



# Accessible Southampton

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# What is an city accessible city?

An inclusive and accessible city is a place where everyone, regardless of their economic means, gender, ethnicity, disability, age, sexual identity, migration status or religion is enabled and empowered to full participate in the social, economic, cultural and political opportunities that cities have to offer.

# Why is accessibility important in a city?

Having more people involved helps planners think about the different types of exclusions and barriers that people face in their everyday lives. Accessibility is the key to inclusive cities. People are excluded further if cities are planned and designed poorly.

# How do you make a place more accessible?

- It all starts with the people and understanding their needs
- Design the city with best practice guidelines
- Understand what is available already
- Not all accessibility is physical – it can be about information / digital
- Accessible Impact assessments can help in future decision making

# Accessibility and location

- The ability to reach a place with respect to another place.
- Is it easy to walk from one place to another safely? (economic means)
- Is it easy to navigate pathways if in a wheelchair, using a buggy or indeed have autism?
- Do areas feel safe to access from LGBTQ+ communities?
- Can I catch public transport easily if I have a disability?
- With all of this people often fit into more than category

# Accessible Southampton – Physical

- The same walk through Southampton may be very different for people – someone with out mobility problems will hardly notice the obstacles – they will go up and down stairs, curbs and move around obstructions without any problems but this won't be the same for everyone.
- By contrast a resident with disabilities may take the same journey as above but have a tortuous experience and in many cases it will become impossible to overcome.
- Not enabling people to leave their home causes social isolation – social isolation is a killer.
- We are probably at different levels of understanding of our environment for people – this understanding is growing and needs to continue to evolve.

# Responsibilities as a council

- The Equality Act 2010 inc. the right for disabled people to have access to everyday goods and services.
- Everyone in the Council has a responsibility for accessibility at some level.
- Work needs to be done to create a culture of accessibility and inclusivity.
- Create tools to help our workforce plan to enable improvements to accessibility.
- Equality Impact Assessments are a requirement for policies or changes to policy.

# Council

## Universal services

- Information and advice / Social Work services

## Commissioned services

- Spectrum

## Specialist services

- Sensory needs and rehabilitation



A photograph of a fountain in front of a stone building. The fountain has a central column of water and several smaller jets at the base. The building is made of dark stone blocks.

# People living in Southampton with a Disability

Where are we now?

Southampton City Council

# Disability and long-term conditions

There is no current single source to establish how many people have disabilities in the city.

The following data sources have been brought together to illustrate the picture of those people **known to have a disability** in the city.

- Those known to Adult Social Care
- Those known to Children's Social Care
- Those known to Schools/Education
- Those claiming disability living allowance (DLA)

These figures exclude those who not known to SCC services for support or as in receipt of DLA benefits. These unknowns could include people who have long-term health conditions which impact on their mobility and day-to-day living, but may not be an SCC service user or meet needs testing to receive a SCC service.

How many people with disabilities (those **known and those estimated unknown**) can be estimated using modelling applied to local population data built from prevalence studies.

**Multiple long term conditions** which impact mobility and day-to-day living increase with age, this is illustrated using GP data for the city.

Back pain was the most second common condition for disability living allowance in pensioners and this is the most **common cause of disability**, locally and nationally.

There are currently **3,382 individuals** known to SCC Adult Social Care as **visually/hearing impaired** and/or with a **physical disability**, living inside and outside the city boundary

**Living within the city**, there are **3,234** residents known to Adult Social Care as visually/hearing impaired and/or with a physical disability:

- **947** registered **visually impaired**
- **1,111** registered **hearing impaired**
- **1,385** people with general classes of **physical disability**

Note: Most aged 18+ and a few are under 18. 209 individuals are known to adult social care for two or all of the three groups above.

**Living outside the city**, there are **148** individuals known to Adult Social Care as **visually/hearing impaired** and/or with a **physical disability**, live outside the city boundary in SCC funded permanent residential / nursing homes

**These figures exclude those who are not registered, or those who have long-term health conditions which impact on their mobility and day-to-day living.**

There were **498 children** known to the SCC Education data team with a primary or secondary need as **visually/hearing impaired, multi-sensory impairment** and/or with a **physical disability**, attending Southampton mainstream schools (January 2021)

**In Southampton maintained and academy schools (including academies and trust-maintained)** there are **498** children known to SCC Education team as visually/hearing impaired and/or with a physical disability:

- **76** who are classed as **visually impaired**
- **124** who are classed as **hearing impaired**
- **21** who are classed as **multi-sensory impaired**
- **277** who are classed with a **physical disability**

These figures exclude those who are home schooled or attending an independent school, children pre-school age or attending college, and Southampton children who attend out of city schools. On the school census a child may be coded with a Primary and Secondary need type, in order of severity. In these figures the Secondary need type has only been counted if the Primary need type was not one of the four detailed above.

**Children's vulnerable cohort groups** of those children known to Children's Social Care (as of 01/09/2021):

- **403 of 2,968** (13.6%) who are classed as **Children in Need** have a **disability**
- **40 of 420** (9.5%) who are on the **Child Protection Register** have a **disability**
- **74 of 509** (14.5%) who are classed as **Look After Children** have a **disability**





In **February 2021**, there were **5,743** Southampton residents receiving **Disability Living Allowance (DLA)**. **1,321** were **working age adults**, **2,716** were **children** and **1,706** were over state **pension age**:

- **2716 children – highest 3** main disabling condition classifications;
  1. Learning difficulties - 1,424 children (52.4%).
  2. Behavioural disorder – 483 children (17.8%).
  3. Hyperkinetic syndrome, also known as ADHD, - 243 children (8.9%).
- **1,321 working age adults – highest 3** main disabling condition classifications;
  1. Learning difficulties – 274 working age adults (20.7%).
  2. Psychosis – 153 working age adults (11.6%).
  3. Arthritis - 96 working age adults (7.3%).
- **1,706 adults over state pension age – highest 3** main disabling condition classifications;
  1. Arthritis – 557 adults over state pension age (32.6%).
  2. Back pain – 122 adults over state pension age (7.2%).
  3. Disease Of the muscles, bones or joints - 116 adults over state pension age (6.8%).



Estimates and projections of the number of people with **visual impairments, hearing impairments** and **impaired mobility** in the city have been produced using national prevalence rates applied to local population data.

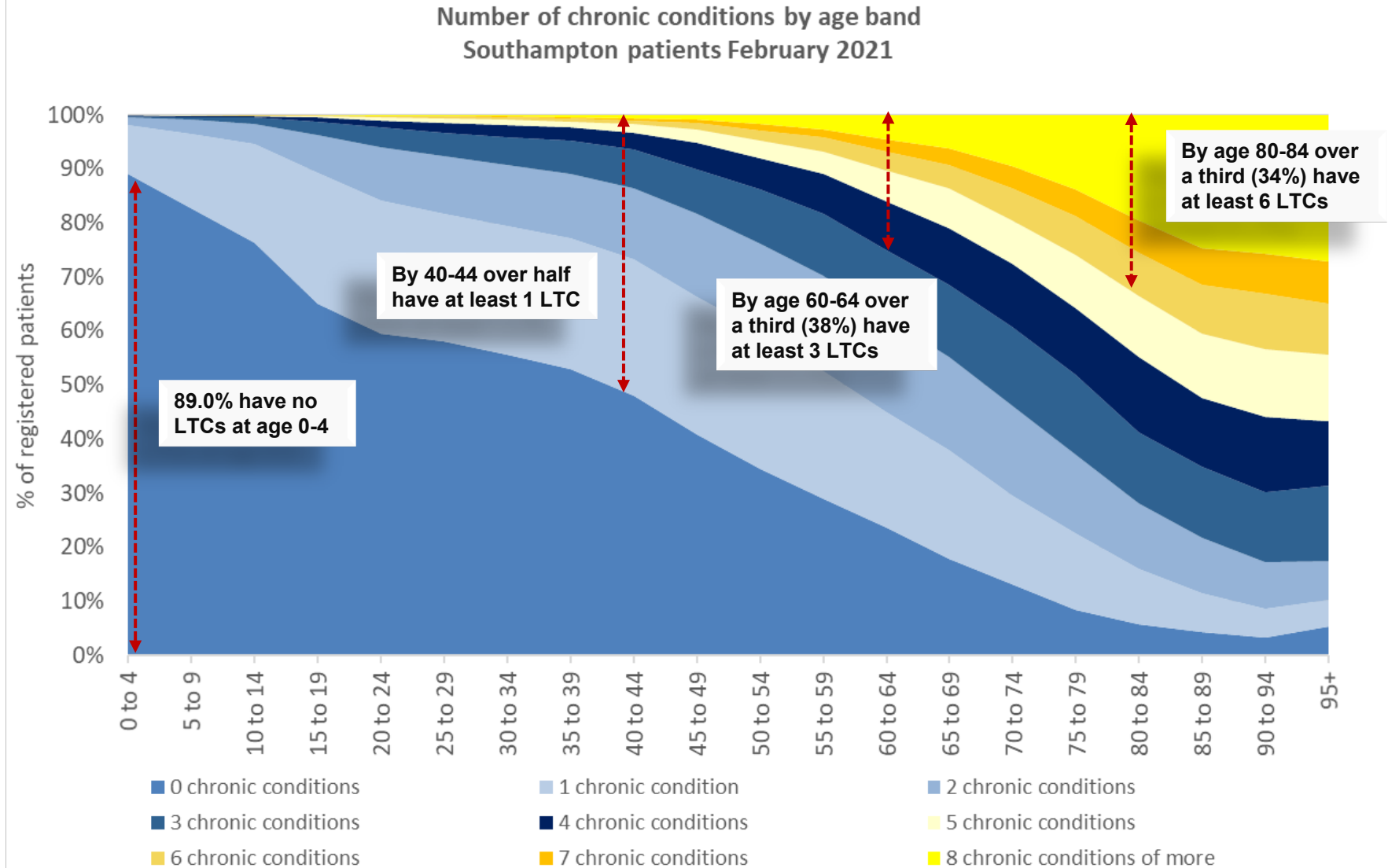
Disability by age group and year	2021			2040		
	18 to 64	65+	Total	18 to 64	65+	Total
Visually impaired	110	4,071	<b>4,181</b>	113	5,573	<b>5,686</b>
Hearing Impaired	13,761	23,674	<b>37,435</b>	13,643	31,732	<b>45,375</b>
Impaired mobility	7,327	6,353	<b>13,680</b>	7,201	8,631	<b>15,832</b>

Source: POPPI and PANSI

Impaired mobility for 18 to 64 years old is assessed against experiencing either moderate, severe or complete difficulty with mobility, and certain activities are limited in any way as a result, such as walking or climbing stairs. Impaired mobility for 65+ years old is defined as Activities include: going out of doors and walking down the road; getting up and down stairs; getting around the house on the level; getting to the toilet; getting in and out of bed

There are **3,382** individuals known to SCC Adult Social Care as visually/hearing impaired and/or with a physical disability.

Approximately **10,300** residents have moderate or severe frailty and are at higher risk of adverse outcomes such as falls, disability, admission to hospital, or the need for long-term care. (CHIE)



Source: Sollis Clarity Health Analytics (ACG version 11.1/11.2) February 2021



# Leading causes and risk factors of disability

Causes	Southampton	Portsmouth	Hampshire	Isle of Wight	England
Low back pain	1	1	1	1	1
Diabetes	2	2	2	2	2
Depressive disorders	3	3	3	3	3
Headache disorders	4	4	4	4	4
Neck pain	5	5	6	6	5
Gynecological diseases	6	6	9	13	9
Other musculoskeletal	7	7	8	10	7
Anxiety disorders	8	8	11	12	10
Age-related hearing loss	9	9	5	5	6
Asthma	10	11	12	8	14

Top 10 causes attributed to Years Lived with Disability (YLDs)

Low back pain and diabetes are the two leading causes of disability across the STP

Risks Factors	Southampton	Portsmouth	Hampshire	Isle of Wight	England
High body-mass index	1	1	1	2	1
High fasting plasma glucose	2	2	2	1	2
Smoking	3	3	3	3	3
Alcohol use	4	4	4	4	4
Drug use	5	5	5	5	5
Occupational ergonomic	6	6	8	8	7
High blood pressure	7	7	6	6	6
Low bone mineral density	8	8	7	7	8
High processed meat	9	9	9	9	9
Particulate matter	10	10	10	12	10

Top 10 Risk Factors attributed to Years Lived with Disability (YLDs)

High body mass index and high fasting plasma glucose are the two leading risk factors causing disability across the STP

# Thank you

Happy to take questions and discuss

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