

Digital Exclusion Profiling of Vulnerable Groups **Adults with Learning Disabilities: A Profile**





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The findings and recommendations in this report are those of the authors and do not necessarily represent the views of the Department for Communities and Local Government

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About the profile

This profile considers the group 'adults with learning disabilities'. It aims to understand group members' actual and potential interaction with technology. The starting point of the profile is to understand the life circumstances of group members through desk-based research. Our understanding of group members' (potential) engagement with technology has been developed largely through primary research. In particular focus groups were set up with group members and professionals working with the group.

Detailed findings from the primary research as well as further background to this profile are available from the Department for Communities and Local Government¹.

www.communities.gov.uk/corporate/contact.

Who does this profile include?

This profile considers adults (people of working age) with learning disabilities.

A learning disability affects someone's ability to learn, communicate or do everyday things. Most develop before a baby is born, during birth or because of a serious illness in early childhood²

The Department of Health defines a learning disability through the following three factors:

- a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with
- a reduced ability to cope independently (impaired social functioning)
- which started before adulthood, with a lasting effect on development.

The severity of a learning disability is grouped by impact on life. A person with mild/moderate learning disabilities is usually able to live independently with some support. Someone with a severe learning disability would need significant help with daily living. Lastly, a person with profound and multiple learning disability (PMLD), where a severe learning disability is often coupled with a physical disability, would require intense support 24 hours a day.

² See the Mencap website www.mencap.org.uk/landing.asp?id=1683.

Learning disabilities – why does it matter?

People with learning disabilities should have the same opportunities to move forward in life as others. This is not the case and people with learning disabilities face many forms of disadvantage. We put forward in this section key some facts that demonstrate why the needs of adults with learning disabilities should be taken seriously.

1.5 million people in the UK have a learning disability – around 3 in 100 people. This figure is increasing³.

Government expenditure on learning disability services for adults is approximately £3bn: £1.4bn on health and £1.6bn on social services⁴.

People with learning disabilities are 2.5 times more likely to have health problems than other people⁵.

Four times as many people with learning disabilities die of preventable causes as people in the general population⁶.

Over half of people with learning disabilities say someone else decides how much money they can spend each week 7 .

The friends that people with learning disabilities see most often are friends who also have learning disabilities⁸.

Almost one in three people with learning disabilities say they do not have any contact with friends. One in twenty have no friends and do not see anyone from their family⁹.

Less than 10 per cent of adults with learning disabilities are in work¹⁰.

- ³ Mencap (2007), Learning Disability
- ⁴ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century
- ⁵ Disability Rights Commission (2006), Equal Treatment: Closing the Gap
- ⁶ Disability Rights Commission (2006), Equal Treatment: Closing the Gap
- ⁷ National Statistics & NHS Health and Social Care Information Centre (2004), Adults with learning difficulties in England 2003/4
- National Statistics & NHS Health and Social Care Information Centre (2004), Adults with learning difficulties in England 2003/4
- 9 National Statistics & NHS Health and Social Care Information Centre (2004), Adults with learning difficulties in England 2003/4
- ¹⁰ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

What are the causes?

A learning disability is caused by the way the brain develops before, during or after birth.

Before birth a problem with the central nervous system (the brain and the spinal cord) could lead to a learning disability, or if the mother was involved in an accident or became ill while pregnant. The development of certain genes can also lead to a learning disability.

During birth risk factors include a lack of oxygen during childbirth. After birth, early childhood illnesses or physical accidents that impact the brain can result in a learning disability.

Inherited learning disability refers to learning disabilities that result from certain genes being passed on by a parent. The two most common types are Fragile X syndrome and Down's syndrome. Fragile X syndrome and Down's syndrome are not learning disabilities, but people who have either condition are likely to have a learning disability too. Fragile X syndrome is the most common cause of inherited learning disability, but not all people with Fragile X syndrome have a learning disability. Down's syndrome is a genetic condition caused by an extra chromosome in a person's cells. All people who have Down's syndrome have some kind of learning disability.

In many cases of learning disability it is not possible to identify the cause.

Who makes up the group?

Learning disabilities are caused by the way the brain develops. It is not therefore surprising to find that the prevalence of severe and profound learning disability is fairly uniformly distributed across the country and across socio-economic groups¹². However, the number of people with severe and profound learning disabilities in some areas is influenced by earlier funding structures. This refers in particular to the location of older, long-stay patients, and people placed outside their original area of residence by funding authorities.

Interestingly there is a positive correlation between mild/moderate learning disability and poverty. A similar link is found with deprived and urban areas¹³.

¹² Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

¹³ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century. No explanation of this correlation was given.

What barriers do group members face?

Adults with learning disabilities face a number of barriers in moving their lives forward and improving wellbeing. This section highlights significant barriers faced by the group.

6.1 Choice and control

A central barrier is the lack of choice and control individuals have over their life choices. Research shows only six per cent of people with learning disabilities having control over who they lived with and one per cent over choice of carer¹⁴. Direct payments have been slow to take off for people with learning disabilities.

The importance of empowering individuals with control over their own lives has been recognised by the government. *Putting people first*¹⁵, published in December 2007, reflects the government's vision of how personalisation of social care services will facilitate real choice over services and put control in the hands of service users. The use of individual budgets is central to this vision. This system gives service users more power to drive expenditure and moves away from a model of local authority assessment and placement.

6.2 Health care

People with learning disabilities are likely to experience poorer health than others. This problem is exacerbated by individuals in this group experiencing poorer health care. This very real barrier has been highlighted by charities¹⁶ and the Disability Rights Commission¹⁷. The latter reports:

- People with learning disabilities experience 'diagnostic overshadowing': that is, reports of physical ill health being viewed as part of the learning disability, and so not investigated or treated.
- People with learning disabilities who have diabetes have fewer measurements of their body mass index than others with diabetes. Those with stroke have fewer blood pressure checks than others with a stroke. They have very low cervical and breast cancer screening rates.

¹⁴ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

¹⁵ Department of Health (2007), Putting People First

¹⁶ See, for example, Mencap (2007), Death by Indifference

¹⁷ Disability Rights Commission (2006), Closing the Gap

There is no evidence that information on the physical health needs of people with learning disabilities is either regularly collated or used locally by commissioners to develop improved services.

Ill health impedes on wellbeing directly and also indirectly through, for example, putting strain on relationships, worsening mental health and decreasing work opportunities.

People with more severe learning disabilities often have significant problems with communication, making diagnosis of ill health difficult for GPs and other health professionals.

6.3 Employment

People with learning disabilities face multiple barriers in joining the workforce. Currently, only one in ten people with a learning disability work¹⁸. This is not due to people with a learning disability not wanting to work. In fact, research shows 65 per cent of people with a learning disability want to work, and that they make highly valued employees when given the right support¹⁹.

Key barriers to employment include:

- Training people with learning disabilities have less opportunity to engage in meaningful learning and training. Other factors, such as discrimination, can also make it harder for people with learning disabilities to engage in such activities. Only 1 in 3 adults with a learning disability take part in any education or training²⁰.
- Support people with learning disabilities need support at various stages of the employment process. Support is needed to develop the appropriate skills for work, in applying for work and when learning new skills at work. If this initial support is provided, people with learning disabilities can make a positive contribution in the work environment.
- Employers' attitudes due to the lack of information about, and the stigma attached to, learning disabilities many employers are reluctant to employ individuals with learning disabilities.
- Financial incentives the structure of the benefits system can make a person receiving benefits financially worse off by accepting employment.

6.4 Bullying

An alarming proportion of adults with learning disabilities experience bullying. This form of discrimination and harassment is often a regular occurrence leaving individuals isolated

Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

¹⁹ Lancaster University (2005), Research carried out by Eric Emerson at the Institute for Health Research.

²⁰ See the Mencap website www.mencap.org.uk/page.asp?id=1481.

and unable to go about everyday activity. The results from a large survey commissioned by Mencap show the extent of the problem²¹:

- Nearly nine out of ten people (88%) with a learning disability reported being bullied within the last year.
- People with a learning disability are often lifelong victims. Two-thirds of people said that they had been bullied regularly (more than once a month) with 32 per cent stating that bullying was taking place on a daily or weekly basis.
- Often bullying is carried out so frequently that the victim is able to identify the perpetrator.
- Name-calling or verbal abuse is the most common type of bullying suffered by people with a learning disability (47%).
- Almost a quarter (23%) of respondents reported physical assault.

6.5 Views from primary research

The remainder of this section is based on the findings of the interviews and focus groups with group members and professionals who work with them, which were carried out during the development of this profile.

Members of the focus group were probed around barriers and key issues facing the group. The chart below summarises the findings.

Figure 1: Key issues facing people with learning disabilities

Marginalised in the community: negative attitudes of others

- Social exclusion (limited friendships/relationships; distance from family) it was stated that 77% of people with learning disabilities don't have any friends that aren't paid to work with them or their families
- Vulnerability to bullying
- Vulnerability to coercion, and manipulation from others
- Difficulties not always recognised, can cause problems and humiliations
- Challenges of basic communication and interaction
- Tendency to only socialise with people who also have disabilities

Figure 1: Key issues facing people with learning disabilities (continued)

Need for daily living support

- Everyday activities significantly more challenging, (reading, writing, speaking etc)
- Need to assess each person individually, possible multiple needs
- To help time keeping and memory problems
- Reliance on others (key workers/partners/family) to meet their needs
- Potential for associated physical disabilities

Educational and employment constraints

- Highly represented in NEET category
- Associated learning difficulties i.e. problems with reading, writing, numberordering, verbal communication, poor concentration skills, and in some cases a short-attention span
- Low employment rates for people with learning disabilities, only 10% of people with learning disabilities are in employment
- Problems with diagnosis, makes for difficulties at school
- Negative views of learning, with associations and memories of failure
- Most have bank accounts, but struggle to manage/ understand finances
- Also, vulnerability to financial abuse

What do the numbers tell us?

A recent report by the Centre for Disability Research²² summarises information that is available from nationally representative data sources on the life experiences and services used by people with learning disabilities in England. These data sources include information collected by government departments and large scale nationally representative surveys. We take directly from this report and summarise the data to give a picture of the group in numbers.

7.1 Prevalence

It is not possible to estimate the number of number of adults with learning disabilities in England either from information held by centrally government departments or from large-scale population based surveys.

The authors estimated that 985,000 people in England have a learning disability (two per cent of the general population). This figure includes 828,000 adults (aged 18 or more). Of these adults, they estimated that 177,000 were known users of learning disability services in England (equivalent to 0.47 per cent of the adult population).

In *Valuing People*²³, the Department of Health estimated that 65,000 children and 145,000 English adults have severe or profound learning disabilities, and 1.2 million have mild or moderate learning disabilities²⁴.

7.2 Accommodation

The majority of people with severe and profound multiple learning disabilities were living with a parent. The majority of people with mild/moderate learning disabilities were living with a parent or other relative. People with more severe learning disabilities were more likely to be living in Residential Care Homes and NHS accommodation.

The majority of people in supported accommodation had no choice over either whom they lived with or where they lived. This was particularly the case for people with more severe learning disabilities.

²² Emerson, E. & Hatton C., Centre for Disability Research, Lancaster University (2008), People with Learning Disabilities in England

²³ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

²⁴ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

While the majority of people did have acceptable levels of privacy, a substantial minority did not. Again, this was particularly the case for people with more severe learning disabilities.

7.3 Employment

Over four in five (83%) of people with learning disabilities of working age were unemployed. The chances of having any paid employment were, however, much greater for people with less severe learning disabilities. Twenty-eight per cent of people with mild/ moderate learning disabilities had some form of paid employment compared to 10 per cent of people with severe learning disabilities and zero per cent of people with profound and multiple learning disabilities.

7.4 Education and training

Just over one in three people (36%) were undertaking some form of education or training. This was markedly higher among people with mild/moderate learning disabilities (36%) and people with severe learning disabilities (38%) than among people with profound and multiple learning disabilities (14%).

Just over one in three people (39%) attended a day centre. This was markedly higher among people with profound and multiple learning disabilities (66%) and people with severe learning disabilities (49%) than among people with mild/moderate learning disabilities (24%).

7.5 Hardship and deprivation

People with learning disabilities living in private households are much more likely to live in areas characterised by high levels of social deprivation. People living in private households were also much more likely to experience material and social hardship than people in supported accommodation services. Also, people with mild/moderate learning disabilities were much more likely to experience material and social hardship than people with severe or profound and multiple learning disabilities.

7.6 Being part of the community

People with profound and multiple learning disabilities were notably less likely to participate in a range of leisure and community-based activities than people with mild/ moderate or severe learning disabilities.

Less than one in three people with learning disabilities (31%) reported that they voted in the 2001 general election. Voting was higher among people with mild/moderate learning disabilities (42%) than among people with severe learning disabilities (27%) and people with profound and multiple learning disabilities (4%).

Just over one in four people with learning disabilities (28%) reported having attended a self-advocacy meeting. This was higher among people with mild/moderate learning disabilities and people with severe learning disabilities (both 29%) than among people with profound and multiple learning disabilities (15%).

Participants were asked whether in the last year anybody had been rude or offensive to them because they have a learning disability. Nearly one in three people (32%) said someone had been rude to them. This was higher among people with mild/moderate learning disabilities (33%) and people with severe learning disabilities (31%) than among people with profound and multiple learning disabilities (24%).

Overall, nearly one in ten people (9%) said they had been the victim of crime in the last year. This was higher among people with mild/moderate learning disabilities (12%) and people with severe learning disabilities (8%) than among people with profound and multiple learning disabilities (4%). This is much less than the chances of being a victim of crime as reported in the general population in the 2003/4 in the British Crime Survey (26%).

Who provides support to the group?

People with learning disabilities could receive support from a number of organisations spanning the statutory and voluntary sectors. The statutory sector includes the NHS and local authorities (local, city or regional councils). The voluntary sector provides a variety of community-based services. These may be funded through public donations or commissioned by the local authority social services department.

The main programme of support provided by the statutory sector is **Community** Care. This is delivered by local social service departments and offers support around accommodation, social needs, education, finance and health care. A person's needs are assessed by a social worker or care manager. However, other people may be involved such as a doctor, nurse, or occupational therapist. It is also recommended that carers or advocates should be involved in the assessment.

A care plan is a written record of the assessment. The care plan should show the following²⁵:

- objectives; specific and general
- criteria for measuring objectives
- services to be provided
- agencies involved
- costs to the user
- other options that were considered
- needs that cannot be met
- named person who is responsible for implementing the care plan
- date of the first review

Once a care plan has been agreed, social services then have a duty to deliver these services.

Day services offer supported activities during the day. In the past, day services were provided by large day centres often in isolated places. Now day services are delivered at a local level in an attempt to help integrate people with learning disabilities into the local community.

²⁵ Mencap (2008), Community Care – An Overview

Modern day services offer activities to suit the person's needs. This can include leisure activities, educational learning and vocational training. The high-level objective of the day centres is to support independent living as far as is possible and to allow the user to choose what suits them best. By locating in local communities, day centres can benefit from local resources such as leisure centres and libraries. This allows the user to develop a sense of safety in their local area and feel supported and included.

Voluntary organisations offer a range of different services for people with learning disabilities, such as day centres, employment projects and befriending schemes.

Family members provide a huge range of support to people with learning disabilities. This includes both parents caring for their children and adults caring for their elderly parents. They provide both emotional support and help with daily activities. Carers who provide regular and substantial unpaid care to someone with a disability are entitled to their own assessment of needs as a carer. This is known as a **Carers Assessment**.

Many people with learning disabilities require only a modicum of supervision in order to live on their own in appropriate accommodation. Such people also frequently resent the presence of supervisors, often craving solitude or company of their own choosing. The solution that meets both of these needs is **telecare**. This enables staff to keep an eye from a distance and intervene only when necessary. Practically the independence this fosters can then give the disabled person the confidence to work and generally live a more fulfilled life.

Telecare offers a number of support aids that monitor the individual remotely in case of an emergency. Examples include seizure detector mats, smoke, extreme temperature and flood detectors, gas and CO monitors, bed occupancy and chair occupancy sensors, enuresis detectors, property exit/entry monitors, bogus caller detectors and falls detectors. Some of these sensors terminate remotely in a control centre for assured emergency response, for example smoke detectors, and others are terminated locally to enable carers/ wardens to respond appropriately and fast. Intelligent use of these to reduce the risks of living often enables people to move into their own accommodation and away from heavily supervised care homes.

It is expected that telecare will be shortly expanded to cover 'activities of daily living' (ADL) sensing that will make telecare more proactive, able also to pick up longer term changes in behaviour that should enable problems to be anticipated.

The primary research also shed light on service use. Professionals highlighted **Jobcentre Plus** as an effective service provider. Jobcentre Plus, with its specific services for people with disabilities, was identified as having been particularly well received by some people with learning disabilities. Professionals noted two services in particular, which had proved particularly valuable for their clients.

These were:

- Access to Work scheme (a service helping people into employment if health or disability affects the way they may do a job – it also provides advice and support to both potential employers and employees)
- Disability Employment Advisors

These types of services were felt to be of particular importance as clients can receive employment help and support from professional advisors, who have a specific understanding of the challenges and constraints of disabled living and working. In addition, where these services were offered, it was noted that they frequently were accompanied by specialised programmes such as voice-recognition and dictation software, and specialised hardware, all tailored to meet the needs of learning disabled clients. Jobcentre Plus were also said to provide training in using these specific programmes.

Access to helping services

9.1 Services provided by participating organisations

Services provided to clients were a mix of both advice and support services. The specific types of services provided by the various organisations participating in this research were as follows:

Figure 2: Services offered by the organisations participating in the research

Social support

- Befriender services
- Running social groups

Day-to-day help and support

- Shopping, reading, relationships, travel and transport etc
- Also, residential care services/outreach services (for people with learning disabilities)

Education/Employment

 Personal advisors /group sessions provided to develop interviewing, communication and employability skills

Awareness raising

- Influencing local authorities decisions regarding the type and amount of services offered to people with learning disabilities
- Helping people with learning disabilities 'have a voice' e.g. by providing forums, representing their interests in wider circles
- Advocacy work

Individual assessments

 Clients assessed individually, to ensure support is targeted appropriately to accommodate individual needs and abilities

In the professionals' focus group, people also talked about using the ICT based services to support their clients. The findings can be seen in Figure 3 below.

Figure 3: ICT services offered by the organisations participating in the research

- Internet/email/telephone support, provides a range of advice from diagnosis to sign-posting to support groups
- An **electronic directory of information**, used to guide and support clients
- Also, **ICT training** provided to clients on request
- Social networking sites, specifically set up for young people with learning **disabilities** so they can interact and connect with each other in a safe way – messages and content moderated to protect users
- "Online Transition Passport" for young people with learning disabilities offers an accessible way for the person to communicate who they are, what they like, and where they want to be in life.
- **Self-directed support, an online planning tool** to support families and individuals towards self-directed support and support planning – people can upload multi-media (videos, pictures, web cameras etc) and add text that describes who they are, and then has a facility helping them plan life goals and future plans

9.2 Challenges of service access

Professionals noted particular barriers to service access, especially in rural areas such as Devon, where access to helping services was patchy and often referred to as a 'post-code **lottery'**. It was said that there were a wide range of support groups in the area with access to different services and different funding sources but unhelpfully, a standard range of services could not be guaranteed to all clients. Also, it was felt that often people with learning disabilities simply did not know where to go to access additional help and support. Again, this highlights the critical role of intermediaries.

9.3 Client perspectives

For the people we spoke to with learning disabilities, participating in support groups was a chance to meet up socially, discuss important topics about coping with the challenges of day-to-day living, and a chance to help and support each other in challenges they may be facing. The peer support received at these support groups was felt really valuable in "helping build confidence", through meeting new people, and through building coping strategies.

9.4 Barriers to accessing services

The key barriers to accessing services, identified by professionals, were:

- Negative self images, and low self-esteem, which can put people off accessing services and seeking help.
- "Learned helplessness and passivity", which can prevent people with learning
 disabilities from seeking help or advice themselves. They may have developed a reliance
 on others (carers/ family/ partners) to do things for them, making it difficult to develop
 new skills for independent living.
- Not knowing where to go for help, and not always feeling able to access help even it was known where to look

9.5 Preferred methods of accessing services

Channel preferences for receiving help, support and advice are summarised in Figure 4.

Figure 4: How people prefer to access services

- Combination of reading and listening to the same information is the best way of taking something in
- Websites are more attractive, and are more accessible, when writing is bigger with simple fonts
- Preference to receive information, support and advice using a mix of face-to-face communication, and ICT (eg email, Internet, telephone support)

Professionals noted that ICT can significantly increase the support that an individual has, through access to different communication methods. It was also commented that whilst ICT might be helpful for some, it could be life changing for others, bringing about an increased level of self-confidence and control.

Views about and use of ICT among clients and professionals

10.1 Types of ICT used by people with learning disabilities

10.1.1 Attitudes to and comfort with ICT

The perspectives of people with learning disabilities about computers and the Internet, differed, with some describing using them on a daily basis and others using them much more irregularly. Indeed, the level of people's computer literacy was guite broad-ranging. In terms of formal learning, a few people had gone on computer courses to "keep up", as it was felt there was so much reliance on technology in modern living.

Also, there was a noticeable age factor, with the younger people (under 35) considerably more comfortable and familiar with using ICT. Older people were considerably more reluctant to engage with ICT, and moreover, be interested in doing so. This factor was something both evident from the responses of people with learning disabilities themselves, and from comments made by professionals.

10.1.2 Access to and use of ICT

Amongst those participating in the client focus groups, all had a mobile phone and access to a computer however, not all had access to the Internet. This seemed to be more of a problem for those living in communal supported housing.

Both the Internet (e-mail) and mobiles were used for social communication, though there were problems described in terms of mobile phone usage. People with learning disabilities found texting difficult because of the abbreviations and non-standard English used – ie "text-speak". Also, it was highlighted that the more modern phones were sometimes offputting, as they had so many buttons and functions, and the phone keys were often too small to operate.

It was also discussed how there was sometimes an additional reliance on specialised software to facilitate use of mobile phones. Indeed, it was pointed out that some people need 'voice-activated programmes' to help the user make and receive calls. This was particularly so for those people with learning disabilities, who had additional physical disabilities.

Other types of ICT used were games consoles and online games – this was more an interest of younger people with learning disabilities. Also, professionals talked about people with learning disabilities using television as a 'social learning' tool – ie watching television programmes that depicted life issues and events, in order to help them learn more about ways to cope with such everyday health/social/and relationship issues.

The ways in which people with learning disabilities use ICT in their everyday lives are summarised in Figure 5.

Figure 5: Forms and nature of ICT use among people with learning disabilities

Mobile phones are used...

- For telephone calls
- Text messaging is avoided by people with learning disabilities due to abbreviations and non-standard English undermining comprehension of texts received; and difficulties using small buttons for sending messages
- Adaptations to mobiles, such as voice-activation software facilitate usage of mobile phones for some with learning disabilities

Computers and the Internet are used...

- For **finding basic information** (travel/cinema times/places to go, etc)
- Web browsing to find 'interest' sites (ie fan sites, downloading music, gaming sites etc)
- For **socialising** and connecting with other people, particularly by younger people (eg Facebook, Myspace, and Mencap's specialized social network site for young people with learning disabilities "YAP"

Other types of ICT used include...

- Interactive DVDs for learning enabling people to learn in the own way at their own speed
- Television to learn about social and/or life issues
- Most used digital TV, accessed the 'Red Button'
- **ICT for 'gaming'** game consoles and web-based games were often used by younger people with learning disabilities

10.2 Factors affecting views and use of ICT among people with learning disabilities

There were a range of factors identified by professionals and service users as influencing use of and access to ICT.

Fear of failure in learning to use ICT was described by professionals as a major barrier inhibiting people with learning disabilities from accessing and using ICT. Professionals commented on a tendency for their clients to become quickly alienated if unsuccessful in attempts to learn. This is often born of fears that their difficulties may be exposed, and they will be humiliated.

Professionals emphasised that the provision of comprehensive training in using ICT, particularly when embarking on new courses or learning new programmes, was essential. Appropriate training was described as key in building confidence, and allowing a real sense of control.

Professionals noted that many people with learning disabilities have had very negative experiences at school and these poor associations with traditional learning must be overcome to encourage their participation in learning. They emphasised that training should be focused on the process of learning rather than outcomes (such as assessment and certification at the end) and it should be tailored to meet individual needs as a 'one size fits all' approach will not be effective.

Additionally, professionals noted that for training to be effective, it should be delivered at a slower pace, using extensive repetition and positive visual reinforcement. This style of teaching helps to overcome problems with memory recall and difficulties with note-taking common among those with learning disabilities. Use of repetition and frequent checking for understanding are also helpful in facilitating learning among people with learning disabilities, whose recall of facts may be limited. Any written information accompanying learning should be provided in a clear and easily understood format (consistent with 'Easy Read' guidelines), and it should be reinforced with verbal information. Some felt it is particularly if helpful tutors have direct experience of working with people with learning disabilities, as they can then anticipate potential challenges to learning for these groups.

102.2 Vulnerability

Professionals working with people with learning disabilities discussed the potential dangers of the Internet for their client group. There were issues raised about people's vulnerability to potential fraud, financial abuse, exposure to external threats (being manipulated through social networking sites; falling victim to 'phishing' scams, etc) and not understanding the parameters of what can and cannot appropriately be viewed online. Though professionals made specific efforts to warn people about such risks, they felt that the ability to recogonise and avoid these potential threats was often not well developed among their clients. Although this doesn't pose a 'barrier' to the use of ICT as such, it is an important issue which should be considered in encouraging wider access to ICT among this group.

10.2.3 Need for appropriate ICT tailored to clients' needs

Those in the client focus groups described modern mobile phones as being 'too small and fiddly' and some encountered problems (such as frequent 'crashing') when they purchased

older PCs which do not function properly with currently used software. These issues highlight the importance of providing appropriate technology for people with learning disabilities, specifically suited to their needs.

When specially designed adaptations are available, they can have a very positive effect on broadening access to include these client groups. For example, the websites of Mencap, and YAP, were cited as positive examples of how websites can be designed to maximise comprehension and ease of navigation. Professionals also highlighted specific types of hardware and software which can help those with learning disabilities to overcome a range of barriers to effective daily living. Figure 6 provides a summary of some of these positive ICT applications.

Figure 6: Examples of software and hardware tailored to meet the specific needs of people with learning disabilities

- "Thunder" voice recognition computer software: reads out everything that the mouse rolls over on the screen
- "Dragon" voice dictation computer software: helps people with reading, spelling and typing difficulties, as it allows the user to create documents, reports, emails all by using verbal commands
- **Voice recognition mobile phones:** useful for partially sighted or blind people, so they can say the name of people to call and the mobile reacts to their voice
- **Specialised keyboards, with extra large buttons:** make usage considerably easier, especially for physically disabled (including people with sight difficulties)
- Specialised keyboards, with alphabetised key layout: make it easier for people not familiar with QWERTY keyboards, and who may operate computers more successfully with this type of layout
- 'Pen Readers' can be swiped across text on a computer screen, which activates a spoken function, can pick up spelling mistakes and typos more easily

10.2.4 Challenges to accessing ICT

Despite these important and useful developments in ICT for people with learning disabilities, it was highlighted that the cost of such programmes was often insurmountable, particularly for those people without jobs or families to rely on.

Furthermore, professionals noted barriers to their clients accessing public ICT facilities, as they were either; not readily available (particularly in the more rural locations) not appropriate to individual needs, or did not feel like 'safe' environments to people with learning disabilities. For example, people with learning disabilities sometimes tend to speak loudly and have difficulty controlling their volume. This makes ICT facilities available in libraries problematic. Additionally, the time limited nature of access to computers in libraries (i.e. one hour slots) may not be sufficient time for people with learning disabilities

to accomplish what they have set out to do before their time on the computer is over. This leads to frustration and undermines their effective access to ICT in these settings.

10.3 ICT access and skills among professionals

10.3.1 Types of ICT used by professionals

All of the professionals included in the focus groups have PCs and use e-mail and the Internet. They commonly use standard Microsoft applications as part of their everyday work.

The Internet is used for raising awareness about learning disabilities and several of those included in the groups described their organisation's website as an important part of the support and information service they provide.

E-mail is used for supporting clients, through answering any queries, concerns and requests for information that people may have. Emails were mostly received through the different organisations' websites.

These professionals commonly described using mobile phones as part of work. This was particularly the case with frontline staff, who described using their phones to stay in regular contact with their clients and colleagues.

Digital cameras are also used to provide alternative methods of communicating with clients (ie using digital pictures and videos to aid comprehension as alternatives to text-based communication).

10.3.2 Training in ICT for professionals

Most of those attending the focus group and participating in the telephone interviews described having had some training in basic IT skills as part of their job. Some also had jobs which focused on the use of ICT to support clients and they had extensive training specifically for this purpose.

10.4 Professional use of ICT to support clients

Technology was identified by professionals as highly important in their own service delivery. However, the choice of whether to use ICT for service delivery and which type to use was very much dependant on individual client needs. They emphasised that they would only use ICT in the provision of help and support if it was thought that was the most effective way of engaging with and helping someone. Indeed, technology was not always deemed appropriate, with certain situations considered more appropriately handled using face-toface contact. This was particularly the case in supporting people with personal or sensitive issues. Figure 7 provides examples of ways in which professionals use ICT to support their clients.

Figure 7 Professionals' use of ICT in service delivery

- Software programmes and digital cameras are used to insert symbols and pictures into documents to aid comprehension, and to help with memory problems
- Microsoft packages are used to change fonts in to make text more comprehensible (e.g., Comic Sans and Century Gothic) and background screen colour is changed to suit individual needs
- Websites are designed specifically for people with learning disabilities, and people with learning disabilities are consulted about the design (eg Mencap)
- Use of e-mail, the Internet and mobile phones to provide direct support and information to clients
- Use of videos and pictures to facilitate communication and comprehension with clients who find text-based communication challenging
- Development of interactive DVDs to support clients learning at their own pace and in their own time

10.5 What works?

Figure 8 provides an overview of key messages from professionals and clients about what works best in promoting accessibility and use of ICT among people with learning disabilities.

Figure 8: Examples of 'what works' in delivering services and promoting use of ICT

- **Specially designed or adapted hardware and software** to overcome individual barriers to ICT use and barriers to standard service delivery which may rely heavily on text-based communication
- Training and supported use: Training should be provided in basic ICT skills (eg, use of computers, mobile phones, digital TV, etc). Training must be tailored to the needs of the client group to overcome barriers to learning and delivered in a 'safe' context to facilitate learning. Training in the use of specifically adapted hardware and software should also be provided along with support in using it and maintaining essential equipment.
- Written communication should be in simple, clear text, using easy to read fonts on a plain background colour. Words should be accompanied by clear symbols or pictures to encourage comprehension (ie, enabling connections between images and meanings).
- **Digital pictures and images** should be used to illustrate situations and events as this helps with memory and comprehension challenges

When is the best time to help?

Learning disabilities start from birth and continue throughout a person's life. Intervention must therefore start from an equally early age in the life of someone with a learning disability and support should continue to be available through a person's lifetime.

The literature points to both transition points in terms of age and events (eg at the point when an individual with a learning disability decides to rent his or her first house).

A key transition point in terms of age for the group considered in this profile is that from childhood (pre 16) to young person (16 plus). This transition throws up many questions; will the young person continue with education or move into employment? Will further education continue in a local college or residential college that offers specialist services for people with a learning disability? What role will day services play? There is also a move from child to adult service provision. If suitable support and opportunities are made available at this stage then the life opportunities of people with learning disabilities can be significantly improved as well as their sense of inclusion.

Event-based transitions are many. Some are experienced few times in a person life (for example, changing accommodation or finding employment) while others can be frequent occurrences (such as health care). Interventions at these event-based transitions that improve the quality of service experienced by the user can help put control and choice in their hands and move people with learning disabilities from exclusion to inclusion.

Key event-based transitions include leaving school, leaving home and the death of close family and friends.

What is the Government doing?

12.1 Policies and programmes

Most laws which concern people with learning disabilities also apply to other people. Some are only about children. Others cover children and adults.

The main laws that are likely to make a difference to the lives of people with learning disabilities are about:

- care and protection of children
- assessment and provision for special educational needs
- further education and training
- community care services
- human rights
- discrimination

In this section we outline policy and programmes which are relevant to adults with learning disabilities.

The key policy document relating to adults with learning disabilities is **Valuing People**²⁶. It sets out the Government's plan for making the lives of people with learning disabilities and their families better by improving services. Three reports were commissioned to help inform the ideas behind Valuing People. These are:

- Nothing about Us Without Us: the report from the Service Users Advisory
 Group. This report takes into account the views and experiences of people with
 learning disabilities directly. Members of the Service Users Advisory Group were
 responsible for visiting local groups of learning disabled people to hear their views and
 understand the need for change.
- Family Matters, Counting Families In: the report from the family carers working group. Carers have a robust understanding of the realities of service provision. This report takes from their valuable insight developed through lifelong experiences of caring for people with learning disabilities.

²⁶ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

Learning Difficulties and Ethnicity: the report by the Centre for Research in **Primary Care, University of Leeds**²⁷. This report focused on the needs of ethnic minorities with learning disabilities, a group which is often missed amongst adults with learning disabilities.

They Government's plans focused on the following areas:

- Choice and control in order to put choice and control into the hands of people with learning disabilities as far as is possible the government is keen to increase the number of people using direct payments, increase advocacy levels through a national forum for people with learning disabilities and to push person-centred planning which provides a single, multi-agency mechanism for putting choice and control into the users hand.
- Carers the white paper puts forward two main routes through which carers may be supported: the development of a national learning disability information centre and helpline in partnership with Mencap, and changes to income benefits.
- Health the key drive around health is equality. The aim of the paper is to ensure those with learning disabilities enjoy the same level of health care as others and that certain groups, such as ethnic minorities, are not lost within the system. One route to achieving this is to ensure all people with learning disabilities draw up a health action plan with their GP.
- Housing, employment and fulfilling lives Housing and employment are seen as basic life opportunities that should be available to all. The government's plans in this area are continuing through new targets and measures which will be discussed in the next section. The agenda around fulfilling lives covers areas such as access to leisure activities and education. The work streams here include training those who provide services to people with learning disabilities.

The **Learning Disability Development Fund**²⁸ (LDDF) was set up to support the implementation of the Valuing People white paper by providing significant funding directly to primary care trusts. In 2006 to 2007 the fund was £42.6m and for 2007 to 2008 it has been increased to £43.7m. The Government's priorities for the use of this funding in 2006 to 2007 were:

- strengthening advocacy and best practice
- encouraging approaches that are centred around the individual
- developing leadership
- modernising day services
- NHS campus re-provision

²⁷ Note the term learning difficulties was used rather than learning disabilities as this was the preferred term amongst user organisations.

²⁸ See the Department of Health website: www.dh.gov.uk/en/SocialCare/Deliveringadultsocialcare/Learningdisabilities/DH_079367.

- supporting living approaches for people living with older family carers
- increasing the number of people with learning disabilities in paid work.

The **Learning Disabilities Taskforce** was set up to make the ideas put forward in Valuing People a reality. It is made up of academic experts, representatives of voluntary organisations, health and social care professionals, family carers and people with learning disabilities²⁹.

In September 2004, Rob Greig the National Director for Valuing People was asked to compile a progress report by the Minister Stephen Ladyman. His report, *The story so far.*..³⁰, was published in March 2005 and covered progress thus far and where efforts should be focussed until 2010. A large part of his recommendations re-emphasised the objectives of Valuing People which had not been realised.

More recently the government launched the consultation *Valuing People Now*³¹. This seeks people's views on the priorities for the learning disability agenda over the next three years. The consultation was initiated in December 2007 and closed in March 2008³².

The *Aiming High for Disabled Children Report*³³ focuses on the quality of service provision to children of ages 0 to 19. It aims to deliver quality through:

- good provision of information
- transparency in how the available levels of support are determined
- participation of disabled children and their families in service planning, commissioning and delivery
- integrated assessment provided by different services in a coherent, coordinated way
- a clear and published complaints procedure allowing feedback on services.

The Joint Committee on Human Rights published its report *A life like any other? Human rights of adults with learning disabilities*³⁴ on 6 March 2008. It confirm that adults with learning disabilities are particularly vulnerable to breaches of their human rights and makes key recommendations which feed into the consultation Valuing People Now mentioned above.

Various legislation has also been introduced to help those with learning disabilities.

- More information on the task force including membership, minutes of meetings and recent reports can be found at: www.dh.gov.uk/en/SocialCare/Deliveringadultsocialcare/Learningdisabilities/Learningdisabilitiestaskforce/DH_4001884.
- Department of Health (2005), Valuing People: The story so far... A New Strategy for Learning Disability for the 21st Century www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4107054.
- ³¹ Department of Health (2007), Valuing People Now: From progress to transformation
- The outcome of the consultation is not yet available on the Department of Health website.
- 33 HM Treasury and the Department for Education and Skills (2007), Aiming high for disabled children: better support for families www.library.nhs.uk/learningdisabilities/ViewResource.aspx?resID=261982&tabID=290.
- ³⁴ The Joint Committee on Human Rights published (2008), *A life like any other? Human rights of adults with learning disabilities* www.publications.parliament.uk/pa/jt200708/jtselect/jtrights/40/40i.pdf.

The Disability Discrimination Act (DDA) 1995 made it unlawful for disabled people to be discriminated against by employers (including both people in the application process and employees). The DDA states that 'reasonable adjustments' must be made to ensure that disabled people are treated fairly. Examples of fair treatment could include asking a carer to accompany someone with a learning disability to interview or decreasing the number of new tasks a successful candidate is asked to carry out in the early stages of a new position. The Act also included rights relating to access to premises and access to goods and services.

The Disability Discrimination Act (DDA) 2005 places a duty on public sector bodies to implement disability equality in their role as employers. The Disability Equality Duty (DED) requires employers to consider their employment policies and the duty to make adjustments in a more proactive way – so that discrimination may be eliminated prior to its arising.

For people with severe learning disabilities, **The Mental Capacity Act 2005** aims to empower and protect people who may not be able to make some decisions for themselves. It also enables people to plan ahead in case they are unable to make important decisions for themselves in the future.

12.2 Measures and targets

Government targets for the groups are structured around Public Service Agreements (PSAs) and Departmental Strategic Objectives (DSO). These high-level objectives steer local government targets through the system of Local Area Agreements (LAAs). The key targets for the group are summarised below.

PSA 16 aims to increase the proportion of socially excluded adults in settled accommodation and employment, education or training. This leads on to two very relevant LAA targets for the group:

- LAA 145: Adults with learning disabilities in settled accommodation.
- LAA 146: Adults with learning disabilities in employment.

The above two measures are a key step in the implementation of the white paper Valuing People³⁵.

The Department for Work and Pension's DSO Maximise employment opportunity for all, leads onto the LAA target measured by Flows on to incapacity benefits from employment. This provides an incentive to help those with a learning disability back into employment.

³⁵ Department of Health (2001), Valuing People: A New Strategy for Learning Disability for the 21st Century

PSA 12 aims to *improve the health and well-being of children and young people*. This is connected to LAA target 54 which focuses on the quality of services for disabled children (aged up to 19 years).

The Department of Health's DSO *Ensure better care for all* has implications for carers. In particular LAA 135 is measured by *Carers receiving needs assessment or review and a specific carer's service, or advice and information*. This reflects the need to support carers in order to deliver effective care as well as supporting the needs of carers.

Further details on all 198 LAAs and their relation to PSAs and DSOs can be found in the spreadsheet *Targets and Measures*. This document summarises the relevance of each target to the group and collects further information, where available, on the rationale behind the indicator, its precise definition, what data is collected and by whom.

Case studies

13.1 Share: A Place to Talk³⁶

The charity Mencap offer an online forum where families, carers and others can share their thoughts around the topic of learning disabilities. This online community provides informal support as well as information. The forum is moderated by members of our various members of the Mencap team.

13.2 The Foundation for People with Learning Disabilities³⁷

The Foundation for People with Learning Disabilities is part of the UK charity, the Mental Health Foundation. It provides a number of forums around the area of learning disability. These include:

- The Choice Forum online discussion forum on issues in the lives of people with learning disabilities in the UK. It brings together people working with people with learning disabilities, national and local policy makers, service providers and purchasers, parents, carers and people with learning disabilities. It is a forum where you can ask questions, find answers, and share ideas with others with similar interests.
- The UK Health and Learning Disability Network a network open to anyone with an interest in health and learning disability issues. Members come from all walks of life and backgrounds from families, self advocates and agencies working with people with a learning disability to nurses, GPs, psychologists, therapists. The network aims to assist health practitioners in both mainstream and specialist services with the health and learning disability agenda and, as such, concentrates on problem solving, information sharing and networking.
- The PMLD Network –this forum discusses the support of people with profound and multiple learning disabilities.

13.3 Arts Spider³⁸

Artspider is a learning disability arts website which was launched in June 2005. It gives information on arts events locally, some of the best art from artists with a learning disability including artwork, films and music and links to arts related websites.

³⁶ Visit www.mencap.org.uk/discussion.asp?id=2275 to view the forum.

www.learningdisabilities.org.uk/information/have-your-say/.

³⁸ www.artspider.org.uk

13.4 AbilityNet³⁹

AbilityNet helps disabled adults and children use computers and the internet at home by offering a 'one stop shop' for assistive technology needs. They also offer support to schools, colleges, voluntary bodies, professional advisors and employers who would like to use technology to assist disabled people.

AbilityNet is working with community organisations across the country to support computer use with advice and information as well as being able to demonstrate specialist software and hardware. They have links with centres in England, Northern Ireland, Scotland and Wales.

They also offer bespoke training covering Screen Readers, Voice Recognition, Literacy Aids and even gaming.

A case study from AbilityNet is given below.



Luke is nine years old and as a result of macrogyria – a genetic condition – he is quadriplegic and has no speech. Following AbilityNet's recommendations, he is now benefiting enormously from having a computer at home, much to the delight of his mum, Jane.

A touch screen and a large switch enable him to access specialist software and scanned images and as a result he is learning new concepts like colours, numbers and sentence construction. The prospect of achieving effective communication with others is becoming a reality – a widening of his horizons, which would not have been possible without the right technological help.

13.5 Asian People with Disabilities Alliance (APDA)⁴⁰

APDA in collaboration with NWL Online has set up an ICT Centre to provide Internet and computer education to elderly and disabled Asian people. The centre is equipped with 12 computers, accessible equipment, software, broadband and accessible furniture. Users are supported by an outreach trainer.

The centre is used by people with learning disabilities, their carers and their families. Both formal and informal learning is offered with a focus on learning by completing tasks. At present the centre has registered around 85 users for computer classes.

³⁹ www.abilitynet.org.uk/index.php.

www.apda.org.uk/Asian_ICT_Project.htm

People with age related disabilities and people with learning difficulties have shown a lot of interest in learning this latest technology. Some of the service users are very keen in surfing the web and reading newspapers in Asian languages.

13.6 Mencap Video Library⁴¹

The charity Mencap offers a wide range of online videos that describe key issues faced by people with learning disabilities and their carers. Often the videos have a strong input by people with learning disabilities. A brief description of what is available is given below.



A parent's advice to healthcare professionals

"It's important not to say negative things about a child. Focus on what they can do, not what they can't do," says Jo.



Ben visits his favourite cafe

Ben has control over his spending money, so he goes to his preferred cafe. "It's my favourite cafe and it's not expensive," he says.



Ben visits the library

"I'm looking for Spanish books because I'm into Spanish." Ben wants to learn more languages.



Ben's work experience in the restaurant

"This is the first time that I have done work experience and I like it here", says Ben, as he describes a typical day working as a Catering Assistant in a restaurant.



Ciara and Mark are engaged

Ciara and Mark talk about getting engaged and their future together.

⁴¹ www.mencap.org.uk/document.asp?pageType=113&origin=



Clare wants to live independently

"I just want to live in a flat on my own," says Clare, and describes the kinds of support she needs.



Jo Williams interview

"What we want is a world where people with a learning disability are listened to and valued equally," says Jo Williams, Mencap's Chief Executive.



Josie loves working on reception

"I answer calls, helping visitors and signing for parcels – lots of things. Reception is magic," says Josie.



Josie works in Campaigns

"Mencap is a leading charity for people with learning disabilities," says Josie, "and it's all about people being included."



Mencap marathon

"To do something as hard as a marathon, we had to do it for something we felt really passionate about", says one of Mencap's marathon runners.



My life as a Dad

"Sometimes you feel on the outside of what's happening with your child," says Mark. "It's important to be as involved as you can."



The best advice comes from other parents

"There was so much information to take in," says Jo. "We need practical advice about what we could do for Hannah."



The thinking behind Mencap Now

Mencap Now is a transitional housing project in Colchester. "Mencap Now is different because from the moment someone steps in the door we are working to help them move on and live more independently," explains Shaun.



Trevor's work experience

"I'm off to work. Every Wednesday I do the cleaning, the hoover, do the washing up." Trevor talks about his weekly work experience.



Writing a shopping list

Eating healthily and running a budget can be tough, so Ben likes to plan his shopping by writing a list.

Pointers for the future

The above sections give detailed information on various themes that allow us to gain a better understanding of the group. Here we capture pertinent messages that cut across many of the above sections. These are drawn out from the desk-based and primary research as well as expert opinion given at the validation workshop. We also capture here suggestions for the future.

Experts at the workshops were keen to emphasise the role of family carers. The input of these carers is crucial to the provision of support to people with a learning disability. Despite the right to have a Carers assessment, there was a strong sense that carers are unlikely to receive the amount of support they need. If service providers aim to reach adults with learning disabilities effectively, they will need to engage and understand the needs of carers. In particular, carers' interaction with, and perception of, technology will need to be considered.

Both experts and frontline professionals highlighted the need for raising awareness of learning disabilities. Technology could provide some innovative routes through which awareness campaigns could be sustained for both the general public and service providers.

Suggestions for the future underlined the importance of tailoring teaching, support and help to suit individual needs. The need for a tailored approach could be met by individual budgets and self-directed support which are expected to be rolled-out across regions before April next year.

Professionals also put forward some specific suggestions for the future. Software should be developed that is both simple to use and easy to navigate. People with learning disabilities need basic 'stripped down' versions of software along with training in how to use them. This training should be widely available, slow-paced, re-enforced through repetition, and focused on facilitating the learning process rather than specific learning outcomes.

While this profile has focussed on adults, professionals and others made the point that support in using technology should start at an early age so it becomes familiar and avoids the potential for fear or alienation. This support should then be sustained into adulthood where needed.

Lastly there needs to be an acknowledgement that some people will never be able to use certain types of ICT, and a range of suitable alternatives should be provided to meet the group's diverse range of needs.

Want to find out more?

The list of organisations below directs readers to websites from which further information can be obtained relevant to people with learning disabilities. Alongside each organisation and web address, a short description of the organisation and the types of information one could expect to find is given.

Name	Contact	What they do
Mencap	www.mencap.org.uk	The charity Mencap supports people with a learning disability, their families and carers. They have over 500 affiliated groups and work with people with a learning disability to change laws, challenge prejudice and support them. Their website offers a wide range of resources including factsheets, video footage and a list of over 500 national organisations relevant to people with learning disabilities.
Learning Disability Coalition.	www. learningdisabilitycoalition. org.uk	The Learning Disability Coalition represents 10 learning disability organisations. They campaign through a single voice to ensure government provides enough public money so that people with a learning disability have the same choices and chances as everyone else. They provide various introductory material as well as highlighting new policy developments.
AbilityNet	www.abilitynet.org.uk	AbilityNet supports individuals, schools, LEAs, colleges, voluntary bodies, professional advisors and employers – anyone looking for advice on computing when a disability means special help such as different mice, keyboards or software.

Name	Contact	What they do
Alliance for Inclusive Education	www.allfie.org.uk	The Alliance for Inclusive Education is a national campaign to end segregation of children with disabilities or learning difficulties from mainstream schools and communities. The Alliance consists of a majority of people who are disabled and is increasingly recognised as the only representative 'voice' of the consumers of 'special' education. Membership is open to all and newsheets and publications are available to all members including a termly magazine 'Inclusion Now'.
The Department of Health	www.dh.gov.uk/ en/SocialCare/ Deliveringadultsocialcare/ Learningdisabilities/ index.htm	The Department of Health works with other government departments to deliver the white paper Valuing People. Their website includes latest policy developments as well as links to other information relevant to learning disabilities.
Association of Chartered Physiotherapists for People with Learning Disabilities (ACPPLD)	www.acppld.org.uk	Specialist physiotherapists work with people who have a learning disability by helping with access to mainstream services or, where necessary, providing specialist therapeutic intervention. ACPPLD offers contact for physiotherapists with others working in the same speciality. The ACPPLD produces a quarterly newsletter for members. It also organises study days and conferences. There are regional groups throughout the UK and Northern Ireland.

Name	Contact	What they do
Asian People with Disabilities Alliance (APDA)	www.apda.org.uk	The APDA runs a confidential information and advice service for Asian disabled people, their families, professionals and agencies in contact with Asian people. This is one example of the special needs of groups within the group "adults with learning disabilities".
Assist UK	www.assist-uk.org	Assist UK is the national voice for Disabled Living Centres around the UK. Through its network of local centres it aims to ensure improved access, either directly or indirectly, to accurate, reliable and impartial information and advice about the products designed to help with daily living. Assist UK provides a range of services to its members and other organisations, including direct training and a range of publications and resource papers.

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