

Discussion Paper: Achieving equality and diversity in services to people with learning disabilities

This paper is intended to promote discussion between partners and identify key issues. Your views on these matters and others that you believe are important would be appreciated. If you are able to identify examples of current good and poor practice and where you believe there to be opportunities for development, this will further help to stimulate dialogue and offer direction.

What is the concern?

People with learning disabilities continue to experience greater levels of discrimination (disability, gender, ageism and ethnicity) than the rest of the population, in many aspects of daily and environmental living eg. education, employment, leisure and access to a range of services including those provided by health and social care eg. access to treatment and services. As a result it is assumed that disabled people may experience 'misclassification' and higher rates of risks.

Definitions

There may be value in coming to a shared understanding of the definitions of equality and diversity. Partners are asked to offer their definitions or the ones used in their country for discussion.

An agenda for change

We recognise that each of the partners in STEPS will be starting from a different position on this complex issue. Some partner-countries will be far advanced in their thinking about equality and diversity and will have legislative and good practice frameworks in place.

In recent years there have been a number of change drivers:

- ?? demographic changes in the community as a result of globalisation;
- ?? economic/financial influence of disabled people;
- ?? legal requirements to ensure that people are treated equitably and not discriminated against
- ?? the moral argument that inequality and discrimination lead to an unequal society.

The pressure for change has largely been spearheaded by disabled people, themselves combating long-held discriminatory views and prejudices

What are we attempting to achieve?

STEPS plans to identify standards by which services will be delivered sensitively, promoting the rights and independence of the individual and ensuring that where possible users will be offered choices and services that contribute towards the integration of people with learning disabilities into the wider community.

We aim to ensure that:

- ?? service planning and provision will take into account the particular needs and values of the individual ensuring that any 'differences' are regarded as positive and contribute towards a 'culturally' richer and more energetic society;
- ?? 'differences' clearly influence service planning and delivery to meet local needs.

If disabled people are to be 'empowered' to lead independent and enriched lives then amongst other things, we need to ensure that information is freely available, in an accessible and timely manner and above all is easily understood. Information can lead to people making better choices; effective consultation and communication will ensure that services provided are those needed and valued by disabled people. Disabled people must be encouraged to advocate for themselves.

Carers can inadvertently discriminate against disabled people. Restrictive and cultural attitudes within communities may play a part in preventing disabled people from leading the lifestyle of their choice. We should however not marginalize carers by approaching their cultural practices as less valuable than our own. We should also recognise that the cultural philosophies of carers may be the same ones shared by those receiving the care. It is by engaging fully with carers and service users that service commissioners and providers can begin to understand the cultural context within which disabled people live their lives. By understanding this, services are then able to have effective dialogue with carers concerning disabled people's rights, choices and abilities. Users, carers and services essentially want the same thing ie. disabled people live happy and fulfilled lives within their own communities, as well as that of the wider society in which we all live.

We recognise that the problems of discrimination run much deeper and often lead to limiting the abilities and choices of the individual. Disabled people may experience multiple discrimination on a variety of fronts ie. age, gender, race and culture. Cultural attitudes may lead to 'sheltering' disabled people from the realities of society; barriers in education and employment may lead to further discrimination, all leading to a downward spiral of low esteem and poor self-worth.

How can we achieve our objectives?

We accept that to achieve our objectives will take vision, leadership, time and commitment. We recognise the need for a shift in culture not only in organizations delivering services but in the wider community.

A partnership approach between service users, their advocates, relatives and carers, commissioners and providers is paramount.

We should not, however, rest at 'talking the familiar language' of health and social care. We should also learn the language of community bridge building, community development and social inclusion, in order to confront and address inequalities and diversity issues.

By engaging with community organizations in order to build partnerships with them, a reciprocal arrangement may be built which focuses on educating paid workers about cultures, and communities about the aspirations of disabled people and the values and ethics of services. This will enable services and communities to better understand each others' perspectives and enable more effective joint working. Services will develop a higher degree of cultural competency. Communities and society at large will develop more realistic expectations about disabled people's rights to lead independent lives.

We can begin by supporting people to speak up for themselves; we must recognise that this will require increased resources eg. money, time and energy. Advocates and interpreters are essential to bring about this change.

Service commissioners must base the provision of contracted services on an accurate assessment of individual needs. All partners require accurate information about their communities and the needs of disabled people within those communities.

Service providers must be encouraged to develop a range of services to meet needs and the monitoring process should clearly identify unmet needs in the community. Commissioners and providers should seek to ensure that where possible, and where there are clear benefits for disabled people, services are 'mainstreamed' and integrated with services used by others in the community. Consultation with service users and their carers and advocates will clearly identify which services can be delivered as a part of the mainstream and which should be specialist. We should not seek to segregate disabled people by designing 'stand alone' services. There may however be situations where 'mainstreaming' does not benefit users and specialist services eg. some aspects of education, health and social care assessment and treatment, may to begin with need to be developed and maintained.

Organizations delivering services need to be vigilant and question whether or not they themselves measure up on diversity and equality. They may need to review their recruitment practices and staff will need appropriate induction and training to deliver services that are sensitive to, and meet, the needs of the individual. Good indicators of this, amongst others, will be provided by employee statistics, internal and external perceptions of the organization and the services they deliver.

Your views, proposals and comments would be appreciated.