EQUAL OPPORTUNITIES COMMITTEE

Tuesday 21 September 2004

Session 2

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EQUAL OPPORTUNITIES COMMITTEE

14th Meeting 2004, Session 2

CONVENER

*Cathy Peattie (Falkirk East) (Lab)

COMMITTEE MEMBERS

*Shiona Baird (North East Scotland) (Green)
Frances Curran (West of Scotland) (SSP)
Marlyn Glen (North East Scotland) (Lab)
*Marilyn Livingstone (Kirkcaldy) (Lab)
*Mrs Nanette Milne (North East Scotland) (Con)
Nora Radcliffe (Gordon) (LD)
*Elaine Smith (Coatbridge and Chryston) (Lab)
*Ms Sandra White (Glasgow) (SNP)

COMMITTEE SUBSTITUTES

Jackie Baillie (Dumbarton) (Lab)
Patrick Harvie (Glasgow) (Green)
Carolyn Leckie (Central Scotland) (SSP)
Tricia Marwick (Mid Scotland and Fife) (SNP)
Mr Jamie McGrigor (Highlands and Islands) (Con)

*attended

THE FOLLOWING GAVE EVIDENCE:

Sarah Jane Allan (North Lanarkshire Youth Council)
Shaben Begum (Scottish Independent Advocacy Alliance)
Bob Benson (Disability Rights Commission)
Irene Garden (Older People's Consultative Forum)
Graham Morgan (Highland Users Group)
Professor Nick Watson (Strathclyde Centre for Disability Research)
Sally Witcher

CLERK TO THE COMMITTEE

Steve Farrell

SENIOR ASSISTANT CLERK

Ruth Cooper

ASSISTANT CLERK

Roy McMahon

LOCATION

Committee Room 1

Scottish Parliament

Equal Opportunities Committee

Tuesday 21 September 2004

[THE CONVENER *opened the meeting at 10:09*]

Item in Private

The Convener (Cathy Peattie): Good morning and welcome to the Equal Opportunities Committee's first meeting in this salubrious new Parliament building. We have apologies this morning from Frances Curran and Nora Radcliffe.

Do members agree to take item 3 in private, as it deals with the committee's draft work programme?

Members *indicated agreement*.

Disability Inquiry

10:10

The Convener: I welcome Sarah Jane Allan from North Lanarkshire youth council, Shaben Begum from the Scottish Independent Advocacy Alliance, Irene Garden from the older people's consultative forum and Graham Morgan from the Highland users group. This is the first meeting to gather evidence to assist the committee's design of the questioning and visits for its inquiry into disability. I realise that the witnesses will want to raise a host of issues with us—I have just been speaking to Irene Garden about that—but we are keen to get the kind of information that we need to facilitate our inquiry.

I thank the witnesses for coming to meet us this morning. The inquiry will be fairly long, so this might not be the last time that we meet them in the course of the inquiry. If the witnesses have nothing to say before we begin the questioning, I will start.

We are considering an inquiry into the barriers that face people with disabilities, so we want to speak to as many people as possible and get out and about to meet organisations and individuals. However, an issue that arises is the definition of disability and we would like to know how the witnesses feel about that. Does a definition of disability help in recognising and understanding the different ways in which disabled people can experience barriers to participation? Is it necessary to have a definition of disability to frame the inquiry's remit? If so, what kind of definition is necessary for the purposes of the inquiry? Can the witnesses suggest a useful definition of disability?

Sarah Jane Allan (North Lanarkshire Youth Council): There should not be a definition of disability. There should be something broader than a definition—perhaps only a statement—because if people did not fit into the definition, they would not get help or the authorities would not see fit to give them help. I have a statement with me, if you want to hear it.

The Convener: Fire away.

Sarah Jane Allan: I am talking about anyone with any illness, disability or other condition that affects their everyday life and full participation in society.

I have found that there are many disabled people who do not like to be called disabled. They might have illnesses or conditions that mean that they need help or they might have learning difficulties, but they do not consider themselves disabled. The statement covers most such people. It is more a statement that a definition. It would not be a great idea to have a definition.

The Convener: Do you feel that a definition would be too narrow but that your wider statement would be more inclusive?

Sarah Jane Allan: Yes.

Irene Garden (Older People's Consultative Forum): What Sarah Jane Allan said is perfectly true: "definition" is not a good word. I would say that anyone with anything from a simple eyesight or hearing problem, through learning difficulties, mental health problems or mobility problems to a severe handicap or a progressive illness is disabled. That is what I think is a suitable statement—it is much the same as Sarah Jane Allan's. We definitely do not want a definition, because a definition can stigmatise people or make them think that they are not handicapped when in fact they are. It must be kept reasonably simple.

10:15

Shaben Begum (Scottish Independent Advocacy Alliance): It is important that there be some sort of framework. I agree with Sarah Jane Allan in that definitions can be narrow and excluding. The main group in which I am interested is those who do not define themselves as being disabled, who therefore fall through various gaps, do not access services and are forgotten. There is also an issue with the stigma that disability attracts in our society. Most of us would say, "Oh no, I'm not disabled. I just have a difficulty of some sort."

Graham Morgan (Highland Users Group): I echo what the other witnesses have said. In a statement or definition, we need to include the fact that part of the cause of disability is the way that society works—we need to include the social model of disability—but we equally need to recognise that the impairment or condition can create its own barriers. In the world of mental illness, the majority of us do not consider ourselves to be disabled even though we might fit into that language and have similar issues to those who consider themselves to be disabled. As has been said, that means that we can be excluded from the debate, because it does not seem immediately relevant to the people with whom we work.

The Convener: That is important for us. We have highlighted the fact that we want to get out and meet organisations and individuals, but how do we get out to those who are excluded although they do not consider themselves to be disabled? How can the committee ensure that it reaches the widest possible range of groups in its evidence gathering? How do we get past the labels?

Graham Morgan: I suggest that the committee goes out and meets different groups in their own worlds, using their own language and experiences, and starts off by finding out about the lives that we lead and our experiences to give a context for the inquiry so that the committee is immersed in the backgrounds and cultures from which we come and has a good understanding of our lifestyles. The committee might not need to use the word "disability"; it might just go to different groups that it knows are excluded and use their words instead.

Shaben Begum: We do not want to get bogged down in the medical model and define disability in that way. The committee needs to be creative in accessing different groups. For example, general practitioners will have lots of access to people with disabilities who might not use other social support networks. As Graham Morgan said, the committee needs to go into people's domains and access them that way. People get involved in different community groups and networks that are not necessarily associated with disability.

Sarah Jane Allan: The committee could contact organisations that will put it into contact with disabled people who want to go into further education, but it should not ask those organisations to do the work for it; the committee should employ its own facilitators to do that. Much of the time, the organisations about which everyone is talking create barriers because they have been working with people for far too long; the committee could use those organisations, but it should not get them to do the work for it.

The Convener: That makes a lot of sense.

Irene Garden: I would ask for the help of the Royal National Institute of the Blind, the Royal National Institute for Deaf People and people who work with Alzheimer Scotland—Action on Dementia, but my gut feeling is that the committee must go into communities and approach day centres, mainstream schools, special schools and lunch clubs. It should approach organisations that can identify the people who use their services as well as service providers, because there are many housebound disabled people. The committee could use home helps to get housebound people involved. If it wants to find real disabled people, it must go down to grass-roots level.

Sarah Jane Allan: I am involved with an organisation called SOL—Support for Ordinary Living—which is in contact with many adults with disabilities who want to enter the workplace and to get out into the community. That organisation would put the committee in contact with disabled people. There are many other similar organisations, such as LEAD—Linking Education and Disability—which helps disabled people to access further education. The committee could speak to such organisations, as they are all in contact with disabled people. It could also go into the colleges that disabled people attend. The committee also needs to find a way of getting to the many individual disabled people in the community.

The Convener: We want to examine the whole issue of employment and education. I know that Sandra White has some questions on employment.

Ms Sandra White (Glasgow) (SNP): Good morning. We all know that people with disability find it much more difficult than others to get employment and that when they do they are paid half the average wage of people who are not disabled. The committee is seeking to prepare a paper on that issue. What do you see as the priority areas in relation to disabled people and employment that we should explore when we talk to organisations?

Sarah Jane Allan: One priority is changes in the benefits system. Many disabled people are scared to go out to work because they think that that will affect their benefits and they will be worse off. Many organisations give disabled people jobs simply as tokens, but like everyone else disabled people need real jobs for real wages. There should also be recognition of non-waged jobs, so that they are seen as jobs. Many disabled people would like employment, which is a really important issue, but they do not think that they will have the chance to have it. We need employers to want to employ disabled people, as many people think that employers would rather not do so. Many disabled people have the ability to be employed, but they do not have the necessary self-confidence.

Shaben Begum: It is important that employers are provided with education on employing people with disabilities, as there is a great deal of stigma. Most employers do not want the bother of employing someone who has a disability, as the perception is that they will require a lot of support and that that will cause a lot of hassle for the employer and the person’s colleagues. We need both to educate society in general and to educate employers on the law and their responsibility to employ a wide range of people.

Irene Garden: If I were meeting employers, I would ask them whether their premises were fully accessible, whether they had an equal opportunities policy and whether they had disability awareness training. One of the biggest barriers that disabled people face is that they are not sure whether to go for an interview because they do not know whether the workplace will be accessible. They also feel that there may be particular attitudes towards them if they enter the workplace. As Shaben Begum said, education is one of the most important points to address. As soon as education is widespread, the issue of disability may go out of the window.

Graham Morgan: I have picked out four themes that the committee may want to consider. First, 85 per cent of people with long-term mental health problems are unemployed. Some studies indicate that only 4 per cent of people with severe mental illness are in employment. Fifteen to 30 per cent of employees have mental health problems and 37 per cent of those report discrimination at work. The first theme to be examined is that of discrimination in mental health. Ninety per cent of employing agencies have no mental health policy, but 98 per cent of people say that they should.

Secondly, the committee could examine the whole idea of employment. A couple of weeks ago, I attended an interesting group meeting at which many of our members said that they wanted to do things that were valuable, meaningful, useful and enjoyable but that they did not necessarily want employment. That is not the option that everyone wants. For some people, the chance to do something useful and to have an adequate income on benefits is much better than getting into the stress of the ordinary workplace, especially if they have long-term problems.

A third issue is low expectations. Many people think that we cannot do much work. In HUG we have lawyers, chemists and physicists, who can do much more than stack shelves in supermarkets. The committee also needs to consider the adaptation that is required for people with mental health problems in the workplace—what would make it possible for us to have a fulfilling life in the workplace.

Lastly, the committee could consider lifestyle and employment. Many of us in the world of mental illness have a quite chaotic lifestyle. Forty per cent of people who are admitted to the psychiatric hospital in the Highlands also have alcohol or drug problems, which might make it hard for us to engage with conventional employment practices and therefore exclude us from work.

Ms White: I asked what you thought were the priorities for disabled people in relation to work. One area that you have highlighted is the benefits system, although unfortunately that is reserved. Another point that you have made is that employers should be aware of their responsibilities under the Disability Discrimination Act 1995. A third point is that people should have a meaningful job, rather than one that just involves stacking shelves. We will also ask employers questions. Do you think that we should ask them and their clients—the people who are seeking jobs—the same questions, or should we approach the two groups in different ways, in order to get the most out of the inquiry?

Shaben Begum: The questions for the two groups must be different. Following on from what Graham Morgan said, I would like to make a further point about employers' responsibilities. We need to examine the whole process of recruitment: how jobs are advertised—if they are advertised—and where they are advertised. There may be barriers that prevent people from finding out about jobs before they even consider applying for them. We need to consider how groups may be excluded because of the way in which job descriptions are put together and how language is used to put people off.

Sarah Jane Allan: SOL, which I mentioned earlier, has job coaches who can find adult disabled people jobs that suit them and will either not affect their benefits or do so in a way that leaves them better off. The job coaches accompany disabled people to their jobs and stay with them to provide help for as long as those people want. The system provides a really good template. The job coaches will leave when people feel that that is necessary, but they are available to give them a hand. The committee could lead by example by employing disabled people as facilitators in this consultation.

Irene Garden: I would keep the questions for employers and prospective employees entirely separate. One of the main questions that I would ask someone who was applying for a job was whether they feared discrimination and whether they felt that they were not capable of doing the job that they would like to pursue. You should also ask people whether they are frightened of the attitude of co-workers. If they did not fit in, would that make them feel separate? Perhaps they would like to be part of a team but feel shunned simply because other people think that they are different from everybody else.

You should ask employers whether they are aware of the provisions of the Disability Discrimination Act 1995 that come into force in October 2004. Are they equipped to take disabled people and if not, why not? Do they have an equal opportunities policy and disability awareness training? Your questions to disabled people and to employers must be totally separate.

10:30

Sarah Jane Allan: I echo that. You should relate to the difficulties of the person who is going for a job, identify the barriers and limitations and identify their needs and the support that they will require. To make that person want to go for the job, that support needs to be in place. We should find out what kind of job that person enjoys doing—the job should be not just any old job but something that they enjoy. Worries about benefits and support costs come up again, along with the need for transport to get the person to the job, because some people who are disabled would need transport to be provided.

Ms White: Sarah Jane Allan gave an example of good practice: a mentoring system. Does the panel have any other examples of good practice that we should promote or mention when we are asking questions and taking evidence?

Irene Garden: You should certainly go to the City of Edinburgh Council—I work with it in a voluntary capacity and know that it has a good equal opportunities policy. It employs disabled people and everything is fully accessible. It goes out of its way to accommodate disabled people in its work force.

Graham Morgan: I have four examples of good practice. First, clubhouses such as Flourish House in Glasgow offer a form of employment for people with mental health problems. Secondly, social firms have been very successful as ways of getting into employment; two examples are 6 Mary's Place in Edinburgh and TouchWood on the Isle of Skye. Thirdly, I do not know whether the Pathfinder trust in England still exists, but it promoted the idea of desirable characters in getting employment for people with mental health problems. It said that mental illness can sometimes be an advantage. Finally, Redhall walled garden is a training centre and the Scottish Association for Mental Health is also good.

Sarah Jane Allan: I have an example of bad practice—not all organisations are good—and that is my local jobcentre.

The Convener: Do you think that it is unaware of things that it should be aware of?

Sarah Jane Allan: The staff there know about disabled people and know that they should try to be helpful. My experience is that I was taken in by the jobcentre and an assessment was made of what kind of job I would like and what I could do. I was getting really excited, but the assessment said that I was unemployable and that there was no job that was suitable for me. The jobcentre has not helped me since then. That is bad practice, but I then found the good practice that I told you about earlier.

The Convener: You are concerned about the attitude of employers and people in jobcentres towards people's capabilities.

Sarah Jane Allan: Yes. On both sides, attitudes are one of the main barriers to people getting work.

Elaine Smith (Coatbridge and Chryston) (Lab): On that point, I notice that the Disability Rights Commission's submission states:

> "There is overwhelming public support in Scotland for increased rights for disabled people; at the same time however, nearly a third of Scots still believe that a wheelchair user would not make a suitable teacher."

That is an example of the barriers that you talked about. Do you have further ideas on how we can challenge them? The legislation is there to try to ensure that discrimination does not happen. For example, if someone applies for a job as a teacher they should, under the law, be treated in the same fashion as any other applicant. I find that statistic stunning and quite shocking. Given that that attitude exists, what ideas can we take forward to try to challenge and change it?

Sarah Jane Allan: People need to be trained and made to realise that the way that they think and do things is completely wrong. When a person applies for a job as a teacher, if they have the right qualifications, have done all the work and can do the job, why should they not do it? I do not see why someone who is in a wheelchair cannot be a teacher, as long as the building is fully accessible to that person, as it should be by law.

Graham Morgan: We need to show that the Disability Discrimination Act 1995 can be used and that it can be effective as a tool for persuasion, but equally we need the gentler approach of showing what we can take to the workplace and raising the general awareness of employers. The see me anti-stigma campaign is focusing on employment; it is trying to make the argument about how productive and useful we can be in the workplace and how many of us are already there.

Shaben Begum: I do not think that everybody is necessarily treated equally as a candidate in the interview process. The attitudes of panels and prospective employers ensure that people are not treated equally at the interview stage, if people get to that stage. Equal opportunities are an ideal that some of us work towards, but not everyone does that. As Graham Morgan said, attitudes need to be changed in a gentler way, with education. Perhaps the best way is for schools and colleges to educate younger people before they get hold of negative and derogatory attitudes.

Sarah Jane Allan: It is discrimination when a teacher cannot work as a teacher because they are in a wheelchair, but that is going to happen. Someone will go for a job and will have qualifications that are as good as those of the other people there, but the employer will pick the person who is not in a wheelchair because they realise that they might have to change a few things to allow the person who is in a wheelchair to work there. That person might be better at the subject than the person who is employed just because they are not in a wheelchair.

Shaben Begum: I wonder how many wheelchair users are able to qualify as teachers. I do not know the figures on how many people with disabilities get on to courses at teacher training colleges.

The Convener: That is a good question, because that is the next area that we want to examine.

Marilyn Livingstone (Kirkcaldy) (Lab): Before I start, I should mention that before I was elected I worked as the head of the business school at Fife College of Further and Higher Education. I still have links with the college and I am a member of the Fife lifelong learning partnership. You will not be surprised to hear that my questions relate to further and higher education, which is an important area for the committee to consider. This is our opportunity to ensure that we put the right questions during the inquiry and I want to ask your advice. What areas should we prioritise? What key lines of questioning should we pursue with students who attend colleges and how can we highlight the most crucial areas for them?

Graham Morgan: I noted a few priorities that you might want to examine, but the subject has not been mentioned frequently by our members, so I might not have enough knowledge.

In terms of mental health, one of the biggest barriers is our illness itself and the fact that we can get ill in our early or late 20s. That is the most common time to get ill, in which case our entire education can be disrupted. We need to examine how such disruption is managed. There are issues to do with the consequences of that disruption, such as the effect on our confidence and on our health, whether good or bad. For example, we may take medication that prevents us from getting up early in the morning, which impacts on our further education.

The final two points that I noted are about the impact of mental health problems on our social interactions. Sometimes we can find it very difficult to mix with other people, such as people in authority or fellow students, which can make it hard to attend further education courses. Also, our problems often are not detected. Many people struggle with their education in their early or late teens, but no one realises that that is because they have a mental health problem, so they do not receive adaptations or other help to help them to succeed in their education.

Shaben Begum: To reiterate Graham Morgan's point, the initial difficulty is that, as members know, many people with disabilities will not have completed their education, so they will not be in a position to go into further or higher education. It would be interesting to find out more about that.

When I was at college—which was not long ago—I do not remember anybody who had a physical disability or was open about any sort of disability; neither do I remember the college being accessible. There are lots of issues around not only the physical accessibility of buildings but the accessibility of courses and around the support that is given to students—for example, whether there is a mentoring scheme, whether people are given extra support, whether there are special classes or whether people are able to go to any class.

Sarah Jane Allan: On further priorities, seamless additional support must be provided when people leave secondary school and go to college. Colleges have to be ready and have that support in place. People have to be allowed to attend proper courses rather than be stuck in a special class and made to repeat work that they have already done at high school.

Advocates need to be put in place, because a lot of disabled people who go to college cannot speak up for themselves—I speak from personal experience and that of a lot of my friends. People have to be in place who can speak for them, and they also have to be trained to speak up for themselves. Information has to be given that states that people can go to college and that support will be provided, because a lot of people who are disabled do not think that support will be provided.

At the moment, the support is not adequate. Students and disabled people have to be asked what they need to help them to learn and to attend normal everyday courses. Also, classes need to be smaller so that support can be present, and courses need to be fully supportable. Work would also need to be done on taping course work. People cannot just say, “We will just put you into that classroom and leave you there,” yet that is what is happening, unfortunately.

Irene Garden: I want to give a bad example of higher education. A couple of years ago, I applied to do a European Union degree at Newbattle Abbey College, but I was told that the college is not wheelchair accessible because it is in an old building. It is possible to access the college through the residential buildings, but I was not going to be a residential student; I was going to go back and forward to college. However, day students cannot access the college from the front entrance. There is no reason why the college cannot put in a stair lift. I know that the building is old and that the law states that people cannot do this, that or whatever to old buildings, but the college should make a point of making the building accessible to disabled students.

Edinburgh’s Telford College is an example of good practice. It offers full support and the whole college is fully accessible; it also has a crèche and advises students on money problems. I do not know whether this is because we are in a social inclusion partnership area, but the college helps every student who goes there, whether they have financial problems, a disability, family problems or whatever. It is one of the very few examples of a college that is prepared to take any kind of disabled person and help them in any way that it can.

10:45

Sarah Jane Allan: I have some examples of good and bad practice—unfortunately, more bad than good. Motherwell College is one of the worst, I am sorry to say. Coatbridge College is bad for accessibility and has no learning support. I found out from a friend at John Wheatley College that he was told he was a health hazard and was forced to leave.

An example of good practice is Lead Scotland—Linking Education and Disability. It gets people on to courses and provides support. Even if someone cannot go to a college building, it will provide education in a learning centre, at home or anywhere they want. Another example of good practice is Ashcraig School. I know that it is a high school and not a further education college, but it provides a template for a place where disabled people could go for further education—it could be a college as well as a high school template. It would be a good idea if people could go back there for further education, as people do in mainstream high schools.

The Convener: It is good to hear about the good practice—and about some of the bad practice.

Marilyn Livingstone: We say a lot about lifelong learning. People may undertake degrees, but we know that it is important that they have access to lifelong learning because practice changes, such as in information technology. That links into Sandra White’s comments. What issues are there around accessing lifelong learning? Can you get supported learning in the workplace?

Irene Garden: The better government for older people partnership, which no doubt you all know about, asked some colleges to promote lifelong learning. That work was funded in England, but the Scottish Executive refused to put funding into Newbattle Abbey College. The aim was to assist older people to pursue lifelong learning. Why was funding not provided?

Sarah Jane Allan: Lifelong learning is important. There needs to be more funding so that support can be provided. The Executive should not be saying, “I’m sorry, but there’s not enough funding”—that is the problem. Funding should be provided no matter what. Information needs to be provided so people know that they have rights. That would mean that if, for example, they come up against barriers in the workplace or in further education, they would know that they have the right to do something about it. If they need help to do so, they should be given it.

Shaben Begum: It is important to raise awareness of lifelong learning courses and to ensure that people know that they are accessible to everyone and that there is a variety of courses. Further, it is important to emphasise to people that, as Sarah Jane Allan said earlier, the courses do not just repeat something from school but are meaningful and useful.

Marilyn Livingstone: You have talked quite a bit about good and bad practice but I would like to know whether you are aware of any gaps in opportunities in relation to higher education that the committee should investigate.

Sarah Jane Allan: There is not a lot of opportunity out there. To be frank, there is more bad than good, as I said earlier. The committee needs to investigate why that is the case and why colleges offer support to prospective students but do not provide it. I was kind of promised a lot of support but was not given it. If I had been given even a little bit of support, I would have been able to learn at college. You should investigate why colleges that claim to have adopted good practice have not done so.

The Convener: Do you think that colleges should have more courses that are tailored to the needs of the student rather than expecting the student to conform to the institution's way of doing things?

Sarah Jane Allan: That would be helpful for some disabled people but not for others, such as me. I would love to do a normal social science course. However, to do that, I would need additional support. That is what I was promised, but it was taken away from me. I had additional support when I was at high school but it was taken away as soon as I went to Motherwell College, which I had been told was the best one for me and other disabled people. Every disabled person is told that, even though it is actually one of the worst.

Graham Morgan: The committee needs to examine the ways in which users can gain the confidence and motivation that are necessary if we are to reach a position in which we would want to engage in learning again. Further, you should examine the ways in which the system can be made more flexible to deal with the fact that what we go through is varied and changeable.

Shaben Begum: The committee should ask the institutions what they do to build relationships with disability groups and to nurture students to enable them to develop the confidence that would enable them to apply for those courses in the first place. Before they can consider applying to a further education institution, students need to be able to feel sure that the institution will make them feel welcome. They need to have connections with people in the institution in order to believe that it will put the right support in place for them. People need to feel sure that the institution will have a mentoring scheme or dedicated support staff who will work with them. Long-term programmes need to be put in place to develop people's confidence. As Graham Morgan said, people might not have a lot of confidence, and the institutions need to invest in winning them over and encouraging them to apply.

A linked issue relates to the statistics that are collected by the institutions on how many students with disabilities they have, how many people they have turned away and, importantly, how many people have dropped out.

Marilyn Livingstone: Sarah Jane Allan talked about seamless progression through high school and into further education and about mainstreaming. What questions should we be asking further education institutions about those areas? What barriers should we deal with in that regard?

Sarah Jane Allan: You need to ask further education institutions about the seamless progression from secondary school to college. You should also stress that there should be proper courses. Lifelong learning courses are fantastic for people who need them, but people who covered certain areas in high school feel that they are repeating work that they have already done. On the lifelong learning course that I was on at Motherwell College, I basically repeated what I did in home economics and other high school classes. However, if some disabled people want those courses, they should be able to do them.

It is important that support is in place. There should be no question about that. What bothered me was the fact that I was promised support and was let down again and again by one college, only to be let down once again by another college. When people keep being let down, why should they believe someone who tells them that a certain college is great and that they should go there and take various courses?

Colleges say that they do not have enough funding, but there usually is enough funding. The problem is that they use the funding for other things because they do not think that providing support for disabled people is a priority. It is not important enough to them. Again, we return to people's attitudes.

Marilyn Livingstone: What work is being done to fill the gap that Graham Morgan talked about in relation to someone who has had time out from high school and needs to get back into the education system? The situation that they are in is different from that of someone who is going into further education straight from high school, whose circumstances are known. I am thinking about seamless progression not only in terms of the planning that is done to enable people to move from secondary school to further education but in terms of support work to fill in any gaps that people might have in their education.

Sarah Jane Allan: What you are talking about is exactly what happened to me. Ashcraig School was brilliant—I was sent to college every Wednesday to ensure that the move from the high school to the college would be seamless, as the college would be able to get everything set up for the next year and I would be used to the new place. I knew the support that I needed; all that the college needed to do was ask me. Ashcraig also gave the college a booklet on the support that I needed, what was in place and what the college would have to put in place to enable me to do the course that I wanted to do. When I got to the college, however, it was decided that all of that would be scrapped and that I would be reassessed. That happened because people there thought that it looked as if I could do certain things that the school said that I could not. That is why, while I think that your suggestion is good, there is no guarantee that that support will be provided. You would need to ensure that colleges were working in the way that you describe rather than just putting the mechanism in place and leaving it alone.

The Convener: We will now move on to questions relating to participation in leisure and arts and barriers to that.

Shiona Baird (North East Scotland) (Green): Our question paper defines leisure and the arts somewhat differently to the way that I would have done. It talks about

> "Social participation, accessing leisure and arts opportunities, participation in civic life"

and, importantly,

> "opportunities for young disabled people and support for their families".

What have been your experiences in relation to accessing leisure and arts facilities?

My particular interest relates to music, which is a valuable part of most people's lives. I would like to know a bit more about your experiences in that regard, such as whether it was possible for you to learn a musical instrument. Further, what do you think are the priorities in this area? Perhaps that question is too big.

11:00

Graham Morgan: I will answer by talking first about a recent experience of accessing leisure and the arts, and then about what I think the priorities should be. I was very lucky and was given, as a 40th birthday present, the chance to go on a writing course. Of the 16 people on the course, at least five were open about having had stays in psychiatric hospitals. That was good, because we were accepted and welcomed. We had a great time; there were no barriers. However, having said that, one of those five people found it very hard to cope with the attitudes of some of the other people. People were generally very nice, but were not particularly pleasant to her. She left the course prematurely because she could not accept those attitudes towards her. There were a lot of us there, we were accepted, and people were very open—there was no hiding of what we had been through. However, to give you a balanced view, although there were more of us there than you would normally expect, one of us had to leave.

A big priority has to be reducing the cost of accessing courses. We are talking about people who may be on the poverty line. Motivation is also a big issue. Many of us use mainstream arts facilities and want to be part of them, but, equally, many of us want to use specialist arts facilities where we feel safe, secure and among our own—places where we can sometimes drop the masks that we have to carry around in ordinary society. We need both specialist and mainstream provision in the arts.

The link between mental health and creativity has long been debated. Sometimes people have said that that link is a great thing, but at other times people have tried to reject the idea. However, perhaps things are not all bad.

One thing that really frustrates me is yet another psychothriller programme, or Looney Tunes at children's time in the evening. I do not think that such programmes send out a very good message.

Many of our members live lives very much on the margins of society. We are often excluded and people can have very strange attitudes towards us. We might also have negative attitudes about ourselves, and it can be very hard for us to get involved in conventional civic life and social interactions. Collective groups such as HUG are starting to regain that ground, but it can be a long struggle.

I will finish with a couple more points. Many of us, unfortunately, have very unhealthy lifestyles. When you are feeling extremely unhealthy, you do not want to do anything active, because that would just show how unhealthy you were in the first place. People have to be flexible and to understand such feelings.

For some of our members with mental health problems, getting insurance to go travelling or on holiday abroad can be almost impossible because the cost is exorbitant. Some countries find it quite hard to accept people with a mental illness.

Sarah Jane Allan: I am younger than some of the other people here and leisure and the arts are a really important part of my life. However, a lot of the time I am excluded and isolated. I would love to be able to socialise with people like me; I am more comfortable with people who are disabled than with people who are able bodied. It would be nice to go into a place and think, "This is where I belong. This is where my mates are." With disabled people, I do not need to explain my disability. However, disabled people are scattered all over the place. Inclusion is a great thing, but you should not take away the other side of the argument—the need to belong. I would like to meet up with the friends I went to school with, and not necessarily with the people who live in my area, because I might not consider them my friends.

I would love to do courses on subjects that I am interested in. However, often the facilities are not there. I am in the house a lot; I am very isolated. I have started getting out only recently—because of SOL. Someone from SOL can take you to places that you want to go to, such as the pub or concerts. I often need support at those places.

A lot of the time, you do not want to go out because it is too much of a struggle. It takes a lot out of you when you have to work so hard to do things. You cannot just do things on a whim, either. I am lucky in that I can go to concerts and other places. My mum often takes me out, and a couple of people from SOL take me out as well. However, I keep in touch with a lot of friends by e-mail and one especially is in exactly the same boat as I am. We are very isolated. We are asked, "Why do you want to be around your own kind? Why do you want a disability culture?" There is a reason why we want a disability culture: the reason I want to be around people with a disability is that they are my friends; where they are is where I feel happy and when I am with them is when I feel normal. I do not feel normal if I am around people who are not disabled.

I would love to be with people like me. In my local area, there might be a lot of disabled people, but I do not know how many there are and where they are. I would like to be able to meet up with them. I would also like to be able to meet up with able-bodied people the same age as me—if I so choose. I want the choice. I am very isolated. I get to see a lot of places, but that is through SOL and my mum taking me.

Shaben Begum: I would reiterate what Graham Morgan said about cost, which is one of the biggest barriers to people taking part in leisure and arts activities. At the Edinburgh festival, there are concessions, but the tickets are only a couple of pounds less than the full price—they cost about £12 this year, which is outrageous.

Shiona Baird asked about music. In a post office or shop, if you see a little card advertising piano lessons, you never see anything about accessibility, or anything to say that the teacher has special skills in working with people with disabilities. A training exercise that our organisation does when we do advocacy awareness training is to ask people how many people with disabilities they noticed the last time they were in a pub or nightclub, or at a gig or show. Most people will say that they did not see anybody.

I was at a gig a few weeks ago and there was one person with a disability. However, she was far away from everybody else; she was isolated with her friend and was not part of the main audience body at all. She was on her own.

Sarah Jane Allan: That happens a lot. If you go to a gig, you are put at the back of the arena or on a podium and you cannot actually see the act.

Shaben Begum: The person at the gig I was at probably had the best view, but she was not part of the audience at all. I do not know how much specialised organisation went into providing access and ensuring adequate fire arrangements to allow that woman to go to the show.

Sarah Jane Allan: To find out how to improve things, you should ask disabled people, "What barriers are there? What assistance do you need, if any?" You should ask them for examples, and ask them where they would like to go but are not able to, and why that is. You should ask them what issues arise. You would often have to get facilitators in, because some disabled people might not be able to get their point across very well. You should also ask whether people need transport. I love going to gigs, but I need my mum to take me, or I need transport.

Irene Garden: Finances play a big part in what people—especially disabled people—can and cannot do. There are examples of good practice in the leisure and arts world. I am an actor and a vice-chair of North Edinburgh Arts. We work with people with mental illnesses, people with learning difficulties and disabled people, who take part in our shows, but that is only one good example compared with 100 bad examples. Many disabled people cannot access leisure and arts simply because they do not get the information. Adverts showing what places are doing can be seen on street corners and in shops, for example, but they are not being seen by the right people. Adverts must go to places that disabled people frequent, to the organisations that they use and the clubs and venues that they go to. As I said, cost is the biggest consideration, especially if people have to get taxis. That is the worst thing.

Sarah Jane Allan: The priority in leisure and the arts is facilitating groups and clubs. There are not many about. There should be better access to concerts, football matches and many other events. I am talking about the normal places to which young people and disabled people want to go. Many people need to have personal assistance provided, which comes into costing considerations, and community co-ordinators so that things are seamless.

I would like to make a statement, if the committee does not mind. I have already etched out and probably said what I want to say, but this is one of the most important things to me. I know that many of my friends feel like I do. I talked to one of my friends on the phone about coming to the meeting today and he said that many of us enjoy being together, but that we are encouraged not to be. He said that we would like our own disability culture in places in which we could meet, but that that is frowned on. Many people do not understand why we want that and why we want both things. I will try to describe things in the best way that I can. There are gay, black and other different cultures, and there are people who want a disability culture or disability community so that we can meet in places by ourselves.

The Convener: Thank you. What you have said will be in the *Official Report*, which is good. Nanette Milne has a question.

Shiona Baird: Sorry, but I was—

The Convener: I am sorry—I thought that you had indicated that you had finished.

Shiona Baird: I did.

The Convener: You should be brief, as time is short.

Shiona Baird: I just wondered what the other members of the panel thought about what Sarah Jane Allan said about groups of disabled people meeting together rather than engaging with the wider population.

Graham Morgan: Many of us have common experiences. In the mental health world, people often talk about drop-in centres in which people feel safe and among their own. That is where people want to be. There is a distinct culture. There are links with other disabled communities, but we often have a great need to be among people who have had similar experiences and with whom we feel safe, as well as to be able to reach out into the mainstream.

Sarah Jane Allan: It is a matter of having both options. Other minority groups do such things, so why are we prevented from doing them and why should we feel that we are doing something wrong by wanting to do such things?

Shaben Begum: I reiterate what Graham Morgan and Sarah Jane Allan said. It is important that people should have a choice.

The Convener: People seem to agree with that.

Mrs Nanette Milne (North East Scotland) (Con): Members of the panel have given us a fair insight into their own experiences—good and bad—and the barriers that people with disabilities face. We must roll things out across the country and continue our investigations, so I want to focus on the committee's visits programme.

As part of its evidence-gathering activities for the inquiry, the committee plans to carry out a programme of visits throughout the country. Would the panel give us any advice about the design and structure of that programme? For example, should we aim for wide geographic coverage of Scotland or focus on key areas in which there are specific issues to investigate or larger numbers of disabled people? Can the panel members give us a feel for what we should do?

11:15

Irene Garden: Getting to all of Scotland's remote areas is quite difficult as a result of the country's geographical spread, but if the committee is to be totally inclusive—which I gather it wants to be—it must go to all the remote areas, such as the Highlands and Islands, and indeed everywhere, and down to grass-roots people, as they will tell the committee exactly what it wants to know. The whole of Scotland must be covered, or else the committee will not be inclusive.

Sarah Jane Allan: Yes. The whole of Scotland must be covered—where, when and how does not matter. If the committee goes out to speak to disabled people, many of them will wonder what the point of doing so is and will think that nothing will get done because similar things have happened previously. Those people will wonder why they should believe the committee. The committee must go to organisations that disabled people are in, as we said earlier, but should not get the organisations to do things themselves. The committee must employ facilitators and disabled facilitators, where possible, because disabled people relate to other disabled people. More will then be got out of those people and more will be found out about what they need, which can be fed back to the committee. As I said, the committee must lead by example and employ disabled facilitators.

Shaben Begum: It is important that the committee goes right across the board. Sarah Jane Allan mentioned disabled communities. It is important to get into the different interest groups, for example. The black and minority ethnic groups are going to be a minority within a minority and quite easily hidden away. It is important to target specific groups and to use community groups and different activists to access different groups.

Graham Morgan: It should be remembered that, apart from the user groups, there are voluntary organisations, the professions, the statutory sector and carers. From a mental health perspective, there is a network of user groups across Scotland that can be easily contacted. There are also specialist groups, such as the hearing voices network and Depression Alliance Scotland, that might have a perspective that the committee might not otherwise get. There are self-help groups and art groups. Perhaps the committee could go to the very grass roots, such as drop-in centres or training centres, or to hospitals where members can meet people who are not already engaged in the process. In order to give fresh perspectives, making contact—perhaps through general practitioners—with users who have never come into contact with any such exercises would also be good. It was said that the remote and rural are important. Even speaking to only one or two people in a remote area would be fine, but the committee could also contact other minority groups, ethnic minorities, single parents and the homeless for their perspectives.

Irene Garden: I would like to repeat what Sarah Jane Allan said. It would be good if the committee took a couple of disabled people around with it because they would see what the committee would not see and would know what it would not know.

Mrs Milne: That is helpful. I think that the committee has felt strongly that it should get into all parts of Scotland and it is good that you have endorsed our view. We are thinking along the right lines. Using disabled people to help us to set up meetings and so on is also a helpful suggestion.

To some extent, you have answered my next question. What is the panel's advice on identifying accessible venues and facilitating meetings? I presume that we should try to contact people with disabilities in the areas, but will you elaborate on that? We are planning to contact local organisations and voluntary sector networks to assist us in the process. Is that the right approach? Is there any alternative that we should consider?

Irene Garden: That is the right approach. The committee should ask voluntary organisations and local groups to help identify venues, but before you even think about using a venue, you should send in a facilitator a day or two before the meeting. He or she must be aware of the audience needs that are to be addressed and ensure that everything is in place. All too often, meetings are held in a place that somebody has said is fully accessible, but when people get there, there are no large-print documents and no signers or interpreters; there is nothing at all even though somebody has said that the venue is fully accessible. We need to ask: accessible to whom? The committee must have a facilitator who knows what they are doing and who checks out all those points.

People have different views about what accessibility is. Somebody could see me in a wheelchair and say, "The doors and aisles are wide enough; you'll get in," but they might not know that I am registered blind and that I need large print. That is the kind of issue that your facilitator will have to ensure is dealt with at least a day or two days before the meetings.

Sarah Jane Allan: Many people think that putting in a ramp or a lift will pave the way, but it will not, because, for example, assistance must be provided for disabled people who also have learning disabilities. The facilitators that the committee employs must advocate for the people for whom the investigation is being carried out. The committee must ensure that it gets the right facilitators. To reiterate an important point, many barriers are created by organisations, helpers and families of disabled people. Many disabled people are quiet and inward looking and the committee must find a way of getting them out and talking to them because they know themselves best. If the committee wants to understand, it must ask disabled people.

Shaben Begum: It is important to choose the venue carefully because, as Irene Garden said, many venues claim to be accessible when they are not. It is important that somebody visits the venues before the meetings. I usually take a tape measure to measure the width of doors and ramps. That work must be done well in advance of meetings. It is also important to ask the delegates about their needs and to take into account the number of supporters and advocates, which will affect the number of people with disabilities who can attend.

Scottish Executive consultation events are usually held in really nice hotels where a nice lunch is provided, but they are intimidating venues for many people because they are not the type of place to which those people would normally go. As was said earlier, the committee should go to places where people feel comfortable, which might mean going to a drop-in centre where people meet anyway. The important point is that people are comfortable and in their usual surroundings and that they are not taken out of those surroundings to an intimidating place where there are other people who might make them feel uncomfortable.

Sarah Jane Allan: You will also need to get people to the venues, perhaps by providing transport or expenses, because some people might not be able to afford to come. Many different issues will probably crop up. The committee will have to go to all areas in Scotland and to the most suitable venues. As Irene Garden said, the best idea is to employ disabled facilitators to check out venues in which the committee is thinking of holding a meeting because those people will be able to see what you have missed or not caught. Disabled people are the ones who can say, "You never thought about this—so and so won't be able to manage that." Disabled people must be included in the process of organisation if the inquiry is to be done properly.

Shaben Begum: The organisation Grapevine, which is based in Edinburgh, conducts accessibility audits on venues and buildings and it could provide information to the committee.

Graham Morgan: Do not hold meetings with people with mental health problems early in the morning, because we will not make them. Provide smoking areas; loads of us smoke, unfortunately, and if we cannot we get frustrated. Provide breaks. Provide expenses. Make the meetings informal, ideally with small groups, or even meet individuals to get particular testimony. There should be no huge documents, no short timescales, and the meetings should be based in the world of the people who are being consulted.

Giving evidence formally is also good, even if it feels quite frightening. I agree with the idea of using people with disabilities or users as consultees. However, MSPs have a weight and power that is quite impressive to many of us and hearing you and meeting you can encourage us to speak out and hope that change can occur. It could be quite good to meet members of the committee in different parts of the country.

Sarah Jane Allan: We would have to be able to get the information in all different formats, such as Braille, tape, e-mail, CD and large print. A lot of the parliamentary documents that I read have an awful lot of jargon in them. Perhaps you could try and get rid of a lot of that to make it easier for us. I suffer from learning difficulties and I have a physical disability, so I would need the information on tape and some of my friends would need it in Braille. It would have to be in all different formats.

Ms White: We will be going to visit various groups. Would it be easier for us to visit the groups of people who have similar disabilities in their own premises rather than bringing groups of people with differing disabilities into one place?

The Convener: We will need to go out to a mixture of different venues.

Ms White: I was just asking whether it would be beneficial to the people themselves.

Irene Garden: No, you should have everyone together. Sarah Jane Allan was talking about there being different places for disabled people and perhaps because I am older, I believe in everyone being as one. It is a good idea to mix people who have different disabilities. I am a trained facilitator and that is what I do. When you go out to talk to people, one of the most important things to do is to ensure that your facilitator knows their audience. If there are any people from ethnic minorities coming to the meeting, they might have to have special meals. Do not have a meeting on a Friday because that is a prayer day for an awful lot of people. You have to take all those aspects into consideration.

Sarah Jane Allan: You should bring us together; you do not want to isolate us and put us into wee groups. At Ashcraig School, I had the privilege of seeing every disability that you could name, and we all got on like a house on fire. However, if you really wanted to speak to a particular group, you could try and do both. There is nothing wrong with bringing us all together, but you would have to make sure that there was good planning in place.

Graham Morgan: There are times when people want to be in groups with their people. However, there is also a value in getting us all together, which gives out a nice positive statement. You need to do both at the same time.

Mrs Milne: We had anticipated that we would need to use a variety of venues and to talk to different combinations of people. We are looking to be as consistent as we can in what we do. Once we have selected the venues and the groups of people to whom we will speak, would it be best to have one organisation facilitating the meetings or should we work closely with different local groups in each area? Would the facilitation be better done by one organisation to achieve consistency?

11:30

Irene Garden: If your facilitator knew his or her job, it would be possible to have one facilitator all the way through, which I believe in. I believe in continuity and consistency, and that would mean having the one facilitator. However, that facilitator would need to know exactly what he or she was doing, who the audience was and how to go about ensuring that venues are suitable for everyone.

Sarah Jane Allan: I think that you need different facilitators with different experiences. If a person is trained and knows exactly what he or she is doing, that is fantastic, but I doubt that you would get that. You need to involve as many people as you can, but you have to get facilitators and train them up and let them know exactly what they have to do. I would say that you probably need more than one. A group of facilitators would perhaps be better, but it should be a small group rather than a big group and they should all work together to organise everything.

Graham Morgan: You have to be aware that, if you choose one organisation or one facilitator, that person would probably have to go through a range of local organisations to set up the meetings in the first place, and you must ensure that you are not overdoing things.

Mrs Milne: Graham Morgan mentioned the timing of meetings and the need to avoid early morning meetings. Is that what the rest of the panel thinks? Are there any other aspects of the organising of meetings that we should consider?

Shaben Begum: Meetings do not always have to be held during the day. There are other groups that meet in the evenings and you could access them. It is a question of being creative in looking at consultations. Meetings do not always have to happen between 9 and 5.

Sarah Jane Allan: If you want to include as many people as you can, you have to facilitate everything that people need. If it is better not to have meetings during the day, do not have them really early in the morning. If you want to include as many disabled people and organisations as you can in the consultation, you just have to do what you have to do to get to them. If that means having meetings at night or in the middle of the day, it should not really matter. If you want to ask us what we think and if you want to have a lot of people, perhaps you should not have meetings during the day or early in the morning.

The Convener: Thank you very much. We could probably have gone on for at least another hour and a half. I apologise to Elaine Smith, who has not had a chance to ask her questions.

11:33

Meeting suspended.

11:45

On resuming—

The Convener: I put on the record Marlyn Glen's apologies, as she is unable to make it to this morning's meeting.

I extend a warm welcome to Bob Benson, who is from the Disability Rights Commission, to Professor Nick Watson, who is from the Strathclyde centre for disability research, and to Sally Witcher, who is an independent consultant. They sat through the first session, so I am sure that they have lots of things to say to us. As I pointed out to the first panel, we recognise that witnesses will have a host of issues to raise with the committee. It is important for the committee, during its inquiry, to be focused on the outcomes and themes, so I hope that the witnesses will help us on those. Do the witnesses want to make introductory statements?

Bob Benson (Disability Rights Commission): The written statement that we submitted to the committee stands, but I underline an important general point that I know we will come back to during the session. From the Disability Rights Commission's point of view, it is important for there to be a clear strategic focus on what the committee wants from the inquiry. We went through a similar exercise with the previous Equal Opportunities Committee's work on taking stock on disability, so there is a body of evidence that we can draw on to guide the work. The important question is: what value will the committee's work add to what we already know?

As I pointed out in our submission, one of the dilemmas for us is the number of initiatives that exist. Not the least of those is the Scottish Executive's disability working group, which is an important initiative, and the Prime Minister's United Kingdom strategy focus, which we have drawn to the attention of officials and which examines transition points and the lives of disabled people. There are a number of important issues that are relevant to the committee's thinking and its direction. Before the committee moves out across Scotland, as I hope it will, it is important for it to be able to say exactly what it wants to achieve and why, so that people can see that it is moving in a specific direction.

Professor Nick Watson (Strathclyde Centre for Disability Research): I do not have a lot to say. Having listened to the previous panel, I think that one of the difficulties that the committee will face is the need to focus on specifics; the fact that the issue is so broad is a danger. I find that a problem arises when people say, "Disabled people want this," because we do not have a common identity or culture. There is no benefit to coming out as being disabled, whereas there is a benefit to coming out as being gay. There is no disabled community in the way that some people suggest and there is a danger in presenting the situation in that way. There are people with learning difficulties and there are different communities within that—even if we talk about a specific impairment group, we run the risk of homogenising it. We must recognise the breadth of kinds of disabled people and we must recognise the life course approach.

The vast majority of disabled people are over 65 and we must somehow ensure that their needs are covered in the committee's work.

As an academic, I find it interesting—and difficult for Scotland—that, although anti-discrimination legislation is not a devolved power, an awful lot of the arenas in which such legislation is played out, such as education, health and social care, are devolved. It is the Equal Opportunities Committee's task to get to grips with how that should be managed. There is a danger that, in considering the chosen three or four different blocks—education, access to leisure and so on—you might look at disabled people's lives in those discrete areas rather than in an holistic manner. It is important to try to ensure that all the different elements of disabled people's lives are brought together.

Sally Witcher: As members will be aware, I am here as an independent consultant. I am not wearing my disability employment advisory committee hat, although I chair that committee in my spare time. The disability employment advisory committee is a Westminster Government committee that is responsible for giving confidential advice to ministers and officials on disability employment issues.

I very much welcome the exciting opportunity that the committee's inquiry represents, but I am concerned to ensure that you come out of it with something practical and useful. The real danger is that you embark on a huge, somewhat random information-gathering exercise, at the end of which you discover that there are barriers out there that, frankly, we all know about already. You might end up with a more nuanced understanding of those barriers, but the question should be not how we define those barriers, but how we move forward. We need to work out what the solutions are. Wherever possible, the emphasis should be focused not on defining this problem or that problem, but on what needs to be done.

The inquiry should hear not just from disabled people. Often, the barriers are created not by disabled people, but by the way in which things out there are organised and by other people's attitudes—indeed, those are the people from whom you need to hear. Traditionally, it has been difficult to involve and engage people such as employers on disability issues, but the inquiry represents a useful opportunity to encourage such stakeholders. An invitation from the committee might encourage them to start taking the issue more seriously. Ultimately, we need to get them to change the way in which they do things as much as we need to get disabled people to change anything that they do.

Echoing the points that Bob Benson raised, I think that it would be helpful to be clear and much more focused, if you can, about why you are carrying out the inquiry and what outputs you expect. During the first panel's evidence, someone said that a paper would be produced. Okay, but a paper about what? To whom will the paper be sent? What will they do with it? I presume that recommendations will be made to the Scottish Executive, but what about other committees? Will the learning that is acquired through the process—such as information on accessible venues and on how to involve disabled people—be used? How will that learning be disseminated to others? Will you make recommendations to a raft of external stakeholders? For example, will the inquiry feed into discussions around how to implement the proposed public sector duty on disability equality? Yes, it is important to look for good practice, but what about mechanisms for exchanging good practice? Will that be an output? What thoughts have you had about longer-term structures to take the issue forward? When the inquiry ends after 18 months, an awful lot will no doubt still have to be done. Otherwise, the danger is that all the committee's work will evaporate.

As well as outputs, you need to consider what you can achieve through the process. Through the process, you can start to engage people with disability issues. You can get them to start thinking about mainstreaming disability equality by building dialogue between disabled people and other stakeholders. The process itself can raise awareness and improve access to information. That whole range of spin-offs is really worth thinking about. You need to get the most out of not just the eventual outputs, but the process as well.

The Convener: We have all been sitting thinking about where we go with this. There is just so much there. It is important that the committee has outcomes that we are clear about and that we can take forward. We also need to be clear about the process and we need to record some of our experiences as part of that.

One of the issues with which we are grappling is the definition of disability—the label. It is difficult to conduct the inquiry without having that clear in our minds. Should we try to define disability? Can you help us?

Bob Benson: Disability is a social construction. The fact that someone has an impairment or long-term sickness does not in itself make them disabled; the issue is about how society reacts to that condition. That is our experience and it is why we have legislative rights for disabled people and why the commission exists. We are here to address barriers to participation for disabled people and to consider what prevents disabled people from contributing. Those are key areas on which the committee might wish to focus, to follow up on the good work that was done in that regard as part of the European year of disabled people.

Another important reason why I believe that we need a commonly held definition of disability is that it would enable us to compare data from the Department for Work and Pensions and data from other sources. The definition in the Disability Discrimination Act 1995 is the most useful. It is comprehensive and, indeed, is due to expand, given the terms of the draft Disability Discrimination Bill that is to proceed through Westminster, which will change definitions around specific impairments from point of diagnosis to cover groups more fully than before. We acknowledge that, without a clear definition, individuals will not know what their rights are and neither will stakeholders, whether employers or service providers. People need to know the agreed line and the DDA definition is good in that regard. The commission's approach has always been firmly grounded in the social model of disability, which is what the definition is around.

The issue of identity has been around for quite a long time, which is why it was important for us to say that we were more concerned about the barriers to participation. Everyone, whether they are disabled or non-disabled, identifies with a number of different guises—mother, father, activist or whatever. People have a range of identities. Relatively few people would define themselves as disabled in life, but many people recognise the fact that they are disabled. They might also come from a black and minority ethnic community, they might be a mother or they might be someone who just wants to get a job. We have to realise that people have a range of identities as a matter of course.

The problem with having a definition that goes beyond what we have agreed under the DDA is that, if we move more towards the medical model, people will see disability as something that can be cured and think that, if people do certain things, it will go away. That is not the nature of the definition around the social model. People are discriminated against because they are perceived to be different and perceived to be disabled. A range of impairments is covered in that.

Our experience shows clearly that there is a pecking order in relation to impairments and the issue of who are the real disabled. There are clearly different attitudes in relation to wheelchair users, those with mobility problems and those with sensory loss, for example. Consistent factors appear. People with learning disabilities and people with mental health problems are consistently less well served than are other groups. That is why we take a consistent approach to the issue across all the impairments.

It is also important to know what we are talking about for planning purposes. Just recently—four or five years ago—we were talking about there being only something like 300,000 disabled people in Scotland. That figure has recently been revised to 1 million—one in five of the population. That figure is likely to increase, given some of what Nick Watson said about the older population. Some 70 per cent of disabled people are over retirement age.

12:00

Sally Witcher: I agree with all that Bob Benson has said. In some ways, the issue is less about coming up with a clear definition of disability and more about having a clear understanding of disability. I want to throw the question back to you and ask what it is that you want to know and why you want to know it.

Your understanding might be that people have different types of impairment—physical, mental, sensory and so on—but it is not necessarily the case that impairments disable people. People with impairments are often disabled in different ways, such as by social barriers, by the way in which society is structured and by people's attitudes. Attitudes towards someone in a wheelchair might be discriminatory, but in a different way from the discrimination suffered by a mental health service user. Obviously, physical access issues will be different for a wheelchair user and for a mental health service user, but the mental health service user might still have physical access issues—for example, they might be uncomfortable going out to unfamiliar places. We must be clear that there are social barriers. As I said, people are essentially disabled by the way in which society is structured, which will disable people in different ways according to the sort of impairment that they have.

That is not to say that issues such as pain and stamina can be discounted. Some people feel that just focusing on changing the world out there will not necessarily be enough, because that will not alter the fact that there are some days when they can function better than they can on others. Nonetheless, things can be changed to accommodate that, which would stop it being disabling.

There is often a difference between people who are unwell and people who have a disability. However, those get conflated, so that people think that, because someone is disabled, they must be unwell, whereas they might not be unwell. I am not unwell; I am disabled. Sometimes—not always—there is a difference.

The question goes back to what you want to know. Obviously you want to know about barriers, but who are you thinking of as disabled people? Are you thinking of frail elderly people as disabled for the purposes of your inquiry, although not wanting necessarily to attribute a label? What do you want to consider and why?

I hope that I am not being unhelpful in throwing the questions back to you. However, there is a real danger that the inquiry is too wide at the start and that you are looking to people such as us to define disability for you. That could lead to you being pulled in every conceivable and inconceivable direction. The inquiry needs a bit more focus to start with.

Professor Watson: I echo what Bob Benson and Sally Witcher have said. Many people in the disabled people's movement see the DDA definition as being too medical; they say that it is founded on the notion that, to be a disabled person, someone must have an impairment. However, we have to use that definition, because if we do not we will just end up with a general anti-discrimination piece of legislation.

Under English and Scots law, the subject of the discrimination has to be defined and, in this case, the grounds of discrimination have to be defined—disability discrimination must involve an impairment. The disabled people's movement has a hang-up about the definition of disability. I have spent the past 10 years as an academic arguing about definitions of disability, which is all well and good for writing academic papers but, as I am well aware, does not do any good for disabled people in the world.

Unless we accept that impairment has to form the basis of the definition, we do not get any action and we are no further forward. If we want to implement change aimed at people who have learning difficulties, for example, we have to define our target group so that we can evaluate whether the policy has changed the lives of that group.

Elaine Smith: Listening to the discussion, I think that Sally Witcher is saying that we might already know what the barriers are and that perhaps the most important thing is to determine what practically we can do to knock those barriers down.

I wanted to ask about a cross-cutting issue. The DRC's paper says that 42 per cent of Scottish households with a disabled person have an income of £10,000 or less. Graham Morgan, who was on the previous panel of witnesses, talked about disabled people living on the poverty line. Is poverty something that disabled people, and people who live with disabled people, have in common? What work has been done to look into that? Bob Benson talked about previous research and inquiries by this committee, but has anyone really considered the issue? Is poverty a major barrier and should we make representations to the Executive on the subject?

Professor Watson: Poverty is a central issue for many disabled people, mainly because many disabled people are denied access to jobs. Despite current advances in technology, some disabled people still cannot work because of their impairment. They depend on benefits and those benefits keep them below the poverty line.

If you are the parent of a child who is disabled, that can impact on your ability to return to work or it can involve extra costs for clothing and adaptations to the house. If you have to provide assistance or personal care for an elderly relative with a disability, that can have an impact, too. For disabled people, poverty is the main issue. When disabled people are denied access to mainstream schools, many of them do not get into further or higher education and so do not get jobs.

All such issues are part and parcel of the same thing and many people who cannot work have to survive in conditions where they cannot get by. Bad housing is another related issue. We do not know how many accessible houses there are in Glasgow, but people are living in bad housing and that is linked to poverty. It is all interlinked.

Sally Witcher: "Poverty" is another word that we could spend a long time trying to define. Households with a disabled person are very likely to be poor. There is no doubt that that is a key issue; a lot of research evidence and statistics would support that. However, although it is a key issue that you will come up against throughout your inquiry, I would ask you what it is that you want the Executive to do about it. I suspect that you will not get very far if you go to the Executive and say, "Poverty is a problem, so we recommend that you eradicate poverty." It is not quite that simple.

Professor Watson: There are huge links between inequalities and health, as can clearly be seen among disabled people. The poorer someone is, the more likely they are to have an impairing condition and the more likely they are to become disabled. Some people work in industries that are likely to cause illness. In Glasgow, lots of people come out of the shipyards with asbestosis.

Bob Benson: I do not want to go into the definitions of poverty, but the issue for us is the hopeless and vicious cycle for many disabled people. From childhood onwards, it can be very difficult for people to get into the main stream of earning capacity and, ultimately, of pensionable capacity. That is because they have had a lack of education and a lack of employment opportunities. Many disabled people who are in employment are in very low-paid jobs. Some people are stuck on benefit entitlement and cannot move into other jobs because the regulations do not easily allow them to do so. Those issues are difficult for the Scottish Parliament to deal with because they touch on benefit entitlement and conditions for access to benefits.

Many issues are difficult to address, which relates to Sally Witcher's point about what we can usefully do. I think that it would be useful to examine some of the issues relating to key transition points for disabled children and young people, particularly as they move into further or higher education and beyond. We already know that disabled people are twice as likely not to be working than people who are not disabled and that they are three times as likely not to have qualifications. Those are the key issues that the committee needs to examine if it is to do something useful. Education is a particularly important area. You have to take on board the fact that the environment in which children find themselves in primary and secondary schools sets the scene for what happens when they move into further or higher education and has a great effect on their life chances.

Ms White: You are right to point out that poverty is a huge issue. People who live on low wages in damp houses are susceptible to asthma and bronchitis, which can be viewed as being disabilities, depending on how you define the term. The committee will examine the issue of poverty. Although aspects of the issue such as benefits, therapeutic earnings and so on are reserved matters, I am sure that we will deal with them. We cannot get away from the fact that, although those matters are reserved, they have something to do with the inequalities that relate to disabilities.

The issue of poverty leads me on to the issue of employment. Our previous witnesses talked about barriers to employment. They mentioned the benefits system, which you, too, have said is a barrier to employment. They also said that employers do not know enough about the DDA. Obviously, that will become more of a problem from 1 October, when the act will be extended to cover employers with fewer than 15 employees.

Do you agree with what the previous witnesses said on the subject, with regard to benefits, recruitment, advertising and the education of employers, or do you think that other issues are greater barriers to employment? I will not get into the reserved issues. I could, but they have already been mentioned. What sort of questions could we ask when we take evidence from employers and users?

Bob Benson: I think that the proposition related to work as opposed to employment. That means that we have to consider not only paid work, but unpaid work, which is an important element of civic participation and can take the form of voluntary work, board membership and so on.

As you know, the Disability Rights Commission has done a lot of work on implementing legislation around the rights of disabled people in paid employment. Those provisions are due to be extended to all employers in Scotland from 1 October. That will cover the remaining 98 per cent of employing organisations who have been excluded from the DDA.

You might be interested in the way in which we have had to work with reserved powers in a devolved situation. You might have to consider working with devolved powers and engaging with reserved bodies. It is difficult to deal with the paid-employment issues unless there is some engagement with the key organisations that are charged with supporting disabled people into employment, such as the DWP and Jobcentre Plus. You should also engage with a range of initiatives such as incapacity benefit pilots. That requires not a separation of your approach, but an engagement.

12:15

Those reserved areas aside, you might want to revisit a number of initiatives in Scotland that are controlled by the Executive. One is the recent "The Framework for Economic Development in Scotland" document, which mentions equality of opportunity only twice. How does the committee intend to raise the disability profile in such areas, which are key to bringing more disabled people into employment? If you are ever to make inroads into the issue of the difference in employability between disabled and non-disabled people, those are the areas that you will have to address. That will also require a lot of engagement with key bodies such as Scottish Enterprise, the Confederation of British Industry, the Federation of Small Businesses and others. A raft of information is required by small organisations on equal opportunities provisions and not just on disability. The information needs of small businesses are vital.

Additionally, assuming that the draft Disability Discrimination Bill goes through at Westminster, there will be an overarching public sector duty that will have significant implications for all public sector bodies in Scotland. It will also have major implications for private business, because of the contracting-out process. People should be planning for that key piece of legislation in the next 18 months because, if all goes well, the public sector duty will likely be introduced from December 2006 onwards.

Those are the key issues that you need to examine now in working with the bodies that are already co-ordinating the work between reserved and devolved groups. That could be a key point of intervention in putting the issues on the agenda for the business community in Scotland. Without the engagement of employers—who are a key group at local level and not just in relation to national aspirations—we will not get far. In my experience, most successful initiatives happen at local level, because local employers know whom they are working with. For example, there are the job brokers who assist people into employment. I dare say that we will come back to the issue of unpaid work when we talk about civic participation, so that is as much as I need to say at the moment.

Sally Witcher: A lot of the points about barriers that were made by the previous panel were familiar and absolutely accurate, but there is a range of other issues. At the disabled person end of it, there may be issues to do with the way in which community care services are delivered. It can be difficult if the home help or whoever gets you up in the morning does not show up, or they show up at different times during the week. There may be skills gaps, which may link back to discrimination in education.

You also have to look at the other piece of the jigsaw. You can look at what needs to change for disabled people, but you also have to consider the barriers from the employer's perspective. You might be aware that people with different sorts of impairments encounter different sorts of barriers, but you could do a similar analysis on types of employers. The barriers for small and medium-sized employers may be of a different order to those faced by bigger employers. The room for manoeuvre for small and medium-sized employers may be much less; they may not be able to redeploy and the loss of a member of staff may be significant to their business. There are also issues to do with geographical factors and local labour markets, the types of work that are available and the types of work that disabled people go into.

I know that you will be looking into further and higher education. Are people coming out of that and going into jobs at appropriate levels, or are they stacking shelves at Tesco? That is an important thing to do, but it is not necessarily what all disabled people want to do or want to be representative of their capabilities.

There are issues that you are not looking at, such as retention. I am not sure why you are not looking at that, because it is as big an issue as initial access.

In considering barriers, you should think about who disabled people are. It may be that the biggest barrier is lack of available child care. It need not necessarily be anything to do with the disability at all and there may be all sorts of other factors.

Looking towards solutions, I think that another consideration is that employment is a reserved area. However, what about economic regeneration, community development and SIPs, which are areas falling within the remits of the Scottish Executive and the Scottish Parliament that provide you with potential opportunities?

As far as questioning is concerned, it would be important to seek the perspectives of different types of employers. However, throughout your inquiry, you will need to be careful that you do not make people defensive. If they feel for a second that they are being accused of discrimination, you will not get very far. The other important stakeholder who should be involved is the provider of services.

I think that a great deal more could be done to think through the strategic interconnections between Westminster and the Scottish Executive and to make them meet much more neatly in the middle. For example, as far as welfare to work is concerned, we need to think not only about the benefit and employment elements but about the education and training element, which is a devolved matter. The current pathways to work initiative, which is being piloted in Renfrewshire, Inverclyde and Argyll and Bute and is aimed at people claiming incapacity benefit, involves the health services. One of the biggest barriers for disabled people can be poor interagency working and the pathways pilots might provide some good examples—in any case, examples that are worth examining—of good practice with regard to such working and to making links between devolved and reserved responsibilities. As there are also strategies for engaging employers, that might be a good place to look.

As far as Westminster initiatives are concerned, the committee might want to consider moves to increase local Jobcentre Plus discretion as a result of the "Building on New Deal: Local solutions meeting individual needs" report. The major issue is to examine support mechanisms for disabled people and employers and to find out whether the Scottish Executive could be doing anything in areas over which it has power to facilitate what has been termed in some quarters as the arranged marriage between the disabled person and the employer.

Professor Watson: You should also examine the issue of supported employment, including the operation of schemes for people with learning difficulties such as The Engine Shed shop and cafe in Edinburgh. Perhaps you could also examine the role of the disability employment advisers and find out how they are trained, where they come from, the model of disability that they use, whether they see the disability in the person or the employment and—this links back to Sally Witcher's comments—how they collaborate with other agencies such as the social services, health care and education. Finally, the issue of transport is central. Public transport must be accessible, easy and good—indeed, for many people, it should take them from door to door.

Bob Benson: We should highlight and promote approaches that are already working and Sally Witcher has already outlined some ideas in that respect. However, it is important to highlight areas in which disabled people are already working and to show what is possible for many people. Most employers have unfounded fears about disability, but the reality is that disabled people who work in organisations are much more loyal and steady than non-disabled people might be. As I have said, we need to consider and highlight existing models of good practice and compliment these employers as they should be complimented.

The Convener: We will now consider the education aspect.

Marilyn Livingstone: I will try to ask only one question.

I was quite interested in Sally Witcher's comments. You might have heard me say earlier that my background is in further and higher education. I have done a lot of work in Fife, especially on barriers to learning in further and higher education.

It is up to us to find out where we can receive advice; indeed, you might have heard what the previous panel of witnesses said about that. For example, people have told me that lack of child care is a barrier. We need to know about and understand the physical and social barriers that people face and then consider solutions. I would appreciate your advice on how we can do that for further and higher education.

We must also identify gaps in provision and areas where better provision is needed. One thing that was mentioned was seamless progression between where you have come from and where you are going. That is something that we are all aware of. If there is a gap, we need to fill that gap, so we need to ask how we can create equity of opportunity in that way.

I was interested in what Bob Benson said. There is some bad practice, but there is also a lot of good practice and we need to disseminate that and make people aware of what is happening. How can we ensure that, whether someone lives on the Isle of Lewis or in the Borders, they know that good practice is happening? I am sure that, like me, members have all seen many examples of good practice.

That is the sort of issue on which I would like support. What advice would you give us on ensuring that we gather evidence from the perspective of disabled people who wish to access, or stay in, further and higher education? Staying in education was something that Sally Witcher mentioned, and retention is a huge issue in further and higher education—the issue is not just recruitment. How do we get the full perspective of people who wish to access or remain in further education? How do we best gather the perspective from the provider?

I know that that is quite a long question, but I was trying to wrap things up. You asked us to focus on that. What have I missed and what advice can you give us on those issues?

Professor Watson: A couple of years ago, I did quite a lot of research work on disabled people's experiences of FE. I do not want to be too critical of FE, but some of the comments that I hear are quite critical. There is a danger at the moment that FE is becoming the day centre of the past. I have heard people say that computing is the new basket weaving and that disabled people go from one computing course to the next. In fact, the notion of lifelong learning for disabled people is not a problem, but getting the job that goes between the periods of lifelong learning is a problem. The notion of lifelong learning is that someone goes and works, comes back and does a course and then gets a better job. For disabled people, it is just a matter of doing one course after another, and many disabled people whom we interviewed would say things such as, "Well, this is my ninth course. If I don't get a job at the end of this, I'm not coming back." There is a danger that FE is not lifelong learning and that all that people do is go from one course to the next.

Many of the FE colleges talked about the notion of bridging courses, but the bridges did not go anywhere. They would say, "Well, we bring young people in from special schools and give them a bridging course, because they don't know how to learn because they've only been at a special school. We teach them how to learn." However, when we go back, we see young people who have been in the college for three years but are still in the special unit. There is no attempt to bridge beyond the special unit into the main stream.

The same thing happens with people with newly acquired impairments such as brain injury. People who break their back or get multiple sclerosis and who are looking for a new job come into the so-called bridging courses, coping courses or coming-to-terms courses—they are all called different things—and they are still on those courses three, four or five years later. We met one woman who had been there for seven years. She loved it and she did not want to go anywhere else. She thought that it was great. There was a group of them and they all came in and just had a chat. That calls into question the whole issue of what FE is for. Is it about vocational training or is it about people coming in, meeting friends and having a good time?

The idea of quality is an important notion just now. It is important that there is quality, but for many people that need is met through NVQs.

People are being forced to do things that are totally unsuitable so that at the end they can get a qualification that they themselves say is meaningless. If you ask them, they will say, “This doesn’t mean anything. I take this to an employer and they laugh at it.” Such qualifications exist so that the college can tell the Executive or Her Majesty’s inspectors that it is providing quality courses. That issue needs to be addressed, because that requirement does not allow individual colleges to tailor courses to the needs of students.

We also went out and looked at community education. People working in community education were not tied by the same quality issues. The students talked a lot about individual development. They told us, “They do what I need,” or “They ask me what I want.” That is not possible in big FE institutions, with 5,000 or 10,000 students or more. Community education can meet students’ needs very well.

On the notion of choice, when we asked young disabled people why they were where they were, it was often because their social worker or parents had decided that that was the best place for them. Among given colleges and regions—I will not name names—one college might say that it is a specialist for learning difficulties, another might say that it focuses on visual and sensory impairments and another might concentrate on physical impairment. That in fact reduces choice. People with mobility impairments, for example, will not be able to attend the college concentrating on learning difficulties, even if they have found a course that they want to do, because it is the other place that specialises in mobility impairments. That is a restriction of choice.

12:30

Sally Witcher: Nick Watson is far better placed to talk about education than I am, in many ways. My experience of education is in my current capacity as a part-time PhD student at the University of Edinburgh. Many moons ago, I was an arts student.

There are all the usual social barriers involving poor physical access or materials being produced in the wrong format or not being produced in time for people with visual impairment to be able to read them. Reading lists need to be issued well in advance of the course starting. There are all kinds of barriers of that sort. Consideration has to be given to the way in which courses are organised, to their location and to timetables and timescales.

A further issue relates to the speed at which large academic institutions move, which can be remarkably slowly. Most courses that I attended required a fairly minor adaptation, such as a ramp or a door handle. In pretty much every case, the course had ended by the time the university got round to installing whatever it was that was required. Institutions are incredibly slow. Many of them seem to sit back and wait for the disabled student to knock on the door. Why not just have a ramp in place anyway? The university could have anticipated that one might be required. Much needs to be done on that front.

There is another issue. In addition to the views of disabled students, the views of those who are responsible for academic standards are required. They are the people who are responsible for running universities. The views of academic staff are needed, too. Much can be done to make adjustments so that students with a range of impairments can achieve academic excellence, but some adjustments will start to impinge on academic standards. A bit of a balancing act will sometimes be involved. If a student is being given longer to do something, at what point does that mean that they are getting a lesser exam or that a different condition is being applied to them? I would not want to make a judgment one way or another on that, but that issue needs to be considered. It is important to be clear that making reasonable adjustments does not mean compromising academic standards. It is important for the committee to consider who it talks to about that.

It is useful to examine the support structures that are in place for students. Do they have a disability office? If so, the people involved in such structures could be talked to. There is a very good disability office at the University of Edinburgh. However, there can be difficulties getting staff who work outwith the disability office to take on active responsibility.

There is an issue to do with the involvement of educational standards bodies and educational funders—in particular those that are responsible for the disabled students allowance, the effectiveness of which the committee might wish to consider. It could be asked whether it makes sense to retain that type of provision or whether in fact it is not sensible to have such a setting-specific provision. Indeed, provision for personal assistance can be provided from a range of sources, with direct payments, the disabled students allowance or access to work. What is the rationale on that? Does it make sense to have a different type of personal assistance for each setting?

There are issues to do with careers advice. What kind of careers advice are disabled students being given? Are they being encouraged to aim high or are they being directed back to the stacking-shelves option?

There are many courses that train people to be social workers, nurses, architects and so on. Why not introduce elements to do with disability awareness into those courses? What I am saying is not necessarily aimed at disabled students and their education, but relates to using further and higher education to ensure that the people who come out of such courses who are going to interact with disabled people have a much better understanding of disability. That is a bit of an indirect answer, but those are just a few thoughts.

Bob Benson: I will not go over all the points that have already been made, which I agree with. Again, the issue is what education is for. Obviously, education is for all, but it also has a very real purpose and must often address serious skills and knowledge gaps in our work force. Therefore, it should also be placed within wider strategies relating to what Scotland needs. Disabled people want to be involved in those strategies as much as anyone else. Planning within our wider strategies to fill the skills and knowledge gaps that we require to fill is important so that we do not train up the supply side when there is no demand for certain roles. That applies to many other people too.

More immediately, the Disability Rights Commission is more interested in giving general access to facilities and curricula, which is why there is an extension of part IV of the Disability Discrimination Act 1995 to ensure that people are not discriminated against in respect of access to educational provision. We have worked closely with the Scottish Executive on planning for the legislation in primary and secondary education. It is clear that we have addressed the issue for FE and HE in respect of the removal of physical barriers by September 2005 and I know that a lot of work has already been done in FE and HE colleges.

One of the big issues is dealing with attitudes within education itself. There have been fundamental attitudes about where disabled people are placed in respect of teaching staff and where children and young people are placed in the educational process. It is clear that we need models of disabled teachers who can say, “Yes, I can be disabled and I can also teach.” The fact that the medical restrictions on disabled people to train have recently been withdrawn by the General Teaching Council for Scotland is interesting. We must see how that policy is implemented and how it unfolds, but it is a significant shift in how we can allow more disabled people within the educational system. Of course, if more disabled people are involved in teaching and the administrative side of education, there will inevitably be long-term changes in general access because it is only when people are involved that they realise where the barriers really are.

There are many issues to do with the immediacy of support that relates to individual requirements. That relates again to the point that disabled people are not a homogeneous group. Disabled people have a whole range of different needs and it is up to the education authorities and the FE and HE bodies to ensure that there is support. There might be an opportunity in the proposed FE and HE bill that is coming before the Scottish Parliament to consider some of those matters more closely in addition to issues to do with the merger of the further education and higher education funding bodies. There might be a legislative opportunity in Scotland.

The Convener: Shiona Baird has a question, but I am worried about the time. Would you make your question on the arts brief, Shiona?

Shiona Baird: I was going to be quick.

The Convener: Answers should also be brief.

Shiona Baird: We heard that cost was one of the biggest barriers, which takes us back to the question of poverty. What would the panel advise us to consider? Specifically, I would like to hear something about access to facilities and the participation of people with disabilities in leisure and the arts.

Professor Watson: That is a difficult issue, as it is about changing the whole culture. All sorts of issues are involved with the arts. There is a class issue. We have already discussed the fact that the majority of disabled people live in poverty. We do not get many people who live in poverty going to the theatre. Obviously, we must address that issue. Focusing on disability could be a danger because the real mainstream issue is about widening access to the arts for the whole Scottish population rather than just for disabled people. That is a big issue.

The notion of participation is also evident in schools—for example, in disabled students doing physical education and dance alongside other students. The idea of disabled students doing dance is thriving, but I think that dance should be mainstreamed. We should consider dance classes not only for disabled pupils but for all pupils. The same issues apply to music.

Music and the arts in general are used as therapy for many disabled people, especially those with learning difficulties and mental health problems. My colleague Graham Morgan from the mental health network alluded to that earlier. However, if someone spends all their time doing art as therapy—for example, painting the picture of a cloud so that someone can see how they are feeling—the last thing that they want to do in the evening is to go and have a bit more therapy. They might be a bit fed up with it. We need to bring back the idea of the arts as a bit of fun and value it for what it is rather than just for its use as therapy.

Bob Benson: We must decide whether the people about whom we are talking are to be passive spectators or active participants. That is important, whether they go to the theatre or to a community event. Clearly, unless they can get physical access to certain facilities, they will not be able to be even spectators. However, we should acknowledge the good things that already happen, particularly in theatres, in terms of general access and assistance—for example, audio description. Obviously, that work will go on and access to goods and services will continue. I envisage that being further reinforced by the public sector's duty to ensure that people can access events.

The big issue is the wider one of how to encourage disabled people to be active participants in the theatre world as performers in their own right. There are relatively few examples in Scotland of that approach. The Theatre Workshop is a good example in terms of its work in training disabled actors. People such as Nabil Shaban have been heavily involved in that work.

We are beginning to see more disabled people within the arts and media generally and we must encourage that. Given the numbers of disabled people in the Scottish population, far more disabled people should be encouraged to participate. We must look at the training, because what we are talking about is mainstreaming disability equality within a range of opportunities, whether that is access to arts events or to the theatre. I believe that Glasgow has done much good work on that. It is well worth highlighting such examples.

Sally Witcher: I do not have much to say on this. There is tension between a desire from some quarters to develop a disability culture that is separate from the mainstream, and a desire to ensure that disabled people can be part of the mainstream and are fully included. That tension is not necessarily destructive.

We must break down the different roles that disabled people might play as spectators and performers. There is a whole load of unpacking to be done. There are all sorts of reasons why disabled people might not be participating—for example, it might be a lack of concessions or parking—and thought must be given as to the sort of support that is required. However, as people have said, it can go back to education and training.

Mrs Milne: I have been thinking about how we are going to get the genie that we have released back into the bottle. We have obviously opened up a huge range of issues. I was particularly interested in a couple of things that Sally Witcher said right at the beginning, including that impairments do not necessarily disable people and that we should focus on the non-disabled. Obviously, attitudes are the key when we discuss barriers to people with disabilities. We need to ensure that people across the country always have in their subconscious an awareness of issues that may arise. Deaf people may miss hospital appointments because they do not hear the announcement and there is no visual display. When people with dyslexia go to a job centre or any public building, they are immediately given a form to fill out, which they find very difficult. Bearing in mind all the issues that you have raised, do you have any suggestions for the design and structure of our programme of visits? Whom should we contact and how should we go about facilitating meetings?

12:45

Bob Benson: I am happy to say something about our experiences, which the committee may find useful. When we undertook to find out what the issues for disabled people were, we embarked on a large number of road shows throughout Scotland, even as far away as Orkney. Our aim was to find out not just what people's immediate needs were, but how to implement certain legislation.

In leisure and the arts, and in education, we took the approach of working with local stakeholders. We brought disabled and non-disabled people together to examine the issues, because disability is not an issue for just disabled people, as we have already established. We set up a number of local steering groups to decide what people wanted to talk about at meetings, so there was joint agenda setting. That is an important way of recognising the contribution and participation of disabled people, because their agendas are likely to be very different from the committee's agenda. Such an approach may help us to overcome those problems.

Disabled people at local level will have all the information that the committee requires about what places are and are not accessible and what does and does not work. It is important to engage the key people who work in local areas. Some very good people in local authorities are working on disability issues. I strongly urge the committee to work in partnership with people in the geographical areas on which its inquiry is focused.

Professor Watson: The committee has set itself an almost impossible task. There is a danger that in all such inquiries the most vocal groups will come forward. Traditionally, the most vocal groups in the disability movement are seen to be male spinal-cord-injured people. Other people are now coming forward, but those who end up being under-represented are people with learning disabilities, especially those with profound learning difficulties and very complex needs. How will the committee ensure that their needs are met?

At the moment, we have the idea of social inclusion through work, and there are now more disabled people in work than was the case previously. One big problem is that we are ending up with a group of people who cannot work and are even more excluded than they were in the past because they form a smaller group of more excluded people. Their needs are often left out, because the focus is on education, work and access to civic amenities—as has been the case today. Those may not be issues that are pertinent to their lives, needs and wishes. There is a real danger that a significant number of people with very complex needs will be left out. It is very difficult to ensure that they are brought into the frame.

Sarah Jane Allan alluded to the fact that families often have a very different agenda from disabled people, especially older disabled people. They take a much more medical approach and are much more interested in seeking cures; they are always fighting for better wheelchairs and so on.

Those are important issues that we must address. The provision of technology is a devolved power and wheelchair provision in Scotland is better than it is in England. We must ensure that that remains the case. However, there is often a conflict between the parents of disabled children and organisations of disabled children, because they have different agendas.

The other thing to say is that you should expect conflict, because there have been so many promises made and so many different types of information collected, going right back to before the Chronically Sick and Disabled Persons Act 1970 under Alf Morris. Right back then people were acknowledging discrimination, but nothing was done until 1996 with the DDA—and then people said that it was not enough. A lot of people will say, “Why bother? We have been part of these committees for years and years but nothing has been achieved.” You have to convince people that this inquiry is different and that you will be able to achieve something that will make a difference. That is a hard thing to do—but it is your job.

The Convener: Thank you very much.

Sally Witcher: You need to be strategic. It all depends on what you want to know, because that will determine who you ask and where you go. You cannot expect to discover what you want to know by asking everyone and their dog. You cannot expect something to just emerge spontaneously from the process. You need to be inclusive but targeted—which I do not think is a contradiction in terms.

Having said that, there might be issues around geography; different issues might arise in different geographical areas, so you might want to ensure that you are not overly urban in your analysis and that you are not ignoring rural issues. Similarly, issues will arise around impairment types, which others have talked about, and severity of impairment. If you are going to be really inclusive it will require effort and outreach, which is something to think through.

There is a real job of work to do around managing expectations. The way to do that is to be clear about what sorts of changes you are anticipating. It goes back to the question that I asked to begin with: what is the inquiry for? You have to convince people that it is for something and that practical change will come out of it and they have to be able to see what they can contribute and how they can fit in. People will generally go to a meeting when they understand what it is for and that there will be some point to it.

The other thing to bear in mind is that the outputs are likely to require a lot of people to change their practices. It is important to try to build ownership as you go through so that what does not happen at the end is that a load of things that people need to do differently are dropped on them from on high—or at least that there is that perception.

The people whom you think might need to change what they do need to be involved in the process. That is partly because although it might seem obvious that they should change, there might be good reasons why they cannot that are not immediately obvious, so you need to speak to them.

On your approach, it would be helpful for you to talk to disabled people first to, if you like, get definitions of the barriers and recommendations about solutions, and then go to providers and external stakeholders to put the case to them and get their response.

The only other thing that I think it would be really useful for you to do is to try to set up mixed groups. I do not mean groups of people with mixed impairments, but groups of local authorities plus disabled people for example. Any sort of setting in which people are being treated as equals provides spin-offs in that it changes attitudes. Suddenly the individual is not there as a service user, but as an equal participant in an inquiry, which in itself can shift attitudes.

I believe that you are thinking of considering education in June, September and October.

The Convener: That depends.

Sally Witcher: That is probably the busiest time of year, so it is possibly not great timing.

The Convener: I thank the witnesses very much for their evidence this morning. You might be invited to come back to speak to us. Feel free to submit any written evidence that you feel might be helpful.

12:54

Meeting continued in private until 13:00.

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