

Anti-Poverty News

NIAPN, 58 Howard Street, Belfast BT1 6PJ



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Poverty & Disability

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Disability

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Attitudes are
the **REAL**
Disability!

editorial

As I walk into work every morning I scan the newspaper headlines in a local corner shop with a growing sense of anger and frustration. It may seem obvious to many but if you have never experienced poverty it's ever so easy to develop some ill-informed attitudes towards those who do. There are just too many newspaper headlines accusing everyone on benefits of being 'scroungers' and 'fraudsters.' There are just too many newspaper articles written by people with no experience of the realities all too ready to lay all societies problems at the doors of people living on benefits, rather than the structural factors that cause poverty. Such as a lack of decently paid jobs and supportive employers for people who have a disability, or are long term unemployed; the lack of appropriate retraining paths for those who have few qualifications or who have a skill which is no longer in demand; the lack of affordable childcare and accessible and affordable transport.

There are many assumptions made about people in receipt of benefits especially people receiving disability benefits but there is little general public knowledge of how rigorous the qualifying criteria are for people who need to access them. There is also massive ignorance about the level of payments available. Public attitudes often ignorantly assume these benefits provide for a life style of ease and comfort and take no heed of the fact that such payments must cover higher heating costs, specialised clothing, additional transport, special dietary requirements, aids and therapies not provided by NHS or social services.

Applying for DLA is a complex and intimidating experience. The myth of easy access to these benefits is just that, a myth. For people with a disability who manage to go through the form filling and the assessments there is also ongoing regular monitoring to ensure they are still entitled to claim.

The horror stories are all too common of panel doctors who have reduced people to tears, belittled, patronised and distrusted genuine claimants at a time of great vulnerability and illness. There are some doctors who adopt a professional approach but all too often these professionals express the same negative public attitudes held by the general public toward people in receipt of benefits. As our headlines tell us daily, claimants are seen as 'scroungers and fraudsters' rather than people experiencing poverty. Their humanity is ignored; the fact that they are accessing benefits they are duly entitled to is also largely ignored.

According to the Social Security Agency, (SSA) when launching its anti-fraud campaign in 2005, the State is being "cheated out of £33 million a year" in Northern Ireland. However, when the DSD published the first estimates of the take-up of income-related benefits in Northern Ireland in 2006 the Department reported that, taking the four benefits together, "There was between £121 million and £427 million left unclaimed annually in 2002/2004. It seems it's all a matter of emphasis, but I doubt we will see many newspaper headlines advertising these figures.

Public attitudes to people on benefits with and without a disability are at an all time low. The impact of such headlines is particularly worrying at a time where our government is focused only on Growing the Economy with no recognition that this cannot happen without an equal emphasis on Promoting Social Inclusion. As an agency that works to encourage public debate about poverty and social exclusion issues especially among our most disadvantaged communities we are very aware that the stigma associated with poverty is growing daily. We have to work hard to challenge such stereotypical attitudes, to affect these commonly held uninformed assumptions. That is why this themed issue of Anti-Poverty News looks at the relationship between poverty and disability to explore some of the realities the rest of us are all too ignorant about.

Frances Dowds, Director NIAPN

GET HEARD

People With Disabilities

The Get Heard project was a UK wide project working through a range of Anti-Poverty Groups and other partners. It ranged across Northern Ireland, England, Scotland and Wales. It was supported by the European Commission and the Department for Work & Pensions. It aimed to spread awareness on the National Action Plans (NAP) for Social Inclusion through the Get Heard Toolkit. The NAP is a European Union anti-poverty policy all EU members have to respond to; put simply it placed a requirement on all nation states to produce action plans every 2 years on how they aim to tackle poverty in their country.

The Get Heard Toolkit offered a workshop aimed at encouraging people experiencing poverty to comment on what government was doing about poverty issues in Northern Ireland and beyond. What follows is a summary of findings from workshops held across Northern Ireland by the Northern Ireland Anti-Poverty Network with people with a disability, facilitated by the Networks Director, Frances Dowds.

What is working?

- House adaptations – facilities grant available for families with disabled children in NI, this initiative was as a result of a campaign from a community sector group based in the North West.
- Disabled persons Working Tax Credits for people working 16 hours plus – it helps.
- Having a one stop shop for jobs and benefits arrangements, Social Security Agency and Department of Employment and Learning in the one location – however it is by no means perfect. Mencap, Citizens Advice Bureau (and other benefit advisors.) Some benefits advisors in the Social Security Agency are also helping but they're only available for the over 65's. Their existence is however not well publicised.
- Government departments are very 'possessive' they seem unable to 'work together.'
- There is far too much red tape around the benefit system. Application forms are much too long and complicated, 'people are scared of them'. The 'system' is so complicated, people can't understand all the different benefits and how they are calculated against each other. Disability Living Allowance forms take hours to fill in. There is a lack of appropriate information on benefit entitlements; ordinary people are unable to get good information on their entitlements. Plus people with learning/reading difficulties are unable to read/access information. Information is not available in accessible formats.
- People with disabilities are not informed about what's out there to help them. Age can also be a barrier to entitlements. One young man who had a heart attack had regular public transport costs of £25.00 just to get to hospital for his treatments. He didn't know he could get help with his travel costs, no one told him. People are also reluctant to talk about the hardship this causes them as it's not easy to tell people you live on a limited income.

What is not working?

Information & support

- There is no continuity of services, for people with a disability or for their carers. There is a large gap in interagency work e.g. between health service providers and the housing executive and Education services. When you are trying to get therapists into special schools it's almost impossible; 'it's like pulling teeth.'
- There are also backlogs in the payment of benefits for people leaving hospitals and returning home. One man had seven months of non-payments due to backlogs and inefficient staff.

RESEARCH

- If a person is on Incapacity benefit you don't automatically qualify to get prescriptions paid for you, yet you can if you are on Working Tax Credit's.
- The attitude of government staff to claimants creates hurdles when a person is applying for benefits, they don't make it easier they make it harder. Such attitudes act as barriers. The attitudes of staff within 'dole' offices can be nasty. They seem to view applicants as spongers. They have no understanding of the personal circumstances, of a person's caring responsibilities. They just make negative assumptions that carers don't want to work!
- Rural transport and access issues: how can people in wheelchairs get to the 'road' to get a bus? People caring for people with a disability and people with a disability face greater costs just for travel. Transport is a disaster, 'it cost me £30.00 for three essential outings in one week. Buses are not always available although I use them when they are.' The public transport consultation we had in Armagh was useless, it was a wasted exercise. They didn't listen or act on what we said.'

Employment & Training

- There is a lack of information on how to get out of poverty. The Poverty Trap is alive and well. People become dependent on benefits due to low self esteem and low personal confidence often as a result of long term unemployment. Not being able to get a decent job where you can support your family or yourself can have serious long term effects on families and communities. If a parent experiences long term unemployment it is very common that their kids will have the same experience. Intergenerational long term unemployment is common in some areas because there are no decent local jobs. The longer you are unemployed the less employable you become. There is also a serious lack of educational opportunities for people living with poverty and this all contributes to keeping people in the Poverty Trap. There are less and less opportunities especially for people with a disability to lift themselves out of poverty.
- Human resource departments should be

educated more e.g. job applications should be available to be completed online for people with writing disabilities. This should be one of a number of choices as often people on low incomes do not have a computer.

- There should also be more supports for people returning or moving into work; people getting jobs should get bonuses rather than loose out financially. Means tested withdrawal of housing benefit has a major impact on people's lives and benefit entitlements are not clear enough.
- People with a disability are still facing discrimination at work because of attitudes of employers etc.

Negative public attitudes

- The multi-layered aspect of care often breaks down for individuals. There is a real stigma attached to carers claiming benefits. There's a lack of dignity and respect for claimants. One woman told how it had taken two years for her mothers claim for carers allowance to be paid by the DSS. Eventually she received a cheque for £2000.00 but the woman's daughter visited the office every Friday over this time period even after she was told her mother was not entitled. It turned out the dole office had incorrectly filed her claim. Participants stated 'people often feel like saying keep the benefits and I'll go to work even though I'm not fit for it.'
- Discussion also ranged over the demoralising and insulting behaviour of panel doctors assessing claimant interviews. One woman spoke of how one doctor had snapped her diary out of her hand and flung it up the table to another doctor who was present. The woman had brought it to help provide the doctors with information within the assessment.
- Loss of control – no power over everyday things, people in poverty can lose control over everyday things and can be left very vulnerable.
- Isolation through troubles and disability is a real problem. It was only after the Enniskillen and Omagh bombs that 'resources' were put into use to help people affected. Previously this never happened. This applies to all disabilities.

Dental & Health Services

- Many dentists now won't take on NHS work, most want to go private. Now dental patients are offered either NHS rates or private treatment by dentists. Whichever is chosen patients now have to pay in full or if they can access NHS they have to pay for part of their treatment. The changes in dental provision has also influenced when you can get an appointment. You are able to access treatment sooner if you are a paying patient and have to wait sometimes for months if you are an NHS patient.
- It's the same for health consultants e.g. for breast cancer detection. Consultants have powers they shouldn't have.

Lack of Support for Adults with a Disability

- Young people with a disability who are supported within the school system gain support services related to health and education but once they leave they're unable to access any support. This can set them back regarding their disability and totally undermine any progress made. There is no co-ordination of services provided for people with disabilities regardless of their age brackets.

Faulty System

- There are faults within the system. Having a five year strategy and a one year budget is not sensible. A five year budget is needed to match the strategy. Northern Ireland needs a mechanism for the reallocation of underspends from one department to another. MP's are too concerned with 'party politics' and are not concerned enough with the issues that matter to people.

Support within Home

- Independent living in NI is different from what is supported in England. A great idea was watered down. There is less money to support it and no proper support mechanisms have been put in place. There was only a six months holistic package approach which is no longer available. There are also geographic limits on what's available. Only one organisation working to enable independent living and it's based in Belfast and its remit ends in Glengormley.

Financial Constraints

- The allocation of services outside Belfast depends on health trusts and their budgets.
- Because community care doesn't put in domiciliary support it results in bed blocking in hospitals and residential/nursing homes. Home respite is often done by volunteers now.
- Services are developed with budgets as a priority not people. Strategic Service Plans are done on a 3 – 5 year basis but this does not make sense. All government departments and Health Boards don't think about people, they think about financial units and targets. We need five year plans not an annual spend and the return of underspends that could be made more efficient with better forward planning. No reserves means there is no local ability to manage crisis.
- Debt is a common experience for people living on low incomes and once you get into it, it is almost impossible to get out. It's very unfair that interest rates for loans are higher for poor people.

What needs to happen: Priorities

1. People receiving Disability Living Allowance should receive the same Winter Payment of £200.00 that is awarded to older people.
2. Government needs to get all its agencies linked together effectively and all disability agencies should link up and work together.
3. Where pilot projects have worked well, especially where there is holistic provision of services these schemes should be rolled out across NI. E.g. Wrap Around scheme in Armagh & the Young Stroke Moving on Project. There are good pilot schemes out there funded for a maximum of three years, this needs to be improved. Such schemes do not address poverty for carers and people with a disability.
4. The Carers assessment schemes should be improved; they should be tied into real outcomes. Health Board Trust staff need to make the connections and tell carers about their entitlements also. They are already obliged to tell carers about Direct Payments but many do not.

5. The basic issue is that good information is needed. Information on benefit and travel entitlements must be made accessible to all. Information is a big issue with many people not being informed about their benefit entitlements. We also need a better advice system. People with a disability need advice that is accurate. The information that is available is not standardised. All information should not be open to interpretation; it needs to be clear.
6. The assembly must have an agreement with the voluntary and community sector, a social partnership on an agreed Anti-Poverty Strategy. This must involve the voluntary and community sector, the trade unions and Business, and farmers and especially people who experience poverty.
7. We need social capital before social partnership. We need excluded groups to be actively involved. The sector needs to engage all sections of the community and drive home the message that poverty shouldn't exist in today's society. Poverty is the big issue and all groups need to be involved in tackling poverty and social exclusion.
8. Poverty should be de-stigmatised.
9. The Department for Regional Development needs to promote Door to Door availability and encourage more uptake.
10. Government really needs to learn to work together and to establish mechanisms to ensure that all levels of government can be held accountable.
11. The postcode lottery for access to services across NI really needs to be addressed. We need some standards established to ensure increased access to services.
12. Local councils should have a clearly defined role re Anti-Poverty Work. They should have a clearly defined responsibility for supporting and resourcing local level anti-poverty work. This would help ensure a fairer spreading out of resources across NI to tackle poverty and social exclusion.
13. We need mechanisms to support and enable participative democracy, particularly to involve people experiencing poverty in developing and improving policies.
14. Extend the time-limits on support in training and employment for PWD, including benefit run-ons. Present system does not allow training to be completed and qualifications attained.
15. Need more holistic approach with all support services linked and more person-centred.
16. More accountability and feedback on decisions: Are they trying to keep PWD disempowered by lack of information?
17. Transport policy: "Extending door to door services" policy needs to be impact assessed.
18. Implement the spirit as well as the letter of Section 75. Equality Commission staff need trained to understand disability and poverty issues.
19. Section 75 should include socio-economic status or social inclusion or poverty or class.
20. Government need to accept that poverty is not a lifestyle choice.
21. Include additional category on disability in the Census.
24. Bill of Rights with teeth to enforce it that includes social and economic rights, because we need basic standards guaranteed. Need group rights, but not just Catholic and Protestant.

**For further information or an email copy of the full Get Heard Report contact NIAPN:
Email: info@niapn.org or
telephone: 028 9024 4525**



Welfare to Work and Disability

The most recent statistics from the Dept of Social Development indicate that in May 2007, almost three out of every four (72%) benefit claimants in Northern Ireland were registered as sick or disabled. That amounted to 153,420 adults of working age across Northern Ireland, 114,000 of whom were receiving Incapacity Benefit (IB).

Northern Ireland has particularly high levels of people claiming IB, compared to the norm in England, Scotland and Wales. The single biggest category of illness, for which people here claim IB, is mental ill-health. What we in NIAPN hear from people experiencing poverty suggests that these high levels of people living on IB are due to a combination of 30 years of war and generations of poverty. Of course, some physical impairments that people have are also due to the conflict.

Disability is closely linked with poverty. Over half (56%) of households in NI that contained one or more disabled people live in poverty compared with only 29% of households living in poverty who have no one with a disability. Poverty causes disability and ill-health, as well as being the result of being ill or disabled.

Despite people in NI facing difficulties and challenges that those in Britain do not have to – for example, post-traumatic stress disorder and long-term depression after being even peripherally involved in a violent incident – people on IB in the region are being treated exactly the same as if they lived in Birmingham, not Belfast, or Derby not Derry.

Even leaving aside the particular needs of people in NI, ill and disabled people will face similar problems as those in the North East of England or in Wales do – the scarcity of jobs means it is hard for anyone to get a job and it's an employers' market. There are fewer than 66 jobs per hundred people of working age in the North – so for many getting paid work is unlikely. Unless they live in an area where there

are lots of jobs, someone with a disability won't get an interview if they include their condition on application forms. But if they don't include it, they can be sacked when it is discovered.

For example, one disabled person told researchers "You see it's when you put down you have epilepsy they just don't seem to want to know. It seems to be they just take a look at your form; they don't even ask you for interviews."

Most disabled people want to work. New Labour Ministers quote schemes that have helped disabled people into employment. Where these exist and where there are jobs, they can make a real difference. But these "reforms" are being introduced as huge numbers of civil service jobs are being cut in those departments that are supposed to help people into work!

New Labour's benefit cuts are not going to help ill or disabled people back to work. In fact, research has shown that the stress of trying to live on low wages and lower benefits leads to mental ill-health, particularly depression. So benefit cuts – and the threat of them – are likely to make even more people ill.

Research into obstacles to getting a job faced by people in disadvantaged parts of Northern Ireland reinforces the messages that disabled people have given to consultations on welfare to work policies: the main problem is not the willingness or ability of ill and disabled people to take a job, but discrimination by employers towards disabled people.

When lack of accessible transport and the low paid nature of much of the work available in NI is taken into account, our local political parties have failed ill and disabled people by its uncritical adoption New Labour's Welfare to Work policies.

Goretti Horgan
NIAPN Chair

“Hard to Deal With?”

In Northern Ireland despite the introduction of government interventions and welfare to work strategies, people who are long-term unemployed continue to encounter many barriers to labour market participation. The latest economic bulletin shows that an estimated 12,000 persons or 40.3% of the total figure of people who are unemployed (28,000) have been out of work for more than one year. This figure has increased by 6.8 percentage points over the past year. These statistics show that more needs to be done to address the difficulties and barriers that people who are long term unemployed encounter.

This was evidenced in Hard to Deal With? a research study produced by Diversity Works exploring the relationship between multiple identity and employability with people who are currently out of work from across Northern Ireland. The research study comprised three elements: focus groups, semi-structured interviews and a tailor-made capacity building programme. Five separate focus groups were conducted and 12 interviews were carried out with 39 participants from Armagh, Belfast and Londonderry/Derry. The vast majority of participants involved in the research study were long-term unemployed.

Key Findings

‘Hard to Deal With?’ found that there were links between multiple identity and employability. Many of those involved in the study with multiple identities also experienced multiple disadvantage. The research study produced ten key findings and 31 specific recommendations. The key findings and recommendations focused on a number of areas including: the benefits trap, confidence, childcare and caring responsibilities, disability and age discrimination. The recommendations are targeted at the community and voluntary sector, business organisations, employers, trade unions and government bodies as well as for those who are out of work.

The benefits trap

The study found that many of the participants were caught in a benefits trap. They felt it would not be worth their while working because they would lose out on benefits, and thus be worse off. One of the participants when speaking about his previous employment said, “I enjoyed my work but the money was crap”.

Government services, vocational and training provision

The general perception of the participants was that government services and training provisions for unemployed people can be ‘Hard to Deal With’ in relation to accessing the relevant information and skills. Many of the participants felt that more could be done by government to promote government services and training and to help people back into work. One of the participants felt that the Jobs and Benefits office had not provided her with enough support in relation to finding work. “I’m on incapacity benefit; you can work for 16 hours a week. I got a pamphlet about it through the post about work. I went to the Jobs and Benefits office and nobody knew anything about it”. Another participant felt that some of the people in the Jobs and Benefits office “look down on you” and were “not happy in their jobs” and needed to be given training in customer care. She talked about her experience of having to go on income support, and how she was unhappy with the information given to her by the Jobs and Benefits office staff.

Participants also regularly cited that government services did not take account of the different identities of the users. One female participant said that “I’m not recorded as being a carer, so therefore the impression that some government officials have is that you could not be bothered working.”

Confidence

The participants also had a lack of confidence in themselves this was partly due to their lack of skills/qualifications, or perceived lack of them. One participant even felt that that his “confidence had gone out the window”, since becoming unemployed.

A research study exploring the relationship between multiple identity and employability

Childcare and caring responsibilities

Childcare and caring responsibilities were also barriers to employment for many of the women involved in the research study. It was felt that there should be more childcare places available for women, to enable them to obtain work. Many of those involved in the research that provided unpaid care were women. They felt that the contribution to the economy made by carers should be increasingly acknowledged publicly.

Age discrimination

Both younger and older participants thought they were at a disadvantage in looking for work due to their age. They also felt that they were at a disadvantage in relation to government training provision.

Disability

In relation to disability the issue of physical access was seen as a barrier to employment, as was the cost of accessible transport. Once in work there were concerns expressed relating to reasonable adjustment, this was in reference to flexible hours, job sharing and a general understanding of disability. One participant with a learning disability talked about the difficulty of working with colleagues due to the effects of her disability. She said, "In the workplace I was slow at picking things up. The employers had patience with me but other workers made fun of me".

Many of the key findings and recommendations in this study reflect what has been presented before in previous studies. However, it is frustrating that



what appears to be common knowledge among researchers has not always been translated into more positive developments in government policy and practice. Therefore, more needs to be done and Diversity Works is currently working with the participating groups to try and get some of the recommendations of the research study implemented.

**For further information or for a copy of *Hard to Deal With?* a research study exploring the relationship between multiple identity and employability contact Nicola O Neill, Research and Policy Officer, Disability Action, 189 Airport Road West, Belfast BT3 9ED
Tele: (028) 90 297880 Fax: (028) 90 297881
Textphone:(028) 90 297882
Email: nicola.dw@disabilityaction.org or alternatively you can download a copy from our publications webpage at www.disabilityaction.org/viewPublications.aspx?catID=70&src=dw**



Count Us In:

Forging a Pathway to the House on Hill

Disabled people living in Northern Ireland are one of the most under-represented section in our community in terms of participation in political life. Many people with disabilities feel that the Electoral process excludes them and their views don't count. Disability Action's Count Us In project has been working in trying to readdress this inequality. The project, funded by the Electoral Commission, aims to provide disabled people with the skills, confidence, support and experience to become more active in the electoral and political systems in Northern Ireland. In order to achieve these aims the project has been delivering on two ways - through the Count Us In Capacity Building training programme and through the establishment of Democracy Working Groups.

Building Capacity

To date the project has delivered tailored training to programme participants in Ballymena, Newry and L'Derry areas. The feedback received from participants about the training has been very positive. One participant from Ballymena said, "Before I was turned off by the political system here and had never been registered – now I am aware of the wider benefits of being involved and I'm even on the electoral register".

The training is delivered to pan disability groups and is aimed at:

- Increasing understanding of democracy in Northern Ireland
- Teaching skills to get more involved in political life
- Increasing understanding on how elections work.

One unexpected and beneficial outcome of the training has been the learning from people with a cross section of disabilities (physical, mental, sensory, learning and hidden) sharing information of their individual experiences and barriers they face on a day to day basis and accessing democracy.

Democracy Working Groups

As part the Project, we have set up a number of Democracy Working Groups (DWGs) throughout Northern Ireland. These DWGs are made up of disabled people, people working in the disability sector, local politicians, people from public organisations as well as other voluntary sector groups. The DWGs have been looking at issues at a local level that concern disabled people such as transport and employment and developing relationships to address these issues. With Stormont up and running again our MLA's and people with disabilities are just learning the benefits of working together effectively. Through the DWGs politicians are becoming increasingly aware that 1 in 5 adults in Northern Ireland have a disability (amounting to 19.4% of the population) and this is not just a minority group, it is a sizeable percentage and it is essential that their concerns are listened to and addressed.

For many people involved in the project the working groups have been the first time they had met with their MLA and it has been a valuable experience for all involved. As a result of the meetings the L'Derry DWG in Derry in September a follow up meeting was arranged for participants with the Minister for Transport, Mr Conor Murphy.

This was in response to the participants raising issues around transport with their local MLA. Participants directly addressed their concerns with the Minister and they felt that it was a very worthwhile meeting. Members of the group felt this was very important as they were listened to at a high level of Government and their views were taken on board. This was the first time most of the participants had met a Government Minister and it has given them further confidence that if they make their views known on a political level then they will be listened to. A delegation has also had an opportunity to go to Stormont and make presentations to 12 MLAs with their concerns. Similar events are planned for other areas in 2008.

the potential to bring about change. Our local MLA's and MP now know us personally. Definitely I have more confidence in the political system and as a group we feel less isolated. I now realise that if we get active and engage they (politicians) have to take our views on board. Who knows where it will lead?"

Valuable experience

Project participants have acknowledged that meeting high level political representatives and civil servants has given them greater confidence in ensuring that their voices are heard when political decisions are being made. One participant has summed up their involvement by saying "I feel very enthusiastic since joining the project and now see

If you would like to find out more about the project, if you are an organization or an individual interested in the training programme or you would like to become involved in a local Democracy Working Group please contact Carey Ann Clarke:

Email: careyannclarke@disabilityaction.org
or
telephone 028 7136 0811
or
Textphone 028 7137 2077

Human Rights for People with Disabilities:

the Bill of Rights for Northern Ireland and the Impact of Socio-Economic Rights on People with Disabilities

Over 600 million people, or approximately 10% of the world's population, have a disability. In Northern Ireland, 21% of the population has a disability and the incidence is higher here than in any other part of the UK or in the Republic of Ireland. Despite the direct and strong link that persists between disability and poverty and social exclusion, the process of ensuring that people with disabilities enjoy their human rights is slow. A Bill of Rights for Northern Ireland provides a unique opportunity to address the current situation where economic, social and cultural rights are not enforced in domestic legislation.

Respect for human rights is key to tackling inequality and social injustice. Economic, social and cultural rights in particular are a crucial anti-poverty tool. The potential of economic, social and cultural rights in addressing the particular disadvantages experienced by people with disabilities throughout Northern Ireland is no small matter given the evidence that 56% of households comprising one or more person with a disability are in poverty compared to 29% of households without a person with a disability (Poverty and Social Exclusion in Northern Ireland Survey 2003).



My Life, My Right, My Choice
Make YOUR choice!

Control Us To Get Your Choice Card
 Centre on Human Rights for Disabled People, Disability Action,
 100 Anson Road West, Belfast, Northern Ireland BT3 9SD Telephone: 028 9029 7590 Fax: 028 9029 7581 Telephone: 028 9029 7676
Email: mychoice@disabilityaction.org www.disabilityaction.org.uk  Centre on Human Rights for Disabled People

Economic, social and cultural rights include the right to work, the right to health, the right to education and the right to housing, and are ingrained in the International Covenant on Economic, Social and Cultural Rights, ICESCR (1966). The human rights perspective on disability challenges society to more effectively accommodate the diverse experiences of disability. It enables genuine equality of opportunity, participation and freedom. But, for people with disabilities in particular, inclusion cannot happen without access to education, to health and social care, to employment and the built environment and to an adequate standard of living. The significance of economic, social and cultural rights for people with disabilities has long been recognised by the United Nations. General Comment 5 of the Committee on Economic, Social and Cultural Rights (1994) states that:

"The Committee's experience to date... indicates that States parties have devoted very little attention to this issue in their reports. This appears to be consistent with the Secretary-General's conclusion that 'most Governments still lack decisive concerted measures that would effectively improve the situation' of persons with disabilities".

With the exception of the right to education, and upon which the UK has imposed reservations, the Human Rights Act 1998 does not protect economic, social and cultural rights in their full form. It is clear however, that the legal enforceability of these rights is crucial. The inclusion of economic, social and cultural rights in a Bill of Rights for Northern Ireland would be long overdue recognition of the interdependence and indivisibility of the full set of civil, political, economic, social and cultural rights, the combination of which can subsequently effect real and meaningful change. The latter rights are evidently supplementary to those in the European Convention on Human Rights, one of the fundamental prerequisites for a Bill of Rights for Northern Ireland.

Based upon international standards and best practices, a Bill of Rights for Northern Ireland setting out the full range of rights would go a long way in addressing the particular circumstances of people with disabilities in Northern Ireland.

Inclusion of the full set of rights in a Bill of Rights for Northern Ireland would have the distinct benefit of empowering people with disabilities to raise their

concerns locally. This would further enable a more effective scrutiny of decisions and practices impacting on the lives of people with disabilities than is currently the case. Indeed, as Quinn and Degener have argued:

"Tangible material support is necessary to convert formal freedoms into real freedoms for people with disabilities. This is not the freedom of welfare, which places people with disabilities in gilded cages and backs them into cycles of dependency and despondency. It is economic, social and cultural justice which liberates people with disabilities so that they can play their part in – and contribute their share to – inclusive societies." (Human Rights and Disability 2002)

The applicability of economic, social and cultural rights for people with disabilities has taken on a new impetus with the recent adoption of the United Nations Convention on the Rights of Persons with Disabilities. This Convention, which is the first human rights treaty from the UN in the 21st century, was opened for signing and ratification by all UN member states at UN Headquarters on 30 March 2007. Signatories to date include both the United Kingdom and Ireland. The Convention aims to "promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities and to promote respect for their inherent dignity" and, as such incorporates the full range of rights. These include the rights to health, education, independent living, work and employment, personal mobility, an adequate standard of living, and the right to participation in cultural life, recreation, leisure and sport.

To omit economic, social and cultural rights from a Bill of Rights for Northern Ireland would be a missed opportunity given that the UK has indicated its intention to ratify the Convention in the near future. Just as the new Convention has given effect to the full range of rights, so too must a Bill of Rights for Northern Ireland be mindful of the fundamental indivisibility and interdependence of all human rights.

Contact details:
Dr Bronagh Byrne
Research and Policy Officer
Centre on Human Rights for People with Disabilities

Dispelling the Myths:

Key facts about People with Disabilities

“People with disabilities are twice as likely to live in poverty as non-disabled people.”

(Disability Poverty in the UK: Leonard Cheshire Disability 2008)

Disability and Poverty

People with disabilities tend to incur 25% higher day-to-day living costs as a direct consequence of their disability. This is because of the extra costs for mobility aids, social care and taxis because public transport is inaccessible. However, disability poverty is not just about low income it also relates to lack of opportunity and other barriers. People with disabilities are more likely to be in poverty because of barriers to employment, higher living costs, low wages and inadequate benefits and tax credits. (A Route out of Poverty? edited by Gabrielle Preston 2006)

The most recent statistics show that disabled people in Northern Ireland are still more likely to be unemployed than non-disabled people and to be caught in a 'benefits trap'. According to the Northern Ireland Labour Force Survey for July - September 2007:

- One third (33%) of disabled persons are in employment compared to 78% of non-disabled persons.
- Approximately 64% of working age disabled people are economically inactive compared to 19% of those without disabilities.

Name	Definition	Recipients	Average Weekly Entitlement
Disability Living Allowance (will be paid on top of other benefits, tends to be paid to people under 65: People with a Disability cannot receive DLA & AA at the same time; it is either one or the other)	Disability Living Allowance (DLA) is a benefit for people who have become disabled before the age of 65 and who need assistance with personal care or mobility. DLA has 2 components: <ul style="list-style-type: none"> • Care Component • Mobility Component 	173,775	£69.84 <ul style="list-style-type: none"> • C/C has 3 rates lower, middle & higher ranging from: £17.10-£64.50 • M/C has 2 rates from £17.20-£45.00
Attendance Allowance (will be paid on top of other benefits, tends to be paid to people over 65)	Attendance Allowance (AA) is a benefit for people over the age of 65 who are severely disabled (physically or mentally) and who need help with personal care or supervision. Those requiring constant help receive the higher rate of benefit. <ul style="list-style-type: none"> • Attendance Allowance 	62,768	£59.10 <ul style="list-style-type: none"> • A/A has 2 rates lower & higher from: £43.15-£64.50
Incapacity Benefit (is based on National Insurance contributions and what's received is deducted from other benefits; it can often take people off Income Support levels which affects other entitlements; prescriptions, dental care etc)	Incapacity Benefit (IB) is paid to people who are incapable of work and who have paid sufficient contributions throughout their working life. Incapacity Benefit – has additional amounts paid dependent on age & whether the person is dependent on care from another person	111,904	£88.74 <ul style="list-style-type: none"> • I/B is paid on a short term or long term basis: S/T has a lower & higher rate from: £ 61.35 - £72.55 • Long term pays a flat rate of £81.35

(A Carer's Allowance is paid to someone who looks after a severely disabled person for at least 35 hours a week. The personal rate benefit per week is £48.65).

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- Over twice the number of people with disabilities have no qualifications compared to people without disabilities.

Disability and Benefits

Many disabled people are trapped in poverty and tend to be furthest from the labour market and thus rely on social security benefits in order to survive. There are a range of benefits that disabled people are entitled to receive. These include;

- Disability Living Allowance
- Attendance Allowance
- Incapacity Benefit
- Housing Benefit

All figures opposite come from the current Northern Ireland Social Security Statistics Bulletin November 2007 published by the Department for Social Development.

The concentration by the media and government on the people who make fraudulent claims for

disability benefits can mask the real issue of disability and poverty. Disability Action believes those who unfairly claim should be appropriately dealt with but that more needs to be done by government to ensure that disabled people and their carers are provided with a comprehensive and simplified benefits system, which adequately meets the extra costs incurred by people with disabilities. (Disability Action's: Disability Rights Manifesto 2007)

For further information:

**Disability Action,
Portside Business Park,
189 Airport Road West,
Belfast,
BT3 9ED**

Tel:(028) 90 297880

Fax:(028) 90 297881 Textphone:(028) 90 297882



Disability Legislation Timeline

This legislation has been introduced because disabled people encounter discrimination in every day life. This table will outline the key pieces of Disability legislation in Northern Ireland.

Legislation	Description
Disability Discrimination Act 1995	<p>The Disability Discrimination Act 1995 (DDA) is a UK wide Act and makes it unlawful to discriminate against disabled people. The Act introduced new rights for disabled people in the areas of employment and access to goods, facilities, services and premises. The Act has been introduced at various stages:</p> <ul style="list-style-type: none"> • Dec 1996 - Employment Rights and the first rights of Access introduced. • Oct 1999 – Service providers have to make reasonable adjustments such as providing extra help or making changes to the way they provide their services. • Oct 2004 – Service providers have to make other 'reasonable adjustments' in relation to the physical features of their premises to overcome physical barriers to access.
Disability Discrimination (NI) Order 2006	<p>The DDO includes a number of changes to disability discrimination law. The legislative changes are being introduced at various times from 2007:</p> <ul style="list-style-type: none"> • Jan 2007 - The Disability Equality Duty- places new duties on public authorities to have due regard in promoting positive attitudes towards disabled people and the need to encourage their participation in public life. • Oct 2007 - Definition of Disability - amends the definition of disability to include people who have been diagnosed with cancer, HIV or MS and those who have mental ill health. (The amendment means that people will be deemed to be disabled from the point of diagnosis.) • Feb 2008 - The draft Disability Discrimination (Private Clubs, etc.) The regulations will ensure that private members clubs with 25 or more members are under the same duties of reasonable adjustment imposed the DDA.
The Special Educational Needs and Disability (Northern Ireland) Order 2005	<p>SENDO prohibits discrimination against disabled students and prospective students by schools and institutions of further and higher education. SENDO increases the rights of children with special educational needs (SEN) to attend mainstream schools and introduces disability discrimination laws for the whole education system in Northern Ireland. (schools, further and higher education institutions (including teacher training and agricultural colleges) and qualifications bodies.)</p> <p>In 2006 amendments were made to SENDO strengthening the legislation in relation to Further and Higher Education. This has been called SENDO 2005 Regulations 2006.</p>
Convention on the Rights of Persons with Disabilities (to be ratified)	<p>The Convention was adopted by the United Nations General Assembly in December 2006. The Convention was signed by the UK and Ireland in March 2007 and is awaiting ratification. It is hoped that the United Kingdom will ratify the Convention as soon as possible. The main purpose of the Convention is to "promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity".</p>

Section 75 of the Northern Ireland Act 1998 and The Criminal Justice (Northern Ireland) Order 2004 both cover different communities of interest including people with disabilities. Section 75 places a statutory obligation on public authorities to have due regard to the need to promote equality of opportunity and the promotion of good relations between various different communities of interest in Northern Ireland.

The Criminal Justice (NI) Order 2004 introduced legislation to protect individuals from different communities of interest from 'hate crimes', including people with disabilities.

For further information contact:

**Disability Action, Portside Business Park,
189 Airport Road West, Belfast, BT3 9ED
Tele:(028) 90 297880
Textphone:(028) 90 297882
Fax:(028) 90 297881**

**Or the Equality Commission for Northern
Ireland, Equality House,
7-9 Shaftsbury Square, Belfast, BT2 7DP
Tel: (028) 90 500 600
Textphone:(028) 90 500 589
Fax:(028) 90 248 687**

Housing and Disability

“Disabled people must have the same right to choose where they live as non disabled people and should have access to the support they need to enable that right to be exercised”.

(Agenda for Change: Disability Action 2004)

The right to adequate housing is a basic human right afforded to all citizens regardless of age, gender, or disability under international Human Rights legislation. However, it would appear from the current situation in the Northern Ireland housing sector that this right may be far from reality for many people. Record waiting lists for social housing, rising house prices and shortage of private sector houses together with, rising homelessness figures are all impacting on an individual's ability to access adequate housing.

For people with disabilities this means access to accessible housing and the appropriate housing services in order to be given the opportunity to live independently, not in residential care. Without access to appropriate housing disabled people have little or no control over their ability to participate in society.

Anecdotal evidence given to Disability Action would also suggest that; disabled people are having difficulty accessing appropriate and accessible housing due to a lack of public housing stock. The waiting lists for adaptations are too long – some people can wait up to two months for minor adaptations, and up to one year for the start of major adaptations such as extensions to property. The evidence also suggests that people with disabilities are unsure of what they are entitled to in relation to grants and assistance and have had difficulties finding contractors to carry out work on their homes. Other issues include getting on the property ladder, homelessness, unsuitability of accommodation and moving between private and public sector housing (including housing associations).

Housing services for people with disabilities Assistance is needed and offered in the areas of independent living, accessibility and adaptations.

Independent living: Independent living means that “all disabled people having 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.” (Policy Statement on Social Care and Independent Living: Disability Rights Commission 2002)

Accessible homes: Poor design over many years has resulted in disabled people experiencing poor access in their own homes because of steps, poor layouts and narrow doors. Although the Building Regulations now require that new build houses are “visitable” there is still no obligation to build lifetime homes.

Adaptations: The Northern Ireland Housing Executive can provide people with disabilities with assistance for adaptations to their home. If the individual is a Housing Executive or housing association tenant then there is generally no cost involved for these adaptations. There is also assistance provided for people in private sector accommodation. If an individual owns their own home or lives in a privately rented house the local Health and Personal Social Services Trust may be able to provide small minor works and lifts free of charge. Grant aid is also available in the form of the Disabled Facilities Grant (DFG) and Home Repair Assistance Grants. The amount of DFG or Home Repair Assistance Grant depends upon the cost of adaptations and the ability of the individual to pay for them.

Disability Action has recently received funding from the Northern Ireland Housing Executive for a new housing project. The project aims to explore housing issues for people with disabilities. It is funded for three years and will involve a number of elements including dealing with housing enquiries, providing talks and workshops, carrying out research and developing best practice models of interfaces between the Northern Ireland Housing Executive, housing associations, disabled people and other relevant agencies.

In order to address these and other issues Disability Action would therefore urge government to ensure that the following objectives should be implemented;

- The commitment by all social housing providers to upgrading all housing stock to Lifetime Homes Standards. (Lifetime homes are homes which are designed to meet the changing needs occurring through one's family lifetime)
- The creation of a register of accessible or adapted housing across all tenures (private and public sector rented or owner occupied houses)
- Non-means tested mandatory grant aid should be made available to cover all the costs of all housing adaptations
- Waiting times for adaptations to houses must be reduced
- All agencies involved in a disabled person's move from hospital/residential care to their own home must work together to ensure a person can do so with dignity
(Disability Action's: Disability Rights Manifesto 2007)

£200m has recently been allocated to build an additional 5,000 more affordable homes in Northern Ireland. Disability Action believes it is imperative that some of this money will provide people with disabilities with affordable accessible homes.

For further information:

**Disability Action, Portside Business Park, 189
Airport Road West, Belfast, BT3 9ED
Tel:(028) 90 297880 Fax:(028) 90 297881
Textphone:(028) 90 297882**



Equality 2025

Equality 2025 was established in December 2006 to act as a voice for disabled people across the UK and to influence policy and service delivery design at an early stage. The body was set up following intensive work with an advisory group of 13 disabled people who were recruited through open competition to advise government on the role, remit and membership of Equality 2025. The network is seen as a new way of bringing issues that affect disabled people to the heart of government and its development is a result of the Government's pledge to achieve full equality for disabled people by 2025.

There are a total of 24 members on the Equality 2025 Network at present with members appointed from Northern Ireland, Wales and Scotland to undertake specific work with disabled people in their countries. Dr Gary McGladdery joined Equality 2025 in May 2007. A disability Officer at Queens University in Belfast, he has been employed by a number of organisations in the Community and Voluntary Sector, including Disability Action Northern Ireland. His appointment will provide a vital link to enable disabled people in Northern Ireland a voice in disability issues in Westminster.

Speaking about his appointment, Dr. McGladdery said:

"I am delighted to be appointed as the Northern Ireland Reserved Appointee for Equality 2025. This represents a great personal opportunity to assist in the process of achieving full equality for disabled people across the UK, with particular focus on Northern Ireland".

Members are appointed for a period of three years and it is Gary's intention to consult with disabled people from across Northern Ireland to find out what issues affect them and what barriers they face to full participation. It is a widely known fact that many disabled people live on or below the



poverty line and by addressing equality issues, Equality 2025 may also be able to influence government policy to the extent it also helps to address this issue.

The Prime Minister's Strategy Unit report, 'Improving the Life Chances of Disabled People', published in January 2005, set out the Government's strategy for disabled people. It included some sixty recommendations for improving disabled people's lives, focusing on four key themes: early years, the transition from childhood into adulthood, employment and independent living. Much of Equality 2025's work over the next three years will concentrate on these policy areas as the Office for Disability Issues seeks to take forward the recommendations of the Life Chances Report. Equality 2025 has committed itself to communicating the views of disabled people in its advice to government and this will reflect its role as the voice of disabled people at Westminster.

**For further information contact:
Dr. McGladdery - Northern Ireland Reserved
Appointee for Equality 2025
c/o Disability Action, Portside Business Park,
189 Airport Road West, Belfast, BT3 9ED
Tel:(028) 90 297880 Fax:(028) 90 297881
Textphone:(028) 90 297882**

**Or Office for Disability Issues and Equality
2025
The Adelphi, 1-11 John Adam Street, London,
WC2N 6HT
e-mail: gary@equality2025.org or
NI@equality2025.org**

Poverty Health and Social exclusion

Prior to my writing this article I perused some of the union/workhouse outdoor relief records of 1885/7. Like other topics, child abuse, domestic violence, etc poverty and ill health is rooted in our past; the difference being those individuals who are attempting to change everything for a better shared future.

In the workhouse and poor house records we have looked at all the aspects of how the person arrived at that door and I quote a few entrants.

No.	Name	Sex	Age	Marital Status	Employment or Calling	Religious Den	Disability
2044	-----	F	13	None	Mill Worker	R.C	St Vitus Dance
2043	-----	M	63	Widower	Labourer	C.O.I	Rheumatism
2049	-----	F	23	Single	Prostitute	R.C	Syphillis
2050	-----	M	newborn	Bastard	Deserted	Presbyterian	-----

So we learn from this that these individuals had low paid jobs, no money for rent, to buy food or provide for themselves; children with no known fathers were left in that place for shelter and a meagre ration; all religions were included and the illnesses were anything from "pains" to tuberculosis and nervous debility.

Today we have a welfare provision and thankfully the poorhouse has gone. Our health service for all its faults has some type of provision; however poverty and health just like the 1800's are essentially wed to each other in partnership. Poverty is linked to all aspects of a person's existence from income and employment to the cost of food and housing, from health and health services, to the safety and makeup of our local environment. Addressing poverty must be a key responsibility for every department of government.

Impact of Re-development policy

In the areas hardest hit by poverty we also had those hardest hit by a forty year conflict. At the same time these areas also experienced re-development policies that impacted on community support networks weakening families and in turn communities. Neighbourhoods were wiped out, with family visiting maybe once a month. When the conflict was at its height we saw depression and anxiety on the increase. We in community work had weekly protests. "Save our Shankill" "Save our

Schools" "Save our Shops" "Thatcher the milk snatcher"; some folk even today are attempting to "Save our Shankill" but sadly it's too late. With the ongoing conflict, community workers appeared to run out of steam and so the continuity was lost and the damage was irreversible. The years of stress, strain and trauma has produced many mentally and physically damaged people; old diseases are now coming around again, tuberculosis being one, others such as arthritis, fibromyalgia, lupis, dystonia, irritable bowel, cancer are all now an everyday talking point.

Some of those new builds are demolished already, so we appear to be going around in circles. There is much talk of every home having a computer. "Hello" Do you know the average debt accrued in those households? To summarise, poverty and ill health are alive and well in these areas. We have all the anti-social and addiction problems in the same areas, self harm is rampant and suicides are actual and catastrophic, with entire families going through all the dreadful aftermath. Schools are fewer; all service provision is being cut back. Dental services are almost zero on the National Health for those on low or no incomes. Factories are gone with no new investment to speak of. The main Shankill Road looks as tired as its people. Litter and rats are common place and the culprits feel comfortable, the dreaded chewing gum is strewn, dogs cast out to run free. Our local parks need real investment and safety measures in-built

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yet police are only visible in relation to motor offences. The conflict and the re-development policies have had a real impact on individuals living within these areas.

Impact of the conflict

There has been much talk of the 4000 lives lost as a result of the conflict and rightly so, but this is only part of a wider and deeper story. Each family member of the 4000 who died has had to walk a long and lonely journey. Those who lost mothers and fathers needed to be cared for, often financially they were pushed to the limit, many borrowed and accrued great debt as a result, others coped through prescribed drugs etc.

If we look at the ripple effect of each dead person and consider that each had an extended family of 40, we would begin to get a fuller figure of the numbers of people traumatised as a result of each death. If we then consider the physically injured and those who cared for them, they are often the names that no one will know or care about; many children took on the role as primary carer and in doing so missed out on their education. All these people have had their lives impoverished not only financially but also in mind. Many wives and husbands have described their levels of caring as a great responsibility, they still grieve for the person they once knew, for a working life they once had. Many are now totally excluded from society many of these same people now find their 'safe place' inside our centre. They talk about when they worked for their living; about the pay packets that varied based on productivity or the availability of overtime that were once there for the asking. They now talk about the low benefit levels they receive which don't take account of hi-days and holidays. They tell us that low incomes create more health problems for them, they tell us about the added

worry of increased food/transport/heat costs, none of which are reflected in benefit increases.

At the last count of deprived areas most urban but some rural, 43% had taken tranquillisers and anti depressants for more than 30 years and in honesty had counselling been an option they would have preferred that route. Now that we have such services 'in-house' the finance is just not available to run them. As I write on the eve of our 21st anniversary I have no idea how many sessions we can give after March 31st. Come the end of June there will be no local counselling services available unless somebody responds very soon. Our services which are in very high demand by G.Ps, Hospitals, Days Centres, and Probation Boards will be lost. Unlike many others our suicide aftermath groups have access to a local service which is fully B.A.C.P I.A.C.P accredited. If financial support is not secured this will be another rug pulled from under the feet of the impoverished.

Having driven a short space from Malone and crossed over the Falls and Shankill, the gap between the 'haves' and 'have nots' is widening even within our community. Health, Environment and Poverty, Housing, Education, Lack of jobs and Proper Training, the conflict and fear factor of control all are inter-linked and we have a duty to impress this on our government as we still wait for it to ratify an Anti-Poverty Strategy for NI; another shiny non-actioned paper. This has to be time for real action, for if we don't help the weakest in our society and if leave the poorest behind we are storing up trouble for future generations and we cease to be inclusive.

For further information:
Mina Wardle, Shankill Trauma Centre
Tel: 028 9020 5300

