

Social Services are dying: long live charity

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Where are all the activists who have worked so hard for Direct Payments and anti discrimination legislation - the two main demands of the disabled people's movement for so long. Well maybe their job is done; we've got direct payments and anti-discrimination legislation haven't we?

Well on paper yes we have both these things. But are they going to give us the rights, choice and control that we had hoped for? I would say not. I would say that our victories are being used against us. That we are expected to meet our responsibilities of citizenship but continue to be denied equal rights and involvement.

I would add that charities and non-disabled professionals still dominate and have adapted themselves to muscle in to keep their vested interest and control over our lives.

The Disability Rights Commission is there to do work which is similar to the Equal Opportunities Commission and the Commission for Racial Equality. However for disabled people there is the added complication of the disability industry, which is a major part of our oppression. The people who are involved in the disability industry (they are the ones who have big conference, with free lunch, to talk about us and never think to involve us, or think that we have something to contribute) are now taking control over the things we have fought for.

In relation to independent living I believe that things are going backwards. I never thought I would regret saying that the survival of Social Services Departments is doubtful. I believe the future of Social Services Departments is grim and within 5 years they will be dead. You might want to dance on the grave shouting, "Yes! Yes! Yes!". But

before you do that let's think about what this means for disabled people who are entitled to personal assistance.

Social Services for all their faults are public bodies, they are accountable to the public, changes in politics within government and local authorities will influence how they operate. The public can have some influence over this by who they vote for. I have worked for many years on the inside to bring about change; I've been involved with others in getting some real change very recently in my area. It has taken a long time to get to this point. Now it is about to disintegrate.

The work that Social Services Departments have been doing with children is largely being moved to Children's Departments, which are led by Education and Life Long Learning Departments. And we know what their record is like on the way they treat disabled children, where educational psychologists condemn children to a life of segregation and dependency from the age of two years.

The work in relation to adults is gradually being moved toward health authorities. Many Health Authorities already take a lead on joint commissioning of service to people with mental health needs and people with a learning difficulty. In some cases bringing these two groups of people together without other disabled people. This takes us back forty years or more where the different issues relating to people who have these particular types of impairment were not recognised. It is similar to the categorisation used by the Commissioners of the Poor Law (mental defectives and the insane were one category under the Poor Law).

Also based on Poor Law groupings, younger disabled people with physical impairments are grouped with and generally treated as older people (known as the aged and infirm under the Poor Law). Because of the sheer numbers involved this area of support is dominated by the requirements of older people. Issues which are usually specific to younger disabled adults from the age of 18 years; whether it is about moving from childhood to adult hood, moving away from parents and setting up home, training, finding work, being a parent, will be way down the list of priorities.

Already Local Authorities determine their priorities for younger disabled adults with physical and sensory impairments by the requirements of older people for the most basic support relating to eating, personal hygiene, (or as professionals put it feeding and toileting) safety and protection from abuse. That older people are treated in this way of only being allowed the most basic life support is appalling, to include younger adults from the age of 18 years in this only makes the problem worse.

The medical model approach, which will be continued by the dominance of Health Authorities, is frightening in the extreme. The NHS Confederation has been promoting their suitability to deliver "Care" services in the Community (Guardian 14.6.00. Society Section)

What is also happening is that more and more Local Authorities are contracting out or commissioning their services, in relation to disabled people's services, it is mostly charities that get these contracts.

Local authorities will accept tenders on the basis of Best Value – but basically this is who can do the job for the least money. This is denied of course because Best Value is not just about cost it has to take into account efficiency and effectiveness, so whilst the very cheapest tender may not be the one that is taken, it will certainly be one of the cheapest that is.

This means that even where there is a disabled people's organisation that would be capable of running the service they would not necessarily have a chance against local or national charities because of the cost of maintaining the decent standards, which we would insist on.

The charities will win hands down most of the time because they have sleek machinery in the form of teams of people whose sole job is to gloss up public and business relations, fund raise and gain contracts of work from Local Authorities. They are ready and not just waiting but being very pro active. They have the structures, they have the resources.

Charities already deliver more services on behalf of Social Services to people with a sensory impairment (including deaf and hard of hearing people). In the Poor Law these groups of people were referred to as defectives and were often singled out by philanthropists (do gooders) for special treatment.

My concerns are most strongly felt in relation to the management of Direct Payments Schemes. I am increasingly alarmed that another disability industry is being created. There are not enough organised disabled people to manage these schemes. It is a good income generation area for charities and a career opportunity for non-disabled professionals, especially if they can demonstrate that they “have done a lot of work for the disabled”.

So wherever those activists have gone they are still very much needed, what is needed even more are new people with fire in their belly and anger at the injustice of it all. I do not know how this is going to happen, but I am sure that we must take a new approach. The movement needs to let go of the past; particularly the in fighting, our strength is in our togetherness. If there are people putting their energies into having a go at other activists then it is time they put that energy into pulling together to rebuild the movement. Activists who are fighting for equal rights and independent living for all disabled people regardless of impairment, who are criticised because of perceived omissions, are simply going to get fed up and move on.

We need to reconsider our strategies because we are now fighting a different battle. However the enemy is still the same in this arena in that it is still mostly charities and professionals in the disability industry that have to be taken on. Perhaps we do still need to bring back our old slogan of “Rights not Charity”.