*Living on the Edge: Institutional Supports and Perceptions of Economic Insecurity Among People with Disabilities and Chronic Health Conditions**

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The growth of precarious employment coupled with declining social safety nets has increased economic insecurity among many households, leaving them without key resources to weather financial hardships like those brought on by the COVID-19 pandemic. This has been especially true for people whose disabilities, health statuses, and already precarious economic situations have made them extra vulnerable. We combine survey (*N* = 1,027) and interview (*N* = 50) data for Canadians with disabilities and chronic health conditions to explore how mobilizing four types of institutional supports connected to labor markets, financial markets, family, and government influenced perceptions of current and future insecurity during crisis. Because employment income was only available to about half of our respondents, many relied on a combination of savings, family supports, and government programs to make up the difference. This paper demonstrates how marginalized groups make use of different supports within liberal welfare states during times of crisis.

Introduction

> I'm living each day on the edge, wondering if I can make ends meet tomorrow.   Esther (age 60, multiple disabilities, not working)

Since the 1980s, most liberal welfare regimes like Canada and the United States have increasingly expected households to find economic support through the labor market. For many people, especially those with disabilities and chronic health conditions like Esther, the labor market does not always provide security. About 40 percent of working-aged Canadian adults (between 25 and 64 years of age) with disabilities were out of the labor force in 2017 (Berrigan, Scott, and Zwicker 2020; Morris et al. 2018), and those with work are often clustered into low paying precarious jobs (Maroto and Pettinicchio 2014), contributing to insecurity. Additional institutional supports including assets, government programs (often means-tested and tied to employment status), and family can help mitigate insecurity, but many of the most socially and economically vulnerable struggle to access these.

Due to low or nonexistent employment income, one-third of Canadians with disabilities receive income from sources other than the labor market, often from government transfers (Crawford 2013). However, means-tested benefits typically mean households cannot exceed a level of allowable income and assets, which can disincentivize saving (Maroto and Pettinicchio 2020; Wood 2015). In turn, people with disabilities also have less savings and hold less wealth than people without disabilities (Maroto 2016; Maroto and Pettinicchio 2020). At the same time, they face additional expenses related to healthcare, insurance, personal care, and medical costs that often exceed income (Morris et al. 2018; She and Livermore 2007; Smith et al. 2004; Steinmetz 2006).

With limited government benefits, people with disabilities often rely on family members for care and economic support (She and Livermore 2007) where family, particularly the presence of a spouse or partner, is important for staving off insecurity (Osberg and Sharpe 2009; Western et al. 2012). However, disability also affects overall household finances. In addition to added expenses, household members may face income penalties due to their caregiving roles for members with disabilities (Batavia and Beaulaurier 2001; McKnight 2014; Parish, Rose, and Swaine 2010; Shuey and Willson 2019). This lowers overall household wealth, where households with a disability are at greater risk of falling into hard times because they cannot rely on savings. These studies show that many people with disabilities and chronic health conditions struggle to access key institutional supports. How is this struggle compounded in times of crisis?

Crises, like the COVID-19 pandemic, act as exogenous shocks further disrupting access to employment income, savings, government benefits, and family supports, generating short- and-long-term feelings of economic uncertainty. Facing additional obstacles, members of already economically vulnerable groups are left scrambling to make ends meet where many individuals living on the edge end up falling off the precipice. Esther's situation, like that of many others, reveals deepening feelings of insecurity as institutional supports are not adequately mobilized in times of crisis. Yet, as vulnerable groups enter unsettled times, less is known about how extant economic situations and access to institutional supports shape perceptions of insecurity.

In this paper, we examine subjective perceptions of current and future economic insecurity among people with disabilities and chronic health conditions, incorporating participants' considerations of their own resource adequacy in times of crisis (Hacker et al. 2014; Western et al. 2012). This is important for understanding how access to institutional supports can shape perceptions of insecurity. As Chung and Mau (2014) note, there is not always a direct connection between different institutional supports and perceptions of security. Rather, perceptions are filtered by broader contexts and experiences tied to individuals' and groups' positions in the social structure. Esther's concerns about financial insecurity were directly tied to her status as a person with multiple disabilities and health conditions.

What has the pandemic meant for subjective views of economic insecurity? What factors helped to limit exposure to, and feelings about, insecurity? To answer these questions, we combine survey (N = 1,027) and interview (N = 50) data from people with disabilities and chronic health conditions, collected during the summer and fall of 2020, to explore respondents' perceptions of their current and future financial situations.[1] Quantitative and qualitative data reveal how four key institutions of labor markets, financial markets, family, and governments can limit economic insecurity through the redistribution of risk. Many respondents were able to mitigate the economic consequences of the pandemic by accessing a combination of supports in different ways. This was especially true for those with employment. Others who were excluded from the labor market and federal government supports, such as the Canadian Emergency Response Benefit (CERB) and the Canada Recovery Sickness Benefit (CRSB), which provided immediate income support of $2,000 per month for people who had lost employment due to COVID-19, had to rely on meager savings, family help, and provincial disability benefits.

This paper highlights how different institutional supports provide security during times of crisis. We contribute to a broader understanding of economic insecurity by linking pre-existing disadvantage and inequalities to circumstances generated by exogenous shocks. Our findings speak to how groups who entered the pandemic with initial vulnerabilities fared. Despite the presence of multiple supports, employment was integral to continued security within a liberal welfare state that provided limited government support. As the pandemic wears on, it focuses attention on the politics of resource allocation, leaving us with the question—will some groups be left to fall off the edge and others pulled back up?

Economic Insecurity

Economic insecurity is a fundamental measure of economic wellbeing that extends beyond income and employment. It refers to the "degree to which individuals experience and are protected against large economic losses" (Hacker et al. 2014:S6) or the "risk of economic loss faced by workers and households as they encounter the unpredictable events of social life" (Western et al. 2012:342). It therefore inherently accounts for income volatility (Gorbachev 2011; Gottschalk and Moffitt 2009; Hacker and Jacobs 2008), as well as a household's ability to balance income and spending (Maroto 2021; Chai and Maroto 2020; Lusardi, Schneider, and Tufano 2011). In assessing economic insecurity, researchers have used a range of measures that incorporate both income and wealth. For example, indices like the Economic Security Index and the IEWB Economic Security Index include measures for income, employment, wealth, financial assets, involuntary expenditures, and government benefits (Bossert and D'Ambrosio 2013; Hacker et al. 2014; Osberg and Sharpe 2005).

Although Hacker (2006) conceptualized subjective feelings of insecurity in broad terms, most subjective measures have focused specifically on perceptions of job insecurity (Chung and Mau 2014; Erlinghagen 2008; Lübke and Erlinghagen 2014; Mau, Mewes, and Schöneck 2012). These necessarily ignore groups often excluded from the labor market who must rely on non-employment income to satisfy immediate consumption needs and to save for the future. Therefore, we focus on broader perceptions of insecurity and financial situations beyond employment, which are also linked to the presence and interplay of other institutional supports—savings, government benefits, and family.

The effects of growing economic insecurity are not distributed equally across populations (Maroto, Pettinicchio, and Patterson 2019; Hacker, Rehm, and Schlesinger 2013). Lower-income households (Hacker, Rehm, and Schlesinger 2013), older people, especially single women (Mutchler, Liu, and Xu 2007), households with adult children, especially Black families (Pettinicchio and Maroto 2017), gay and bisexual men (Chai and Maroto 2020), and women of color with disabilities (Maroto, Pettinicchio, and Patterson 2019) experience higher levels of economic insecurity, poverty, and precarity. Canadians with disabilities and chronic health conditions have been disproportionately affected by the dismantling of the social safety net (Parish 2013), often relying on underfunded government programs with strict eligibility requirements (Milligan and Schirle 2019). These are the groups, among others, most affected by the economic effects of COVID-19. Like women, people with less education, and people of color, people with disabilities are more likely to report feeling financially insecure (Pettinicchio, Maroto, and Lukk 2021). The intersection of disability, health, gender, and socioeconomic background constrains access to different areas of financial support in and outside economic crises, contributing to concerns about current and future financial situations.

Institutions that Limit Economic Insecurity

Economic insecurity considers both the availability of resources to weather unforeseen events and the overall exposure to risk (Maroto and Pettinicchio 2015; DiPrete 2002; Osberg and Sharpe 2005; Western et al. 2012).

Labor markets, financial markets, family, and governments play an important part in redistributing risk and shaping perceptions of insecurity, keeping individuals and households from falling off the edge (Chung and Mau 2014; Paskov and Koster 2014; Rodems and Pfeffer 2021; Western et al. 2012). Access to these supports can limit insecurity but how they are mobilized is largely determined by institutional arrangements (Esping-Andersen 1990), which vary across and within welfare regime types (Myles 1998).

As a liberal welfare state, Canadian governments since the 1980s have increasingly emphasized labor market solutions and personal responsibility to save as means for addressing economic insecurity over government supports (Ilcan 2009; Lindbom 2001). Combined with globalization (Brady, Beckfield, and Zhao 2007), disappearing employment protections, and weakening union influence (Pettinicchio and Maroto 2021; Rosenfeld and Kleykamp 2012; VanHeuvelen 2018), this has contributed to rising economic insecurity in Canada and world-wide (Banting and Myles 2013; Foster and Wolfson 2010; Hacker 2006; UN Department of Economic and Social Affairs 2008). The emphasis on employment for income and security has consequently been felt more negatively by some groups over others.

For marginalized communities, full-time stable employment can limit exposure to economic insecurity and provide a means for upward mobility. However, accessing the labor market, especially in such ways as to provide reliable sources of income, is riddled with challenges both in terms of supply-and-demand-side factors (Maroto and Pettinicchio 2015; Bruyère 2016). Households with disabilities often face employment and income penalties especially if members experience disability (especially work-limiting disabilities) in their prime working/earning years (Shuey and Willson 2019). Labor market outcomes also vary by disability type and severity. Numerous studies have shown that people with cognitive disabilities have the highest unemployment rates and lowest earnings (Brucker, Houtenville, and Lauer 2016; Jones 2011). In part, this is because people with disabilities, especially individuals with cognitive, multiple, and independent living related disabilities, are often segregated into low paying jobs including in service and food preparation (Maroto and Pettinicchio 2014; Lindsay et al. 2014; Morris et al. 2018).

In turn, households with disabilities are less likely to rely on savings as a buffer (Maroto, Pettinicchio, and Lukk 2021). People with disabilities hold less wealth and have fewer assets, including owning homes, than people without disabilities. Although homeownership represents an important disparity, wealth attached to homes is not as easily and quickly accessible compared to other forms of investment products, especially when there is an immediate need for funds. Homeownership aside, Canadian households with disabilities 20 years ago had similar wealth levels to those without disabilities. This gap has widened where families with disabilities now hold a quarter less in non-housing assets (Maroto 2016; Maroto and Pettinicchio 2020).

Although low wealth can be tied to precarious employment situations, like other vulnerable groups in Canada, people with disabilities are often excluded from credit markets and they cannot make use of financial products that help them build wealth (Campbell and Kaufman 2006; Maroto and Pettinicchio 2020; Zhang 2003). Government programs aimed at combatting low-wealth among people with disabilities have not been very successful, either. Although the Canadian government provides eligible disabled people a Registered Disability Savings Plan (RDSP) with matching funds to incentivize saving, a recent Statistics Canada report (Statistics Canada 2022) revealed that only 31.5 percent of disabled people make use of RDSP. Among the vast majority who do not use this benefit, half never heard of it and half reported not earning enough to make use of it.

For lower-income groups with little-to-no savings, family members and social networks can provide needed supports (Osberg and Sharpe 2009; Western et al. 2012). But, these too can be limited and less reliable for people with disabilities and chronic health-related limitations (She and Livermore 2007). Wall (2017) outlines how approximately 37 percent of Canadians with disabilities either live alone, are single parents, or live with non-relatives, compared to 25 percent of non-disabled Canadians. People with disabilities living alone are more likely experience low income and poverty. For example, in Canadian households where both members have disabilities, the rate of low income was just under 20 percent compared to a person with a disability living alone at just over 50 percent and a lone disabled parent at around 55 percent. This is because members of single person households cannot share costs and risks or receive/provide support when they experience other economic losses. This also varies by disability type where individuals with cognitive and multiple disabilities are more likely to live alone and experience insecurity.

Because employment, financial, and family supports are so limited, many Canadians with disabilities make use of a variety of government income supports and this is more likely the case among people with cognitive disabilities. However, the "politics of austerity" (Béland et al. 2021) has often meant reducing supports for the most vulnerable including people with disabilities (Prince 2004) while favoring employed usually "middle-class" individuals through income supports like subsidized private plans (e.g., old-age pensions) and social supports by way of in-kind benefits or tax credits.

Means-tested benefits exclude many groups, particularly those with limited access to labor and financial markets, leaving them in a continuous struggle to stay afloat (Bagenstos 2017; Brown 2015; Whittle et al. 2017). To determine eligibility for provincial programs, people with disabilities are means-assessed based on their disability, the extent to which they can work, and their overall financial status and assets, including any family or household savings (Wood 2015). Among people with disabilities who were active in the labor force but unemployed in 2006, 30 percent were less likely to look for work because they believed they would lose their government supports if employed (Crawford 2013).

Although we assess the independent effects of each of these institutions—labor markets, financial markets, family, and government supports—it is clear that these institutions are linked. For instance, limited access to the labor market and meager means-tested government benefits affect people's ability to save and build wealth. This situation means that they often must rely on family for support. However, household members without disabilities may also face work interruptions if they are responsible for providing care to disabled household members over long periods. As Parish, Rose, and Swaine (2010) and McKnight (2014) note, this leads to less in household savings and a greater likelihood of living in poverty—a situation rendered ever more salient in times of crisis.

Crises, Risk, and the Distribution of Economic Insecurity

The "great risk shift" (Hacker 2006) means that households today face greater uncertainty than they did a half century ago, which has important implications for understanding insecurity during periods of heightened economic turmoil. In Canada, most households experienced some declines in economic wellbeing during the pandemic, but experiences varied by age, race, immigrant status, household structure, and disability status (Donaldson et al. 2021). Thus, the COVID-19 pandemic offers an opportunity to further explore how the most economically vulnerable and most likely to report feelings of insecurity make sense of unexpected events.

People with disabilities and chronic health conditions are more likely to be laid off in times of crisis, as was apparent in the Great Recession of the late 2000s (Fogg, Harrington, and McMahon 2010; Mitra and Kruse 2016; Reeves et al. 2014). The food, service, and sales sectors, where people with disabilities are clustered, were among the most affected by COVID-19 seeing some of the greatest job losses (Maroto and Pettinicchio 2014, Maroto, Pettinicchio, and Lukk 2021; Goddard 2020; Lemieux et al. 2020; Mather and Jarosz 2020). Others continued to work with fewer hours and less pay (see Lemieux et al. 2020; Qian and Fuller 2020), more hours and overwork, or within remote work, bringing on added stressors (Schieman and Badawy 2020).

COVID-19 also revealed holes in the social safety net as vulnerable individuals felt ignored and left behind by government (Arcaya, Raker, and Waters 2020; Pettinicchio, Maroto, and Lukk 2021). For those relying strictly on provincial disability benefits, many saw the amount of their supports stagnate while costs of living increased (Disability Civil Society Organizations 2021). Many turned to savings and credit to offset lower income and increasing costs, while those nearing retirement saw their life savings take a hit. Across the board, the pandemic increased worry and concern about economic insecurity.

Policy responses during the pandemic have already illustrated a liberal welfare response to economic crisis where income supports have been almost entirely tied to work. CERB (and later, CRSB), the chief COVID-related federal economic policy response, did effectively help many households throughout the pandemic, but it excluded disabled individuals without employment (Statistics Canada 2021). Without this key support, these individuals had to make use of a one-time $600 direct cash payment if they were registered with a Disability Tax Credit (DTC)—a revenue agency status disabled people must apply and qualify for if they are to make use of limited programs and benefits (like for example, RDSP). At the same time, governments have provided extensive supports to landlords and business owners, as well as mortgage supports to homeowners.

While Canada was early to respond to the economic turmoil caused by COVID-19 (Pettinicchio, Maroto, and Lukk 2021; Béland et al. 2021), those responses cannot be understood outside Canada's institutional arrangements. These policies reify who is and is not "deserving" of state supports. Even in times of crisis, justifications embedded in institutional and cultural logics are used to limit how governments intervene to support citizens, especially those who do not fit an idealized target of liberal welfare supports, which often are linked to employment. That is, solutions to mitigating financial insecurity brought on by crisis still lie outside the welfare state. Not surprisingly, faced with barriers to employment and insufficient government supports, many rely on family and household members, as well as credit cards and loans, to which access is highly variable (Hacker 2006).

Within a context of shifting risk from states to citizens, we examine how people with disabilities and chronic health conditions make use of different supports during a period of crisis and how their mobilization limits or contributes to feelings of economic insecurity. We expect respondents to rely on a combination of labor market, financial market, family, and government supports. Where one is lacking, other resources may or may not adequately fill those gaps. We explore how each set of supports and their linkages affect subjective perceptions of current and future insecurity, and how these vary based upon the severity of a person's disability.

Data and Methods

This mixed-methods project uses data from a national survey of 1,027 Canadian adults with disabilities and/or chronic health conditions and a set of 50 follow-up interviews to examine experiences of economic insecurity. We incorporated qualitative and quantitative methods at each point of the research process making this a fully integrated mixed methods project (Castro et al. 2010; Creamer 2018). This allowed us to build on the strengths of both sets of methods, providing a deeper understanding of experiences of economic insecurity.

Survey Data

Survey data come from an original quota-based online survey administered by Qualtrics, an Internet-based survey company that uses paid research panels of respondents, from June 11–22, 2020. The survey includes 1,027 respondents aged 18 and older who reported having one or more disabilities or health conditions. Data were collected via quota-based sampling to ensure a sample representing all 10 Canadian provinces. We do not employ poststratification weights because the lack of random samples of Canadians with disabilities and chronic health conditions limited our ability to determine on which population characteristics we should base any additional quotas or weights (Bethlehem 2010). However, most characteristics of this group (e.g., age, gender, and education) mirror those for individuals sampled in the Canadian Survey on Disability and Canadian Community Health Survey, a large probability sample (see Appendix S1).

We examine two variables as measures of subjective perceptions of current and future economic insecurity. We measure respondents' *perceptions of current economic insecurity* based on responses to the question, "Compared to one year ago, would you say your household's financial situation is worse than it was, the same, or better than it was?" It refers to comparisons made between current situations in 2020 and past situations in 2019. We measure respondents' *concerns about their future economic situations* based on responses to the question, "Looking ahead a year from now, do you expect your household's financial situation to be worse than it is now, the same, or better?" It refers to comparisons made between current situations in 2020 and expected future situations for 2021.

Table 1 presents descriptive statistics. Perceptions of current insecurity among people with disabilities and chronic health conditions were high during the pandemic. In total, 39.5 percent of participants perceived worsening economic insecurity in 2020 compared to the previous year. Most respondents also thought that their economic situations would not change much in the next year.

Table 1 Descriptive Statistics

	Sample Frequency	Proportion or Mean
Economic insecurity		
Current economic situation		
Worse	406	.395
Same	487	.474
Better	134	.130
Future economic situation		
Worse	252	.245
Same	497	.484
Better	278	.271
Disability severity		
Disability severity index (standardized)	–	0
Labor market		
Employment status (reduced variable)		
Employed	490	.477
Unemployed	45	.044
NILF (homemaker, retired, in school)	402	.391
Unable to work due to COVID-19	90	.088
Financial market		
Owns home	536	.522
Contributes to savings	655	.638
Family		
Partner present in household	544	.530
Any children in household	246	.240
Government supports		
Disability Tax Credit receipt	115	.112
CERB receipt	221	.215
Demographics and controls		
Age (mean years, range 18–87)	–	48.999
Gender		
Male	472	.460
Female	544	.530
Non-binary or other	11	.011
Member of a racial minority group	184	.179

Table 1
(continued)

	Sample Frequency	Proportion or Mean
Bachelor's degree or higher	360	.351
Province (reduced)		
Ontario	399	.389
Quebec	230	.224
BC	134	.130
Prairie provinces	199	.194
Atlantic provinces	65	.063

Sources: 2020 COVID-19 Response Survey of People with Disabilities and Health Conditions, N = 1,027 adults.
Notes: Estimates refer to sample data. Estimates provided as proportions unless otherwise specified.

Only 24.5 percent expected conditions to worsen in the next year and 48.4 percent expected them to remain the same.

In order to assess the relationship between disability and feelings of insecurity, we include a *disability severity* measure based on the combined number and severity of reported disabilities. Following Statistics Canada's measure within the Canadian Survey on Disability (Statistics Canada 2018), we measure disability severity as the average of the standardized scores for the severity of six different physical, cognitive, vision, hearing, emotional, and other limitations lasting 6 months or longer. For each of these separate disability measures, respondents were asked to report the presence and amount of difficulty in regard to each disability with options of no (0), sometimes (1), often (2), and always (3). For our combined measure of disability severity, we coded these answers as 0 through 3, standardized each, and then took the average of the scores.[2]

We incorporate four sets of predictor variables designed to assess the presence of supports across four institutional domains. We assess labor market domains with the variable *employment status*, which includes four categories of employed, unemployed, not in the labor force due to being a homemaker or retired, and unable to work due to COVID-19.[3] To assess financial market domains, we include two variables that measure homeownership and access to savings. *Homeownership* indicates whether the respondent or their spouse owned their home. *Any savings* indicates whether the respondent regularly contributed to any type of savings or retirement account, such as a Tax-Free Savings Account (TFSA), Registered Retirement Savings Plan (RRSP), employer pension, high interest savings account, or Registered Disability Savings account.

The family domain is assessed with two variables indicating the presence of a partner or children in the household. *Spouse/partner present* indicates whether the respondent has a spouse or partner present in the household. *Any children* indicates if there are any children under age 18 in the household. We assess government benefits with two variables—DTC receipt and CERB receipt. *DTC receipt* indicates if the respondent made use of the Canada Revenue Agency's DTC. *CERB receipt* indicates whether the respondent applied for and received the Canadian Emergency Relief Benefit.

We control for the respondent's *age* measured in years; *gender* indicated as male, female, or non-binary/other; *education* measured as whether the respondent earned a Bachelor's degree or higher; and *racial minority group* measured as whether the respondent identified with a racial or ethnic group other than white.[4] *Province/region* includes categories of Ontario, Québec, British Columbia, Prairie Provinces (Alberta, Manitoba, and Saskatchewan), and Atlantic Provinces (Newfoundland and Labrador, New Brunswick, Prince Edward Island, and Nova Scotia).[5]

We study these relationships through two sets of multinomial logistic regression models predicting perceptions of current and future insecurity. Multinomial models build on logistic regression models to allow for the inclusion of outcome variables with multiple categories. Within these models, the probability of membership in each category is compared to the probability of membership in a designated reference category (Liao 1994).[6] All models include robust standard errors clustered by province to account for the use of province-based quotas during data collection. For ease of interpretation, we report most results as predicted probabilities and average marginal effects (AMEs), which present the marginal effects averaged across the sample.

Interview Data

In addition to our survey data, we draw from 50 in-depth phone interviews conducted between August and November 2020 with respondents who requested to be contacted for follow-up interviews.[7] Of the 506 respondents who requested to be contacted for follow-up interviews, we sampled 100 and narrowed this list to ensure that people with different disabilities, health conditions, and other characteristics (i.e., age, gender, race) were represented in our interview sample. Interviews provided more nuanced accounts about if and how institutional supports were mobilized. We asked respondents to talk about their disability and health status as it relates to their everyday life, their employment situation and work life, their finances before and during the pandemic, as well as their future predictions, their efforts to adapt economically, socially, and emotionally to the pandemic, and their thoughts on government responses. Interviews ranged from 12 to 60 minutes in length with a mean of 33.9 minutes and a median of 33.4 minutes. Audio files were transcribed verbatim using an online audio-to-text transcription service and coded by the research team using Dedoose,

Interview analysis and coding occurred through an iterative process. An initial subset of transcripts was coded by each team member to generate a preliminary coding scheme, derived deductively based on the study's research questions and inductively based on additional emergent themes in the data (Deterding and Waters 2021). Once a preliminary set of themes and patterns were established, the research team coded interviews independently, meeting weekly to refine our procedure and establish inter-coder reliability. In this paper, we discuss results based on codes related to economic insecurity feelings and experiences, anxiety about the future, disability severity, employment situations, family relationships, government support, and savings/investments.

Findings

Our key research questions capture how individuals from certain status groups make sense of economic crises and mobilize a combination of supports in varying degrees to mitigate their deleterious impacts. The way these are accessed is tied to their subjective perceptions of economic security. We therefore organize our quantitative and qualitative findings in relation to disability severity and the mobilization of four types of institutional supports. Results from multinomial logit models appear in Tables 2 and 3 as AMEs.[8] Figure 1 presents predicted probabilities for reporting worse, same, or better current insecurity compared to 1 year ago based on levels of the key predictor variables. Figure 2 presents results for future economic insecurity.

Perceptions of Insecurity by Disability Severity

Disability severity was significantly associated with assessments of current and future economic insecurity, as shown in Tables 2 and 3. For instance, an increase in the severity index was associated with an 11.9 percentage point increase in reporting worsening current insecurity (Table 2) and a 9.7 percentage point increase in reporting worsening future insecurity (Table 3).[9] Figures 1 and 2 expand on these findings, presenting predicted probabilities for

Table 2 Results from Multinomial Logistic Regression Models Predicting Current Economic Situation

	Worse		Same		Better	
	AME	SE	AME	SE	AME	SE
Disability severity	.116***	(.025)	−.093***	(.015)	−.022	(.022)
Employment status (Ref: Employed)						
Unemployed	.320***	(.054)	−.292***	(.029)	−.028	(.055)
Not in labor force	.019	(.035)	.053	(.041)	−.071***	(.019)
Unable to work due to COVID-19	.169**	(.053)	−.096	(.087)	−.073	(.050)
Homeowner	−.039	(.047)	.068	(.037)	−.029	(.033)
Any savings	−.075**	(.025)	.009	(.006)	.066**	(.022)
Partner present in household	.037	(.036)	−.084*	(.037)	.047	(.029)
Any children in household	.067*	(.033)	−.037	(.031)	−.030	(.018)
Disability Tax Credit receipt	−.087**	(.033)	−.046	(.046)	.134**	(.048)
CERB receipt	.111***	(.031)	−.103***	(.030)	−.007	(.012)
Age	.003***	(.001)	.000	(.001)	−.002***	(.001)
Gender (Ref: Male)						
Female	.006	(.032)	.004	(.038)	−.010	(.015)
Other	.024	(.163)	−.059	(.139)	.035	(.086)
Non-white	.061**	(.022)	−.040	(.027)	−.021*	(.010)
Bachelor's degree or higher	.040***	(.008)	−.050***	(.009)	.010*	(.005)

Table 2
(continued)

	Worse		Same		Better	
	AME	SE	AME	SE	AME	SE
Province/Region (Ref: Ontario)						
Quebec	−.018***	(.003)	.054***	(.004)	−.036***	(.002)
BC	−.057***	(.004)	.099***	(.008)	−.042***	(.005)
Prairie provinces	.067***	(.011)	−.053***	(.012)	−.013**	(.004)
Atlantic provinces	−.080***	(.010)	.041*	(.018)	.038***	(.009)
Pseudo R-Squared	.072		.072		.072	

Source: 2020 COVID-19 Response Survey of People with Disabilities and Health Conditions, N = 1,027 adults.
Notes: Logistic regression models predicting probability of reporting a worsening financial situation. Continuous variables are mean centered. AME refers to average marginal effects, which can be interpreted as a percentage point change in the probability of the outcome category associated with a unit change in the predictor variable. Robust standard errors clustered by province are in parentheses.
***p < .001, **p < .01, *p < .05.

Table 3 Results from Multinomial Logistic Regression Models Predicting Future Economic Situation

	Worse		Same		Better	
	AME	SE	AME	SE	AME	SE
Disability severity	.097***	(.019)	−.109***	(.016)	.012	(.022)
Employment status (Ref: Employed)						
Unemployed	.069	(.070)	−.163*	(.066)	.094*	(.048)
Not in labor force	.050**	(.017)	−.026	(.049)	−.024	(.041)
Unable to work due to COVID-19	.077*	(.038)	−.077	(.091)	.001	(.082)
Homeowner	−.001	(.009)	.020	(.018)	−.019	(.014)
Any savings	−.028	(.033)	.029	(.041)	−.001	(.037)
Partner present in household	−.019	(.021)	−.049	(.027)	.069	(.040)
Any children in household	.068	(.043)	−.038	(.032)	−.029*	(.015)
Disability Tax Credit receipt	−.118***	(.018)	.074	(.040)	.045	(.029)
CERB receipt	.043	(.028)	−.080***	(.024)	.037	(.022)
Age	.004***	(.001)	.001	(.001)	−.005***	(.001)
Gender (Ref: Male)						
Female	.022	(.033)	−.009	(.046)	−.014	(.020)
Other	−.028	(.220)	−.050	(.168)	.078	(.106)
Non-white	.063	(.035)	−.091	(.052)	.028	(.023)
Bachelor’s degree or higher	.003	(.011)	−.016	(.038)	.013	(.030)

Table 3
(continued)

	Worse		Same		Better	
	AME	SE	AME	SE	AME	SE
Province/Region (Ref: Ontario)						
Quebec	−.044***	(.005)	.066***	(.010)	−.022***	(.006)
BC	−.019*	(.008)	.047***	(.007)	−.028***	(.006)
Prairie provinces	.011	(.006)	−.037***	(.008)	.026*	(.010)
Atlantic provinces	.021*	(.009)	.008	(.007)	−.028***	(.008)
Pseudo R-Squared	.056		.056		.056	

Sources: 2020 COVID-19 Response Survey of People with Disabilities and Health Conditions, N = 1,027 adults.
Notes: Logistic regression models predicting probability of expecting a worsening financial situation in the future. Continuous variables are mean centered. AME refers to average marginal effects, which can be interpreted as a percentage point change in the probability of the outcome category associated with a unit change in the predictor variable. Robust standard errors clustered by province are in parentheses.
***p < .001, **p < .01, *p < .05.

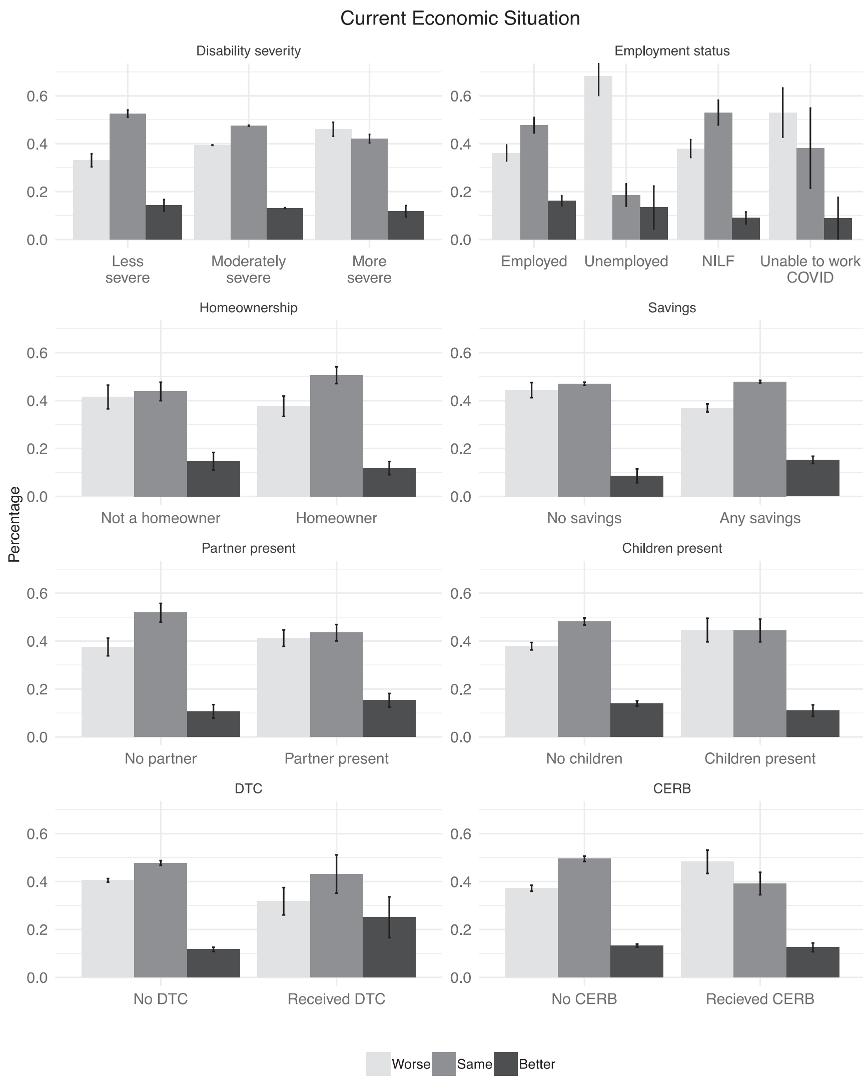

Figure 1 Assessment of Current Economic Situation Compared to Previous Year. *Source*: 2020 COVID-19 Response Survey of People with Disabilities and Health Conditions, N = 1,027 adults. *Notes*: Point estimates and 95% confidence intervals. Predicted probabilities and 95% confidence intervals based on results from multinomial logit models in Table 2.

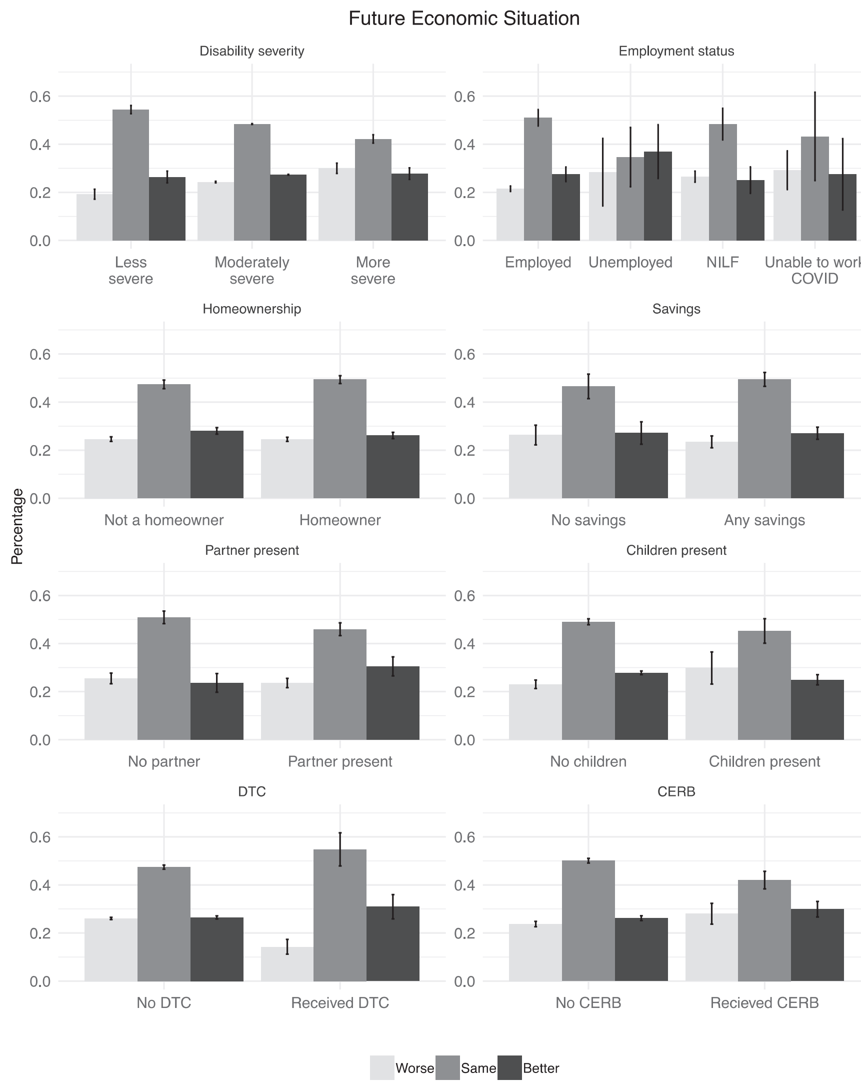

Figure 2 Assessment of Future Economic Situation Compared to Current Year. *Source*: 2020 COVID-19 Response Survey of People with Disabilities and Health Conditions, N = 1,027 adults. *Notes*: Point estimates and 95% confidence intervals. Predicted probabilities and 95% confidence intervals based on results from multinomial logit models in Table 3.

individuals with less severe (one standard deviation below the mean), moderately severe (mean level), and more severe (one standard deviation above the mean) disabilities.

Thirty-three percent of people with less severe disabilities perceived worsening current insecurity, compared to 46 percent of respondents with more severe disabilities, net of other controls (Figure 1). A similar gap existed for future insecurity; 19 percent of people with less severe disabilities expected insecurity to worsen in the upcoming year, compared to 30 percent of respondents with more severe disabilities (Figure 2). For respondents with more severe disabilities, the probability of perceiving worsening situations actually surpassed the probability of viewing situations as stable.

Interviews further revealed how different disabilities and health conditions shaped employment status and income, and in turn, perceptions about current and future financial security. Glenn, who is deaf, has cardiovascular disease, and experiences blackouts, described the decline in wages from his sales job after he returned to work from being laid off. Despite a two-thirds reduction in income, Glenn explained that he cannot be moved to a job with physical strength requirements or where heavy machinery is involved within the furniture chain he works for due to his disability and health status. Glenn's lack of employment income left him concerned about his financial situation: "The banks are still taking their fees. They're still taking the mortgage payments. There's no really relief on anything. Even if it comes down to wages, we can get laid off tomorrow. We don't even know. Or the company can close the stores because they can't pay the bills." He does remain hopeful that work will normalize, but is prepared to find another job, even one that may exacerbate his health condition, if he cannot get his sales income back to where it was.

Interviews also revealed that respondents with more severe disabilities and with multiple disabilities and chronic health conditions struggled most before the pandemic with bleaker financial outlooks. For example, in addition to stage four osteoarthritis, Esther also has fibromyalgia, depression, high cholesterol, and high blood pressure. As she explained, the combination of these directly prevented her from working and saving money for the last decade. The pandemic also left important community and health services inaccessible in her region. She noted, "it's near impossible to get the help you need. It's near impossible." She also expressed concerns about likely surges in cases, and further economic turmoil that will put her at greater risk because of her disability and health statuses.

Institutional Supports that Limit Feelings of Insecurity

Among people with different disabilities and health conditions, four institutions stood out as affecting perceptions of insecurity—employment, family, savings, and government supports. The most advantaged respondents reported receiving support from all areas. However, for many, a lack of support in one area was made up for by extra supports in others, although these were not always adequate. For instance, those who lost their jobs during the pandemic reported greater levels of security when compared to those who were not working prior to the pandemic because of pandemic-specific government supports available to them, like CERB. Additionally, those who had savings and investments beforehand felt better prepared to weather the pandemic.

Employment as Central to Security. As shown in Figure 1, employed respondents felt more secure than those without employment. Across employment statuses, 68 percent of unemployed respondents, 53 percent of those who could not work due to COVID-19, 38 percent of respondents not in the labor force for other reasons, and 36 percent of employed respondents perceived worsening insecurity compared to the previous year (Figure 1, Table 2). Fewer differences were present in terms of expectations for the upcoming year. However, those not in the labor force were more likely than employed respondents to expect that insecurity would continue to worsen by 5 percentage points, and unemployed respondents were more likely than employed respondents to believe that their situations would improve in the upcoming year by 9 percentage points, likely once they found employment (Figure 2, Table 3). Lina, a single mother with fibromyalgia, felt her security largely depended on whether she could get a part-time job to supplement her government disability supports during and post-pandemic.

Respondents who were employed before the pandemic, particularly those in good jobs, felt much more financially secure throughout the pandemic. Reagan, a single mother with asthma, diabetes, and lymphoma, told us she was "not bad" financially before the pandemic, even though she ran into financial difficulties a few years earlier and lost her home. What eased her concerns were the employment benefits, income, and flexibility associated with her federal government job. Although she was concerned about retirement savings, she noted, "For myself, no, I don't think COVID's going to have a whole lot of impact, just because I work for the government and nothing's impacted them at all, really, financially."

Similarly, Evan, who has debilitating asthma, attributed his sense of financial security to remote work with no disruptions to his income or investment contributions during the pandemic thus far. Like Evan, Jean-Marc, who has agoraphobia and anxiety, was able to continue working from home as a municipal business development advisor. Still paying down student debt, he described his financial situation before the pandemic as "ok." Even though seeing no disruption in employment income, the pandemic made financial precarity more salient for Jean-Marc. He noted, "it made me realize that I needed to save more money, because if I was to lose my job, or if anything was to happen, my savings aren't enough to pay the bills," highlighting the importance of other supports when employment disappears.

Importance of Savings. Respondents also relied on their savings to limit insecurity over the course of the pandemic. Respondents with any savings were 7.5 percentage points less likely to report worsening insecurity and 6.6 percentage points more likely to report improvements (Table 2). This meant that 44 percent of persons without savings felt increasing insecurity compared to 37 percent of those with savings (Figure 1).

Jean-Marc's optimism about his financial future is in part a response to his job security but, relatedly, an expectation of saving more money that is facilitated by having a good job. He said, "I believe I have a good salary, but yeah, I would like to save more than I am doing right now." Several individuals felt more encouraged to save because of the crisis. Aayan was working and very concerned about contracting the virus at her job. She said: "If I have to take time off of work I need to be covered because my employer does not support those that are off from work." She has her own "rainy day fund" and told us her future financial situation "would be better because of my focus on savings and my prioritization of my money." Aayan's interview is a salient example of how respondents are making sense of their personal financial situations before and during crises, and the way different supports work in limiting insecurity throughout.

Donald, a postal worker with high blood pressure, took a voluntary leave of absence from his job because of health risks brought on by COVID. He felt financially secure before the pandemic and, emphasizing his long-term investments told us that the pandemic has done little to change that. Antoine, a school bus driver with diabetes and high blood pressure, explained that "We had a few dollars saved up so I'm not too worried about it right now. I'm just getting my usual unemployment insurance and working on my savings." Although Antoine was not receiving employment income, he was able to supplement combined savings from he and his wife with government benefits like employment insurance.

This does not mean that all individuals who were able to tap into their savings felt secure. Maryam, a freelancer, believed she otherwise would have had more work if not for COVID. She was relying completely on her savings as a stop gap, hoping she would find steady work soon. Others expressed concerns about losing their life-long savings, especially those nearing retirement. Robert, age 60 with vision and other physical disabilities, said: "I definitely don't feel financially secure…the way the pandemic is going and they are already talking about a second wave possibly hitting the stock markets even more. It's hard to say." Beck-Ann and her husband were "extremely worried" about their savings. She told us that "All our lives we've put money aside for retirement and figured we had enough. But now with the economy and the stock markets and everything we're really worried." Many respondents drew from their experiences with the 2008 Great Recession informing their perceptions of current and future insecurity. For example, Sydney, a retiree with an autoimmune disease and asthma, believed she would make it through "unless the stock market toasted. In 2008, I lost a whole lot of money and it took a long time to come back."

Family Situation. Individuals who entered the pandemic without jobs or savings relied on family, local charities, and social service agencies, but many charities and agencies became unavailable during lockdowns, and many individuals, like Esther, did not have family or extended family to rely on. Family also offered *both* benefits and drawbacks for security. Although having a partner present in the household was associated with increased security, having children present often resulted in the opposite (Table 2). Furthermore, as the interview data show, the effects of having family present in the household depended on each individual's employment situation.

As expected, having another income earner in the household helped offset added costs of living and work interruptions and it helped assuage fears about financial uncertainty. As Dillan and his wife explained, they were "making ends meet" because Dillan was employed, and his wife received generous private disability benefits which offset a majority of medication costs. At the same time, Dillan noted the potential role of other family members if their situation changes. Concerned about his health safety at work, Dillan said he had thought about quitting: "I think that it might involve me moving in with my parents and having my in-laws take care of my wife for a while. That's kind of worst-case scenario and I am fairly hopeful."

Respondents who expressed concerns about their financial situations also mentioned the importance of other household earners and family more generally. When asked about economic security, Darren told us "I'm going to say not that secure because my wife is still working, but I am not. So, we're down to less than half. Because I was the main earner. Now, I still have a big mortgage to pay off, so that's my biggest concern." Dawn left her retail job a decade ago due to her anxiety for which she sees a mental health professional and takes medication. She did not feel financially secure, but she lived with her son who contributed to the rent. These qualitative findings shed a great deal of light on how family supports help mitigate feelings of insecurity in varying degrees given different family and household arrangements.

Although other household members often care for people with disabilities, we also found respondents with disabilities providing financial and other supports to their family members, included extended family. For example, Glenn used his savings to help other members of his extended family who lost their jobs: "The problem is more so helping other family members that have been laid off and so forth. So that's taken a big chunk of my savings." Thus, many respondents relied on a mix of family supports and savings to cover other income losses. For some, these supports went to helping family experiencing income losses.

Government Supports. Despite being means-tested and limited, government benefits helped respondents who had access to them. Individuals who received the DTC were less likely to perceive worsening insecurity during the pandemic by 9 percentage points (Table 2) and less likely to expect their future situations to worsen by 12 percentage points (Table 3). As Figures 1 and 2 show, among those who did not receive the DTC, 41 percent reported worsening insecurity compared to last year, and 26 percent expected their situations to continue to worsen in the upcoming year. Thirty-two percent of respondents who received the DTC believed their situations had worsened compared to last year, and 14 percent expected their situations to continue to worsen in the upcoming year. Most expected their situations to remain stable.

Interview data show that disability benefits were important to those without employment. For instance, Pat has severe depression and affective schizophrenia. Although unemployed, he explained: "Well, I'm on disability so basically, yeah, I get a regular paycheck compared to people who might have a paycheck that fluctuates." In addition to regular provincial disability benefits, Pat also receives a private disability pension from his government job. Before the pandemic, Cheyenne, who has osteoporosis and OCD, described her financial situation as "ok," receiving both provincial disability income supports and employment wages.

The receipt of CERB benefits, which only applied to respondents who lost their jobs during the pandemic, was negatively associated with current security. Those who received CERB were 11 percentage points more likely to perceive worsening financial situations (Table 2). *This finding does not mean that CERB directly led to feelings of insecurity*. Respondents already had to experience some level of insecurity due to job loss to qualify for it. For instance, 70 percent of those who were not working due to COVID-19 applied for CERB, and, among those not working due to COVID-19, the relationship between CERB and financial insecurity was much weaker.

Interview data show that CERB proved important for those who lost employment during the pandemic. Pat is in a dual-income household and although his wife was laid off during the pandemic, she received CERB contributing to their feelings of financial stability. Let go from her job because of COVID-19, Cheyenne directly attributed her ability to stay afloat to CERB. She says, "with CERB I am earning about as much as I would have if I was working full time, if the pandemic hadn't occurred. . .I was already in support of universal basic income, but I feel like it's even more important now."

However, CERB was not always enough for those who were struggling. Daniel, for example, who has HIV told us he already had higher living expenses before the pandemic. He is living in one of the most expensive real estate markets in the world and working in the hospitality sector, which was devastated by travel bans. He told us: "It's really not a lot to survive on. For myself and for many people. I mean, my rent is $2,100 a month and the CERB is $2000. So, once you factor that in plus all your other bills, it's pretty scary. It's a pretty precarious place to be."

Many other respondents receiving government supports were concerned that these were not enough to cover everyday expenses. Dina, a landed immigrant with multiple sclerosis, is on long-term disability. Although her disability income has not changed, Dina explained, "Hydro seems to be more expensive now than ever. Rent just went up. It's all these little things and it all adds up so you find you've got less money to spend on food, basically, at the end of the month." Commenting on rising costs of living, Lina was surprised that more government supports have not been enacted for those receiving disability benefits: "I feel like if you're receiving government assistance for reasons of being unable to work, that you're still affected financially by COVID . . . Whether you're working or not, I feel like you're still being affected by it in one way or another."

Respondents revealed variation in how they made use of different government benefits, many noting their limited nature. Although Bailey, who has spina bifida, pointed to the stability of her provincial disability benefits in assuaging anxieties about her financial future, she must also rely on local charities to offset unexpected expenses and rising costs during the pandemic. But when community supports became unavailable, it placed individuals closer to the edge. Esther relied heavily on community supports and services, which she was not able to get during the pandemic, putting her in jeopardy of not finding adequate housing: "I'm scared about that because I do need the help, very much so. I need the community services. Even housing that I used to have been able to get help through they're no longer there. It's sad what COVID's done to everybody."

Thus, for those without employment income or savings, government benefits were important for survival, but as these stories show, they did not always limit feelings of economic insecurity. Different combinations of employment, savings, family, and government supports were mentioned by respondents in articulating their outlook—positive or negative—on economic security. Although regression results indicated that each institution separately affected economic security net of the others, interview data show just how intertwined these factors were.

Discussion

The global pandemic has revealed extant structural inequalities affecting members of a marginalized group often overlooked in studies of stratification and in social policies. We illustrate how these disparities affect perceptions of economic insecurity. Theoretically, we expand economic insecurity to focus on subjective definitions and perceptions of insecurity beyond employment precarity. This allowed us to show how multiple institutional factors limit and expand feelings of insecurity. Methodologically, our mixed-methods approach demonstrates the utility of incorporating survey and in-depth interview data into studies of insecurity and precarity. It was an opportunity to show first-hand the interplay between health and disability status and how institutional arrangements shape feelings of financial insecurity.

Although our mixed-method study design helped us to overcome some of the drawbacks present in quantitative and qualitative research, our study did face certain limitations. First, although our sampling method allowed us to quickly contact members of a hard-to-reach population during a crisis, our use of an online panel sample likely missed people without access to the Internet. Future studies would benefit from the inclusion of other participant contact methods to ensure that populations are not overlooked. Second, our smaller sample size limited our ability to delve into important variation by disability type, race, and other characteristics. However, although were unable to compare outcomes across different types of disabilities and conditions, by examining the number of disabilities and conditions, we were able to assess the severity of disability within our models. Third, we also rely on single-item retrospective measures for perceptions of current and future economic insecurity. More robust measures that include assessments of different areas of insecurity could reveal even more about the importance of different institutional domains.

Conclusion

The crisis brought on by COVID-19 is an example of an extreme exogenous shock to everyday life. The pandemic may be seen as out of one's control, but financial insecurity continues to be viewed as a personal problem that influences how governments act. Although welfare state institutions are considered particularly important in mitigating feelings of insecurity among disadvantaged groups in the labor market (Chung and Mau 2014), individual responsibility continues to be used as a justification to limit how governments intervene to support citizens especially those who do not fit an idealized target of liberal welfare supports (Ilcan 2009).

The pandemic offers an opportunity to examine institutional supports in relation to more long-term political developments that have led to widespread economic insecurity. The focus on austerity and deficit reduction in Canada over the last 40 years failed to include people with disabilities in discussions of redistribution and reforms to public finance. Additionally, heavy reliance on provinces to provide support to people with disabilities furthered the divestment of federal government responsibility. Both of these long-term trends have left a "patchwork" of programs and policies raising questions about how redistribution of economic resources (e.g., income and social supports) interacts with equal rights and human rights mandates and what this means for marginalized communities (Prince 2004). The pandemic continues to shine a spotlight on these structural holes in Canada's social safety net. It is an example of the ways in which social exclusion continues in the shadow of equal rights laws when individuals continue to be economically marginalized.

A growing movement among Canadians with disabilities has recently placed a new spotlight on potential discrimination and violations of the Canadian Charter of Rights and Freedoms by federal government COVID-19 economic policy responses. This case points to the importance of the links between objective economic vulnerabilities and institutional supports and perceptions of security in understanding social policy. As Chung and Mau (2014:304) so poignantly state, "the legitimacy and effectiveness of policy interventions rely on the way they are perceived by individuals."

Examining the lives of people with disabilities and chronic health conditions during a crisis illustrates how many people already living on the edge prior to an exogenous shock are made more vulnerable. Shining light on policies governing resource allocation, it provides much needed insight into how the constellation of supports in liberal welfare regimes are mobilized to limit exposure to risk and insecurity, especially when economic supports tied to employment are made unavailable.

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Data availability statement

Our data are not yet publicly available. The survey data will be posted later this summer to the Consortium for Political and Social Research (ICPSR) COVID-19 data repository. Until then, researchers can access our data by contacting us via email.

ENDNOTES

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[1]The plan for this study was reviewed and approved by a a Research Ethics Board at the University of Alberta (REB Ethics ID Pro00101049) and at the University of Toronto (protocol reference number 39352).

[2]We first standardized the six original variables to account for differences in dispersion across these variables and assigned them the same weight in determining the final composite variable.

[3]The category, "unable to work due to COVID-19," was an option provided to respondents. It may include those who could not work due to their disability and those unable to work because businesses were closed or laid off workers.

[4]Reduced categories for the racial minority group variable are used due to sample size limitations.

[5]We grouped smaller provinces together due to sample size limitations.

[6]Ordered logistic regression models present another alternative for analyzing ordered categorical data. However, these models assume that the relationship between each pair of outcomes is the same (proportional odds or parallel regression assumption) and initial model tests, including a likelihood ratio test and a Brant test, showed that our data violated this assumption. We therefore chose the more flexible multinomial logistic regression model for our analyses. Ordered logistic regression results are available in the Appendix S1.

[7]The Appendix S1 provides additional details about interview respondents.

[8]Full model results appear in the Appendix S1.

[9]Although AMEs present a good summary for binary and categorical predictor variables where marginal effects measure discrete change, for continuous variables they only provide an approximation of the amount of change in the outcome variable that will be produced by a one-unit change in the predictor variable. This is because they provide the instantaneous rate of change for continuous variables based on the first derivative. We therefore primarily discuss these relationships using predicted probabilities.

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SUPPORTING INFORMATION

Additional supporting information may be found online in the Supporting Information section at the end of the article.