Close the Gap

Excluded by Design: Research on disabled women's employment in Scotland

Summary report

1. Introduction

Disabled women are among the most marginalised groups in the labour market, but their experiences are rarely considered in policymaking or by employers. There is currently a lack of Scottish-specific and UK-level data on disabled women's workplace experiences, and how they engage with the labour market is an under-researched area. The evidence that is available shows that structural inequalities prevent disabled women from getting a job and, when they are employed, progressing in their career. Disabled women experience discrimination because they are disabled, but also because they are women – with racially minoritised disabled women also facing racialised discrimination. This significantly impacts how they engage with the workplace, while also putting them at increased risk of poverty and negatively affecting their wellbeing.

2. The policy context

Disabled women's labour market participation sits at the intersection of multiple policy frameworks on disability equality, the gender pay gap, fair work, employability, and the economy. A critical gap across these frameworks is the lack of meaningful intersectional analysis that recognises how disability and gender, and other oppressions such as racism, overlap and compound to create distinct inequalities for disabled women. Policies focused on disability equality, tackling the gender pay gap, and enabling fair work, often operate in silos, failing to address the compounded discrimination disabled women experience.

Recent data on economic inactivity has shown that ill health has become the top reason for women being economically inactive, now surpassing

caring responsibilities for the first time. This is against the backdrop of UK Government proposals to cut disability benefits and reduce Access to Work support, which many rely on. Evidence shows that many disabled people want to work but are prevented from doing so by structural barriers to the workplace, which drives the disability employment gap and contributes to disabled people's higher levels of poverty.

There is recognition of disability as a driver of poverty by Scottish Government, but policy responses on tackling child poverty lack meaningful intersectional and gender analysis. There is a Scottish Government commitment to halve the disability employment gap by 2038. However, critical system influencers such as employability and flagship policies such as fair work do not include actions to address the intersecting barriers disabled women face.

Despite policy commitments at both Scottish- and UK-levels, and legal provisions to create more equality for disabled people in the workplace, employer practice often falls short. Employer understanding of disability and the legal responsibilities around this are poor, with implementation gaps and weak enforcement widespread. The reasonable adjustments framework places the burden on disabled women to disclose their impairments, articulate their needs, and advocate for support. This reactive, individualised approach fails to address structural barriers. Commitments by both Scottish and UK Governments to require employers to publish disability pay gaps are important, but evidence shows that reporting alone does not drive change. Mandatory action plans, which centre intersectional analysis, are a necessary step to achieve workplace transformation for disabled women.

The absence of comprehensive intersectional data on disabled women's experiences hinders effective policymaking and employer action. These data gaps are not neutral as they render disabled women's lives invisible in policymaking and employer practice, making it easier for structural inequalities to go unchallenged. Addressing these data gaps must be a

priority for Scottish and UK Governments. Equally as important is the need to build gender and disability competence and the ability to do intersectional analysis in policymaking. Existing policy commitments remain fragmented, under-resourced, and weakly implemented. These shortcomings matter. Without targeted action, disabled women will continue to be excluded from fair and sustainable work, thereby deepening poverty, widening inequalities, and weakening Scotland's economy.

3. What existing evidence tells us

Disabled women face a range of barriers to accessing and progressing in good-quality jobs. This includes discrimination in recruitment, inaccessible workplaces, inflexible jobs, lack of employer awareness of disability and reasonable adjustments, and inadequate support services – particularly severe delays in Access to Work. This is compounded by unequal caring responsibilities and low pay due to occupational segregation. This contributes to their exclusion from the labour market, and increased risk of poverty and violence against women (VAW).

There is a rising number of disabled people living and working in Scotland, with women more likely to be disabled than men, and disabled women more reliant on social care support. Recent figures show that the employment rate for disabled people in Scotland was 51% compared to 83% for non-disabled people, representing a disability employment gap of 29 percentage points. There are also significant pay gaps for disabled women, whose average hourly pay is less than non-disabled men (23.2% gap), non-disabled women (9.6% gap) and disabled men (9.0% gap). A key driver of this is acute and chronic occupational segregation, with more than 40% of disabled women working in health, social care, or education, in jobs which are often low paid and undervalued and offer limited career progression.

The economic inactivity rate for women aged 16 to 64 in Scotland in

April 2024 to March 2025 was 26.4% compared with 20.3% for men. Just over a third (34.6%) reported this was because of being 'long-term sick or disabled', the highest proportion since the time series began in 2004-2005. The main reason for women being economically inactive has historically been 'looking after family/home' - in other words, caring responsibilities - which reflects entrenched gendered patterns of unpaid care. However, in recent years, being long-term sick or disabled is now the most attributed reason for women being economically inactive. More research is needed to understand the reasons for this. However, strong correlations exist between unpaid caring and poor health, and between inactivity due to poor health and previous low pay, with women overrepresented in both groups.

Disabled women are more likely than other groups to be in insecure work, including on zero-hours contracts, which often exclude access to statutory sick pay and maternity pay - critical protections for disabled women. Flexible and part-time work are particularly important for disabled women, many of whom need to work flexibly to manage health needs and, for some, also caring responsibilities. However, part-time work is often low paid and concentrated in undervalued sectors, reinforcing the cycle of in-work poverty.

Poverty disproportionately affects disabled women and their children. Across the UK, official statistics show that 35% experience poverty compared with 17% of non-disabled women. However, this does not account for the higher living costs associated with disability, estimated at £1,095 extra per month. When this is taken into account, it is estimated that the rate of poverty for disabled women is closer to 50%.

The compounding inequalities disabled women experience, such as the greater likelihood of them experiencing poverty and having less access to power and resources, means that they are at higher risk of being affected by violence against women. This further limits their ability to participate in the labour market and progress in their career. Two-thirds of disabled

women report experiencing sexual harassment at work and many report lasting mental health impacts or leaving their jobs as a result. The intersection of disability, gender, and economic dependence heightens vulnerability to domestic abuse, particularly where the perpetrator is also a carer.

The existing evidence shows that disabled women's inequality and disadvantage is systemic, spanning all facets of labour market participation. These inequalities are intensified by gendered caring responsibilities, higher rates of poverty, and VAW. Disabled women's lower earnings, overrepresentation in part-time and low-paid roles, and economic inactivity reflects a labour market that continues to exclude them, and undervalue their skills. The lack of intersectional policy responses exacerbates and cements these systemic inequalities further.

4. Methodology

This Close the Gap research investigates the employment experiences of disabled women in Scotland. Following a literature review and two exploratory focus groups (n=18) to identify key themes, a mixed methods approach was used which involved interviews (n=12), a focus group (n=4) and an online survey (n=894). Recruitment for the research targeted disabled women and women with long-term health conditions, recognising that not all women will identify as being disabled. Efforts were made to recruit women with a range of conditions and impairments, and from different labour market sectors to try to capture the breadth of experiences disabled women have. The focus group was specifically for racially minoritised disabled women to better understand how their experiences of disability and gender were impacted by race. The interviews and focus groups were conducted by disabled women researchers, and the survey analysis and initial final report was developed by Manchester Metropolitan University. The research provides rich insights into the barriers disabled women face in accessing, sustaining, and progressing in employment.

5. Key findings

Access to employment

Health and caring responsibilities were the most cited reasons for not being in employment. Many respondents were unable to work consistently due lack of support, particularly around fluctuating health. Employability programmes were under-used, often due to poor health, lack of awareness, or perceived irrelevance to respondents' level of skill and experience.

Recruitment barriers

Around a quarter of survey respondents reported discrimination during recruitment, and just under a third said they had found it difficult to navigate a recruitment process. This increased to two-thirds for neurodivergent women who cited inaccessible formats and unclear communication. Racially minoritised women were also more likely to report these barriers. Anxieties around disclosing conditions/ impairments during the recruitment process was also a theme because of a fear of discrimination.

Reasonable adjustments

Lack of line manager awareness of legal responsibilities was a common theme. Only a third of survey respondents had reasonable adjustments implemented immediately by their employer while nearly one in five never received them. Supportive line management was a critical factor. Respondents in 'high support' workplaces were more confident and encountered less doubt or questioning of their access needs. A 'hierarchy of impairment' was evident, with mental health needs and neurodivergence less likely to be accommodated by employers. Participants highlighted a range of challenges when moving to a new employer or getting a new line manager, including: fear of being seen as the 'demanding employee'; power differentials, with more senior or established employees better positioned to advocate for their adjustments; employer concerns about the cost of adjustments and

lengthy wait times; and the onus being on the employee due to a lack of employer understanding and support.

Line manager and colleague support

Line managers are key to whether disabled women have a positive or negative experience. Women with a 'high support' workplace were more likely to feel confident asking for new reasonable adjustments, and more likely to have flexible, compassionate, and proactive support. Those in 'low support' workplaces were more likely to have negative experiences such as not having access needs met and not feeling supported. Those with physical health conditions were more likely than those without to be in a 'high support' workplace, while neurodivergent women were more likely to be in a 'low' or 'medium support' workplace.

Flexible working

While many had access to flexible working, availability varied by occupation. Women in low-paid caring and service jobs had the least access, which was a particular challenge due to their physically demanding roles. Remote work and adaptable schedules were seen as essential for meeting health needs, supporting wellbeing, and balancing caring responsibilities. Some expressed anxiety about the potential withdrawal of flexible working arrangements when managers failed to understand their ongoing importance.

Training and progression

Participation in training was limited by the lack of adjustments available. Lack of funding, encouragement and support in meeting access needs were highlighted as key barriers to training and development opportunities. Only 17% of the survey sample felt they had clear progression opportunities, with more than half saying they felt their non-disabled colleagues had more opportunities than them. The risk of losing workplace adjustments created a barrier to promotion for many.

Employment histories and career journeys

In the interviews, women highlighted the intersecting inequalities they faced from education to retirement. This included early education experiences which undermined confidence, with some being pressured into unsuitable career paths due to low expectations and lack of support. These early challenges often had long-lasting effects on self-esteem and career decisions. A recurring theme was taking jobs out of survival rather than choice, often in precarious or low-paid work. Racially minoritised participants described encountering multiple forms of discrimination which limited their access to meaningful employment and advancement.

Workplace culture

Many survey respondents felt judged by colleagues and managers, leading to the undervaluing of women's skills and pressure to overperform. Over 80% of respondents with multiple conditions reported feeling they had to work harder to prove themselves, highlighting the extra scrutiny placed on them. More than half had had their performance questioned at work, with women experiencing both formal and informal performance management.

Mental and physical harm

Experiencing mental and physical harm was a key theme in the exploratory focus groups, and almost three-quarters (73%) of the survey respondents experienced physical or mental harm at work. This was caused by not having reasonable adjustments in place, or having to fight for adjustments, harm caused by organisational barriers, processes, and procedures; and harm related to the need to overperform or work longer and/or harder. Racially minoritised women were more likely to feel this way. 44% of survey respondents reported that they had experienced bullying or harassment, and most (83%) felt that this had either worsened their health and/or resulted in them acquiring additional health problems. Only 57% of these women reported the bullying or harassment to their employer, and most were dissatisfied with how it was handled.

Violence against women

For the purposes of the survey, VAW included sexual harassment, domestic abuse, rape or sexual assault, stalking, and 'honour-based' abuse. The majority (59%) reported that they had experienced a form of VAW either at work or outwith the workplace, the most common experience being sexual harassment. Women with mental health conditions and neurodivergent women were more likely to have experienced VAW. Only 11% reported it to their employer. The survey participants who had experienced VAW were also significantly more likely (62%) to have had their performance questioned at work compared to those who had not experienced VAW (36%).

The findings of this research reveal the depth of inequality that disabled women face in Scotland's labour market, and the urgent need for systemic change. Policy failings, poor employer practice, and weak accountability have allowed discrimination to persist unchecked. The recommendations that follow set out what must change so that disabled women can access, sustain, and progress in good-quality work.

6. Recommendations

Recommendations for policymakers

Scottish Government should:

1. Centre disabled women in the new Child Poverty Delivery Plan, and design and implement targeted interventions that will reduce the higher level of poverty disabled women and their children face.

2. Design and deliver tailored employability support for disabled women that is accessible, flexible, appropriate to skill level, and that proactively challenges occupational segregation and provides good-quality employment opportunities.

3. Use regulation 11 of the Public Sector Equality Duty to direct public bodies to develop equality outcomes to tackle the causes of disabled women's inequality in the workplace.

4. Improve the range of intersectional data to better understand and reflect disabled women's experiences of employment, upskilling and reskilling, employability programmes, childcare and social care, education, and self-employment.

5. Prioritise fair work for disabled women in the delivery of the Fair Work Action Plan, and ensure that the inequalities they face in employment are core to future fair work policy.

6. Ensure that work on addressing economic inactivity is gender and disability competent and recognises disabled women's experiences of ill health and caring, and design targeted action to tackle the barriers they face in entering and sustaining employment.

7. Redesign employment injuries assistance, centring disabled women's experiences of workplace injury, illness and disease, and ensure that they can access the support they need to stay in, or return to, work.

8. Deliver a programme of training to build disability and gender competence in Scottish Government policy officials and analysts to ensure that disabled women's experiences are core to policymaking.

9. Ensure that the next phase of the Women's Health Plan prioritises the needs of disabled women so that they can access high-quality healthcare services when needed, including mental health support and public health screening, to enable them to participate in the labour market.

10. Set out a clear timeline for implementing the commitment to scrap non-residential social care charges.

UK Government should:

1. Reverse all planned cuts to the Access to Work programme, and take immediate action to address the backlog and fast track urgent cases.

2. Invest in reform of Access to Work processes, co-designed with disabled people and key stakeholders, which recognises the diversity of the modern labour market, including hybrid working and freelance work.

3. Introduce mandatory disability pay gap action plans for employers, with a requirement to report on progress, to drive employer action beyond reporting data.

4. Strengthen employer accountability on reasonable adjustments by requiring employers to notify employees of a decision on reasonable adjustment within two weeks of an application. Adjustments could include providing flexible working, giving written rather than verbal instructions, and installing assistive software.

Recommendations for employers

1. Work with trade unions to review employment policy and practice around disabled women's experiences to identify where barriers are preventing them from accessing, and progressing in, the workplace.

2. Build capacity in senior leaders, HR, and line managers on the intersection of disability and gender, key considerations for different conditions and impairments, and on the specific barriers disabled women face in accessing, and progressing in, work.

3. Ensure senior leaders visibly foster workplace culture that builds trust with disabled women staff, challenges stigma, and demonstrates that disability is a priority for the organisation.

4. Develop accessible recruitment practice including training for hiring managers on inclusive, accessible interviews, providing clear communication and advance access to interview questions, and giving constructive feedback to unsuccessful applicants.

5. Develop accessible and inclusive career development planning for disabled women staff to support their progression.

6. Work with disabled people's organisations and specialists on disability equality to provide training for line managers on providing reasonable adjustments.

7. Introduce a reasonable adjustments passport to ensure that disabled women have consistent access to the support they need in the organisation.

8. Record disability-related sick leave separately from other sick leave to avoid triggering absence management processes which disproportionately affect disabled women who may have a higher level of absence because of their impairment.

9. Review formal and informal performance management practice to identify where disabled women may be disproportionately and unfairly affected.

10. Gather and analyse intersectional data on performance management, disciplinaries, and VAW to identify patterns in disabled women's experiences.

11. Review bullying and harassment policies to include specific information and provisions on sexual harassment, and disability-related bullying and harassment, and seek views from disabled women staff on the effectiveness of the complaint reporting system.

12. Embed anti-racism practice across all disability and gender equality measures to ensure the overlapping impact of racism, sexism, and disability discrimination is recognised and racially minoritised disabled women are not left behind.

13. Provide flexible working at all levels to support disabled women to do their job well and to manage their health and any caring roles they have, and ensure that availability of flexible working is included in job adverts.

14. Have a ‘default yes’ approach to flexible working requests to accommodate disabled women’s needs, including providing remote and hybrid working as a reasonable adjustment.

15. Provide accessible, flexible training and development including remote, part-time, or self-paced learning to allow disabled women to upskill and progress.

16. Line managers should ensure that communication with direct reports is clear and concise, and agree with neurodivergent employees how best to communicate and work together.

17. Recognise that menopause symptoms can meet the legal definition of disability, and can also exacerbate existing conditions/impairments, therefore workplace menopause support should be disability competent.

18. Join the Equally Safe at Work[1] community of practice to build knowledge and practice on supporting disabled women who are victim-survivors of VAW.

19. Use Close the Gap’s Think Business, Think Equality[2] resource to get a tailored action plan that will help tackle the inequalities disabled women face in the organisation.

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[1] Equally Safe at Work is Close the Gap’s employer accreditation programme. It is designed to enable employers to develop improved gender-competent employment practice and prevent violence against women and girls (VAWG). See www.equallysafeatwork.scot

[2] Close the Gap’s Think Business, Think Equality is an online self-assessment resource that enables smaller employers to identify and tackle the causes of women’s workplace inequality in their organisation. See www.thinkbusinessthinkequality.org.uk

Recommendations for trade unions

1. Build capacity in trade union reps on disabled women workers' experiences and rights, and on securing reasonable adjustments.

2. Prioritise disabled women's workplace equality in the bargaining agenda, and work with employers to review policies and practice including flexible working, performance management, reasonable adjustments, development, and sexual harassment.

3. Work with employers to ensure disabled women's needs are centred in both gender pay gap and disability pay gap reporting and related action plans.

4. Make achieving accessible workplace environments, policies, and communications a trade union priority, and hold employers to account for meeting accessibility standards.

5. Trades councils should enable disabled women members' activism by making reasonable adjustments.

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Close the Gap works in Scotland on women's labour market participation. We work with policymakers, employers and unions to influence and enable action that will address the causes of women's inequality at work.

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