

Life in the time of COVID

The experience of disabled people
in the North East

Serving Tyne & Wear and Northumberland
communityfoundation.org.uk

A report by:



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Contents

Introduction	2
Disabled people after COVID-19	2
Living our lives: inside.....	2
How has this been affected by COVID-19?	4
Living our lives: outside	5
Social barriers	6
Economic barriers	7
Physical barriers	7
Representation and voice	9
Support for people in the community	10
Conclusion	11
Appendix: Disability organisations in the North East.....	12

Introduction

This diversity and inclusion report captures the daily realities of life for disabled people in our region.

The beginning of this commission, which was intended to capture the daily experiences of life for disabled people, corresponded with COVID-19 which, between March and May 2020, has led to 22,000 deaths of disabled people across the UK. The United Nations says that the COVID-19 crisis is deepening pre-existing inequalities, exposing the extent of exclusion and highlighting that work on disability inclusion is imperative¹. As a result of the crisis and its implications, we have attempted to capture a mix of pre-and post-pandemic experiences, with a realisation that life will now be heavily influenced by COVID-related issues.

Disabled people after COVID-19

The UK has been experiencing a crisis of previously unknown proportions and as such everybody is doing their best; it is a large-scale pilot experience, there are many lessons to learn for rebuilding and reconfiguring services, and of course in preparation for future situations. The authors recognise and thank all those people, both non-disabled and disabled, who have assisted and supported members of all communities. At this time, we think it has value in reporting the experiences of disabled people during the pandemic to date, and so that is what is presented here.

As part of the crisis response, many routine services were closed down or suspended until lockdown restrictions were eased or face-to-face contact could be replaced by online contact. The Government prioritised support that did exist, for those with medical and health needs; the clinically vulnerable. There are always problems with defining cut-off points, with those under that point being aggrieved, but it needs to be noted that there have been a number of disabled people who have not been seen as “vulnerable” enough to qualify for support and that has had impacts, we talk about later in the report. On the flip side to this, some disabled people have benefitted from a new level of community support,

with many instances of help provided by local people. Indeed, there has been a general blossoming of civil society and disabled people’s organisations are no exception. User led organisations have responded very well to the crisis by communicating with members of the disabled community, providing information, advice and support. Disabled people have been able to get accessible and meaningful information from people who understand. Indeed, VCSE organisations in general have shown great agility and innovation in responding to their service users’ needs during the crisis and found great value in providing online support. They have been able to reach some service users who would not normally have been reached through traditional methods.

Living our lives: inside

There are many disabled people who go about their daily lives with an independence similar to non-disabled people. There are many others who require different levels of assistance to maintain their own independence whilst living in in the community, and daily life for many incorporates:

- Personal Assistance from another person, in many forms and in varying degrees, from getting out of bed in the morning, washing, eating, getting to work. Many disabled people live their lives with very little personal assistance, but many cannot function without input in different aspects of their lives. Completing tasks with assistance take longer than independently completed tasks.
- Managing varying degrees of medical interventions and daily procedures, from none/very little to coping with the effects of medications, having a range of toilet needs, to different diets in specific forms. These take time out of the day.

The range of impairments experienced by many disabled people require a focus on the self in a way which is not the case with non-disabled people: bodies do not work in certain ways and attention must be paid

¹ United Nations, 2020. Policy Brief of the UN Secretary-General: A Disability-Inclusive Response to COVID-19.

to ensure that they are contained or their impacts reduced. As Michael says:

I cannot think about what other people want, until I get myself sorted, it can take ages but if I don't get them sorted then I can't concentrate on anything. You can't talk sense when you're worried about peeing your pants.

Attention to these impairments occupies varying degrees of people's days; some very little, some a lot. There are certain tasks that disabled people need assistance with, like dressing or travelling, that require the input another person. This 'other', can come from different sources: the assistance can be provided by a

family member, parent, partner, where there is no economic exchange value (i.e. you do not pay your mother for putting your trousers on); and assistance is purchased, usually at an hourly rate. If the disabled person has both systems in place, they must manage both scenarios, and both have their advantages and disadvantages: Douglas said:

I try and keep the care and the relationship separate, but inevitably they all get mixed together. It's really difficult having your shoes put on [by your partner] because you need to go out when you've had a row.

Table 1 Assistance from family: advantages and disadvantages

Advantages	Disadvantages
Detailed knowledge of needs	Difficulty in separating task from emotional response of family member
Available around the clock	Causing injuries and premature ill-health as a result of extra burden
	Assistance tasks are added to a household list and sometimes must wait

Figure 2. Assistance from paid assistants: advantages and disadvantages

Advantages	Disadvantages
Independent and external, making assistance neutral (i.e. as it is a paid for service, no need for thanks/it is removed from the relationship)	A source of finance must be found if it is not sufficient, then assistance is prioritised, which impact upon your life e.g. operating a hoist for showering over getting a room painted.
Tasks can be done when required	

Local government has the responsibility of ensuring an individual has sufficient assistance to be able to participate in daily life and has financial instruments, including Direct Payments (made to an individual to enable them to pay for their assistance and care) and Personalised Health Budgets (a similar thing but relation to health, not care) to help disabled people pay for care, assistance and health related needs. If such care and assistance cannot be organised for people who live in the community, the local authority provides residential care. Independent living, and facilities to enable disabled people to live independently, was and remains a central tenet of disability rights/the disabled people's movement. Emily said:²

If I did not have Access To Work paying for my assistive technology I would not be able to work, simple as.

How has this been affected by COVID-19?

As members of the community, many of the problems caused by the COVID-19 crisis were shared with non-disabled people, e.g. fears about the virus, getting the shopping in and worries about jobs.

However, as the result of impairments and often complex vulnerabilities, the virus has taken a greater toll on disabled and elderly people³; 60% of the fatalities have been of people with disabilities⁴. For example:

- Approximately 22,500 disabled people of all ages died due to COVID-19 between 2 March and 15 May, compared with about 15,500 non-disabled people⁵.
- A total of 134% more people with learning disabilities or autism have died during the Coronavirus crisis than is statistically normal, (compared to 34% in the general population⁶)

² The reference here is to Access to Work, a government fund paid to individuals to enable them to work.

³ United Nations, Op.cit.

⁴ https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronaviruscovid19relateddeathsbydisabilitystatusenglandandwales/2marchto15may2020?fbclid=IwAR0osaJyCU6bJfnlGL1lmlAiJT7d4r_-8E7caGF5bWOeO1z7RYe8ovOncWU

according to data published by the Care Quality Commission⁷.

- Younger disabled males (those "limited a lot" in daily life and aged between nine and 64) were 6.5 times more likely to have died due to COVID-19 than non-disabled males, while disabled females between nine and 64 were even more at risk, with a rate of death 11.3 times higher than non-disabled females in the same age group⁸.

There are a number of specific issues in addition to the shared problems which has disproportionately affected disabled people, creating additional pressure and/or making situations more difficult. Shelley said:

Disabled people are more at risk, I feel like, if I got it, I would die.

The problems caused by the crisis that are specific to disabled people include:

- **Reduced assistance:** Through reducing/stopping human assistance, COVID-19 has impacted on independence and inclusion has been reduced through the usual support not being available, as a result of the lockdown or services closed. Reduced external assistance means more reliance on unpaid carers which can have an impact on family relationships, mental health and independence. Mali said:

My support workers stopped coming. I felt deserted.

- **Negative health impacts:** Outside of COVID-19, cancelled or postponed clinical health interventions have caused significant physical and mental health difficulties for many disabled people. This is likely to continue for a time until backlogs are gone through and other (healthcare and social welfare) services recover. In addition to this, disabled people who rely

⁵ Office for National Statistics: <https://www.ons.gov.uk/releases/coronaviruscovid19relatedmortalitybyreligionethnicityanddisabilityenglandandwales2march2020to15may2020>

⁶ Office for National Statistics

⁷ <https://www.disabilityrightsuk.org/news/2020/june/134-increase-deaths-people-learning-disabilities-during-pandemic>

⁸ <https://www.disabilitynewsservice.com/coronavirus-call-for-inquiry-and-urgent-action-after-shocking-disability-death-stats/>.

upon personal assistants and healthcare have found it difficult to get PPE for themselves and for their assistants, creating more concern and negative health impacts. Molly continued:

I normally get three monthly injections to help with my toileting but that got stopped because of the lockdown, and I suffered because of that. I couldn't wee properly.

- **Difficulty accessing basic needs:** Despite some fantastic community support, accessing basic services, such as priority shopping slots, has been a problem for many resulting in many people going without food and other key resources⁹. Unless identified as priority vulnerable, many have been unable to get priority shopping slots and home delivery. There are reports of many significantly disabled people and those with chronic illness who did not make it onto the list and have been left without food and been unable to leave the house to find food. Phillip said:

I was stuck, I was not on the clinically vulnerable list but there was no way I could go out and get the shopping.

- **Increased expenses:** in addition to an existing "disabled tax", where products intended for disabled people are either highly priced or additional products are needed as part of daily living (e.g. toilet roll or heating). During lockdown, disabled people faced additional costs as a result of substitute purchasing for essential goods, and the cheaper food stores not having online delivery services. Sal said:

I spend a lot on cleaning wipes and toilet roll for my general care in normal times ... in lockdown I had to buy the expensive ones or couldn't get them so have been forced to use towels, it's been hell, not getting what I need.

- **Fear and confusion:** COVID-19 has resulted in a disproportionate number of disabled people's

deaths (who are twice as likely to die from COVID-19 than non-disabled¹⁰) and there is a resultant fear of contracting the virus. This is exacerbated by insufficient/no PPE for themselves and workers and there has been mixed messaging around the guidance for those on the extremely clinically vulnerable list, lending support for the need to be clear with adequate communication channels. Nicky said:

I feel like if I go out I might catch it and if I get it I will die, simple as that.

Living our lives: outside

Public space has been the battleground of disabled people ever since there has been a civil rights movement, as a result of the multiple access barriers which prevent participation.

Disabled people would like to say much has changed over the years (especially since 1994 and 2010 Equality Acts), but it has not and public environments, such as shops, businesses, places of work, remain as inaccessible as ever. Disabled people have been chipping away at these contested environments since the 1980s. David says:

I was fighting then [in the 90s for Disability Discrimination Act (DDA)] and I am fighting now.

If we look at common barriers experienced by disabled people, we can broadly sort them into social, economic and physical categories and they include:

⁹ Boggie, R. 2020. Difference: Manifesto for a New Normal.
¹⁰<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronaviruscovid19relateddeath>

[sbydisability/statusenglandandwales/2marchto15may2020#main-points](https://twitter.com/sbydisability/statusenglandandwales/2marchto15may2020#main-points)

Social barriers

- Interpersonal encounters and social relations can undermine the disabled person's psycho-emotional well-being.
 - Disabled people learn to respond to the expectations of non-disabled in ways that range from acting as the passive disabled bystander, the grateful recipient of others support and the non-problematic receiver of others disabling attitudes, all of this has self-defining impacts.
 - Asking/waiting for assistance creates a dependency with staff – everybody is busy, you become beholden.
 - People not providing enough information, e.g. distance/route between places.
 - Sounding like things are an effort.
 - Things are amplified/exacerbated when people take umbrage when asked for more details, making you not want to ask again, leads to accidents.
- Micro aggressions and everyday disablism (see box 1).
- Varying degrees of verbal and physical bullying in the community or abuse in residential settings.
- Devaluing of disabled people through negative images in the media.

Box 1 What are Micro Aggressions?

Micro Aggressions?

It is not just physical barriers that stops people doing things. There are a plethora of other micro aggressions and other social barriers which prevent participation, meaning sometimes it is easier just to stay at home.

Every time disabled people are in the public domain, they normalise and internalise the numerous small insults, putdowns, jokey sarcasms other similar negative approaches from other people. There can equally be examples where 'kindness' is used in an overbearing and controlling way. On their own, these may go unnoticed, but as a collective, they become an expectation, a normal part of everyday life for disabled people. These are similar to the feminist #MeToo movement. These are common comments from members of the public:

Want a push? [to the wheelchair user]

Have you been drinking already? [any wobbly condition from cerebral palsy to Multiple Sclerosis]

I know you like to be so independent! [anyone disabled opening a door by themselves]

Let me get that for you? do you want a hand [constant request reminding you of your impairments and that you cannot do things independently]?

I have a sister/uncle/friend who is disabled [or I have personal experience of how difficult your life is].

There are also a host of non-verbal cues and signs which serve to cast judgement and exclude, experienced as different levels of micro aggression. And unfortunately, as like begets like, a response from disabled people who have been experiencing these constant experiences all of their lives can be tainted by anger and aggression.

Malathi said:

I leave the house in a good mood, and most of the time I come back in a bad one because of all the shit I get.

Economic barriers

- ‘Disabled tax’, extra travel arrangements, accommodation requirements, heating, washing, cleaning expenses e.g. cost of average bike, £100, repaired everywhere; price of handcycle £1000, needs specialist repairs.
- High cost of assistive technology.
- Inadequate disability benefits and high cost of contributions e.g. bedroom tax, e.g. Access to Work require a 2/7 contribution.
- Discriminatory ‘systems’, including health and social support, underinvestment in equipment & skills, e.g. unsuitability of beds.

Physical barriers

Inaccessible environments (including school), transport, houses and public buildings:

- Steps and stairs.
- Narrow places, e.g. restaurants.
- Heavy doors.
- Street clutter.
- No drop kerbs, high kerbs.
- Parking - no or few blue badge parking.
- Toilets - no accessible ones changing rooms (big enough for an adult and a carer to attend to their toilet needs).
- Cobbles and uneven surfaces, including lumpy path material.
- Sloped surfaces.
- No hearing loops/sign language/visual aids.

Travel infrastructure – waiting to be “helped” off train, bus, airplane.

- At school, e.g. no assistive technology.
- Reduced choices, e.g. unable to go on school trips.
- Low/no participation in sport.

If we look at access problems at work, previous to COVID-19, we see a mix between physical and social:

- Office layout and furniture, e.g. tables too low for wheelchair users.
- Kitchens, bin, kettle, cups up high.
- Meeting rooms.
- Toilets.
- Fire escapes.
- Workstations.
- Plugs.
- Prep work doubles/trebles/quadruples times.
- Travel, lots of it, meetings back to back.
- Workday length.
- Lack of flexibility around hours.

Box 2 presents an excerpt from a speech given by the chair of Difference¹¹ to regional business community, which illustrates barriers in everyday life and employment.

When COVID-19 created the necessity to stay and work at home, it normalised the situation for many disabled people, i.e. staying at home for protracted periods is something disabled people are very used to. This increases the control and agency for disabled people, in an environment in which they have control over. Indeed COVID-19 has precipitated a universal move for services, or service elements, to move online, and this has made it easier to work from home and made valid day-to-day situations. There have been instances of greater flexibility in services and working practices, including direct payments, which has been an improvement on pre-COVID-19 situation. Moving online for communication, assessment and services has been welcomed by many as it reduces the need for external assistance, offers increased independence and reduced health burden. There are however related digital infrastructure access issues (see later).

Post crisis we enter the brave new world of social distancing and the need for Personal Protection

¹¹ Difference is a North East disability rights and voice charity working to change perceptions of disability (www.differencenortheast.co.uk).

Source: <https://differencenortheast.org.uk/news/>

Equipment (PPE) in public environments which for disabled people can be difficult as a result of the assistance that is needed. In external environments,

both of these things are necessary to reduce risk of contracting the virus and increase the vulnerability to virus load.

Box 2 What it means when I get to work.

When I get to work.

If you've got a person sat in front of you for an interview who has a significant impairment, I can tell you from personal experience that that person might have:

- Needed a team of carers to help them get up, dressed, breakfast and through the door.
- Got on their bus to find the wheelchair space full of luggage and buggies.
- Arrived for their train to find the staff hadn't received the message that they had booked assistance, or the wheelchair space had been double booked, or that the toilet didn't work so they couldn't board.
- Faced abuse by the taxi driver who didn't want to go to the effort of getting his ramps out or clamping their wheelchair in place.

What I would say is that you are a very lucky employer if you've got someone in front of you that already that day has:

- Managed a team of people and conveyed a set of complex instructions in difficult circumstances.
- Negotiated with a bus full of people and influenced them to do something they didn't want to do.
- Problem solved to get over a long set of barriers to enable them to continue on their journey.

It is therefore important that the needs of disabled people in relation to these factors are properly considered, as the non-disabled world adjusts to the new socially distanced ways of living and working. Unfortunately, there are many reports of organisations/places/businesses reopening and because of social distancing, not permitting wheelchairs. Sally says:

I wasn't allowed in the shop in my chair, they explained it was because of social distancing.

Many disabled people are not able to wear masks and a number of experienced exclusion from certain public areas because of this. Josie says:

I can't wear a mask [because of my disability] and they would not let me in no matter how much explaining I did.

There are many examples of the non-disabled world using the resources and environments intended for disabled people, for social distancing purposes. For example, Lichfield Council has suspended accessible parking for disabled people to provide additional space for non-disabled shoppers¹²; this is also shown by the following photograph of accessible parking in a hardware store.

¹² Twitter, July 2020, <https://twitter.com/LichfieldLive/status/1286397410357501953>

Picture 1 Where has my parking gone? Photo from @KateStanforth 



Box 3 Difference: a regional voice for disabled people.

There is an inherent tension faced by organisations who advocate for change and who also deliver a service. Principally, commissioners may not appreciate campaigning work that contains criticism. There are also problems of reliance where organisations become too dependent on one commissioner and when funding regimes change, organisations face closure. This is the reason behind the current dearth of disability rights organisations in our region, as the organisations who campaigned for the 1994 Disability Discrimination Act, became service deliverers and when austerity hit and funding was withdrawn, many organisations closed. Difference was created in 2017 against this backdrop and as a response to a lack of voice of disabled people in the North East. The organisation is working in partnership with others to improve people's situations and reduce inequalities. They have recently released their Manifesto for a Better Normal, which contains the lessons learned from COVID-19 and calls for increased involvement of disabled people at all levels of decision-making. Difference is also working to increase employment rates amongst disabled people. More information can be found on: www.differencenortheast.org.uk.

Representation and voice

Disabled people feel very strongly about representation and voice as a result of having been excluded or left last in the priorities over long periods of time in their history.

Disabled people have been oppressed, victimised and side lined, and in United Kingdom had to wait until 1994 for serious legislation upholding rights and guarding against discrimination and inequality. As a result, there are many sensitivities and requirements for clarity for future policy-making. As Caroline said:

If we don't make a noise then we just get ignored, so it's important we do.

Disabled people realise that a crisis response is unusual and does not represent business as usual. However, particularly as situations are emerging and the response is continually developing, disabled people and their interests need to be represented amongst the decision-making process.

Similar to the Oxford University Disability Law and Policy Project¹³, disabled people are concerned that in the creation of new post COVID-19 legislation, disabled people's services, funding or recognition may disappear or be downgraded. The most direct concerns include:

- The first, and most important, the emergency COVID-19 Bill legislation which the government passed in March 2020, 'easing' the requirements on local authorities to provide care for disabled people under the Care Act 2014. There is a subsequent worry that councils may not restart services as they had finished them and may downgrade provisions for disabled people¹⁴.
- The Equality Act 2010 puts a duty on policymakers to minimise disability-related disadvantage of new policies and practices. In order to avoid this happening, disabled people need to be involved in discussions with local authorities, businesses and other relevant organisations concerning new service configurations, including new risk assessment, social distancing directions and emergency plans.
- Disabled people need to be involved in reviewing Direct Payments and Personal Health Budgets¹⁵ to ensure disabled people are in control of their support. Disabled people have much to offer in terms of learning, to support a new configuration of personal support based on their experience during the crisis.

There are also issues of access to and equity of the online world which concerns disabled people. The large scale move to online services and support has highlighted the problem of digital exclusion, caused by affordability, poor infrastructure, low digital literacy and inaccessible design. The pandemic has highlighted that digital access and inclusion is now essential, not a luxury. Investment needs to take place to improve access to data services, equipment and training so that service providers and service users are able to use digital services in an inclusive and accessible way. As

Pauline reflected about barriers caused by her blindness and inaccessible digital environments:

I cannot access the goods and services I want online ... a lot of the time because it's all so badly designed and inaccessible. That's because I'm blind. Is that my bad or theirs? Must be mine!

Support for people in the community

There are 11 voluntary sector organisations across the North East which provide services to all disabled people, eight which cater for people with visual impairments and 34 for people with learning disabilities and autism (see appendix 1).

The most prominent generalist disability organisations include Disability North in Newcastle, Adapt North East in Hexham, and Darlington Association on Disability. There are single issue organisations, such as Newcastle Vision Support, MS groups across the region and some deaf groups, which often run activities or provide peer support. Many of these organisations are run by committed individuals, disabled people or their parents and carers, who fund raise, deliver small scale services and provide support through volunteering. Until recently there was a gap in the organisational landscape in the form of a disability rights charity, that was created as a result of the transformation of disabled people's organisations from rights to service delivery bodies. As victims of austerity, disabled people's services were amongst those to be cut which left the landscape with little voice or representation. The situation has now been rectified and Difference, a disability rights charity, has now been created and is developing its portfolio.

¹³ <https://www.law.ox.ac.uk/research-and-subject-groups/oxford-university-disability-law-and-policy-project>

¹⁴ <https://www.bbc.co.uk/news/uk-53221435>

¹⁵ These are both funds which are controlled by the individual (the amount of fund is determined through assessment by a social

worker and health professional). The individual can then purchase their own assistance, care and health services as they wish, intending to give those people control over their own care.

Conclusion

Many disabled people manage their impairments and live independent and happy lives; others are not able to manage their impairments on their own, all of the time and require input and assistance.

In the community disabled people face many access-related barriers which serves to exclude and make it more difficult to participate in social or professional worlds. COVID-19's impact has been extreme for disabled people in relation to the number of fatalities; there has also been positive outcomes, including affirming disabled people skill set of self-isolation, and demonstrating that working from home as a viable option, and one which can be used by many disabled people. This learning needs to be embedded in local administration and business practice going forwards. It is also important that disabled people are involved in discussions and debates when creating policy that affects us, such as planning for the new care act. A group of academics and human rights professionals¹⁶ also called for the government to set up a Response and Recover Group, made up of disabled people and representatives of disabled people's organisations, to ensure disabled people are 'central to decision-making' on the country's economic and social recovery. This latter influence and involvement is now possible on a regional level as a result of the existence of Difference.

¹⁶ Tidball, M., Lawson, A., Lee, L., Herring, J., Sloan, B., Holloway, D. & Ryan, S. 2020. An Affront to Dignity, Inclusion and Equality: Coronavirus and the impact of law, policy and practice on people

with disabilities in the United Kingdom, Oxford University Disability Law and Policy Project.

Appendix: Disability organisations in the North East

Y	Learning disability and autism (n=30)
G	Visual impairments (n=8)
W	All disabilities (n=11)
S	Single issue organisation (n=5)

	Organisation	Location	Email & website
W	Adapt North East	Northumberland	generaloffice@adapt-tyndale.org.uk www.adapt-ne.org.uk
Y	Autism in Mind	Sunderland	https://autisminmind.com carole@autisminmind.com
Y	Better Days	Newcastle	betterdays1999@hotmail.com www.better-days.org.uk
G	Blind Ambitions	Newcastle/Tyneside	www.blind-ambitions.co.uk
G	Blind Life in Durham	Durham	www.blindlifeindurham.org.uk
W	Blissability	South Tyneside	enquiries@blissability.co.uk https://www.blissability.co.uk/wp/
W	Blyth Valley Disabled Forum	Northumberland	www.blythdisabledforum.co.uk
W	Darlington Association on Disability	Darlington	www.darlingtondisability.org
W	Difference	North East	www.differencenortheast.org.uk hello@differentnortheast.org.uk
Y	Journey	County Durham, Newcastle Northumberland	http://www.journeyenterprises.co.uk
S	Deaflink	Newcastle	heidi@deaflink.org.uk www.deaflink.org.uk
W	Disability North	Newcastle	www.disabilitynorth.org.uk
Y	Down's Syndrome North East	North East	www.dsne.org.uk Contact@DSNE.org.uk
Y	Durham Otters Swim Club	County Durham	otters@durham-otters.org.uk http://www.porphyria.org.uk/otters/

Y	Gateshead Access Panel	Gateshead	admin@access-gateshead.org.uk www.access-gateshead.org.uk
Y	Gateshead Autism Group	Gateshead	info@gatesheadautismgroup.co.uk www.gatesheadautismgroup.co.uk
Y	Gateshead People Self Advocacy Group	Gateshead	gatesheadpeople@gmail.com www.gatesheadpeople.btck.co.uk
Y	Gateshead Mencap	Gateshead	donnamad2@hotmail.com www.gatesheadmencap.org/
G	Gateshead & South Tyneside Sight Service	Gateshead & South Tyneside	contactus@sightservice.co.uk https://www.sight-service.org.uk
Y	Gateway Wheelers	Chester-le-street	officegatewaywheelers@yahoo.co.uk www.gatewaywheelers.org.uk
Y	Grenfell Club	Redcar	www.grenfellclub.org
W	Hartlepool Access Group	Hartlepool	info@hartlepoolshopmobility.co.uk www.hartlepoolshopmobility.co.uk
Y	Haswell & District Mencap	County Durham	enquiries@haswellmencap.co.uk https://www.facebook.com/haswellmencap
W	Inclusion North	North East	info@inclusionnorth.org www.inclusionnorth.org
Y	Incontrol-able CIC	Hartlepool	info@incontrol-able.co.uk www.incontrol-able.co.uk
Y	Integrating Children and Young People	County Durham	integratingchildren@outlook.com www.integratingchildren.co.uk
Y	Larchfield Community	Middlesbrough	https://www.camphillvillagetrust.org.uk/locations/larchfield-community/
Y	Lawnmowers Independent Theatre Company	Gateshead	thelawnmowers@msn.com www.thelawnmowers.co.uk
Y	Launchpad	Newcastle	https://launchpadncl.org.uk/ launchpadncl@aol.com
Y	LD North East	North Tyneside	www.ldne.org.uk info@ldne.org.uk

Y	Little Cog	Stockton	www.littlecog.co.uk littlecog@rocketmail.com
Y	MENCAP	North East	help@mencap.org.uk www.mencap.org.uk
S	ME North East	North East	info@menortheast.org
S	MS Research and Relief Fund	Northumberland Tyne & Wear	info@ms-researchandrelief.org www.ms-researchandrelief.org
S	MS Society branches	North East	mssociety.org.uk
W	Newcastle Disability Forum	Newcastle	enquiries@ndf.org.uk
W	Newcastle Guide Dogs	North East	newcastle@guidedogs.org.uk www.guidedogs.org.uk
G	Newcastle Vision Support	Newcastle	www.newcastlevisionsupport.org.uk info@newcastlevisionsupport.org.uk
Y	New Prospects	North Tyneside	www.newprospects.org.uk
Y	North East Autism Society	North East	info@ne-as.org.uk www.ne-as.org.uk
S	North Regional Association for Sensory Support	North East	www.nrass.org office@nrass.org
W	North Tyneside Coalition of Disabled People	North Tyneside, parts of Northumberland	ntcdp@ntcdp.co.uk www.ntcdp.co.uk
Y	North Tyneside Disability Forum	North Tyneside	info@ntdf.co.uk www.ntdf.co.uk
G	Northumberland County Blind Association	Northumberland	info@ncba.org.uk www.ncba.org.uk
Y	Percy Hedley Foundation	Newcastle & North East	foundation@percyhedley.org.uk www.percyhedley.org.uk
Y	Pioneering Care Partnership	County Durham, Teesside	enquiries@pcp.uk.net www.pcp.uk.net
Y	Remploy	Newcastle, Sunderland, national	newcastle.branch@remploy.co.uk www.remploy.co.uk

G	RNIB	North East	www.rnib.org.uk
Y	Skills for People	Newcastle	information@skillsforpeople.org.uk www.skillsforpeople.org.uk
Y	Sunderland People First	Sunderland	http://sunderlandpeoplefirst.com/
G	IEWS Newcastle	Tyneside	https://views-web.org/ viewsemail1@gmail.com
G	Vision Sense	South Tyneside	susie@visionsense.co.uk www.visionsense.co.uk
Y	Wear Mencap	County Durham	joanne@wearmencap.org.uk www.wearmencap-com.webs.com
Y	Your Voice Counts	Gateshead, Newcastle, South Tyneside	mail@yvc.org.uk www.yvc.org.uk

Let's talk

We hope that this report will inspire more of you to give to causes that address diversity and equality issues.

If you would like to discuss this report and what you could do to help, please contact us:

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Want to know more?

You can download our diversity and equality research reports via our website at www.communityfoundation.org.uk/vitalsigns

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