

RESTRICTED!

During the 13 years period (2004 to 2017) I was privileged to be invited to serve in an advisory capacity on numerous central and regional government forums, all of which focused on health and social care related topics. Many of the forums also involved highly qualified individuals from the medical, social care and academic sectors.

One 'common denominator' which often arose during discussions related to addressing the social 'model' of health and wellbeing. Regrettably it still seems that many societies are not 'designed' to cater for the wide ranging and diverse needs of disabled people resulting in creating greater levels of social exclusion and inequality.

Disability (including mental and long-term health conditions) affects approximately 20% of the United Kingdom's population (similar percentages apply to the populations of the USA and Western Europe).

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Restrictions within societies encountered by disabled people are numerous but not always clearly apparent. These can relate to such subjects as personal transportation

needs, poorly designed or inadequate housing (preventing disabled people the opportunity to live independently), inaccessibility to public places and amenities (including leisure activities) to name but a few. Such restrictions within societies also have indirect but consequential affects on their carers and families.

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Time to think!

I consider it a privilege to have been given the opportunity to write this article for the current issue of Disability Review Magazine. However (and with much regret) since Founding Mobility and Support Information Service (MASIS) in 2012 and continuing to emphasise the benefits that can come from effective collaboration (a view strongly endorsed by my associates at an Oxford University based collaborating centre of which I was appointed a partner in 2018), it is still very evident that manufacturing as well as service providing companies who together can do so much to help reduce existing levels of exclusion and inequality experienced by disabled people and their families still choose not to collaborate with MASIS. ■



If this article has proved of interest to you, please do not hesitate to contact MASIS by

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