



Disabled people
working together
for real choices

Real Opportunities for All

Strategic Plan 2020 - 2025

Contents

Foreword	4
About Real	5
Our understanding of disability	5
What makes us “Real”	6
Our vision	6
Our mission	6
Our values	7
Real as a charity	7
Real’s Strategic Objectives 2020-25	9
1. Disabled people have increased income and an improved standard of living	9
2. Disabled people are more able to live independently, express their views, and participate in their communities	9
3. Disabled people are more able to access services, facilities and activities that meet their needs	10
4. There is attitudinal change around disability	10
Real’s Organisational Objectives.....	11
1. Being an effective, efficient, independent, user-led, expert on disability in Tower Hamlets.....	11
2. Improved reach and connections with our members, constituents and stakeholders	11
3. Financial sustainability	11
4. Understanding the impact of everything we do	12
5. Contributing to strategic change at local, London and national level.....	12
How we will make a difference	13
Our model of change	13
What we will do.....	14
How we will prioritise our work.....	15
How we will measure our outcomes and impact	16
Partners and Networks.....	17
Key local stakeholders.....	17
Organisational structure and governance.....	19

Appendix 1 - The evidence on disability in Tower Hamlets	20
Levels of disability.....	20
Income and work	21
Housing	22
Independent Living, Public Space and Social Life	23
Key concerns raised by constituents and stakeholders	23
Independence	24
Equality	24
Access and participation	24
The UN's concerns over disabled people's human rights in the UK	25
Appendix 2 - Organisational Analysis (SWOT).....	27
Appendix 3 - Current Challenges	29

Foreword

Real is led by and for disabled people through our governance, our membership structures and through ongoing co-production and user involvement. This strategy is the result of an extended period of reflection, discussion, research and consultation and lays out Real's vision, priorities and plans for the next five years. It places our constituents and their interests at the heart of all that we do, and requires us to evolve some of our ways of working in order to reach more people, find out more about their concerns, and co-develop responsive initiatives that will create lasting change.

The strategy development process took nearly two years, and gathered opinions, concerns and suggestions from disabled people and their families, as well as a range of discussion sessions with our staff, volunteers, trustees and other local stakeholders. We reviewed a wide range of local and national strategies, statistics and reports to gain an understanding of the issues affecting disabled people in Tower Hamlets, helping to develop the evidence base for our strategic objectives.

Consequently, this is very much an evidence-driven strategy. The first appendix details the wealth of evidence we have accumulated in areas such as levels of disability, income and work, housing, independent living, the public space and social life. This is backed up by the key concerns raised by our constituents, which mirror the challenges the UK faces in realising the rights of disabled people as identified by the United Nations. Key points are drawn out throughout the rest of the document.

We are proud of the plans and ideas in this strategy, but we know they are just the beginning of a far longer process. We will review the key elements of the strategy on an annual basis to make sure we are on track, re-visiting the strategic objectives and our performance against them. We will also review annually the SWOT (strengths, weaknesses, opportunities and threats) analysis and other player analysis, with our team and key external stakeholders, to make sure our understanding of Real and the world around us, and the main purpose of our work, remains accurate and relevant. We will also conduct regular analyses of the resources needed to deliver our work effectively, developing annual business plans and budgets so that we are clear how we will make progress towards the strategy each year. Finally we will conclude a new fundraising strategy and action plan to run alongside this strategic plan.

This is the complete version of the strategy, which will be used by the board, the management team and made available to key stakeholders such as funders. It will be available on our website alongside a separate, more accessible version which will be promoted to our clients and other interested parties.

About Real

Real is a user-led organisation run by disabled people who live, work, volunteer or study in Tower Hamlets. 100% of our board and a significant majority of our staff and volunteers are disabled. We are a registered charity (number 1061671) and a company limited by guarantee (company number 3213172).

Real primarily works with disabled people who live, work, study or volunteer in Tower Hamlets, but our constitution allows us to work beyond borough boundaries and to contribute to regional and national issues too. We support disabled people of all impairment types, all age groups, all ethnicities and all other protected characteristics.

We are deeply rooted in the history of the disability rights movement, whose slogan “Nothing about us, without us” led to disabled people taking control of their future, because they knew what they needed to achieve equality. Being user-led is fundamental to who we are and what we do, which is why our tagline is “Disabled people working together for real choices”.

Our understanding of disability

Real is driven by and committed to both the social model of disability and the human rights model of disability. We recognise that people are disabled, not by their impairment, but by the physical, communication, attitudinal, financial and legal barriers, and discriminatory behaviours and practices, that limit disabled people’s equal status in society whether at an individual or group level. We consider that our impairments are a natural part of human diversity and that disability is a label placed on us by others by what they perceive as difference from “normal”. We do not need to be “cured”; nor should we be expected to adjust our lives to fit in with others’ expectations.

We focus on the dignity of disabled people, and strive to ensure that disabled people achieve all of their human rights. Addressing the lack of achievement of human rights is as important as overcoming discrimination. We work with our constituents to help them understand, access and enjoy their rights as laid out in the UN Convention on the Rights of People with Disabilities¹, and in particular:

- equality before the law without discrimination
- the right to make their own decisions
- the right to have their family life respected
- freedom from exploitation, violence and abuse
- an inclusive education
- a decent standard of living

¹ <https://www.disabilityrightsuk.org/policy-campaigns/campaigns/equally-ours-campaign/guide-un-disability-convention>

- support to participate in society and live in the community
- accessible physical environments and information.

In terms of considering who is disabled we consider it is anyone who has an impairment, illness, injury or long-term health condition and who may face barriers to being included in society, whether they self-identify as disabled or not. This includes, but is not limited to, an Equality Act 2010 definition of disability². For the avoidance of doubt our constituency includes Deaf people, people with learning disabilities, people with sensory impairments, people with physical impairments or differences, people with mental health conditions, people with autistic spectrum conditions, people with long-term health conditions, including diabetes, epilepsy and people who are HIV positive.

We recognise the complexity of multiple impairments, and the multiple disadvantages disabled people may face when they also have other characteristics protected under by the Equality Act 2010³. We also recognise the differential experience of disability by those who were born with impairments, and those who acquired their impairments through illness, injury or ageing.

The impact of disability on people's lives and opportunities is broad and complex, especially where people are part of more than one equalities group (e.g. disabled and also lesbian or gay, or from a minority ethnic group). Our research for this strategy has highlighted many of the key issues and concerns faced by disabled people in Tower Hamlets; a summary of our findings is presented in appendix 1 of this document.

What makes us “Real”

Our vision

Real's vision is of an equal and diverse society free from the barriers that stop disabled people from living their lives the way they want.

Our mission

Real's mission is to protect and uphold the human rights of disabled people in Tower Hamlets, and overcome discrimination, to enable disabled people to live as equal citizens.

We aim to help disabled people to live independently - where they choose, how they want, with all the support they need, and with the money and resources they need to do it.

² <https://www.gov.uk/definition-of-disability-under-equality-act-2010>

³ <https://www.equalityhumanrights.com/en/equality-act/protected-characteristics>

The name “**Real**” is not an acronym, but it does stand for the **real** jobs, **real** education, **real** incomes, **real** choices, and **real** participation in society that all disabled people deserve.

Real does not exist to give disabled people jobs at Real, but we do recognise that having disabled employees and volunteers is one of our strengths because we are more likely to connect and have empathy with the people that we are supporting through shared experience.

Our values

Our ethos is based on clear values of independence, user involvement, peer support and co-production. The following principles underpin our approach to everything we do:

1. **Human Rights-based**: we support people to achieve their human rights. Disabled people have the same rights as everyone else and should not have to rely on conventional concepts of charity to achieve equality.
2. **Empowering**: we are a people-based organisation. We build relationships based on mutual trust; creating a safe and empowering environment which is encouraging, and collaborative. We believe in supporting people to make choices and live their lives the way that they want, and not making decisions for them. Wherever possible, interactions with our constituents will seek to impart skills and confidence that support them to take control of their own future.
3. **Inclusive, diverse and respectful**: we respect people and are committed to equality. We value and celebrate diversity, equality and freedom of expression throughout all our activities.
4. **Person-centred and accessible**: we recognise that people have different communication and access needs, and preferences for ways of working, and we seek to work with people their way whenever we can.
5. **User-led**: at all levels of our organisation we are led and controlled by disabled people, and influenced by their views.
6. **Accountable**: we aim to be accountable to and representative of the communities we work within. We strive to be open and transparent.
7. **Democratic**: we are run by and democratically accountable to our membership; consisting of disabled people and non-disabled allies.

Real as a charity

Whilst Real is technically a charity, we are mindful not to do anything in our fundraising, our actions, or the way that we work with people, that might disempower disabled people or perpetuate historic perceptions that disabled people should be pitied.

As a charity registered with the Charity Commission we are required to have charitable objects written in accordance with their rules. Real's formal charitable objectives are:

“for the benefit of disabled people in Tower Hamlets and beyond and in particular (without limitation):

- To promote disabled people's independent living and their social inclusion and assisting them to participate as equal citizens in society;
- To promote the equality of disabled people and their access to appropriate support;
- The elimination of discrimination on the grounds of disability; and
- To promote the Social Model of Disability”.

Real's Strategic Objectives 2020-25

Real's four overarching strategic objectives for the next five years are all focussed on the changes we want to make for, and with, our disabled constituents. All of our projects and activities will be set up so that they can work towards achieving one or more of these objectives.

1. Disabled people have increased income and an improved standard of living

Our research shows that disabled people are more likely to be in poverty and less likely to be in work than the non-disabled population. Even if they are in work, disabled people tend to have lower incomes. This is compounded because many disabled people experience higher costs of living due to their impairments.

Digital exclusion is also a real issue for many disabled people, limiting access to jobs, resources and benefits. Digital exclusion also makes some disabled people financially excluded, or are worse off, because they can't access the best deals.

Sometimes access to money can help overcome some of the barriers disabled people experience. This could be achieved through getting jobs, or better-paid jobs, through to obtaining the benefits to which people are entitled.

This objective is about providing access to money and addressing the higher costs of disability, both of which are essential for creating economic equality with others.

2. Disabled people are more able to live independently, express their views, and participate in their communities

Real's constituents need access to good, meaningful social care and support, delivered in ways that they want.

There is a lack of access to affordable, accessible housing, especially in Tower Hamlets where land values, house prices and rents are high.

Added to this is the issue of representation; disabled people often aren't heard or cannot influence decisions about their lives and neighbourhoods in the ways that they want.

Young disabled people feel particularly excluded from meaningful participation in society. They don't feel understood or given the right support so feel isolated and and overly-reliant on families.

This objective is about giving disabled people the voice and means to participate in society as equal citizens.

3. Disabled people are more able to access services, facilities and activities that meet their needs

Our research found that providers do not make enough reasonable adjustments under the Equality Act, with barriers to inclusion across private and public provision of services. This ranges from the services of the local authority and other providers of public services through to shops and businesses.

Transport, and the environment we live in, are not nearly as accessible as they should be for a wide range of impairments.

People who are not able to access modern technology are getting left behind in a world where more and more things are being done online. They might not be able to get online due to lack of income, knowledge, access to accessible equipment, or confidence.

This objective is about removing the barriers that wider society creates.

4. There is attitudinal change around disability

People's attitudes are often the biggest barriers to inclusion, with stigma and negative attitudes causing discrimination, lack of aspiration for disabled people, and hate crime and hate incidents.

Negative reporting and valuing of disabled people, especially in some parts of the press, can have a real negative impact and can increase disabled peoples' fear of judgement. Family and other people's expectations of our abilities can make things worse. Some disabled people from minority ethnic groups have reported feeling doubly disadvantaged, especially where there are negative perceptions of disability, or lack of aspiration, from a cultural perspective.

This objective is about addressing the root causes of disadvantage experienced by disabled people by seeking to change perceptions of disability itself.

Real's Organisational Objectives

Real already has a good reputation amongst key stakeholders. But we also know there is more that we could do, as an organisation, to maximise our chances of achieving our strategic objectives. We want to be recognised by others as an example of best practice as a user-led organisation of disabled people, and a leading not-for-profit organisation.

Therefore, in parallel with our programmes of work to achieve our strategic objectives, we will also work towards the following five organisational objectives.

1. Being an effective, efficient, independent, user-led, expert on disability in Tower Hamlets

As well as maintaining our existing quality assurance standards, over the course of this strategy, everything we do will be underpinned by sound quality assurance frameworks.

We want to establish our credentials as the “go to” organisation for facilitating genuine co-production with disabled people. We will do this by using our skill and expertise in supporting disabled people to participate equally in consultations and co-production initiatives by others. We will develop others’ knowledge and understanding of the social model of disability and of disability rights, and how best they should meet the access needs of different impairment types.

We will ensure that the collective voice of local disabled people underpins the legitimacy of the representative roles we may have.

2. Improved reach and connections with our members, constituents and stakeholders

As a user-led organisation of disabled people, seeking to represent the collective voice of our constituency, we want to develop and maintain our ability to connect with a wide group of people and to influence local society for their benefit.

We want to grow our organisational membership and the reach of our projects, implement a new communications strategy and plan to achieve this. In summary we want to be more relevant to more people.

We also want to develop even stronger working links with other voluntary organisations, council and NHS services, housing providers, local colleges and other education providers, and local businesses.

3. Financial sustainability

Real aims to achieve and sustain a strong financial position, ensuring all projects achieve full cost recovery, and we can build and enhance our reserves. We intend to

broaden our overall number and range of funding sources and, in the medium term, develop our capacity to generate trading income.

To achieve this we will finalise a new fundraising strategy, supported by annual action plans, with targets for income generation and careful tracking of our financial position.

4. Understanding the impact of everything we do

We will evaluate the impact of all of our projects and activities, against the outcomes required by funders, and how they meet our own strategic objectives. We will implement a new organisation-wide client management system to drive better communications and connections, and which helps us record our impact across projects.

We will develop, in the first year of this strategy, new key performance indicators to help us track progress towards our key objectives. These will form the basis of board oversight of our work, and be reported on in our annual report.

5. Contributing to strategic change at local, London and national level

We will establish ways of working that support the gathering of evidence to influence policy and practice. We will do this through user involvement and co-production, and developing a new framework for campaigning and influencing. We want to create system change as well as solve the problems of individuals.

During the life of this strategy we aim to work with Tower Hamlets Council and others on the production of a new Disability Strategy, co-produced with local disabled people.

We will contribute to local strategic partnerships such as the Tower Hamlets Together Promoting Independence Board, the Safeguarding Adults Board, and other relevant channels such as the Pan Providers Forum, the Health and Well-being Forum, and the Tower Hamlets Community Advice Network. Where relevant to specific projects we will also work within alliances such as the No Place for Hate Forum.

Our charitable objects are to work “in Tower Hamlets and beyond”. Whilst our primary focus will be to support disabled people in Tower Hamlets, we will continue our existing track record of successful collaboration with other organisations in nearby boroughs where that fits with our strategic and operational goals.

We will also continue to network and collaborate with other London DDPOs and infrastructure organisations to influence nationally where appropriate, and amplify our effectiveness and learn from others.

How we will make a difference

Over the life of this strategy, Real will make progress on our strategic and organisational objectives by:

1. Developing, resourcing and running projects that fit with our values and ethos, using co-production methods wherever possible and appropriate.
2. Working with partners and stakeholder organisations in the voluntary sector, the NHS, Tower Hamlets Council and other sub-regional and national agencies where necessary.
3. Developing SMART (specific, measurable, achievable, result-orientated, time-bound) objectives in order to plan out our work and measure its impact.
4. Each year developing an annual business plan that incorporates the above and sets out how we are going to move towards achieving our strategic and organisational objectives.

Our model of change

The specific activities that we deliver to help achieve each strategic objective will change each year, set out in the annual business plan, and will be determined using the decision-making framework set out below.

The following diagram represents the four different ways of working that we will employ, depending on the nature of the project and the issue, to address the challenges disabled people face:



One-on-one work - we will work with specific individuals to help them address the particular challenges they face, through a range of services and projects that will seek to inform and empower individuals to overcome the disadvantage they are experiencing.

Working with groups (of disabled people) - solving individuals' problems won't necessarily create system change. If we support groups of disabled people to have a louder, collective voice we are more likely to make positive change happen for all disabled people. We have skills in supporting disabled people to engage meaningfully in the co-production initiatives of others, and campaign and influence to effect change.

Partnership working with other organisations - we have a track record of working with other not-for-profit organisations to ensure that "the whole is greater than the sum of the parts" in what we each bring to the table. We've led consortiums of local organisations, and delivered joint bids and been consortium partners elsewhere. We've also worked collaboratively with statutory agencies such as Tower Hamlets Council and Tower Hamlets Clinical Commissioning Group, as strategic partners, to make positive change happen.

Changing other organisations - sometimes it's necessary to influence constructively before you get to the partnership working stage. We'd like to work as a catalyst for positive change for disabled people, such as encouraging employers to be more inclusive, transport providers and local businesses to be more accessible, and housing providers to provide more accessible housing.

What we will do

The precise nature of our projects will vary year on year, depending on current priorities and funding opportunities. But we would expect to deliver projects that involve activities such as:

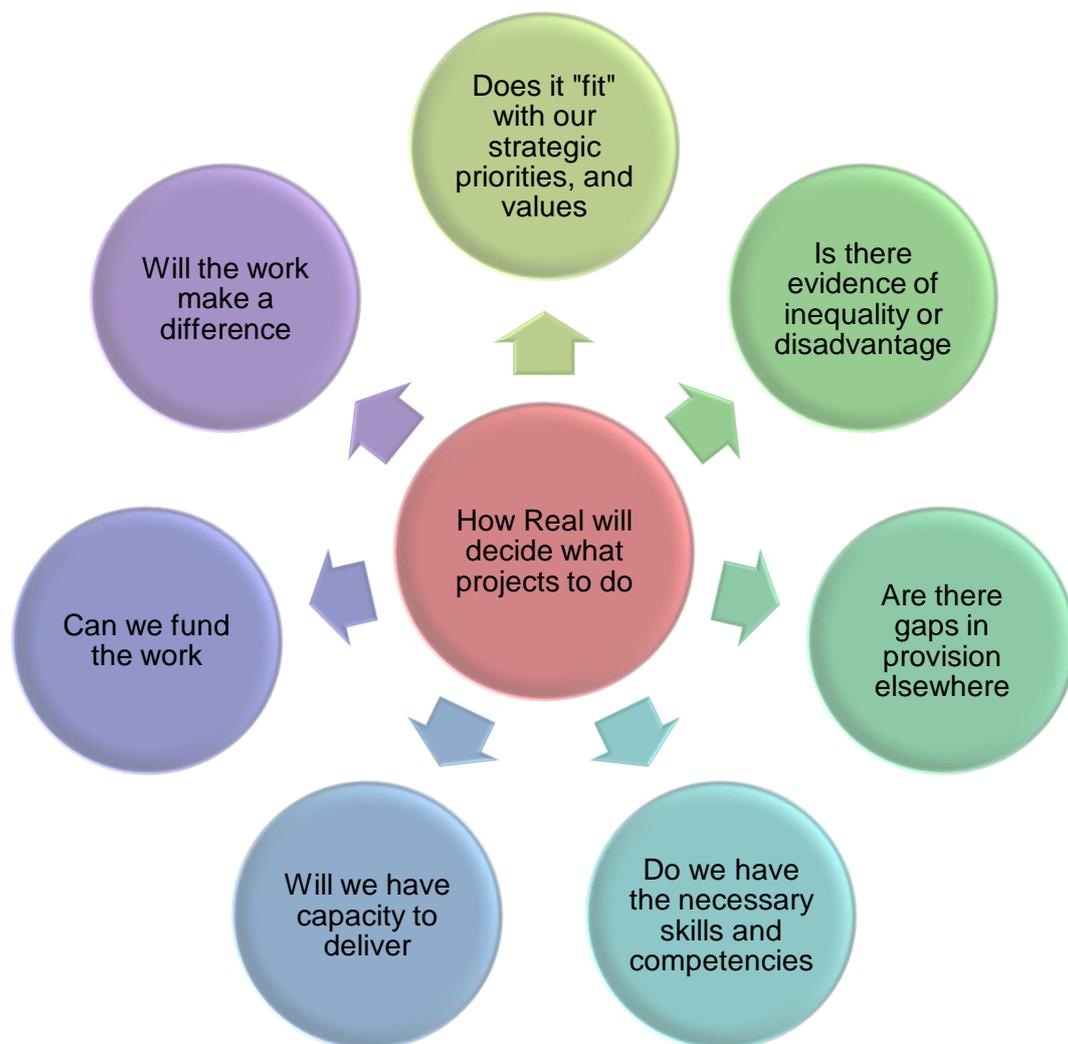
- Information and advice services
- Advocacy services
- Engagement and co-production projects
- Communications and activities that connect and inform people
- Employment support projects
- Volunteering projects
- Helping people get online.

How we will prioritise our work

Everything we do should make a positive difference to the lives of individuals or groups of disabled people, or be a means to an end of doing so.

Real won't be able to solve everything. Nor should we try to. We need to focus our efforts on where we can make the most difference and ensure that we are not duplicating the work of others (or where we are, we know that our approach will better meet the needs of disabled people).

Over the next five years we will seek to attract funding to deliver projects and initiatives that help us fulfil our mission. We will need to make decisions along the way. In the context of our strategic priorities, each potential project or initiative will be evaluated using the following framework to determine which ones we shall pursue:



We will also utilise a project initiation framework to ensure that we have a systematic way of evaluating all opportunities and managing risk appropriately.

How we will measure our outcomes and impact

All of our work will be designed and implemented to measure the impact that we have. We are more interested in outcomes, than outputs, and the positive effect we have on people's lives.

At the development stage of each project we will be seeking to adopt appropriate feedback and outcome-measuring techniques to ensure that we know what difference we have made, and we can learn from the feedback that we get. It might be through standard feedback forms, outcome stars and other techniques that measure individuals' movement along a journey, and other methodologies that we can align with such as the Tower Hamlets Together "I-statements" approaches.

We will ensure that these outcomes measurement frameworks can be consolidated to enable us to record performance against Key Performance Indicators against our strategic objectives.

Partners and Networks

In order to maximise our potential and reach as widely as possible it is important for Real to understand and work with the organisations and institutions around us. As part of the development of this strategy we conducted an analysis of our current organisational partners and other local networks to help us:

- understand who we currently work with
- identify potential future partners and pick up any gaps in our knowledge; and
- identify connections that will need to be addressed during the life of this strategy.

As indicated in the foreword, we will review and update this annually. It is summarised below.

Key local stakeholders

Outside of our members and the other people in our constituency that we support, Real's stakeholders include the institutions, organisations and sometimes other groups of individuals who are likely to support us and want our work to succeed. This can be because:

- they use our services or are close to people that do;
- they deliver similar services that might refer people to us, or take referrals from our clients; and/or
- they have values and aims that align with ours.

Tower Hamlets Council is a key stakeholder for Real in the statutory sector, as is the local Clinical Commissioning Group (CCG) and other elements of the NHS. We also want to develop more relationships with housing providers.

We work collaboratively with a range of other not-for-profit organisations:

- directly, through both formal and informal consortia, partnerships and joint working relationships, and
- indirectly, through infrastructure organisations such as Tower Hamlets Council for Voluntary Services and Tower Hamlets Volunteer Centre.

There are a range of other voluntary organisations in Tower Hamlets that work with disabled people and/or their families and carers. Some are focussed on particular impairments or conditions, like deafPLUS and Positive East, where others work with a broader range of clients. We already have established connections with a range of other organisations that work with disabled people including Tower Project, Ability Bow, Apasen, BowHaven, Age UK, Apasen, Bromley by Bow Centre, Tower Hamlets Law Centre and Social Action for Health.

We will also work through a range of forums and networks, as set out in our fifth organisational objective above.

Our aim is to work with a range of organisations where we think:

- we can be of mutual benefit and support, and where collaboration will further our strategic and operational objectives, and/or
- that collaboration can bring benefits and sharing of strengths to all parties involved.

In the future we hope this will also include Canary Wharf and other Tower Hamlets-based corporate organisations where we believe there are benefits in doing so, either in reaching and supporting more disabled people, or by helping drive positive change.

Organisational structure and governance

Our organisational structure should be focused around delivering our strategic objectives and ensuring that we are as efficient and effective as possible. We should plan for inevitable change, and ensure that we are a growing, learning and adaptable organisation, responsive to changes in the external environment.

We will therefore develop and implement a new staffing and operating model that ensures we:

1. maintain our unique ability to represent the constituency we serve by seeking staff and volunteers that have the same lived experience.
2. are able to recruit and develop the talent of local people.
3. provide career progression and development opportunities for staff.
4. provide volunteering opportunities for local people with routes into employment for those who aspire to that.
5. plan for different projects starting and finishing without a disproportionate impact on staff for the organisation.
6. maximise the potential for staff to move from one project to another, re-utilising their skills, knowledge and experience.
7. support all staff to work together to deliver strategic and organisational objectives.
8. ensure all similar projects are delivered under common quality assurance frameworks, with appropriately skilled and qualified staff, to ensure all services are of high quality; and
9. develop team and operating structures that support staff to communicate and collaborate effectively, and drive our strategic objectives.

We will also continue to develop and support our board to ensure that:

- we have good, effective and engaged leadership and governance over the organisation, and
- we continue to adhere to our charitable objectives, work towards our strategic objectives, and remain true to our vision, mission and values.

Real's board comprises 9 people, 6 of whom are elected from the membership and 3 who are appointed, to ensure we have a good range of skills, experience and life experience represented.

Appendix 1 - The evidence on disability in Tower Hamlets

We wanted this strategy to be based on evidence: evidence of issue, evidence of need, evidence of inequality and disadvantage, and evidence of disabled people's experience of life. This summary of all of the research that we've done, over the last year in particular, underpins how we have prioritised the biggest inequalities and disadvantages that disabled people experience in our strategic objectives. Where applicable we have referenced the source of our information.

Levels of disability

Tower Hamlets is home to 304,900 people and has one of the fastest growing populations in England. The total number of residents is expected to reach 365,200 by 2027. It is quite a young borough, with 47% of residents aged 20-39; the highest percentage in the UK. The borough is home to the largest Bangladeshi population in the country; 1 in 3 residents is Bangladeshi.

It isn't possible to know exactly how many people in Tower Hamlets are disabled, as not everyone with impairment or long-term condition is known to the council or NHS, and some do not view themselves as having a disability. The Office for Disability Issues (ODI) previously estimated there are 11.6 million disabled people in Great Britain, of whom 5.7 million (16%) are adults of working age, 5.1 million (45%) are over State pension age, and 0.8 (6%) million are children⁴. This represents over 1 in 6 people (17.5%) who fall within an Equality Act 2010 definition of disability.

In the 2011 Tower Hamlets census results 13.5% of residents (34,300) reported that they have a long-term health problem or disability that limits their day to day activities.⁶ In 2018 the council reported that 11% more residents will have a life limiting health problem or disability by 2020⁷. The discrepancy between the ODI figure of 17.5% and the self-reported local figure of 13.5% could well be because many people who fall within the definition of being disabled may not self-identify as such.

Part of the reason for the expected increase in disabilities and life limiting health problems is due to the fact that, even though the borough has a lot of younger people, it also has an older population that is more likely to experience disability than in other areas. Tower Hamlets has the highest rate of social care need among older residents; 12,235 users per 100,000 population⁸. It also has the lowest disability-

⁴https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/321594/disability-prevalence.pdf

⁵ <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures>

⁶ Office for National Statistics, Census 2011 Second Release, Dec 2012, quoted in '[Life, Health and Wellbeing in Tower Hamlets](#)', JSNA Summary Document, Nov 2016.

⁷ Tower Hamlets Community Engagement Strategy 2018 -21

⁸ [Tower Hamlets Strategic Plan](#) 2018-21, pg 9

free life expectancy (i.e the average number of years a non-disabled person can expect to live free of disability) in London, at age 56.9 for men, 56.4 for women.⁹

Out of 47,000 children and young people in Tower Hamlets (2018 figures) around 7,900 (or 17%) get additional support with their special education needs and disabilities (SEND). Tower Hamlets ranks as having one of the highest proportions of children in the country with SEND. As the overall population increases, school-age population is also projected to grow, but at a slower rate than the overall population due to slowing birth rates and families moving out of the borough. The rate of growth in pupils with SEND is expected to increase and could result in as many as 600 more children and young people needing to be supported through an EHC (Education Health and Care) plan.¹⁰

Income and work

A substantially higher proportion of individuals who live in families with disabled members live in poverty, compared to individuals who live in families where no one is disabled. Nationally, 19% of individuals in families with at least one disabled member live in relative income poverty, on a before housing costs basis, compared to 15% of individuals in families with no disabled member. In addition, 21% of children in families with at least one disabled member are in poverty, a significantly higher proportion than the 16% of children in families with no disabled member¹¹.

Tower Hamlets has the highest worklessness rate in London (7.7%) and the highest rate of poverty¹² at 39%. Child poverty is also higher in Tower Hamlets than in any other borough¹³. Trust for London reports that “People who are disabled in London and across England are more likely to be living in poverty. This is partly because of the costs associated with being disabled, and partly because disabled people are less likely to be in paid work.

Nationally, disabled people are significantly less likely to be in the employment than non-disabled people, with 46.3% of working-age disabled people in employment compared to 76.4% of non-disabled people¹⁴. Furthermore disabled people are around 3 times as likely not to hold any qualifications compared to non-disabled people (19.2% compared to 6.5%), and around half as likely to hold a degree-level qualification (14.9% compared to 14.9% for non-disabled people).

⁹ [Tower Hamlets Strategic Plan 2018-21](#), pg 9

¹⁰ [Tower Hamlets CCG SEND Strategy 2018 – 2023](#)

¹¹ <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures>

¹² <https://www.trustforlondon.org.uk/data/what-poverty/>

¹³ London's Poverty Profile – [Tower Hamlets](#), Trust for London

¹⁴ <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures>

The poverty rate for Londoners living in a family with a disabled adult is 34%, compared to 25% for families without a disability. These figures are significantly higher than national averages (above). Disabled people in London are also more likely to be low-paid, regardless of their level of education and whether they are working full-time or part-time. The poverty gap between disabled and non-disabled people is worse in London than it is in the rest of England”.¹⁵

Housing

The Mayor of Tower Hamlets has said that housing is the biggest issue facing Tower Hamlets residents. The borough has some very expensive housing and very high land values, but also some of the highest rates of poverty. The Tower Hamlets Housing Strategy reports that “residents are worried about the affordability of homes being developed in the borough, with many households on low wages feeling that they are beyond the reach of most people who want to live in Tower Hamlets. Suitable housing options that meet the needs of people with learning disabilities, mobility issues or mental health problems are specific challenges”¹⁶.

Nationally, 1 in 3 households with a disabled person still live in non-decent accommodation, and 1 and 5 disabled people requiring adaptations to the home believe that their accommodation is not suitable¹⁷. Given the local challenges set out by the Mayor it is likely that these figures are worse locally.

A 2016 EHRC Inquiry reports that the effects of the national housing crisis on disabled people are particularly acute. ‘Disabled people report a severe shortage of accessible houses across all tenures...Social housing is particularly pressured, with long waiting lists. Information on the accessibility of properties is particularly poor in the private sector.’ Along with a lack of affordable housing, housing stock across Britain is ‘often not accessible or adapted to meet disabled people’s requirements – room sizes are small, many have baths rather than showers, and there are steps to front doors.’ ‘The impact that living in an inaccessible home has on disabled people cannot be overstated and the financial, emotional and human costs of inaccessible housing are well documented. They include increased need for social care, increased reliance on carers and family members, accidents (which can be life-changing or fatal), and avoidable hospital admissions and lengthy stays in hospital’¹⁸.

Accessible housing and economic security are closely connected for disabled people. According to Habinteg and the Papworth Trust, ‘Unmet need for accessible housing is associated with worse employment outcomes among working age adults.

¹⁵ London’s Poverty Profile – [Populations: Disabled People](#), Trust for London

¹⁶ [Tower Hamlets Housing Strategy 2016-21](#), pg 6

¹⁷ <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures>

¹⁸ [Housing and Disabled People: Britain’s Hidden Crisis](#), EHRC 2016, pg 4, pg 16

Controlling for other characteristics that we know are associated with the chances of being in work, such as age, gender, type of impairment and educational qualifications, the research indicated that, people with unmet need for accessible housing are four times more likely to be unemployed or not seeking work because they are sick or disabled than those whose needs are met or who are disabled but do not need accessible housing. In depth interviews with disabled people shed light on why this might be, in particular the time-consuming and tiring process of completing everyday living tasks in an unsuitable home, or even such basic problems as being prevented from reliably leaving home by unpredictable lifts.¹⁹

Independent Living, Public Space and Social Life

Real's major investigation into the views and concerns of disabled people in Tower Hamlets found the following overarching themes:

- Negative attitudes towards disabled people
- Inaccessible, poor information
- Lack of participation and voice

Disabled people felt very strongly about how these themes impacted their sense of self, their well-being and their ability to participate in society as equal citizens.²⁰

Both attitudinal and physical barriers can prevent disabled people from being and feeling able to fully participate in public and social life. The Mayor of London's Diversity and Inclusion strategy highlights the fact that "blind, Deaf and disabled people, and older Londoners, can face barriers to getting around the city as a result of poorly positioned street furniture and clutter, shared surfaces without a clear boundary between vehicles and pedestrians, a lack of Blue Badge parking spaces and poor access to essential services, shops and homes. [...] Older Londoners, especially those with physical or cognitive impairments like dementia, face barriers that can affect their confidence and ability to access buildings, places and spaces, adding to feelings of social isolation"²¹

Key concerns raised by constituents and stakeholders

Some issues and concerns appeared more frequently in our discussions and research than others, and some were agreed to be more serious and have more of an overall negative impact.

¹⁹ [The Hidden Housing Market: A new perspective on the market case for accessible homes](#), Habinteg & Papworth Trust, 2016, pg 18

²⁰ [Local Voices Full Report](#), Real, 2013, pg. 6

²¹ [Inclusive London: The Mayor's Equality Diversity and Inclusion Strategy](#), May 2018, pg 39

The concerns raised by Real's constituents and stakeholders can be grouped into three key groups, each of which has the potential to affect disabled people's lives in a range of ways:

Independence

Financial

- Having enough money to be able to live well
- Maximising access to entitlements
- Being able to work

Personal

- Choice and control over how care support is received to enable day-to-day living
- Choice and control in friendships and personal relationships

Community

- Being able to participate in leisure activities on own terms

Equality

Financial

- Equality of access to work and earned income
- Equal and fair treatment at work

Personal-

- Equal treatment more widely, when receiving goods and services, and all other areas covered by the Equality Act 2010
- Receiving reasonable adjustments were applicable

Community

- Being heard, and making change happen, when working with organisations and institutions on policy or practice

Access and participation

Financial

- Able to manage money
- Having the right skills to be able to get a job
- Fair access to work opportunities
- Digital inclusion – able to use online systems and apps to manage appointments, benefits, banking

Personal

- Safe and accessible housing
- Access to healthcare
- Access to information about services

Community

- Accessible public transport
- Accessible built environments - high streets, shops, leisure opportunities
- Participation in community life and local democracy
- Community safety
- Better public attitudes toward disabled people

Perhaps unsurprisingly, these priorities echo many of the concerns documented in Tower Hamlets' local strategies. They also match with some of the issues highlighted nationally, including threats to the human rights of disabled people under The UN Convention on the Rights of Persons with Disabilities.

The UN's concerns over disabled people's human rights in the UK

This convention, to which the UK is a signatory, emphasises the need for disabled people to be guaranteed full enjoyment of their human rights without prejudice or discrimination.

Following concerns from several UK charities about the impact of austerity on disabled people, in 2015 it was announced that the UN Committee on the Rights of Persons with Disabilities had decided to investigate the UK Government. The Committee visited the UK in October 2015, interviewing over 200 people and collecting more than 3,000 pages of documentary evidence, including both public and confidential documents²².

The Report from the Committee was critical, and raised particular concerns about:

a.) Article 19 – Living independently and being included in the community

It was found that a number of welfare reforms have had a disproportionate impact on disabled people, and have curtailed the rights of disabled people under article 19.

b.) Article 27 – Work and employment

The committee raised concerns about the appropriateness of work capability assessments for ESA (Employment Support Allowance) an income replacement

²² House of Commons Briefing Paper 07367, [The UN Inquiry Into The Rights of Persons with Disabilities in the UK](#), 27th March 2017

benefit for people with a health condition or disability which means that they are unable to work.

The report also found that the Work Programme and Jobcentre Plus, the two main programmes designed to encourage disabled people into paid employment, had “no visible impact” on reducing unemployment.

c.) Article 28 – Adequate standard of living and social protection

Overall, the Committee found that changes to the welfare system have had a more negative impact on households with disabled people, particularly those on low incomes.

Real recognises the concerns raised in the UN Committee’s report in the reported experiences of our constituency, and we are committed to furthering the human rights of disabled people under these three articles, as well as under the overall Convention.

Appendix 2 - Organisational Analysis (SWOT)

This analysis was compiled by the Real team, with input from the board of trustees, at our 2019 planning day.

Strengths	Weaknesses
<p>Only pan disability user led DPO locally</p> <p>1000 client contacts</p> <p>Good relationship with commissioners</p> <p>Good relationship with clients</p> <p>Good reputation with other organisations</p> <p>Experience of managing contacts and delivering projects and consortia successfully</p> <p>Good relationship with Local Authority and NHS</p> <p>Positive feedback from clients</p> <p>History of successful coproduction with Realising Change and Local Voices</p> <p>Delivering change in partnership with others including Communities Driving Change</p> <p>Able to work with clients with multiple disabilities</p> <p>Over 23 years experience</p> <p>High number of disabled employees; empathy for clients</p> <p>Flexible and able to respond quickly to need</p> <p>Quality Assurance accreditations</p> <p>Strong financial control and management</p> <p>Robust internal governance</p> <p>Well connected with a range of local fora (e.g. THT Promoting Independence, Health and Well-being forum, THCAN)</p> <p>Involved in new current initiatives (e.g. Loneliness task force, Digital exclusion, Improving Adult Social Care)</p> <p>Known by key local councillors</p> <p>Experienced staff with broad personal networks</p>	<p>Previous mission unclear to some people</p> <p>Values need embedding in all we do</p> <p>Lack of current capacity for strong project management</p> <p>Lack of overall staff capacity, supervision and support in middle management currently</p> <p>Bureaucracy and overwork keeping staff from creativity</p> <p>Lack of reach compared to local population</p> <p>Not enough young people involved</p> <p>Need better (more, more detailed) feedback from clients</p> <p>Reliance on current CEO</p> <p>Uncertainty re premises (location and costs)</p> <p>Reliance on Tower Hamlets Council funding</p> <p>Local reputation could suffer if not delivering/overstretched</p> <p>Succession and change, especially around CEO</p> <p>Lack of understanding of social model and disability rights among constituents and some team members</p> <p>Office infrastructure and ICT systems out of date and need modernisation</p> <p>Don't have a single database that supports a whole-experience understanding of each of our clients</p> <p>Website and social media - resistance to developing communications</p> <p>Rigidity of offer – lack of diversification</p> <p>Lack of robust volunteer offer, meaning we don't get the best out of them or support them as well as we'd like</p> <p>Lack of fundraising capacity</p> <p>Could be more effective and joined up communications across all projects</p>

Opportunities

Broadening offer in line with user need and within values, to fit local commissioning

A general push to more coproduction in key partners

Sell models and expertise (e.g. PADE up)

Build on partnerships to create coalition, build reach

Quasi-infrastructure role; training other organisations to be inclusive to disabled people

Realising Change and Local Voices projects can bring in more people and gather wider range of views and ideas

Lots of potential members to recruit

Utilise existing staff skillsets and networks more effectively, outside of current JDs

Local Community Fund opportunities

We have some previous bids that could be reused fairly quickly

Potential for leading other consortia

Connecting with the review of information, advice and advocacy services to influence future commissioning

Broadening the range of projects supported or funded by CCG

Threats

Expansion to wider (regional or national) level could dilute local strengths

Important need to manage change, regroup and refocus, and develop a new identity and culture, following the loss of the DPSS

Loss of DPSS means we need to find new ways to maintain key relationships and influence with Adult Social Services

Changes to funding in the future; e.g. no resources for non-statutory advocacy, or other

Austerity, meaning less public money and more organisations fighting for it

Competition from other organisations, locally and nationally

Changes of staff in partner organisations, e.g. council – loss of relationship and need to redevelop

Brexit (impact on public money available, and potential erosion of rights agenda)

Staff leaving, projects coming to an end – will leave organisation under capacity

CCG and other funding that is health-related risks moving away from a rights based and social model basis of disability towards more medical model

Appendix 3 - Current Challenges

Deeper strategic analysis with Real CEO and Board, 2019

Funding

1. Uncertain future funding, especially on our core service offerings.
2. Lack of time and resource to properly plan for alternative future funding streams, and deliver consistently high quality funding applications.
3. New sources of funding have tended to be smaller, requiring more inventive pooling of projects to enable us to resource them adequately.

Impact measurement

4. Inconsistent approaches to monitoring have made it difficult to evidence our impact across all outputs and activities.
5. We are not as effective as we should be at using databases effectively to record our understanding of our clients.

Reach and reputation

6. We need to get better at communicating with our constituency effectively using a variety of communication channels.
7. We have a good reputation with those that know us, but should be better known than we are across the borough, across both potential clients and other stakeholders.

Operational issues

8. There are a number of infrastructure issues to be resolved in terms of IT modernisation, office restructuring, effective support for our staff and communicating with our client base using our website and other channels.
9. We face uncertainty over our future premises and location within the borough - we know we will have to move out of Jack Dash House at some point but we don't yet know when (or the cost of any replacement).

Capacity

10. Resource requirements for concluding the Real Quality Matters project are considerable and take time away from current staff delivery.
11. We need to work more effectively with volunteers; they can help us increase our reach and capacity but will need support and management.
12. Lack of capacity and time for project planning, project management and risk management.