EQUAL OPPORTUNITIES COMMITTEE

Tuesday 25 April 2006

Session 2

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EQUAL OPPORTUNITIES COMMITTEE

8th Meeting 2006, Session 2

CONVENER

*Cathy Peattie (Falkirk East) (Lab)

DEPUTY CONVENER

Nora Radcliffe (Gordon) (LD)

COMMITTEE MEMBERS

Frances Curran (West of Scotland) (SSP)
*Marlyn Glen (North East Scotland) (Lab)
*Marilyn Livingstone (Kirkcaldy) (Lab)
Mr Jamie McGrigor (Highlands and Islands) (Con)
*Elaine Smith (Coatbridge and Chryston) (Lab)
*John Swinburne (Central Scotland) (SSCUP)
*Ms Sandra White (Glasgow) (SNP)

COMMITTEE SUBSTITUTES

Jackie Baillie (Dumbarton) (Lab)
Ms Rosemary Byrne (South of Scotland) (SSP)
Linda Fabiani (Central Scotland) (SNP)
Patrick Harvie (Glasgow) (Green)
Mrs Nanette Milne (North East Scotland) (Con)

*attended

THE FOLLOWING GAVE EVIDENCE:

Tom Berry (Disability Rights Commission)
Linda Dunion (See Me Campaign)
Patricia Ferguson (Minister for Tourism, Culture and Sport)
Professor Gerard Hastings (University of Stirling)
Dr Hazel McFarlane (University of Glasgow)
Christine Twine (Learning and Teaching Scotland)
Professor Nick Watson (University of Glasgow)

CLERK TO THE COMMITTEE

Steve Farrell

SENIOR ASSISTANT CLERK

Zoé Tough

ASSISTANT CLERK

Roy McMahon

LOCATION

Committee Room 5

Scottish Parliament

Equal Opportunities Committee

Tuesday 25 April 2006

[THE CONVENER *opened the meeting at 09:33*]

Disability Inquiry

The Convener (Cathy Peattie): Good morning and welcome to the Equal Opportunities Committee's eighth meeting of 2006. I remind all who are present that mobile phones should be turned off completely, otherwise they interfere with our sound system. Apologies have been received from Nora Radcliffe, and Elaine Smith has informed me that she will be late.

This is the 10th formal oral evidence session for our disability inquiry. I am pleased to welcome Patricia Ferguson, who is the Minister for Tourism, Culture and Sport. Here to support her are Angela Saunders and Andrew Silander. I am sorry that you seem very far away in this committee room, although we are pleased to have it.

I ask the minister to give a brief introduction.

The Minister for Tourism, Culture and Sport (Patricia Ferguson): I am conscious that the committee has received quite a bit of information from some of our agencies, such as sportscotland, the Scottish Arts Council and Scottish Disability Sport. I do not have much to add to our written submission, but I would be happy to answer questions.

The Convener: I will start. How do the portfolio areas for which you have responsibility adopt and implement the Scottish Executive's equality strategy to promote and encourage participation by disabled people?

Patricia Ferguson: As the committee will know, the equality strategy represents a commitment to integrating equality in the everyday work of all the Executive's departments. Our approach involves consultation and the development of research and it is underpinned by awareness raising. The framework that the equality strategy provides informs the Executive's policy making on the provision of access for disabled people to tourism, culture and sport.

In addition, "Scotland's Culture: Scottish Executive Response on the Cultural Review", sport 21—which is the national strategy for sport—and the work of VisitScotland draw on the equality strategy and demonstrate a strong commitment to providing equality of opportunity for all. "Building a Better Scotland" includes a commitment to increase by 3 per cent the number of people who take part in Executive-funded cultural activities by March 2008. In seeking to meet that target, we want to maintain the balance of participation across the population by including people who have a disability. Sport 21 has targets to increase participation levels and it supports local authorities and sport governing bodies as the key providers of sporting opportunities for people across the board and, specifically, for people who have a disability.

The Convener: It is clear that the Executive has a commitment to participation, but what challenges does it face in providing leisure opportunities and encouraging access and participation by disabled people?

Patricia Ferguson: A number of challenges face not only the Executive but others who work in the field. It is partly about awareness raising and ensuring that people are aware of what is available to them. It is also about ensuring that there is provision for disabled people across the board and that such provision is not always singled out, which is quite difficult to do.

The fact that we work with partners means that we do not always have all the levers in our hands, and we often have to rely on our partners to deliver on the ground. However, the relationships that we have in our portfolio are pretty good, by and large, and successes have been achieved in progressing the agenda.

The Convener: How do you encourage your partners to advance the philosophy of participation?

Patricia Ferguson: It is interesting that all our bodies have their own commitments to the participation agenda and they do not need a great deal of encouragement from us, although they require our support from time to time. I hope that the evidence that the committee took from those bodies demonstrated the kind of work that they are doing across the board, some of which is extremely interesting and which they obviously want to build on. We will support them in that.

Marilyn Livingstone (Kirkcaldy) (Lab): From the oral evidence that we have heard from disabled people throughout the country, we are concerned about the funding of leisure activities for disabled people. We have been told that inclusiveness and sustainability measures should be attached to all funding. How do you ensure that inclusion is taken into account in the funding that your department provides and how can you make future funding more long term?

Patricia Ferguson: Disability criteria are built into the capital grant awards that all our agencies receive. They know that they must fulfil those criteria and that their partners on the ground must be clear about the participation agenda and the laws and regulations by which they must abide. That is entirely reasonable with new build and new capital projects, but problems sometimes emerge with older facilities that predate much of the disability legislation. More work needs to be done on that.

That said, I have been heartened by some of the work that is being carried out. For example, Scottish Screen is about to introduce into cinemas a new audio visualising and text captioning scheme for people with sight impairments. Our agencies are well aware of the importance of inclusion, and when they award funding they try hard to ensure that those who receive the funding are required to take account of it.

Marilyn Livingstone: Those who have submitted evidence have raised concerns that, although certain projects might do a good job in supporting disabled people to take up leisure activities such as art, sport and swimming, they are able to provide support for only a year or two before their funding dries up. What is your view on the sustainability of such support?

Patricia Ferguson: I am not aware of any specific cases in which that has been a major issue. I suspect that such provision runs into problems if it requires another individual to buddy, mentor or team up with the disabled person. Sometimes, for a variety of reasons, that commitment cannot be followed through, and it can be difficult to find someone else to step into the role. However, the active schools programme will be vital in that respect. It might not have an impact at the moment—although I hope that it will—but it will help young people who are being taught and are experiencing sports for themselves to get over their fear of doing the wrong thing with colleagues who have a disability. The awareness-raising aspects of the active schools programme will help to break down barriers and encourage people to become more involved.

In that respect, our disabled sportsmen and sportswomen, with their wonderful achievements on the world stage, are proving to be great role models. At least two of them are taking part in our sporting champions scheme and are going into schools not only to encourage young people in their sporting endeavours but to break down barriers around disability. In the longer term, that work will make a major contribution to the agenda that we all want.

Marilyn Livingstone: People across the country have pointed out that partnership working involving local authorities, voluntary organisations and public bodies can not only work well but is crucial in allowing disabled people to participate in leisure activities. To what extent can the Scottish Executive facilitate partnership working and support the tourism and culture sectors to ensure that disabled people's services are more person centred?

Patricia Ferguson: In my portfolio, we rely heavily on such partnerships, no matter who we are trying to deliver for. However, recently, more emphasis has been placed on disability issues, and our organisations and agencies have been given more encouragement to ensure that such issues lie at the heart of their work.

Our agencies have done pretty well in taking forward that agenda. I do not mean to sound complacent, because I realise that we need to be in constant dialogue about it. However, the Scottish Arts Council's getting there programme—if members have not received their copy of it, I have one with me—and sportscotland's equity standard show that a great deal of partnership working is being carried out. In the case of sport there is partnership working between sports governing bodies and local authorities, and in the case of the Scottish Arts Council there is partnership working between local authorities, individual companies and galleries. After all, a lot of important work goes on in our galleries. Good partnerships exist, and we want to encourage and support them wherever we can.

09:45

Marilyn Livingstone: Another issue is the sharing throughout the country of examples of best practice by the partnerships. If something is being done well in Fife or Glasgow, how do we ensure that people in Dundee are aware of it? The voluntary sector suggested to us that we should consider a national forum for sharing best practice. There are a lot of good ideas locally about innovative ways of getting people to and from their destinations, for example, but how can those ideas be shared? I was impressed by the many examples of good practice that we heard about, but one of the weaknesses is that there is no forum for sharing them. You might be able to take that on board.

Patricia Ferguson: That is an interesting point. We can always learn by sharing experiences. We have to be careful, because what works in one area will not necessarily work in the same way in another, but I take your point and we can consider it.

In the arts world, I was heartened to read this month's Scottish Arts Council information bulletin because it mentions not only Claire Cunningham, who received a creative Scotland award—I think that Jim Tough mentioned her—but the requirements on venues and others under the Disability Discrimination Acts. The bulletin also mentions the committee's inquiry and encourages anyone who is interested to participate online, to write to the committee or just to check what the committee is doing. That is a good response and, given the bulletin's wide circulation, it is a good way of raising awareness.

Part of what we need to do is just talk about the issues more and raise awareness of them when we have opportunities to do so—for example, through the literature that organisations produce for internal and external consumption. We will consider Marilyn Livingstone's point and see whether we can support it.

John Swinburne (Central Scotland) (SSCUP): Before moving on to tourism, I congratulate the minister on the sensitive and genuine way in which she deals with her portfolio, which goes a long way towards making her job more successful.

Patricia Ferguson: Thank you.

John Swinburne: How does the Scottish Executive work with VisitScotland actively to promote Scotland as a destination for disabled travellers from home and abroad?

Patricia Ferguson: It is fair to say that, in order to meet our targets, we need disabled people to visit Scotland from abroad and from south of the border. We think that 45 per cent of English people have never been to Scotland, so we have to work hard on that. Given VisitScotland's targets, it is important that we maximise the number of people who come here. Obviously, if people have special needs or need help with something, it is important that we provide the facilities that they need and make it clear that they are available.

VisitScotland's access scheme is worth while, but we could do with more people being members of it. I think that about 1,000 members of the tourism industry are members of the scheme. Sorry—in fact, it is 9,000. Interestingly, 1,000 of those are visitor attractions. That is an important factor as well, particularly for people from Scotland who want to visit their local visitor attractions. So VisitScotland promotes Scotland as a destination for disabled travellers in a number of ways. It also tries to raise awareness in the industry of the DDA and the requirements that are placed on providers to ensure that facilities are in place.

As we go forward with the framework for change, there are more things that we can do to ensure that the issues are highlighted, not just within VisitScotland but in the individual accommodation providers and visitor attractions that it works with.

John Swinburne: The committee notes that target 1 of "Scottish Tourism: The Next Decade—A Tourism Framework for Change" includes provision to establish a tourism research network. How will the views of disabled people as stakeholders be fed into that network?

Patricia Ferguson: Disabled people's views will be sourced and fed into the network in any way that they can be. We asked accommodation providers to give us information through e-business and we are encouraging that aspect of the work that is going on. If we do not receive targeted information from people who use bed and breakfasts and hotels, and who go to visitor attractions, it is difficult for those businesses to target the people whom we want them to attract. There is every reason for disabled people to be part of the network and I hope that they will be encouraged to take part. We need to hear their views, just as we need to hear anyone else's views. If the committee has ideas about how we approach the matter, I would be pleased to hear them.

John Swinburne: Target 2 of "Scottish Tourism: The Next Decade" says:

> "Every tourism business, culture and heritage organisation and local authority will collect feedback from their own customers to help them 'know their visitor'".

How will you ensure that the needs of disabled people are accurately measured?

Patricia Ferguson: It is important that businesses seek the views of disabled people. I suspect that many B and B providers and other businesses want such information, because often they need to make only relatively small changes. We are not talking just about accommodating people who have major physical disabilities; if the owner of a small boarding house does not know before a visitor arrives that the person has a relatively minor disability, they might not be quick enough to respond. It is vital that small B and Bs, hotels and visitor attractions have such information, which is why we have been keen to encourage them to use e-business. We have made that a priority.

John Swinburne: At the committee's most recent meetings we heard evidence that VisitScotland's disability access scheme symbols can be confusing. How can the Scottish Executive work with VisitScotland to ensure that clear information is provided?

Patricia Ferguson: That is an interesting point, which has not been raised with me. I would be happy to take the matter up with VisitScotland, if that is acceptable to the committee. Perhaps I can then feed back more detail to the committee.

The Convener: The issue was raised by a witness from an arts touring company that works with disabled people, who talked about disabled artists going to B and Bs late at night after performances but finding that the symbols did not give a clear idea of the available facilities. The witness thought that the situation could be improved.

Patricia Ferguson: I will be pleased to consider the matter and speak to VisitScotland, which is always receptive to such comments. If changes or clarifications can be made, I am sure that VisitScotland will be happy to make them.

Marlyn Glen (North East Scotland) (Lab): The committee notes from VisitScotland's supplementary evidence that its disability access scheme, which the minister mentioned, has approximately 1,000 members, whereas its quality assurance scheme has 9,000 members. It seems that about 8,000 service providers are either not providing accessible services or not telling VisitScotland that they provide accessible services. The committee is concerned at the relatively low take-up of the disability access scheme. How can you work with VisitScotland to increase participation in the scheme?

Patricia Ferguson: We will have to consider the matter further as we take forward the framework for change. Some information that emerged from the evidence was news to me. I suspect that some businesses are making appropriate changes and providing appropriate services but have not registered for the scheme—anecdotal evidence from my experience of staying in many parts of the country bears that out. We should look into that.

When businesses register for the quality assurance scheme, perhaps they could be encouraged to find out whether they meet the criteria that would qualify them for the disability access scheme. Work on that might be worth doing, but I would like to investigate the matter further with VisitScotland and perhaps feed information back to the committee later, if that is acceptable.

Marlyn Glen: Making the connections seems to be important.

Target 3 of "Scottish Tourism: The Next Decade" states that VisitScotland will increase the number of accommodation businesses in its quality assurance scheme and develop and extend quality assurance schemes to more sectors. How will doing so improve the visitor experience of disabled people?

Patricia Ferguson: That is an interesting question. From a tourism point of view, people obviously want businesses to be of a standard that is understood and recognised—that is the whole point of a quality assurance scheme. I hope that as the scheme grows, the number of people who are members of the disability access scheme will grow proportionately.

I return to your previous question. When businesses are being assessed under quality assurance, their disability friendliness could be considered and they could be given an opportunity to join the disability access scheme. However, as I said, I would like to explore that matter further with VisitScotland, if I may.

Elaine Smith (Coatbridge and Chryston) (Lab): I have a small supplementary question to those that Marlyn Glen asked. How does the internet feed into and fit into the process? I ask that because during Scottish tourism week we were encouraged to visit places. I visited a local hotel that depends quite heavily on the internet—it does a lot of business through the internet.

Patricia Ferguson: The disability access scheme is flagged up on VisitScotland's website visitscotland.com. People are given information about the services that accredited businesses provide. That takes us back to the question that I was asked about whether the disability access scheme symbols are appropriate. Pursuing that issue would be worth while, and I will do so.

Marlyn Glen: One of the major barriers to disabled people accessing services that the committee has heard about is the attitude of other people towards disabled people. Target 5 of "Scottish Tourism: The Next Decade" relates to staff training. The committee has heard that disability equality training might help people to change their attitudes towards disabled people. Do you see disability equality training forming part of training action plans to meet increased staff and customer satisfaction targets?

Patricia Ferguson: Absolutely. People 1st, which is the sector skills council for the hospitality, leisure, travel and tourism industries, is working to increase the number of businesses that undertake staff training and increase the legal requirements for training. Obviously, those who apply for disability training will be part of the awareness raising. All staff training must conform to legislation. The overall intention of training action plans is to exceed customer expectations. In order to do so, businesses will be encouraged to undertake additional training, which could include training on disabilities—I certainly hope that it will.

Marlyn Glen: You used the words "which could" and "hope". I think that the committee would like things to be a little bit firmer than that and would like it to be said that training absolutely must include training on disability.

Patricia Ferguson: I think that that will be in the basic training, but it will then be open to providers to exceed the basic legislative minimum. When people proceed to the next tier, disability training might be part of what they do, but that depends on the course that they opt for. However, we would hope to encourage such training.

John Swinburne: What more can the Scottish Executive do to encourage disabled peoples' participation in culture and the arts?

Patricia Ferguson: I am heartened by the number of people who are participating in our artistic and cultural world. However, I want to increase participation across the board. Disabled people are one group of people for whom we need to do a little bit extra to make such participation happen.

The committee is aware that we recently announced—sorry, that sounded terribly like the royal "we", but I meant the Executive. To be exact, I announced on behalf of the Executive that we are setting out an agenda on cultural entitlements for people in Scotland. I very much hope that the entitlements agenda will make it easier for people who have a disability to access and participate in the artistic work and life of their communities. That can happen through the community planning that is going on in many communities, which will include cultural planning.

10:00

John Swinburne: The determination of people who have disabilities never ceases to amaze me. We all receive Christmas cards that show paintings by paraplegics. It is good that people are encouraged to participate in the arts.

The document, "Scotland's Culture: Scottish Executive Response on the Cultural Review" contains little reference to encouraging participation by disabled people in the arts and culture. The committee thinks that that represents a missed opportunity. Why did the Executive decide not to place emphasis on the issue?

Patricia Ferguson: I do not think that the issue is not included; it is there. We want disabled people to be able to access everything that people who do not have a disability can access, and the whole purpose of the entitlements agenda is to ensure that they can do so. Disabled people are not excluded from the response; they are included throughout, because the whole thrust of Executive's response is the attempt to ensure that everyone has opportunities. It was not our intention to single out particular groups and say that they would have different opportunities. We are committed to ensuring that disabled people have access to and can participate in the arts. There are great examples of such participation throughout the country, as John Swinburne said. That is a strength of Scotland's artistic sphere.

Elaine Smith: How will cultural entitlements increase disabled people's access to the arts and culture?

Patricia Ferguson: It is important to say that we are still in discussion about how entitlements will be rolled out, because we will rely on our partners throughout Scotland, particularly local authorities, to make that happen. We are about to set up a small working group with the Convention of Scottish Local Authorities and the Scottish Arts Council to take the agenda forward. We regard the entitlements agenda as an opportunity for people in Scotland to have more access to the arts and culture, regardless of where they are or whether they have a disability or are young or old.

There will probably be pathfinder schemes in a number of areas in the near future and we will want to assess the operation of such schemes, to ensure that they are on the right track and to identify examples of good practice. However, the decision about what is included in entitlements will be very much a local one in which community planning will be much involved. The Executive should not legislate centrally on such matters, because what needs to happen on the ground will vary greatly between communities. For example, access to a museum or gallery is relatively easy in some of our bigger cities but might not be easy for people who live in the Highlands or the Borders. Consideration must be given to how people in such areas can have access to museums and galleries—or to something else, if that is what they want. For example, it is often possible to provide digital access to museums, so the provision of extra computers could help. If people want to be able to visit museums and galleries, transport could be provided through the local entitlements scheme. Such matters must be resolved locally, but we are mindful that the important point is that disabled people should have a voice in those decisions. We will work to ensure that that happens.

Elaine Smith: I am pleased to hear that you are involved in discussions, particularly with COSLA, about the entitlements agenda.

I arrived at the meeting slightly late because of a child care issue, so the committee might have already discussed matters that were raised at last week's meeting, among which were the challenges that the local authority representatives mentioned. A lot of those challenges seem to be financial, although there might be other ways to approach them. If you are getting into discussions with COSLA, you might be able to consider some innovative ways of providing access, as I think you are indicating to us now.

The Convener: Elaine Smith is absolutely right, minister. We got the feeling from some of the witnesses last week that, although there was a commitment to encourage disabled people to participate, it was sometimes just too hard and too expensive. Contrary to what you were saying about cultural entitlement being mainstreamed for everyone, it seemed that some services were for everyone as long as they were not disabled, because providing those services to disabled people was too expensive. The committee is keen to ensure that disabled people are encouraged to participate at all levels, but that is not necessarily the feeling that has been expressed to us by some agencies and local authorities.

Patricia Ferguson: I would share the committee's disappointment with that sort of comment. I query whether it is always dramatically more expensive to allow access for people with disabilities. In particular, there is sometimes a presumption that someone who has a disability needs a chair. That is not always the case, as disability occurs in a variety of ways. Most of us will have some kind of disability at some point in our lives, even if only temporarily. I question whether it is always about money and whether it might sometimes be about not understanding, not having an awareness or not having the will to get things done.

One of the reasons for our deciding on the entitlements agenda was that local government legislation refers to "adequate provision" when it deals with sport and culture. It seems to me that adequate provision can be whatever we want it to be. We wanted to be sure that, in the changes that we want to make in Scotland's culture, which will back up the First Minister's St Andrew's day speech, we talk about something more meaningful than adequate provision. Provision applies to everyone across the board. We certainly need to ensure that disabled people are very much part of the whole agenda, not an add-on.

The Convener: Absolutely.

Elaine Smith: We were a wee bit concerned to hear about minimum provision or minimum standards. I think that entitlement is a much better and more inclusive idea.

Patricia Ferguson: Absolutely. COSLA has been very much part of setting the agenda and has been most supportive of it. As far as I am concerned, the entitlement will not be to mediocrity, but to the very best that is or can be made available. There are a number of ways in which that can be made to happen. We are at an early stage of developing that.

Elaine Smith: The committee will be heartened by that.

We also want to ask you about the new Scottish cultural development agency that has been announced, which ties in neatly with what we have just been talking about. How will the new agency encourage and promote disabled peoples' participation, both as performers and spectators, in the arts? How might their participation affect people's attitudes?

Patricia Ferguson: The Scottish Arts Council has a very good track record in promoting the arts for disabled people and in promoting disabled people in the arts. Its funding streams address many disability issues. It has been very encouraging and supportive of the efforts that have been made. It has made a very good start, and it has been supportive of the entire agenda. That will not stop when the new agency, creative Scotland, is formed. Creative Scotland will get involved in setting out good practice guidelines for entitlements, and I hope that we will be able to ensure that those are mainstreamed into what we are trying to do. I also hope that the Scottish Screen element of creativity within creative Scotland will make it easier to do that across the board. If, for example, by the time we set up creative Scotland, Scottish Screen has learned more about interpretation for people with a sight impairment, that could be rolled out into the theatre, if appropriate. I hope that such initiatives will make things easier, and I think that they will build on the very good work that the Arts Council has been doing until now.

Elaine Smith: That is encouraging.

You mentioned funding streams. The recently announced arts sponsorship awards, which are aimed at encouraging businesses to invest in the arts sector, are of interest. What equality considerations, particularly in relation to encouraging disabled people to participate in the arts, will be taken into account in the application process for the awards? We sometimes see funding as a barrier, but it can be used to break down barriers, particularly if equality considerations are taken into account in that way.

Patricia Ferguson: Yes. That is an area in which Arts and Business has been successful. I am encouraged by the work that it has done in taking forward that agenda, such as by matching businesses with small organisations that might not have thought that they could consider being involved in such work. Arts and Business has been skilful and sensitive about how it has carried out its work. I know that it is working with companies that work with disabled people. We want its good work to continue and expand.

Elaine Smith: Can the Scottish Executive award contracts in a way that ensures that equal opportunities are given prominence?

Patricia Ferguson: We certainly try to do that in relation to all the grant money that we give our agencies, and all our agencies provide their grant recipients with clear guidelines about what is expected of them in return for the money and what their responsibilities are. We have a fairly good track record in that area, but we are not content to leave it there; we will continually monitor the situation.

Elaine Smith: You are confident that that ethos runs through the work that is being done.

Patricia Ferguson: That is certainly the case in the agencies for which we have responsibility.

Marilyn Livingstone: I have a few questions on the sports agenda. How is the Scottish Executive encouraging and promoting disabled people's participation in sport, particularly from an early age?

Patricia Ferguson: One of the positive things that we have been doing recently is work on the active schools agenda, which is key. It is relatively new, so we do not have much evidence about it, other than anecdotal evidence. We are in year 2 of the project, and although in some areas work has been under way for two years, in others it has been under way for only a matter of months, given how it was rolled out throughout the country. There are now 14 people with a particular responsibility for disability in sport throughout Scotland, who are taking forward that agenda. It is vital that we consider that area. We have to encourage young people with a disability to get involved in sport at an early age—we want all our children to do that. We also want to break down barriers, take away the fear factor that I mentioned earlier and make it clear that it is entirely possible to involve young people with a disability in sport either as part of overall provision, or by making special arrangements. The active schools agenda is vital.

Marilyn Livingstone: We have heard evidence that the cost of support staff, especially those who work with people with greater individual requirements, is prohibitive and might prevent services from being provided. How can the Executive work with local authorities to overcome that situation? The evidence came from throughout the country; it was not particular to one area.

Patricia Ferguson: I realise that I am here to answer questions, not ask them, but I want to clarify the point. Did the evidence relate to a particular sport or situation?

Marilyn Livingstone: No. The comment was made across the board. People said that the cost of providing support for people, particularly those with complex needs, to take part in a sport or leisure activity was prohibitive. We heard that on many occasions.

10:15

Patricia Ferguson: I suspect that the issue may be that the needs of the person are not always understood as clearly as they might be, especially if the person's needs are seen as overwhelming and not able to be coped with. There might be instances in which the cost of providing help is a factor, and we need to work with sports governing bodies, active schools, sportscotland and others to ensure that those barriers are diminished with a view to their being removed. However, I have a funny feeling—I may not be able to back this up with evidence—that the issue might be more that people are afraid to take on the needs of an individual because they seem overwhelming. I can understand why people take that view, especially if their role involves being responsible for the individual's safety and well-being. However, I think that we sometimes just need to be a bit more confident and more educated about how support can be provided.

It is important to recognise that advice is always available from Scottish Disability Sport, which can suggest the best way of trying to tackle such issues. Although Scottish Disability Sport might not necessarily have funding streams to address any financial issue, it can provide examples of good practice from elsewhere. It can also suggest where there might be a critical mass of people with a particular disability, which could facilitate the inclusion of an individual—provided that geography does not get in the way—rather than the person being left to sit on the sidelines.

We need to try to ensure that provision across the country is as inclusive as possible. Where specific issues arise, we need to try to address them as well as we can, because it is not good enough that people are ruled out because of a disability.

Marilyn Livingstone: It is interesting that you mention safety, as that is another issue that was identified as a barrier to participation, especially in sport. People with a disability are told that they are not allowed to take part for health and safety reasons. Nearly all the organisations that gave evidence mentioned that. As you said, we need to think about how we get the message out that such issues should not be used as a barrier.

Patricia Ferguson: In a small way—or perhaps even a large way—people such as Jim Anderson, our Paralympian winner of four gold medals, have a role to play. The individual has a right to say whether they think that their safety is compromised and whether they want such judgments to be made for them. However, I can understand why leisure providers, when they are faced with a situation that they do not understand or are uncomfortable with, might be genuinely afraid that they will do something dangerous or cause a situation that is life threatening. I can understand why people want to be sure—we all want them to be sure—that they are doing the right thing, but we need to put in place as much support as possible and raise awareness and educate people about how to address the problem. If funding is a problem, we will need to look at that issue too.

Marilyn Livingstone: We have talked a bit about charging, and the committee heard evidence that local authorities use various charging schemes for disabled people and their carers. Should there be a national scheme for charging, with minimum standards of service provision to ensure equality of access throughout Scotland?

Patricia Ferguson: Gosh, to be honest, I would need to have a think about that.

Marilyn Livingstone: We heard that, across the country, there are steep variations in charging schemes.

Patricia Ferguson: I am aware that many schemes provide disabled persons and their carers with, for example, free tickets to performances. That is a great idea that should be encouraged, but I am not sure whether blanket provision would be possible. We would need to consider in more detail whether that would work in every situation. The idea would need a bit more work before I could give a definitive answer, but the suggestion is worth considering.

Marilyn Livingstone: In its oral evidence, Scottish Disability Sport highlighted the fact that the mainstream education of young disabled people makes it

> "difficult for us to get statistics on where they are and for us to get information to them."—[*Official Report*, *Equal Opportunities Committee*, 21 March 2006; c 1576.]

Sportscotland said that

> "because of data protection legislation, we have difficulty accessing young people's details."—[*Official Report*, *Equal Opportunities Committee*, 21 March 2006; c 1586.]

How can the various Scottish Executive departments work together to ensure that young disabled people are identified and that they are made aware of and given access to the opportunities that are available to them? The question is a long but important one.

Patricia Ferguson: I understand that the need to recognise and adhere to data protection legislation may cause a problem for Scottish Disability Sport in identifying young disabled people. However, the overall agenda of having young people mainstreamed into schools wherever possible is a good one. I hope that the active schools co-ordinators can play a role in that regard.

If a young disabled person with whom an active schools co-ordinator is working has some talent in a sport, there is no reason why the co-ordinator cannot flag that up. They do not necessarily have to hand over the young person's details to Scottish Disability Sport; they could encourage the young person to contact the organisation and take forward their interest in that way. I recognise that some of the legislation that is put in place to protect or safeguard people can be a bit of a hurdle to get over. If we put our minds to it, there are usually ways around those difficulties.

The Convener: Absolutely. Mainstreaming should make it easier, not harder, for young people to participate in sport.

Patricia Ferguson: Indeed. It may well be that young people with a disability can take part in mainstream sport. Things may only get difficult for them if and when they get to competition level. They can be put in touch with Scottish Disability Sport, or with the governing body of their sport, which may have a relationship with Scottish Disability Sport. That possibility always exists.

Ms Sandra White (Glasgow) (SNP): Good morning, minister. I was interested to hear you mention the active schools programme and the active schools co-ordinators. In its submission, Scottish Disability Sport said that

> "Funding should be available to encourage local authorities to appoint an officer with a remit for disability sport and inclusion."

We also heard that in oral evidence from a local authority official. What are your thoughts on that recommendation?

Patricia Ferguson: I think that I am right in saying that 14 local authorities have already done something along those lines. As I said, the active schools programme is a very new programme—in some areas, it has been in place for literally only a matter of months, and it is still finding its feet in those areas. In the areas where it is more established, I hope that authorities will look towards the longer term. We may need to discuss issues such as additional funding or consider whether budgets can be adjusted accordingly.

Our evidence indicates that the active schools programme is making a huge difference across the board to the amount of activity that young people are undertaking. That has to be a good thing. As we know, the lessons that someone learns when they are young stand them in good stead as they get older. If someone does not start to become active when they are young, they have much less chance of being active when they get to our age.

Ms White: It is good that the programme is aimed at young people. Would you consider further supporting the local authorities in that work? Unfortunately, money always comes into it; budgets are tight. Should the active schools programme be rolled out through all the local authority areas? Should each authority have an officer whose sole role it is to promote it?

In a reply to a question from John Swinburne, you said that funding is not always the issue and that disabled young people may be able to access activities through community planning. If local authorities want to take forward disability sport and inclusion by appointing an officer with that remit but do not have the money to do so, could they access funding through community planning? Basically, I am asking whether the Executive would support authorities if they were to make such an application. Will you make available money to help authorities to appoint co-ordinators in each local authority area?

Patricia Ferguson: Obviously, if an authority made such an application, it would be up to the community planning partnership to decide whether it wanted to spend its budget in that way. I would think that there would be a great deal of sympathy for such requests.

We do not necessarily want to hive off a separate pot of money for co-ordinators. Obviously, if the local authorities want to use some of the money that they get for active schools for that purpose, I would be pleased about that.

We now have a number of co-ordinators in schools—for example, cultural co-ordinators and active schools co-ordinators—and we would like them to work more closely together. That might lead to recognition of the fact that disability issues arise across the board. The resources could then be used to make a difference. It is not only in sport that young people have problems; problems can also arise in the cultural side of their life at school. If the different co-ordinators came together, perhaps someone could take on the role of considering all the problems that young people face.

Marlyn Glen: It is good to be positive and encouraging. However, the fact that 50 per cent of local authorities have a member of staff with a remit for disability in sport means that 50 per cent do not. It might be useful for the committee to have a list of the local authorities that have such officers, as examples of good practice. The basic level that authorities ought to reach should be clearer.

Patricia Ferguson: I would certainly be happy to obtain such a list for you. It would be interesting to compare and contrast and to see whether the local authorities that have been working on this issue the longest have recognised the need and have responded to it, and whether there is a relationship between when work started in schools and when co-ordinators were appointed. There may—or may not—be such a relationship.

Ms White: Marlyn Glen has raised a valid point, which came up during last week's evidence as well. We also heard last week about the limited funding for equipment for adult disabled athletes. What can the Executive do to provide more funding to allow people to participate?

Patricia Ferguson: We do not give out money for equipment to any athlete; money is given by sportscotland and by the particular sport's governing body. I can understand that equipment will sometimes have to be tailor-made, or that people grow out of their equipment as they get older and that problems therefore arise. However, the requirement for such equipment will be relatively small. We may have to consider the issue more closely with Scottish Disability Sport to find out where the particular problems are, as problems will apply to some sports more than others.

Scottish Disability Sport gave the example of rugby, and we can all understand that tailored equipment would be required for that. However, things should not be so difficult in other sports and I would hope that equipment could be provided. That is not to say that it should not be provided for those who want to take up rugby. We would have to consider the patterns to see what assistance could be offered. As governing bodies become more aware of people's needs—and of the benefits that can accrue to the bodies if they include disabled people—things may change. I can certainly have a look at that to see whether we can encourage the bodies more.

Ms White: I think that it was Marlyn Glen who spoke about the need for people to communicate with one another. If equipment is not being used all the time, it may be easier to share that information through a forum. The committee regards sportscotland and Scottish Disability Sport as providing a good model of people working well together—one has the money and the other gives advice. Would the Executive consider recreating that model to help with access and participation in other parts of the minister's remit?

Patricia Ferguson: That model works well because it is the kind of relationship that sportscotland has with governing bodies generally, but I am not sure that the same sort of relationship could be replicated in other parts of my portfolio. However, the work of the Scottish Arts Council, with its grant schemes for ensuring that access is better than it has been, also represents a good model. There is more than one good model so we do not necessarily have to replicate the same one. If a model is responding to need, it is working. However, we have to consider best practice within a particular sector and ensure that it is used throughout.

10:30

Ms White: Basically, therefore, there are things that can be learned in every sector.

How can the Scottish Executive work with Scottish Disability Sport and sportscotland to increase the profile of disabled athletes and disabled sport in Scotland? Also, if Glasgow secures its bid for the Commonwealth games in 2014, how will the participation of disabled athletes and access for disabled spectators be incorporated? The two issues perhaps go together in promoting sport among those with disabilities.

Patricia Ferguson: I must say that, fortunately, our disabled sportsmen and women are doing a very good job at promoting themselves at the moment, but we will do our bit by ensuring that, wherever possible, they are included in our activities. For example, the recent reception that was held for the returning Commonwealth games team also included our winter Olympians and Paralympians. We need to ensure that such opportunities are given, and I know that the First Minister hosted a reception for our Paralympians on their return from the summer games.

We have done what we can to draw attention to the good practice and excellence that our athletes have achieved, but Scottish Disability Sport is absolutely right that broadcasting can be a problem. We need to try to get the same level of coverage of the Paralympics as of the Olympics. However, things are getting better all the time. The success of our athletes makes a huge difference to interest levels. Just as a minority sport that does well in the Commonwealth games can become the focus of attention in a way that helps to promote the sport, the same can happen with some, if not all, Paralympic events. The situation is changing and improving.

If we are successful in securing the 2014 Commonwealth games, they will include an element of disability sport, which was quite a strong element at the games in Melbourne. In the events that I attended there, I saw some absolutely outstanding and encouraging performances. Disability sport will be an important element of the 2014 games. In preparing for the games, if new facilities are provided or existing facilities are revamped, we will ensure that access requirements are taken seriously so that all our facilities are accessible. That will be an important element.

Ms White: I have a quick follow-up question. We will hear evidence later about an advertising campaign—I think that it is called the dis campaign. Will the Executive consider some form of positive advertising, in addition to the campaigns that it has already undertaken, to encourage disabled people into sports?

Patricia Ferguson: We have already had an element of that, but we would need to be sure that any such advertising would be effective. We would also need to be sure that the infrastructure was in place to support people. I am certainly prepared to consider the possibility if Scottish Disability Sport comes forward with a proposal, but I am not sure that such advertising is necessarily the best way of encouraging people to participate. Often, the provision of support and mentoring on the ground is more important. In any sport, if we can get as many young people as possible into it, we will get the elite athletes coming through. At the moment anyway, I am happy with trying to encourage more young people, rather than people in general, into sport. That is an important element.

Ms White: I understand.

The Convener: As there are no further questions, I thank the minister and her team for giving evidence. I suspend the meeting for five minutes.

10:34

Meeting suspended.

10:39

On resuming—

The Convener: I am pleased to welcome Professor Nick Watson and Dr Hazel McFarlane from the Strathclyde centre for disability research at the University of Glasgow. I invite Professor Watson to brief the committee on the research that the centre has done into the provision of disability equality training.

Professor Nick Watson (University of Glasgow): Thank you very much. I will give some background information.

Over the past 10 or 20 years, the experience of disabled people in Scotland has changed dramatically. We have moved on. Most disabled people do not live in long-term institutions any more—they are far more likely to live in the community with their non-disabled peers. There are T-loop systems and ramps and there is provision for people with visual impairments and so on. Such things are indicators of and contributors to the greater social inclusion of disabled people and they have been driven in part by the Disability Discrimination Act 1995, which was to a large extent driven by the activities of disabled people—organisations of and for disabled people campaigned and fought for the act. Disability equality training formed part of that campaigning.

Disability equality training emerged in the late 1980s as a product of the disabled people’s movement. The ideas and methods that have been adopted by such training are based on programmes that were designed to raise awareness of disabilities. Those programmes are similar to gender, ethnicity and other programmes that were also adopted in the late 1980s.

Disability equality training has been developed by disabled people and is premised on three main assumptions: that disabled people are a disadvantaged or marginalised group in society; that they comprise a distinct minority that should initiate and lead change; and that such training should be guided by the principles of the social model of disability.

I will briefly summarise our main research themes. Broadly speaking, disability equality training in Scotland is provided by three main types of organisation: organisations of disabled people, organisations for disabled people, and generic or commercial providers of equality training. It is fair to say that those providers have distinct and different politics and that there is a lot of commercial and ideological competition in the field. Training can be provided on a stand-alone basis or as part of more generic equalities and diversities training. There are various delivery formats, which we will discuss.

We found that disability legislation has greatly driven the commissioning of disability equality training. If we were to look at things again, we would find that to be even more the case, especially with respect to public sector bodies and in the light of the public duty on disability. Many people did not talk about that last year, but every public sector body now seems to talk about it. The legislation has gone a long way. Commercial organisations such as supermarkets conduct disability equality training so that if customers complain, they can say that they have people who have been trained and that they cannot do any more.

There is a problem with large providers, which we are trying to tackle. Places such as supermarkets have large workforces that are with them for only a short period of time and they want customised, cost-effective and flexible training solutions to be provided. Cost effectiveness is the main thing that they seek. Face-to-face training takes much longer than other forms of training and is expensive. Web-based training or other forms of distance learning that involve work books, for example, are more cost effective.

We found three main methods of delivering disability equality training: face-to-face training, pyramid training and online training. We put a list of nine or 10 recommendations at the end of our report. Would you like us to go through them?

The Convener: Yes, please.

10:45

Professor Watson: We think that disability equality training needs to mainstreamed into equality and diversity training programmes. Ideally, we would like to see disability equality training out there on its own, but we recognise that ethnicity, gender, age, sexual orientation and faith all require diversity training too, and that companies will take part in a certain area of training only if it forms part of a broader remit.

We think that there is still a place for specific disability equality training for those people who work primarily with disabled people and, importantly, for disabled people themselves. We feel that equality and diversity training has to be developed by individuals with direct experience of equality issues and the appropriate training skills and other experience.

There is a need for those organisations that provide disability equality training, particularly the disability-led organisations, to adopt a more market-led approach and to recognise and respond to the training requirements of different sectors, as well as recognising the changes in equality legislation and the emergence of the commission on equality. More alliances need to be formed, particularly among disability-led organisations, to work together to communicate their important message.

There needs to be some sort of central body in Scotland to provide resources and support to disabled trainers. That could provide a central point where DET trainers could advertise so that people would know where to go for support. We find that many disability equality trainers are freelance trainers, who have neither the money nor the time to market their skills. People do not know where to go, so they tend to approach the more commercial providers, which provide a different form of training. We might need to help people with that.

There is a need for the creation of an accreditation scheme for disability equality training, with some form of quality assurance. A higher level of disability equality training should form a specific part of the training programmes for all those who work or intend to work with disabled people. That covers our 10 major recommendations.

The Convener: The research report discusses the differences between disability equality training, disability awareness training and disability etiquette training. Can you outline those differences for us?

Professor Watson: We consider awareness training to be old fashioned. It was against awareness training that disability equality training started to grow up. Awareness training focuses on the individual and the impairment. It takes what would be described as a medical view of disability. The disabled person, rather than the way in which society is organised, is seen as the problem. Disability awareness training uses an individual tragedy model of disability. In the past, simulation exercises were used, with people putting on goggles, sitting in wheelchairs or putting mufflers on their ears to experience different levels of impairment. All the research would suggest that that is counterproductive, and that disability awareness training is not the way to go.

Disability etiquette training is about giving people information, advice and guidance on good practice for interaction with disabled people. It can take the impairment into account—for example, if you talk to someone who is deaf or hard of hearing you should not chew gum at the same time and you should look them in the face so that they can see your lips move—but it is mainly about good practice. It is not the tragedy model that is found in disability awareness training. Etiquette is often part of disability equality training, but disability equality training is about redefining the meaning and social understanding of disability and the discrimination that is experienced by disabled people.

Elaine Smith: Is there any place for disability awareness training in building or service design? For example, if you were to go into a building in a wheelchair you might get a different view of its design than if you were not in one.

Professor Watson: No. You cannot capture the experience of being a disabled person by spending half an hour in a wheelchair. All that that does is to reinforce fear and tragedy. If you were to put on goggles and try to get from here to the foyer, you would not be able to do it, whereas somebody who is visually impaired knows how to do it because that is how they live their life.

Elaine Smith: I asked that question for a specific reason. Recently, a community centre in my constituency was refurbished. To comply with legislation we now have automatic doors, but I hear from people in wheelchairs that once they get in those doors they cannot get round the building. Whoever designed the refurbishment clearly had no idea.

Dr Hazel McFarlane (University of Glasgow): You raise an important point. Disabled people themselves are the best people to offer advice on building design, etiquette and interaction because they are the people who have to develop strategies to live in an environment that is quite often hostile.

Professor Watson: There is an excellent book on architecture called "Designing for the Disabled" by Selwyn Goldsmith, a wheelchair user. It was first published in 1964 and republished in 1999. It includes all the minimum requirements on how to design for disabled people. Architects do not need to spend time in wheelchairs; they need to read what has been published. If a building has not been designed for disabled people, the architect has not done their job properly.

The Convener: There is quite a difference between pretending to be disabled and asking disabled people what they think, involving them and encouraging their participation at an early stage.

Elaine Smith: I thought that it was important to tease that out a bit more.

The Convener: Do you think that the commissioning organisations understand the differences in approaches when they look for a training provider? It is easy to say, "We need someone who will provide some training", without having an understanding of the approaches and so on.

Dr McFarlane: That was a real issue for some commissioners, partly because they were not quite sure what training they required. Many of the commissioners were not aware of the differences between the three types of training. People commented that when they were receiving training that was delivered by disabled people, they realised why it was important that disabled people should deliver it. Disabled people had first-hand experience of the issues. For commissioners, the subtleties of the different types of training are perhaps not as clear as they could be, but that comes back to the fact that a lot of trainers are not in a position to advertise their services, to distinguish between different types of training or to advertise in literature.

The Convener: The report highlights the fact that the use of people with a disability as trainers is positive. Professor Watson talked about the idea of people marketing their skills. Is that realistic? Are there ways to help people to do that? It seems to be a sensible approach, but how do we achieve it? How do we encourage and support people with a disability who are able to provide disability equality training? How do we make it easier and how do we help them to market their skills?

Professor Watson: Many providers of disability equality training have been around for a long time—since the late 1980s and early 1990s. They need help to market their skills. They are skilful and good at what they do, but they are not very good at selling what they do.

The Disability Rights Commission holds a register of organisations that provide disability equality training in Scotland, but it is very old. We have seen on the register people who no longer practise and out-of-date telephone numbers, and the register does not contain e-mail addresses. The way forward is to have a central point such as that at which people could put down their names, so that companies that need disability equality trainers in Scotland could go straight away to a website and find the names and addresses of three or four companies or organisations to tender for a contract. The existing register on the web is out of date, which stops people using it.

Marilyn Livingstone: How easy was it to identify disability equality training providers for the purposes of the research?

Dr McFarlane: I have personal contacts with a high proportion of the people who offer disability equality training in Scotland, because I was previously involved in it. We went through our personal contacts and main conduit organisations, which allowed us to contact people whom we had not contacted before, because some disabled trainers are affiliated to large organisations. We managed to establish quite a large network.

Commissioners talked about difficulties in contacting individuals. Many commissioners had chosen training organisations purely through word of mouth, rather than personal contact or a register of trainers.

Marilyn Livingstone: My next question was to be how easy it is for commissioning organisations to identify training providers when required, but you have partly answered that. How can the problem be solved?

Dr McFarlane: Several issues are involved. Commissioners relied on word of mouth, so it was difficult for commissioners who did not have access to that information to know the quality of training that they were to commission. One of our recommendations, on which commissioners and trainers agreed unanimously, is that a quality framework for training should be established; it is desperately needed.

Marilyn Livingstone: If that road were taken, how long would it take to establish such a framework? I know that that is like asking how long a piece of string is, but the recommendation is important.

Dr McFarlane: Answering that question is difficult, because all those who are involved in training would need to sign up to whatever quality framework was put in place. That would throw up issues, because all trainers are in effect competitors. Encouraging people who are competing for business to work together is quite a task. However, trainers—at least those to whom we spoke—are willing to move things forward and to have a quality framework put in place. To say how long that would take is almost impossible; trainers would determine that. Some trainers have developed ideas and are trying to make initial inroads to setting up a registration and accreditation scheme, but finances make that difficult for them.

Marilyn Livingstone: You said that you knew the work of the providers to whom you spoke and the quality of it. What is the geographical spread of training providers? Are there gaps in parts of the country?

Dr McFarlane: More rural areas, such as the very north of Scotland, have gaps. Some trainers commute and large organisations have a network of trainers that they call on when required. There is quite a geographical spread, but finding training providers in rural areas is more difficult.

11:00

Professor Watson: Most trainers were prepared to travel, and most said that training had been done throughout Scotland.

The Convener: Do you think that accreditation and better marketing would encourage people to train as trainers? At one of our evidence-gathering events, a young woman from the Borders told me that she would like to be a trainer but that she found it very difficult to get the information and support that would allow her to do that. Might a better structure enable that to happen?

Dr McFarlane: Yes. There is no formal structure at the moment. There are some college courses that people can go on to become an accredited trainer, but not necessarily an accredited disability equality trainer. It is important that people who are new in disability equality training are fully aware of and understand its political basis.

It would be fantastic if there was a structure for career progression or support. At the moment, a lot of trainers work in isolation and have no peer support because their peers are also their competitors. That should be broken down and a structure should be created to enable people to work collectively towards the progression of disability equality training rather than trying to build something for themselves. Everyone would benefit from that in the end because they would be able to meet the market requirement for training, which, as Nick Watson said, has increased considerably because of the legislation.

John Swinburne: The report notes that you had a 30 per cent response rate to your questionnaire, with only 10 training providers responding. In that case, is the study representative of the current situation in Scotland and what difficulties did you have in mapping provision across Scotland?

Professor Watson: A 30 per cent response rate to a questionnaire is roughly what we would expect. Although only 10 questionnaires were returned by training providers, we interviewed another 10 on the phone. The data from the qualitative interviews agreed with that from the quantitative survey. We obtained data from 20 training providers across Scotland, which is pretty much every training provider. There are not many people out there providing this training. We also interviewed commissioners of training. In 100-odd returns, we found nothing that disagreed with the qualitative data from the training providers. We can, therefore, say that the study is fairly representative.

There were particular issues. We received only one return from a health board, which was a bit disappointing. We might get more now because health boards should be doing something about their disability equality duty. That was a very low return from health boards. We tried to contact them to gee them up but there just did not seem to be anything there.

That also says something about the fact that disability equality training is not high on the list of priorities for certain organisations. We sent out a questionnaire and Hazel McFarlane had a phone call from someone who said, "Why are you sending me this and wasting your time?" Hazel pointed out the duty and that someone could sue him if something went wrong, so the phone call became a request for more information and he asked who he could go to. Hazel ended up telling organisations to pick up the training.

There might be a bit of a lack of awareness among some of the smaller organisations. The big organisations—such as the supermarkets and big shops—are very aware of what they have to do and the legislation has really driven them down that line.

The Convener: It is a bit worrying that health boards are not aware of the duty. Perhaps we will have to encourage them.

Marlyn Glen: Your research identifies three methods of delivery for disability equality training, which Professor Watson outlined in his introduction. In what circumstances would each be most appropriate?

Professor Watson: That is difficult to say. The pyramid and online methods are very similar. It is more to do with the organisation of the company. Face-to-face training is very expensive. It can take half a day, a day or two days to deliver, and it is a big commitment. I do not think that many of the larger commercial companies will be able to afford to put their employees through that.

There might be cases, for example with people working in human resources, where there is a need for a greater understanding and where the decision could be made to go for face-to-face disability equality training. For people performing a generic shop-floor role—I was trying to think of another phrase, but "shop-floor" is not meant to be pejorative—with a rapid turnover of staff, I can understand why face-to-face training is too expensive and why online or pyramid training would be more acceptable. It is just for commercial reasons.

Dr McFarlane: A big factor in commissioners implementing either pyramid or online training was the desire for a robust audit trail in case anyone takes action against them under the legislation. That has influenced large employers.

Marlyn Glen: It is a bit disappointing that such decisions are taken from only a commercial point of view. We have been trying to find out about training and its effectiveness. What you say is quite worrying.

Your research highlights the fact that some organisations run a two-tier training programme, with managers, if they receive any training at all, getting quite different training from that of front-line staff. Does that suggest that managers' attitudes towards disabled people are less likely to be changed as a result of training?

Professor Watson: That is a difficult question to answer. We have spoken to many trainers, and the senior managers were less likely to go to the disability equality training. That is the same with most training: some senior managers do not see it as part of their remit. I do not know what we can do about that.

Dr McFarlane: Although that is true, when senior managers did receive training, it was very much geared towards the company's compliance with the legislation and ensuring that people complied with their line-management responsibilities under the legislation. Perhaps, in a skewed way, that could change managers' attitudes towards disabled people. There is an onus on them to get the service delivery right. However, much of that is driven by the legislation, rather than by a commercial or ideological commitment to delivering an organisation's services more accessibly—although that would make them more profitable.

Professor Watson: It would be nice if we could rely on commercial organisations having an ideological commitment to the interests of disabled people. The situation shows, however, that the legislation is working. It is making commercial organisations take account of the views of disabled clients and customers. That would not be happening without the Disability Discrimination Act 1995 and its amending legislation. We have to recognise that.

The Convener: It is surely important for managers to be involved. Let us take transport, for instance. If managers are making decisions about buying vehicles or about particular routes, an understanding of the needs of disabled customers is surely crucial for financial, staff and route planning.

Professor Watson: Yes.

The Convener: The legislation is a good idea—obviously, we welcome it—but it should not be necessary, should it?

Marlyn Glen: Most trainees are unlikely to have contact with a disabled person during pyramid training. That being the case, do you believe that pyramid training will lead to behavioural change in dealing with disability issues?

Dr McFarlane: One of the organisations that offers pyramid training joined forces with a large charitable organisation that represents and involves disabled people in its work to develop a short learning film that had disabled people in it. It is difficult to tell whether pyramid training changes behaviour; there will either be—or not be—a willingness to change staff practices. Again, in the main, the question whether the impact of training is monitored or evaluated comes down to the commitment of senior managers and line managers. One thing that we found sadly lacking was that, although companies had robust audit trails, no evaluation or action plans were put in place to measure the impact of training on staff practices, including on breaking down barriers.

Professor Watson: When we talked to training providers, they were clear that they did not know whether their training was changing behaviour or what the long-term impacts were—two days, two months or six months after the training had taken place. No one was asked to go back and evaluate it. All the providers were very aware of the issue and one said that although they would like to do that work, they did not have the money and nobody would fund it. It would be very interesting to see the research if someone did go back six months later and ask staff whether the course had affected how they talk to disabled people.

I am currently doing some work for the Welsh Assembly Government on the provision of sport and exercise for disabled people in Wales. When I interview people there, I can tell who has been through disability equality training and who has not; people who have had that training have a very different understanding of disability. We know that DET works, but there is no empirical evidence as yet to say that that is the case or what the effects of online versus pyramid training are.

Ms White: My next question was on evaluation, but Professor Watson has answered it; he told us that there has been no evaluation of the impact of DET. Have any attempts been made to measure behavioural change following training? I think that I know that your answer will be no. We want to draw on your expertise in the field, including the work that you mentioned in Wales. What is the way forward in terms of evaluating the impact of disability equality training?

Professor Watson: Some companies are undertaking hidden-shopper or ghost-shopper exercises in which a disabled person is sent in to find out how a disabled customer is treated. That might be one way of doing it; another way is just to talk to people.

Dr McFarlane: And another way is to draw up an action plan as part of the training. For example, if the training included a barriers exercise, it could conclude with a prioritisation of the barriers that are to be addressed. Another way would be to draw up with staff a set of indicators of behavioural change and go back three or six months later and chart progress in breaking down barriers. The evaluation process could then move on to prioritise the next set of indicators, perhaps for actions that are a bit more long term. The process should be continuous—a work in practice.

Ms White: The report is excellent. I note that some areas were not evaluated as such; a tick-box approach was used by people as they went through the training. You are suggesting that researchers should go back in and ask staff about changes in behaviour. You also mentioned secret shopper exercises, under which disabled people are asked to find out how things have changed in a store or workplace. After all, they are the people who matter most. Do you agree that a two-prong approach should be used?

Dr McFarlane: Yes.

11:15

Elaine Smith: I will return to the recommendations, which Professor Watson mentioned earlier, but before I do, I want to clarify with the convener whether we will decide whether to publish the report on the committee's pages on the Parliament website.

The Convener: Yes, the committee will be asked to make a decision on that later.

Elaine Smith: It is therefore important that we clarify what is being recommended because, if the report is to be published, other people will want to be clear about that. I am not sure about what is being recommended in recommendations 1 and 2, and perhaps in recommendation 3 as well. Recommendation 1 talks about mainstreaming disability equality training into equality and diversity training programmes, but I think you said that, ideally, you would like disability equality training to be provided on its own. Recommendation 2 states:

> "Disability equality training should be devised, developed and delivered by disabled people".

Is there not a conflict between recommendations 1 and 2? Will you explain how you envisage those two proposals working together?

Professor Watson: The recommendations stand alone in the summary, but they are explained in the body of the report. In a way, we are saying that two tiers of disability equality training should be going on. The first is the general disability equality training that the majority of people will go through as part of their normal working practice, which will be absorbed into the main stream of equality and diversity training. People who do a lot more work with disabled people, such as social workers and teachers, will go on to do specific disability equality training.

The situation is messy. We have written our report without knowing what will happen. We do not know whether there will be a single commission for equality and human rights or whether there will be a commissioner for human rights. In our report, we try to look forward and to examine the current situation. There has already been growth in the provision of training by the commercial sector. Some providers started off by offering disability equality training. An organisation in London began by providing disability equality training and then branched out into generic equality and diversity training. There is a move in that direction.

Elaine Smith: I return to pages 5 and 6 of your report. Recommendation 1 addresses equality and diversity training and recommendation 2 is about disability equality training. If the report is to be published, perhaps we could make those recommendations a bit clearer. Given that we have had to explore them further because they are not entirely clear to me, they would probably not be entirely clear to others. Do you accept that?

Professor Watson: Yes. I think that the main body of the report makes clearer what we are recommending than does the summary, which we tried to keep relatively short.

Elaine Smith: I understand that, but people might look only at the summary of the recommendations and think that there is an anomaly.

Professor Watson: The recommendations might need rewording.

Elaine Smith: When you spoke about recommendation 10, you referred to high-level disability equality training, so perhaps we should include the phrase “high-level” in the recommendation to provide clarity.

Professor Watson: Yes—that is good point.

Elaine Smith: Finally, in recommendation 9 you say that a quality assurance framework for disability equality training is essential. In the report, you explained that there was widespread support for that concept. It is surprising that there has not been such a framework, but we accept what your research says and that people think that it is necessary. What challenges will be faced in implementing such a framework? Why has one not been in place?

Professor Watson: There is no framework because the provision of such training has grown out of the action of organisations of disabled people and organisations for disabled people. The provision of disability equality training and of equality and diversity training is growing because legislation has created an increased demand for it. We are moving into a new era.

The problem is how organisations can know that the providers that it commissions to do the work will do it well. At the moment, there is a political gulf between the providers of training from organisations of disabled people and those from organisations for disabled people. I do not know whether the committee has come across the slight tension between those two strands of the disability movement. How do we define which model should be used to measure quality? Even service providers do not agree over what is the most important bit of equality training. The real problem is getting agreement about what must be in training packages. At the moment, we do not know that. There may need to be an evaluation, more than we did in our report, about what people really value.

Elaine Smith: I will go back from recommendation 9 to page 8 of your report. That maybe helps me a bit with my question, because you say:

> “Respondents believed that a quality assurance framework could comprise either a trainer registration scheme or a trainer accreditation scheme.”

However, I am not awfully clear about why the framework could not include both. Is it an either/or situation, or do you mean different schemes for certain people?

Professor Watson: We mean one or the other. There is a notion of trainer accreditation and of trainer registration and quality assurance. We are aware of QA as it pertains to higher education and, a bit, to further education, but neither of us has ever set up a quality assurance scheme for trainers or providers of training. We would bow to the expertise of others who work in that area.

Elaine Smith: So your recommendation is that a framework is essential, but creating it would be left to others who have the appropriate expertise.

Professor Watson: We would need to know more about the matter.

John Swinburne: Recommendation 10 states:

> “Disability equality training should be included as part of training programmes aimed at those who work or intend to work with disabled people.”

It has been suggested to the committee that everyone should receive such training. Why have you focused only on certain people?

Dr McFarlane: In an ideal world, everyone would receive disability equality training, which would be great. However, we must be realistic about the resources that are required to purchase the training. Our recommendation is that for organisations whose staff have direct contact with disabled people, for example, health boards, the training should be prioritised and should definitely take place. Disability equality training should be incorporated into other training, such as teacher training, to give teachers confidence when they teach a class that has a disabled child. The recommendation applies particularly to health boards. The charity John Grooms recently published a report that mentioned that disabled people had identified an evident lack of disability equality training for medical professionals, which needs to be addressed.

Professor Watson: We cannot expect organisations such as supermarkets to send their staff for a day's training or more. Face-to-face disability equality training would involve one or two days with one person working with 20 staff, which would cost a large amount of money. We are trying to be realists. However, we can expect disability equality training to be part of the initial training package for people such as doctors, teachers, social workers and nursery nurses. That is not too much to expect. Commercial organisations will not pick up the bill for the training.

The Convener: As we have no further questions on the report, I invite the committee to agree to publish the research on our website. Elaine Smith highlighted one or two issues.

Elaine Smith: I just seek agreement on the few small changes that we discussed.

The Convener: If we make those changes, working with Professor Watson and Dr McFarlane, are members happy to publish the report?

Members *indicated agreement*.

Elaine Smith: Are the authors happy?

Professor Watson: Yes.

Dr McFarlane: Yes.

The Convener: That is fine. I thank the witnesses for their evidence. We will have a short suspension to allow the witnesses to change over.

11:25

Meeting suspended.

11:30

On resuming—

The Convener: I am pleased to welcome Tom Berry from the Disability Rights Commission; Professor Gerard Hastings from the University of Stirling's institute for social marketing; Christine Twine from Learning and Teaching Scotland; and Linda Dunion from the see me campaign. We have a number of questions. I will start.

Are panel members confident that enough is understood about why people hold discriminatory attitudes?

Tom Berry (Disability Rights Commission): It is helpful to examine parallels with attitudes to race and gender equality. In that respect, we understand that there is a big difference between what people say and what they think, which is difficult. We recently conducted market research with small employers and disabled people—even those who may not consider themselves to be disabled. It is clear that there is a big difference between what people say and what they think. The key to unlocking the issue is to examine what people actually think, which can be quite different from what they say.

Professor Gerard Hastings (University of Stirling): I am not in a position to comment on disability specifically as my interest is in public attitudes more generally, but the problem that has been mentioned is writ large across the area of attitudes and behavioural change. What people say, what they do and what they think are not necessarily totally aligned. People will give what they believe are socially acceptable answers. Nobody will say yes to the question, "Are you a racist?", but that does not mean that they are not racist. It means that it is unacceptable for someone to admit that they are racist.

Christine Twine (Learning and Teaching Scotland): There is a lot of evidence that very young children notice differences. They spot things and are curious about them. They are also quick to pick up on the positive and negative connotations that go with the differences that they experience around them. That places a huge responsibility on people who deal with young children to think hard about both the explicit messages and the unspoken, implicit messages that young children learn by example.

I know from anti-racist education that young children can pick up positive and negative impressions of different racial groups at a distressingly early age, yet babies are not born as racists. Young children notice differences, they want to talk about them and they want information. There is a responsibility on schools and early education centres to encourage open discussion and, when they deal with those matters, to place an emphasis right from the beginning on thinking skills, use of evidence and logical thinking.

Elaine Smith: This may be an unfair question. We must bear in mind the pervasiveness of social conditioning of young children. For example, girls are given prams, boys get guns and there is the pink/blue division. Research has been done on those gender issues. Is there an age by which the attitudes of young children are set? Is the important stage pre-nursery or nursery? When should we start to address the issue?

Christine Twine: We should start right at the beginning, with parents, the whole of society and all the impressions that are given. Some of those impressions might be unimportant, but the assumptions and attitudes that go with the stereotypes that you described are problematic. I have not seen any specific research about disability awareness, but the same sort of process must go on.

Elaine Smith: I was talking about the blue or pink bags that things are put in, and by the time they are three, the girls pick the pink and the boys pick the blue.

Christine Twine: It is because of the birthday cards they get and the clothes that they are put in.

Linda Dunion (See Me Campaign): Much research has been done into why people discriminate or are prejudiced against other groups of people who they do not perceive to be the same as them in whatever regard. It is important to have some understanding and appreciation of that, but also to recognise that it is extremely complex.

We must recognise that there are nuances in people's attitudes. For example, when it comes to perceptions of dangerousness in the field of mental health problems, we know that attitudes towards people with schizophrenia are very different from those towards people with post-natal depression. The same is true in the huge field of disability. People's assumptions and expectations will not necessarily be the same of people with a sensory impairment as they are of somebody with a physical disability. Any attempt to address people's attitudes must be based on where the people whose attitudes need to be addressed are when one begins to address those attitudes.

The Convener: Is the widespread provision of effective disability equality training for employers and service providers likely to have a significant, long-term impact on the attitudes of the people who attend the training?

Tom Berry: It will, but it is not enough in itself. Disability equality training is crucial, but there are many other equally important factors. History has not helped. Until recent times, disabled people were kept behind closed doors and did not come into contact with the rest of the population. As we all know, the one thing that really breaks down barriers is when people who are different come into the same arena and share an experience.

Much more needs to be done to raise the profile of disabled people in the media and there needs to be better representation of disabled people in the workplace—by that I mean that disabled people should be more visible in the workplace so that people can see that they are contributing. Although disability equality training is important, it is only one part of the jigsaw and not the complete answer.

The Convener: If you do not think that such training will have an impact, what do you suggest should be done to target employers and service providers?

Linda Dunion: One of the most important things is to take an integrated approach. We heard a lot about training from the previous panel and training is crucial, particularly when there is meaningful input from people who speak about their first-hand experiences. However, it is not enough.

If we consider how people's attitudes are informed, we see that we are bombarded from all sides by information and messages that influence how we think and behave towards other people. If we look at where there has been success in shifting attitudes around the world, which is what we did before we set up the see me campaign, we see an integrated approach operating at a national level. There are high-profile activities and people speaking about their first-hand experiences, and that is supported by a range of local activities involving a huge variety of people. Those will include training, but there will also be awareness raising and people working with the media to change how they portray individuals who have disabilities or impairments. Injected into that will be opportunities for people to have first-hand contact that will enable them to stop regarding people with disabilities as "them" and to realise that we are all human beings and that individuals with disabilities are part of the community.

Christine Twine: The issue for schools is that until recently the expertise and training associated with working with people with additional support for learning needs was a specialist business. It was focused on special schools or on learning support staff in mainstream education. It is clear that the Education (Additional Support for Learning) (Scotland) Act 2004 has led local authorities to broaden their training on additional support for learning to all teaching and support staff. However, it is too early to say what effect that has had and how teachers have received it.

Professor Hastings: What we learn from other disciplines and areas of endeavour confirms the need for an integrated approach. To use an analogy, the problem of tobacco consumption is not tackled simply by training teachers. That might be regarded as being important, but in fact it is also important that health professionals are trained, that the issue is given a high profile and extensive media coverage and that the tobacco industry is taken on. The analogy with inequalities work is apt if we consider that the campaign against tobacco consumption is about trying to change attitudes and behaviour, but the analogy breaks down when we consider that that campaign tries to denormalise tobacco, whereas the reverse is true with inequalities.

People need to experience people with inequalities—for example, people with disabilities—and see that in reality they work as ordinary, sensible people who are the same as everyone else. Hands-on experience is important, but the overall lesson is that we must take an integrated approach if we want to bring about cultural change, which is what we are talking about.

The Convener: Absolutely. The committee has taken evidence that suggests that there is little consideration of disabled people's needs in the development and delivery of policy. How would you advise that we approach changing policy makers' attitudes?

Linda Dunion: I am not being flippant, but policy makers are people just like us. We are all part of the general public and none of us is immune to the messages that we receive from various directions. Policy makers clearly have a greater responsibility to take a lead, but I do not think that our approach to influencing policy makers should be different from how we approach other sectors of the population. In its inquiry, the committee has been speaking directly to individuals who have experienced discrimination and lack of access and that has probably heightened committee members' awareness compared with that of their colleagues, which is no disrespect to them. Policy makers, too, need to see people with disabilities in the media, telling their personal stories of their experiences, for good or ill. They need to hear first-hand from employers who have made reasonable adjustments without difficulty. The same combination of experiences that would influence anyone will influence policy makers who are exposed to those experiences.

Tom Berry: The public sector duty to promote disability equality that will come into force later this year will be a crucial opportunity to ensure that disability awareness is built into the heart of policy thinking, and we must not miss it. Unfortunately, that has not always happened with awareness of race issues. It has been too easy for public bodies not to include race in the development of policies. I hope that we can promote the disability equality duty and get good outcomes.

We must bear in mind the fact that one in five people in the United Kingdom is disabled, so those who want to deliver any mainstream political policy should include thinking on disability from the outset. To give one example, if people are thinking about creating a cohesive, safe and well-planned community—the kind of environment that people want to live in—then dealing with issues such as the hate crimes and bullying that affect disabled people can be a big step in the right direction. I hope that, over time, we can convince policy makers of the worth of considering disability issues, because doing so would help them to deliver outcomes in what they might regard as more mainstream areas.

11:45

Professor Hastings: Policy makers are ordinary human beings like the rest of us; the basic principles of how we can influence their attitudes and behaviour are exactly the same as for anybody else. We must start by understanding their present perceptions and why they have not taken as much action in the past as they might have done. Again, we must bear it in mind that what people say and what they really think are not necessarily the same, so we have to use research procedures that allow us to take an in-depth look at people's feelings and attitudes—at their emotional responses as well as their rational responses.

The challenge is to reduce the price, if you like, of doing what we want to do. We want to make equality an attractive proposition for policy makers as well as for everybody else, so that it becomes the easiest and best way forward.

Linda Dunion: One thing that is incredibly persuasive for policy makers is when the people whom they represent or serve make demands on them. Well-organised movements of people, whatever their issue, bring about social change. Change will come about because people with disabilities rightly make demands on policy makers and the rest of society.

The Convener: I agree, but when speaking to people up and down the country we have often found a lack of expectation that young disabled people will go to college or to work, and a lack of awareness among service providers that they need to provide services for everyone in the community and not just for the majority. I agree with what you say, but I get cross on behalf of the folk who often feel that they have no voice and who are easily dismissed by others.

Linda Dunion: It is important that we find ways to help people to make demands. "Expect more" is the new slogan for the Scottish Association for Mental Health, which puts the finger right on the issue. Research by the see me campaign has shown that people exclude themselves from applying for jobs and keep their history of mental health problems a secret. Evidence shows that self-stigma—if I can put it that way—and a lack of expectation are huge factors in the experience of people with disabilities.

We are being told anecdotally—we will do research into this—that work is beginning to change things in the mental health field. I am sure that that is also true in the broader disability field. Work that will change people's perceptions of themselves should be resourced. People have often internalised the negative, and that can be a huge barrier.

Professor Hastings: The ultimate arbiter of success will be how disadvantaged groups feel in five years' time. Will they think that things have improved?

Marilyn Livingstone: A number of witnesses have expressed the view that in many cases what may appear to be a negative attitude is actually based on lack of understanding or fear of causing offence. Can we hope to change that using the same methods as we would use to tackle actual negative attitudes?

Tom Berry: Huge fear exists about employing disabled people, especially among one group that we surveyed, namely small employers. Fears arise to do with potential litigation and costs. We must break down those fears.

There needs to be confidence raising on both sides. Linda Dunion has alluded to the need to raise the confidence of disabled people, and we really need to do that, particularly in the workplace, so that people do not feel stigmatised or fear that it will endanger their job if they admit to having depression. In the same way, we must also raise the confidence of employers, making them less fearful of employing disabled people and making them aware that, in many cases, they are already employing them. Once they have got beyond that, we must help them to communicate outwards to potential employees and to people who already work for them that it is okay for people to say that they are disabled and that they can work in that environment. That could involve something as simple as putting a logo on job adverts to show that they are friendly when it comes to employing disabled people. Much can be done to break down the quite artificial barriers that employers and disabled people encounter. It is as if there is currently distrust between the two parties, and we must somehow try to break down the barriers. Government can play a key role in that.

Professor Hastings: We need to understand why those barriers are there in the first place. The public health analogy is quite instructive because, particularly if one looks at it from a medical perspective, the tendency is to believe that people who engage in unhealthy behaviours are somehow wrong or stupid. A classic example is the high prevalence of smoking in low-income areas. Why do people do that? When one does decent, sympathetic and intensive research, one finds that people do it because they see good reasons for doing so. An English psychologist expressed the lesson that comes out of that as being, "Just because people do stupid things doesn't mean that they are stupid." That lesson can transfer across. We need to understand why people are frightened and prejudiced. Assuming that it is because they are bad people is not a helpful starting point. We need to understand why that is going on.

Linda Dunion: That can be a helpful place to start. If people are frightened of saying the wrong thing or of making things worse—as the see me campaign knows they are from research among young people and in the workplace into how people can become isolated when they experience mental health problems—and that is why they are reluctant to engage with someone, it means that they would like to engage but they do not know what to do. Beginning by engaging with people on the assumption that they would like to do the right thing is different from engaging with someone in a way that implies, "You are an intrinsically bad person and are out to get people, and we will tell you not to do that and stop you doing it." We should be saying, "We know you want to do the right thing and we'll give you a bit of help."

Marilyn Livingstone: The media have an important role to play in affecting attitudes. What do we need to do to ensure that we bring the media on board when dealing with issues that might not be particularly newsworthy or be seen as a high priority?

Linda Dunion: We have done a lot of work on that and have learned from campaigns elsewhere, so we set out to address precisely that problem. Before the see me campaign was set up, one might have seen stories in the media about mental health issues but one would seldom have seen a comment from somebody who had a mental health problem, and it is fair to say that the same is true across a range of disabilities. One must take an approach that does a number of things. Where there are misleading portrayals in the media, we need to pull the media up about that. Where derogatory language is used, we need to point that out to people in the media and remind them that they have their own guidelines and that the Press Complaints Commission has a code of practice.

Reminding people of how they should behave and picking them up when they get it wrong is one thing, but that is not enough. One must also be careful about how one uses that approach; we cannot jump up and down every time the word "mad" appears in the paper, because we would just look silly and nobody would listen. We have to back that up by being a resource for the media. For example, we set out to recruit individuals who would speak about their personal experiences and provide feature materials. We work hard to get stories into all the media, from local papers and local radio stations right through to the national media. That work has been extremely successful. Media professionals now come to us when they want what they call "case studies"—we call the people who are involved media volunteers. We have a careful recruitment and support process for people who choose to go down that route, as the work is not right for everybody.

Being a watchdog and a media resource is effective. There are many journalists and media professionals out there and it is important to have direct relationships with them. The statistics mean that journalists and media professionals will have mental health problems and disabilities too. One can strike a chord and keep them in line.

Christine Twine: I do not have any particular experience of the issue, but it is worth considering how the media present themselves to the public. For example, television companies have done quite a lot to present positive images of ethnic minorities, gender equality and so on. Many people who present television programmes have characteristics that present that image, but very few disabled people front programmes on the main television channels. There are no serious reasons why they should not do so. The main television channels could do more to promote disability equality.

Professor Hastings: A couple of general lessons have emerged from what has been said. We must treat journalists as fully empowered human beings in the same way as we have said we must treat prejudiced people and policy makers. Journalists are not bad people, pariahs or out to get us—they are simply doing their job of filling their newspaper or working on their programme for broadcast. First and foremost, they want material and stories to include in their newspapers or programmes. As Linda Dunion said, people should try to provide such things and help journalists to do their job better rather than continually attack them, although monitoring is needed.

Linda Dunion mentioned relationships, which are important. One is not going to achieve what one wants to achieve with ad hoc, stop-start policies—one needs to think about a long-term process of cultural change. Therefore, relationships need to be built not only with journalists, but with policy makers, professionals, people in industry and the general public, so that people can progress matters together and reach solutions to problems that we all share.

Tom Berry: I agree with everything that has been said. A host of sub-issues is involved. Organisations such as the Disability Rights Commission and voluntary sector organisations have a big role to play in developing on-going relationships with journalists and highlighting best practice, which is important.

I want to mention briefly the images of disability initiative in London, which focuses on improving the representation of disabled people in Government marketing. The initiative has met some success in putting the matter on the radar of creative agencies and Government departments, which are obviously big purchasers of marketing. I am keen on the initiative being extended. One of its key achievements is to have pulled together best practice, which is helpful.

I have a dream: I want to see disabled people on television programmes such as "Big Brother" or a disabled person presenting "Blue Peter"—perhaps it would not be right to mention "Grandstand" today. Somehow, we need to find disabled people who can front programmes and act as positive role models for other disabled people. If programmes can equip disabled people with the skills to do that, so much the better.

Marilyn Livingstone: I agree with Linda Dunion in particular. She made a good point. The issue is working with people. She gave us good examples and I thank her for her evidence.

Marlyn Glen: That leads quite nicely into my questions, which are mainly for Gerard Hastings from the institute of social marketing. Evidence from our consultation suggests that we need the culture change on disability issues that he mentioned. Based on his experience, what does he believe to be the key elements that are required to effect such a culture change? I think that we all accept that building relationships is definitely one element.

12:00

Professor Hastings: We have already covered much of this terrain. We need integrated approaches and we need to build up relationships rather than attack particular groups. Underpinning that is the assumption that such change involves a long-term process as is not something that can be achieved overnight. We need to build relationships over a long period.

We also need to keep tabs on what progress we are making. Despite the scale of the task that the phrase "culture change" suggests—how on earth do we can keep tabs on that?—we need to discipline ourselves with some clear objectives and milestones. There is a balance to be struck, in that we need to accept that the process will take a long time, but we also need milestones. "Milestones" is a good term because it suggests progression rather than an ultimate destination. I am not sure that we have an ultimate destination because, as in public health, we are continually striving to improve the current situation. We are talking about a relative rather than an absolute thing. We need to bring those two things together by monitoring what progress has been made.

As I said before, the ultimate arbiter will be disabled and disadvantaged people and whether they feel more included in society. That will be the ultimate test.

Marlyn Glen: My next question is on timescale and on what limits should be set. Given that attitudes will change over time in any case—we all recognise that they have changed—what kind of timescale is required for a widespread change in attitudes towards disabled people using the kind of interventions that are at our disposal? I recognise that, as has just been mentioned, we are talking about a progression rather than a destination.

Professor Hastings: In a sense, the question is impossible to answer, but we need a combination of both those things. I would like there to be a long-term goal for what we envisage Scotland should be like 20 years hence—in 2025, for example—and, within that, five-year targets so that we can measure progress along the way by quantitative statistical evidence and by more ethnographic information about how people feel about the issue.

However, it would be extremely difficult to determine whether, by doing all of that, attitudes in Scotland had changed more quickly than they would otherwise have done. One would need a control group of people in an area—perhaps England—that was not affected by any of our initiatives, so that we could see what happened to them. One can get into a bind whereby, to achieve perfect research, we end up with a design that is so elaborate and expensive that, if we are not careful, the tail begins to wag the dog.

This might not sound terribly scientific, but given that we have a good idea of roughly what works, we should start putting things in place and try to monitor the progress that we are making. We should take on trust the fact that we are going in the right direction and that we are therefore bound to be accelerating things. Measuring progress by using some sort of randomised control trials would be very challenging and might end up holding us back.

Marlyn Glen: That answers my next question, which was to be about reliable methods of measuring. If we accept that we should measure progress and have long-term targets, can we be confident that organisations will have that in place? How can we be confident that that will happen?

Professor Hastings: Is the question about whether we can be confident that the monitoring will be in place?

Marlyn Glen: Yes.

Professor Hastings: We cannot be confident at all. We absolutely need to set the monitoring in place. One thing that the committee could do is set out a clear vision of where we want to be, with clear milestones on how we will reach that destination. Presumably, that will be achieved by a combination of statutory and voluntary bodies coming together to try to do something coherent.

I am straying out of my territory somewhat—my work is principally on public health—but if we compare this situation with what has happened in public health, we can see what we need to avoid. During my career, the principal body concerned with public health in Scotland has changed four times. There has been no consistency during that period. Compare that with the fact that the Philip Morris brand has been going for 50 years without any change.

We need to nail our colours to the mast, agree that we know where we want to go and try to work together towards that goal. We need to be a bit courageous about this and say that this is the right thing to do.

John Swinburne: With regard to the serious issue of tobacco addiction, it has taken about 60 years to get to the point at which someone who lights up a cigarette might be treated as a leper—previously, people lit up without a second thought. It might take that long to get across to everyone that there is a right way and a wrong way of approaching the issue that we are discussing. However, we are approaching it the right way; it is a matter of spreading the message.

Tobacco is an addiction. I have been addicted for 63 years and I know what I am talking about. Tobacco addiction cannot be compared with disability, as disabled people have no choice about whether they are disabled.

Can the Disability Rights Commission tell us about the general process that it employs when it decides to embark on a campaign that is aimed at changing attitudes and behaviour? What kind of targeting was used in the campaign that the commission recently launched?

Tom Berry: Our are we taking the dis? campaign is an evidence-based marketresearched campaign. We talked to various sectors of the population to find out what views they hold. That gave us some interesting things to think about. For example, we discovered that many people with rights under the Disability Discrimination Act 1995 do not respond to concepts of disability or rights—for an organisation that is called the Disability Rights Commission, that made for pretty miserable reading. We discovered that small employers have a huge fear of litigation, as I mentioned previously. We spoke to opinion formers and journalists who did not see disability as being a key issue for them. All of that information was useful to us.

We prioritised our audiences. Rather than try to reach everyone and his next-door neighbour, we tried to pin down the audiences that we thought were most influential in disabled people's lives. The first audience we identified was disabled people, including those who do not consider themselves to be disabled, even though they might meet the definition that is used in the DDA. The second audience we identified was people who make day-to-day decisions about disabled people's lives, such as employers and service providers. The third and most important audience we identified was the people who make and inform the key policy decisions about disabled people's lives, such as civil servants, parliamentarians, journalists and members of umbrella bodies and private and public sector organisations. Segmenting the audience in that way was a challenging brief.

We wanted to highlight the absurdity of disability discrimination. We want the adverts, which some of you might have seen, to get across the fact that people do not view disability discrimination in the same way as they might view race or gender discrimination. I will leave it to you to decide whether you think the campaign is successful in that regard, but we have just received some interim evaluation that suggests that 80 per cent of those who saw the posters said that they made them think, that 55 per cent said that they thought that the posters would make them and others behave differently towards disabled people and that 68 per cent said that they thought that the posters sparked good debate. Given that we are talking about a six-week communication campaign, those figures are encouraging.

It is obvious that campaigning will not achieve everything we want to achieve, but the campaign is designed to make people think about the fact that they have not thought about disability discrimination in that way before and that perhaps they should think about disability when, for example, they are considering the provision of residential care and home help services, implementing a new employment strategy or introducing a new computer system. The campaign links in closely to our work on the disability equality duty. We want to ensure that policy makers in particular put disability at the heart of what they do.

As the campaign has progressed, we have put in place monitoring and evaluation processes to ensure that we captured the effectiveness of the campaign as a whole. We would be happy to share that information when it comes through, which should be in the next few weeks.

The Convener: Sandra White will ask you more questions about those issues, but you are whipping through them.

Ms White: I look forward to seeing the report on the evaluation. You have given us a timescale, which is excellent. All the questions that I was going to ask have been answered.

Professor Hastings: Tom Berry has talked about exactly the right way of proceeding. We should start where people are and target, segment and customise to meet their needs. Imagine for a moment what it would be like if that work were plugged into a 25-year strategy, so that we could see what came next and how it fitted in with what everyone else was doing. We would then begin to see real progress. The danger is that we will end up with ad hoc campaigns that do not have a strategic vision.

Elaine Smith: I have some specific questions for Christine Twine from Learning and Teaching Scotland. The committee has been told in evidence that it is important to start disability equality training as early as possible and that that kind of training should be delivered in schools. Our earlier conversation suggests that, by the time people get to schools, we are trying to reverse discriminatory attitudes that have been instilled in them. We need to think about that and explore it further. To what extent does citizenship education in schools include disability equality training or awareness?

Christine Twine: That is very much a matter for schools. The Scottish framework for education for citizenship is very broad. It has as an aim the development of the capability of all young people

> "for thoughtful and responsible participation in political, economic, social and cultural life."

The framework applies to the whole of schooling, from three to 18. The 2002 paper makes some strong statements about inclusion—the aim applies to all young people—but it does not single out any groups for special mention. It was described as a paper for development and discussion. Although it provides a firm framework within which people can move forward on citizenship, it highlights inclusion as an issue on which a great deal of further work is needed.

There are issues with which schools find it hard to cope. Disability awareness training is probably one of them.

Because of the kind of organisation it is, Learning and Teaching Scotland reacts a lot to requests that are put to it by the Scottish Executive Education Department, which is its principal funder. We also respond to requests from non-governmental organisations, with the knowledge and support of SEED, if that is consistent with overall policy.

A couple of years ago, we received a request from the Scottish office of the Disability Rights Commission, which had a teaching resource for citizenship and disability that had been produced in England and needed to be examined in the context of the Scottish curriculum and schools. We worked with the commission in a number of ways. We helped it to frame the document to make it consistent with the Scottish curriculum. We also invited it to speak to the local authority network of citizenship advisers, which meets three times a year. The commission spoke to the advisers both to promote the resource—to ensure that they knew of its existence—and to discuss the best way of disseminating it among local authorities. We also worked with the commission through in-service provision. We publicised the resource through our citizenship website and by including it in presentations to local authority in-service events and in our responses to specific requests. We received a specific request on disability from the Scottish Council of Independent Schools. Guidance teachers in independent schools were keen to look at the resource and to do more with it.

12:15

The extent to which schools take up the resource and other similar resources related to disability is a matter for schools, local authorities and, eventually, Her Majesty's Inspectorate of Education, which monitors some of this work. I know of one very good example in Edinburgh. Drummond community high school runs a disability awareness week with its third-year pupils. The school's staff received training from Capability Scotland and the school had an in-service day on which staff in all departments were encouraged to think about how they would address disability awareness. The school also has a week of disability awareness training with third-year pupils, which has become a regular part of its annual timetable, during which all the subjects contribute to disability awareness. That seems to be quite a successful and interesting approach, although we would look for disability awareness to permeate beyond one week a year.

We also regularly run conferences for teachers who co-ordinate citizenship, at which we promote certain kinds of activity through workshops and presentations. That is another area of interest.

Elaine Smith: So you produce material if someone comes to you with an idea?

Christine Twine: We do not produce material. We help and advise other organisations that come with ideas, although we can produce material if we are specifically requested to do so by the Executive.

Elaine Smith: But you do not have any plans to do that at the moment?

Christine Twine: We do not have plans to do that at the moment, as we have not been requested to do so. There is now a tendency not to produce big, off-the-shelf packs of teaching materials on a particular topic, as we find that they are not used very much. There are better ways of changing people's attitudes.

Elaine Smith: That contradicts what the committee has known, over the years, about Zero Tolerance's respect project, which it has been trying to roll out into schools and nurseries. That is quite a controversial statement for me to hear in this committee. Do you not rate the respect project?

Christine Twine: Going back a bit, I used some of the Zero Tolerance material when I was still teaching, as part of the equal opportunities work that was done in schools during the 1990s. We tend to find that because projects of that kind do not fit clearly within the Scottish curriculum—there is no obvious place for them to be delivered—schools find it challenging to locate them anywhere in the curriculum. If schools wish to have a specific event, such as the Drummond community high school event, they will work quite hard to ensure that a resource is used in appropriate ways throughout the school; however, that is quite a big management job for schools.

Elaine Smith: I do not really understand that. The Zero Tolerance resource was piloted about five years ago—I launched the results of the pilot, but I cannot remember the exact timeframe—in two schools: a primary school and a high school. It was really successful at that time and seemed to fit in with the curriculum and everything else. I think that the issue needs further discussion because ZT is finding that although some authorities are engaging with it on the respect campaign, some are not. The campaign is not specifically about disability and this is an inquiry about disability; nevertheless, it is relevant.

Marlyn Glen: As a former teacher, I probably used the Zero Tolerance materials that you are talking about. Discussions in English classes are a perfect opportunity to use them. The campaign fits into that subject, and I found it a hugely useful set of materials. Although I realise that Learning and Teaching Scotland does not want to spend its time producing materials, it is important that we make the links. We now have excellent materials from the see me campaign and the are we taking the dis? campaign, such as posters for discussion not just in guidance classes, but in English classes and citizenship classes. We need to make the links. It is up to the committee to request that the Minister for Education and Young People ensures that the links exist. Otherwise, we will have lots of things that are not joined up.

Christine Twine: I would not have any objection to producing specific pieces of material; however, we would probably find that a lot of good material on such issues is still available. We would be more inclined to produce either a publication or, more likely, part of a website that would pull that material together. We would then use our conferences; our bulletins; "Learning and Teaching Matters", which is the newsletter that goes to all schools; and our local authority network to promote those issues. There would be a time factor in pulling all the material together and in promoting it, which would have to be built into a work plan for next year if that were to be done.

Elaine Smith: Convener, I would like the committee to send the *Official Report* of this evidence session to Zero Tolerance and get some feedback from that organisation in writing.

I have a final question for you, Christine. In your response to my first question, in which you gave us quite a lot of information, did you say that monitoring and evaluation is carried out by HMIE?

Christine Twine: Yes, it is carried out by HMIE. To some extent, it is carried out through the national priorities monitoring as well, because inclusion and citizenship are both national priorities and there is a structure for gathering information from schools under national priorities. However, most of the monitoring will be carried out through HMIE. It has produced "How good is our school? Education for Citizenship", which includes an adaptation of the equality and fairness performance indicator that is in the main "How good is our school?" document. That performance indicator makes specific reference to attitudes and states:

> "Positive steps are taken to ensure that pupils, parents and staff are treated equally, with respect and in a fair and just manner. Culture and language, disability, gender, race, religion, sexual orientation and special educational needs are not barriers to participation. There is a whole-school approach to issues of equality and fairness, such as racial harassment and sexual discrimination. Pupils are assisted to feel confident in recognising and addressing discrimination."

Elaine Smith: So we are measuring impact.

Christine Twine: The indicators measure impact, yes.

Elaine Smith: They are measuring how the citizenship programme is impacting through changes and attitudes.

Christine Twine: They will be. The document was produced about two years ago and was introduced with a very light touch. HMIE has been going round the country trying to find examples of good practice, which it has publicised. It held a conference on good practice and citizenship last year, and it is about to produce a paper on good practice and citizenship. From this year, that document will be used as a general inspection tool. The performance indicators are available to schools for self-evaluation, and they are also used by HMIE for external evaluation.

Marilyn Livingstone: My questions are addressed to Linda Dunion and concern the see me campaign. How did you develop the methodology for the see me campaign?

Linda Dunion: I approached the task in several different ways. We set up the campaign from nothing—there was no national campaign. One of the first things I did was look to see what works. I looked at all sorts of campaigns to destigmatise mental ill health, and other campaigns. I cast quite a wide net, looking particularly to the like minds campaign in New Zealand, which had a good reputation and was building evidence that it was effective. There was no point in reinventing the wheel.

The second thing I did was go around Scotland and speak to all sorts of people who had an interest in the topic of stigma around mental ill health, including people who had experienced stigma and organisations that provided services. Because I had such a strong voluntary sector background, I cast a wide net there, too, and I spoke to community organisations.

I was working on the premise that we will all, at some time in our lives, have to deal with mental ill-health, either directly or indirectly. There will be nobody in this room who has not either known somebody with a mental health problem or experienced one themselves. Starting from that premise, I was able to build up information about what works—which was tremendously important—and to build up relationships.

Somebody noticed that I mentioned relationships. The see me campaign is entirely based on relationships of one sort or another. I mentioned relationships with the media earlier. The campaign had to be set up so that people could participate easily, and we had to have direct relationships with people who we knew shared our agenda or wanted to share it.

We wanted to find out how people wanted to work; we did not want to say, "Right. Here's the template. It's one-size-fits-all, so either you accept it or you're not part of see me." We wanted to find out who the activists and the potential supporters were and to say to them, "Right. There's going to be a national anti-stigma campaign. You've been saying for years that you want it, so what do you want done?" People were not used to that approach; they were not used to somebody recognising their expertise and wanting to find out what they had already learned at local level. What you are going to do in Shetland is really different from what you are going to do in Glasgow.

Taking the time is important—I took 10 months, and I was on my own at the beginning—and the campaign still operates that way. We have a team of four people and we are always out and about, building relationships and levering in support and funding from all sorts of places around the country. In a nutshell, that is how we approach our task.

We want to ensure that people who experience stigma are at the heart of everything we do. We found people who were prepared to talk about their experiences for the media; we wanted to hear what people's experiences of stigma were so that we could reflect those experiences in our work. Engaging with people who have first-hand experience is tremendously important.

We spend a lot of time on planning and evaluation, because we do not want to waste our time on things that are not working. Gerard Hastings spoke about milestones. The first thing we had to do was draw attention to a non-issue—I say non-issue because most people were not aware that people with mental health problems were stigmatised. We said to people, "There's a bit of a problem here and it's time you started thinking about it."

Marilyn Livingstone: From what you have said, you have obviously had to work at both national and local levels and that has been very important in your campaign. We are all aware of a number of your public advertising campaigns. Have you been able to assess which specific parts of the campaign have been the most successful at getting key messages over?

12:30

Linda Dunion: Integration is the key word. Our remit is to target the general public, but we have broken down our audience on the basis of evaluations. Where we have had national activity supported by local activity, we can see a difference. That has happened in various places. In 2002, which was the year of our launch, NHS Grampian put in additional funding to boost the campaign in its area. When we went back to evaluate, we did a comparison between Edinburgh, Stirling and Aberdeen city, where we did street surveys. We found that people's awareness and understanding of the messages in Aberdeen were better than they were in Stirling and Edinburgh—Edinburgh is pretty average for the whole of Scotland—and the same is true for the west of Scotland. We have some fantastic relationships in Lanarkshire and are doing some really exciting work in Glasgow as well.

When we consider the findings of the public attitudes survey that was done to form a baseline by the Scottish Executive in 2002, and compare it with the follow-up study in 2004, there is evidence that not only are we making quite a difference to public perceptions, but that extra resources make a difference. Again, I am talking about resources that have been put into fully integrated, high-profile bursts of activity, followed by on-going lower levels of activity of one sort or another.

Marilyn Livingstone: Thank you. That was very interesting.

To what did extent did you actively target younger or older people in your campaign activities?

Linda Dunion: The evaluations of years 1 and 2 reflected what a lot of people said to us, which was that if we are serious about bringing about long-term change, we need to target some activity at younger people

We always do a lot of consultation during the development of any aspect of the campaign. We travelled around Scotland, and about 600 young people gave us their input on what we should do. They brought up two particular issues for us to target and gave us a very strong message that our job should not be to produce things such as training packs for teachers and that we ought to use the media to get right through to young people, wherever they are. That was why we used the two cartoon characters, which I hope you have all seen, to deal with the stigma around eating disorders and self-harm, which is our most recent work.

There is an issue with older people's attitudes that is particularly relevant to the broader disability issue. The majority of people who have disabilities are older people. In the mental health field, we have found that older people's attitudes are more entrenched, as you might expect, and less enlightened. There is less awareness of, more stereotyping about, more fear of and more of an unwillingness to talk about mental health issues. We have not addressed that specific audience because of resources, not because it is not important. There is a big issue with older people, especially when it comes to self-stigmatising and not coming forward to seek help.

Marilyn Livingstone: You have talked a bit about the effectiveness of some of the specific elements of the campaign and have broken that down geographically. What is your assessment of the overall impact of the campaign?

Linda Dunion: Anecdotal evidence from quite a number of people who have experience of mental health problems shows that they feel that the climate is changing. They feel different about themselves. Gerard Hastings has talked quite a lot about feelings, and that is the key. If the see me campaign is not making a difference to how people perceive themselves or to their experiences in their daily lives, we are not doing our job and should be doing something different.

As I said, anecdotal evidence suggests that things are changing, as does the evidence from our evaluations, from the Scottish Executive's public attitudes survey and from the alliance of voluntary sector organisations that make up the see me campaign.

In the next couple of months, we will do a major survey of people who have experience of mental ill health. The survey will not just cover activists; we want it to be wide-ranging. We launched the campaign in 2002—four years ago, come October. We want to ask people what they feel has changed, if anything. We want to find out whether there are differences among people with different degrees of mental health problems and whether they feel that the see me campaign has played a part in any differences in perception and, if so, to what extent. We want to know what their perceptions are, as that will inform the future of the campaign. It will also teach us a lot of lessons about what has and has not worked.

Marilyn Livingstone: As I chair the cross-party group on survivors of childhood sexual abuse, I was particularly interested in your work on self-harm. Will you be able to measure the success of that element of the campaign, for example if there is—I hope that there will be—a reduction in the number of people who self-harm or an increase in the number of people who come forward?

Linda Dunion: We measure success in different ways. We measure success partly by finding out whether people are aware of the issue. That is pretty standard. We surveyed young people in advance of our initial television advertising campaign around eating disorder in January 2005. A couple of months after the campaign, we went back to those young people with the same questions, plus additional ones about the campaign itself. We found that the information in the campaign resulted in young people speaking to friends who had difficulties. The fact that the campaign had encouraged discussion and offers of support was really significant. We spoke earlier about the problem of people not knowing the right thing to do. The big message of the campaign is for people simply to be a pal.

On self-harm, we hope that more young people will approach the organisations that exist to help. There has already been a greater awareness and reflection of the issue in the media. There are some specific issues around the connection between childhood sexual abuse and self-harm and we have some young people who are prepared to talk about their experiences. We will be doing some media work around that later.

Getting coverage into the media is really important. We want young people to come forward earlier, as self-harm is always a reflection of an underlying problem. It is a bit like what happens when rape is taken more seriously: the number of reports can go up, but that may well be because people are more prepared to come forward, not because the incidence has gone up. That is one of the ways to measure such work.

The Convener: I have a general question for the whole panel. To what extent do you view high-profile advertising campaigns as an effective method of creating attitudinal change?

Tom Berry: They are a factor if they are good, which not all campaigns are, of course. They are very much part of the wider picture, which includes legislation and some of the other things that we have been discussing. I hope that we have illustrated some of the top-line findings from our campaign. We feel that we have had an impact. From what I have seen of the see me campaign, there have been some measurable impacts, which demonstrate that it has worked.

We should consider where we were 20 years ago and think about the campaigning that has taken place since then. There has clearly been some movement, leading in particular to the Disability Discrimination Act 1995. I am sure that Gerard Hastings can give you the statistical and research basis to show that social marketing works. We feel that, if it is evidence based and well targeted, it should have at least some impact.

Professor Hastings: I second that. Tom Berry said that campaigns are a factor "if they are good", which is a big rider, or a big caveat, but there is evidence that advertising campaigns can make a difference. They are good if they meet the needs of the people we are trying to influence, and are not about one view of the world superseding other people's view of the world. Campaigns should try to start from where the people we are seeking to influence are and to carry them forward from there. They should be part of the solution.

Let us take the classic example of commercial marketing, where advertising is used very successfully. Heinz not only advertises its beans, but it designs them so that they taste nice, distributes them and prices them at the level at which people are prepared to buy them. Heinz knows that if a company sticks in the market for the long term and builds an evocative brand, it will add value to the offer that it is making. The set-up is complex and advertising is a part, but only a part, of it.

Christine Twine: As a teacher, I look specifically at the impact that advertising has on young people. I am a bit sceptical about commercial advertising campaigns, principally because they put young people in the position of being passive recipients of information. Advertising may be effective in some ways, but it does not encourage children to think or to take on board the implications of the message. I am much more interested in looking at ways in which young people can be involved in making their own promotions and advertising campaigns. I can see a bit of that in what Linda Dunion has said this morning.

One example is from Moray, where senior pupils gave up a week of their summer holiday to work on a project with a professional graphic artist. They developed posters, leaflets and other materials to promote the new Education (Additional Support for Learning) (Scotland) Act 2004 and to inform people of their rights under the act. The pupils helped to produce the material, after which they promoted the campaign in their schools and discussed it with other people. I am sure that that strategy was effective, from the point of view both of the young people involved and of those on the receiving end of the promotion. It is interesting to look at such models, which are much cheaper than commercial advertising.

Linda Dunion: Evidence shows that high-profile campaigns do part of the job. Following on from what Christine Twine said, the issue for me is ownership. The see me campaign is constituted as a voluntary sector alliance that works closely with people right across the board, both nationally and locally. That is a tremendously effective set-up; it enables us to ensure the shared ownership of everything that we do.

An organisation has to work with its target audiences. Our campaign has had some difficult discussions in that regard, the most difficult of which concerned the need to recognise that the level of awareness and understanding—and even the starting point—of the general public is not the same as that of people who really know the issues, such as those who have experienced stigma.

It is important that an organisation operates in a way in which ownership can be shared and people can be enabled to participate—there is no substitute for direct relationships. We need the television advertising and all the high-profile stuff, but it has to be rooted. If an organisation does bursts of advertising, it will achieve something, but campaigns are much more effective if they have roots.

Ms White: I am in favour of advertising campaigns and of taking the message out into the larger community. Earlier, when I asked the Minister for Tourism, Culture and Sport about advertising campaigns, she gave an interesting reply. She said that campaigns are not only about making people out there aware of disabilities but about giving confidence to people with disabilities. If people are given confidence, they will expect that follow-on services will be put in place. The minister said that the aim of such campaigns is to change the attitude not only of the general public but of people with disabilities.

It had not crossed my mind before that a huge advertising campaign can be a dangerous thing. I now see the dangers in such campaigns if the organisation does not put in place the facilities and money to back up what is on offer to people whose aspirations have grown. What do you think about that?

Linda Dunion: That is a big issue for us. We often discuss it in relation to raising awareness of the importance of not being stigmatised. For example, when we did the initial consultations with workplaces around the country for the workplace element of our campaign, we spoke not only to the managers but to everybody in the workplace, and went into companies of different sizes. We were told very clearly that our message for that element of the campaign could not be to tell people that they should be open about having a mental health problem as the workplace is not a safe place to be open in that way, and the consequences for people can be devastating. We did not want to hear that; we did not want it to be the reality, but we had to acknowledge that it was and adjust our messages accordingly.

You are absolutely right that we need to be cautious about raising expectations to the extent that people expect something that simply will not happen—or worse—if somebody is open about having a problem. It is a big issue with the DDA. If somebody wants to be covered by the legislation but their employer does not know about it or reacts negatively, it can obviously set the individual back—and can set us all back.

12:45

Professor Hastings: I agree with a lot of what has been said, but we have not talked about the reach of media campaigns. They reach a lot of people, so a relatively small change can become a big change by dint of the number of people that we are talking about.

There are instances of media-based campaigns having a dramatic effect. For example, in North

America, there is an anti-tobacco campaign called the truth campaign, which, according to research that was published in the *American Journal of Public Health*, reduced the prevalence of tobacco use by some 2 per cent, which shows that media campaigns can work. That is not to contradict what has been said, because the truth campaign was firmly based on consumer research and tried to give out a message to which young people would respond. Instead of doing the conventional public health job of simply saying "Tobacco is bad for you," it attacked the tobacco industry, showed up the industry's methods and mechanisms and encouraged young people to rebel against such oppressive marketing.

Another example will reinforce the point: if advertising did not have an effect, we would not have banned tobacco advertising. That ban was based not on whim or prejudice but on hard evidence that tobacco advertising has an impact on young people. Equally, fast-food advertising and alcohol advertising have an effect. Advertising is powerful.

None of that undermines the points that have been made that advertising campaigns must be based on good research and start from where the target audience is. However, it is also necessary to guard against unintended consequences. It must be borne in mind that advertising—particularly broadcast advertising—goes hither and yon and there may well be people who are not in the target group and are, in some way, disadvantaged or upset by what the campaign does. That must all be taken into account, but we do not want to go to the other extreme and throw the baby out with the bathwater.

John Swinburne: If anyone wants to know about the power of advertising, I can tell them, because I worked in that medium for 25 years. If Saatchi & Saatchi can make Maggie Thatcher popular and keep her in power for 18 years, anything is achievable through advertising.

The Convener: Was that a political statement?

John Swinburne: It was a statement of fact.

The Convener: Do the witnesses think that there are other ways of effecting positive change in attitudes that we have perhaps not discussed? Is there something about creating change that no one has told us yet that we need to know?

Professor Hastings: I reinforce the point that was made about consistency. A lot of work can be undermined if messages are not consistent. We can do the best campaigning in the world with the voluntary sector on board—such as the see me campaign, which is admirable—but, if the minister for such-and-such goes on the television and says, "We don't want any more immigrants coming in", that can have an enormous detrimental effect. We need to get our ducks in a row.

Tom Berry: This has been touched on a number of times, but direct contact between disabled and non-disabled people, particularly at an early age, is crucial. The more that we can all do to promote and drive that, the better.

We need to widen perceptions of disabled people. Disability is still considered a niche issue and although less than 5 per cent of disabled people are wheelchair users, that is by far the predominant image of a disabled person for the vast majority of the public. We really need to begin to challenge that. I hope that we will be able to take steps to do that.

The Convener: Thank you very much. That was a very good evidence-taking session.

Meeting closed at 12:49.

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