

**The School of Sociology and Social Policy,
The University of Leeds**

**An evaluation of the different barriers faced
by people with acquired and congenital
visual impairments in relation to their
employability**

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Abstract

This project seeks to compare the different barriers to employment faced by people with either a congenital or acquired visual impairment from a social model perspective. Using qualitative interviews supported by quantitative secondary data the research examines the key areas of identity, education and employment. Although small in scale it provides an insight into the barriers each group face, some are different and some are identical. Using extracts from interviews the project seeks to give a voice to visually impaired people and their experiences within the education system and labour market. Their stories demonstrate the level of discrimination that still exists.

The project also explores the effects the recent changes in welfare reforms and employment policies will have on visually impaired people within the labour market. Taking evidence from the research it is suggested that societal attitudes, an enforced negative disabled identity, inequality within the education system and discrimination in the labour market alienate visually impaired people from employment. Rejecting the corporately driven labour market policies the research

suggests that unless change in societal attitudes occurs visually impaired people are becoming at greater risk of unemployment and poverty.

Chapter One: Introduction

Background

Employment is more than purely exchanging labour for payment; it is a fundamental concept in the capitalist ideology that dominates western society by being part of social and cultural identity. Whilst creating social inclusion it can also alienate and exclude disabled people who cannot participate or who are prevented from participating in modern industrialised modes of production (Finkelstein, 1980). Through ignorance, negative stereotyping and discrimination society can, and does, exclude people from work creating social exclusion because citizenship is linked to paid work (Abberley, 2002). Oliver (1990) suggests no singular attributable factor for societal responses to impairment but rather that responses are generated by a complex relationship between political/economic ideology and society. In the United Kingdom (UK) employment is one of the wider strategies for economic organisation and social cohesion used by Government. Since the industrial revolution it has been used as a tool, to varying degrees, to shape the prevalent ideological thinking based within the framework of capitalism. This fluid ideology constantly changes to suit the needs and aspirations of those

in power. Consequently the level of state intervention can also vary or be targeted at specific groups to suit those needs (Grover and Piggott, 2005).

Current ideology is based on fiscal rather than socially inclusive policies. Demonstrated by the deregulation of the labour market moving away from policies which focused on inclusive methods of production and ensuring employment for disabled people. We now have a situation where disabled people are competing unequally on an individual basis against a non-disabled person (Barnes, 1991). Arguably this inequality creates the perennial outcry and negative spin by successive Governments at the high levels of people claiming incapacity and health related benefits. This creates a cycle of regurgitating failed employment policies which are essentially the same and aimed at the same target group (Danieli and Wheeler, 2006), for example Pathway to Work (PTW), the latest initiative to target people on Incapacity and other inactive benefits (Grover and Piggott, 2005). Despite the hype and procedural changes the bottom line remains the same; same jobs, same people, same employers, and the same social barriers. A driving factor behind this ideology and the recent

report by Freud (2007) outlining an overhaul of the Welfare to Work services is the financial implications to the State outlined in Thompson (2005). This, combined with the Leitch Report (2006) which examined the UK's long-term skills need, sends a clear message that employability is extrinsically linked to education and the Government wants people off benefits into employment. However, despite the rhetoric the Government's desire to see more disabled people in work and off benefits is not yet matched by access to equal education, training, and employment opportunities. The concept of paid work requires individuals to compete against each other to sell their labour to employers in an increasingly competitive market which clearly disadvantages or disables sections of society (Barnes, 2000). This is in addition to the wider discrimination (Barnes, 1991) and stigma (Goffman, 1968) faced by disabled people.

Why this research?

It is against this background that I chose to conduct a qualitative research dissertation into the employability of people with a visual impairment (VI). For the purposes of this work VI means any defect of vision which cannot be corrected by wearing spectacles or contact lens. Unless otherwise

stated for the purposes of this dissertation this phrase also encompasses people who are partially sighted and totally blind.

The research is primarily aimed at examining the different experiences faced by people with acquired and congenital VI in terms of their employability from a social model perspective. By this I mean that people are disabled by societal attitudes and the built environment rather than their own impairment (Oliver, 1990). Generally speaking they have had different socialisation, educational and work experiences (Oliver and Barnes, 1998) and this research seeks to examine what, if any, difference this makes to their employability. Focussing on these areas the research compares real life accounts of the barriers faced with statistical data and academic texts. The research seeks to analysis the overall employability of people with a VI in the labour market.

My interest stems from working for Action for Blind People (*Action*) where I manage a range of services including employment throughout the South West. This research will enable me to gain a more personal and deeper understanding

of issues faced from a VI perspective. Initially I was an Employment Coordinator with *Action*, during which time I began questioning whether people with acquired VI generally find it easier to find or retain employment than those with a congenital condition. Whilst both groups face societal barriers, those with congenital conditions have been subject to them for longer and have not always had the same educational and employment opportunities (Barnes, 1991). The question is relevant because it will help me to reflect upon current employment services provided by *Action* and to develop future services in terms of what we offer, how we operate, and also how we can work with other organisations.

Recent literature suggests children with a VI have lower educational attainment levels than sighted children and a high proportion have no formal qualifications at all (Mann, 2006). This supports my perception that people who acquire a VI in later life, after their formative school years, generally find it easier to find or retain employment than those with a congenital condition. However it is not that straightforward because people with an acquired VI may also have to retrain or learn new skills to retain or find employment. I am interested

to establish if the easier access to education, training, and employment for non-disabled people and their generally higher attainment levels makes it easier for those with an acquired VI to learn new skills. Consequently they may face the same issues and barriers people with a congenital VI faced albeit at a different stage in their life. Additionally people with acquired conditions also face many different personal issues in adjusting to life with a VI that people with a congenital condition many not have faced, something discussed further in Chapter Two. What effect does the different socialisation process have on people's long term employability? Are there societal barriers that will continue to prevent Government policies working? How do people with a VI feel about employment, are they properly educated, trained, and supported? How do the two contrasting groups differ in terms of education and employment? What are the wider issues for disabled people? These are all issues that I feel are, and will continue to be, prominent regarding people with a VI and their employability.

Research Aims

This research has three primary aims:

- To provide an account of the barriers to employment faced by people with a VI. Evaluated by critically assessing the barriers to employment including education and socialisation from a social model perspective.
- To highlight the different barriers faced by those with congenital or acquired eye conditions. Obtained through real life accounts and experiences of the issues and barriers faced by people with a VI.
- To produce and disseminate the dissertation in a variety of accessible formats for research participants and the University of Leeds within the financial constraints of this research.

Structure of the Dissertation

Chapter Two examines the current position in relation to educational and employment policies and trends for people with a VI. It also includes an outline of the social and individual models of disability which leads into the different socialisation processes for the congenital/acquired impairments. Chapter Three explains the methodology behind the research starting with the ontological and epistemological assumptions

underpinning the research. Also included are the reasons why the chosen data collection methods were used and the issues faced during the research. The next two chapters are drawn from the research findings and contain extracts from the interviews and are comparative between the two groups. Chapter Four explores the different barriers faced within the educational system including types of schooling and educational standards. Chapter Five examines barriers to employment, again highlighting the experiences of the research participants. It also examines identity and the future direction of the labour market. Both chapters also assess how social construction impacted on participant's education and employment. This includes wider societal issues of discrimination, and stigma and how this affects employment. This is followed by a discussion on the issues raised by the research drawing together the main concepts.

Limitations

There are limitations to the research in time, resources, and actual size of the research sample which restrict its influence and to an extent its credibility. However, whilst small in scale it does still provide a useful insight into the aims of the research

even though it does not provide definitive answers; in fact it raises more questions than it answers. Neither will it influence any major social or political changes but it does have the scope to influence local policy and practices.

Chapter Two: Key Concepts

Introduction

This chapter is divided into three sections placing the research within known or current thinking in relation to models of disability and how this relates to identity, education and employment, and concludes with a discussion of the key concepts. The social and individual models of disability are the crux of the comparison between congenital and acquired VI. People with a congenital impairment gain a “disabled” identity from birth whereas those with an acquired condition gain this in later life. Until the point they both become “disabled” the two groups are treated differently (Oliver and Barnes, 1998) and the aim is to establish if this affects employability. The different socialisation processes and consequent beliefs create and shape identity which can affect how a person deals with impairment and the disabling barriers within society.

Disability and Identity

Debates have ensued about the meaning of disability, giving rise to two main discourses of disability. An understanding of these is fundamental because how “disability” is understood can and does affect our beliefs and attitude towards others and

ourselves. The main two main approaches are the medical, also referred to as the individual model, terms which I will use interchangeably, and the social model. These opposing discourses are the crux of the portrayal of disabled people because one shows disability to be individualistic encouraging discrimination (Barnes, 1991), whereas the other is a societal creation (Oliver, 1990).

The individualistic view of disability is that the individual is disabled because they cannot participate in society like “normal” people because of their impairment. This is an attitudinal construct of societal imposed constraints on a section of society unable to compete with modern modes of production (Finkelstein, 1980). Therefore people with impairments, in this case VI, are disabled because of their exclusion from paid work (Barnes, 2000). The social model of disability is diametrically opposed to the individual model arguing that societal and environmental barriers cause disability and not individual impairment (Oliver, 1990).

To understand how this affects a person’s identity we must first look at socialisation because this is how our personalities and beliefs are shaped. Socialisation is greatly influenced by

culture which is complex and multi layered including language, images, advertising, arts, and all social activity. Culture is taught, learned, shared and is a manifestation of what we think, do and feel, the “values the members of a given group hold, the norms they follow” (Giddens, 1993: p31). Culture in this context refers to a way of life and can, as Williams (1981) describes, define human personalities, beliefs and what is “normal” because they are shaped by the culture and society within which they develop. Williams (1981) also suggests cultural practice helps to develop and shape social order (p12) and is a means by which beliefs and ideologies are communicated through society (p13). Culture in the sense of our learned behaviour can be a way of life, like capitalism or communism, it can be a set of universal practices such as communication, or it can be a sub-culture within society like disability (Peters, 2000).

Culture also shapes our notion of “normal” through repetitive patterns of action, behaviour; accepted standards developed over time or a pattern of thought which becomes an ingrained belief (Northern Officer Group, 1999). Applying this to impairment Parsons (1951 cited in Barnes *et al*, 1999) felt a

threat to the social system came from illness and disease. Good health was normal and anything else could be seen as illness, deviance or abnormal. This medicalising of disability developed out of industrialisation developing into a cultural norm and these negative attitudes in society are one of the biggest barriers to social inclusion (Barnes, 1997). This is emphasised by Goffman (1968) who developed the concept of “stigma”. He suggested that certain categories of people, including those with a physical or mental impairment, became stigmatised because they were not seen as human because they did not conform to “anticipated norms” (p14). He also suggests (p12) that we bestow a “social identity” upon others and that this can be based on a “discreditable attribute” based on stereotypical presumptions of what individuals should be. Therefore if we have been conditioned to believe that we are not normal because we have an impairment or that people with impairments are not normal, we are structuring identity to fit cultural norms even though misguided or discriminatory.

Visual Impairment and Identity

Scott (1969) suggests blindness is a cause of stigmatisation which causes a process of socialisation leading to a pattern of

behaviour in those who become blind through an acquired condition. People are conditioned through their own societal beliefs to believe they are disabled because they have VI. For those with an acquired VI this creates a specific set of problems affecting their employability. This could be through their own internal oppression (Rieser, 1990) or restrictions on retraining or learning new technology. Research by Baus (1999) found the psychological effects of an acquired VI could be devastating and most people went through many stages of emotion equated with bereavement; ranging from depression and anger to final acceptance. Scott (1969) is critical of this psychological approach suggesting that not everyone reacts the same and it could be an over generalisation.

People with an acquired VI have benefited from sight during formative years whereas different issues face those with a congenital VI. People with an acquired impairment are essentially assigned a new identity but those with congenital conditions acquire the disabled identity for birth (Oliver and Barnes, 1998). Approximately 80% of sense impressions are conveyed via the eye (Baus, 1999) which does affect a person's learning if born with a congenital condition. Theory of

the Mind provides the ability to understand the world around us and facilitates our learning experiences. For children with a profound congenital VI this can restrict social development, learning, and communication skills (Pring, 2008); creating a sense of isolation and exclusion which highlights differences by enforcing the stigma within the child with a congenital condition so that they grow up believing they are not normal (Barnes, 1997). For example during the early part of the 20th Century until the 1960's, educationalists following the individual model of disability implemented draconian methods of teaching which prevented partially sighted children from using their sight, forcing them to use Braille (French, 2005).

Essentially there are two forms of impairment identity: one congenital and one acquired, each bringing with it different societal barriers. Alongside this there are two forms of disabled identity: negative and positive. A negative disabled identity is associated with low self esteem, internal oppression; a positive disabled identity is associated with disability politics, pride, and culture (Oliver and Barnes, 1998). As Scott, (1981) states "The disability of Blindness is a learned social role" and

in terms of this research my question is, does this impact on employability?

Education: The Lack of Equality

Leitch (2006) highlighted the UK falls behind other countries in intermediate and low skills levels with around 50% of unemployed people having no qualifications, reducing their employability in a changing global economy. Employers are already seeking greater levels of qualifications and the number of jobs requiring no qualifications in the UK is set to decline by 25% in the next decade (Thompson Report, 2005).

Technological advances and a shift from the traditional concepts of work place greater emphasis on skills which increases labour market competition by reducing employment opportunities (Beck, 2000). The implications for “disabled people” are concerning because Thompson (2005) found when comparing Level Two qualifications approximately 60% of disabled 19 year olds achieved this standard in comparison to 77% for non-disabled of the same age group. Frighteningly “over 40% of disabled people have no qualification at all” (p7).

Leitch (2006) describes Level Two qualifications as five GCSEs A*-C or equivalent. Thompson (2005) suggests the

current educational system fails disabled people because mainstream education does not make sufficient adjustments (p30) leading to poor attainment levels and underachievement. Combined with a discriminatory labour market (Barnes, 1991) disabled people are clearly disadvantaged.

Focussing on the educational attainment levels of people with a VI, only 26% of 18-29 year olds achieved GCSE qualifications and for those in the 50-64 age range it fell to 20% (Douglas *et al*, 2006). Research by Douglas *et al* (2006) highlighted the fact that lower attainment levels were more prevalent in the older age group (p68) and the onset of a VI at an early age was equated with higher attainment levels (p69). Similar figures are reflected in Higher Education (HE) with lower attainment levels and lower levels of representation of students with a VI. Evidence also suggests higher levels of non-completion amongst students with a VI (Richardson and Roy, 2002). Visage (2006) found that only one in ten people with a VI had a university degree, below the national average. The research also found educational levels and access to lifelong learning play a crucial role in getting and keeping a job,

and concluded by stating people with a VI needed equal access to educational facilities.

The issue is not confined to older students and research by Mann (2006) found that there are over 20,000 children aged between 5-16 years in the UK with a VI severe enough to require support from special educational services. The research suggested the majority are educated in mainstream schools despite 30% having complex needs and multiple impairments. In some cases, schools had funding for specialist teachers but most used peripatetic teachers from the local authority VI Advisory Service. Generally there was a lack of trained support in mainstream schooling. This appears to be a common theme, Porter and Lacy (2008) found that teachers in special schools often did not have appropriate training and questioned whether pupils would be better served in mainstream schools with trained teachers.

Mann (2006) highlighted the lack of support available through the provision of text books and curriculum material in accessible formats. Examples being; at Key 3 stage, only three out of 129 Maths books were available in large print and

18 copies in Braille. English Language came out worse with one out of 143 available in large print and two copies available in Braille. These findings were replicated across other subjects in Key Stage 4; in Science none of the 21 books were available in large print and only one available in Braille. Consequently this restricts teachers' ability to provide the full curriculum and adequate support. Mann (2006) found that 92% of teachers surveyed suggested restricted access to material had an effect on children's social inclusion and education. Given that 33% of children with a VI leave school without any qualifications, the lack of available support and accessible resources remains inconsistent with national policies on education and employment.

Employment: Fiscal not Inclusive

Thompson (2005: p21) suggests eight million people are economically inactive of which Cameron (2008) suggest 2.64 million people claim Incapacity Benefit (IB) costing £12.65 billion annually, compared with £2.5 billion for Job Seekers Allowance (JSA). The actual annual financial saving of getting someone off IB and into work is £9,000 (Freud, 2007). Given the Government's desire to move a million people off

incapacity benefits the fiscally aimed policies, combined with deregulated labour markets, pose a threat to disabled people.

The new Employment Support Allowance (ESA) and changes to Personal Capability Assessment (PCA) are introduced in October 2008. Those actively seeking work will be entitled to a higher rate of benefit whilst those not seeking work and those who fail to participate in PTW may see a reduction in benefits (Grover and Piggott, 2007). Stricter criteria and tests for the PCA will also see more people moved from ESA to JSA (Grover and Piggott, 2007) which has a lower rate of benefit and entail active job seeking. PTW is mandatory for all new IB and ESA claimants; essentially it is dictatorial, process and target driven. It also contains a voluntary element to target disability related benefits including Disability Living Allowance (Pathways to Work, 2007).

My fear with this is that many people with a less severe VI will be forced onto JSA thus reducing the number of ESA claimants. A more cynical view is that governments manipulate policies to move people from ESA to JSA or visa versa to suit political aims. This carrot and stick approach

poses a risk because people with a VI will be forced into underemployment (Thornton and Lunt, 1995) or work that is totally unsuitable enforcing a negative disabled identity (Oliver and Barnes, 1998). The issue is how well equipped are people with a VI to participate in the labour market and how will these new policies affect them.

Visage (2006) research by organisations including *Action* looked at the employability of people with a VI. They found only one in four people with a VI of working age are employed. Douglas *et al* (2006) had similar figures of 28% in paid employment and 5% being self-employed. These figures have remained constant over the last decade, despite the introduction of schemes and legislation designed to promote the employment of disabled people (Visage, 2006). Sadly of those unemployed 76% felt it was unlikely they would find paid employment within a year (Douglas *et al*, 2006) and this is indicative of failed Government policies. Danieli and Wheeler (2006) describe many of the current policies as “old wine in new glasses”, they are right because it is still the same type of ideological policies and the same societal barriers.

Previous research (Tillsley, 1997) looked at employability and skill development as a whole reflecting different strategies for helping people with a VI find work but highlighted the need to concentrate on work with employers. However Roberts *et al* (2004) still found 50% of employers unaware of financial support available through Access to Work (ATW). Employer's perceptions are a major barrier; Roberts *et al* (2004) found 90% of employers thought it difficult or impossible to employ people with a VI. Interestingly Visage (2006) found of those who employed someone with a VI, 81% rated their performance as good as or better than non-VI people. Many barriers are caused through ignorance, not necessarily deliberate discrimination, the problem being socially created beliefs and assumptions (Barnes, 1991). Interestingly Douglas *et al*, (2006) found unemployed people with a VI felt a lack of suitable jobs, their lack of qualifications and employers' specific requirements were the main barriers to employment.

Discussion

The odds appear to be stacked against people with a VI in the current labour market. Socially constructed barriers based on the individual model of disability and widespread discrimination

coupled with Government ideology does little to help employability. Educational attainment levels are disappointing low with accessible information rarely available and inadequate teacher/student support. Employment rates for VI have been constantly low despite numerous employment programmes aimed at reducing rates of unemployment amongst the “disabled”. Specific qualifications/training appears to be a barrier to employment raising the question are these barriers the same for both congenital and acquired VI?

Chapter Three: Data Collection

Introduction

The strength of any research is validity drawn from sound reliable methods open to the audience, ensuring transparency and confidence in the conclusions (Silverman, 2005). This chapter seeks to demonstrate the research design and the methods used in data generation and analysis. It provides an explanation of the paradigms underpinning the research and outlines each stage of the project including Ethics and Dissemination.

The Research Perspective

Many theories exist on how knowledge of the world is obtained and how we understand reality. My ontological and epistemological standpoint is a mixture of paradigms drawing on different elements supporting this research (Mason, 2000). It is underpinned by a critical social model of disability/ participatory paradigm; meaning there are multiple subjective realities shaped by social construction, political and economic ideology together with our lived experiences (Lincoln and Guba, 2000). Therefore hegemony and political ideology are as one in social construction (Kincheloe and McLaren, 2000).

Socialisation through culture (Williams, 1991: Giddens, 1993) combined with socially created “disability” (Oliver, 1990) and exclusion from modern modes of production (Finkelstein, 1980) restricts societal participation. Therefore people are disabled because of their lack of inclusion in the educational system (Barnes, 1991) and exclusion from paid work (Barnes, 2000). I appreciate this represents a mainly historical and materialistic view of the cause of disability (Grover and Piggot, 2007).

However, I am also influenced by the holistic creation of knowledge and disability from all human experiences such as feminism, ethnicity, sexuality and cultural factors (Harding and Hintikka, 1983 cited in Punch, 2005: Morris, 1992).

I have undertaken this research as a non-disabled researcher which may be seen as a weakness. Oliver (1992) suggests research into disability issues should be controlled, instigated, and led by disabled people. However, Barnes (1992) feels good quality research can be produced by non-disabled people. A different perspective that suits the nature of this research is participatory methodology which Zarb (1992) describes as a relationship between disabled people and researchers. Swain and French (2004) describe participatory

research as with, rather than on, people. It stems from qualitative methodology with a commitment to include disabled people at every stage (Swain and French, 2004). I believe this, combined with the critical social model paradigm, is the strength of this research. The scale of the research restricted participant involvement but the focus group and validation of interviews/extracts does reflect a participatory approach (Mercer, 2002).

Data Collection Methods

Based primarily on qualitative methodology which is ideally suited to small scale research (Barnes, 1992), this cross-sectional study gathered information from primary sources through qualitative interviews (Kumar, 2005); generating a rich and subtle understanding of everyday life expressed in the words of the participant (Punch, 2005). To retain anonymity pseudonyms have been used. The research also contains an element of quantitative methodology using secondary statistical data from two employment-based projects; primarily because quantitative data can help disabled people prove the individual model is discriminatory (Abberley, 1992). The Swoop Project, (Swoop, 2007) and Nextstep's Skills Coaching

project (Nextstep, 2008) involved working with *Action's* clients in Devon to seek employment or training. This provided data on eye conditions, educational attainment levels, and employment or training outcomes for 71 people. To retain anonymity names have been replaced with numbers.

Corresponding data was also collated from the research participants. The purpose was to assess and compare the two sets of data when generating theories. Additionally allowing triangulation and cross checking of data to increase validity (Silverman, 2005).

Whilst the research was based in Devon; some of the participants have moved to Devon and have had social, educational and employment experiences elsewhere in the UK. The research reflects local employment issues and does not present a true national picture. The labour market in Devon is stable showing steady growth over recent years due to increased infrastructure. Both wages and unemployment are below the national average, seasonal work is prevalent in coastal areas; many of these vacancies are filled by transient workers. Poor public transport and the rural nature of the

county means transport is a barrier to employment (Devon Economic Partnership, 2008).

Participant Selection

All participants have association with *Action* and are known to the researcher. This is unavoidable given the available resources and aims of the research. The researcher-researched relationship was considered (Mason, 2000). Whilst there was a danger this may generate distorted accounts I feel the participants were more confident in expressing their true views. To reduce travel time and costs it was decided to draw participants from Exeter and Torbay.

The sample size was ten; five with a congenital VI and five with an acquired VI, of which one had a hereditary condition commencing aged 14 years and one had an accident aged 10 years affecting the latter part of their schooling. There was a mixture of six male and four female participants spread over a wide age range. The demographics of the county reflect a mainly white, ageing population. This is reflected in *Action's* client group and the participants, with one being Asian/British and nine White/British. This is not meant to be discriminatory

against other ethnic origins. A conscious decision was taken to include a mixture of employed, unemployed and retired people who have had a variety of experiences. The aim being to ensure a range of views was obtained and not just unsuccessful job applicants.

Focus Group

This had three aims, firstly it was a qualitative group interview; secondly it allowed participants to be involved in planning and designing the research including the interview format; thirdly it provided an opportunity, prior to the interviews, to explain the purpose and aims of the research (Tonkiss, 2004); and importantly the difference between the social/individual model of disability. I wanted to describe the aims of the research before the actual interviews allowing an informed decision on whether to participate. I also felt it important to explain the different models of disability to provide participants with an understanding of my beliefs. Much time was spent on aims two and three and in hindsight it provided little as a group interview.

Qualitative Interviews

The use of qualitative semi-structured interviews engaged participants to talk freely and openly about their experiences (Byrne, 2004). It allowed exploration of participants' knowledge, values, and experiences (Mason, 2000). The semi-structured interview had a number of specific themes, socialisation, education and employment, creating a framework whilst allowing and encouraging participants to enter into a dialogue about their experiences. When necessary I sought clarification using a mixture of open and closed questions (May, 1997) but participants were allowed to talk freely about their experiences. The use of verbal interviews removed the cost of large print/Braille/taped questionnaires which are beyond the scope of this research but ensured methods were fit for purpose (Mason, 2000).

Another aim was to generate measurable data including details of VI, educational attainment level and employment status. I initially intended to ask these as set questions at fixed points but my position changed following a trial interview when it was felt to be too prescriptive. Instead the questions were asked when appropriate in the flow of the interview if not already

covered in participants' accounts. This also meant not using scaled answers; consequently extracting data from the interviews became more interpretive.

The location of the interviews was discussed at the focus group and participants requested I visit their homes/work. All were by prior arrangement and planned to allow sufficient time. Consideration was given to the structure of the interview so it flowed chronologically, the way questions were asked, not using double-barrelled questions, rephrasing questions if necessary and seeking to clarify responses (Kumar, 2005). I was also aware of my body language and demeanour and ensured I dressed appropriately to ensure participants felt comfortable because some are more formal than others (May, 1997). I felt comfortable interviewing, having over 20 years experience in a wide variety of situations.

Data Analysis

The analysing of the interviews required the categorising of the data into key themes. They were transcribed allowing it to be translated into usable data achieved through coding and interpreting the information (Miles and Huberman, 1984). I

have used two methods. Firstly, measurable data consisting of a single nominal variable was coded to ensure consistency of answers by applying a numerical indicator to indicate eye condition, educational attainment level and employment status (Bloch, 2004). Qualification levels were then coded in line with the Qualifications and Curriculum Authority National Qualification Framework (Appendix A). This allowed triangulation of primary and secondary data acting as a quality control to assess the validity of the information (Silverman, 2005). The second method of data analysis was the use of the extracts from interviews to provide a summary of the participants' views, experiences and emotions (Punch, 2005). They are an "Analytical Lens" providing a retrospective interpretation of emotions, beliefs and social interactions (Chase, 2005). A narrative gained through qualitative interviewing creates a danger of moving away from fact to a greater emphasis on the narrator's version of reality (Holstien and Gubruim, 2000 cited in Chase, 2005). However this is what was sought, the interpretation of participants' own lived experiences which reflects their experiences of reality. The use of narratives can follow that of storyteller or story analyst although the distinction is often blurred and a mixture of

methods is often more productive (Smith and Sparkes, 2008). Narratives provide a subjective interpretation of a section of society, in this case VI, providing an account of how social processes and reality shape an individual's view of the world at that given point in history and culture (Owens, 2007). To analyse them, researchers must turn the stories into data to create a narrative analysis or use the stories themselves as the analysis (Smith and Sparkes, 2008). I have placed great emphasis on the latter by using extracts from the interviews but have also sought to generate theories from the extracts.

Using whole transcripts was unfeasible and difficulties were encountered knowing what to leave out; this resulted in the transcripts being read numerous times to ensure I developed a detailed picture of participants' experiences which could be summarised through extracts (Punch, 2005). Whenever necessary this was checked with participants to ensure I had interpreted their meaning correctly and not injected my own views.

I was also aware of my own bias and pre-research perceptions so sought objectivity by looking to refute my own and any initial

assumptions from the data (Kirk and Miller, 1986 cited in Silverman, 2005). This meant comparing data seeking to prove or disprove assumptions from the data against known facts (Silverman, 2005).

Ethics

Permission has been obtained from *Action* to interview participants and conduct this research. All information obtained will remain confidential and pseudonyms/numbers have been used throughout. Additionally most of this information is held on *Action's* database and is subject to data protection and confidentiality legislation. Consideration was given to ethical interviewing, the way questions were constructed, and the manner in which they were asked. The aim was to seek the informed views of the participants and care was taken not to mislead, misinform, or misinterpret at all stages. I have sought the informed consent of the participants (Kumar, 2005) and fully explained the purposes, aims, and implications of this research. All participants were given the opportunity to withdraw prior to the interview and all material including notes and tapes will be made available should they wish to have access. Participants were given the opportunity

to add or amend transcripts/extracts prior to use. Some of the information discussed was upsetting and caused a range of emotions (Silverman, 2005). Whenever necessary I offered to stop the interview and I set aside time after each interview to talk through any emotions raised, if appropriate. I did consider my own bias and how that may have applied to the research process (Mason, 2000). With this in mind I have sought to clarify my position both in terms of methodology and allegiance with the social model of disability. Despite this I have sought a true and balanced view throughout the whole research process.

Dissemination

There are no financial resources available for this research but every effort will be made to produce the dissertation in appropriate formats. The local *Action* hotel has agreed to provide copies of the dissertation in Braille; additionally large print and electronic versions will be available. Restrictions in resources mean no audio copies will be available. Copies will be made available to all participants, University of Leeds, and other interested parties.

Chapter Four: Educational Experiences

Introduction

In addition to imparting knowledge, education helps create our identity and can define our future working life. This chapter compares participants' educational experiences through statistical data and lived experiences. The section on learning experiences looks at all educational establishments focussing on the barriers to accessing education. This is followed by a comparison of mainstream and segregated education.

Intertwined with this is a discussion on how educational experiences shape social construction and identity. The next section looks at restricted opportunities and how they affect employment. The chapter concludes with a discussion on the issues raised from the experiences of the participants.

Comparing Qualification Levels

Data from the participants (Appendix B) illustrates that of the seven who had a VI during all or part of their schooling only one (14.3%) achieved Level Two qualifications. Of the three without a VI at school two (66.7%) achieved Level Two or above qualifications and one got no qualifications at all.

Interestingly this person was diagnosed with a VI shortly after

leaving school and it is unknown whether he had an undiagnosed VI during his education. Clearly there is a disparity between the groups in educational attainment levels demonstrating the inequality of the education system (Barnes, 1991; Rieser, 2006).

If we compare current attainment levels the gap closes.

Starting with the three with no VI at school, the one with no qualifications has not yet achieved any formal qualifications.

The other two both acquired their VI whilst in their twenties by which time they had achieved Level Five qualifications through Further Education (FE). However, both returned to FE/HE to obtain/upgrade further qualifications after acquiring their VI. Of the seven who had a VI at school six went on to achieve work based or FE/HE academic qualifications above Level Two.

One achieved Level Seven, two Level Five, one Level Three, two Level Two and one remained at Level One.

Comparatively the participants' overall educational attainment levels are high against previous research (Richardson and Roy, 2002; Douglas *et al*, 2006). A possible explanation being the research participants are not truly reflective of people with

a VI in terms of educational attainment levels; this is a small sample drawn from a small area. The quantitative data drawn from the Swoop (2007) (Appendix C) and Nextstep (2008) (Appendix D) projects tells a completely different story. The data from these projects is cross-sectional and no comparisons can be made with school attainment levels or qualifications obtained later. All participants on the Swoop project were aged 40 - 65 years and 47.1% with a congenital VI achieved a Level Two or above compared with 73.3% of those with an acquired VI. The Nextstep project covered an age range of 20 - 65 years and only 18.2% of those with a congenital VI achieved a Level Two or above compared with 30.8% for acquired VI. Both projects being lower in comparison to the participants where 80% of both those with congenital and acquired VI achieved Level Two or above at the time of the research. Interestingly the data from the two employment projects tends to suggest that older participants averaged a higher attainment level. This supports the suggestion that a high portion of people leave school with low qualifications before achieving additional vocational or FE/HE qualifications, which was the position with the research participants.

The Learning Experience

Chapter Two suggested not all schools provide good learning experiences either through lack of resources or adequately trained staff. The following extracts illustrate this.

Talking about her experience in mainstream Mary explains:

“It was a real struggle I was writing in charcoal in books made out of white paper used for wrapping things in butchers ... I couldn't read the board, I got teased a lot and was very unhappy”.

Susan, who attended mainstream, had problems regarding equipment and tutor support which clearly impacted on her education as she explains:

“I strongly feel now that had I had equipment, even just a talking calculator for my maths, I would have done well ... you were expected to get on with it ... they had support for people with learning difficulties but for visual impairment, people's attitude was 'just get stronger glasses' ... in several subjects I felt I could have done an awful lot better had I had a magnifier ... I wasn't supported and we had the bullying issue because of my eyesight ... the teachers didn't understand, we had all these

fractions on a page, I physically couldn't see what she wanted me to do so I didn't do it, they just thought I was being difficult or awkward".

Adam attended a special school and had a totally different experience:

"I got a computer and basically nothing was done on the board, the teacher came round and saw you ... mainly talking, basically describing what was in the books that we had in front of us. I really liked that, I found it very useful.

Other people's ignorance and perceptions mean that pupils, in this case with a VI, have to manage emotionally which impacts on their disabled identity. This would apply to all educational establishments when people with a VI strive for acceptance in the sighted world. In many cases, as highlighted here, people say nothing and just get on with their work, often without proper support but in fear of being seen to complain (Goode, 2007). Children with a VI face many difficulties in school and the lack of visual understanding can reduce social understanding. In some cases they can present as having socio-cognitive difficulties when all they need is time and a

different range of experiences in a conducive learning environment to develop their skills (Roe, 2008). Failure to provide this can lead to reduced social skills and a lack of confidence through a negative self identity (Oliver and Barnes, 1998).

The lack of text books was a common problem, as described by Katie when asked about the availability of textbooks:

“That was a nightmare you couldn’t get any text books in large print. What they used to do is blow it up on the photocopier and so you would end up with piles of A3 paper ... it did make it difficult ... blowing something up isn’t always beneficial for a visually impaired person because it’s going to increase more scanning”.

A similar issue was experienced by Maggie who, when asked about accessible textbooks, replied:

“I didn’t get that, no nothing ... I took a lot longer reading books as I had to read word for word and I scan rather than, I presume people look at a page and see a whole line, I have to work my way across and back”.

Maggie went on to achieve 10 O' levels which, given the resources, was a truly remarkable feat. She later went on to take A' levels but again experienced resource issues:

“I had to drop the English because it was too much reading ... I couldn't keep up ... I didn't get any support”.

One of the other issues raised was around note taking as described by Katie:

“The other thing was taking notes down in lectures, you would have to sit at the front, in front of the blackboard, teachers writing wasn't always fantastic ... a lot of it I used to copy from my friend's book but as for sitting there and writing that was difficult”.

Lack of materials can have a profound effect on educational outcomes because memory is aided by the use of pictures and text (Pring, 2008). This clearly disadvantaged many of the research participants and all those who had a VI during their schooling had some difficulty accessing course material. Lack of materials in accessible formats creates other issues apart from restricting the learning experiences. It can affect self esteem, social inclusion, independence (Mann, 2006), quality

of life, psychological well being and social development (Ali *et al*, 2006). For children with a VI social development and children's ability to understand other people's beliefs can be developed through the use of language (Pring, 2008). This puts great emphasis on the language used because negative stereotyping creates negative self imagery (Rieser, 1990). This institutional discrimination can lead to disabled children being conditioned for a life of dependency through reduced social expectation and levels of achievement, which creates a culture of negative stereotyping (Barnes, 1991).

When asked, none of those with acquired conditions after schooling remembered experiencing any similar problems with accessing material. Clearly what we are seeing is a clear picture that the education system failed those with a VI during their school years.

Other issues raised relate to the lack of communication between schools and parents as illustrated by Peter:

“I just think a lot of lack of responsibility on my parent's part and the school's behalf as they didn't talk about it. I don't think much would have changed

... but it was never talked about; I was just given darker lines ... I've done my exams on my own and read the papers and have often thought afterwards did I not do so well because I didn't understand what I was reading and how I was making words up".

Interestingly he found a local FE college better with some elements of support:

"Any paperwork, they would invert for me, because having a black background and white text I could make out the tables and ledgers and it gave me a mental image when someone asked me a question".

He did have a support worker which he found helpful:

"The fact we had to do some computer work at the college and a lot of it is to do with Sage, they had no provision for that and I had to sit with someone and they would be my eyes. It was a way around it but there was no real provision there for me to go and do it".

However issues remained with equipment:

"The only other thing they had was a CCTV ... it took three or four weeks to turn up, and because I have a

black background and white text it wouldn't turn itself negative enough".

Despite the provision of a support worker which Peter found useful there appears to have been little or no consultation or preparation regarding equipment:

"There was no initial meeting; it was all telephone work ... there was no computer accessible as there were problems to do with licences and funding ... they had all the equipment and servers but they had no licence for Supanova".

Peter relied heavily on a support worker which is sometimes appropriate, but had the correct equipment been available he would not have been so disempowered, doing more himself. Arguably strengthening the disabled identity by creating dependency enforcing societal restricts on individual abilities (Oliver and Barnes, 1998).

The example given by Paul illustrates personal discrimination:

"I only had the one eye, the head teacher took a dislike to me ... I had the one eye that wouldn't move like the other eye, teacher said you can't even look straight".

Having had a bad experience in mainstream Paul left school with no qualifications before returning to HE where he obtained a degree and a postgraduate qualification, although he had to work much harder than others:

“I had a Braille machine and a typewriter and no support other than a reader ... it was hard, very hard. At three, four o'clock in the morning because I couldn't do notes and Braille in lectures, I used a tape recorder I took the tape recorder back to my room and did my notes in Braille so I could read it, it was treble the work”.

In addition to the extra time writing notes and course work there is a shortage of note takers for blind students meaning without proper support they fall behind. VI students in HE tend to be older white males and VI students entering HE tend to have lower qualifications than those with no disability reflecting poorer attainment levels in secondary education (Goode, 2007). Research by Richardson and Roy (2002) suggests textbooks or lecture notes in accessible format are less accessible in HE compared to secondary school or FE with 83% of VI students stating it took longer to complete

coursework. Many students also expressed difficulty using libraries and with mobility on campus.

The three participants that acquired a VI after their schooling had mixed success with further training. Craig felt that the Royal National College for the Blind (RNCB) provided him with all the support he needed which aided his learning and retraining:

“I went to RNC, learned how to adapt using CCTV and magnification and found there is still things I can do and then I went on from there and did an Access course and trained as a physiotherapist”.

Robert also had a reasonably positive experience when upgrading his qualifications at a local university:

“That was an interesting situation as I was the first blind student that they had taken on in this particular area. I was in an environment with Service people that all admitted they had never come across a blind person ... I think it worked well and certainly the University benefited from that as well ... I was the first blind person they had there and I had to sort my own support out”.

Barry had a totally different experience:

“They took me around the college but when I was supposed to start there was no support. Then I went to college somewhere else and there were no visually impaired people and the teachers weren’t used to teaching visually impaired people but they did try to help”.

Interestingly Robert and Craig both achieved above Level Two at school and both attended a Royal National Institute for the Blind (RNIB) Rehabilitation Centre, whereas Barry did not.

This raises issues of acceptance and emotional support.

Students with acquired impairments are often still coming to terms both physically and psychologically with their impairment and this affects their studying (Goode, 2007).

Robert who is conducting his own research into the emotional impacts of acquired VI describes this point well:

“You get what everyone describes as a bereavement process, when you hit a low between months one and six and I think if you’re not supported between months three and six in particular then, yes, you’re right, people just carry on going down, it’s up to six

months before people really start to get support, social support and emotional support, which is a very big part of turning the corner”.

Craig took time to accept his VI:

“I withdrew within myself for a while, a year later after coming back I was still in denial ... it took four years before I accepted it”.

Segregated or Mainstream

The Special Educational Needs Act 2001 applies to schools and FE/HE establishments and was intended to promote inclusive education. Whilst it removed two of the clauses restricting inclusive education from Section 316 of the Education Act 1996 it left intact Section (B). It also left these clauses in Schedule 27 thus maintaining the get-out clauses used by Local Authorities reducing inclusion to a geographic lottery (Rieser, 2006). If not subject to a statement of special educational needs, children should be educated in mainstream schools but if statemented they can be educated in mainstream unless it is incompatible with the wishes of the parents or deemed to prevent the provision of efficient education for other children (Talbot, 2002).

There are risks involved in educating children with special educational needs in special schools because of the isolation and standards of education and in mainstream because of the bullying and isolation (Cole, 2006). Barnes (1991) argues special schools enforce the barriers between disabled and non-disabled children through the individual model of disability. He suggests they generally fail to provide acceptable levels of education and life skills. Whereas French (2006) points out many people do acquire a decent education in special schools; strong friendships and a sense of belonging are often experienced. In many cases with the participants it was a matter of personal experience. Mary had been to mainstream before moving to a special school:

“I found there that I got the kind of information and training I wanted ... being with other people who had the same kind of problems was fantastically good for me psychologically. They knew things I had not even thought of and I found myself in the end thinking in a totally different way to the way I had done before. I found I fitted in whereas I had never fitted in at a sighted school, never ... some of the teachers, when I was in sighted school didn't want to

have to spend time with me, they considered that was a waste of time. I am still very, very nervous and very highly strung because the struggles I had completely undermined me”.

Peter who went to mainstream had a different view:

“I’m pleased I went to a mainstream school because I think the alternative would have been to go to the West of England School and although I would have had support I would have been away from my mates”.

Whereas Adam found the lack of support too much in mainstream:

“I went to a mainstream school and they integrate. I wasn’t coping there and they thought I was silly, but what the problem was I couldn’t see the blackboard and they didn’t realise that. It took a year for them to notice, that’s not good. Then I went to a special needs school, but the eyesight was the main thing. I really enjoyed that school.

Segregation can have a negative affect because children develop social skills through many strategies including non-verbal behaviour. In children with a VI this can be

compensated by tone of voice and through friendships (Roe, 2008). If children are segregated they are removed from this experience with non-VI children leading to negative self imagery and socially created barriers (Oliver and Barnes, 1998).

Attitudinal barriers existed with the parents of two of the participants:

“My parents didn’t want to go down that route they wanted me to go to mainstream school”. – Susan

“I should have gone to a blind school right from the beginning but my mother fought against it tooth and nail”. – Mary

Arguably this reflects society’s attitudes towards special schools which still carry a stigma for educating those not deemed to be educable and normal (Barnes, 1991; Rieser, 2006). Indeed many employers question the work readiness of pupils from segregated schools and look less favourably at their employability (Thomlinson and Colquhoun, 1995).

Attainment levels figures from the West of England School for Children with Little or No Sight in Exeter show in 2005 only 7% of pupils attained Level Two qualifications compared with an

average of 55.9% in mainstream schools within the same local authority (Department for Children, Schools and Families, 2005). Poor attainment levels combined with the stigma and prejudice will limit employability.

To survive, many special schools are becoming generalist and Porter and Lacey (2008) have doubts about the provision of education in generic non-VI special schools due to the lack of trained staff. They suggest children with a VI would receive a more inclusive and constructive education in mainstream schools with access to specialist VI support. In their research they found VI pupils a small minority group being taught by staff without a specialist sensory qualification and 50% of staff having no Special Educational Needs training qualification. Talbot (2002) argues that special schools still have a place in the educational system suggesting greater co-operation and cross working between mainstream and specialist schools could create an inclusive education. Whilst there has been legislation encouraging integration it has been resisted by both teachers and local authorities (Rieser, 2006). Issues remain about schools underperforming in national league tables and

committing to real inclusive education for all would be a great political risk for Government (Cole, 2005).

Restricted Opportunities

The UK lacks an inclusive structured education and training programme to enable disabled people to compete in the changing world of work (Roulstone, 2002). In liberal economies like the UK, which are based on competitive non-cooperation between rival companies, employers have traditionally favoured academic rather than vocational qualifications (Dieckhoff, 2008). This leaves individuals who are not academically inclined, or in this case people with a VI who have not had equality of education, with restricted employment opportunities (Rieser, 2006). The lack of intervention in terms of a structured national policy on education and training for the workplace allows the labour market to become literally survival of the fittest, meaning many disabled people become excluded both physically and in terms of skills (Roulstone, 2002). Where vocational or in-work training is available it tends to be specific and not easily transferrable (Dieckhoff, 2008) restricting opportunities for those with an acquired VI to transfer occupations. This brings

us back full circle to the issues faced in education and training demonstrating the need to break the circle of despair.

Leitch (2006) suggests gaining qualifications will solve the problems faced within the labour market; it will solve some because having educational qualifications improves employment opportunities (Burchardt, 2000). Interestingly, research by Douglas *et al*, (2006) seemed to suggest that more people with a VI are claiming they had GCSE level qualifications than ever before, however it did not indicate at what level. Whilst that may be a step in the right direction we should look at the results of Katie:

“I did my GCSE, I think I did 11 and I got D grades, so I just missed out”.

She would have missed some employment opportunities because many employers are looking at minimum Level Two qualifications, with people below that getting excluded. When assessing qualification levels and employment Leitch, (2006) states:

“Increasingly, Level Two is the minimum platform of skills required for employment and business competitiveness, as global economic changes

reduce the employment opportunities for the unskilled” (p.19).

Rieser, (2006: 158) argues that for education to be truly inclusive there needs to be a removal of the “physical, communication, social, attitudinal, educational and institutional barriers” that currently cause inequality within the educational system. The language used within the education system is important because children are labelled because of their impairment and often become known because of this label (Rieser, 2006). In this case people with a VI are given a label and social identity by those around them (Goffman, 1968). If we accept that our social construction shapes our beliefs then we have had many generations of people growing up to believe that those with a VI cannot see or do anything constructive in the workplace. They are seen to be helpless as often portrayed in the media; the media can fuel institutional discrimination towards disabled people through images, terminology and the lack of representation of disabled actors and disabled people in fictional and non-fictional programmes (Barnes, 1992).

Discussion

The findings suggest that at school stage there is a disparity between the participant groups which is later reversed with educational attainment levels being similar overall. Issues still remain with equal access to education not only in terms of the mainstream/segregated debate but with practical resources. The lack of equipment and core curriculum material available in the correct format is something of a disgrace for a so-called developed nation. This chapter looked at learning not only from an educational perspective, but how it affected social construction and cultural identity. Through this, our early school years have a major impact on defining our future including our employability. This is not only through educational levels but also in our confidence, self esteem and our own identity. As suggested earlier Leitch (2006) believes low skill levels are why many disabled people and benefit claimants are unemployed. He is partially right but the experiences highlighted in this chapter demonstrate the Government needs a more inclusive and structured educational and training policy.

Chapter Five: Employment Experiences

Introduction

Building on the inequality within the educational system this chapter examines the discriminatory barriers faced in employment. It commences with a comparison of the employment data from the research highlighting the links between educational levels and employment. This is followed by examining the barriers faced by participants whilst job seeking and actually in employment. What the statistics do not show is the barriers faced and their comments are particularly poignant. The next section explores disability, identity, and employment. The penultimate section looks at the future impact of current and proposed policies and ideology. Finally the chapter concludes with a discussion on the issues raised.

Employment Data

At the conclusion of the Swoop project 23.5% with a congenital VI were in paid employment compared to 30% with an acquired VI. No-one with a congenital VI had taken up training/voluntary work compared with 16.7% with an acquired condition. The Nextstep project saw different results with more people moving into training/voluntary work but less into paid

work. Of those with a congenital condition 18.2% went into paid employment and 45.4% into training/voluntary work. Of those with an acquired VI 23% found paid employment and 38.5% entered training/voluntary work. The research participants fared better with two (40%) of the congenital group in paid employment, two (40%) unemployed and one (20%) retired. Of the acquired VI group three (60%) are in paid employment, one (20%), is unemployed and one (20%) retired.

When combining the congenital and acquired figures 27.6% of those on the Swoop project went into work whereas only 20.8% of those on the Nextstep project found paid work.

Discounting the retired participant, of the remaining eight, five (62.5%) of the combined group are in paid employment. This suggests a correlation between employment rates and educational attainment. There is an ascending order of employment levels which corresponds with higher educational attainment levels. The Nextstep project had the lowest educational and employment levels, next came the Swoop project with both higher educational and employment rates than those on Nextstep. Finally the research participants had the highest levels in both.

Despite a wealth of legislation and Government policies statistically the unemployment rates for VI remains high showing evidence of failed Neo-Classical policies based on non-intervention and a lack of compulsion to force employers to employ disabled people (Barnes and Mercer, 2005). Also the Disability Discrimination Act 1995 (DDA) appears to have had little effect on VI employment rates with figures in 2002 being similar to before the DDA came into force (RNIB, 2002).

Barriers to Employment

This section focuses on barriers to work in general, without comparing acquired and congenital. These differences are more appropriately discussed in disability and identity where the differences are more apparent. The research suggested all participants encountered the same barriers when applying for employment regardless of when they became VI. The following highlights some but by no means all of the barriers faced by the participants and people with a VI in general.

Attitudinal barriers are a major obstacle as can be seen from the following extracts:

“I got turned down for a lot of jobs when they found out about my sight problems. They kept telling me it was because of the insurance, if I had an accident they wouldn’t be covered. There is still that stigma and people are discriminated against”. - Barry

This suggests systematic employer discrimination persists within the labour market (Roberts *et al*, 2004).

“I worked on farming, which was my love and when my sight went they dumped me in a factory as I hadn’t got the education to go anywhere else or do anything else ... what they offered me was to go and make baskets”. – Paul

Roulstone (2004: 197) suggests there are four main barriers to work for disabled people, personal, attitudinal, environmental and Governmental policies. The first relates to social capital which he explains as disabled people have less to offer in terms of educational and employment capital than non-disabled of the same age. Arguably this is because of low expectations of disabled people by the self and society, together with lower educational attainment levels (Barnes *et al*, 1999); a point highlighted by Mary:

“Everybody was the same; you were factory fodder that’s all you were, if you were capable of doing that”.

The actual application process can be demoralising. This is supported by research of Graham *et al* (1990 cited in Roulstone, 2004) who found that in comparison to non-disabled people those who declare they were disabled are twice as likely to get negative replies. The following extracts demonstrate the point with neither being successful:

“When I left college I couldn’t get a job. I applied for about 100 jobs I think, once they saw the disability, I didn’t get interviews”. - Maggie

“In a two year period I probably applied for 400 - 450 jobs”. - Robert

The whole process can be daunting with many job adverts in newspapers being in small print. Often application forms are not accessible in appropriate formats, websites are not compatible for screen readers or magnification packages preventing online job searching, and completing of application forms (Simkiss, 2005), and often incorrect or inappropriate support is made available. Robert had a very successful

career prior to acquiring his eye condition; he recounts his first experience with the Jobcentre:

“I had been registered partially sighted in the late 80s and turned up at the Job Centre ... but I was treated as a normal unemployed applicant. For the first six months I was unaware of DEAs [Disability Employment Advisors], Access to Work and didn't get anywhere”.

This raises the issue of career advice, support from job brokers, DEAs and anyone else involved in employment advice. A study by Maher (2001) highlights the fact that careers advice had little influence in helping blind professionals. He found support and encouragement from within the family played a greater part in their success. The research also highlighted the need for greater support in transition from school to employment services. Another frightening point raised was many careers guidance workers are themselves stereotyping those with a VI into work they think they can do. Often leading to underemployment and an enforced negative disabled identity (Oliver and Barnes, 1998).

The actual detail required on application forms also causes difficulties as explained by Robert who stopped declaring he had a VI:

“I realised that revealing your sight loss on the initial approach to a company is not a good thing. I began to tailor the job applications ... and certainly there was a noticeable increase in success rate for job applications”.

Robert also took exception to the requirement for a driving licence which can be seen as a discriminatory requirement. This closed question rejects applicants and the use of ATW by not seeking an alternative answer (Roulstone, 2004: Simkiss, 2005):

“The issue with regard to you must hold a full driving licence ... when you see it come through it is an essential. I have applied for those jobs and I’ve been shortlisted and been to interview and the question is ‘you said you’ve got a driving licence’ and I’m saying, ‘yes, because you haven’t given me the opportunity of having anywhere else to state that I’m

able to have access to a vehicle to do the requirements of the job”.

The actual interview can reveal a lack of understanding, a point highlighted by Robert when talking about his experience with professional interviewers:

“When I revealed it [VI] they totally fell apart and they said how can you find your office door, how can you go upstairs, how do you do this, how do you do that? They just lost it ... to be fair the general reaction is that when you are blind you are not employable”.

Location is an important consideration because in many cases ATW will not provide travel costs if public transport is available. However, available and accessible are two different concepts as the following highlights:

“I can’t see what number bus it is and I’m always having to ask or grab somebody in the street and ask them which bus goes to where. I can’t read timetables, even if they’re there. Sometimes I get the wrong bus ... if I do look for a job I look for somewhere I more or less know the location. I

wouldn't consider applying for a job where I didn't know it at all". - Susan

For many people with a VI computers are a means of communication and employment opportunities. A socially created barrier is the lack of access to computers and associated training on both the software and assistive technology packages (Douglas *et al*, 2007). Several of the participants had issues with obtaining equipment:

"Technology was limited and it took a long time to get the equipment, a long time to get any sort of training on it and they gave you the least they could".

- Paul

Paul also recruited in his capacity as a manager:

"I took on a couple of visually impaired people and it took six months to get their equipment, and they didn't get the equipment they were trained on".

Maggie later recalls how she got a job working in administration with the Ministry of Defence:

"There wasn't any help at work for the first three or four years. You just did it. I got a new boss and he found a CCTV and they got me a 23 inch computer screen. Work got a bit easier once I got the CCTV".

Adam remembers first starting work with the local authority;

“My first boss ... was all of a fluster as she didn't know how to support someone with a visual impairment. She was flapping and very reliant on *Action* to provide support with equipment”.

Some employers are unaware that people with a VI can do certain tasks because they are unfamiliar with equipment like screen readers, magnification packages and scanners. In some cases even basic changes to the background colour and font size can make a big difference (Roulstone, 1998).

The social model suggests that disability has its roots in industrialisation (Finklestein, 1980: Oliver, 1990) but Sapey (2000) suggests we are also now in an “Informational Age” which in itself can be a disabling factor by excluding low skilled disabled people due to a non-disabled hegemony within the workplace. In some cases this is traditional work done in a new way but in other areas technology creates new types of employment (Roulstone, 1998). It also creates dependency on technology which can also be a disabling factor (Oliver and Barnes, 1998). For example:

“They wouldn’t purchase my equipment for me ... we explained the Access to Work process but they still wouldn’t pay. I was off work medically for a while because they put pressure on me, expecting me to work without the full equipment that I needed”. -

Susan

Clearly dependant on equipment to access the labour market, Susan was discriminated against, she returned to work to encounter further problems:

“I was sacked because they thought I was too slow and I didn’t have any of this special equipment, it was ordinary equipment which wasn’t adapted ... they knew how bad my sight was. I was just told ‘I’m, sorry but you’re too slow you’ll have to go’”.

Susan encountered further problems with another employer who had used ATW to purchase equipment, because employers are still ignorant about disability and visual impairment (Simkiss, 2005).

“I was told could you minimise your special equipment down so you can see both columns on an Excel spreadsheet and I said no because I need to have it this big to see what I am doing. He said if

you minimise it you can see both columns, to me this is not having an understanding of someone with a visual impairment”.

Paul found that a change of manager brought with it blatant discrimination:

“This woman that came in and just dismissed them all. All the disabled people that were there she came in and wiped them out and told me bluntly she was going to get rid of me”.

He moved to another employer but again encountered problems:

“They kicked me out, I became ill, far too much work. That’s the big downside to being visually impaired, unless you get the support”.

The benefit system is also a barrier to work in that it is often confusing and people at the lower end of the skills market with lower paid jobs are often worse off (Stanley, 2005):

“I’d have to pull in more than £130 a week and I can’t do a full-time job because of my stamina and I don’t think there is part-time work which is going to pay me more than I get on benefits”. - Adam

Sadly, Adam feels financially trapped, desperate to find paid work and come off benefits but unable to because of the current welfare benefits system. This adds pressure to disabled people because, as Barnes and Mercer (2005) point out, social inclusion through employment is reduced by the fact work and welfare are separated although interlaced in terms of eligibility.

Often people need additional support but are reluctant to say anything, drawing a parallel with issues in education. This can be associated with disabled identity because in the following extract Adam failed to say anything because of what he thought others would think, in itself a barrier (Roulstone, 2004):

“I think I was scared because I didn’t want to lose my job. Although they would help me, I always felt under pressure as I was the new one in there and I got the dross. Although I struggled doing it I thought they would think it was me trying to get out of doing it”.

A change of employment brought with it a more supportive employer, proving they do exist and workplace inclusion is achievable:

“From passing the interview to starting, I got Draco [Guide Dog] so I went and had a chat to the manager as I was concerned about trying to prove myself and having a dog was perhaps another way of saying I can’t do things. But they were brilliant and asked what I wanted, dog bowl, bed? And without really asking they have built him a pen out of the back ... there are lots of positives going on”.

Many participants felt confidence was a big factor in gaining employment. Highlighted by Craig in the following extracts when talking about acquired VI and confidence:

“The biggest barrier to me and people I have come across is confidence. I think basically because I had vision, I know what is coming up, I know what is there, I know what things look like and should look like and so it makes me more confident. I’ve seen it before and I can picture it in my mind and I retain a lot of that and have built a lot of confidence which I lost when I lost my sight. That’s one of the most important things I have, is my level of confidence. But there are people who have acquired it who never regain their confidence”.

Talking about congenital VI he went on:

“There are some who are totally confident but there is generally a lack of confidence in people who are born with a visual impairment”.

In relation to Barry, he initially retain his employment but in a different capacity:

“I think if you had employers that would take you on, that would give you more confidence. Help you get your confidence back”.

Through repeated setbacks Barry feels that he now lacks confidence in the labour market. When he initially acquired a VI he did retain employment:

“I kept my job but I couldn’t do the driving and they put me in the stores to do mechanical work and things like that”.

In many cases people with an acquired VI or a worsening congenital condition lose their jobs; employment retention is an area where greater work is needed. Government needs to create an inclusive strategy incorporating ATW, post and pre-employment services and financial incentives to retain people in work. This is more cost effective than supporting via welfare benefits or finding new employment (Mercer, 2005).

Employment and VI Identity

Statistically the research data suggests that people who acquire a VI are slightly better educated and appear more successful in the labour market. This can arguably be down to those with a congenital VI having less educational opportunities (Barnes, 1991) and reduced confidence through having societal oppression for longer (Oliver and Barnes, 1998). At the point when both groups assume the disabled identity, one congenital and one acquired, they are both subject to the same disabling barriers (Oliver and Barnes, 1998). The following extracts highlight issues faced with identity. Craig had an acquired condition:

“I tried to overcompensate a lot in interviews and avoid questions relating to my disability which didn’t make me come across well. I feel I was my own worst enemy I had to really accept myself and get used to being who I am, rather than trying to pretend”.

Goffman, (1968) suggests there are several ways to gain a “disabled identity”, one of which is for people with an acquired impairment to re-evaluate themselves as an individual in society’s context of “abnormality”. This is particularly difficult

because whilst a person may think they are normal, and of course they are, they are aware from their own social construction that others do not see them as normal (Scott, 1969). In Craig's case personal acceptance is restricted by society's failure to accept VI. Scott (1969) suggests a person's identity can be under attack from within and without through negative attitudes gained in a sighted identity. The danger is that focusing on impairment and disability can reinforce internalised oppression with all of its negative implications regarding identity (Rieser, 1990). This can lead to people denying, hiding, or seeking to reduce the stature of their impairments (Shakespeare, 1996).

What we see next from Craig is an acceptance of himself and wanting to be accepted by others for who he is:

“I then thought the only person who is going to take me seriously is me and I don't know my limitations, other people may but I didn't want limitations put upon me as I had seen others having them put on them or putting them on themselves. I don't have any limitations”.

Robert who again had an acquired condition developed a more outwards identity:

“In my case I feel my sight loss is a hidden disability ... I mean as a person I have changed, I used to be fairly placid. I wouldn't say I am aggressive but I'm confident. The option is that you sit back and do nothing. Well, I wasn't going to do that”.

Adam who has a congenital condition takes a very positive identity:

“I don't see my disability as a negative; I see it as a positive”.

Katie had two fundamental issues to deal with in her childhood; she has albinism and consequently a VI. For her the sense of identity caused cultural difficulties:

“I think it was more to do with the albino; I suppose being Asian but not looking Asian is very difficult for people to understand. Also, you didn't fit in any category not very nice growing up with it and adjusting to it as a child because we didn't have a proper sense of identity”.

She then goes on to talk about the portrayal of VI:

“I think in society it is portrayed as a lot of people think you can’t do anything”.

A further discriminatory barrier which emphasises the disabling societal attitude towards VI was given by Craig:

“When they had dignitaries coming up from London I would always be called out to meet these dignitaries, I wasn’t being wheeled out for my ability it was my condition. That was the one thing I always hated the most, it’s not why I’m employed and it’s not who I am”.

Social integration is about everyone accepting people for who they are, accepting difference:

“I do strongly believe in integration because that is what creates an awareness and what helps the next generation understand that. Yes, there are people out there with disabilities and it doesn’t make them less than normal people. It’s vice versa as well; it’s good for the visually impaired person to be integrated in to a sighted world”. - Katie

Media can play a part in this because the predominant portrayal of VI is on negative imagery based on dependency and helplessness (Barnes, 1992). This reflects into

employment with portrayals blaming the individual rather than society for unemployment (Bolt, 2006). There are also positive images often depicting blind people being artistic and possessing heightened senses. This pressurises the disabled person to conform to stereotypical imagery especially in those with an acquired VI who have been sub-consciously conditioned by these images through the socialisation process. In many cases people with a VI have to work harder in a discriminatory society to achieve the same as others. This is unrecognised and often attributed to increased senses by a false positive stereotype therefore undermining the person (Bolt, 2006). Many issues outlined about both the “self”, wider societal identity and stereotyping have been faced by the participants in this research. Many organisations use “emotional labour” in the way they operate inducing workers into emotional behaviour within their roles. This can be by surface acting to get the desired result or by playing on the emotions of the workers to get them to perform at increasingly high levels (Wilton, 2008). This compounds the issue because disabled people are engaged in additional emotional effort to fit within a non-disabled work place and in some cases conceal

their true identity to conform. They are forced to absorb others emotions whilst restricting their own (Wilton, 2008).

The Future

The recent consultation on Improving Specialist Disability Employment Services (2007) disclosed plans to merge Workstep, Work Preparation, and the Job Introduction Scheme. Additionally these programmes are to be target-driven specifically around job outcomes and support being time-bound to force open employment. Whilst some will benefit, others are likely to fail in open employment without a change in societal attitudes. A further indication of the Government's intentions are found in the Welfare Reform Bill (2007). Previously unconditional non-active benefits will become conditional through the ESA being tiered through active job seeking. The PTW programme is now compulsory as are the work-focussed interviews which are enforced by the punitive use of reducing or stopping welfare benefit related sanctions for those who do not participate in work related activity. Both PTW and its predecessor New Deal for Disabled People (NDDP) are supply side policies which are target driven aimed at matching skills with employment opportunities

(Danieli and Wheeler, 2006). This puts emphasis on the individual being responsible for their employability. Cole (2008) suggests that the creation of catch-all type employment programmes by New Labour indicates that social inclusion has become dependant upon participation in paid work or at the least participation in actively seeking work or training.

Additionally there has been a move towards global capitalism leading to macro level influence of large supra-national corporations on national economic, welfare and employment policies. In the UK successive Governments have put corporate objectives before national policy by shying away from interventionist employment and economic policies in favour of a facilitative approach (Roulstone, 2002). Also increasing technical nature and automation of work requires fewer workers than the previous mass production manual labour methods associated with Fordism (Beck, 2000). This, combined with the globalisation work without proper regulation, means that current employment policies aimed at getting disabled people back to work will fail (Roulstone 2002). None of this bodes well for the future employability of those with a VI given the societal, educational and employment barriers

discussed in this research. Berthoud (2008) suggests disabled people can be split into two groups, one capable of work and one who are not. Those that are capable should in an inclusive society having employment rates similar to non-disabled people. Like their non-disabled counterparts there are roles people with a VI are not qualified to do, or their impairment will not allow them to do, despite workplace adjustments (Lee, 2002). For those who cannot work the reconceptualising of employment advocated by Abberley (2002) and Barnes and Mercer (2005) would offer social inclusion and reduce stigmatisation for those currently excluded from employment.

Discussion

This chapter highlights many issues for people with a VI in the labour market that are not easily reconcilable. Some of the physical barriers can be overcome with the use of ATW providing equipment, support workers, or workplace adaptations. What ATW, the DDA and the increasing complex welfare rights and employment policies cannot do is to change societal attitudes. Statistically the participants show above average employment rates but the secondary data is, I believe,

more representative of the VI employment sector. The comparison between the two groups demonstrates a small difference in employment rates. The barriers to employment endured were the same for all participants whether acquired or congenital because, by that stage, they had both become disabled within the labour market. In essence this is the crux of the issue because when job seeking there is little noticeable difference to the barriers they face.

Chapter Six: Research Findings

Summary

The aims of this study were to explore the different barriers faced by people with either a congenital or acquired VI and to analyse the barriers to employment faced by people with a VI from a social model perspective. A central theme running through the research has been the recent drive aimed at improving educational standards (Leitch, 2006) and the fiscally driven employment policies (Danieli and Wheeler, 2006). The intention was to examine how this will impact on VI jobseekers in relation to the research findings. This chapter will now review the findings in relation to the research aims through the key points of education, employment and identity discussed in Chapter Two. The findings provide an insight into the issues raised but due to the size and nature of the research no definitive conclusions can be drawn.

Education

A comparison of the primary data clearly displayed a difference in educational attainment levels between the two groups on leaving school concurring with earlier findings (Douglas *et al*, 2006). A snapshot of current attainment levels from both sets

of data suggests the gap closed through Vocational/FE/HE qualifications although the acquired group had achieved slightly better attainment levels. This indicates the education system fails to support children with a VI both in terms of accessible resources (Mann, 2006) and inclusive education (Barnes, 1991; Rieser, 2006). The learning experience was overwhelmingly poor within the congenital group enforcing the disabled identity upon the individual through societal discrimination (Oliver and Barnes, 1998). The study highlights the lack of resources which, if occurred in a developing country, would cause a public outcry. Furthermore the learning environment and styles outlined by Roe (2008) and Pring (2008) together with the learning of life skills and societal discrimination (Barnes, 1991) raises issues about segregated schooling. The fact some of the participants enjoyed the experience is arguably due to the failing of the educational system rather than the benefits of special schooling. The acquired group also experienced issues but by this stage they have had a “normal schooling” and developed social skills. Their issues were focussed on practical accessibility and identity both of the “self” and societal. The link between education and employment is clear and the drive to increase

the nation's skills levels is to be welcomed. However this will disadvantage many people with a VI who struggle to attain Level Two due the inequality with the educational system. Unless the Government tackles this I fear we will see many disabled people alienated and kept within a poverty trap by the hegemony on a non-disabled society.

Employment

The research data again shows that the acquired participants fared better although the gap is smaller. The barriers faced when job seeking and whilst in work applied equally to both groups. The levels of unemployment from the two sets of data again concur with previous research (Douglas *et al*, 2006).

There are a number of reasons for this. There is a lack of understanding and fear of VI within the sighted world.

Misconceptions abound about people seeing nothing at all and reduction in abilities. A VI does not render a person incapable of work, nor does it drain them of all intelligence or reduce their ambitions in life. The restrictions upon them are societal, both in the built work environment through the means of production (Finklestein, 1980) and attitudinal (Oliver, 1990). This study shows that discriminatory attitudes remain with employers

(Taylor *et al*, 2004) as demonstrated in the extracts from the participants. Many employers remain unaware of ATW (Roberts *et al*, 2004) and the available technology. They fail to provide adequate training and support, demanding workers with a VI operate without the correct equipment, a point also highlighted in the extracts. The application process from advertising, application forms to interviewing is flawed and designed for sighted people as outlined by Simkiss (2005); the practicalities of which physically exclude people with a VI from the labour market. Legislation aimed at reducing discrimination is failing (Roulstone, 2002) and appears little more than a toothless tiger. PTW and the welfare reforms take an individualistic approach to employment putting the ability to impose sanctions in the hands of those who are targeted to achieve unrealistic job outcomes. I fear we will see a lot of people forced into jobs that are unsuitable for their eye condition or jobs which enforces underemployment (Thornton and Lunt, 1995).

Identity

Above I mentioned barriers to employment applying equally to both groups; the difference was how they dealt with them. On

the one hand the congenital group had grown up with a disabled identity; the barriers they faced may have strengthened this identity. The fact that some overcame the barriers stems from confidence of having a positive disabled identity, for others the barriers deepened the sense of alienation and negative identity within a disabling society (Oliver and Barnes, 1998). The acquired group had to accept and develop a new identity which the employment process helped shape. In a sense it forced them to accept a new identity which in the main was a positive identity. Some are still struggling because society has forced upon them a negative identity reducing confidence and self esteem. This compounds the internal oppression (Rieser, 1990) enforcing the pattern of behaviour outlined by Scott (1969). The current education and employment policies will exclude rather than include people with a VI. This will deepen societal discrimination by enforcing perceptions of the negative disabled identity. Sadly it will also enforce the negative disabled identity of many disabled people.

Conclusion

I started this research with the perception that those with an acquired condition would generally find it easier to secure employment than those with a congenital condition.

Statistically this appears to be the case but many of the societal and practical barriers apply equally to both groups.

The study has also raised two other questions which I believe have had an effect on the participants, but was beyond the size and scope of this research:

- What support is there for the transitional period between school and work and how affective is it?
- Does a supportive family environment affect a person's future confidence, identity, and employability?

One of the other aims from this study was to develop *Action's* services and it has highlighted to me the need for earlier intervention. If children/adults are given proper careers advice at an early stage it can promote a positive disabled identity, confidence and direct studies to the appropriate qualifications.

Giving people life and educational skills will reduce dependency, which is the ultimate aim. *Action* has already started working with the local authority to create an employability course with sections of it being taught by people

with a VI. The pilot scheme is already successfully running, however the biggest change needs to come from society. Society has become materialistic at the expense of social inclusion. The social model is correct in that society is the disabling factor but for many the benefits of capitalism outweigh the suffering of the minority. People with a VI have the skills and an ambition to work, what is preventing them is a discriminatory society. The current and proposed policies outlined put welfare and employment within the market place with minimum controls. Left unchecked the alienation of disabled people and specifically those with a VI will continue. True inclusion and equality will not happen through capitalism or limited state regulation of employment/welfare policies. The social model has achieved much in the past decades but to be truly successful it requires a change in the very construction of our society and this will only properly work when we have the political and social courage to put people before profit.

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APPENDIX A

QCA – Qualifications and Curriculum Authority National Qualification Framework

QCA – the Qualifications and Curriculum Authority is responsible for the National Qualification Framework.

➤ **Entry Level Qualifications**

This level of qualification recognises “basic knowledge and skills and the ability to apply learning in everyday situations under direct guidance or supervision”. Learning at this level involves “building basic knowledge and skills and is not geared towards specific occupations”.

Examples of this qualification are the Entry Level Certificate in Adult Literacy and Entry 1, Entry 2 and Entry 3, in a range of subjects.

➤ **Level 1 Qualifications**

This level of qualification recognises “basic knowledge and skills and the ability to apply learning with guidance or supervision”. Learning at this level is about “activities which mostly relate to everyday situations and may be linked to job competence”.

Examples of these qualifications are NVQ1, Certificate in Plastering, GCSEs Grade D-G, Certificate in Motor Vehicle Studies.

➤ **Level 2 Qualifications**

This level of qualification recognises “the ability to gain a good knowledge and understanding of a subject area of work or study, and to perform varied tasks with some guidance or supervision”. Learning at this level involves “building knowledge and/or skills in relation to an area of work or a subject area and is appropriate for many job roles”.

Examples include NVQ2, GCSEs Grade A-C, Certificate in Coaching Football, Diploma for Beauty Specialists.

➤ **Level 3 Qualifications**

This level of qualification recognises “the ability to gain, and where relevant apply a range of knowledge, skills and understanding”. Learning at this level involves “obtaining detailed knowledge and skills. It is appropriate for people wishing to go to university, people working independently, or in some areas supervising and training others in their field of work”.

Examples of this qualification include: Certificate for Teaching Assistants, NVQ 3, A Levels, Advanced Extension Awards, Certificate in Small Animal Care.

➤ **Level 4 Qualifications**

This level of qualification recognises “specialist learning and involves detailed analysis of a high level of information and knowledge in an area of work or study”. Learning at this level is appropriate for “people working in technical and professional jobs, and/or managing and developing others”.

Examples of this level of qualification include: Certificates of Higher Education, Diploma in Sports and Recreation, Certificate in Site Management, Certificate in Early Years Practice.

➤ **Level 5 Qualification**

This level of qualification recognises “the ability to increase the depth of knowledge and understanding of an area of work or study to enable the formulation of solutions and responses to complex problems and situations”. Learning at this level involves the “demonstration of high levels of knowledge, and high level of work expertise in job roles and competence in managing and training others. Qualifications at this level are appropriate for people working as higher grade technicians, professionals or managers”.

Examples of qualifications at this level include: BTEC Higher National Diplomas, Diplomas of Higher and Further Education, Diploma in Construction Certificate in Performing Arts, Foundation and other degrees that do not typically provide access to postgraduate programmes.

➤ **Level 6 Qualifications**

This level of qualification recognises a “specialist high level of knowledge or an area of work or study to enable the use of an individual’s own ideas and research in response to complex problems and situations”. Learning at this level involves the “achievement of a high level of professional knowledge and is appropriate for people working as knowledge-based professionals or in professional management positions”.

Examples of qualifications at this level include: Bachelor degrees with honours, graduate certificates and graduate diplomas, Certificate or Diploma in Management.

➤ **Level 7 Qualifications**

This level of qualification recognises “highly developed and complex levels of knowledge which enable the development of in-depth and original responses to complicated and unpredictable problems and situations”. Learning at this level involves the “demonstration of high level specialist professional knowledge and is appropriate for senior professionals and managers”.

Examples of qualifications at this level include: Masters degrees, postgraduate certificates and postgraduate diplomas, Fellowship in Music Literacy.

➤ **Level 8 Qualifications**

This level of qualification recognises “leading experts or practitioners in a particular field”. Learning at this level involves the “development of new and creative approaches that extend or redefine existing knowledge or professional practice”.

Examples of qualifications at this level include: doctorates

APPENDIX B

Data from Research Participants

Participant	Paul	Maggie	Robert	Adam	Katie	Mary	Susan	Craig	Barry	Peter
Gender	Male	Female	Male	Male	Female	Female	Female	Male	Male	Male
Ethnicity	White British	White British	White British	White British	Asian British	White British	White British	White British	White British	White British
Qualification level on leaving school	0	3	2	1	1	0	1	2	0	0
Mainstream or special school	Both	Main	Main	Both	Main	Both	Main	Main	Main	Main
VI whilst at school	From age 10 years	Yes	No	Yes	Yes	Yes	Yes	No	No	From age 14 years
Qualification level in 2008	7	5	5	2	5	3	1	5	0	2
Obtained after VI if acquired	Yes	N/A	No	N/A	N/A	N/A	N/A	No	N/A	Yes
Employment status	R	U	E	U	E	R	E	E	U	E
Eye condition acquired or congenital	A	C	A	C	C	C	C	A	A	A

Key: A= Acquired C= Congenital E = Employed U = Unemployed R = Retired

Data:

Total Congenital - 5

Above Level Two at school = 1 (20%)

Below Level Two at school = 4 (80%)

Above Level Two in 2008 = 4 (80%)

Attended Mainstream = 3 (60%)

Attended Special School = 2 (40%) also attended Mainstream for part of their schooling

Employed = 2 (40%)

Unemployed = 2 (40%)

Retired = 1 (20%)

Total Acquired - 5

Two acquired a VI whilst at school neither obtained Level Two at school

Of the other three, 2 (66%) obtained above Level Two and 1 (33%) below Level Two

Attended Mainstream = 4 (80%)

Attended Special School = 1 (20%) also attended Mainstream for part of the schooling

Employed = 3 (60%)

Unemployed = 1 (20%)

Retired = 1 (20%)

At School Comparison

VI at school = 7

Above Level Two = 1 (14.3%)

Below Level Two = (85.7%)

No VI at school = 3

Above Level Two = (66.7%)

Below Level Two = (33.3%)

APPENDIX C

Clients from South West Opportunities for Older People Project

All participants lived in Devon and were aged over 40 years of age and unemployed at the start of the 12 month programme.

All names have been removed and replaced with numbers.

Client	Sex	Ethnicity	Age	Qualification Level	Outcome	Eye condition Congenital or Acquired
1	Male	White/British	57	3	Employment	Acquired
2	Male	White/British	54	0	Unemployed	Congenital
3	Male	White/British	53	2	Voluntary work	Acquired
4	Male	White/British	62	3	Voluntary work	Acquired
5	Female	White/British	47	4	Unemployed	Acquired
6	Female	White/British	53	0	Unemployed	Congenital
7	Female	White/British	55	4	Employment	Acquired
8	Female	White/British	52	4	Unemployed	Acquired
9	Female	White/British	48	4	Employment	Congenital
10	Male	White/British	48	0	Unemployed	Acquired
11	Female	White/British	47	0	Unemployed	Congenital
12	Male	White/British	52	0	IT Training	Acquired
13	Male	White/British	48	5	Employment	Acquired
14	Male	White/British	42	0	Employment	Congenital
15	Male	White/British	58	0	Employment	Acquired
16	Male	White/British	56	0	Employment	Acquired
17	Male	White/British	48	2	Employment	Acquired

18	Male	White/ British	51	4	Employment	Acquired
19	Female	White/ British	55	0	Unemployed	Congenital
20	Female	White/ British	56	0	Unemployed	Congenital
21	Male	White/ British	58	5	Unemployed	Acquired
22	Male	White/ British	52	3	Unemployed	Congenital
23	Male	White/ British	52	0	Unemployed	Congenital
24	Female	White/ British	54	2	Employment	Acquired
25	Male	White/ British	62	2	Unemployed	Acquired
26	Female	White/ British	49	3	Employment	Congenital
27	Male	White/ British	45	2	Unemployed	Acquired
28	Male	White/ British	48	5	Unemployed	Acquired
29	Female	White/ British	50	2	Unemployed	Congenital
30	Female	White/ British	53	0	Unemployed	Congenital
31	Male	White/ British	64	0	Unemployed	Acquired
32	Male	White/ British	61	2	Employment	Acquired
33	Female	White/ British	48	4	Part Time College	Acquired
34	Male	White/ British	57	3	Unemployed	Acquired
35	Male	White/ British	53	3	Unemployed	Congenital
36	Male	White/ British	59	4	IT training	Acquired
37	Female	White/ British	51	2	Unemployed	Acquired
38	Male	White/ British	47	0	Unemployed	Acquired
39	Male	White/ British	54	0	Unemployed	Congenital
40	Female	White/ British	51	4	Unemployed	Acquired
41	Male	White/ British	58	1	Unemployed	Congenital

42	Female	White/ British	49	2	Employment	Congenital
43	Female	White/ British	48	5	Unemployed	Acquired
44	Female	White/ British	56	2	Unemployed	Congenital
45	Male	White/ British	52	2	Unemployed	Acquired
46	Male	White/ British	50	None	Unemployed	Acquired
47	Male	White/ British	53	1	Employment	Acquired

Total Congenital = 17

Total below Level Two qualification = 9 (52.9%)

Total with Level Two or above = 8 (47.1%)

Total in paid employment = 4 (23.5%)

Total unemployed = 13 (76.5%)

Total unemployed but entered into training/voluntary work = 0

Total Acquired = 30

Total below Level Two qualification = 8 (26.7%)

Total with Level Two or above = 22 (73.3%)

Total in paid employment = 9 (30%)

Total unemployed = 16 (53.3%)

Total unemployed but entered into training/voluntary work = 5
(16.7%)

All figures rounded to the nearest percentage point.

APPENDIX D

Clients from Nextstep Skills Coaching Project

All participants lived in Devon and were aged between 20 and 65 years of age and unemployed at the start of the 6 month programme.

Client	Sex	Age	Ethnicity	Qualification Level	Outcome	Eye condition Acquired or Congenital
1	Female	26	White/British	2	Unemployed	Acquired
2	Female	26	White/British	5	Paid employment	Congenital
3	Male	33	White/British	1	Unemployed	Congenital
4	Male	29	White/British	0	Entered full time training	Acquired
5	Male	30	White/British	2	Unemployed	Congenital
6	Male	29	White/British	3	Paid employment	Acquired
7	Male	22	White/British	1	Entered part time training	Congenital
8	Male	50	White/British	0	Unemployed	Acquired
9	Female	50	White/British	1	Voluntary work	Congenital
10	Female	35	White/British	1	Entered part time training	Congenital
11	Female	50	White/British	0	Entered part time training	Acquired
12	Male	42	White/British	1	Entered full time training	Congenital
13	Male	46	White/British	1	Entered part time training	Acquired
14	Female	27	White/British	2	Entered full time training	Acquired
15	Male	43	White/British	0	Voluntary work	Congenital
16	Male	52	White/British	0	Unemployed	Acquired
17	Male	49	White/British	0	Paid employment	Acquired
18	Male	23	White/British	0	Unemployed	Congenital

19	Female	54	White/ British	1	Paid employment	Acquired
20	Female	27	White/ British	1	Unemployed	Congenital
21	Female	22	White/ British	1	Unemployed	Acquired
22	Male	35	White/ British	0	Entered part time training	Acquired
23	Female	64	White/ British	3	Unemployed	Acquired
24	Male	42	White/ British	1	Paid employment	Congenital

Total Congenital = 11

Total below Level Two qualification = 9 (81.8%)

Total with Level Two or above = 2 (18.2%)

Total in paid employment = 2 (18.2%)

Total unemployed = 4 (36.4%)

Total unemployed but entered into training/voluntary work = 5
(45.4%)

Total Acquired = 13

Total below Level Two qualification = 9 (69.2%)

Total with Level Two or above = 4 (30.8%)

Total in paid employment = 3 (23%)

Total unemployed = 5 (38.5%)

Total unemployed but entered into training/voluntary work = 5
(38.5%)

All figures rounded to the nearest percentage point.

Participant Profiles

Adam

Adam is aged 29 years and was born with Cerebellar Ataxia, a syndrome which has many different causes, the commonest in the UK being multiple sclerosis. Adam uses a wheelchair. A consequence of his condition is Nystagmus which is the uncontrolled movement of the eyes usually from side to side but it can be vertical or circular and often causing a reduction in vision and difficulty in focussing. He suffers from a lack of stamina and can only realistically work part time.

Adam attended both mainstream and special school before attending a specialist college offering further education (FE) qualifications. He also attended mainstream FE gaining further qualifications. At present he does infrequent training sessions as a disability awareness trainer.

Barry

Barry is aged 50 and acquired Retinitis Pigmentosa (RP) when aged 16-17 years of age. RP is a group of hereditary eye disorders affecting the light sensitive tissue lining at the back of the eye called the retina.

He left school with no formal qualifications but secured a position as a trainee mechanic. At this point his VI was discovered. Barry worked in various warehouse and gardening roles but spent long periods unemployed. He has tried unsuccessfully to attend local colleges but found they could not support him properly.

Craig

Craig is aged 42 and at the age of 21 developed an eye condition called Leber's Hereditary Optic Neuropathy which is only passed from mother to offspring and primarily affects young adult males. It is a degeneration of retinal cells leading to an acute loss of central vision, usually starting in one eye but then progressing to both. It causes permanent loss of visual acuity, a reduction in field of vision and loss of colour vision. In Craig's case he has no central vision and the peripheral vision is blurred which he describes as looking

through frosted glass. He is registered blind and can see no colour apart from blue and yellow, but does retain light perception of objects.

Craig had been working as an electronic engineer when he woke up on morning and found his vision blurred. It worsened and was later diagnosed as Leber's Hereditary Optic Neuropathy. The effect of this hit him hard and he took about four years to come to terms with his visual impairment. He had obtained an HNC in electronics and despite having a promising career ahead of him he could not carry on in this field. Craig attended a RNIB rehabilitation centre and started the retraining process which he continued at the Royal National College for the Blind (RNCB) before qualifying as a physiotherapist. He worked on a self-employed basis for some time before taking on several different paid employment roles. He is now in a role offering advice and guidance to disabled people.

Katie

Katie is 29 years of age and is Asian. She was born with Oculocutaneous Albinism which affects the melanin pigment in her eyes, hair and skin. It affects visual acuity causing, in this case, a form of short sightedness that cannot be corrected with glasses, Nystagmus which is described above, and sensitivity to bright lights. Katie, although Asian, has white skin and blonde hair which caused some difficulties in her childhood because it created problems with her sense of identity and she was the victim of bullying. Katie is registered blind but does retain some vision.

She left school with 11 GCSEs all grade D but then went on to the RNCB and took resat four exams, obtaining better grades. She also obtained BTEC in Business and Finance (Merit) before qualifying in Massage and Aromatherapy. Katie then qualified as a Rehabilitation Officer for Visual impairment via a course with Guide Dogs for the Blind and now works for the local Sensory Team.

Maggie

Maggie is aged 53 and unemployed, although this is by choice. She had Retinitis Pigmentosa from birth when half of the cells in the retina did not grow (described under Barry). She also has Nystagmas (described under Adam). Maggie is registered

blind although she does retain some useful vision and uses a guide dog.

Maggie attended mainstream school and obtained 10 O levels and two A levels. She later went to college and obtained a teaching Certificate but failed her degree course. She worked in nursery schools but was unable to secure a place in teaching, her primary aim. Maggie later went to work for the Civil Service before leaving to have children and raise the family. Following this she never went back to work and although now technically unemployed it is by choice.

Mary

Mary is aged 62 years and has a number of eye conditions. When she was aged two she fell off a swing and detached her retina which went undiagnosed until aged six. Subsequent operations failed to reattach the retina and when aged 11 the other retina also failed through being born with High Degree Myopia, which is a degenerative condition. It caused stress on the retina causing it to fail. It also created blurred vision and acute focussing problems. She also had cataracts which compounded the other conditions. Initially she could still see light and dark but now describes her vision as looking into thick pea soup. Mary is registered blind and uses a guide dog.

Mary attended both mainstream and special schools leaving with no formal qualifications. She went through secretarial training and held various telephonist roles until retraining as a Technical Officer which was the forerunner to the Rehabilitation Officer for Visual impairment. She worked at various locations but suffered several periods of depression finally leaving work on ill health.

Paul

Paul is 66 years of age and retired. He is totally blind, following an accident when he lost the sight in one eye and then developed a condition called Sympathetic Ophthalmia. In this case Paul was hit in the eye with a stick causing blindness in one eye when aged 14 years. This caused the other eye to stop working and although there are now drugs which can fool the good eye into working at time of Paul's accident medicine was not sufficiently advanced and he eventually lost the sight in both eyes when aged 21 years. The injured eye is termed

the "exciting" eye while the uninjured one is the "sympathetic" eye. The original eye injury always involves the uvea, specifically the ciliary body, releasing uveal pigment into the bloodstream. This triggers the formation of antibodies which cause inflammation of the uvea in the uninjured eye with gradually progressive loss of vision. Paul is now registered blind and does not have any vision; he is a guide dog user.

Paul attended both main stream and special schools leaving with no qualifications. He later attended mainstream college of his own accord achieving both O and A levels before taking a degree. He then took a postgraduate diploma before following a career in Human Resources. He later became a lecturer at Guide Dogs before being made redundant following a restructure of the training centre. Paul retired shortly after this. Prior to gaining his qualifications Paul did have periods of unemployment and struggled to find work. He did work for a long period in a sheltered workshop.

Peter

Peter is aged 29 and his eye condition is Rod Cone-Dystrophy. This is an inherited progressive disease that causes deterioration of the cone and rod photoreceptor cells and often results in blindness. The rods relate to the peripheral vision and the cones being the central vision. In Peter's case he has both a lack of peripheral vision which is closing in and unfortunately the same thing with the cones and the central vision which is working its way out. He does retain some vision which is blurred but the residual vision is fading and he fully expects to lose his vision completely. This is a hereditary condition but he did not notice any impact until age 14.

Peter left school with no qualifications but later obtained Level Two equivalent at a local college. After school he worked in a number of bakeries whilst training for the Sydney Para Olympics in which he won a silver medal. Due to fading vision he withdrew from sport and concentrated on his career and now works for the local authority.

Robert

Robert is age 54 years and acquired his visual impairment when aged 26 years of age. He has a condition called Matt Dot Fingered Dystrophy which affects the cornea. He also has

Retinal Dystrophy with both appearing to be progressive and his sight has continued to deteriorate with the prognosis being total blindness. There is no vision in the left eye and fluctuating vision from nothing to about 20% in the right eye.

Robert was well educated before his acquired VI. He worked as a Civil Engineer and had his own company for a while. Following his VI he struggled to find work before attending a local University to upgrade his qualifications. He later obtained work initially back in Civil Engineering before moving to his current post of Facilities Manager.

Susan

Susan is aged 35 and her eye condition is called Retinopathy of Prematurity which is a potentially blinding eye disorder that primarily affects premature infants that are born before 31 weeks of gestation. This disorder, which usually develops in both eyes, is one of the most common causes of visual loss in childhood and can lead to lifelong vision impairment and blindness. In Susan's case she was born before the blood supply to the retina was developed leading to bleeding and scar tissue formation. She does retain some central vision but has lost all peripheral vision. The residual vision does vary on a day-to-day basis from clear to blurred.

Susan left school with nine O levels but only one at grade C. She later attended a specialist residential college to obtain IT and business qualifications at Level One. Susan has worked in several call centres before taking up her current role in customer service.