Fulfilling Potential

Working together to enable disabled people to fulfil their potential and have opportunities to play a full role in society

A discussion document
This document refers to a wide variety of policies, some applicable across the whole of the UK and many specific to England only. The devolved administrations have their own policies with regard to devolved matters.
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Minister’s foreword

As Minister for Disabled People I know the huge contribution disabled people make in our society – through work, volunteering, caring and as active members of communities. Yet too often there are still significant physical and attitudinal barriers to be overcome.

Disabled people have told me they want to see more urgent progress in some key areas. How can we overcome continuing barriers to individuals reaching their full potential? What more can be done in tackling discrimination, harassment and outdated attitudes? And how can disabled people be given choice and control in daily life? These issues are important at all stages of life, from the opportunities for very young children to those available in later life.

Government and disabled people need to work together to tackle these issues head on, and develop a new strategy to ensure continuing progress so critical to the lives of millions of people in the UK today.

The UK has a long standing commitment to independent living and equality for disabled people.

Disabled people and their organisations have been instrumental in the development of the UN Convention on the Rights of Disabled People and in supporting ground breaking legislation. The UK was one of the first signatories of the Convention and the Equality Act 2010 is the main vehicle through which the Convention’s obligations will be delivered. Working together, our next task is to make these aspirations a reality.

We want to realise the aim of independent living, where “all disabled people have the same choice, control and freedom as any other citizen – at home, at work, and as members of the community. This does not necessarily mean disabled people ‘doing everything for themselves’, but it does mean that any practical assistance people need should be based on their own choices and aspirations”.

\[1\] Definition developed by disabled people. Disability Rights Commission, 2002, Policy Statement on Social Care and Independent Living.
Barriers to independent living and participation are progressively being addressed. Yet we have still not even reached the point where the majority of working age disabled people are in employment. This is despite around 40 per cent of those not in work wanting to do so\(^2\), and around three quarters of non-disabled people being in work.\(^3\)

There are indications that some attitudes are starting to change. Yet nearly 8 in 10 people feel there is still prejudice against disabled people.\(^4\)

Disabled children have the same aspirations as non-disabled children. School achievement still falls short for many disabled children. Just 20 per cent of children with special educational needs and statements, including children with sensory impairments and physical impairments, achieved 5 or more A*-C grades including English and maths at GCSE in 2009/10.\(^5\)

This Government wants disabled people to be able to achieve their full potential, so that they can have the opportunity to play their role in society. It is critical that wherever we can, we remove barriers to enable disabled people to fulfil their potential.

The current economic situation is both challenging and complex. The scale of the economic deficit has required us to think about how we all benefit from and use public services.

We also have a welfare state that is in need of significant reform – across health services, social care and benefits.

Change can be challenging but the reforms we have planned, such as the introduction of Universal Credit will help smooth the transition into work for disabled people and make work pay, as well as ensuring we retain the integrity of the benefit system and better support those not able to work.

We want services to be tailored and personalised, shaped around the individual with a clear goal for independent living, in a way most appropriate for each individual.

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\(^3\) Office for National Statistics, Labour Force Survey, Quarter 2 2011 (males 16-64 and females 16-59 in employment, including self employment)


\(^5\) Department for Education, National Pupil Database, 2009/10
We should find every opportunity to make progress further and faster. To do this we will need to work together to galvanise communities to bring their resources to bear. And prioritise those who face the greatest challenges in living independent lives.

Disabled people have already identified some of the barriers they face and areas in need of action, for example in the consultation on the recent Special Educational Needs and Disability Green Paper, the Sayce Review on employment, and in responses to the draft UK Report on the UN Convention on the Rights of Disabled People.

This discussion paper seeks to take these issues further forward, drawing on the experiences of how disabled people can realise their aspirations throughout their lives, how individuals can take more control of their lives, and how we can change attitudes and behaviour to support this.

We need your help to find practical ways to make a real difference to the lives of disabled people. We face a challenging economic climate so we have to think about what our priorities should be.

I want to work directly with disabled people, as well as the people and organisations that support disabled people, to explore how a new strategy should be framed and what actions will be both realistic and have the greatest impact.

I hope you will take this opportunity to give me your ideas. I am particularly keen to hear from disabled people themselves and community groups, and you will find details at the end of this document about how we can help such groups run their own event.

Do make sure your voice is heard. Please send me your ideas by 9 March.

Maria Miller
Minister for Disabled People
What organisations say

Disability Rights UK

(Radar, Disability Alliance and the National Centre for Independent Living)

Disabled people face significant change in the support and services we use. One unified Disability Strategy from Government would be very welcome to shape the changes and help measure success. Disability Rights UK very much encourages disabled people and disability organisations to be involved in co-producing the final Strategy. We will play our part in supporting disabled people’s participation and making sure the Strategy is both implemented and delivered.

Liz Sayce OBE, Chief Executive

ecdp

ecdp is looking forward to working with the Government to ensure the new disability strategy will reflect disabled people’s lived experiences. Disabled people’s user-led organisations (DPULOs) can use this opportunity to gather ideas and evidence from their members. We understand the real issues. We know what really makes a difference to disabled people’s lives. It’s vital that through DPULOs, disabled people use their voice and share their experiences of what works and what doesn’t, to help shape and deliver disability equality in our communities.

Mike Adams, Chief Executive
**Mencap**

If we want to achieve inclusion and equality for disabled people, we will need to address the key barriers and challenges that currently prevent this. We welcome the government’s commitment to involve disabled people in identifying these barriers and challenges at this early stage in the development of the strategy. We encourage disabled people, their supporters and families to get involved and make your views known. We will be working to ensure as many people as possible know about the strategy and can feed in their priorities for change.

Mark Goldring CBE, Chief Executive

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**Mind**

Sadly, too many people with mental health problems still face ongoing stigma and discrimination. As a society we need to reach a social ‘tipping point’ where this becomes unthinkable and that disabled people are enabled to take an active part in the life of their communities and have the financial resources to do so.

Mind welcomes this cross-government approach to tackling the inequalities experienced by disabled people. We encourage disabled people to respond to this consultation and for the Government to listen and act upon feedback from disabled people on the issues that matter to them.

Paul Farmer, Chief Executive
Realising aspirations
Realising aspirations

The Government is committed to ensuring appropriate support and intervention for disabled people at key life transitions, to realise disabled people’s potential and aspirations for education, work and independent living.

Disabled children and young people have the same aspirations as their non-disabled peers for education, work and independent living⁶. We are seeing some progress in realising these aspirations, but there is much further to go. For example, since 2000 the employment rate of disabled people has risen considerably. Over 500,000 extra disabled people are now in work compared with 2000.⁷ Yet we have still not even reached the point where the majority of working age disabled people are in employment. This is despite around 40 per cent of those not in work wanting to do so⁸, and around three quarters of non-disabled people being in work⁹.

School achievement is improving for some disabled children. For example, 20 per cent of children with special educational needs and statements achieved 5 or more A*-C grades including English and maths at GCSE in 2009/10, compared to only 9 per cent in 2006/7¹⁰. But this is still less than a quarter of the rate for children without special educational needs. Inevitably, this holds people back in adult life.

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7 Office for National Statistics, Labour Force Survey, Quarter 2 (males 16-64 and females 16-59). In 2000 the employment rate was 42.4 per cent. The latest comparable data point is 2009, 47.5 per cent. Later estimates are not available on a consistent basis, due to an improvement in the way people report disability in this data source. On the new basis, the rate in 2011 was 48.8 per cent.


9 Office for National Statistics, Labour Force Survey, Quarter 2 2011 (males 16-64 and females 16-59 in employment, including self employment)

10 Department for Education, National Pupil Database, 2009/10
We are still seeing that, too often, disabled people’s aspirations do not translate into reality as they move through their life course. This is very often not because of a lack of ability. Disabled people have told us that this is often because the system fails them.

Too often, the expectations of the people around them, and society as a whole, are too low. Societal barriers – whether physical or attitudinal – are limiting the realisation of disabled people’s aspirations\textsuperscript{11}. In turn, society and the economy are missing out on benefiting from the experiences, abilities and skills of disabled people.

We want to ensure that the right support and the right environment are in place so that disabled people are able to fulfil their potential – at every life stage. This means getting support right from the earliest stage, and ensuring equal access to education. The capacity of communities to deliver appropriate support needs to be strengthened – particularly by involving disabled people in their communities. Local services and agencies need to work together to support individuals in a tailored, holistic way.

This also means focusing on transition points in people’s lives, when the system and support networks are even more important, but are more likely to break down. This includes the transition from childhood to adulthood, the move from education into employment, the transition people go through when they acquire an impairment (whatever age that may be), and the transitions that can take place in later life, such as moving from employment into retirement or being bereaved.

\footnote{Burchardt, Tania, 2005, The education and employment of disabled young people, Policy Press}
Questions

1. What ideas do you have that could make a difference to you in getting an education, getting a job or being able to live independently?

2. What would help you manage better at times of change in your life?

3. In those situations, how are you supported or held back by other people?

You might want to think about:

- your ambitions relating to school, college or adult education (Article 24 of the UN Convention: Education)
- your ambitions relating to work (Article 27 of the UN Convention: Work and employment)
- your ambitions relating to marriage, family, parenthood and relationships (Article 23 of the UN Convention: Respect for home and the family)
- how you plan for the future and adapt to changing circumstances (Article 26 of the UN Convention: Habilitation and rehabilitation)
- whether the people around you support you in these areas
- whether your background or personal characteristics affect you realising your potential (Article 6 of the UN Convention: Disabled women).

We have included some case studies at Annex A (case studies 1-3) to help you think about real life situations that you might want to talk about in your responses.

We have also included some examples of facts and figures relating to the issues discussed in this chapter at Annex B which might help to inform your answers.

An explanation of the different Articles of the UN Convention on the Rights of Disabled People is at Annex C.
Individual control
Individual control

The Government is committed to enabling disabled people to make their own choices and have the right opportunities to live independently.

We want to ensure that disabled people have personal control over the services they receive, and that support is delivered in the way they want it – across every area of their day-to-day lives, for example accommodation, travel or employment.

Progress has been made, for example with increased choice and control over social care budgets provided by local councils. Only 23 per cent of disabled people in 2010 reported that they did not frequently have choice and control over their lives. However disabled people tell us that decisions about their lives are still too often made for them, not by them. Disabled people also report barriers to access in many services and activities including education, transport, health, social care, and sport, social and recreational activities.

We want to find further ways to improve choice and control in daily living. We want to personalise public services, which means delivering support that is shaped around the needs of the individual. We want to ensure people receive appropriate information, advice and support to make informed choices. We also want to give disabled people more control of budgets for the services they receive, whether choosing to have control of the money itself as a direct payment or a personal budget, or having more say in how the money is spent.

We also aim to transfer control from central government to communities and local government, and ensure more flexibility for how local services are provided. The aim of this localism is to make sure that people have more say about what happens in their community, and that services are delivered by people who understand and can respond to individual needs and the barriers people face. In line with the Equality Act 2010, we need to make sure that the needs of disabled people are taken into account when services are designed and delivered.

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12 Office for National Statistics, ONS Opinions Survey, 2010
Questions

4. **What helps you to have choice and control over your day-to-day life and the support you get?**

5. **What else would help you to have more choice and control over your day-to-day life and the support you get?**

6. **What would help you to access services and activities which suit your needs? For example education, transport, housing, health, social care, and sport, social and recreational activities.**

7. **How can you be involved in decisions that affect your local area?**

You might want to think about:

- The control you have over decisions about where you live and how you spend your time (Article 19 of the UN Convention: Living independently and being included in the community, Article 30 of the UN Convention: Participation in cultural life, recreation, leisure and sport)

- The choice and control you have over how services are provided, like the local council, public transport and health services, in line with the following articles of the UN Convention:
  - Article 9: Accessibility
  - Article 20: Personal mobility
  - Article 25: Health
  - Article 28: Adequate standard of living and social protection

- How you participate in decisions if not yet an adult (Article 7 of the UN Convention: Disabled children)

- The role of your family or carer in decisions.

We have included some case studies at Annex A (case studies 4-7) to help you think about real life situations that you might want to talk about in your responses.

We have also included some examples of facts and figures relating to the issues discussed in this chapter at Annex B which might help to inform your answers.

An explanation of the different Articles of the UN Convention on the Rights of Disabled People is at Annex C.
Changing attitudes and behaviours
Changing attitudes and behaviours

We want to promote positive attitudes and behaviours towards disabled people to enable participation in work, community life and wider society, tackling discrimination and harassment wherever they occur.

Through the Equality Act 2010, we have a comprehensive legal framework protecting the rights of disabled people. Research has shown that since 2005, on the whole, attitudes towards disabled people have improved.\textsuperscript{14} People in the UK are increasingly likely to think of disabled people as the same as everybody else: 85 per cent did in 2009 compared to 77 per cent in 2005.\textsuperscript{15}

Yet nearly 8 in 10 people feel there is still prejudice against disabled people\textsuperscript{16}, and many disabled people have told us they continue to experience discrimination on a daily basis. The preconceptions and unfounded prejudices people have about disabled people can, if left unchecked, lead to antisocial behaviour, harassment, hate crime, and in extreme cases, murder.

Disabled people have told us how important it is to tackle discrimination and prejudice. However, changing attitudes is a difficult and complex area and the relationships between attitudes and behaviours are not clear cut. We need to combine ambitious goals with practical steps to make a difference.

We need to take every opportunity to promote positive messages about disabled people, based on the social model of disability. At the same time, we need to ensure that discrimination and crimes against disabled people are effectively tackled, while facilitating people to understand and use their rights. Unintentional or benevolent prejudice (based on the belief that disabled people need to be looked after) needs to be tackled, as well as overt hostility.


We want to facilitate the participation of disabled people in community and public life by, for example, supporting disabled people to become MPs or councillors. In line with the principle underpinning the UN Convention to involve disabled people in decisions that affect them, we want to ensure that disabled people are involved in decision-making processes. As more decisions are devolved to a local level, it is important that every disabled person has access to a good user-led organisation in their area. So we want to work with disabled people to improve coverage across the country.
Questions

8. What works well in changing the way other people treat disabled people?
9. What else is important in changing the way other people treat disabled people?
10. What can we do to make sure that everyone recognises the contribution that disabled people can make?

You might want to think about:

• How we can best promote positive perceptions of disabled people and combat stereotypes in this country and abroad, including ensuring the value of disabled people’s lives is recognised, in line with the following articles of the UN Convention:
  ◦ Article 8: Awareness-raising
  ◦ Article 10: Right to life
  ◦ Article 32: International cooperation

• Whether you are supported to understand and use your rights and freedoms in this country and abroad, in line with the following articles of the UN Convention:
  ◦ Article 5: Equality and non-discrimination
  ◦ Article 11: Situations of risk and humanitarian emergencies
  ◦ Article 12: Equal recognition before the law
  ◦ Article 14: Liberty and security of the person
  ◦ Article 15: Freedom from torture or cruel, inhuman or degrading treatment or punishment
  ◦ Article 16: Freedom from exploitation, violence & abuse
  ◦ Article 17: Protecting the integrity of the person
  ◦ Article 18: Liberty of movement & nationality
  ◦ Article 22: Respect for privacy
• Whether you are supported to challenge decisions and behaviour that you think are wrong (Article 13 of the UN Convention: Access to justice)

• How you get involved in decisions that affect your local area or your country (Article 21 of the UN Convention: Freedom of expression and opinion, Article 29 of the UN Convention: Access to information, and participation in political and public life)

• Which people or groups are most likely to treat you unfairly

We have included some case studies at Annex A (case studies 8-11) to help you think about real life situations that you might want to talk about in your responses.

We have also included some examples of facts and figures relating to the issues discussed in this chapter at Annex B which might help to inform your answers.

An explanation of the different Articles of the UN Convention on the Rights of Disabled People is at Annex C.
Questions

11. **Do you have any suggestions for how we should implement and monitor the Strategy once it is developed?**

We want to ensure that we have an effective process for monitoring implementation of the Disability Strategy once it has been developed, to measure whether a difference is being made to the lives of disabled people.

You might want to think about:

- How disabled people can be involved in that monitoring process (Article 31 of the UN Convention: Statistics and data collection, Article 33 of the UN Convention: National implementation and monitoring)

Questions

12. **Is there anything else you would like to tell us?**

Do you have any other ideas you think we should include in the Disability Strategy that you haven’t covered in your responses so far?
How to take part in the discussion

Please send the Office for Disability Issues your views by **5pm, Friday 9 March 2012**.

**Online**
You can submit answers to these questions using an online form. Visit [www.odi.gov.uk/fulfillingpotential](http://www.odi.gov.uk/fulfillingpotential) to find out more and complete the form.

**Email**
You can send your response to fulfilling.potential@dwp.gsi.gov.uk

**Post**
You can send your response by post to this address:
Office for Disability Issues (Disability Strategy team)  
Ground Floor, Caxton House,  
6-12 Tothill Street,  
London, SW1H 9NA
Alternative formats
This publication is available in audio, Braille, Easy Read and a summary is available in British Sign Language (BSL). Please contact the Office for Disability Issues if you require these or other formats. We will accept responses in your preferred format, including audio or BSL submissions.

Run your own discussion event
We are producing a discussion guide to help disabled people and their organisations run their own discussion events.

We have a small budget to help with the expenses of engaging with disabled people. If you are interested in running your own event, please contact the Office for Disability Issues by Friday 20 January 2012, telling us what support you may need.

Find out more on our website: www.odi.gov.uk/fulfillingpotential

Queries about this discussion document
If you have questions about this discussion document or running your own event, you can contact the Disability Strategy team.

Telephone (switchboard): 020 7340 4000
Email: fulfilling.potential@dwp.gsi.gov.uk
Annex A
Case studies
Annex A
Case studies

We have developed the following case studies with disability organisations. Although the case studies have been anonymised and fictionalised, they are based on real experiences. They intend to illustrate the everyday lives of disabled people in relation to the three principles which form the basis of this document. They are designed to provide some background context to the questions, and to help you think about some of the issues you may wish to talk about when responding to the questions.
Realising aspirations

Case study 1: Stephanie

Stephanie has congenital muscular dystrophy and uses a powered wheelchair to get around. She also needs help with most day-to-day tasks, including washing, dressing, preparing meals as well as support on her course for note-taking and collecting books from the library.

Going to university was the obvious next step for her after achieving good grades in her A-Levels. After a lot of thought, she decided to move away from home to make the most of her university experience. However, she was very nervous about changing her care package and getting full time care, given her Dad had provided some of her care at home, with external carers only providing for her personal care.

Stephanie heard about Community Service Volunteers (CSV) from the disability officer at her university. The volunteers would live with her on campus and provide her care for up to a year. Although Social Services were happy with the package, it still had to be approved at ‘panel’, which left Stephanie with an anxious wait.

Stephanie’s experience of CSV is generally very positive, giving a flexibility that she could not find in other care packages and making friends for life with several of her volunteers. However she does warn that, “it can be difficult if you don’t gel with a volunteer – you do spend a lot of time together so it’s important you get on with them!” and notes it can be hard to adjust to new volunteers every year.

Although it has been a big change and has taken a lot of adjusting, Stephanie enjoys her independence and would encourage others to do the same: “To students considering moving away from home to go to university, I would say to go for it!”
Case study 2: Amir

Amir is a computer analyst in a company that makes software for tracking deliveries and cargo movement.

Recently Amir’s father died. He was very close to him and was charged with making the funeral arrangements. At the same time his company were dealing with a large project for an important client.

Ten years ago Amir was diagnosed with depression and had been successfully managing his condition. The combination of these pressures at work and home meant that things got too much for him and his mental health deteriorated.

Amir’s employer, James, was concerned that this difficult period would affect his productivity on this important project. As James said “my company is a small business so everyone needs to count” but he wanted Amir to recover so he could continue his role. James and Amir discussed the situation and they agreed to modify Amir’s working pattern.

Amir felt he could continue working on the core aspects of the project so James agreed to allow him to work from home and then phase coming back into the office.

This allowed Amir the space and time he needed to get back on track and ensure that his family were secure financially.
Case study 3: Mary

Mary worked as a senior manager in a large retailer for 35 years and upon retirement she planned to put her skills to good use by volunteering in the local charity shop and acting as treasurer for her local church. However, Mary has arthritis of the hip which made moving around painful and this was exacerbated when she fell over and broke her ankle. As she lived in a dormitory town with little in the way of local public transport, she spent more and more time in her apartment, leaving her feeling isolated and frustrated, “I felt that the retirement I had planned for years had been taken away from me. People were very sympathetic but it was like they forgot about me. It was a case of “out of sight out of mind.”

When a friend first mentioned community transport Mary was sceptical, thinking it was geared towards groups of people. After some research Mary found that there was a community car scheme in her area and thought this could be useful. It allowed her to do the things she wanted to do, but she thinks the most important benefit was getting her “seen” out in public again. “Once people knew I was still around, still willing and able to help, solutions could be found”.

Although Mary is not as mobile as she once was and now only works in the charity shop once a week, she is able to help them with a lot of administrative work through email and often has her views sought on church matters in the same way. She believes that community transport, along with the flexibility of her peers, played a big role in allowing her to restructure her life in changing circumstances.
Individual control

Case study 4: Jake

Jake is 2 and has complex physical needs. Jane and Mike, Jake’s parents, were anxious about their child’s future from diagnosis and because none of their friends knew how to support them, Jane and Mike felt isolated.

Doctors told Jane and Mike to be careful with their child and that he was ‘fragile’, they were afraid of playing with their child for fear of “breaking” him. Jane had to give up work to take Jake to appointments, while Mike had to take on extra shift work to cover both the loss of income and the extra costs of caring for Jake. This situation put significant pressure on Jane and Mike, causing strain in their relationship.

Through work Mike met Tom who had an older disabled child. Tom introduced them to a parent-child club, and through regularly attending this club both Mike and Jane grew in confidence in interacting with their child. By talking to other parents in the group they began to see a brighter future for their child. Their new attitude towards their child slowly encouraged others to offer to look after Jake on occasion, which gave the parents more flexibility to explore leisure and work prospects.
Case study 5: David

David is 26, until recently he had been receiving traditional care services from his local council. After a review of his needs, David was offered a direct payment, which meant the council would give him the money and freedom to choose who he wanted to support him, when, and what activities he wanted to do.

David recruited two support workers who were close to his age and he was able to seek out new activities. Using his love of the outdoors, he helped to design a community garden and also spent a lot of time in a local independent music store. This store gave him a part time job, supported by one of his support workers. He now spends more time with people his age and goes out with his work colleagues to the local rock bar.

He does, however, recognise challenges in using his new payment. “I had to get used to thinking that these are my staff so I am responsible for them. For the first time I had to think about budgeting, but no one gave me any help with that. I was lucky that my parents are good with money so could help me out.”
Case study 6: Rita

Rita lives at a residential care home in a seaside town. At the age of 58, she has spent most of her life living with the other residents and sees them as family. Rita has always been an active member of the home, suggesting outings they should go on and setting up a movie night once a month.

After movie night was forgotten about when she was sick, Rita talked to the manager of the home and other residents about an idea she had to give people a greater say over what they did and wanted. She arranged joint management and resident meetings and after much discussion the home began to trial Rita’s ideas. Rita was elected to chair the new resident’s committee, and works to ensure that all residents are supported to do what they want, when they want.

All residents’ care and support became more personalised, with both residents and most of the staff supporting the change. Rita has been working with the home to make sure each resident is supported to do the things they want to do, in the way they want to do them.

Case study 7: Bethany

Bethany is a wheelchair user and lives on the outskirts of a small market town. She has a very active social life, meeting friends and her boyfriend Steve in town many nights a week. She has worked as a secretary at a local college for six years and is taking an evening class there to learn French. She has no problem moving around at college, but getting to and from it is another thing. Her local bus is totally inaccessible, and she can’t wheel herself over the uneven pavement or around the lampposts without spending most of the journey in the middle of the road.

So she uses taxis to get about, which she resents as it means it costs her double to go out or get to work compared to her friends and colleagues. Even the new residential area on the other side of town is not accessible. Bethany says “if people would just think before building things it would help me to get around more cheaply and enable me to do the everyday things I need to.”
Changing attitudes and behaviours

Case study 8: Julie

Julie lost her hearing as a child and usually uses hearing aids to hear other people. She does speak and read English fluently, but sometimes finds it hard to make her voice understood. She recently decided that she’d like to play a bigger role in her local community and stood for the local council. However when talking to voters about her policies, she found that the people she was talking to often spoke back to her as though she was a child and they didn’t really try and listen to what she was saying. Julie is determined not to give up, and given appropriate support she feels she can run an effective and successful campaign which also raises awareness of hearing loss in general.

Case study 9: Claire

Claire, who is visually impaired, experienced some difficulties getting around a large chain store in the north east of England. She had asked one of the staff for assistance, but was helped by someone who had no understanding of how to guide her appropriately. Abandoned at various points and roughly manhandled around the store, Claire was left frustrated and upset by the shopping experience because she couldn’t understand why the staff member didn’t know how to deal with her appropriately and with respect.

Claire eventually decided to complain to the store, who acted on this complaint. They apologised and invited the advocacy group working with Claire to their Head Office to explore how to solve the problems that Claire faced. The store is subsequently using this as an opportunity to develop their training to improve their in-store practices for providing assistance.
Case study 10: Joe and Beth

Joe and Beth both have a learning disability. In their first flat they were happy but when new people moved downstairs they shouted things and kept them awake at night. They were evicted but with the ground floor flat empty, kids in the street started to shout abuse, smashed a window, scratched the front door and banged on the windows. The police said that as no physical harm was caused there was little that they could do except increase the number of patrols in the area and give Joe and Beth a number to call if there was an incident but this was not very effective.

Joe became very withdrawn and would not talk to anyone. Beth lost a lot of weight and would call her sister in tears. One day Beth and Joe came home and their door had been forced open. A letter was sent to social services requesting that they be moved. They had a good case worker from the Housing Association who helped them write the letter and who respected and listened to them.

Joe and Beth have moved to a lovely flat in an area where they do not get targeted, aside from one incident on a bus.

Case study 11: David

David is a middle manager recruiting for a post within his team. One of the applicants for the position discloses on her application form that she has a disability and requires reasonable adjustments to be made if invited to interview. David approaches his HR department to get advice about what he needs to do to ensure the interview process is accessible. His HR department advise him not to interview the disabled candidate, as they feel she would be unable to do the job. David rejects this view, and asks the candidate directly what adjustments she needs to be made.

Following this episode David meets with the Head of HR to seek a review of the organisation’s policies regarding how HR supports managers in meeting their responsibilities under the Equality Act during the recruitment process, which leads to the production of a policy statement on accessible recruitment processes and procedures.
Annex B
What the evidence says
Annex B

What the evidence says

There is a large amount of information and evidence available on the Office for Disability Issues website at www.odi.gov.uk/research.

We have included some key facts in this annex for each of the three areas of the discussion document (raising aspirations, individual control, and changing attitudes and behaviours). This is by no means comprehensive, but it is intended to illustrate the evidence base we will be using to develop ideas for the new strategy. It may also help you to think about what you want to include in your responses to the discussion questions.

We want to ensure that the new strategy builds on previous discussions with disabled people, for example the Life Chances of Disabled People report, the Independent Living Strategy, the Roadmap and the UK’s report to the UN on implementation of the Convention on the Rights of Disabled People.

Realising aspirations

Disabled children and young people have the same aspirations as their non-disabled peers in areas such as education, work and independent living. However, societal barriers have limited the realisation of disabled people’s ability to achieve their aspirations, which has contributed to significantly worse educational and employment outcomes.\textsuperscript{17}

Disabled people are likely to experience reduced educational outcomes:

- Disabled people are twice as likely not to hold any qualifications compared to non-disabled people, and around half as likely to hold a degree level qualification.\textsuperscript{18}

\textsuperscript{17} Burchardt, Tania, 2005, The education and employment of disabled young people, Policy Press

\textsuperscript{18} Office for National Statistics, Labour Force Survey, Quarter 2, 2010
• The Life Opportunities Survey 2009/10 shows that 28 per cent of children with impairments weren’t able to take part in education as much as they wanted to, compared to 3 per cent of children without impairments. Adults with impairments were almost twice as likely as adults without impairments to experience a barrier to learning (17 per cent compared to 9 per cent).  

• The existence of special educational needs (SEN) relates strongly to academic attainment in Year 11 – pupils with SEN did not achieve the same grades at GCSE. 20 per cent of children with SEN achieved 5 or more A*-C grades including English and maths at GCSE in 2009/10, compared to 85 per cent of pupils without SEN.

Evidence also shows that educational attainment has an impact across the life course, whether individuals are disabled from childhood or youth, or acquire a disability later in life. If you do not do well in school your chances of experiencing unemployment and welfare dependency are significantly increased:

• At the age of 19 disabled young people are more likely to be NEET (not in employment, education or training) and less likely to be in employment than non-disabled young people.

• In 2011 the employment rate of disabled people was 48.8 per cent, compared to 77.5 per cent of non-disabled people.


20 Department for Education, National Pupil Database, 2009/10


Both disabled and non-disabled people with no qualifications are around four times more likely to be unemployed compared to people with a degree qualification or higher. However, there is no difference between the proportions of disabled and non-disabled people with a degree who are in high-level jobs (83 per cent).

The role of the family can be important in supporting disabled people to realise their aspirations:

• The Frank Field Review reports that the most important drivers of children’s life chances are positive parenting, a good home learning environment and parents’ qualifications.

• Families with disabled members face particular pressures on their relationships, particularly parents of younger disabled children. They are more likely to experience family breakdown, with the attendant negative effects on work prospects, their children and educational aspirations.

• Non-disabled families do not always prepare disabled children for the same futures that they envisage for non-disabled children.

Aspirations for older people with high support needs cover a wide spectrum of interests, activities and relationships. Their aspirations are often around wanting the opportunity to ‘live a normal life’, for example to be part of daily routines, to keep fit and healthy, and to contribute to family and community life.

23 Office for National Statistics, Labour Force Survey, Quarter 2 2010. The unemployment rate for disabled people with degree level qualifications is 6 per cent compared to those with no qualification at 20 per cent. For non-disabled people the unemployment rate is around 4 per cent for those with degree level qualifications compared to 16 per cent for those with no qualification.


25 Shah, Sonali, 2008, Young disabled people: aspirations, choices and constraints, Ashgate

Individual control

Disabled people often tell us they do not have as much choice and control over their day-to-day lives as they would like:

• 23 per cent of disabled people believe that they do not frequently have choice and control over their lives.27

• While over 60 per cent of adults with impairments have reported they always have a say over the care assistance they receive, around a fifth (19 per cent) reported that they only have a say ‘sometimes’, ‘rarely’ or ‘never’.28

• Adults with impairments are almost twice as likely as those without impairments to say they have little or no choice over how they spent their free time (26 per cent and 15 per cent respectively).29

• Disabled people report barriers to accessing many services and activities including education, transport, health, social care, and sport, social and recreational activities30.

27 Office for National Statistics, ONS Opinions Survey, 2010
Findings from the Office for Disability Issues’ independent living demonstration projects\textsuperscript{31} were that:

- Personal support planning and brokerage from user-led organisations can give disabled people more choice and control over services.
- Peer support can be effective in disabled people achieving control to manage personal budgets.
- Family members with caring responsibilities can play an important role in facilitating choice and control.
- Accessible information about services and support that are available can influence people’s choice and control about how they live their lives.
- Older people, particularly in residential care settings, and their relatives or carers, do not always feel empowered to speak up. Involving residents in day-to-day decisions and activities can have an impact on redressing the balance of power.

Disabled people are more likely to be in poverty:

- 3.7 million individuals live in income poverty in families with at least one disabled member (defined as living in a household below 60 per cent of median income)\textsuperscript{32}.
- Disabled adults are more likely to live in persistent poverty than non-disabled adults (defined as living in a low-income household for at least three years in the last four years)\textsuperscript{33}.


Changing attitudes and behaviours:

Evidence from the British Social Attitudes Survey\(^\text{34}\) shows that there continues to be prejudice towards disabled people:

- 8 in 10 respondents to the British Social Attitudes Survey felt there was still some prejudice towards disabled people.
- Nearly 4 in 10 respondents felt disabled people could not be as productive as non-disabled people.
- Three quarters of people believed that disabled people need caring for.
- People were, in general, more comfortable interacting with people with physical and sensory impairments and less comfortable interacting with people with learning disabilities and mental health conditions.
- People were more comfortable interacting with disabled people in social situations but less comfortable when the disabled person was in a position of power or authority such as their boss or an MP.

In addition:

- 4 per cent of adults on the Life Opportunities Survey said that they had been discriminated against due to a health condition, illness or impairment, or a disability.\(^\text{35}\)
- Disabled people are also more likely to be victims of crime than non-disabled people at all age groups apart from those aged over 65.\(^\text{36}\)

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\(^{36}\) Home Office, British Crime Survey, 2009-10
The relationship between attitudes and behaviour is complex and is not well understood. However, there is some evidence that could help us develop actions to include in the Disability Strategy:

- Contact with disabled people is often seen as the most effective way of challenging stereotypes (although the nature of the contact is important).\(^{37}\)

- Research by DWP in 2002 identified three sources which people felt contributed to their attitudes towards disabled people: the media; personal experience; family influence.\(^{38}\)

- Understanding the precise nature of the attitudes that need changing is central to successful attitude/behaviour change programmes.\(^{39}\)

- The 4 per cent of respondents to the Life Opportunities Survey who said that they had been discriminated against identified health staff, employers and strangers in the street as the most common perpetrators of discrimination.\(^{40}\)

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38 Department for Work and Pensions, 2002, Disabled for life? attitudes towards, and experiences of, disability in Britain

39 Crawley, H, 2009, Understanding and changing public attitudes: A review of existing evidence from public information and communication campaigns, Swansea University

40 Life Opportunities Survey Interim Results, 2009/10
Annex C
UN Convention Articles

Realising aspirations

6  Disabled women – Disabled women have the right to achieve their full potential in all areas of their lives.

23  Respect for home and the family – Disabled people have the rights to marriage, family, parenthood and relationships.

24  Education – Disabled children and adults have the right to all educational opportunities.

26  Habilitation and rehabilitation – Disabled people should be enabled to have full inclusion and participation in all aspects of their lives.

27  Work and employment – Disabled people have the right to work and progress in employment.
Individual control

7 Disabled children – Disabled children have the right to express their views about issues affecting them and for those views to be taken into account.

9 Accessibility – Disabled people have the right to be able to access all areas of life including buildings, transport, information and communication.

19 Living independently and being included in the community – Disabled people have the right to choose where they live and be fully included in their community.

20 Personal mobility – Disabled people have the right to independent personal mobility including the provision of mobility aids and training in mobility skills.

25 Health – Disabled people have the right to the best possible personal health and access to general and disability specific health services.

28 Adequate standard of living and social protection – Disabled people have the right to an adequate standard of living including food, clothing and housing.

30 Participation in cultural life, recreation, leisure and sport – Disabled people have the right to enjoy and take part in leisure and recreational activities.

Changing attitudes and behaviours

5 Equality and non-discrimination – Everyone is equal under the law and discrimination against disabled people is not allowed.

8 Awareness-raising – Countries should adopt effective awareness raising policies to promote a positive image of disabled people including their rights.

10 Right to life – Disabled people have the right to life and to enjoy it.

11 Situations of risk & humanitarian emergencies – Disabled people have the right to be properly protected in situations of risk including natural disasters.

12 Equal recognition before the law – Disabled people are equal in all legal measures of life.
13 Access to justice – Disabled people have the right to justice, liberty and security.

14 Liberty & security of the person – Disabled people have equal access to justice, liberty and security.

15 Freedom from torture or cruel, inhuman or degrading treatment or punishment – Disabled people must not be treated cruelly, tortured or experimented on, especially medically.

16 Freedom from exploitation, violence & abuse – Disabled people have the right to be protected from violence and abuse, and not to be misused or mistreated.

17 Protecting the integrity of the person – Disabled people have the right to respect for their physical and mental abilities.

18 Liberty of movement & nationality – Disabled people have the right to liberty of movement, nationality and choice of residence.

21 Freedom of expression and opinion, and access to information – Disabled people have the right to seek information, and to express themselves and their opinion.

22 Respect for privacy – Disabled people have the right to privacy including personal information.

29 Participation in political and public life – Disabled people have the right to take part in political and public life.

32 International cooperation – Countries should work together to enable disabled people across the world to have equal access to their rights.

Implementation and monitoring

31 Statistics and data collection – Countries should collect disaggregated appropriate information to enable them implement the Convention. They should ensure that statistics and data are fully accessible to disabled people.

33 National implementation and monitoring – Countries should have a focal point to co-ordinate the work on the Convention and should involve disabled people in this process.