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Disability and Social Work Education in the United Kingdom

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Abstract

Social workers come into the lives of disabled persons on a daily basis. Yet, few schools of social work have a strong disability curricular focus. The researchers report on findings of a survey of disability and social work education in the United Kingdom. The findings include data on course offerings, curricula, field experiences, policies, equity policies regarding admission, and the number of disabled faculty and students in each program. Similarities and differences in supporting the unsettling of ableism, as well as advances pertaining to disability inclusion are discussed.

Keywords

Disability; Social Work Education; United Kingdom; Curriculum

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Introduction

Research from the United Kingdom suggests that despite legislative changes, improved quality assurance codes, and better support services that have contributed to increased numbers of persons with disabilities enrolling in post-secondary programs, the population remains significantly underrepresented in institutions of higher education including schools of social work (Adams & Brown, 2006; Madgriaga & Goodley, 2010).

Social work as a profession needs to be keenly aware of employment, educational and social challenges facing persons with disabilities. As a profession, social work needs to prepare students so that graduates have the knowledge base and skill level to address issues of inclusion and access of persons with disabilities (Carter, Hanes, and MacDonald, 2012; Dunn, Hanes, Hardie, Leslie, & MacDonald, 2008) as social workers are involved with people with disabilities in a variety of contexts, be it in institutions such as acute care hospitals, rehabilitation centres, or mental health facilities; through community based non-profit organizations; or within the government providing services, networking resources, or crafting and enforcing social policies

(MacDonald & Friars, 2009). Further, as the population ages the proportion of disabled persons will grow, for within Britain today there are ten million disabled persons, of which five million are elders (over the age of 65) (Disabled Living Foundation, 2014), hence increasing the need for social workers to have knowledge of disability. Social work challenges dominant discourses, unsettles normative assumptions and practices (Carniol, 2010), constantly pushing for inclusion of diversity and diverse perspectives (MacDonald & Bernard, 2014), which includes the integration of disabled people into the profession. Thus, disability is a field that social work needs to embrace by promoting disability scholarship, education, and inclusion.

In the UK, disability is defined as a person with "a physical or mental impairment, which has a substantial and long-term adverse effect on his ability to carry out normal day-to-day activities" (Disability Discrimination Act (DDA), 1995, Part 1, Section 1). The DDA focused on greater accommodation in all aspects of British society including postsecondary education (Wray, Fell, Stanley, Manthorpe, & Coyne, 2005). Basic understandings of disability within social work literature has changed immensely over recent years, yet research indicates that much more needs to be done so that social work education, research and thinking reflects a more progressive stand on disability issues (Roulstone, 2012). Within the literature, social work is an "enabling practice" whereby workers empower rather than "minister" to disabled clients. Yet, social work education itself has not entirely kept abreast of these new conceptualizations, which may be considered progressive disability discourse as few social work programs have a strong disability curricular focus.

Within this paper the authors explore the UK experience with curriculum based social work related to disability, including the underrepresentation of persons with disabilities as students and social work educators. Social work programs throughout the United Kingdom,

including England, Scotland, Wales, and Northern Ireland are explored through their respective accrediting bodies and an online survey in determining disability curricular aspects, such as course delivery, number of student and faculty with disabilities, accessibility and accommodations in efforts to provide a critical lens into disability and social work education.

Disability Content in Higher Education

Adherence to Medical Model and Diversity

Although there has been an expansion of inclusive education policies, it is unclear if these developments have been truly effective in augmenting the level of inclusiveness for disabled persons within institutions of higher education (Roulstone & Prideaux, 2008). Social work education and training, for example, have maintained a certain element of 'us and them' whereby social workers act to help and fix individualized clients as opposed to supporting their collective struggles (Roulstone, 2012). Moreover, terms such as 'frail', 'sick' and 'vulnerable' (Roulstone, p. 146) are often used to denote people with disabilities and such conceptualizations emphasize a medicalized construct of disability. There are a number of reasons that an individualized and medicalized notion of disability exist considering that disability policies often emanate from "neoliberal constructions of social exclusion; ideas that often point to the personal deficits of the excluded rather than the social barriers and inequalities that systematically exclude" (Roulstone & Prideaux, 2008, p. 15).

Since 2003, it has been mandatory for schools of social work in the UK to involve service users in a variety of areas including "student selection, design of the degree, teaching and learning provisions, preparation for practice learning, provision of placements, learning agreements, assessment of students and quality assurance" (Beresford & Boxall, 2012, p. 156).

MacDonald et. al., "Disability and Social Work" CJDS 3.3 (September 2014)

Although UK schools of social work have adopted more inclusive policies in terms of providing service users with a voice, Beresford and Boxall (2012) view the medical model as continuing to dominate within the various schools of social work. Beresford and Boxall (2012) note the significance of this contradictory process of including service users such as people with disabilities as part of selection and hiring committees, yet they appear to have very little input or impact upon the "theories and research which make up social work's underpinning knowledge or theory for practice" (p.161).

In academia, including social work education, discussions of disability are infused within the wider perspectives of lifestyle approaches and diversity, causing concern that disability discourse will become topical with the potential of diluting the subject matter (Roulstone, 2012). Diversity approaches are also inextricably bound up in liberal ideological frameworks that are constructed in models of equality that fall short of the actual needs of persons with disabilities (Roulstone, 2012). According to Roulstone, equality models fail to fully account for the considerable structural disadvantage persons with disabilities experience. As there are nearly 11 million people with disabilities in the UK, Roulstone suggests something as prevalent as disability should not be treated as an addendum by being infused within broader subject matter.

Student Perspectives on Disability

Research pertaining to disability inclusion in the UK not only questions the validity of course content but questions social work students' understanding of disability (Roulstone, 2012). Rees and Raithby (2012) used a longitudinal study to explore the attitudes of students toward their potential work with persons with disabilities, and subsequently, how curriculum affects these attitudes. They measured student attitudes at the beginning and end of their social work program, and at the end of the first year of field practicum and the study revealed a lack of

MacDonald et. al., "Disability and Social Work" CJDS 3.3 (September 2014)

understanding about disability issues among social work students. For example, although Wales has been identified as having a higher ratio of persons with disabilities than the rest of the UK (Rees & Raithby, 2012), schools of social work in Wales presented as far behind their counterparts in England when it came to disability positive discourse and inclusion. Welsh students reported feeling "powerless, uncomfortable, alarmed, overwhelmed, worried, isolated, shocked, upset, humbled and angry" associated with a "perceived lack of preparedness" in working with persons with disabilities, (Rees & Raithby, 2012, p. 185).

Rees and Raithby (2012) found some students criticized disability course content as distracting from other specialized areas of social work, while other students thought that the disability material enhanced their interest in disability. Many students reported that they felt their competency and awareness regarding the physical barriers faced by disabled persons increased, but thought they had inadequate information regarding the barriers faced by those with mental health disabilities (Rees & Raithby). Rees and Raithby noted that many students held a negative or biased view toward persons with disabilities. For example, only 58% of the subjects thought disabled persons experienced discrimination, while others felt that a person with a broken leg was more disabled than someone with mental health disabilities, HIV or cancer. Rees and Raithby (2012) point out that the disinterest and even negative attitudes towards working with persons with disabilities persisted over two decades of disability activism. To establish greater interest in disability, Rees and Raithby (2012) recommend that the theme of social justice be applied to disability in a "powerful and meaningful way" (p. 187) as a means of shifting an understanding of disability from a concept of individual loss to a framework of social oppression.

Policies Regarding Disabled Students and Faculty

Prior to the mid 1990s, educational institutions including universities and colleges in the UK had few, if any, policies that called for greater inclusion and support for persons with disabilities (Goode, 2007). In 1995 the Disability Discrimination Act (DDA) was passed by the British Parliament. This legislation advocated for greater inclusion of people with disabilities in all aspects of British society including postsecondary education (Wray, Fell, Stanley, Manthorpe, & Coyne, 2005). The Higher Education Funding Council (HEFC) (1999) supported persons with disabilities in accessing higher education, advocating for a greater increase in representation of disabled persons in institutions of higher education (Crawshaw, 2002). In 2002, Section IV of the DDA was amended by the Special Educational Needs and Disability Act 2001(SENDA), and as a result, institutions of higher education had to ensure that none of their policies or procedures placed persons with disabilities in a position of substantial disadvantage (Madriaga & Goodley, 2010). Working collaboratively, colleges and universities were expected to exceed the preexisting base level standards of reasonable accommodation by having written policies and procedures regarding the admission of disabled students, clearly outlining how students would be assessed and support services would be provided (Madriaga & Goodley; Goode, 2007).

In 2006, the Disability Rights Commission (DRC) lead an investigation into the impact of regulatory fitness requirements placed upon students with disabilities in teaching, nursing, and social work (Hoong Sin & Fong, 2009). Later the DRC required that all universities and colleges promote equality in opportunity and access and prevent "unjustifiable discrimination" in their programs (Health and Care Professions Council (HCPC), 2013). To be accredited, social work educators had to adopt and enforce "broad access and recruitment policies, which make sure that they select students from all sections of the community" (Sapey, Turner, Orton, SWAP (Funder), 2004). While disabled students are gaining increased access to postsecondary institutions, Hoong

Sin and Fong (2009) found that regulations have become quite stringent for persons with disabilities applying for social work programs. For example, regulation 4(4) requires that the applicant show evidence of "good character, and physical and mental fitness" (Hoong Sin & Fong, p. 1525). Moreover, regulations for disabled students vary throughout the UK; for example, there are mental and physical health fitness requirements in England and Wales but no similar demands are made by the Scottish Social Care Council (SSCC) (2013) (Hoong Sin & Fong, 2009).

Despite some changes as required by law, more needs to be done for disabled students (Taylor, 2004) as these students are often unaware of available supports or how to access them, and many students with disabilities feel "invisible," or experience difficulty in asking for accommodations (Goode, 2007). Although legislative changes have resulted in the development of more inclusive environments, further steps remain to be taken to ensure greater implementation of progressive disability-related policies.

Recommendations for Improved Social Work Education and Practice

Research suggests that few social work students identified an interest in working with persons with disabilities (Rees & Raithby, 2012). To rectify the status quo Rees and Raithby suggest that students could be helped to understand impairment within a wider context, by stressing the relevance of societal oppressions rather than individual limitations (Rees & Raithby). Rees and Raithby suggest schools develop disability content, by instituting a studentcentered approach and integrating academic and practice learning, in such a way that students can make the connection to the fundamental themes they purport are so important to them and to the social work profession. Further, Rees and Raithby suggest the kind of contextualized learning that includes service users, carers and experts in educating students is shown to dramatically

increase the interest level of students.

Researchers point to the need to stress the importance to challenge pathological and deficit-focused approaches to examining disability issues (Roulstone, 2012). One important step might include universities turning their focus to actively recruiting academics and students with disabilities who can serve as "role models and leaders in the field" (Roulstone, 2012, p. 153).

Students, Faculty and Practitioners with Disabilities

While persons with disabilities represent a large portion of social service users, they are noticeably underrepresented in schools of social work and in the profession of social work in the UK (Crawshaw, 2002). The noticeable under representation of postsecondary students with disabilities was noted by the Higher Education Funding Council (HEFC), which called for a greater increase in representation of persons with disabilities in universities and colleges (Crawshaw, 2002).

Evidence suggests universities and colleges have adhered to proposals such as the HEFC for greater inclusion of students with disabilities as there has been an increase in enrollments of students with disabilities. Notwithstanding the changes, substantial attitudinal and structural barriers remain. More needs to be done to address concerns, such as difficulties in recruiting, training, and retaining personal assistants (Taylor, 2004), and the need for improved educational supports, accessible service information, the development of peer support programs, accessible accommodations, funding for educational aids, equipment, and personal assistants, and development of affordable transportation systems. These changes are not only required at the postsecondary level but they are also required at the agency level. Mandates for greater access

must include field practicums, as relying on placement personnel to support students is not sufficient to increase inclusivity within the social work community (Crawshaw, 2002).

Methodology

Disability access, inclusion, and curriculum within schools of social work in Canada (Dunn et al., 2006, 2008; Carter et al., 2012), and within the United States (Hanes, Carter, MacDonald, McMurphy, & Skinner (in press) was linked to educational standards and accreditation requirements. For example, within Canada academic disability advocates fought to have disability curriculum set as a standard within social work programs so that all social workers would have a base knowledge of the barriers facing people with disabilities (Carter et al., 2012). Accredited programs were also used as a method of dissemination for the research surveys. Findings from this research show that there are different accreditation bodies, which evaluate social work programs within Universities in England, Scotland, Wales and Northern Ireland. A list of e-mails and telephone numbers of accredited UK schools and departments of social work was generated from the General Social Care Council (England) (GSCC, 2013). Scottish Social Services Council (Scotland) (SSSC, 2013), Care Council for Wales (CCW, 2013), and the Northern Ireland Social Care Council (Ireland). In England, this information was obtained from the GSCC prior to July 31, 2012 when the regulatory functions were transferred to the Health Professions Council (HPC), renamed the Health and Care Professions Council (2013) as of August 1, 2012 (GSWC, 2013). Thus, the College of Social Work was established in England with the goal of leading and representing the profession. The SSSC, CCW, and the Northern Ireland Social Care Council organizations continued to function as accrediting bodies for social work.

Contact information for approximately 100 schools and departments of social work was obtained from the General Social Care Council (England), the Scottish Social Services Council, the Care Council for Wales, and the Northern Ireland Social Care Council (2013). A qualitative online survey was distributed to heads of all accredited schools and departments of social work in the UK. A letter describing the study was e-mailed to 87 departments of social work in the UK. The e-mail provided a link to the online survey, hosted by a commercial platform, Fluid Surveys (Appendix A). Risks to participants were minimized by assigning a confidential number to each responding school. Information about schools was entered into a Statistical Product and Service Solutions (SPSS) system devoid of the school's name. A master list was maintained that linked the names of the schools to the number that had been assigned to them. Written records from each school will be kept indefinitely for future analyses and comparison. The questions asked in the survey regarding the disability content of the program curriculum and organization asks only factual data. No personal information was requested from the respondent. Assessment questions were not asked, nor were the opinions of the participant requested regarding the nature or quality of the program.

The survey was intended to gather a comprehensive view of disability studies and support for faculty and students with disabilities within the specific social work program. One set of questions focused on programs, curriculum content, student field experiences and practicum on disability studies. A second set of questions asked about the use of the social model of disability in social work education, scholarly activities, and faculty members' research agendas that included disability studies. A final set of questions asked about admission equity policies, student support services, and the number of individuals with disabilities currently registered in their programs.

MacDonald et. al., "Disability and Social Work" CJDS 3.3 (September 2014)

Of the 87 surveys distributed to UK departments of social work, a total of 24 online surveys were completed. The completed surveys represent over 25 per cent of schools or departments of social work throughout the UK. Responses to each of the open-ended questions were organized into separate data cluster sets and analysed thematically. Global themes were identified within each of the question sets and subthemes formed to capture the range of the answers by the respondents. The question set results was assessed by each of the coinvestigators. The final results were established by consensus using an iterative process among the project researchers moving between the cumulative thematic map and the details within the individual survey responses to ensure representativeness and authenticity to the original data.

Results

The survey of UK departments of social work resulted in 24 responses out of 87 for a 27.5% response rate, however not all respondents answered all questions so the 'n' value might be less than 24. The results are presented according to the thematic analysis conducted by the co-investigators.

Disability Curriculum

Forty-six per cent of the respondents indicated that they had courses or modules on social work and persons with disabilities in their Bachelor of Social Work (BSW) programs. In the UK, BSW courses on social work and persons with disabilities have been in existence from five to 20 years with an average of 10.82 years (n=11). Master of Social Work (MSW) courses on social work and disability in the UK have been in existence from four to 30 years with an average of 17.25 years (n=8). The number of students enrolled in courses on social work and persons with

disabilities at the BSW level ranged from 0 to 90 with an average of 42.85 (n= 14). The number of students enrolled in courses on social work and persons with disabilities at the MSW level ranged from 4 to 110 with an average of 52 (n=10). Ninety-one percent (n=22) of respondents indicated that their departments integrated the study of disability into courses related to direct practice, social policy or diversity, while five percent indicated that no such integration took place.

Social Model of Disability

In the UK disability issues are addressed through a social model of disability (Oliver, 1996). One hundred per cent (n=22) of the participants verified the use of the social model. According to Vehmas and Mäkelä (2009) the social model of disability "defines disability as a form of social oppression and hence as a phenomenon that should be conceptualized in social terms" (p. 43). The social model originated out of the United Kingdom through the works of Michael Oliver (1996). The social model defined interior environment anomaly as impairment and distinguished it from the disabling influences of negative attitudes toward and devaluation of those whose bodies were impaired" (DePoy & French Gilson, 2011, p. 90).

Twenty respondents elaborated on how the social model is incorporated into disability related course content, using words such as core, explicit, integral, foundational, and holistic to describe the significance of the model in their teachings. Seven of the participants wrote about the social model as "explicitly taught, in comparison with other models of disability." One participant mentioned how issues impacting persons with disabilities were framed through the social model. Two participants described disability as a social construct whereby "people with impairments face a large number of disabiling barriers." This understanding, together with "a

critique of individual, 'pathologizing' perspectives, forms an integral part of all teachings." Two participants pointed out that the social model is introduced in other disciplines, such as sociology. One respondent indicated that the social and medical models are "reaching the end of their shelf life," with disability scholars beginning to think beyond these models. Yet, three participants specifically mentioned that they teach the social model along with a critical examination of the medical model. Several participants wrote in terms of having students experience the social model of disability from a range of models, courses, workshops, and practice settings. Finally, one respondent remarked how strongly integrated the social model of disability was with social work principles and values.

Collaboration with other Departments

Thirty-three per cent of the participants (n=7) replied that their department collaborated with other departments that offer courses on disability or programs of study on disability, while 62% (n=13) said that they did not collaborate with other departments in offering courses on disability. Interestingly, 5% (n=1) did not know whether their school did or did not collaborate with other departments on the topic of disability. Nursing, medicine, the wellness agency, and the social sciences represented the areas named by respondents as offering social work students opportunities to take courses about disability.

Field Practicum Experiences

One hundred per cent of the participants (n=22) indicated that both their BSW and MSW students were doing field practicums with agencies that deal specifically with persons with disabilities.

Committees

Forty-one percent (n=9) of participants indicated that they had a persons with disabilities committee within their department, while 5% were unsure, and the remaining participants indicated that there was not a committee of this nature. One participant indicated that they would be interested in developing a committee to "raise awareness and promote disability related issues."

Students with Disabilities

The number of students with disabilities enrolled in undergraduate social work programs from 14 participating departments equaled 126, with a range of two to 21, calculated to an average of nine. The number of students with disabilities enrolled in MSW programs from nine participating departments equaled 66, with a range of zero to 15, and an average of seven.

Another common area highlighted was the integration and collaboration of services between schools of social work and disability access services at the various universities. Five participants indicated that a staff member acts as a Disability Liaison Support Officer or Disability Coordinator working closely with student support services in addressing student needs. Students with disabilities also have access to personal tutors, yet it was unclear as to who pays for this service, the student or the institution. In regards to the impact of austerity measures in the UK, one participant clearly stated that the pressures imposed by the economic crisis affect all aspects of disability, starting from the living circumstances of service users, and flowing through the expectations and demands on practitioners, to the pressures experienced in academic settings.

Service Users' Voice

When participants were asked for further detail on activities within their departments pertaining to disabilities, three departments (n=14) specifically highlighted their "service user and carer forum/group." This group, which includes disabled persons, is regarded as a "vital" component to the programs. As one respondent specifically noted, "Service user and carer involvement in UK social work programs is mandatory. They are involved in the design, delivery and evaluation of the educational programs." That same participant shared how they have utilized the knowledge of persons with disabilities by asking them to design, deliver, and assess a module delivered in the final year of the program. Another participant shared their co-teaching approach whereby a staff teaches along-side an adult with a disability in delivering specific content. Both these examples represent a true integration of service users and cares in a direct and meaningful way into social work education.

Scholarship

Participants in the areas of disability research and scholarship indicated how disability theorists have focused on inclusivity, producing landmark social work texts (Oliver, 1996; Morris, 1991, 1998; Shakespeare & Watson, 2002; Oliver, Sapey, & Thomas, 2012) and addressing barriers and accommodating impairments through research on inclusive curriculum design that spans numerous disciplines (Morgan & Houghton, 2011). One participant noted that social work educators are active as members of the interdisciplinary Centre for Disability Research (CEDR) (2013), which hosts a biannual international conference on disability studies in Lancaster, England.

Limitations of Study

While a 27 percent response rate may be considered relatively high the researchers note that the findings may not provide a detailed reporting of accessibility and inclusivity issues. Moreover, the 27 percent response rate may be affected by respondent bias. That is to say that schools of social work with "poor" standards, practices and policies pertaining to accessibility, inclusivity, scholarly research in the area of disability and enrollment of students with disabilities may have felt intimated to respond while those with "better" standards and the like may have been more likely to respond to the survey. In some cases it was also a challenge to match the contact data obtained from the GSCC (2013), the SSSC (2013), the CCW (2013), and the Northern Ireland Social Care Council (2013) websites to the present heads of individual university departments. The other significant issue was that the survey was conducted during a transitional period moving from Care Councils to the College, shifting the responsible for reviewing schools of social work. In their first year of operation (2012-2013) 28 schools have been reviewed and 71% received endorsement through The College of Social Work (TCSW) in England and Wales (The College of Social Work, 2013). Comments were often sparse to survey questions; however, the responses to the more open questions produced considerable information regarding inclusive environments and scholarly activities. And finally, the researchers note the limitations of online surveys as they do have lower response rates when compared to surveys administered on paper (Nulty, 2008). A follow up qualitative questionnaire would likely contribute to the data. Even though the survey was shared with a UK colleague at the developmental stage for cultural relevancy, one participant commented on the differences in the use of language and organizational differences. For example, in the UK staff is the term used to identify persons in the role of professor/instructor, whereas in North America, faculty is the term

MacDonald et. al., "Disability and Social Work" CJDS 3.3 (September 2014)

used. As for organizational structure another participant clearly articulates, "This questionnaire is being too restrictive and or difficult to fill in . . . it asked about courses . . . we have programs and they are composed of modules, this is the UK language."

Discussion

Although the results of this survey indicate similarities in social work education with other developed countries, such as Canada and the United States, there are significant differences. This discussion explores social work education in the UK, through the categories of the social model of disability, modules and courses, field, student enrollment, accessibility, collaboration with other departments, disability committees, and disability scholarship.

Modules and Courses

Forty-six per cent of the UK participants indicated that they had courses or modules on social work and persons with disabilities in their BSW programs. Participants reported that BSW and MSW courses on social work and persons with disabilities have been in existence from four to 20 years, which is similar to the Canadian experience (Carter, Hanes, & MacDonald, 2012; Dunn, Hanes, Hardie, & MacDonald, 2006). Ninety-one percent of the participants from the UK indicated that their schools integrated the study of disability into courses related to direct practice, social policy or diversity. In the US, disability is covered at the BSW and MSW levels in related courses on social policy, human behavior, or direct practice. However, while MSW courses in the US employ a critical perspective about disability, BSW courses reflect a medical model approach that is inconsistent with social work's professional adherence to a social model of disability (Lum, 2010).

Social Model of Disability

One hundred per cent of the UK participants verified that disability issues are addressed in the curriculum using a social model of disability (Oliver, 1996; Oliver, Sapey, & Thomas, 2012). The social model of disability views negative social factors, and not the disability, as restricting accessibility. Participants verified that the social model was "explicitly taught" in a range of models, courses, workshops, and practice settings. Participants framed disability issues through the social model, while critically examining the medical model, remarking how strongly integrated the social model of disability was with social work principles and values. Over the years the social model of disability has evolved, addressing the criticism that impairment is a component of disability that cannot be ignored. Hull (2011) notes,

While it is useful (especially in the context of thinking about social justice) to distinguish disabilities that result primarily from impairment from those that result primarily from a socially inadequate or discriminatory response to impairment, disability often involves a highly complex interplay of impairment and social factors. (p. 94)

Unpacking the medical model, situating the social oppression of ableism, while acknowledging the embodiment associated with impairment helps shape a full conceptualization of disableism.

Collaboration with Other Departments

Thirty-three per cent of the participants from the UK indicated their department collaborated with other departments, such as, nursing, medicine, the wellness agency, and the faculty of social agencies, in offering their students courses or programs of study on disability. In Canada, schools of social work rely heavily on other departments for course offerings about

disability (Carter, Hanes, & MacDonald, 2012). Similarly, collaboration between faculties in North American schools of social work is highly valued. Although collaboration is significant in US schools of social work, the collaboration is done with other disciplines using a deficit orientation as evident in the medical model and their association with medicine, rehabilitation programs and health studies (Lum, 2010). Collaboration between schools of social work and other departments, such as disability studies, have broadened theoretical understandings of disability, providing for richer best practice conceptualizations (Carter et al., 2012). Yet, Boxall and Bereford (2013) research found that the disciplines of social work and disability have "remained remarkably separate in the United Kingdom" (p. 587).

Field Practicum

As in Canada (Canadian Association for Social Work Education (CASWE), 2013) and the US (Council on Social Work Education (CSWE), 2013), standards for social work in the UK have been set by accrediting social work bodies (Health and Care Professions Council, 2013; Scottish Social Services Council, 2013; Care Council for Wales; 2013; Northern Ireland Social Care Council; 2013) who stipulate students must complete internships or placements for a minimum number of hours. Students work with a variety of clients. In the US and Canada, the placement course is seen as offering many students exposure to persons with disabilities whether or not they have a specific course on disability in their program. Where the US and Canadian schools suggest many of their students get exposure to people with disabilities in their placements, 100 per cent of the participants in the UK indicated that both their BSW and MSW students were doing field practicums with agencies that deal specifically with people with disabilities.

Disability Committees/Service User Involvement

Forty-one percent of UK departments of social work indicated that they had a person with disabilities caucus or committee. Several schools highlighted their "service user and carer forum/group." This group is involved in the design, delivery and evaluation of the educational programs. One participant indicated how people with disabilities were asked to design, deliver and assess a module delivered in the final year of the program. Another participant shared their co-teaching approach whereby a staff teaches alongside an adult with a disability in delivering specific content. These examples illustrate a progressive move on the part of the UK in undertaking to integrate users and cares in delivering meaningful social work education.

Although reports of specific disability committees in US schools of social work are unknown, the Canadian Persons with Disabilities Caucus of the CASWE encourage the development of committees to address the need for accessibility standards that would include accommodations for assignments, exams and presentations, along with technical and personal supports. Although many Canadian schools of social work have university-wide accessibility committees, one Canadian school of social work has developed a social work and disability studies, student-driven accessibility committee consisting of both faculty and students. The committee's terms of reference allow committee members to make recommendations for improvements to accessibility directly to the school of social work (Cragg, Nikolova, & Carter, 2013). The UK practice of having accessibility committees consist of both educators and students who are involved in the design, delivery, and evaluation of social work and disability modules, provides a timely, practical example for North American schools of social work.

Students and Staff with Disabilities

Findings suggest the number of UK social work students enrolled in courses on persons with disabilities is significant at 42.85 per cent for BSW programs and 52 percent for MSW programs. These numbers exceed the percentages in Canadian and US schools. In a study of 492 American and 32 Canadian schools of social work, Jurkowski and Welch (2000) found 35% of the schools offered some course content pertaining to disability; however, only 14% offered specific courses pertaining to disabilities.

Several participants from the UK also mentioned that staff members act as disability liaison support officers or disability coordinators, working closely with student support services in assisting students, who also have access to personal tutors. However, participants cautioned that the austerity measures introduced in the UK have impacted the time and resources available in academic settings as well as all levels of service to people with disabilities.

Disability Scholarship

The UK is noteworthy for its development of disability theory with the focus upon inclusivity and accessibility through the dismantling of ableist barriers and the creation of disability accommodations (Oliver, 1996; Morris, 1991, 1998; Shakespeare & Watson, 2002). The UK has produced landmark texts from UK departments of social work (Oliver, Sapey, & Thomas, 2012), and several scholarly journals on disability. Social work educators who are members of the interdisciplinary Centre for Disability Research (CEDR) also host a biannual international conference on disability studies in Lancaster, England.

Although smaller in scale, Canadian activities, similar to the UK, focus on disability from a social justice perspective, promoting accessibility. In Canada, the Canadian Centre for

Disability Studies and the Canadian Association for Disability Studies present scholarly work on disability, and disseminate this work through annual conferences, journals and web sites. Canada also has an annual Canadian Association of Social Work Education (CASWE) conference where research on disability studies is presented. In 2011 the journal, *Canadian Journal of Disability Studies* was launched, reflecting a critical perspective on disability. Several US national organizations highlighting disability hold yearly, international conferences. Two of these organizations, the Society for Disability Studies (2013) and the Association on Higher Education and Disability (2014) have professional peer reviewed journals. In brief, it appears that despite rehabilitative and medically focused journals there is a growing field of critical disability studies literature, which emphasizes progressive change, accessibility, and inclusion.

Conclusion

Social work and disability education in the UK has accomplished significant gains in scholarship, collaboration with other departments, and building international alliances. UK disability and social work scholars have done much to focus disability on the social model of disability and maintain awareness nationally and internationally. Even though UK scholars have provided an example for international schools of social work to follow with its persistent support of the social model of disability, UK participants identified that more needs to be done in promoting disability access and accommodations. Scholars must remain vigilant whether thinking about disability in the form of pedagogy, curriculum, services to students, faculty or staff with disabilities, or working on local, national and international committees to advance knowledge about disability and accessibility. As participants in this study identified, we must reflect on the work of disability scholars in maintaining and expanding the social model of

disability, specifically to include persons with mental health, intellectual or developmental

disabilities, and people with chronic conditions, along with their families.

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Appendix A

- Is your department/school of social work an accredited BSW/MSW social work program?
- 2) Does your department/school have any courses pertaining to *social work and people with disabilities*?
 - o If so, at what level... BSW or MSW or both?
 - o If such courses exist, how long have they been in existence?
 - o How many students are usually enrolled in the course on an annual basis?
- 3) Are you aware of students (BSW or MSW) who are doing field practicums with agencies, which deal specifically with people with disabilities?
- 4) Does your department/school collaborate with other departments that offer courses on disability or programs of study on disability?
- 5) It is understood that departments/school of social work in the United Kingdom address disability issues in their curriculum through a social model of disability, does your school/department of social work adhere to a social model of disability?
 - If so, how is a social model incorporated into disability related course content?
- 6) Does your department/school have any persons with disabilities caucus or persons with disabilities committees?
- 7) Does your department/school integrate the study of disability in courses related to *direct practice*, social policy or diversity?
- 8) Does your department/school have an equity statement, which addresses the needs of students with disabilities?

- 9) How many students with disabilities are enrolled in your BSW program at the present time?
- 10) How many students with disabilities are enrolled in your MSW Program at the present time?
- 11) Are there other types of information, such as committee development, efforts at creating an inclusive environment, and scholarly work related to disability, that would also be relevant?
- 12) Is there anything else happening at your department/school that is pertinent to disability?