Socioeconomic effects of poverty and disability in Mexico: 2020

Efectos socioeconómicos de la pobreza y discapacidad en México: 2020

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Abstract

Poverty and disability are interconnected and complex social problems that affect the quality of life of millions of people around the world. Despite this relationship, it has received little attention and the available information shows that a disproportionate number of people with disabilities live in conditions of extreme poverty. The objective of the research was to analyze the effects of poverty and disability in the Mexican population. This analysis was carried out using the poverty calculation of the National Council for the Evaluation of Social Development Policy (CONEVAL, 2021), through the STATA 13.0 program. It was found that disability increases the prevalence of poverty in the general population by 6%. The most affected age group were Minors and Youth, increasing the prevalence of poverty by 20% in the presence of disability. If a head of the family has a disability, the prevalence of poverty increases by 6.9%. Poverty appears to be lower when illiteracy and disability are present. Each additional family member with a disability increases the incidence of poverty by 9 per cent. A differentiated and very marked incidence of poverty in persons with disabilities can be observed.

Keywords: Poverty; Disability; Age; Sex; Illiteracy; Overcrowding.

Resumen

La pobreza y la discapacidad son problemas sociales interconectados y complejos que afectan la calidad de vida de millones de personas en todo el mundo. A pesar de esta relación, ha recibido poca atención y la información disponible muestra que un número desproporcionado de personas con discapacidad vive en condiciones de pobreza extrema. La investigación tuvo como objetivo analizar los efectos de la pobreza y la discapacidad en la población mexicana. Este análisis se realizó mediante el cálculo de pobreza del Consejo Nacional de Evaluación de la Política de Desarrollo Social (CONEVAL, 2021), mediante el programa STATA 13.0. Se encontró que la discapacidad eleva la prevalencia de la pobreza en la población en general en 6%. El grupo de edad más afectado fueron Menores y Jóvenes incrementando 20% la prevalencia de pobreza en presencia de la discapacidad. Si un jefe de familia presenta discapacidad eleva la prevalencia de la pobreza en 6.9%. La pobreza parece ser menor cuando el analfabetismo y la discapacidad están presentes. Cada integrante adicional de la familia con discapacidad aumenta en 9% la incidencia de pobreza. Se puede observar una incidencia diferenciada y muy marcada de la pobreza en personas con discapacidad.

Palabras clave:: Pobreza; Discapacidad; Edad; Sexo; Analfabetismo; Hacinamiento.

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Introduction

More than one billion people in the world suffer from some form of disability, 20% of whom have serious developmental problems (Bellina, 2013). This significant number of people worldwide are affected by poverty and disability, which are two complex and interrelated social issues. Disability can increase the risk of falling into poverty and, in turn, poverty can increase the risk of becoming disabled. Despite this relationship, the interaction between these two issues has received little research.

People with disabilities have more difficulty accessing services and opportunities such as education, employment and health care, which can further hinder their ability to escape poverty. This lack of attention is alarming because disability and poverty significantly affect the quality of life, health and well-being of those affected.

It is important that the research not only focus on a theoretical understanding of the relationship between poverty and disability, but also conduct empirical research using survey and interview data. The results of this study should provide valuable information for the development of policies and programs that address poverty and disability more effectively.

Disability refers to the physical, mental or hearing impairments of some people that may make it difficult for them to participate fully in society. For their part, Braña and Antón (2011), disability is a functional restriction that depends not only on a medical situation, but also on the interaction with the environment, which entails a loss of independence, physical or mental, that hinders the performance of some daily activities, although not all have the same level, since household activities are more difficult and complex than self-care activities. In similar terms, the Convention on the Rights of Persons with Disabilities (2014) mentions that disability is a functional restriction that does not depend only on a medical situation, but also on the interaction with the environment, which entails a loss of independence, physical or mental, that hinders the performance of some daily activities, although not all of them have the same level, since household activities are more difficult and complex than self-care activities.

People with disabilities are among the population groups most at risk of living in poverty, especially in developing countries, and of social exclusion in more advanced countries. Information on disability and poverty is scarce, and what information there is, reflects that, although not all people with disabilities are poor, there is a disproportionate number of these people living in extreme poverty in all countries (Martínez Ríos, 2011).

In general, poverty is a phenomenon that aggravates the situation of people with disabilities. Establishing the trajectories that these people follow to become poor is a complex task. However, what should be visible as well as worrying is how these two entities, disability and poverty, become a framework that promotes and enhances the risk of disaffiliation of the individual from society (Castel, 1997).

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People with disabilities are among the population groups most at risk of living in poverty, especially in developing countries, and of social exclusion in more advanced countries. Information on disability and poverty is scarce, and what information there is, reflects that, although not all people with disabilities are poor, there is a disproportionate number of these people living in extreme poverty in all countries (Martínez Ríos, 2011).

The Pan American Health Organization (PAHO, 2006) mentions that the poverty of people with disabilities is due to different factors, both personal and environmental. These factors include material aspects such as: poverty level, work, income, extraordinary expenses, debts, personal assets, consumption and housing. They also include the services that people with disabilities obtain in relation to education, health, rehabilitation and social inclusion. As well as the social and psychological aspects of poverty such as: self-esteem, stigma, social contact, marriage, violence, power and authority. There is also a key aspect that cuts across all of them, which is accessibility.

The purpose of this work is to analyze the relationship between poverty and disability, to know the factors that affect the phenomenon and the possible solutions to reduce the problem, to see the state of poverty of the disabled population in Mexico and to observe its behavior in other countries in order to have a broader context of the subject, analyzing the different socioeconomic factors that surround this relationship, so that we can have a clear idea of this problem and orient towards those areas of opportunity that could improve the quality of life of this population.

The hypothesis of this paper is that people with disabilities are generally poorer than the non-disabled population, due to the limitations imposed by the conditions suffered by this population.

This article is made up of 6 sections, including this one, which is the introduction; the second section refers to the theoretical framework, the methodological framework, results and, finally, the conclusions, in which a summary of the findings is presented.

2. THEORETICAL FRAMEWORK

The theoretical framework focuses on the relationship between poverty and disability, and seeks to establish the conceptual basis for understanding the interconnection between these two phenomena.

According to figures from the Regional Rehabilitation Program of the Pan American Health Organization, there are about 85 million people with disabilities in Latin America, of whom only 2% receive solutions to their needs (PAHO, 2006).

This situation will be aggravated by the increase in new, recurrent and chronic diseases.

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War, social violence, accidents of any kind, and the consumption and excess of alcohol and drugs are serious factors that cause disability, as are the aging of the population, malnutrition, neglected children, marginalized social groups, extreme poverty, disenfranchisement of groups of people, and natural disasters (PAHO, 2006).

To truly "end poverty in all its manifestations throughout the world," as proposed by the first Sustainable Development Goal, it is necessary to know what all these manifestations are. We must have a much more precise idea of who are the people who suffer most from exclusion and fragility. Not only people who are economically poor, but those who suffer from several different inequalities, such as gender, race and ethnicity, which together prevent them from having a healthy and productive life (United Nations, n.d.).

The problem is immersed in a sea of factors that affect this situation, so it must be analyzed from several fronts in order to find those aspects that influence the problem in a pre-weighted way. This implies a great commitment on the part of countries and organizations in general, which must seek the underlying causes of poverty among vulnerable groups so that the problem can be attacked at its root and a solution to the problem can be found.

Disability and poverty, the combination of disaster.

The World Report on Disability even goes so far as to state that 82% of people with disabilities in the global south live in poverty. It goes on to note that one in five of the poorest people in low-income countries are persons with disabilities (WHO, 2011).

One of these probable causes is that poverty can diminish the most indispensable resources of households, thus generating scenarios that make disability more likely to occur. In addition, the situation of poverty generates an increase in costs, for example, health-related costs, and makes it difficult for the family to cover them (Hernández Jara- millo and Hernández Umaña, 2005).

Mitra (2004), on the other hand, states that disability is the hidden side of African poverty, and that for many years there has been a "vicious circle" whose components are poverty and disability, since, in many cases, the disability status of an individual prevents him or her from engaging in employment.

It appears that there is a reciprocal relationship between poverty and disability, in such a way that one empowers the other. This relationship has been found in many of the investigations that address this issue (Cruz-Velandia and Hernández-Jaramillo, 2006; Grech, 2016; Martínez Ríos, 2011).

Sen (1999), argues that poverty can be understood as the lack of well-being, in addition to the scarce distribution of income and, together with extra stress factors for this population, they end up aggravating their condition even more. On the other hand, Grech (2016), indicates that poverty makes people more prone to disability, and the existence of a disability in situations of

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poverty, is confronted with a range of personal, socioeconomic, cultural/ideological, infrastructural and political obstacles that contribute to either the generation or exacerbation of poverty.

Finally, it is estimated that only 2% of people with disabilities in developing countries have access to rehabilitation and appropriate basic services. This makes it necessary to attack the problem head-on and with a strategy that will prevent poverty from perpetuating itself, especially among the most disadvantaged segments of the population.

Prevalence of Disability in Developed and Developing Countries

Although international comparative data on the prevalence of different impairments should be handled with the utmost care, since research strategies and procedures employed in different countries are often incompatible. However, as mentioned above, the majority of the population with disabilities is found in developing countries. Despite this, reports on the incidence of both impairment and disability indicate that the incidence is generally higher in wealthier countries (Eide and Loeb, 2006).

There are several possible explanations for this. First, rich countries have better health and support systems. Thus, a higher survival rate is achieved, both among people with impairments at birth and among those who acquire an impairment later in life. Second, life expectancy is markedly longer in rich countries, and the chance of acquiring an impairment increases considerably with age. Third, there are certain conditions, such as dyslexia, which are possible causes of disability in technologically advanced societies, but which involve few problems for people living in rural environments and would therefore not be considered a disability (Barnes and Mercer, 2003).

3. METHODOLOGY

To carry out the analysis of poverty and disability in the population of Mexico in 2020, this research used a quantitative approach, descriptive in scope. The National Household Income and Expenditure Survey (ENIGH) 2020 was used as a data collection technique and for the calculation of multidimensional poverty, the data obtained were processed and analyzed using statistical software (STATA 13.0). Inclusion and exclusion criteria will be established to ensure the adequate selection of the sample and the validity of the results obtained.

In addition, the methodology of the National Council for the Evaluation of Social Development Policy (CONEVAL) was used to measure poverty, particularly the multidimensional poverty index.

Under the multidimensional poverty model, an individual is in poverty when he or she does not have access to at least one of his or her social development rights, and a level of income is insufficient to acquire the goods and services to cover basic needs (CONE- VAL, 2021).

For this work, variables such as age were considered, which are divided into 4 groups: minors (from 1 to 12 years old), youth (from 13 to 17 years old), adults (from 18 to 64 years old) and older adults (from 65 years old and over), sex (male or female), illiteracy (unable to read and write or able to read or write).

On the other hand, variables necessary to carry out this research were constructed. The variable of "types of disability" was constructed, listing the eight categories that appear in table 1 of POPULATION (0 Does not have any disability, 1 Walking, 2 Seeing, 3 Arm (able to move arms), 4 Learning, 5 Hearing, 6 Dressing (able to dress without help), 7 Speaking (able to communicate), 8 Activities (able to carry out daily activities without help) and 9 people with 2 or more disabilities). In addition, it should be taken into account that to be considered disabled the severity of the affliction should be "does it with great difficulty" (in this case when the variable's parameter is a value between 1 and 2) (CONEVAL, 2021).

The variable "number of disabilities" was created (which accounted for how many disabilities the individual had). The variable "cause" was constructed to account for the origin of the disability (0 No disability, 1 Due to illness, 2 Due to old age, 3 Because he/she was born that way, 4 Due to an accident, 5 Due to violence, 6 Due to another cause).

The variable "disabled head of household" was developed to account for when the head of household had a disability, and finally, the variable "overcrowding" was developed to account for the number of household members with a disability.

Subsequently, a detailed analysis of the prevalence of poverty was carried out with the aforementioned variables in relation to their poverty status and sex (age, illiteracy, types of disability, origin of disability, disabled head of household and overcrowding).

4. RESULTS AND DISCUSSION

In this section, a detailed analysis was made of the poverty situation of the disabled population in terms of population aspects, by sex, age, illiteracy, types of disability, causes of disability, disability status of the head of household and number of household members with some type of disability.

As can be seen in Table 1, the prevalence of disability in the general population for 2020 is 6.6%, of which 47.1% are men and 52.9% are women. As for the incidence of PCD in men was 6.4% and in women 6.7%.

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Table 1.

Population with disabilities by sex and poverty status 2020.

	Men		Women		Total		Total
	Not poor	Poor	Not poor	Poor	Men	Women	General
Population							
No Disabled	32,743,662	24,610,722	34,145,744	26,927,339	57,354,384	61,073,083	118, 118,427,467 427,467
% distribution between groups	57.1%	42.9%	55.9%	44.1%	48.4%	51.6%	
Disabled	1,930,955	1,987,472	2,267,632	2,128,692	3,918,427	4,396,324	
% distribution between groups	49.3%	50.7%	51.6%	48.4%	47.1%	52.9%	
Disability Prevalence	5.6%	7.5%	6.2%	7.3%	6.4%	6.7%	
Poverty Total					43.4%	44.4%	43.9%
No Disabled					42.9%	44.1%	43.5%
Disabled					50.7%	48.4%	49.5%
Difference PSD vs PCD					7.8%	4.3%	6.0%
Total	34,674,617	26,598,194	36,413,376	29,056,031	61,272,811	65,469,407	126,742,218

Source: Authors' elaboration by means of poverty calculations from (CONEVAL, 2021).

The overall poverty rate is 43.9%, with 43.4% for men compared to 44.4% for women, a difference of 1%. However, in terms of total poverty among Persons without Disabilities (PSD) and Persons with Disabilities (PCD), poverty is 43.5% and 49.5%, an overall difference of 6.0%. In other words, the condition of disability increases the prevalence of poverty by 6%. This result is in line with expectations regarding the direct relationship between poverty and disability.

The difference in poverty level between men of PSD with PCD is 7.8% and for women it is 4.3%.

- Evidence of prevalence by sex and poverty status of PCD in other countries.

As can be seen in Table 2, PCD prevalence ranges from the lowest value of 6.4% in Colombia in 2005 to the highest value of 12.9% in Argentina in 2010. On the other hand, the incidence by sex is higher in women than in men in Nicaragua and Mexico, and vice versa in Colombia.

Argentina

In Argentina, according to the 2010 census of the National Institute of Statistics and Census (IN- DEC), it was found that 5.1 million people, equivalent to 12.9% of the total population, had a disability (INDEC, 2010). This result was in line with international averages at the time, which were around 15% (Bellina, 2013).

Table 2.

Results of studies on the prevalence of people with disabilities

Authors	Amate 2006	Bellina 2013	Arango and Ruiz 2006	Clausen and Barrantes 2020	This study
Country	Nicaragua	Argentina	Colombia	Peru	Mexico
Responsible	INECa	INDECb	DANEc	INEId	INEGIe
Instrument	DHS 2003	Census 2010	General Census 2005	ENEDIS 2012	ENIGH 2010
Year Study	2003	2010	2007	2020	
General Prevalence	10.2%	12.9%	6.4%		6.6%
Men	9.1%		6.6%		6.4%
Women	11.3%		6.1%		6.7%
Prevalence Group					
Men				47.3%	
Women				52.7%	
World		15.0%			

Source: Authors' elaboration based on the aforementioned studies.

a National Institute of Statistics and Census (INEC) in Nicaragua.

b National Institute of Statistics and Census (INDEC) in Argentina.

c National Administrative Department of Statistics (DANE) in Colombia.

d National Institute of Statistics and Informatics (INEI) of Peru.

For 2018 in the National Study on the Profile of People with Disabilities 2018, this study was applied to people older than 6 years and in populations of 5,000 people. The prevalence of the population with disabilities is 45.5% women and 54.5%. On the other hand, the prevalence at the national level was 10.2%, which within the female population was 10.8% and in the male population was located at 9.5% (INDEC, 2018).

Colombia

According to the National Administrative Department of Statistics (DANE), Colombia had a population of 41,242,948 inhabitants in 2005, of which 2,632,255 (6.4%) were PWD (DANE, 2006). In this survey, the prevalence in men was 6.6% compared to 6.1% in women (Arango and Ruiz, 2006).

According to the 2018 National Population and Housing Census, implemented by DANE in Colombia, a little more than 3,065,361 of people identified themselves as PCD. This is approximately 7.1% of the total population (Economía y Negocios, 2019).

Spain

In Spain, the number of inhabitants who recognize their disability is 3,847,900, plus the 269,400 residents of the country in the same condition, gives a total of 3,847,900.

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4,117,300, or approximately 9% of the population (INE, 2008). According to the Survey on Disability, Personal Autonomy and Dependency Situations (EDAD 2008), applying the poverty thresholds indicated, 1,525,867 people were below the poverty line in 2008. Of this population, women represented three quarters. In the same 2008 survey, 17.3% of women with a disability were in extreme poverty, which was three times higher than that of the Spanish population (6.4%) and significantly higher than that of men (11%) (Huete García, 2013).

Nicaragua

According to Amate and Vásquez (2006), the results of the Nicaraguan Survey for Persons with Disabilities (ENDIS 2003) conducted by the National Institute of Statistics and Census (INEC), show that the population has an incidence of PCD of 10.25% at the national level, where men had an incidence of 9.13% and women 11.31%.

Peru

In Peru according to data obtained from the National Specialized Survey on Disability (ENEDIS) 2012, which was conducted by the National Institute of Statistics and Informatics (INEI), it was found that of the PCD 52.7% are women compared to 47.3% of men (Clausen and Barrantes, 2020).

It should be clarified that the data in this table are for context; in no way can direct comparisons be made due to the characteristics of the place, time and specific factors surrounding the subject matter of the studies conducted.

Disability status by sex, age and poverty status.

- Male Population

Table 3 shows that the male population of Minors and Youth are those who suffer the most from poverty by age group. The differences in poverty between the non-disabled and the disabled in these age groups go from 52.8% to 60.2% in Minors and from 49.4% to 57.8% in Youth.
% an overall average of 8% difference to the detriment of the disabled population.

For adults, the difference in poverty between DSPs and DAPs is 39.3% to 52.2%, a difference of about 12%. In the case of older adults, this difference rises from 34.1% to 46.5%, a difference of around 12%.

It is observed that the incidence of PCD increases gradually as people get older, going from 2.1% for minors, to 2.8% for young people, then to 5.2% for adults, but when reaching the group of older adults, the incidence increases significantly, reaching 28.6%, that is, almost one out of every 3 people suffers from some type of disability.

Table 3.

Male population by disability status, poverty status and age 2020.

	Not disabled		Disabled	
	Not poor	**Poor**	**Not poor**	**Poor**
Men				
Minors	6,036,143	6,744,827	110,660	167,214
% Distribution	47.2%	52.8%	39.8%	60.2%
% Prevalence of disability			1.8%	2.4%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				2.1%
Youth	2,834,593	2,766,302	68,290	93,360
% Distribution	50.6%	49.4%	42.2%	57.8%
% Prevalence of disability			2.4%	3.3%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				2.8%
Adults	21,327,432	13,781,413	921,974	1,005,874
% Distribution	60.7%	39.3%	47.8%	52.2%
% Prevalence of disability			4.1%	6.8%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				5.2%
Older adults	2,545,494	1,318,180	830,031	721,024
% Distribution	65.9%	34.1%	53.5%	46.5%
% Prevalence of disability			24.6%	35.4%
(non-poor vs. poor)				
% Prevalence of disability				28.6%
(total age)				
Total Men	32,743,662	24,610,722	1,930,955	1,987,472
% Distribution	57.1%	42.9%	49.3%	50.7%
% Prevalence of disability			5.6%	7.5%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				6.4%

Source: Authors' elaboration by means of the poverty calculation of (CONEVAL, 2021).

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In the total male population, there is a difference in the incidence of PCD among the non-poor of 5.6% versus 7.5% among the poor.

Table 4 shows that the female population of Minors and Youth suffer the most from poverty in this group. In women, the differences in poverty between DSP and CDW in these age ranges go from 53.8% to 63.6% in Minors and from 51.3% to 68.3% in Youth, a promise of a 9% difference.

For adults, the difference in poverty between DSPs and DAPs is 40.9% to 50.3%, a difference of about 10%. In the case of older adults, this difference goes from 35.4% to 43.8%, a difference of around 8%.

Table 4.

Female population by disability status, poverty status and age 2020.

	Not disabled		Disabled	
	Not poor	**Poor**	**Not poor**	**Poor**
Women				
Minors	5,781,443	6,738,821	80,273	140,414
% Distribution	46.2%	53.8%	36.4%	63.6%
% Prevalence of disability			1.4%	2.0%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				1.7%
Youth	2,608,540	2,749,113	39,508	85,309
% Distribution	48.7%	51.3%	31.7%	68.3%
% Prevalence of disability			1.5%	3.0%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				2.3%
Adults	22,908,824	15,881,664	986,346	998,476
% Distribution	59.1%	40.9%	49.7%	50.3%
% Prevalence of disability			4.1%	5.9%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				4.9%
Older adults	2,846,937	1,557,741	1,161,505	904,493
% Distribution	64.6%	35.4%	56.2%	43.8%
% Prevalence of disability			29.0%	36.7%
(non-poor vs. poor)				

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	Not disabled		Disabled	
	Not poor	Poor	Not poor	Poor
% Prevalence of disability				
(total age)				31.9%
Total Women	31.9%	26,927,339	2,267,632	2,128,692
% Distribution	32,743,662	44.1%	51.6%	48.4%
% Prevalence of disability			6.2%	7.3%
(non-poor vs. poor)				
% Prevalence of disability				
(total age)				6.7%

Source: Authors' elaboration by means of the poverty calculation of (CONEVAL, 2021).

It is observed that the incidence of PCD increases as people get older, going from 1.73% of minors, to 2.28% for young people, then to 4.87% in young adults until reaching 31.65% in older adults, that is, almost one out of every three has some type of disability.

In the total female population, there is a difference in the incidence of PCD among the non-poor of 6.2% versus 7.3% among the poor.

In the overall total numbers, there does not appear to be a very pronounced difference in the proportion of the non-disabled to the disabled. In men it is about 2% while in women it is just over 1%.

However, when analyzing by age, there are very pronounced differences in both sexes with respect to poverty in the populations of PCD minors and youths, which are around 60% in men and 65% in women, compared to the populations of PSD of the same age range, which are around 40% in men and 38% in women, differences of around 20% in both sexes.

This is perhaps mainly due to the fact that Minors and Youth are a dependent population with no income. In addition, it could be due to the lack of government programs to support these age groups.

As for the prevalence of disability, it occurs mainly in men in most age groups with the exception of the 65 and over age group, where the value is 28.6%, compared to 31.9% for women. This may be a consequence of the fact that women tend to live slightly longer.

The evidence of the prevalence of disability in older populations is almost universally presented, universally in older populations is well documented, it is well known that as age increases, the prevalence of disability increases. In Argentina, for example

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in 2010, 47% of disabled people were over 60 years of age (Arango and Ruiz, 2006; Bellina, 2013).

As is well known, disability increases with age. In fact, in Argentina in 2010, people over 60 years of age constituted 47% of the total number of PWD. In Colombia, for its part, carried out by the DANE, the incidence of permanent disabilities occurred to a greater extent in the adult population (Arango and Ruiz, 2006). In another study in Colombia in 2005, it was found that the group with the highest percentage of PWD are those aged 70 years and older (Hernández Jaramillo and Hernández Umaña, 2005).

Finally, in a study from Spain by Cubillos Alzate and Perea Caro (2020), the prevalence of disability occurs mostly in adults (38.6%).

Another characteristic that is generally present is the prevalence of disability in men up to adulthood, but upon reaching old age this situation is reversed. This is shown in a study in Colombia by Arango and Ruiz (2006), where using data from DANE, it was observed that the prevalence of disability was higher in men, but as the population reached the age of 85 years, women had a higher incidence of disability.

In a census conducted in Argentina, up to the age of 49, the prevalence of disability was higher in men than in women, but after that age the prevalence was reversed in favor of women. In Canada, the same phenomenon occurred, where the percentages of disability incidence were 13.2% for men and 12.4% for women, but after the age of 65 years and older, this relationship was reversed to 21.4% for women and 15.7% for men. In the same sense, in Medellin, Colombia, an organization called The Committee conducted an investigation on the prevalence of disability, the result was 58.1% in men, but as this reality increased, the trend was reversed (PAHO, 2006).

In Spain, on the other hand, according to the official statistics of that country, it is known that disability is closely linked to two essential factors: sex and age. The incidence of disability in both sexes is similar up to the age of 40, where the proportion of women is 2.5 women for every disabled man (INE, 2008).

Disability status by sex, illiteracy and poverty status.

Table 5.

Population by disability status, poverty status, illiteracy and sex 2020.

	Not disabled		Disabled		
	Not poor	**Poor**	**Not poor**	**Poor**	**Total Population**
Men					
Can read and write	25,234,234	15,705,938	1,588,522	1,329,786	91,374,358
	98.5%	83.8%	88.5%	74.7%	92.7%
Cannot read or write	395,227	3,044,887	205,511	450,433	7,165,602
	Not disabled		Disabled		

	Not poor	Poor	Not poor	Poor	Total Population
Prevalence of illiteracy					
(non-poor vs. poor)					
Prevalence of illiteracy	1.5%	16.2%	11.5%	25.3%	7.3%
(PSD vs PCD)		7.8%		18.4%	
Prevalence of illiteracy					
(total men)				8.5%	
Total men	25,629,461	18,750,825	1,794,033	1,780,219	
Women	26,869,206	17,502,982	1,862,479	1,281,211	
Can read and write	98.1%	91.7%	85.7%	65.8%	
Cannot read or write	514,514	1,578,975	310,079	665,976	
Prevalence of illiteracy					
(non-poor vs. poor)	1.9%	8.3%	14.3%	34.2%	
Prevalence of illiteracy					
(PSD vs PCD)		4.5%		23.7%	
Prevalence of illiteracy					
(total women)				6.1%	
Total women	27,383,720	19,081,957	2,172,558	1,947,187	
Total	53,013,181	37,832,782	3,966,591	3,727,406	98,539,960

Source: Authors' elaboration by means of poverty calculations from (CONEVAL, 2021).
a According to the 2020 Population and Housing Census, an illiterate is a person 15 years of age and older who cannot read or write an errand (CONEVAL, 2021).

Table 5 shows that the illiteracy rate for the population is 7.3%, where the prevalence in women is 6.1% and in men is 8.5%, a significant difference of 2.4%.
%. A figure that is close to the level of prevalence of the literacy rate in Colombia is around 96%, among the disabled population between 15 and 24 years of age the figure is 85.8%, which probably shows the difficulties of this group to access education from the early years.

The prevalence of illiteracy by sex is of concern for both sexes. Men have a 70% higher prevalence in PSD, at 7.8%, compared to 4.5% for women. Women have a 30% higher prevalence of PCD at 23.7% compared to 18.4% for men.

On the other hand, a social study of graduates from national rehabilitation and vocational training centers in Argentina in 1990 found that 63% were men and 37% women. In addition, it was noted that most of the courses offered are more attractive to the male sex (PAHO, 2006). However, in a study in Spain, according to age data, it is mentioned that they are

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women have significantly higher illiteracy rates (Huete García, 2013). This indicates barriers in female gender groups that are present in both developed and developing countries.

Illiteracy at the global level is 7.3%, and in the DSP vs. CDP groups it is 6.1% and 21.2%, respectively, which means that illiteracy is three times higher in the DSP groups. Poverty at the global level is 39.2%, but in the DAP and illiteracy groups this rises to 68.4%, but curiously, in the DAP and illiteracy groups poverty rises to 83.6%, a result that is unexpected, to say the least.

This may be due to the specific support received by PWDs, who cannot access DSPs because they do not have a disability. Perhaps this indicates that people who are illiterate need more targeted support because of their skills. Perhaps literacy programs coupled with training and employment programs could be a viable solution.

An additional fact, but one that I consider important, is the poverty rate of 88.7% among male DSPs who are illiterate, and no less worrisome is the 75% rate among women in the same group. Perhaps this is a group that is off the radar of government programs or policies are not effective in this particular group.

Table 6.

Population by disability status, poverty status, illiteracy and sex 2020.

	Men		Women		Total		Total
	Poor	Not poor	Poor	Not poor	Men	Men	General
Walking	472,286	421,212	633,998	496,341	893,498	1,130,339	2,023,837
% Distribution	52.9%	47.1%	56.1%	43.9%	44.1%	55.9%	
Prevalence	24.5%	21.2%	28.0%	23.3%	20.3%	25.7%	24.3%
See	320,959	315,138	380,735	378,987	636,097	759,722	1,395,819
% Distribution	50.5%	49.5%	50.1%	49.9%	45.6%	54.4%	
Prevalence	16.6%	15.9%	16.8%	17.8%	14.5%	17.3%	16.8%
Arm	71,723	64,813	68,802	42,292	136,536	111,094	247,630
% Distribution	52.5%	47.5%	61.9%	38.1%	55.1%	44.9%	
Prevalence	3.7%	3.3%	3.0%	2.0%	3.1%	2.5%	3.0%
Learn	84,826	99,820	78,018	92,599	184,646	170,617	355,263
% Distribution	45.9%	54.1%	45.7%	54.3%	52.0%	48.0%	
Prevalence	4.4%	5.0%	3.4%	4.4%	4.2%	3.9%	4.3%
	Men		Women		Total		Total
	Poor	Not poor	Poor	Not poor	Men	Men	General

Hear	162,351	158,897	120,311	115,180	321,248	235,491	556,739
% Distribution	50.5%	49.5%	51.1%	48.9%	57.7%	42.3%	
Prevalence	8.4%	8.0%	5.3%	5.4%	7.3%	5.4%	6.7%
Dress	9,941	9,782	17,535	8,736	19,723	26,271	45,994
% Distribution	50.4%	49.6%	66.7%	33.3%	42.9%	57.1%	
Prevalence	0.5%	0.5%	0.8%	0.4%	0.4%	0.6%	0.6%
Speak	38,802	54,150	20,615	37,649	92,952	58,264	151,216
% Distribution	41.7%	58.3%	35.4%	64.6%	61.5%	38.5%	
Prevalence	2.0%	2.7%	0.9%	1.8%	2.1%	1.3%	1.8%
Activities	58,576	66,787	45,494	75,906	125,363	121,400	246,763
% Distribution	46.7%	53.3%	37.5%	62.5%	50.8%	49.2%	
Prevalence	3.0%	3.4%	2.0%	3.6%	2.9%	2.8%	3.0%
2 or more							
disabilities	711,491	796,873	902,124	881,002	1,508,364	1,783,126	3,291,490
% Distribution	47.2%	52.8%	50.6%	49.4%	45.8%	54.2%	
Prevalence	36.8%	40.1%	39.8%	41.4%	34.3%	40.6%	39.6%
Total	**1,930,955**	**1,987,472**	**2,267,632**	**2,128,692**	**3,918,427**	**4,396,324**	**8,314,751**

Source: Authors' elaboration by means of poverty calculations from (CONEVAL, 2021).
a The prevalence by type of disability is for the population with only one disability; those with two or more disabilities were grouped in the category 2 or more disabilities.

Types of disability by sex and poverty status.

The types of disability in order of prevalence of people with only one disability are 39.6%, "Walking" 24.3%, "Seeing" 16.8%, "Hearing" 6.7%, "Learning" 4.3%, "Arm" 3%, "Activities" 3%, "Speaking" 1.8% and "Dressing" 0.5% (see Table 6). The prevalence of movement is the most present in almost all the studies carried out.

According to Argentina's National Study on the Profile of People with Disabilities 2018, it was found that 25.2% only suffer from movement disability (INDEC, 2018). In the same sense, according to what was published by Negocios y Economía (2019), 36.9% of the inhabitants find it difficult to move their bodies. Furthermore, according to information from the 2012 National Specialized Survey on DISABILITY (ENEDIS) conducted in Peru by the National Institute of Statistics and Informatics (Instituto Nacional de Estadística e Informática), the percentage of people with disabilities in the country's population who are unable to move their bodies is 36.9% (INDEC, 2018).

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ca (INEI) found that the most prevalent category of disability was mobility with 60.7% (Clausen and Barrantes, 2020).

However, according to DANE (2006), in its 2005 General Census, the population of PWD was 2,632,255, equivalent to 6.4% of the total population; the most frequent limitations are seeing with 43.5% and walking with 29.3%.

The second most present category in studies that talk about prevalence of disabilities is visual. In Argentina in the study Perfil de las Personas con Discapacidad 2018, 13.70% suffer only visual disability (INDEC, 2018). In a publication of Negocios y Economía (2019), it mentions that the second most prevalent disability is visual impairment with 18.7%.

The third category of prevalence found in the literature review was hearing in the study of Argentina by INDEC (2018), about the Profile of People with Disabilities 2018, it was found that 11% only suffer from movement disability and from what was published by Negocios y Economía (2019), where it mentions that of the PCD 11.3% cannot hear the voice or sounds.

On the other hand, there is no doubt that the condition of people in extreme poverty with mental or psychiatric disability is a scenario of extreme vulnerability and social exclusion. According to the First National Study on Disability in Chile conducted jointly by the National Fund for the Social Inclusion of Persons with Disabilities (FONADIS) and the National Statistics Institute (INE) in 2004, it is estimated that among the poorest 25% of the population, more than 60 thousand people have moderate or severe intellectual and/or psychiatric disabilities. To imagine what this represents, it is possible to think of the National Stadium at full capacity (Gross Dempster, 2008).

It is worth mentioning that the group with 2 or more disabilities was the most prevalent with 39.6%. The latter contrasts with Argentina's National Study on the Profile of People with Disca- pacity 2018, 59% of people present only one type of disability, 30.5% two or more disabilities (INDEC, 2018).

Although at a global level the behavior of the different types of abilities is stable at all levels, by sex this order changes, with two disabilities exchanging positions with respect to prevalence, 5 "Arm" and 6 "Activities". In men "Arm" and "Activities" are presented, after "Learning" in women this behavior is reversed and after "Learning" follows "Activities" and "Arm".

The differences in the distribution of the population by type of disability between the non-poor and poor had dissimilar results. On the side of the disabilities that seem to occur more in the non-poor (or perhaps to a lesser extent affect poverty), are walking (non-poor vs. poor men 52.9% / 47.1% and non-poor vs. poor women 56.1% / 43.9%), arm (non-poor vs. poor men 52.5% / 47.5% and non-poor vs. poor women 61.9% / 38.1%).

On the other hand, the disabilities that seem to occur more among the poor (or perhaps have a greater impact on poverty) are Learning (non-poor men vs. poor 45.9% / 54.1% and women

non-poor vs poor 45.7% / 54.3%), Speaking (non-poor vs poor men 41.7% / 58.3% and non-poor vs poor women 35.4% / 64.6%), Activities (non-poor vs poor men 46.7% / 53.3% and non-poor vs poor women 37.5% / 62.5%).

These results contrast with the findings of Herazo Beltran and Dominguez Anaya (2013), where they indicate that according to the results of the linear regression model, poverty has a significant effect on activities of daily living such as walking, self-care and the use of arms and hands in the poorest departments of Colombia. In addition, it concludes that the percentage of extreme poverty increases mainly in proportion to limitations in walking.

The aforementioned differences were very marked in the female population. In particular, one disability was particularly marked in the female population.

Table 7.

Population by origin of disability, sex, and poverty status 2020.

	Not poor	Poor	Not poor	Poor	Men	Women	General
Due to an illness	453,179	410,818	594,178	526,875	863,997	1,121,053	1,985,050
% Distribution	52.5%	47.5%	53.0%	47.0%	43.5%	56.5%	
Prevalence	37.2%	34.5%	43.5%	42.2%	35.8%	42.9%	39.5%
Due to advanced age	260,655	222,844	354,690	293,917	483,499	648,607	1,132,106
% Distribution	53.9%	46.1%	54.7%	45.3%	42.7%	57.3%	
Prevalence	21.4%	18.7%	26.0%	23.6%	20.1%	24.8%	22.5%
Why you were born this way	146,939	178,035	124,544	172,908	324,974	297,452	622,426
% Distribution	45.2%	54.8%	41.9%	58.1%	52.2%	47.8%	
Prevalence	12.0%	15.0%	9.1%	13.9%	13.5%	11.4%	12.4%
Due to an accident	300,719	323,607	245,360	207,654	624,326	453,014	1,077,340
% Distribution	48.2%	51.8%	54.2%	45.8%	58.0%	42.0%	
Prevalence	24.7%	27.2%	18.0%	16.6%	25.9%	17.3%	21.4%
For violence	4,304	7,159	5,014	6,582	11,463	11,596	23,059
% Distribution	37.5%	62.5%	43.2%	56.8%	49.7%	50.3%	
Prevalence	0.4%	0.6%	0.4%	0.5%	0.5%	0.4%	0.5%
For another reason	53,668	48,136	41,722	39,754	101,804	81,476	183,280

	Not poor	Poor	Not poor	Poor	Men	Women	General
% Distribution	52.7%	47.3%	51.2%	48.8%	55.5%	44.5%	
Prevalence	4.4%	4.0%	3.1%	3.2%	4.2%	3.1%	3.6%
Total	1,219,464	1,190,599	1,365,508	1,247,690	2,410,063	2,613,198	5,023,261

Source: Authors' elaboration by means of poverty calculations from (CONEVAL, 2021).

In the case of the non-poor population is Dress, where the non-poor population represents 66.7% and the poor population 33.3%, a difference of 33.4% (in the male population this difference does not reach 1%).

Origin of disability by sex and poverty status.

Table 7 shows the different causes of disabilities. However, here there is a clear differentiation of the origin of the disability by sex.

In the male population, the order of the origin of the disabilities is Due to a disease with 35.8%, Due to an accident with 25.9%, Due to advanced age with 20.1%, Due to birth with 13.5% and Due to violence with 0.5%.

For the female population, the order of the origin of the disabilities is: Due to an illness with 42.9%, Due to advanced age with 24.8%, Due to an accident with 17.3%, Because she was born this way with 11.4% and Due to violence with 0.4%.

In this sense, women tend to be more likely to suffer a disability due to age than to have an accident, and vice versa for men. This may be due to the different activities of the two sexes and to the fact that women tend to live longer.

Now, if we talk about the origin of the most prevalent disability in the studies reviewed, we find that diseases are the most mentioned. The origin of disability in the population of Colombia, it is highlighted that the largest figures show that the difficulty in human func- tioning is acquired by a disease (Economía y Negocios, 2019).

In Colombia for 2019, according to the Registry for the Location and Characterization of Persons with Disabilities (RLCPD), 39.91% of disabilities are caused by a disease (Cubillos Alzate and Perea Caro, 2020). According to the Nicaraguan Survey for Persons with Disabilities (2003), 2 out of every 3 people say that their disability is due to chronic diseases (PAHO, 2006).

In third place, accidents are mentioned as the origin of disabilities, as Cubillos Alzate and Perea Caro (2020) in their study of Colombia and PAHO (2006) in their study of Nicara- gua. These results are compatible with those found in Mexico.

As for the poor population compared to the non-poor population, it is more common in the poor population than in the non-poor population.

The non-poor population suffers from a disability due to illness or old age. Meanwhile, in the poor population it is more common to suffer from an illness, because they were born that way or because of violence. It should be clarified that the differences between these categories are minimal, in the order of 1% to 4%.

However, the sui generis case is presented with the origin "Because he was born this way", while in non-poor men the distribution rate is lower at around 9% (NP 45.22% vs P 54.78%), in non-poor women it is even more pronounced at around 16.26% (NP 41.87% vs P 58.13%). This may be due to the pre-pregnancy conditions in terms of care and feeding, and during the delivery process in less than ideal conditions, among other factors.

It is compatible with what was found in a study from Argentina by INDEC (2018), reported that: the.

Table 8.

Population by head of household by disability status, sex, and poverty status 2020.

	Men		Women		Total		Total
	Poor	Not poor	Poor	Not poor	Men	Men	General
Chief Non-disabled household	31,659,683	23,592,656	32,925,567	25,524,791	55,252,339	58,450,358	113,702,697
Disabled Head of Household	3,014,934	3,005,538	3,487,809	3,531,240	6,020,472	7,019,049	13,039,521
% Distribution	50.1%	49.9%	49.7%	50.3%	46.2%	53.8%	
% Prevalence of Poverty with non-disabled head of household					42.7%	43.7%	43.2%
% Prevalence of poverty with disabled head of household					49.9%	50.3%	50.1%
Difference					7.2%	6.6%	6.9%
Total	34,674,617	26,598,194	36,413,376	29,056,031	61,272,811	65,469,407	126,742,218

Source: Authors' elaboration by means of poverty calculations from (CONEVAL, 2021).

Disabilities occurred after birth in 82.3%, 44.8% were due to illness and 16.7% due to accidents (traffic, domestic, work and sports, among others).

Disability status by sex, disability status of household head, and poverty status.

Table 8 shows that the overall prevalence of poverty for individuals living in households with a head of household without a disability is 43.2% and for households where the head of household has a disability it is 50.1%, i.e. the prevalence of poverty for individuals living in households with a head of household without a disability is 43.2% and for households where the head of household has a disability it is 50.1%, i.e. the prevalence of poverty for individuals living in households withQuinteroa head of household without a disability is 43.2%.

poverty increases by 6.9% when the head of household suffers from a disability.

The above is in line with what was found in Colombia in a study by Hernández Jaramillo and Hernández Umaña (2005), who mention that the dependency of a PWD leads to a reduction in the labor participation of another family member. Similarly, a PWD who cannot work reduces the total potential income of the family, forcing the other members to work more. When the PWD is the head of the household, his or her occupational situation has a negative impact on the participation rate of the rest of the family; that is, the household's opportunities are restricted.

In the same sense, in a study of Uganda by Hoogeveen (2005), the population living in households where the head of the family is a PCD has a 43% chance of being in poverty compared to households where the head of the family is not a PCD, where the chance is 27%. In other words, the possibility of living in poverty in a household where the head of household is a PCD is 15% higher than in a household where the head of household is not a PCD.

Now, if we analyze by sex the population living in households with heads without disabilities compared to heads with disabilities, for men the percentages are 49.9% and 42.7% respectively, a difference of 7.2%, and for women the percentages are 50.3% and 43.7% respectively, a difference of 6.6%. As can be seen, the difference between the two is minimal.

Table 9.

Population by number of persons with disabilities in the household, sex, and poverty status 2020.

	Men		Women		Total		Total
	Poor	Not poor	Poor	Not poor	Men	Men	General
No PCD	29,052,209	20,442,982	30,125,727	22,007,648	49,495,191	52,133,375	101,628,566
With 1 PCD	4,539,731	4,643,403	5,125,884	5,305,161	9,183,134	10,431,045	19,614,179
With 2 PCD	941,207	1,227,376	1,009,366	1,428,587	2,168,583	2,437,953	4,606,536
With 3 or more PCD	141,470	284,433	152,399	314,635	425,903	467,034	892,937
% Poverty Prevalence without PCD					41.3%	42.2%	41.8%
% Poverty Prevalence with 1 PCD					50.6%	50.9%	50.7%
% Prevalence of Poverty with 2 DAPs					56.6%	58.6%	57.7%
% Prevalence of Poverty with 3 or more PCD					66.8%	67.4%	67.1%

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	Men		Women		Total		Total
	Poor	Not poor	Poor	Not poor	Men	Men	General
Difference prevalence without PCD vs 1 PCD					9.3%	8.6%	9.0%
Prevalence difference without PCD vs 2 PCD					15.3%	16.4%	15.9%
Difference prevalence without PCD vs. 3 or more PCDs					25.5%	25.2%	25.3%

Source: Authors' elaboration by means of poverty calculations from (CONEVAL, 2021).
a. Person with a disability (PWD).

This increase in the prevalence of poverty may be due to the fact that the head of household's disability increases household expenses due to the head's special needs (and, of course, decreases family income), and this same condition negatively impacts the head of household's chances of being able to work or have a well-paying job.

Disability status by sex, number of PWD in the household and poverty status.

Table 9 shows how having only one member raises the prevalence of disability by approximately 9%. With two members with disability conditions, the fall could slow down as the difference is around 16% (which would be a n average of 8% difference per additional person with disability compared to the initial 9%), however, for the third member, the prevalence of poverty is around 25% (an average of 8% per additional person with disability).

That is to say, the household with each PWD must not only assume a financial burden to meet their special needs, but also take into account the time that must be devoted to care and support for the person. And of course, factors such as severity, independence of the PWD, ability to work, among others, that could alleviate or burden the financial and social situation of the household must be taken into account.

However, perhaps the additional costs are individualized and therefore grow as the number of PWD increases in a household. A very specific policy is needed in these cases to help as much as possible with the vicissitudes of this type of situation, seeking on the one hand to lighten the financial and social burden of the problem and on the other hand to develop the PWD so that they can be integrated into society and the labor market.

5. CONCLUSIONS

The objective of this paper is to see the state of the poverty situation of the untrained population in Mexico and to observe its behavior in other countries in order to have a context of the situation.

The broader issue, analyzing the different socioeconomic factors surrounding this relationship, can provide a clearer idea of this problem and guide us towards those areas of opportunity that could improve the quality of life of this population.

The hypothesis put forward in this document is that PWD are in general poorer than the population without disabilities, due to the limitations imposed by the conditions suffered by this population. In this sense, the hypothesis was proven, this of course is what has been observed in the different literatures consulted and cited in this document, but the results contribute to give more clarity to the different aspects of this problem, in addition to the fact that due to the multifactorial causes of this problem, it is necessary to analyze each case as far as possible in order to use the most appropriate measures for each situation.

Among the findings of this research, it stands out that, for example, the condition of disability increases the prevalence of poverty by 6%. On the other hand, among minors and young people, the presence of disability increases the prevalence of poverty by about 20%. Older adults are the group with the highest prevalence of disability and women in this group have the highest incidence of disability of all other groups.

The PSD with illiteracy present a 15% increase in the prevalence of poverty, not to mention the fact that the prevalence level in this group is 82% on average. On the other hand, this group seems to be unfocused from the governmental radar, since it does not seem to have specific public policies or these are not very effective. It is only when presented with another disadvantage, as in this case was that of having a disability, that instead of increasing the prevalence of poverty decreased, perhaps as a consequence of the fact that the programs for the other problem helped to alleviate an already existing problem.

In another order of ideas, the prevalence of the different types of disability for people with only one type of condition was for "Walking" 24.3%, "Seeing" 16.8%, "Hearing" 6.7%, "Learning" 4.3%, "Arm" 3%, "Activities" 3%, "Speaking" 1.8% and "Dressing" 0.5%. People with more than two disabilities presented a prevalence of 39.6%. The condition of being able to dress presents a very marked behavior in the female population, where in the non-poor population it presents a prevalence of 67%, in the poor population it presents a prevalence of 33%, a difference of 34%, and in men this difference in prevalence did not reach 1%. Last, but by no means least, is the fact that the head of the household suffers from a disability, which increases the prevalence by 6%.

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