Participation in and by Communities: What can we learn from Community Development?

Carolyn Kagan & David Race
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Summary and Recommendations

Many of the challenges facing both the purchase and provision of services for and with people with learning disabilities are linked to ways of enhancing their social inclusion, and reducing their social exclusion. Most people now live with or near their families alongside other people in the community. This means that the link between individual experience and community life is becoming stronger.

Services focus most of their resources on support for individuals. Increasingly however, experience is showing that a focus on strengthening the competence of communities enhances opportunities for individual people with learning disabilities to live fulfilled lives in, and as part of their communities.

This report draws on the principles and practice of community development which may prove useful in underpinning necessary changes in the activities of learning disability services in order to enable more attention to be paid to the strengthening of the competence of communities. The report highlights the following features of community development:

- concern with disadvantaged people and social inclusion
- participation
- collaboration
- partnerships
- learning and development
- policy and practice
- enterprise.

Drawing on experience in the learning disability field and in community development, a number of points at which community development could contribute more fully to services seeking to include disabled people in social life are suggested. These include:

- identifying the strengths and needs of communities
- identifying and using community networks and resources
- empowerment
- contracting
- training
- planning and policy change.

Finally, the report summarises some key experiences of learning disability service in attempting to increase the competence of local communities.

It is clear from this broad overview that future services for people with learning disabilities have much to learn from, and contribute to, community development, and a continued dialogue between the two fields is recommended.
Introduction

The past decade has seen the transformation of services for people with disabilities from institutionalised care in large segregated, often isolated institutions, to support in ordinary houses in ordinary streets.

A strong set of values and principles underpin the commissioning and provision of services and these are reflected in Government legislation and guidance\(^1\) as well as in the local strategy statements\(^2\).

One formulation of values which has guided service developments throughout the north west and which inter-relates the experiences of people with learning disabilities, the accomplishments of the services, and the aims we are working to achieve is shown in Table 1.

<table>
<thead>
<tr>
<th>Valued Experiences (for people with learning difficulties)</th>
<th>Community Challenge (the aims we are working to achieve)</th>
<th>Service Accomplishments (what the service should aim to achieve)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharing ordinary places</td>
<td>Include all people and activities</td>
<td>Community presence</td>
</tr>
<tr>
<td>Making choices</td>
<td>Protect integrity by creatively resolving conflicts</td>
<td>Protecting rights and promoting choice</td>
</tr>
<tr>
<td>Developing abilities and sharing personal gifts</td>
<td>Develop all available resources wisely</td>
<td>Recognising interests and gifts; improving competence</td>
</tr>
<tr>
<td>Being respected and having a valued social role</td>
<td>Offer valued roles to everyone by confronting limiting beliefs and their historical consequences</td>
<td>Promoting valued roles</td>
</tr>
<tr>
<td>Growing in relationships</td>
<td>Promote interdependence among people</td>
<td>Community participation</td>
</tr>
</tbody>
</table>

Table 1

Values Underpinning Services for People with Learning Disabilities\(^3\)

The relocation of services from institutions to ordinary houses has done much to increase the community presence of people with learning disabilities. However, many people, and the staff supporting them have found it very difficult to contribute meaningfully to community life and have sometimes found local people to be unwelcoming.\(^4\)

Thus, it has been recognised that supporting people in communities does not always lead to their being a part of communities. Whilst the professionals working in services, as well as people with learning disabilities and their families, have learnt a great deal about how to enhance people’s skills, interests and opportunities, little attention has been paid to the task of ‘opening up’ communities\(^5\).

By opening up communities people with learning disabilities may be better able to contribute to their communities and develop meaningful local relationships. Services, too, may be able to utilise the
range of resources in any locality in supporting people with learning disabilities. Support of and work with individual people, and work to stimulate and strengthen communities will be necessary if people with learning disabilities are to continue to live more fulfilling lives\(^6\).

There are some examples of service provision that explicitly recognise the need for and value of working with local communities as well as people with learning disabilities in order to secure better quality experiences for people. In the past such activity has been relatively peripheral to service provision and vulnerable to budget cuts\(^7\). Elsewhere, successful progress in day and leisure activities has depended upon both working with people with learning disabilities and others in the community\(^8\).

Much of the work with communities appeared to correspond with aspects of community development. The NWTDT therefore convened a workshop in July 1995\(^9\) in order to:

(i) stimulate interest in working with communities

(ii) share innovative local practice

(iii) explore the value of community development as a process which may be used in the interests of people with learning disabilities.
The common interests of community development and community care are extensive. In particular the current emphasis in community care on user involvement and participation reflects the participative and empowerment focus of community development. Indeed, it could be said that ‘empowerment’ is the bridge between community development and life in the community for people with learning disabilities. The main features of community development are summarised in Figure 1.

Disadvantaged People and Social Inclusion

Community development has been concerned with social exclusion in a broad sense. Many people are disadvantaged through poverty and not able to participate fully in community life.

Whilst the links between community development and community care have yet to be fully explored, both community development and services for people with learning disabilities are concerned to help people be fully included in, not excluded from social life. In order to encourage inclusion, community development workers work within individual neighbourhoods, which echoes the emphasis on locality that is emerging in services for people with learning disabilities.

Participation

Community development has always aimed to be anti-discriminatory and to seek participation in community life by all. It is recognised that socially excluded people are often actively discriminated against. They are, therefore, actively sought out in order to be supported and encouraged to participate in local activities. Many people with learning disabilities, too, are excluded...
and service providers struggle to find ways of helping them to participate.

**Collaboration**

Community development recognises the value of people working together, often on matters that affect not just themselves but a wider constituency of local people. Collective action is considered important as a principle, and as a method of working for change. The self advocacy and group advocacy movements within the lives of people with learning disability probably reflect this principle and method most closely.

**Partnerships**

In addition to working collectively, community development emphasises partnerships and alliances with other groups of people who may share common interests or some similar concerns. Learning disability services have been slow to recognise the importance of developing alliances in order to strengthen and speed up change, although it is beginning to happen in some places.

**Learning and Development**

Both community development, and support services for people with learning disabilities, assume that people learn, develop and change with different social experiences. However, community development sees people’s participation in their own services, and the creation of their own systems of support, as being central to this learning and development. It is with this active learning and development that social exclusion will be reduced. Similarly, the stability of progress and continued improvements in the quality of life of people with learning disabilities is beginning to be linked to the involvement and participation of people with learning disabilities, and their families and friends. Ways are being found to enable them to contribute to the design, provision and evaluation of supports and services which will influence all of their lives.

**Policy and Practice**

Community development attempts to influence local and national policy regarding the social exclusion and inclusion of disadvantaged people, as well as practice in working with people, locally. Similarly, learning disability services have influenced policy by constantly highlighting good and better outcomes for people with learning disabilities and innovating with new ideas.

**Enterprise**

In recent years, community development has moved away from its historical links with social work to the enterprise sphere. Community development workers have accumulated considerable experience in helping local people develop small businesses in collaborative, often cooperative ways. They have learnt the value of small scale contracts which recognise the differences between communities, as well as the need for training and development support. As there is pressure to provide care from the independent sector, commissioners of services for and with people with learning disabilities may well be able to learn a lot from experience gained in community development. This may range from stimulating interest in developing small scale, local, participative care enterprises, to providing high quality services, well connected with the local people and families, and accountable to the people they serve.
Relevance of Community Development

From the above account we can see that the central features of community development have a lot in common, in principle, with service provision for and with people with learning disabilities. The field of community development could contribute more fully to services which seek to enable people with learning disabilities to become more fully included, through any of the activities summarised in Figure 2.

Figure 2
Contributions Community Development Could Make to Services for People with Learning Disabilities

Identifying Strengths and Needs of Communities
Community development workers may be able to alert commissioners and providers to the strengths and needs of local communities.

Local people will not necessarily understand and be prepared for community care, and there is, therefore, a large educative task to be undertaken. Community development workers have experience of using their knowledge of communities to help them understand new policy and practices, by explaining complex issues in plain language and relating them to people’s own experiences. Often a range of adult education methods are used, all the time negotiating with community groups themselves about how and what issues are to be discussed. They can help work out ways of ensuring broad based interest and participation in different kinds of events designed to educate communities about current practices and procedures.

If community resources are to be used more by people with learning disabilities, greater priority will have to be given to public education.

The lesson to be learned from community development is that communities will not automatically change when a new social policy - such as care in the community - is introduced. Rather, the needs for communities to be helped to prepare for the impact of care in the community should be recognised.
Identifying and Using Community Networks and Resources

If people are to be fully integrated the community development perspective would suggest that not only are the networks and resources of individual people with learning disabilities to be increased, but so are the methods and resources of the community. In other words, the capacity of the community to care must be enhanced by the creation of stronger, sometimes new, community groups.

Community development workers could use their skills of dealing with conflicting ideas, interests and personalities to enhance the mutual support and networks within a community. This might involve small group work, mediation and enabling disadvantaged people to participate.

Learning disability service providers are good at creating new opportunities for learning disabled people when none exist, but rarely get time or resources to develop local organisations or activities that will benefit everyone.

Empowerment

Empowerment within community development is the process by which disadvantaged people become socially included. Central to helping this happen is encouraging people to say what it is they want and then to find ways of making this happen. Community development workers following the principle of collective action, must then find common interests between people and strengthen these ‘constituencies of interests’. The starting point is to listen: whether this be to people with learning disabilities, their carers or family groups. Thereafter, community development workers may be able to help find ways of increasing or maintaining levels of participation in support, interest, advocacy or campaigning groups, and address issues of leadership and accountability of such groups. The experience community development has gained in developing community enterprise may well help people with learning disabilities, and those most concerned about them, establish new organisations offering support or even care\

Contracting

As discussed above, community development has gained expertise in developing contracts which are grounded in local interests, are small scale and recognise the differences between communities. Furthermore, the need for training and development support to community enterprise, however small is recognised. This expertise could be of considerable use to commissioners of learning disability services who wish to purchase small scale, good, local care.

Training

The emphasis within community development on collective action highlights the skills required to work effectively with small groups, often with conflicting member interests.

Community development workers are particularly skilled in knowing how groups function, and being able to win trust and cooperation. They are able to advise and offer training on working with communities, particularly in the methods of making connections, ensuring participation and assessing the strengths and limitations of community groups. Many of the challenges to learning disability services are central to community development, such as organising within localities, enabling local people to participate and working between and across agency and policy boundaries.
Planning and Policy Change

The biggest challenge for both community development and community care purchasers and providers is how to ensure that community is placed firmly on the community care agenda. This may entail a shift in health and welfare organisations towards considering collective action in the context of different neighbourhoods. Community development may also be required to take more account of the pressures and priorities of individual people who are supported by health and welfare organisations. Figure 3 summarises these shifts.

![Figure 3]

**Future Challenges to Policy and Practice for Community Development and Community Care**

Whilst the current emphases of community development are on neighbourhood viability and collective action, in the future greater account will need to be taken of individual development and health and welfare organisations. In contrast, services currently emphasise health and welfare organisations and individual development. In the future, services will need to encompass neighbourhood viability and collective action, if learning disabled people are to participate more meaningfully in local life.
The potential connections between community development and services for people with learning disabilities can be illustrated in practice. People working in a number of different projects presented their experiences at the workshop. Some of these are summarised below.

**Working In and With Communities**

Leisurelink from Stockport triggered off the discussions. The project worker outlined her work with schools on disability awareness as well as in the development of sports and social groups meeting learning disabled people’s needs. She emphasised the ways of working which made and built on local connections and led to the strengthening of communities’ capacities to include people with learning disabilities as well as enhancing the experiences of individual people.

Following this, workshop members worked in small local groups to share experiences of working in and with communities. The issues arising from the groups are summarised below. Initially, the possibilities for working with communities, and the obstacles that must be surmounted, were considered.
<table>
<thead>
<tr>
<th>Issue</th>
<th>Possibilities</th>
<th>Obstacles</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contracts</td>
<td>accountability</td>
<td>availability</td>
</tr>
<tr>
<td></td>
<td>standards</td>
<td>process</td>
</tr>
<tr>
<td></td>
<td>innovative practice</td>
<td>core expenses</td>
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<tr>
<td>Needs</td>
<td>care management</td>
<td>information</td>
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<tr>
<td></td>
<td>holistic overview</td>
<td></td>
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<td></td>
<td>communication</td>
<td></td>
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<tr>
<td></td>
<td>networking</td>
<td></td>
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<tr>
<td></td>
<td>co-ordination</td>
<td></td>
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<tr>
<td>2. Volunteers</td>
<td>individual involvement</td>
<td>difficulties in recruitment</td>
</tr>
<tr>
<td></td>
<td>informal de-professionalising</td>
<td>retention</td>
</tr>
<tr>
<td></td>
<td>Blurs distinction between provider/user support</td>
<td>role/boundaries</td>
</tr>
<tr>
<td>3. Information</td>
<td>Face to face groups</td>
<td>not knowing what's available</td>
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<tr>
<td></td>
<td>pressure to maintain good public relations</td>
<td>negative image</td>
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<tr>
<td></td>
<td>coverage</td>
<td>community profiles seldom undertaken</td>
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<tr>
<td></td>
<td>exchange</td>
<td></td>
</tr>
<tr>
<td>4. Participation</td>
<td>social provision/integration</td>
<td>lack of awareness/physical</td>
</tr>
<tr>
<td></td>
<td>education/training/equal access</td>
<td>access/power/inequality</td>
</tr>
<tr>
<td></td>
<td></td>
<td>attitudes and reputations</td>
</tr>
<tr>
<td>5. Miscellaneous</td>
<td>Education work</td>
<td>Staff can become the barrier</td>
</tr>
<tr>
<td></td>
<td>Facilitating role</td>
<td>Segregation in education - schools and colleges</td>
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<td></td>
<td>Model how to talk to people</td>
<td>Piecemeal provision throughout the life span</td>
</tr>
<tr>
<td></td>
<td>Staff prepared to be social secretary</td>
<td>Lack of inclusion</td>
</tr>
<tr>
<td></td>
<td>Family and friends</td>
<td>Family and friends may create obstacles</td>
</tr>
<tr>
<td></td>
<td>Duty to care</td>
<td>Duty to care may inhibit development of opportunity</td>
</tr>
<tr>
<td></td>
<td>Partnerships may develop</td>
<td>Personal cost/time/boundaries</td>
</tr>
<tr>
<td></td>
<td>Innovation can be created within existing budgets</td>
<td>Services panic: risk of using an 'unknown' person as advocate; ‘no’ room for spontaneous friendships</td>
</tr>
<tr>
<td></td>
<td>Change budgets - it is possible to re-prioritise</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Key people - residents, lay leaders, youth workers, young people, volunteers,</td>
<td></td>
</tr>
<tr>
<td></td>
<td>users/carers may become involved</td>
<td></td>
</tr>
</tbody>
</table>

Table 2: Possibilities & Obstacles in Working With Communities
General Issues

Public Education and Involving of Local People

• Need to educate to dispel myths. Some people equate disability and wheelchairs.
• Image of services by local press: generally positive, therefore makes a difficult job of selling alternatives.
• Does training (of ordinary people) ‘block’ friendships? (makes them false etc).
• Marketing ideas and philosophies predominate but may need to be used more for public education.
• Local people’s experience of people who have learning disabilities - mixed: may be negative and/or positive.
• In ‘lower’ class areas, people with learning disabilities may be better accepted.
• Invited neighbours in as a first stop - proved to be positive.
• Refreshing for services to employ ‘ordinary’ staff who live in same community and aren’t ‘trained’ and do not come with ‘baggage’.

Focus of Work

• No overall LINK - work is down to individuals.
• Responsibility of providers to give service that satisfies purchasers needs/demands. No interest in ‘buying’ community development. Purchasers must prioritise.
• Community presence is easy - integration and meaningful involvement is where we struggle.
• Communities do not develop by themselves - we need to learn from people who have built up communities. We need a lot more joint discussion.
• Lots of work required locally with very little feedback - involves marketing and selling.
• Need service as a base for support for staff before community development can be considered.
• We choose people who we feel comfortable with. Who are staff to choose friends for people we work with?
• We have to work with those communities we have got, not with those we would like to have.

Resources (including staff knowledge and skills)

• Workplaces: issues re accessibility expense.
• Expensive - being in the community is not a cheap option.
• Staff numbers: few opportunities to go out, etc. Boils down to money. Pressure on staff - may experience burnout before community development is even considered.
• Awareness training for staff and time for built-in development work required. At the moment everything is service based.
• Provider resistance from family and staff creates frustration for purchasers.
• No funding of community development. Individual care packages or block contracts ‘bought’ by purchasers.
Strategies for Future

Public Education and involving of Local People

- It’s about education; adopting a positive attitude (e.g., of deaf people).
- Develop better communications with local groups as well as with community development workers in our areas.
- Try to involve local neighbours: this may require some networking.
- Build up our local networks.
- Create an image of ‘consumers’ in their own right - help people buy their own shopping, drinks, etc.
- Aim to increase awareness, involvement, and integration.
- Community education in schools, involve all staff - generic skill.
- Use of mass media - mount a campaign.
- Community awareness and personal awareness. Responsibility of everyone.
- Volunteering: encourage befriending.
- Community groups - pension forums - ethnic minority groups - positive groups: work towards inclusion.
- Volunteers bureau recruiting people with a learning disability.
- Promoting recruitment of volunteers in public places.
- Creative initiatives in public awareness e.g., drama.
- Promoting positive media issues (talk with journalists) e.g., areas of achievement, events participated in. (Burnley, Blackburn).
- Write or support articles in ‘community care’ pages of local papers.
- Develop a programme with schools (start in September).
- Get access to local facilities and groups.
- Open up discussion with parents and carers about rights and responsibilities.
- Issue and re-issue invitations to local people.

Focus of Work

- Go to many more places - pubs, churches, schools, shops.
- Look at the positive qualities that people have e.g., gifts, talents, etc.
- Familiarisation to reduce fears and overcome ignorance. Enable relationships with local people to develop. The more familiar people are the less they will be feared and ignorance may be overcome.
- Actively maintain links and friendships of people who have moved
- Use everyday facilities, e.g., well women’s centre; male aerobics class; college classes; nightclub.
- Use methods based on user involvement, for example:
  - Employment opportunities - give more widespread information about schemes.
  - Welfare rights: online support and information is given.
  - Self advocacy: provide support for the group and continue to network.
  - Enable disabled people to act as volunteers.
  - Canvas parents’ views and balance with rights and responsibilities of different family members.
- Make links with schools (especially parent governors).
Resources (including staff knowledge and skills)

- Access to buildings - keep under review by inspection and monitoring.
- Ensure accessibility of political processes.
- Training for staff in residential and day services re: interaction and over-protection; open training to others.
- Creating multi-agency training.
- Develop resources to support advocacy.
- Provide welfare rights expertise.
- Ensure communications available in different forms (for example, video, using symbols, jargon-free).
General Conclusions from Experience in the Field

- There are many positive spin offs when working with local people, both in terms of increased opportunities and enhanced relationships between them and people with learning disabilities, and in terms of community awareness and willingness to include people in local activities.

- To engage with communities, mutual trust must be built and this takes time. If the time is not taken then developments are unlikely to be sustained.

- It can be difficult to engage communities and get them to take notice of marginalised people. Promotion and marketing of projects is often in tension with listening to what is going on in a community, although both are important in terms of strategy.

- It is especially important for those excluded from community life that alliances are formed between services, other dependent people, individual people and groups in communities and families.

- There is a tension between delivering services and developing communities, and further analysis of how the two relate, is required.
Appendix 1: Workshop Flyer and Programme

North West Training & Development Team

Participation in and by Communities: What can we learn from Community Development?

About the workshop
This workshop aims to explore the role community development strategies may play in services to people with learning disabilities.

Community Development workers have gained considerable experience in encouraging wide participation in local affairs, so that local people are able to construct inclusive and empowering communities. This experience may be of some help to those working in learning disability services who have done all they can to enable people with learning disabilities to contribute to community life but have found local people to be unwelcoming. If further progress towards meaningful community living is to be achieved, learning disability services may have to find ways of opening up communities to welcome and include people with learning disabilities.

Date Thursday 20 July 1995
Times 9.00 am Registration
9.30 am Start
4.00 pm Finish
Venue Manchester Metro University,
Hathersage Road, Manchester M13 0JA
Fee £10 per person or £40 per team. Covers refreshments and lunch. Please make cheques payable to NWTDT

Benefits of attending
By the end of the workshop participants will:

- know what community development offers as a means of enabling greater participation in local life by people with learning disabilities
- have identified key local community groups and people active in them
- know local possibilities and potential obstacles to welcoming people with learning disabilities in community life
- have identified a local strategy for opening and building local communities so as to include people with learning disabilities

Participants
The workshop is designed for local teams of participants. A team will include:

- one or two member(s) of staff from learning disability services who work directly with clients
- one or two manager(s) with budgetary responsibility
- at least one person from outside learning disability services who is active in the local community. The NWTDT can offer help to districts who wish to attend but have difficulty identifying someone from outside services who is active in the local community
- a representative from an active local voluntary organisation.

If you are unable to come as part of a team but would still like a place on the workshop please make this clear on the application form.
Programme

9.30 am        Introduction

9.45 - 10.30 am Community Development: Strategies and Lessons Learnt
                  Paul Henderson, Director of Practice Development,
                  Community Development Foundation

10.30 - 11.00 am Community Awareness: A Local Project
                   Annette Bains, Leisure Link, Stockport

11.00 am        Coffee

11.15 - 12.30 pm Local Issues: Possibilities and Obstacles
                   (Groupwork in local teams)

1.30 - 2.45 pm   Local Strategies for the Future
                   (Groupwork in local teams)

2.45 pm          Tea

3.15 - 4.00 pm   The Way Forward
                   (Summary and immediate future actions)

Date:           Thursday 20 July 1995
Venue:          Manchester Metro University, Hathersage Road, Manchester M13 0JA
Price:          £10 per person or £40 per team
Appendix 2: Workshop Participants
1 Department of Health, 1990, *NHS and Community Care Act* and policy guidelines accompanying *Caring for People* and *Working for Patients*. Audit Commission and Social Services Inspectorate reports incorporate the same values and principles.


9 See Appendix 1.

10 This discussion follows much of the presentation by Paul Henderson, of the Community Development Foundation at the workshop. See also:


The recent SSI report on day services (see 8) involved people with learning disabilities in the inspection and also in the process of defining standards for the inspection.

Partners in Policymaking is a course for disabled adults and parents of children with disabilities. The first UK course has been held in the NW of England in 1996. For details, contact NWTDT.


Contact Annette Bains, Scope, Granville House, 20 Parsonage Road, Heaton Moor, Stockport SK4 4JW.