



Merton CIL's response to the Merton Council's Sexual Health Strategy Consultation

Background

About Merton CIL

Merton CIL is a pan-Disability user-led Deaf and Disabled People's Organisation which has been supporting Deaf and Disabled People in the borough for 10 years. We work with people with all types of impairment including physical impairments, sensory impairments, mental health service users, people with learning difficulties and people with chronic illness or long-term ill-health. Many of our service users have more than one impairment, and many are also carers and/or parents. Deaf and Disabled People don't have to be members to use our services but we do have an ever-growing membership who shape our direction and focus as an organisation. At the time of writing we have 317 members.

Our advice and advocacy service worked with 332 people last year, providing 1,592 sessions of advice on a range of issues including social care, benefits, housing and hate crime.

While Merton CIL's main role is to provide advice and advocacy support for individuals, we also engage with local consultation and co-production by responding to initiatives like the Sexual Health consultation.

Our members at the Craftivism and Chat group in April 2019 responded to the sexual health consultation and spoke more widely about the issues Disabled people face in leading an active and healthy sex life.

National context: Disabled People experience multiple inequalities

Disabled People are facing disadvantage and inequality across key areas of our lives¹, and are experiencing health inequalities as a consequence².

In particular, Disabled People are disproportionately impacted by the policies of welfare reform, with social care users particularly affected by the cumulative impact of benefit cuts and social care cuts.³ Barriers to employment, accessing the community, hardship and homelessness follow.⁴

Disabled people have poorer health and lower life expectancy,⁵ and perceived discrimination is associated with an increased likelihood of psychological distress.⁶

Laws and regulations already in place to support disabled people, such as the Equality Act 2010, and the United Nations Convention on the Rights of People with Disabilities (UNCRPD), are not being effectively adhered to^{7,8}.

In fact, Deaf and Disabled people are disadvantaged across multiple areas of our lives including:

- **Education:** Higher numbers of Disabled People with no qualifications, low qualifications and restricted learning opportunities
- **Employment:** Disabled People face multiple barriers to employment

¹ The Equality Act 2010: The Impact on Disabled People, House of Lords Select Committee on the Equality Act 2010 and Disability, 2016

² Is Britain Fairer? Equalities and Human Rights Commission, 2015

³ <https://www.equalityhumanrights.com/sites/default/files/cumulative-impactassessment-report.pdf>

⁴ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015

⁵ Is Britain Fairer? Equalities and Human Rights Commission, 2015

⁶ Perceived Discrimination and Psychological Distress in Sweden, S Wamala, G Bostro, K Nyqvist, British Journal of Psychiatry, 2004

⁷ The Equality Act 2010: The Impact on Disabled People, House of Lords Select Committee on the Equality Act 2010 and Disability, 2016

⁸ Dignity and Opportunity for All: Securing the Rights of Disabled People in the Austerity Area, Just Fair, 2014

- **Transport:** One in five Disabled People have difficulty using transport⁹ and cuts to concessionary fares and local public transport services are leaving some Disabled People isolated and unable to travel as and when they need.
- **Environment:** Lack of accessible buildings and changes to city street scenes such as shared surfaces impact Disabled People's ability to access goods, services, civic centres, justice and the wider community.
- **Information:** Disabled People are less likely to be accessing the internet and inaccessible information in other formats can impact people's access to information, healthcare, etc
- **Benefits:** The welfare benefit reforms that the government brought in through the Welfare Reform Act 2012 are having a significant and disproportionate negative impact on Disabled People¹⁰
- **Poverty:** Key poverty metrics for Disabled People are high and increasing¹¹
- **Housing:** There has been a sharp rise in the number Disabled People who have been experiencing evictions and homelessness because of rent arrears either when housing benefit has been stopped due to sanctions, or housing benefit has not been granted because a Disabled Person has found 'fit for work' after a WCA¹²
- **Public attitudes and safety:** Disabled People are more likely to be victims of crime and Hate Crime has been identified as a serious issue affecting Disabled People. The benefits scrounger rhetoric perpetuated by the media and government has been identified as one of the drivers of this issue.¹³

⁹ Implementation of the Right of Disabled People to Independent Living, House of Lords House of Commons Joint Committee on Human Rights, Twenty-third Report of Session, 2010–12, p. 59

¹⁰ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015, p. 13

¹¹ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015, p. 12

¹² Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015, p. 17

¹³ Implementation of the Right of Disabled People to Independent Living, House of Lords House of Commons Joint Committee on Human Rights, Twenty-third Report of Session, 2010–12, p. 60

- **Civic participation:** Disabled People, some ethnic minorities and people aged 75 and over were less likely than others to perceive that they could influence local decisions.¹⁴
- **Health:** In England, the proportion of Disabled People who reported bad or very bad health increased between 2008 and 2012, whereas there was a reduction for non-disabled people.¹⁵ Disabled People have lower life expectancies¹⁶ and are experiencing declining mental health because they had lost support services¹⁷ and / or the stress caused by benefit assessment processes.¹⁸

These are all issues that are directly or indirectly linked to Merton's Sexual Health Strategy

The Council's Resident Satisfaction Survey has covered issues around the wellbeing of Merton residents. The 2017 survey¹⁹ assessed wellbeing with a set of standard questions developed by the Office of National Statistics (ONS) that cover people's feelings of overall life satisfaction, their lives being worthwhile, happiness, and anxiousness.

Disabled People were significantly less positive in all four aspects of wellbeing covered by these questions. For example, where three percent of the overall survey rated their happiness as low the previous day it was 13 percent for Disabled People. Overall Disabled People felt less satisfied with life, were less likely to feel life was worthwhile, were less happy, and more anxious than non-Disabled people.

¹⁴ Is Britain Fairer? Equalities and Human Rights Commission, 2015, p. 7

¹⁵ Is Britain Fairer? Equalities and Human Rights Commission, 2015, p. 51

¹⁶ Is Britain Fairer? Equalities and Human Rights Commission, 2015, p. 52

¹⁷ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015, p. 8

¹⁸ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015, P. 15

¹⁹

The Merton picture: At least 12% of local residents are Disabled People

The London Borough of Merton has a population of 209,421 people²⁰. According to the 2011 census, 25,232 residents felt their day to day activities were limited a little or a lot, about 12% of the population.

The Annual Population Survey²¹ estimates that around 14,000 people in Merton have a physical impairment, while POPPI²² data shows that nearly 5,000 people of 65 and over struggled with mobility.

Estimates for local residents with hearing loss is over 27,000, especially in older age groups, while figures for the numbers of Deaf and hard of hearing people is around 840 people in Merton.²³

There are 700 adults who are blind or partially sighted in Merton and nearly 1,000 with moderate or severe visual impairment²⁴. 700 people are registered with GPs as having a learning disability and the local authority believes this is an underestimate, as it is significantly lower than England, London and comparator boroughs with the exception of Kingston upon Thames. In fact, statistical estimates suggest there may be nearly 4000 adults in Merton with a learning disability²⁵.

²⁰ <https://data.merton.gov.uk/>

²¹ Recorded in the categories "core Disabled" or "work-limited Disabled". Data from the Merton Disability profile.

²² Projecting Older People Population Information System

²³ Merton Disability Profile / Department of Health 2014

²⁴ Merton Disability Profile

²⁵ Merton Disability Profile

²⁹ Women most at risk of experiencing partner abuse in England and Wales: years ending March 2015 to 2017 Section 6

³⁰ Talking about sex and relationships: the views of young people with learning disabilities, CHANGE, 2010

³¹ <https://www.disabilityrightsuk.org/news/2019/march/survey-accessing-cervical-screening-smear-test-physical-disability-2019>

Sexual health and disability

Sexual health and intimacy are an important part of wellbeing. But Research shows that Disabled People face increased issues and barriers in this area of our lives. This is further compounded by the other inequalities we already face.

There is an increasing awareness that Disabled women are much more likely to experience partner abuse than non-disabled women. A recent report published by the office for national statistics found that:

Women who had a long-term illness or disability were just over twice as likely to have experienced some form of partner abuse in the last 12 months (12.4%) than women who did not (5.1%).²⁹

People with learning disabilities also face barriers to sexual health due to a lack of accessible information as highlighted in a report by the University of Leeds.³⁰

Jo's trust is currently running a campaign aimed at improving access to smear tests for Disabled people.³¹

Our Member's views

Our Members looked at wider issues around sexual health before answering questions from the survey.

What are your experiences with Merton Sexual health services?

"They didn't explain what was happening in my smear test"

Communication was a big issue experienced by our members. They reported either not having things explained to them or people using terms they didn't understand.

Attitude was another barrier discussed. Our members reported having difficult experiences because of the public's attitudes to sex and Disability.

"I got picked on after sex education people saying I can't have sex because of my disability."

"I always throw the condoms they gave me at school in the bin because I didn't want them in my room."

Parents finding condoms was raised as a concern by our members

Access to sexual health support was reported as problematic by members

"Don't know where to go now local pharmacy is shut" [for advice, free contraception and testing]

Whilst they had knowledge of the kinds of services that might be available they struggled to find them or get to them. This was for several reasons:

- Physical barriers: Such as too many stairs
- Lack of information: Can't find it on google maps which Visually impaired service users use to get around
- Location: Members reported more local services had shut down or moved.
- Disadvantage: Members reported that other aspects of living with disability such as no money for transport impacted access to services
- Attitude: Members reported staff did not take their access needs into account such as or not being comfortable in new places or having to fill in lengthy small print forms.

Positives

"They were good when I needed treatment"

Members reported receiving swift treatment once issues were identified.

What would you do if you were in charge of Merton's sexual health services?

Most of the suggestions made by our members were around improved access:

- Provide hoists
- Postural support
- BSL
- Better opening hours
- there are too many stairs
- there are too many forms
- lower the age for smear test
- large print forms
- record peoples access needs
- better awareness of disability such as autism training and knowledge of different disabilities.
- More staff consistency
- Better communication
- More information on safe enjoyable sex for Disabled People

But our members also discussed wider issues

- Make it easier to get doctor of preferred gender.
- better awareness of women's issues like menopause or endometriosis
- Make it easier for single mums to access
- Have more services or better advertising and information about them

The Consultation

Merton's Vision

information and skills to make informed choices about relationships and sexual wellbeing.

easily accessible comprehensive services which help to reduce stigma, exploitation, ill health & inequalities

Our members looked at Merton's Vision. They were largely positive about it but suggested the language should be clearer.

Merton's priorities

Prevention: build people's knowledge and confidence so they can make informed decisions about their relationships and sexual health.

Easy access: ensure sexual health services are confidential, available to all, and open when and where needed.

Holistic: make sure that a person's sexual health is considered as part of all the services the Council and NHS offer.

Our members reported liking Merton's priorities. They felt there were a lot of improvements that could be made to action them.

How would you meet these priorities?

"Make an app" (for ordering tests. Finding free condoms and support)

"Better website"

"More information on google maps so easier for visually impaired individuals to find."

"More accessible clinics"

"Better training on disability"

"better information for parents"

"more local stuff at GP or pharmacy"

"Make sexual health and intimacy an important part of Care planning."

"Not having to fill out the same difficult form every time you need your contraception or testing."

Actions to shape strategy

Our members voted on the suggested actions and picked the following 3

Ensure there are sexual health services provided by GP surgeries and pharmacies

"This could work better for disabled people to get support where their access needs are understood."

Provide free contraception emergency contraception and STI screening and treatment

"For all ages it's normally under 25's"

Support people living with HIV who may develop other complications of growing older (e.g. dementia) to continue their treatment.

"This seems like a good idea"

A close runner up was

Help parents with the skills and knowledge to talk to their children about relationships and sex.

Though some members expressed concerns over parents' attitudes to sex

Seeking support

Most of our members felt comfortable seeking help when they needed it though many said it was hard to find.

Where people would seek help

Members voted

Yes

- Sexual health clinic
- GP surgery
- Pharmacy
- On-line services
- Voluntary sector organisation

No

- Faith group / church

Don't know

- NHS Walk-in-centre – most not close enough
- School or college
- Youth centre
- Library

Awareness of services

Members voted and discussed

Aware

- Emergency Hormonal Contraception (morning after pill) from some pharmacies if you are 13-24 years old
- A Chlamydia test delivered to you at home by ordering online if you are aged 15-24 years.
- Condoms from a range of youth services if you are aged 13-24 years old
- Information on where to access services from www.gettington.org.uk if you are aged under 24 years

Aware and would recommend

- Condoms from sexual health clinics (for all ages)

Not Aware

- A test for sexually transmitted infections delivered to you at home by ordering online (for all ages)
- Contraception, testing and treatment from any sexual health clinic in London or the country regardless of where you live

- Contraception and testing and treatment for sexually transmitted infections from Falcon Road clinic in Clapham Junction (all ages)
- Aware of and Contraception and testing and treatment for sexually transmitted infections from Falcon Road clinic in Clapham Junction (all ages)
- Contraception and testing for sexually transmitted infections from Patrick Doody clinic in Wimbledon (all ages)
- Contraception from Wideway clinic in Mitcham (all ages)

This led to a discussion on how some services are only for under 25years old.

It was discussed anecdotally how sexual knowledge and experience often happens later for Disabled people. Members were enthusiastic at the idea of being able to have tests delivered as this made them much more accessible. However, the cost for over 25's is off putting and it was suggested that they should be delivered free or at reduced costs to Disabled people receiving benefits.

Recommendations

1. Make sexual health services and their location and opening hours easy to find in a number of formats
2. Staff to be trained in disability awareness focusing on communication e.g. Autism, learning disabilities, Independent Living
3. Give staff access to the resources they need to engage with Disabled people e.g. BSL interpreters, large print, easy read.
4. Give Staff and clinics the equipment they need to be accessible e.g. hoists, supportive examination beds, manual handling training.
5. Ensure sexual health clinics are well advertised in particular on google maps which is essential for those with visual impairments
6. Home testing to be available free for Disabled People
7. Make sexual health and intimacy a part of Social Care planning / Care plans
8. Get services to work together. E.g. having district nurse and sexual health visits when carers are around to help with hoisting.