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Inactivity Among Prime Age Men in the UK

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Abstract

Inactivity rates among prime-age men in the UK have risen by at least five times since the early 1970s whereas unemployment rates are much the same. Furthermore, inactivity is strongly concentrated among the unskilled and those suffering from a limiting long-term illness or disability. In our analysis of inactivity rates by region and age group we find that male inactivity responds negatively to variations in the wages of low level occupations and positively to fluctuations in incapacity benefit.

Keywords: inactivity, disability

JEL Classification Codes: J60

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1 Introduction

It is no surprise that there are more inactive people of working age in the UK than there are unemployed people. Inactive individuals are those without work who are not looking for a job and they usually fall into one of four categories; full-time students, looking after family, sick or disabled, early retired. So thinking of all the students, carers, housewives, early retired and so on, the fact that there are more of these than the unemployed seems fairly reasonable. What is, perhaps, more surprising is that there are more inactive men between the ages of 25 and 54 (prime-age) than there are unemployed prime-age men. The surprise arises from the fact that many would judge it to be most unusual for a prime-age man to figure in any of the four categories noted above. In fact, however, there are around twice as many inactive prime-age men today as there are unemployed prime-age men and most of them are sick or disabled. This contrasts with the 1970s, when the numbers were the other way around, that is twice as many unemployed as inactive.

Our purpose here is to shed some light on this picture and to see the extent to which inactivity rates respond to incentives in the form of fluctuations in available wages and benefits. In the next section of the paper we present a brief picture of UK prime-age male inactivity since the 1970s and then in Section 3 we consider how shifts in the pattern of labour demand by skill and changes in the invalidity benefit system have contributed to changes in inactivity. In Section 4 we analyse the relationship between prime age male inactivity rates and both wages and benefits and conclude with a summary of our findings.

2 A Picture of UK Male Inactivity

One of the most dramatic changes in the UK labour market since the 1970s has been the huge rise in the numbers of inactive prime-age men. So whereas unemployment rates among such men are now much the same as in the 1970s, their inactivity rates are many times higher (see Table 1). Furthermore, prime-age inactivity has been rising steadily since the 1970s and continued to rise in the 1990s at a time when the UK labour market was apparently increasingly buoyant.

2.1 Inactivity and Skills

Given the shift in the demand for labour against the unskilled since 1980 (see Nickell and Bell, 1995, for example), we might expect bigger increases in inactivity among the unskilled. As we can see from Table 2, this is exactly what has happened. So while back in the 1970s, the differences between the unskilled and the rest were minimal, by the late 1990s, inactivity rates among the unskilled were three or four times those among the remainder. This rise in inactivity among the low skilled has contributed between 50 to 70 per cent of the overall rise in inactivity among prime-age men¹. Indeed, using LFS definitions, since the early 1980s there has been no increase in prime-age inactivity among those outside the bottom skill quartile.

One of the interesting features of the UK labour market in the 1990s is the reduction in the regional dispersion of unemployment relative to the situation in previous decades (Jackman and Savouri, 1999, for example). So is this some pattern to be found when looking at inactivity rates? The simple answer is no. In Table 3, we see that male inactivity rates in the low employment regions continue to rise more rapidly in the 1990s than those in the high employment regions, just as they had in the 1980s. So once we take inactivity into account, the North-South divide is as wide as ever.

2.2 Inactivity and Disability

Prime-age men who are inactive report themselves as being in one of four major categories, namely, full-time student; looking after family; early retired; sick or disabled. Around 70 per cent say they are inactive because of sickness or disability. So disability is a key factor in understanding the rise in male inactivity. In Table 4, we see that some 16 per cent of prime-age men report themselves as having a limiting long-standing illness (LLSI) and around 14 per cent report a limiting health problem or disability (LHPD). These two categories appear to be systematically different, because of the distinct definitions. In the case of LLSI, the illness limits "things people normally do" whereas in LHPD, the illness limits "the kind of work the person does". The former is apparently a slightly broader category, at least among the prime-aged, with systematically bigger numbers.

Two key facts emerge from Table 4 concerning the incidence of chronic illness. First, the proportion reporting an LLSI has barely risen since the late 1970s. Second, by contrast, the numbers reporting an LHPD have risen systematically throughout the 1980s and 1990s. These different patterns may perhaps

arise because LLSI is less responsive to a decline in labour demand than LHPD, which refers directly to work. Either way, the proportionate rise in illness or disability in the 1980s and 90s is smaller than the rise in inactivity.

As we have already noted, around 70% of inactive prime-age men report sickness or disability as the reason for their inactivity. Unsurprisingly, this is consistent with around 71 to 75% of this same group reporting an LLSI or an LHPD. So, in the light of this, is the typical prime-age man with an LLSI or an LHPD inactive? The answer is no. As we can see from Table 4, the majority of those with a limiting illness or disability are economically active. However, whereas in the 1970s a mere 10 per cent of this group were inactive, by the late 1990s this number had risen to around 35% (LLSI) or 43% (LHPD). Among those without an LLSI, inactivity has also risen, but since the early 1980s, there has been no rise in inactivity among those without an LHPD. These numbers imply that most of the rise in prime-age male inactivity since the 1970s can be accounted for by rising inactivity among the increasing numbers with chronic illness or disability².

In Tables 5 and 6, we consider further interactions, particularly between disability and skills. Looking first at the rise in chronic illness, we see in Table 5 that this increase is concentrated in the bottom skill quartile and is markedly bigger in the low employment region. By contrast, outside the bottom skill quartile there is very little rise in the incidence of chronic illness in either low or high employment regions. Turning to the inactivity rates among those with chronic ill-health, these have risen significantly in all groups but particularly among those in the bottom skill quartile. Indeed by the late 1990s, inactivity in this group exceeded 50 per cent in the low employment region. This completes the picture of patterns of prime-age male inactivity since the 1970s (see Faggio and Nickell, 2003, for more detail). The next step is try and explain what is going on.

3 Shifts in Demand and the Benefit System

A fundamental change in the UK labour market since the mid-1970s has been the dramatic weakening of the market for unskilled labour. Throughout the 1980s and into the 1990s, there has been a strong shift in demand in favour of skilled workers and against unskilled workers in the UK. This change came about because of the rapid expansion in the production and export of low-skill intensive goods by developing countries (Wood 1994) and because technical change has been biased in favour of the skills

(Berman et al., 1998). The consensus view is that the latter effect is dominant (Machin et al., 1999).

At the same time as this shift in demand, the UK has seen a shift in supply in the same direction, so there are more skilled and fewer unskilled workers in the population of working age. Unfortunately for the unskilled, the shift in demand outpaced the shift in supply (Nickell and Layard, 1999). On top of this, the UK had a particularly large group of very unskilled workers in the first place, relative to the rest of Northern Europe³.

This weakening of demand among the low skilled impacts on low skill workers in two ways, first by reducing their relative wages and second by reducing the number of available vacancies. How will this influence inactivity rates? Inactivity is the alternative to labour market participation and it is a particularly relevant alternative for those suffering an actual or "potential" chronic illness⁴ or disability. Such individuals who find themselves without work or have work options which are very badly paid will tend, one way or another, to move into a life on invalidity benefit (IVB, now incapacity benefit). The mechanisms are various. For example, in the 1980s, some individuals who were hard to place in work were advised by the Employment Service to claim IVB (National Audit Office, 1989). In the early 1990s, it was found that doctors, whose certification was required for IVB entitlement, were influenced by their assessment of the probability of patients finding a job (Ritchie et al., 1993).

The level of available benefits will also tend to be a significant factor in the whole process. In Figure 1, we see that there was a dramatic rise in IVB relative to the long-term unemployment benefit, available to those who remain the labour force, from the mid-1980s to April 1995. Prior to this date, invalidity benefits had two components, a basic benefit and an earnings-related additional pension, based on earnings in the tax years from 1978/9. On top of this, there was an age-related addition, which was higher for those who became sick at a young age. All this was simplified after April 1995, when the additional pension was eliminated. As we can see from Figure 1, this generated a dramatic shift in IVB whose size varies significantly across age groups. This variation suggests there is some potential for identifying the supply side impact of IVB on inactivity.

Once in the IVB system, the pressure to take up work is minimal. For example, Beatty and Fothergill (1999) report that in their survey of working-age men who had not worked for six months, only 5 per cent of those reporting themselves as long-term sick were looking for a job. Given all the factors described above, it is not surprising that the number of prime age men on IVB more than

doubled from the early 1980s to the mid-1990s⁵.

This discussion suggests that variations in the prime-age male inactivity rate will depend on variations in invalidity benefits and other benefits of inactivity relative to earnings, particularly low-skill earnings, and, possibly, on direct measures of labour demand. To pursue this further, there are, in the UK, some major relative variations in IVB by age group and over time as we saw in Fig.1. This suggests that using age group/time cells as the unit of observation we may be able to identify benefit effects on inactivity. As it happens, there are also some significant variations in the wages of each occupation group by region and over time. That is, the time series patterns of regional wages relative to the national averages differ significantly within broad occupation groups. Since benefits exhibit no regional variation, we may use region/time cells as the unit of observation to identify the impact of available wages on inactivity. We can also investigate the direct impact of labour demand, using vacancy rates, because their time series patterns also vary significantly across regions. Of course, it would be good strategy to use age group/region/time cells as the basic units of observation but given the sample sizes available in our surveys, the sizes of these cells would be too small. The next step, therefore, is to describe the data and empirical results.

3.1 Data and Results

In the previous section, we suggest two basic empirical models worth investigating. First, we set these out in some detail and then we present the results.

3.2 The Regional Model

Using the standard British regions, we use a number of surveys to construct the data which allow us to estimate equations of the following type⁶,

$$\begin{aligned}
 ia_{rt} = & \alpha_r + \alpha_t + \sum_j \beta_j \ln(w_{rtj}/w_{tj}) + \sum_k \gamma_k ed_{krt} \\
 & + \sum_i \varsigma_i d_{irt} + \omega (sick)_{rt} + \epsilon_{rt}
 \end{aligned} \tag{1}$$

- $r =$ region, $t =$ time
- $ia =$ prime age male inactivity rate. LF definition. (LFS, GHS) (See Table 1)
- $\alpha_r =$ region dummies, $\alpha_t =$ time dummies
- $w_{rtj} =$ basic hourly wage rate in region r , occupation level j , time t . (New Earnings Survey, NES)
- $w_{tj} =$ aggregate average basic hourly wage rate in occupation level j , time t (NES)
- $ed_{krt} =$ proportion of prime age men with qualification k in region r at time t (LFS, GHS)
- $sick_{rt} =$ proportion of prime age men with an LLSI in region r at time t (GHS)
- $d_{1rt} =$ registered vacancy rate in region r at time t (Regional Trends)
- $d_{2rt} = \frac{1}{3} \sum_{\ell=0}^2 \frac{\Phi N_{rti, \ell}}{(N_{rti, \ell} + N_{rti, \ell+1})/2}$, where N_r is employment in region r (NES)

The idea here is that inactivity rates are influenced by pecuniary incentives, as embodied in the wage⁷, as well as possibly by direct measures of the demand for labour. Of course, benefits are also an important part of the pecuniary incentives, but these are captured by the time dummies. Direct measures of the demand for labour include the vacancy rate, a stock measure, and the proportional change in employment, averaged over three years, a flow measure. In addition, we include education levels and sickness rates as controls.

We do not simply investigate equation (1) but we also split the sample of prime age men into those who are long-term sick or disabled and the remainder, who we describe as "the well". We then analyse inactivity rates among these two sub-groups.

3.3 The Age Group Model

Using nine age groups, we utilise surveys to generate the data allowing us to analyse equations of the form,

$$ia_{at} = \alpha_a + \alpha_t + \beta \ln(b/w)_{at} + \epsilon_{at} \quad (2)$$

$a =$ age group [(20-24),(25-29),(30-34),(35-39),(40-44),(45-49),(50-54),(55-59),(60-64)]

$\alpha_a =$ age group dummies, $\alpha_t =$ time dummies

$b_{at} =$ weekly benefit paid to long-term sick or disabled with contributory benefit entitlement, age-group, a , time, t . (UK Dept of Work and Pensions)

$w_{at} =$ basic hourly wage rate, age-group, a , time, t (NES)

The general idea is to capture the impact of benefits on inactivity by making use of the large differential exogenous shifts in benefits across age groups over time. The use of age group dummies and time dummies makes the structure of (2) equivalent to a difference in differences specification which others have used in this same context (see, for example, Gruber, 2000)⁸. In addition to the basic model described in (2), we also analyse the same model applied only to the bottom education group (those without qualifications).

3.4 The Results

The results for the regional model are presented in Table 7. In the first column, we see OLS estimates of equation (1). This is a somewhat restricted version of the general equation described in the text. The relative wage term for the high occupation group and the variables capturing education levels below high are all completely insignificant and are simply dropped.

The first point to note is that the labour demand variables, namely the vacancy rate and the proportional changes in employment, have a strong positive impact on inactivity. This is completely inconsistent with the idea that there is a strong negative direct effect of labour market buoyancy on inactivity rates. Replacing the vacancy rates by local unemployment rates and restricting proportional changes in employment to the production sector does not help at all, the coefficients remain "wrongly" signed and often significant. These results are particularly interesting in the light of both the positive cross-section regional correlation between inactivity and unemployment rates and the popular view that surges in inactivity follow periods of recession. However, our results suggest that this is not the correct way of thinking, something that was also suggested by the rise in prime-age male inactivity during the buoyant labour market of the mid to late 1990s.

So how should we interpret our result which suggests that rises in vacancy rates are associated with increases in inactivity rates? The obvious interpretation is one of reverse causality, so that increased inactivity reflects reduced labour supply and more unfilled vacancies. In the light of this, these demand

terms have no place in models to explain inactivity, so in the second column in Table 7, we simply drop them. Turning to the second important point, we see a strong negative wage effect on inactivity. The question here is whether or not we have correctly identified the labour supply impact of wages. This would be the case if relative wage movements across regions within low level occupations are primarily driven by labour demand shifts. To check on this we repeat the exercise using an IV estimator. The instruments are described in detail in the Notes to Table 7. These are constructed by taking the initial industrial composition of each region and constructing a regional demand index by taking aggregate industry employment shares at each time period and weighting these by the initial industrial composition in each region. So, for example, regions where industry was initially concentrated in sectors which decline over time in aggregate will have low labour demand growth. In column 3, we present the IV results and find that the negative wage effect on inactivity is somewhat larger than in the previous column. This suggests that the OLS coefficient was biased down to some extent. The IV result suggests that a downward shift of 1% in the regional wage relative to the national average within low level occupations induces a rise of 0.23 percentage points in the overall regional inactivity rate.

When we separate the sample into the long-term sick and the long-term well, we see immediately that the wage effect on the inactivity rate is very much larger for the long-term sick, around four times as large as the overall effect in column 3.

Turning now to the age-group model, the results are presented in Table 8. These indicate that fluctuations in incapacity benefit have a significant impact on overall male inactivity rates and a much bigger impact on the inactivity rates of those without qualifications. For example, if incapacity benefits are raised by 20 per cent, we can expect overall male inactivity rates to go up by around 0.7 percentage points but low skill rates to rise by around 1.8 percentage points. These numbers, while significant, are hardly dramatic but this simply reflects the fact that changes in inactivity depend crucially on how the incapacity benefit system is operated, not simply on how generous it is. Indeed, it may be argued that a generous system which is operated rigorously is superior to a system which is mean but lax.

4 Summary

Inactivity rates among prime-age men in the UK have risen by at least five times since the early 1970s whereas unemployment rates are much the same. Furthermore, inactivity is strongly concentrated

among the unskilled and those suffering from a limiting long-term illness or disability. In our analysis of inactivity rates by region and age group we found that male inactivity responds negatively to variations in the wages of low level occupations and positively to fluctuations in incapacity benefits.

5 Endnotes

1. 50% is the number generated using GHS data, 70% is derived using LFS data, where the definitions are a bit different (see Table 1).
2. To be more precise, around 70% of the rise in prime-age male inactivity since the 1970s can be accounted for by rising inactivity among the increasing numbers with an LLSI and more or less all the rise since the 1980s can be accounted for by rising inactivity among the increasing numbers with an LHPD.
3. The results of the OECD Literacy Survey (OECD 1997) indicate that some 22 per cent of the population of working age in the UK is at the lowest level of literacy (close to illiteracy) compared with around 10 per cent in the typical northern European country (Germany, Netherlands, Sweden).
4. A potential limiting illness or disability may be thought of as one which emerges following job loss, when the individual concerned is diverted into the invalidity benefit system.
5. See Huddleston (2002) for further analysis. In particular, it is worth noting that most of the inactive who are chronically sick or disabled are claiming incapacity benefit (invalidity benefit prior to 1995) and by 2001, over 50 per cent of these claimants were suffering from mental or behavioural disorders (mostly depression) or diseases of the musculoskeletal system (mostly back pain). In 1979 the equivalent proportion was below 25 per cent (UK Social Security Statistics).
6. A full description of the data may be found in the Data Appendix.
7. We might argue that inactivity rates depend on

$$\ln(b_t/w_{rt}) = \ln(b_t/w_t) + \ln(w_{rt}/w_t)$$

Then $\ln(b_t/w_t)$ is absorbed into the time dummies.

8. Bell and Smith (2003) pursue this same line. Unfortunately, as far as we can tell, they use the LF definition of inactivity prior to 1992 and the ILO definition from 1992 on.

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7 Data Appendix

Inactivity Rate: In the regressions these are taken from the GHS (1976, 78, 80) and the LFS (1975, 77, 79, 81, 83-99). They refer to prime age men, using the LF definition (see Table 1).

Wages: These refer to the basic hourly rate of full-time employees, defined as weekly pay minus overtime pay divided by weekly hours minus overtime hours. The regions refer to the ten listed in Table 3 and the age groups cover the nine listed in Table 8 (New Earnings Survey).

Occupation level: There are two used in the regression in Table 7, namely low and high. These are based on the standard occupational classification and are described in detail in Nickell et al. (2002), Table 2. There, four occupation levels are defined. Here we take "low" as the bottom two and "high" as the top two. (New Earnings Survey).

Education: In the regressions we make use of the high education category, those with at least a first degree, and the low education category, those without any qualifications (GHS, LFS).

Sickness/Disability: These are described in detail in Table 4.

Vacancy Rate: Vacancies divided by employment (Regional Trends).

Employment: Employment refers to employees who earn enough to be in the PAYE system (New Earnings Survey).

Benefits: Average weekly amount paid to the long-term sick or disabled if they are entitled to contributory benefit (UK Department of Work and Pensions). Used in Table 8.

Ratio of Sickness to LT Unemployment Benefit: For men entitled to contributory sickness benefit (UK Department of Work and Pensions). Used in Fig.1

Table 1
Inactivity and Unemployment Rates of Prime-Age Men (%), 1972-2002

	Inactivity Rate (%)			Unemployment Rate (%)		
	GHS	LFS	LFS (ILO)	GHS	LFS	LFS(ILO)
1972-76	1.6	1.1		3.4	4.0	
1977-78	2.1	2.0		3.8	4.3	
1979-81	2.6	2.5		5.8	5.7	
1982-86	3.4	4.7		9.1	9.0	
1987-91	4.0	5.7		7.1	7.2	
1992-96	5.9	5.7	6.9	9.7	9.4	8.8
1997-99	7.9	7.2	8.3	5.3	5.9	5.3
2000-01	7.9	7.4	8.5	3.5	4.7	4.2
2002-03		7.3	8.4		4.6	4.1

Notes

(i) GHS is the General Household Survey, LFS is the Labour Force Survey.

(ii) Data are available as follows: GHS, 72-96, 98, 2000, 01. LFS, 75, 77, 79, 81, 83-2003. LFS (ILO), 92-2003.

(iii) The inactive are those who are not working and not unemployed. LF unemployed are those without a job who are (a) looking for work in the reference week or (b) prevented from seeking work by temporary sickness or holiday or (c) waiting to start a job or (d) waiting for the results of a job application. ILO unemployed are those without a job who are available to start work in two weeks and (a) have looked for work in the previous four weeks or (b) are waiting to start a job.

(iv) The GHS uses the LF definition up to 1996, the ILO definition in 98, 2000, 01. The LFS series uses the LF definition. The LFS (ILO) series uses the ILO definition.

Table 2
Inactivity Rates for Prime-Age Men in and outside the Bottom Skill Quartile (%), 1972-2002

	GHS		LFS	
	BSQ	NBSQ	BSQ	NBSQ
1972-76	2.2	1.4		
1977-78	2.9	1.8		
1979-81	3.5	2.3	4.3	1.9
1982-86	5.8	2.6	7.4	3.8
1987-91	8.1	2.6	9.6	4.4
1992-96	11.7	4.0	13.4	3.1
1997-99	15.4	5.6	17.7	3.7
2000-01	15.6	5.1	18.1	3.8
2002-03			18.0	3.6

Notes

(i) As in Table 1.

(ii) BSQ (the bottom skill quartile) is based on educational qualifications. Until the early 1990s, those in the bottom skill quartile are a subset of those without qualifications. So the BSQ numbers refer to the mean for those with no qualifications. Later, those without qualifications are less than 25 per cent of prime age men. So the bottom quartile also includes some proportion of the next education group, ie. those with some GCSEs. So now the BSQ numbers refer to a suitably weighted average of those without qualifications and those in the next education group. NBSQ represents those outside the bottom skill quartile.

Table 3

Inactivity Rates for Prime-Age Men by Region (%)

Regions	Low Employment		High Employment	
	GHS	LFS	GHS	LFS
1972-76	2.1	1.3	1.2	0.9
1977-78	2.9	2.5	1.5	1.7
1979-81	3.4	3.3	2.0	1.9
1982-86	4.5	5.9	2.7	3.9
1987-91	5.7	7.1	3.0	4.8
1992-96	8.0	7.6	4.5	4.4
1997-99	10.3	9.3	6.2	5.8
2000-01	10.2	9.3	6.5	6.2
2002-03		9.2		6.2

Notes

(i) As in Table 1.

(ii) Low employment regions are North, Yorkshire/Humberside, North West, Wales, Scotland. High employment regions are East Midlands, West Midlands, East Anglia, South East, South West.

Table 4
Percentage of Prime-Age Men Affected by Chronic Illness and their Inactivity Rates

	Chronic Illness (%)		Inactivity Rates (%)			
	LLSI	LHPD	With		Without	
	LLSI	LHPD	LLSI	LHPD	LLSI	LHPD
1972-76	11.2		10.0		0.4	
1979-81	14.7		11.9		0.7	
1982-86	14.0	8.7	15.9	28.8	1.2	1.9
1987-91	14.8	10.4	19.2	28.5	1.3	1.5
1992-96	16.2	12.2	26.3	36.3	1.8	1.5
1997-99	16.6	12.6	33.8	43.1	2.8	1.9
2000-01	14.8	14.0	34.2	41.8	3.1	2.0
2002-03		13.5		41.2		2.3

Notes

(i) As in Table 1.

(ii) LLSI refers to a limiting long-standing illness. This is reported in the GHS, where people are asked if they suffer from a long-standing illness which limits things which they would normally do. LHPD refers to a limiting health problem or disability. This is reported in the LFS and refers to a health problem or disability which affects the kind of work the person does.

(iii) The GHS failed to ask a consistent question of this type in 1977-78. The LFS question was changed in 1997 and we have made a slight adjustment to the data post-1997 to generate a consistent series.

Table 5

Percentage of Prime-Age Men Affected by Chronic Illness

	Men in the Bottom Skill Quartile				Men outside the Bottom Skill Quartile			
	High Employment Region		Low Employment Region		High Employment Region		Low Employment Region	
	LLSI	LHPD	LLSI	LHPD	LLSI	LHPD	LLSI	LHPD
1972-76	12.5		14.6		10.1		11.5	
1979-81	16.9		19.7		13.1		14.2	
1982-86	17.1	11.2	20.0	11.4	11.8	7.1	13.5	9.1
1987-91	17.7	15.3	23.1	20.5	12.2	7.1	14.3	9.4
1992-96	21.3	20.5	26.6	26.3	13.1	7.8	14.8	10.4
1997-99	21.3	23.1	26.6	28.4	14.4	7.7	14.4	10.3
2000-01	18.3	24.5	30.0	29.0	11.3	8.5	13.5	11.6
2002-03		23.7		27.6		8.3		11.2

See notes to previous tables for definitions and sources.

Table 6
Inactivity Rates of Prime-Age Men by Various Categories (%)

	Men in the Bottom Skill Quartile				Men outside the Bottom Skill Quartile			
	High Employment Region		Low Employment Region		High Employment Region		Low Employment Region	
	LLSI	LHPD	LLSI	LHPD	LLSI	LHPD	LLSI	LHPD
1972-76	9.8		17.2		7.0		11.3	
1979-81	11.0		22.6		7.4		14.3	
1982-86	17.9	25.2	28.6	42.9	9.6	22.5	18.7	33.1
1987-91	23.3	30.9	38.9	48.3	10.8	18.3	21.3	32.3
1992-96	29.7	41.3	51.0	55.1	16.32	26.2	29.2	40.0
1997-99	41.0	51.3	54.8	64.5	24.7	32.3	36.7	45.5
2000-01	42.1	51.4	54.5	64.3	25.0	31.7	35.1	42.5
2002-03		51.4		63.3		31.4		41.8

See notes to previous tables for definitions and sources.

Table 7
The Impact of Wages on Prime-Age Male Inactivity, 1979-98
Dependent Variable: Inactivity Rate_{rt} (%)

3	All			Long-term sick			Long-term well		
	OLS	OLS	IV	OLS	OLS	IV	OLS	OLS	IV
100ln $\frac{w_{rt}}{w_t}$ (low occ.)	-0.055 (3.3)	-0.095 (6.3)	-0.23 (3.4)	-0.32 (2.2)	-0.48 (4.0)	-0.96 (2.0)	-0.055 (2.8)	-0.050 (3.1)	-0.046 (0.8)
High education _{rt} (%)	-0.13 (2.2)	-0.21 (3.8)	-0.16 (2.1)	0.19 (0.4)	-0.42 (0.9)	-0.13 (0.2)	-0.11 (1.7)	-0.079 (1.4)	-0.10 (1.5)
Long-term sick _{rt} (%)	0.006 (0.3)	0.025 (1.0)	0.028 (0.9)	-	-	-	-	-	-
Vacancy rate _{rt} (%)	0.018 (4.4)	-	-	0.083 (2.3)	-	-	-0.001 (0.2)	-	-
100MA(4 ln N _{rt})	0.059 (1.3)	-	-	-0.046 (0.1)	-	-	0.048 (1.0)	-	-
Region dummies	X	X	X	X	X	X	X	X	X
Year dummies	X	X	X	X	X	X	X	X	X
T	19	21	20	19	21	20	18	19	19
N	10	10	10	10	10	10	10	10	10
$\overline{R^2}$	0.92	0.92	0.87	0.76	0.75	0.73	0.52	0.53	0.52

Notes

i) r refers to region, t refers to time, t ratios in parentheses.

ii) Long-term sick refers to those with a limited long-standing illness (see Table 4). w is the basic hourly wage for those in low level occupations (see Data Appendix). High education refers to those with degrees. The vacancy rate refers to vacancies divided by employment. MA(4 ln N) is a three-year moving average of proportional employment changes.

iii) In the IV regressions, the wage variable is taken as endogenous and the instruments are x_{rt}, x_{rt-1} where $x_{rt} = \sum_i \lambda_{iro} S_{it}$.

i = one digit industry index,

$$\lambda_{iro} = \frac{\text{employment in } i \text{ region } r \text{ in period 1975-80}}{\text{employment in region } r \text{ in period 1975-80}}$$

$$S_{it} = \frac{\text{employment in industry } i \text{ at time } t}{\text{total employment at time } t}$$

x_{rt} is therefore a measure of labour demand in region r based on movements in aggregate industry employment shares weighted by the initial industry shares in each region.

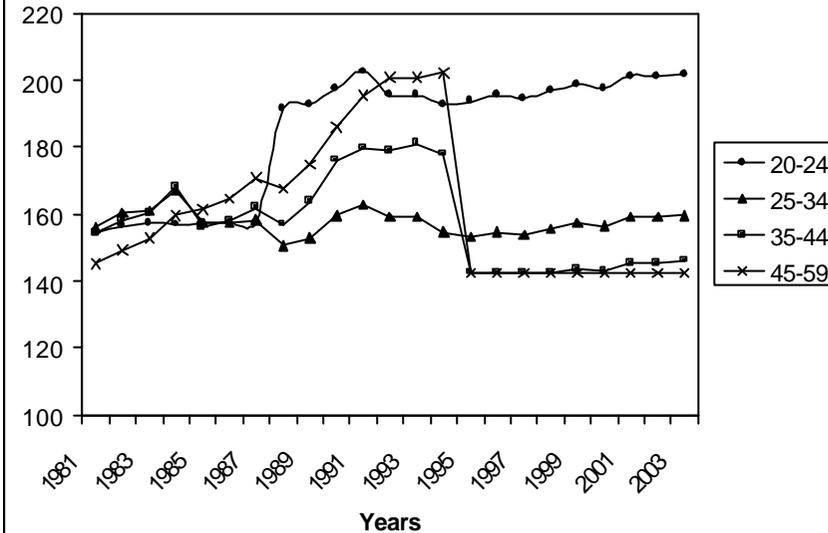
Table 8
 The Impact of Incapacity Benefit on Male Inactivity, 1982-99
 Dependent Variable: Inactivity Rate_{at} (%)

	Groups	
	All	Low education
100 ln(<i>benefit/wage</i>) _{at}	0.037 (2.4)	0.089 (3.8)
Age group dummies	X	X
Year dummies	X	X
T	18	18
N	9	9
\overline{R}^2	0.99	0.99

Notes

- i) *a* refers to age groups [(60-64),(55-59),(50-54),(45-49),(40-44),(35-39),(30-34),(25-29),(20-24)], *t* refers to time. *t* ratios in parentheses.
- ii) *benefits* refers to the weekly rate of incapacity benefit, *wage* to the basic hourly wage rate.
- iii) low education refers to those without qualifications.

**Fig.1: Men Entitled to Contributory Sickness Benefits,
Ratio of sickness benefit entitlement to long-term
unemployment benefits by age group:
average of single men, 1981-2003**



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