

Double bind

To be disabled and Asian

Confederation Of Indian  
Organisations (UK)

## Forward

Asian people in Britain experience racism and discrimination every day. People with disabilities also experience discriminatory attitudes and behaviour in the attitudes of the able-bodied people round them. These two groups of people are as a result seriously disadvantaged in the labour market, and this is a political issue which the Greater London Council sought to tackle both as an employer and in influencing other employers during its last four years of life.

But these two groups are not completely separate: they overlap, and Asian people with disabilities are faced with a double burden of discrimination and disadvantage. Very little detailed information has been available about the effects which this has on the employment prospects of disabled Asians, and few efforts have been made to improve matters. I am proud that the GLC Industry and Employment Committee was able to grant aid to the Confederation of Indian Organisations (UK) to enable them to carry out this study and follow it up with appropriate action to begin to remedy the situation in London.

It is not a matter for pride, however, to see the extent of the discrimination and neglect uncovered in this report. I hope that the CIO will be able to continue – in spite of the destruction by the Government of the GLC's programme of assistance to voluntary organisations – to bring pressure to bear on behalf of Asian people with disabilities, both women and men, to secure their right to a decent, paid job free from discrimination and harassment. But this is not the responsibility of the CIO alone, and I would commend this report to anyone concerned in any way with employment and training: read it and start to implement its conclusions or demand that they be implemented.

Michael Ward

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To be disabled and Asian

A Report and Survey on Employment in Greater London and how matters could be improved.

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## Section One

### Less Equal than the Already Disadvantaged

“Disabled people have the right ... to economic and social security .. to secure employment ... to have their needs taken into consideration at all levels of economic and social policy”

(United Nations Declaration on the Rights of Disabled Persons, 1975)

"Mr. M., after leaving his job as a priest, had made attempts to find other opportunities available for a disabled person. He was aware of special facilities available at a job Centre to help find disabled people jobs. I am not sure as to what extent he used such facilities. He had also been referred to another person whom he thought was in charge of placing blind people into work or training in London, though he could not give me any more specific details (except that his name was Mr. Lawrence). However, when he went to see Mr. Lawrence, he was told that the prospect of him finding a job was very low due to several reasons. Firstly, he said it was difficult to be sighted and get a job, let alone being blind. Also that you need a reasonably good level of English, which Mr. M. felt he could not achieve and finally he was told that due to his age, which at the time was around 41, there was not much point in putting in the effort to teach and train him, which may take a few years. Though Mr. M. seems to have accepted this as his future, he did nonetheless find life at home very frustrating and isolating since it is very difficult for him to go out alone. He did not feel that Mr. Lawrence was particularly helpful but Mr. M. felt that even though he spoke nicely he will really be interested in giving his own kind (i.e. white disabled people) help first”

The above is an excerpt from a case history of one of the interviewees who participated in our research and survey. It is not particularly damning, nor acutely embarrassing for our authorities. It does, however, provide a neat contrast between a rather bland and dry Universal Declaration and the reality for a disabled person resident in Britain today. Only this person happens to be of Asian origin. And the excerpt also provides a cameo of how people can be labelled, categorised, pigeon-holed, and as in Mr. M's case, ultimately forgotten.

Disability can affect anyone, of any race, class or sex. What really counts are the forces that subsequently come into play as a result. It is important to recognise that the concept of disability ultimately rests on a social judgement. This is the judgement which sets a threshold below which someone who deviates sufficiently from the norm is considered disabled. Like most social judgements of this kind,

however, the threshold or norm is ambiguous and not always clear. Thus, there is now a growing belief that the condition of disability is a status forced on people by society as a whole and that it is able-bodied people who make the disability decisions that affect the lives of disabled people.

Where, then, does this leave disabled people who also happen to be black or Asian? In Britain today most black and Asian people are at the receiving end of racism, most of it is institutionalised racism. We define this racism as follows:

"All attitudes, procedures and patterns - social and economic-whose effect, though not necessarily whose conscious intention, is to create and maintain the power, influence, and well-being of white people at the expense of black people."

Or, in other words, translated back to our previous concept, the able-bodied have now become white and the disabled people are now black. It therefore follows that the black or Asian disabled person faces a double disadvantage: that of being both black and disabled.

This is not an earth-shattering or revolutionary new theory. Many professional practitioners and policy-makers recognise this as an undisputed fact. More importantly there are surely many victims who could give ample testimony to it. But, exactly how many are there? Who are they? Where do they live? And so on. No national organisation dealing with disability can give you any sort of answers. Neither can any Government Department or office. And it is extremely doubtful whether any local authority can supply all of the relevant data and statistics for its area. So, who cares? Is the outlook completely grim?

The answer is, well, not entirely. There are now a number of both statutory and voluntary bodies that have taken steps to try and ensure that their services reach disabled people from a range of ethnic backgrounds. The following paragraphs illustrate some of the more positive examples.

The DHSS and the Save the Children Fund combined to organise a health education campaign to eradicate rickets in areas with large Asian populations. This is now being followed by Asian Mother and Baby Campaigns to encourage Asian mothers-to-be to use ante-natal care services more, to improve maternal health and reduce prenatal and neonatal death. Eleven health districts are to participate and linkworkers from the local Asian communities will be trained to help both health professionals to understand Asian mothers and Asian mothers to understand health professionals. The linkworkers will be backed up by local health education campaigns using the Asian communities' own channels of communication, including Asian newspapers, magazines, radio and TV programmes, addresses to

gatherings in places of worship and social centres, as well as informal word of mouth.

In August 1984 Hackney Social Services unveiled a 0,000 package, part of which was designed to help disabled members of the borough's black and ethnic minority communities - about one third of the total population. Two parts of the package are specially relevant. First, a new meals-on-wheels service for elderly and housebound Afro-Caribbean, Asian and Cypriot people. It is planned to enable local community groups to expand their own luncheon club schemes and to help with the transportation to and from these. Where no such schemes operate, the council will provide the service directly. Secondly, establishment of 10 new liaison officers to work with non-English speakers in Asian, African, Cypriot and Chinese communities. They will be dispersed among social services area teams and will have the dual function of helping members of the black and ethnic minority communities in understanding and using existing statutory health and personal social services, and in assisting statutory agencies in being more responsive to the needs of a multi-racial community. Council personnel emphasise that the measures are not being introduced at the expense of the indigenous white community and that they are designed to redress comparatively poor past provision for the black and ethnic minority communities. The Council intends to apply for money for the scheme from the Home Office under Section II of the 1966 Local Government Act.

Bradford Social Services is currently translating into locally common minority languages a booklet of information about services it offers to disabled people. As a part of a benefits take-up campaign the Economic Development Committee of West Midlands County Council produced pamphlets and posters concerning the replacement of NCIP and HNCIP by Severe Disablement Allowance in 5 Asian languages. The DHSS intends to make available copies of the leaflet 'Which Benefit', translated into Bengali, Punjabi, Hindi, Gujarati, Urdu and Chinese. Further examples of translated material are posters and leaflets produced in Gujarati and Hindi by Harrow and District Dial-A-Ride and Urdu and Gujarati versions of the Spastics Society's posters, 'Benefits for Kids'.

In a memorandum submitted by Liverpool City Council to the Home Affairs Committee's investigation of the Chinese community in Britain it is reported that introduction of special day centre provision for elderly Chinese one afternoon a week resulted, after two months, in an increase of attendance by members of the Chinese community from 7 to 24, with another 30 known potential clients. It is noted that "The Social Workers that visit the day centre are now discovering a complex range of needs relating to income maintenance, welfare rights, housing issues, health matters etc. The exercise does provide appropriate food, acceptable company, and is providing

appropriate activity. It is also a service for referral relating to a variety of needs. This is felt to be only the beginning of a large exercise." (Home Affairs Committee).

Leicester's Asians' Sheltered Residential Accommodation (ASRA) housing association was established because of a belief that much of Leicester's sheltered housing is situated too far from centres of Asian population and religious facilities and that its wardens and managers were unable to respond to the needs of Asian tenants because of their inability to communicate in Asian languages. ASRA now manages 22 units of accommodation in conjunction with local housing associations (Skivyer). A similar but quite separate organisation in South London bearing the same name has recently advertised for a Co-ordinator and 2 drivers to run a Dial-A-Ride and Community Transport service for elderly and disabled Asians in South London. The drivers are required to speak at least one Asian language.

Several voluntary organisations are hoping to increase the use made of their services by employing workers from particular minority ethnic groups. A mobile advice service has been set up by Age Concern Brent and Brent Association for Disabled People to provide information and advice to elderly and disabled people, especially with regard to welfare benefits, fuel and housing. As well as offering a telephone advice service, advisers can make home visits to housebound people. One of the two advisers, Shabira Moledina, has a special interest in working with ethnic minority groups and speaks Gujarati and Urdu. Chapeltown's Citizens Advice Bureau in Leeds has participated with the Manpower Services Commission in an Asian Project designed to increase use of the bureau by employing Asian workers. An Asian worker has recently been appointed to a permanent paid post at the Bureau. Islington Peoples Rights has employed an Asian worker to look at the problems Asians face in taking up benefits. A glance through journals will provide many examples of recent advertisements for posts where membership of a particular minority ethnic group would probably have been an advantage.

The organisation Contact a Family is hoping to help Asian families with handicapped children, the parents of whom may be unaware of what benefits and help are available, especially where the mother cannot speak English or is not allowed to mix freely in the community. It plans to set up a project in Southall based on meeting the needs of 45 families in the area. A support group for Asian parents of handicapped children has been run in Bradford for the past two years by the Centre for Ethnic Minorities Health Studies.

Heartening though it is to note these developments, it must be pointed out that they all relate to the social or welfare aspects of service provision. They cast the disabled person as a client, or recipient of services. What about the right to work, referred to in the United Nations Declaration<sup>1</sup> or so nobly expressed in Article 23 or the Universal

Declaration of Human Rights: "Everyone has the right to work, to free choice of employment, to just and favourable conditions of work, and to protection against unemployment ... Everyone who works has the right to just and favourable remuneration ensuring for himself and his family an existence worthy of human dignity and supplemented if necessary by other means of social protection."

So far no government has acted on either this Declaration or this Article. In Britain only the blind have a right to work, dating back to 1920<sup>2</sup>: for other disabled people the policy is 'equal opportunity'. The government agency responsible for all the main statutory services relating to the employment, rehabilitation and training of disabled people is the Manpower Services Commission (MSC), accountable to the Secretary of State for the Department of Employment, and Training Services for Disabled People. MSC describes its strategy as: "Helping disabled individuals to overcome the effects of disability and to secure equal opportunities with others, so far as possible, to obtain satisfying employment."

Not quite a right to work. But do disabled people even enjoy equal opportunities?

In 1965 the general unemployment rate was well below 2 per cent but among registered disabled people, over 7 per cent. Until the mid- 1970s this group was never less than three times more likely to be unemployed. Over the last five years the gap has narrowed considerably, not because unemployment among disabled people has abated but because of a massive rise in general unemployment. Today the general rate is something over 12 per cent while among registered disabled people it is nearly 16 per cent. If the trend continues, disabled workers, though worse off than they were, will soon obtain equality of opportunity.

If the trend continues ... In fact what seems to be happening is that employers are relatively less willing to dismiss disabled workers already on their books. But they are also becoming less willing to take on new disabled workers. In 1979/80 MSC's Disablement Resettlement Officers were able to place 60,000 disabled people in open employment but in 1980/81 only 39,500 - fall of 34 per cent. If this trend continues, unemployment among disabled people will reach unprecedented levels.

Most disabled people are able to work in ordinary employment, if they get the opportunity. Few of those who can work at all are so severely disabled that they require sheltered conditions. For those who do need sheltered employment, however, opportunities are severely limited. Nearly 26,000 people are eligible for sheltered employment but for close on 12,000 (46 per cent) there is no provision. In short, nearly one in every two severely disabled workers is unemployed. And one in every three has been unemployed for over a year.

In general, long-term unemployment hits disabled people disproportionately. In 1980 approximately 50 per cent of unemployed registered disabled people had been out of work for over a year compared with less than 20 per cent of all unemployed people. And 34 per cent had been unemployed for over two years. In March 1981 there were 72,180 unemployed registered disabled persons, or 15.7 per cent of all those registered. But this official statistic leaves out of account the 103,000 unemployed people seeking help from the Resettlement Service how are not registered but could be if they chose. this makes a total of around 175,000 disabled people seeking work. What this means in terms of an unemployment rate for disabled people is not easy to say; reliable estimates of the total number of disabled people are hard to come by, as already mentioned. It may be that 30 per cent of disabled people are unemployed, it might even be more. Certainly the rate is unlikely to be less than 25 per cent – double the rate for the general population.

Clearly, disabled people, particularly those with a severe disability, do not enjoy equal opportunities, let alone a right to work. There are a plethora of statistics to provide evidence. But where are the statistics or the evidence to portray the position for black or Asian people? Does the effect of a double disadvantage mean that they are in an even worse position? One might well suggest that to be the case. The answer however is that there are no statistics. there is no tangible evidence. there is no ethnic monitoring of such data, Black and Asian people are invisible. Search through reams of relevant Government reports. Read the ‘Code of Good Practice on the Employment of Disabled People’, produced by the MSC. Enquire at Remploy or any other publicly sponsored sheltered employer. There are no considerations of varying ethnic needs and aspirations. There are no records of ethnic or racial origin.

## Section Two

### Background reasons for this research and report

“There is nothing at all in disability as such that says that people who live with it can’t work’

Ann Shearer<sup>3</sup>

The Confederation of Indian Organisations (UK) is a voluntary organisation which co-ordinates the activities of 53 affiliates with a membership of over 50,000 people of Asian origin living in the UK. Their objectives are to 'integrate into the British way of life without losing Indian national identity; promote a better image of India; (and) represent and encourage the interests of the Indian community in the UK culturally, socially and

politically, and to relieve poverty, hardship and distress suffered by handicapped members of the Indian community'. The CIO are in receipt of grant aid from the Greater London Council enabling them to employ a Director and part-time secretary, and to co-ordinate a Translation Unit based at their premises at 5/5a Westminster Bridge Road, London SE 1. They are also in receipt of grant from the Council's Transport Committee to employ three people running a transport service for Asian elderly and disabled people across London.

The CIO co-ordinates and gives advice on the work of its member organisations in a range of areas including housing, education, health and social services, police, immigration, race relations, media, youth and sports. Their past work on employment has included liaising with the TUC and the Department of Employment, providing information on employment issues to affiliates and other interested parties; and organising conferences on employment issues including one on co-operatives run jointly with Ealing CDA. Through this work, the CIO developed a particular concern with the employment needs of Indian people with disabilities. They were aware that the major lack of statistical data on the numbers of black and ethnic minority people with disabilities was compounded in the Asian communities by a preference for coping with disability within the family and without the assistance of statutory and voluntary sector services, and by the insensitivity or racism of those services.

Outset, an organisation which carries out statistical surveys of the disabled population on behalf of local authorities and other clients, confirmed that no statistical information exists on the numbers of black and ethnic minority people with disabilities, let alone their specific needs in employment. The CIO suggest that this paucity of information is compounded in the Indian community by a social and cultural emphasis on dealing with disability and any associated needs and problems within individual families rather than with the assistance of such services as are made available by the statutory and voluntary sectors. It is, of course, unfortunately very likely that these services themselves are not especially sensitive to the particular needs of the Asian people and disabilities, and thus further entrench disability as a family problem.

Thus the Greater London Council approved a grant to the CIO (UK) to enable them to carry out the research described in the preceding paragraphs with the aim being the availability for the first time of detailed information about the employment needs of Indian people with disabilities in the Greater London area. This would assist statutory and voluntary organisations and employers in improving the extent to which they meet those needs, and would assist disability and ethnic minority organisations campaigning for such improvements. The information would be of particular assistance to the Council in determining its own policies in this sphere, to submit to the Council the information collected as it sees fit. A long term benefit of the grant is likely to be improved employment opportunities for Indian people with disability in Greater London.

From December 1985 to March 1986 the CIO plan to produce and disseminate simple information gathered on the services currently available including training facilities, local authority policies, and MSC and related services. This will mean a need which is currently completely unmet and which the preliminary research indicates is a cause of serious distress and wasted ability among Asian people with disabilities.

## Section Three

### Methodology of the Survey and Research

#### **Sample Identification**

As a result of the need to attract as many people as possible in order to establish existing problems as well as needs it was not really feasible to draw up a specific sample framework beforehand. However, having said this, though we could not guarantee the response that we would receive it was nonetheless felt that every effort should be made to make this as 'representative' as possible. The main initial consideration was of course, that since the project was concerned primarily with employment needs, that the sample should fall within the working population age range. It seems reasonable to suppose that in the section of the population we were identifying for the purpose of the project that the needs and problems faced by older people would differ somewhat from a younger age group and especially those who had passed through the educational system here. Also important was that we had an adequate representation of Asian women with disabilities as men. Another factor that had to be taken into account was that the sample should also attempt to be as representative as possible of the various Asian community groups.

#### **Definition of Disability Used**

One thing we wished to avoid was to generalise about the needs of 'the disabled'. Clearly in defining the latter category, whilst it is true that they do have special needs, this is due to a wide variety of circumstances that require some depth of understanding and does not merely rely on generalisations about disability and/or generalisations about cultural backgrounds only. Though we are not denying that cultural factors are to some degree important when one considers disability in this context, however, we feel that this alone cannot fully explain the needs, experiences and problems faced by disabled Asians and particularly when one considers the issue of employment and the disabled person having to compete in an unequal market when he/she is open to discrimination and stigma from all sides. The distinct areas of disability include:

- physical disability
- mental disability
- sensory impairment (i.e. visual, hearing, speech)
- heart and respiratory problems
- mental illness
- learning difficulties

## **Methodology of Contact**

The biggest problem in touch with disabled people in the Asian community as numbers or information was by no means easily available through obvious means and often not easily accessible. Though from the responses received a certain amount of interest and concern was expressed, particularly with some groups involved with disability and some awareness of problems by, for example, social workers (often specialist Asian workers), very little appears to have been done to overcome problems that clients may have been facing or even in establishing contact in the first place.

The list below shows some of the means taken to try and contact people. The numbers in brackets show provisionally the number of people whose names were passed on or who contacted us and agreed to take part in the project. It is important to point out first however, that whilst two main areas of London have been covered (i.e. Ealing, Brent), the numbers also include individuals from other areas of London who were interested to take part, e.g. Tower Hamlets.

- Disablement Resettlement Officer
- Careers Service
- Social Services
- Occupational therapists (2)
- Specialist Social Workers (4)
- Day Centres for physically/mentally handicapped (4)
- Adult Training Centres and/or Educational Centres (1)
- SIG Group (Brent Emp. Resource Unit) (1)
- Employment Rehabilitation Centre (2)
- Dial a Ride/Community Transport (5)
- Clubs/associations for Disabled (2)
- Centre for Elderly (Asians) (6)
- Places of worship/community leaders (1)
- Community groups and organisations (7)
- Street questionnaire (Southall) (5)
- Friends of people taking part (1)
- Personal (1)
- Advertising in ethnic papers (3)

An important feature that became obvious in time was that whereas in both of the main areas similar tactics were used to contact people, the responses as well as services (not only between these two areas but also with other areas of London) in different areas varied greatly and with this both the awareness and concern for the needs of the disabled in the Asian community.

## **The Interview Plan**

We did not use a questionnaire as such but rather an interview plan, which is not as restrictive as a questionnaire and allowed us to interview the individual in more depth rather than ask direct questions often which are not applicable and provide very restrictive answers also. Clearly we felt that the main aim of interviewing for this project was to draw out the views of the individuals themselves. The interview plan covered most of the issues we felt were important when discussing the issue of employment including what type of work an individual was doing or had done, what they felt about the type of work they did as a disabled person, attitudes of employers and other employees, how they coped with their disability at work and how helpful employers had been, particular restrictions in getting to and finding work, registration, how helpful they had found services like the DROs, education and training they had received, if any, and how useful this was; also what extra difficulties or problems they faced as Asian disabled people and finally what they felt could be done to help disabled people in the Asian community.

## Section Four

### Who is Disabled?

They do not look at the amount of work you do, but look at what you are. A disabled person can work the same as a normal person; the only thing is that they have restrictions”  
Interviewee

Within this field many different definitions and terms are used. This can lead to a great deal of confusion. What do we mean by the terms 'disabled' or 'impaired'?

Under the Disabled Persons (Employment) Act 1944, a disabled person means: "A person who on account of injury, disease or congenital deformity is substantially handicapped in obtaining or keeping employment, or in undertaking work on his own account, of a kind which apart from that injury, disease or deformity would be suited to

his age, experience or qualifications, and the expression "disablement", in relation to any person shall be construed accordingly".

In a more general way, the World Health Organisation in their International Classification of Impairment, Disabilities and Handicap, define:

(a) "Impairment; a permanent or transitory psychological, physiological, or anatomical loss or abnormality of structure of function.

(b) Disability; and restriction or prevention of the performance of an activity resulting from an impairment, in the manner or within the range considered normal for a human being.

(c) Handicap; a disability that constitutes a disadvantage for a given individual in that it limits or prevents the fulfilment of a role that is normal depending on age, sex, social and cultural factors, for the individual."

Most of us are disabled people at some point in our lives. Everyone who needs to wear spectacles, endures depression, copes with rheumatism, breaks an arm or leg, or suffers a heart attack is disabled. Few of us will escape some degree of disability in old age.

Most of us manage to cope, most of the time. Even severe disability is not uncommon, however. Almost all of us have at least one relative or friend who is severely disabled, whether blind or deaf, paralysed or crippled, mentally ill or mentally handicapped.

But even severely disabled people can lead a full and satisfying life. There is no simple relationship between any particular disability and its consequences. For these depend not only on what we are unable to do but also on what we want or need to do, the environment in which we live and the attitudes and actions of other people. So, for example, a solicitor who develops hand tremor may find it has little effect on his life. But a dentist may have to abandon his career. Or in one town the only way into the local library may be up a flight of stairs - impossible in a wheelchair. But in the next town there may be a ramp.

Of course, some people's disability may make it impossible for them to look after themselves or earn an adequate income. That is what the United Nations meant by disabled people:

'The term "disabled person" means any person unable to ensure by himself or herself... the necessities of a normal individual and/or social life, as a result of a deficiency, either congenital or not, in his or her physical or mental capabilities.' (UN Declaration of the Rights of Disabled Persons 1975).

But as Ann Shearer aptly remarks<sup>4</sup>:

'They are different enough, these people, to have their own UN Declaration of Rights ... Yet which of us can ensure by ourselves the necessities of a normal life whatever our abilities? In our complex societies, we are all dependent on a whole host of others to sustain our everyday life.'

All too often, however, it is not primarily the disability as such which gives rise to suffering and frustration; rather it is the attitudes and actions of other people. Embarrassment, lack of understanding, prejudice or even hostility are just some of the social difficulties disabled people often have to face:

"You always feel inferior, especially when you go for a job. You know you are not completely normal even though you may be qualified for it You may even be more intelligent than them but your inferiority complex is always there no matter how you try to overcome it" (Interviewee).

It is very difficult to divide disability into neat categories. Many illnesses or conditions appear in more than one group of disabled people. However, four main types of disability are generally recognised:

1) Physical handicaps, such as arthritis, rheumatism, paraplegia (both legs paralysed) and hemiplegia (one side paralysed), caused by for instance, birth injury, disease, e.g. polio, or accidents later in life. Those affected may benefit from extra personal help, and may need aids, such as wheelchairs, crutches or sticks. Some less well-understood physical handicaps: epilepsy is a condition in which there is a disturbance of the electrical impulses to the brain, producing various effects, ranging from vagueness and mild dizziness, to falling down and (rarely) to convulsive fits. It can be well controlled by medication. For safety, epileptics do not work with dangerous machinery, or drive unless cleared by a doctor. There are 300,000 epileptics in Britain. Multiple sclerosis is a disease where the protective covering of the nerve fibres is damaged, so that the nerve fibres are unable to fulfil their normal functions. Limbs become progressively weaker, the balance is unsteady, and both speech and sight may be affected. Multiple sclerosis may cause severe fatigue. The cause is unknown and at present there is no cure. Muscular dystrophy is a wasting disease of the muscles, which are progressively weakened, causing gradual paralysis. It is a hereditary disease, for which there is no cure. Cerebral palsy (spasticity) covers a group of disabling conditions that result from damage to the brain. 'Cerebral' refers to the brain; 'palsy' describes lack of muscular control that is often (but not always) a symptom. It can be severe, with inability to control body movements. It can also be milder -e.g. a slight speech impairment. In Britain over 100,000 people have some degree of cerebral palsy. Spina bifida literally means split spine and is the commonest major disabling abnormality apparent at birth. The consequences of the

malformation are usually paralysis of the legs and absence or weakness of control of the bladder and bowels. The causes are still unknown and there is no cure.

2) Sensory handicaps, such as blindness and partial sight, deafness and partial hearing, and speech impairments.

3) Mental handicap, a permanent condition in which the intelligence is impaired to some degree, from very mildly to profoundly. Down's syndrome (mongolism) is a form of mental handicap resulting from genetic abnormality.

4) Mental illness, a wide range of disorders and mental states from stress reactions, e.g. mental breakdowns, through depression to acute psychosis, e.g. schizophrenia. Mental illness is much feared and little understood; as with physical illness the range is from temporary and treatable conditions through to chronic states that are totally disabling. One in ten people suffers severe mental illness at some point in their lives. Many types of therapy can be successfully used in a variety of mental disorders, enabling patients to live ordinary lives. Mental illness and mental handicap are completely different, and should not be confused with each other.

The effect of disability differs, of course, from individual to individual. The same disability can vary in the severity and affect people to a differing degree. Some disabilities may improve a period of time, whilst others, as with certain neurological diseases (e.g. multiple sclerosis) may deteriorate. In other cases the effects of a disability are stable-for instance where the loss of a limb is involved. Finally, different individuals will be at varying stages in coping with the same handicap. Someone disabled since birth may have found ways of overcoming his or her handicap and may be able to accomplish a wide range of tasks. Someone disabled later in life may need more time and help to develop an expertise in coping with any handicapping effect.

Although services should be available to disabled members of all ethnic groups, whatever the incidence of disability amongst those groups, evidence of a high incidence combined with a low take-up of services would suggest a need for urgent action in many minority communities.

There is no nationally available information on the incidence of disability amongst ethnic minorities. It is unlikely that inclusion of a question on ethnic origin in the forthcoming OPCS Survey of Health Problems and Disabilities would produce any worthwhile information about comparative rates of disability because of the small numbers involved and the area sampling techniques used. Some local sample surveys could produce useful information, together with monitoring of disabilities at birth and educational assessments carried out under the 1981 Education Act. Although the Department of Education and Science monitors pupils at special schools by disability, age and sex, there is no

breakdown by ethnic origin. Few LEA's seem to gather such information, though Brent has recently started to do so and the ILEA<sup>5</sup> has published results of a survey of pupils in special schools which includes breakdowns of some information according to ethnic backgrounds.

Migrants tend to be young and healthy when they enter the UK. However, in many areas, increasing numbers of members of ethnic minorities who entered the UK from the New Commonwealth and Pakistan in the 50s and 60s are approaching retirement age. It will not be for another 25 to 30 years that the proportion of this group, viewed as a whole, entering retirement will exceed the proportion of the white population doing so. Nevertheless, because the numbers of black and other ethnic minority groups entering retirement are growing, there is an increasing urgency for services to be sensitive to those in this sector of the population with age-related disabilities.

There is evidence that mothers belonging to some ethnic minority groups, in some areas, are more likely to give birth to disabled babies than others. One investigation in Leicester suggests that neural tube defects, which may result in spina bifida, are almost twice as likely among Asian babies as others (details obtained from Professor J MacVicar, Department of Obstetrics and Gynaecology, University of Leicester). A Birmingham study found that babies of Indian mothers were more likely than others to have alimentary abnormalities and that those of Pakistani mothers were more likely to produce babies with multiple and chromosomal malfunctions<sup>6</sup>. Higher maternal age and rates of consanguinity may be amongst explanatory factors in relation to Pakistani mothers but cannot provide a total explanation of congenital malformations because the same study found a somewhat lower rate of multiple and chromosomal malformations amongst Bangladeshis despite their much higher consanguinity rate and average maternal age<sup>7</sup>. A high rate of rickets amongst the Asian population has long been known and prompted a national campaign by the DHSS aimed at eliminating this avoidable disease<sup>8</sup>.

Tuberculosis is another disease reported to affect disproportionately Asian immigrants in Leicestershire<sup>9</sup>. Other diseases, such as Sickle Cell Disease, Thalassaemia and Crohn's Disease are also associated with specific racial groups. The latter, moreover may occur in Asian and other immigrants to this country despite being almost unknown in their countries of origin<sup>10</sup>. Finally, the Chinese community in Britain may suffer from high rates of G-6-PD deficiency (which may result in brain damage and, amongst mothers, rubella<sup>11</sup>).

Although there seem to have been no studies of the relationship between visual disability and racial groups in Britain it is apparently accepted that some disorders occur with different prevalence in different racial groups. Thus diabetic retinopathy is believed to be common among Jews, a particular type of optic atrophy amongst West Indians and cataract amongst Asians<sup>12</sup>. The authors of this report also cite the findings of American

studies and conclude, somewhat speculatively, that if there are applicable in Britain "we can expect the elderly coloured population to have twice as many visually disabled people as the white population."

Debate about the causes of some of those illnesses which disproportionately affect ethnic minorities continues and amongst various factors claimed to be responsible are: diet, first cousin marriages, mother's age when giving birth, heredity and material deprivation.

Many ethnic minorities are disproportionately represented amongst occupations with low income. In 1980 the Black Report demonstrated very clearly the correlation between low income and poor health as measured by a host of indicators<sup>13</sup>. The report's authors felt that material rather than cultural factors associated with low income were the primary cause of different rates of disability. Therefore, over and above any cultural or hereditary causes of these different rates, it is likely that members of ethnic minorities suffer disproportionately poor health by virtue of their disproportionate representation in semi-skill employment. This may to some extent be compensated in some ethnic minority groups by cultural factors such as abstinence from smoking, and from alcohol and meat consumption.

Despite this ad hoc and rather piecemeal research evidence there are many commonly held misconceptions about the incidence, or otherwise, of disability in the Asian communities. Some social workers told us that because they had not met any disabled Asians there could not actually be any. One worker we spoke to had even heard the Director of Social Services at the London Borough of Brent state this opinion. Another worker rationalised the view by claiming that disabled Asians would either "be left behind in India" or would never "circumvent the tough immigration laws in the UK"! Some of the problems lie within Asian communities themselves. An excerpt from the case history of two of the interviewees are reprinted:

"When he first came to Brent he tried to find information about disability and meet other disabled. Went to some Asian organisations, however Asian groups themselves did not know of any disabled in the Community. 'Most Asian people in community not interested in disability – not at all' However though he went to these organisations when he had problems he felt that they need to change 'would be nice if they could take into account needs of disabled – but they are not interested...'"

and

R, because he is a disabled, understands that Asians/Black disabled do not mix with white or vice versa, mainly because of inferiority complex ... Disabled people should be taught to respect themselves first, must overcome their inferiority, have to learn to accept disabilities and how to overcome them; should get together, talk and help themselves. He

feels that not only Asian disabled hide from other people but Asian society makes on feel inferior.

We explore this problem in more detail in Section Nine.

## Section Five

### One Door closes and Another one Closes

#### The General Employment Outlook for Disabled People

“The majority of disabled people are potentially capable of working on their merits in open employment”

Disabled Persons (Employment) Act 1944

“I find that people make assumptions without giving you a chance. This does not mean they can ignore your disability, but should instead find a job to suit you. You should be given a chance to show what you can do”.

Interviewee

The term 'disabled people' is used to indicate people with a physical or mental impairment. In the context of employment we are concerned with the special needs and associated problems which such an impairment can create in obtaining the skills and knowledge needed to compete equally at a job interview, overcoming prejudice in obtaining a job, pursuing job advancement and finally actually carrying out the job itself. However, there are powerful processes at work in society by which disabled people become classified as 'unemployable' and hence become unemployed. For black and Asian disabled people, as already indicated in Section One, there is a dual discrimination to combat:

"I went on an interview for work at the Post Office. The interviewer just started going on about disability and ignored everything else. He said you cannot do this and you cannot do that They do not know what I can and cannot do."

Interviewee

Occupation is widely regarded as being the most important determinant of a person's esteem or status. It brings material rewards, provides a structure for the day and can be said to be psychologically supportive. People bring their own perceptions to work. Of the adult population as a whole, it has been found that 73 per cent of skilled workers said that they "enjoyed work a lot", and the comparative figure was 66 per cent for unskilled workers. In the same survey, it was found that

a majority would not give up work even if they had the opportunity to do so without loss of pay<sup>14</sup>.

Yet disability as an issue still fails to elicit any serious response from the training establishment. Government has been pleading 'scarce resources' for so long that the real issue of the use of public money to promote and perpetuate incomplete and discriminatory training practice, is all but ignored. We should not have to find ourselves in a position where a section of the population is denied the prospect of work and a living wage, simply because we choose to distribute funds per capita, rather than distributing more to those in the population that need extra resources.

Estimating the size of the population of people with disabilities is fraught with difficulties. There is certainly a register of people with disabilities, and a rough guide can be obtained from that, but there are several important reasons why that figure is lower than might be expected. The main reason is that the definition of disability drawn up for the 1944 Disabled Persons (Employment) Act, has come to interpret disability as meaning 'physical handicap' and many people who are in fact 'disabled' do not care to register as being so. Thus, people with mental handicaps comprise less than 3 per cent of registrations. A second important reason why the registered figure is less than the real figure stems from the fact that the disability register is tied up with a system of targets (or quotas) of the number of people with disabilities that employers should try and employ. In recent years the system has fallen further and further into disrepute and now there is really very little incentive for a person with a disability to register as being so. At the same time registration invariably is associated with a certain amount of stigma and leaves the person concerned open to discrimination when applying for jobs:

"One example of a prejudiced employer was British Telecom. They always refused, implying that I could not work for them as they only had jobs for people with voice communication. Surely this cannot be true. There are jobs where the telephone is not necessarily required, even with British Telecom

Interviewee

People with disabilities tend to be under-represented in non-manual occupations and over-represented in semi-skilled and unskilled occupations, was the conclusion drawn by Buckle in 1971<sup>15</sup>. The situation was seen to be the same in 1982 in the MSC review of assistance for disabled people. Here for example, 59.9% of disabled unemployed sought general labouring jobs rather than 32.0% of the non-disabled population, and the figures for craft jobs were 6.4% (disabled) vs. 17.1% (non-disabled).

In a recent study by Lonsdale and Walker<sup>16</sup> unemployment amongst people with disabilities was reported as being in excess of that for the whole workforce, sometimes 5 times as great. This follows a survey of unemployment trends over the last twenty years. Townsend (1979) found that the problem was compounded for disabled women who in turn suffered twice the unemployment of disabled men (56% vs 28%). The situation was acknowledged in 1982 by the MSC<sup>17</sup>. They concluded that amongst the disabled population in the open employment market people with disabilities of all ages were likely to suffer considerably longer periods of unemployment than others.

Anecdotal evidence suggests that unemployment is suffered more among manual workers with disabilities than professionals with disabilities. This is partly because manual workers who suffer injuries at work are often unable to continue working because of the physical nature of their jobs.

"I went for an interview at Tesco Stores. It was simply a cleaning job. They said I had not worked before in Tesco so their staff would think about whether I was able to do the work or not I told the interviewers that I had an eleven year record at my last place. I did not get this job as Tesco. I can't be bothered with people like that"

Interviewee

There is a growing body of evidence which correlates disability and poverty, e.g. Townsend (1979)<sup>18</sup>. The reasons for this stem from the fact that, compared with the able bodied, people with disabilities suffer a far greater incidence of unemployment, their general level of skill/educational attainment is lower, and also the level of pay once in work is lower than average. The fact that disabled people tend to be at the lower end of the pay and employment market then means that other established ways of accruing wealth are not open to them to the same extent as for other people. For example, comparatively few disabled people are able to buy property, afford life insurances, or even secure loans to start up their own businesses. At the same time, certain disabilities actually cost money. For example a person with a mobility difficulty may have to pay a helper to carry out many of the household jobs that able-bodied people do themselves.

Lonsdale and Walker" have studied the question of low pay and disability comprehensively and they conclude that even when they manage to find work, people with disabilities are more likely than others without disabilities to be low paid. For example, amongst people working in open employment the government survey of 1969 found that half of those workers with disabilities had incomes below 43% of the average earnings. There are several reasons for this trend. These include anomalies in the Wages Council Act (1979) which allow employers to pay workers with disabilities at a lower rate than the legal minimum, secondly the relatively high incidence of 'home working' amongst the disabled, and finally a whole host of anomalies (discussed in detail later) concerning supplementary benefits payments. It is assumed that disabled people who are

currently on low wages will now be offered even less protection with the abolition of wages councils effected in the 1985 March budget.

"Mentally handicapped people are at the bottom of the pile as far as employment is concerned, but if you are Asian or black and mentally handicapped then you are even worse off "

Education Tutor at Stonebridge Adult Training Centre

## Section Six

### The People in our Survey

“Most Asian women who are disabled do not consider work. I think this is bad. If they got a job it would increase their self confidence and this is important. Men who are disabled only lose half of their self confidence whereas women who are disabled lose 95%”

Male interviewee

The matrix of statistics is included after this section. The difficulties in identifying suitable persons and gaining access to them have already been described<sup>1920</sup>. However, given these difficulties, it can fairly be said that the group of eventual interviewees are a representative cross section in terms of gender, age, type of disability and cultural/religious considerations.

In all, 24 people were interviewed, 13 men and 11 women. Their ages ranged from 17 to 54 and broke down as follows:

Age Range	Number of Interviewees
16-24	9
25-34	5
35-45	5
45-54	2
Not specified	3
Total	24

The range of disabilities, either perceived by our interviewer or self-classified, were as follows:

Disability	Number of interviewees
Mental handicap	4
Physical handicap/mobility handicap	9
Mental handicap/physical handicap	2
Mental illness	2
Blind/sight impairment	3
Deaf/dumb/hard of hearing	2
Epilepsy	1
Cerebral palsy	1
Total	24

As many as 13 interviewees still lived with one or more parent, way in excess of what one would usually expect in a group of people of these ages. Four lived alone, one in a sheltered residential home, and one with a brother and her daughter. Only four lived with a spouse and these were all men. None of the 11 female interviewees lived with a spouse. Once again, these proportions are way below what one would usually expect from a group of people of these ages.

Even more significant is the fact that only two of the interviewees have any sort of current job. Contrast this with the national unemployment figures for the disabled<sup>21</sup>. Of the two one was a man employed at Remploy and the other a woman, employed part-time, on sick leave and unsure of her return to work.

12 of the 24 are currently registered disabled and, of the 12, 1 ( have had some sort of contact with a Disablement Resettlement Officer. The next Section of this booklet provides a critique of this system and these services but we herewith quote from an interim project report from our interviewer:

"A number of people interviewed so far expressed some desire to work but did not know or were not confident of their capabilities. In some cases I feel they even underestimated their own potential because they were disabled as well as being Asian, so they felt their chances of ever being offered a job were minimal. They were surprised at facilities available, e.g.. employment rehabilitation centres where they could try different types of work and assessment that could help them decide as well as show a potential employer, what they could do. It seems clear that even from those who had at some stage seen a DRO that the options available to them were not fully discussed or explained and in one case not even followed up when the individual involved wanted it"

It appeared that 15 of the 24 were coping reasonably well with obtaining social and welfare benefits and assistance. However, that is not to say that our research did not uncover many problems. Our interviewer is quoted from the same interim project report:

"I think that people were often 'grateful' or relieved at the prospect of another Asian person to help them with problems and information, particularly when they did not know where to go themselves or were unhappy with any help they had (or had not as was too often the case) received. This included problems with benefits, facilities and help in the home, transport as well as finding employment training and educational facilities." Section Ten of this booklet explores this problem in some detail.

There was clear evidence of racial discrimination having affected the lives of at least 11 of the interviewees. A number of them actually referred to the double discrimination that was a reality for their daily existence:

"Yes, it does give you some sort of extra barrier - especially for certain types of jobs.

For example, I applied to the Police as a clerical assistant and I am sure that is why they turned me down." Interviewee "in some ways, yes, you have got a double problem with disabled people. Disabled people are second class citizens, when you are black or Asian you are third class.

When I applied to a few companies and they found I was Asian and disabled that was it ... When they see you are white they feel some sympathy, but once you are Asian or black that is it ... It is the same thing as with the able-bodied people, the difference between the able white and the able Asian - the same thing applies, there's not much difference." Interviewee Furthermore, there was more than a suspicion that a number of the other 13 interviewees had also been the victims of racism.

Our research clearly unearthed a high degree of confusion, uncertainty and a lack of knowledge about employment and disability in general. Other factors which emerged were:

- a) the reality that a number of the interviewees and certain Asian communities are not well established in the UK.
- b) language difficulties
- c) an assumption by many authorities and many white workers that the Asian community is very self-contained with regard to both caring for dependents and employment, i.e.. any disabled Asians would be looked after and employed within the community or extended family network.

It has to be said that some of the related problems did seem to originate from within Asian communities themselves. Disability is sometimes seen as a 'curse' and this can cause the disabled person, particularly if a woman, to stay hidden away, or even worse to be hidden away. A number of interviewees were aware of being stared at continually by other Asian people:

"Those from backward thinking families think of disability as a curse on the house. Disability needs active support and help from the community..."

In these respects we found that women were in an even worse position than men. A number of families appeared over-protective. If a female member of the family was disabled then there was often no question of her working at all; the main aim appeared to be to 'get her married off'. We quote here an excerpt from the case history of one of our interviewees:

"Because of her Muslim background her parents won't allow her to do anything concerned with employment or training or even educational opportunities, for example, at an adult educational centre. It seems that this 'protectiveness' is so because she is a girl rather than because she is disabled and 'free-mixing' is not allowed girls in stricter Muslim families. Hence family would not be able to use provision even if they knew about it for their daughter, only where the provision was for women only.

As far as the wider society is concerned, to be disabled, female and Asian was to have a triple disadvantage; to face discrimination on three fronts!

## Matrix of Interviewees

Interviewee serial number	Male/female	Age	Perceived or self-classified disability	With whom currently living	Any involment ever with DRO	Registered Disabled	Working currently	Coping reasonably well in obtaining benefits	Ever encountere d racial discriminati on
1	M	32	Mental hand.	Parent(s)	No	No	No	Yes	Yes
2	M	31	Mobility probs	Parent(s)	Yes	Yes	No	Yes	Yes
3	F	23	Hard of hearing	Parent(s)	Yes	Yes	No	Yes	No
4	F	24	Cerebral Palsy	Parent(s)	Yes	Yes	No	Yes	Yes
5	F	40	Mobility probs	Parent(s)	Yes	Yes	No	No	No
6	F	27	Mental Hand	Parent(s)	No	No	No	Yes	No
7	F	22	Physical and mental hand	Parent(s)	No	No	No	Yes	No
8	M	24	Physical and mental hand	Parent(s)	No	No	No	No	No
9	M	40	mobility probs	Wife & daughters	No	No	No	No	No
10	M	42	Mental illness	Wife & children	Yes	Yes	No	No	No
11	M	?	Mobility probs	Wife & son	Yes	Yes	Remploy	No	Yes
12	M	28	Mental hand	Alone	Yes	Yes	No	Yes	No
13	F	23	Mental hand	Parent(s)	No	No	No	Yes	No
14	M	45	Sigh impediment	Alone	No	No	No	Yes	Yes
15	M	54	Mobility probs	Wife	No	No	No	No	Yes
16	M	17	Physical hand	Parent(s)	Yes	Yes	P/T at BBC	Yes	Yes
17	F	24	Phyical hand	Parent(s)	Yes	Yes	No	Yes	Yes
18	F	38	Mobility probs	Alone	No	Yes	No	Yes	No
19	F	42	Mental illness	Brother & daughter	No	No	No	Yes	Yes
20	F	?	Mobility probs	Residential home	No	No	No	No	No
21	M	?	Sight impairment	Wife	No	No	No	No	No
22	F	20	Epilepsy	Parent(s)	No	No	No	Yes	No
23	M	21	Deaf & dumb	Parent(s)	Yes	Yes	No	Yes	Yes
24	M	29	Sight impediment	Alone	Yes	Yes	No	No	Yes

## Section Seven

### A Critique of Current Services and Provision

“The quota system; well, no one wants to know about it. I did talk to the DRO about it when I applied to the GLC. I said, look we have got a quota system and you can force them. He would say anything in reply. Most of the countries in the Third World have got this sort of system. In Tanzania there is this system that if the City Welfare Officer writes a letter to every company to employ a disabled person, and they do not, then they have a hard time with the Government so companies don't refuse. In India they do it the other way; they keep them and encourage them by paying half the money, while here (the United Kingdom) there is nothing...”

Interviewee

In July 1976 the administration of quota enforcement and sheltered employment was transferred from the Department of Employment to MSC. At the central government level MSC now has responsibility (under the oversight of the Secretary of State for Employment) for all the main statutory services relating to the employment, rehabilitation and training of disabled people apart from ATCs for mentally handicapped people and other work centres which come under the Department of Health and Social Security.

Locally, a number of services are provided directly by MSC Area or District Offices. The rest are provided by local authorities (usually social services departments), voluntary organisations and branches of Remploy.

The picture at a local level is complex and constantly evolving. Precise details are not easy to determine and what follows attempts only to sketch the main features of current provision.

#### **Access to open employment**

MSC's 'resettlement services' are run by its Employment Services Division (ESD) as part of the General Placing Service which also includes job Centres and other services for people seeking employment.

Disablement Resettlement Officers constitute the backbone of this service. There are about 520 maingrade and 45 senior DROs scattered across 1,000 local offices. DROs' main task is to assist disabled people (whether or not registered as such) in finding employment. Their services include advice on job opportunities and assistance in job placement, both in open and sheltered employment. DROs also administer registration

and supervise employers' arrangements for meeting their 3 per cent quota obligations. In 1979/80, 60,000 disabled people were placed in jobs by this service, but this fell by 34 per cent to 39,500 in 1980/81 against a background of some 175,000 or so disabled people seeking employment:

*"The DRO sends you to many places but it turns out that they have not got a suitable job, or one that provides training. I went to a factory once and I was told I would have to clean the toilets even though I had gone for a different job. I told them I would not do it"*

Interviewee

The resettlement services also administer a number of special schemes to help disabled people gain employment. These include:

(1) *Job Introduction Scheme (JIS)*: in 1980/81 1,072 people were helped by short-term subsidies to their employers at a cost of £269,000.

(2) *Adaptations to premises and equipment* to enable employment of a disabled person. In 1980/81, 81 people were helped by this scheme at a cost of £64,200.

(3) *Special aids to employment* In 1980/81, 775 people were helped at a cost of £210,400.

(4) *Fares to work* where neither own car nor public transport are feasible solutions. In 1980/81, 235 people were helped at a cost of £202,400.

Partly because of the 34 per cent fall in placements but partly also because of poor take-up, the total cost of these schemes - £746,000 - was scarcely more than half the £1,409,000 budgeted for:

*"I waited two years and then I went to the DRO in desperation. . . he had prejudiced attitudes and was deliberately discriminatory, always putting me off. Sometimes I went to the Job Centre three times a week but I was often told to return again because the DRO had no time. It was difficult just to travel there and back. . ."*

In addition to MSC services there is a small but growing number of voluntary organisation placement schemes, notably the Pathway schemes for mentally handicapped people set up by MENCAP (the Royal Society for Mentally Handicapped Children and Adults).

### **Vocational preparation and employment rehabilitation**

As part of its general Training Opportunities Scheme (TOPS), MSC's Training Services Division (TSD) supports vocational training for disabled people. Some 4,200 were helped in 1980/81. Of these 80 per cent (3,360) took part in normal TOPS courses, training alongside able-bodied people. The rest - some 840 - took advantage of special provision, much of which is provided by the four Residential Training Colleges run by

voluntary organisations but sponsored by TSD. The cost to TSD of courses for disabled people in 1980/81 was approximately 115.8 million.

MSC's Employment Services Division provides courses at its twenty-seven Employment Rehabilitation Centres (ERCs) to help those people who after sickness, injury or long periods of unemployment wish to enter or re-enter employment. ERC courses normally last 6-8 weeks, but may exceptionally extend to 26 weeks. In 1980/81, 16,078 people attended ERCs at a total cost of £ 15.2 million.

MSC also provides grants to certain voluntary organisations and local authorities to enable them to provide rehabilitation courses for the blind, those with cerebral palsy and the mentally ill.

### **Sheltered employment**

Financial support for sheltered employment is provided by MSC Employment Services Division on behalf of the Department of Employment. MSC does not itself provide sheltered work, however; it is voluntary organisations, local authorities and Remploy who run sheltered workshops with grants from MSC.

In all some 13,666 jobs were provided in 1980/81. There are, however, a further 12,000 or so severely disabled people eligible for sheltered employment but unemployed on the books of MSC's resettlement service.

There are four main forms of sheltered employment; at 31 March 1980 these included:

(1) *55 workshops primarily for the blind*, providing 2,476 jobs in all. The 27 that are directly controlled by local authorities provide 1,281 jobs; and 28 are run by voluntary organisations (as agents for local authorities) providing 1,198 jobs.

(2) *72 workshops primarily for sighted severely disabled people* providing 2,826 jobs in all. The 35 run by local authorities provided 1,298 jobs, 37 were run by voluntary organisations and provided 1,528 jobs (8 acting as agents for the local authority providing 282 jobs).

(3) *35 Sheltered Industrial Groups (SIGs)* providing 223 jobs in all. Formerly known as 'enclaves', these are groups of severely disabled people working under special supervision in otherwise ordinary employment. The 31 SIGs run by local authorities accounted for 190 jobs and the 4 voluntary organisation SIGs for 33 jobs.

*"Blind or disabled people should run their own workshops and institutes. They would understand more about the registered disabled than the able-bodied people running*

*these places. We are taken for granted, we are not machines. I do not like people taking me for a ride."*

Interviewee

(4) 88 *Remploy factories* providing 8,138 jobs in all. *Remploy* is a special non-profit-making company answerable to a Board of Directors appointed by the Secretary of State for Employment.

*"If you compare private companies with Remploy then you will find that disabled people won't get that much co-operation in open employment. When you work for a private company other staff think that you are being helped all the time. If you want to work in the private sector then you should be ready for these sort of things."*

Interviewee

To sum up, the 65 voluntary organisation workshops and SIGs provide about 20 per cent (2,758) of all sheltered employment jobs, 12 per cent on an agency basis for the local authority. Local authorities themselves provide a further 20 per cent of jobs in their workshops and 31 SIGs, while *Remploy* provide 60 per cent in their 88 factories. However, to reiterate points already made in this text<sup>22</sup>, no-one is able to relate the proportion of black and Asian peoples being helped because of the absence of ethnic monitoring.

MSC currently provides grants covering 75 per cent of local authority and 90 per cent of voluntary organisation financial losses up to a maximum of E 1,750 per job; it meets *Remploy's* deficit in full. In practice the average deficit per place is very much more than the MSC E 1,750 maximum grant and non-*Remploy* workshops and SIGs are often considerably subsidised by local authority expenditure. In 1979/80 local authority revenue expenditure on sheltered employment in Great Britain was approximately E 15.6 million of which only about 39 per cent was met by MSC grants; statistics are not available for 1980/81 but, if they increase in line with MSC spending on sheltered employment, total net expenditure by local authorities will be about E 13.3 million.

So total public expenditure on sheltered employment in 1980/81 was approximately as follows:

MSC grants and allowances to:	£m
<i>Remploy</i>	42.2
Local authorities	9.1
Voluntary organisations	2.3
MSC administrative costs	1.3
Estimated Local Authority net expenditure	13.3
Total	68.2

## **Adult training centres**

ATCs for mentally handicapped people are provided by local authorities' social service departments. They are included here because their main focus is often on work training although few trainees find jobs in the open market.

In 1980 there were about 45,000 people attending 484 ATCs scattered across the country. Most of them were less than 30 years old-the great majority living at home and most of the rest in hostels.

Local authority expenditure on ATCs in England, Wales and Scotland was E63.8 million in 1979/80. Statistics for 1980/81 are not yet available but even if increases in spending stayed in line with the Government's cash limits, expenditure in 1980/81 will not have been less than E67.7 million.

In conclusion we found a great deal of confusion, anger and bitterness among our interviewees over current provision. A lot of this was directed at Disablement Resettlement Officers and it is not very difficult to see why. More than one DRO we spoke to believed that Asian people were not interested in their services. They rationalised this by stating that Asians had a negative attitude towards disability. The Southall DRO refused to see us altogether. Another DRO actually admitted that, to his knowledge, no consideration had ever been given to the special needs of ethnic minorities.

To put these matters in perspective one perhaps needs to reflect on the attitudes of the employers of the DROs - successive governments. Recent governments have been uneasy about the Disabled Persons (Employment) Act 1944. Their disquiet has centred on the Quota Scheme; its main form of employment protection. It represents a form of positive discrimination and the potential strength of the Act, with its threat of a fine or even imprisonment, should not be underestimated. Unfortunately, since its introduction, no government has ever been persuaded to use it effectively and virtually no prosecutions have ever taken place.

Most governments have bent over backwards to accommodate employers in their failure to obey the law. Since the 1960s the position has been particularly poor with fewer employers fulfilling their quota obligations. As the post-war labour shortages declined so did the moral fervour which originally led to the Act. Sadly the will to encourage disabled people into meaningful work has been replaced with a cynical disregard:

*"Employers do not want to know, the thing is that they are there to make a profit ... You cannot blame them that much because the government is not that strict with them anyway."*

Interviewee

Hardly surprising, in view of the fact that government departments and the NHS are not legally bound by the Act, although they are supposed to have agreed to accept the same responsibility, both morally and in practice, as any other employer. In 1983 only one government department met its quota-the Royal Mint!

*"You cannot force these business people. They are very intelligent people and they will get round it ... The meaning of employing this 3 % is nothing."*

Interviewee

Other factors worthy of note are:

(a) between 1981 and 1985 the Government cut DRO staff by 30%

(b) the integration of disabled children in schools, provided under the 1981 Education Act, has twice been postponed.

Most statutory officials to whom we spoke denied racism or at the very least played it down. Very likely few of them understand the meaning of the word. It is interesting to reflect that to become a DRO one has only to undergo a 7 week training course. There is no special input on this course in the special and differing needs of people from black and other ethnic minorities.

*He is not registered with the DRO. However, he remembers somebody who came and asked him questions about work. He thinks she was from the Job Centre. She took details but never came back or go in touch with him again. He has not been to the Job Centre because of the difficulty in getting out and also the access problem at the Centre which is on the first floor. He cannot get upstairs...*

Excerpt from the case history of an interviewee

## Section Eight

### The London Boroughs, A Cause for Concern

*"I feel the Council takes no notice of disabled people. Their main provision is for the elderly or for very young children. This is bad. I would also like to go out. If I go to a day centre there is mainly old people; if I go to a youth club some people cause trouble. At least if there is a club for disabled people then you can get a chance to do what you want, there is no trouble, and you can meet other disabled people in the area."*

Interviewee

We wrote to the Directors of Social Services at all 32 London Boroughs and the City of London. The text of the letter is reproduced herewith:

## "EMPLOYMENT NEEDS RE DISABLED PEOPLE OF ASIAN ORIGIN

I am writing regarding the above project that I am currently working on the employment needs of disabled people in the Asian community.

Through my research and outreach work I am becoming increasingly aware of the fact that the uptake of Social Services by people of Asian origin is very low even though they can benefit from these services. I would like to enquire therefore, on whether you have any information concerning disability within the Asian Community in your area, for example, in the form of surveys or other information. Secondly, would it be possible to provide a list of services that are available through your department for disabled people in your area and to what extent your department has taken steps to bring these services to the attention of the Asian community in general.

I would be grateful for any information that you have and look forward to hearing from you."

After four months only 12 had had the decency to reply or acknowledge our letter. A synopsis of the replies is included below in alphabetical order:

Brent- did not answer properly; asked CIO for information!

Bromley-wrote to say they were too busy to answer!

City of London - do not consider that they have an Asian community and have made no effort at all. They have recently leafleted all households with details of general services. The leaflet was in English only.

Croydon-did not answer properly. There is no ethnic monitoring of services. They have recently applied for two Section II posts<sup>23</sup>.

Ealing- did not answer properly. There is no ethnic monitoring of services.

Enfield-could provide none of the information requested. They have no translation facilities. They claim to have only a small Asian community. They do have a "Black and Ethnic Minority Working Party" with a sub division for social services.

This should be reporting in due course.

Hammersmith & Fulham - are doing nothing - no information.

Haringey- offered a meeting with the CIO to discuss the issues.

Kensington & Chelsea - did provide a list of general services but have no information on its Asian communities and no translation facilities.

Newham - maintain a computerised register of people with a permanent handicap and claim to have "significant numbers of Asian people who receive our services in relation

to their disability". There is however no ethnic monitoring of services, no information about the Asian community and no translation facilities by all accounts.

Richmond- are doing nothing- no information

Westminster-are doing nothing-no information.

Quite evidently not one Borough answered all three questions posed in the letter. Very few of the 12 who replied are doing anything at all constructive in this area. 21 boroughs did not bother to reply at all. Interestingly 10/ 12 of replies received were from Conservative run authorities. There were many authorities with sizeable Asian communities amongst those that did not reply, e.g.. Southwark, Lambeth, Greenwich, Lewisham, Hackney, Islington and Camden. All of these boroughs have a Race Relations Unit.

In summary, on the London boroughs, it can only be said that there has transpired an appalling catalogue of contempt and inaction in these matters. The description 'overtly racist' would not be out of place in this context. The phrase 'our services are open to all equally' is just not good enough.

*"Our house is very small; one false move and he would fall and injure himself. In fact he has failed downstairs before. Social Services refused to make any adaptations to the house. They also refused to give us any reasons for this. They said 'haven't you got any friends who could help you ... ?'they do not ask white people that, only Asians. They know that when someone's been in hospital they will need help. . ."*

Mother of Interviewee

## Section Nine

### Images Within the Family and the Community

*"People in our own community should care more. Most people stare like you are some kind of freak. I used to get upset but you cannot go around with your hands in your pockets all the time".*

Interviewee

We have already alluded to the prejudice and discrimination shown within Asian communities themselves<sup>24</sup>. Some of it is based on religious beliefs (e.g.. disability is a curse on the house from God), some of it is based on wider feelings of fear and revulsion:

*"My own friends say hello but most other people in my community just ignore me..."*

Interviewee

In whatever form this prejudice and discrimination manifested itself all interviewees felt it to some extent or other. Where the interviewees were still living with one or more parent the pressures that were thus exerted often spilled over into family dynamics:

*"When they (other family members) come home they just keep me to one side like a dog. Most disabled people you may find do not talk much. They are not in the habit of talking because no one wants to talk to them."*

Interviewee

It is our purpose to concentrate on how these community and family pressures affect the employment chances of disabled Asians.

In many cases it appears that disability results in an over-protective attitude from other members of the immediate family:

*"Some parents look after their disabled children very well. Often they look after them too much and spoil them."*

Interviewee

This can sometimes result in the disabled person being trapped in a cocoon:

*He went to Kenya for his sister's wedding and holiday at his parents. He found out that his parents had not changed in their view to his being disabled. R. feels that in Asian communities it is a bad reflection to be disabled. They have a false pride, do not talk about it, tend to be over-protective. They do not like R. to play 'Garba or Dandias' - they think he will hurt himself.*

Excerpt from the case history of an Interviewee

The Greenford Careers Officer felt that 'family' and 'cultural' issues often determined what a disabled person was 'allowed' to do. She stated that this was more acute with disabled girls and women where families were even more protective. The Manager of Stonebridge Adult Training Centre in Brent pointed out that in order to participate in certain Centre activities, parental permission often had to be sought for Asian students and in particular girls/women.

The Greenford Careers Officer also stated that in some Asian families parental assumptions were that if a disabled young person remained at a certain educational level then they would eventually 'catch up'. She said they did not want to accept that their daughter/son was 'backward' or 'handicapped'. She felt this was often due to ignorance of how the British educational system operated.

She also stated that Asian fathers in particular were very reluctant to allow their children to register with the DRO. This then made obtaining a job very difficult especially when there was no visible disability or handicap.

Both the Greenford Careers Officer and the Specialist Careers Adviser of the Brent Careers Service felt that another problem was that many parents do not want their children to go away or travel some distance for work/training. Sometimes the young person concerned had the same attitude. It was felt that this resulted in lost opportunities and made placing extremely difficult.

A small proportion of the interviewees felt that they were being, or would be, exploited. These feelings are best summed up by the following two quotations from interviewees:

*"I think that most disabled people feel that family members are exploiting them ... When they (the disabled person) want wages they (the family) say treat him like in India. When they (the family) have to make sacrifices for*

*the disabled they become English and suddenly say that the Welfare State will look after them (the disabled person)"*

*And more directly.*

*"The Asian community is using disabled people for its own financial requirements on a large scale."*

Quite clearly our research unearthed a high degree of isolation, both of the disabled person within the family network and of the family from the mainstream of society as a whole:

*"There is a lot of isolation for parents ... They tend not to approach or join groups for the disabled. This is a shame because no one is able to give them more help than another family with a handicapped child."*

Multicultural Contact Teacher, School for the Physically Handicapped at Wembley.

This teacher felt that since there are more white children with disabilities their families are in a better position to form peer groups. Hence there is a greater likelihood that white families will know what they are entitled to while black or Asian families are more likely to 'suffer in silence'.

The Specialist Careers Adviser at Brent Careers Service thought that the problem was most acute for families who have only been here for a short time'. Both she and our Multicultural Contact Teacher cited language as an occasional problem and barrier, e.g.. in dealing with social workers or teachers. They also both pointed out that in some cases it was difficult to gain access into Asian families and stressed the importance for such an involvement from a professional angle.

This, in turn, leads us into the next Section where we will consider in more detail the disadvantaged position of the disabled Asian person in obtaining the necessary social and welfare benefits to which they are, or should be, entitled.

## Section Ten

### Who Benefits and Whose Problem is it Anyway?

*"One of the problems is that I do not know or understand English. I used to get an attendance allowance. Then someone came along. I got*

*confused and said that I did not know whether or not he had to get up at night. They took my allowance away. This is not fair. They do not know what I am going through. They should bring in someone who can interpret or translate what I am saying.”*

Mother of Interviewee

We have already referred to the correlation between disability and poverty<sup>25</sup>. By and large, government policy is of an all or nothing kind<sup>26</sup>. People with disabilities must either work and obtain earnings or they must register as disabled and claim invalidity benefit. But what of the many Asian people who do not know of the registration formalities, or who may have misinformation and/or misconceptions. Our survey found that only 50% of the interviewees were registered disabled. All of the interviewees comprising the other 50%, who are not registered, were not currently working.<sup>27</sup>

One consequence of Asian people not using the job Centre and DRO service is that they do not get to hear about many of the special Government measures specifically designed to give disabled people the same chances as everyone else. Very few in our survey realised that registered disabled people are eligible for help with 'fares to work' and special aids and adaptations at work. Disabled people who do not register are not entitled to go to a sheltered workshop or to join a sheltered industrial group, which again only one or two interviewees appreciated. We have to relate that even where our interviewees were registered they were not always in possession of all relevant and material information. We include an excerpt from one of the case histories:

- Is registered disabled for at least last ten years since she came to this country.
- However due to disability has been unemployed for the last 10 years. She has seen *DRO* but this has not helped in finding suitable employment, in fact she has not ever been in paid employment
- Feels that she could have little difficulty in finding a job, however, her main problem is one of transport Impossible for her to walk any distance, and even this affected for example by the weather, e.g. wind, rain. Also she cannot use public transport
- She was not aware that help with transport to work was available.
- The type of work she would want is some type of sewing work or factory work

Many interviewees realised rather vaguely that these forms of special help existed but without concrete information did not seem able to apply it to themselves. This could be quite an important factor in helping someone to decide whether or not they can cope with a job. Knowing that the MSC will pay for a taxi to work, or even that if you do not work as fast as other people you could do an ordinary job of work through a sheltered industrial group might make all the difference.

There was plenty of anecdotal evidence in our survey to indicate a low rate of benefit take-up. A person can only claim a benefit if s/he knows about its existence and then feels that it is applicable to her/him. The first problem is finding out about relevant benefits. Current research<sup>28</sup> indicates how claimants find out about either or both of attendance allowance and mobility allowance:

	Attendance Allowance		Mobility Allowance	
	successful	unsuccessful	successful	unsuccessful
	ul	ss.	ul	ss.
	%	%	%	%
Relatives	9	30	8	13
Friends/neighbours	10	13	22	32
Social Worker	18	18	19	13
Health Visitor	10	-	2	7
Nurse	2	-	-	3
Hospital/doctor	25	15	14	10
DHSS official	6	2	5	7
DHSS leaflet	8	-	5	3
TV/radio/press	2	5	10	6
Teacher/school	3	-	3	-
Voluntary org	3	-	2	6
Other	3	-	10	-
No. on which % based	104	40	86	31

The majority, if not the total, of the respondents in this survey were white. Given the avenues by which they found out it does not take much imagination to see how disadvantaged this would make members of the Asian community, particularly those unable to understand the English language.

We have already expanded in this booklet on evident discrimination faced by our interviewees, and by disabled Asian people in general. Additionally, there may be other factors which contribute to the low benefit take up. One of these may be related to citizenship states.

Many recent immigrants are uncertain about their status as citizens and their right to reside in Britain. Research by Islington Peoples Rights suggests that fear of their right to stay being prejudiced by claiming social security benefits is a factor contributing to the low rate of take-up of such benefits by Islington's Bengali community<sup>29</sup>. In practice, the fact that a claimant is a sponsored immigrant or an immigrant who has sponsored someone else to enter Britain, can have serious repercussions. Immigrants whose sponsors, for whatever reason, are no longer supporting them may be incorrectly told that they are not entitled to social security benefits or may have to wait long periods while pressure is put upon the sponsor to maintain the claimant. Furthermore, because the form on which sponsors undertake to maintain and accommodate dependents without recourse to public funds gives little indication of precisely which funds are meant, many dependents may be deterred from claiming public funds to which they are entitled. The Home Affairs Committee of the House of Commons has advocated that the public funds to which the undertaking applies be defined more specifically and clearly. Sponsors who are applying for naturalisation may find that such an application is adversely affected by a benefit claim made by the person they sponsored, no matter how long ago.

Another undoubted factor in the negative attitudes of many white social workers, many of whom appear to have no knowledge or understanding of Asian communities. This is hardly surprising in view of the systematic and institutionalised racism we found embedded in the system, policies and procedures of the employers of many of them, the London Boroughs<sup>30</sup>.

*... receives only sickness benefit up until now. Social worker wrote to ERC, sent 'milk token'. Also at one time only received single persons benefit (about 127) because he had filled in wrong forms - was not told that he had done so. Would have continued getting same amount for family- only after ERC social worker helped him is he getting the right money- however, Social Services would not backdate even though some fault on their side.*

Excerpt from the case history of an interviewee

Many social workers, and others responsible for administering benefits, seem to believe that most Asians do not speak English and thus it is not worth speaking to them. Some would appear to believe that disability equals

simple-mindedness and thus disabled people as a whole are not worth speaking to. Many of those who do actually communicate with Asian families seem to believe that 'the problem' can be contained within the family itself or within the wider Asian community:

*... was seen by a social worker only to enquire about food. She was asked if someone would be at home to look after him. Not understanding the full implication of this the daughter said yes. However, this was not actually the case and the father was left sometimes for considerable periods ...*

Excerpt from the case history of an interviewee

These result of factors such as these is that a form of vicious circle syndrome has emerged. Many disabled Asian people now appear to feel that there is little point in trying to obtain benefits. As a consequence this gives the statutory authorities and administrators of benefits the excuse to maintain the stereotypes of either Asian families and communities catering for the needs of their own disabled, or, even worse, that disabled Asian people do not exist or reside in the United Kingdom.

Those Asians who refuse to accept the status quo and attempt to gain their rightful entitlements are consequently left with an uphill struggle:

"But now I want to appeal because we have rights and I will fight for them. Many people do not *know* that they have a right to benefits and lose much money. If/ get refused again at the end I will see an MP. I will not give up. When I worked in Oldham for II years I was giving full tax the same as ordinary people and paying all charges including prescriptions."

Interviewee

"I cannot get information easily. When I go to this office they say go there. They send you from this department to that department just for one leaflet It is not worth it"

Interviewee

## Section Eleven

### Positive Policies

“As far as disability is concerned, people tend not to want to know about race or racism. In considering provision they do not think they will need to think any more specifically than in terms of disability alone.”

Interviewee

It seems likely that one of the reasons for the failure to abolish the quotas system has been the lack of a policy with which to replace it. Given the marked failure of the ‘Positive Policies’ and ‘Fit for Work’ schemes of the late seventies and early eighties to provide an acceptable and realistic alternative it now seems that the Government is going to continue with the same tired old formulas with the recent release of the MSC’s ‘Code of Practice on the Employment of Disabled People’ in October 1984.

The Code boldly declares: “Disabled people often do not get their full share of the jobs available, or the jobs in which their abilities can be used. They also lose out on training and promotion. There are a number of reasons why no one can be happy with this situation...”

Grand stuff! But there are a number of reasons why no one can be happy with this Code.

Firstly its entirely voluntary nature makes it totally inadequate as a measure of employment protection for disabled workers. It has not one reference to the need for an incorporation in a wider Equal Opportunities Policy and in no way suggests an integrated approach to removing the institutionalised discriminatory barriers. Worse still, there is no reference to this Code to black or other ethnic minority people or any of their special needs and requirements. Even all of the illustrations throughout the Code depict white people!

In no way could this code replace the potential strength of a properly administered, realistic quota scheme. Such is the hypocrisy that abounds that we must point out that the three signatories to the Forward to this Code, namely the Chairman of the MSC, the Director General of the Confederation of British Industry and the General Secretary of the Trades Union Congress all preside over institutions which fail to meet the current quota of 3%!

There are authoritative bodies<sup>31</sup> which have put forward arguments in favour of keeping and strengthening the quota system. Additionally, there are good examples to be seen abroad in some of Britain's main industrial competitors, e.g. West Germany, Japan, Sweden<sup>32</sup>.

MSC research in 1979<sup>33</sup> showed that 86% of disabled people interviewed were in favour of a compulsory quota for employers. More than 80% favoured anti-discrimination legislation and just over 50% that employers should pay a levy if they fail to meet the quota. At the same time there was evidence from a parallel survey of employers showing support for a 'get tough' policy on the quota and even some for the introduction of levies. There is also evidence of massive support for the quota scheme among members of the general public. A National Gallup poll in 1980 found that only 4% were in favour of abolishing the quota and more than 2/3 favoured strengthening the scheme to make it work.

The most forceful way of changing recruitment practices towards disabled people would be to make discrimination illegal. At the moment it is perfectly legal to refuse to employ a person because s/he is disabled, even if s/he is suitable in every other way, and without finding out more about their disability. It is generally against the law to refuse to employ someone because you do not like the colour of their skin or because you do not want someone of their sex. The quota system, as it stands, does not give an individual disabled person, who has been the victim of unfair discrimination, any way of doing anything about it. Anti-discrimination legislation (along the lines of the Sex Discrimination Act 1975 or the Race Relations Act 1976) would create a climate of opinion where everyone would have to stop and rethink their attitudes towards disabled people. Most of the interviewees in our survey were in favour of such legislation being introduced. Unfortunately, there is no evidence that the current Government is even thinking along these lines.

We did find the odd example of positive action or good practice whilst conducting our research. There was the occasional Asian organisation, such as the Direct Community Action Group (DCAG) in Brent and some individual Asian social workers leading the way. We felt that the Ethnic Minorities Unit at the Greater London Council has provided a valuable platform for the subject of disability among black and other ethnic minority communities. There are examples of statutory-run or funded projects making a useful contribution, e.g. the Brent Resource Centre (funded by

Brent Social Services) and the ASSET Centre Chain (MSC funded). In particular we would applaud the ASSET Centre in East Ham, London E16.

At best, though, these examples can only be described as providing a glimmer of hope for the future.

## Section Twelve

### Conclusions and Recommendations

In some of the preceding sections we have entered into the general debate about disability, its low status within the field of Equal Opportunities, and the policies and programmes of the various statutory authorities. It is not our principal task to suggest solutions to the wider problem but rather to concentrate on the issues as they affect the employment chances of Asian people within the Greater London catchment area.

The main question is should any advancement or progress in these matters be a part of the wider struggle of disabled people, or should the issue of disability within the various ethnic minorities in London be the subject of a separate organisation(s)/campaign(s).

We found that there was a general lack of real commitment to the disabled in both government and municipal agencies, in particular to Asian disabled. We know of no Asian staff working in the Disablement Resettlement Service and thus perhaps we should not be surprised that many DROs regard a language barrier alone as rendering a person unemployable. Yet with the existing, and increasingly competitive, job market disabled people obviously need positive assistance to obtain jobs. Asian people in particular are in dire need of background information. The current educational facilities and training materials, e.g. at Adult Training Centres, are irrelevant to the requirements of many younger Asians for a variety of reasons; part lingual and part cultural. We found that, as a result, boredom and frustration increased and that, on average, Asians remained trapped for longer periods in these sorts of institutions.

One obvious solution therefore would be to communicate better information to the Asian communities in general and to disabled Asian people in particular. However, a word of warning here: information on its own is not necessarily sufficient. It should be linked to programmes of (1) awareness raising training and (2) outreach work.

Let us consider these two proposed programmes. The awareness raising training should be aimed at (a) professional staff in both statutory and voluntary agencies, (b) employers, and (c) other members of the Asian community. This last group is a very important target because it is our contention that, although a lot of Asian groups are highly politicised and mobilised into taking up issues such as immigration rights and anti-racism, disability is currently a low priority for many of them.

We also contend that a programme of outreach work would be of greater benefit than a policy of merely creating a series of marginalised, and ultimately peripheral, specialised or Section II office based posts. The arguments in favour of outreach work are outlined in the next paragraphs. It is common to speak of 'the Asian community' as if it were homogeneous but this is in fact a serious misconception. There are a multitude of different groupings based on variations in religion, language, culture and area of origin. The internal diversity of the Asian population is therefore considerable but there are nevertheless many shared customs and attitudes which override the distinctions and which create a sense of common identity. A strong commitment to the extended family as the pivot of personal and social life is very evident and family pride is strongly defended. It is here perhaps where the root of the problem lies.

The strength of the Asian family system may well be an invaluable bulwark against the often inhospitable conditions of life in Britain but it can manifest itself in a reluctance to seek outside help in a crisis and in a 'taken for granted' readiness to care for the sick and disabled etc. We have provided plenty such evidence throughout this report. The task of making the helping services more visible to families would therefore best be effected by the creation of an outreach team, with the same cultural background as the target groups. The objectives would be:

- 1) to reach disabled people and their families not using the statutory services
- 2) to educate them about the needs of the disabled and the services available to them
- 3) to befriend disabled people by visiting them at home
- 4) to act as interpreters by accompanying disabled people to statutory agencies/interviews etc
- 5) to encourage disabled people to take a more active role in community services and decision-making processes
- 6) to set up clubs and centres for disabled people.

Provision of both awareness raising training and an outreach team would be an excellent start but the ultimate success, or otherwise, of such initiatives would depend upon a changed attitude from the establishment. We now suggest how the establishment could begin to take the appropriate steps:

- 1) by obtaining decent information and introducing the ethnic monitoring of services
- 2) by strengthening the 'Right to Work' legislation
- 3) by a wider usage and acceptance of properly implemented equal opportunity policies with the aim of integration not assimilation.

Thus, firstly the Government should immediately proceed with a national survey of disabled people to include data on their socio-economic status, their employment, housing, transport and other needs. This survey should distinguish the various ethnic and racial origins of its subjects. The information should be updated at regular intervals of not more than, say, three years in order to sustain an adequate level of information on which to base policies. Statutory and voluntary agencies should be made to keep ethnic records and incorporate ethnic monitoring as part of their normal policies and procedures.

Secondly, the present quota scheme should be retained and improved. It should apply to both the public and the private sector and information on quota compliance should be published regularly. Permits should no longer be issued so readily and easily and must no longer be used as a means of avoiding the law. Failure to comply with the quota should result in the imposition of a levy/fine, based on the degree of shortfall in compliance. The possibility of rewarding employers who exceed their quota obligations should be considered. Consideration should also be given to the introduction of anti-discrimination legislation<sup>34</sup>.

Finally, following on from the last two paragraphs, there should be an obligation on employers to adopt strong and meaningful equal opportunities policies. Equality of opportunity is the sort of phrase that is very easily bandied about without people thinking what it means or what you have to do to achieve it. It is true that most people say, if asked, that disabled people should have equal opportunities<sup>35</sup>. But it is difficult to give equal opportunities to one group of people who do not know them at the moment in a competitive job market where people are valued according to how productive they are.

Giving equal opportunities means building ways into the system which prevent someone being denied opportunities simply because they are disabled. More specifically it would mean making sure that a disabled Asian starts off with the same chances as anyone else which may mean taking different and particular steps to bring her/him up to the same level.

What this means to us is not disabled Asian people trying to be exactly the same as everybody else and wanting to be treated exactly the same. True integration is recognising that disabled Asians may have special needs. Treating everyone the same is not equality, because it does not take into account those needs. This would be assimilation and not integration. Thus, an example of integration at work might be reorganising a job to suit a disabled Asian person and this reorganisation being accepted as perfectly natural and not as giving her/him an unfair advantage. It would appear that this day is still some way off!

"I do not know much about my training needs as I have only ever *had* experience in one factory. It would be a good idea if we could provide *workshops*, training and education facilities. I would like to see how all these different types of facilities operate and then decide what is best"  
Interviewee

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<sup>1</sup> Section One, Page 1

<sup>2</sup> Mr. M. may well have been unaware of this 'right'. See Section One, Page 1

<sup>3</sup> Ann Shearer, 'Disability: Whose Handicap', pub, Basil Blackwell (1981)

<sup>4</sup> Ann Shearer, *ibid*

<sup>5</sup> 'Characteristics of Pupils in Special Schools' – Inner London Education Authority (1984)

<sup>6</sup> 'Ethnic Differences in the Distribution of Congenital Malformation'. P. Terry, P. Matthew, R. Condie – Postgraduate Medical Journal, October 1983

<sup>7</sup> Terry et al. *Ibid*

<sup>8</sup> Report of the Stop Rickets Campaign – DHSS Asian Working Group, pub. Save the Children Fund (1983)

<sup>9</sup> 'Asians and the Health Service', Wandsworth Council for Community Relations, pub. Commission for Racial Equality (1978)

<sup>10</sup> 'Cloning May Bring Message of Hope to Victims of Crohn's Disease', M. Jacobson, Action Research, Vol. 2 No. 13, Sept. 1984

<sup>11</sup> 'The Chinese Community in Britain', Home Affairs Committee, Vol. 1, pub. HMSO (1985)

<sup>12</sup> Initial Demographic Study, Shankland Cox, pub. Royal National Institute for the Blind (1984)

<sup>13</sup> Report of the Working Group on Inequalities in Health, Sir D. Black, Chairman, pub. DHSS (1980)

<sup>14</sup> John Barter, 'Computers and Employment', NOP, 1978. See also: M. Jahoda, 'The Impact of Unemployment in the 1930s and the 1970s', British Psych. Society (Annual Conference) April 1978, and Colin Fraser, 'The Psychology of Unemployment' in M. Jeaves (ed) 'Psychological Survey', No. 3, London, Allen and Unwin, in press

<sup>15</sup> 'Work and Housing of Impaired Persons' – Buckle Journal Articles, London HMSO (1971)

<sup>16</sup> 'A Right to Work. Disability and Employment', Lonsdale and Walker, pub. Disability Alliance (1984)

<sup>17</sup> 'Review of the Quota System for the Employment of Disabled People – A Report', London MSC, 1982

<sup>18</sup> 'Poverty in the United Kingdom', Peter Townsend, pub. Allen Lane (1979)

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- <sup>19</sup> op cit.
- <sup>20</sup> Section Three
- <sup>21</sup> Section One, Page 5, and Section Five, page 18
- <sup>22</sup> eg, Section One, page 5
- <sup>23</sup> Under Section 11 of the Local Government Act (1966)
- <sup>24</sup> Section Four, page 16
- <sup>25</sup> Section Five, page 19
- <sup>26</sup> There is a small exception, limited to certain cases, where a person can earn ‘therapeutic earnings’ without forfeiting their benefit. In November 1983 the ceiling for these earnings stood at £22.50 per week.
- <sup>27</sup> Section Six, pages 21 and 22
- <sup>28</sup> ‘Research Into the Problems of the Take Up and Administration of Attendance Allowance and Mobility Allowance’ Judith Buckle, pub. The Disablement Income Group (Sept. 1985)
- <sup>29</sup> ‘English Speakers Only’, a Report of Work on Take-up of Social Security Benefits with People Whose First Language is not English, M. Tarpey, Action Research Project, Islington People’s Rights, April 1984
- <sup>30</sup> See Section Eight
- <sup>31</sup> For example, the Snowden Working Party (1976) which produced the report ‘Integrating the Disabled’, pub. National Fund for Research Into Crippling Diseases (London)
- <sup>32</sup> For example, 788.000 people are registered as severely disabled in Western Germany out of less than one million people in the workforce estimated to be eligible to register. This seems to be due to their effective and successful enforcement of a quota scheme of 6% - double that of the UK
- <sup>33</sup> ‘The Quota Scheme for the Employment of Disabled People’, an MSC Discussion Document (1979)
- <sup>34</sup> The arguments in favour of this are set out in Section Eleven
- <sup>35</sup> Section Eleven, Page 50, provides empirical evidence