DOCUMENT RESUME

ED 475 113   CE 084 744

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TITLE   AGORA XII. Training for Mentally Disabled People and Their Trainers:
                Permitting the Mentally Disabled a Genuine and Appropriate Exercise of The
                Rights. CEDEFOP Panorama Series.
INSTITUTION   European Centre for the Development of Vocational Training, Thessaloniki
                (Greece).
REPORT NO   TI-47-02-438-EN-C, CEDEFOP-63
ISBN   ISBN-92-896-0164-7
ISSN   ISSN-1562-6180
PUB DATE   2003-00-00
NOTE   168p.
AVAILABLE   CEDEFOP, PO Box 22427, Thessaloniki, GR 55102 Greece (#5136 EN, free). Tel
FROM   30 31 49 01 11; Fax: 30 31 49 01 02; e-mail: info@cedefop.eu.int; Web site
                http://www.trainingvillage.gr/ . For full text:
                http://www2.trainingvillage.gr/etv/publication/download/panorama/5136_en.p
                For full text (Spanish):
                http://www2.trainingvillage.gr/etv/publication/download/panorama/5136_es.p
                For full text (French): http://www2.trainingvillage.gr/etv/publication/
                download/panorama/5136_fr.pdf.
PUB TYPE   Collected Works - Proceedings (021) -- Opinion Papers (120)
EDRS PRICE   EDRS Price MF01/PC07 Plus Postage.
DESCRIPTORS   Adult Education; Attitudes toward Disabilities; Cost Effectiveness; Develo
                Nations; *Equal Education; Equal Opportunities (Jobs); Foreign Countries;
                Globalization; Independent Living; Job Training; Labor Market; Learning
                Disabilities; *Lifelong Learning; Mainstreaming; *Mental Disorders; Mental
                Health; Multiple Disabilities; *Normalization (Disabilities); Postsecondar
                Education; Secondary Education; Special Education Teachers; Staff
                Development; Supported Employment; Teacher Education; *Trainers; Training
                Methods; *Vocational Education; Vocational Rehabilitation; Volunteer
                Training; Work Environment
IDENTIFIERS   Belgium; *European Union; France; Germany; Greece; Italy; Luxembourg;
                Portugal; Spain; United Kingdom

ABSTRACT
                Materials from Agora 12 demonstrate that the disabled are
merely another side of ourselves and training for them is a means of
developing and acquiring independence and of becoming absorbed into society.
A Foreword outlines the subjects of the three sessions: social solidarity and
mental disability; training of the mentally psychologically disabled and the
transition from institution to integration; and training of trainers and
other professionals providing support for the mentally disabled and assisting
their integration into economic life. A 36-item bibliography and agenda
follow. The 15 presentations are "Mental Health: Medical Fact or Social
Construct" (Gaye Hutchison); "Disability and Independence: Improving the
Quality of Life of Disabled People" (Carmen Duarte); "Professional Training
of the Mentally Disabled in Enterprises in the Open Labor Market" (Helmut
Heinen); "Job Creation for the Mentally Disabled: New Approaches in Germany
Through Integration Enterprises and Employment Companies" (Rainer Dolle);
"The Effects of Globalization on the Mentally Disabled" (Alberto Alberani);
"Economic Costs and Benefits of Integrating Disabled People into the Labor
Market: An (sic) European Look" (Juan Carlos Collado); "Permitting the
Mentally Disabled a Genuine and Appropriate Exercise of Their Rights" (Annet
De Vroey); "The Initial and Continuing Training of the Mentally Disabled in

Lifelong Education and Training" (Christian Robert); "Education and Training Proposed to Persons with Learning Disabilities in the Different European Countries" (Victoria Soriano); "Occupational and/or Personal Independence-The Role and Significance of Sheltered Employment in the Emancipation Process" (Gerard Zribi); "The Normal Environment as a Training Ground and Indicator of Personal Potential for Disabled Workers and Their Trainers" (Yvonne Schaeffer); "How Does a Trainer Working with the Mentally Disabled Differ from Any Other Teacher or Trainer?" (Hans-Juergen Pitsch); "Training of Trainers in Learning Disability Services-Is Learning or Disability the Issue?" (Paul Twynam); "Training of Trainers of the Mentally Disabled in Europe" (Angelika Buehler); and "How Useful Are Networks of Trainers and of Trainers of Trainers in Preparing Them for Their Very Special Role?" (Raymond Ceccotto). A summary of discussions (Victoria Koukouma) is provided. Several presentations include bibliographies. (YLB)

CEDEFOP

PANORAMA

AGORA XII
Training for mentally disabled people and their trainers: Permitting the mentally disabled a genuine and appropriate exercise of their rights

Thessaloniki, 5 and 6 July 2001

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Agora XII

Training for mentally disabled people and their trainers: Permitting the mentally disabled a genuine and appropriate exercise of their rights

Thessaloniki,
5 and 6 July 2001

Printed in Belgium

The **European Centre for the Development of Vocational Training** (Cedefop) is the European Union's reference Centre for vocational education and training. We provide information on and analyses of vocational education and training systems, policies, research and practice.
Cedefop was established in 1975 by Council Regulation (EEC) No. 337/75.

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Foreword

If we look at the principles generally adumbrated in developed Western societies, the French Revolution motto of 'Liberty, Equality, Fraternity' would seem – at least on paper – to be clearly reflected in all the countries of the European Union and in many of the OECD Member countries.

The reality, however, is somewhat different since the three principles are not self-fulfilling. The liberty to conduct one's private and working life as one pleases, and freedom of enterprise, have a corollary, namely flexible work organisation. At the end of the 18th century and during the 19th century French workers learnt this to their cost when they were forbidden to form themselves into unions by the Le Chapelier law of 1791 abolishing such organisations in the name of freedom of labour. In fact, flexible working is only really an advantage when it can be freely chosen and when it allows people the mobility they desire. From this point of view we are never so free in our movements as when strength is on our side. All too often, freedom is in reality reduced to mobility for the strongest and wealthiest. Liberty without equality becomes merely the ability of the strongest and most secure to arrogate to themselves the best-remunerated and most status-enhancing social roles at the expense of those who are less well off, weaker, less skilled or simply not so aggressive.

Liberty, therefore, is inconceivable without equality.

However, equality is itself all too often understood as the need to treat everyone the same, and to afford everyone the same theoretical opportunities for advancement, for developing their potential and for building their future under the best possible conditions. In essence this means regarding everyone as exactly alike, with no grounds for allowing anyone an 'unfair advantage'. But while we are undoubtedly all similar in many ways, we are also very different and cannot be considered exactly the same. Those people who share a common destiny in a particular geographical or cultural environment, be it district, commune, region or country, do not start out under equal conditions. They are not all equipped with the same initial resources in terms of wealth, cultural baggage, physical strength and intellectual agility. And formal equality of treatment for people who are different, giving all of them the same opportunities and means, in fact only has the effect of preserving and indeed enhancing the basic differences. Equality, therefore, should be understood not as a static, formal principle, taking starting conditions as a given; instead it should be conceived as a dynamic principle encouraging development and progress towards an ideal situation and involving the levelling off of starting conditions.

Hence the vital importance of the third principle – that of fraternity – whose basic concept is active solidarity between members of a social grouping, enabling us to advance beyond the static vision of equality and liberty alone:

(a) How much of our freedom of action, enterprise, etc., are we willing to forgo or restrict in the interests of a more level playing-field?

(b) How far are we prepared to use positive discrimination in the name of fraternity with a view to restoring a genuine, and not just a formal, balance between people who can be very different?

This is the subject, which at first glance might appear somewhat idealistic and philosophical and which some might even find naive, that we propose to discuss at this Agora on training for disabled people and those who train the disabled.

What in fact do we mean when we talk of disabled people (*Menschen mit Behinderungen, discapacitados*, and so on)?

We take this to mean people who, in the never-ending obstacle race of our search for a better life, get off to a slower start than most other competitors and carry a heavier load.

Making the school system open to all, compulsory and free of charge, legislating against discrimination in the recruitment of employees, and reserving certain parking spaces, bus seats or even jobs for a given segment of the population, do not in themselves end discrimination and ensure social integration.

Some of the disabilities that hamper our progress towards a place in the sun are more difficult to cope with than others and less possible to remedy. And we are all without exception disabled in one way or another:

(a) Gender: Think of a woman in an all-male environment, or a mother with several children trying to compete with single people in a world where availability is a must for getting a job and for career advancement.

(b) Colour, an exotic first or family name, a strong accent or the like: there is no need to dwell on how racism can affect individual and personal development – even our rich, liberal societies can easily become xenophobic.

(c) Cultural stigmas: lack of education, an inner-city background, lack of social polish, failure at school and learning difficulties are all a passport to a life of obstacles and vexations that will do little to encourage the growth of independence and responsibility that are the creed of post-industrial society.

(d) Ugliness, or simply unconventional appearance: in a world in which an inch or so too much or too little here and there means failure to match the beauty standards set by popular magazines, this may also exclude a person from a whole series of job opportunities, career choices and the like.

Not all disabilities are equal in their effect. For some, they render the race so much more difficult that even starting is impossible without outside assistance. This is true of physically disabled people such as paraplegics, quadriplegics, those suffering a myopathic condition, the deaf or visually impaired, the mentally disabled (Downs syndrome, autism) and those with more than one disability. We shall be arguing in favour of adopting what we regard as an essential principle, namely, that while a disability is an actual impediment to one person's

movements, another's learning process, concentration, emotional relationships, inter-personal contacts, etc., it never entirely prevents action. As Bernard Chapue suggests in this cartoon, every form of disability allows some scope for the independence of decision and action proper to a human being.

A disabled person has strengths and weaknesses, like any other individual. It is high time we stopped seeing only the weaknesses and started looking at the strengths, skills and potential. In our view a disabled person has every right to a place in our society, not only out of the ethical considerations that lead us to do what we can to integrate every fellow-human – regardless of physical and mental abilities – into a society we hope to make fairer and more inclusive, but also for economic and social reasons. Although we live in a world in which advances in electronics and technology in general relieve us of many burdensome tasks requiring physical strength, physical shortcomings are all too often used as a pretext for refusing to employ or train a disabled person. In the post-modern society in which we find ourselves willy-nilly, the limitations of this much-revered technology become apparent time and time again, with the result that there are still, and will no doubt long continue to be, tasks involving little intellectual content but not amenable to automation, leaving room for the economically useful employment of mentally disabled people. It is therefore because we need them at least as much as they need us that we should do everything possible to provide them with guidance and training.

Every form of disability poses its own particular problems, and the three half-days available to us at an Agora obviously do not allow sufficient time to deal with all of them. On this occasion, therefore, we shall have to confine ourselves to examining just one category, and we have opted for mental disability. We shall try to see how training the mentally disabled (and their trainers) can allow them to exercise their rights effectively and appropriately. We have chosen to concentrate on the mentally disabled, a very complex and varied group, because society seems particularly sensitive, not to say suspicious, when it comes to their independence and rights. The idea of providing such people with vocational training with a view to enhancing their independence is both complex and controversial. This makes it a fitting subject for discussion within a forum whose general purpose is to reconcile the potentially very different viewpoints of those involved in fundamental issues of initial and continuing training and social integration. Our first Agora session will thus be a time in which to gauge the extent of our differences and to devise a common language.

The subject of the first session will therefore be 'Social solidarity and mental disability'

(a) This will require us to look at the whole question of disability as such:

    (i)   Who says someone is disabled?

    (ii) At what point do we start talking in terms of disability?

    (iii) Is mental disability a medical or a social fact?

(b) We shall look at the justification for vocational training of the mentally disabled:

    (i)   Does the vocational training of the disabled fall within Cedefop's remit or would this be more suitably left to qualified specialists?

    (ii) If the former is the case, should Cedefop not concentrate solely on vocational training for the 'employable' segment of the population?

    (iii) Should vocational training be limited to technical training (knowledge and practical skills) or is it directly linked to independence and the enhancement of generic abilities (learning to learn, learning to be)?

(c) This will lead us on to look at the role and importance of sheltered employment:

    (i)   Is the creation of sheltered working environments inevitable?

    (ii) Are mentally disabled people genuinely incompetent, inefficient and unproductive? How can one make the best use of their abilities? What is the role of initial and continuing vocational training in developing their skills?

    (iii) Are companies employing mentally disabled people profitable? Under what conditions?

    (iv) What should be the status of mentally disabled workers?

As a European public-sector organisation specialising in the study of the objectives, social function and implementation of initial and continuing vocational training, with the aim of developing initial and continuing vocational training in the Member States of the European Union and associated countries, it is natural that Cedefop should regard disability as a social rather than a medical problem. The obstacles to vocational training for the disabled and their lack of social integration and independence stem at least as much from external sources (resistance from the social environment) as from the disability itself. Even so, no one would deny the degree and specificity of the manifold difficulties experienced by mentally disabled people. Providing them with guidance and training therefore takes on a very particular dimension. However, the principles underlying the educational and vocational guidance of people suffering from mental disabilities are not very different, in terms of objectives and constraints, from what they are in general. They only differ in that they call for precise knowledge of the conditions needed for employment of people with various disabilities and of relevant legislation, which may either benefit or disadvantage the people in question. They also require an awareness of the subsidies designed to compensate for any differentials in productivity and economic performance. The idea is not to channel people into dead-end jobs which can themselves cause trauma. As the aim of training is to integrate disabled people as

far as possible into so-called 'normal' society, we shall focus on the types of training best suited to achieving autonomy and independence, with the emphasis on combining general education and vocational training. It would thus seem desirable for training to take place in a normal school environment so as to include disabled people in an open environment while getting other pupils, apprentices and students accustomed to contact with those who one day will work alongside them (cf. Agora 9 on alternative forms of training). Apart from the disability and its traumatising and painful effect on the persons concerned, it is the attitude of other people that most influences their quality of life. Integrating the disabled and the non-disabled as early as possible will enable the latter's attitude to be more easily moulded, making them aware of all that they have in common as well as of what distinguishes them from these other 'peculiar' people, triggering a process of identification and acceptance. Training for the disabled therefore also means, and perhaps chiefly means, training for the 'normal' people around them, training for society itself. This ties in with the question of social solidarity discussed in the first session; it also leads on to the third session, which will deal with training for trainers and others professionally involved with the disabled through training and work.

The second session of this Agora will therefore focus on the core of the problem, on 'Training of the mentally and psychologically disabled and the transition from institution to integration'.

(a) We shall touch among other subjects on a number of questions concerned with methods of training for the mentally disabled:

  (i) Should vocational training for the mentally disabled take place in specialised institutions or could it be provided in conventional training establishments? If so, to what extent and under what conditions?

  (ii) What is meant by quality vocational training?

  (iii) What criteria or quality standards should be applied to vocational training for the mentally disabled?

  (iv) What in educational terms are the advantages and limitations of living in an open environment and what is the impact of the skills acquired there on working efficiency?

  (v) How much stress should be placed on initial training and how much on lifelong learning?

(b) This session will provide an opportunity to consider the frontier between vocational training and training in social and generic skills, which everyone now agrees are the most important for all kinds of worker:

  (i) In training mentally disabled people what part should be played by technical and what by social training?

  (ii) Is vocational training not the best means of developing social and generic skills?

Regardless of whether they work in a conventional training centre open to disabled people or in a special centre, trainers are of primary importance for the success of training and the integration of disabled people into social and working life. The necessary know-how and the particular skills required – in other words the professional approach they need to develop – are not a matter of chance but are acquired by means of specific training.

Moreover, not just teachers and trainers but everyone involved in initial and continuing vocational training – parents, social workers, company instructors, administrative staff and executives – need to be given specific training according to their particular role in the educational process, so that they are prepared for the specific situations in which they are required to intervene.

Consequently the third session of this Agora will focus on trainers in the broad sense of the word, that is, teachers and other professionals called on to work with mentally disabled people in order to provide support and assist their integration into economic life, and will consider the profiles for such trainers, the difficulties they encounter, their expectations and their training.

(a) This session will deal particularly with the profile of trainers and other professionals working with disabled people:

   (i) How does a trainer working with the mentally disabled differ from any other teacher or trainer?

   (ii) What personal commitment does this kind of work involve?

   (iii) What particular skills are called for?

   (iv) In what type of establishment and/or by what kind of learning process do they acquire their special skills?

   (v) Do the necessary initial and continuing training courses exist?

   (vi) Have the professionals currently involved in this very particular kind of training or otherwise working with the mentally disabled received any specific preparatory training for their job and if so how much? Is there provision for continuing training?

   (vii) What is the status of these professionals and what career opportunities are open to them?

(b) In this session we will also discuss more technical aspects of the training of trainers and other personnel:

   (i) How much of their training is specifically related to their work as initial and continuing training instructors and how much is directed to preparing them for the political and social side of their work as trainers for the disabled? In particular, how much attention is given to labour law as it relates to disabled people, to special teaching, and to accompanying social provision (social security, housing etc.)?

(ii) How important would it be to create a network of trainers for the disabled and for those training the trainers?

(c) Finally some time will be spent looking at the European dimension of training for trainers working with the mentally disabled:

(i) Practical aspects of training for trainers of the disabled and of the training given to the disabled themselves. Do these differ greatly from one EU country to another? Are the approaches adopted very different?

(ii) What might prove to be best practice in this area?

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Agenda

Thursday 5 July 2001

9.00 Opening presentation: issues to be debated in the Agora, Johan van Rens, Director of Cedefop

9.20 The electronic survey of Cedefop on the future prospects of new technologies of information and communication for mentally disabled people, Colin Mc Cullough, Cedefop

Session 1: Social solidarity and mental disability

9.30 Mental disability: medical fact or social construct? Gaye Hutchison, Self Direction Community Project, Penryn, Cornwall (UK)

9.45 Disability and autonomy: improving the quality of life of the mentally disabled, Carmen Duarte, Centro de Educação para o Cidadão Deficiente – CECD, Mira Sintra (Portugal)

10.00 Professionnel qualification in private enterprises, Helmut Heinen, *Dienststelle für Personen mit Behinderung*, German speaking community of Belgium, St. Vith

10.15 Discussion

11.00 Work productivity, competitiveness and job creation for the mentally disabled: new ap-proaches by companies and social enterprises, Rainer Dolle, Arbeit und Bildung, Marburg (Germany)

11.15 The effect of globalisation on mentally disabled people, Alberto Alberani, Legacoop, Bologna (Italy)

11.30 The disabled and employment: a difficult comparison of policies within Europe, Juan Carlos Collado, Director of the Centre for Economic Studies of the Tomillo Foundation, Madrid (Spain)

11.45 Discussion

Session 2: Training of the mentally and psychologically disabled and the transition from institution to integration

14.00   Integrated training, adapted training, individualised training: which form of training for the mentally disabled? Annet De Vroey, Katholieke Hogeschool Leuven, VOBO (teacher training for special education) – Gezin & Handicap, Parent Association, Antwerp (Belgium)

14.15   Initial and continuing training of the mentally disabled in lifelong education and training, Christian Robert, Centre de formation continuée spécialisée de Mons Borinage (Belgium)

14.30   Moving from the institution to open employment, Geoff Warner, SPAC-ES (Greece)

14.45   Discussion

16.00   What kinds of education and training are proposed to mentally disabled people in the different European countries? Victoria Soriano, European Agency for Development in Special Needs Education (European Union)

16.15   Occupational autonomy and/or personal autonomy? The role and significance of shel-tered employment (CAT) in the emancipation process, Gérard Zribi, Association des familles et amis pour l'accueil, les soutiens, l'éduca-tion et la recherche en faveur des personnes handicapées mentales (A.F.A.S.E.R.) (France), président de l'Association Nationale des Directeurs et Cadres de CAT – ANDICAT

16.30   Héraclès: a community project for the social and occupational integration of disabled workers, Jean-Pierre Marois, ADAPEI of Bas-Rhin – Departmental Association of parents of mentally disabled persons and of their friends in the Bas-Rhin (France)

16.45   Discussion

18.00   End of day one – In addition to the programme and without interpretation: Screening of the first part of 'Where I would go, if I could be …', Franco-Italian film realised by Alain Casanova and Monique Saladin, and produced by Star-film-International.

The film consists of two parts dealing with the problem of the integration of seriously mentally-handicapped adults into an ordinary working environment in Genoa. The first part, which will be showed here, illustrates with examples the philosophy underlying the challenge represented by the integration of over 350 mentally-handicapped per-sons over 10 years.

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Session 3: Training of trainers and other professionals providing support for the mentally disabled and assisting their integration into economic life

9.00 How does a trainer working with the mentally disabled differ from any other teacher or trainer? Hans-Jürgen Pitsch, Institut d'Études Éducatives et Sociales – I.E.E.S., Fentange-Livange, (Grand Duchy of Luxembourg)

9.15 Training of trainers in learning disability services – is learning or disability the main issue? Paul Twynam, Training manager, the Home Farm Trust, Bristol (UK)

9.30 Training of trainers of the mentally disabled in Europe? Angelika Bühler, Forschungsstelle für Berufsbildung, Arbeitsmarkt und Evaluation an der Fachhochschule für Verwaltung und Rechtspflege, Berlin (Germany)

9.45 How important is it to establish networks of trainers and of trainers of trainers when preparing these very special people? Raymond Ceccotto, Président de l'Association de Recherche et de Formation sur l'Insertion en Europe – ARFIE, Directeur de l'Association de Parents d'Enfants Handicapés Mentaux – APEHM Bettange-sur-Mess (Grand Duchy of Luxembourg)

10.00 Discussion

11.00 Round table: players in initial and continuing vocational education and training (ICVET) – Topic: Integration of the mentally disabled into enterprises and follow-up

- Stefan Trömel, European Disability Forum (European Union)
- Martin Hubers, Ontwikkelings Maatschappij IJsselmonde – OMIJ (Nether-lands)
- Josette Dixneuf, Confédération Française Démocratique du Travail – CFDT (France)
- Katharine Davenport, European Association of Craft, Small and Medium-Sized Enterprises (UEAPME)
- Henry Lourdelle, European Trade Union Confederation (ETUC)
- Ioannis Koukiadis, Member of the Disability Intergroup of the European Parliament (Greece)

12.00 Discussion

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1. Mental Health: Medical Fact or Social Construct

Gaye Hutchison ([1])

Thank you for inviting me here to speak at this Agora, which I consider a very great honour. I hope that I will play my part well and that during the course of the conference we shall identify areas that are open for change and ways that these changes can take place within our individual working practices.

15 years ago I had never given much thought to what it must be like to be disabled and did not have very much to do with disabled people in general.

In 1986 whilst attending a Farm Show I felt something go into my eye, I thought at the time that it was a hay seed and I immediately went to the medical tent to have it attended to. Within 3 days my retina had detached and I was consequently informed by Professor Bird of Morefield's Eye Hospital in London, that I had been the victim of chemical warfare that was in use at that time in the Gulf area. The condition was called Ocular Hystoplasmosis.

Apparently scientists had developed an airborne chemical, which travels much like mushroom spores do and, a minute particle of this had travelled with the wind from the Gulf, across Europe, and had, unluckily for me, landed in my eye.

I had my retina lasered back on, but six months later I was told by a specialist that I should expect to gradually become totally blind and that I had about 5 years to live. That was 15 years ago!

Although I am now registered as Blind I am still able to read from large print documents as you can see, utilising the limited vision that I have left.

One of my options was to try and fight for compensation, which would have probably consumed all of my time and may not have resulted in success. Therefore, I decided to do something a little more positive which I will share with you later.

Of course, at the time, this news totally devastated my life and I spent five years literally waiting to die. It caused a break-up of my long-term relationship with my partner because he was unable to deal with this awful medical prognosis and he decided not to stay to watch my health deteriorate.

Some of the other effects that this experience has had on my life meant that my employer did not renew my work contract and I found my finances quickly diminished leaving me in a

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([1])   Project Manager for Self Direction Community Project

poverty trap. The uncertainty of my future and my ability to continue to care for myself, when and, if, my condition worsened, certainly had a detrimental effect on my mental attitude and self-confidence.

I eventually decided to attend a homeopath who prescribed a remedy and my condition stabilised. I began to feel better, I meditated regularly and, by 1992 I started feeling much more positive, so much so, that I was going into the Job Centre every day looking for work and asking to be sent on interviews.

One of the Job Centre staff pulled me to one side one day and said, 'Why do you keep coming here looking for a job? You are getting extra benefits, so why don't you just stay at home? There are so many able bodied people who are unemployed, you really don't stand a chance of getting work.'

I was so incensed by her inference that my abilities were no longer of value within the employment market because of my disability that I wrote to the Employment Service identifying where I thought their service could be improved. I offered to provide a counselling service for people like me who were coming to terms with a disability, but who still felt that they had skills and abilities to offer that could provide them with a means of income where they would not be reliant on state benefits.

The Employment Service agreed to fund a one year pilot project for GBP 13 000 with the proviso that they would maintain the intellectual integrity of the project, which meant that they expected a report which would show them how to work more effectively with disabled people.

The report that I duly produced described why the project was successful and how this was due to the fact that everyone was listened to, valued and dealt with on an individual basis.

Nine years later, the people within the Employment Service who thought that this approach was unrealistic at the time, have realised that there is much value in using this method and have recently come back to me to learn more about why Self Direction Community Project is so successful in getting people back into work. They are now trying to adopt a similar approach themselves.

The Self Direction Community Project, of which I am the founder, has grown from having solely myself as an unpaid volunteer to now employing seven staff members, all of whom are people with varied disabilities. We began by simply providing a counselling and advice service, then added an IT & Business Administration Training facility which provides Nationally Accredited Vocational Training as an Approved F E Centre for City & Guilds training courses up to and including level 3.

In 1995 we recognised that even though people who attended the project were achieving vocational qualifications this was not assisting them to gain employment and we started to look seriously at what these barriers were.

Frequently we encountered disabled people who related bitter experiences to us of having attended other training agencies and of the lack of specialised staff and support within them. Often, although these people came to us thinking that they had obtained a full NVQ, usually we found that they had only achieved one unit of the NVQ which, unfortunately made them no more employable than they were before they started the training course.

Many training agencies had found themselves placed under immense financial pressure of having to achieve measurable outcomes and often tried to fit disabled people on to inappropriate training courses with little or no thought of the eventual consequences that this situation would have for the person and their future employment prospects.

There was extra funding available to training providers for disabled beneficiaries and suddenly every training agency was targeting their recruitment at The Disabled, whether it had trained staff with knowledge and experience in this field or not.

Very often this attitude served to disenfranchise the participant creating a negative and debilitating influence over them about training courses generally, leaving nothing more than a sense of failure.

It appeared that many funding strands, including the European Social Fund (at this earlier time), allowed no flexibility for providing training for people who did not achieve a unit or a whole Vocational Qualification as a measurable outcome. There was no recognition for the level of individual achievement or the enhancement to self-esteem and quality of life.

The result of this circumstance was that employers discovered very quickly that National Vocational Qualifications did not always mean that the holder could actually do the job that they appeared qualified to do and, a great deal of scepticism existed toward this qualification system.

Many training providers have recognised this and are now addressing the matter by ensuring that unemployed people undergoing vocational training do actually receive work experience at the same time.

Other barriers were also identified. Mainly it seemed to be that employers were afraid to give disabled people a chance at employment. Many employers said that they thought it would mean that an employee with a disability would take more time off work than an able-bodied colleagues; or, would cost them large amounts of money in making adaptations to business premises; and would mean that the employer might need to purchase additional equipment.

In addition, one of the other concerns voiced by employers was that they feared simply communicating with disabled people and thought that this would present a problem – the easiest solution found was not to employ anyone with a disability regardless of that person's abilities or qualifications.

According to The Royal Association for Disability and Rehabilitation (RADAR), on average people with a disability only miss 8 % of their work attendance, compared with the absences

due to sickness of able bodied people who it is claimed, on average miss 19-35 % of their work attendance.

RADAR also report that a disabled employee will give an employer 95 % of their attention to their work in an effort to be recognised on an equal level with others, who normally only give their work 40 % in terms of effort and commitment.

The Disability Discrimination Act was introduced in the UK in 1995 and was to be implemented in stages. At first this seemed like really good news from a disabled person's perspective, but it has actually worked against us, in that it has deterred more employers from giving people with a disability a chance, because they are afraid that they will now be forced to provide expensive equipment; make expensive alterations to the work place; or that they will not be able to dismiss the disabled employee for fear of being sued on the grounds of discrimination.

Three years ago we received the funding that allowed Self Direction to provide training for people with varied disabilities to wished to become Providers of Disability Awareness, in order to attempt to change existing attitudes, dispel preconceived ideas and lift some of the organisational and social prejudice that still exists about disability.

It was very difficult to persuade local employers that they could actually benefit from receiving Disability Awareness Training for their staff, for the reasons already mentioned. Additionally, we encountered many employers who had already experienced what was known then as Disability Equality Training, which had been delivered by disabled people who were frustrated by the lack of opportunities available to them, demanding what they considered to be their rights, and using scare tactics to try to change the attitudes towards disability in the training and employment arena.

We use a much more positive approach. In general, it seems that Equality can only be achieved through heightened awareness of all the relevant issues. This is why we are still concentrating on raising awareness throughout all sectors in the hope that eventually true Equality will be reached.

The training that we offer enables the people who choose to become providers, assisting them to build confidence through self and peer feedback and support. The use of technology assists us to show that we are professionals in the disability arena because, after all, we are the experts on disability issues. By doing things in this way we are creating a positive image about Disability in society. Disability Awareness Training provision is a unique opportunity that we have identified as a means of creating 'real work' for disabled people in the labour market

I have been using the word 'Disability' in its broadest sense, but now I would like to specifically address the subject of Mental Disability, which is certainly a broad term in itself. To clarify my point I held a consultation with the User Steering Group of Self Direction Community Project to look at my task of speaking at this Agora.

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The first thing that came up for discussion was how to define mental disability. There were two definitions arrived at which were as follows:

The First was Mental Illness – this applies to such conditions as depression, schizophrenia, paranoia, compulsive behaviour disorder, agoraphobia, – the psychiatric labels are endless. It is often due to trauma, stress, or chemical imbalance through physiological causes. Often the effects of mental illness display themselves through a person's behaviour, but usually there is no physical damage to the brain. Most conditions can be controlled by prescribed medication, which can lead to an altogether different set of problems for the person concerned.

The second definition was Mental Impairment – this has many variations and can be caused by some physiological damage to the brain. An accident involving a blow to the head, lack of oxygen at birth, chemical pollutants, or congenital defects could all cause mental impairment.

Both conditions though, affect such people to a greater or lesser degree in similar ways. There are often some signs of:

(a) impaired judgement

(b) limited reasoning

(c) unclear evaluative processes

(d) attention and retention deficit

(e) loss of physical and emotional control

(f) lack of social and or life skills

Very often it is incorrectly assumed that people who are born with Cerebral Palsy, Downs Syndrome and Autism, (to name but a few), are people who have a mental impairment, but this is not always true. It is therefore important to be aware that simply because a person looks a certain way they may not have all the characteristics associated with these, or other conditions.

It was agreed unanimously by the Steering Group that the various conditions which fall under the umbrella of Mental Disabilities must all be viewed on an individual basis, as each condition would have its own specific requirements concerning the amount of care, support, and varied levels of specialist attention that each person might require.

In my experience of working with The Self Direction Community Project, there have been many people who have been diagnosed as having a particular psychiatric condition who had been led to believe that they were incapable of employment. They were also of the opinion that they would never be able to function within their community because 'the professional' had placed this barrier in their path.

Many societies view disability from a Medical Model perspective which always focuses on the negative aspects of disability, in that it is the disabled person who is the at the centre of the problem, unable to be independent, always in need of medical treatment and unable to be

autonomous. This patriarchal and oppressive attitude creates disempowerment, isolation and exclusion.

The perspective of the Social Model, on the other hand, implies that rather than the person with the disability being at fault, it is our environment that prevents inclusion.

For instance, a person may have been growing depressed over a period of years due to increasing signs of pollution and decay in their environment for which they might be offered psychotherapy, which in this instance, even if the treatment went on for several years, would never bring about any improvement in their condition. On receiving assistance to identify and recognise the cause of their depression through person centred counselling the person can then be advised of environmental groups and activities that can address the root cause of their condition, and by taking action within these groups they have begun to effect their own cure.

Person Centred counselling and the use of a non- directive approach are hugely underestimated tools for assisting people to recognise imprinted, indoctrinated, negative images imposed upon them by The 'Media' and 'The Professional'.

Sometimes it is simply is a case of identifying what is causing a person to feel depressed and asking them how they wish to address the problem.

How we are attempting to lift such barriers and to promote inclusion within our project is by taking 'A Person Centred, Non-Directive Approach'. These methods were the brainchild of American Counsellor and Psychologist Dr Carl Rogers and were actively developed and encouraged by him in the early 1960s. They are also the tools used by the staff of Self Direction which serve as a key for each individual to unlock themselves and recognise their full potential when seeking assistance from the project.

To facilitate this method further within the training arena, it may be necessary to firstly untrain the trainers, and assist them to adopt a new way of viewing the people that they work with so that each person can be heard on an individual basis, and not be compartmentalised, labelled, and dealt with according to a workable, but disempowering, conveniently adopted approach, which may or may not get that person a vocational training qualification.

Instead, the use of lateral thinking becomes an integral part of working, identifying the value of each person's abilities, and enabling the person to view and value themselves, assisting them to recognise the opportunities available so that they can gain control of the quality over their lifestyle and the level of their achievements within it.

I am asked many times what it is that makes Self Direction successful, and I tell everyone who asks the same thing – we treat everybody with respect, and in the same way that we would wish to be treated ourselves. Why is it that this lesson has to be learned, when it is the fundamental principle of being a human being who is concerned with good citizenship?

It is my personal opinion and belief that it is the fundamental right of every person, no matter what disadvantages they may face, to have the freedom to access opportunities and make

choices from the experience of learning. If this simply means improving chances of inclusion and participation for people then it is crucial that the funding and agencies remain available for this to occur.

If we as a society can remove the physical barriers that currently exist, for example within the design of buildings and transport; if we as a society can develop new ways to provide accessible information and lift the prejudicial attitudes and assumptions which prevent disabled people from inclusion; and if we as a society can influence or bring about a change of perspective from that of the Medical to the Social Model then we will truly create a healthier more positive world for everyone concerned.

2. Disability and independence: Improving the quality of life of disabled people

Carmen Duarte [2]

A number of basic documents have been published on the subject of equality of opportunity for disabled people.

The Standard Rules on the Equalization of Opportunities for Persons with Disabilities issued by the United Nations in 1994 say that besides following the guidelines contained in the rules when formulating their national policies, states should also allocate funds to promote their implementation and make them a reality in the social life of disabled people, thus enhancing their inclusion in the societies to which they belong.

The European Union has also shown concern with this matter and states in Article 26 of its Charter of Fundamental Rights signed in Nice on 7 December 2000:

'The Union recognises and respects the rights of persons with disabilities to benefit from measures designed to ensure their independence, social and occupational integration and participation in the life in the community.'

As early as 1996 the European Commission presented a set of guidelines for ensuring equality of opportunity for persons with disabilities. These deal with matters such as respect for the independence of disabled people and adapting education and training systems so as to facilitate their participation.

The guidelines also emphasise the need to overhaul social services and to encourage the development of other forms of support to promote integration.

They state that the design and operation of support services should focus on the individual.

The guiding principle of the guidelines is integration and the need to ensure continuity of services so that support is provided for disabled people throughout their lives.

The guidelines also give indications as to how the principle of integration may be applied, either by working with disabled persons themselves or through the non-governmental organisations representing their interests.

They further recommend that attention should be given to the question of access from the point of view of equality of opportunity and the right to participate in society.

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[2] Fenacerci, C.E.C.D., Mira Sintra

This subject should be addressed, they state, at various levels of society so as to ensure that people with disabilities enjoy equal civil rights and to help them to gain employment as an essential part of integration.

The guidelines also refer to the need to influence public opinion in favour of equality of opportunity for people with disabilities.

Many EU Member States have already included a number of these principles and guidelines in their domestic legislation concerned with action to help the disabled.

Nonetheless, if we examine what the law says and what has actually been achieved in practice we must admit that we still have a long way to go.

While we must recognise that some things have changed as a result of various projects that have been carried out, examples of best practice that have been formulated and positive progress that has been made, we have to admit that there is still a wide gap between current practice and what is advocated and will one day, it is hoped, be achieved, and that inequality and discrimination abound everywhere.

Turning to the subject on which I was asked to speak, namely 'Disability and independence – improving the quality of life of disabled people', I think we should address the subject from a broader perspective, using a person's whole life as a reference framework.

As we are all aware, independence is an essential element in all people's ability to assert themselves, and this is no less true of people who are disabled, particularly those with a learning disability. This is why educators should set as one of their chief objectives the development of strategies to encourage independence in children, young people and adults with disabilities as early as possible and throughout the requisite series of stages.

There can, moreover, be no independence unless systematic and effective efforts are devoted to developing the social skills of disabled people, since it is in this way that they will acquire the abilities necessary to improve their quality of life and to become better integrated into the societies in which they live.

So far as the world of work is concerned, it is of fundamental importance that people with learning difficulties should be equipped with the basic knowledge needed to find a steady job and keep it.

People with learning difficulties have only a limited capacity for adapting to the needs of a market in the throes of constant change and therefore require special training to ensure that their social behaviour is appropriate and that they are flexible enough to accept the changes that will make themselves felt.

Training for people with learning disabilities must be guided entirely by the principle that every individual is entitled to choose and pursue the way of life in which he or she feels personally fulfilled.

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Work is a key factor in that it permits us to meet our financial needs, develop personal relationships and acquire a more positive and healthier view of ourselves.

From this point of view, and bearing in mind what has already been said, training should aim to maximise disabled people's active involvement in the community and enable them to take decisions on matters of recreation, free time and employment. The ability to take such decisions makes for more satisfactory options in life and for maximum independence.

We must, moreover, not forget that the principal factor influencing success or failure in working life is the possession of social skills, even for those with no disability: some 75 % of job losses are the result of an inability to form social relationships at work.

A survey has clearly shown that those employing workers with learning disabilities look for the following personal and social qualities:

(a) punctuality,

(b) reliability,

(c) ability to follow instructions,

(d) ability to get on well with colleagues.

Until a short time ago particular emphasis was placed on practical training as a means of helping young people to enter the world of work. Nowadays, as I have already mentioned, we know that the possession of social and personal skills in other words learning 'to be' is extremely important.

Some ESF-funded projects have produced examples of best practice that stress the development of personal and social skills as the means whereby people with learning disabilities can improve their personal relations and involvement in the community, and particularly their ability to find and keep a job.

The main skills needed by people with learning difficulties are:

(a) sharing in and/or using the services to which they are entitled like any other citizen in their locality or country;

(b) evolving a mode of behaviour that conforms with existing rules and standards and with the roles that they have to play;

(c) developing communication skills and knowing how to behave with other people;

(d) developing personal and social independence.

Taking people's whole lives as the reference framework, as already suggested, it is therefore important to match the level of the different social skills required with the various areas of personal independence.

In private life, independence is required in social contexts such as means of transport, use of money, knowing how to shop, using the telephone, safety precautions at home, performing domestic tasks, knowing how to use certain domestic appliances, managing time, etc.

In the area of communication, we need to look at people's ability to understand others and to express themselves, using communication aids where necessary.

Personal abilities are also of great importance in the work context, particularly those connected with mobility, working pace, physical capacity to do the work, etc.

Cognitive abilities such as concentration, paying attention, remembering and observation need to be developed.

Behaviour at the place of work, such as attitudes to safety and hygiene, needs to be well developed in line with each individual's capacity.

It is also important that people should be aware of their rights and obligations as workers, particularly as regards contracts of employment, wages, working hours, hierarchy and authority, absences, official holidays, etc.

An area that must on no account be overlooked is that of social behaviour, which must be developed from as early an age as possible. Here I mean good behaviour, respect for others, honesty, friendliness, friendship, spontaneity, modesty, responsibility, tolerance, kindness, trust, assertiveness, emotional stability, flexibility and so on.

It is necessary to know how to listen, to apologise, to be able to ask for help or permission, to obey rules, to know how to work with others, to make contacts, to accept and react to criticism, to accept and give instructions, etc.

Attention must also be given to sexual behaviour, which is connected with social skills. In this case, matters connected with privacy, self-control, family planning, feelings, friendly and marital relationships and how to behave in one's own home are extremely important.

All the abilities referred to need to be developed on a socio-ecological basis, by which I mean in the context of the society in which the individual lives and of the familiar situations that constitute an integral part of his or her daily life.

Still on the subject of independence, it is worth stressing the importance of the self-advocacy movement, which is now beginning to make progress and will undoubtedly require us to rethink some of our previous attitudes and ways of behaving and to consider the many questions to which it is giving rise.

Organised self-advocacy groups are now, independently and in a more or less structured form, beginning to speak for themselves, expressing their wishes and feelings, aspirations and plans for life. They talk of how their lives have been and what they would like to change, of their desire for respect and their right to have an active say in their own future.

I have attended a number of self-advocacy meetings and learnt a great deal from them. Many people are appalled at having been discriminated against throughout their lives. Others, who are more tolerant, or have perhaps received more help in their social development, have finally learnt not to be afraid to say what they want for themselves.

Such movements must be respected, listened to and supported.

Those of us who work in this area need to keep an open mind and heed what they say. We need to listen and to be prepared to change some of the ways in which we act and behave which we have adopted over many years with the best of intentions but which are ultimately no longer satisfactory.

How many decisions have we taken on people's behalf that were not for the best?

How many times have we taken care to allow them time to take their own decisions? How often have we been willing to work out the best solutions in line with each individual's dreams?

Quite simply it is by people's joy of life, sense of achievement, welfare and full integration into society that we can measure the quality of the services that we provide for them.

In conclusion I shall quote a remark by a client of the organisation for which I work which might help us to think of how we should respond in matters of training and work so as to improve the quality of life of disabled people:

'If disabled people have the courage to work, employers should equally have the courage to employ them. I do not want to be left on one side, since my future then would be zero. I have to work.'

3. Professional training of the mentally disabled in enterprises in the open labour market

Helmut Heinen ([3])

3.1. Introduction

In the course of several stages of constitutional reform over the last 30 years, Belgium has developed into a confederation.

As a result of these changes, extensive autonomy has been granted to the regions and language communities.

Thus, the German-speaking community (with approx. 70 000 German-speaking inhabitants in a territory of 860 km²) today has the same constitutional responsibilities as the Flemish Community (with some 5.5 million inhabitants) and the French Community (with about 4.5 million inhabitants).

These responsibilities now include education, culture, social affairs and employment policy.

The *Dienststelle für Personen mit Behinderung* (Service for Disabled Persons) of which I am the Director, is an institution under public law charged with statutory responsibility for looking after the interests of people with disabilities.

It promotes, supports and supervises a broad spectrum of projects ranging from early childhood support via information and counselling, housing facilities and leisure-time activities, mobility and access, to the subsidising of workplace adaptations and technical aids.

Most of the establishments and services are funded by private bodies.

The 'Start-Service' project was developed by the *Dienststelle für Personen mit Behinderung*, which is also responsible for its implementation.

3.2. Start-Service

Start-Service is a service for the training of people with disabilities or impairment.

([3]) Director of the *Dienststelle für Personen mit Behinderung* (Service for Disabled Persons) in St. Vith, Belgium

Its activities range from information and counselling to occupational integration.

3.2.1. Clients

(a) The clients of Start-Service include in particular people with mental, physical, sensory and/or psychological disabilities.

(b) Another important task undertaken by Start-Service is the attempt to find training places and jobs. Partners in this case are mostly private companies in the open labour market, municipalities and local authorities, social enterprises, public services and workshops for the disabled.

3.2.2. Objectives

(a) To locate or design training facilities for disabled people that are geared to their abilities, interests and inclinations.

(b) To try to obtain regular employment for disabled people on the principle: 'as normal as possible and special only where necessary'.

These objectives are based on the concept of 'social participation', which is stressed in the latest version of the ICDIH, and the concept of normalisation.

The normalisation effect of training in private companies in the open labour market is of great importance.

Rigid, conventional attitudes have to be overcome as there is still much doubt whether the mentally disabled have a place in the free labour market.

This depends very much on procedures and methods.

Three elements are important:

(a) the pathway to integration,

(b) job coaching,

(c) customised legal provisions.

3.3. The pathway to integration

The pathway to integration should be seen as a continuous process which combines guidance, counselling, ongoing support, vocational training, skills training, continuing training, active job search and placement in regular work contracts.

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The beginnings of the pathway to integration are to be found in the earlier operational programme of the European Social Fund (ESF) and provide the guidelines for the new ESF programme, alongside job coaching and on-the-job assistance.

3.3.1. Case management

In the integration process, the Start-Service job counsellor is responsible for case management, which covers:

(a) rough assessment,

(b) planning,

(c) implementation,

(d) coordination,

(e) and monitoring,

in other words, a process of continuous cooperation and coordination.

3.3.2. Starting with the school stage (linking education and work)

The early stage is extremely important in the integration process.

The job counsellor (the case manager) starts work in the third-last or at the latest in the penultimate year of initial education in order to prepare for a choice of occupation.

In this process, parents and employers work with teachers and vocational counsellors. All those concerned contribute their professional knowledge and experience so that resources are pooled and used in common.

3.3.3. Drawing up a life project

This procedure is another very important step.

The point of departure is each individual's specific situation, abilities, interests and inclinations.

After all, every person has a unique life story.

Together with the potential trainee, his or her strengths are identified [4] (self-assessment) and the need for further training (additional skills) is established.

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[4] *Von den Stärken ausgehen...* (Dietrich Eggert, 1997): A view of children as having capacities and potential rather than a view of children as having traits that will negatively influence their development.

Vocational guidance is mostly undertaken by an external service but is always based on criteria rooted in reality.

A holistic approach is used to establish the life project. On the one hand, the interests and ideas of the disabled person are listened to and respected, and on the other hand, he or she is encouraged to participate actively in the integration process and to become aware of that involvement (co-responsibility).

The social situation of the potential trainee or employee plays a crucial role (partners). This includes housing, leisure-time activities, social integration, etc.

Services which may be required can also be mediated: e.g. supported living, assistance in selection of leisure-time activities, counselling in questions relating to partnership, emotionality and sexuality.

3.3.4. 'Suitability' and placement

The search for appropriate training or work options is now set in motion.

The key issue here is to find the most suitable pathway for the person concerned. Different situations call for different responses.

(a) An analysis is made of the profile of the occupational abilities of the person concerned and of workplace requirements in order to take operational limitations into consideration so that they do not constitute an impediment and have the least possible negative effect at the place of work.

(b) The analysis of the abilities of a disabled person is undertaken on a multi-disciplinary basis. Observations and information are collected from the employer, the vocational counsellor, the case manager and the applicant's self-assessment, and are jointly discussed.

(c) In the case of job placement there is seldom a perfect match (between the skills profile of the disabled person and the requirements of the job in question). In most cases gaps and shortcomings exist so that the two profiles do not fit together perfectly. In this case adaptation is needed.

It is important in this case to provide for targeted additional training units inside or outside the company.

Example 1: Training can be provided in physical stamina, using an appliance, greater attention to safety factors so that less vigilance is required, and so on.

Example 2: A young man training in a rose-breeding firm did not have enough reading proficiency to do the work efficiently. A list with symbols and numbers was therefore attached to the names of the roses so that he could identify the different varieties.

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The solution was to find an employer who could teach him these additional skills or was able to take steps to remedy the situation.

Job requirements at the workplace can also be modified if necessary.

This example shows how important it is to design projects geared to the individual situation and to find customised solutions.

In the German-speaking Community in Belgium, placement in training or employment can take the form of a practical training scheme (AIB – Ausbildung im Betrieb) at the workplace followed by a period of initiation in the company, which should later lead to a job under an employment scheme (BIB – Beschäftigung im Betrieb) in the open labour market, preferably in the training company itself.

Given that learning at the workplace is achieved by actually doing the practical work, a training place is very suitable for people who can primarily and predominantly learn through practical work and actual experience.

3.4. The training scheme and the employment scheme (AIB and BIB)

A brief description of the two schemes is given below.

3.4.1. In-company training (AIB – Ausbildung im Betrieb)

Target group:
(a) people aged over 18 years;

(b) people with disabilities aged 16 to 18 years of age, by way of part-time training;

(c) companies, local communities, social enterprises, public services;

(d) social status: no income, school-leavers and those in receipt of unemployment benefit, disability allowance or invalidity allowance.

Aims of the scheme:
(a) vocational training at the workplace – the first step to effective employment;

(b) targeted preparation for an occupation or for training in a specific field of activity (partial training) in the enterprise concerned (e.g. bakery).

Bases:
(a) vocational training based on the actual situation (in a normal environment);

(b) principles followed: 'learning by doing' or 'training on the job';

(c) individually adapted training content.

Ongoing support measures provided by Start-Service:
(a) advice for employers and their staff, and trainees;

(b) establishment of training content, pedagogical advice and ongoing support (job coaching);

(c) advice if and when technical and/or organisational adaptation at the workplace is required;

(d) a meeting with all concerned to review progress at least once every three months.

Financial considerations for the employer:
(a) EUR 135/month, EUR 215/month or EUR 315/month;

(b) the *Dienststelle* pays the difference between this and the minimum wage (EUR 1150 gross per month);

(c) the trainee is covered by social insurance.

Duration of the scheme:

12 months (can be extended).

3.4.2. In-company employment (BIB – Beschäftigung im Betrieb)

BIB is a follow-up scheme through which disabled people can find regular contracts of employment.

The aim of the scheme is to assist employers to give regular contracts of employment to people who have a reduced level of performance, by offering employers a financial subsidy towards the wages and social insurance contributions of the people concerned.

A wage subsidy, fixed by the relevant Wages Commission, is paid for the reduced level of performance. This subsidy can cover up to 40 %.

These schemes are also supported by Start-Service with the aim of facilitating individual development.

3.5. Mediation at the training place/workplace and follow-up support

Mediation at the training place/workplace and follow-up support are essential features of the integration process.

Mediation of the occupational integration scheme is extremely important. This mediation covers assistance not only to the person concerned but also, above all, to the company manager and the immediate colleagues and supervisors of the disabled person.

The trainee is supported at the workplace by a technically qualified person who does not belong to the company (i.e. the job coach).

This arrangement relieves the strain on fellow workers and the employer, as the job coach can take on some of their role as trainers and can provide relevant information to help the worker acting as trainer at the workplace (the tutor) gradually to take over the job of coaching the trainee.

The job coach observes and supports the different operational steps and helps the trainee to optimise his or her skills. Through targeted instruction and adaptation, the job coach can help the trainee to learn how to produce efficient work of good quality.

Alternating training is also provided so that AIB trainees have the regular opportunity to meet at courses outside the training company.

The purpose of these meetings is:

(a) mutual exchange of experience,

(b) improvement of key skills, including interpersonal communication skills,

(c) learning or refreshing of the necessary skills in counting, measuring, reading and writing.

Counting can be assisted by scales, reading by symbols, writing by stencils, etc.

This ongoing support should be given by job coaches who have a knowledge of teaching and skills in the field of special education.

Even after successful integration into the labour market, Start-Service continues to provide follow-up by being the contact point for employers, workers and their colleagues.

The purpose of this availability is prevention of misunderstandings and inadequate communication (through contact by telephone at regular intervals), and correction (by means of crisis management).

In addition, a regular assessment of the scheme is undertaken, every three months in the case of AIB and every six months in that of BIB.

3.6. Prerequisites and conclusions

Our experience has shown that several elements have to fit well together for satisfactory transition from school to an occupation and for successful integration into employment:

(a) the readiness of all those involved to participate in cross-sectoral cooperation;

(b) consideration of individual needs as the basis for action and design of tailor-made projects (creativity and free use of imagination);

(c) continuous mediation and regular assessment and adaptation of the projects (flexible handling).

In general the necessary structures already exist. It now remains for them to be coordinated, complemented and adapted as required.

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4. Job creation for the mentally disabled: new approaches in Germany through integration enterprises and employment companies

Rainer Dolle ([5])

The Federal Republic of Germany has an excellent network of sheltered workshops so that in every municipality or local community in Germany people with mental disabilities can find a sheltered workplace.

However, for more than 20 years, there has been growing dissatisfaction with these jobs and workplaces for the following reasons. First, the disabled people working in them are not able to earn more than an average of EUR 150 and secondly, many feel that these workshops are like ghettos where people are kept far away from the normal working world and normal jobs. It is indeed a fact that many such sheltered or 'protected' institutions (who, actually, is being protected against whom?) are located outside urban areas in special industrial zones where the disabled are kept out of sight.

Because of this long-standing dissatisfaction, the disabled, their parents, and above all dissatisfied social workers and educators started, 20 years ago, to introduce alternatives for the employment and work integration of the disabled.

Initially founded for people with learning and mental disabilities or psychological impairment, these social enterprises, employment companies, integration enterprises and others have built up their alternative approaches in Germany so far that people with physical, perceptual and other disabilities can today find jobs in these undertakings.

At the same time, special professional integration services have been set up which, through vocational guidance and assessment of the job histories and vocational qualifications of the disabled, through work experience placements, trial jobs and many other measures, have undertaken intensive efforts to find jobs for the disabled in the 'normal' labour market.

Increasing use has been made of job coaches, who provide special on-the-spot support to job-seekers, help to create adapted workplaces, and are always available as contact persons.

When the German Government amended the Law on the Severely Disabled ('Law to Provide for the Integration of the Severely Disabled into Work, Employment and Society') on 29 September 2000, these new approaches to the employment of the disabled were fortunately incorporated into law for the first time.

([5]) *Arbeit und Bildung e.V.*, Marburg (Germany)

Thus, for the first time in German history, there is legal regulation and financial support not just for sheltered workshops but also for integration enterprises, integration companies and integration departments employing the disabled in the open labour market, provided that between 25 % and 50 % of employees are disabled. The Law also has provisions governing integration services and their funding throughout the country. In addition, every disabled person seeking employment has the right to assistance from a job coach in the company.

This Law has taken a decisive step towards fulfilling the prerequisites for the following vision.

The disabled should be empowered to decide for themselves whether they have the ability and the desire to work in the primary labour market via placement through the Labour Office, whether they wish to enter a workshop for the disabled, to work in an integration enterprise together with non-disabled people or, by using the guidance and mediation of specialised integration services, to find an appropriate job in the open labour market with the assistance of a job coach.

We are still very far from achieving this vision, but at least in my town, Marburg (in Germany, from where I come), these facilities exist for unemployed disabled people.

In the second part of my paper I would like to discuss the new integration enterprises in more detail and will take one of our own integration businesses as an example.

Our largest employer (a limited liability company – GmbH) runs a second-hand business selling second-hand furniture, second-hand children's clothing, second-hand toys, etc.

We have a collection and delivery service which picks up and delivers the appliances and furniture from and to customers, and we have several repair workshops and various second-hand shops.

In addition we do business with second-hand building materials and carry out orders placed by towns and local authorities for services in the building and gardening/landscaping sectors.

In our company 10 % of the employees had always been disabled persons. When we heard that an experimental project with funding was to be established in Germany to determine whether in-house integration departments or integration enterprises for the disabled could be a useful alternative, we applied and were selected as one of the 16 model integration enterprises in Germany.

We are planning to create up to 16 permanent jobs in the new Integration Department, mostly for severely disabled women. The largest shopping centre in the region was selected as the location for the new second-hand shop for used electrical appliances with an attached repair workshop and a collection and delivery service.

We are thus associated with the biggest multi-media market in the region and have a large shop floor where we offer the interested customer both new appliances, second-hand appliances and services.

The business of the company is closely linked to the market and subject to all the usual entrepreneurial market decisions, fluctuations and the strict need to earn an income.

Eleven disabled and seven non-disabled people are employed in the Relectro company, earning an average of EUR 1500 in jobs which are subject to social security contributions and paid at the normal wage rate for such employment.

The disabilities of the disabled employees include the following: epilepsy, lack of hearing, mental disability/schizophrenia, cancer with resultant physical limitations, impaired vision, brain aneurysms, and mental disability/learning disability.

Last year the volume of business amounted to EUR 600 000, EUR 130 000 of which had to be earned from market sales.

In order to make these integration enterprises less dependent on public subsidies and to orient them more towards a market economy, it was decided to further reduce the wage subsidies for disabled persons and to take on the costs of educational measures and administration in the coming years.

This means that the target of our company plan has to be a doubling of revenue from sales and services so that it amounts to more than half of the total business volume. We aim to achieve this in three ways:

(a) expanding the core business by enlarging the sales area and the necessary storage space;

(b) introducing a broader product range of second-hand electrical appliances, especially personal computers and lamps, and setting up a new spare parts centre;

(c) undertaking Internet marketing with the aim of sales via the Internet in the future (e-commerce).

The average labour productivity level of employees at present is 40 %: absenteeism due to sickness sometimes amounts to more than 50 %, substantial working time is lost through vocational and language training, there is below-average execution of tasks through lack of professional competence, and performance levels are below average because employees cannot cope with certain workloads or are prone to stress.

We have normal staff development possibilities and motivation/performance incentives for all members of staff. These are set out in our company collective agreement and in the development plan for social and educational support.

In addition, we have ongoing individual social and educational counselling, on-the-job training and work experience placements, with the final aim of placing at least 20 % of our staff in the open labour market every year.

Last year we succeeded in achieving this goal for 4 out of 13 people.

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Perhaps it is important to know more about our company profile in order to gain a better understanding of this approach.

From our perspective, it is immaterial what handicap unemployed people have, whether they are allegedly too old (over 50), or too young (under 20), whether they have no trained skills, whether they are drug addicts, whether they are foreigners and do not speak German, or whether they have some form of disability.

In all cases we have to take the individual biography into consideration and find the 'right nut to match the bolt'. This approach means that we do not first and foremost concentrate on the handicap in question, but on the productive potential of the unemployed person, the re-discovery of his or her ability to work and the proper understanding of his or her performance capacity.

One great advantage in this context is that the usual wage is paid and is subject to social security contributions. Many of our disabled staff, who formerly lived in a residential home, can now afford normal housing because of this income and can lead a normal life in their own dwellings, so that the 'normality' of the job facilitates a normal social life.

The essential problems in the future will be the following:

(a) What are the economic survival chances of a market-oriented enterprise employing persons who have some form of disability? We have a strong feeling that the funders are placing an unduly heavy strain on our possibilities and overstretching our ability to operate with economic profitability.

(b) The claim that enterprises such as ours now have 'normal operations' has led to a situation where funders do not feel that special in-house educational activities have to be financed any longer. However, they overlook the fact that even so-called 'normal' companies provide social services and employ the requisite teaching and training staff.

(c) Another factor which detracts from commercial operations is the experience – similar to that of sheltered workshops – that the workers who are the most productive and therefore most capable of attaining our high productivity level, are the ones who tend to find jobs in normal companies after some time in the open labour market. This means that our own income is endangered.

The operation of model enterprises and integration departments in Germany will, in the course of time, show how profitable such businesses can be, even with a low level of subsidy.

This will definitely be another new and important step towards the occupational and social integration of disabled people in Germany.

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5. The effects of globalisation on the mentally disabled

Alberto Alberani ([6])

This report, presented to Agora 12 promoted by Cedefop, is the outcome of a debate conducted with many people working in the field of training and social services in Bologna. The intention is that it should be a first step towards further analysis and proposals. The hope is that, with globalisation currently such a 'hot issue', we can refocus our discussion on the new needs of the mentally disabled.

My sincere thanks to all those who have helped with amendments and suggestions.

5.1. Foreword

If we are to think about what might be the optimum proposals for training for people with mental disabilities and their trainers, we feel we should focus on the background conditions for the implementation of training activities.

There are in fact various scenarios, and each one of us, depending on our role, our identity and the specific area to which we belong, identifies with some of them and feels that some are more important, some less significant.

As far as I am concerned, as a European citizen living and working in the city of Bologna and concerned with social cooperation, I feel that the training pathways for the mentally disabled and their trainers today are greatly influenced by the trend we call globalisation, a trend which, willy nilly, concerns us all as European citizens – whether or not mentally disabled –and affects us all.

5.2. The phenomenon of globalisation in Europe

Globalisation is of immediate concern to us as European citizens, since the European Union as defined in Maastricht (whose parameters for inclusion and identity are merely economic and financial, not social and cultural), like the United States and Japan, is regarded as one of the bodies governing world destinies by means of specific instruments such as the G8, the OECD, the WTO, the World Bank and the International Monetary Fund.

([6])   Head of Social Policies, Legacoop Bologna

We live in a European 'monetary' Union which, together with those other countries, decides on economic policies that are to a growing extent at the service of powerful multinationals. The interests of those multinationals tend to be increasingly bound up with maximising profits even at the cost of dismantling social and civil rights or of widespread environmental destruction (of which the recent challenges to the Kyoto agreements are very symptomatic).

The facts are known, and this is certainly not the place to go more deeply into the issues and to express judgements on the phenomenon that we tend to call, a little disparagingly, 'globalisation', which of course has both positive and negative effects. It has become topical because of the massive protest movements, mainly organised at events such as those in Seattle, Prague, Nice and of course Genoa. Without going into their merits, we could at least bear in mind certain official and universally accepted statistics (source: WTO):

(a) 23 % of the world's population, i.e. 2 800 000 000 people, live on less than one Euro a day;

(b) the combined income of the three wealthiest men in the world (Bill Gates, Lawrence Elison and Warren Buffet) is equivalent to the GDP of the 48 poorest countries;

(c) life expectancy is 72 in Europe, 26 in Sierra Leone, 43 in Afghanistan, and 59 in Bangladesh;

(d) infant mortality in Europe is 5 per thousand births, 316 in Sierra Leone, 257 in Afghanistan and 107 in Bangladesh;

(e) 16 % of the population consumes 84 % of the paper, 58 % of the energy, 97 % of the vehicles, 74 % of the telephone lines and 98 % of the funds for scientific research.

I think these figures speak for themselves, and what may be of concern to us here today is understanding how they may affect our thinking on training.

5.3.   The effects of globalisation on the disabled living in poor countries

In our preliminary remarks, a very evident fact has emerged: the disparity between the mentally disabled living in industrialised countries and the mentally disabled living in poor countries. The poor in poor countries live badly, but the mentally disabled there undoubtedly live even worse: one merely needs to ask colleagues working in NGOs and the field of international cooperation to confirm this.

In discussing our subject, I believe it is helpful to be aware that in our own countries the primary needs of the mentally disabled – food, health care and drugs, respect for their individuality – are almost always met (partly due to certain effects of globalisation), as are sometimes other needs as well, such as education and work. Fortunately for us today, we Europeans can be here to talk about training, not about how to procure food.

It is also helpful to bear in mind that, whereas we work to satisfy the basic needs, there are millions of impoverished mentally disabled people who cannot gain access to drugs because this is prevented by the interests of the multinationals; there are mentally disabled people who have a very low life expectancy, and disabled people living in environments and contexts generating shortages and disease; very often they are also the first victims of archaic outlooks and of intolerance of anyone who is different.

I am convinced that we must be aware of those disparities, not so that we can wallow in vague feelings of religious or civic guilt but so that we are better able in our locally based day-to-day work to understand how often we fritter away so much time and resources discussing the minutest questions while there are problems as great as mountains that we cannot and do not even want to recognise.

5.4. The effects of globalisation on the disabled living in wealthy countries

Awareness of these factors (which on the whole we are forced to set aside if we are to go forward), may help us to understand what effects globalisation has on the lives of the mentally disabled living in wealthy countries, and in particular on training pathways. Globalisation does not merely affect the lives of the mentally disabled living in the southern hemisphere; it also affects those who live in wealthy countries.

This Agora is an important forum for thought on training and for comparisons, as related to the trainers and the disabled. Over these few days we shall be debating techniques, methodologies and content, perhaps in an attempt to construct useful, up-to-date training modules that will meet new needs.

I believe, however, that besides thinking about techniques and methodologies, we must start with the observation that, apart from their training itineraries, the social operators (I shall be using the term 'social operators' here to include educators, trainers and also volunteers and family members) and the mentally disabled living together day by day are constantly, whether they know it or not, natural trainers. They are trainers in a situation in which their actions and activities are not just subject to phenomena imposed by others, but in which the training actions they themselves propose may modify those phenomena.

I asked myself a question when thinking about this meeting, and I put it to those present here: is it possible that training (subject to adequate education and awareness) conducted by disabled people and the operators might even alter the negative phenomena associated with globalisation?

Globalisation in Europe today brings a heavy influence to bear on some of the environments in which the operators and the disabled live and work. These people now surrender passively to the phenomenon (at least in Italy) without realising the need to reactivate the training

itineraries promoted by associations for the disabled or by training bodies for the social operators – the bodies that work for the awareness and upgrading of the social role performed today by the disabled and the operators.

The values and principles that promote the magical encounter between an operator and a disabled person, the meaning that underlies their relationship, the sense of acceptance of their diversity and the willingness to listen, may be turned into formative actions directed towards people who are not disabled or social operators, and who may limit the negative effects of globalisation.

We need, then, to make the disabled and social operators realise that, whether or not they are aware of it, they are already true trainers within the environments where they live.

I shall try to reflect on two environments (the social services and work) in which disabled people and the operators live, and attempt to understand how these environments are influenced by certain negative effects of the process of globalisation and how those negative effects could be reversed through training offered by the disabled and the operators

5.5. The effects of globalisation on social services

The social services in wealthy countries today are increasingly the topic of debate; the politicians tell us ever more frequently that they are being forced to cut social welfare funds for very good reasons: either in order to enter Europe, or to be competitive, or as a result of financial considerations, etc.

The media have accustomed us to believe that the trend is inevitable. In fact, however, we Europeans created the welfare state in periods when there was less money to spare, and even so we managed to preserve it. Today too we can continue to fund it.

But today as never before the welfare state is a brake on the interests and profits of the multinationals. They are increasingly influencing the politicians, who slavishly defer to big companies and are held hostage by them (one need merely mention President Bush in the United States or the incredible conflict of interests of the Italian Prime Minister, Silvio Berlusconi). They regard the welfare state as a non-productive cost, believing that a few special institutions, a few mental hospitals and a little charitable giving will be more than enough to keep the mentally disabled quiet.

The social operators and the disabled, on the other hand, know the true value of the welfare state and the services that a just and fair state should guarantee. They should be the people to propose training courses for politicians, making them realise the importance of funding the social services, forcing the politicians to empower the services rather than close them down, making them realise that social peace and serenity can be brought about only by the existence of high-quality services.

Naturally it is paradoxical and unlikely for a politician to attend a traditional training course promoted by a mentally disabled person, and we must think about other training techniques. Since a face-to-face lesson would be hard to arrange, the training technique should be based on other activities.

I believe the most effective approach would be to go to the places frequented by politicians, to attend meetings of town councils and political parties, to go to banks and to luxury restaurants, and in those places to teach the importance of the welfare state.

5.6. The effects of globalisation on work

Another very important environment, in my view, is the workplace.

Over the past decade work has been affected by major technological innovations, and globalisation has also reinforced the trend towards delocalisation, so that local companies find it easier and less expensive to have their products manufactured by Asian children or women from Eastern Europe, as they come cheaper and are more susceptible to blackmail than local workers.

Outsourcing and technological innovation have gradually removed the opportunities for many mentally disabled people to work, particularly those who find it hard to learn the new jobs associated with the Internet economy and those who can no longer be taken on for the traditional simple, repetitive manual and craft jobs now being done in other countries.

These (and many other) processes have altered and devalued the sense of work, now seen as merely a means of obtaining profit and money (just a little for the workers, a good deal for the employers).

The social operators and the mentally disabled know, however, that work means more than money; it is also a human encounter with others, the sharing of knowledge, the satisfaction of doing something together which has implications going beyond money.

It would be useful, then, for entrepreneurs who are slaves to efficiency and profit to know that work has other implications and values; it would be useful for the operators and disabled together to take the initiative of engaging in very public visible activities, so that people realise that they are able to produce quality goods and services that also incorporate innovation.

What is needed is to come out of the sheltered workshops and leave the modest, repetitive jobs and to demonstrate the ability to do such things as running cafés, hotels, restaurants, car parks, theatres, cinemas, holiday villages and football stadiums, showing that the production of quality goods and services can be combined with respect for individuals and valuing people for the abilities they possess (current experience in Italy with B-type social cooperatives is demonstrating that this is feasible).

5.7. Conclusion

These are only a few of the spheres that offer food for thought on the effects of globalisation on the lives of mentally disabled people and on their training pathways. Obviously this is merely a summary, outline discussion of the subject, which calls for far broader and more detailed thought – something I trust can be launched.

In closing, I should like to point out that this report will be influenced by certain factors such as the outcome of the elections in Italy and the demonstrations expected in Genoa against the G8, but it has also been radically influenced by a book recently published in Italy that I would like to recommend to those who work in training or the social services.

It is the latest book by Edgar Morin, translated into Italian under the title *I sette saperi necessari all'educazione del futuro*. I have been greatly struck by some of these seven types of knowledge as well as the advice that Morin gives us on teaching terrestrial identities and understanding and on how to confront uncertainty. Once again, the advice has helped me to understand that instead of passively accepting processes imposed by others we, the mentally disabled and the trainers, can regain the confidence to be major protagonists in our shared building of a better and more equitable future.

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6. Economic Costs and benefits of integrating disabled people into the labour market. An European look ([7])

Juan Carlos Collado ([8])

6.1. Introduction

Expenditure on disability in the European Union in 1996 was the third most important social benefit item representing 8.5 % of total social expenditure and reaching 2.3 % of GDP (EU-15) (Eurostat, 1999). The following graph shows what the pattern for expenditure has been from 1980 to 1996 (for the countries considered in this paper: Germany, Spain, Finland, France, Italy, the Netherlands, and the United Kingdom).

Figure 1: *Disability Function: as a percentage of total social expenditure*
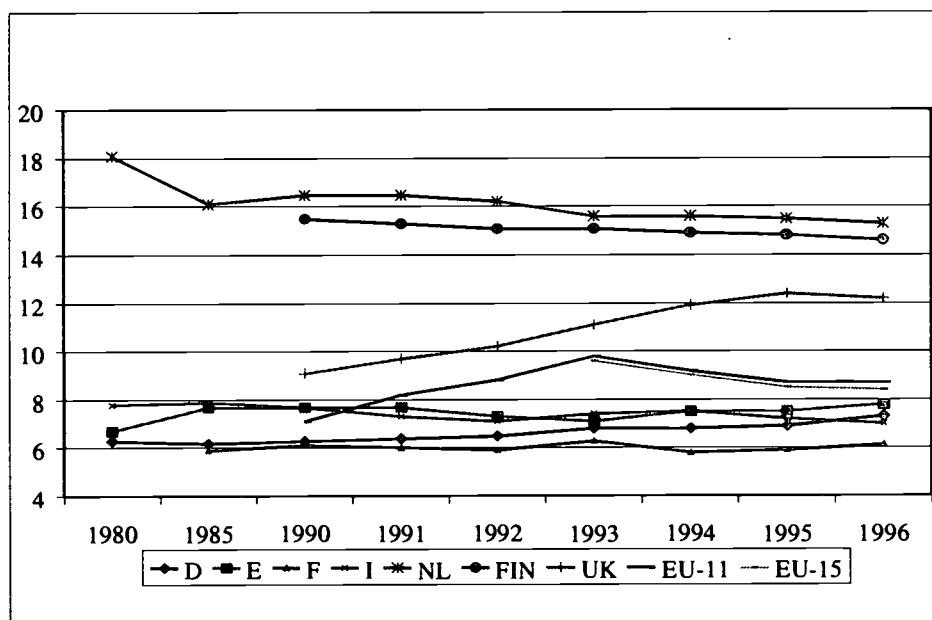
Fuente: Esspros, Eurostat, 1999.

([7]) This paper draws its main conclusions from a larger work 'Active Employment policies and labour integration of disabled people. Estimation of the net benefit' financed by the European Commission and Fundación ONCE in Spain. It is an effort to present a positive view of active labour market policies for disabled persons from a purely economic point of view. It is clear that the integration of disabled persons into all aspects of society, including the economy, is a fundamental right and thus should be effectively pursued.

([8]) Center for Economic Studies, Fundación Tomillo

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In general terms the relative weight of this expenditure has remained stable except that of the United Kingdom where it gained importance between 1990 and 1995. Our sample of countries also show that there seem to be two groups with high and low values of expenditure in this item, and that the UK seems to be transiting in recent years into the group with higher values. These two groups can also be classified into those above and below EU averages.

It is interesting to note that in two of the countries with higher values, the UK and the Netherlands, relevant studies have shown that there is a relationship between business cycles and the higher incidence of disability. This has been particularly evident in the Netherlands. However, we may add that in countries with lower proportions of expenditure on this item, such as Spain, the anti-cyclical behaviour of sickness and disability benefits was also found in the course of this study (a higher number of beneficiaries at the onset of a downturn and vice-versa).

This is also reflected as a percentage of GDP where in all the countries it has remained stable except in the UK where it has gained more than one percentage point in the period). In the following graph the evolution of social expenditure as a percentage of GDP is also shown.

Figure 2:   Disability function: as a percentage of GDP
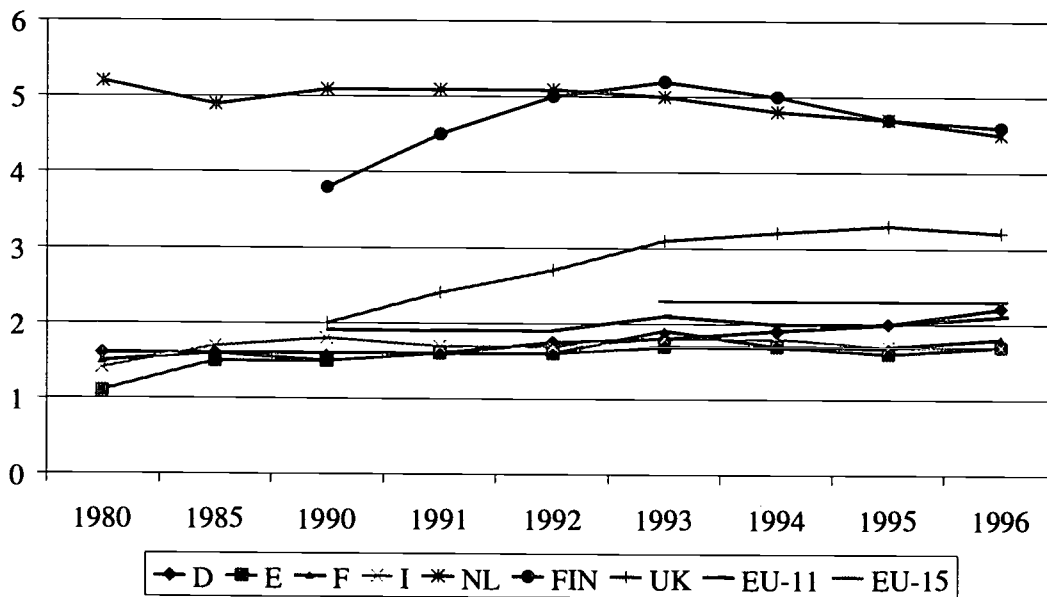
Source: ESSPROS, EUROSTAT, 1999

The use of disability as a substitute for lay-offs or other retention practices by employers, together with the possible effects on dependency-fostering disability income, reflect the labour demand and supply issues respectively in the areas that active policies must act with regard to disabled persons receiving benefits.

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However, our approach in this study is to simply look at the purely fiscal costs and benefits that a hypothetical insertion of all these individuals would have on each of the countries in the study. From the economic theory point of view the exercise is a static comparison of two situations. The use of occupational distributions and the corresponding income generated in the exercise allow for an analysis as close to reality as possible picking up direct as well as indirect taxes and social security contributions that would be generated by the change

Other similar exercises that have been carried out for disabled persons are those of the Canadian Association for Community Living (1991) and the National Institute of Disability Management and Research (1997), the latter also from Canada. In both the forgone taxes receipts are accounted for in the costs of disability. However, in neither of the studies the cost of actually inserting disabled persons into work is accounted for, that is the cost of the active policies needed to achieve insertion. [9]

Our study goes one step more and accounts for the gains in fiscal income to be obtained and the cost of active policies that would finally allow disabled persons to obtain employment. This viewpoint is based on the fact that at the moment in Europe there is a tendency towards the transformation of passive employment policies into active policies geared towards the increase of the employment rate.

In brief we have two objectives in this paper: First, to measure the net benefit of inserting working age inactive and unemployed disabled persons into work. This net benefit has been calculated as the savings in passive policies (including disability pensions and unemployment benefits for disabled people) added to the income from direct and indirect taxation and social security contributions of the new workers minus the cost of the active policies which aim at the insertion of disabled persons into work. And the second objective is to measure the impact of the increase in employment on the entire economy. This involves a dynamic view taking into account the interrelations of the economy in a time dimension. In other words, we would like to see the dynamics of the impact on such variables as GDP, inflation and income and how long it would take to incorporate a certain number of disabled persons into the labour market under a series of assumptions. For this matter a dynamic econometric and desegregate model has been used. In this paper, we present the main results of the simulation itself, leaving the details to the main work quoted earlier.

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[9] Another important difference with the present study is that in the 1991 study the distribution by age groups is taken as the base for calculating the income forgone in order to only include disabled persons (mentally handicapped) according to the Canadian average participation rates by age group. Thus an average Canadian wage is applied to all persons irrespective of age. In the second case, 1997, the costs are calculated based on accident information by economic activity and other costs such as productivity losses.

6.2.   A few words about the institutional context of disability

Although definitions across Europe differ, eligibility for disability benefits is closely related to the reduction in the capacity or ability to work or to gain income from an economic activity in all of the countries. On the other hand, countries that separate disabled persons into different systems according to their relation to employment might be introducing a bias in the possibility for an equal integration into work.

In some countries the high number of official institutions in charge of certifying, rehabilitating, training and managing monetary and non-monetary support for disabled persons seems to need either centralisation or close co-operation in order for disabled persons to benefit from labour insertion policies. Also, anti-discrimination legislation and quota systems must be complemented by other measures in order to raise the employment of disabled persons. In spite of critiques by employers, the high unemployment rate of disabled persons seems to warrant the use of quotas.

Employment protection tends to favour insiders who have acquired a disability while sheltered work raises some problems related to improving chances of work in open employment. Also, it is our view that institutions representing disabled persons have yet to increase their role as intermediaries between firms and disabled persons wishing to work and as promoters among disabled persons of return to work.

6.3.   Characteristics of the Disabled Persons Population and the Labour Market

In this section the results of the revision of the national statistical data sources on disabled persons and the use of the ECHP is presented. Although the institutional framework shows wide differences between countries and the definitions and eligibility rules for disability benefits also vary, the profile across all the European countries that was found for disabled persons is that of a male over 40 years of age with a low educational level. Those in employment also present this low educational profile. This information in itself already gives an idea of the difficulties to be encountered in the efforts to insert disabled persons into the labour market as far as the training efforts and adequate financial support are concerned, as most will have family responsibilities.

Additional information on the types of disabilities of those who work and those who do not could also give a more precise idea of where the efforts should be focused. However, some of the general labour market characteristics in each country may also affect disabled persons more markedly, which is the case of women.

6.3.1. Comparison of national data sources and the ECHP

The comparison of the ECHP data with the national data sources is one of the elements that gives European value added to this study.

However, the terms used in the ECHP questionnaire on receipt of disability benefits, as well as the availability of certain variables in the data set (such as number receiving disability pensions), have been found to limit the knowledge about disabled persons in some countries and thus the advantages that a homogenous European data set could offer are forgone.

In the following table a comparison of the national data sources and the ECHP is presented. Given the problems with terms used and availability of information, it is not surprising that the administrative data gives a different idea about the extent of disability in each country than the survey data. This is especially true in the case of Finland (6 % in administrative data versus 29 % in ECHP) and for Germany and Spain to a lesser extent. ([10])

Table 1: *Data sources and quantification of the number of disabled persons (years ranging from 1991 to 1998, see National Reports for details)*

	Number and/or Percentage		With respect to benefit adminis-trative data	Notes on the data sources
Germany				
Federal Employment Office	156 459 (6 % of unemployed)	Administrative		Almost 6 % of all unemployed
Federal Statistical office	6,6 million (W. Germany)	Administrative		officially registered severely disabled population
ECHP	20 % of working age population	survey	higher	
Spain				
Social Security	1 173 747 (2,9 % of total population)	Administrative		those receiving disability benefits
INEM (employment service)	42 374	Administrative		only those disabled persons who are registered voluntarily
IMSERSO (disability affairs)	636 428	Administrative		Information from handicap evaluations and reviews so far in the electronic database (estimated to reach 1 350 000)
EPA (LFS)	848 091 (3 % of working age population	survey	lower	use of a specific type of benefit in the survey question
ECHP	2 453 126 (6 % of total population)	survey	higher	European sample group, 1994
ECHP (benefit)	912 527	survey	lower	use of a specific type of benefit in the survey question, higher than EPA
France				
Social Security	3 300 000	Administrative		
INSEE-CREDOC	5 500 000 (9 % of total population)	survey	higher	household survey
ANPE (employment service)	152 000	Administrative		
ECHP (registered in	476 000	survey	higher than official	European sample group

([10]) The cross between receipt of disability or sickness benefits and the question on the general state of daily activity (whether persons are hampered or not) shows, in Spain, that the total number of these beneficiaries is very close to the actual administrative numbers but that, unfortunately, EUROSTAT does not distinguish between the two types of benefits.

			statistics	
ANPE)			statistics	
ECHP	2 253 000 (4 % of total population)	survey	higher	
Italy				
		Administrative		
ISTAT	2 700 000 (5 % of total population)	survey	higher	Figure for 1994 lower than for 1990 (at 3.3 million) after introduction of a more rigorous system of checking for disabilities
ECHP	6 682 620 (14 % of population over 16	survey	higher	
Netherlands				
National Institute for Social Insurance (Lisv)	896 000 (7 % of population >16)	Administrative		The Lisv commissions several administrative bodies to carry out the actual allocation of the disability benefits.
National Civil Pension Fund				Publishes data about disablement among civil servants
ECHP	2 590 980 (21 % of population > 16)	survey	higher	
Finland				
Social Security	309 505 (6 % of total population)	Administrative		
Employment service	74 730 (8 % of all job-seekers)	Administrative	n.c.	
Finnish health care survey	49 % of total population	survey	higher	self-reported situation similar to ECHP
ECHP	29 % of total population	survey	higher	severely hampered only 10 %
United Kingdom				
Labour Force Survey	3.9 million in working age (6.6 % of total working age population)	survey	survey and administrative data coincide	
ECHP	12 million (26 % of population > 16)	survey	higher	severely hampered only 18 % of population > 16

In the following graph the percentages of hampered persons, who may or may not be 'officially' disabled, in each country of the study are represented. While the differences in the severely hampered category are not very large, the category hampered to some extent does show wider variation. In fact the number declaring themselves as severely hampered is, in most cases, closer to the number of persons receiving benefits according to the administrative data.

Figure 3: Percentage of hampered persons
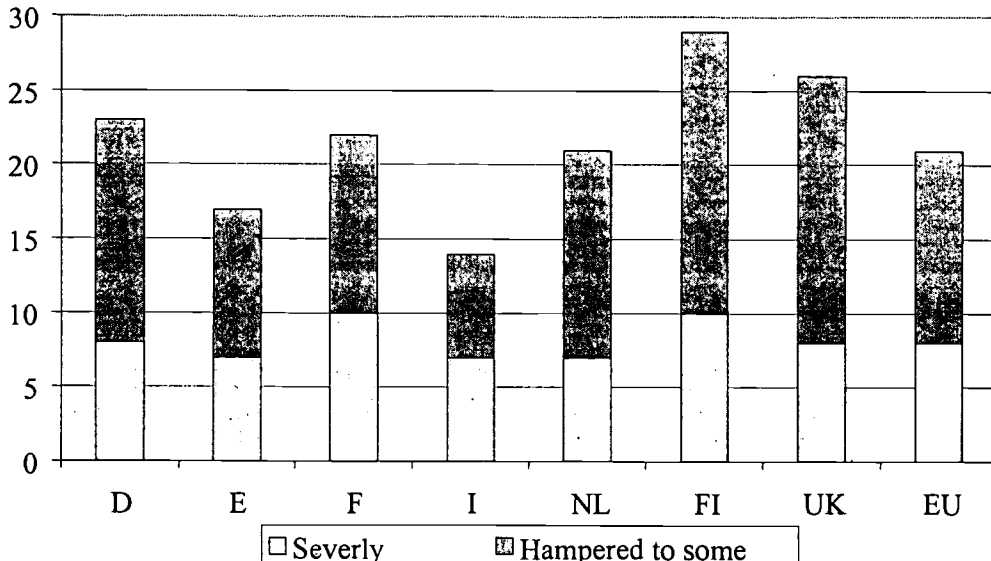
Source: ECHP, EUROSTAT,

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Most of the countries, except France and Finland, remain within the EU average at around 7.5 % of severely hampered, on the other hand the UK, Finland France and Germany have greater percentages that the EU average for hampered to some extent.

According to the Grammenos (1993) study, age and the incidence of disability are closely related, such that the small differences among countries in severely hampered may be explained by the age structure in each country. The age structure of course shows some differences, but tends to converge across Europe towards a higher proportion of older persons where we find a high concentration of severely hampered persons.

On the other hand, the differences in the hampered to some extent category may be more related to other factors such as cultural, climatic, or other sociological differences. Given the self-reporting nature of the question at hand, these elements should be taken into account (the case of Finland is especially illustrative, see Finnish National Report).

6.3.2. Characteristics of disabled persons

The main profile of disabled persons of working age that comes across the different data sources in the countries of our study is that of an older male with a low educational level and high inactivity rate. The labour market situation is worse in the case of disabled women, with lower employment rates and higher unemployment rates than disabled men.

In the following tables we present a summary of the age, sex and educational characteristics for each country.

Table 2:   *Age, gender and educational profiles of disabled persons (working age)*

Country	Age (% over 45)	Sex (% of women)	Education (% with primary or no degrees)
Germany	71	47	64
Spain	57	44	70
France	58	52	28*
Italy	70	52	68
Netherlands	71	38	60
Finland	82	47	68
United Kingdom	75	46	42
* only those with no qualifications			

Although age is an important factor in the decisions that disabled persons may want to make with regard to the labour market, the ageing of European society in general forces any policy to include 'older' workers as an important part of active policy efforts. Disabled persons should, in principle, be treated the same, but the higher concentration in higher age groups among disabled persons should also be given special consideration when it comes to trying to apply active policies effectively.

Although women make up the smaller part of disabled people of working age, in the country studies where figures by gender were available, there seem to be more difficulties in the labour market for them. Lower employment and activity rates and higher unemployment rates (including for those with higher education) is the general description one finds in the European countries used in this study.

With respect to education, we find that lower levels are still much larger than in the rest of the population. The same as with age, the efforts to introduce or re-introduce disabled persons into work must also take this fact into account. The disadvantage of being disabled is thus compounded with two other factors that are treated negatively in the labour market: age and lower education. For women, the problem can be expected to treble. In addition, the lower educational average is most likely related to the higher accident rate among lower qualified occupations and also to the age profile.

In the following table the basic labour market figures are given. Although in some cases the figures are more difficult to arrive at, the general idea expressed before becomes clear through these figures.

Table 3:   Labour market characteristics of disabled persons
(rates for women in brackets where available)

Labour market characteristics of disabled persons (rates for women in brackets where available)			
Country	Employment rate	Activity rates	Unemployment rates
Germany	43	51	10
Spain	2 (1)	3 (2)	28 (57)
France	20-37	24-43	13 (16)
Italy	14 *	44 *	55
Netherlands	20	75	72
Finland	31	38	11
United Kingdom	37	42	6
* from figures in the survey: Condizioni di salute e ricorso ai servizi sanitari			

6.4.   Passive policies

In the following table the main characteristics of the benefit and compatibility with paid work is presented. The first thing to note is that there are differences between benefits in each country and that non-contributory type benefits are always lower. On the other hand, although some of the benefits are forgone if the person decides to work, in some countries other money and in-kind benefits continue to be received.

Table 4:   *Benefit rules: compatibility with work and other benefits*

Country	Compatibility
Germany	Forfeits benefit, but other income support can be received
Spain	Depends on the type of benefit and the type of occupation,
France	Forfeits benefit, but different aids are in place according to
Finland	Depends on the type of active policy applied
Italy	Forfeits benefit, some support for certain types of contracts
Netherlands	Forfeits benefit, reintegration allowances, supplements to
United Kingdom	Forfeits benefit, continues to receive other income support

The possibility for disabled persons to continue to receive part of their benefits after they go back to work can be a sensible option in countries where no additional income support measures are in place (like in Spain or Italy). A similar idea is behind the 'work benefits' scheme in Britain. There, older workers continue receiving part of their pension while receiving income from work that generates the corresponding fiscal obligations.

In the following table the total number of beneficiaries (aged 16-64) and the amounts spent in each country on disability benefits is shown. On average, the Netherlands is the country with the highest paying benefit followed by the UK. Other countries above the average but with lower pensions are Finland, Spain and Germany. The two countries with the lowest average are France, and Italy, where the former has the lowest average of all the countries.

Table 5:   *Number of disability benefit recipients and total expenditure*

	Number of disability benefit recipients	Million Euro
Germany	3 313 820	28 593
Spain	985 314	6 133
Finland	279 660	2 718
France	610 000	2 954
Italy	1 447 280	8 105
Netherlands	676 700	7 708
United Kingdom	3 200 000	33 941

We also note that in all cases higher benefits or pensions are awarded to persons who previously worked. There are also, of course, important differences by occupation. The following graph shows the average level of disability benefits per person.

Figure 4: Average PPS value of disability benefits in each country (Euro)
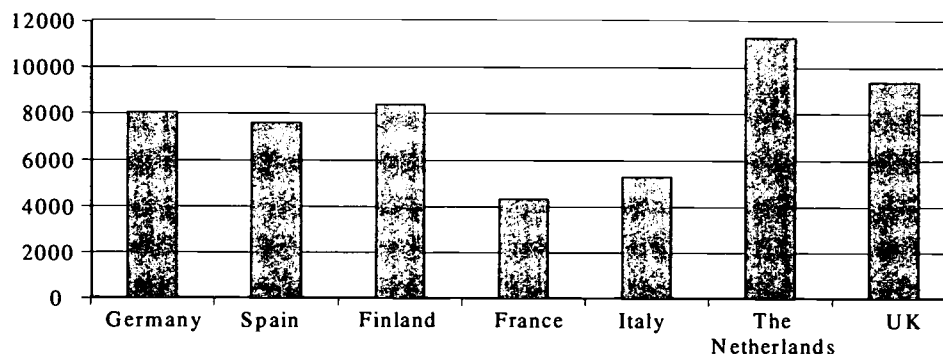
The rules defining receipt of benefits as well as their suspension must be co-ordinated with professional rehabilitation efforts in order to promote re-employment or first-time employment for disabled persons. Financial support while the persons acquires new abilities and finds a job is important in order to maintain interest in remaining active either looking for a job or working.

Passive policies in the case of disabled persons may not be a correct term given the compensatory status that benefits deriving from the loss of working capacity represent in the strictest legal terms. On the other hand, the efforts towards avoiding withdrawal from the labour market such as professional rehabilitation programmes alongside the medical rehabilitation can be ineffective if the replacement of the benefit with income from work represents, in economic terms, a loss of compensation for the extra costs arising from disability.

6.5. Active policies

Active employment policies refer to direct intervention by governments in the labour market in order to prevent or alleviate unemployment or to improve labour market functioning in general. In a strict sense active policies consist of measures such as professional insertion, training and direct employment creation policies. In the case of disabled persons, accommodation of the original workplace or physical and professional rehabilitation for another activity would also form part of active policies.

Although in the case of unemployment there is a generalised view that income replacement benefits reduce the beneficiary's efforts in looking for employment, those derived from a status of disability are in principle exempt from this judgement. This is so because, we repeat, the benefits in this case are rooted in compensation for loss of abilities in a person's occupation at the time of the disability or are in any case related to the reduction of the capacity to work. In most countries it is recognised that searching and finding an adequate job

for disabled people is more difficult and no pressure is placed on beneficiaries to find a job in order to remove or reduce the benefit. ([11])

In stricter economic terms, productivity of the worker is reduced and thus a lower wage would have to be paid or investment in capital or technology to recover the worker's productivity would have to be made. But for the worker the loss would still need to be compensated, as he can not make the investment in recuperating his lost productivity.

The range of active policies available to insert disabled persons into work goes from rehabilitation and professional training to grants and subsidies for employers who hire disabled persons. The comparison of the different policies does point to some better results in some countries than in others. In addition, the presence of some efforts on the part of the private insurance sector to recuperate people for work remains under-utilised in some of the countries in the study. The different elements in the policies are shown in the following table.

Table 6:   *Active policies by country*

Country	Measures and programmes
Germany	Rehabilitation • Vocational(training/re-training) • Counselling • Medical • Assistance Sheltered work Subsidies to employees and employers
Spain	Rehabilitation • Vocational (training/re-training) • Counselling • Medical Sheltered work Supported employment Subsidies to employees and employers
Finland	Rehabilitation • Vocational (training/re-training) • Counselling • Medical Sheltered work Work centres for the mentally retarded Subsidies to employees and employers Social firms

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([11]) The recent UK disagreement between government and disability organisation over the reform of existing benefit programmes is an exception where disability is being treated much the same as unemployment benefits.

France	Rehabilitation • Vocational (training/re-training) • Counselling • Medical • Assistance Sheltered work • Protected workshops • Centres for the promotion of work as an aid Subsidies to and employers Obligation to fulfil quota
Italy	Social firms (co-operatives) Initiatives by local (regional) authorities • Subsidies for financial support to employers and to social firms
Netherlands	Rehabilitation • Vocational (training/re-training) • Counselling • Medical • Assistance Subsidies to employers and support for employees Sheltered employment
UK	New Deal for disabled people • a Personal Adviser service to help disabled people and those with long term illness to overcome the barriers to work; (rehabilitation) • innovative schemes to explore how best to help people move or stay into work; (rehabilitation) • an information campaign to improve knowledge of existing help available to help people into work and to change the attitudes of benefit recipients, employers and the public; and (awareness) • a programme of research and evaluation (prevention and follow-up) Subsidies to employers and support for employees Supported employment (local authorities)

It would be tempting to relate the type and extent of these active policies to the labour market performance of disabled persons in each of the countries in our study. However, there are other variables that affect the probabilities of disabled persons in finding and keeping a job. Among these are the attitudes of employers and families and also the lack of information that disabled persons have about the different measure and programmes aimed at their integration into the labour force.

Although one could say that the measures and programmes are roughly the same, there are some differences.

Rehabilitation involves training or re-training, counselling, medical rehabilitation, and other assistance to the disabled person to obtain a job and it is present in all the countries. Subsidies to employers are also extended albeit under different rules and covering different aspects of the disabled person's integration into the firm.

In the use of social firms (or Third Sector firms) Italy has the most experience and we see that it has recently been introduced in Finland. Although in Spain and in France there is also a substantial amount of these types of firms they are not yet considered as part of active

policies. In fact, in Spain sheltered work is more extended, and it could be regarded as a social firm, but it lacks some of the common aims, such as getting the workers to take up work in the open labour market.

To this end, it is important to keep in mind that the work of different employment services intervening and acting as mediators between firms and disabled job-seekers is important in some countries and less so in others. The present reform and modernisation of employment services across the EU does not explicitly take into account catering for groups with special difficulties such as disabled persons. Although implementing a more personalised service has been proposed and also working with organisations that can enhance employment of more hard to place groups.

This modernisation is part of the guidelines to be followed in the drawing up of the National Action Plans for Employment in each of the Member States. In addition, the guidelines explicitly mention disabled persons as a group with particular difficulties in the labour market and also, that explicit policy should be promoted for this group (Guideline 9). The actions and measures stemming from the NAPs will need to be followed in order to measure the real extent that they are having on disabled persons. So far in the two years of the NAPs, not very significant changes are recorded.

In this context, the work of Third System organisations, especially those representing disabled persons, can constitute relevant actors in the insertion of disabled persons, as we have pointed out before. It is relevant that in Italy jobs in the New Sources of Employment (NSEs) have been found to be adequate for hard to place groups including disabled persons.

6.6.   Quantitative exercise

This exercise rests on the assumption that the number of disabled persons who are 16-64 years of age in each country can be inserted into work. Labour market insertion of disabled persons is attained via active policies and these represent the cost of insertion.

Although the entire group of disabled persons is assumed homogeneous as far as insertion is concerned, one may argue that in fact not all disabled persons receiving benefits are truly susceptible or willing to return to work giving up their disability benefits. However, our assumption allows calculating the maximum benefit possible of disabled persons in working age. The net benefit is calculated as:

+ Decrease in public expenditure (what the administration would save by reduction of benefit payments)

+ Increase in fiscal Income (what the administration would gain or is presently losing in social security contributions, income taxes, VAT and other special taxes)

- cost of active policies (the cost of inserting disabled persons with presently used active policies including training, subsidies and support for special employment centres)

= net benefit (or, if negative, net cost)

The difference in available data, occupational classifications or other needed information does not invalidate the summing up of countries since the methodology followed was the same. The results are as follows for the total of 7 countries incorporated in the study:

Table 7:   *Direct Impact of Full Employment of Not-Employed Disabled People Receiving Pensions*

Direct Impact of Full Employment of Not-Employed Disabled People Receiving Pensions	
Ex-ante change in exogenous and endogenous variables	Amounts in millions of Euro
Increase in employment (number of persons)	10 512 774
Increase in net disposable income of households	102 583
Increase in the expenditure of households (private consumption)	87 877
Decrease in Public Expenditure	90 153
Increase in Fiscal Income	85 005
Active Policies	71 127
Total Fiscal Benefit	**104 030**

The results show a benefit to be gained if disabled persons aged 16-64 receiving benefits would be inserted into the labour market in the seven countries. In relative terms, the amount to be gained represents a small part of GDP in 1999 for these seven countries (0.02 %) ([12]) but

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([12]) This percentage in terms of GDP is, in relative terms, half of the coke and coal industry in these 7 countries. Or 13 % of the water supply industry in these countries.

an important part of total government expenditure of the seven countries in the study (around 10 %). ([13])

Another way of looking at these results is that the return to resources spent on active policies would be positive. Assuming working-age disabled persons are successfully inserted is, of course, highly debatable and the insertion rates found in all the national reports do not point to a high success rate. However, insertion (or effectiveness) rates are not too different for training programmes the non-disabled unemployed population and a more general discussion on the efficacy of active policies goes beyond the scope of our present study.

The inclusion of expenditure on active policies as an instrument to achieve the insertion of over 10 million disabled persons assumes that the policies are effective. On average the cost per person would be situated at almost EUR 7 thousand. This of course varies depending on the type of policy and the country. ([14])

The most expensive active policy, on average, would be that of the Netherlands and the UK under the assumption of New Deal and supported employment (around EUR 16 thousand in each) under the assumption that supported employment would be provided for all the disabled population to be inserted into work. Finland comes next at EUR 14 thousand. The least expensive would be in Germany at around EUR 7,5 thousand but also in the UK at EUR 1 thousand under the assumption that the disabled person in prepared for work (training or rehabilitation), but no further assistance to the employers is made.

Furthermore, if we took the financial view that active policies must be paid out of benefits, the calculation directly from the table above indicates that for the seven countries this could be achieved, generating a positive difference of EUR 19 025 million. However, most of this is due to the UK (with EUR 21 755 million difference), as most countries (except Germany and Italy) would need to come up with a higher amount to cover the cost of active policies.

Here we make neither a judgement nor study in any detail which are the most efficient measures of employment insertion. But it is evident that without an active policy effort, a considerable proportion of disabled persons would not be able to even begin to consider moving back into the labour market.

Several factors including: degree and type of disability, degree of motivation, quality and integration of insertion measures, monitoring, follow-up, etc. all play an important part in the success that active policies may have in the case of disabled persons. Here we only give an indicative figure of the costs that would be involved with present active policy costs and present distribution of disabled persons into different active policy types in each of the countries of our study.

([13]) If all benefits were continued to be paid, in other words, decrease in public expenditure equal to 0 and we adjust the taxes affecting this higher income, we can then estimate the minimum number of disabled persons that would need to be inserted for the costs to equal the benefits ('break even point').

([14]) For details look at the main study quoted earlier.

6.7. Simulating Active Employment Policies for the Disabled in the EU ([15])

The second objective in this paper is to offer a measure of the dynamic impact that the introduction of 10.5 million disabled persons would have on the economies of the countries in the study and Europe-wide. This is a model-based simulation exercise. This paper uses the E3ME model to simulate the macroeconomic effects of a programme of active employment policies enabling 10.5 million disabled people to return to work in the European Union. The simulation was implemented by adjusting E3ME's treatment of unemployment and labour participation rate to reflect the change in labour supply. The model calculated the income multiplier effects associated with the additional employment as well as other effects including those on prices, wages, trade and government finances.

It is very important not to confuse this exercise with a specific policy simulation exercise. We are not dealing here with 'how' to really make disabled people integrate into the labour market. This 'how' exercise requires a specification of policies to: a) increase the employability of disabled people and mostly, b) generate sufficient new jobs. The exercise in this paper, assumes that we have those jobs ready and quantifies what is the dynamic economic impact of having disabled people integrated into those jobs instead of being at home.

The simulation itself is not concerned with detailed policy measures that involve training the disabled people and encouraging them into the labour markets. Indeed, it takes as a starting point the assumption that active employment policies have over a span of time stimulated the involvement in the labour force of a total of 10 million extra workers who were previously economically inactive. The assumed distribution of these 10 million across the EU member states has been specified before and is presented again in the following table:

Table 8: Number of disabled persons between 16-65 to be inserted in to the labour market

Germany	Spain	France	Finland	Italy	Netherlands	UK	Total
3 313 820	985 314	610 000	279 660	1 447 280	676 700	3 200 000	10 512 774

Even if, clearly, we are not simulating specific policy measures we still need to produce the extra demand to absorb the new labour supply in our exercise. The exercise then involves using expansionary fiscal policies to generate the extra demand required to absorb the extra labour supply.

([15]) This section based on the E3ME econometric model. It was carried out in collaboration with Cambridge Econometrics, which provided the scenario results for integrating disabled people into work.

The simulation period is set to as 2001-10. The policy stimuli used to boost the economy (again this is needed for the model to operate but the emphasis is not here) are increases in government spending and reductions in employers' social securities payment ratios. Additional employment is generated gradually over the years and by the end of 2010, the EU as a whole will have achieved the target of 10.5 million more persons employed as compared with the base. The increased employment represents the integration of the disabled people into the job markets, and unemployment levels are largely unaffected.

The main results are given in the next tables: First, the employment levels in all the 19 regions in Europe over the years 2001-10 in both the simulation run and the base run, together with the increase in the simulation run over the base run.

Table 9:   Simulation results on employment in Europe, in thousands

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Base	157 539	157 736	158 145	158 876	159 344	159 966	160 622	161 202	161 636	162 041	162 471
Sim	157 539	158 774	160 235	162 031	163 539	165 220	167 014	168 563	170 089	171 535	173 010
S – B	0	1 038	2 090	3 155	4 195	5 254	6 392	7 361	8 453	9 494	10 539

Note: Tables shows total of the 19 regions included in E3ME. Unit is in thousands. Base refers to the base run and Sim refers to the policy run.

The interpretation of these results is as follows. Each year, additional employment will be generated compared with the base run. The numbers in the third row (S-B) in those ten years are accumulated changes. Thus, the EU economy will generate 1038 thousands more employment than in the base run by the end of 2001, and 2090 thousands more by 2002, and 3155 thousands more by 2003, and so on. By the end of 2010, there will be 10 539 thousands more employment which represents the absorption of about 10m disabled people into work over a ten-year period. (Note that the additional employment of 10 539 000 generated by the model is very close but not identical to the number 10 512 774 given earlier.)

Alternatively, one can also look at annual increases in employment. This leads to the same final results. The next table shows annual employment changes in the base run and also in the policy run. The last row shows the additional annual increase in the policy run compared with the base run each year.

Table 10:   Increase in employment over the previous year in the base and policy runs

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	Sum of all years 2001-10
Base	197	409	731	468	622	656	580	434	405	430	4 932
Sim	1 235	1 461	1 796	1 508	1 681	1 794	1 549	1 526	1 446	1 475	15 471
S – B	1 038	1 052	1 065	1 040	1 059	1 138	969	1 092	1 041	1 045	10 539

Note: Tables shows total of the 19 regions included in E3ME. Unit is in thousands. Base refers to the base run and Sim refers to the policy run.

For example, in 2001, the base run has 197 thousands more employment than in the previous year. Similarly, the annual increase in employment is 409 thousands in 2002, and 731 thousands in 2003, and so on. Accumulating over ten years, employment in the base run will grow by 4 932 thousands; this has nothing to do with the programme for disabled people but reflects other forces at work in the economies. In the policy run, each year additional employment is generated (1 235 thousands in 2001, 1 461 thousand in 2002, etc.) compared with the previous year. The annual increases in employment are also larger in the policy run than in the base run. Over the ten years, employment will grow by a total of 15 471 thousands. Of this growth, 4 932 thousand are attributed to other forces which are present in both the base and the policy runs; the effect of the policies in the Sim case is then the difference between the two increases, ie, 10 539 thousands.

Second, effects on GDP, disposable income and price levels for the EU as a whole are given in the next table.

Table 11: Changes in GDP, personal income and price levels in the EU

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
GDP	1.16	1.72	2.31	2.81	3.58	3.96	5.05	5.58	6.46	7.00
RPDI	2.62	2.91	3.75	4.02	5.34	5.50	7.40	7.22	8.95	8.76
HUC	-1.26	-1.89	-2.71	-2.99	-3.46	-3.56	-3.53	-4.40	-4.94	-5.03

Note: The table shows percentage differences from the base of the simulated values. GDP is expenditure measure of gross domestic products at constant (1990) market prices. RPDI is real personal disposable income at constant (1990) prices, and HUC is GDP deflator 1990=1.

The results suggest that there are substantial gains in both output and in real personal disposable income at the European level as a result of the new labour supply integrated into the labour market.

Further, the economy is not subject to increasing inflationary pressure. In fact prices are lower than in the base run scenario. Such a result makes sense, for the capacity of the economy has been increased with additional labour supply while total labour costs are lowered. In our simulation this has been achieved through the reduction in employers' social security contributions. This could also be thought of as a compensation for the lower productivity of the newcomers and therefore costs are reduced. It could also be interpreted as a compensation to firms our of new government expenditures for the lower of productivity or to the individual for the special difficulties in integrating.

All this represents specific policies that should be the object of more detailed studies but the point is that through adequate policies the costs of the new labour supply could be lowered for companies.

Lower social security contributions lead directly to lower prices by reducing non-wage labour costs. Lower prices lead in turn to lower wages through the bargaining model. Wages, prices, and price expectations are then interacting with each other to produce the outcomes observed.

The demand push is not inflationary, partly because unemployment is kept at the same level as in the base (with the idea that additional labourers, coming from the disabled people entering the labour markets, are there to meet the increased demand for them). On the other hand, because the reduction in social security contributions helps to lower the total labour costs.

6.8. Final conclusions

The final conclusions can be grouped into three main areas: facts about disabled persons, facts about the present policies followed and finally the conclusions to be derived from the exercise and dynamic simulations. We look at each in turn.

6.8.1. About disabled persons:

(a) The profile of a disabled person in these countries is that of a male over 40 years of age with a low educational level. In labour market terms we have confirmed low employment and high unemployment and have found a high concentration in lower level occupations.

(b) The employment problems faced by women and young people are heightened by the added problem of disability.

(c) Types of disability seem to be important in determining the economic activity of disabled persons. Further study into the matter would shed light on the best strategies to follow in the labour insertion of disabled persons.

(d) The comparison of ECHP data and national administrative sources on the number of disabled persons show very important differences in most countries. The number recorded by the survey is higher. The possibility of using the micro-data is curtailed by the alterations made by Eurostat to the individual responses on sickness and disability benefits.

6.8.2. About present policies affecting disabled persons

(a) Although there are marked differences in institutional settings affecting disabled persons across the seven countries in the study, the definitions of disability used for eligibility of benefits are always related to the incapacity to generate income from work.

(b) Although the policy approaches, measures and programmes differ across the countries, there are basic similarities in the structures followed. Some countries have made more

extensive use of social firms (Third Sector Employment) to resolve the employment problems of disabled persons and other disadvantaged groups.

(c) Not all the countries continue supporting incomes of disabled persons when they return to or enter the work force. However, in all of them there are incentives offered to employers.

(d) There are large differences in the average Purchasing Power Standard value of disability benefits across the seven study countries and also within countries depending on the contributory or non-contributory nature of the benefits as well as the occupational level at the time of disability.

6.8.3. About the exercise results and simulations

(a) The results of the exercise point to a substantial benefit to be gained in all seven countries in the study through the insertion into work of working-age disabled persons receiving benefits. The total of social security contributions and of direct and indirect taxes derived from the incomes of employed disabled persons, in addition to the savings from reduction of benefits, is higher than what it would cost to get them ready for work (active policies).

(b) The use of a macroeconomic model to simulate the introduction of 10.5 million disabled persons into the labour market shows substantial gains to be made in terms of value added, consumption and little to be lost in terms of inflation and unemployment under the assumptions made.

(c) In a time horizon of 10 years (2001-10) at a rate of approximately 1 million disabled persons per year, European GDP would increase 7 % more than the base line projection, consumption by 7.75 % and inflation would be lower by 3 %.

The positive result in all the countries in this study gives a strong fiscal argument for moving away from passive policies and into active policies for disabled persons. However, one must consider the legal and ethical framework under which benefits for disability are granted in the first place. Also, three main issues will need more detailed research:

(a) Effectiveness of present active policies in each country

(b) Cost and benefit analysis of specific active policies (subsidies to employers for loss of productivity, training, adaptation or accommodation of work-posts, sheltered work, etc.).

(c) Cost and benefit analysis of integrating specific groups of disabled persons (by sex, age, type of disability, etc.)

Having said this, the economic aspects of inserting disabled persons into work points to the use of methodologies and models such as we have used here in order to construct possible policy scenarios and to analyse their potential impact.

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7. Permitting the mentally disabled a genuine and appropriate exercise of their rights

Annet De Vroey ([16])

Why is it that pictures tell a thousand words? Why have images almost always a stronger impact on people's attitudes and ideas? Even if we listen attentively to each other's experiences and talk about main issues and principles involved, we often apply these only to our own limited set of experiences and concepts, failing to link them to a broader interpretation. Concepts have to be very precise in order to generate a general idea, in order to share ideas, which is often too difficult in 'cross-cultural' conversation.

A half-hour film, following mentally disabled adults in their integrated work place ([17]), can bring about the general idea in less than one minute, and provides everyone with a similar picture that can be a starting point or a good orientation base to discuss principles and variations of a given example. Even a story, like that of the starfish ([18]), which provides very strong and universàl images, can have the same effect. The scientific educational and psychological approach towards the mentally disabled has developed a very complex and specialised language that seems to fail to be a universal language. If we want the mentally disabled to be 'able to' integrate and if we want their immediate environment to become 'open' enough to include them in their activities, we'll have to take care with our language and the images it forms.

Starting with the feeling of failing concepts and failing language, I will concentrate further on the right of the mentally disabled to fulfil a social role, to work and earn a living, even if companies are not yet sure they can deal with them. How to prepare the market and how to prepare the mentally disabled themselves, are a third and fourth issue, to conclude with training criteria for the people accompanying or supporting the mentally disabled in a working context.

7.1. Labels and definitions

As a professional working in special education services and teacher training for special educational needs, I feel the need for a very precise and careful use of labels and words

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([16]) VOBO – Teacher College for special educational needs, KHLeuven, Belgium

([17]) Casanova, Alain; Saladin, Monique. *Documents pour l'Intégration et le Développement*. Paris: Did, 1985-. Available from Internet: http://www.did.asso.fr [cited 28.1.2002]

([18]) *Disability awareness training: Online course: self direction community project 2000-2001*. Penryn: Self Direction Community Project, 2002. Available from Internet: http://www.selfdirection.org [cited 28.1.2002]

describing the people we 'talk about'. Often these labels are not paying respect to the people we mention or even can have a reverse effect. Or people who are not used to this field – which has become a field of scientific interest in psychology and education in the last decades – are led into a maze of diffuse and often almost similar words, without a clue for finding the right ones. This can lead to overgeneralization or narrowing of the concept of mental disability.

Any definition of disability reflects the way society looks at the problem and at the same time how it is asked to deal with it. So in a way a definition includes an innovative element, as otherwise there wouldn't be a need for a new description, refreshing and clarifying the underlying ideas. At this moment many definitions of mental disability are circulating, 'older' ones as well as 'new' ones, which complicates any debate on how to deal with mentally disabled persons. In the last decades many changes have occurred in the way we look at the lives of the mentally disabled, and the former medical and therapeutic approaches are being criticised more and more. In the American society as well as in the countries of northern Europe – and let us not forget Italy -, community care and inclusion of the mentally disabled are not just being discussed but also put into practice on a much broader scale than in most (other) European regions. Still, traditional views such as medical diagnosis and IQ-assessment as a base for further orientation to special services are common practice and keep the traditional label intact. While professionals working in these services are acting according to 'older' definitions, the new ones are gradually entering the field and will take over their role as an indication for good practice in a few years.

In order to clarify the following discussion, I will pick out two 'new' definitions that reflect the important shift in paradigm towards disability in general and mental disability in particular that has taken place during the 1990's.

These changes are not merely due to professional new insights; they also strongly reflect the participation of parents of disabled persons and the disabled themselves in how to deal with labels and calling for support.

First, let us look at the definition the French parent's association uses:

> UNAPEI: une personne handicapée est une personne à part entière, à la fois ordinaire et singulière.
>
> Elle est ordinaire, parce qu'elle connaît les besoins de tous, elle dispose des droits de tous et elle accomplit les devoirs de tous.
>
> Elle est singulière, parce qu'elle est confrontée à plus de difficultés que les autres citoyens, et qui sont la conséquence d'une ou plusieurs déficiences.
>
> Ainsi, le handicap mental se traduit par des difficultés plus ou moins importantes de réflexion, de conceptualisation, de communication et de décisions. Ces difficultés doivent être compensées par un accompagnement humain, permanent et évolutif, adapté à l'état et à la situation de la personne.
>
> *Source*: Dossiers sur les handicaps. Revue Déclic.

The UNAPEI definition is new because it clearly breaks with a long tradition of a purely medical or psychological point of view, which justify a medical and/or psychological approach. Prior to pointing out the specific problems a person with mental disability has to face, it puts emphasis on the similarities with all persons, thus attributing to him all human conditions – all needs, rights and fulfilments. It then shifts to the differences, the special demands because of specific difficulties people with mental disability experience. Instead of using them as a reason for exclusively special services and a highly professional approach, the definition now speaks of a right for compensation of the loss of participation capacities, a support that is human in nature and adapted to personal as well as contextual demands.

A widely international adopted definition is the AAMR-definition of Luckasson of 1992, accompanied by a very clear introduction and followed by a 'code' for good practice ([19]):

American Association on Mental Retardation (AAMR):

Mental retardation is not something you have, like blue eyes, or a bad heart. Nor is it something you are, like short, or thin.

It is not a medical disorder, nor is it a mental disorder.

Mental retardation is a particular state of functioning that begins in childhood and is characterised by limitation in both intelligence and adaptive skills.

Mental retardation reflects the 'fit' between the capabilities of individuals and the structure and expectations of their environment.

The definition of Mental Retardation

Mental retardation refers to substantial limitations in present functioning. It is characterised by:

(a) significantly subaverage intellectual functioning, existing concurrently with

(b) related limitations in two or more of the following applicable adaptive skill areas:

Communication – self-care – home living – social skills – community use – self-direction – health and safety – functional academics – leisure – work

Four assumptions essential to the application of the definition

• Valid assessment considers cultural and linguistic diversity, as well as differences in communications and behavioural factors.

• The existence of limitations in adaptive skills occurs within the context of community environments typical of the individual's age peers and is indexed to the person's individualised needs for supports

• Specific adaptive limitations often co-exist with strengths in other adaptive skills or other personal capabilities.

• With appropriate supports over a sustained period, the life functioning of a person with mental retardation will generally improve.

http://www.aamr.org/index.shtml (2001)

([19]) Luckasson, Ruth. et al. *Mental Retardation: definition, classification and systems of support.* 9th ed. Washington: American Association on Mental Retardation, 1992.

This definition starts by dealing with prejudices and thus stating the need for distance and change from the former medical and/or mental health approach. In calling it 'the fit' between a persons capabilities and the expectations of the environment, it immediately reflects the growing awareness of disability as the result of an interaction between a person's (dis)abilities and the environmental (lack of) support, as we see in definitions of disability in general ([20]). The assumptions essential for the application of the definition are in fact a warning for a careful use of the label and a call for 'full' assessment that includes and mentions strengths and personal capabilities as well. Above all, this definition offers an optimistic view, considering appropriate supports are available. It brings a strong statement that mentally disabled may not be underestimated.

Moreover, the Luckasson definition not only considers different fields of adaptive behavior, but also different dimensions of functioning: instead of labeling people according to a level of intellectual and adaptive behaviour, diagnosis now leads to an individual plan, based upon an in-depth survey of the environment as well as a strength & weakness analysis of the person involved. This plan cannot so easily be reduced to group therapies or group facilities, because it describes the individual needs of a person for different dimensions of functioning (emotional, intellectual, social, physical and contextual) and in a varying intensity for each of them (intermittent, episodic, extensive, pervasive). Providing an answer for someone's future will thus require a more profound view of all actors involved, including their ideas on the so-called 'optimal environment', which provides or leads to a place in society, a social role, and as much participation as possible ([21]).

Taking into account all these dimensions, we are faced with a huge problem when differentiating between categories: we can be confronted with an overlap of different problems or multiple problems, or with a very mild form of the so-called 'pure' category, if we also put all strengths into the picture. So on the one hand we mustn't underestimate the mentally disabled, to whom we attributed almost no ability to be educated before, but on the other hand we'll have to be careful – as well in debates as in practice – not to ask too much of some of them. These differences are not simply to subdivide into further categories of mental disability; all individuals with mental disability are different on the different dimensions, they'll show a different profile, almost like a personal fingerprint. Many of them are emotionally strong, but many others are very vulnerable, withdrawing or reacting aggressively in new or stressful situations. Many of them have physical disabilities as well, making a good assessment of intellectual functioning often enough very difficult. Many of them are also autistic, making us unsure about the origin of the mental disability. Too many of them were born in an underprivileged environment, where mental disability is the sad result of poverty, bad health conditions, and lack of education... All of these examples or combinations of

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([20]) Patrick, Fougeyrollas; et al. *The Quebec classification: disability creation process.* Quebec: International Network on the Handicap Creation Process, 1998.

([21]) Van Hove, Geert. *Definitie en classificatie van verstandelijke handicap volgens de American Assocation on Mental Retardation: inhoud, plaatsbepaling en mogelijk effect op de Vlaamse en Nederlandse zorg en begeleiding.* Gent: RUG, 1998.

disabilities can be seen with mental disability. The more we realise how diverse the group is, the more important it is to look for each person's strengths and to know his limitations. In any individual case we will have to consider how we can provide the support and the (optimal) environment that can improve the person's life functioning. In the end, the 'label' will become irrelevant. If a mentally disabled person has learned a job, is feeling good about his work, is being helped and accepted by his colleagues and his peers, then the fact that he has also been 'diagnosed' as having intellectual problems is irrelevant for his daily life at that moment. He'll probably have learned a lot about independent living skills as well, and he'll know where and who to ask for help in case of new or difficult situations, thus he'll have developed a more mature life style and a self-directing attitude.

Both definitions, the French one and the American one, even though they touch upon the same problems as former definitions, are offering new content to the concept of mental disability. They put emphasis on the need for and the right to support from the social environment, in order to improve their functioning, quality of life or participation. They use the label of mental disability only as a tool for appropriate support, and not as a justification for social exclusion. Thus the categorising idea behind former definitions, talking about a special 'group' of persons or a special medical category, that has to be protected from a too complex and dangerous society, has changed into a concept of diversity, included into a large society, that has a duty to support and accompany any member of society towards improvement of life functioning, towards a better quality of life, towards fulfilment of each person's own social role, and participation into many life activities.

7.2.   The importance of establishing a social role

The new paradigm also reflects the change in the perception of disability as such, where the role of the environment has become more crucial than it was before. The environment can or cannot provide the opportunities and the facilities for a person to participate in mainstream education, living in the community, finding a job. If the environment does not provide these conditions, they only provide the disabled the inferior 'social role' of being a patient, being a victim, being someone who is not able to make a contribution to the social and economic life of his community. The former models of special schools and residential care will have to become more creative to provide new answers that can facilitate people's own choices, self-direction and participation. People with mental disability themselves are now being encouraged to make choices, to take control over their lives, and to plan, together with a 'coach', their own future. This self-advocacy, this empowerment gives them a better self-esteem, makes them feel respected and makes them reflect upon goals, choices, values. It improves their quality of life tremendously, because of the importance given to such

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subjective components as their own feelings, experiences, values and goals that add to this quality ([22]).

The Flemish government – and in particular the Ministry of Welfare – has now chosen for an inclusive policy ([23]). This means that they will give priority to new initiatives, that encourage children and adults with a mental disability to participate in mainstream settings, like mainstream job fulfilment, mainstream leisure activities, etc. They will also insist on an inclusive policy within other departments, for instance in education. In practice we see that residential care for children is used less, that residential care for adults is short-term, but residential settings are encouraged to take new initiatives, like hiring small houses in town, coaching people to live on their own, etc. Measures for integrated jobs have improved and individuals with a disability – including those with mental disability – have the option to pay for a 'personal assistant' instead of being assisted all day in an institution or at the sheltered work place. The aim is to minimise all 'special' measures in special departments or special settings, but to make all departments and policy makers aware of the need of adaptation for some groups in society and prevent as well as evaluate all possible discrimination of disabled persons, whenever new measures are taken.

All of these new processes, partly initiated by self advocacy groups, partly encouraged by professionals who feel the need for change towards the mentally disabled, are slowly helping the disabled to take a respected place in society, to give them real citizenship and to help them fulfil all adult duties and tasks. The importance of the social role has been described and fought for by John O'Brien ([24]) and was already the main issue when talking about normalisation 30 years ago. Only now the idea is slowly getting through.

A social role is acquired by a person when he can make a contribution to his community, when he has taken a place in society that has the same or a comparable status as other persons of the same age. It is very difficult, however, for unemployed people to keep their social role, as it is for disabled persons who are very much depending on others for help and who are therefore living in an institution. Work is one of the most important elements in establishing a social role. Women who stay at home often face that same stigma and have to justify their choice among friends and family, because it doesn't give them the 'normal' social role anymore of their peer group. Apart from having a job, raising children and/or doing the housekeeping has always been a very important social task and still gives people the opportunity of fulfilling a useful role in society. This might also contribute to the social roles mentally disabled people may take, if they can get the respect and help from their community when they live on their own or as a couple.

([22]) Schallock, Robert L. *Quality of life: Conceptualization and measurement: Vol 1*. Washington DC: American Association on Mental Retardation, 1996.

([23]) Vlaams Fonds voor de sociale integratie van personen met een handicap. Jaarverslag 1999.

([24]) O'Brien, John. *Het normalisatieprincipe*. Leuven: Vibeg, 1984.

As a group, disabled persons, including mentally disabled persons, thus have the right to receive good education and training, that prepares them for taking part in the working society, for choosing and fulfilling a job that suites them and that can be adapted to their strengths and learning capacities. Especially many of the mentally disabled people will need constant support and a flexible work schedule and program. If we consider each mentally disabled person's individual plan according to his strengths, we will have to deal with many different demands for help and support; working conditions will have to be varied and flexible. Even if labels can become irrelevant in the end, for many of the mentally disabled work will still be a rather difficult task, and employers who fear this, won't be easily convinced to provide them a suitable job.

7.3. Convincing companies of their social role as well as their need for disabled workers

The question above is at the same time a social and an economic question. Therefore it seems to me impossible to split the suggested answers into an economic and a social part. Many companies are well aware of their social role on top of their economic goals. And many others have a social policy in practice without planning or actually expliciting it as specific goals of their own. Of course there will be a large amount of companies that seem to ignore anything but economic arguments. As it goes in many innovating processes, some organisations are the pioneers. Others who like to be seen as modern and innovating as well immediately follow them. Then a large group is entering the new programs, almost unnoticed, because that is the stage they prefer, and in the end the most conservative ones have to follow, if necessary by special measures... Can we apply these stages for a difficult social task such as employing mentally disabled workers? I think that in a way we can. If working with and supporting (mentally) disabled people is seen as a strong statement of the importance of social values to the company, and promoting social values is considered to be of economic importance – as a good marketing strategy-, then this might be the first argument to follow other model companies, without actual proof of having better economic results. This will only be possible if at the same time sensibilisation about inclusion is taken serious and shown by good examples everywhere in society. This 'message' that disabled people are among us in the community and belong there, living and working among us, after being educated together with all children, will also show us that disability is not a category, but a way of functioning, that can be anyone's at a certain moment in his lifetime.

Convincing companies will have to be a matter of 'sensing' the values of the company, and at the same time of providing flexible and diverse measures for support. In a society that is progressing from institutional care towards inclusion and integrated training and working programs, a wide range of solutions may be available: this way individuals who are not used to work or a working attitude and rhythm, can still have the opportunity of choosing for a more sheltered job or even to a form of day care. Only gradually, if all mentally disabled can be better prepared for life in the (working) community, this kind of support will (almost)

disappear as a permanent way of living. Still, considering the individual differences, a range of personal solutions, changing in time, will always be needed.

Whether companies start working with mentally disabled workers is not necessarily related to the size of the company or the kind of products they make. It can rather be related to the distance to sheltered working places, the history of cooperating with special training services, or often with family relations. Whatever the first step, a good follow-up from the training center or the sheltered work place or even other support services will guarantee a better continuation and elaboration of the employment of mentally disabled persons.

Apart from the social argument, we see that financial measures can help to convince companies that employing a mentally disabled worker is not harming them. These incentives can of course lead to a larger amount of participating companies, but are not always felt as correct arguments by the workers themselves. Many of them, who are being trained and prepared on the work floor for a long time, feel they are not being fully respected and treated like the other employers, when they know they were only employed due to the financial support for the firm compensating for the loss of earning capacity. It keeps the 'label' alive, that they are eager to get rid of, having a real job. On the other hand, knowing about financial measures might help the mentally disabled workers when soliciting for a job; it can take away the (last) doubts of an employer. But as long as the label and (sub)categories matter, mentally disabled people will stay an economic category rather than individuals who need individual support.

However, apart from the fact that some companies simply include disabled workers because it is only fair to do so, the most important argument for companies will probably be an accomplished good (basic) training of the mentally disabled and continuing support from training services or cooperation with them.

7.4. Training of the mentally disabled

We argued earlier that a shift is taking place in the concept of mental disability and services will have to provide individual answers to special needs rather than group or categorical solutions, training for separate groups of mild, moderate, and severe mentally disabled people can no longer be defended. Until now, this rather simple differentiation in training programs was preparing each 'group' for another future: the first group is normally already encouraged to work in an integrated environment (but is often still trained in separate classes / schools); the second group is mostly trained for a sheltered job and a sheltered life; the last group is usually taking part in development programs with emphasis on communication development and self care. Their future is still perceived as being institutionalised, in spite of the new policies of inclusion. If people with disability – whether it is justified by means of 'good' diagnosis or not – are being trained for a sheltered life, then they will not be prepared to change their lifestyles and they will continue looking for a sheltered environment. It is often

not until adulthood that the mentally disabled can receive a new form of vocational training that is adapted to individual needs and individual plans for the future.

In education however, we see that special education is not yet ready to change the perspectives on their mentally disabled pupils. Children are still referred to special schools because they are diagnosed as mild / moderate or severe mentally disabled. Autistic children are referred to 'auti-classes' in a special school. The first referral is almost always responsible for the further vocational or other training the child gets. Searching an 'optimal environment' for every individual child is not yet common practice. Only children with a mild mental disability get the opportunity to be trained for an integrated job and life.

In the Flemish region, a radical change towards inclusive education for most pupils is at this moment perceived as being too risky, even when many parents are sharing their (pioneering) experiences with as many people as they can. However, the discussion is out in the open and even encouraged by the government. Teachers form an opinion, sometimes based upon examples of good practice, but very often upon prejudice and lack of information. In most mainstream schools, the emphasis lies on the curriculum, and many teachers are afraid they won't achieve all curriculum-goals by the end of the year. Still, an innovating process has started in mainstream education, stimulated by experimental projects and the liberty of designing adapted programs in a creative way. For the last two years an official program for children with mental disability from 6 to 12 years exists and receives support of special education teachers in mainstream education. However, some parents have already chosen to continue inclusive education at the level of secondary education and have taken the option of mainstream vocational education that starts at the age of 12. For their children a well-organised and individually adapted program is needed, that has to be carried by the parents or a team of assistants.

Mainstream secondary education is at this moment – in the Flemish context – by no means prepared for the inclusion of mentally disabled pupils. Many teachers are involved and not all of them are willing to adapt their program to the special needs of the pupils. Teachers need advice and support to do this, which means that good communication amongst teachers, parents, assistants and support service(s) is crucial. The experience of inclusion in secondary education is at this moment still limited. For primary education the first surveys show positive results for the pupils, but also reveal an urgent need for a better teacher training towards inclusive education. A recent British survey [25] also shows positive results for Down's syndrome pupils in mainstream secondary education: they were more advanced in academic as well as social skills; there was no important difference found in self care skills, which led to the conclusion that there is no real benefit of special schools. However, what pupils with DS missed, were deep, supporting friendships at the age of secondary education. Only if all pupils with serious learning problems or with intellectual disability would be in mainstream education, then they would find friends among them.

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[25] Buckley, Sue; Bird, Gillian; Sacks, Ben. In Down+UpDate, 2000. Down Syndrome Educational Trust. Available from Internet: http://www.downsed.org [cited 28.1.2002]

An important advantage of inclusive education, even in secondary and vocational training, is that pupils learn to respect different ways of learning. If they learn to deal with differences in the classroom, then they will also be able to do this in jobs in the future. For the mentally disabled, the more communicative environment and the higher level of social and academic skills encourage them to participate and to learn from each other. Therefore the program must allow many group activities and participation to most lessons and training sessions, shifting slowly in each lesson to a more adapted working moment or exercise for each of the pupils. A realistic approach of the lower tempo of mentally disabled pupils is needed. Another advantage is that all pupils learn about their own strengths and weaknesses; this makes them aware of the need for support in their future lives, which they then will choose more independently, not giving away the control over their own life.

The tradition and long existing practice of providing a serious vocational training for mentally disabled pupils before the age of 18 – in special schools -, however, is a basis for further investigation of new models and good practice. Breaking the traditional categorical system, some alternatives exist for over 12 year old pupils, as for instance the referral of children who are diagnosed as 'moderate' mentally disabled or autistic to schools for pupils with 'mild' mental disability, thus training them for integrated jobs. Parents look for the training setting that provides their child the best chances for a mainstream job. These secondary special schools – special vocational training settings – usually have a very individually adapted program, as well as good coaching of their pupils in practical work. At this moment they provide a 'not too bad environment' for many mentally disabled pupils, although children who were used to be in full inclusive education in primary education, do miss their peers and friends of the former school.

As a continuing program in the same special schools an 'alternating job training program' has been set up. Its goals are to help the pupils to start in their first jobs and to get a contract within a year; during this year they work 3 days a week and go to school for 2 days. At the work floor they are usually trained and initially supported by colleagues or one of the responsible workers, who is also co-operating with the school and gets at least once a week a visit and advice from the training setting or the school.

For children with severe autism and for multiple disabled pupils, the need for support and assistance will usually be more extensive. Whether inclusive education is possible, will depend upon the school's means, vocational options, and mostly willingness to deal with many assistants and others. The strong medical and psychological interest for autism of the last few years, labels them and categorises them as a very special 'group', although as for mental disability in general – severe autism also leads to subaverage functioning in adaptive behaviour – the needs are individually very different. An even more individual program – within mainstream education – must be considered, before referring to special schools. Some pupils with autism spectrum disorder leave school earlier and work independently but supported by institutional services to get their degree of secondary school.

For adults everywhere in Europe many new alternatives are starting or existing former training or vocational centres, including sheltered services, are transforming slowly into new training and consulting organisations. This clearly fits into the new ideas of self-advocacy and personal future planning of the mentally disabled. As an example, we can take a training program that exists in Brussels ([26]): a (special) setting that is seen as a form of further education for people with learning disabilities and mental disabilities and that provides them a chance to change their original job perspectives. Here people are working on academic skills, as well as social skills, working attitudes, thinking skills, reflecting on their choices, on their work, etc. They can switch from their original job training to a new one. This training model, being outside the traditional school system, and especially outside the stigmatised special school system, has proven to be very effective.

As a consequence of the new concepts of mental disability and as a result of a comparison of many training initiatives that exist in different countries and that were presented at the Agora, we may propose the following training criteria:

- Not disability, but learning is the issue!

- Mainstream education as a preparation for mainstream training settings and work on an open market

- Preferably inclusive training settings or training models that are working explicitly towards inclusion; the personal learning process of every member of a training group is important

- Not only vocational training is the goal, but through and together with the vocational training people are learning social skills and developing social and personal autonomy: a personal future planning or a life project is supported

- Consultative facilities may consist of interviews and assessment of the trainees in order to know each person's skills, needs and preferences; also his dreams and available environmental facilities need to be known

- This way an individual plan that mentions strengths and limitations and a personal profile can be made, evaluated regularly by the person himself, together with a case manager

- Improvement of cognitive capacities, attention, professional skills, and knowledge of safety, rights and obligations as workers and budgeting are also the goals of the training

- Appropriate behaviour and social skills regarding privacy, friendships and relations, family planning, can also be important issues

- A job match is the general goal, looking for an appropriate training and job for each person, according to his profile and learning processes

- Flexible curricula, adapted to each person's learning process

- Giving clear procedures for tasks and job activities

([26]) NIVO Brussel

o Adapted coaching models

● Providing mediation of content together with mediation of emotional support·

o Learning to deal with failure, in order to know one's limitations and in order to learn from mistakes

o Building on a social network and natural network development

● Flexible organisation with many actors, permitting the trainees a gradual shift from training centre to the working place, with repeated training schedules if necessary

● Trained assistants, giving individual feedback

o Good teamwork between trainers and employers, providing a job coach at the work place if necessary and as long as necessary

● On going support when the training has finished, whenever it is needed by the person himself or by the employer or re-employment assistance

● Structural financial and legislative measures for realising the process of integration, in order to professionalise on a permanent basis the integration of every mentally disabled person

7.5. Training of the people training and supporting the mentally disabled

In a new context of integrated work for the mentally disabled, many people of all different kind of qualifications or with no qualification at all can be asked at a certain moment to accompany or even to coach a person with a mental disability at his (new) job. This is not so special, regarding the development towards natural social networks instead of specialised services as the most appropriate daily support or the human support at the 'first level'. Still, in training centres where vocational training for mentally disabled as well as others is provided, the teachers or trainers need to be introduced into some topics, that will allow them a better communication with and mediation of the mentally disabled persons. Also communication with the future employers is possibly one of their tasks, as it might be also with colleagues and family of the person involved.

Training the mentally disabled requires certain skills, but mostly a common attitude:

(a) As we put learning central instead of disability ([27]), knowledge of and respect for different ways of learning is one of the important issues. This immediately allows included settings, where not only mentally disabled but also other people who need a new and individualised vocational training can be helped.

([27]) Twynam, Paul. The Home Farm Trust Ltd. Bristol. Available from Internet: http://www.hft.org.uk [cited 28.1.2002]

(b) Knowledge of total communication towards the mentally disabled is needed; a whole (r)evolution in communication aids for mentally disabled has taken place, permitting them a much better way of expressing themselves and communicating with others, including their own families and trainers

(c) Knowledge of learning psychology and insights in memory

(d) Planning and evaluation skills, permitting the trainers to discuss the goals set for and with the person himself

(e) Empathy or a feeling of understanding them in order to be able to share their concerns, dreams, the problems they face in their daily life...

(f) Supporting skills towards self advocacy and personal autonomy

(g) A positive interaction style, allowing mediation of skills and attitudes, by giving good models, necessary task analysis or procedures and appropriate feedback

The second task of the trainers is to accompany the mentally disabled into their working place and train other workers or responsibles at the work floor to support and coach the mentally disabled person. This is a totally different task that requires yet other skills and insights:

(a) Empathy towards the employer: what are his concerns?

(b) Raising awareness among employers and workers

(c) Being a model for a new coach at the work floor, while working together and letting the coach take over

(d) Knowledge of financial or other assistance available

(e) Communication and teaching skills adapted to adult education: teamwork, giving advice, handling conflicts...

7.6. Conclusions

Even though the images that were used at the Agora seemed to provide the strongest arguments, the amount of thoughts, feelings, experiences and arguments expressed by words in a dialogue among professionals from very different backgrounds, gave me the strong belief that we all acted towards change, or – as Carmen Duarte put it ([28]) – that we were willing to work as 'agents for change'. The partnership between economics and education can be elaborated, even if disabled people are involved. To me this shows that sensibilisation in society has already come a long way, which is a wonderful sign. If both partners – including special education and special services – learn (or continue) to understand each other, then the perspectives for mentally disabled people may change.

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8. The initial and continuing training of the mentally disabled in lifelong education and training

Christian Robert [29]

It has been with great pleasure that I have travelled the distance separating Belgium from Thessalonica in Greece to make my contribution to this Agora among so many experts. Here we can express our views on the training of people with mental disabilities, the economic background to this issue and the innovatory methods – true social engineering – developed to enable these people to take their place in society, helping to improve their quality of life.

For my part, I shall tell you about a project that has been running for over five years in Mons, in Belgium. This approach to continuing training uses a network of training operators consisting of enterprises within the region.

8.1. The people involved

It may be helpful here to go over a few key concepts that will give us a full and dynamic picture of the position of adults with mental disabilities, with whom we are mainly concerned in our day-to-day work.

There have been many vicissitudes in the integration of the disabled over the course of history. From the beggars to whom alms were given and individuals regarded as dangerous who were shut up in hospitals, the 'person as object', we have moved to the 'person as subject', and now to today's 'person as actor'.

Although integration is one of the principles, if not the driving principle, of socio-educational action, it has to be recognised that the degree of integration varies substantially in real life. The social and cultural context, the degree of economic development, etc., are all variables that must be taken into account in our intervention strategies.

8.1.1. There have been many changes in the very definition of mental disability and its broader acceptance

In 1983, the American Association on Mental Deficiency (AAMD) adopted the definition propounded by Grossman: 'mental deficiency is manifested by overall intellectual function

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that is significantly lower than the average together with difficulties in adaptation, becoming apparent during the period of development (up to the age of 18)'.

The limitations of adaptive behaviour must be present in at least two of the following fields: communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academic abilities, leisure and work.

In 1987, Ionescu added greater detail as to the criteria adopted: mental deficiency, he said, is defined by the arrest, deceleration or non-completion of development, manifested by significantly lower intellectual function than the average, existing concurrently with inadequate adaptive behaviour, and it is determined by aetiological, biological and/or socio-environmental factors which may come into play from the time of conception up to the end of psychomotor maturity (approximately the age of 3).

According to this definition, the evaluation varies with the degree of deficit and the extent of additional disturbances, the quality of intervention and the demands of the environment. This new interpretation confirms that the level and the deficit can alter and that the status of mental deficiency can even disappear as a result of modifications in adaptive behaviour and/or the expectations of the environment.

Even more recently, Luckasson (1992) has proposed a multidimensional approach to diagnosis, classification and support. There are four dimensions to this approach:

(a) intellectual functioning and adaptive skills,

(b) psychological and emotional considerations,

(c) considerations relating to physical health and aetiology,

(d) environmental considerations.

A multidimensional approach can be used to arrive at a more precise description of changes over time and a better measurement of a person's current functioning, evolution, environmental changes, educational activities and therapeutic intervention.

The multidimensional approach to diagnosis, classification and support was conceived with the aim of broadening the concept of mental retardation. This approach tries to avoid the sole use of IQ to measure the level of limitation. In fact, levels of mental retardation (slight, moderate, severe and profound) have been dropped. The aim of the multidimensional approach is rather to place the emphasis on the needs of the individual in order to determine the appropriate levels of support, for the purpose of increasing people's independence and productivity and facilitating their integration into the community.

According to Luckasson (1992), the concept of individual support is vital to the conceptualisation of mental retardation and to improving a person's current level of functioning.

This definition advocates adequate support to promote people's adaptive functioning and integration into the community. The support may be provided by individuals themselves, their

families, significant people or relevant establishments. The author suggests that the support provided to people should be as natural as possible. Furthermore, these levels of support may fluctuate during the course of an individual's life.

Luckasson lists seven functions that should be taken into consideration for each of the four dimensions mentioned above. These are personal help, financial planning, support for employment, behavioural support, assistance in the home, the use of and access to community resources, and health care. For each of these functions, four levels of support are proposed: intermittent, episodic, extensive and pervasive.

8.1.2. On this basis, we should then go on to tackle the question of adult status

According to the Petit Robert (1988), in French the word *adult* is applied to a living human being who is fully grown. In man, the dictionary continues, the age of adulthood comes between the end of adolescence and the onset of age. And it refers to the word 'mature'.

According to survey-based research by the Institut de Pédagogie Curative of Fribourg, the term *adult* is related to a set of items that can be grouped into five categories:

(a) financial and legal aspects such as managing one's own affairs and one's money, having a measure of financial security, running one's own home, catering for one's own essential needs, being a good citizen, and abiding by the law, rules and accepted habits;

(b) psycho-personal aspects, such as daring to assert oneself and cope with any interpersonal conflicts; having a realistic concept of oneself, bearing in mind one's own resources and limitations; having and defending one's own personality and opinions; being mentally coherent enough to cope with some of the incidents that arise in life; being able to choose and act on one's choices; being able to refer to a system of personal values; fulfilling and taking on responsibilities; having a life plan and being capable of solving everyday problems;

(c) psychosocial and relational aspects such as having friends and maintaining relationships, acting altruistically and frequenting and adapting to different circles;

(d) socio-cultural aspects such as enjoying 'solitary' leisure pursuits, being entitled to acquire assets, having a certain accumulation of academic knowledge, taking part in certain cultural, sporting and community activities, pursuing a working career, using public services and being able to continue education;

(e) signs of moving forward, such as having taken vocational training, having one's own home, establishing a special relationship with someone of the opposite sex, marrying, being able to have children and bring them up, and sharing a certain outlook and attitude.

This set of factors should be regarded as developments to be attained, for it would be a mistake to think that an exhaustive list can be drawn up of the definitive characteristics of adulthood or of an adult person. On the contrary, we should like to envisage this period of life as synonymous with development 'potential', not 'actual achievements'.

Of course, it is likely that some of these developments will never be attained or even approached by certain adults with mental disabilities.

Should they be refused adult status for this reason? Would it not be treating their unique (and dignified) experience of life – an experience accumulated over the course of their lives – with disdain to refuse them this status?

If the status were to be refused, would it not open the way to untenable propositions: if these people are not 'fully' adult and they are no longer children, then what are they? One is entitled to wonder about the mystery of every individual (who are they really?), but it would be inadmissible to arrive at extremist answers: that they are nothing, that they serve no purpose.

This is why we should like to adopt the definition proposed by Bissonnier (1977), who says that adults are those who to the best of their own potential succeed in evolving to a point at which they attain the maturity of which they are capable.

This definition has the merit of creating a framework, but it does not resolve the many questions that arise, two of which stand out for their importance and for the absence of answers at present (Lambert, 1991):

(a) Who are these mentally disabled men and women?

    (i)   What are their thinking processes?

    (ii)   How do they communicate?

    (iii) What should they be taught?

    (iv) How do they experience their condition?

    (v)   What are their projects, their aspirations, their dreams?

(b) What structures need to be set up so that in their lives they can enjoy full dignity as human beings?

How should we apply this basic human right in practice? This proves to be a sort of challenge for us: to regard them truly as adults and not as retarded children.

It is certainly not to demean these people to recognise the limitations imposed upon them by the forms of backwardness that they display. It is the very essence of disability that it imposes limits. But should one not, together with them, look on adulthood as a period of possible development and flowering? Adulthood should not be regarded as a state of completion. Completion of what? What adult can claim to have completed their project? Is there not a Chinese proverb that says one begins to get old when one stops learning.

Furthermore, such declarations of intent must of course respect the wishes of the disabled and their families.

This is the context for the conduct of training and lifelong education.

8.2. The activities involved

8.2.1. Initial training

In the case of the mentally disabled in my own country, initial education almost exclusively takes the form of special education.

There are some experiments in integration into ordinary education, but although they are of interest they are still marginal and complicated to implement. Through the perseverance of parents and some professionals, the obstacles can sometimes be overcome and this can be successfully achieved. But this achievement does not mean that school education remains integrated until the end of schooling and leads to a school certificate. A break often occurs along the way, making it necessary to redirect people into special education. Professionals and parents then agree that those few years have nonetheless made an enormous contribution to the person concerned. 'What's been gained is all to the good,' in a way.

In special education, there is currently a searching debate about the growing gap between what is learnt at school and the outcomes expected from the various streams.

One of the streams was in fact designed to offer access to *entreprises de travail adapté* (ETA, or 'adapted work enterprises'). The latter complain, however, of the ever widening gap between the training and the realities of work in an ETA. This shortfall is so great that internal reception units have been created for ETAs so that, with more staff, they can take on job applicants on a trial basis, familiarise them with the enterprise and train them in the working environment.

As for the other streams designed to offer access to jobs in ordinary companies, the divergence between the tools used during training and those companies' requirements is no longer acceptable, to the point that they no longer guarantee access to an ordinary job. This situation is further deteriorating in today's weak economic situation and in the climate of under-employment.

8.2.2. Continuing training

For people with mental disabilities, it has to be admitted that this type of lifelong education is one item on the list of inequalities among citizens. Continuing training is not yet sufficiently part of the rights of the mentally disabled, and then only to the same extent and after the same struggle as in the case of students from schools providing normal education.

8.2.3. The absolute myth of employment

The quest for results and productivity from the smallest investment by the authorities (and this is praiseworthy in itself) has led them to look for tangible, measurable outcomes. Access to employment is one of those outcomes. For the Belgian and European authorities, a successful

project is one that has created or provided access to jobs for the largest number of beneficiaries. The European Commission's working documents on improving the level of employment of the disabled (1998) stress the need to adapt traditional policies on the employment of the disabled to new types of work and to changes in the labour market. Nevertheless, these documents also reveal the shortcomings of statistics on the employment of the disabled. When it comes to people with mental disabilities, only one recommendation – not to overlook these more vulnerable groups – gives any hint that the employment in question may relate to them.

It is indisputable that our society gives priority to work, even for people with mental disabilities. Everyday realities show us how important it is for the value attached to work not to be dissociated from a vital affective balance, which comes from the existence of a social network and the acquisition of social skills. Not to look at a person holistically almost always leads to setbacks.

The quest for new forms of jobs and training is the real challenge confronting us today.

This being so, what jobs are suitable for the mentally disabled?

In my country, a job implies the signing of a contract of employment, which in turn is linked a certain remuneration and a number of rights and duties and gives access to social security through deductions from the pay packet. This right to a job is fiercely defended, quite rightly, by the associations for the disabled (which are rarely represented by mentally disabled people) and the organisations representing the workers (the unions). Underlying this fierce defence is the resolve to prevent the exploitation of more vulnerable workers, but also the desire to preserve social advantages already acquired while avoiding the creation of new precedents.

Unfortunately, the productivity criteria linked with market competition is distancing the mentally disabled more and more from this type of employment. Sheltered employment too suffers from the same constraints, and most of the ETAs that have survived and are profitable today no longer take on people with mental disabilities.

Those not fortunate enough to find or retain this type of competitive job therefore find themselves without work. They are not sufficiently competitive for ordinary or sheltered employment, and too independent for what are called the 'occupational' facilities: the *Services d'Accueil de Jour* (day care centres) in Belgium or the CAT, which are somewhat more in the middle (between sheltered employment and vocational activities), in France.

These people thus lose the social network associated with a job. Once again they have to seek help with finding a job, some work to do. The (vocational and continuing) training agencies are amongst those at the receiving end of this demand. I shall be returning to them later.

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Alain Lebaude (1996) stresses that what is lacking is not work but employment. It is therefore important to view the concepts of employment and integration differently and to realise that we are living in a period of change that is no longer cyclical but structural. We shall then progress towards redefined concepts and new structured links.

In the European Commission working document cited above (1998), the observation is made that the Member States are making efforts to consider the potential for new forms of employment. Among these, we should mention the prospects afforded by the voluntary sector, i.e., the creation of jobs in mainly local activities of social value in the service sector, which do not usually replace market-linked occupations and do not compete directly with private-sector enterprises. Although such jobs are often temporary, an evaluation of initiatives already taken shows that they may have very positive effects on the job prospects for the people concerned and lead to the creation of more permanent jobs or to posts in an offshoot sector.

I feel that this thinking is heading in the right direction with a view to finding new formulas for the employment of people with mental disabilities.

It would be a good thing, however, to get away from assumptions and gradually to ease the constraints on what has become established practice, by daring to consider the area of voluntary employment, which can itself lead to regular jobs.

If all these new forms of employment were truly to be targeted towards people with mental disabilities, they would make a prime contribution towards retaining them as members of a social network who play a useful part in society in roles that are recognised and valued in their social environment.

The *Centre de Formation Continuée Specialisé* in Mons-Borinage/Centre, CFCS for short, operates in this field.

8.3.   CFCS's original pilot experiment

In the course of a study trip to Fribourg in Switzerland in the late 1980s, we were impressed by an original experiment which, unfortunately, no longer exists today.

The Migros Clubs, funded by the Migros chain of shops, organised continuing training courses for any interested person, which were also open to the disabled, including the mentally disabled. These were evening courses, held in buildings allocated to this purpose.

The idea of bringing non-disabled and disabled people together side by side in a place of continuing training and of offering the mentally disabled access to lifelong education was recorded in our reports, with the idea of implementing this concept of continuing training in Belgium.

In view of the limited financial resources of the authorities (I cannot believe that only Belgium, and particularly one of its regions, Wallonia, are the only places concerned with this situation in Europe), should thought be given to creating 'Walloon Migros Clubs'? Was the formula of setting up a continuing training 'school' the most sensible financial solution, and the best form of integration? Looking at the existing resources in both market and non-market enterprises and at the practice of networking, we thought that the enterprises might agree to become training operators themselves, either occasionally or regularly. Depending on the demand for training (level, content and objectives), might one hope that:

(a) a florist might be willing to introduce a mentally disabled person to floral skills in his or her workshop or shop?

(b) a company might agree to train a worker in clerical tasks so that he or she could take on this function within an ETA?

(c) a residential home for the elderly might train a disabled person in community catering, laundry work or taking meals to older people?

On completion of the training, these enterprises, having demystified and dispelled the fuss over disabilities, might take account of disabled people's contribution and competences and, on being briefed on the aid available for general or specific recruitment, might agree to offer a contract to the people it had taken on for training, given that the purpose of the training was to gain access to employment.

Having decided on this approach, the CFCS set up a team of three with the remit to:

(a) receive and clarify applications for training from the disabled;

(b) set up and run a network of training operators;

(c) place them in contact with the applicants and, jointly with them, draw up and then monitor and evaluate a fully individualised training programme;

(d) explain the aid available for recruitment and simplify the administrative procedures as much as possible if, on completion of the training period, a job proved to be feasible;

(e) develop and service the network of partners, including the training operators.

Being aware that access to a job is not always the optimum result, and that jobs are often confined to people whose disability detracts very little from their potential productivity, the CFCS aimed to give considerable preference to mentally disabled people who would not be integrated into ordinary or sheltered forms of work.

Two types of training therefore co-existed and were run by the same training operators: job-related continuing training, and continuing training of the lifelong education type.

In outline, as part of the job-related continuing training, a training project would take place for example in the kitchen of a hotel restaurant, where the person might be taken on after completion of training

In the second, lifelong education type, one example is that of Laura, who was integrated into a crèche where she could learn her mothering skills and as a result be allowed to retain custody of her child. Others are Olivier and Magali, who looked after children aged between three and eight years of age in a school and were to make this their main occupation independently of any support facility (they used to attend a day care centre for adults). There are also four people who leave their residential home two half-days a week to start learning about computing so that they can write up the menus for their home and produce a newsletter.

The majority of people coming to the CFCS are men (41 % of those in lifelong education are women, as are 39 % of those in job integration). The average age is 29. The oldest person is over 50. The average period without a job, between completion of initial education and access to continuing training, is lengthy: 60 months.

The training courses organised cover a large number of sectors, in response to individual demands: printing, bicycle repairs, cleaning, computing, warehousing, tiling, prosthetics and medical appliances, cooking, packaging, masonry, animal husbandry, etc.

For guidance, in 1999 there were 86 people, representing all types of disability, who were in the process of integration:

(a)   19 jobs were created;

(b)   17 people had a paid apprenticeship contract;

(c)   21 people were taking training (in-company placements) directed towards entry into the working world;

(d)   19 were taking training of the lifelong education type;

(e)   15 were seeking work.

8.4.   What lessons can we learn from five years of practice?

The information on which I have drawn for this paper is derived from an analysis of 144 training pathways of mentally disabled adults, mainly over the past two years.

8.4.1.   'I've come to look for work'

This is usually the key phrase in the first contact between the individual and the centre. It indisputably reflects the importance attached to work, the factor that today best enhances status. The quest for work, however, usually comes after some time without a job or after a series of failures between the end of initial education and continuing training. This period is experienced in various ways depending on the individual. All, however, are found to have difficulties in assessing themselves and their skills, arising from their history of mental disability and individual life stories. Philippe Caspar, in 1997, raised the question of time as experienced by the mentally disabled. 'Philosophical analysis has demonstrated the decisive

importance of a normal perception of time in the formulation of any person's life plan. Mentally disabled adults, in particular, have a reduced capacity in this area and find themselves mysteriously hampered in building their lives. Certain indicators suggest that such persons have a fractured experience of life. Often they are prisoners of a past that alienates them from their present and prevents them from looking forward into the future. The origin of this problem is often found to be a long history of welfare support, failures and non-recognition of their own value. The previous lives of mentally disabled adults, the lives they remember, which they can look back on, all too often reinforce their negative image of themselves. Paralysed by the weight of their past, it is often the case that mentally disabled adults cannot look forward to a future shaped by their demands and their deepest hopes. At the root of this deterioration in the perception of time, a genuine impoverishment of self-awareness can be diagnosed. The mentally disabled adult often displays an awareness of being nothing, or very little, in this civilisation, which is drawn at every level to images of efficiency, profitability and beauty conforming to certain ideal models.'

It is with this baggage, poor self-knowledge and knowledge of the jobs market that people come to us saying: 'I'm looking for work'.

8.4.2. Analysis of applications and clarification

This stage of the meeting with the person concerned is of fundamental importance in determining the positive outcome of the project associated with the initial application.

As pointed out by Braquet (1992), technical skills are easier to assimilate than social skills, and yet it is more often the latter that create a problem.

The young people coming to us are very often found to have:

(a) a misconception of the jobs market, the post aimed at and the possible alternatives,

(b) little self-knowledge (or low self-esteem),

(c) difficulty in relating to their family and/or social environment: difficulties in adaptation are the signs of shortcomings in the process of self-identity. It is therefore important to take a holistic view of the situation, to appreciate and respect individuals in their cultural frames of reference and against the background of their life's journeys and histories. Once these factors have been clarified they reveal, if this still needs to be revealed, how inadequate are the audits of needs, competences, interests and resources and how they contribute to an over-rigid view of the situation. Personal integration is a vital element in a process of occupational and/or social integration. We regularly see how closely 'training' and 'therapy' are linked, and how greatly felt is the need to devise a more or less structured framework.

What are people looking for? A job? To distance themselves from their milieu? To discover a social role? To build or expand a social network for themselves? To acquire new technical or social skills? With what ultimate goal?

8.4.3. Multiple experiences, the factors in independence

Placing the mentally disabled in a variety of situations, giving them sources for experimentation and practical awareness of life or work that they would not otherwise have been able to acquire can promote autonomy and independence.

Besides this confrontation with reality, backed by support to ensure that it is not seen as a series of failures, a proliferation of 'life-size' experiences will help people to take their own decisions in life once more and impose their own decisions on their environment.

Support in a real-life situation, in a training place, helps people to clarify what they are asking for and to express their own choices.

8.4.4. The knock-on effect on the surroundings

For people living in residential units, continuing training among their peers has a contagious knock-on effect in the group. Providing that the unit is sufficiently open, a person in training will bring the fruits of that training back to the residential home. This sharing of experience will generate new applications from other people who have not expressed them before.

For people living in a family, access to training will often have the same broadening effect as in a residential service, providing an opportunity to embark on a project that will mobilise the whole family unit (purchase of a computer, equipping a vehicle, etc.)

8.4.5. Training as a means to other ends

Training is used as a means of entering into a relationship with the training operator. It is often an opportunity to make contacts and to rub the rough corners off each other, and might then possibly lead to a permanent job within the enterprise which started off by being the training provider.

Training is also a way of distancing oneself from the family or institutional environment without detaching oneself from it altogether.

In both cases, training helps to achieve other 'secondary' objectives, which should also be seen as aims in their own right along the route to a person's integration.

Alexandre Waeber, at the seminar organised by CFCS in Belgium last year, spoke of the need to evaluate the impact of continuing training in terms of the process and the peripheral benefits:

'Encouraging the mentally disabled to enter training and giving them support is to give them an opportunity, in collaboration with the people around them – parents and professionals – to be involved in planning their own lives. It also recognises their right to make choices and decisions.

'It is thus an opportunity to discuss again the image that disabled people have of themselves, and the image that the working and family environment have of them. This time for thought that elapses between acceptance of the training programme and its implementation provides an opportunity to work on the realistic, shared formulation of the trainee's social representation. For behind the aspirations one can guess at the doubts, illusions and disillusions.

'Lastly, if we want to understand the impact of continuing training on the daily life of the mentally disabled, it is important to take into consideration the broader context in which the training is to take place. On the one hand, the presence of the mentally disabled in an unaccustomed context provides an opportunity for them to reveal themselves, to step away from certain habits of living, to emerge from certain behavioural patterns that have perhaps been induced by routine. The encounter with different partners often leads to a form of social immersion and the development of new relations that might well persist after the training is completed. Sharing a training experience is also an occasion for social comparison that will enable the disabled to become aware of their potential and their limitations, as well as to assert themselves in relation to others. On the other hand, the setting up of one's own training project is also an ideal opportunity to acquire or strengthen organisational skills such as registration and funding, dealing with transport problems, timetabling, fatigue, and negotiating support from an institution, the educational team or the family.'

8.4.6. The period of varying length between initial education and entry to continuing training

Within CFCS, we are struck by the lengthy break between initial education and entry into continuing training (an average of five years).

Unfortunately I cannot derive any objective lessons from this observation.

We cannot validly demonstrate a possible link between this long period of inactivity (and we do not always know whether it has been actual inactivity) and the failure of the process of integration, for example. In the same way, does this social and occupational break contribute to the impoverishment of self-awareness? A prolonged period between initial education and continuing training is not in our practical experience synonymous with non-employment.

It is likely, then, that this factor must be correlated with others, or even with the indicators as a whole. This is research that needs to be conducted, and it will have to be the subject of a future paper.

8.4.7. Importance of family support or support from the living environment

Our experience has shown that admission to training and, later on, its success is closely linked to the family or institutional support that a person receives.

Whether the disabled person receives encouragement or is simply not discouraged, positive support from his or her environment has a crucial effect on participation in and the results of training.

If I may refer back to the concept of disability at the start of my talk, the impact of the environment on the 'gravity' of the disability is demonstrable here. It must give professionals cause for thought about their responsibility in the liberation or alienation of the mentally disabled.

8.4.8. Mental health disorders

Among the people attending CFCS, those with mental disturbances, whether or not in addition to a disability, are the ones with an accumulation of factors leading to training setbacks (training not begun or quickly dropped): they are older, a longer time has elapsed between the end of initial education and the start of continuing training, and they enjoy little or no support from the environment.

According to the CFCS model, are there two different specialist approaches to those being received with a view to training, depending on whether or not there are psychic disorders in addition to mental disability?

It is too soon for a final answer to this question at present. It should be borne in mind, however, that the French project partners in the European project described in the LUCIE booklet (available during this Agora or by subsequent request from the organisers) who support the disabled with mental disturbances in training, using a similar methodology that takes greater account of psychotherapeutic dimensions, obtain similar results that are just as encouraging.

8.4.9. Age as a primary criterion for the success of integration through continuing training

The youth (lack of maturity) of a mentally disabled person seems to be a factor that is unfavourable to the implementation of training and the ability to succeed in it. Sometimes, moreover, it is not a question of technical competence but rather of sociability or relational or affective stability. Youth seems to predispose people to a consumer rather than an active attitude.

8.4.10. Recognition of disability

For some years now, in our services we have witnessed a trend among younger people to reject the status of disability. They do not wish to have access to support for employment or integration if it requires them to identify themselves as people with disabilities.

Within CFCS, people have broken off their training when they come to the point of signing a specialist adaptation contract (training with pay under an apprenticeship contract), for example.

8.5. By way of non-conclusion

Considering mentally disabled adults as whole persons, capable of evolving at any stage of their lives provided that their environment is willing to adapt, is vital as a starting assumption.

The optimum conditions for integration are created by giving preference to lightweight facilities that are close by, personalised and preferably networked with existing general or specialist facilities.

Initial education would benefit by developing this same type of partnership where possible, as well as ever greater use of in-company placements and block release training.

Lifelong education, continuing training, mediates between the goal of getting a job and learning new technical competences and social skills.

Training centres cannot be limited to admitting people for training with the sole criterion of success in finding employment. A person is a whole and must be looked at holistically.

The incidental benefits associated with access to continuing training are of vital importance. They must be included in the criteria for the evaluation of training.

New types of jobs must be sought, without the need to create new structures. The coordination of existing institutions through networking offers a better return.

All the opportunities for mentally disabled adults – and continuing training is one of these – to gain new experiences in a context that expands their social network side by side with non-disabled people add to their ability to choose and their role as citizens. In this way they become agents of change within the macrosystem formed by their living environment.

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9. Education and training proposed to persons with learning disabilities in the different European countries

Victoria Soriano ([30])

9.1. Introduction

This paper summarises the first results related to the topic 'Transition from school to employment', selected by the participating countries in the European Agency for Development in Special Needs education. It highlights the great importance and shared interest, from the different countries, regarding the problems of training and qualifications as well as problems related to employment of people with special educational needs (SEN).

The European Agency for Development in Special Needs Education is an independent, self-governing organisation supported by the Ministries of Education in 18 participating countries – the present 15 EU member countries, Iceland, Norway and Switzerland –and by the European Commission via specific projects. Furthermore, the three Baltic countries, Estonia, Latvia and Lithuania, participate as observers of the Agency's work

Its main objectives are to work towards the improvement of quality in special needs education and the creation of long-term, extended European collaboration in this field.

The Agency's 2 guiding principles are:

(a) Quality education for all aiming towards the best possible education for all pupils, focusing upon their strengths and not weaknesses

(b) Equal opportunities in relation to access to learning, which respects individual differences

As a European facilitator of the dissemination of information, the Agency collects, processes and distributes information that is available in individual countries and at the European level. This includes information about special needs education practice in the participating countries as well as information about new and innovative measures, research and development and information about European Union Community support programmes.

Every year the Agency addresses a number of specific themes. Transition from school to employment is one of its priority areas and it is being conducted in cooperation with 16 countries – all EU countries, except Ireland, Norway and Iceland.

([30]) European Agency for Development in Special Needs education

Every year the Agency addresses a number of specific themes. Transition from school to employment is one of its priority areas and it is being conducted in cooperation with 16 countries – all EU countries, except Ireland, Norway and Iceland.

9.2. Frame

The main aim is to provide an analysis of existing models at the European level for transition from school to adult life and employment, including overviews of which strategies seem to provide good results and why, which routes have been used and why, which barriers appear more frequently in the transition process, as well as an examination of the roles and qualifications of teachers and other professionals involved.

At the end of 1999, the European Agency carried out a first review and analysis of existing data and information at European and International level, in order to find out and define main problems already raised by professionals from education and employment sectors. Information was contrasted and completed by national data provided by national experts nominated in the 16 countries involved in this topic, as well as by data provided through local projects.

Taking into account these results, the Agency is collecting and updating national information – based on existing policies and its implementation, problems and results – and is proceeding to a second analysis on the process of transition, based on existing practices.

A total of 46 ongoing projects were selected from the participating countries and exchange of professionals took place, involving more than 70 professionals. The main objective is being to find out key factors based upon the different realities: issues, problems, tendencies and needed changes. Results from this further step will be ready at the end of 2001.

First review, that is subject of this paper, concerned the main documents published between 1992 and 1998, involving four to 12 countries and elaborated by – or in collaboration with – the OECD, Unesco, ILO (International Labour Office) and the EC. Some relevant research (L. L. Collet-Klingenberg,1998) and some running European projects (Pericas, I. et al., 1999 among others) have been also considered, as well as country data from Eurydice/Eurybase 1999 and from the European Agency (1999).

Some previous clarifications need to be made. Facts and data that appear in all the documents are mainly related to inclusive education (special education is always considered under this perspective) and to social integration situations. Data on this topic are very limited and comparison among countries is rather difficult. In some of the documents, transition is mainly focusing job perspectives, in others it is more large and it also concerns independent living and adult education.

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All documents highlight quite similar questions:

(a) How to prepare people with special needs for their life as adults and as full members of our society? (Pericas, I. et al., 1999).

(b) Is it preparation for life effective enough? (ibid.).

(c) How to ensure people with disabilities have access to relevant educational opportunities throughout their lives if they want to maximise their ability to live independently? (Lauth, O. et al., 1996).

(d) How to reduce the number of young people leaving initial education and training without a minimum level of qualification? (Joint Employment Report, 1998).

9.3. Education and training possibilities

Secondary education, in the different countries, usually includes two phases: lower and upper. The end of the first phase often corresponds to the end of compulsory full – time education (15 to 16 years of age in the majority of the countries).

Two main categories of courses can be found in upper secondary education: general courses providing education leading to entry to higher education; vocational courses providing qualifications both in preparation for working life and for pursuing studies.

Further information concerning main routes in secondary education in the different countries is included as annex at the end of the document.

Taking into account content of post – compulsory training courses, three main categories can be considered (OECD, 1997):

(a) social: the main objective is to prepare students to live an independent living. Adult education can be included here as a large aspect aiming to empower the individual person to full citizenship, to develop his/her autonomy and to improve his/her quality of life

(b) professional: the main aim is to prepare young people for a working life (providing students with basic or more specialised skills and qualifications)

(c) general: the aim is to acquire basic or in-depth knowledge's to be pursued in further or higher education.

9.4. Some facts

Some interesting aspects need to be highlighted from the different documents:

'All disabled people had to have access to meaningful educational opportunities throughout their lives if they were to maximise their ability to live independently. The existing data

*reveals an evident lack of qualifications achieved by disabled adults. The Eurostat data
(1995) shows that in most of the countries the educational level of disabled adults is very low'*
(Lauth, O. et al. Helios, 1996).

The OECD Report (1997) says that a quite large number of students start further education but
a large amount of them will never finish their studies. It is not possible to know how many
pupils leave education after the compulsory education stage, but it is possible to state that
many will never go beyond compulsory education.

One main difficulty is related to missing accurate information on total number of SEN
population. In spite of the differences concerning data, we can say that according to the
definition used by the countries – disabled or special needs student – the average SEN
population concerns 3 to 20 % of young people under 20 years (European Agency, 1998;
Eurybase 1999). At the end of this document more information concerning data provided by
countries is presented in a graphic.

Low educational attainment and lack of qualifications have been cited as reasons for people
with disabilities not being more successful in achieving employment. If developing
educational opportunities is a fundamental need to cope with change to gain employment,
people with special needs cannot be excluded from this process and must have the same
opportunities (Lauth, O. et al. Helios, 1996).

'All Member States have addressed the need to reduce the share of young people leaving
initial education and training without a minimum level of qualification, mainly through
comprehensive reforms of the initial education systems. The introduction, consolidation or
reform of apprenticeship or other work – linked training is an important aspect of reforms in a
large number of countries ' (Joint Employment Report, EC 1998).

'Current data reveals that many people with disabilities lack the appropriate qualification for
work. Figures in Europe support the argument that they are at a disadvantage on the open
labour market, not because of an inherent incapacity associated with their disability, but due to
their low level of access to education and training' (ILO Report 1998).

The following table gives general information concerning some aspects that need to be
considered related to young people education and relatively importance – in financial terms –
of education in the different countries. According to Eurostat figures (1995), percentage of
young people among 20 to 29 years old without a final upper secondary school leaving
qualification was around 30 %. This percentage is even higher concerning pupils with special
educational needs.

	A	B	C	D	E
Austria	27	53	21		5,9
Belgium	26	65	25	6	
Denmark	27	68	11	7,8	4,1
Finland	26	66	16	8	4,8
France	28	67	23	6,2	4
Germany	26	63	16	4	3,4
Greece	29	56	29		
Iceland	31				
Italy	27	54	45	5	
Luxembourg	26	59	51		
Portugal	30	57	58		4
Spain	32	61	44	5,8	3,8
Sweden	25	44	11	7,8	4,6
United Kingdom	28	46	40	5	3,8

A – Percentages of 10 to 19 year olds young people in the total population, 1995. Source: Eurostat, population statistics

B – Percentages of students among 15 to 24 year olds, 1995. Source: Eurostat, Labour force survey

C – Percentages of young people – among 20 to 29 year olds – without a final upper secondary school leaving qualification, 1995. Source: Eurostat, Labour force survey

D – Total educational expenditure as a percentage of GDP (Gross Domestic Product) in 1992. Source: Education at a Glance, OECD Indicators 1995

E – Expenditure on primary and secondary education as a percentage of GDP in 1992. Source: Education at a Glance, OECD Indicators 1995

9.5. Employment situation

One of the aims of integration is to give all the possibilities to fulfil their potential and to be effective participants in society. Being employed promotes a positive self – image, a social integration and also provides remuneration.

Traditionally people with disabilities are most likely to be under – represented and excluded from mainstream educational systems and employment. The current economic situation in a number of countries has resulted in levels of long-term unemployment which pervade the whole population. In this context, disabled people are disadvantaged concerning employment. Unemployment rate among disabled is significantly higher than among non disabled people.

Governments has adopted a variety of educational and competence – development initiatives to enhance the employability of citizens. It is essential that people with disabilities are assured access to such schemes (Lauth, O. et al. 1996).

People with disabilities generally encounter more difficulties in obtaining employment and are more likely to remain unemployed for a long time. The rate of unemployment for people with disabilities tends to be two to three times higher (ILO Report 1998).

It is evident that where high level of unemployment are experienced by the general population, it will be more difficult for all groups which experience social and economic exclusion to secure employment. While in general it appears that growth in employment tends to bring better access of disabled people to employment, this is not the case in all countries as other factors can also play a role (Benchmarking employment policies for people with disabilities, EC, 2000). This report has highlighted key indicators from the employment perspective, listed at the end of the document, which could be comparable across countries and should be able to provide quantitative as well as qualitative outcomes.

Policies addressing the particular needs of disabled people seem to lack sufficient integration with other policy fields, in particular those related to the prevention of long – term unemployment and the adaptation of conditions to facilitate integration in working life (Joint Employment Report, EC 1998).

Employment prospects are poor for young people who leave the school system without having acquired the aptitudes required for entering the job market (Council Resolution on the 1999 Employment Guidelines).

9.6. Some facts

The following table will present some data concerning young people unemployment situation in the different countries, as well as the financial effort made by the countries on training – labour programmes.

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	A	B	C	D
Austria	6	4*	4,40	0,06
Belgium	22	10	6,80	0,15
Denmark	10	8	6,01	0,46
Finland	41	17 *	13,10	
France	27	13	12,40	0,15
Germany	9	8	10,00	
Greece	28	11	9,60	
Iceland	11			
Italy	33	14	12,10	
Luxembourg	7	3	2,60	0,05
Portugal	16	8	6,80	0,05
Spain	42	26	20,80	0,01
Sweden	19	9*	9,90	0,82
United Kingdom	16	9	7,00	0,03

* 1993 data from Employment Outlook 1996, OECD

A – Unemployment rates of young people between 15 to 24 year olds, 1995. Source: Eurostat, Labour force survey

B – Unemployment rates of 25 to 34 year olds, 1995. Source: Eurostat, Labour force survey

C – Youth unemployment ratio, 15 to 24 year olds, 1997. Source: Eurostat harmonised unemployment rates.

D – Public expenditure as a percentage of GDP on labour market programmes, 1994. Source: Employment Outlook 1995, OECD

9.7. First results

The main problems raised in the different documents, from both sectors – education and employment – can be summarised as follows:

Education and training	Employment
High percentage of 'education' leavers Even if data are not precise enough and difficult to be collected, it can be said that a large proportion of students with special needs don't achieve the education programmes they are supposed to follow. They have the same possibilities than the other students, but in practice mainly social or low professionals programmes are offered to them. They are not necessarily interested by the limited choices proposed and programmes are not always suited to their interests and needs. Data reveals that quite a large number of students start further education but a large proportion of them will never finish their studies. It is not possible to know how many pupils leave education after the compulsory stage, but it is possible to state that many will never go beyond compulsory education (OECD 1997). Making educational programmes more interesting for pupils could be the solution for different problems (European Agency, EA, 1999)	**High rate of unemployment** Disabled people are disadvantaged concerning employment – they are under-represented and/or excluded from employment. The unemployment rate among disabled people is significantly higher than among non disabled: two to three times higher (ILO 1998). Policies addressing the particular needs of disabled people seem to lack sufficient integration with other policy fields, in particular those related to the prevention of long-term unemployment and the adaptation of conditions to facilitate integration in working life (JER, EC 1998). National data only include registered unemployed people and a high percentage of disabled people are not registered as unemployed. They have not even the chance to have a first job (Lauth, O. et al.1996). Unemployment maintenance for disabled people has become the third item of social protection expenditure after old age pensions and health expenditure but still more than unemployment benefits (Employment and disabled persons, EC, 1997).
Low level of access to education and training Even if compulsory full time education in the majority of the countries goes until 15 to 16 years of age, in some countries, almost 80 % of disabled adults have either not progressed further than primary education or can be considered as illiterate (Lauth, O. et al. 1996)	**Inaccessibility to the work place** There are still problems related to physical accessibility to work place, but it is also concerning human and technical support and help.
Lack of qualifications Current data reveals that many people with disabilities lack the appropriate qualification for work (ILO 1998). Figures in Europe support the argument that they are at disadvantage on the open labour market not because of an inherent incapacity associated with their disability, but due to their low level access to education and training (ibid.). The most pressing problem is that people with disabilities do not receive the appropriate qualifications required for employment; training initiatives need to be more tailored to the current demands of the labour market. **More limited choice** Existing stereotypes concerning disabilities are at the basis of the limited choices offered to them concerning education and training programmes.	**Changing working conditions** Working conditions are gradually changing: e.g. importance of part – time and temporary work. **Offensive strategy** Employment growth requires an offensive strategy which promotes an increase in demand rather than a defensive strategy. That requires investments in physical productive capacity, human resources, knowledge and skills. Young people with disabilities should have a proactive role in planning for their own future.
Not enough suited to their needs (person centred approach) No single common approach is useful as each person and each situation is different. Integration into employment requires tailor made solutions.	

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Underestimation of their abilities Underestimation by teachers, parents and the public in general of the abilities of disabled people to take up competitive paid employment. Co-operation with the parents is very important to develop a realistic view of the pupils skills (EA 1999).	**Missing a clear understanding of their qualifications and capacities** It remains on-going stereotypes assumed by employers.
Vocational training is often not related to job practice or oriented to the field of work Vocational training often takes place in segregated provisions – vocational training institutes for certain types of disabilities. It is often not oriented to complex professions and the methods used might be very traditional. The EC 1992 Report on sheltered workshops concludes that they very rarely offer opportunities to participate in further training. Vocational training needs more information on the skills demanded by the employers.	**Unclear situation about training opportunities provided by employers** There are not reliable data about training opportunities provided by employers.
Teachers' qualification to be improved Teachers are rarely trained to prepare young disabled for transition. There is a need for improvement or adequate training for teachers in order them to better prepare young disabled people for transition.	
	Difficulties on implementing legislation at local and practical level The lack of a legal framework or the existence of inflexible systems create difficulties. Failure to apply and enforce employment quota. Most countries have a combination of measures in place, which are perceived to be effective to different degrees. There are no examples where quota systems achieve their targets, but supporters of this system point that resources released by levies or fines permit other employment development measures. Anti-discrimination legislation also presents problems. Sometimes this gives the impression that such legislation is more about communicating messages to disabled people and to employers than about providing effective remedies for individuals (Ecotec, EC, 2000).

As a result of the work developed during these two years, we hope to be able to define some key factors relevant in the area of transition. Six appear to play an important role and are now being discussed, they concern: organisation of the transition process in order to place the person at the centre, as well as criteria to ensure a good transition process; training in real job situations; qualifications and certificates delivered to students; role of support measures from school to workplace; cooperation between services and professionals; and finally, role and limitation of legal measures against discrimination.

Appendix

Statistics concerning SEN population

	Total Disabled Population *	Number of pupils – compulsory education	Number of SEN pupils – compulsory education **	% of SEN pupils compulsory education
Austria	2 128 000	848 735	25 770	3
Belgium (NL)	200 000	886 898	38 255	4,3
Belgium (F)		829 391	27 255	3,2
Denmark		640 000	80 000	12,5
Finland		581 900	103 892	17,8
France	1 800 000 – 3 200 000	7 724 033	257 423	3,3
Germany	6 621 157	9 399 127	405 945	4,3
Greece		1 022 996	12 906	1,2
Iceland		42 318	6 348	15
Ireland	374 400	531 845	15 200	2,8
Italy		4 304 119	94 130	2,1
Luxembourg		57 708	1 200	2
Netherlands	500 000	2 056 000	117 943	4,9
Norway	839 344	478 500	31 000	6,5
Portugal	985 893	1 300 000	75 991	5,8
Spain		6 805 322	113 338	1,7
Sweden	1 200 000	1 014 823	22 084	2,1
U Kingdom	5 900 000	10 245 548	256 139	2,5
				20
TOTAL		48 769 263		

Source: Eurydice/Eurybase 1999
European Agency (1998, 1999)

*   Estimated figures for most of the countries. According to 1999 Employment Report, we can say that 17 % of the total population is disabled. From those 50 % are around 50 to 64 years of age.

**   Data mainly refer to 1997/98 school year

10. Occupational and/or personal independence – the role and significance of sheltered employment in the emancipation process

Gérard Zribi (³¹)

We are concerned here with how far sheltered employment is worthwhile and even legitimate. Does sheltered employment offer people protection from idleness and from an environment that may reject them or be violent and unsettling? Are we protecting our traditional system of values, according to which work is regarded as a necessary aspect of normality, dignity and indeed humanity?

Is sheltered employment a new form of social alienation, a jungle in which employees are deprived of social rights and segregated from the normal working environment? Or is it a valid social and ethical decision to spend public funds providing jobs for disabled people of working age who are capable of working, within a working environment that offers nothing to the physically and mentally able?

Is only normal work worthy of interest, the sole valid indicator of social integration and quality of life, and does it confer a status that sheltered employment does not?

10.1. Preliminary assumptions

10.1.1. The importance of work

To a detached observer, defending the idea of providing jobs for mentally and psychologically disabled people would seem socially absurd at a time when jobs are harder to come by and conditions of employment have greatly deteriorated.

On the other hand, social position is still largely a matter of the type of job one does and, despite growing unemployment, work remains the social norm. It is the economic factor that governs social status.

This fact obviously affects disabled people, whose inclusion in the world of work makes for greater self-esteem and a more positive social outlook. For others it is of little significance except as a means of reassuring families and social workers that a situation of normality has been established.

(³¹) Director General of AFASER . Chairman of ANDICAT

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Work is, after all, of central importance, not only as a source of income but also as a key to social acceptance and a means of personal growth and development for those who are able and willing to work.

It is worth mentioning that the action taken in the Netherlands a few years ago in excluding 90 000 people from work on the grounds of actual or alleged physical or mental incapacity, has in the view of many experts become a sort of social nightmare.

The right to a job, whether or not wholly or partly assisted or sheltered, remains a fundamental human right.

Being employed means being part of an organised relational network of colleagues, customers and others. Being without employment undermines and weakens an individual's ties with the rest of the community. The effect is even more severe when people have disabilities that render them more vulnerable than others to the dangers of solitude and exclusion.

Not having a job has a marginalising effect. It gives one a feeling of uselessness and non-involvement in a society unable to think otherwise than in terms of full employment. According to a number of surveys conducted by the *Fondation pour l'étude des systèmes en Europe* on the evolution of social values in Europe between 1981 and 1990, the results of which were published in *Le Monde* on 8 January 1997, work remains the factor essential to personal identity and social integration.

Work as a value ranks second to family in most European countries, including France. An additional, not incompatible finding of other studies emanating from various unions is the desire to be able to arrange one's working hours to suit oneself and to reduce working time.

The economic crisis of unemployment thus leads almost automatically to a crisis in the social lives of people of working age. This is true also for people who are disabled.

10.1.2. The false antithesis between normal work and sheltered employment

The evolution of a social policy that takes more account of personal situations has given rise to a variety of graded and reversible responses within an expanding continuum, ranging from the traditional institution, through semi-sheltered solutions to a normal working environment.

The current controversy over integration, which is generally implemented uniformly, and the sheltered environment, which is seen as segregated, is reduced to a kind of all or nothing, but this fails to take account of the great care with which institutions have been developing, the economic environment and the particular characteristics of the disabled, or indeed the (many and varied) ways in which people may belong to a group or society – which apply also outside the world of disability.

10.2. A complex and unwelcoming economic environment

This might be described briefly as follows:

(a) a wealthy society, so far as most European countries are concerned, driven by competition, the global market and new technology;

(b) a society whose economic and social functioning is difficult to apprehend;

(c) a job market that eludes traditional methods of analysis;

(d) a relatively high level of unemployment in most European countries;

(e) a disrupted social fabric with social groupings living in the same country but on different planets and exclusion no longer a marginal phenomenon.

The employment situation in all European countries is marked by a permanent shortage of jobs and deteriorating conditions of employment.

The situation, of course, varies with the sector of activity. Thus jobs in commerce and services such as fast food restaurants, office cleaning or environmental improvement, are expanding, whereas jobs in industry are on the decline due to factors such as growing automation, international competition and so on.

However, I should add that the service sector, which has adopted very demanding forms of organisation not unlike those in industry, no longer offers people with a physical or mental disability the same genuine job opportunities as it did a few years ago.

The very marked increase in the qualifications, skills and behavioural and inter-personal abilities that service enterprises such as cafeterias, cafés, and cleaning and gardening services now demand of their employees poses obstacles to the integration of mentally disabled people in an ordinary environment, even though this is a sector in which jobs are being created. Direct recruitment of mentally disabled workers by companies, government agencies and public-sector bodies that have to cope with tight budgets will probably remain very low for some years to come.

It is therefore not very productive either in theory or in practice to base one's thinking on the situation as it was in the 1960s, when voluntary associations and training centres prepared people for work and companies employed them.

This is borne out by recent figures showing that while the economic revival will create jobs, these will not benefit the hard core of the unemployed made up of the disadvantaged and the disabled.

It is also important to bear in mind the attitude of many mentally or psychologically disabled people towards normal work. Very often those who have undergone long periods in hospitals or other institutions or who have spent several years in sheltered employment have not been given the training necessary to prepare them gradually for normal work. Moreover, mental

disability or psychological disturbance considerably inhibits a person's ability to settle into a normal working environment.

As a result, people are apprehensive and even afraid of becoming part of an ordinary working environment. A sense of insecurity – both psychological and physical – and the need for psycho-social support tend to deter the more suitable mentally and psychologically disabled people working in sheltered environments from embarking on the difficult road to integration, while their own hesitation is made worse by the anxiety displayed by their families.

10.3. Need for a second, variegated employment market

If we wish to allow people their right to work, the arguments set out above suggest the need for a number of specific (parallel, linked, intersecting and additional) measures to support the normal working environment.

These measures have gradually been put in place thanks to wider legislative provision permitting funds to be made available to promote training and integration in a normal environment. They include workplace accessibility, periods of paid training, employment premiums, wage subsidies and the like, as well as the creation of sheltered workshops.

Environmental and wage-related incentives, a policy of positive discrimination – providing for a quota of disabled workers for example – and the establishment of sheltered workshops will in almost all European countries lead to the creation of a number of jobs that are to some extent subsidised and are situated either wholly or partly within, or completely outside, the ordinary working environment.

Sheltered workshops for the disabled fall into the category of special forms of employment in which social and economic factors have varying importance. At one extreme are jobs in normal companies under their direct management that are 'assisted' by means of a state-subsidised wage. In this case the social element is less prominent. At the other extreme are jobs in a sheltered environment rooted more in a philosophy of social concern than in economic considerations, which are thus a means and not an end in themselves.

I should add that the concept of a sheltered working environment has in recent years become very diversified in many European countries. Thus one finds:

(a) genuine integration in sectors of economic activity;

(b) work previously confined to small and unimportant tasks which has now been extended to cover a variety of activities offering effective training that are genuinely useful – in laundries, cafeterias, hotels, tourism, gardening, care for the environment, etc.;

(c) a growing variety of traditional jobs performed in special workshops as well as an increase in work carried out individually or collectively in a normal environment.

However, sheltered employment will only properly fulfil its role if:

(a) sheltered workshops and the like offer a genuine opportunity for social intercourse;

(b) they offer different types of employment ranging from jobs in traditional sheltered workshops to simpler jobs performed in a normal working environment – what is referred to in French as semi-sheltered or assisted employment;

(c) they serve as bases from which to develop alternative solutions and activities aimed at integration without, however, disparaging the efforts of those disabled workers who would not be able to perform a normal job of work.

10.4. Ways and means of achieving improvements

A number of approaches should be used in conjunction with the sheltered working environment:

(a) developing forms of training, support and retraining to be used in a context of either temporary or long-term accommodation for groups who are in some ways similar but have different needs;

(b) increasing the variety of types of work, whether sheltered or semi-sheltered. This would have the dual advantage of encouraging both more individualised careers, whether in sheltered or non-sheltered employment, and integration, while allowing for companies' organisational development.

(c) focusing training activities and sheltered employment primarily on the service sector, as both a plentiful source of jobs and an effective environment for acquiring social and behavioural skills and hence for social adjustment;

(d) acting as a centre for observing, assessing and assisting social and work integration in a normal environment;

(e) creating sheltered and semi-sheltered employment customised in terms of working hours to take account of different abilities and needs, as well as adjustment to the work culture of the population as a whole: part-time, full-time and with suitably adapted holiday periods;

(f) whenever possible taking the initiative in order directly to create jobs for their most productive disabled employees, using the assistance provided for companies when they recruit disabled people by the Ministry of Labour and AGEFIPH (wage subsidies, job structuring, training, mentoring, etc.);

Various experiments in France and other European countries, particularly Germany with its social enterprises and Italy with its type B cooperatives, are particularly encouraging. It is also important to create the right social attitudes that will favour this type of approach.

(g) increased networking and partnerships in the social, economic and health spheres;

(h) finally, defining a new legal status more in line with performing a job of work now appears urgently necessary. Marc Dupont, writing in *Éducation ouvrière* published by the

International Labour Organization, says that 'the refusal in certain sheltered working structures to allow workers freedom of association, the right to collective negotiation and a contract of employment' is not justifiable. It is time, he points out, 'that these matters were addressed in order not to permit the continuing existence of such "no-go areas" in employment and to seek appropriate solutions'.

In conclusion, workshops for the disabled, like any other form of employment, are essential drivers of social integration for those who are psychologically and physically able to work.

They are one of the responses in the employment field which must at last be accepted and exploited so as to avoid a far from negligible number of disabled people being excluded from an active social role because of society's fundamentalist attitude to integration.

Positive discrimination, specific action, or a mixture of social and employment policy measures do not run counter to a policy of integration. On the contrary, they endow it with a human value that recognises the right of all to be themselves.

In one of its recent publications the International Labour Organization accepts the usefulness of a sheltered environment with the proviso that general employment law should be extended to cover disabled people. Thanks to its genuine economic function, sheltered employment offers mentally disabled people one of the few, perhaps the only, opportunity of taking part in economic life.

Sheltered workshops may be regarded as belonging to what various authors have dubbed the fourth sector of the economy, that is to say the economy of the individual, an economy which recognises the production, the health, the relationships, the personal abilities and the contribution to the economy and to society of every individual.

They therefore represent a modern, optimistic response to new social problems.

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11. The normal environment as a training ground and indicator of personal potential for disabled workers and their trainers

Yvonne Schaeffer

Integrating disabled people into a working environment and society at large has always been a principal concern of ADAPEI – an association of parents of mentally disabled people in the *département* of Bas-Rhin.

In 1980 it devised a project that was considered daring. At the time it was running an establishment that combined housing and workshops for 75 disabled people on a single site remote from any other dwellings.

We realised that this had the effect of:

(a) emphasising disabled people's status as 'dependent' and making it permanent;

(b) creating a well-protected microsociety whose members were segregated from the world at large, thus avoiding the need for them to face up to the realities of daily life;

(c) engendering a feeling of rejection and acceptance of failure leading to indifference, to the point that it was sometimes difficult to convince them of the existence of an inner drive of which they were the masters.

Without attempting to conceal or ignore the real and often substantial shortcomings of disabled people, we put our faith in their ability to live differently.

The first step in a radical change was to make a clear distinction between work and private life.

We opened four hostels in succession, each housing between 12 and 15 people, in order to immerse the disabled people in a normal environment.

No selection process was involved. All our clients were included and took part in the project, and so far we have had no setbacks.

When our clients were confronted with the realities of everyday life this made demands on the personal potential that hitherto they had not been able or allowed to show. The firm control exercised over them by those close to them, including professional social workers, was relaxed, enabling them gradually to play a part in running their own lives.

The new arrangement departed from the traditional situation of 75 people gathered together in institutionally equipped and furnished premises, and subjected to a way of life that left little room for individuality, by allowing differences to be revealed and those concerned to emerge as people in their own right.

The first difference was the distinction made between working and private life. For example, in one case a group of ten or so workers were not only housed in a normal environment but were also seconded temporarily to work in a factory, so that they were removed completely from the institutional environment on which they had previously been totally dependent.

Another difference lay in the arrangement and furnishing of their living accommodation, so that they gave it character, and in the way they travelled to work – group pick-up, bus, train, motorcycle and even car. Some people even successfully passed their driving test.

The third difference concerned the organisation of the various hostels, which are run on a budget covering cost of food, travel and leisure activities.

When the original establishment was replaced by the hostels, it had a staff of care workers who had been employed there for several years, some from the beginning of its existence, and who had grown accustomed to the routines, customs, timetables and rules of a large institution, which left little scope for initiative and personal responsibility. Creating real-life accommodation put them and their clients in a very different situation. Suddenly they were alone with their clients and responsible for timetables, organisation and management.

They were forced to familiarise themselves with a new living space and a new way of looking at things. They had to learn to work in a non-institutional context and to use the resources that their environment offered, while sharing the task of making choices and decisions with their clients.

The staff were provided with outside assistance for as long as each team required. A trainer attended their weekly meetings, the purpose of which was to help everyone to realise the need to question established practices, to revise their attitude to disabled people, to hold back from taking decisions for clients, and instead of taking charge, to allow them to take responsibility for themselves and do everything of which they were capable.

Both the staff and their clients learnt to live in 'the real world'.

11.1. Guardians became trainers

The thousand and one situations in daily life with which clients were confronted served as the material for continuing daily training that obliged the staff to abandon the previous way of running things based on orders.

This type of training is rarely called for in an institutional environment in which everything is foreseen and provided for. If it is attempted it suffers from artificiality because of the lack of practical application and very quickly becomes boring for both parties.

After a few years the workshop supervisors also began to realise that they had a training role and instead of simply treating clients as a means of production began to treat production as a means of training. This represented a veritable cultural revolution within the sheltered workshop.

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The staff realised that they, too, needed training in such subjects as:

(a) considering their clients' status as disabled workers and their consequent rights;

(b) the financial resources of disabled workers;

(c) the protection afforded them by the law;

(d) the hostel's financial management;

(e) holidays, leisure time, sport and cultural activities;

(f) public services;

(g) exploring the environment and its resources;

(h) clients' personal relationships and sex lives.

The enthusiasm shown by the staff for the project as soon as plans became known, the way in which they cooperated in its preparation and their willingness to adopt a different way of working enabled a great many difficulties to be successfully overcome, opened the way for innovations and enabled our clients to make progress well beyond what we had hoped for at the outset.

11.2. Training disabled people

The move to a normal environment gave clients a necessary and salutary shock that drove them to make spectacular progress and display their keenness to learn.

The trainers were the driving force behind the project through the constant support they gave their clients. They also made use of resources available to them locally, such as social workers and other public services, doctors, leading figures in sport and cultural organisations, politicians, and members of the clergy who came together with clients to discuss subjects of concern to them.

Training organisations were also involved in a course centring on citizenship, for which the programme was drawn up by the clients themselves.

11.3. Learning to speak out

'Nothing for us without us' is now our clients' slogan.

The choice of new living accommodation, the arrangement of living quarters and the way life was organised in the new environment, and the holding of regular meetings for genuinely shared decision-making all had the effect of encouraging clients to speak out in their doings with trainers, families and any outsiders involved.

11.4. Informing clients of their employment rights

11.4.1. Financial resources

Informing clients of the source and amount of their financial resources, organising the way in which these were made available and helping them to use them created a framework allowing a degree of freedom that contributed to clients' personal development. The aim was to make both clients and their families fully aware of the fact that progress to independence was bound up with availability of material resources.

11.4.2. Holidays

It is important that clients make the connection between the work they do in the workshop and their entitlement to holidays. It is up to each individual how he or she uses these holiday periods – whether to spend time with their family, to take part in a holiday organised by an outside organisation or by a member of the staff, or simply to spend time at home.

11.4.3. Contacts with the outside world

Accepting that one is different and learning to live with other people despite the differences, and observing social customs and rules that apply to all have enabled our clients to talk about their disabilities and to regulate their behaviour. We have observed a marked decrease in the number of crises, cases of verbal aggression, and need for medical treatment, while their physical appearance has improved considerably because of the attention paid to bodycare.

The first contacts with the outside world were planned as an introduction to all kinds of services – shops, banks, doctors, chemists, transport and so on. The fact that these facilities were all close by encouraged our clients to make generous use of them.

Gradually relationships were built up with neighbours. Taking part in bazaars and other charity events such as the *Téléthon*, and becoming blood donors, brought them into contact with others and enabled them gradually to become integrated into local society.

11.4.4. Organising one's own life

Daily tasks such as maintaining and cleaning the house, doing the washing, choosing menus and preparing meals. going shopping, and using domestic appliances have now become a regular part of clients' activities and figure in their timetables.

A weekly meeting helps them to develop their ability to express themselves in a group, to listen to others and to negotiate.

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Meetings are used to provide an opportunity for involvement by receiving information, helping to formulate the rules for group living, and taking decisions concerning the organisation of daily life and everything to do with the hostel's management.

11.4.5. The risks

The risk aspect was that most feared by the disabled people's families when the project was first made known. We were able to convince them of our intention not to put our clients in situations they would be unable to cope with. Risk is, in fact, a part of life, even though the risks have to be adapted to the individuals concerned. It is when disabled people are permitted to function in an environment of maximum freedom – exercising due caution, of course – that they are most likely to achieve their personal victories.

Thus some people living in our hostels are allowed to go into town on their own, whilst others do so in small groups of two or three. Others, again, need to be accompanied by a staff member. Some people have achieved a level of independence enabling them to return to their family home on their own or using public transport.

11.4.6. Growing mobility

The wide variety of living environments now makes for mobility. A hostel location is no longer the final place of residence and we can, if necessary, terminate a lease and instal our people elsewhere.

Some clients, moreover, have expressed a wish to live alone or with one other person, which can be made possible thanks to the creation of support facilities.

In a film we made recounting this adventure our clients said that 'Now I exist more than before'.

The need for social integration will in a few years' time lead on to the vast Heracles project. This is focused on occupational integration and will complement the work done at the social level, resulting in a large number of clients abandoning cumbersome institutional structures because support facilities will prove adequate.

12. How does a trainer working with the mentally disabled differ from any other teacher or trainer?

Hans-Jürgen Pitsch [32]

12.1. Target group

Before we start talking about the teachers and trainers of the mentally disabled, we should first of all agree on which group of the mentally disabled we mean. We are not talking about people with profound mental disabilities who, as a rule, cannot be trained to the level of doing a job, and we are also not talking about the group with mild mental disabilities who, in Germany for instance, are grouped with the so-called slow learners. If we base our discussion on the classification of the American Association on Mental Deficiency (AAMD), then what we are discussing today are the two groups with moderate and severe mental disabilities who are shown in the shaded section of Table 1.

Table 1:   AAMD classification according to IQ values

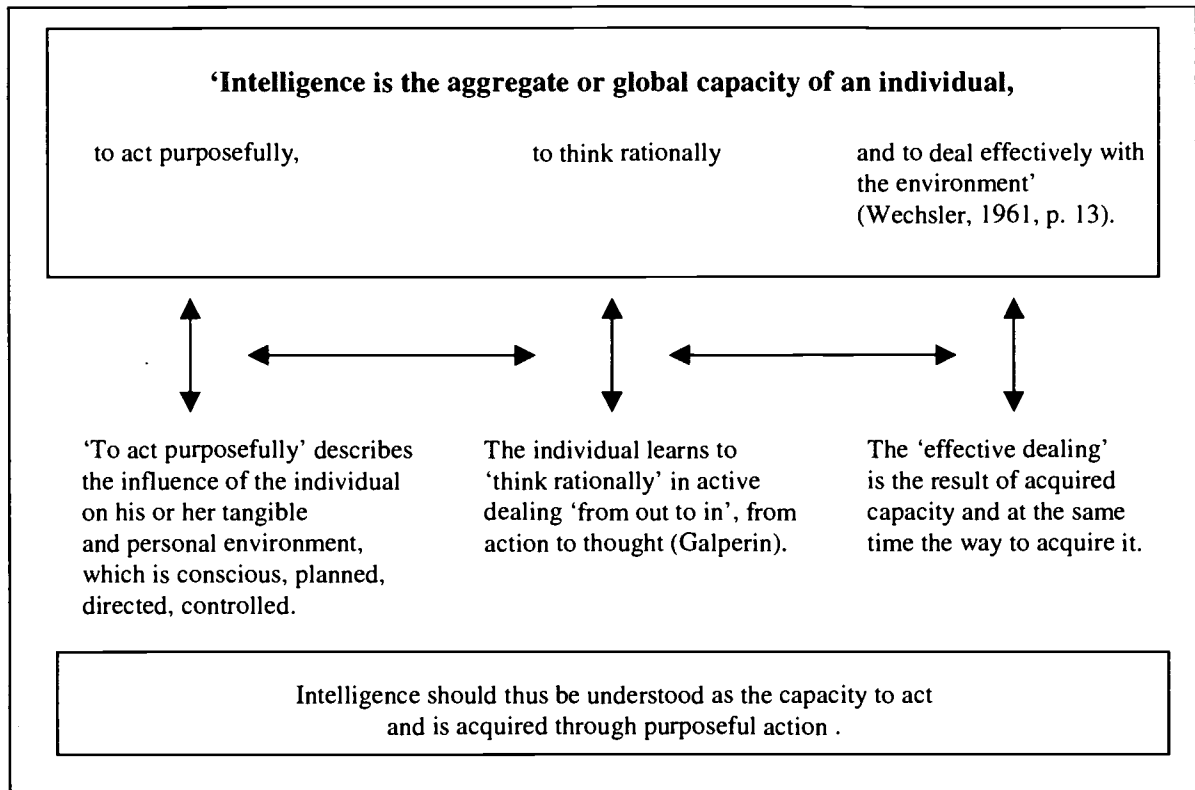| Levels of mental disability	Standard deviations	Theoretical IQ	Stanford-Binet IQ
Borderline	- 1 to - 2	70 - 85	
Mild	- 2 to - 3	55 - 70	67 - 52
Moderate	- 3 to - 4	40 - 55	51 - 36
Severe	- 4 to - 5	25 - 40	35 - 20
Profound	- 5 and below	< 25	< 20

Source: SPECK 1993, 49; additions by H.J.P

12.2. Ability to act

Even though this classification by the AAMD uses the very controversial criterion of intelligence, this intelligence criterion can help us to reach a rough understanding of the

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groups in question here. In this context, we may recall David Wechsler's proposal on the definition of the term 'intelligence':

Figure 1: *Intelligence and action (based on Wechsler, 1961, p. 13)*

'Intelligence is the aggregate or global capacity of an individual,

to act purposefully,	to think rationally	and to deal effectively with the environment' (Wechsler, 1961, p. 13).

'To act purposefully' describes the influence of the individual on his or her tangible and personal environment, which is conscious, planned, directed, controlled.	The individual learns to 'think rationally' in active dealing 'from out to in', from action to thought (Galperin).	The 'effective dealing' is the result of acquired capacity and at the same time the way to acquire it.

Intelligence should thus be understood as the capacity to act and is acquired through purposeful action .

The ability to act purposefully implies a set goal, planning of the means to achieve this goal, monitoring of the process and the outcome. The impact of the individual on his or her tangible and personal environment is conscious, planned, directed and controlled, in other words it is an act. According to Piaget, the individual learns reasoning processes in dealing effectively with the environment through accommodation and assimilation. In Piaget's opinion, 'schemas', or structures of thought and action, are acquired and applied through the processes of accommodation and assimilation. Thus. Wechsler's 'dealing effectively with the environment' (1961, p. 13) is both the path to action/thought assimilation and the outcome. Wechsler's 'intelligence' is none other than the ability to act and is acquired by purposeful action. 'Intelligence' as a process characteristic can thus, as Seidel and Ulmann (1978) suggest, be equated with the 'ability to assimilate'.

12.3. Control of action

From the perspective of the psychology of work, Winfried Hacker (1986) distinguishes three levels at which the actions of human beings can be controlled:

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(a) the highest level, the intellectual level of control, at which plans, complex actions and longer-term strategies are conceived, reviewed and modified;

(b) the intermediate level, the perceptive-conceptual level of control, at which simple actions are adapted flexibly to changing situations;

(c) the lowest level, the sensory-motor level of control, which is characterised by the fact that relatively uniform demands are met with automated action processes or operations.

The mentally disabled generally act at the level of perceptual-conceptual control. They:

(a) process signals containing information;

(b) can assign their perceptions and ideas to acquired concepts;

(c) and thus react to verbal communication;

(d) have general action schemas at hand;

(e) which they can distinguish in terms of individual situations;

(f) can acquire basic forms of action;

(g) which they can put together into simple actions;

(h) and construct their action plans according to what they are capable of doing.

Furthermore, like people with severe mentally disabilities, they may act at the level of sensory-motor control. At this level of action:

(a) sensory-motor skills are important;

(b) these can be taught through training;

(c) repeated stereotype sequences can be mastered;

(d) these are composed of individually designed movements and sub-programmes;

(e) they are based on observed movements and sequences of movement; and

(f) their success can be measured through stereotypical test programmes which can also be acquired through training.

12.4. Implications of the control of action

Teachers and trainers must see to it that the signals from the environment which a mentally disabled person has to receive and process have some significance for that person and an individual meaning. Teachers and trainers must therefore shape the environment of the mentally disabled in such a way that the meaningful signals are clearly perceptible and are not obscured by a multitude of meaningless signals. This means that, for teachers and trainers, the task of shaping an appropriate environment for the mentally disabled is as important as the task of directly leading or guiding them (on this see Pfeffer, 1984).

The mentally disabled must be able to associate perceptions with concepts in order to process them and react to them. Teachers and trainers must, together with the mentally disabled, turn these concepts into conscious actions which are derived from a need and lead to a goal (cf. Probst, 1981). The formulation of these concepts must be directly connected with spoken language (cf. Galperin, 1972), so that the activity can gradually become the substance of thought via the medium of language. Only if this process is successful is it possible for the mentally disabled person to react to verbal communication and follow verbal instructions.

In those cases where communication through spoken language remains problematic, it is possible to use models, pictures, drawings and pictograms. But such aids are seldom ready-made or readily available, which means that teachers and trainers have to produce many simple and easily understandable drawings themselves. A drawing course would be of greater importance in the training of teachers for the mentally disabled than some of the theoretical instruction that they now receive.

When concepts are acquired in the form of conscious action, the sequence of the activity is also taught at the same time. Teachers and trainers must analyse this activity in precise detail beforehand and determine which unit of movement (an operation in Leontjew's definition) has to precede which other, which unit has to follow the other, and how these individual operations can be assembled to form a closed sequence of actions. This means that teachers and trainers has to have distinctive analytical and synthesising skills.

If the mentally disabled are to absorb such sequences of actions, they need clear and distinct action models which they can copy and which should be shown to them step by step. What is even better than making the mentally disabled copy movements, is directly to steer their physical movements (cf. Ackermann, 2001; Affolter, 1990). This speaker believes that this method of directly steering physical movements is the best way of imparting action schemas to persons with mental disabilities. Teachers and trainers should not be reluctant to touch disabled people, to take their hands and move them; they should not feel distaste for the disabled. Anyone who is afraid of physical contact is not suited for this work.

In some circumstances, such guided action sequences have to be repeated many times, until the mentally disabled person has learned them and can perform them on his or her own. Numerous repetitions require a great deal of patience. Quick success cannot be expected. This means that the teacher or trainer of the mentally disabled has to be an extremely patient person who does not expect quick success and who is also able to discern tiny steps of progress and to encourage them – for instance, through praise.

Basically, praise is immensely important for people who seldom experience much success in their activities. Success, in this case, can result from a small effort, or a small improvement in movement, or the transition from one operation to the next. The teacher or trainer of the mentally disabled must have the faculty of noticing the smallest or tiniest change and encouraging it, in other words, he or she must be able to observe small developments with a great deal of sensitivity.

12.5. Learning characteristics of the mentally disabled

The mentally disabled learn less through listening, writing down, reading and understanding than through watching and imitating, or having their movements physically guided by the teacher or trainer or steered through demonstration. The German Conference of Ministers of Education and Culture (KMK) describes the learning process of the mentally disabled (1998) as follows, stating that it is characterised by:

(a) orientation to situations and factors which are important for the individual;

(b) diminished ability independently to divide a task into its component parts;

(c) diminished ability to plan more complex actions;

(d) little independence in executing actions;

(e) slower speed of learning;

(f) less staying power,

(g) difficult memory retention, and also

(h) difficult memory recall;

(i) greater difficulty in communicating because of problems of hearing, understanding and formulating language and gestures;

(j) difficulties in adapting quickly to changed requirements;

(k) low level of creativity, and in association with this

(l) the tendency to take on patterns of action observed in others;

(m) personal insecurity and lack of ability to assert oneself;

(n) lack of evident self-control;

(o) unreasonable assessment of their own abilities

(p) and low level of self-confidence.

All these characteristics have an influence on how teachers and trainers should approach the mentally disabled.

12.6. Implications of the learning characteristics of the mentally disabled

Teachers and trainers need to be aware of the factors and situations which are or may become subjectively important to mentally disabled people. They must therefore know the mentally disabled person well, observe him or her in various situations and over a long period of time, and then deduce his or her interests and motives from these observations. Précise observation can be learned.

Observation will also show teachers and trainers that the mentally disabled find it difficult or impossible on their own to break down complex tasks into their component parts. This sub-division has to be done by teachers and trainers, which means that they also need to have analytical skills. Methods of analysing work procedures can also be learned.

However, it should be kept in mind that it is not enough for the mentally disabled just to grasp the single components of a task. These alone seldom provide motivation for action. The mentally disabled must at the very least be able to imagine the final result so that they know what their work is leading to. It is also helpful for the mentally disabled always to have the single steps leading to their goal in front of them. Teachers and trainers can offer guidance by, for instance, providing a sequence of photographs or drawings which clearly show which work steps have already been completed, which step a mentally disabled person is working on at the moment, and which steps will be needed to continue the work. Flow charts with diagrams can be used to make the interrelation of the different steps clear to the mentally disabled (cf. Pitsch, 1999, Chapter 18, pp. 371-381). Teachers and trainers must be able to produce these sequences of pictures or flow charts with diagrams themselves.

If such a sequence of pictures of the task to be done is kept in front of mentally disabled, they will also have a ready-made work plan which they cannot produce themselves because of their lack of analytical ability. Mentally disabled people need such external action plans for more comprehensive tasks. The performance of a single motor-related task can also be done by following an internal work plan which is stored as an algorithm in the motor memory. Such algorithms or clear, simple instructions for action, have to be taught by the teacher or trainer through constant and patient exercise in the course of which mistakes should be corrected immediately. This means that, in addition to precise observation, patience is also required – an infinite amount of patience.

Even if mentally disabled people are able to read a pictorial plan of action, and even if they can perform the individual steps as motor-related algorithms, they will still falter now and then, will not know how to continue, and will give up. The teacher or trainer must then keep providing encouragement and motivation, explaining what to do, or pointing to the next step in the diagram. The mentally disabled person's lack of autonomy is transformed into the need for guiding action on the part of the teacher or trainer.

Even when teachers and trainers give detailed individual instructions for simple tasks, they should not expect these to be carried out immediately and quickly. People with Downs syndrome in particular are sometimes very slow in their reactions (cf. Jantzen, 1998), and this can sometimes be interpreted too hastily as refusal or resistance. Teachers and trainers must learn to wait for such delayed reactions, they must be prepared to take enough time themselves and give the mentally disabled person enough time to perform the task.

If people need a large amount of time for a task, they cannot accomplish as much work in the same time as the non-disabled . Teachers and trainers should adjust to this reduced amount of work and also remember that the mentally disabled have less stamina than they themselves have. Sometimes a break has to be taken after just ten minutes of effort. Teachers and trainers

of the mentally disabled have to include these necessary breaks in their work plans right from the beginning. They should not take their own capacity as the standard.

Just as manual tasks are accomplished slowly, and are interrupted by many breaks, the process of learning also follows the same pattern in the case of mentally disabled people. Learning too can only proceed in small steps, with many breaks and repetitions and exercises. In the learning process too, small mistakes should be corrected at once and even the tiniest success should be praised and emphasised immediately. Teachers and trainers of the mentally disabled need a vast repertoire of words and gestures of praise.

What the mentally disabled learn is not always easily stored in their memories. Teachers and trainers also have to help them in various ways to build up their memories. Teachers and trainers can use the following methods:

(a) use several sensory perceptions at the same time: simultaneously see, touch and move something;

(b) accompany the activity with words;

(c) show the activity in pictures;

(d) express these pictures in words even if these are simple names or keywords. A sequence of verbal names can also be stored in the memory and used later for the planned activity.

If, with these aids, learning content has been anchored in the memory of the mentally disabled person, the same aids can be used to retrieve this learning content from the memory, and to make the person aware of it so that it can then serve to guide an action.

Models, pictures and drawings are more suitable aids than the spoken word to reinforce the storage of learning in the memory and to retrieve it later for a certain action or for work, as mentally disabled people have considerable problems with speech. For teachers and trainers this means that:

(a) they must speak clearly and distinctly;

(b) they must use straightforward or explicit terms and give each object just one name;

(c) the sentences that they make must be short and concise and not long and complicated;

(d) they must, as far as possible, speak in the indicative and avoid the subjunctive;

(e) they must use concrete and not abstract terms;

(f) they must add gestures to stress what they say; and

(g) they must teach the mentally disabled to use gestures to explain themselves.

Just as complex and complicated tasks and complex language are difficult for mentally disabled people, all complex and not clearly comprehensible situations also create problems for them. They have learned to do something in a certain way in a certain situation. If the situation changes, the algorithms they have learned will no longer function. In a changed

situation, what has been grasped earlier may sometimes have to be learned again. Such re-learning under changed conditions will be easier and faster than the first learning process, but the teacher or trainer has to keep this in mind and plan it ahead. Once again, this means that the teacher or trainer has to analyse situations very carefully, identify changes and react accordingly.

The diminished capacity of mentally disabled people to adapt flexibly to new situations is closely associated with their difficulty in retrieving the single skills they have learned from their memories and in re-combining them for a specific new situation. This re-combining requires imagination, a flexible mode of thinking and projection into the future, something we call 'creativity'. Teachers and trainers should not take this creativity for granted in the case of the mentally disabled, but must teach it each time. This can be done in the form of a game, or a testing of new actions in 'experimental' situations, but without the pressure of having to achieve a goal or manufacture a product.

This semi-experimental testing of creativity can also, under favourable conditions, counteract the inclination of mentally disabled people simply to copy all the patterns of behaviour that they have observed in other people. But it is precisely this ability to imitate the behaviour of others which is a good way of learning. Teachers and trainers can offer the mentally disabled important models for action by acting themselves in a clear and unambiguous manner, by doing things slowly so that they can be observed, and by always accompanying their actions with clear and dependable verbal explanations. It is also important that they should always do the same thing in the same situation, not act once in one way and another time in a different way, that is, their actions must always remain constant over time.

In order to demonstrate this model behaviour, teachers and trainers will sometimes have to overcome their own resistance and exercise their will. If they clearly show their own difficulties and how they are overcoming them, if they explain this in words, they become a model for the assertion of will, a model which will benefit mentally disabled people, who are characterised by a lack of capacity to assert themselves. They too have to learn to overcome uncertainties and difficulties, to activate their wills and to assert themselves.

When mentally disabled people try to assert themselves, their actions are often aggressive and inconsiderate, oriented towards their own aims but not towards the needs and interests of others. It is up to teachers and trainers to build up balanced control, primarily through example but also by giving everyone in the group the opportunity of expressing their needs and interests and coordinating them. For this the most suitable method is situations in which the aim is not to manufacture a product but to plan an emotionally pleasant event; role-playing and simulation games are also suitable, which means that teachers and trainers have to know how to handle them. Even with all this, they will still find it necessary to intervene from outside to direct the behaviour of the mentally disabled.

The low level of self-control goes hand in hand with an impaired ability to estimate their own abilities. Some mentally disabled people think that they can do everything, and others feel that they can do nothing at all. It is up to teachers and trainers to teach them to arrive at a

reasonable assessment of their own abilities. To achieve this they must grade tasks in such a way that:

(a) these can sometimes be accomplished easily, which will build up self-confidence;

(b) at other times they can only be mastered with effort, which will clearly demonstrate the limitations of each individual's potential.

If the teacher or trainer succeeds, in one way or another, in making mentally disabled people aware of what they are able to accomplish, this will create confidence in their own abilities. But I also think it is as important for them to realise the limits of their abilities, and especially to be aware of situations in which they should not get involved. This means that the necessary self-confidence is founded on self-assurance, on the certainty of what they are able to achieve, but also on caution which tells them what they should not let themselves into. Building up this kind of self-confidence is fraught with conflict. Teachers and trainers should not only be unafraid of such conflicts, they must also be able to cope with them and handle them with great competence.

12.7. Non-disabled people's perceptions of the mentally disabled

The work of teachers and trainers of the mentally disabled will be heavily influenced by their perception of these persons, by the attitudes emerging from this perception, and whether and how they are able to change unsuitable attitudes. These phenomena have up to now – at least in the German-speaking regions – only been examined from the standpoint of prejudice in the general population, but not from the angle of the attitudes created in teachers and trainers. Surveys conducted by the author on the first impressions gained by students from Luxembourg and by trainees and youngsters doing one year of social work instead of military service in Germany, in their contacts with mentally disabled persons, resulted in the following preliminary findings (cf. Pitsch, 1996, pp. 1-7).

In their initial contacts with the mentally disabled what struck them most was:

(a) their use of stereotyped language,

(b) deficiencies in spoken language,

(c) lack of social restraint,

(d) aggression vis-à-vis persons and objects,

(e) motor-related stereotypes,

(f) limited understanding of the spoken word,

(g) limited understanding of facts and circumstances,

(h) limited ability to think.

Their reactions to this unusual behaviour were described by the young people as follows:

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(a) apprehension,

(b) a feeling of revulsion,

(c) fear,

(d) uncertainty and awkwardness,

(e) a spontaneous and unconsidered wish to help,

(f) the wish to look after them and take care of them.

12.8. Implications of the perceptions of the mentally disabled

The reactions of the non-disabled described above can be dangerous for mentally disabled people if they become rigid and unchanging and influence the actions of non-disabled persons such as teachers and trainers. Teachers and trainers of the mentally disabled can consciously avoid these dangers if they build up their attitudes in a planned and very deliberate manner.

The necessary attitudes are that:

(a) people with mental disabilities are not 'different' people, not 'strangers' but merely simple human beings like them;

(b) despite their odd behaviour they should be accepted as human beings, just as they are;

(c) their odd and sometimes repellent behaviour makes sense to them and helps them to cope with parts of their lives;

(d) such undesirable patterns of behaviour can gradually be changed;

(e) the fears of the non-disabled are the result of a lack of understanding;

(f) teachers and trainers must learn to understand the mentally disabled by trying to gain an intuitive understanding and putting themselves in their place;

(g) uncertainty in the behaviour of teachers and trainers will disappear when they set long-term teaching goals and pursue them consistently and with patience;

(h) in doing this, teachers and trainers should not be discouraged by setbacks or failures; they must always keep their long-term goals in mind;

(i) in the event of failure or setback, the teacher or trainer should not immediately try to take over the task of the mentally disabled person, nor try to help him or her all the time;

(j) it is more important to show the mentally disabled how they can ask for help on their own;

(k) mentally disabled people become aware of the necessity of asking for help only in those situations which they cannot cope with by themselves;

(l)　however, mentally disabled people have a chance to do this only if they are encouraged to act on their own – over-protection and the constant removal of difficulties prevent insight into their own limitations;

(m)　the knowledge of their own limitations should also be taught in the field of social contacts – however much we non-disabled are attracted (or repelled) by the spontaneous hug, we have to teach the mentally disabled in which situations this is allowed or even desirable and in which it is not;

(n)　until this learning process is completed, we have to put up with the behaviour of the mentally disabled.

12.9.　Summary: demands on teachers and trainers of the mentally disabled

In conclusion, we should like to compile a keyword list of the above-mentioned demands placed on teacher and trainers of the mentally disabled and then see whether there are any differences between these and the demands placed on other teachers and trainers, and if so, which.

We expect teachers and trainers of the mentally disabled:

- to shape the environment with distinct and meaningful signals;
- to teach those concepts (thought schemas) which enable the meanings of signals to be grasped;
- to support and, if necessary, replace the spoken word by models, pictures, drawings and pictograms;
- to teach concepts (thought schemas) in the form of conscious, target-oriented, planned and controlled concrete action;
- to analyse actions and synthesise partial actions;
- to demonstrate clear models of action which can be imitated;
- to give direct physical guidance to the mentally disabled;
- to be willing to keep repeating, and have the patience needed for this;
- to be willing and able to notice even minimal signs of progress and encourage them;
- to have a vast repertoire of ways of expressing praise;
- to be able and willing to undertake differentiated observation;
- to be able to make the disabled aware of goals and connections even in the smallest tasks;
- to be able to visualise;
- to be able to present complete plans for action as algorithms;

- to give constant encouragement/reassurance/motivation;
- to be able to wait and see, and to allow sufficient time;
- to be able to accept breaks in the performance of tasks;
- to be able immediately to notice even the smallest mistakes and to correct them;
- to learn to organise and combine several modes of sensory perception;
- to be able constantly and directly to accompany action with the spoken word;
- to speak clearly and distinctly;
- to use straightforward concrete terms;
- to form short, concise sentences;
- to avoid the subjunctive wherever possible;
- to accompany the spoken word with gestures;
- to be able to re-organise what has already been learned as new learning material if the situation changes;
- to encourage free, playful application of what has already been learned;
- to be consistent and dependable in their own actions;
- to demonstrate examples of resistance, effort and the application of will;
- to teach controlled and directed application of will;
- if necessary, to intervene from outside to guide the behaviour of the disabled person;
- to impart self-assurance and self-confidence;
- to show the limitations of the mentally disabled person's own abilities;
- to accept the mentally disabled as fully valuable human beings;
- to understand odd and undesirable behaviour as being meaningful in subjective terms;
- to build up useful and desirable behaviour;
- to be able to put themselves in the position of the mentally disabled;
- to set clear, unambiguous long-term goals;
- to continue to pursue these goals even in the event of failure or setback;
- to avoid unnecessary assistance;
- to teach the mentally disabled to ask for help themselves;
- to accept momentary periods of strain;
- to keep over-protection and removal of obstacles within limits;
- to teach patterns of behaviour in different situations;
- to put up with things which may be disturbing, unreasonable or undesirable.

Through these expectations we are not really describing the teachers and trainers of mentally disabled people but the teachers and trainers that we would have wished for ourselves, in other words, the 'ideal' teacher. But each one of our teachers only fulfilled this ideal to a certain extent. Are we not asking too much when we expect the teacher or trainer of mentally disabled persons to comply with all these requirements? I know of no person – including myself – who could have fulfilled all these demands. So let us be modest and be satisfied with the most essential requirements. But let us also be pragmatic and give the teachers and trainers of the mentally disabled all the assistance that they need.

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13. Training of trainers in learning disability services – Is learning or disability the issue?

Paul Twynam ([33])

The title of my original presentation to Agora XII in Thessaloniki was 'Training of trainers in learning disability services – is learning or disability the issue?' in this article I will repeat the main points made during that presentation and expand and annotate them. Any reference other published material, mainly research and theoretical work on learning and memory, has been given a footnote that points to an Internet source which will give further information.

Again, I will state my position from the outset: Seeing disability as the issue is the easy option as it is the most obvious aspect of the question. However, I believe that seeing learning as the issue, and this would be true whether we are talking about our organisation's staff or our service users, is more important and yet more difficult.

13.1. Aims

My aims are, firstly, to describe, as background, the types of people who work for The Home Farm Trust who have a training role. Secondly, to list some of the training and qualification routes that may have brought them to that sort of work. You will see that, in The Home Farm Trust at least, there is a great variety of education and training routes. Thirdly, to show what they have in common, and this will highlight the important part; how to put learning into the spotlight and the learner at the centre.

13.2. Types of employee with a training role in the organisation

So, first, a bit of background about the types of service runs by The Home Farm Trust:

Since 1962, The Home Farm Trust has operated its own residential homes, now spread throughout England and, more recently, has also operated a supported living service, supporting people in their own homes. About 550 people are supported in these two types of service.

In addition, The Home Farm Trust also offers a variety of day time activities, both for people who live in The Home Farm Trust's homes and who live elsewhere, either in their own homes, with their families or in residential homes operated by other organisations.

([33]) FCIPD, Training Manager, The Home Farm Trust, Bristol, UK

Thirdly, The Home Farm Trust runs a supported employment project, where job coaches support service users in work and help their co-workers enable the service user to adapt to the working environment. Up to 100 service users have been supported in this way.

Finally, The Home Farm Trust employs four full time staff trainers and brings in outside contractors to run training course for its 1200 staff.

This situation is broadly true of many organisations operating learning disability services in the UK. Some may be run more on medical lines and may, indeed, be run by health authorities. In which case their staff would be largely, if not exclusively, comprised of people qualified as learning disability nurses. Other organisations may provide services both for people with learning disabilities and for people with mental health problems. Consequently, they may employ more people with a mental health nursing background.

13.3. Training and education of trainers in the organisation

Within The Home Farm Trust, the training, education and qualifications of the staff in these different settings has evolved over recent years and the current situation is as follows:

Care workers in residential or supported living services will have received in-house training in care skills, both from The Home Farm Trust and from previous employers in the sector. Since May this year there is a new national framework, the Learning Disability Awards Framework, against which many of these in-house short courses will be mapped. In addition up to half of this group of staff will have a nationally recognised qualification in care, social work or nursing. This may be a qualification they have obtained before joining The Home Farm Trust or afterwards. If the latter, it will be a care, or possibly a social work, qualification but not a nursing one.

Day services workers will often have a similar care background, skills training and qualifications and many, but not all, will have a nationally recognised qualification in adult education. Such a teaching qualification will not necessarily be related specifically to learning disabilities.

Job coaches in supported employment services may or may not have a care background and their training consists of short off-the-job courses provided by The Home Farm Trust but delivered by outside agencies in the commercial or voluntary sector. These will include training of trainers and skill assessment and job profiling courses.

The Home Farm Trust's full-time trainers and external contractors have a wide range of qualifications, including many in common with the others groups mentioned above. The three regional trainers have a background in care and the management of care services. Some also have nationally recognised training or education qualifications at a professional level.

In all these groups there will be individuals with no formal training, education or qualifications. Our selection of staff will have been on their competence to do the job. This, interestingly, is increasingly the basis of assessments for the UK's national qualifications themselves; they are based on the ability to apply what has been learned in the work context.

It should be added that The Home Farm Trust has successfully sought a better-qualified workforce for a number of years. At present The Home Farm Trust's workforce is probably better qualified than many. The UK government has recently established a National Training Organisation for the care sector and its five year strategy (2001-05) makes it clear that a better qualified workforce is a priority and is a requirement for all care providers. Half of all care workers will be required to have a competence based care qualification and managers of care services will also require a new, higher level qualification combining elements of care with management competence.

13.4. Conclusions about training of trainers

With such a mixed picture within The Home Farm Trust, what conclusions can be drawn?

My background is in training in the construction industry so I come to the care sector with a fresh pair of eyes. I was not the first to see this but what I did see was that many of the processes which are used to support people with learning disabilities have, at their core, the same principles which the best trainers have always used ... and vice versa.

So, what are these principles that are common to all these people who work as trainers?

In answering my own question I have considered hands, head and heart; what must trainers be able to do (their skills), what knowledge must they have and how would they best apply these skills and this knowledge (their attitude). And I have identified five areas that I believe are important:

13.5. Five key areas of skill, knowledge and attitude

13.5.1. The first key area is communication:

This is, rightly, seen as very important when working with people with learning disabilities. But The Home Farm Trust's approach to care embodies the concept of total communication, using all means and media for communicating, acknowledging that everything you do or say and how you do or say it is part of communication. This is absolutely consistent with the multiple intelligence theory of Howard Gardner ([34]) and various neuro-linguistic programming

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([34]) Gardner, Howard. Frames of mind: The theory of multiple intelligences. Tenth Anniversary edition

techniques ([35]) that The Home Farm Trust have introduced into 'accelerated' ([36]) staff training courses. For instance, when running a management training course I use music, metaphor, pictures, activities, games, wall charts, toys and so on.

13.5.2. The second key area is managing the process (see fig. 1):

Whether you are responsible for a staff training course, meeting training needs that have been highlighted in a staff appraisal or are responsible for organising a day service programme to meet the needs thrown up by residents' care plans, you still need to manage the process – from planning and design though delivery to evaluation. That is, you need to:

(a)   know where you're starting from – the context of where the learner has come from and where they are now,

(b)   set and agree goals for where you want to get to,

(c)   decide how to make progress and what are the appropriate methods to use,

(d)   gather evidence and be able to recognise when you have reached the goal.

Figure 1:   *Managing the process*
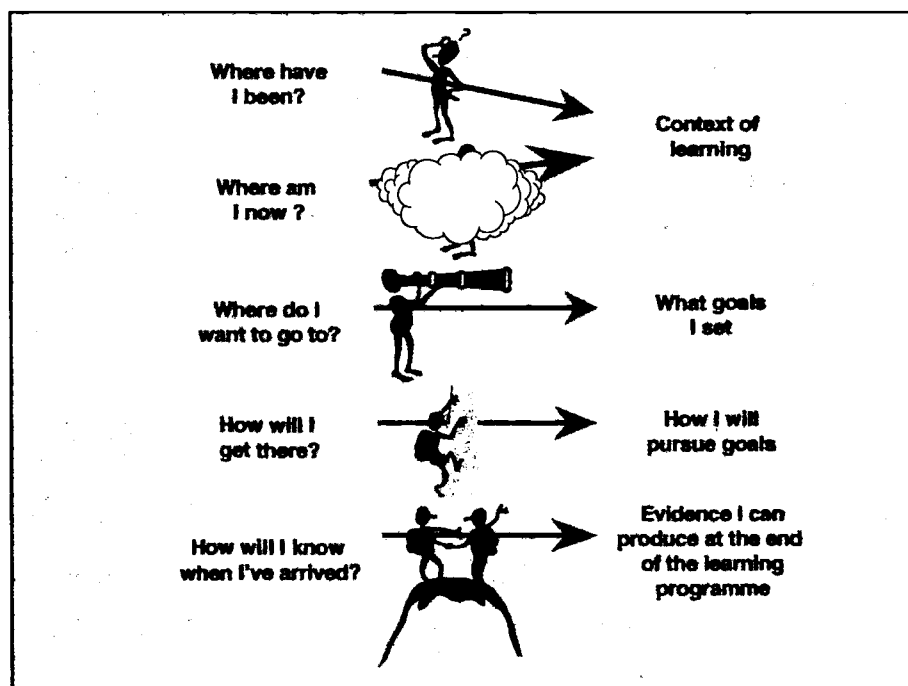
([35])   ANLP – The Association for Neuro-Linguistic Programming. Available on Internet: http://www.anlp.org [cited 29.1.2002]

([36])   The Registry of Accelerated Trainers. Available on Internet: http://www.learnfast.co.uk/index.html [cited 29.1.2002]

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13.5.3. The third key area is understanding how people learn:

That includes a long list of principles and factors. These include:

(a) Understanding how memory works: knowing that there is advantage in linking new things to what has previously been learnt, understanding the value of and necessity for repetition, exaggeration, image and metaphor and so.

(b) It also means appreciating different learning styles (the work of David A. Kolb ([37]), Peter Honey and Alan Mumford ([38])) realising that some people need their learning to be active, others need to spend time in reflection, others have to fit new ideas into a theoretical framework (even though that may be a very simple one) whilst others will only learn if what is being offered seems useful to their pragmatic way of thinking. This also infers that trainers themselves may have a predominant style and will, unwittingly, bias their methods to suit it, and that may be inappropriate for some of their learners.

(c) Another key area is structuring the material to be leaned. There are a number of ideas about human cognition and perception which are useful: George A. Miller's rule of 7 ± 2 ([39]) has been restated in the NLP concept of chunking; presenting information in 'easy to digest' chunks and then go 'up' to a generalisation (transfer of training) or 'down' to a more specific example, all to aid learning, recall and application. NLP also summarises findings about different people's preferences for taking in and processing information in different modalities – using visual, auditory or kinaesthetic senses.

(d) It also means understanding that learning works best if you can make it fun and, thus, motivational. Motivation also comes from ensuring that, both during learning and beforehand, the objectives of the learning and the needs of and benefits to the learner are matched and spelled out.

13.5.4. The fourth crucial area is empathy:

That is, seeing things from the learner's point of view, asking yourself what the world feels like for them, questioning whether they hear what you hear. Answering these questions will help the trainer to use language that the learner understands, to explain things in their terms, to phrase metaphors to employ things that are familiar to them.

The fifth element, which is an extension of empathy, is putting the learner, and not you, the trainer, at the centre of the process.

([37]) Web page on David A. Kolb's learning styles: http://www.nwlink.com/~donclark/hrd/history/kolb.html [cited 29.1.2002]

([38]) Try some internet based software at *Learning style software*: http://www.psi-press.co.uk/lss2.htm [cited 29.1.2002]

([39]) Miller, George A. The Magical Number Seven, Plus or Minus Two: Some Limits on our Capacity for Processing Information. The Psychological Review. 1956. Available in Internet: http://www.well.com/user/smalin/miller.html [cited 29.1.2002]

This means responding to people's needs and not controlling them to meet your own needs. And that is true whether you are considering a course for staff or in a day service for people with learning disabilities.

13.6. The argument for considering similarity not difference

I have been indicating that what there is in common between these groups of people is the most important factor but, nevertheless, we do treat people with learning disabilities differently. The XIIth Agora itself had people with learning disabilities as its subject; The Home Farm Trust exists, as an organisation, specifically to provide services to people with a learning disability.

Figure 2:   Difference or similarity?

But ... people with learning disabilities are different ...

Staff

... or are they all people first?...
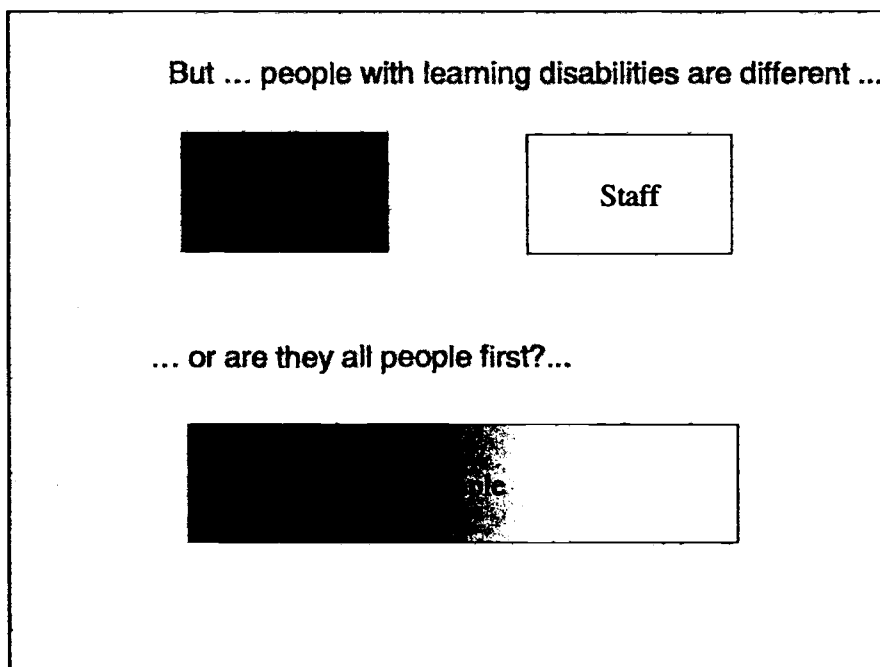
Suggesting that the difference, the learning disability, is the issue indicates that we should take two different approaches to training the two groups of people (staff and people with learning disabilities) and should take two different approaches to the training of their trainers.

If, on the other hand, you consider that people with learning disabilities vary in their ability to learn and that staff are similarly diverse, it makes sense, to me, to think of both groups as being on the same continuum (see fig. 2). Such a viewpoint dictates that the approach to their training and to the training of their trainers should highlight the need to treat everyone on an individual basis and to have a flexible approach to training. That was my position before I ever came into learning disabilities and everything I have learned since has reinforced that view.

13.7. The next step

In The Home Farm Trust we mean to take a further step, which is to directly involve service users in staff training; maybe as co-trainers but certainly in the design and evaluation of training. For me this will nicely close the circle and destroy the hierarchy of educator – worker – client.

Figure 3:   A change in focus

A Change in Focus

Hierarchy   Parity
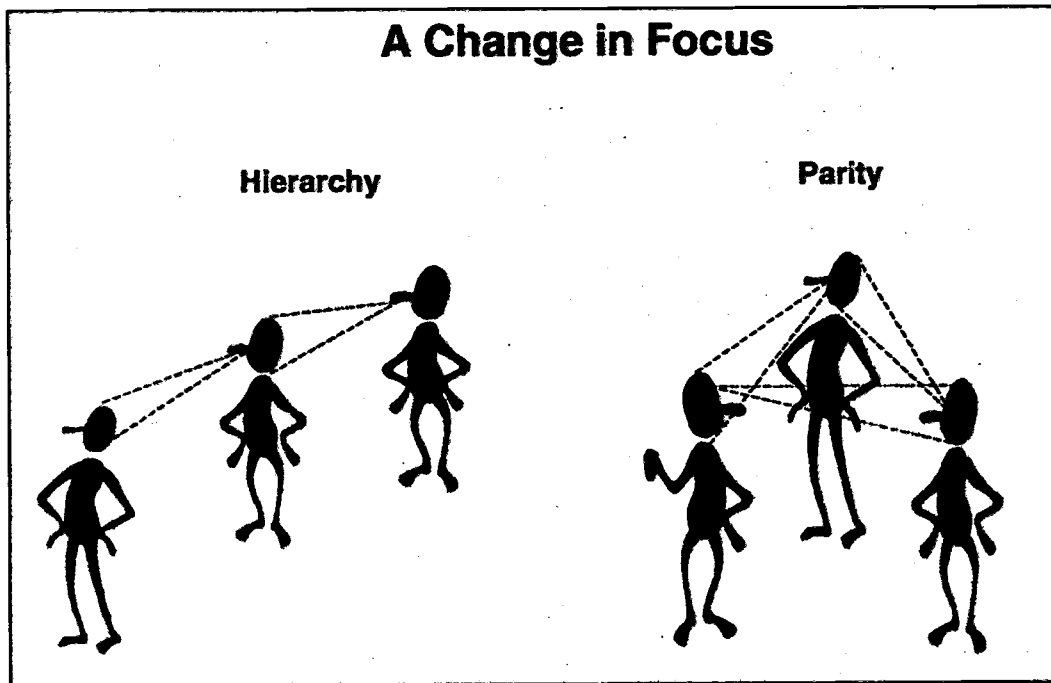
It emphasises what we have in common. That is, our ability to learn and our ability to help others to learn.

Even in the construction industry that would be a valuable philosophical change to accomplish, in our area of work it is, I believe, a fundamental change we must work towards.

I hope in this brief article that I have shown that it is learning and not disability that is the issue. That is not to deny that people with learning disabilities need specialised services and that to work with people with learning disabilities requires special skills.

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14. Training of trainers of the mentally disabled in Europe

Angelika Bühler ([40])

14.1. Integration/mediation services – continuing training and professionalisation

In the last few years, in almost all Member States and in many places in Europe, several interesting and stimulating projects and services have developed, dealing with the integration of people with disabilities into the labour market. The ways in which they have developed, the scope of their activities and the occupational profiles of their staff vary widely. The names under which they work in the field of rehabilitation or at the interfaces between school and employment, between the social and occupational fields, or between medical and occupational rehabilitation for the heterogeneous target group of people with disabilities, also differ to a great extent; in what follows they will therefore be called 'professional integration services'.

There is no uniform vocational profile or uniform training route in the Member States of the European Union for the occupational activities of the staff of professional integration services, who are known as trainers, job coaches, work assistants or mediators, but there are several approaches and training schemes which are attempting to achieve Europe-wide recognition (certification), and these will be presented and discussed below.

There are two ways of embarking on a discussion of the training of professional integration or mediation specialists: the historical approach and the task-oriented approach.
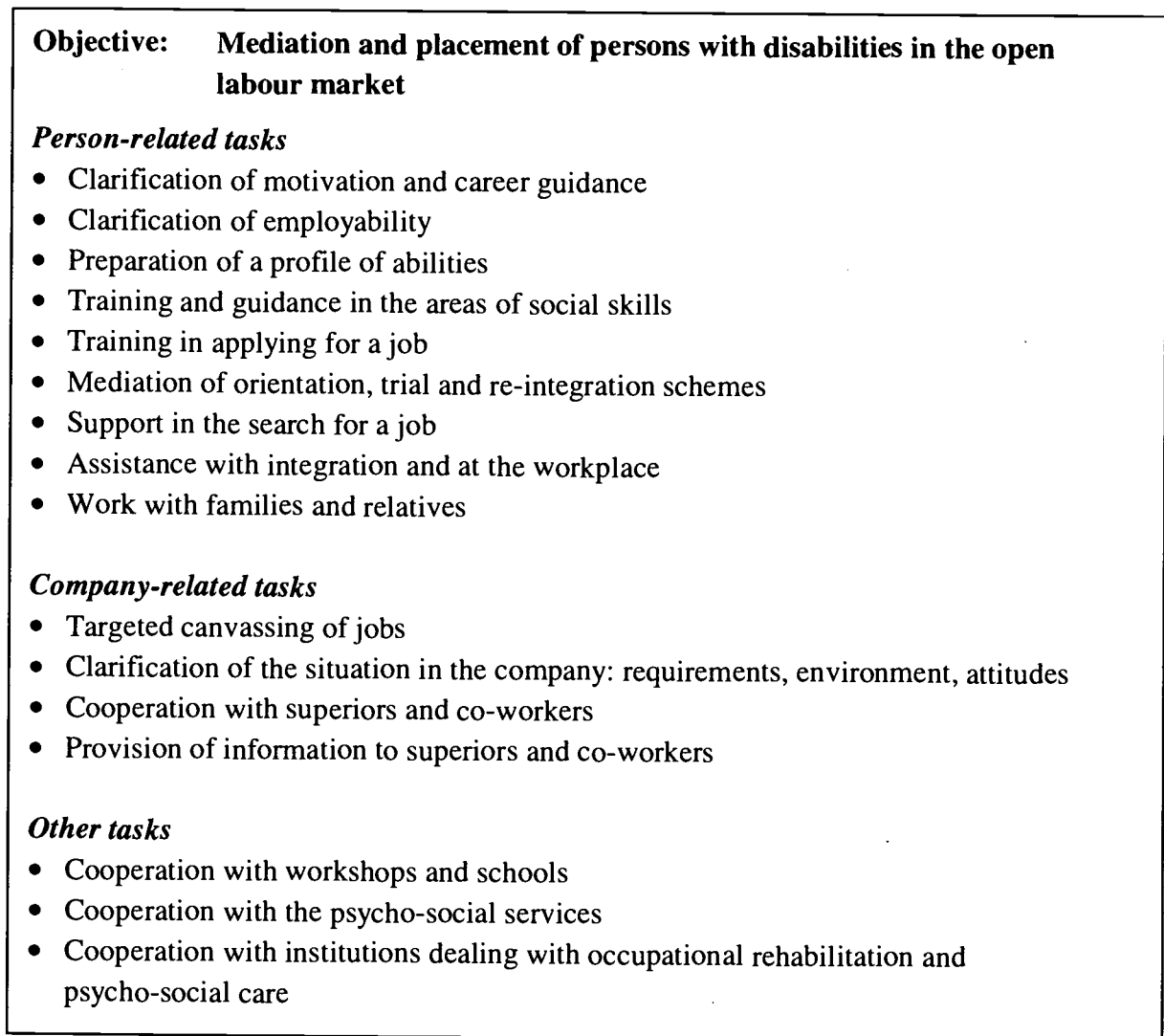
From the historical point of view there are many 'trial and error' experiments and 'training on the job' approaches for mediators, and they have done a great deal of pioneering work. In terms of formal qualifications, the people working in the first integration/mediation services were occupational therapists, social workers, educational social workers and psychologists. They had to learn to fill the vacuum separating the world of work from the social sector. In interviews (Bühler, 1997) they stated that one of the qualifications they needed in order to perform their work successfully was the ability to establish and maintain contacts with employers. But such elementary skills – needed for the successful (re-)integration of disabled persons – have not until now been seen as components of training programmes for the psycho-social and teaching professions; nor are issues relating to the integration of disabled workers – which could be dealt with in subjects such as 'selection of staff' or 'personnel management' –

([40])   FHVR Berlin (Forschungsstelle für Berufsbildung Arbeitsmarkt und Evaluation)

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included in business management or commercial courses. People working in these fields have acquired their skills 'on the job'.

The qualifications needed by professional mediators can also be described using a second approach based on the tasks to be performed by the integration services. The following figure gives an overview of these tasks:

Figure 1:   Objectives and tasks of integration services

Objective: Mediation and placement of persons with disabilities in the open labour market

Person-related tasks
- Clarification of motivation and career guidance
- Clarification of employability
- Preparation of a profile of abilities
- Training and guidance in the areas of social skills
- Training in applying for a job
- Mediation of orientation, trial and re-integration schemes
- Support in the search for a job
- Assistance with integration and at the workplace
- Work with families and relatives

Company-related tasks
- Targeted canvassing of jobs
- Clarification of the situation in the company: requirements, environment, attitudes
- Cooperation with superiors and co-workers
- Provision of information to superiors and co-workers

Other tasks
- Cooperation with workshops and schools
- Cooperation with the psycho-social services
- Cooperation with institutions dealing with occupational rehabilitation and psycho-social care

The tasks of the trainers/job coaches/work assistants in these services can be divided into two categories:

(a) first, they have to support people with disabilities and those around them;

(b) secondly, they have to inform and advise (future) employers and their staff within the company.

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The following cross-sectoral tasks can be identified from surveys and reports of experience: [41]

(a) clarification of the prerequisites for taking up a job, together with preparation of an individual profile of the abilities and performance potential of a disabled person;

(b) provision of information and counselling for people with disabilities (and those around them) about the possibilities of taking up employment;

(c) canvassing of suitable jobs and training places in the open labour market, together with workplace analysis;

(d) selection and preparation of suitable disabled people for these jobs;

(e) provision of information for (potential) employers on the possibilities of integrating people with disabilities into their companies;

(f) advising on applications for subsidies;

(g) counselling and support for employers with respect to the adaptations needed at the workplace and in work organisation when employing people with disabilities;

(h) temporary coaching of persons with disabilities at their workplace (on-the-job, in-company training);

(i) follow-up support, counselling and intervention in the event of conflicts or crises;

(j) acting as general contact person for both people with disabilities and employers, even after successful entry into work.

A comparative compilation of the data obtained from integration services throughout Europe reveals the following additional factors and variables which also influence the ideal profile of such services and thus affect personnel requirements and qualifications:

(a) The number of staff required depends on the average amount of mediation and counselling needed for the target group in question: figures vary according to the target group concerned such as people with mental disabilities, people with psychological disabilities, people with impaired vision and people with learning disabilities. Up to the present no uniform model has been developed which lays down whether an integration

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[41] Landeswohlfahrtsverbände Baden-Württemberg. *Integrationsdienste für Menschen mit psychischer Behinderung in Baden-Württemberg*, 1997.

Landschaftsverband Westfalen-Lippe. *Psychosozialer Fachdienst: Betreuung Schwerbehinderter im Arbeits- und Berufsleben. Tätigkeitsbericht*, 1995.

Landschaftsverband Westfalen-Lippe (Hrsg.). *Monetäre Kosten-Nutzen-Analyse von Fachdiensten zur Integration von Menschen mit geistigen Beeinträchtigungen auf dem allgemeinen Arbeitsmarkt. Argument-Sonderbände zum Schwerbehindertenrecht*, No 3, 1997.

ISB. *Handlungsformen zur Eingliederung Behinderter in das Arbeitsleben. Ergebnisbericht*. Berlin, 1995.

IGON. *Evaluation of mediation in employment and disability. Cost-benefit Analysis and Quality Standards. Intermediación laboral y empleo de personas con discapacidad*. Bilbao: Universidad de Deusto, 1998.

FBAE/NEI. *A Methodology for the European Evaluations of the EMPLOYMENT Initiative*. Rotterdam, March 1999.

service and its staff members should specialise in order to deal with one of these groups or should work on a cross-sectoral basis with several groups. Both approaches are to be found in Europe.

(b) The size of the regional catchment area and the number of companies and agencies to be advised: integration services need not only a clearly defined location in the field of social work but also, much more importantly, a clear position with respect to their cooperation with companies. The location of the services in the broad area of social work is very important, but their proximity to the labour market is even more crucial because this is the key which opens the door to companies and thus to the possibilities of finding employment for their clients.

(c) These services probably need to build up a network of organisations in order to work effectively, and this question is related to their location if their integration work is to be effectively geared to needs. A key task will be to set up organic links with existing institutions for the occupational rehabilitation and employment of people with disabilities.

(d) The mobilisation of non-professional support in the company, either from colleagues or superiors, is another important factor. The replacement of professional coaching for people with disabilities by non-professional support at the workplace is of strategic importance, especially in terms of effective outcomes, and is another challenge to be included in the profile of the job trainer or job coach.

(e) One of the important tasks of the professional integration services is to advise employers and people with disabilities on the availability and use of financial incentives and subsidies. For the profile of the mediator this implies constantly updated knowledge of these incentives and subsidies.

The profile of people working in integration services is derived from these tasks. In the Member States in which such integration services are already in operation (their names vary depending on the Member State), the description of activities has shown that the staff of these services require more training. There is a great need for continuing training and professionalisation of integration/mediation work, and practice-related in-service training has been introduced in some places.

14.2. Examples of the training of integration service staff

A comparison of the integration services/mediation services/job placement agencies currently operating in the different Member States of the EU shows what training contents are taught and what requirements will arise in the training of trainers in the future. The common elements and the differences in the individual training courses can be deduced by examining the following questions:

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(a) Who works in these services? In all Member States the staff in these services predominantly have a training background in the psycho-social or educational field, i.e. they are mostly educationalists, social workers, psychologists or occupational therapists.

(b) Where do such services exist? This is the question of location. For the target group of people with mental disabilities, the following locations or places close by would seem to offer the best facilities for cooperation: the various schools, in order to guide the transition from school education to the open primary labour market, or the sheltered employment centres, so that, after some years of on-the-job training in the workshops, new possibilities of employment can be sought in the open primary labour market.

(c) What is the duration of training for qualification as a mediator? Most training courses take place on an in-service basis and last up to 16 months.

Table 2:   Training within the framework of supported employment

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Example 1: Supported Employment*

Content of training

Module 1: Supported employment – overview and philosophy
Module 2: Laws governing support and rehabilitation in Germany – basic knowledge
Module 3: Individual career planning – every applicant is unique
Module 4: Marketing and locating workplaces – the pathway to employment
Module 5: Counselling of enterprises – commercial thinking and workplace analysis
Module 6: Skills training – learning at the workplace
Module 7: Job retention – further support and crisis intervention
Module 8: Quality assurance, project work and organisational development

*   Certified as continuing studies in the FRG in accordance with Paragraph 90 of the NRW Law on Universities; developed through the EMPLOYMENT Community Initiative, implemented in the following Member States: Finland, United Kingdom, Ireland and Italy

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The first experimental course took the form of a model project under the EMPLOYMENT Community Initiative, participants being awarded a certificate by the training institution. For the future it is planned to offer training combining distance learning and face-to-face stages (cf. BAG-UB, 2000) and to make the training and the certificate well known throughout Europe.

Other training courses stress the fact that the integration process should be viewed as a comprehensive process. In other words, the mediator must have the relevant knowledge, an overall view and effective influence on all activities aimed at achieving cooperation agreements which are satisfactory for both the client and the enterprise. Integration work calls for a mature advisor who has a subtle perception of the differences between individuals, and between institutions, and is able to handle emotional situations without becoming too involved. The mediator must be able to withstand the pressure generated by the tension

between the demands of the enterprise and the needs of the client, and be able to convert this into practice-related solutions.

Table 3:   *Training in the Federal Republic of Germany*

> **Example 2: Germany**
>
> **Content of training**
>
> Module 1: Basics: the individual, roles, groups and processes
> Module 2: Project management
> Module 3: Systemic concepts
> Module 4: Presenting arguments and canvassing
> Module 5: Commercial thinking and social action
> Module 6: Conflict and cooperation
> Module 7: Legal issues
> Module 8: Presentation of project tasks

The process of work integration is a relatively new, multifaceted and challenging field of activity for mediators; it requires specific specialised skills and the flexible assumption of diverse roles in counselling and support. In the following example the emphasis is on the mediator's role of communicating with employers by addressing their concerns and apprehensions.

Table 4:   *Example of training in an EU-wide network*

> **Content of training**
>
> Module 1: People with disabilities in the labour market
> Module 2: Employer's concerns:
> * How will it affect my business?
> * How could I provide a suitable job?
> * Will it be possible to find someone who fills the requirements?
> * How can I get an idea of the potential of the candidate?
> * But how will other staff react?
> * Won't practical and personal problems interfere?
> * Can I discuss performance and behaviour if necessary?
> * And what if it goes wrong?
> * Is there any financial or other assistance available?
> Module 3: Mediation
> Module 4: Raising awareness

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All training schemes make use of methods and instruments containing extensive printed study material which gives a practice-related introduction to the specific subject, and interactive media. Case studies, reflective and practical tasks are carried out individually and in groups and teams. The focus is on the process of reviewing the working methods used to date and developing them by adding the input of the teachers and exchanging ideas with them. All training schemes have a close association with practice; i.e. they are carried out on an in-service basis and are especially addressed to groups of persons who already have initial experience in this field of activity.

The work and the activities undertaken by a professional mediator are based on continuing training founded on skills acquired initially – mostly in the psycho-social field. As the work is done in teams, which is the predominant form of cooperation within a mediation/integration service, it is possible for some of the staff to specialise in a particular subject, and this can lead to a balance of skills within each team.

14.3. The future of training for mediators

In general, the prevailing trend is to establish and operate such services in all Member States of the European Union. In several programmes, which also cover neighbouring countries, some thought is being given to the possibility of passing on this concept to others.

As far as specialised staff and their training are concerned, no one particular type of training course will become the rule, but professionalisation of the work will continue and will gain recognition throughout Europe, in particular through 'best practice' models. In future, the concepts of empowerment, user control and awareness-raising will have to be viewed as the central issues and given more importance.

The associations, institutions and organisations which are already working throughout Europe and participating in European programmes (the Community Initiatives EMPLOYMENT and EQUAL) will be the main actors in this professionalisation process and the ones to benefit most from this change and from mainstreaming strategies.

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15. How useful are networks of trainers and of trainers of trainers in preparing them for their very special role?

Raymond Ceccotto ([42])

I should like to start by thanking Cedefop – and especially Eric Fries Guggenheim – for having taken the initiative and chosen this particular subject for an Agora, and secondly for involving ARFIE, a non-governmental organisation.

Quite apart from the importance of the subject itself, the decision to address it by means of a heterogeneous discussion group is an interesting one and, I would suggest, already a manifestation of what our friend Helmut Heinen would call 'mainstreaming'. This despite the fact that certain voices have not been heard much during discussions and that it would be highly desirable to have the opinion of the unions on the subjects dealt with during this two-day Agora.

ARFIE is, of course, delighted to have been invited to take part, both as an association concerned with research and training in Europe but also so that we can extend our discussion to include partners whom we are often scarcely able or totally unable to reach.

15.1. Introducing ARFIE

ARFIE is a European network of partners and innovative service providers which seek to enhance the quality of life and independence of disabled people by promoting both the training of trainers specially equipped to work with them, and innovation and research in every area of services for the disabled. Our membership of around 80 in 20 or so countries, including most of the EU Member States, comprises associations of disabled people and organisations concerned with helping them, training bodies, research organisations and other professionals working to uphold the right to self-determination and quality of life of people with special needs.

ARFIE was established about ten years ago in an endeavour to plug a number of gaps that had been found to exist in the continuing training of professionals working with disabled people.

In this way we keep abreast of the very rapidly evolving questions and problems in the area of work with disabled people, and of possible answers to them.

([42]) President of ARFIE

15.2. What are the various trends?

(a) New approaches in working with disabled people:

    (i)   normalisation and integration,

    (ii)   independence and self-determination with particular emphasis on human rights, equality of opportunity and the chance to play a full role as citizens.

(b) New aspects for consideration:

    (i)   disabled people and the ageing process – multiple disability – the problem of mental disability associated with physical problems,

    (ii)   the needs and demands of disabled people,

    (iii) sexual expression, etc.

(c) Diversification of services:

    (i)   accommodation, training, employment,

    (ii)   changing functions in assistance (personal assistance models).

In addition to the training of the professionals concerned there is also the question of the various types of training for disabled adults themselves:

(a) conventional vocational training,

(b) continuing training,

(c) training for social integration in the various life contexts,

(d) learning of independence, self-advocacy, etc.

(e) training for disabled adults that focuses more on attitudes and the ability to communicate and express one's needs and rights in order to prepare people with mental disabilities for the new roles they are to play.

Through its networked operations ARFIE provides opportunities for discussion through the inclusion of specific subject networks within the framework of European programmes, and through seminars, colloquia and opportunities for cooperation such as that with Cedefop today.

15.3. The CONTINUA pilot project – one example of network cooperation

Let me quote a good example of network cooperation in a particular field. This is the CONTINUA pilot project which is being carried out as part of the EU's Leonardo da Vinci programme. It is coordinated by the Fondation APEMH – an association of parents of mentally disabled children which links various members of ARFIE in a cooperative network.

The aim is to create a continuing training unit for social workers and others involved in placing disabled people in employment.

The primary aim is to help to meet the urgent need for continuing training expressed by professionals working in the social and educational field in general and with disabled people in particular.

Ascertaining this need is especially important since it will be necessary in future to take even more care to ensure that the training given to professionals matches the needs of their clients. Consequently the new methods of training being developed are designed as an immediate response to the demand by professionals that they be involved in the organisation of work.

In the first year of the project, questionnaires prepared by each partner enabled us to draw up a list of what professionals and institutions felt to be the continuing training needs.

We then devised a certain methodology for constructing continuing training modules:

(a) we wanted modules that regularly linked the theoretical training offered with actual practice in the field;

(b) modules were to take this into account by offering short sequences, group working, case studies, etc.;

(c) the active involvement of educators and social workers as trainers was an important aspect from this point of view.

The following training modules were produced in 1997:

(a) Severe disability and communication tools (FENACERCI, Lisbon, Portugal);

(b) The 'burnout' syndrome (LEGA COOP, Bologna, Italy);

(c) Sensitivity to dual physical and mental disability (Fondation APEMH, Betange-sur-Mess, Luxembourg);

(d) The relational disability-family-institution triangle in the process of maturation and social and work integration (AFASER, Champigny-sur-Marne, France).

We also stressed the need for each module to be given material expression in a supporting document showing its different features:

(a) module structure,

(b) subjects dealt with,

(c) methods of finding trainers and recruiting participants,

(d) trainer profiles,

(e) cases handled and discussed,

(f) problems encountered and solutions proposed.

Since the purpose of the document was to enable a module to be used in other contexts (geographical etc.) and disseminated, the third year of the project was devoted particularly to ways and means of disseminating and transferring the results of the CONTINUA pilot project.

These results centred around a number of major products, namely:

(a) training itinerary,

(b) training modules,

(c) support documents,

(d) assessment tools,

(e) trainer exchanges,

(f) practical applications.

The objective of the first (CONTINUA) project was to produce a number of training modules for professional social workers working with disabled people in order to improve their social and work integration.

A two-year extension project, referred to as CONTINUA Plus, made it possible to undertake a more detailed analysis of needs, to produce new training modules, to set up discussion groups, to study the various subject areas already looked at in greater depth by means of surveys and to design tools and teaching equipment, as well as to enhance the usefulness of work by dissemination (another advantage of networking!). We were, for example, able to conduct a research project in Italy and Cyprus on 'Burnout and empowerment, the difficulties and resources of social work: a study of the working conditions of social workers involved with disabled people'.

Others subjects of relevance emerging from our work were the relational family-institution-disabled person triangle (one might now add individual-organisation-employer), and confidentiality and privacy/intimacy. The growing interest displayed in these subjects, which was stimulated by other international research projects, led to further European partners joining the project – yet a further benefit of networking.

Central to these new approaches is the changing role of the two principal protagonists in social work – the client, that is the disabled person, and the social worker. Recent years have seen a change of paradigm in the practical assistance rendered to disabled people, with awareness of human rights causing greater stress to be placed on the notion of equality of opportunity for disabled people. From this point of view the client becomes the central focus, and his or her right to self-determination is given primacy. This change of paradigm brings with it radical changes in the definition of assistance and hence of the role played by professional social workers, who see their very *raison d'être* called into question. Those services working towards empowerment (where the professional sets in train processes to facilitate choice and decision-making by the client) and self-advocacy, the professional's role

gradually becomes one of increasing partnership with the client and the balance of power changes.

It is important with this change of paradigm not to lose sight of the role played by families in planning a way of life, since they greatly influence its success or otherwise.

The same applies to trainers working with disabled people, and the new trends must be borne in mind by those responsible for training trainers, as well as the particular techniques and teaching methods needed in order to train young people and adults suffering from mental disabilities.

During our discussions at this Agora, which already exemplifies and is a good argument in favour of best networking practice, we have pinpointed another aspect of networking, namely facilitating the sharing of experience between professionals from countries having different cultural traditions and political histories in a manner that goes beyond mere confrontation.

Networking will therefore permit:

(a) joint reflection on similar problems encountered in different countries, despite differences in method, approach and political history;

(b) concerted action on subjects of common concern using different and often complementary means – work synergy, studies of content, approaches, methods and assessment;

(c) bringing together training and professionals in the field with an emphasis on cooperation between all involved in work with disabled people – whom A. Alberani better described as 'social operators';

(d) formalisation of this general plea for commitment and a sense of fairness, the right to both civic and vocational training of these operators, the transparency of policies implemented and the assessment of action taken (with or without supporting economic data).

15.4. 2003 – The year of persons with disabilities

To conclude I shall take advantage of the approach of 2003 to suggest that Cedefop commission an in-depth study of trainers for disabled people, using the networks that have already been established, with the following objectives:

(a) the creation of databases;

(b) a study of training provided for disabled people and the methods employed;

(c) research into the training of professionals – trainers and others – involved in training in the various European countries.

Study and research could focus *inter alia* on:

(a) the various facets of training;

(b) general education;

(c) vocational training;

(d) training for citizenship and involvement;

(e) social training (learning to be);

(f) learning to learn

(g) individualisation of learning;

(h) teaching methods used;

(i) methods and importance of multidisciplinary team-work, bearing in mind the contacts with a large number of protagonists, including disabled people and their families, who are regarded as full partners;

(j) work on the transitions between school, vocational training and work (not always the same concept, depending on the stage).

Such a study could bring together and structure the arguments which we have outlined during our two days of discussion in order to strengthen our hand when approaching the public authorities and initial and continuing training organisations and to underpin our joint action with partners within and outside the ARFIE network.

16. Summary of discussions

Victoria Koukouma ([43])

16.1. Why an Agora for mentally disabled people

The right of every individual to personal development and self-realisation, inalienably linked to their right to employment, is proclaimed by our society to be a presupposition of social progress. But does this equally apply to all individuals? According to Eurostat statistics, 12 % of the population in Europe have a disability and it is estimated that only half of them have any form of employment. At a time when working conditions and employment are undergoing change to reflect greater flexibility and mobility in the labour market, and vocational education and training are becoming all the more crucial in order to adapt to this new situation, it seems relevant to CEDEFOP to look into how this applies to mentally disabled people.

The Agora brought together 32 participants – researchers, policy makers, social partners and experts from the disability field – in order to exchange experiences and discuss how training mentally disabled people and their trainers can allow them to exercise their right to effective integration and mobility within the labour market properly and effectively. We further looked at suggesting ways as to how best all of us can work towards restoring a genuine and not just a formal balance between people who can be very different.

Addressing the problem in this perspective calls for adopting first and foremost a common platform of discussion as to the way disability is perceived. Is it a medical fact or a social construct? Our stance on this question provides a basis for the debate to go forward and for the possibility of change. The actual testimonies and views presented converged towards the realisation that mentally disabled people are viewed by many societies from a medical model perspective which imposes a negative image, characterised by dependency on medical treatment and a static condition. As a result 'disabled people are compart mentalised, labelled and treated according to a workable, conveniently adapted manner leading to disempowerment' (Gaye Hutchison). Such a model obviously does not allow for measures – especially in the area of education and training – which would lead to disabled people's independence of decision, autonomy and access to opportunities. Whereas a social model perspective, on the other hand, would open up possibilities for change by acknowledging that it is our society which prevents inclusion when it puts the stress on the weaknesses and ignores the potential of disabled people.

([43]) Association des Parents d'Enfants Mentalement Handicapés (A.P.E.M.H.)

Although the transition to the social model is a commonly identified need, the different pace in this process was reflected in divergent or even polarised concerns and practices revealing how training and the integration of disabled people is perceived around Europe today and to what exactly they should be striving towards.

16.2. Obstacles to integration

16.2.1. Education and training

Education and training processes represent a belief or disbelief in human capacities, in human development and in the social and economic role people will play in the future (Annet De Vroey). An overview of some education and training systems around Europe today revealed structures which tend rather to reinforce, still, the medical model perspective, through working with separate groups of mildly, moderately and severely mentally disabled people. And although we seem to have reached a turning point, a radical change towards inclusive education is perceived as being too risky. These systems obviously ill-prepare mentally disabled children for future employment. As Gay Hutchison put it, training and qualifications do not always lead mentally disabled people to employment because of the prevailing social prejudices which base training on directive approaches which do not take into account individual abilities, skills and preferences.

The results of a study, carried out at a European level, showed that schools educate mentally disabled people in terms of what they are unable to do, and fail to take into consideration their personal capacities and desires so as to elaborate educational programmes adapted to each person (Victoria Soriano). It has been commonly recognised at this point that social skills are now considered to be the key element leading to autonomy and to social and professional integration. In this sense, training should equally aim at developing these skills as much as professional qualifications and this should start very early in life, during school education. Within the framework of this alternative view of mental disability, professionals are seen as playing a key role in the process of integration, from education and training, to finding the users a job and helping them keep it by means of permanent support (Bob Rhodes, Geoff Warner). On the whole, professionals should assess the quality of their work according to whether it helps disabled people into self-realisation, well-being and full integration (Carmen Duarte). Beyond the obstacle of attitudes, in this context integration heavily depends upon the funding available for ongoing specialised professional support to the mentally disabled person.

16.2.2. The role of the training of trainers

It is important to see how the trainers themselves should be prepared for training mentally disabled people. Should they see themselves as different to other teachers or trainers, and what particular skills are called for? Of course addressing a group of mentally disabled people

demands specific technicalities and also an emphasis by the teacher on emotional support throughout the learning process (Hans Jürgen Pitch). For Paul Twynam, trainers must always fulfil the same requirements and must be based on the same principles as for any target group, since training should always reflect people's individual needs, aspirations, abilities, speed, style, preferences, etc (Paul Twynam). Moreover, he argued that the learning processes of both disabled and abled people are similar. In this sense, the important thing is for a trainer to realise that learning and not disability is the issue, and consequently put the learner – any learner – at the centre. Recently, thanks to the transfer of know-how and to networking, a number of other important aspects in the support of disabled people are beginning to appear in the training of trainers. There is now a growing provision of training on the political and social side of this work: awareness-raising, legal support, business management support, etc (Angelika Bühler).

16.2.3. Training mentally disabled people for which kind of integration?

If training is aimed at the integration of disabled people into the labour market, where does sheltered employment stand in these terms? Is it an inevitable part in the process of extending job opportunities to as many disabled people as possible?

This proved to be a highly controversial issue as for some of the participants, by putting the stress on inherent limitations, sheltered employment undermines the idea of self-development and social integration (Alberto Alberani, Geoff Warner, Paul Twynam). It is viewed as a failure both on the part of the professionals, in that it fails to provide the necessary skills which would lead to employment in the open labour market, and on the part of society as a whole, which favours integration instead of ghettos. Their field of reference is therefore that of the open labour market as the only way to achieve full integration.

On the other hand, the utility of sheltered employment was strongly defended on the grounds that it is ethically and socially right for any social policy to offer to those mentally disabled people who cannot or do not wish to work in the open labour market the possibility to be employed. We just cannot ignore the fact that, within the current economic model, employers are very demanding in terms of productivity. Besides, it has also been claimed that sheltered work today can offer a wide variety of choices extending to extra-muros and semi-open employment for groups or individuals, and with various degrees of support. On the whole, sheltered employment centres, in collaboration with social enterprises and other local agents, can and should take initiatives for job creation and for creating pathways to employment to the open labour market. What our main objective should be in this context is that mentally disabled people obtain a legal status equal to any other employee's. (Gérard Zribi)

However, beyond the ethical considerations described above, Agora also attempted to look at the question of disabled people's integration into the labour market as an economic challenge, as they constitute a workforce which remains largely unused. This was the argument of a study urged by two background reasons: the current tendency of the National Action Plans on employment to move from passive to active policies, and the demographic indicators of the ageing of its workforce. Indeed, the results of this research revealed that the employment of

disabled people can also be profitable for the economy (Juan Carlos Collado). Integration would save money from the public budget in the sense that the fiscal income received, plus the savings from disability benefits, outweighs the cost of active policies. Such a pragmatic point of view could be a key argument in persuading employers to take on disabled people. Nevertheless, this turned out to be a controversial issue, as for some of the participants this argument is not as valid as the humanistic approach of fighting for the integration of the disabled people on the grounds that it is morally and ethically right. Besides, this argument was found to be inapplicable in some countries, as well as to oversimplify integration by not providing for specific needs. The inherent danger here is that integration is used as a pretext to remove social financing, whereas the issue should be the right to employment and to social protection (Gérard Zribi). The advocates of this approach, on the other hand, argued that, in a market economy, there was an undeniable need for the employment of mentally disabled people also to be profitable, so as to be sustainable over time. Mentally disabled people see their status as improved because they have added value, and this is what active policies seek to fulfil (Helmut Heinen). Examples of other pathways to employment were also used in support of this view: the social firms standing between sheltered and open employment, which work on an economic basis and whose financial success comes from being close to the market. (Rainer Dolle)

16.2.4. Employers

In line with its operating principle, which is to create a bridge between all the actors involved in initial and continuing vocational training (ICVT), Agora specifically invited the social partners to identify the determinants of the positive or negative attitudes of employers. As it appeared from the discussion, these attitudes are shaped by a combination of elements. Firstly, mentally disabled people need to get tangible skills by means of training schemes and apprenticeships whose content and value are transparent enough for employers to compare with traditional training (Katharine Davenport). Secondly, a legal framework must be in force. Legal measures such as quota systems are usually considered to be an effective tool in getting mentally disabled people into work. Nevertheless, they don't always work in a positive direction, as employers often prefer to recruit less disabled people, usually with motor impairments, and thus exclude other groups (Stefan Tromel). Or they may take on disabled people but without really giving them a proper task (Ioannis Koukiadis). To compensate for these shortfalls, legal measures should be coupled with fiscal incentives and the necessary funding, which would secure the support mechanisms required by employers to deal with the financial risks and the cost of the permanent special support needed when employing mentally disabled people (Ioannis Koukiadis, Katharine Davenport). And above all else, awareness-raising among employers and workers was identified as the overarching prerequisite for the real integration of mentally disabled people into the labour market. Once sensitised, trade unions play a crucial role in making mentally disabled people accepted by their colleagues and in exercising pressure on employers to adopt real integration policies and make posts accessible to all (Josette Dixneuf).

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16.3. In guise of conclusion

This Agora was not a forum which reconciled differences, but which made it possible to get a clear picture of the state of the art and to fathom the different or opposing views. It was strongly felt that a paradigm change is now taking place (Raymond Ceccotto). The development of self-advocacy demands that all actors involved reconsider integration, support and the role of professionals. What is more, self-advocacy is becoming the measure of quality in our education and training practices for both disabled people and professionals, as these practices should provide for the accommodation of this new reality.

However, in this transitional phase, traditional and new approaches coexist and the views as to how to go forward are divergent. Nonetheless, this Agora sent a positive message: that networking, as a means of making good practices available to professionals from different cultural, historical and political backgrounds, could enable us to go beyond mere confrontation to the sharing of concerns despite different methods, approaches and political histories. It can also allow for the formalisation of our call for commitment and awareness-raising for just values, training, transparency of social policies and the evaluation of measures (Raymond Ceccotto). This debate and the follow-up already organised by ARFIE for 2002, as well as ARFIE's call to CEDEFOP to carry out a research on the training of professionals within the context of 2003 as the year of disabled people, are already tangible results of good practices through networking.

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Cedefop (European Centre for the Development of Vocational Training)

Agora XII
Training for mentally disabled people and their trainers: Permitting the mentally disabled a genuine and appropriate exercise of their rights:

Thessaloniki, 5 and 6 July 2001

People suffering from learning disabilities are subjected to ostracism that is not unkind so much as condescending. Agora 12 demonstrated that the disabled are merely another side of ourselves, that training for them – just as for those not considered disabled – is a means of developing and acquiring independence and of becoming absorbed into society. While recognising the importance of including those with learning disabilities as far as possible in normal training schemes and conventional enterprises, the conference warned against going too far in this direction and that special classes and sheltered employment undoubtedly had a role to play.

Emphasis was placed on the importance of training and the role of trainers and social workers in opening the doors of society to the disabled. The skills and human qualities required by trainers in this context were little different from those needed by other trainers, so that training for those working with the disabled did not differ essentially from that for trainers generally.

This Agora was prepared in collaboration with the ARFIE network (Association de Recherche et de Formation sur l'Insertion en Europe), a non-governmental organisation created by the Fondation APEMH – an association of parents of mentally disabled children based in Bettange-sur-Mess in the Grand Duchy of Luxembourg.

AGORA XII
Training for mentally disabled people and their trainers: Permitting the mentally disabled a genuine and appropriate exercise of their rights

Thessaloniki, 5 and 6 July 2001

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