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Parallel D Lowther
Inclusion

Yes, it is all working.

>>: Okay, sorry, is that okay?

>>: Ladies and gentlemen. We are delaying start for a couple of minutes. People are drifting back from lunch so if you bear with us, we will make a start fairly soon.

>>: Okay, ladies and gentlemen. I think we will make a start. We might have one or two late arrivals. My name is Adrian Martin. Will be moderating the session this afternoon. I work for both Scottish and UK governments which is a bit of a strange thing these days, something called the working health unit I won't bother to explain just at the moment. We have five speakers this afternoon. Perhaps unusually I found they are all based in the UK whereas most of the speakers I have had in the other sessions have been from around the world. So we are going to take all five presentations and then there is going to be an opportunity to ask questions at the end assuming we have enough time which hopefully we will plan for. Our first speaker this afternoon is a double act. It is David and Tom from Napier university here in Edinburgh who are going to talk to us about street audits so gentlemen.

>>: Thank you very much Adrian. Right well it is a great pleasure to be here. What I am going to do is to talk a little bit about a street audit, one that I organised mostly on a voluntary basis only about a kilometre from here in the hall cross area of Edinburgh. What I will be doing is describing this audit, telling you a little bit about what we found. Drawing some lessons about conclusive design that we hurt mentioned quite a bit this morning in the plenary and also explaining a little bit about some of the things that have changed as a result of this and then my colleague Tom is going to talk a little bit about why change as a result of this and other interventions can a sometimes be harder than you might wish or hope. This slide is just one about living streets which is a voluntary organisation which promotes pedestrian interests and campaigns for pedestrians. I am a member of this organisation, I have been for about 20 years and they are helping to sponsor this event. So just very briefly the first question what is a street audit. You I hear you possibly wonder to yourself. Well a street audit is really very simple. It is simply a structured process

of having a look at a street from the pedestrian S point of view from the walking point of view and making a systematic way of recording your observations and making recommendations about how the street can be improved so this slide that I have up here is actually the toll cross street audit in practice with a group of people looking at a signage pole which has nothing on it but is nonetheless obstructing the people who are walking up and down the street.

A street audit isn't an access audit in terms of identifying barriers for disabled people. But the key message really that I wanted to get over and why I was motivated to prepare this presentation is that the involvement of disabled people in a street audit as a kind of richness and a degree of perception which otherwise you may not get and you will get a better audit, you will get better results and better findings if you involve a range of people with different perceptions and different ways of looking at the world and the involvement of people from access panels and other people with disabilities I think is absolutely critical for getting that inclusive design that is good, makes streets better for disabled people but also makes streets better for everyone else.

So what did we find in this audit. Mostly what I am going to do is run through some photographs quite briefly which I will briefly describe of the kind of problems that we found. This obviously is kind of headlines rather than the detail given the time. So that the four headings I have here are too much traffic, dominance of traffic, poor surfaces that the people are expected to walk on. Difficulty crossing the road and clutter. In other words, things that are in the way, either fixed or temporary. And as my colleague Tom and I were saying possibly some of you have noticed these or even bumped into them on your way to the conference over the past couple of days.

So first of all traffic dominance. This is a picture really of the home street in toll cross, the main street. I think it is six lanes of traffic and quite small pavements so the whole space building to building is overwhelmingly dominated by vehicles and that is quite a difficult thing to change at least in the short-term but it is a really kind of important factor in terms of the whole ambience and feeling of the street for somebody using it on foot or with a wheelchair or mobility aid.

Second point as I mentioned, pavement surfaces, a picture of some badly maintained paving slabs, holes, cracked pavements, et cetera, they are unfortunately very common in our city. You don't have to go too far to find them.

The third slide I have here is about cross in the road. It is partly about the first slide I showed about the home street which is a busy main road, a trunk road. Obviously this is quite a difficult road to cross and there are some signalled crossings but you may have to wait quite a long time to cross but the slide I have here is a slight road in Laughrin Place which comes off home street and there are a number of problems with this. There is parked vehicles on the curb; there is no dropped curb or raised pavement so sum-up in a wheelchair would not be able to cross that junction even if the parked cars weren't there to stop you

doing so and there is also various other things like some nasty metal bollards which you may be able to see in the far distance. So crossing the road is often quite problematic.

Finally looking at street clutter. I have two slides about street clutter which is a subject I could go on at length about but I won't be allowed to you will be pleased to hear. So the first picture here includes what we call an A board on the left which is a temporary advertising sign for shops. Often are really unpopular with people with visual impairments, you don't know if it is going to be there one day for another but it narrows the pavement for everybody and it is a really busy shopping street. On the right is a derelict telephone box that performed no public purpose whatsoever. There is no Telecoms equipment in it, possibly attracting some antisocial behaviour but certainly contributing absolutely nothing to the public space and my second slide on street clutter is really focusing on temporary street clutter with one of our auditors Ian very skillfully navigating some scaffolding which is very poorly clad and not with soft material as it should be but also in the pure there are wheelie bins, there is a bicycle and so on and so forth.

So what happens as a result of this audit. First of all the phone box was removed, the one here on the right, quite promptly I felt some achievement about that. We have locally got a campaign to review the whole policy about these boards which again you will see out in Morrison street outside this conference centre if you wish. Most of the more structural changes such as dropping the kerbs and so on will wait on a major project to reform those streets which is supposed to be taking place in the next year so we will have to wait and see. But I now wanted just to draw one or two lessons before passing on to my colleague Tom who will look at the wider policy picture. So just a few thoughts and reflections on this street audit process. First of all audits can be a way of raising public awareness about public space, what is good about it particularly what can be improved about it. People as pedestrians are often very critical of the streets they walk along, they accept that is what the street looks like but it can help people ask really obvious questions what is that doing there, why is this here,? And so on and so forth. It is also a way of identifying some quite specific practical examples like the little things I have shown here that actually demonstrate a wider strategic issue which is particularly about how streets are managed or not managed effectively on a day-to-day basis. And it is very good as I mentioned before about promoting inclusive design principles removing barriers so that we make streets better places for everyone. The second reflections on the lessons are that these audits there is nothing mysterious about a street audit. Anybody can do it. There is no special knowledge required but if you get a diverse group of people involved in doing them they will spot different things and you will get a better process. The toll cross audit -- a better process -- toll cross street audit was done -- it does take a bit of time and there are possible opportunities to get a small amount of funding which might enable people to get some professional support in them but if you are involved in a community group or a project you can have a go at this yourself. And I will now pass on to my colleague, Tom. (Applause).

Tom. Thank you very much. My name is Tom Wry. I am David's colleague. I am from Edinburgh Napier University also on the national board of trustees of the Living Streets charity, Pedestrians Charity. I wanted to draw some more conclusions from the work David and his colleagues did in the street audit. As a lobby group in Edinburgh on pedestrian issues we find the City Council has many very laudable policy objectives on paper but clearly practical exercises like the street audit illustrate that those policies don't always get implemented. A PhD student of mine is working on this topic of the implementation of transport policy she is looking at buses but her framework, theoretical framework applies also I think in this case to our question of if there are these policies why do they not always get implemented. I won't run through the entire framework, you will be pleased to know, here which has ten relatively complicated points. I would like to highlight what from our experience as a lobby group and working with the Local Authority over many years we find to be some of the key reasons why some of the street management problems that David highlighted tend to keep occurring. I think important issues include to an extent a lack of money and a lack of staff to carry out some of the changes that are required, the improvements that are required and there is not very good communication all the time within the organisation so those people who draw up the policies maybe don't have a good way of communicating with the people who implement the policies on the ground. But I think the most important issues or barriers if you like to implementation that we have identified in our experience is really the people who do work on the ground, what are their attitudes and awareness of these problems and we think that sometimes they really don't actually have that great awareness of what these problems are and therefore the street audit can help perhaps to overcome that and they have a lot of discretion in how they allocate resources and how they design things that go on on the ground so whilst the standard design of a dropped curb for example may say that it should be flush with the road the implementer who puts it in feels that it is entirely reasonable to have a then or 20-millimetre up stand on that dropped curb once while they are actually building it so those things about the disposition of implementers and the discretion of implementers is very important, very important points and also we have noticed that those people who are responsible for example for enforcing some of the policy about temporary street clutter, they are of course faced with a lot of conflict because on the one hand there are groups such as Living Streets saying listing is in the way. On the other hand there are shopkeepers who are saying ah but I need my A boards so that I can communicate my wares to the public and they will keep on putting their A board back even after they have been asked to take it away so David has experienced that kind of activity. Or problem, first hand.

How could we change this? And this is the final slight. Well we think, of course, I mean senior officer and political leadership within the Local Authority making people in the Local Authority aware that it is a key problem and encouraging or requiring really the proper communication of design standards and policies and processes internally within the organisation. If the senior officers and politicians are not insisting that

these design standings that are good and the policies that are good are communicated within the organisation they are unlikely to get through to the people on the ground. So there is communication and there is training. Another issue is that resources are not necessarily allocated where they are particularly needed so there may be a large number of for example bridge design engineers whose time frankly could be better used out there on the street enforcing some of the policies and requirements that there are and I think also, finally, and it is related back to a senior officer and political leadership, a culture of learning from elsewhere and not elsewhere necessarily a long way away abroad, elsewhere places like Dundee, even Glasgow would be something that would help to bring about some of these changes which would improve the situation that David's street audit highlighted. And I think that's all that both of us would like to say and I hope we are on time and those are our contact details on our Websites so thanks very much for listening. I myself won't be able to stay to take any questions. But I am sure David will be able to handle them admirably. Thanks for listening. (Applause).

>>: Thank you both. Little bit more conscious when I am wandering around. Am I right in thinking, a question, in this country that there is talk of legislation to stop people parking on pavements but it hasn't gone through yet?

>>: Yes, that is pavement parking and, responsible parking bill I think is hopefully going through the Scottish Parliament to enable Councils to stop that. Some Councils may opt out so that is not a done deal but certainly will help a number of those problems.

>>: Thank you for that. My own curiosity satisfied.

Our next speaker is Alex Saunders who comes from the Royal National Institute of blind people and Alex is going to talk to us about helping people with visual impairment gain and keep employment which is something that I am particularly interested in. So over to you.

>>: Alex Saunders.

Good afternoon everybody. Can you hear me okay. My name is Alex and I work for the Royal National Institute of Blind people in based here in the UK and for the evidence and service impact team which is research I guess in old money.

And the purpose of this presentation is to highlight one or two of the key issues facing people with sight loss, looking to find or stay in work and also to share some resources that we hope may be useful to those of you who you working with people with sight loss around the issue of employment. The presentation contains a number of links to resources on the Web. Unfortunately the presentation won't be available on the world Congress Website after the event. However, if you want a copy of the presentation please do come and see me afterwards.

Okay just a couple of things about RNIB. We are the leading charity for blind or partially sighted people in the UK and our work is around four key principles, preventing avoidable sight loss and being there for

people as they are losing their sight and of course the key, the two. Key pillars of independence and inclusion within society. And in terms of employment we deliver direct support and employment services to blind and partially sighted people looking to find or stay in work and these services are delivered in Partnership with other sight loss organisations who form part of the overall RNIB group; in particular our sister charity action for blind people.

It is estimated there are more than 2,000,000 people in the UK that have sight loss that is severe enough to have a significant impact on their daily lives and of this population approximately three-quarters of a million people are registered severely sight impaired or sight impaired, i.e blind or partially sighted and of that population approximately 84,000 people are of working age; in other words between the ages of 18 and 64.

The employment statistics do make depressing reading unfortunately. Only one in four of the working age population is in employment. Just over 25 per cent. And that compares to a figure of one in three a decade ago and only about one in ten severely sight impaired people are in work. This compares with 47 per cent of the disabled population as a whole and 80 per cent of the UK population without a disability. However, what we do know is that once people are in work blind and partially sighted people succeed in a wide variety of jobs across all employment sectors. There is a great deal of research to support this and our own report which I have flagged up within the presentation around the jobs that blind and partially sighted people do highlights the fact that people working across all of the nine major occupation groups from directors through to factory assistants and within that report we analyse evidence from around the world as well which talks about the kinds of jobs that people are doing and so there is information about approximately 1,000 different roles that an blind and partially sighted people are successfully involved in. So in general terms good employment support for people looking for work typically involves specialist support. Sight loss is the biggest barrier that people face. Individuals may face barriers common with other individuals, for example a broken employment record or a lack of qualifications but sight loss will require a specialist resource intensive model of support when we are thinking about employment. RNIB have created an assessment model that places the functional impact of sight loss at its heart and then looks out from that at the kind of skills that individuals are going to need to acquire in order to be successful in work.

In terms of individuals in work losing their sight the key message is very much sight loss should not equal job loss and individuals should be supported and encouraged to stay in work wherever possible by providing the right information, advice equipment and support to help individuals to stay in work.

Okay. So how to provide effective support? The key is to provide directly or be able to signpost blind and partially sighted people to specialist services as necessary and what I have here really is a scatter gun list of the kinds of things you may wish to think about. Training to develop assistive technology skills.

Insuring that an individual is able to use a computer which can enlarge information on a screen or indeed through synthetic voice read information via a computer and of course there is a whole range of new technologies around I-Pads and tablets and so on. The development of mobility skills which are crucial for independent living and to reduce a sense of isolation but also critical when thinking about work and thinking about moving to and from work and within the work place. Making the most of residual vision. We know that of the quarter of a million people registered as blind in the UK only about 4 per cent of those individuals have no light perception at all. So it is important to make the best of the vision that people have through aids and adaptations and we know in employment it is absolutely critical that individuals develop the confidence to communicate sight specific needs and reasonable adjustments to employers. We know that there are lots of, there are examples of good employers out there but in general employers find it difficult to employ disabled people and to employ sight loss people in particular and it is very important that people acquire the skills to say this is how I can do your job.

It is useful to know that there are reemployment training available to meet the complex needs of blind and partially sighted job seekers although probably the most important message or the message I would like to give is a work based assessment for anybody starting work or anybody in work and about to lose their sight is absolutely critical. A work based assessment is an assessment provided by a specialist who goes into the workplace and looks at how it is that you can support that individual with sight loss to fulfil their job effectively through various adjustments at work. RNIB happen to provide a work based assessment but there are other work based assessments available.

Clear practical advice on reasonable adjustments at work is very important. So information about what employers can actually do at a practical level. Example as something as simple as moving a desk to an area where there is greater light, perhaps changing people's work practice to involve less travel. A whole range of issues. And promoting awareness of the Access to Work scheme which as some of you I am sure know is a Government funded scheme that can provide up to 100 per cent of funding for additional support that somebody might need with sight loss in order to perform their role in work.

As I mentioned RNIB and action for blind people provide specialist advice and support to employers, employment professionals and blind and partially sighted people and on the screen are some contact numbers and Website links and we also produce a number of resources and I just want to flag up one particular resource which we have just published a week or so ago and this particular guide is called working with blind and partially sighted colleagues. It was written by RNIB's working age customer panel which is a group of blind and partially sighted people who are in work, who influence the work that we do and ensure that we are saying the right things and this guide is aimed at line managers, supervisors, colleagues, so people who are working alongside blind and partially sighted people and talked about the kind of issues people with sight loss feel are important on a day-to-day basis in work in order to help

people to succeed.

We provide lots of information for blind and partially sighted people for employers and professionals and the last thing I really want to highlight is RNIB's employment practice and research network. This was established to support employers, researchers, employment professionals, rehab officers, people who are working in and around the area of employment and who have interest in sharing best practice and learning from others around how you might support somebody to find work or indeed to stay in work if somebody is losing their sight.

Okay, the final slide is some contact details for myself and some Website links so please do come and find me and I will take down your details and make sure you get a copy of the presentation. Thanks very much. (Applause).

>>: Thank you Alex. I have to admit I was aware of the general stats on employment of disabled people but not how bad they were for people with visual impairment, that is fairly appalling. Right. Third speaker is Owe Mar Hut who is Edinburgh local although he supports Liverpool for some strange reason. And Omar is going to talk about his personal experience of independent living here in Edinburgh and also about the employment of personal assistants. And that is Omar's job. He is an independent living officer here in Edinburgh.

Omar.

Thanks very much, it is a pleasure to be here today. My presentation is going to be about the impact of good social care and support, the impact that good social care and support can have on independent living and I am going to give my perspective. I am representing my organisation, the Lothian centre for inclusive living. We support disabled people to employ their own personal assistants predominantly promoting self directed support and direct payments and my presentation structure is as follows. To lay the discussion in context today before I talk about my journey towards independence I am going to briefly touch on some models of disability before I explain my journey towards independence and what that meant for me in terms of employing personal assistants, in terms of gaining access to employment and in terms of moving into my own house and living my life independently.

Before finally we look at the impact good social care and support can have on independent living and some of the key messages and implications that we can perhaps take from my story and the key thing I want to stress in this presentation is that this is just my perspective. It is my personal journey. Everybody's own journey is different. This is just my personal perspective and my story about how independence developed for me and what independence actually means for myself. So if we move on then. And we lay the foundations for discussion. Some of you may be aware that there is generally considered to be two main perspectives on disability. The most traditional model and the most, the model that services are quite often based, majority of services in this country certainly is the medical model also known as the personal

tragedy model of disability. Here disability is viewed as the individual's problem. It is seen as internal for the individual. Society itself is seen as normal, defer anybody that has a disability is seen as abnormal and because people are seen as abnormal there is often pressure for disabled people to under go treatment in order to fix their impairment or disability and that is really where services have been develop, certainly over the past 80 odd years in terms of the medical model of disability. This model was, it began to be challenged in the 1970s by the social model. Now the social model derived from America from the independent living movement and the independent living movement stated that the problem isn't actually with the person's disability or impairment. The reason why people are disabled, and it has been touched on by other speakers already, is because of certain disabling factors that result in unequal access to information and create barriers. These barriers can be physical or they can be attitudinal and what happened was the independent living movement developed a certain number of key needs that it saw as disabled people needed in order for them to be independent and I will come on to that during the later part of my discussion but these are generally the two perspectives on disability and this, although I didn't know it at the time, this really has been a journey for me in terms of the two models. I wasn't aware that there was models of disability but actually these models have played a key role in my life. Certainly, the medical model certainly when I was a child and now the social model as I find myself in working employment so at this what we will go on to explore just now.

So I was asked to really, by my Chief Executive, to give an illustration of what independent living has meant to me in terms of my personal journey. So to give you a little bit of background to myself I was born in 1984 with cerebral palsy which meant I had limited mobility. I wasn't able to stand or walk when I was younger. I lived for the first 10 years of my life as some of you may tell by the accent I am actually a Mancunian so I live down in Manchester, a small town just outside Manchester called Rochdale and when I reached the age of nursery and school age I was automatically enrolled into a special school for children with disabilities. There were about 40 children with a mix or disabilities and learning difficulties and the first part of my school education was completed in this environment up until I was around the age of ten. This environment although I didn't know it at the time, now I look back on it and I see the models that we have just spoken about, seem to be very medical in its operation and in its application in terms of independence was seen as something that you had to gain in order to be normal and through that we were told that we had to have regular physiotherapy sessions. Regular high throw therapy sessions. We were help to learn how to dress ourselves in order to conform to society and be as normal as possible. And this went on for a number of years and it was around this time during 1989 that my parents saw a documentary on the television and it was about the Peto Institute in Budapest which some of you may have heard of. This institute was, the purpose of this institute was to help disabled children to become more mobile through a series of intensive physiotherapy and my parents as any parents do wanted the

best for their child and they felt that this would be a good avenue for me to gain further independence mobility wise. As I said to you at the beginning I wasn't able to stand without assistance or move about without much assistance. I had to be picked up or in a buggy when I was younger. So we ventured to Hungary. Hungary at that time was just coming out of communism. It was a very different place to what it is today. Myself and my parents attended there over 3 years and I underwent several courses of intense physiotherapy, lasting sometimes five or 6 hours a day and at the same time the institute was affiliated to a local hospital and a Professor Who specialised in mobility surgery and helping people gain their mobility. So at that time my parents decided this would be another shot at gaining better mobility and I underwent several operations to my legs and to my groin area which enabled me to actually stand up and movement over a period of about two to 3 years. So this was a period of intense physio and I was only around the age of eight or nine at the time and I got back to the UK and I attended my special school again and as any child would when you are told to do something and you are forced to do something you become resistant so I began to become resistant towards doing physio, and being told to do physio, and I began to take it out on my parents and I began to become very anti, medical model. I was quite fed up and then by a twist of fate really, 20 years ago, my father moved up here and began working for one of the banks. We moved up with him so I have been here for around about 21 years. And my parents had battled to try and get me into some sort of mainstream education when I was down south to no avail so this provided them the opportunity to have another shot at it so I underwent an education psychologist assessment when I moved up here in 75 and the chap asked me some general questions and he came to the conclusion that yes this young lad will be able to survive in a mainstream environment provided he is given the right support in terms of having a scribe and a support worker to assist him to get about an making sure that the building and things is accessible in terms of ramps, et cetera and I was the first disabled child to attend a mainstream school in the city of Edinburgh 20 years ago so I completed the last part of my primary school education, primary six and primary seven up here in Scotland before attending a mainstream high school because it had a lift and I completed 6 years at that high school.

So you can actually see that my journey had already begun to move from the medical model towards the social model in terms of having access to inclusive education and training and these are some of the needs of independence that I spoke about earlier that are kind of key to my story so the worse one there is inclusive education and employment. I was offered the opportunity thankfully to undertake inclusive education and training in terms of completing my primary and secondary school education as well as after leaving high school as well as the opportunity to in fact undertake a degree here in Edinburgh, Edinburgh Napier University. I first of all completed a an Honours Degree in human resource management and then went on to do a masters in that very same subject, graduating in 2009 and it was around that time whilst I was at Uni and the second move towards independence really started to kind of gather steam in a sense

that we found out that it would be possible to employ the personal assistant to help me take notes during lectures, complete assignments and my organisation that I worked for at the time, that it work for now, LCIL help me do that. They helped me procure the funding for my personal assistant and help me advertise for a personal assistance. That was the step towards independence. Myself and my person assistant have been together 10 years so we have been through the whole university, the whole academic side of things and we became close and we developed a very good friendship and eventually my mobility at this point was getting worse and eventually with my peer's back ground in sports coaching I then set to him look will you help me do some physio and this was a turning point for me because within the social model any type of physical activity or mobility is seen as the persons's choice. It is your choice you are not being told to do something. Within the social realm it is even as a choice an informed choice to be able to live the life they choose so began to do further physio and my mobility improved. We also gained funding from social care for social outings and going out and about so my kind of social steer increased at that point and I began to develop in terms of understanding what society was all about and it gave me a little bit more freedom from my parents because at that point my parents had been my main carers so it was a major step towards independence and it contributed and what contributed to that heavily was having access to social care funds. It wasn't an easy process because it is quite a challenging process to obtain funds. You have to undergo several types of assessment and sometimes you feel as though you are being judged and that people are looking at you -- judged and people are looking at you but it was a really key factor in terms of gaining further independence and this went on for a number of years until I left university and then that was back in 2009 and this was when we were in the midst of the financial crisis. I then had to undergo a period of unemployment. I was on the dole for about a year and a half's trying to find opportunities for employment. I applied for many jobs and I had a few interviews but to no avail. And then back in 2012 I realised that I actually had a key attribute and skill already which was already in me in that I had a disability and perhaps I should use that in a positive way. I had always seen it since being at the special school and since looking at things from a medical viewpoint I had looked at disability in a negative light because I was always labelled as disabled so I changed tack after seeking advice. I thought I would use my disability in a positive light and see where that could take me and lo and behold I began to volunteer for the organisation I work for now. I started by answering phones. This was about 4 years ago now. I then went on to become a freelance trainer for the organisation before getting my regular job which I do three days a week which involves helping people to gain personal assistants. So you see a pattern. I began to have access to employment and Access to Work actually which was mentioned by the previous speaker played a key role in making sure that I am able to stay in employment and so although it was difficult to get off the ground with a massive step and that is a factor for why I am able to continue in employment. And this went on for about two and a half years and as any person would, I am sure high one now, nearly 32.

I was beginning to get a little bit fed up of living at home with my parents and we decided the time was right to maybe start looking at accessible housing which was the next key need for independent living and because I had been in employment for a period of time I was able to procure myself a mortgage and purchase my own flat. I have now been living independently in my own flat for about 2 years. It is where I want to stress that the concept of independence doesn't mean fending for yourself or doing things on your own. It means having the right support to be able to live the life that you choose so in my case it is making sure that I have personal assistants so I had to undergo another social care assessment in order to try and obtain further hours of support. In terms of making sure that I had somebody there to help me cook and clean as well as my PA who helps me when I am in work and when I am out and about so that was the next key move towards independence and it is really the stage I am at now in that I have been living in my own place for 2 years and I have had the support to be independent and I think the fine factor which has already been mentioned is it is really important to have accessible and readily available information. That is really key. Information not just in terms of how you access it but in terms of where you get it from and who gives it to you so a lot of my information from childhood was through word of mouth and through my parents and as I became more and more able to think for myself I was able to process information but the problem is a lot of disabled people do not have the freedom to do so so they need to have an avenue so that information can be given to them in a way that is seen as accessible and the other key factors as I mentioned earlier was the social care and sub. That was really the key threat to enable me to gain as much independence as possible.

And I cannot stress enough how vital that is and how challenging the process has been but it has been worthwhile and there are problems with it but we are certainly ahead of the game in terms of where things are compared to some other countries of the world.

So what does my story -- and I stress Ken, it is just my story, it is just what has happened in my life -- what does my story say about the impact that good social care can have for wider society and sufficient the key messages and implications for that? Well first of all I think there needs to be a shift in thinking about the benefits disabled people can bring to wider society in general and I think the first way that can be done is this argument around inclusion versus integration. Integration I see as something that is very medical model based it is something that is seen as we have to try and get people fixed in a certain way or a certain environment to try and integrate them into society. Make them part of society. I think actually inclusion would be much more beneficial and I think inclusion can only happen if it happens organically. I will give you an example, my PA's daughter is now 5 years old and she has been seeing me ever since she was a baby and she recently started school and there was a young girl there in a wheelchair. Because she had been so familiar with me and my needs and being so happy around me she wasn't faced by this girl and she was the only person in the class that was actually able and confident enough to play with this young girl.

and I think that speaks volumes in terms of what we need to do in terms of society. Things need to happen organically and naturally and not allow things to be forced to allow full inclusion to occur and that is the only way we can break down the barriers I have spoken about. I also think that you need to treat people as individuals. I know it is easier set than done when it comes to public services but I do believe, certainly in terms of social, that everybody seems to be tarred with the same brush and everybody is assessed to fit into certain boxes and individual's needs are not taken into into account so a need to look at the person's whole picture and their whole life and what they want to gain out of life. I think that its is the key thing. Too often than not they are seen as people who need social care and their employment needs for volunteer needs, their social needs are looked at and they are left in limbo so that is another key area that society could improve on. And I also think that disabled people need to be viewed as people that can at value and not seen as scroungers and I do think certain elements of the media I will name no names have a responsibility in this area and I actually think that I myself as a disabled person who now employs two personal assistants should be seen ass somebody who adds values because I have contributing to the -- too often than not disabled people aren't seen as as people who can add value and even if you can't as a guide you should be in terms offer skill, in terms of being an individual. So I think those are the key messages that I want to get across along with again, stressing that independence doesn't mean having to went for yourself; it means having the right support to be able to live your life the way you choose and that is where we at the leading centre of inclusive living try and implement our sort of policies an procedures in terms of supporting people with independent living so that we stay true to the independent living movement and making or a that its values are upheld. And so just to conclude then I have briefly, I have given you a brief introduction to two main models of disability before illustrating those with my journey and I believe actually now the two models or disability are actually part of my skill; I don't think it is one or the other. There needs to be a holistic approach and two need to come together they should inform each other really so I have given you some illustration there with my journey towards integrated, some of the implications that my story may have on wider society. Thank you very much for taking the time to listen to me today. (Applause).

>>: Our next speaker is Diane Vixen and...

Diane is going to be talking to us about adapted social housing so Diane, thank you.

>>: Okay. Thank you for inviting me to talk today. I am here to represent horizon Housing Association and the University of sterling where I am post five corrections so looking more relaxed at this point. I think before I introduce you to the project, interestingly I think that you will see interconnections with today's presentation that will highlight the interconnections with some of the previous speakers. So with David and Tom, for example, it will highlight how accessible housing fits into the bigger picture of how accessible is the environment around housing and location and with Alex and Omar it also highlights thinking about

notions of how do disabled people add value to society and how can we change at Tuesday and assumptions around the role of disabled people within so production. So my presentation is about a pilot project and that looked at effective allocations of adopted social housing in Scotland -- housing in Scotland. So structure is going to have a look at the background to the co-production pilot project. Looking at the aims, the methodology. I did have a video clip to show you some reflections from the peer researcher. Unfortunately the link didn't work out so what I will do is just describe Chris to you and hopefully I do him justice so I will do that instead. Then there are some slides about the findings but I just wanted to give you a flavour of those because of time constraints and concentrate more on reflecting upon the actual co-production process and what we can learn from it and then the final slide is about next steps for the project.

So the background to this co-production project is that co-production doesn't happen overnight. It takes a long time to get off the ground sometimes and this project came about through my role as board member with horizon about 2 years ago and I was speaking to Julia Fitzpatrick who is the Director and we were both discussing how there are gaps in research and we had talks with the University of Stirling and because of funding constraints the tracking study that we wanted to do we had to scale it down to a pilot study and here we are.

So it takes a long time to get things off the ground and sometimes it depends on the people involved and horizon have been really inspirational I think and really thinking forward.

So the aim of this project was to look at what makes the allocation process of adapted social housing effective; what makes it work; what challenges are there; and what perhaps gets in the way.

So we also wanted to have a look at the methodology. So the methodology was quite innovative because we had a co-production approach so to begin with we that the Partnership between the horizon, housing associations and the University of Stirling. We had self identified researcher through was myself to lead on the project. We had a peer researcher who, again, was a self identified disabled person who conducted some of the interviews with disabled applicants and we had a peer review panel so we up a panel of six disabled people to oversee the project and give input into the research instruments, thinking about dissemination; how would we present the findings to people; thinking about the report as well at the end of the day and thinking through next steps so all of those inputs were from the peer review panel. We also had a stakeholder forum at the end so it brought together all the stakeholders, the peer review panel, the researchers, the participants and we had discussions around at the end as well. So the methodology, this indeed a literature review just to see what was known what was out there and the background. We did a case study which was a geographical case study or north Lanarkshire, so this involved five housing providers. I conducted 12 semi-structured interviews with organisational staff and Mr Chris beard who is the peer researcher, he did some training with myself around interview skills and he conducted some

interviews with six disabled housing applicants. As I mentioned we had the stakeholder forum towards the end to bring everybody together as well.

So this is where I was going to show you some reflections from Chris about his role as the peer researcher. Unfortunately, the link isn't working so if I maybe just tell you a little bit about Chris. I know Chris from from being on the Board of horizon association. He is retired which was actually quite important because the first person that I approached was in work and participating in a project like this fareths, you know it is quite ad hoc -- it is quite ad hoc and you have to be quite flexible and unfortunately being in work didn't suit that person so Chris being retired was quite an advantage because he was very flexible and he also had the skills in terms of background. He had done an introduction to counselling. So that gave him quite a good background in terms of thinking about interview skills. Chris is also a wheelchair user so he felt really passionate about looking at accessible housing and how it fits as one of the 12 pillars of independent living so he was reason keen to take part in the study as well. Interestingly, when we were planning to do interviews we had to think around how accessible the interview venues were for Chris so we had to adjust some venues because they merge in accessible for a wheelchair user. So that is the bit about Chris.

I probably -- it probably would have sounded better coming from him.

So I will show you some summary findings. I think the main point about this pilot project was to think, how well does the co-production approach work? And really reflect upon it so one of the main findings from this pilot project is that co-production is so effective in gathering the views, the experiences, pulling on the peer support which Omar mentioned in his presentation, the peer review aspects between disabled people to shape research which is meaningful to them and getting aid from the medical model of disability as well. So we found it was very effective so the key messages from the literature., surprise surprise, there had not been a comparable piece of research that was co-production in nature and had looked at the allocation process of adapted social housing.

We found all the participants were highlighting there is a chronic shortage of accessible housing in general across Scotland. There is a lack of awareness about homes to fit which is a Scottish wide accessible housing register and that is run by the Glasgow centre for inclusive living. We also found that a lot of participants spoke about the need for improvements to communication. Now this was really interesting because it was communication in different forms so it was communication between housing providers, perhaps in the same area. There needed to be more communication between them to see what developments they had lined up and what properties they had becoming available and just having a more joined up approach between each other. There was also communication internally so how they communicate with disabled housing applicants. What we heard a lot from the disabled housing applicants is that when they phone up the housing provider, say it is the Local Authority, they would need to repeat their life story again and again and again and often to different people and this takes time and it is a waste

of resources for the organisation too because you have people listening to people's life stories and F as Omar pointed out, people don't fit into boxes. We are quite complicated so you need to have a named person to be with you from start to finish and prevent this repeating of your life story and adding to the frustration because it is quite quite stressful enough trying to move house but also with added issues about accessibility on top of that as well.

So the next slight just shows you some more findings -- next slide just shows you some more findings so we found there was a need just picking up on that last point, there is a need for organisational staff to have training around inclusive design which goes back T about the H house and where it is in the location. Staff awareness about disability equality, there were issues about choice based lettings. We can't generalise from this particular project because the sample size was so small. 6, isbled applicants. So what choice based lettings did come up again and again posing a challenge. We need also need to have housing options for disabled people so that they know where they can get information from and also I think there is a need to think about the way that adaptations are funded as well and perhaps have a tenure neutral approach, how that covers the social sector and the private sector. Just quickly going on to the reflections of the co-production approach. I think what we discovered from this pilot is time. You need to built in extra time because it takes time to recruit appropriate people with skills, the motivation to take part and the training as well. We discussed ways to share resources because obviously for this pilot project resources were extremely tight and think a lot of people don't realise how expensive research is when you are doing it so we discussed different ways that we could pull on different resources so a lot was done in a kind between organisations so that could be with location accessible locations for interviews, it could be the taxis were on their accounts as well. It could be just providing support to look up participant, potential participants, things like that so there was a lot that was done in kind which was fantastic for this project. We also found with the peer panel, peer advisory panel, that we tried at the beginning because we thought to cut down, reduce the amount of time people spent travelling to do it by Skype and conference telephone calls but what we actually found the next time we did we met face-to-face and this worked so much better and the feedback was with any peer advisory panel, do it face-to-face because a lot of the interaction that we have is about peer support so it is about getting to know each other really well, sharing advice, sharing experiences and I think that really comes through with co-production research. You start sound boarding, you start thinking about ideas.

So the last slide which I will do really quickly. Just wind up. That is great. Yes yes, that's fine. So just to finish I would just say that for next steps this project is looking to do a larger tracking project and we are just in the middle of trying to secure some funding for that. Thanks very much. (Applause).

>>: Thank you Diane. Our final speaker is Beth Walker who is going to be talking about inclusive communication for people with hearing loss and Beth it is is from the Scottish Council for deafness. Thank

you both Beth.

>>: Beth. I have to say I had a bit of a laugh when the street audit came up and it mentioned cupboard or street pavements and streets that weren't really accessible. I tripped in Prague last week on cobbled streets on raised tram lines. I did it before in Australia and I hope I am not going to add Edinburgh to that list. My name is Burr that Walker and I am a deaf awareness trainer and a qualified lipreading tutor. I live here in Edinburgh but I come from Northern Ireland as some of you may know by my accent. I am here today on behalf of the Scottish Council of deafness. SCOD or Scod as we commonly know it by. Scod works to the social model of disability. It has a membership of organisations from the statutory and voluntary sectors such as Action on Hearing Loss, Hearing LINK, deaf action, deaf blind Scotland, a school for deaf children, Social Services departments from some local authorities, Councils, various deaf societies, sign language interpreters the British society of hearing-aid audiologists and also the school of management and languages of Herriot Watt University here in Edinburgh. They all work on behalf of deaf sign language users, deaf and hard of hearing people of which I am one and deaf blind people. From now on I am going to call everyone under those banners deaf. All the organisations campaign independently or together with Scod for a better quality of life for deaf people of all ages in Scotland. Their aim is to ensure that deaf people can access information and services across all sectors of society from our local communities to Government departments and everything in between. Membership of Scod offers many benefits including the opportunity to influence and shape Government future policy. For example, in 2015 in September the Scottish Parliament voted unanimously to pass the British Sign Language Scotland bill and a month later it received Royal assent and became the British Sign Language Scotland act. One in six people in the United Kingdom are deaf to some degree. And making it one of the highest disabilities in the United Kingdom. There is over 10,000,000 people in the United Kingdom who have some form of deafness. Organisations dealing with deaf people say it has now become the most common disability in the United Kingdom. It is also increasing for two reasons: firstly there is the growing ageing population; and secondly and very worryingly there are more young people going to the doctors and then being referred to the audiology department as they are having difficulty hearing. The reason? Well Action on Hearing Loss did some research a couple of years ago and one of the reasons maybe that they found out that many young people were playing their music too loud on their Ipods. Both these factors mean there will be a big impact on statistics and resources in the future. My story. I became hard of hearing in my late twenties and it had its consequences. I often felt isolated. My confidence decreased and my self-esteem diminished. This affected all areas of my life: work wise, socially and personally. In some people it can lead to severe depression. I was given hearing-aids and that was it. I was just left to get on with it. I didn't know where to turn to, I didn't know any other people that really had hearing difficulties. And I didn't want to admit at a young age to people that I had a hearing difficulty. Then about 15 years ago an

audiologist in the National Health Service here in Edinburgh suggested lipreading classes to me so I thought, well I might as well give them a go, it won't do any harm and I might learn something. I can truly say they changed my life for the better. I can't overestimate the importance that lip reading classes have been for me. They changed my life around. If anyone had told me before the classes that I would be doing the work that I am doing now often speaking to various groups or at meetings like this about having a hearing loss and lipreading classes I would have said Uh not on your Nellie no way am I getting up in front of people and talking about my hearing loss and my personal experiences, no. I am talking today mainly about lipreading classes because that is the area I am mainly involved in but what do we do in a lipreading class? It is not just about lipreading. Yes we do learn to improve our lipreading skills in various ways through learn speech movements and related exercises but we do have to realise that we will not be able to lipread everything. There are so many factors to consider. The classes are much more than improving our lipreading skills. Firstly we meet people with the same problems and we share with each other and that is very important we discuss how to cope better in various situations. Such as going shopping, attending a doctor or hospital appointment going out socially, being with our family and friends and work colleagues. That is just to name a few situations. Often these are daunting tasks for us and sometimes we shy away from doing it. We also learn about communication tactics to enable us to interact with people more effectively. These tactics are not only for us but it is also for others to learn the way that they communicate better with us. These others, maybe our family and friends but also all the service providers that we come across in our lives. That is where the deaf awareness training I do for some organisations comes in. These tactics are all very simple to implement but so helpful to those of us with a hearing difficulty so that we are not excluded but rather included. That often means training our family, friends and work colleagues in the best way to help us and to get them to remember to do it. That is not an easy task sometimes for both parties and it can be quite frustrating. The number of times I have got angry with my husband or family or friends because they have forgotten to turn round and face me when they are speaking to me. It is a wonder somebody's neck hasn't been rung a few times. In classes we learn also about the various organisations that can help us. Some are charities that help deaf people in various ways or what has been mentioned before, the Government scheme called Access to Work which supplies free of charge to the user equipment that helps us at work. Not only equipment but also notetakers, the Palantypist and interpreters. We also learn of equipment that can help us in our daily lives some of which may be free from our local Councils. Here in this area we can get free doorbells and phones that are loud and maybe have a flashing light. We can also get an loop system or infrared system to help us to hear the TV and radio and also vibrating and flashing alarm clocks. From the Lothian and Borders fire and rescue service we can get special fire alarms installed. I wouldn't be without one of these,. I feel much safer in the house with it. It also let's me know when I burn the bacon. Also in class we learn about what we are

entitled to and the legal obligation of organisations understanding the Disability Discrimination Act which later became the equality act. But it shouldn't just be an obligation; it should be service providers wanting to keep our custom and help us and give us the same level of access and service as everybody else and also very important we have a laugh in the classes. Sometimes to the extent that the tears are running down our faces. I could just tell you about some funny stories about things that we have done or things that we have heard incorrectly in our lives. We will be here for a couple of hours so I will just move on.

After having spent 25 years as an art curator in the museum and art gallery world I decided to become a lipreading tutor. I know the benefit that a lipreading tutor had made for me. The association of teachers of lipreading for adults oversees courses in all of the United Kingdom and I attended a one year part-time course here in Scotland. I am a tutor with the city of Edinburgh Council in the adult learning programme and I am also the lipreading development workers for west Lothian Council. West Lothian Council for those of you don't know is the area left of Edinburgh. In some areas of Scotland the classes are free. All those in west Lothian are. Whereas in some areas people have to pay for the classes. There are programmes 65 classes in Scotland. I take four of them and about 30 qualified tutors at the moment. I see lipreading classes a bit like physiotherapy; physiotherapy for the ears, the mind and the brain. I just hope that in being a lipreading tutor I can help others fulfil a better and more inclusive life in the same way that the classes helped me. Our vision would be a society where deaf people have equal access, equal rights, be respected for ourselves and have citizenship in our community. Here are some comments by people who have attended lip reading classes. I am now in charge of my life again and it has been an immense boost to my self esteem. I have turned my slowly shrinking world into one of increased inclusion and am experiencing joy and laughter again. Thank you. (Applause).

>>: Thank you very much. We have a few minutes left. Are there any questions for any of our speakers? If you do have a question if you could raise your hand and someone will come to you with a microphone. If you can say who you are and where you are from and if the question is for any of our speakers. So ladies and gentlemen, any questions?

>>: Hello, my name is Jed and I work for a disabled people's organisation in Scotland in Dumfries and gallery called Dice and my question is for Omar. I would like to say one thing, you ended by saying it is just your story, it is now not just your story so I want to thank you for describing so well one path way towards reaching inclusion and independent living. Over the last two or three weeks and certainly in the last two or three days I have heard a term that I have not come across before and that is the bio psycho social model. Do you know what the difference is between the social model and the psycho -- bio psycho social model?

>>: The answer to the question is I am sorry, I don't know and it is the first time I have heard of that so I am not sure -- heard of that so I am not sure what the difference is.

>>: Any of our panelists a view?

>>: I actually (inaudible). I have used Carol Thomas in my PhD work and it basically means that you look at the structural factors of society but you also think about impairment effects as well so Carol Thomas would look at things like fatigue or people can have conditions which fluctuate so allowing for that as well.

Agency level factors. Does that make sense?

>>: Does that help, Jed. Thank you.

Any other questions?

>>: I am Anthony Kennedy, I am from Apply but my question is not relating to apple. Omar and Alex both talked about employment opportunities for people with disabilities. I think part of the challenge is that many employers not mine included have a kind of fear of offending or saying the wrong thing and so they kind of avoid that instead of embracing it. What do you think are good actions we can take to try and encourage companies to be less afraid of even interviewing people with disabilities?

>>: I will speak from my own pearl standpoint. I would rather come up to me and say something that they think might offend me rather than saying nothing at all. There is nothing worse than somebody you walk along the street and you wall along an get people handing out leaflets and they will hand out leaflets to everybody else but they won't hand out the leaflets to the person in the wheelchair so I would rather have somebody engage with me so I have an opportunity to start a conversation at a very basic level before anything else and that is how I feel about inclusion becoming organic people just need to have a conversation rather than being ignored from my standpoint.

>>: Thank you. If I add a little bit, in my last role I did some work with the Scottish Chambers of Commerce about colleges employer disabled people and they sadly -- a lot of employers basically afraid and they also said their employers wouldn't like to work with somebody like that whatever that meant which is a bit shocking but I think it comes down to fear and unknowing about what is going on and how to ask and how to deal with people's various issues.

Sorry Alex.

>>: I was just going to add that positive role models are of course very, very important but some of the work that our advisers do is very much -- work that our advisers do is very much trying to move away from. You are right, there is concern about being politically correct making mistakes and a lot of the work that advisers do is trying to diffuse that, trying to move away from legal rights issues, confrontational issues and trying to have very open and straight forward conversations about how we can actually help because in the end businesses want people to succeed in order to increase profit, in crease productivity, people's well being at work and so there is a willingness I think once you get over those sorts of hurdles to make things work, you just have to be honest and open and frank really.

>>: Thank you very much. I think we have just about -- one quick question there. Sorry gentleman, towards the back.

>>: Thanks. I just wanted to kind of carry on with that conversation, kind of having spoken to Alex. Alex and I met on the plane up on Monday night and as a visually impaired person with a guide dog I have found it difficult after university to find a job but am now employed as a Project Manager for Thames water who are the biggest water company in the country and I am the first disabled person that that company has ever employed which is quite astonishing considering they have 20,000 people in their, through them. They were fearful to employ me before because they didn't know what to do and what not to do and they were just hesitant about employing someone with a visual impairment and I don't class myself as someone who is hugely disabled. I can do 99 per cent of what my colleagues can do. The only thing I can't do is drive and to be honest kind of that is a good thing. I have had people come up to me and say can the dog drive? But having worked there for 3 years just changing perceptions so there is now, there is three more disabled people working in the company. We have -- I see myself as a bit of a kind of positive role model for Thames Water. I rolled out a lot of events so I have been to the House of Commons so many times that I can't think about and I see that as a good thing, the fact that they are using me to promote the inclusion so I just wanted to say that it is important that businesses essentially get over the idea of offending people because 90 per cent of disabled people have a fantastic sense of humour and love making fun of their own disability because it is funny. It is funny when you miss something. It is funny when you trip over because if you think about it that way you don't get on -- if you think about it too seriously you just don't get on with your life so you just have to have fun with it and just know that you won't offend them and if you do offend them they will tell you not to do that. (Applause).

>>: Very positive note to finish on. Thank you for the questions and thank you to our presenters.