Making the West Midlands an Exemplary Region for Disabled People 2024

The start of the Journey

West Midlands Combined Authority

Contents

Supplementary documents:

Foreword

**Dr Shani Dhanda,
Chair of WMCA Disability Working Group**

A Vision for an Exemplary West Midlands

I was delighted to be given the opportunity to Chair this Working Group, as the call for a more inclusive and accessible society has never been more vital. Disabled people deserve the opportunity to thrive, to contribute their talents, and to live fulfilling lives. Yet far too many face significant barriers that limit their potential across the West Midlands. However, these barriers are not inherent to disability but societal, physical, attitudinal, and systemic obstacles. We can't accept this exclusion any longer. This report outlines a path for change.

The Report delves into the specific challenges faced by our region and outlines a comprehensive approach to dismantling barriers and creating a more equitable future for all within the West Midlands. It goes beyond surface-level analysis, examining the services, systems, and societal structures contributing to daily inequities. We have developed long-term recommendations that address the root causes of these barriers and create lasting change.

Focusing on a regional level is crucial. The West Midlands has its own unique set of challenges and opportunities when it comes to disability inclusion. By tailoring our recommendations to the specific needs of this community, we ensure a more targeted and practical approach. This local focus allows us to implement changes more swiftly and set a benchmark for other regions to follow.

My personal experiences as a disabled South Asian woman with proud West Midlands roots have profoundly shaped my perspective on inclusion. These experiences and the privilege of chairing the group that undertook this groundbreaking work fuel my unwavering commitment to supporting the West Midlands in its journey to becoming a leading region for disability inclusion and justice.

I want to thank all of those that have contributed to this report from Disability Working Group members, Local Authorities and WMCA Officers, to those contracted to gather data and evidence and Disability Organisations. Equally I want to thank all of the disabled people that have provided their valuable lived experience and look forward to continuing to build on those relationships and ensuring their involvement continues.

This report is not the destination but rather the beginning of a transformative process that requires all of us. By working together, individuals, organisations, and policymakers can create a genuinely inclusive society. Imagine a West Midlands where everyone thrives, free from barriers that hinder their goals and aspirations.
Imagine a region where the rich tapestry of experiences and perspectives is not just valued but actively empowered. That's the future I believe in. Let's build that future together.

Richard Parker
Mayor of the West Midlands

Mayoral Foreword

Since the Marmot Review in 2010, we've seen life expectancy stall across England and health inequalities widen. The pandemic only brought these injustices into sharper focus - especially for disabled people and those living with long-term health conditions. In the West Midlands, both life expectancy and healthy life expectancy remain below the national average. That isn't good enough and it's something we must change.

I want the West Midlands to work for everyone. That includes disabled people, whose experiences and contributions must be at the heart of how we build a fairer, healthier region. This report sets out what that looks like - better access to good jobs, affordable and accessible homes, reliable and inclusive transport and the skills people need to thrive.

If we're going to tackle deep-rooted health inequalities, we need to listen. Listen to disabled people, build trust through better data and design services and better systems. That's how we create lasting change.

A stronger, more prosperous West Midlands means putting health and wellbeing at the centre of everything we do. That's why my priorities are built around inclusion:

Jobs for Everyone: Creating meaningful, inclusive employment opportunities.

Homes for Everyone: Delivering affordable, accessible housing.

Journeys for Everyone: Making transport easy to use and open to all.

Growth for Everyone: Ensuring economic success benefits every community.

I fully recognise the scale of the challenge and I'm grateful to those people who have shared their experiences and have shaped this work. Becoming an exemplar region for inclusion won't happen overnight. But I'm determined to lead the system-wide change needed to make this a reality for everyone in the West Midlands.

Acknowledgements

The WMCA and the Disability Working Group would like to thank the following organisations for their work in informing this Disability Needs Assessment: The Economic Intelligence Unit (quantitative data), Disability Policy Centre (disabled people's lived experience and network consultation); Habinteg Ltd and the Centre for Accessible Environments (accessible housing analysis) and Rebel Kindly who organised and facilitated the workshops.

The WMCA and Disability Working Group are grateful to the over 450 disabled people in the WMCA region who provided their lived experience by attending workshops, responding to surveys, and sat on the Disability Working Group. We recognise the importance of ensuring the voices are not lost and will ensure they are listened to, utilised, and built upon. The voice of disabled people will always be championed and play a key element of this work.

The WMCA appreciates the trust, commitment and collective strength of the Disability Working Group members who quickly came together and diligently took on this task, holding the WMCA to account to ensure the delivery of actions.

Disability Working Group Members

Dr Shani Dhanda (Chair)	Disability, Inclusion and Accessibility Consultant, Broadcaster. Most influential disabled person in UK
Dr Clenton Farquarson CBE	Associate Director of Think Local, Act Personal, Disability advocate
Sarah Rennie	Accessibility and Inclusion Consultant, Disability advocate
Amy Francis-Smith	Senior Architect, Inclusive Design Specialist, Disability advocate
Alice Hargreaves	CEO - SIC, Inclusive Employment Specialist, Disability advocate
Dave Rogers	CEO - Midland Mencap, Disability advocate
Debbie Balmer	Head of Business Development - Sense
Louise Connop	Senior Engagement Manager – Thomas Pocklington Trust, Disability advocate
Parmi Dheensa FRSA	Founder & Executive Director – Include Me Too, Disability advocate
Louise Mckiernan	CEO – Disability Resource Centre
Richard Day	Founder – Midlands Ability Network, Disability advocate
Alistair Crisp	Regional Accessibility Lead – Sustrans, Disability advocate
Ray Ashley	Director of Partnerships – Activity Alliance
Chloe Schendal-Wilson	Co-founder and Director – Disability Policy Centre
Shamima Akhtar	Policy and Research Manager – Policy Connect, Disability advocate
Donna Daley	Disability Advocate
Maria Gavin	Assistant Director: Adult Social Care – Birmingham City Council
Valerie DeSouza	Public Health Consultant – Coventry City Council
Emma Matthews	Head of Dudley Disability Service – Dudley Council
Colin Marsh	Assistant Director: Adult Social Care – Sandwell Metropolitan Borough Council
Peter Budge	Head of Service: Adult Social Care and Principal Occupational Therapist Solihull Council
Kerrie Allward	Director: Adult Social Care – Walsall Council
Solomon Scott	Senior EDI Advisor – Wolverhampton Council
Nicola Pugh	ICS Inequalities Programme Manager – NHS Birmingham and Solihull
Kwabena Osayande	Equalities and Diversity Manager – WMCA
Simon Hall	Senior Delivery Manager: Wellbeing and Prevention – WMCA
Dr Mark Fosbrook PLY	Senior Policy Officer: Health and Disability – WMCA, Disability advocate

Scope and Purpose

This report defines disability broadly, covering both physical, sensory and mental impairments that have a significant and long-term impact on a person's ability to carry out daily activities. It includes a variety of conditions such as long-term health issues, neurodivergent conditions such as autism and ADHD, and sensory impairments like deafness. The main focus of this report is not on the impairments themselves but rather on the services, systems, and societal attitudes that influence an individual's everyday life.

This marks the beginning of a journey toward a deeper understanding of this area, which will continue to evolve. Future efforts will emphasise specific impairment-related situations, explore the combination of multiple impairments, and consider the intersectionality of various characteristics and life circumstances.

The WMCA is committed to becoming an exemplary region for disabled people and invites others to join in this ambition. There are already numerous examples of outstanding work being done, and the WMCA encourages and supports those who are actively engaged in this area. Our goal is to develop a collective approach that celebrates and shares positive initiatives while amplifying the voices of disabled individuals. This is not something we can achieve alone; we are stronger together and we all have a part to play in reducing inequalities and enhancing the lives of disabled people.

Executive Summary

As part of its commitment to build a region where people thrive in the places they live and work, in December 2023 the West Midlands Combined Authority Executive Board agreed to initial work to develop a comprehensive disability needs assessment. This is in line with the WMCA's Health inequalities priorities to develop an in-depth understanding of the health of communities and populations in the region and understanding the barriers and enablers that the WMCA core functions bring – housing, transport, employment and skills.

To reflect the WMCA's health function and collaboration with health stakeholders, this work also focuses on health, social care and wellbeing as a cross-cutting theme. The WMCA's Executive Board also agreed to establish a Disability Working Group to understand the scale of the challenge, where the gaps are and where more needs to be done.

The exemplary region's ambition stems from the initial WMCA work to understand what is needed to enable more disabled people to be physically active. This identified that to achieve this, we needed to focus attention on understanding and addressing some of the wider determinants that prevent people getting active. It also highlighted the importance of centring on the voices of disabled people, the focus was to support organisations to engage and understand the impact of wider determinants such as housing, transport, and employment. This Disability Needs Assessment (DNA) is a deepening of the initial project, getting rich complex qualitative and quantitative data and opportunities for action that will have the greatest impact in reducing inequalities.

An exemplary region focuses as much on a way of working as it does on the delivery of actions. A WMCA wide collaborative approach in being data, evidence and insight driven, to co-designing service delivery and actions with disabled people and shared systems and processes that connect to disabled people's needs. It is also about a shared ambition and collective action to begin to remove the inequalities highlighted in this report.

This work is very timely with a new Government and West Midlands Mayor with manifesto pledges and vision of jobs for everyone, homes for everyone, journeys for everyone and growth for everyone that resonate with this report as well as informing the WMCA's Functional Strategies and light touch regional development framework. WMCA has convening powers to enable joint working across the region aligned to its strategic aims to reduce the region's inequalities. By continuing to work collaboratively, engaging determinedly and centring disabled voices, the root causes can be understood by many. Building these strong relationships and supporting partners through the process of change is the bedrock to tackling the inequalities.

In too many cases we do not know the scale of the challenge, where the problems are, and where more needs to be done. Disability data is not routinely collected, has gaps and is often poor quality. Where the data does exist, it often remains hidden and unused and may not be able to identify the social or environmental barriers that result in social exclusion.

Disabled People's voices have been and remain key to the work moving forward. As this work has been developed those voices have always been important. This includes:

- Disability Working Group – using lived experience alongside, professional knowledge to support the shaping of the strategic focus.

- Workshops - Connected disabled people with lived experience and sector experts and to shape the opportunities for action using the quantitative data from the Disability Needs Assessment alongside.

- Accessible Housing report – Key quantitative and lived experience voices were centred in discussions and captured as key qualitative data.

- Exemplary region – Engaging with disabled people to understand what we mean by exemplary region.

This has enabled recommendations to be proposed in this report that will focus on making improvements to progress the region on its journey to becoming an exemplary region for disabled people.

The Enormity of the Challenge

The comprehensive Disability Needs Assessment Data report demonstrates the inequalities that disabled people face. Whilst acknowledging the gaps in the data available, we need to start somewhere. Even with the incomplete data we have highlighted the stark inequalities and the need to tackle them across the region and the multiple systems involved. Some of the key quantitative data has been highlighted here, to show the breadth and depth of the issue. These inequalities show across but intrinsically connected health, employment, education, transport and access, safe accessible housing, and finances. Everything that enables disabled people to thrive in the places they live, work or study:

Making the West Midlands an Exemplary Region for Disabled People

The Enormity of the Challenge

780,000 disabled people
in WMCA region according to Family Resource Survey 22/23
(26.7% of the region's population)

Higher proportion than the 24% England average

The 3rd highest England region behind the Northeast and the Northwest

28.2%
of WMCA disabled households have
no access to a car
or van (compared to 27.7% England-wide)

188k
WMCA residents in **receipt of PIP**

21K aged 16-24
up 79%
in last 5 years

At 14.7% WM Avg. West Midlands has
2nd largest Disability Pay Gap
of all England regions
(13.8% England Avg.)

Disabled Employees in West Midlands are
paid the lowest
in England (£11.16) compared to England average (£12.10)

Disabled people in West Midlands
17% feel lonely
all or most of the time

England disabled people average (15%)

WMCA non - disabled people (3.6%)

Disabled WMCA residents less likely to have level 4+ qualification (34%) compared to disabled people nationally (39%)

Also, regionally they are more likely to have level 2 qualifications or below compared to non-disabled people who are more likely to have level 3 or higher

Disabled people score
worse on ALL
Wellbeing indicators than their non - disabled counterparts

24%
of WMCA adults with learning disabilities NOT living in stable and appropriate accommodation (compared to 19% England-wide)

Annual spending power in WMCA of disabled people and their households is
£30.9 billion
Yet we know 75% of disabled people turn their back on businesses because of poor accessibility and customer service

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Opportunities for Action

From the Disability Working Group's analysis and synthesis of the data, insight, and workshop intelligence, they have set out Opportunities for Action for consideration by the WMCA. These would, if addressed, demonstrate the commitment to making the West Midlands an exemplary region by helping to reduce the inequalities faced by disabled people. These focus on influencing policy, changing practices, building networks, and ultimately challenging the cultures of organisations and society. Nurturing and supporting the connections between disabled people, organisations and local authorities made through the workshops will likely play a key part in tackling inequalities.

Recommendations

Using the opportunities for action along with the suggestions from the Disability Working Group to create a strategic taskforce and/or commissioner as well as a Disabled People's Voice Network, this report includes a series of recommendations that need to be initially taken forward to enable progression towards making the West Midlands an exemplary region for disabled people. The opportunities for action and recommendations are a starting point. The ambition of this report is to be open to exploring new opportunities as the work unfolds, learning is ongoing and new data and voices will shape future work.

Moving Forward

The scale of the challenge is significant and complex. Collaboration and co- production are essential, and a regional approach will enable meaningful change at scale. Amplifying the voices of disabled people provides the platforms for disabled people to be heard, as well as looking into rewarding them for their time and expertise.

Chapter 1 – What is an Exemplary Region?

What distinguishes exemplary from ordinary is an interesting starting point. It is about understanding and deciding what needs to change based on a clear base of evidence and a clearly identified need from those it impacts on. Then being clear on ensuring the change takes place. However, as we move towards becoming exemplary, we want it to become business as usual so that it is seen as ordinary. By constantly raising the bar and reviewing within the region we are creating the environment where people can think differently about approaches and solutions that engage a wider collective of people. Working towards an exemplary region can take many forms and will look different when examined through different lenses. No one lens is more important than another and all areas need to be addressed to become truly exemplary.

Collaboration
Fundamental to the delivery of the Report's implementation is system wide collaboration around this shared ambition and outcomes as well as a set of co- designed shared principles which inform and influence the work that is needed.

Shared Purpose
To work towards being an exemplary region for disabled people; a region where disabled people thrive and achieve by having a stronger voice in decision making. This is achieved through cross system collaboration to reduce the inequalities for disabled people through meaningful, evidence based, incremental improvements to services, systems and eventually culture and behaviours. Critical to this is having figure head, e.g. a commissioner, to champion this vision for an exemplary region and hold the WMCA and partners to account by convening a strategic taskforce to drive this work forward.

Shared Outcomes
There are clear tangible improvements to the services and support that disabled people receive that will directly improve the lives of disabled people. These improvements can also provide wider regional benefits that see a growth in economic activity, provide a broader diversity of thought and make the region a better place. The headline outcomes include:

- Improved provision of accessible, safe, and affordable housing.
- Improved meaningful, appropriate, and good employment opportunities including careers, workplaces, and conditions.
- Improved health outcomes by addressing some of the barriers that impact on disabled people's health as well as mental health, wellbeing support and social care.
- Improved accessible, safe, and inclusive transport and community infrastructure.
- Improved communication to ensure all have access to important information in a suitable format, in a timely manner.

Exemplary System Outcomes

While many systems and processes have been developed and changed over time, there are many that still do not fully consider the needs of disabled people. The focus of convening a region and seeking a collective agreement across WMCA directorates, local authorities, public and private organisations should not be forgotten or not considered to be an exemplary practice in its own right. The WMCA can lead the way nationally in improving the outcomes for disabled people.

The starting point outcomes include:

- A shared system adoption of the social model for disability

- Improving data and insight by plugging gaps and shortages and adopting common data sets and a harmonised approach.

- Strengthening disabled people's voice by co-producing future decisions, service design and policy that impact on their future, lifestyles, and wellbeing.

- Improving multi-stakeholder collaboration across services and geography which place the improved outcomes for disabled people at the heart of policy and servicing delivery.

- Improving the monitoring, evaluation, learning and progress of work towards the shared purpose which drives improvement, policy shifts and resource allocation.

- Improving the West Midlands adoption and achievement of disabled people recognised standards such as Disability Confident, and a collaborative commitment to exceed criteria where possible to be responsive to disabled people's needs.

Society - Outcomes

To move towards becoming an exemplary region it is important to see the structural and output developments to enable positive action. However, the fundamental key to being exemplary is what difference it makes to disabled people in the West Midlands. As a result of becoming an exemplary region, do disabled people feel the region has improved? Do they feel empowered, supported and a valuable contributor to their community?

- improvements across common wellbeing indicators, positive experiences fed back through Disabled People's Voice and positive wider societal improvement feedback to WMCA and stakeholders.

What is the impact of becoming an exemplary region for disabled people?

The impact of moving towards and becoming an exemplary region for disabled people is transformational for individuals, communities, the region, and local and central government. The social and economic value of being an exemplary region has multiple benefits. A 2015 study by South African Economist JP Landman highlighted that a 5%-point rise in disabled people's employment would lead to an increase in GDP of £23bn by 2030, and a 10%-point rise (a million disabled people in work) would result in an increase of £45bn.[1]

Living, working, or visiting an exemplary region for disabled people would feel very different. Disabled people would feel valued and empowered, they would be able to make journeys without having to plan every single aspect of the journey or worry if they will get the support they need, they will be able to live in an appropriate and suitable home in a community where they feel safe and can engage and connect with. Disabled people will feel secure in good employment, where appropriate and be able to contribute to society in a way that is appropriate for them.

Ultimately, disabled people will say "The West Midlands feels different. I feel valued". Describing how a disabled person will feel is easy. This is not about creating a region that treats disabled people better than non-disabled people. It is about creating a fairness so a disabled person can feel the same as how a non-disabled person feels. It is about understanding that it might take more to enable that to happen but by creating equity you are enabling all to have the same chances. To be transformational disabled people will be able to live their life, without any impairment impacting on their day-to-day lives. They will not have to plan their journey, will not be treated less favourably in the workplace and be able to live as independently as possible due to where they live. They will feel better, achieve better outcomes, and play a key role in boosting the region.

Becoming a truly exemplary region is a long-term commitment to make the region fairer, healthier, more prosperous, and better connected.

> **"Feel like it's a race to the bottom, none of us win.**
> I feel like some impairments are seen as more important than others and we are fighting each other for the crumbs of support"
> Disabled Person (WMCA Disabled Person's Voice 2024)

1 JP Landman Economics' key disability findings

Chapter 2 – The Journey so far

Health of the Region

The ambition to become an exemplary region for disabled people is a commitment made in the WMCA's Health of the Region Report (2020), as well as our wider focus on improving health outcomes for people and groups facing heightened health inequalities. The WMCA has always focused on improving health and wider outcomes for disabled people, starting initially with a focus on getting more disabled people active, supporting organisations to engage better and placing disabled people at the heart of the conversation. As the work has matured, it became apparent that there would be little meaningful impact unless we focused more on making a difference through the WMCA's core responsibility areas, which lie around the wider determinants of health, including (housing, transport, employment and skills) alongside a focus on healthcare, social care and mental wellbeing.

The pandemic created a new landscape, raising further challenges for many communities especially disabled people. The pandemic amplified the stark, complex reality for, and about, disabled people. Any change to reduce these health inequalities is a collaborative long-term undertaking. Post pandemic, as a region we made a collective commitment to achieve positive change in addressing health inequalities. The WMCA, in its devolved functions, assumes a pivotal role in health creation for the region. If we are to improve the health outcomes of disabled people, we need to influence and shape the kinds of homes we live in, the way we get around, the air we breathe, and the types of employment opportunities available to us. It is of great importance for the WMCA and the Mayor of the West Midlands, as poor health limits the ability for the region and its people to prosper. We need the WMCA economy to deliver growth that supports better health and wellbeing and addresses health inequalities, especially for those that are impacted the most.

Acknowledging this has led to a re-shaping of the WMCA priorities on health to focus on the following:

- Support the delivery of initiatives including convening evidence-based work to tackle health inequalities. The WMCA Region's Directors of Public Health supported a regional focus on certain communities, such as disabled people due to population size and the scale of inequalities, to enable a more specific understanding of impairments. This was supported by a WMCA and Kings Fund facilitated Roundtable event, highlighting some of the issues faced by disabled people and the opportunities available if we worked collaboratively to understand and respond to the needs of disabled people. The stakeholders included NHS, local authorities, disabled people, disability charities, academics, and other professionals.

- Enable healthy, thriving communities through implementing a health-in-all policies approach and help drive resources into specific areas of unmet demand. To achieve this, this report identifies the evidence and opportunities for action for disabled people across the WMCA core functions.

- Enable healthy, productive workforces and use economic growth as an enabler of health in the region.

Adopting these three priority approaches is a means by which the combined authority can develop and implement policy that improves health outcomes and aligns and contributes to inclusive growth.

I want to be heard
Disabled people have long been campaigning for "nothing about me, without me" as too often solutions to challenges are shaped for disabled people with little to no involvement with them. There is often a lack of understanding of co-production: often it is merely consulting with disabled people, then building what was originally planned, and not always aligned with what was requested. Co-production is more than that. It is about engaging with disabled people in a meaningful way and involving them in the development & building of the offer. Disabled people have become tired of sharing their valuable lived experience for it to be ignored or not acted upon.

The Need for a Clear Shared Model
The WMCA supports the Social Model of Disability which states you are not disabled by your impairments but rather by society and the environment you are in. Under the Equality Act 2010, you are disabled if you have a physical or mental impairment that has a substantial and long-term negative effect on your ability to do normal daily activities.

Disability Working Group
In December 2023, the WMCA Executive Board agreed to the development of a regional disability needs assessment and the establishment of a Disability Working Group with a remit to understand the scope of the challenge and how best to proceed. The Disability Working Group (DWG) included representatives from disabled people in the region, disability organisations, the WMCA and 7 Local Authority Senior leaders, predominantly Directors / Assistant Directors of Adult Social Care.

The DWG has:

- Championed the necessity and benefits of establishing action based on evidence, insight and intelligence, the value of engaging disabled people in a meaningful way and the benefits of collaborative working and influencing policy, practice and delivering at scale.

- Recognised early on that it is extremely complex to tackle inequalities.
  Any future implementation of actions will require:
  o Policy creation, influence, and change
  o a whole system and service improvement and change
  o Influencing current and creating new investment
  o Long-term behaviour change

This can only be achieved if priorities are explored concurrently to create the most likely opportunity for significant impact in policy, practice, and disabled people's positive experience.

- A focus on improving outcomes, in tandem with measuring progress on creating the conditions for change will increase the likelihood for greater impact. Key conditions which drive positive impact include strengthening the reach of disabled people's voices as well as supporting and showcasing collaborative working. There are many barriers to system change - cementing this work in data, insight and intelligence seeks to create a collective commitment to mitigate against this.

This report is the culmination of developing that understanding of need, exploring how the work is best placed and providing opportunities to explore launching something that could make the lives of thousands of disabled people better across the region.

It is also timely given the WMCA's Single Settlement work to develop Functional Strategies and the Regional Growth Study giving a broader and deeper focus by evidencing the stark inequalities for disabled people across the WMCA core functions - Housing, Employment and Skills and Transport. It informs the WMCA's Health in all Policies and Health inequalities strategic priorities and emphasises the value of our work to reduce health inequalities. It demonstrates inclusive growth fundamentals and highlights how each area of work intersects and impacts the others. It is also timely and relevant for the manifestos and policy commitments of the new Government and West Midlands Mayor.

The West Midlands Mayor's Manifesto pledged to increase social housing, drive up standards in the private rented sector, remove pavement parking, deliver walking and cycling for all and reduce the disability pay gap. This report also places the WMCA in a positive position to realise the new Government ambitions including supporting more disabled people and those with health conditions in finding work through the 'Get Britain Working' White Paper; devolving funding to local areas to create joined-up work, health, and skills programmes for disabled people; two weeks of work experience will be guaranteed for every young people and improving the healthy life expectancy between different regions in England. This report recognises that no one manifesto pledge can be delivered in isolation and the necessity to work on the scaffolding to enable long term impact and change.

Disability Needs Assessment

Informed by the Disability Working Group, the Disability Needs Assessment, covers 3 aligned work streams:

This report is supported by three additional reports that together make up the Disability Needs Assessment. The following reports provide more indepth information and data than is presented within this headline report.

Disabled People's Voice Report 2024
Developing the **richness of insight and intelligence by listening to nearly 450 Disabled Peoples' voices** via consultation, workshops, online surveys and work with disability networks and organisations in the region. In doing so, strengthen the voice and networks of disabled people across the region, formalising structures and bringing together disability charities, advocates, and third-sector organisations to inform, influence and co-design future decision-making. The work provides a snapshot of the challenges, good practices, and enablers for disabled people. This work was being developed throughout 2024 and has a reach to over 2000 disabled people. **The Disabled People's Voice Report** accompanies this report.

Evidence Base Report
Understanding and analysing available **quantitative national, local, and regional data on disabled people** and where appropriate the comparison with non-disabled people or other regions. This included consultation with the Government's Disability Policy Unit. **The Disability Needs Assessment – Evidence Base Report** accompanies this report.

Accessible Housing Summary and Technical Report

Deep dive analysis of Accessible Housing for disabled and elderly people covering both quantitative data and lived experience insight including consultation with local authorities summarising accessible housing provision, policy, and practice, identifying the regional barriers and issues with the existing housing provision for disabled and elderly people in the region and making recommendations for WMCA and its stakeholders on future action. **The Accessible Housing Summary Report** and **Accessible Housing Technical Report** sets out this analysis and recommendations and accompanies this report.

The fundamental purpose of this needs assessment, by exposing and understanding the root causes of inequality to address the challenges that have day-to-day impact on disabled people.

Opportunities for Action

Organised four externally facilitated thematic workshops to analyse this data and identify opportunities for action that could be explored through this work. The housing, transport, employment and skills and health, social care and wellbeing workshops were designed to ensure disabled voices were centred in the discussions, to engage everyone in the room and really show the impact on people's day to day lives. 65 people attended the 4 workshops representing disabled people, sector experts, WMCA, Disability organisations and Local Authorities.

The Opportunities for Action were a snapshot in time and were guided by the conversations on the day. They are not an exhaustive list and could include interventions already underway / planned or that are not within the permissions of WMCA.

The resultant Opportunities for Action were prioritised by the DWG and are a combination of some policy and practical opportunities that could be explored. The Opportunities range from short term wins to very long term and aspirational goals. These are a "moment in time" and will continue to be reviewed and updated as the work continues, and data is gathered.

The DWG agreed Opportunities for Action for each theme, which are included within this report.

Recommendations

Utilising the Opportunities for Action, which were based on evidence and reality of life for disabled people a series of recommendations have been developed, involving guidance and agreement from each relevant WMCA directorate. Where recommendations connect with wider stakeholders, future discussions and permissions will be explored.

The recommendations are practical approaches to the opportunities for action that ensure a disability focus is considered. They will continue to be explored to understand where and how they can be achieved. Where possible recommendations will seek to be embedded within existing or future work plans to absorb costs. If it is identified that further investment is required, these will be explored through alternative funding streams and the development of business cases.

Key recommendations to enable open conversations to take place are:

- To appoint a commissioner to champion this vision for an exemplary region and hold the WMCA and partners to account by convening:

- To establish a strategic Disability Taskforce to drive this work forward. Consisting of key decision makers, disabled people, and disability organisations. The purpose of this Taskforce will be to drive recommendations forward, review progress and build and shape further recommendations in a co-produced way, based on evidence and need.

Chapter 3 – Growth for Everyone
Understanding Disabled People in the WMCA area

The key to enabling change is to understand the people this will impact.
Without a clear understanding, we would not understand the scale of the challenge.

What the data says

The Disability Needs Assessment Base of Evidence provides the most comprehensive understanding of a population cohort in the region. It is worth noting that the quantitative data will only ever tell part of the story and can only be interpreted with and against the rich insight and intelligence, of the lived experience of disabled people. Unless stated the "region" refers to the West Midlands Combined Authority region covering the Cities of Birmingham, Coventry, Solihull and Metropolitan Boroughs of Dudley, Sandwell, Walsall, and Wolverhampton. Please view the Disability Needs Assessment Base of Evidence Report for the full comprehensive data. The data collection, analysis and interpretation have told us:

780,000 disabled people
in WMCA region according to Family Resource Survey 22/23
(26.7% of the region's population)

Higher proportion than the 24% England average

The 3rd highest England region behind the Northeast and the Northwest

188k
WMCA residents in
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21K aged 16-24
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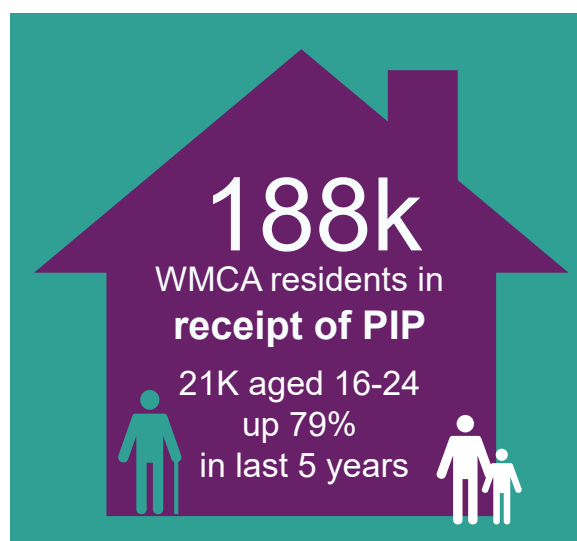
Disability Prevalence by Region in England (%)

ONS Family Resources Survey (2023)

Disability Prevalance Rate (%)

Region	Rate
London	~15
South East	~21
East of England	~24
East Midlands	~26
South West	~26
Yorkshire & Hum.	~26
West Midlands	~27
North West	~27
North East	~31

Image Description: The bar chart from the ONS Family Resources Survey (2023) illustrates disability prevalence rates across UK regions. London has the lowest rate at around 15%, while the North East has the highest at approximately 31%. The West Midlands, highlighted in purple, has a prevalence rate of around ~27%, placing it third in England.

% of Disabled People

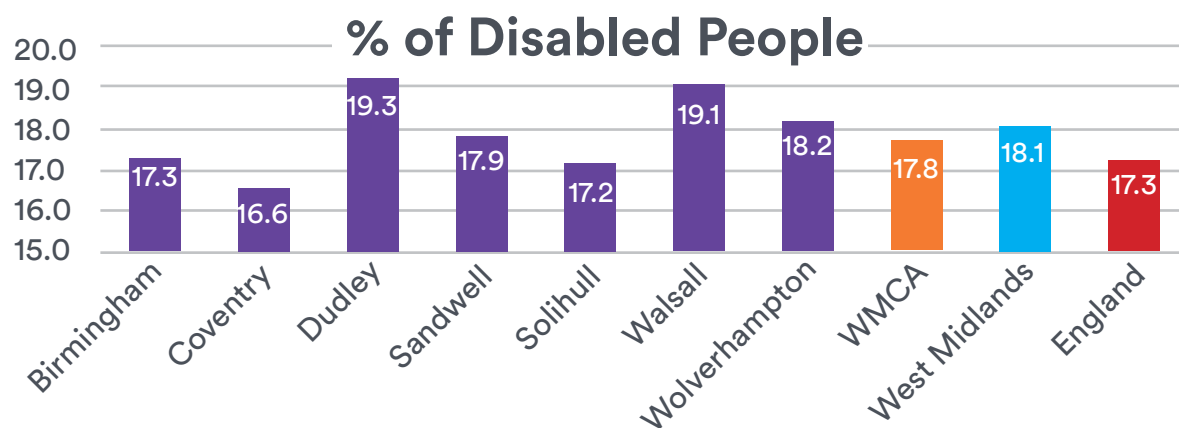| Authority	%
Birmingham	17.3
Coventry	16.6
Dudley	19.3
Sandwell	17.9
Solihull	17.2
Walsall	19.1
Wolverhampton	18.2
WMCA	17.8
West Midlands	18.1
England	17.3

Table 1 – Percentage population of disabled people per WMCA Local Authority.

Image Description: Graph showing the % of disabled people within each local authority: Birmingham 17.3%, Coventry 16.6%, Dudley 19.3%, Sandwell 17.9%, Solihull 17.2%, Walsall 19.1%, Wolverhampton 18.2%, WMCA 17.8%, West Midlands 18.1%, England 17.3%.

This data cannot be viewed in isolation and disability covers different impairment types, with some demonstrating a higher level of need and support. The three highest impairment types in the WMCA region are:

- Difficulty with mobility – 21% of the region's disabled people population, associated with limb difference and/or the loss of strength and muscle mass, stiff joints, gait changes that affect balance and range of motion.

- Difficulty with stamina/breathing/fatigue (SBF)– 16%. Evidence suggests that people with such conditions are much less likely to be in work, much more likely to be in poverty, and much more likely to be food insecure than non-disabled people and more likely to have other impairments.[2]

- Difficulty with mental health -16% - To consider the evidence and action, this report should also be read in conjunction with the WMCA's "Towards Mental Health Equality Report" (2023)[3] and the Draft WMCA Mental Health Commission One Year On (2024)[4]

Birmingham is the youngest city in Europe, however, across the region, we see disability prevalence increases with age:

- 7% are under 15 years old compared to 24% of non-disabled residents.

- 58% are16-64 years old compared to 64%.

- 35% are 65 years and over compared to 11%.

- This is also true across England although West Midlands has a steeper increase between 55 and 85 years. This aligns with disability-free life expectancy being lower in West Midlands[5]. 83% of disabled people nationally acquire their disability during their working lives.

The stark reality is that disabled people are more likely to live in deprived neighbourhoods. This aligns nationally with nearly 50% of all people in poverty being either disabled or living with a disabled person. 38.5% of LSOAs in the WMCA were in the top 20% most deprived areas for the health deprivation and disability domain in England.14.7% of those LSOAs are in the top 10% most deprived.

2 STAMINA, BREATHING AND FATIGUE IMPAIRMENTS A Profile using the Family Resources Survey 2019-20 Ben Baumberg Geiger (University of Kent/King's College London), August 2022

3 mental-health-report.pdf (wmca.org.uk)

4 West Midlands Mental Health Commission: One Year On progress report (wmca.org.uk)

5 Disability Confident. Gov.uk

Top 20% most deprived areas for the health deprivation and disability domain:
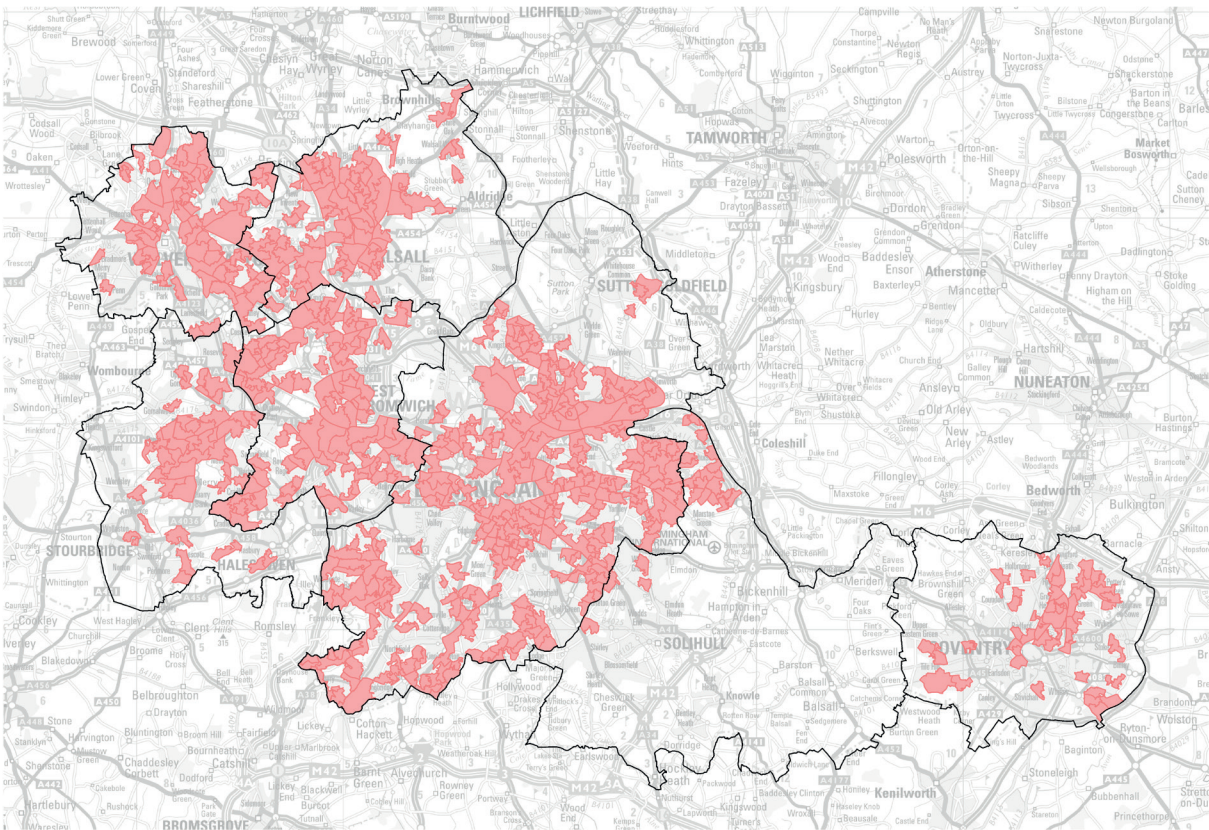

Table 2: WMCA geography and top 20% most deprived areas and where disabled people live.
Image Description: A map of the WMCA Geography overlaid with localities of deprived areas and where disabled people live.

55% of the region's disabled people are women, consistent with England average whereas the non-disabled population is split relatively 50:50 male and female. 75% of disabled people in the region class themselves as White, 15% Asian/Asian British and 5% Black, Black British, African, or Caribbean. This means for the WMCA area, there was a greater proportion of disabled people that are of a White ethnicity than the proportion of White people in the general population. All ethnic minority groups show a lower proportion of disabled people than the general population.

• Disability does not discriminate. Unpacking disability means understanding impairments and the intersectionality with people's other identities to truly understand needs, aspirations and, where appropriate, unique experiences of oppression.

Growth for everyone -The Strength of the Purple Pound

Additional work undertaken by the WMCA to inform the Needs Assessment, identified:

Annual spending power in WMCA of disabled people and their households is

£30.9 billion

Yet we know 75% of disabled people turn their back on businesses because of poor accessibility and customer service

Spending power of disabled people in the West Midlands

Estimated amount that West Midlands based businesses lose due to poor accessibility and customer service for disabled people

High Street shops lost **£25.6 million**

Restaurants, Pubs & Clubs lost **£15.6 million**

Supermarkets lost **£48 million**

Energy companies lost **£4.2 million**

Phone & Internet providers lost **£4.7 million**

Transport providers **£4 million**

Banks & Building Societies **£89 million**

Working with disabled people and other stakeholders to address the barriers and enablers set out in this report, will improve disabled people's outcomes as well as a multi-billion boost to the economy. By understanding disabled people better through data, voices and how they spend their money we can ensure that growth is for everyone.

Based on National 2023 Purple Pound figures broken down to West Midlands.

An Exemplary region for data, insight, research, and intelligence

The complexity of disability and intersectionality is reflected in the gaps, inconsistencies, and shortage of data across all impairments, from locality to regional to national data sets. Understanding the data, insight, research, and intelligence is one of the key components of being an exemplary region for disabled people, including:

- Adoption of a common definition and approach – the social model of disability

- Common and consistency in data and analysis from local to region

- Addressing the data gaps, inconsistencies, and shortages.

- Keeping data, insight, and intelligence current, relevant, and available.

- Amplifying the public health evidence-based approach to policy, investment, and programme planning.

Birmingham City Council has recently published / due to publish several deep dives into specific disability impairment groups (2024)[6]. These include good practice recommendations on a whole system approach to disability data collection and sharing. It seeks to use a harmonised data standard, making statistics and data more comparable, consistent, and coherent.[7]

Strengthening Disabled People's Voice

This needs to go arm-in-arm with a commitment to capturing insight and intelligence of disabled people's lived experiences and strengthening disabled people's voice in future decision-making on all matters relevant to them, working to the principle of "nothing for me, without me". This is reinforced by the data that shows that disabled residents in the region are already more likely to take part in the affairs and activities of their community, society, or government than non-disabled residents.

6 Birmingham City Council in Depth Impairment specific Needs Assessments

7 Government Analysis Function. **Impairment harmonised standard.** Accessed Jul 2024.

Case Study - Disability Equality Action Partnership

The Disability Equality Advisory Panel (DEAP) is one of the longest running multi-sector partnerships at Coventry City Council and has been in existence for over twenty years. The DEAP meets three times a year and representatives of groups and individuals are invited by the Chair to attend. Each year the Partnership is reviewed to ensure additional people can be invited to represent disabled people across a diverse cross section of Coventry residents, charities, voluntary organisations, and service users, who all work together as an effective, proactive action partnership.

Role of Disability Equality Action Partnership

- The partnership's role is to:
- Inform and assist the Cabinet Member with responsibility for equality in improving access for disabled people to Council services and employment opportunities.
- Identify issues that are significant to meeting the needs and aspirations of disabled people.
- Provide feedback to the Cabinet Member with responsibility for equality on key developments and policy proposals.
- To harness the skills, knowledge, and abilities of members to strengthen working together to identify and resolve issues.
- To provide a conduit for collating and disseminating key messages to disabled people.
- To ensure young disabled people and other disability forums are working collaboratively with the partnership.
- To identify key areas where services and partner agencies could deliver improvements.

Key Achievements

To support people with disabilities the DEAP made a commitment to launch the following four charters:

- Shopping Charter
- Transport Charter
- Sports and Leisure Charter
- Work Charter

To date the Shopping Charter, Transport charter and Sports Charter have been launched.

Shopping Charter

The Shopping Charter was launched in October 2019. The shopping charter sets out 11 commitments which allows all disabled people the right to visit and shop in Coventry, and access and support businesses in the city. The DEAP worked alongside many partners and organisations to agree and implement the commitments.

Transport Charter

The Transport Charter was launched September 2021 and sets out 10 commitments designed to improve and aid the experience of disabled people (hidden and visible) using public transport in Coventry.

It brings together regional partners, transport operators and local people so that we can work together to deliver a fully accessible public transport service that people with disabilities and additional requirements can use with confidence.

Sports and Leisure Charter

The Sports and Leisure Charter was launched March 2024. The Charter sets out a range of commitments designed to improve the experience and opportunities for disabled people and their families in Coventry to access sporting and leisure activities in the city. As part of Coventry City Council's One Coventry approach, we recognise that all members of society must have equal access to sport and leisure in our city.

Changing Places Toilets

With the support of the DEAP, Coventry City Council were awarded £260,190 of government funding to install five new Changing Places toilets in the city to help improve lives of severely disabled residents by March 2024.
The Council have installed Changing Places toilets at the following venues:

- Coombe Abbey Park
- War Memorial Park
- Shop Mobility
- Albany Theatre
- Tesco – Cross Point

Key Involvement in consultations, strategies, and project

DEAP has played a vital role in supporting council officers write key strategies and have taken an active role is designing projects such as:

- Shopmobilty
- The new on demand transport service
- Assistance Dogs and Taxi Services
- Traffic Management in the City Centre
- Accessibility to Polling Stations
- Anti-social behaviour in city centres (ebikes)
- Upper Well Street pedestrian crossing
- Local Plan
- Travel without Barriers scheme.

Growth for Everyone: Opportunities for Action

This ambition and Opportunities for Action were created by the Disability Working Group and have been used to shape recommendations within this report. These also show the connection to the Inclusive Growth Framework (IGF), where relevant.

Ambition: An exemplary region driven by an in-depth understanding of disabled people, the barriers, good practices, trends, and opportunities, strengthened by disabled people being part of the development and decision-making process.

Opportunity	Challenge (-) and Benefits (+)
Develop a regional campaign to encourage key stakeholders including Local Authorities and the WMCA to adopt the social model of disability to inform policy, practice, and action.	-The Medical Model can sometimes lead to societal exclusion, placing the burden of adaptation on the individual rather than addressing the societal barriers. +Disabled People can see that Local Authorities and WMCA place a significant value on disabled people to understand the barriers that impact them. IGF: Equality
Work with the Government and stakeholders on the harmonisation of data including prioritising & addressing the data gaps, shortages, and inconsistencies.	-Limited available data and potentially costly. +Develops robust and consistent data and intelligence on and for disabled people
Develop a current and relevant regional data platform which is accessible to all.	-Current data gaps, shortages, and inconsistencies. +Provides a data source to inform policy, practice and action and the ability to analyse trends.
A regional disability Data Sharing commitment to work together to unblock those issues preventing data sharing.	-Inconsistent data capture. +Amplifies the exemplary region for disabled people and brings added value to individual and collective work.
A regional commitment for all WMCA-wide employers to make their websites truly accessible.	-Inaccessibility limits opportunities. +Disabled people can access employment & other support.
To amplify Disabled Peoples' Voices in developing decisions and communicating on matters relevant to them by establishing a WM Disability Network connecting local and regional organisations.	-Disabled people's time and expertise need to be recognised. +Champion true co-production, responding to needs and evidence impact and challenges. IGF: Power and Participation

Growth for Everyone: Recommendations

The following recommendations are for the WMCA, but this work is only possible with a collective approach. These are recommendations as areas that will create a positive move towards becoming an exemplary region. The WMCA will work with other organisations to make their own decision on how to engage.

Code	Recommendation
P1	To seek agreement for all partners / stakeholders across region to understand the role the social model of disability can play within their organisation and adopt where appropriate.
P2a	To seek agreement with service areas, starting with the five devolved single settlement areas, to ensure that published data and evidence on disability and disabled people are regularly and consistently used for decision-making, analysis, and evaluation; and for data on users, outputs, and outcomes for disabled people to be consistently collected, analysed, shared, to address gaps in our understanding of the experiences of disabled people. To work through the Data Partnership with HM Government, Devolved / Chief Data Officers Council, and other organisations to harmonise data collection in government to ensure comparability across combined authority and other devolved footprints Supporting to make public disability data more easily accessible across WMCA and stakeholders for own use / analysis.
P2b	To convene discussions to harmonise the way future data collection is gathered by WMCA and stakeholders to ensure consistency and correlation. Engage with Disability Unit, NSIDAC and other national bodies to explore consistency at a national level. Gathering data not just about the presence of a disability, but about impairment type (e.g. mobility, dexterity, mental health, learning, hearing, and vision) as well as demographic data (e.g., age, gender, ethnicity, disability, and sexual orientation) should be done across the life course and align with the harmonised standards developed by ONS as recommended by the Inclusive Data Taskforce.
P3	To commit to and launch the Disabled People's Voice Network. Exploring opportunities on how disabled people can be embedded within coproduction opportunities across region and within WMCA.

Chapter 4 – Homes for Everyone

Supporting the WMCA's Health of the Region 2020 Report, the Disability Working Group identified Housing as a specific theme the group wanted some deeper understanding and analysis of. Improving the number of houses that are safe, affordable, accessible, and adaptable in the region is seen as one way of breaking the cycle of disadvantage. Everyone deserves to have a home that is safe and accessible.

An accessible home supports independence, health, well-being, and personal safety and reduces isolation. These benefits help to reduce health and social care expenditure, increase social inclusion and support access to the labour market for disabled people and their families. Meeting the housing needs of disabled and elderly people are examples of how the region delivers inclusive growth.

West Midlands Combined Authority seeks to support the creation of homes and places that fit the needs and aspirations of current and future residents in all communities across the West Midlands. Since 2018, existing funds have operated as gap funds to address market failure and support overall housing supply and regeneration throughout the West Midlands. These include the £128m Brownfield Housing Fund to support starts on 7,500 new homes; and the £24m National Competitive Fund to support 1,700 new homes, both by March 2025. The £100m Brownfield Infrastructure Land Fund is supporting new land capacity for 4,000 housing starts by March 2026 and the £100m Land Fund supporting 8,000 housing starts.

As part of the future single settlement, WMCA has been able to build on its experience unlocking the benefits of development across the region with a commitment of at least £400m Affordable Homes Programme, giving greater influence over affordable housing delivery and strategy, as a precursor to full devolution of the AHP from Homes England.

As part of the future single settlement, there are three principal functions:
1. Regeneration via enabling and improving local housing supply.
2. Delivery of capital investments to unlock additional housing and regeneration.
3. Remediation and development of brownfield sites.

The WMCA is exploring the role of health in housing, and how the areas of housing can influence health & wellbeing outcomes in their capacity as wider determinants of health.

The functional strategy will address these directly through a metric targeting proximity to key amenities in walk/wheelable distance for new and existing homes, including GP and pharmacy services, public transport hubs, green open space, and healthy food. It also proposes expanded activities to tackle Category 1 health hazards in social and private rented housing, including a renewed decency fund and several expanded resources and powers for Local authorities and the WMCA to augment existing monitoring and enforcement activities in Private Rented Sector licensing.

The Disability Needs Assessment Housing data and analysis is especially relevant given the Government's plans to increase social housing and drive-up standards in the private rented sector. In addition, it has relevance in delivering the West Midlands Mayor's pledge to remove pavement parking as accessible housing requires accessible environments and routes. Accessible housing in an inaccessible environment impacts isolation and loneliness.

The upcoming refresh of the WMCA design charter also allows embedding light and space standards, improved accessibility, and a variety of measures to improve the sociability of housing. It also supports broader master planning principles that promote active travel and proximity to key amenities. Moreover, an improved supply of high-quality, secure, and genuinely affordable housing can reduce stress and anxiety where housing costs, insecurity or overcrowding challenges can often increase levels.

> **"Why do disabled people have to live next door to each other?**
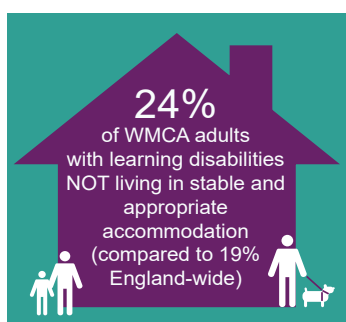> Accessible housing is often all together, why can't it be integrated and spread out in all new housing developments? How can one type of house meet the needs of all impairments?"
> Disabled Person (WMCA Disabled Person's Voice Report 2024)

What the data says
This data includes the data and intelligence and the additional findings from the Accessible Housing needs assessment.

- Disabled people in the West Midlands are less likely to own their own home (13.5%) than the England average (12.6%)
- In West Midlands, disabled people are almost three times more likely to be living in socially rented accommodation than non-disabled people.
- Disabled people are more likely to be living at home in adulthood.

24%
of WMCA adults with learning disabilities NOT living in stable and appropriate accommodation (compared to 19% England-wide)

What are accessible homes?
Building regulations specify accessible housing standards for all new homes. Current Local Authority plans determine how many homes must be M4(2) or M4(3). In 2022, the Conservative Government announced that M4(2) will become the new regulatory because it benefits everyone especially older and disabled people. Industry stakeholders also agreed with this regulatory change.

Category	Description	Challenges
M4(1)	**Visitable** – is the baseline default for all new homes unless optional standards are invoked.	Does not guarantee ease of access for disabled people, particularly wheelchair users.
M4(2) (currently optional standard)	**Accessible and adaptable dwelling;** features include wider doorways, and bathroom walls suitable for grab rails and stairs that will easily accommodate a stairlift.	It has made some considerations that could accommodate different impairments, however, more will most likely be required.
M4 (3) (optional standard)	**Wheelchair-user dwellings** meet the needs of a household that includes a wheelchair user and includes two sub-categories: M4(3a) meets the layout requirements for a wheelchair-accessible property. M4(3b) fully fitted so a wheelchair user can occupy with minimal personalised adaptations.	(a) While the floor plan can accommodate additional fittings and adjustments may need to be considered to make the house suitable for wheelchair users. (b) Is fully fitted to meet the needs of a wheelchair user with minimal adaptations required.

Table 4- Government Visitable and Accessible Homes Standards

Image Description: Table explaining the Government visitable and accessible home standards M4(1), M4(2) and M4(3).

Through the analysis of local plans and housing data, the Habinteg Accessible Housing Report for the WMCA identified:

- 79% of West Midlands homes are estimated to have been built before any accessibility standards available.
- **156,213** of homes in the WMCA could be deemed **broadly 'visitable'.**
- **28%** or **466,000** homes in WMCA **cannot be adapted** to reach the 'visitable' standard (national average).

A summary of WMCA Local Authority Plans status including the targets for the provision M4(2), M43a and M43b homes is provided below. This informs the proposals and opportunities for action on the number of homes by 2040 below.

	M4(2) Targets	M4(3)(a) Targets	M4(3) (b) Targets	Status
Birmingham CC	100%	10%	Nil	Preferred options
Coventry CC	90%	10%	10%	Issues and options consultation
Dudley	85% (up to)	15%	Nil	Draft plan consultation
Sandwell	100%	15%	Nil	Draft, consultation closed
Solihull	100%	15%	Nil	Draft submission
Walsall*	Nil	Nil	Nil	Review due autumn 2024
Wolverhampton	100% (Greenfield only)	Nil	15%	Issues and options, consultation closed

- Most specify high numbers of M4(2), but some restrict by type of development.
- Six specify M4(3) wheelchair user dwellings in some types of development.

Table 5- Local Authority Local Plans and status including planned provision of accessible homes standards.
*Walsall data not included as new Local Plan to be developed Autumn 2024 as set out in future planning policy.
Image Description: Grid table showing proposed targets for M4 standards in each Local Plan and status.

The Habinteg Report recommended to the WMCA that based on June 2024 data:

- The WMCA region needs

11,425 wheelchair-accessible properties by 2040 to meet demand.

current WMCA Local Authority Plans could generate a maximum of **5,714** by 2034.

(Figures updated following completion of Habinteg Report to reflect Birmingham City Council's announcement of a new local plan.

- most (52%) need is likely to be for general (not supported) housing for people 65 years plus, both affordable and marketable and
- **across WMCA 3,534 households** need accessibility or adaptation (5% of the total waiting list of 68,766)
- Of the 5714, approx. **2971 would be for people aged 65+**

Based on local plans, the breakdown of the 5,714 recommended wheelchair-accessible homes is provided below:

WMCA Region total 10-year best case forecast delivery of wheelchair-accessible homes:

	Housing target in plan	Average total P/A	Current or proposed % accessible homes policy M4(2)/M4(3)	Max. No. M4(2) 2024-2034	Max No. M4(3) 2024-2034
Birmingham	103,00 (2026-2042)	644	100%/10%	5152	515
Coventry	25,158 (2021-2041)	1258	90% / 10%	11,322	1,258
Dudley	10,876 (2024-2041)	640	85% /15% (20% M4(2) brownfield or low value g/f)	5440	960
Sandwell	11,167 (2022-2041)	589	100%/15% (best case 85% 15%)	5,006	883
Solihull	15,017 (2020-2036)	938	100%/5% (best case 95%/5%)	8,911	469
Walsall*	N/A	n/a			
Wolverhampton	21,720 (2022-2042)	1086	100%/15% (best case 85% 15%)	9,231	1629
		4115		45,062	5,714

Table 6 WMCA Region Wheelchair Accessible Home Forecast by Local Authority
*Walsall data not included as new Local Plan to be developed Autumn 2024 as set out in future planning policy.
Image Description: Grid table showing the predicted 10-year best case forecast delivery of wheelchair accessible homes based on local plans.

Comments received by disabled people echo the data with over 30% of disabled people responding to Habinteg's survey and the Disabled People's Voice report expressing that their appropriate and accessible housing situation was poor or very poor.

What would you like to be done to overcome some of these barriers and create truly accessible Community and Housing?

Respondent: "Housing - better planning, policies, stop putting people in inhabitable housing - especially when there is black mould, damp and stairs that are big issues. Community - involve those with disabilities in route planning and building planning and use - do test runs with people to see how things work."

Respondent: "More disabled parking provisions. Greater signage / education that people might have non-visible mobility issues, so to be considerate, follow guidance for walking on left etc."

Respondent: "Support needs to be widened for people with mild/moderate learning difficulties as they are currently excluded from any support."

The data analysis and the deep accessible housing needs assessment highlights the importance of adopting a more strategic outlook - WMCA, Local Authority Adult Social Care, Public Health and Planning and Integrated Health Care System developing an approach to accessible housing provision, oversight, and monitoring across the WMCA region as well as ensuring disabled people's involvement in the development of any new housing policies, services, and place-making.

Homes for Everyone: Opportunities for Action

This ambition and Opportunities for Action were created by the Disability Working Group and have been used to shape recommendations within this report. These also show the connection to the Inclusive Growth Framework (IGF), where relevant.

Ambition: An exemplary region which embeds a strategic approach across health and planning, working with disabled people to deliver safe, accessible, affordable homes and environments which enable disabled people to thrive.

Opportunity	Challenges (-) and Benefits (+)
Develop a strategic collaborative approach to disabled people's housing provision between Local Authority Housing and Public Health, NHS/ICB Health system and adult social care and disabled people to establish and monitor progress towards the target of the number of new accessible and adaptable homes by 2040.	Lack of connection to achieve outcomes collectively. +System wide approach to Person-centred services lead to better outcomes including well-being. Developers get insight into the financial viability of accessible housing. IGF: Health and Wellbeing, Connected Communities, Inclusive Economy
In delivering the above, deliver a regional commitment to minimum of 11,415 new wheelchair accessible homes by 2040.	-Current plans are below need +To meet demand and raise the number of homes which are visitable and accessible for everyone. IGF: Affordable and Safe Spaces
To establish, monitor and keep current a WMCA-wide Accessible and Adaptable Housing Register, tracking trends, shortages, and good practice.	-Lack of relevant region-wide data and trends. +Keeping an up-to-date record, that is relevant. Regional view of existing supply and demand. Enables a more targeted approach to addressing need and identifying gaps. A comprehensive list of adapted homes including what adaptations have been made. IGF: Affordable and Safe Spaces
Promote a campaign for all housing providers, private and social landlords to provide all disabled people with PEEPs (Personal emergency evacuation plan).	-Disabled people risk not being supported appropriately in the event of an emergency evacuation, placing them at risk of death. +Disabled people more aware of which houses support improved safety of disabled people. IGF: Equality

Opportunity	Challenges (-) and Benefits (+)
Establish a WMCA-wide Disability Facility Grant dashboard to understand and monitor progress, issues and best practices on decisions and priorities.	-Disabled people face a postcode lottery on how they are supported / treated when in receipt of DFG. +Local Authorities engaged & shared learning. Improved housing for disabled people. Potential opportunity for cost saving through supplies, and delivery.
To establish a regional housing developer charter to ensure all accessible and adaptable homes have practical, safe, and accessible storage for mobility aids by 2040.	-Disabled people do not have anywhere to store mobility aids, meaning they risk theft or don't have mobility aids and risk increased isolation.
A WMCA-wide commitment to upskilling local authority and social housing staff on a person-centred approach to housing provision including training, guidance and sharing good practice.	+Greater availability of affordable accessible housing. Removes barriers to disabled people getting around and reducing isolation. IGF: Connected Communities -Disabled people feel they are a number, and needs are failed to be met through lack of awareness and understanding. +Policies and services are more likely to be designed for disabled people. Will support societal change in attitudes. Possible cost savings from more effective services.

"I want to tell my story once"
"I do not want to re-tell my story to everyone I interact with. Or tell it in a public space or to justify my needs."
Disabled Person (WMCA Disabled Person's Voice Report 2024)

Homes for Everyone: Recommendations

The following recommendations are for the WMCA, but this work is only possible with a collective approach. These are recommendations as areas that will create a positive move towards becoming an exemplary region. The WMCA will work with other organisations to make their own decision on how to engage.

Code	Recommendation
H1a	To convene and establish a regional collaborative Health and Housing group to include Local Authority Housing Teams, Public Health, NHS/ICS, and Adult Social Care.
H1b	Initial emphasis on accessible and adaptable housing provision for disabled people. In delivering the above promote the use of Disability Needs Assessments as part of the Local Plan-making process requiring an appropriate level of supply for wheelchair accessible homes, and to promote capturing this requirement in the NPPF and socialising among the Planning Inspectorate.
H1c	In delivering the above explore the adoption across WMCA geography (and their local target) target provision of 11,415 new wheelchair-accessible homes by 2040 including practical, safe, and accessible storage for mobility aids and how they can be incorporated into regional growth plans and place-based strategies.
H2	To establish, adopt and monitor a WMCA geography-accessible and adaptable housing register, tracking availability, shortages, adaptations, and good practices which help services respond to disabled people's needs.
H3	To establish a WMCA -wide common Facility Grant Dashboard to understand and monitor progress, issues and best practice on decisions and priorities for disabled people.
H4	To support the development of a Good Landlord Charter that considers addressing inequalities faced by disabled people. E.g. exploring consistency of (Personal Emergency Evacuation Plans.
H5	To support a WMCA-wide commitment to upskilling local authority and social housing staff on a person-centred approach to housing provision including training, guidance and sharing good practice.
H6	To include the Disability Needs Assessment including the Accessible Housing Supply and Demand analysis as evidence-based documents in Local Authority Local Development Plans.

Chapter 5 – Jobs for Everyone

Everyone should have the same opportunities to gain the relevant skills, experience, and employment, understanding that some will require more to get to the same point. To best understand and interpret employment and skills data, it is key to also understand education data.

Employment and Skills are key to achieving economic growth in the West Midlands, as well as ensuring where appropriate, all residents can participate fully in the labour market. The DNA data identifies some new areas and reinforces knowledge that there is much more that the region can do, identifying many of the barriers that disabled residents face with accessing training and employment, reducing inequalities in outcomes and earnings, as well as progressing whilst in-work.

Since the 2019 devolution of Adult Education Budget (AEB) funding from Government to the WMCA, progress has been made to support disabled residents across the region, implementing new programmes and training, as well as working collectively with key partners to address barriers that have been prevalent for many years, and which have prevented residents being able to participate.

Through our AEB funded programmes, we have supported circa. 40,000 individual learners who have identified that they have a learning difficulty, disability and/or health problems since 2019. In addition to these programmes, we have also supported residents with health conditions into employment through our Thrive into Work programmes, sustaining work through Thrive at Work. This year we are launching Thrive at College, a programme aimed to support young people sustain their education, as well as supporting employees across colleges.

The WMCA's Employment and Skills Strategy, therefore, looks to build on our success to date, with a vision for a fully integrated employment and skills system for the region. Through this we can accelerate economic growth, deliver better outcomes for people and places, and create better thriving communities. Disabled residents and those with poor health are a key target group through this new strategy.

Supporting greater connectivity between employment and educational institutions for disabled people will be a key part of this work. Giving young people the best possible transition into employment, further education, and training, linking to our ambitions for that fully integrated employment and skills system and all age careers service.

This strategy will lead to a further strengthening of our training offer to residents across the region, including our work alongside partners in the Health Sector to improve pathways into the labour market, sustain work and progress, with a key focus on supporting residents who are disabled or those with ill health. Get Britain Working' https://www.gov.uk/government/publications/get-britain-working-white-paper/get-britain-working-white-paper. White Paper has set out a clear ambition from Government to engage with disabled people better, to support disabled people where approporiate into work and support those those where it is not and to make workplaces more inclusive environments for disabled people. This is very much supported by WMCA and aligns well with this report, the recommendations and wider plans to address youth unemployment.

In addition, the new Government and West Midlands Mayor have pledged to close the disability pay gap, with Government pledging to improve employment support and access to reasonable adjustments.

> **"What's the point of sending a kid to college if they can't get a job afterwards?**
> Please think longer term and save money while making lives better"
> Disabled Person (WMCA Disabled Person's Voice Report 2024)

What the data says

- The WMCA region has a **lower (3.9%)** than national average (4.3%) percentage of pupils with an Educational Health and Care Plan (EHCP) [8]

- Disabled people in WMCA with **Special Education Needs (SEN)** are **significantly less likely to achieve** academic attainment (15.4%) compared to non-disabled people in West Midlands (47.3%). They also perform worse than the national SEN average (17%).

- In the WMCA region 5.7% of people aged 16-17 with **SEN were Not in Education, Employment or Training (NEET)** compared to 1.8% without SEN.

- Disabled people are more likely to have an Entry Level, Level 1, or Level 2 qualifications as their highest level of qualification. Non-disabled people are more likely to hold a level 3, level 4, or higher qualification.

- The WMCA region has **817 WMCA-based organisations** that have committed to be **Disability Confident** [9].

- Disabled people have **lower rates of employment** across WMCA than non-disabled people and lower rates than other disabled people across the Country.

- A rise of 5% points in disabled people's employment would lead to an increase in the Gross Domestic Product (GDP) of £23bn by 2030. A similar rise amongst disabled adults below pension age by 2030, would result in £6bn gain to the Exchequer. It would also significantly reduce the rates of relative and absolute poverty among disabled people, with a rise of 5-10% points reducing absolute poverty by 2-3% and relative poverty by 3-5%. [10]

Get Britain Working' White Paper has set out a clear ambition from Government to engage with disabled people better, to support disabled people where approporiate into work and support those those where it is not and to make workplaces more inclusive environments for disabled people. This is very much supported by WMCA and aligns well with this report, the recommendations and wider plans to address youth unemployment.

8   Children with special educational needs and disabilities (SEND): Extra help - GOV.UK (www.gov.uk)

9   Excludes large companies with head offices outside the region.

10 Landman Economics' key findings

At 14.7% WM Avg. West Midlands has **2nd largest Disability Pay Gap** of all England regions (13.8% England Avg.)

Disabled Employees in West Midlands are **paid the lowest** in England (£11.16) compared to England average (£12.10)

Median Pay (£)

£16.00
£15.00
£14.00 — £1.87
£13.00
£12.00 — £1.31
£11.00 — £1.32
£10.00 — £1.02
£9.00 — £0.99
£8.00 — £1.35

2014 2015 2016 2017 2018 2019 2020 2021

----- Men Disabled —— Men Non Disabled —— Women Disabled ----- Women Non Disabled

Table 7 Disability pay gap trends for men and women between 2014 and 2021.
Image Description: Line Graph showing median pay for Non-disabled Men, Disabled Men, Non- Disabled Women, Disabled Women between 2014 and 2021. It shows that disabled women are paid
£1.35 less than non-disabled women in 21, compared to a gap of £1.87 for men, however women are paid less than men. For both this gap has increased since 2014. Women has seen the gap grow by 36p and men by 55p.

As part of the Disabled Person's voice and lived experience, disabled people completed an online survey. This highlighted the following barriers they have in gaining skills and employment that they aspire to:

- 55% Reduced access to opportunities
- 47% Lack of teacher understanding of disabilities
- 52% Bad management from employers
- 55% Inaccessible environments

Have there been barriers for you, as a disabled person, in gaining the skills and employment that you aspire to - through school, college and other opportunities such as apprenticeships?

■ Seriously Prevented (All the Time)   ■ Mostly Prevented
■ Prevented Some of the Time   ■ Never Been Prevented

| 27% | 13% | 30% | 30% |

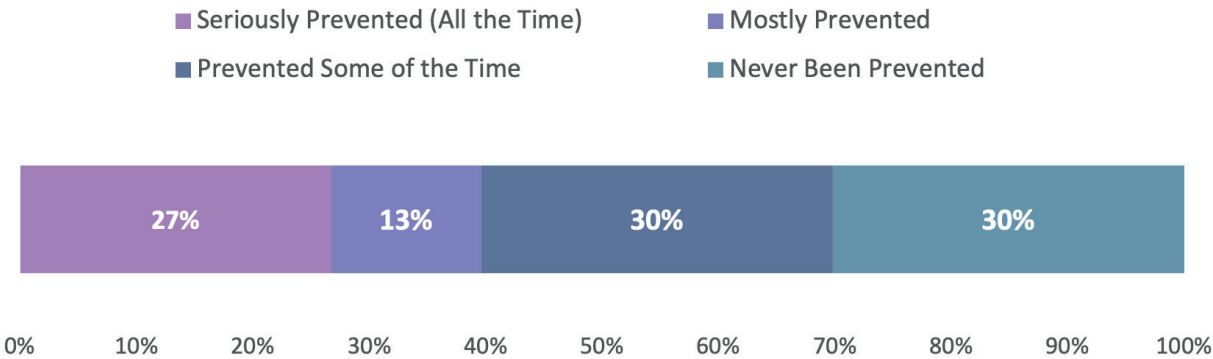0%   10%   20%   30%   40%   50%   60%   70%   80%   90%   100%

Image Description: The bar chart illustrates responses regarding barriers faced by disabled individuals in gaining skills and employment through education and apprenticeships. 27% reported being "Seriously Prevented (All the Time)," 13% were "Mostly Prevented," 30% were "Prevented Some of the Time," and another 30% indicated they had "Never Been Prevented."

Case Study - Thrive into Work Good Practice

The Participant (SC) self-referred to the service after speaking with her GP. They had been out of work for 18 years due to their mental health and being a carer for their son who has Cerebral Palsy. They were receiving Carers Allowance and PIP and not required to attend meetings with the Department for Work and Pensions. After completing 12 months of trauma-related therapy, her son started courses at college. She felt like the next logical step was to attempt to re-enter employment. She severely lacked confidence and felt they had lost their purpose in life. They were seeking fulfilment through employment that worked around the caring responsibilities for their son.

Intensive, person-focused work started at the sign-up stage to understand this person's needs and preferences. Due to the caring responsibility surrounding their son any job needed to be near enough home that they could respond quickly to any emergencies.

A rapid and targeted job search within a one-mile radius of their home started immediately.

The Thrive staff member identified and engaged with a potential employer at a local restaurant who needed a full-time cleaner. They focused on job carving and negotiating working hours with this employer which would allow the participant to work around the needs of their son. There was also a closely mediated process allowing the participant to disclose their mental health condition transparently with the employer which was crucial in the transition of this person back into employment.

An in-work support and wellness plan were completed ensuring reasonable adjustments were in place and were regularly reviewed.
The focus of all the support this person received was also around building their confidence and belief in themselves and their ability. After so long out of work and then getting into work so quickly the Thrive member of staff had to ensure the participant was ready and confident to take this next, big step.

This person successfully started this role and is still employed to this day. They received an additional four months of in-work support to ensure the change was sustainable and improving this person's overall wellbeing. The participant reported at the end of the support that the job has increased their mental health and overall well-being. They had increased their confidence and were even able to reduce the medication they were on. They now felt they had a sense of purpose in life in addition to being a carer for their son.

Jobs for Everyone: Opportunities for Action

This ambition and Opportunities for Action were created by the Disability Working Group and have been used to shape recommendations within this report. These also show the connection to the Inclusive Growth Framework (IGF), where relevant.

Ambition: A joined-up approach to supporting disabled people into "good work", and reducing the disability pay gap working with employers, educational institutions, and support organisations.

Opportunity	Challenges (-) and Benefits (+)
To champion and showcase best practices on the recruitment of disabled people with employers, including job advertising sites for disabled talent	-Disabled people miss out on jobs because employers offer inaccessible recruitment practice and can lack awareness if they do recruit.
	+Employers get access to great candidates who wouldn't apply through standard sites. Disabled people know recruitment will be accessible. Leading to inclusive employment & reducing pay gap.
To encourage and support employers on their inclusive journey to recruitment, employment, and talent development of disabled people via platforms such as Disability Confident and Thrive at Work.	-Lack of awareness and understanding across workforce or what support can be put in place to enable a disabled employee to achieve full potential. +Disabled people have an equal opportunity to progress with their current employer.
	Employers can ensure they are meeting the needs of their employees and enabling them to achieve their full potential at work.
To establish a regional employer commitment to reducing the Disability pay gap including initially making annual reporting on progress and actions.	-Reporting alone will not close the pay gap. It is an essential mechanism to highlight the inequalities. +Responsible employers will take steps to improve.
	Increased visibility will support additional measures to reduce gap. IGF: Inclusive Economy
To develop and create an opt- in regional Workplace Adjustment scheme (like the Government's scheme for civil servants / BT Disability Passport Scheme) that is transferable, such as through Thrive at Work.	-Disabled people have negative experience from having to share personal information on multiple occasions. Or having to fight to get equipment they know will benefit them every time they move role / job.
	+Allowing individuals to record information about their disability, long term health conditions, mental health issue or learningdisability; record reasonable adjustments agreed with the employer and help carriers communicate their needs when visiting tourist attractions; as positive evidence of greater inclusivity.

Opportunity	Challenges (-) and Benefits (+)
To champion a regional commitment to build and cement partnerships between employers and SEND schools to support diversity in the workplace and ensure all young people are equipped with skills, experience, and knowledge to enable them to flourish in work.	-Young disabled people not given the opportunity to experience work or are written off before even stepping through the door.
	+Reduction in youth unemployment numbers and Young People benefit from employment (emotional, financial, social). Employers will be able to fill vacancies with skilled workers. Financial benefits as more people in employment. IGF: Education and Learning
To explore social value opportunities through public procurements to support disabled people and organisations	-Disabled entrepreneurs are not given the opportunity to demonstrate the additional value they can bring.
	+Good employers are more likely to get support & contracts.
To work with employers to encourage subsidised access to assistive/ adapted cycles and mobility aids.	-Assistive and adapted cycles can cost much more than a traditional cycle, meaning cost is still prohibitive even on cycle to work scheme.
	+Greater access to employment for disabled people. Employers keep great talent. Active travel benefits – physical activity, environmental. IGF: Climate Resilience
To commit to further research to understand the impact of these changes on economic growth and prosperity.	-Not maximising the Purple Pound spending power into WMCA region.
	+Evidence of the impact of change, aligned to Functional Strategies and Place based working. IGF: Inclusive Economy

> **"We all need good work.**
> Everyone deserves the chance to work and contribute to society, people are missing out on disabled people's skills."
> Disabled Person (WMCA's Disabled People's Voice Report)

Jobs for Everyone: Recommendations

The following recommendations are for the WMCA, but this work is only possible with a collective approach. These are recommendations as areas that will create a positive move towards becoming an exemplary region. The WMCA will work with other organisations to make their own decision on how to engage.

Code	Recommendation
ES1a	Utilise Disability Confident as a mechanism to connect with supportive organisations on their disability journey by Establishing a regional voluntary employer disability commitment and campaign to: 1. Reduce disability employment gap. 2. Reduce disability pay gap. 3. Improve good work. 4. Improve career opportunities and leadership. 5. Report on progress.
ES1b	Achieving ES1a by championing the value that disabled people bring to the workplace and showcasing what good work looks like for disabled people. Focusing on: 1. Job creation and shaping of role. 2. Job adverts 3. Application processes 4. Interviews and assessment-based approaches 5. On boarding 6. Workplace adjustments (including regional Workplace Adjustments Scheme) 7. Retention and support 8. Career and talent development
ES1c	Achieving ES1a through a targeted campaign targeting two audiences. 1. Young disabled people. Highlighting the transferable skill sets their disability gives them and transferring them into the workplace. 2. Employer. Challenging perceptions around recruiting disabled people. The amazing transferable skills, diversity of thought, inclusive solution focused outcomes, connections to disabled people (someone like me) and other economic related benefits.
ES2	To develop and trial an opt-in regional Workplace Adjustment Passport to support disabled people, reducing the need to replicate conversations about their impairment, support needs, transferable skills etc.
ES3	Exploring opportunities to work with DWP to test a pre-approved Access to Work style approach and exploring opportunities to subsidise access to assistive/adapted cycles and mobility aid.

Code	Recommendation
ES4	To work with higher education sector on further research to understand the impact of employment and skills and disability. Initial focus areas to include: 1. Impact Education Health Care Plans (EHCPs) and struggling SEND services has on the outcomes of disabled people. 2. Understanding the social and economic value of disabled people. Exploring employment levels and civic participation in relation to different impairments and the economic growth and prosperity disabled people bring. 3. Correlation between PIP and unemployment benefit. Understanding those that want to work and those that are unable.
ES5	To develop guidelines to ensure all funded training providers are offering and promoting an inclusive learning environment. Highlighting a person-centred approach to adult education that encourages the needs of disabled people to be met through course design, adequate staff awareness and, what they can do within their existing funding envelopes to provide additional support where required at all stages. Monitored through contract and evaluation.

Jobs for Everyone: Youth Focused Recommendations

With the significant challenges around youth unemployment in West Midlands and WMCA's commitment to tackling the challenge it is important to understand that disabled young people are disproportionately impacted when it comes to skills and employment. Not only do all the recommendations above seek to support young people as well as older disabled people but there are some specific recommendations targeted directly to reduce inequalities for young disabled people.

Code	Recommendation
ES6	Give specific consideration to pathways into the labour market and where to build additionality in sector plans to support young disabled people. ensuring they have the opportunities and choice that meet their needs.
ES7a	To develop and foster partnerships between employers and SEND schools/colleges to support diversity in the workplace and ensure all young people are equipped with skills, experience, and knowledge to enable them to flourish in work, where appropriate. e.g. Hereward college and connection with Premier Inn.
ES7b	Where employment isn't appropriate championing life skills and civic participation. Focus on the belief that everybody has the opportunity to provide a valuable contribution to society in a way that is suitable to them.
ES8	To develop a positive empowerment campaign to encourage people who do not see themselves as disabled to be open about their impairment and how it can enable appropriate support to thrive in the workplace. Investigate how to challenge societal views and encouraging positive empowerment from a younger age so that disability is not seen as a bad thing.
ES9	In addition to achieving ES1a, develop a campaign encouraging employers to 'think differently' about their workplace environment and behaviours. Focusing on young disabled and neurodivergent people. Educating employers around how the acceleration of technology has created a future workforce that is more informed, more connected, and more aware of impact on a global scale than ever before and the impact this has on what they expect from an employer. At the same providing education around supporting mental health, disability particularly hidden disabilities that are often harder to understand and support.
ES10	To develop career pathways to encourage young people to undertake work experience in Adult Social Care or with disabled people to inspire potential careers to reduce youth unemployment, while educating about disability.

Chapter 6 – Journeys for Everyone

Being able to travel around the region is something that most people do without too much thought or consideration. From jumping on a bus to riding a cycle hire bike, from driving a car to walking to the shops, these are all things that most people could easily do. Disabled people should have that same opportunity to travel in a way that meets their needs: however, the reality is that disabled people must carefully plan and consider every time they leave their front door. The needs of disabled people moving around their local community through to accessing public transport safely and confidently vary significantly for different disabled people. Disability is not one homogenous group- they are all people, individuals with different needs in different situations and transport is no different. Equally, those tasked with delivering transport and highways services will not always be responsible for the challenges disabled people face, as the attitudes of society and not feeling safe due to vulnerability and hate crime play a significant part.

Transport for West Midlands (TfWM) part of the West Midlands Combined Authority (WMCA) is the Local Transport Authority which strives for a vibrant region fuelled by transport choices that are inclusive and fair, ensuring that there are journeys for everyone. This is reflected in the new Local Transport Plan[11], a key statutory duty to assess and plan the region's transport needs. The evidence-based Local Transport Plan sets out how TfWM, Local Authorities and partners will plan and manage the region's transport. This will help to address the current cost of living impacts for those people who rely on walking, wheeling, cycling, scooting and public transport and help to deliver a sustainable transport system that reduces impact on people and places.

WMCA has statutory powers for a number of key transport components but does not cover all forms of transport, identified through the data and insight from disabled people. Part of WMCA's role is to influence and support at a regional level, using data and insight, even when not directly responsible for services, and this work shows that making the region an exemplary one for disabled people is important.

> **"People drive off when they see my wheelchair.**
> Often my only transport option is a taxi; and sometimes they just drive off again when they see my chair. Buses, trains, and pavements are hard for wheelchair users"
> Disabled Person (WMCA Disabled Person's Voice Report 2024)

[11] Local Transport Plan - Related Documents | Transport for West Midlands (tfwm.org.uk)

What the data says

- **Disabled people** account for less than **9% of WMCA journeys.** The drop in usage by disabled people hasn't recovered since covid.

- Majority of journeys by disabled people is bus, closely followed by train.

- Over 40% of British Rail Stations do not have step free access from pavement to platform. **Transport for West Midlands** has **87% of its Rail Stations step free**. This equates to 6 stations.

- While step free access to platform is improving, access to trains still rely on ramps and this can be a challenge for disabled people and staff.

- Disabled people face significant anxiety around receiving support to get on and off trains. There are **5 different types of ramps** and correct positioning of ramps can be a challenge and requires additional staff training.

- **Two thirds** of **disabled people** experience **at least one problem** during their rail journey. These are not listed but does state majority are on the train itself.

- **Disabled people** in WMCA are **less likely** than England average to have **access to a car**, yet also since Covid are using public transport less. How are they getting around?

- 2.57m blue badges in England which is an increase of 5.7% since March 22. 127,874 of these are in WMCA which is just under 5%.

- **Disabled people feel less safe** in their communities to **walk, wheel or cycle**.

- Other major concerns of disabled people are access to pavements, from uneven pavements, bins, cars, A-sign advertising. This is having an impact on the confidence of disabled people leaving their front door.

28.2%
of WMCA disabled households have
no access to a car
or van (compared to 27.7% England-wide)

"People would rather a cute baby get on the bus than a person in a wheelchair. Even though I know my rights, I feel bad and feel judged and just give up and wait for the next bus".
Disabled Person (WMCA Disabled People's Voice Report 2024)

Modes of Transport that disabled people would like to see improved and more accessible in West Midlands.

Public Transport Services

Better Accessible Infrastructure for Emission Free Travel

All Other Private Transport Measures and Taxis

Chart categories (top to bottom): Bus, Train, Access to Pavements, Metro, Cycling and cycle routes, Taxis, Walking, Cars, Wheeling, Other, Micromobility. X-axis: 0% to 70%.
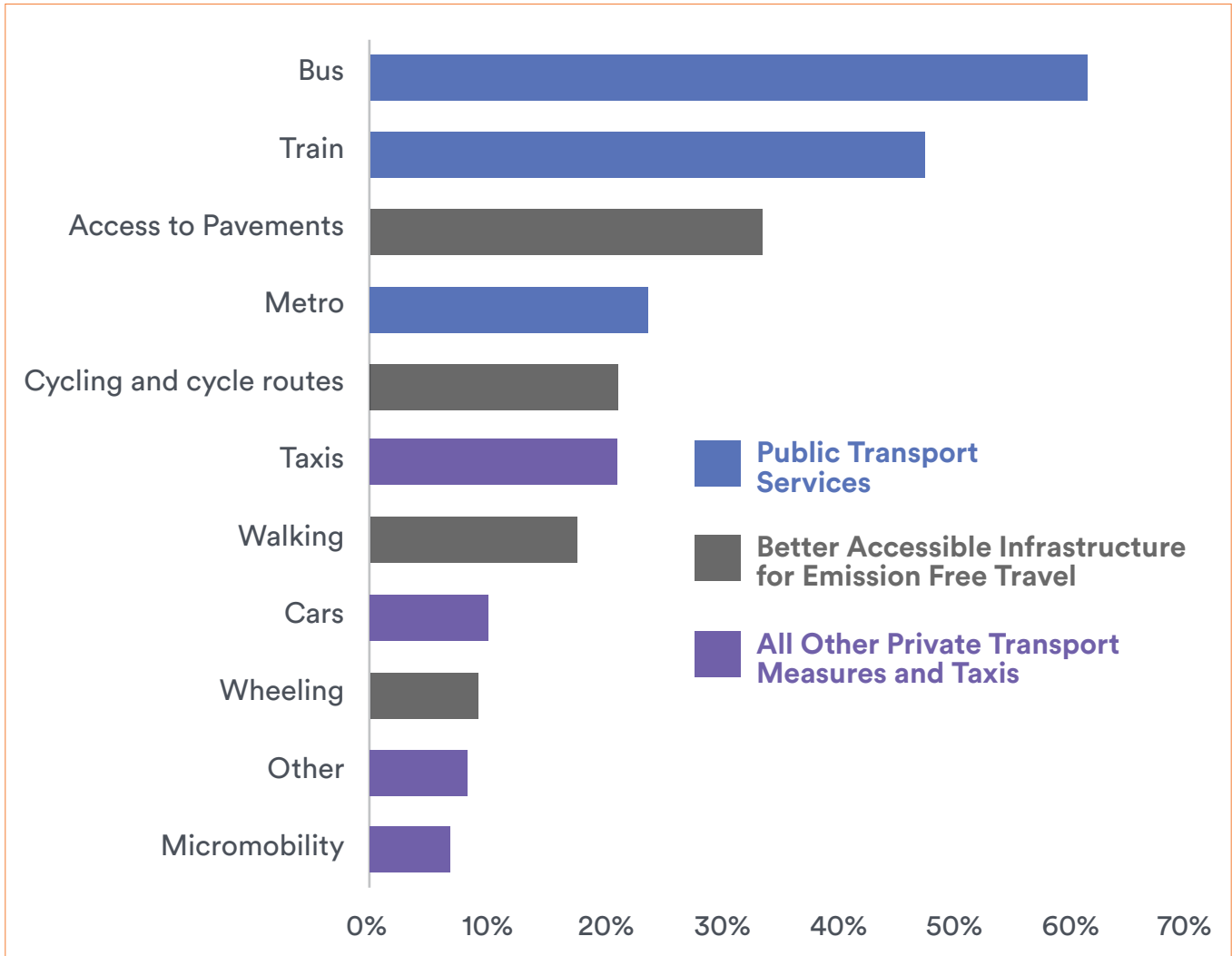
Table 8- The different transport types that disabled people want improved (Disabled People's Voices Report 2024)

Image Description: The bar chart displays preferences for transport modes that respondents would like improved and made more accessible in the West Midlands. The most popular response is Bus (62%) and Train (47%) which are public transport services, as well as Access to Pavements (34%). The lowest proportions are in Micromobility (7%), Other (9%) and Wheeling (9%). (9% would like to see improved walking and 21% would like to see better cycle routes (Better Infrastructure for emission free travel).

Journeys for Everyone: Opportunities for Action

This ambition and Opportunities for Action were created by the Disability Working Group and have been used to shape recommendations within this report. These also show the connection to the Inclusive Growth Framework (IGF), where relevant.

Ambition: A strategic approach to understanding the barriers and good practice in delivering the transport needs of disabled people between planners, transport providers, and health and adult social care to enable all disabled people to be better connected.

Opportunity	Challenges (-) and Benefits (+)
To launch and monitor a Transport design and Inclusivity Charter & request transport providers sign up for inclusive, safe, and accessible transport at all stages from planning, delivery, and operation.	-The needs of disabled people not always considered when developing solutions.
	+Will be able to see what works at a regional level and gather granular data on what isn't working. Disabled voices are heard, and changes are made, leading to greater access to opportunities. IGF: Connected Communities
Educate all in the rights of disabled people and make complaints process easy and supportive.	-Disabled people and providers not knowing the rights of disabled people meaning they are disadvantaged and more likely to have further negative experiences.
	+Disabled voices are heard, and changes are made. Broader understanding in society leading to change in attitudes. Providers better understand what they must / should / could provide and the benefit it has on both the disabled person and the business. IGF: Education and Learning
To commit to equalising provision for free carer transport across the region to enable them to get around and provide better care for disabled people.	-Disabled people who require a carer / personal assistant have to pay for them to travel with them adding to the additional costs they incur just to live at same standard as non-disabled people.
	+Greater access to opportunities for disabled people. Increases mobility of the actual and perceived value in care work. IGF: Equality

Opportunity	Challenges (-) and Benefits (+)
To work towards removing the time restrictions on disabled people's bus passes so that there are equitable opportunities for everyone to get around, and access services, work, and other opportunities.	Disabled people who are fortunate enough to get a job are more likely to be paid less, face additional costs to have the same quality of life as a non-disabled person, then have to pay to get to work.
	+Disabled people have greater opportunities for good employment. Society benefits from a higher employment rate.
To improve the inclusivity, safety, and accessibility of active travel routes for all, by using universal design principles and existing enforcement options, coupled with a commitment to a more inclusive cycle hire scheme (adaptable bikes) and behaviour change investment to get more disabled people walking, wheeling, and cycling.	-Disabled people feeling isolated as they do not feel safe leaving their home, or if they do leave their home face multiple challenges just to navigate the environment around them.
	+Greater access to opportunities for disabled people. Active travel benefits – physical activity, environmental. Supporting societal attitude changes
Invest in transport providers and planners to use connected technologies such as mobility aids & universal design as part of a wider behaviour change programme to make public transport easier, safer and to improve user confidence.	-Disabled people lack confidence or services not in place to support them.
	+Greater access to opportunities for disabled people. Fewer barriers for all, Improved wellbeing of disabled people, as journeys are less stressful

> **"Choice and control over what happens to me.**
> I am a person not a collection of symptoms"
> Disabled person. (WMCA Disabled Person's Voice Report 2024).

Journeys for Everyone: Recommendations

The following recommendations are for the WMCA, but this work is only possible with a collective approach. These are recommendations as areas that will create a positive move towards becoming an exemplary region. The WMCA will work with other organisations to make their own decision on how to engage.

Code	Recommendation
T1	To embed inclusive design and coproduction into TfWM regional Design Guidance. Embedding core inclusive principles into TfWM Functional Strategy where appropriate. E.g. improve the inclusivity, safety, and accessibility of new and existing active travel routes by using universal accessible design principles and a more inclusive cycle hire scheme and long-term behaviour change funding to get more disabled people walking, wheeling, and cycling. To develop, implement and evaluate a regional Transport Design and Inclusivity Charter as part of the TfWM Accessibility Strategy and Design Guidance, focusing on inclusive, safe, and accessible transport at all stages from planning, delivery, and operation. To ensure disability representation sits on TfWM Design Panel to champion inclusivity, safety, and accessibility in our future developments and designs. For example, floating bus stops creating unsafe space for visually impaired people or level boarding projects for train accessibility. To review existing guidance and assets and explore how to embed the latest inclusive best practice.
T2	To consider a centralised complaints system and process, which provides a simple route for passengers to complain or raise issues around service provision. For disabled people this needs to be supplemented with transport providers raising awareness of disabled people's rights.
T3	To ensure any future supported Travel Policies review / concessionary review includes a focus on free transport for carers of disabled people and removing time restrictions on disabled people's bus passes. Explore opportunities to pilot and evaluate the cost benefits of free transport for carers of disabled people and ending the time restrictions on disabled people's bus passes (e.g. young disabled people into employment).

Code	Recommendation
T4	Test and trial technology-based solutions to making travel easier, safer, and more welcoming for disabled people ensuring lessons learnt are embedded into practice.
T5	To strive to be the first 'step free' from pavement to platform train station region.
T6	To develop an inclusive EV Charging infrastructure.
T7	To influence government to ensure grant conditions allow decision makers to embed more sustainable and accessible infrastructure in both design and delivery

Chapter 7 – Health, Social Care and Wellbeing

The inequalities disabled people face across all areas of life impact their health and well-being. Health is a fundamental component that must be considered in all policies. Adopting this health in all policies approach provides better services, improved systems, and societal changes. This report and the work undertaken so far demonstrate what Health in All Policies means for disabled people.

Often health is seen as the responsibility of the NHS or social care, however, these are just aspects of health that have a much clearer alignment to health outcomes. There is also the need to focus on the elements that are more aligned to health outcomes as these equally have inequalities for disabled people.

More than access to healthcare

Socioeconomic Factors

Education   Job Status   Social Support   Income   Community Safety

Physical Environment

Health Behaviours

Tobacco Use   Diet and Exercise   Alcohol Use

Access to Healthcare

40%
10%
30%
20%

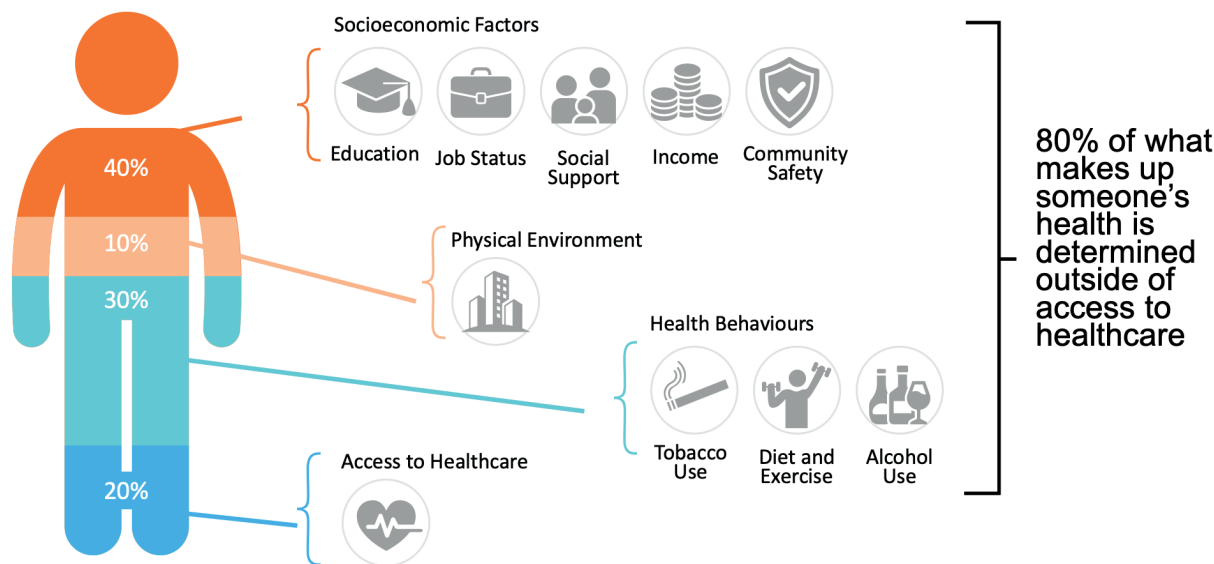**80% of what makes up someone's health is determined outside of access to healthcare**

Table 9 – The determinants of Health
Image Description: Picture of a silhouette of person with different % of them coloured differently to represent how they access healthcare: 40% Socioeconomic factors e.g.: Education, Job Status, Social Support, Income, Community Safety, 10% Physical environment, 30% Health Behaviours e.g.: Tobacco use, diet and exercise and alcohol use, 20% Access to Healthcare. This shows that 80% of what makes up someone's health is determined outside of healthcare.

What the data says

Disabled people score

worse on ALL

Wellbeing indicators than their non - disabled counterparts

- West Midlands disabled people **score lower** than disabled UK average for **happiness and anxiety** but **slightly higher** than the average for **life satisfaction.**

- **Gap** between disabled and non-disabled people was **larger across happiness, life satisfaction** and **anxiety.**

- Disabled people are **less likely** to feel they are **given the opportunity** to be **physically active** than non-disabled people.

- The **cost of living** is **impacting** on **activity levels** for disabled people more than non-disabled people.

- **Disabled people want to be active.**

- **37% worry** about **losing benefits** from being active.

- Disabled people in West Midlands not only **feel lonely most or all the time** compared to non-disabled people but also than the England average for disabled people.

Loneliness in West Midlands 2021

People with feelings of loneliness often/always

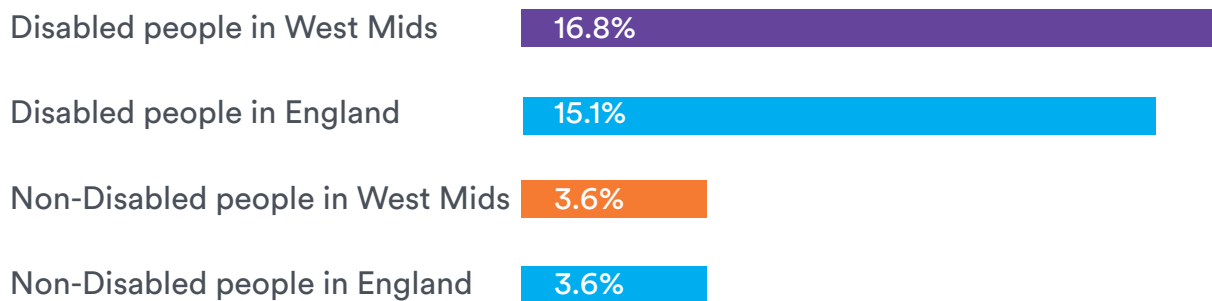|	
Disabled people in West Mids	16.8%
Disabled people in England	15.1%
Non-Disabled people in West Mids	3.6%
Non-Disabled people in England	3.6%

Table 10: Loneliness in the West Midlands – WMCA Disability Needs Assessment Data Report 2024)
Image Description: Bar graph showing the proportion of individuals who feel lonely all or most of the time. Disabled People in west Midlands 16.8%, Disabled People in England 15.1%, Non-disabled people in West Midlands 3.6%, non-disabled people in England 3.6%

- WMCA disability-free life expectancy is getting worse for both males and females.

- Despite all the inequalities disabled people are more likely to be involved in civic participation than non-disabled people.

What has been positive about your experiences within Health and Wellbeing?

Respondent: "Community Dental Services are properly Autism informed but they seem to be the only ones who are."

Respondent: "What has been positive about my experiences in health and well-being is me being able to do my volunteering and being able to enjoy my social life and my activities."

Respondent: "My local council run gym has 3 accessible pieces of equipment."

Respondent: "The interaction with my GP around my mental illness and the care and consideration they display when in consultation has been positive."

Health, Social Care and Wellbeing: Opportunities for Action

This ambition and Opportunities for Action were created by the Disability Working Group and have been used to shape recommendations within this report. These also show the connection to the Inclusive Growth Framework (IGF), where relevant.

Ambition: A regional cross-sector and stakeholder on collective action to improve the health and social care outcomes for disabled people

Opportunity	Challenges (-) and Benefits (+)
To ensure GPs and other health professionals use an annual Health Checklist with disabled patients to for example address social isolation, referring them to local relevant opportunities e.g., culture, arts, and sport.	-Disabled people accessing Health checks but not being referred to potential solutions. Possible issues with accessibility.
	+Disabled people will get support for mental health & build social connections. Referrals to other support. Savings in primary care. IGF: Equality, Health, and Wellbeing
Ensure Person-centred care is prioritised to ensure needs are understood and support is more effective by convening health and social care partners with disabled people.	-Equal level of care is given to everybody, not accounting that some may require more to receive the same. Challenge of changing behaviours/knowledge.
	+Better care for disabled people. Reduced stress for disabled people knowing their needs will be met. Savings if those in urgent care settings are in other supportive care/at home. IGF: Equality, Health, and Wellbeing
To deliver an awareness campaign for health service providers to boost their understanding of the social model of disability rather than the medical, contributing to improving health and wellbeing.delayed hospital discharge.	-Disability is seen as a problem that needs to be fixed. Ownership is on disabled person. It is your disability your condition. It is your problem.
	+Disabled people are listened to and able to decide what happens. More effective support when needs are understood.

Opportunity	Challenges (-) and Benefits (+)
Influence partners to use accessible information standards so that disabled people who are parents/carers are treated fairly and able to support those they have caring responsibilities for.	-Disabled parents are made to feel inadequate and need to rely on another when they can't access information regarding the person they care for.
	+Possible challenge of resources to implement, lack of knowledge. Removal of barriers so disabled people can equally access opportunities and services
To understand the barriers and enablers to get more disabled people active, reducing the fear of losing benefits if they are perceived to be too active.	-Disabled People are less active, increasing health inequalities and health related issues.
	+Removing this concern would encourage more people to be active including through active travel.
To deliver a regional social media campaign to improve the status and recognition of those working as Carers	-Carers not recognised for the great work they do.
	+Providing good employment. Ensuring safe personalised care for those who need it.
Encourage young people to experience work in adult social care or with disabled people to inspire potential careers to reduce youth unemployment, while educating about disability.	-People do not want to be there and do not engage.
	+Improve young people's awareness around disability. Potentially increase the number of people interested in a career in care.
To improve the number of disabled people getting active, taking part in culture by improving accessible design standards to all facilities and active travel routes.	-Disability not considered a priority and focus is placed elsewhere.
	+Removal of barriers to disabled people being more active/using active travel. Regional influence directly supporting residents. Environmental & health benefits of active travel.

> **"Naked in front of strangers.**
> When my carers are changing all the time, sometimes I'm just sitting there in front of someone about to care for me and I don't even know their name."
> Disabled Person
> (WMCA Disabled Person's Voice Report 2024).

Health, Social Care and Wellbeing: Recommendations

The following recommendations are for the WMCA, but this work is only possible with a collective approach. These are recommendations as areas that will create a positive move towards becoming an exemplary region. The WMCA will work with other organisations to make their own decision on how to engage.

Code	Recommendation
HW1	To explore how the Annual Health Checks can be delivered to an approved standard to support the improvement of the number of suitable referrals to address social isolation, mental wellbeing and improved health using culture, arts, sports, and physical activity.
HW2	To understand how person-centred care can be prioritised to ensure needs of disabled people are understood and support is more effective.
HW3	To consider the benefit of removing the suspension of care plans on admission to hospital. So that there is improved support for individuals whilst in hospital and reducing delays in discharge.
HW4	To support improving accessible information standards. Enabling disabled people who are parents/carers to receive information in an appropriate format for those they care for. E.g. visually impaired mother receiving large print letters for daughters' appointment.
HW5	To create a Community of Practice between commissioners to ensure consistent and joined up working and investigate ways of cost saving. E.g. Consistent provision across Wheelchair Services.
HW6	To Explore the implementation of Technology based social care solutions based on findings from national and local pilots such as: Adult Social Care Technology Enabled Care Pilot. Working towards increasing independence, reducing caseloads, and providing cost saving benefits, without reduction of essential support.

Code	Recommendation
HW7	To deliver an awareness campaign for health service providers to raise their understanding of the need to use medical model of disability alongside the social model of disability for example referring people to improve their wellbeing.
HW8	To develop career pathways to encourage young people to undertake work experience in Adult Social Care or with disabled people to inspire potential careers to reduce youth unemployment, while educating about disability. Highlighting health benefit to ES10 recommendation.
HW9	To lead research to understand the barriers and enablers to get more disabled people active without fear of losing benefits and use the findings to inform discussions with DWP, sport partners and disabled people on communications and behaviour change.

Chapter 8 – Conclusion and Next Steps

The Exemplary Region Report evidences the scale and the complexity of the challenge in addressing the stark inequalities that many of the 500,000 plus disabled people in the region, face principally every day. This complexity is compounded when the insight and evidence from disabled people tells us that not one action can be done in isolation. It is the scaffolding of improved transport, improved access to health and social care, safe and accessible environments and homes that may help more disabled people in to work.

The Opportunities for Action are drawn from the data and its analysis and the lived experience of disabled people and networks across the region. They are the current actions that have been identified that would lead to improvements in service delivery, and in opportunities. These are not exhaustive, and their achievement will show progress towards an exemplary region, but certainly not the endpoint. This work will evolve as governance approval is achieved, consensus gained, actions tested and implemented, funding sought and learning shared.

This report evidences the value of adopting a regional approach to develop a regional understanding of the health inequalities experienced by population cohorts. The Disability Working Group and the ongoing consultation with Local Authorities and other stakeholders including disabled people, evidence that there is some meaningful traction already to take this work forward. This work must be taken forward with disabled people, strengthening their voices in the future decisions in the region and this is why disabled people's voice and network is fundamental to taking this work forward.

This report's next steps are to:

- To get WMCA governance approval and continue with consultation with stakeholders to gain commitment from across the region to work towards an exemplary region and take forward these actions. This requires champions across the region to influence the policy and practice levers to enable delivery, strengthen disabled people's voice in future decision-making, gain consensus for work and be held accountable for the delivery of this report's actions. We do need a cross-stakeholder WMCA Implementation Group to champion this work.

- We also recognise that several of the recommendations may require future additional finance, which will be explored through appropriate channels, with business cases developed for each. There are also recommendations that do not need significant resources, other than a shared commitment to do something different or new such as the accessible housing register. It will be the taskforce/commissioner's role to make this happen.

In making this happen, the taskforce/commissioner will consider the Disability Working Groups recommended principles in how and why the actions are taken forward:

1. Expect complexity.
There are significant complexities in making changes as disability covers so many different impairments and individual needs can be very different, coupled with the intersection of race, gender, age and where people live.

2.Co-production and amplifying the voices of disabled people are essential.
Large-scale collective effort is needed to empower people to play their part from locality to region. Disabled people must be involved at all stages of the process if we are going to deliver long term sustainable change. While the voices of those with the confidence, the compassion, and the determination to be heard is important, there are so many disabled people that do not have the same opportunity, platform, or knowledge of where or how to be heard. The views of the "seldom heard" are just as, if not more, important. All disabled people representatives should be renumerated for their time sharing their lived experience and expertise, as part of a commitment to co-production and design.

3. Be prepared to learn when things don't go right.
Changing how things are done can be tricky, especially when working with many different partners with differing challenges. Learning from what doesn't work is as valuable as celebrating when things go well. Also, disabled people are not one homogenous group that all require the same developments. Each impairment is different and even people with the same impairment may require different things. Then add in other characteristics, life circumstances and it is likely not everything will be right for everyone all the time. The key to this is being open to trying to make things better, listening to the voice of disabled people, to trying to meet individual needs as best as possible through universal design.

4. Use your convening power and policy levers to make change happen
Ensuring this report is used to make decisions, act, and collaborate with others is key.

Join the WMCA on the journey of Making the West Midlands an Exemplary Region for Disabled People. We look forward to working with stakeholders to understand the part they can play in completing this jigsaw puzzle. Let's all connect together and make a significant step towards an exemplary region that enables disabled people in the region to thrive.

Resources

1. Disability Needs Assessment – Evidence Base
(data, intelligence and analysis report including data sources)
2. Disabled Peoples' Voice Report 2024
3. Accessible Housing Summary Report
4. Accessible Housing Technical Report

1   JP Landman Economics' key disability findings

2   STAMINA, BREATHING AND FATIGUE IMPAIRMENTS A Profile using the Family
    Resources Survey 2019-20 Ben Baumberg Geiger (University of Kent/King's College
    London), August 2022

3   mental-health-report.pdf (wmca.org.uk)

4   West Midlands Mental Health Commission: One Year On progress report
    (wmca.org.uk)

5   Disability Confident. Gov.uk

6   Birmingham City Council in Depth Impairment specific Needs Assessments

7   Government Analysis Function. Impairment harmonised standard. Accessed Jul 2024.

8   Children with special educational needs and disabilities
    (SEND): Extra help - GOV.UK (www.gov.uk)

9   Excludes large companies with head offices outside the region.

10 Landman Economics' key findings

11 Local Transport Plan - Related Documents | Transport for West Midlands (tfwm.org.uk)