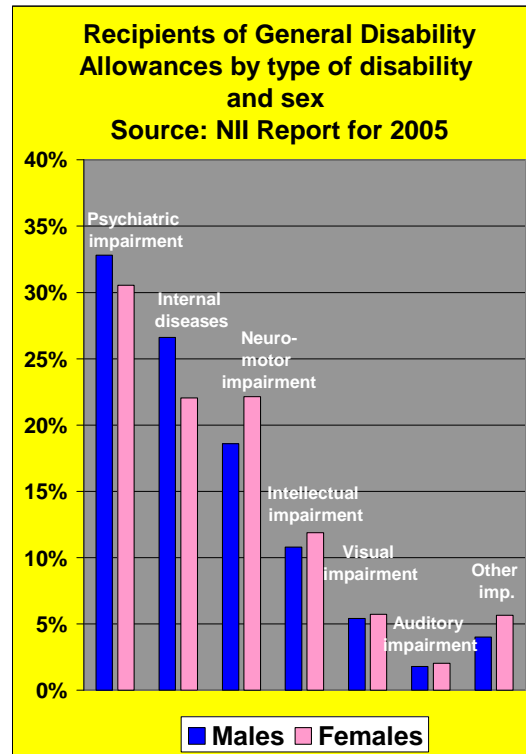
¹⁴ Annual Review for 2005, the National Insurance Institute, chapter 5.

General Disability Allowances¹⁵. It is noted that 171 thousand General Disability Allowance recipients are only part of the number of persons with disabilities recognized as disabled by various government ministries in Israel. In addition to these, there are some 50 thousand recognized by the Ministry of Defense as IDF disable and another 52 thousand recognized by the Ministry of Finance as Nazi persecution victims (however, there are no available figures on distribution by disability type). As can be seen out of the General Disability Allowance recipients, those who had psychiatric impairment constitute more than 30% of the total, followed by those with internal diseases, neurological (such as paralysis) or motor deficiencies, intellectual, visual and auditory impairments.

(From Survey of Public Attitudes – 2005)
Types of disabilities:
 The public is aware mainly of physical disabilities (and less of “invisible” disabilities): Physical disability was mentioned by 85% of respondents

It is noted that women constitute only 43% of the general disability allowance recipients, while those reported in the

Social Survey as being persons with severe disabilities include a majority of women (54%), when their distribution by disability is similar to that of men.



These figures show that Israelis cope with disabilities of all types

In conclusion, it is worth reemphasizing that the National Insurance Institute data relates to general disability allowance recipients based on definitions that serve the institute, and that there seems to be only a partial overlap between these definitions and persons with disabilities who are defined based on the data of the social survey (see chapter 6, section 6.1).

¹⁵ The National Insurance Institute pays also other allowances for persons with disabilities of working age such as for work-accidents (22,000) and hostile action victims (2,800), but these cannot be classified by primary disability category (see chapter 7)

3. Disabilities and population characteristics

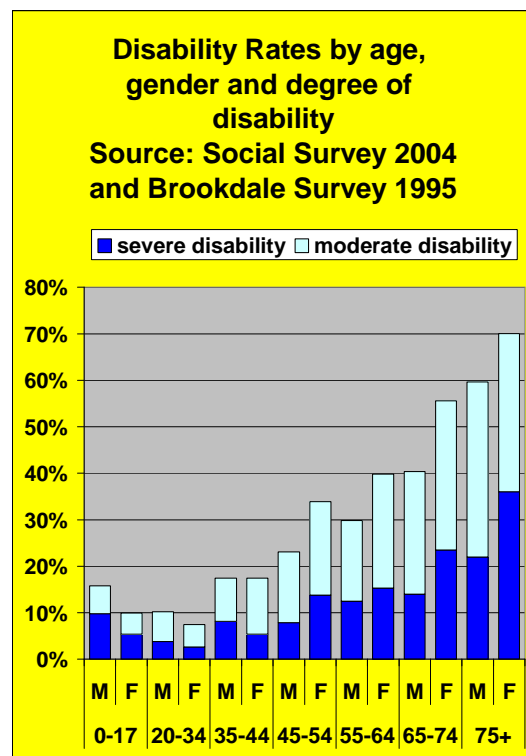
In this chapter general characteristics of persons with disabilities compared with the rest of the population are presented. At the beginning of the chapter, basic demographic characteristics such as age and gender, marital status and number of births are presented, followed by differences in disability rates by groups such as Jews and Arabs, veterans and immigrants, or those defined according to ethnicity or religiousness. After that, social and economic characteristics of persons with disabilities are presented, including learning and education, economic status, housing conditions, contacts with relatives and friends, degree of perceived loneliness and ability to rely on others, always comparing persons with disabilities (severe and moderate) with the rest of the population. Following chapters deal with persons with disabilities in the three main periods of their lives: childhood, working age and retirement.

3.1 Disability, age and gender

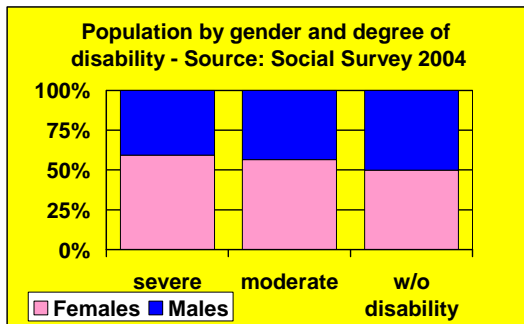
Among children, the disability rates of boys are much higher than those of girls.

The same applies for young adults, for whom the rate of disability for males is still slightly higher than among women, but in the middle age range, this ratio inverts, and a large gap develops between the genders. At the age of 65 and older, the rate of women with disabilities significantly exceeds that of men.

During our lives, many of us can expect to be exposed, eventually, to some disability, whether our own or that of a relative.



Another salient finding is that women constitute close to 60% of persons with severe disabilities among adults: in 2006, their number was estimated at about 255 thousand compared to 155 thousand men.



Women constitute the majority of persons with disabilities, particularly among those with severe disabilities

This situation seems to be the combined result of high women disability rates over the age of 45 and the high ratio of women to men at very advanced age. This finding has great social significance because women, are more vulnerable with respect to equal inclusion.

Most adults with disabilities are of working age

Another interesting fact is that out of adults with disabilities (aged 20+), most are of working age, while those aged 65+ make up only a third of all persons with disabilities (less than 30% of men and about 44% of women). It can be estimated that in 2006, more than 270 thousand out of 20-64 year olds are persons with severe disabilities, of whom about 100 thousand are younger working age persons (20-44). In addition, another 440 thousand are persons with moderate disabilities (of whom about 200 thousand

are aged 20-44).

The data indicates a great labor force potential if persons with disabilities will be integrated in the labor force

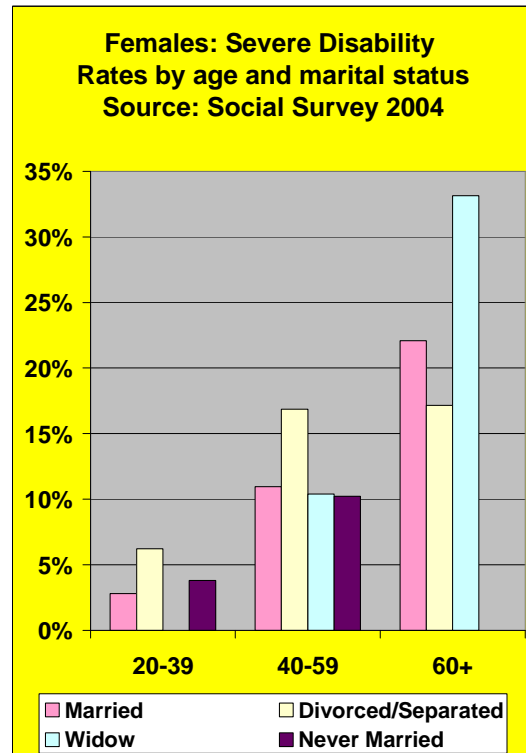
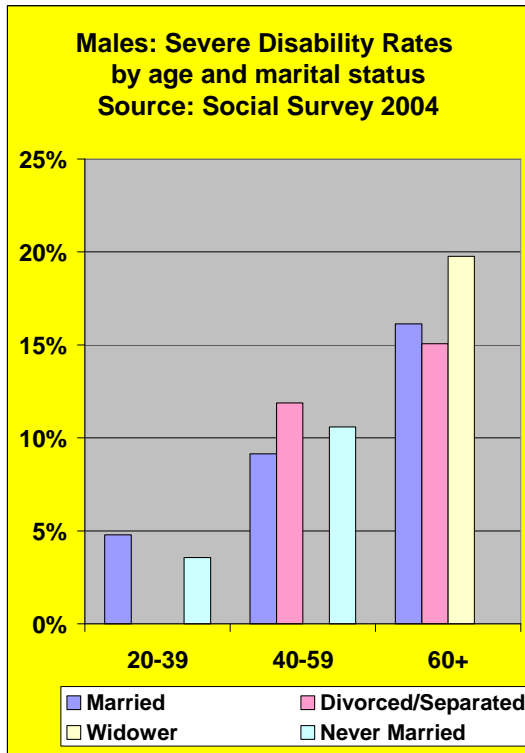
However, this potential is far from being realized because the rate of participation of persons with disabilities in the workforce is significantly lower than the average in the population, and their unemployment rate is very high (as shown in the chapter on participation in the labor force).

3.2 Disability, marital status and fertility

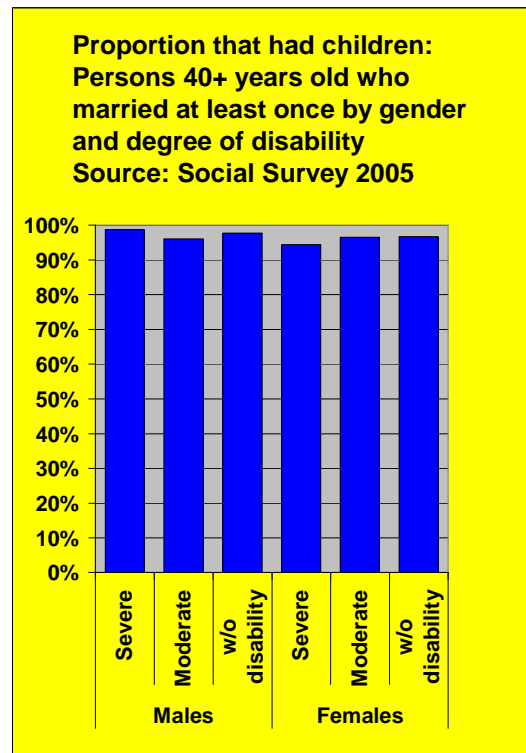
There is a two-way connection between disability and marital status. On the one hand, disability can affect marriage or divorce rates, but on the other, celibacy or family life may affect the perceived severity of a given disability. The findings show that the rates of (severe) disability differ by marital status, but with no unequivocal trend.

In general, the differences by marital status are smaller for men than for women. For older widows/widowers (60+), the disability rates are slightly higher than for married and divorced persons of the same age (there are few bachelors/spinsters at this age). In addition, regarding women it appears that at younger ages the disability rate of

widows is higher than for married and divorced.

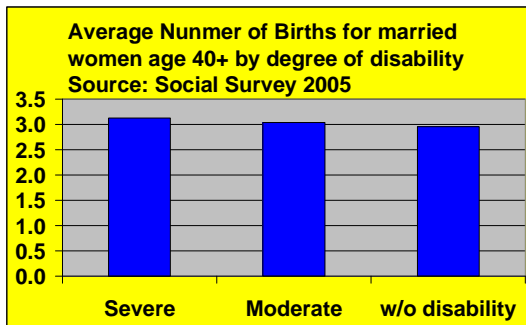


The commonly held opinion is that persons with disabilities are less involved in marriage relations. However the survey data shows that this does not apply to men and only to a limited extent to women with disabilities, who show slightly lower marriage rates than other women in the population, mainly in the lower age groups (up to the age of 60). At young age, women with disabilities also show a greater tendency to divorce, while among older women (60+) the proportion of widows is higher than for other women in the population.



Concerning fertility, no significant differences were found between persons with disabilities and others. For example,

among those who had ever married that were aged 40+ in the year of the survey, the great majority of men and women (95% and more) had at least one child, with no significant differences between persons with disabilities and others.



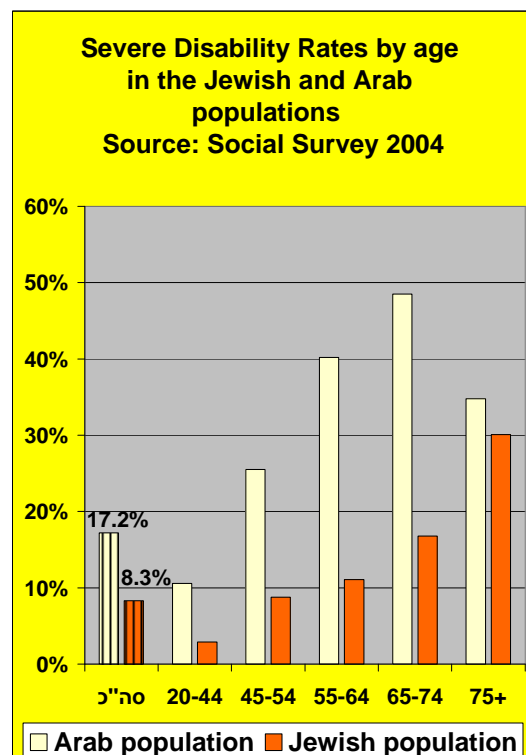
There are no significant differences in the number of children either: among women aged 40 and higher who had ever married, the average number of children per woman was 3.0 with negligible differences between women with disabilities and others.

Disability does not distinguish married from unmarried persons or between those with more or fewer children.

3.3 Disability in the Arab sector

A salient finding is the high rate of adults with disabilities in the Arab sector, totaling at 17% compared to 8% in the Jewish sector. The gap in the disability rates between Jews and Arabs is particularly high at ages up to 74, and

decreases greatly above the age of 75. The high disability rates in the Arab population may be a result of the economic difficulties this population has, which may make a mild or moderate disability into a more severe one in the absence of adequate means to cope with it. However, this gap may also be affected by differences in patterns of reporting health/physical problems that may be culture dependent. Partial support for the first interpretation might be found in the rate of General Disability Allowance recipients from the National Insurance Institute: The recipient rate is about 40% higher in the Arab population than in the Jewish one.

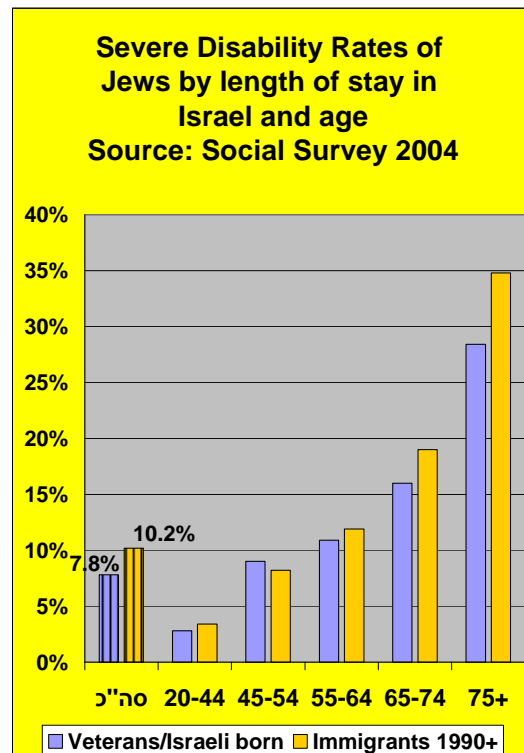


A smaller gap, although leaning in the same direction, was also found between Jewish and Arab children (severe disability rates of 7.6% and 8.3%, respectively), but the smaller gap may be a result of diagnosis differences between the two groups: it appears that children in Jewish towns are diagnosed more than in Arab towns.

The Arab population is characterized by high disability rates

3.4 New immigrants and disabilities

In the Jewish population, immigrants who came to Israel after 1990 have slightly higher disability rates than veteran residents. For example, immigrants had a severe disability rate of slightly more than 10% compared to a little less than 8% among veteran Jewish residents (including Israel natives). The differences between veterans and immigrants are more marked at older ages (65+).

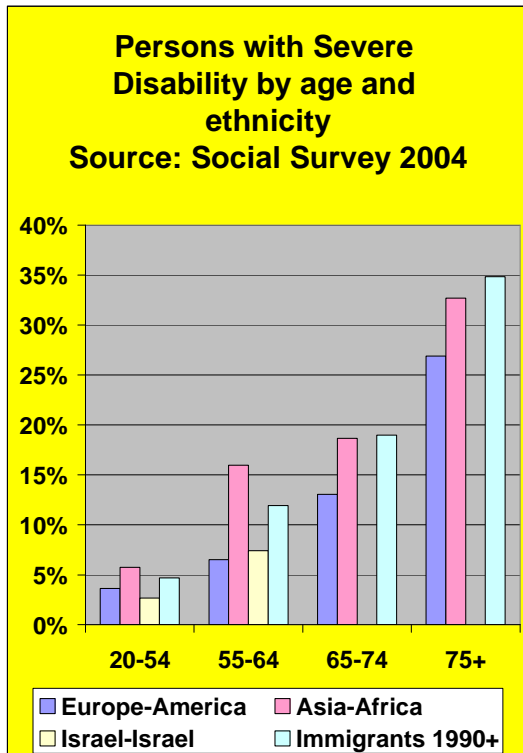


The immigrant population, particularly for its elder members, is exposed to higher disability rates than veterans

3.5 Disability and ethnicity

Ethnicity¹⁶ is a differentiating variable between groups within the Jewish population in Israel, due to social and economic gaps. The data from the social survey allows for an examination of whether different ethnic groups differ by disability rate, and to what degree.

¹⁶ Continent of birth for those born abroad and continent of birth of father for Israeli natives. Israeli natives whose fathers were also Israeli natives are shown in graphs as a separate group, as are immigrants from 1990 onwards.



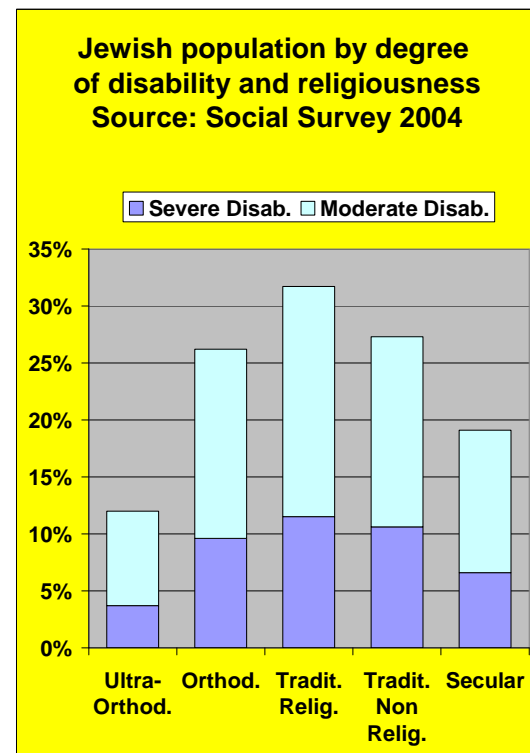
The answer to the question is positive, but the differences are not major. The data indicates a slightly higher disability rate for the population of Asian and African origin than for the population originating from Europe and America. While the differences between the groups are not large (and not always statistically significant), they are consistent over all age groups (and survey years). If immigrants of 1990 onwards are excluded from the calculation, most of whom are of European extract (that we have already seen they have relatively high rates of disabilities), the differences between ethnicities are even more marked. This finding indicates the possible importance of socioeconomic

environment over exposure to disability.

Disability exists in all ethnic groups, and does not differentiate significantly between groups.

3.6 Disability and religiousness

Is degree of religiousness a differentiating variable for disability? Data shows this to be the case at least to a certain extent.

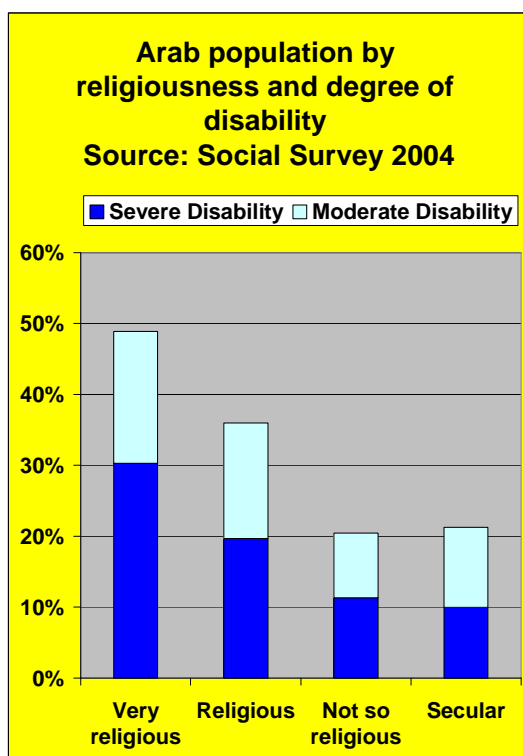


Concerning the Jewish population, it appears that the rate of persons with disabilities is higher among traditional and religious persons than among the rest of the population. In 2004, the rate of disability among traditional and religious families ranged from 25% to 30%, while

among secular and ultra-orthodox families, the rate was less than 20% and particularly low among the ultra-orthodox (12%)¹⁷. It is noted that the very young age composition of the ultra-orthodox population is partly responsible for the low disability rate measured in it.

about 30%, compared to only 10% for non-religious families. This relationship between disability and religiousness may result partly from the older population with high disability rates also being more religious.

Despite certain differences by degree of religiousness, it appears that all groups have a significant number of persons with disabilities

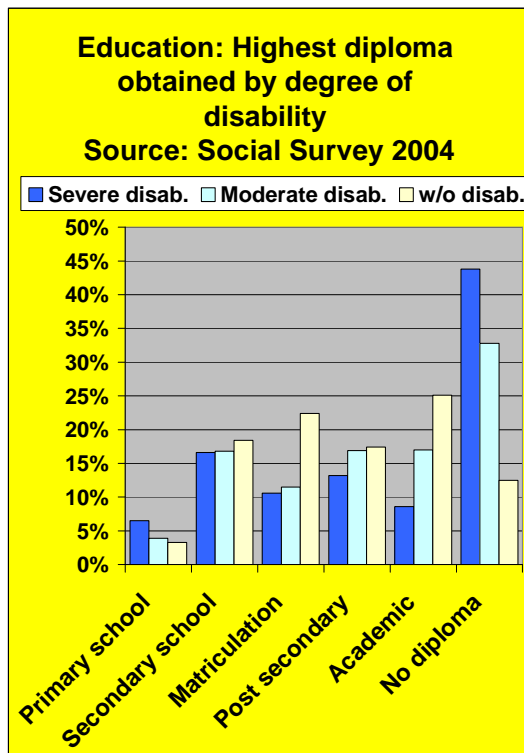


3.7 Disability, learning and education

The average level of education of persons with disabilities is very low compared to the rest of the population. A strong expression of this is the high rate of persons with disabilities who have not received a diploma from any schooling level: 44% of persons with severe disabilities and 33% of persons with moderate disabilities have not received any school diploma, compared to only 13% for the rest of the population. Similar gaps exist for all age groups. For example, for 20-54 year olds, the rate of persons with severe disabilities who have not received any school diploma is 37%, and among persons with moderate disabilities 26%, compared to less than 10% for the rest of the population.

In the Arab population, the rate of persons with disabilities is much higher in the case of more religious persons. For example, among very religious persons, the rate with severe disabilities reaches

¹⁷ It is noted that these low rates in the ultra-orthodox population may be related to the cultural pattern of avoiding reporting medical/physical problems common in this society, which are perceived to reduce the chances of success for finding potential spouses for young family members.



The level of education reached by persons with disabilities who have received a diploma is also lower than for the rest of the population. For example, in 2004, more than 6% of persons with severe disabilities reported that their highest diploma was a primary school graduation diploma, while only 3% of the rest of the population reported this. At the same time, only 9% of persons with severe disabilities reported an academic diploma compared to 25% of the population without disabilities. It is noted that these gaps vary little by age.

The education level of persons with disabilities is lower and is reflected in their economic status.

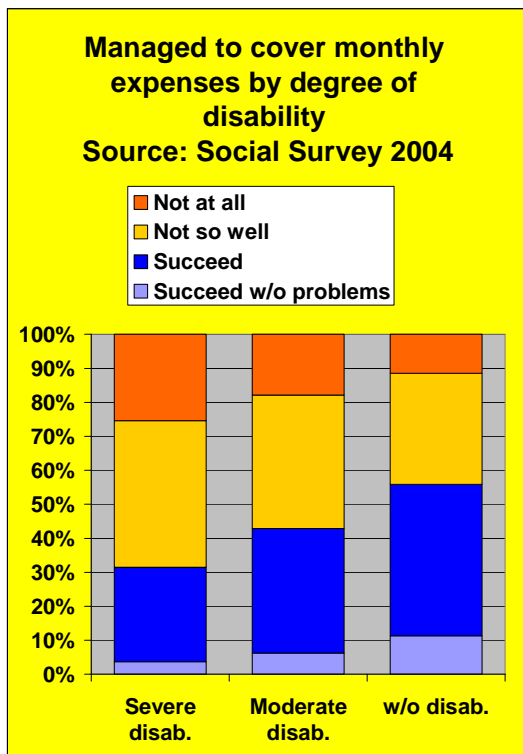
3.8 Disability and economic status

The economic status of persons with disabilities compared to the rest of the population can be examined with different tools, but all of them, without exception, indicate that the economic status of persons with disabilities is much worse than that of the rest of the population.

For example, regarding monthly per capita income, i.e. the income of the entire household divided by the number of persons in the household, it can be found that persons with disabilities are concentrated much more than the rest of the population in households in which the per capita income is relatively low and are represented at low rates in more wealthy households. In 2005 for example, 69% of persons with disabilities lived in households in which the per capita income per household was lower than NIS 2000 while in the total population, only 41% lived in such households. In contrast, the rate of persons with disabilities who lived in relatively wealthy households in which the monthly per capita income was higher than NIS 4,000 per capita was 8% compared to 27% among the entire population. Considering that the coping with problems that are related to disability requires by itself significant

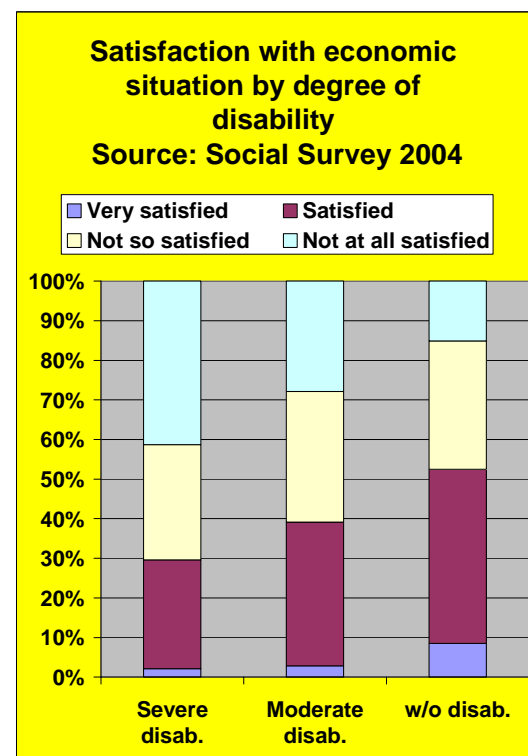
monetary resources, it is reasonable to assume that the actual gaps are greater.

giving up medical care due to economic hardship.



Finally, persons with disabilities have more difficulty in covering their monthly expenses than others: more than 25% of persons with severe disabilities (and almost 18% of persons with moderate disabilities) reported that they did not manage to cover their monthly expenses, compared to only 11% of persons without disabilities.

An example of this can be found in the reports of the consequences of economic difficulties over everyday life that were studied in the social survey that was held in 2003. For example, out of those who needed prescription drugs (which among persons with disabilities is 93%), **37% of persons with severe disabilities reported that in the last year they had to give up at least some of their drugs due to financial difficulties compared to fewer than 10% among the rest of the population.** Similar rates and gaps were found in the answer to the questions of giving up food in the last year or



In this state of affairs, it is not surprising to find that persons with disabilities are less happy with their economic situation than others: in 2004 for example, 41% of those with severe disabilities reported

being dissatisfied with their economic situation (among those without disabilities only 15%), while fewer than 30% were satisfied or very satisfied (52% of those without disabilities). Persons with disabilities are also less optimistic about their economic future: 44% of them expect their future situation to be worse, compared to 25% who believe so out of persons without disabilities.

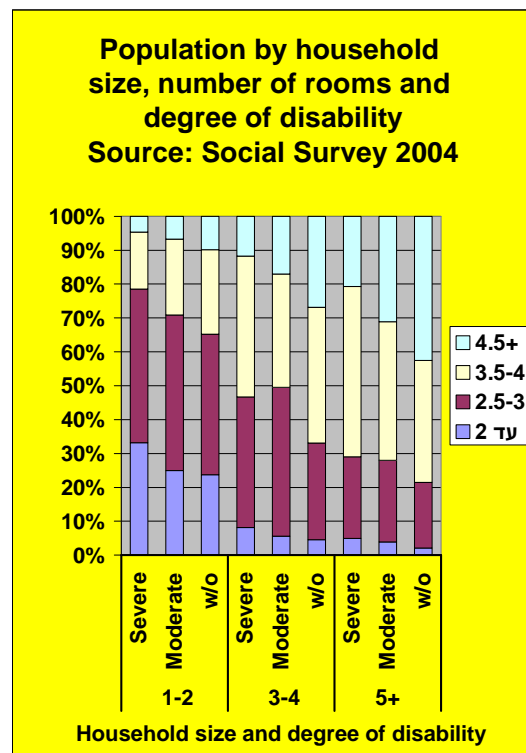
There are significant gaps between the economic situation of persons with severe and moderate disabilities and the rest of the population

3.9 Disability and housing conditions

Persons with disabilities, like most of the population in Israel, live in privately owned homes (71%). Out of those who do rent, a relatively high rate among persons with disabilities rent their homes from public companies: 37% of persons with severe disabilities who rent an apartment do so from public companies, compared to 26% of persons with moderate disabilities and only 12% of the rest of the population.

Persons with disabilities usually live in less capacious and more crowded homes. There are few persons with disabilities who live in capacious homes compared to the rest of the population, regardless of household size. For example, among

persons who live in households with at least two persons, only 26% of persons with severe disabilities live in apartments with more than three rooms compared to 35% of persons with moderate disabilities and 42% of the rest of the population.



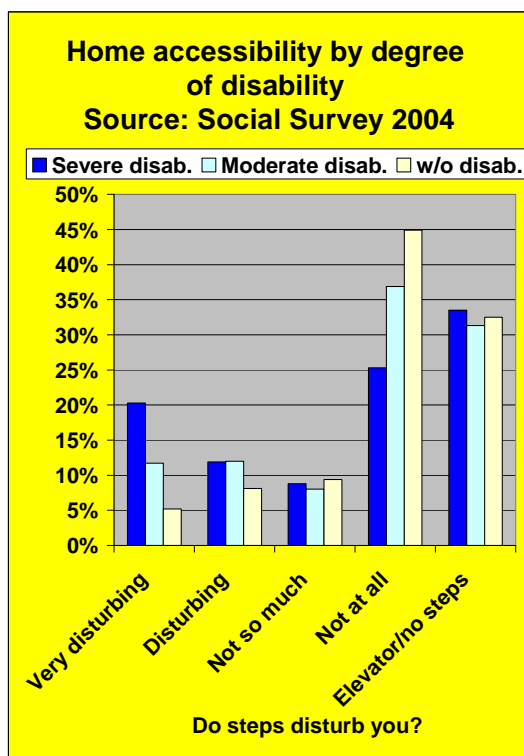
Similar gaps exist for those who live in households of 3 or 4 persons. Here too the proportion of persons with disabilities living in capacious homes (more than 4 rooms in this case) is 12% among persons with severe disabilities and 17% among persons with moderate disabilities compared to 27% for the rest of the population. The result is that in terms of residential density (number of persons

per room), persons with severe disabilities live in 10% greater crowding than those who do not report disabilities that disrupt their daily function.

In this state of affairs, it is not surprising to find that persons with disabilities are less happy with their homes than others: 30% of those with severe disabilities are dissatisfied (or very dissatisfied) with their homes compared to 16% of those without disabilities.

accessibility: **among those who need to use stairs to reach their homes, 20% of persons with severe disabilities and 12% of persons with moderate disabilities report that the number of steps to their home bothers them or bothers them greatly, compared to only 5% for the rest of the population.**

Persons with disabilities live in smaller, more crowded and less accessible apartments



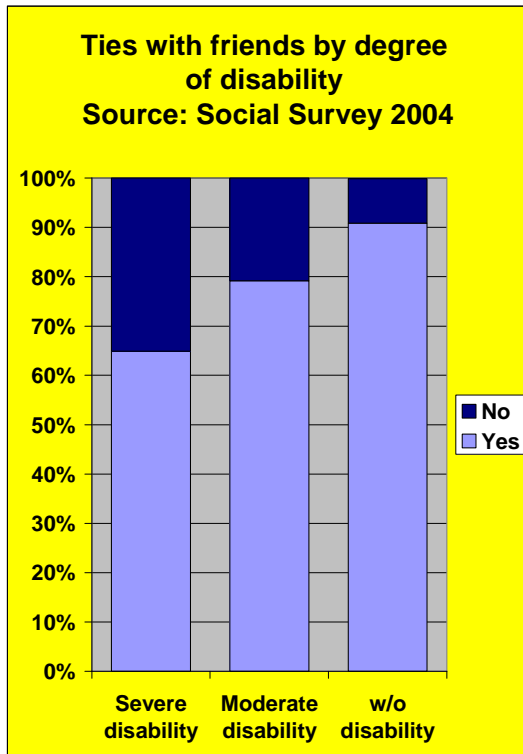
These gaps are maintained over a number of additional parameters such as satisfaction with housing conditions, environmental disturbances caused by noise, and particularly home

3.10 Disability and family and social ties

Existing data allows a glance at the world of family and social ties of the Israeli population in general and persons with disabilities in particular.

In general, most of the population reports strong ties with relatives that manifest in a high frequency of meetings: 73% of the entire population reported (in 2004) daily meetings, or meetings a few times a week, with family members; and persons with severe disabilities do not differ in this respect from others (71%). No significant differences were found in the frequency of contacts with relatives either: 81% of persons with disabilities report having daily or a number of times a week talks with relatives (who do not live with them) compared to 86% of the entire population. In addition, an absolute

majority is satisfied or very satisfied with family ties: more than 90% of both the general population and persons with disabilities.



A different picture is evident concerning ties with friends. Most of the population reports relations with friends, but **among persons with severe disabilities the number of persons reporting a lack of friends is higher (35%), and the same applies concerning persons with moderate disabilities (21%), compared to persons without disabilities (9%).** This seems to be directly related to disability: **46% of persons with severe disabilities report that often (if not always) their disability is what makes**

them reduce or waive social ties.

Persons with disabilities also meet their friends slightly less than the rest of the population (32% compared to 43% meet with friends almost every day). However, more than 90% of them are satisfied or very satisfied with these relations – to the same extent as the entire population.

Persons with disabilities report more than the rest of the population about the lack of satisfactory social ties

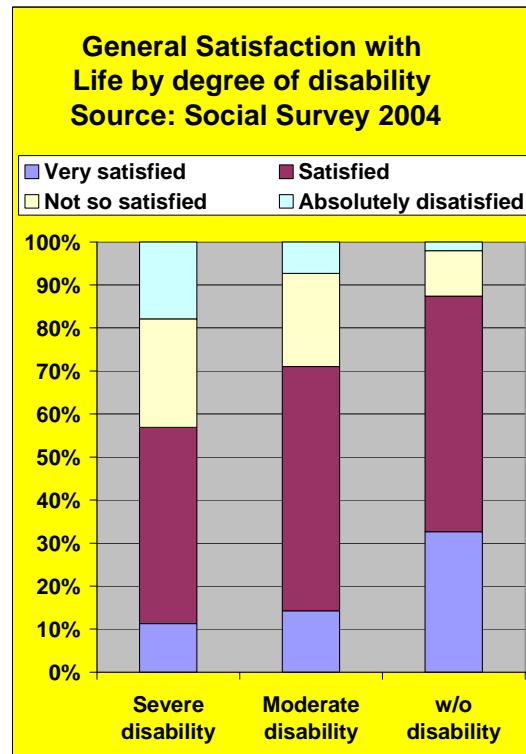
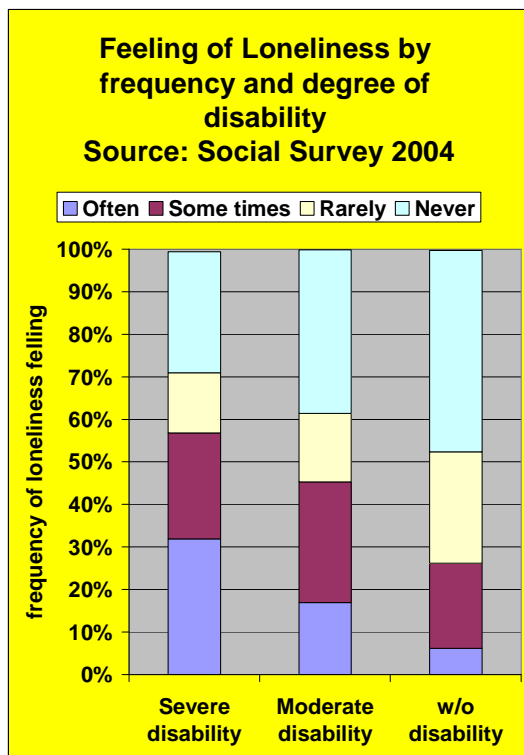
3.11 Disability, loneliness, reliance on others and satisfaction with life

In this state of affairs, a sense of loneliness is much more frequent among persons with severe disabilities: in 2004, 32% reported a sense of loneliness that affected them frequently (compared to 10% for the rest of the population) and only 29% reported never feeling lonely (compared to 47% for the rest of the population). In addition, to the question ‘To what extent in the case of crisis or distress are people whose assistance you can depend on?’, among persons with disabilities 23% responded negatively compared to only 10% who responded negatively in the rest of the population.

To the question “To what extent are you satisfied with life?” a glum picture is obtained concerning persons with

disabilities: 43% of persons with severe disabilities and 29% of persons with moderate disabilities were not so satisfied (or completely dissatisfied) with their lives compared to only 12% in the rest of the population. Particularly impressive is the rate of persons with severe disabilities who were completely dissatisfied with their lives: 18% compared to 2% of the population without disabilities.

disabilities) compared to only 8% who felt this way among the rest of the population.



Among persons with disabilities there is a feeling of loneliness, dissatisfaction, pessimism and social alienation to a much greater extent than among the rest of the population.

The outlook of persons with disabilities concerning their future is more pessimistic than that of the rest of the population too: **Among persons with severe disabilities, 28% feel that their lives would be worse in the future (17% among persons with moderate**

3.12 Selected properties of persons with disabilities - summary

The figures shown in this chapter show two main phenomena: the first is that disability is expected to affect a major proportion of Israelis at some stage of life, almost irrespective of their demographic properties. While there are groups in which the frequency of

disability is relatively high, particularly women and the Arab population, and less so immigrants and persons of Asian and African extract, all groups had significant disability rates. The second phenomenon, which may be even more salient, is the inferior socioeconomic and educational status of persons with disabilities, particularly persons with severe disabilities, but also of those with more moderate disabilities. Persons with disabilities have much lower education and their economic status is significantly inferior to persons without disabilities. Persons with disabilities also live under inferior housing conditions compared to the rest of the population. A result of the description above is the more frequent sense of loneliness and social alienation that persons with disabilities indicate in their answers in surveys.

The next chapters show figures on persons with disabilities in three main periods of the life of the individual: childhood, working age and old age. The aim is to examine age dependent aspects in the life of persons with disabilities.

(From Survey of Public Attitudes – 2005)

Exposure to persons with disabilities:

- **More than a third of the public is exposed to persons with disabilities, mainly relatives, friends or persons at work**
- **Almost a third of the public declares not having been exposed to persons with disabilities**

4. Children with disabilities

The information sources on children with special needs are much more limited than for the adult population. This chapter is based on a comprehensive study that was held in 1995-1996¹⁸.

4.1 Definition of children with disabilities

As in the case of the adult population, there is a difficulty in defining children with disabilities, much more when gathering data based on an agreed definition of children with disabilities. However, the study that most of the data below is based on is a dedicated study, meaning that the practical definition is very clear and draws on the judgment of experts who have examined each of the cases sampled in the survey. Children with special needs are defined as children “with disabilities or chronic illnesses who need regular medical care” (ibid., p. 1).

Later, we relate to children who fulfill this criterion as children with severe disabilities (paralleling the definition

used for the adult population) who require regular medical care. There is another group of children with disability or chronic illness who do not need regular medical care (which can be related to as children with moderate disability), although most of the data relates to the first group only.

4.2 Size of the population of children with disabilities by severity

In 1995-1996, the rate of children with special needs was estimated to be about 12.8% of all children aged 0-17. Out of these, 7.7% were children who needed regular medical care and 5.1% were children whose disability/illness did not necessitate regular medical care. If these rates remain unchanged, the population of children with special needs may be estimated in 2006, as 290 thousand, of which 175 thousand children need regular medical care (these estimates refer to children living in the community not including those living in institutions that are about 2.5% of all children).

Children with special needs constitute 12.8% of the population of children in Israel, i.e. 290 thousand children in 2006

4.3 Types of disabilities

Children with special needs who need

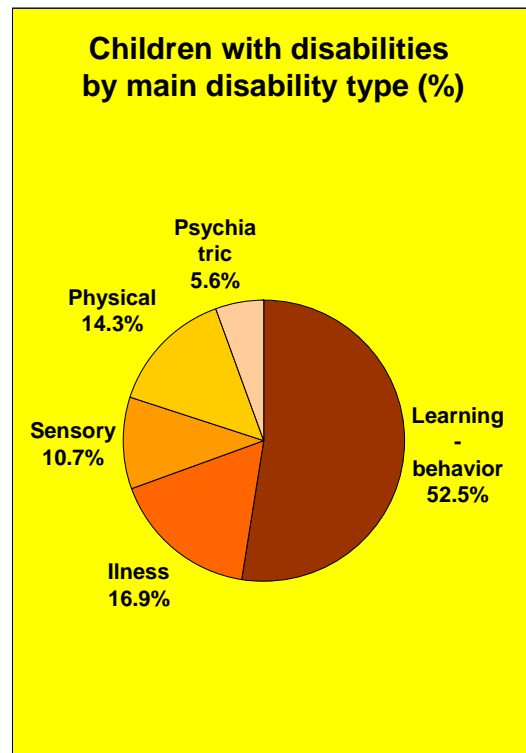
¹⁸ See “Children with special needs: An assessment of needs and coverage by services”, JDC – Brookdale Institute – National Insurance Institute, January 2000.

medical care have disabilities of various types and may be divided into five major categories:

1. Learning and/or emotional or behavioral disabilities (diagnosed by professionals or where parents report a significant gap compared to other children of the same age)
2. Illness requiring regular medical care
3. Sensory disability: visual or auditory disability affecting daily functioning
4. Physical disability
5. Psychiatric disability

When children are divided by main disability, the highest rate was noted in the field of learning and behavioral disability (52.5%) followed by illnesses and physical disabilities (16.9% and 14.3%, respectively), sensory (10.7%) and psychiatric disabilities (5.6%).

However, a large proportion of children with special needs (40%) have more than one disability, most of them (90%) have learning/behavioral disabilities as a main disability (for 51% of children with disabilities) or as a secondary one (for 39%). Also illnesses are found combined with other disabilities: 30% of children with disabilities have illnesses: for 17% this illness is a primary disability and for 13% more it is a secondary one.

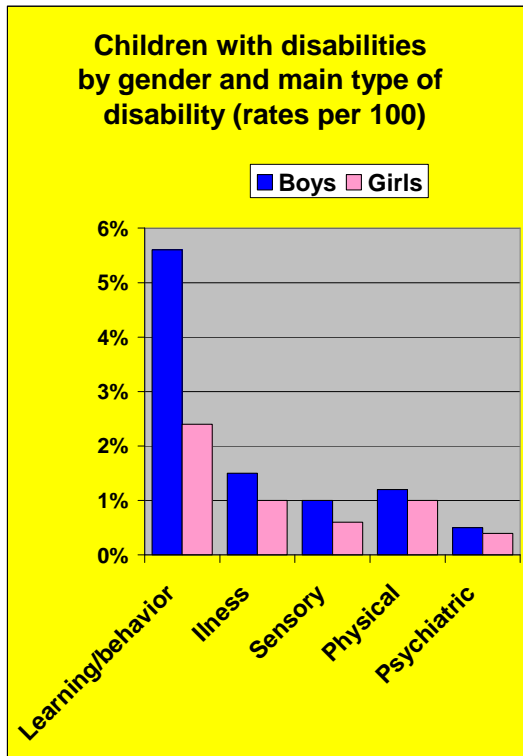


Disability of the learning /behavioral type is the most common among children, many of whom have special needs in additional fields too

4.4 Disability by age and gender

Age and gender are related to different rates of disability: boys have double disability rate (9.8%) of that of girls (5.4%) while at primary school age (6-11), the disability rates are the highest (10.7%) compared to younger (5.2%) or older ages (7.0%).

The difference between boys and girls is connected with the frequency of learning/behavioral disabilities that is twice more common among boys than among girls.

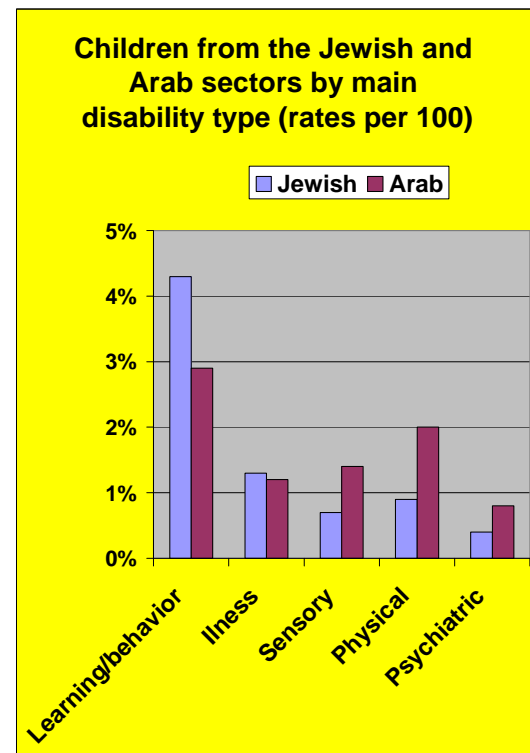
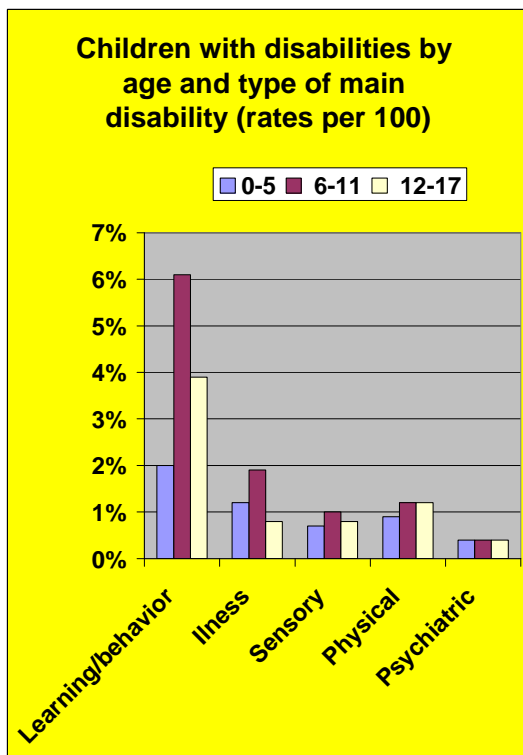


frequency of this disability at school age (mainly primary school).

Disability rates are higher among boys than girls, particularly regarding the learning/behavioral disability type

4.5 Gaps between children from the Jewish and Arab sectors

Also among children there are significant differences between the Arab and Jewish sectors – among children living in Arab localities, the rate of those with special needs who need regular medical care (8.3%) being higher than that of children from Jewish localities (7.6%).



Also the differences by age are related to learning/behavioral disability, most of the differences originating in the higher

This gap is maintained for most types of disabilities, but actually, for the most

common type in both groups, the learning/behavioral disability type, the rate is significantly higher among Jewish children: 4.3% of Jewish children have been diagnosed as having learning/behavioral problems as their primary disability compared to 2.9% among Arab children. It appears that the reason has more to do with lack of completeness of the diagnosis of this disorder within the Arab population. Therefore, the total gap between Arab and Jewish children is greater: if for example we assume the true learning/behavioral disability rate to be equal for Arab and Jewish children, the total disability rate of Arab children would reach 9.7% compared to 7.6% for Jewish children¹⁹.

The rate of children with special needs from the Arab sector is higher than that of children from the Jewish sector

4.6 Gaps by area and socioeconomic status

Gaps have also been found in the rate of children with disabilities by geographic areas, locality size and socioeconomic status: it appears that in Jerusalem there is a higher rate of children with disabilities than in the rest of the country. In small localities, the rates of disability

are higher, the same applying to localities with a very low socioeconomic status.

However, it is not clear how much these gaps are more than reflecting the gaps between the Arab and the Jewish population, this being because of the higher concentration of Arab populations in small settlements of very low socioeconomic status²⁰.

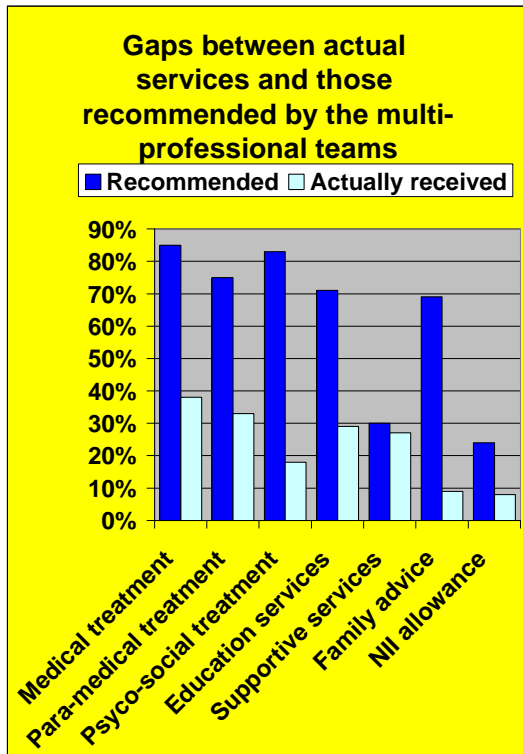
4.7 Gaps between needs and answers

The findings of the survey allow a direct comparison between the special needs of children with disabilities and the answers provided by society to be made. The identification of needs of a child with a given disability is no straightforward task, therefore multidisciplinary teams have been established who recommended a treatment plan for each of the children in the sample (a sub-sample out of all children with disabilities included in the survey), on the basis of the data gathered in the survey and information obtained from the attending physician,. It is important to state that the team members did not know what treatment/service each child was receiving. This way, gaps

¹⁹ Ibid., p. 14.

²⁰ A multi-variate analysis that was conducted concerning gaps in services did show that the gaps mentioned above originated mainly from the gap between Jewish and Arab localities. However, gaps have also been found related to the socioeconomic level of the population also among the Jewish population (ibid., p. 26)

could be identified between the recommendations of experts and the actual treatment/service received by the children.

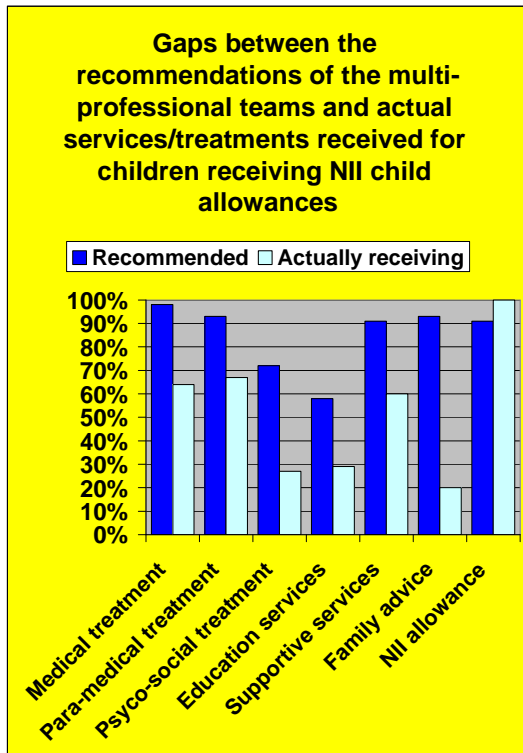


The gaps unveiled were significant for all categories that were examined, and for most of them, the ratio between the percent of individuals recommended for a certain treatment and the proportion actually getting that treatment was twice or more: i.e. less than half of the children actually receiving the service/treatment recommended by the multidisciplinary team. It is to be mentioned that only a quarter of children were recommended to be given a disability allowance. However, this is three times the

proportion actually receiving such allowance (8%).

The same examination was also performed for a sub-sample of children who actually receive (through their parents) disability allowances. The gaps here were slightly smaller, but still significant. It must be remembered that these are children whose disability is probably severe, meaning that they are recipient of services/care at a higher rate than that of other children with special needs. It is to be noted that not all children who actually get a disability allowance have been recommended to receive an allowance by the teams: 9% of them were not found to have a disability requiring an allowance (mainly children with illness-type disabilities). As stated, the teams did not know during the time of determining the recommended care whether the child received a disability allowance or not.

An examination of the rate of children with unmet needs by demographic characteristics has shown the rate tends to be higher above the age of 6, in Arab settlements, in small settlements and in settlements with low socioeconomic status. No differences were found by child gender.



The support for children with special needs and their families is beyond anything else, an investment in the future for facilitating their inclusion into society as adults.

An absence of current data (the data here being based on a survey from 1995) complicates any attempt to indicate a policy for reducing the gaps discovered between their needs and the provided answers.

There is a significant gap between the needs of children with disabilities and the answers provided, particularly in Arab and smaller localities and/or those of low socioeconomic status

4.8 Children with disabilities - summary

A large proportion of children with special needs need appropriate care and support, a major proportion of these are Arab children.

Children are exposed to disabilities of different kind, disabilities relating to learning and behavior being particularly evident.

The gap between needs and answers is great, and this applies particularly to Arab and small localities with low socioeconomic status.

5. Persons with disabilities at working age

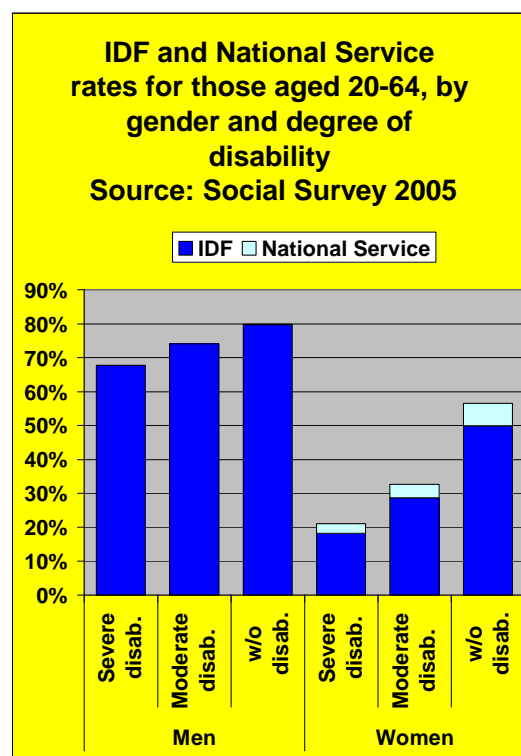
This chapter deals with the population of persons with disabilities at working age. The chapter starts with an examination of the service-rates of persons with disabilities in the IDF (Israeli Defense Forces). Immediately after this, their participation in the labor force and the working conditions of those employed are examined. Following that, data is presented on their health, functional and psychological situation and on their consumption of medical services. The end of the chapter will describe the degree of inclusion in various activities, including the effect of the digital gap over persons of working age with disabilities is examined.

5.1 Service in the Israeli Defense Forces

Service in the IDF, particularly for Jewish men and women, may be considered as an indicator of inclusion, and in view of the ongoing decrease in the proportion of persons serving in the military, also of the willingness to contribute to society.

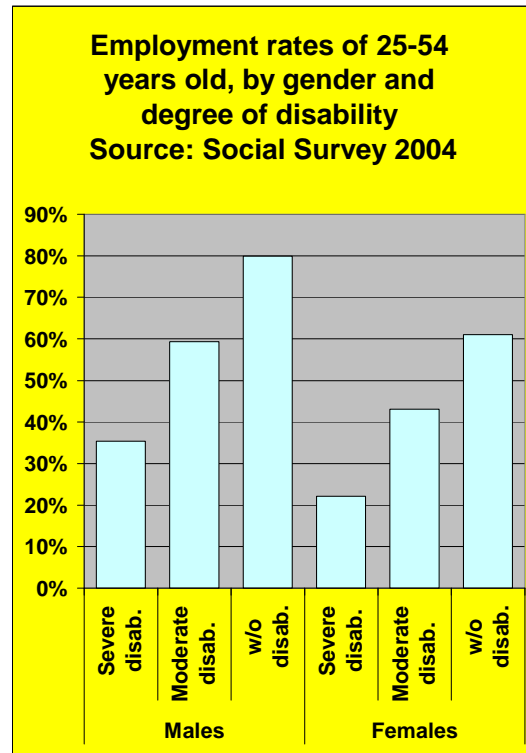
According to the social survey held in

2005, the rate of persons with disabilities who served in the IDF among Jewish men (that are required by law to serve in the military) was very high. More than 72% of persons with disabilities (aged 20-64 in 2005) had served in the military, including 68% of the men with severe disability and 75% of those with moderate disability, while for the rest of the population the population serving did not exceed 80%. In other words, the gap is less than 10%, which is certainly very small (this gap being reduced by half in the case of Israeli born citizens). This small gap reflects among others the fact that most disabilities are acquired during the adult years of life (or in a few cases during the military service itself).



For women there are much greater gaps in the rate of IDF servicewomen according to the degree of disability (which do not change when those who volunteer for national service are included). Only 28% of women with disabilities (aged 20-64 in 2005) reported service in the IDF or national service compared to close to 60% among women who did not report a disability.

The rate of persons who served in the military among persons with disabilities approaches the rate among the entire population



5.2 Employment and work conditions

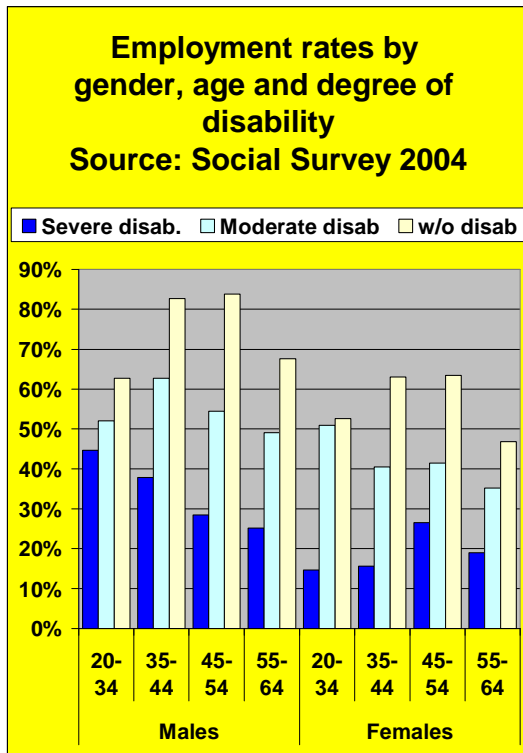
The following sections focus on employment characteristics of persons of working age with disabilities: their degree of participation in the work force, their characteristics as workers, work conditions, job security and degree of satisfaction with their work.

5.2.1 Participation in the labor force

The rate of participation in the labor force is a major indicator in evaluating people's degree of inclusion, since labor force participation has implications on personal security, economic status, and contribution and involvement in social life.

The survey indicates that the rate of employment among persons with disabilities is much lower than that for the rest of the population. In 2004, 75% of all men and 56% of all women in the main working age group (25-54) reported being employed. However, only 35% of men and 22% of women who reported a severe disability were employed at those ages. Also among persons with moderate disabilities, the rate of employment in the main working ages (25-54) was low relative to the entire population: 59% for men and 43% for women. The rate of employment for the rest of the population was 80% and 61% for men and women, respectively. Low employment rates characterize persons with disabilities in

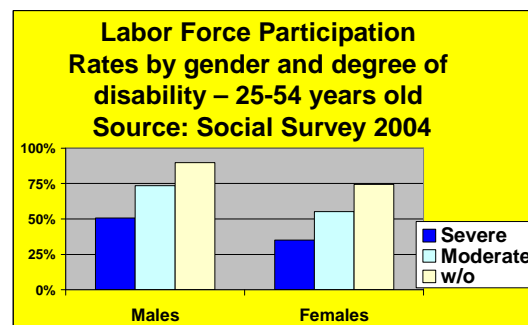
all age and gender groups.



The low rate of employment of persons with disabilities originates on the one hand from the low rates of those wishing and able to work (participating in the labor force) and on the other hand from high unemployment rates among persons with disabilities.

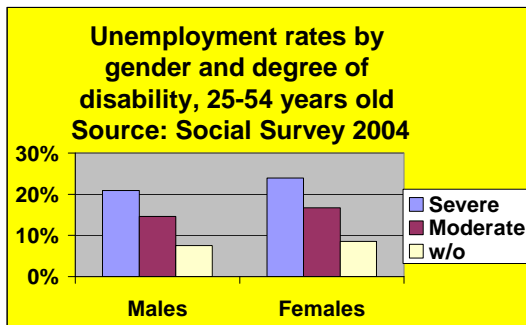
The latter reflects the fact that persons with disabilities interested in finding employment have to cope with more difficulties than others do. As a result, in the main work ages (25-54) only 51% of men and 35% of women with severe disabilities participated in the labor force (i.e. had been employed or actively

sought employment) while the participation rates of persons without disabilities in those ages were 90% and 74% for men and women, respectively. This low rate of labor force participation may reflect the fact that some persons with disabilities have difficulty in participating in the workforce due to their disability, but they may also reflect the frustration of those wishing to work from finding workplaces that would be ready to employ them.



Indeed, among those participating in the labor force, i.e.: interested in and capable of working, the unemployment rate among persons with disabilities was almost three times that of the entire population: 21% of men and 24% of women with severe disabilities were unable to find work, compared to 8% and 9% of men and women, respectively, among those without disabilities, always at main work ages (25-54). Persons with moderate disabilities also had more difficulties in finding work than persons

without disabilities (15% and 17% for men and women, respectively).



Persons with disabilities have very low employment rates

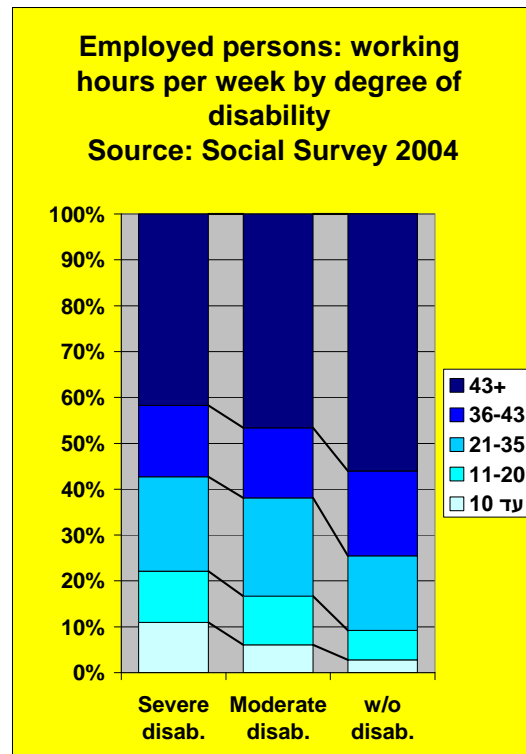
The high unemployment rates of those who were interested in employment indicate an inability/lack of willingness of the job market to hire persons with disabilities (even if with moderate disabilities).

5.2.2 Working conditions

Employed persons with disabilities differ from their peers without disabilities regarding various characteristics connected with their working conditions.

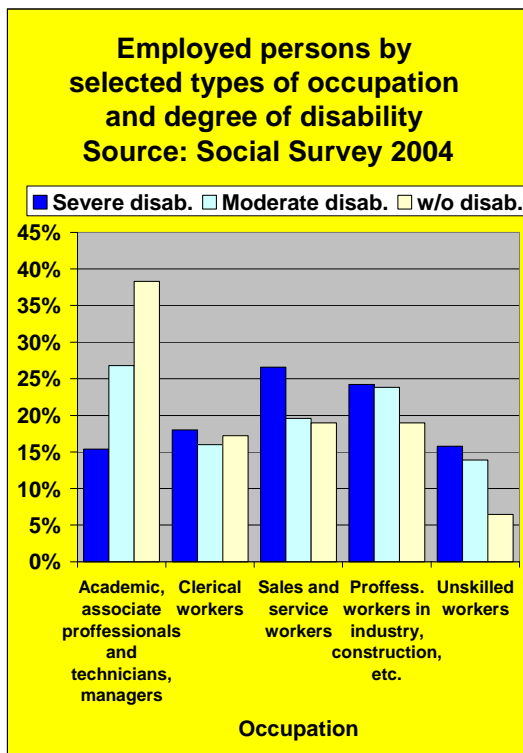
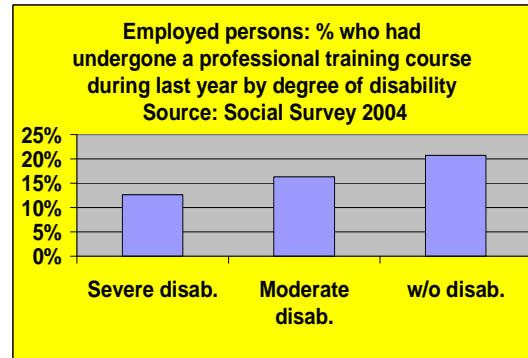
Part/full time employment: persons with disabilities tend to work fewer hours, in part time jobs. For example, among employed persons with severe disabilities, more than 22% work less than 20 hours compared to 9% among persons without disabilities. At the same time, only 57% of persons with severe disabilities worked 35+ hours (this being

usually considered full time employment) compared to 75% of persons without disabilities. Persons with moderate disabilities also worked fewer hours than those without disabilities.



Occupation: persons with disabilities tend to work in less prestigious occupations whose compensation is usually lower. This means that they are not so common among academicians, associate professionals and technicians, and among managers, but they are more common among unskilled workers in the industry and among sales and service workers, compared to persons without disabilities. For example, while 35% of persons without disabilities work as

academicians, etc., only 15% of persons with severe disabilities and 27% of persons with moderate disabilities work in these kinds of occupations. Persons with disabilities also report more than others of their work being not related to their studies (58% compared to 42% for the entire population).



Professional training: It seems that employers invest a little less in persons with disabilities than in others. Indeed only 13% of persons with severe disabilities reported having undergone a vocational training course in the last year, compared to 20% of the entire working population.

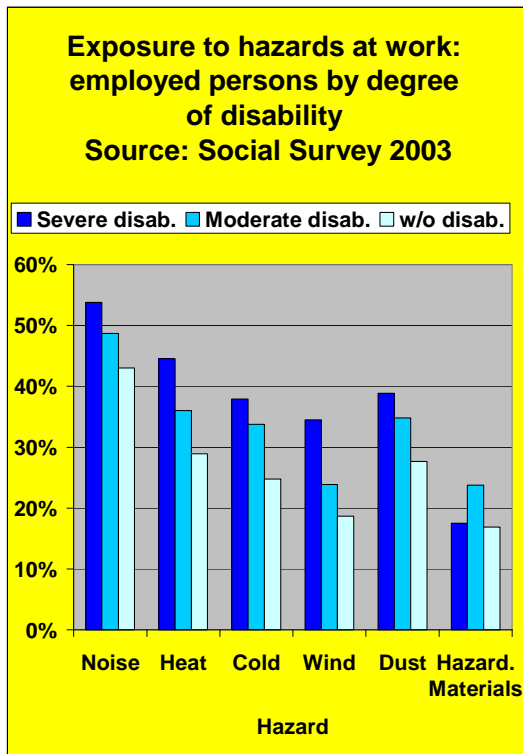
However, persons with disabilities do not differ from others in other properties: most of them are employees (87%) like the overall population (86%), they do not differ significantly in length of employment (seniority) and they are not employed in extraordinary proportions by labor force companies.

In contrast, they differ clearly concerning difficulties that they face at work. In 2003, about half of the persons with severe disabilities (38% with moderate ones) reported great or very great difficulties related to the workload imposed on them compared to about a quarter of workers among persons without disabilities. Similar gaps are reported concerning physical difficulties at work (see below more details on workplace conditions).

Persons with disabilities have more often part-time and less prestigious jobs, and face greater difficulties in their work place compared to the rest of the population.

5.2.3 Safety and health conditions at workplace

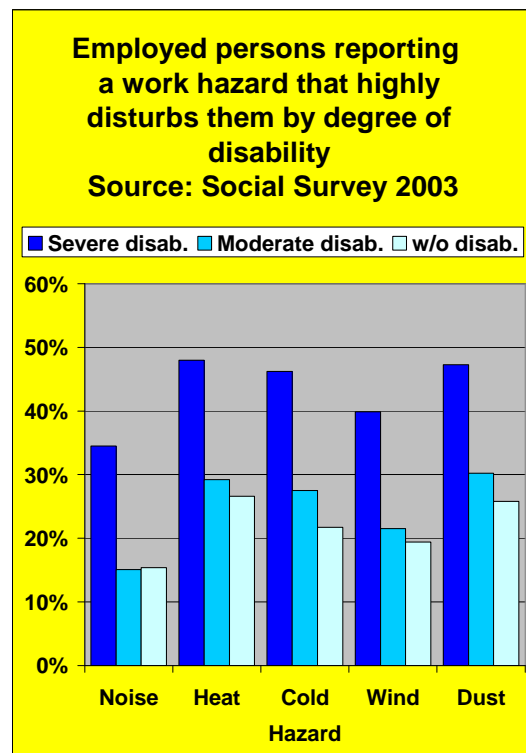
Concerning safety and health conditions related to their workplace, persons with disabilities report greater difficulties than their peers and are less satisfied with the physical conditions at their workplace.



This manifests in the rate of persons reporting exposure to hazards at work and the degree to which these hazards vex them. A third or more of workers who are persons with disabilities report exposure to noise, cold, wind, heat or dust at their workplace compared to only about a quarter of their peers without disabilities. The most common hazard is noise: 54% of persons with severe disabilities report this hazard and 35% of them assert that it disturbs them greatly

compared to 43% who report disturbing noise among persons without disabilities, of which only 15% state that this disturbs them greatly. No significant differences were found between persons with disabilities and others concerning exposure to hazardous substances (about 18% of employees).

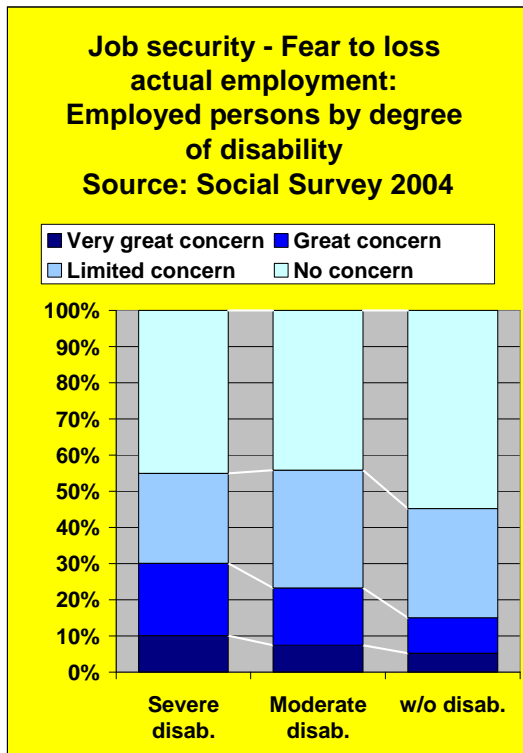
In this state of affairs, it is not surprising to find that persons with disabilities are much less satisfied with their workplace physical conditions: 42% of persons with severe disabilities are dissatisfied with these conditions (31% of persons with moderate disabilities) compared to 22% of those without disabilities.



Persons with disabilities face more difficulties than others regarding the physical conditions in their workplace

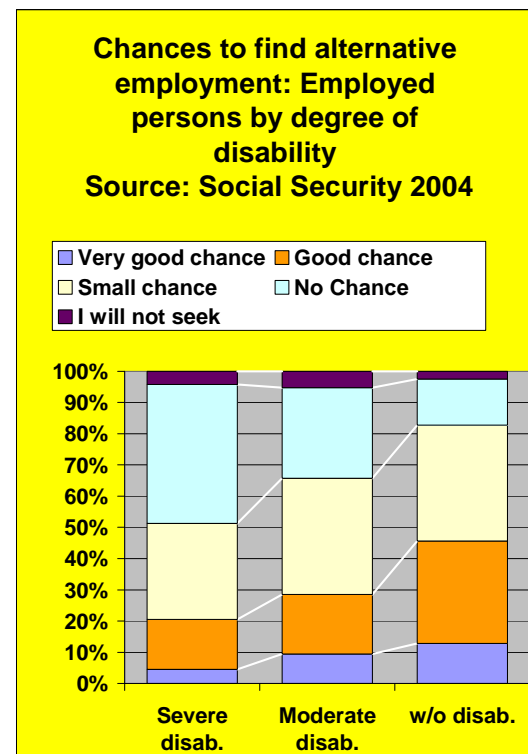
5.2.4 Job security

The job security of persons with disabilities is perceived as lower than that of their peers.



In 2004, 30% of persons with severe disabilities and 23% of persons with moderate disabilities expressed great or very great fear of losing their jobs compared to 15% of their colleagues who did not report disabilities. Moreover, fewer of them believe that they will find other employment if their current job is terminated: in effect, close to half of persons with severe disabilities do not believe they have any chance of finding an alternative job compared to less than 20% among their peers without

disabilities.



Persons with disabilities enjoy much less job security than their peers

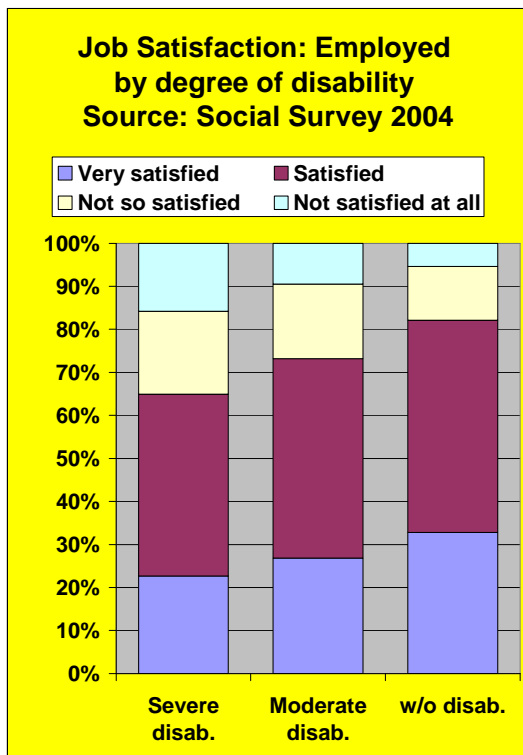
5.2.5 Income and salary

When the income from salaries of persons with disabilities is compared to that of the rest of the population, a similar picture is evident: In 2003, among 20-64 year olds, the salary level of 37% of persons with severe disabilities was just up to NIS 3,000 per month, compared to 19% at this level among persons without disabilities. At the same time, only 13% of persons with severe disabilities earned more than NIS 7,000 compared to 40% among those without disabilities.

The income from salary of persons with disabilities is much lower than that of their peers without disabilities, as is the case for job-security perception.

5.2.6 Job satisfaction

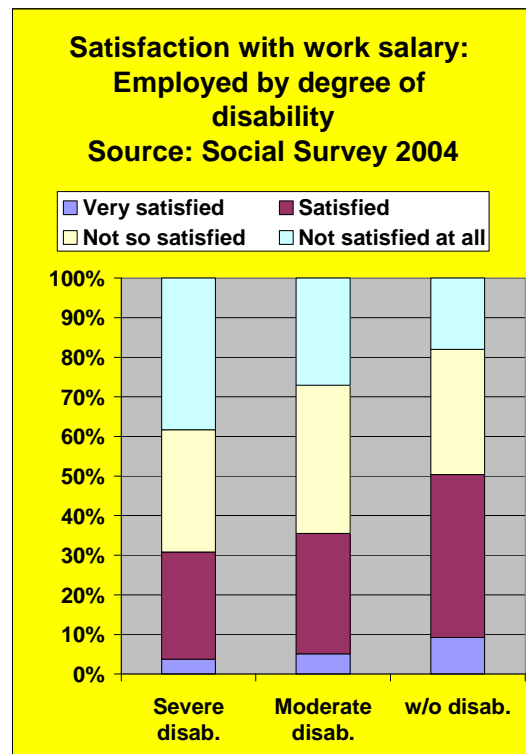
It could be concluded that in view of the figures above, persons with disabilities will be less satisfied with their work and income than the rest of the population.



However, it is found out that despite everything, most are satisfied with their workplace, even if slightly less than others. Most of them (65% of persons with severe disabilities and 73% of persons with moderate disabilities) are satisfied or even very satisfied with their job, these rates being slightly lower than

this of their peers without disabilities, which is 82%.

Concerning their incomes, persons with disabilities who work for a living are less satisfied than others are. The rate of those who are not at all satisfied with their income is particularly high, reaching 38% and 27% of persons with severe and moderate disabilities, respectively, compared to 18% for the rest of the employed population.



Persons with disabilities are in general much less satisfied with their job than their peers, and in particular, they are less satisfied with their job salary

5.2.7 Employment and work conditions - summary

The picture arising from the review

above indicates that persons with disabilities work less than others, both because their rate of participation in the labor force is lower and because the unemployment rates of those participating in the labor force is higher than among persons without disabilities. This applies for both genders and for all age groups.

Concerning job conditions and characteristics as workers, the picture is also gloomy: persons with disabilities, even moderate ones, work more often than others in part time jobs, in less prestigious (and less lucrative) occupations and have less professional training opportunities than their peers. Like their peers, they are mostly employees and have similar seniority. Persons with disabilities also suffer more than others from various hazards at work such as noise, wind, etc., and as could be expected are less satisfied with their work conditions than others.

To complete this gloomy picture, it must be noted that their job security and work income are much lower, as is their resulting job satisfaction.

Persons with disabilities of working age constitute 18% of the population at this age (11% persons with moderate disabilities, 7% persons with severe disabilities), representing about a quarter of a million potential workers. This can

not be considered a case of social welfare but of wasted human capital of a magnitude that should not be ignored.

5.3 Health, functional and psychological states and medical services consumption

In this chapter, we examine the health and functional situation of people with disabilities at working age and also their need for various medical treatments, compared to the rest of the population. We also examine certain implications of their health condition over various emotional situations and their own assessment of their health condition.

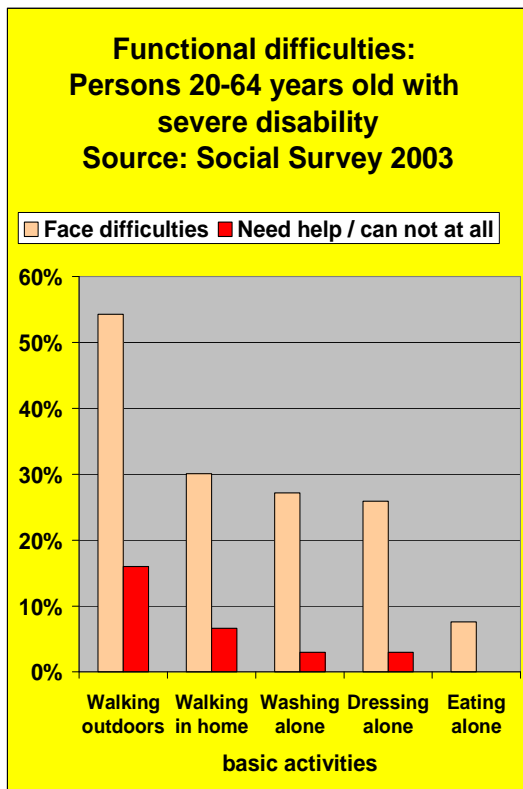
5.3.1 Daily functioning

Daily activities involve various difficulties for persons with disabilities depending on the character and severity of their disability and the kind of specific activity.

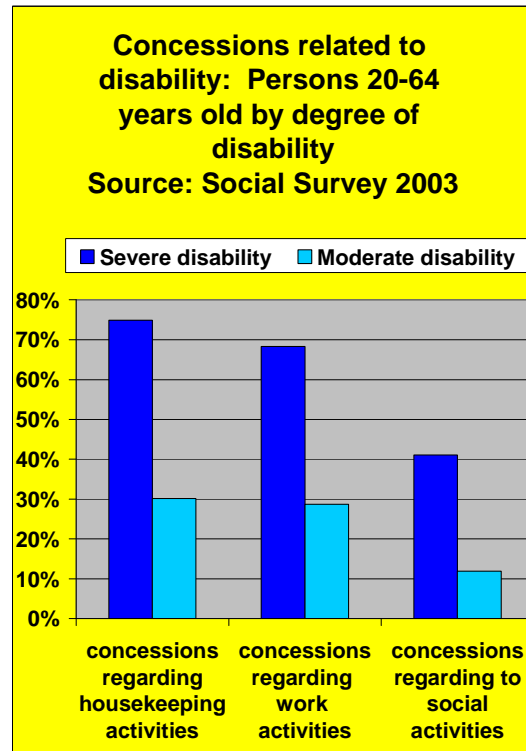
For example, more than half of persons with severe disabilities report difficulties such as regarding walking outside their home - 16% of them needing assistance from another person or a walking device (some of them being unable at all to walk outside²¹). Regarding persons with

²¹ Their number in the survey is too small for reliable estimation of their percentage in the population.

moderate disabilities, 17% have reported difficulties in walking outside their home, and 3% reported they need the assistance of another person or a walking device. As expected, younger individuals report less difficulty in walking outside the home, relative to older ones.



In addition, 30% of persons with disabilities have reported difficulties in walking inside their home, some of them (7%) needing assistance from a person or device. Concerning activities such as washing or dressing, more than a quarter of persons with severe disabilities report difficulty in performing these actions, some of them being unable to do so by themselves.



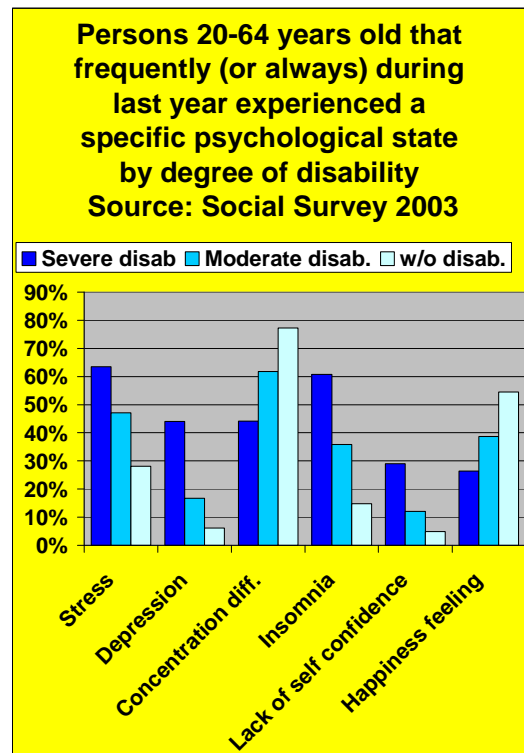
Persons with disabilities need to waive or reduce various activities because of their disabilities. Out of persons with severe disabilities, more than 70% have to give up or reduce, often or always, housekeeping related activities such as shopping, cleaning, etc., nearly 70% give up work related activities and 40% social activities. Persons with moderate disabilities also report they are forced to renounce to or reduce some of these activities (30%, 29% and 12% respectively, for the activities mentioned above).

A high rate of persons with disabilities have difficulty in performing daily activities such as walking inside and outside home, and need intensive assistance

5.3.2 Emotional states

According to the social survey of 2003, emotional state relates to stress, depression, lack of ability to concentrate and sleep problems. Lack of self-confidence is much more common among persons with severe disabilities than among persons with moderate disabilities, and particularly when compared to the rest of the population.

About 44% of persons with severe disabilities reported experiencing depression often (or always) during the last year, compared to 17% of persons with moderate disabilities and 6% among the rest of the population. A feeling of stress in the last year was reported by more than 60% of persons with severe disabilities and 57% of persons with moderate disabilities compared to 28% among persons without disabilities. At the same time, persons with disabilities suffer from a higher frequency of concentration difficulties: 56% of persons with severe disabilities and 38% of persons with moderate disabilities reported concentration difficulties compared to 23% among the rest of the population.

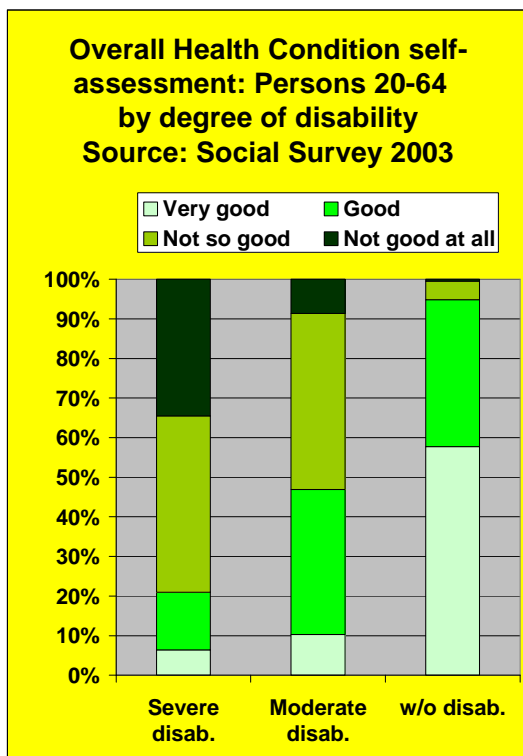


Finally, it was found that a feeling of happiness over the last year was reported by less than 40% of persons with disabilities (less than 30% of those with severe severity) compared to more than half among the rest of the population. At the other end of that distribution, **more than 20% of persons with severe disabilities reported that they had not felt happy even once during the last year compared to 9% among those with moderate disabilities and 3% among those without disabilities.**

Depression, stress, difficulties to concentrate and insomnia are very frequent among persons with severe and moderate disabilities

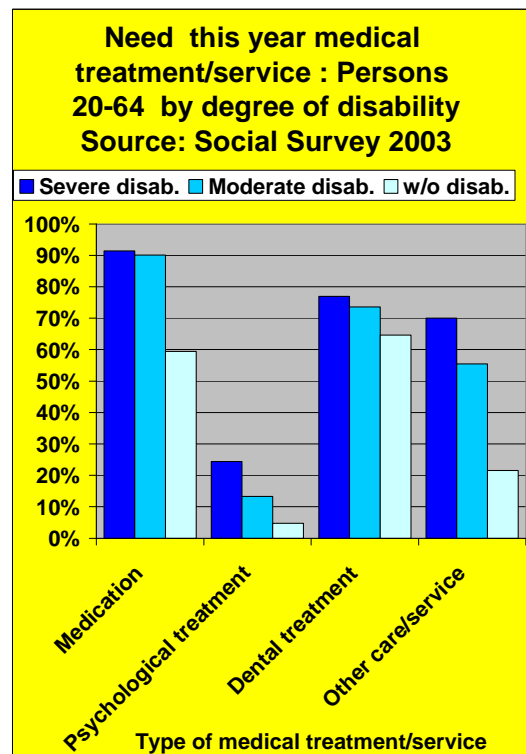
5.3.3 Evaluation of health status and need for medical services

The differences between persons with moderate disabilities and others manifest also in their health status: 80% of persons with severe disabilities feel that their overall health status is usually poor (or not so good) compared to 53% of those with moderate disabilities and 8% in the rest of the population.



In the social survey held in 2003, it was found that more than 90% of persons with disabilities aged 20-64 needed medications in the year preceding the survey compared to more than 60% in the population that had not reported disabilities. Persons with disabilities

needed psychological treatment more than others too: More than 20% of persons with severe disabilities and 10% of persons with moderate disabilities, respectively, compared to 5% in the rest of the population. They also needed dental care and other kinds (not included in those reviewed above) of medical treatment more than others did: 70% of persons with severe disabilities and 55% of persons with moderate disabilities compared to 20% in the rest of the population.



Persons with disabilities have severe health problems and need medical treatments, including medication, much more than others do

5.3.4 Health status and consequences - summary

This part of the publication has shown the health difficulties faced by persons of working age by degree of disability and some of the functional and psychological consequences of these difficulties for persons with disability of working age. It seems clear that at working age, persons with disabilities, and particularly persons with severe disabilities, need more support than others do and more medical and psychological care, and their disability obstacles their daily function in a range of basic activities, leading them to reduce or give up basic activities and having an effect on their psychological – emotional state. It must be emphasized that this is the same stage in life at which persons are usually active in the labor force market and in other fields, and therefore the human potential that is lost due to the less complete inclusion of persons with disabilities of this age is great.

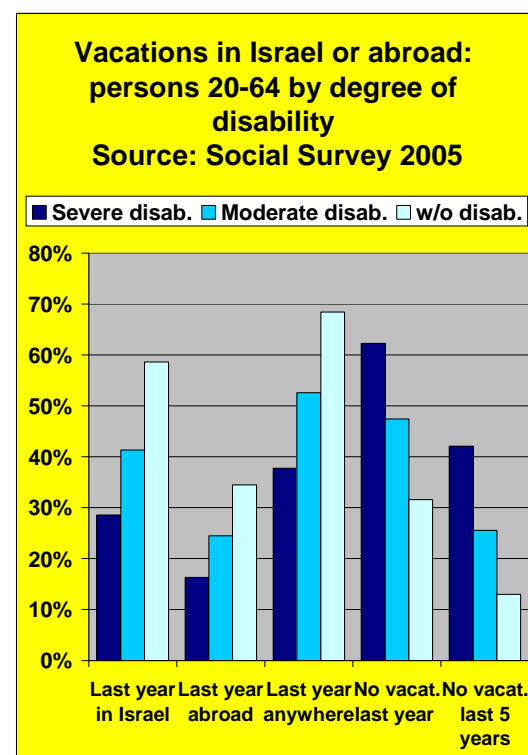
5.4 Inclusion of persons with disabilities in other activities

In this part, a range of additional activities reflecting the degree of inclusion of persons with disabilities is examined. This is done whether by checking their participation in group social activities or their vacations habits,

or examining their exposure to and degree of use of computers and Internet, and their command of English, which being essential to keep updated in the rapidly changing modern society, can be considered as indicators of inclusion.

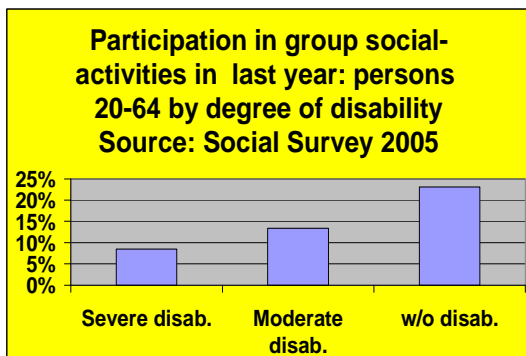
5.4.1 Leisure and holidays Activities

An indication of leisure activity may be found from the degree participation in group social activities and vacations frequency. The findings show that persons with disabilities participate in these kind of activities, but less so than the rest of the population.



For example, regarding going in vacations in Israel or abroad: 40% of

persons with severe disabilities and more than 50% of persons with moderate disabilities went on vacations in Israel or abroad during the last year; however 70% of the entire population did so. The differences are also maintained for holidays in Israel and abroad over the last five years, with slightly more than 40% of persons with severe disabilities reporting not having gone on holiday in the last five years, while this percentage was 26% for persons with moderate disabilities and only 13% for the rest of the population.

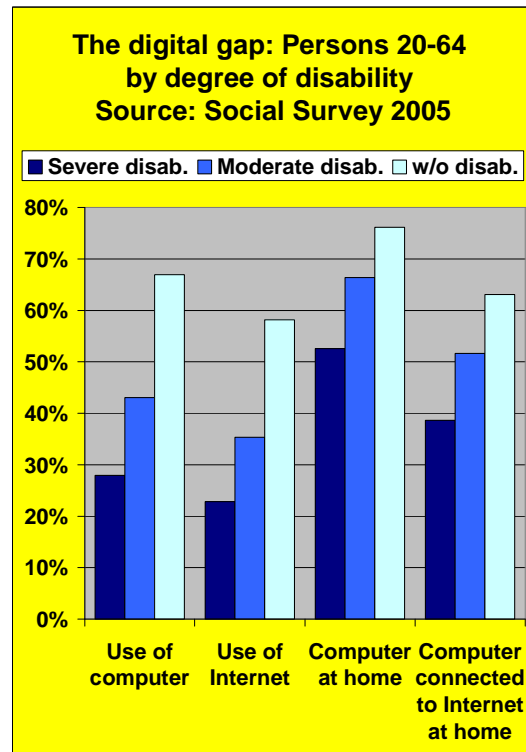


Persons with disabilities participate in social activities and vacations less than others

5.4.2 Use of communication technology – disability and the digital gap

Concerning the use of computer and Internet technology, it appears that the digital gap also applies to persons with disabilities. In all the parameters assessed, it was found that persons with

disabilities had more limited access to the digital medium than others in the population.

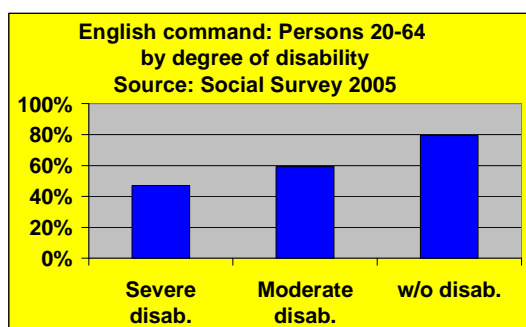


For example, while in 2005, two thirds of the population without disabilities used computers, fewer than 30% of persons with severe disabilities and only 43% of persons with moderate disabilities did so. Concerning the use of the Internet, there are also major gaps by degree of disability: only 30% of persons with disabilities (23% and 35% for severe and moderate disabilities, respectively) use the Internet compared to 58% among the rest of the population.

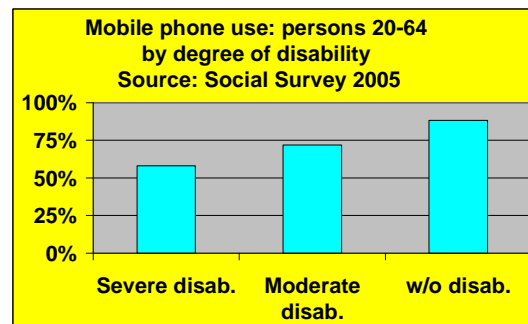
The frequency of computer possession at home is also lower among persons with

disabilities: 53% and 66% among persons with severe and moderate disabilities, respectively, compared to 76% among the rest of the population. This all leads to slightly fewer than 50% of persons with disabilities having access to the Internet at home (39% severe, 52% moderate) compared to 62% in the case of the rest of the population. However, those who have a computer at home are mostly connected to the Internet (90%), and here there is no difference between persons with disabilities and others. It can also be seen that regardless of degree of disability, the rate of computer and Internet users is low and sometimes significantly so compared to the number who have access to these technologies. This is probably the case of households in which others (usually children), rather than the persons with disabilities are those who use the media.

In order to fully utilize computerized media, one needs command of other languages, particularly English.



It seems that only 55% of persons with disabilities have some command of English, compared to 80% for the rest of the population. This is not surprising considering the education gaps between the groups.



To complete the digital gap picture, major gaps are also found in the use of cellular phones by degree of disability. While among persons with disabilities the use rates of cellular phones are relatively high (about 60% and more than 70% by severe and moderate disability, respectively), this rates are lower than in the rest of the population, where it approaches 90%. This gap appears to be highly significant considering that for persons with disabilities a cellular phone can be considered a safety device for cases of emergency.

The digital gap between persons with disabilities and others is large: all parameters show that they have much less access to the digital medium than others.

5.4.3 Public attitudes towards persons with disabilities

The attitude of mainstream society to persons with disabilities is far from being equalitarian. Despite most of the public being aware of the special needs of these persons, society is still prejudiced against persons with disabilities. For example, in an attitude survey held in 2005 it was found that more than 40% of the public does not believe that persons with disabilities can, like others, raise a family, integrate in the mainstream education system, or integrate in and contribute to work. A similar percentage does not believe that they are entitled to accommodations, exemptions or preferential treatment (favorable discrimination). The stigma does not end here: nearly a fifth of the public does not believe that persons with disabilities can function independently, and almost the same proportion (17.5%) believes that persons with disabilities are 'dangerous and annoying'²².

5.4.4 Inclusion of persons with disabilities in various activities – summary

This chapter has shown the extent to which persons with disabilities are less

socially integrated and involved than others in terms of their participation in group social-activities and vacations; their having and using computer, Internet and cellular phones, and has also shown their relative lack of knowledge of the English language.

This situation should be of no surprise in view of the content of the previous chapters, which depicted the socioeconomic situation of persons with disabilities. The low level of accessibility confirmed in the survey held by the Equality for Commission through the Szold Institute in 2003, which found that 95% of public spaces were not accessible to persons with physical and sensory disabilities, also contributes to this.

As a rule, it seems that the public in Israel still has difficulty in reconciling with the fact that persons with disabilities have normal rights and capabilities, and even those who are aware of their many special needs still hold a philosophy of patronization and charity towards them.

²² Telephone survey held at the order of the Commission for Equal Rights for Persons with Disabilities in October 2005 covering 500 respondents aged 18 or older.

6. Persons with disabilities at old age

Most persons with disabilities are able to live a full, active life, on the condition that they receive proper support and necessary accommodations. This also applies to persons with disabilities at old age. The characterization of this population is very important in view of the accelerated increase that is expected in the upcoming decades in its proportion out of the total population of Israel.

6.1 Aging and disability

As has already been reported, the older persons become, the greater their chances of being exposed to disabilities is. Above the age of 65, one in four Israelis has severe disability and after the age of 75, the ratio increases to almost one in three.

In total, at the age of 65+, persons with severe or moderate disabilities constitute 55% of the population and at the age of 75+, they became more than 60%, nearly half of whom are persons with severe disabilities.

The continued increase in life expectancy means that over time, more Israelis live longer, particularly after reaching the age

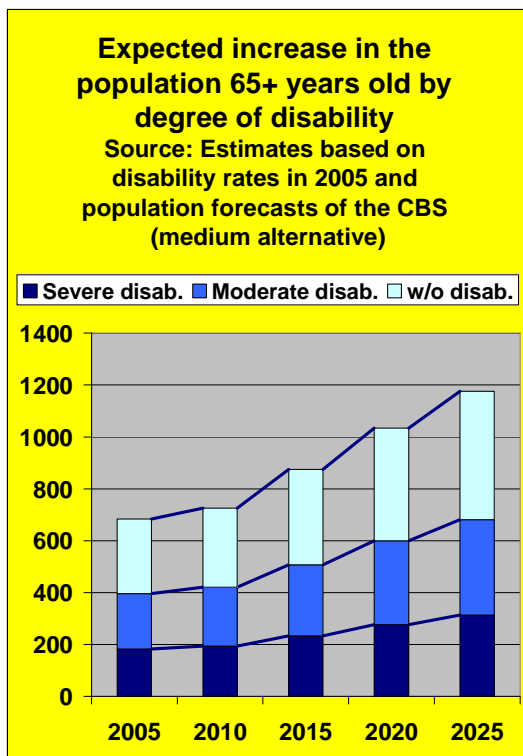
of 65. For example, in the 1980s, a woman who reached 65 years old was expected to live on average another 16-17 years (up to the age of 81-82) and a man another 14-15 years (up to the age of 79-80). In recent decades the life expectancy at these ages has increased by more than 25% and today they are expected to live on average to the age of 85 and 83, women and men respectively. Because of this (and other demographic processes related to past fertility decline and trends of immigration to Israel), the older population has increased significantly in the past and is expected to increase all the more so in the near future. For instance, in 1980 the 65+ years old population amounted to less than 340 thousand persons, constituting slightly less than 9% of the total population of Israel. By 2006, this population has doubled to about 700 thousand persons or 10% of the total population, while according to population forecasts of the Central Bureau of Statistics (medium alternative), already in 2020 it is expected to cross the million-person mark, and in 2025 will approach 1.2 million, constituting almost 13% of the population in Israel²³.

²³ Statistical Abstract of Israel – 2006, Central Bureau of Statistics, Projections of Population for 2010-2025, Table 2.27

The disability rate at the age of 75+ reaches more than 60%, nearly half of which involves severe disabilities

6.2 Expected accelerated increase in the number of persons with disabilities

The combination of the increase in the number of elderly persons with high disability rates common at these ages will lead, in the not so distant future, to a faster increase in the number of persons with disabilities.



For example, in 2006, the number of persons with severe disabilities above the age of 65 was estimated to be approximately 185 thousand, with another 215 thousand having moderate

disabilities. If the disability rates by age remain at the actual level, then as early as 2015, the number of persons with disabilities aged 65+ will cross the half-million mark, of which 230 thousand will be persons with severe disabilities. Under the same assumptions, in 2025 the number of persons with disabilities at this age will cross the 650 thousand mark, of which more than 300 thousand will be persons with severe disabilities (of course, this will result in a significant increase in the total number of persons with disabilities alongside the proportion of adults/elderly persons out of them).

In the next two decades we will face an accelerated increase in the number of persons with disabilities due to the increase of the proportion of old aged population

6.3 Demographic characteristics of persons with disabilities at old age

The existing differences between the demographic characteristics of persons with disabilities and the rest of the population at older ages are similar to those of persons with disabilities at lower ages. The more obvious thing being that all groups are expected to be exposed to high rates of disability when reaching advanced age (all the data in the section below is based on the 2005 social

survey):

Gender: It has been reported that with the increase in age, the proportion of women among persons with disabilities increases. This process reaches its peak at the apex of the age pyramid, where among persons with severe disabilities aged 65+, the sex ratio reaches two women per man, and at the age of 75%, 2.2 women per man (whereas for the whole population, the sex ratios at this age are 1.32 and 1.36 women per one man, respectively).

Marital status: At advanced ages, disability is the lot of persons regardless of their marital status. While a higher proportion of women with severe disabilities tend to be widows, the differences by marital status and degree of disability are not major.

Ethnicity and length of stay in Israel: At more advanced age, the disability rates in the Jewish population are not identical by ethnicity and length of stay in Israel. Jews of European and American origin who are veteran residents have slightly lower disability rates than those of Asian and African origin or those who have immigrated to Israel since 1990. The result of this is that persons of Asian and African origin and new immigrants are represented slightly more among persons with disabilities. However, the differences are minor altogether.

Arabs and Jews: As found concerning all adults with disabilities, also over the age of 65 the Arab population has twice the disability rates compared to those of the Jewish population.

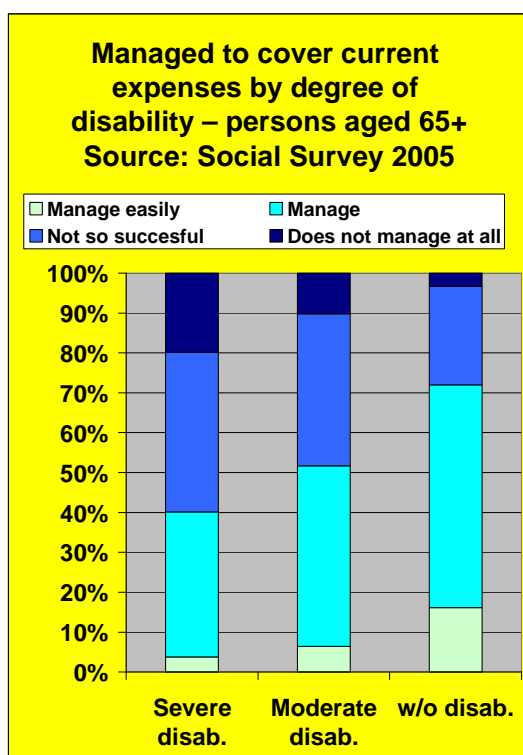
Religiousness: The differences found throughout the population concerning disability rates by religiousness almost disappear at advanced age. Only the ultra-orthodox population still reports slightly lower disability rates than other groups.

At old age, the proportion of women and persons from the Arab sector among persons with disabilities remains high.

6.4 Economic status in old age

At advanced and old age, the economic situation of persons with disabilities is much worse than the rest of the population. For persons aged 65+, as was found for all 20+ year olds, the rate of persons with severe disabilities living in households with a low per capita income (up to NIS 2,000 per capita) is almost double than among persons without disabilities (63% and 32%, respectively). At the same time, only 10% of persons with severe disabilities have an income higher than 4,000 shekels per capita compared to 35% of those without disabilities (all figures from the data of the social survey for 2005).

It must be remembered that at these ages, persons with disabilities become a majority: nearly 60% of persons aged 65+ are persons with disabilities (27% severe, 31% modest), while at younger ages, such as 20-64, the rate of persons with disabilities is only 20% (7.5% severe, 12.3% moderate). These probably are disabilities that are related to the aging process, which lead to a significant increase in the number of persons with disabilities.



reasonable to conclude that at the age of 65 and over, there are many persons who join the group of persons with disabilities. These newcomers probably lived without disabilities at younger age and acquired their disability upon aging. Therefore, it is also reasonable to assume that at least some of the newcomers had an economic situation that was relatively good compared to those who have a disability already from a young age. Despite this, the relative economic situation of this expanded group remains underprivileged: in 2005, for example, nearly 60% of persons with severe disabilities (48% of those with moderate disabilities) reported not being so successful or not succeeding at all in covering their monthly expenses compared to less than 30% who reported so among persons without disabilities.

Many who had no disability at young ages join the group of persons with disabilities at older ages. Nevertheless, the economic situation of the enlarged group remains underprivileged compared to their peers without disabilities.

Despite the data is not necessarily adequate for such analysis ²⁴, it appears

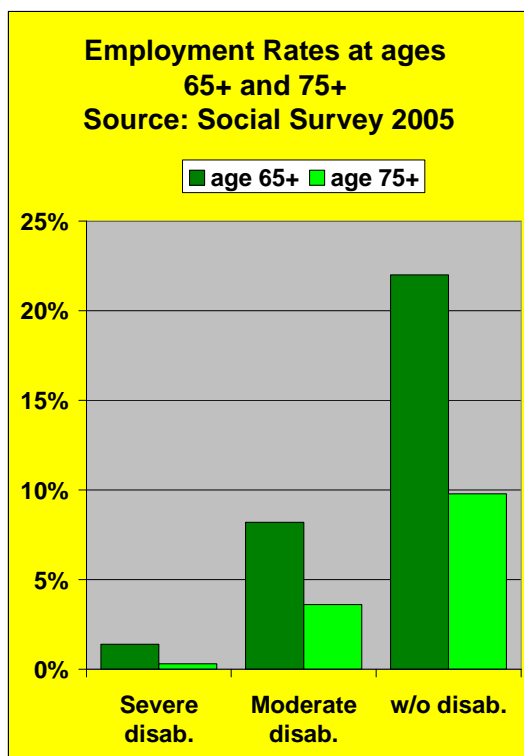
6.5 Work at advanced age

At advanced age, the rate of participation in the labor force decreases. For example, in 2005, only 11% of persons aged 65%

²⁴ The data relates only to one point in time (cross-sectional), but for better inferring about change that occurs over time, it would be better to rely on data resulting from the tracking of a

given group over time (longitudinal data).

reported working (were employed), while the rate of persons employed at the age of 75+ was only 5%. However, the gap between persons with disabilities and others does not disappear: the rate of employment is almost zero among persons with disabilities while being more than 20% for persons aged 65+ who did not report disabilities and almost 10% for 75+ year olds in the same group.



At old age, , the employment rate of persons with disabilities drops to zero, while being more than 20% for those without disabilities.

6.6 Residency patterns and housing conditions

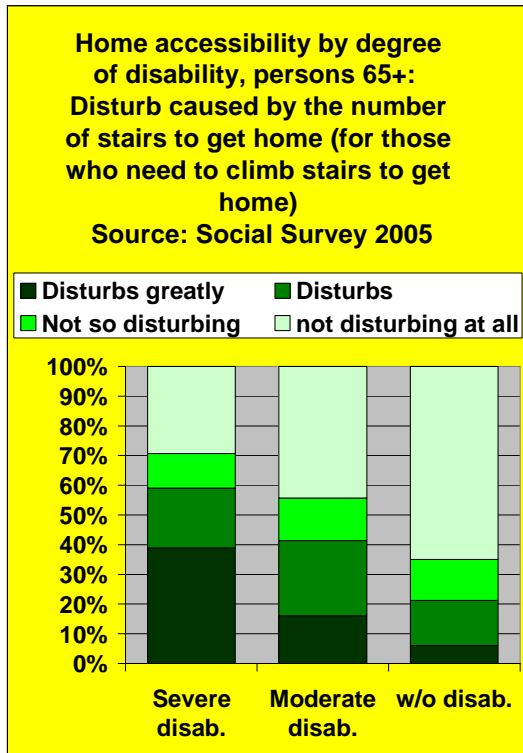
Regarding residency patterns, persons with disabilities at old age (65+) do not

differ significantly from those without disabilities. Most live in family households (90% of men and 65% of women) and a minority live alone (9% of men and 30% of women), similar rates being noted concerning persons with severe disabilities, persons with moderate disabilities and the rest of the population. The differences by gender in residency patterns reflect the fact that the vast majority of men of these ages are married²⁵ (more than 80%), compared to only half of the women, this being regardless of disability degree, if any. Concerning home ownership, no significant differences were found between persons with disabilities and others, although persons with disabilities live in a home that they own at a slightly lower rate (about 70%) than persons without disabilities (78%, always according to 2005 figures).

In contrast, concerning housing conditions, it is clearly indicated that the homes of persons with disabilities are much less suitable for their needs than in the case of persons without disabilities. Persons with disabilities are less satisfied than others concerning the size of their home, its physical condition, and cold/heat in the winter/summer

²⁵ Not necessarily being married for the first time, however

(respectively), and they report noise hazards more than others do.



Unsuitability of homes to their needs is particularly prominent concerning home accessibility. On the one hand, paradoxically, persons with disabilities tend to live less than others in apartments with elevators or where they are not required to use the stairs to reach their apartments (36% of persons with severe or moderate disabilities compared to 43% for the rest of the population according to 2005 data). On the other hand, out of those who live in homes without an elevator and who must use stairs to reach their apartment, there is a higher rate of persons with severe disabilities (39% and

16% among those with severe and moderate disabilities, respectively) reporting that the stairs bother them greatly compared to a small percentage (6%) reporting so among persons without disabilities. It seems that the problem of home accessibility for persons with disabilities becomes critical at advanced age.

It is not surprising that persons with disabilities at advanced ages are less satisfied than others are with the apartment they live in. Indeed, 20% of those with severe disabilities and 17% of those with moderate disabilities are dissatisfied or completely dissatisfied with their homes, compared to only 9% among those without disabilities.

The gap between persons with disabilities and others concerning housing conditions remains at old age and even worsened

6.7 Assistance at home and from relatives

A significant proportion of old aged persons (a third of 65+ year olds) employ an assistant/caregiver at home. The frequency of that is slightly greater among persons with severe disabilities: for example, among those with severe disability, the proportion employing an assistant/caregiver in 2005 was 43%,

compared to 27% among those with moderate disability and 32% for the rest of the population.

The main difference between persons with disabilities and others is found in the source of funding for the assistance: more than 80% of persons with severe disabilities reported that their assistance was funded from a public source (such as the National Insurance Institute) compared to 42% who reported this among those with moderate disabilities and 17% among those without disabilities.

It is reasonable to assume that the assistance in paying for assistance originates at this age mainly from Nursing Insurance provided by the National Insurance Institute: about 115 thousand persons aged 65+ indeed received aid in this form in 2005.

It is also worth mentioning that relatives also play an important function in providing their parents with assistance. In 2005, more than 20% of interviewees in the social survey reported supporting their aged parents financially or in the form of general assistance; 4% attending to their basic needs such as washing, dressing or eating (the question was asked in this survey only for interviewees who had a parent who did not live with them at home, these constituting slightly less than 60% of interviewees, and a third

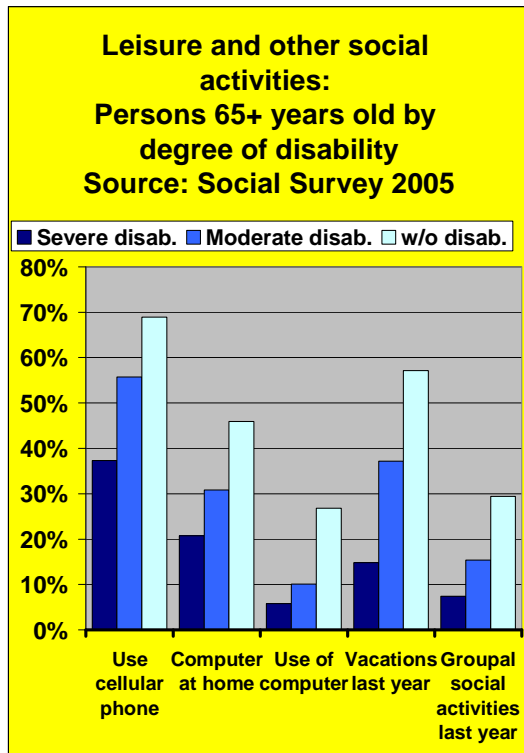
of them declaring supporting their parents financially or otherwise).

- **More than 40% of persons with severe disabilities employ an assistant/caregiver at home**
- **More than 20% of Israelis support an elderly parent who does not live with them**

6.8 Leisure and other activities

Concerning leisure activities, persons with disabilities, particularly persons with severe disabilities, are worse off than the rest of the population. For example, in 2005, 15% of those with severe disabilities reported going on some form of vacations (in Israel or abroad) in the last year, compared to 37% of those with moderate disabilities and 57% of those without disabilities. A similar picture is obtained concerning participation in group social activities in the last year (7%, 15%, 29% for each of the three groups, respectively). Concerning exposure to digital media, a parallel picture is obtained regarding use of computers (6%, 10%, 27% for the three groups, respectively), possession of a computer at home (21%, 31%, 46%) and even concerning cellular phone usage (37%, 56%, 69%), the latter being considered sometimes as a safety accessory that is important for persons

with disabilities.

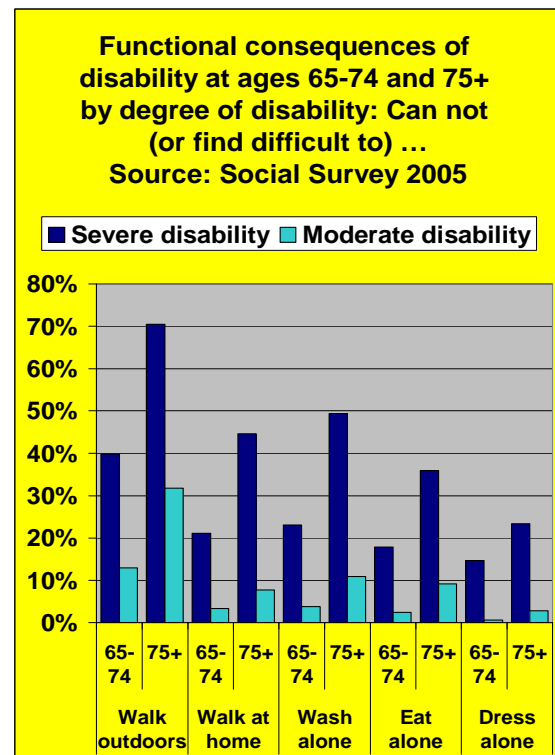


Major gaps at old age also exist concerning leisure activities and exposure to digital media

6.9 Health condition and its functional and psychological consequences

It could be anticipated that the health situation of persons with disabilities at advanced age would worsen considerably. However, the magnitude of the functional problems that they suffer from is still surprising: at the age of 65%, more than half (55%) of persons with severe disabilities cannot walk outside their home without the aid of a device or the support of a person, and of these, 13% report that they cannot walk

outdoors at all. Among those with moderate disabilities, almost 20% have difficulty walking outdoors unassisted. **At the age of 75+, the rate of those who rely in the assistance from another person or a device reaches 70% out of persons with severe disabilities (18% cannot walk outdoors at all).**



Concerning more basic activities, such as walking inside the home and washing alone, more than a third of persons with severe disabilities aged 65+ report being unable to do this alone without assistance, this rate increasing to about a half at the age of 75+. **In addition, 27% of persons with severe disabilities have difficulty eating independently, (this**

rate increases to 36% at the age of 75+) and almost 20% are unable to dress alone.

Obviously, disability has various psychological consequences. In the social survey of 2003, in which these issues were examined, it was found that persons with disabilities of advanced age tend to suffer more from depression, insomnia due to concerns, inability to concentrate, etc., than those without disabilities.

In view of the finding concerning the entire Israeli population whereby at the age of 65 and older, 75% responded being satisfied or very satisfied with life, the gap between persons with disabilities and others is particularly prominent. Only 56% of persons with severe disabilities and 77% of persons with moderate disabilities responded in the survey that they are satisfied or very satisfied with life compared to 90% of those without disabilities.

6.10 Disability at old age -

summary

One of the most significant findings related to disability at advanced age is that most Israelis who reach this age, particularly those who cross the 75-year mark are expected to cope with some disability, which in a major proportion of cases will be severe. According to the

mortality rates of recent years, 90% of females and 83% of males in Israel will reach the age of 65, which means that most Israelis living today will have to cope with some form of disability in the future.

This becomes particularly difficult from the age of 75 (which most Israelis are expected to reach - 65% of men and 76% of women). At these ages, a major proportion cannot cope unassisted with basic activities such as walking outdoors (a third of them) and a significant number will have difficulties even in walking inside their home unassisted (17%), washing alone (19%) and even dressing alone (9%). This is while less than half of persons with severe disabilities employ an assistant/caregiver at home (mostly funded by a public institute).

The aging trend of the Israeli population is certain. The number of elderly persons with severe disabilities will exceed 200 thousand within a few years (2010) and will reach 300 thousand towards 2025.

The picture obtained from the data shown in this chapter indicates that this population is under significant stress. It appears that taking proper care of them requires immediate intervention and appropriate planning and preparation for the numerical increase expected in the future.

7. The government and persons with disabilities

This chapter gives the reader a summary description of answers for the special needs of persons with disabilities that are provided by the government. This description includes the main actions conducted by government entities with the aim of assisting in the inclusion of persons with disabilities in society. It must be emphasized that this description does not include non-government entities that play an important function, such as local councils and community centers, healthcare organizations, voluntary associations and organizations and other private entities.

Various government entities are involved in ensuring social security for persons with disabilities in the form of allowances or pensions, loans, exemptions and discounts, including tax credit points. At the same time, there are also services that are provided to persons with disabilities with the aim of answering their special needs. The definition of eligibility that is used by these parties does not necessarily overlap the one obtained from surveys.

7.1 Social security

Three main parties are involved in ensuring social security for persons with disabilities: the National Insurance Institute for various groups as listed below, the Ministry of Defense, which provides support for IDF disable and the Ministry of Finance, which directly provides financial support for groups that are not covered by other parties, headed by Nazi persecution victims.

7.1.1 The National Insurance Institute²⁶

The main allowance (quantitatively speaking) paid by the National Insurance Institute is the General Disability Allowance, which is intended to guarantee persons with disabilities a minimum income for their subsistence. In 2005 it was paid to about 171 thousand persons. This allowance is usually paid to persons of working age until they reach the age of eligibility for an old age pension. An essential condition for eligibility is a disability rate of at least 40% (which was increased to 60% in 2004). At the same time, about 21 thousand children (actually their parents) received a disabled child allowance that year.

In addition, part of the eligible persons

²⁶ Annual Review for 2005, the National Insurance Institute, 2006, chapter 5.

are paid additional allowances like the Special Services Allowance, intended for assisting persons with disabilities in functioning in their home and Mobility Allowance intended to assist persons with disabilities in mobility outside their home. About 25 thousand persons received each of these allowances in 2005. Most of the recipients receiving a General Disability Allowance received only this allowance, as did most Disabled Child Allowance recipients (in 2005: about 85% in both cases). In addition, about 15 thousand received one of these allowances without receiving a General Disability Allowance or Disabled Child Allowance, and another 3,000 received a Ringworm Victim Allowance.

In addition to the allowances mentioned above, a Work Disability allowance is paid (to approximately 25 thousand persons in 2005) and in close to 3,000 more cases it is paid a Hostile Action Victim Allowance. However, as opposed to previous cases, more than 60% of these allowance recipients have a disability degree of less than 40%.

It can be summarized overall that in 2005, the National Insurance Institute paid some kind of disability allowance to about 228 thousand persons, including 28 work and hostile action victim persons with disabilities, who in most cases had relatively low disability rates. These

figures do not include persons with disabilities who are entitled to old age allowances, and who upon reaching the age at which they are eligible for this pensions, most of them stop getting allowances for persons with disabilities.

7.1.2 The Ministry of Defense²⁷

The Rehabilitation Division of the Ministry of Defense pays allowances to about 50,000 persons registered as IDF disable. However, the great majority have low disability rates (fewer than 20%).

In addition to monthly allowances, a major proportion of IDF disable are entitled to discounts, refunds and gratuities in various fields, such as income tax refunds, discounted municipal taxes or telephone bills.

7.1.3 The Ministry of Finance²⁸

The Ministry of Finance pays compensation directly to about 53 thousand Nazi persecution victims (44 thousand in 2004) and disabled veterans of the war against the Nazis (about 9,000 this year).

In addition to compensation, these persons also have a number of

²⁷ Report to the Commission for Equal Rights from the Ministry of Defense for 2004.

²⁸ Report to the Commission for Equal Rights from the Ministry of Finance for 2004.

exemptions and gratuities (for medical care and study tuition).

7.1.4 Other ministries

In addition to the three main offices mentioned above, a number of other ministries support persons with disabilities by providing financial aid for various needs.

The Ministry of Construction and Housing provides persons with disabilities with loans for purchasing apartments (144 cases in 2005) and participates in rent payments (16 thousand cases in 2004). In addition, it provides gratuities for housing adaptations.

The Ministry of Health²⁹ provides mobility and walking aids. The mobility devices supplied in 2005 included some 7,200 wheelchairs (of which 225 are motorized), about 3,700 other mobility devices and another 3,400 rehabilitation devices. The supplied walking devices included some 1,300 prosthetic limbs and components, about 3,500 walking devices and some 3,700 special orthopedic shoes.

The Ministry of Immigration and Absorption³⁰ provides a special

allowance for ensuring the subsistence of immigrants with disabilities up to the age of 65 until the end of the first year after their immigration. By the end of this year they are transferred to the care of the National Insurance Institute. In 2004, some 27,000 immigrants with disabilities were reported as being entitled to this allowance. The ministry also provides public housing for a small number of immigrant families (25 in 2004) or aid in rent (100 families in 2004).

The Ministry of Transport provides fare discounts for disabled persons under the National Insurance Law.

The Ministry of Welfare³¹ provides attendance payments for blind / visually impaired persons, such attendance payments being paid in 2004 in some 13,000 cases.

7.1.5 Persons with disabilities and disability allowance recipients

It appears that the overlap between disability allowance recipients and those defined as persons with disabilities (severe or moderate) in the social survey is only partial.

Indeed, the data of the 2005³² social

²⁹ Report to the Commission for Equal Rights from the Ministry of Health for 2005.

³⁰ Report to the Commission for Equal Rights from the Ministry of Immigration and Absorption for 2004.

³¹ Report to the Commission for Equal Rights from the Ministry of Wellbeing for 2004.

³² In the 2005 social survey, questions on the receipt of national insurance allowances by type were asked, allowing for cross-classification of

survey indicates that most 20-64 year old recipients of General Disability Pensions from the National Insurance Institute (77%) are also defined as persons with disabilities in the social survey (62% among persons with severe disabilities). However, there are many (23%) General Disability Allowance recipients who stated in the survey that they had no disability that bothered them (or greatly bothered them) in their daily functioning. At the same time, out of those defined as persons with disabilities according to the survey, only a small proportion receives a General Disability Allowance (or another parallel one)³³ from the National Insurance Institute. For example, among 20-64 year olds, less than a third of all persons with disabilities – 43% of persons with severe disabilities and 24% of persons with moderate disabilities, receive an allowance from the National Insurance Institute (not including child allowance). It is mentioned that, in addition, there is a significant group (about 100 thousand) of persons defined as disabled by other ministries who receive an allowance from the Ministry

these data with the reported degree of disabilities
³³ These are mainly the Income Support or Old Age Pension recipients who can not receive a General Disability Allowance. Because it is not usually possible to receive two allowances, it is possible that some persons with disabilities will prefer or have to receive another allowance rather than a General Disability Allowance.

of Defense or the Ministry of Finance. However, even if we assume that this group were defined as persons with disabilities³⁴ in the social survey too, the percent of recipients of any allowance out of all the persons with severe disabilities or persons with moderate disabilities aged 20-64 would be less than 50%.

7.1.6 Social security – summary

Three main parties provide social security to 330 thousand persons; the support that is obtained from other ministries is usually for persons eligible by the definitions of these three institutes.

There is no direct way of estimating the extent to which the amount of the support is meeting the needs of recipients. However, it appears, based on previous chapters, that it can at least be determined that the aid that persons with disabilities receive is not sufficient for allowing their full inclusion in society or even their subsistence at a reasonable standard of living. The dire picture of the socioeconomic and psychological state of persons with disabilities appears to be harsh by any standards.

³⁴ This assumption appears to be unreasonable for Ministry of Defense pensioners, most of whom have disability rates of less than 20%

7.2 Special services

Various government entities provide special services for persons with disabilities.

The National Insurance Institute³⁵ provides vocational rehabilitation services for persons with general disabilities, work disability and terror victim disability, and in certain cases for widowers. In 2005, some 10,000 applications were reported, and some 12,000 persons completed a process of vocational rehabilitation. It is noted that the vocational rehabilitation itself may include financial support for rehabilitation and for improving the welfare of the recipient.

The Ministry of Construction and Housing³⁶ provides, in certain cases, homes for purchasing (66 homes in 2005) or public housing (there are no figures that can be used for identifying persons with disabilities who received public housing).

The Ministry of Health³⁷ provides various types of services, mainly for persons with disabilities in the mental health field. In 2002, there were about 20,000 in-patient beds for chronic

illnesses, mainly in the geriatric field, 5,400 in-patient beds for mental health and 700 for rehabilitation. In addition, within the community rehabilitation system, there were about 3,800 patients.

The Ministry of Education and Culture³⁸ provides special education services. In this setting, in 2005 about 44,500 children were studying, of whom 6,300 were in kindergartens, 20,000 in regular schools (in special education classes) and about 18,000 in special education schools. Children with special needs are also integrated in mainstream education, with about 66 thousand such children in 2004. In addition, the Ministry provided transports for students in special education settings (about 22,000 per year in 2004). To conclude, we point out that the Ministry of Education also provides assistants for children integrated into mainstream education (in 2004 there were 2,300 children who were aided by an assistant).

The Ministry of Transport³⁹ issues parking badges for vehicles of persons with mobility disabilities. In 2006 there were 76,000 such badge holders, of whom 4,500 had wheelchair badges.

³⁵ Annual Review for 2005, the National Insurance Institute, 2006, chapter 5.

³⁶ Report to the Commission for Equal Rights from the Ministry of Construction and Housing for 2004 and 2005

³⁷ Report to the Commission for Equal Rights from the Ministry of Health for 2005.

³⁸ Report to the Commission for Equal Rights from the Ministry of Education for 2004 and data for 2005 out of Children in Israel, 2005, statistic annual, the National Council for the Wellbeing of Children

³⁹ Report to the Commission for Equal Rights from the Ministry of Transport for 2006.

Most of the badges were approved by the Ministry of Health (55 thousand), the Ministry of Defense (8,000) and the licensing division (7,000) of the Ministry of Transport.

The Ministry of Welfare⁴⁰. The Rehabilitation Division cares for some 6,000 persons (data for 2004) who receive services such as protected employment (2,000 persons), housing satellite housing (1,000), rehabilitation clubs (740), etc. Within the Service for the Blind, some 2,000 persons are cared for, and within the division for caring for persons with retardation, about 16,000 persons. In addition, about 440 individuals with autism are treated within a dedicated special unit.

Based on existing information, it is difficult to estimate the gap between the services provided to persons with disabilities and their needs. However, the picture arising from previous chapters concerning difficulties that persons with disabilities encounter in their daily function and performance of basic actions, with the difficulty they have in receiving services and medications, which they sometimes have to give up for financial reasons, is indicative of significant gaps.

⁴⁰ Report to the Commission for Equal Rights from the Ministry of Wellbeing for 2004.

7.3 Employment in the civil service

Recently, a special operation has been performed (by the Central Bureau of Statistics⁴¹) in order to assess the degree of inclusion of persons with disabilities in the civil service. The examination was invited by the Civil Service Authority and the Commission for Equal Rights for persons with disabilities and was based on linking records between civil service employee files and allowance recipient files from the National Insurance Institute and the rehabilitation division of the Ministry of Defense.

Persons with disabilities have been defined for the purpose of this examination as those recognized by the Ministry of Defense as having 20% or greater disability, or by the National Insurance Institute as having 40% or greater disability.

It was found that in June 2005, out of 58,000 civil service positions, 1,200 or 2.1% were of workers who had been recognized by the National Insurance Institute or the rehabilitation division of the Ministry of Defense as persons with disabilities.

Out of persons with disabilities employed

⁴¹“Representation of Persons with Disabilities in the Civil Service” – Ari Paltiel, National Bureau of Statistics (draft) report filed to the Government Service Authority and the Commission for Equal Rights for Persons with Disabilities, May 2006

by the state, a high rate of men was found (more than 60%), while among civil servants, women actually constitute about two thirds of employees. A partial explanation to this may be found in the high rate of IDF disable out of men with disabilities who are employed by the state, almost 50%, while IDF disable constitute a smaller percentage (about 20%) of all persons with disabilities of working age who are recognized as being disabled by the State⁴².

It was also found that less than half of workers with disabilities employed by the state (44%) had disabilities prior to starting work, most of them having acquired their disabilities during their work. It was also found that the Arab sector had less representation than the Jewish sector among persons with disabilities in the civil service, which is partly explained by the high proportion of IDF disable (who belong mostly to the Jewish sector).

Any attempt to examine whether the proportion of persons with disabilities employed in the civil service concords with the requirements of the law for “adequate representation” is greatly affected by the definition of disabilities

used and the criterion used for determining what “adequate representation” is.

A partial examination can be conducted based on data from the social survey of 2005, which provides for an estimate of the proportion of employees who receive a disability allowance from the National Insurance Institute, which may be compared to the parallel rate among civil servants. The comparison indicates that the rate of men receiving a general disability allowance and employed by the state is slightly higher (2.1% according to the report) than the rate of employees receiving a disability allowance from the National Insurance Institute out of all employed persons (1.4% based on the data of the social survey). In the case of women, the two rates are similar (1.2% and 1.1%, respectively). At the same time, it may be estimated that the rate of disability allowance recipients of working age out of all persons of this age (20-64) was slightly lower in 2005 (for both genders)⁴³

It appears that the government employs a slightly higher proportion of persons receiving a general disability allowance

⁴² About 50 thousand are recognized as IDF disable compared to close to 200 thousand who are recognized by the National Insurance Institute.

⁴³ 5.3% according to the ratio between the National Insurance disability allowances recipients (196 thousand including 25 work-disability allowance recipients) in 2005 out of the total population aged 20-64, which amounted in that year to about 3.7 million .

than is customary throughout the private sector, although the rate of employment in the civil service is much lower (a third) than the representation of these persons in the overall working age population. It is emphasized that this comparison is very limited because it does not include persons with disabilities who have not been recognized as such by the National Insurance Institute, which, according to the social survey constitute a majority out of persons with disabilities, as we have seen in previous chapters.

8. Summary and conclusions

In Israel there are currently 1.36 million persons that report on health or physical impairments that challenge their daily functioning, among them more than 600 thousand persons that report these impairments greatly challenge their daily functioning. A majority of them report that they face difficulties in performing simple, basic everyday activities. These persons belong to all population subgroups while higher rates of disability are found among people from the Arab sector, women and new immigrants.

Most disabilities are acquired during one's life. As a result of this and the high rates of disability, it appears obvious that most of us may be expected to cope with a disability of some type during the course of our lives, whether as persons with disabilities by ourselves or as caregivers for a relative with a disability. Today, about a fifth of adult Israelis are already caring for a person with disability, and this rate is expected to increase with the aging of the population. Therefore, this is not just a matter of caring for the wellbeing of others but ensuring the basic rights of each and every citizen.

As to the connection between disability and childhood, it was found that many of the children with disabilities need ongoing care and that a significant gap exists between their needs and the answers provided by society. Concerning persons with disabilities of working age, they were found to constitute an absolute majority among people with disabilities and that the rate of employment is very low among both persons with severe and with moderate disabilities. There are a large proportion of persons in this group seeking jobs without success, to a much greater degree than in the rest of the population. In old age, disability rates increase to very high levels. It is expected that the upcoming aging of the population will lead to a substantive increase in the number of persons with disabilities, and in the proportion of elderly persons among them.

The State provides a variety of answers for the special needs of persons with disabilities. For ensuring their social security, allowances are paid by the National Insurance Institute, Ministry of Finance, and by the rehabilitation division of the Ministry of Defense. In addition, the state provides eligible persons with additional services such as rehabilitation services, assistance in housing, funding for accessories and healthcare services, assistance

for immigrants with disabilities, public transport subsidies, eligibility for parking badges, special education, exemptions from and discounts off municipal and income tax, etc.

Despite all of this, the picture derived from the data shown in this publication indicates a low level of inclusion relative to the entire population. The inclusion of persons with disabilities declines with increasing degree of disability, and the gaps between them and the rest of the population are more evident: persons with disabilities have lower income and education, their economic situation is underprivileged, their employment rates are lower and their housing conditions are not accommodated to their special needs. These gaps intensify with increasing degree of disability.

Persons with disabilities feel more isolated and lonely. They enjoy to a lesser extent from group social activities and go less frequently on vacations. The exposure of persons with disabilities to the digital medium is also lower and decreases with worsening disability. This is compounded by the fact that persons with disabilities tend more than others to have such situations as depression and stress, concentration and sleeping difficulties, and the worse their disability is, the less satisfied they are with their lives and the lower their expectations for the future are.

These findings call for a revision of the answers and solutions given today. There is a need for placing emphasis on human rights respect and on promoting the social and physical accessibility of the society for persons with disabilities. There is a need to improve the capacity and the motivation, since early childhood, of persons with disabilities to integrate and contribute. This has implications not only for the lives of persons with disabilities and their families, but also for the Israeli society as a whole.

9. Bibliography

- The Social Survey, the National Bureau of Statistics, annual survey, statistical analysis, 2002-2005
- “Children with special needs: An Assessment of needs and coverage by services”, JDC – Brookdale Institute –National Insurance Institute, January 2000.
- Statistical Abstract of Israel, Central Bureau of Statistics, selected figures, 2006.
- Children in Israel, Statistical Abstract, the National Council for the Child, selected figures, 2005
- National health survey 2003/2004 – Selected Data , Central Bureau of Statistics – Ministry of Health, June, 2006
- Annual Review, National Insurance Institute, chapter 5, 2005.
- Report to the Commission for Equal Rights given by the Ministry of Defense, 2004.
- Report to the Commission for Equal Rights given by the Ministry of Finance, 2004.
- Report to the Commission for Equal Rights given by the Ministry of Construction and housing, 2004 , 2005
- Report to the Commission for Equal Rights given by the Ministry of Health, 2005.
- Report to the Commission for Equal Rights given by the Ministry of Immigration Absorption, 2004.
- Report to the Commission for Equal Rights given by the Ministry of Welfare, 2004.
- Report to the Commission for Equal Rights given by the Ministry of Transport , 2006.
- “Representation of Persons with Disabilities in the Civil Service” – Ari Paltiel, Central Bureau of Statistics (draft) report filed to the Civil Service Authority and to the Commission for Equal Rights for Persons with Disabilities, May, 2006

