



KINGDOM OF TONGA

Disability in Tonga:

Analysis of the situation of people with disability based on the 2016 Population and Housing Census



Preface

This disability monograph provides data on the characteristics of people with a disability in Tonga, as captured through the 2016 Population and Housing Census. It examines their situation compared to the total population, the type of disability or disabilities they have, their living situation, education, health, and work and employment. It is part of a series of thematic reports on topics where statistics and information are in high demand, the other being on youth. This publication provides new information and analysis to complement these and the main report on the census published in 2018.

This monograph is an initiative of the Tonga Statistics Department (TSD). It is a priority for TSD to maximise the use of the data it collects and ensure its value is realised. The main target audiences for this report are planners, policy and decision makers within the Tonga government and in organizations working on disability and development issues, but the report should be of interest to anyone involved in Tonga's development. The findings and data can be used for policy and planning purposes, and the monitoring and evaluation of the Tonga Strategic Development Framework 2015-2025, Sustainable Development Goals (SDGs), and other relevant national policies and programmes.

In 2018, Tonga conducted its first national survey specifically on disability. The results from that household survey are also being released in 2019. Census data is still relevant, as it can provide information to the lowest geographical level (village level). However, a dedicated survey on disability can ask many more questions and get more detailed information on the population with a disability. That survey should provide more reliable estimates and details than a population and housing census could ever provide. That said, the population census still holds value and the resulting data on people with a disability need to be shared.

I would like to acknowledge the work of Tonga Department of Statistics staff – Sione Lolohea, Lupe Moala Tupou, Lusua Kaitapu, Vaimoana Soakimi, Samisoni Fotu – and the support provided by Jessica Gardner, consultant, in the preparation of this report. The financial and technical support from our development partners for the 2016 census is greatly appreciated: Tonga Health Promotion Foundation, the UNICEF and the Pacific Community (SPC).

Finally, I would like to extend my appreciation to the people of Tonga who participated in the census, for without them, this publication would not have been possible.

.....
Villiami Konifelenisi Fifita
Government Statistician
Tonga Statistics Department
November 2019

Contents

Preface	1
Introduction.....	4
About this report.....	4
Summary of key findings.....	5
Measuring disability in a population census	6
Population Census or Disability Survey? – which source to use.....	7
People with a disability in Tonga.....	10
Key policy issues.....	11
Disability in Tonga	14
Key findings	14
About the disabled population – who are they are where are they?.....	14
Type of disabilities.....	16
Number of disabilities	16
Education.....	18
Key findings	18
Education system in Tonga	18
Current students with a disability	20
Highest level of education reached.....	21
Work and employment.....	23
Key findings	23
Conclusions and policy implications.....	24

List of Figures and Tables

Figure 1 Percentage of the population with a disability, by age group, Tonga 2016	10
Figure 2 Population pyramids for people with a disability (left) and people with no disability (right), Tonga 2016	15
Figure 3 Map of prevalence rates by location of population with one of more forms of disability, Tonga 2016	16
Figure 3 Distribution of population with a disability by number of disabilities and sex, Tonga 2016.	17
Figure 4 Percentage of children and young adults currently attending school, by age (years), Tonga 2016	19
Figure 5 Percentage of disabled children and young adults currently attending school, by age (years), Tonga 2016	19
Figure 6 Primary and secondary school attendance ratios, by disability status and sex, Tonga 2016	20
Figure 7 Number of students with a disability, by type of disability and sex, Tonga, 2016.....	21

Figure 8 Highest level of education reached by population aged 25 and above, by disability status and sex, Tonga 2016	22
Figure 9 Labour force status of the population aged 15 and above by disability status, Tonga 2016	23
Table 1 Comparison of methods used to measure disability in the 2016 Population and Housing Census and the 2018 Tonga Disability Survey.....	8
Table 2 Number of disabilities that people with a disability have, by sex, Tonga 2016	17
Table 3 Number of disabled students aged five and above currently attending school, by level of education and sex, Tonga 2016.....	20

Introduction

Providing a quality education, basic life skills and appropriate opportunities for people with a disability is central to development and the realization of human rights. Tonga's Strategic Development Framework 2015-2025 aims for a more progressive Tonga supporting a higher quality of life for all. Ensuring people with a disability are not discriminated against and that they have the support they need to lead their lives is part of the national vision to leave no one behind.

This report demonstrates the value of the population and housing census for tracking progress towards development goals and international commitments related to people with a disability. In 2016, the population census, for the first time, included a short set of questions that allowed people with a disability to be identified. The census results now provide evidence on how many people are disabled, where they are located and how their socio-economic situation compares to people without a disability. This is evidence that can be used to develop policies and programs, so they address issues of highest priority, and to monitor progress towards sustainable development that leaves no one behind.

Some of the conclusions will be known but perhaps have not been easily quantified in the past. Some may even be a surprise. It is hoped that the results presented are of value and contribute to further research about people with a disability in Tonga.

About this report

This report is for policymakers, decision-makers and practitioners working towards achievement of any and all development goals. Particularly officers in the government ministries, representatives from civil society organizations working with people with a disability, religious leaders, development partners, and people with a disability themselves. It aims to raise awareness about the evidence available to facilitate evidence-based policies, plans and programs. The process of developing this publication also helps to build capacity within the Tonga Department of Statistics for data analysis and communication of statistics.

This report provides information in a way that can be easily understood by people with limited experience in using statistics. Technical explanations are avoided to make it engaging and interesting. Every attempt has been made to ensure the information is not misleading and is factually correct.

This report makes an important contribution to providing government officials with evidence for targeting public policies and programs. It is part of the national strategy to improve analysis, dissemination and use of population and development data as a factual basis for planning.

Summary of key findings

Prevalence of disability in Tonga

- just over 4,000 people aged five years and older have some form of disability – a prevalence rate of 4.6%
- the rates in this publication are lower than previously published in census results as they exclude children aged 2-4 years. This is because the methods used in the census are not suited to accurately identifying disability in children who are still developing functional skills
- there are slightly more females (2,039) than males (1,996) with a disability
- ageing is a major characteristic of disability, with most of the disabled population in Tonga being aged 50 years or older
- the most common form of disability of those measured is mobility, severely impacting the lives of almost 1,900 people
- self-care is the second most common form of disability, affecting more than 1,650 people
- around two thirds of the disabled population have only one form of disability
- a quarter of disabled people (23%) they have two forms of disability
- around one in six disabled people (15%) have multiple (three or more) forms of disability

Education

- the disabled population are much more likely to have never attended school or to have left school at an earlier age
- the net attendance of disabled children in primary school is similar as for the total population – about 84% of boys aged 6-12 years are attending primary school, regardless of disability status, and 86% of disabled girls compared to 82% of all girls
- only 53% of disabled boys and 59% of disabled girls of secondary school age are attending secondary school (compared to the total population, the ratio is much higher at 79% of boys and 85% of girls)
- almost 900 people currently attending school, or a tertiary education institution, have some form of disability
- the most common form of disability among current school students is self-care, followed by communication
- adults with a disability have a lower level of education than the total population

Work and employment

- more than a quarter of disabled people are not participating in the labour force because they are retired or too old – 27% compared to 2% of the overall population
- a smaller proportion of the disabled population are wage employees - 20% compared to 26% overall

Measuring disability in a population census

The 2016 Population and Housing Census used a set of international standard questions to help identify the population with a disability. The questions were asked about everyone in Tonga aged two years and older. However, the questions are not designed for measuring disability in small children (there is another set of questions for that) and tend to significantly overestimate difficulties in functioning among infants, particularly related to walking, self-care and communicating; skills that are still being developed at that young age.

DEFINITION OF 'DISABILITY'

The definition of disability is based on the recommendations on international disability statistics from the Washington Group (the United Nations body leading standard setting in this area).

A short set of questions determine if people have no difficulty, some difficulty, a lot of difficulty or cannot do at all in six areas of functioning:



1. Seeing



2. Hearing



3. Walking or climbing stairs



4. Remembering or concentrating



5. Self-care (washing or dressing)



6. Communicating (understanding or being understood by others)

Those people who have a lot of difficulty or cannot do at all one or more of the six domains they are considered to have a disability.

The short set questions used in the 2016 Population and Housing Census of Tonga are not suited to gathering data on children under the age of five years. There are separate modules (question sets) designed specifically to gather data on children.

Previously published census products show the results of the disability questions for all ages questioned. This report restricts the analysis to ages five and older to avoid misinterpretation of the results. Combined with other information gathered through the census it is possible to compare the living conditions of people with a disability to those who have no disability.

The Washington Group Short Set on Functioning (WG-SS)

Introduction: The next questions ask about difficulties you may have doing certain activities because of a HEALTH PROBLEM.

1. Do you have difficulty seeing, even if wearing glasses?
2. Do you have difficulty hearing, even if using a hearing aid?
3. Do you have difficulty walking or climbing steps?
4. Do you have difficulty remembering or concentrating?
5. Do you have difficulty (with self-care such as) washing all over or dressing?
6. Using your usual language, do you have difficulty communicating, (for example understanding or being understood by others)?

Each question has four response categories, which are read after each question.

- | | |
|-------------------------|-----------------------------|
| 1. No, no difficulty | 3. Yes, a lot of difficulty |
| 2. Yes, some difficulty | 4. Cannot do it at all |

Disability is determined, according to the WG-SS, as anyone having *at least 'a lot of difficulty' on at least one of the six questions.*

Source: Washington Group on Disability Statistics. 2018. Disability Measurement and Monitoring using the Washington Group Disability Questions.

Population Census or Disability Survey? – which source to use

It has only become possible for the Tonga Department of Statistics to collect data on disability through national population censuses and household surveys in recent years. With the development of international standards (the Washington Group questions, standards and guidance), data is being collected and produced by DOS as much as possible. The 2016 Population and Housing Census was the first such collection and since then, appropriate household surveys include the questions and methods needed to collect data on disability status.

In 2018, Tonga conducted its first national disability survey, collecting detailed information from almost 5,000 households across the country.¹ A dedicated survey on any topic is likely to yield the most relevant and accurate information possible; certainly, more so than a population and housing census. That is because a census aims to gather data on every person and every house (or

¹ Kingdom of Tonga. 2019. 2018 Tonga Disability Survey Report. Nuku'alofa.

dwelling) that exists in the country. That is a huge logistical undertaking and, as such, should only attempt to gather essential information, limiting the number of questions that can be asked of and about each person.

A dedicated survey on the other hand, can include far more questions to explore the situation of people with a disability, as well as train enumerators specifically for the task of gathering such information. A comparison of methods used in the 2016 census and 2018 survey are in Table 1.

Each approach has its strengths and limitations and both sources of information are relevant. The population and housing census results are particularly valuable for identifying prevalence rates and where people with a disability are located, right down to the village level. The Tonga Disability Survey is suited to providing detailed analysis on the living and socio-economic situation of people with a disability compared to those with no disability. It provides information on the causes and consequences of disability that the population and housing census could never provide.

Table 1 Comparison of methods used to measure disability in the 2016 Population and Housing Census and the 2018 Tonga Disability Survey

	2016 Population and Housing Census	2018 Disability Survey
Number of households interviewed	18,198	4,647
Target population	Age 5 and above ²	Age 2 and above (using different questions for children versus adults)
Definition of disability	A lot of difficulty or cannot do at all in one or more of six areas of functioning <ol style="list-style-type: none"> 1. Seeing 2. Hearing 3. Walking or climbing stairs 4. Remembering or concentrating 5. Self-care (washing or dressing) 6. Communicating (understanding or being understood by others) 	A lot of difficulty or cannot do at all in one or more of eight areas of functioning for those aged 2-4 years: <ol style="list-style-type: none"> 1. Seeing 2. Hearing 3. Walking 4. Fine motor 5. Communicating 6. Learning 7. Playing 8. Controlling behaviour 13 areas of functioning for those aged 5-17: <ol style="list-style-type: none"> 1. Seeing 2. Hearing 3. Walking 4. Communicating 5. Learning 6. Remembering 7. Concentrating 8. Self-care 9. Accepting change 10. Controlling behaviour 11. Making friends 12. Anxiety 13. Depression

² The population aged 2 years and above were included in the data gathering but as the questions are not suited to identifying disability in children under the age of 5 years they were excluded from the analysis.

	2016 Population and Housing Census	2018 Disability Survey
		11 areas of functioning for those aged 18 and above: <ol style="list-style-type: none"> 1. Seeing 2. Hearing 3. Walking 4. Remembering 5. Self-care 6. Communicating 7. Upper body 8. Anxiety 9. Depression 10. Pain 11. Fatigue
Questions to identify population with a disability	Washington Group Short Set of Questions	Washington Group Extended Set of Questions

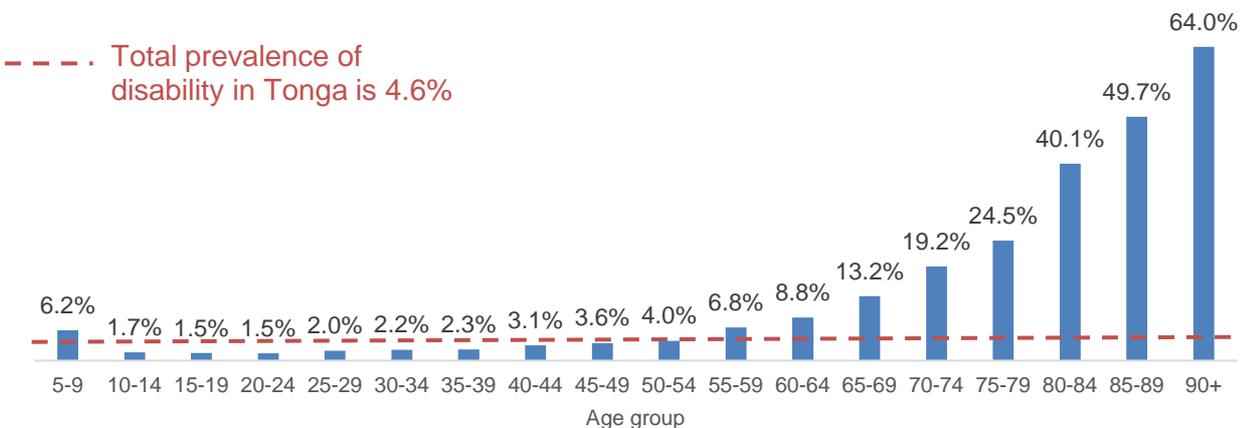
People with a disability in Tonga

People with disabilities are one of the most marginalized and vulnerable groups in Tongan society. They often face stigma, exclusion and discrimination, and lack voice and influence over community and national resources. People with a disability have the same human rights as all Tongans. Advocacy and support are needed to ensure they realise their rights.

Statistics on people with a disability are scarce in Tonga. Previously, the most recent official statistics on disability were produced from the 2006 National Disability Identification Survey conducted by the Tonga Red Cross Society on behalf of DACTION, the Tonga Disability Action Committee. This was a dedicated survey on disability in Tonga, specially designed to gather data on the prevalence of disability (percentage of people who have some form of disability), its causes and consequences. That survey identified 2,782 people with a disability – approximately 2.8% of the total Tongan population, which is described as an “extremely conservative estimate of the actual number of people with disabilities in Tonga”.³

The 2016 Population and Housing Census provides updated data and found that **4.6% of the population aged five years and older has a disability**. The census used a set of international standard questions to identify the disabled population (described further above). Combined with other socio-demographic information gathered through the census it is possible to compare the living conditions of people with a disability to those who have no disability.

Figure 1 Percentage of the population with a disability, by age group, Tonga 2016



Source: Based on data from the 2016 Population and Housing Census of Tonga

Please note that the rates and other **statistics included in this report differ to those published in other national population and housing census reports**. Prevalence rates shown here are significantly lower than previously published as they exclude children aged 2-4 years old for whom the questions used are not suited.

The Washington Group questions used in the census are not detailed enough to accurately identify disability among infant children. Estimates tend to be much higher as the questions ask about walking, self-care (washing, dressing, etc.) and communicating, skills that are still under development in small children. The standard questions do not allow interviewers or respondents to distinguish between lack of functioning due to disability or typical child development.

³ Tonga Department of Statistics. Taylor, D. *2006 Tonga National Disability Identification Survey*. <https://tonga.prism.spc.int/tdos-documents-library?view=download&fileId=1165>

Key policy issues

The government of Tonga has ratified the **United Nations Convention on the Rights of Persons with Disabilities (CRPD)** and has a disability policy in place. The priorities are to eliminate discrimination, ensure realisation of all human rights, including freedom from torture or cruelty, and access to opportunities for education and work, as well as providing the necessary services and public infrastructure to support people with different forms of disability to enjoy mobility and high quality of life.

Activities are implemented through the **Ministry of Internal Affairs Social Protection and Disability division (MIA-SPD)**.

The **Tonga Strategic Development Framework** includes priorities related to people with a disability:

1. improved collaboration with and support to social and **civil society organisations** and **community groups** (Organisational Outcome 2.1)
2. continue to work to provide affordable **Universal Health Coverage** with expanded coverage taking particular account of the specific needs of different groups, including women, men, children, the disabled (Organisational Outcome 2.5)
3. better **care and support for vulnerable people**, in particular the disabled (Organisational Outcome 2.7)
4. improve the professionalism of the Police, with **stronger community policing** across the Kingdom, and application of appropriate technology, taking particular note of the needs of different groups, in particular women, disabled and others (Organisational Outcome 3.2)
5. better formulation and implementation of **outer island and rural development programmes** in collaboration with local communities, taking particular note of the needs of different groups, including, women, men, youth, disabled, those in isolated areas etc. (Organisational Outcome 3.3)
6. develop better understanding between government, land title holders, and the wider public of the importance of **informed land use planning** if we are to ensure better designed towns and villages that meet the many land use needs of the community for housing, community services, leisure (sports, recreation), business and public infrastructure, and needs of special groups (women, disabled, isolated, etc.) to avoid the creation of poorly designed and poorly serviced communities (Organisational Outcome 5.1)
7. streamline environmental and resources **planning and evidence-based decision-making** processes, using **disaggregated data and plans**, to address the particular account of the needs of special groups (women, disabled, etc.) (Organisational Outcome 5.2)
8. ensure appropriate enabling policy and guidelines to ensure the incorporation of relevant **climate change and disaster risk management** considerations into the design and implementation of all relevant policies, plans, projects and budgets giving particular attention to the needs of special groups (women, disabled, isolated, elderly etc.) (Organisational Outcome 5.4)

Disability is also a priority in regional and global development frameworks, such as the **Pacific Framework for the Rights of Persons with Disabilities 2015-2025**⁴, and the **Global 2030**

⁴ Pacific Islands Forum Secretariat: Framework for Rights of Persons with a Disability.
<https://www.forumsec.org/framework-for-rights-of-persons-with-disability/>

Agenda for Sustainable Development (outlined below). The regional framework is structured around five pillars:

1. **Livelihoods** – promote livelihood opportunities through inclusive economic development and decent work
2. **Mainstreaming** – mainstream rights of persons with disabilities in development strategies, national and local policies and community services
3. **Leadership and enabling environment** – develop leadership and an enabling environment for rights-based disability inclusive development
4. **Disaster risk management** – include persons with a disability in climate change adaptation measures and disaster risk management plans and policies
5. **Evidence** – strengthen disability research, statistics, and analysis.

This report contributes towards these priorities, particularly pillar five on evidence.

“Nothing about us without us” - Any work or information about people with a disability must be done with their involvement. This report was prepared by the Tonga Department of Statistics in consultation with people with a disability represented by 'Ofeina & Fe'ofa'aki Leka from Tonga National Vision Impairment Association (TNVIA), Rhema Visa from Tonga Family Health, Unaloto Halafihi (Naunau 'o e 'Alamaite Tonga Association - NATA), Matelita Taufu from Inclusive Education, Ministry of Education and Training, ' Amelia Halapua from Social Protection, Ministry of Internal Affairs, Betty Blake & Gaberiella 'Ilohahia from Ma'a Fafine Tonga.

DISABILITY AND THE SUSTAINABLE DEVELOPMENT GOALS (SDGS)

Six of the goals in the SDG framework have targets and indicators that are directly related to people with a disability. Sustainable development priorities for the disabled focus on poverty and social protection, education, work, public infrastructure, and peace and security, as listed by goal below. Only indicators 4.5.1, 8.5.2, and 16.7.1 can be produced from the population and housing census and there may be more reliable sources (e.g. the 2018 Labour Force Survey for 8.5.2). The other indicators below must come partly or completely from other data sources.

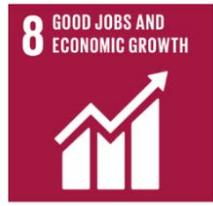


1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work-injury victims and the poor and the vulnerable



4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict-affected, as data become available) for all education indicators that can be disaggregated

4.a.1 Proportion of schools with adapted infrastructure and materials for students with disabilities



8.5.1 Average hourly earnings of female and male employees, by occupation, age and persons with disabilities

8.5.2 Unemployment rate, by sex, age and persons with disabilities



10.2.1 Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities



11.2.1 Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities

11.7.1 Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities

11.7.2 Proportion of persons victim of physical or sexual harassment, by sex, age, disability status and place of occurrence, in the previous 12 months



16.7.1 Proportions of positions (by sex, age, persons with disabilities and population groups) in public institutions (national and local legislatures, public service, and judiciary) compared to national distributions

16.7.2 Proportion of population who believe decision-making is inclusive and responsive, by sex, age, disability and population group

Disability in Tonga

Key findings

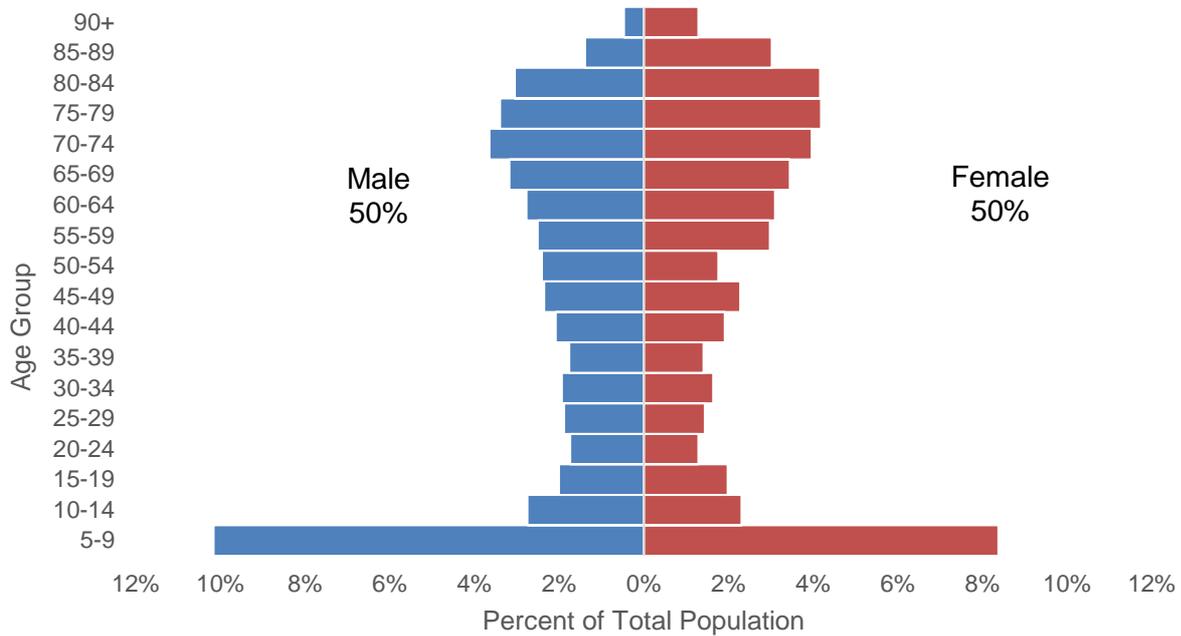
- just over 4,000 people aged five years and older have some form of disability – a prevalence rate of 4.6%
- the rates in this publication are lower than previously published in census results as they exclude children aged 2-4 years. This is because the methods used in the census are not suited to accurately identifying disability in children who are still developing functional skills
- there are slightly more females (2,039) than males (1,996) with a disability however the percentage of each population is the same (4.6% of females and 4.6% of males)
- ageing is a major characteristic of disability, with most of the disabled population in Tonga being aged 50 years or older
- the most common form of disability of those measured is mobility, severely impacting the lives of almost 1,900 people
- self-care is the second most common form of disability, affecting more than 1,650 people
- around two thirds of the disabled population have only one form of disability
- a quarter of disabled people (23%) they have two forms of disability
- around one in six disabled people (15%) have multiple (three or more) forms of disability

About the disabled population – who are they are where are they?

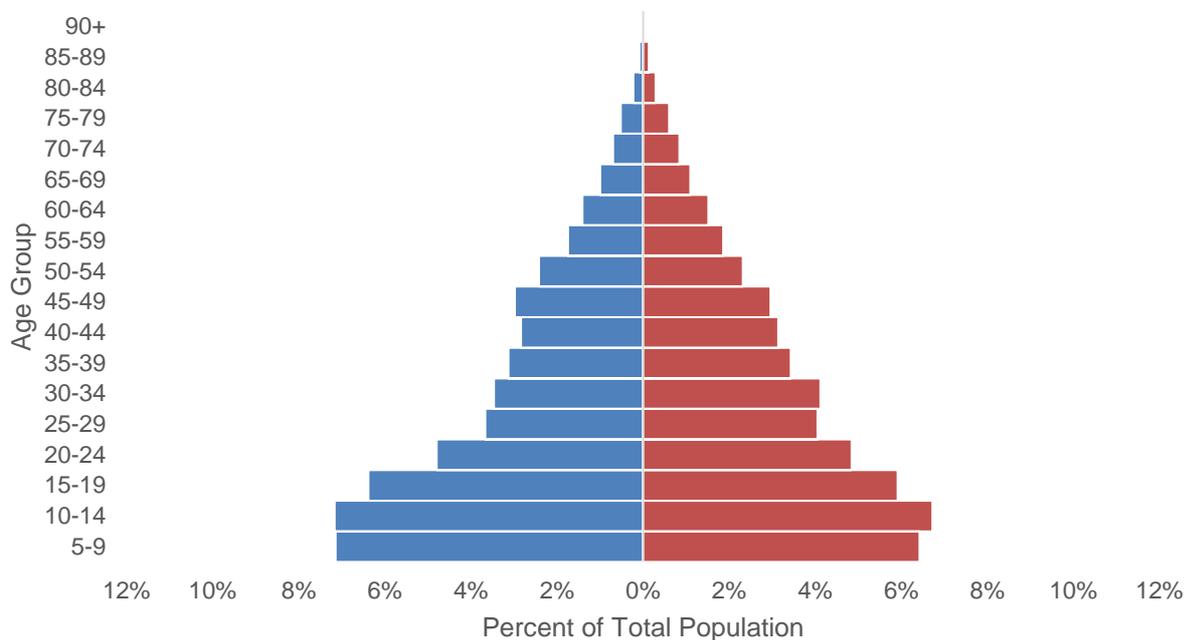
In 2016, there were just over 4,000 people aged five years and older who identified through the census as having some form of disability – a prevalence rate of 4.6%. Slightly more women and girls than men and boys identified as disabled: 2,039 females (4.6% of the female population) and 1,996 males (4.6% of males).

Ageing is a major characteristic of disability, with most of the disabled population in Tonga being aged 50 years or older (Figure 2). The opposite is true of the population without a disability, the pyramid for which looks more like the overall Tongan population.

Figure 2 Population pyramids for people with a disability (top) and people with no disability (bottom), Tonga 2016

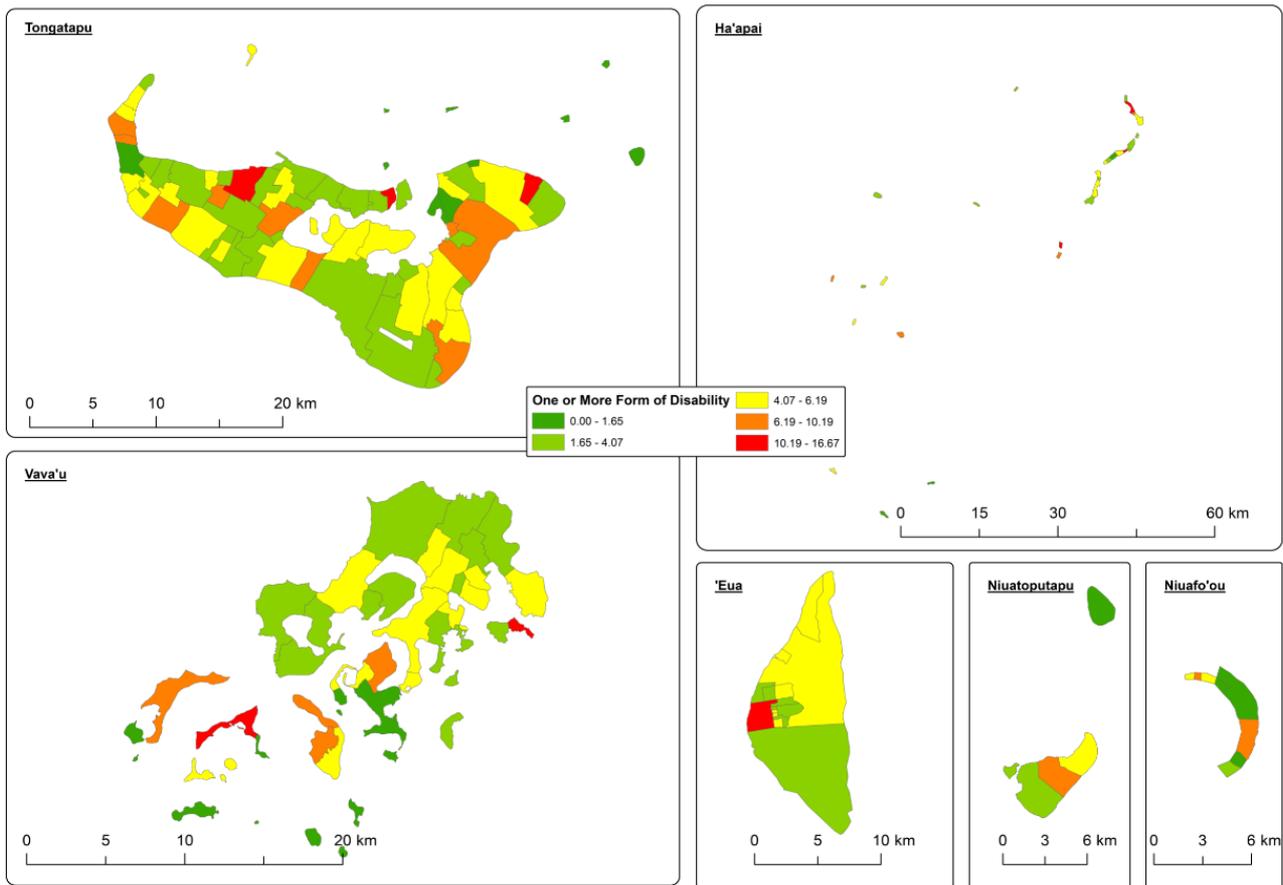


Note: the disproportionately high rate of disability among small children aged 5-9 years suggests this is an overestimation. The general nature of the questions does not allow enumerators or respondents to distinguish between functional ability (disability) versus typical rate of child development.



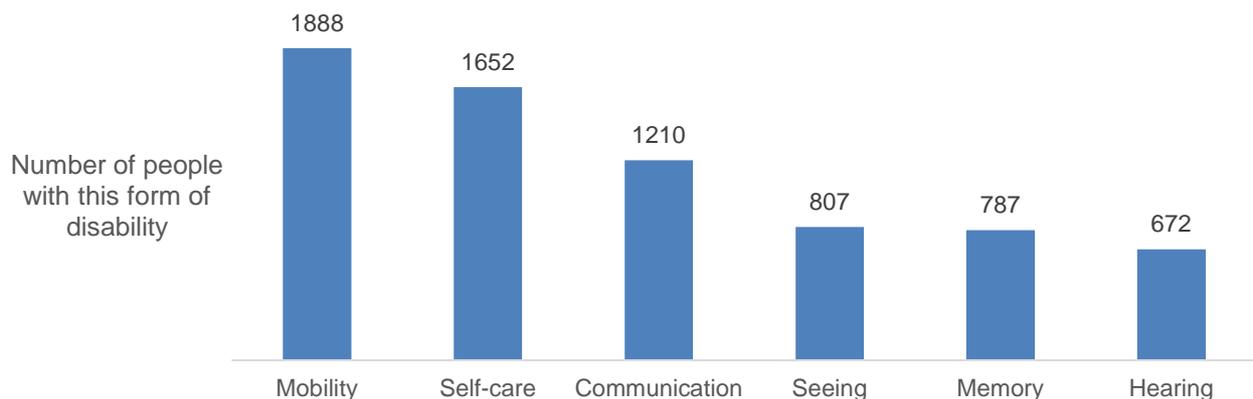
While the national prevalence rate is 4.6% the rates do vary considerably across the country. As seen in Figure 3 prevalence is highest in Tuku Tonga village (16.7%) and lowest in the village of Nga'unoho (0.6%).

Figure 3 Map of prevalence rates by location of population with one or more forms of disability, Tonga 2016



Type of disabilities

The most common form of disability of those measured is mobility, severely impacting the lives of almost 1,900 people. Self-care is the second most common form of disability, affecting more than 1,650 people.



Number of disabilities

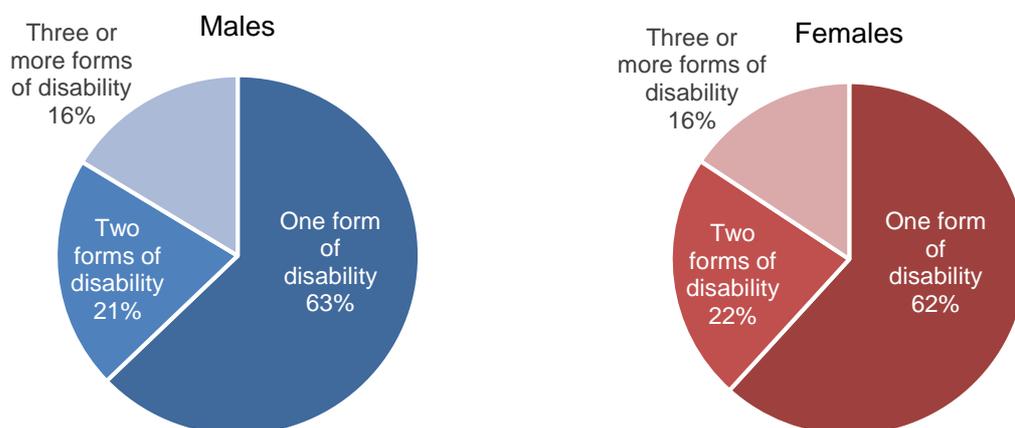
People may have one or multiple forms of disability (Table 2). Most (around 62%) of the disabled population have one form of disability (mobility, self-care, etc.). For two in every five disabled people (22%) they have two forms of disability and for the remaining 16%, they have three or more forms of

disability. There is no significant difference in the number of disabilities among the male versus the female population with a disability

Table 2 Number of disabilities that people with a disability have, by sex, Tonga 2016

	Number of people			Distribution (%)		
	<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>	<i>Male</i>	<i>Female</i>
One form of disability	2,499	1,253	1,246	61.9	62.8	61.1
Two forms of disability	874	418	456	21.7	20.9	22.4
Three or more forms of disability	662	325	337	16.4	16.3	16.5
Total	4,035	1,996	2,039	100.0	100.0	100.0

Figure 4 Distribution of population with a disability by number of disabilities and sex, Tonga 2016



Education

Key findings

- the disabled population are much more likely to have never attended school or to have left school at an earlier age
- the net attendance of disabled children in primary school is similar as for the total population – about 84% of boys aged 6-12 years are attending primary school, regardless of disability status, and 86% of disabled girls compared to 82% of all girls
- secondary school is where the difference between the disabled children and the total population becomes apparent
- only 53% of disabled boys and 59% of disabled girls of secondary school age are attending secondary school (compared to the total population, the ratio is much higher at 79% of boys and 85% of girls)
- almost 900 people currently attending school, or a tertiary education institution, have some form of disability
- the most common form of disability among current school students is self-care, followed by communication
- adults with a disability have a lower level of education than the total population

Education system in Tonga

The Tongan education system is governed by the Education Act 2013. Basic education from age 4 to 18 years (inclusive) is compulsory or until the child has completed twelve years of schooling. The education system comprises the following tiers:

1. Early childhood education (ECE) from ages 3 to 5 years
2. Primary school (age 6 to 12)
3. Secondary school (age 13 to 18)
4. Tertiary education (age 19 to 24)
5. Non-formal education – other forms of education than the above.

Although children can attend level of schooling outside of these age ranges (e.g. a six-year-old child could be in early childhood education), these are the standards needed to calculate net and gross enrolment and attendance rates.

There has been a lot of investment in the Tongan education system and, as a result, school attendance is now almost universal. Figure 5 shows that for the total population, only a small proportion of children and adults have never attended school (shaded black) – around 2%. It also shows the age at which people start to leave school (shaded red) – around age 16. The situation is quite different for the 500 disabled young people aged between 10 and 24. They are much more likely to have never attended school or to have left school at an earlier age (Figure 6). The highest education level of the adult disabled population compared to the total population later in the chapter provides further evidence of the limited education for young disabled people.

Figure 5 Percentage of children and young adults currently attending school, by age (years), Tonga 2016

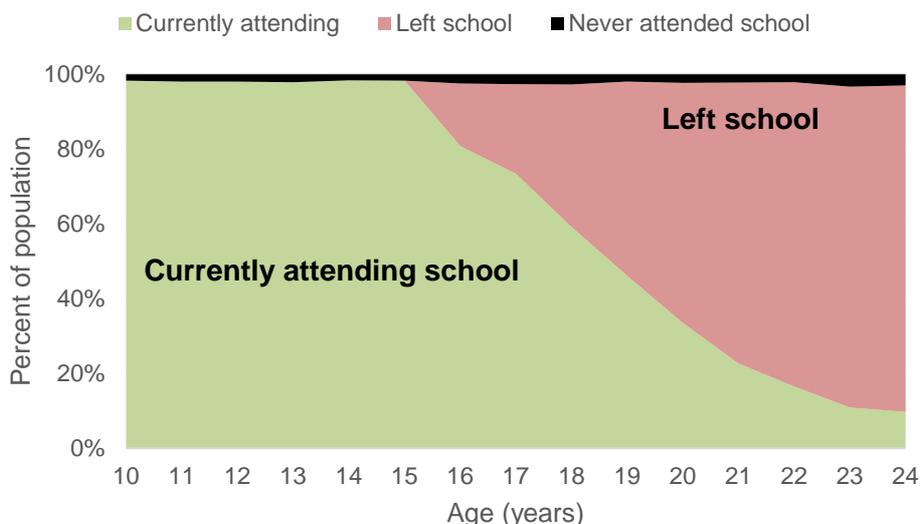
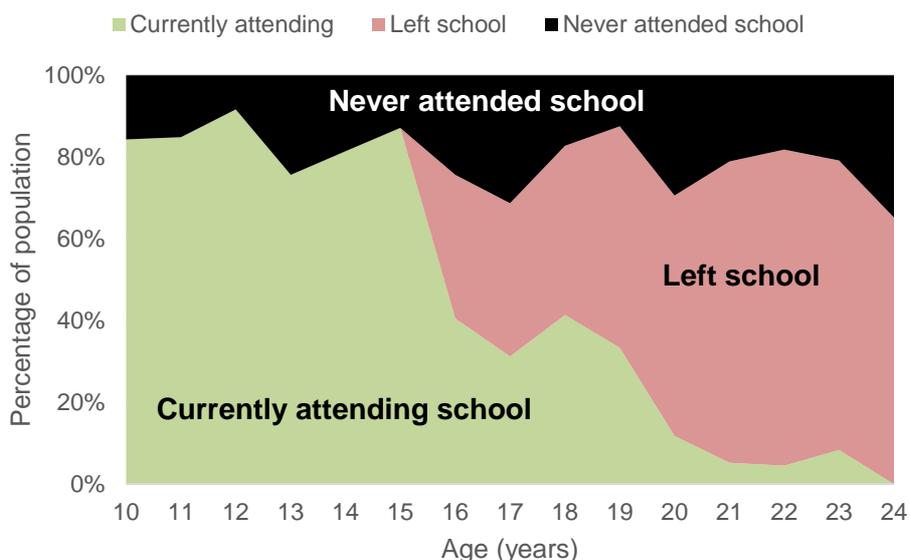


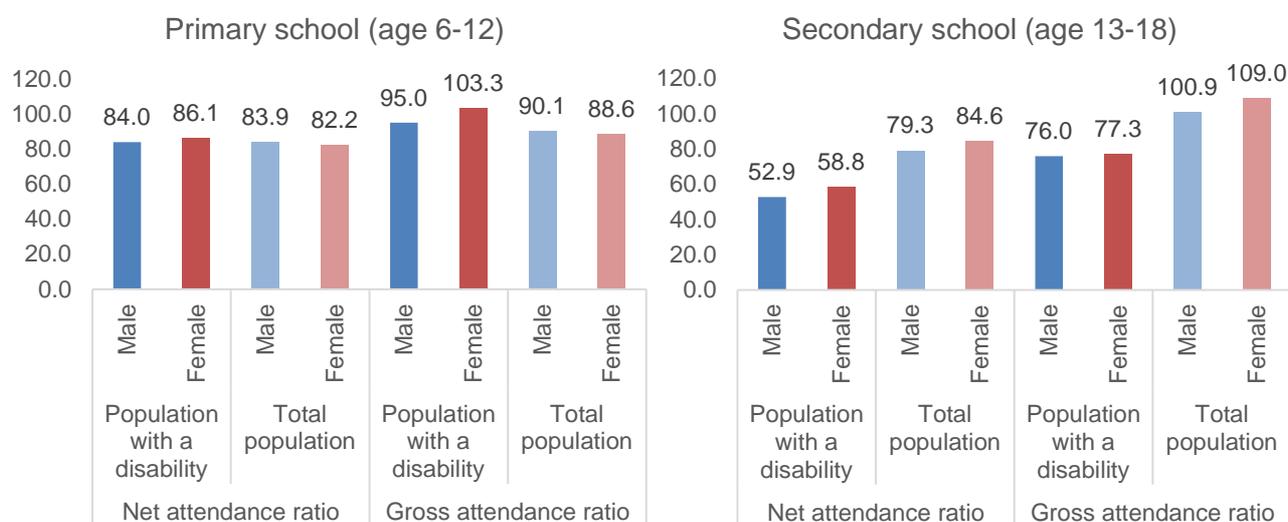
Figure 6 Percentage of disabled children and young adults currently attending school, by age (years), Tonga 2016



The net and gross attendance ratios for primary and secondary school provide another picture of participation in education for children with a disability. For primary school, the net attendance of disabled children is similar as for the total population – about 84% of boys aged 6-12 years are attending primary school and 86% of disabled girls and 82% of all girls. Higher gross attendance ratios for the disabled population suggest that more children with a disability are attending primary school at an older or younger age than 6-12 years.

Secondary school is where the difference between the disabled children and the total population becomes apparent. Of the 200 disabled children aged 13-18, only 53% of the boys and 59% of the girls are in secondary school. Whereas for the total population, the ratio is much higher at 79% of boys and 85% of girls.

Figure 7 Primary and secondary school attendance ratios, by disability status and sex, Tonga 2016



Current students with a disability

The census is an important source of data to complement education statistics produced from school records through the Ministry of Education. It reveals that almost 900 people currently attending school, or a tertiary education institution, have some form of disability (Table 3) – 53% are male and 47% female. The highest percentage of disabled students are at pre-school level with 8.7% of pre-school students aged five and above reporting some form of disability. The ‘other’ category of education level also has a high concentration of disabled students. This suggests ‘other’ may include special needs education for students with difficulty, or home schooling.

Table 3 Number of disabled students aged five and above currently attending school, by level of education and sex, Tonga 2016

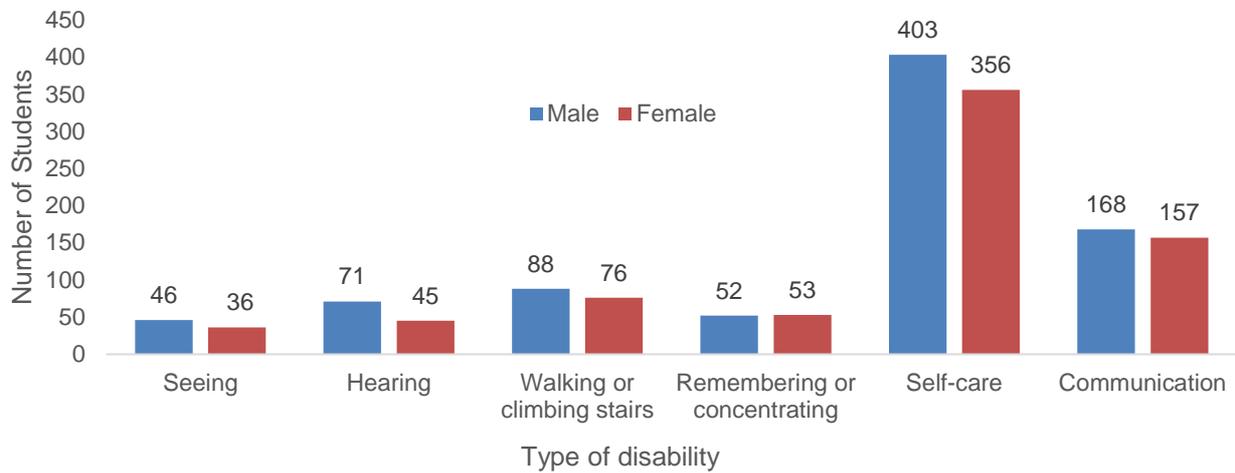
Level of education	Total students			Male			Female		
	Total	Disabled	% of total	Total	Disabled	% of total	Total	Disabled	% of total
Total students	32,984	897	2.7	16,850	479	2.8	16,134	418	2.6
Pre-school	2,103	183	8.7	1,093	96	8.8	1,010	87	8.6
Primary school	15,143	529	3.5	7,977	295	3.7	7,166	234	3.3
Lower secondary	9,795	118	1.2	5,039	61	1.2	4,756	57	1.2
Upper secondary	4,244	41	1.0	1,916	18	0.9	2,328	23	1.0
Technical and vocational	808	13	1.6	490	6	1.2	318	7	2.2
Tertiary	856	7	0.8	325	2	0.6	531	5	0.9
Other	35	6	17.1	10	1	10.0	25	5	20.0

Note: The questions used in the census make it difficult to distinguish between functional ability and difficulties with tasks like self-care and communication as part of typical childhood development. The higher rates of disability among pre-school children may reflect this rather than disability.

The most common form of disability among current school students is self-care, followed by communication (Figure 8). The fact these forms of functionality were by far highest among school

students adds weights to the likelihood these are developmental issues among small children rather than functional disabilities that will continue with time. The graph below also shows that 88 male and 76 female students have difficulty walking or climbing stairs, highlighting the importance of school infrastructure suited to people with mobility difficulties. Hearing-related disabilities are more common among male students with 71 males and 45 females being deaf or partially deaf.

Figure 8 Number of students with a disability, by type of disability and sex, Tonga, 2016

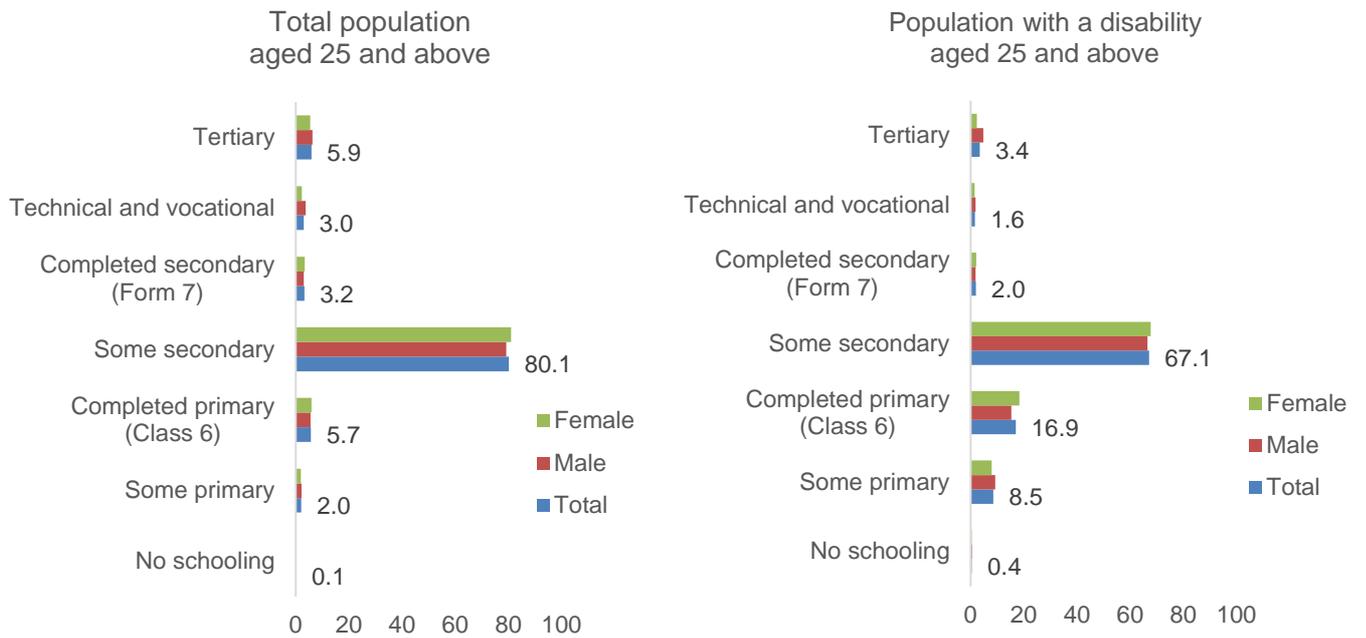


Highest level of education reached

The census asks every Tongan resident about the highest level of education reached, making it an important source of information on education-related goals.

As shown in Figure 9, most adults aged 25 and over, regardless of disability status, have completed some secondary school. However, overall, adults with a disability have a lower level of education than the total population. They are far more likely to be limited to primary school or lesser – 26% of the disabled population never progressed beyond primary school compared to 8% of the total population. Tertiary education is also lower at 3% for the disabled compared to 6% for the overall population aged 25 and above.

Figure 9 Highest level of education reached by population aged 25 and above, by disability status and sex, Tonga 2016



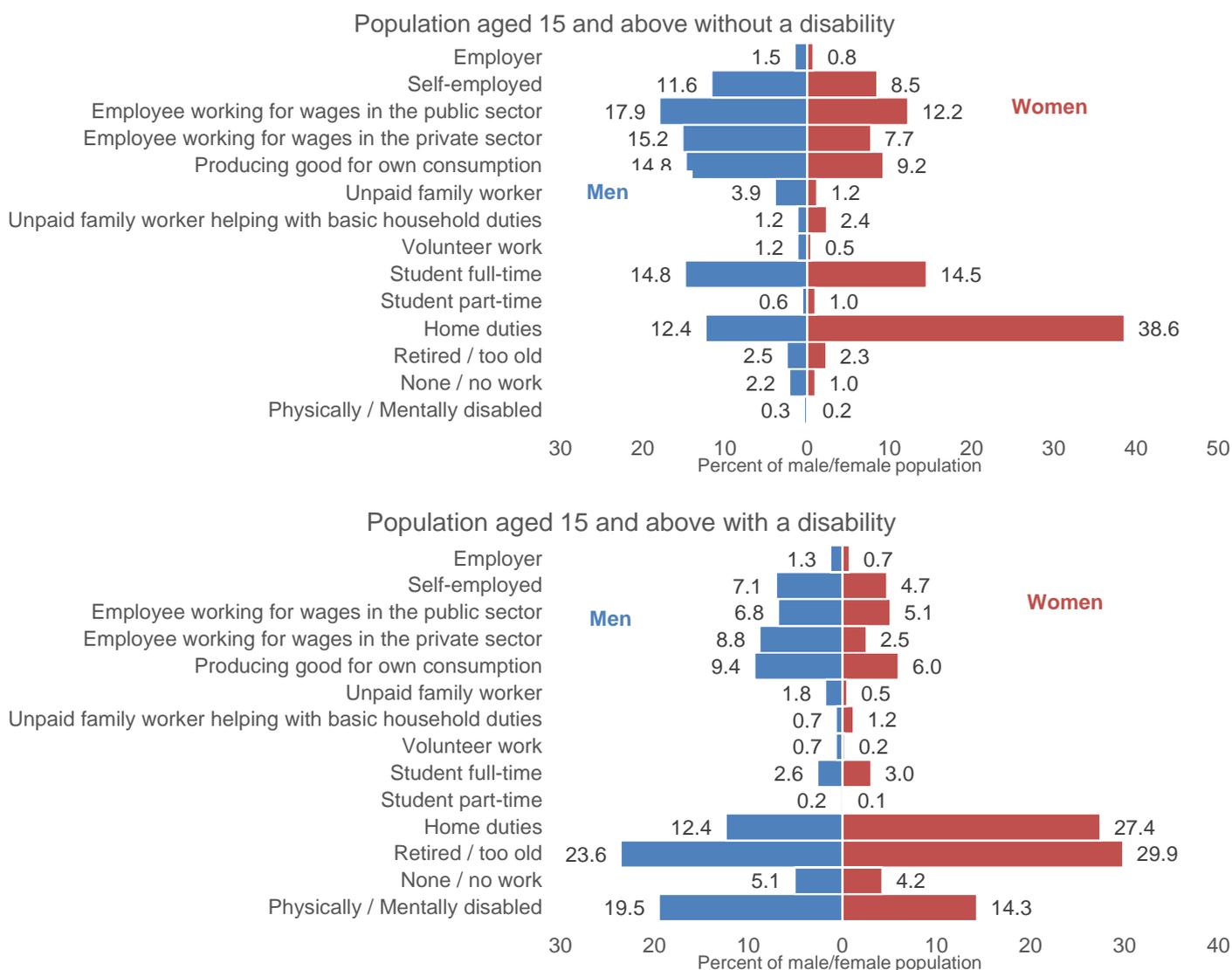
Work and employment

Key findings

- more than a quarter of disabled people are not participating in the labour force because they are retired or too old – 27% compared to 2% of the overall population
- a smaller proportion of the disabled population are wage employees - 20% compared to 26% overall

The main activity of people with a disability differs significantly from the total population. A big part of this is the age profile of the disabled population with most being older persons. This is reflected by the fact that more than a quarter of disabled people are not participating in the labour force because they are retired or too old (27% compared to 2% of the overall population). Related to this, a smaller proportion of the disabled population are wage employees (20% compared to 26% overall). Not surprisingly, a much greater proportion of the population with a disability put 'physically or mentally disabled' as their reason for not being in the labour force – 17% compared to 0.2% of the overall population.

Figure 10 Labour force status of the population aged 15 and above by disability status, Tonga 2016



This publication has only limited analysis of the disabled population in work and in employment. Although the census gathers data on this for everyone aged 15 years and older, Tonga conducted a Labour Force Survey (LFS) in 2018. The LFS is especially designed to gather data on employment and unemployment and is therefore usually a more reliable source of labour force data than a population census. It asks more detailed questions on participation in work and income-generating activities, giving a more accurate picture of the types of employment the population are engaged in, including people with disabilities.

Conclusions and policy implications

An increasing amount of data on people with a disability in Tonga is helping to fill an important gap in evidence. However, the methods for collecting data are relatively new and there are lessons to be learned in their application. The data are valuable, but the most benefit will come if readers understand the definitions used, and the strengths and limitations of various data sources, be they censuses, surveys or administrative records.

The importance of identifying, recognizing and providing appropriate opportunities and services to people with a disability cannot be understated. This is a group in society that anyone can join at any moment, whether they are born into it or become disabled due to an illness, accident or some other reason. People with a disability are entitled to enjoy the same human rights as others and to live in a fair, just and accessible society.

Some recommendations based on the preparation and validation of this report:

1. The national statistical system should work closely with people with a disability, disability experts and advocates to ensure the statistics being produced are relevant, reliable and understandable.
2. The Tonga Department of Statistics could document the lessons learned from collecting data on disability status in censuses and surveys. This will allow methodological issues to be identified, shared, and addressed in future collections, as well as for other countries in the region and globally to benefit from the experiences in Tonga.
3. Dissemination and capacity development workshops should be conducted and/or opportunities sought to train the key data users to understand and correctly interpret Tonga's growing evidence base on disability.