

Disability Hate Crime



I Am Me Training Resource

How to use this pack?

This resource has been designed for use in a classroom setting and can be used to raise awareness of Disability Hate Crime with pupils, staff, carers' groups and Police.

The pack has been designed to complement the '**I Am Me**' DVD and can be used together or independently. The pack has been designed in collaboration with other agencies to help ensure a multi disciplinary approach to the lesson; each lesson can be used either with the DVD or independently. The lessons can be followed sequentially or used as stand alone lesson plans.

The '**I Am Me**' DVD is a powerful production based on the life of a young adult with autism and a learning disability. The DVD has been designed to encourage the audience to think about the effects that disability related harassment and abuse can have on an individual and the quality of their life, how incidents can quickly escalate and become serious and the effects that this has on the victim, the perpetrator and the wider community.

Before beginning any group sessions, please discuss the following with the group:

CONFIDENTIALITY

The training session encourages discussion about disability hate crime. Each individual should have his/her own views respected and it should be recognised that this may be the first time that participants and victims have had the opportunity to discuss disability hate crime. Some people may choose to disclose personal experiences and it should be agreed that anything disclosed will not be discussed out with the training session.

This should be respected in all cases unless there is a child or vulnerable adult protection concern, in which case an appropriate course of action will need to be identified.

It should also be noted that language used in this training may be explicit and is solely for training purposes and is not intended to offend anyone.

*"Education is the most powerful weapon
we can use to change the world"*

Nelson Mandela

Introduction and background

The **I Am Me** project is a community led project that was founded in Renfrewshire in 2013. The project is a partnership with the community group (I Am Me), **PACE** Theatre Company and **Police Scotland** and aims to raise awareness of Disability Hate Crime (DHC).

DHC is recognised as one of the most under reported crimes in the UK. It is estimated that around 97% of disability hate crimes currently go unreported (Mencap). This is for a variety of reasons, including fear of reprisal, fear of not being believed, or uncertainty about being unsure how to report it and also an acceptance that this is part of daily life.

The **I Am Me** project group worked closely with **PACE** in the design of a hard hitting drama for use in local secondary schools. The production received many plaudits and was booked to perform at the Scottish Parliament, the Police Training College and in many other areas across Scotland. The project committee secured funding for a DVD and training pack which would be available as a sustainable, free resource for use by any group across Scotland. The intended target audience is secondary school's pupils in S3 and above, plus adult audiences.

In addition to the drama, the group have worked closely with **Police Scotland** to develop a 'Keep Safe' initiative. **Keep Safe** works with a network of local businesses to create safe places for elderly, disabled and vulnerable people when out in the community. More information can be found on **Keep Safe** on page 86.

www.iammescotland.co.uk

@IammeScotland

www.facebook.com/iammeproject

Aims and Objectives

The lessons within this pack have been designed to enable the participants to:

- Understand the range of disabilities and define the difference between the medical model and social model of disability.
- Define what Disability Hate Crime is.
- Know how to report Disability Hate Crimes.
- Understand the consequence of committing Disability Hate Crime and how the criminal justice system treats these crimes.
- Understand the effects on individuals and wider communities.
- Understand the role of other agencies and the links with adult support and protection.

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Lord Advocate Frank Mulholland QC

As Lord Advocate, I am delighted to endorse this training pack and the work of the I AM ME project to tackle Disability Hate Crime, in all its guises. The targeting of disabled people is particularly abhorrent and there is no excuse for such offensive behaviour. It should be our desire, as a civilised society, to eradicate hate crime from our communities. I want to assure you of my support for the many efforts in Scotland to tackle disability hate crime, and of the Crown Office and Procurator Fiscal Service's continuing commitment to your communities.

This training pack is an excellent resource for schools and communities. It will enhance our shared understanding of disability, and this will help to ensure that people with disabilities are treated fairly and get whatever assistance they need in order to take a full and effective part in the criminal justice system. Every effort will be made across criminal justice to ensure your voice is heard.

Hopefully this training pack will not only deter people from engaging in offensive behaviour but will also encourage victims to speak out and seek appropriate help in the assurance that we will listen to them, that we will take their concerns seriously, that we will make every effort to protect them from their abusers and provide them with the support they require to testify against them.

I hope that this training pack will inspire you and give you the courage to stand up and support someone who is being targeted because they belong to a particular community and not become just a passive bystander to someone's hurt and distress.

We are heading in the right direction and I am confident that in time such offences will reduce as Scotland becomes an even fairer and more inclusive society to live in.



A handwritten signature in black ink that reads "Frank Mulholland".

Frank Mulholland QC
Lord Advocate

Sir Stephen House QPM, Chief Constable Police Scotland

Our aim is to improve the safety and wellbeing of people, places and communities in Scotland. Our focus is on keeping people safe, particularly the most vulnerable.

Unfortunately there are people within our society who, through disruptive behaviour and acts of crime, continue to threaten the safety and wellbeing of our communities. One such act is the bullying, harassment and abuse of disabled and vulnerable people, otherwise known as Disability Hate Crime.

Disability Hate Crime is an abhorrent act committed towards often already marginalised and vulnerable members of our communities. The effects of these incidents can be devastating, often damaging lives and preventing people from being able to make the most of the opportunities that society offers. These types of incidents cannot be tolerated and remain unchallenged.

Sadly, there are still too many occasions when people are targeted because they are different, whether by race, faith, disability, gender or any other characteristic. These crimes are often under reported as people fear repercussions, or in many cases have come to accept this type of behaviour as part of their normal daily life. Studies tell us Disability Hate Crime is under reported and we are looking at ways in which we can work with communities to increase reports across Scotland.

We know some victims or witnesses of Hate Crime do not feel confident reporting these matters directly to the Police. We have established, through new and existing partnerships, an alternative way to report such crimes through a network of 3rd Party Reporting Centres. Staff within these Centre's have been trained to help victims and witnesses to submit a report to the police or submit the report on the victim/witnesses behalf.

We have worked closely with community group I Am Me to develop a 'Keep Safe' initiative which works with a network of local businesses to create safe places for anyone feeling lost, frightened or vulnerable when out in the community. This DVD and awareness pack is a product of that close collaboration with I Am Me. It aims to raise awareness of Disability Hate Crime in our schools, disability groups, staff groups and within public services including Police Scotland. It helps to empower our people and communities to ensure that we collectively tackle and prevent Disability Hate Crime.

There is no place for hate crime in a modern and prosperous Scotland and we are determined to work alongside communities and our colleagues in the criminal justice system to do all in our power to prevent these crimes and to bring those who commit them to justice.



Sir Stephen House QPM
Chief Constable

SECTION ONE

Icebreakers

Icebreaker 1: I Am Me

Time:	5 mins
Objective:	Introduce the group to each other and to the effects of bullying.
Equipment:	Paper and Pens.
Method:	<ul style="list-style-type: none">• Ask the group to write down the name of the person to their left, on a piece of paper.• Ask the group to crumple it up, stand on it and call it lots of nasty names (e.g. stupid, retard, idiot etc).• Ask the group to smooth out the piece of paper and note how crumpled and dirty it looks.• Ask the group to tell the paper they are sorry.
Points of Discussion:	<ul style="list-style-type: none">• Lesson – No matter how sorry you are and how much you try to sort the piece of paper, the scars are already there and will never go away no matter how hard you try. This is what can happen when a person is bullied. You may say you are sorry, but the scars are there forever.

PRESENTER NOTES



Prompt group discussion around	<ul style="list-style-type: none">• Have you ever witnessed someone being bullied and not done anything to intervene?• Have you ever told someone who is being bullied to ignore the bully?• Have you ever heard the saying sticks and stones may break your bones, but names will never harm you. What about, "sticks and stones may break my bones but names will forever scar me!"
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Further Information

Bullying Facts

- Almost 45,000 young people spoke to Childline about bullying last year alone.
- 4,500 young people talked to Childline about online bullying.
- More than 16,000 young people are absent from school due to bullying.

Further information on bullying can be found at www.respectme.org.uk

<http://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/bullying-and-cyberbullying/bullying-cyberbullying-statistics/>

Icebreaker 2: Through my Eyes

Time:	10 mins
Objective:	Increase awareness of learning difficulties (e.g. dyslexia).
Equipment:	Intermediate 1 Latin Translation-Assessment 1.
Method:	<ul style="list-style-type: none"> • Give the group the Latin translation test (Activity Sheet). • Explain that the group have 5 minutes to translate the Latin to English using the word list provided. • Continually encourage the group throughout the 5 minutes, saying "read it slowly", "take your time", "it isn't difficult" etc. • After no more than 5 minutes collect in the sheets and ask the group to discuss how they felt during the exercise.
Points of Discussion:	<ul style="list-style-type: none"> • People who have a learning difficulty can struggle to understand the written word the same way as other people. It doesn't matter how many times you tell someone to take their time, read slowly or how easy it is if they try. If someone has a learning difficulty no matter how long they spend on it, how slowly they read it or how easy you tell them it is, they will not be able to do it.

PRESENTER NOTES



Prompt group discussion around	<p>What difficulties would you face if:</p> <ul style="list-style-type: none"> • You had a learning difficulty. • Your first language was not English (e.g. British sign language).
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Further Information

Dyslexia is a hidden disability thought to affect around 10% of the population, 4% severely. It is the most common of the Specific Learning Difficulties, a family of related conditions with considerable overlap or co-occurrence. Together these are believed to affect around 15% of people to a lesser or greater extent.

Specific Learning Difficulties (SpLDs) affect the way information is learned and processed. They are neurological (rather than psychological), usually hereditary and occur independently of intelligence. They include:

- Dyslexia
- Dyspraxia or Development Co-ordination Disorder
- Dyscalculia
- Attention Deficit Disorder

Further information can be found at

<http://www.bdadyslexia.org.uk/dyslexic/dyslexia-and-specific-learning-difficulties-in-adults>

'Learning difficulties' is a general term for a lot of different conditions with varying symptoms and severities. Some have well-recognised names like dyslexia; others are less well known, like dyspraxia or ADHD. It is important not to confuse a learning difficulty with a learning disability (IQ of less than 70).

Developed by: Scott Gallagher, Nika Thexton-Friel, Kirsty Arbuckle, Murray Keir, Ava Raeside, Morven Walker, Brooke McCreight and Meghan McGhee. (Castlehead High School).

Activity Sheet

Icebreaker 2 (Latin Test)

Latin Test – 5 Minutes to translate the Latin into English – use the translation list provided.

King Midas found a stranger in his garden and looked after him.

In Asia habitabat rex nomine Midas. Magnas divitias possidebat – sed stultus erat. Olim, dum Midas in horto ambulabat, virum ignotum dormiebatem ibi vidit. Itaque rex eum rogavit quis esset.

“amicus dei Bacchi sum” respondit vir. “templum dei invenire non possum.” Statim Midas servis imperavit ut cibum viro darent et eum ad templum ducerent.

The god Bacchus let Midas choose a reward for his kindness to his friend.

Quo audito, Bacchus laetus erat quod Midas amicum suum invenerat. Itaque praemium ei praebuit, Midas tamen avarus erat et volebat Omnia, quae tetigit, fieri aurea, mox Midas virgam e proxima arbore detraxit; virga quam tenebat aurea facta est. arenam tetigit et statim arena in aurum mutata est.

Midas soon realised he had made a foolish choice.

Illa nocte Midas cibum et vinum in mensa tetigit. Sed Omnia statim aurea facta sunt. Itaque neque edere neque bibere poterat. Quam miser erat Midas

Activity Sheet

Icebreaker 2 Translation List

Ad (+accusative) - to	Ille, illa, illud - that
Ambulo, are - to walk	Invenio, -ire, veni, -ventum - to find
Amicus, -I (m) - friend	Itaque - and so, therefore
Arbos, -oris (f) - tree	Laetus, -a, -um - happy
Arena, -ae (f) - sand	Magnus, -a, um - great
Asia -ae (f) - Asia	Miser, a, -um - miserable
Audio, -ire, -ivi, -itum - to hear	Mox - soon
Aureus, -a, -um - golden	Muto, -are - to change
Aurum, -I (n) - gold	Neque...neque - neither
Avarus, -a, -um - greedy	Olim - once upon a time
Bacchus, -I (m) - Bacchus god of wine	Omnia - everything
Bibo, ere - to drink	Possideo, -ere - to possess, to own
Cibus, I (m) - food	Praemium, -I (n) - reward
Detraho, -ere, -traxi, tractum - to pull down	Quam - how
Deus, dei (m) - god	Quis, quid - who
Divitiae, -arum (f.pl) - riches	Quod - because
Do, dare, dedi, datum - to give	Quoque - also
Dormio, -ire - to sleep	Rex, regis (m)- King
Duco, - ere, duxi, ductum - to take	Servus, -I (m)- slave
Dum - while	Statim - immediately
E (+ ablative) - from	Templum, -I (n.) - temple
Edo, -ere - to eat	Teneo, -ere, tenui - to hold
Et - and	Ut (+ subjunctive) - to
Fio, fiere, factus sum - to become	Video, ere, vidi, visum - to see
Habito, -are - to live	Vinum, -I (n) - wine
Hortus, -I (m) - garden	Vir, viri (m) - man
Ibi - there	Virga, -ae (f.) - twig
Ignotus, -a, -um - strange	Volo, velle, volui - to want

Icebreaker 3: Closed eyes, Open doors

Time:	10 minutes
Objective:	To try and understand from a blind person's point of view how complicated everyday things/tasks can be.
Equipment:	<ul style="list-style-type: none"> • Activity Sheet. • Blindfolds. • Scarf.
Method:	<ul style="list-style-type: none"> • Split group into smaller groups (4 or 5 per group). • Blindfold someone in the group and ask the rest of the group to give instructions to the blindfolded person to follow a simple series of movements. (5 minutes). • Discuss the difficulties that the groups faced.
Points of Discussion:	<ul style="list-style-type: none"> • How did it feel to be the person blindfolded – what difficulties did you face? • How difficult was it to communicate with the person who was blindfolded – was everyone speaking at the same time, were you assuming that they could see something?

PRESENTER NOTES



Prompt group discussion around

- How could we change the way we communicate to make things easier?

Further Information

Almost 44% of all registered blind people are women aged 75 and over. Just under three quarters of registered blind people are over the age of 65, with approximately two thirds being over 75. There are significantly more women registered blind (61%) than men (39%).

Blindness in Scotland

	Male	Female
Under 16	208	172
16-29	345	270
30-49	974	771
50-64	1,121	977
65-74	940	999
75 and over	3,861	8,304
All ages-total	7,449	11, 493

Developed by: Scott Gallagher, Nika Thexton-Friel, Kirsty Arbuckle, Murray Keir, Ava Raeside, Morven Walker, Brooke McCreight and Meghan McGhee. (Castlehead High School).

Icebreaker 4: Listen with your Eyes

Time:	10 mins
Objective:	To demonstrate how easy it can be to unintentionally exclude someone and how isolated this can make someone feel.
Equipment:	Headphones.
Method:	<ul style="list-style-type: none">• Arrange the group into smaller groups.• Pick one or two people in each group to wear headphones so they are not able to hear.• Ask the other people in the group to discuss (think of a topic that most people would have in common e.g. Christmas/holidays).
Points of Discussion:	<ul style="list-style-type: none">• How did the person(s) with the headphones feel? Did they feel excluded?• Did any of the group try to communicate with them e.g. non verbal signs or written communication?

PRESENTER NOTES



Prompt group discussion around

- How easy it can be to unintentionally exclude someone and how isolated this can make someone feel.

Further Information

Statistics on deaf people in Scotland.

There are an estimated 1, 012, 000 people in Scotland with some degree of hearing loss (of whom approximately 546,000 are over the age of 60). There are an estimated 701,000 people with mild to moderate deafness.

There are an estimated 57,000 people with severe to profound deafness in Scotland.

There are an estimated 2,000 deafblind people in Scotland.

Links to further information for communicating with people who are deaf or hearing impaired:

- British Deaf Association: BDA <http://www.bda.org.uk/>
- Scottish Council on Deafness <http://www.scod.org.uk/>

Developed by: Scott Gallagher, Nika Thexton-Friel, Kirsty Arbuckle, Murray Keir, Ava Raeside, Morven Walker, Brooke McCreight and Meghan McGhee. (Castlehead High School).

Icebreaker 5: One or the Other

Time:	5 minutes
Objective:	Things aren't always as they seem.
Equipment:	<ul style="list-style-type: none"> • Activity Card. • or different coloured board/coloured pens that can be used by class teacher on A3 paper.
Method:	<ul style="list-style-type: none"> • Place activity card onto projector and ask groups to shout out the colour, rather than the word (not the colour of the word). • If you do not have a projector, write down a list of colours using different coloured pens to the colour that is written, for example: <ul style="list-style-type: none"> • Blue • Pink • Green etc
Points of Discussion:	<ul style="list-style-type: none"> • How your mind can trick you and things aren't always as they first seem. • Did you have to read more slowly?

PRESENTER NOTES



Prompt group discussion around

- In some cases Dyslexia can cause a person to see letters switched around when they read (seeing "dlua" instead of "blue", for example). The activity will give you an idea of what it can be like when your brain sees things differently from your eyes.

Further Information

Did you know?

- The word 'dyslexia' comes from the Greek meaning 'difficulty with words'.
- One in 10 of us is thought to be dyslexic in some way. That makes over half a million people in Scotland.
- Each person with dyslexia has a unique set of difficulties and abilities – like musical talent, or good verbal skills.
- Early recognition, appropriate teaching and support at school can mean people with dyslexia don't have to lose out.

Famously dyslexic

Many well known, successful people are believed to have dyslexia, including:

- | | | |
|-------------------|-----------------------|-------------------|
| • Albert Einstein | • Sir Richard Branson | • Johnny Depp |
| • Jamie Oliver | • Anthea Turner | • Keira Knightley |
| • Orlando Bloom | • Princess Beatrice | • Kara Tointon |
| • Michelle Mone | • Jim Carrey | • Steve Redgrave |

Developed by: Scott Gallagher, Nika Thexton-Friel, Kirsty Arbuckle, Murray Keir, Ava Raeside, Morven Walker, Brooke McCreight and Meghan McGhee. (Castlehead High School).

Activity Sheet

Icebreaker 5

BLUE

RED

GREEN

BLACK

PINK

YELLOW

ORANGE

PURPLE

BROWN

Icebreaker 6: Can you handle it?

Time:	10 minutes
Objective:	Raise awareness of the difficulties someone who is on the autistic spectrum or has a mental illness may feel.
Equipment:	<ul style="list-style-type: none"> • Definition of Autism (Activity sheet 1). • Paper. • Pens.
Method:	<ul style="list-style-type: none"> • Split group into smaller groups and choose 'Person A'. • Allocate the rest of the group with a distraction e.g. whistle, tap person A on arm, sing loudly, ask questions, talk non- stop (make lots of noise and movement). • Ask person A to complete the activity sheet – they have 3 minutes to copy the text about autism. • Rest of the group must distract them.
Points of Discussion:	<ul style="list-style-type: none"> • How did person A feel? Could they concentrate?

PRESENTER NOTES



Prompt group discussion around

- Autism is a spectrum disorder and not everyone who has autism will behave in the same way. This activity is aimed at raising awareness of the difficulties that some people with autism may face if confronted by loud noises, especially if they are upset or in a new situation. They may try to calm themselves by rocking, moaning, talking loudly or even screaming. The moaning, talking or screaming helps them drown out the other noises so they can calm down. They may also try to go under a desk or in a small, dark place where they feel safer. (Ref – Disability Awareness Packet - by Bev Adcock and Michael L. Remus)

Further Information

- Links to further information about autism
 NHS CHOICES www.nhs.uk/conditions/autistic-spectrum-disorder
- Overview
 - Autistic-spectrum-disorder Real stories
 - Autistic-spectrum-disorder Map of Medicine
 - Autistic-spectrum-disorder Clinical trials
 - Autistic-spectrum-disorder Community
 - Autism spectrum disorder
 - Autistic-spectrum-disorder Symptoms
 - Autistic-spectrum-disorder Causes
 - Autistic-spectrum-disorder Diagnosis
 - Autistic-spectrum-disorder Treatment
 - Autistic-spectrum-disorder Adults with autism

Developed by: Scott Gallagher, Nika Thexton-Friel, Kirsty Arbuckle, Murray Keir, Ava Raeside, Morven Walker, Brooke McCreight and Meghan McGhee. (Castlehead High School).

Activity Sheet

Icebreaker 6

Autism is a lifelong developmental disability that affects how a person communicates with, and relates to, other people. It also affects how they make sense of the world around them.

It is a spectrum condition, which means that, while all people with autism share certain difficulties, their condition will affect them in different ways. Some people with autism are able to live relatively independent lives but others may have accompanying **learning disabilities** and need a lifetime of specialist support. People with autism may also experience **over- or under-sensitivity** to sounds, touch, tastes, smells, light or colours. In particular, understanding and relating to other people, and taking part in everyday family and **social life** may be harder for them. Other people appear to know, intuitively, how to communicate and interact with each other, and some people with autism may wonder why they are 'different'.

The three main areas of difficulty which all people with autism share are sometimes known as the 'triad of impairments'. They are:

- Difficulty with social communication
- Difficulty with social interaction
- Difficulty with social imagination.

Asperger syndrome is a form of autism. People with Asperger syndrome are often of average or above average intelligence. They have fewer problems with speech but may still have difficulties with understanding and processing language.

Autism should not be confused with a learning disability. Though some people with Autism may also have a learning disability.

A Learning Disabilities is a significant, lifelong condition with three components:

- Reduced ability to understand new or complex information or to learn new skills, due to IQ < 70,
 - Reduced ability to cope independently, and
 - Onset before adulthood
-
- Mild learning disabilities indicates an IQ = 50-70, or mental age of 9-12 years
 - Moderate learning disabilities indicates an IQ = 35-49, or mental age of 6-9 years
 - Severe learning disabilities indicates an IQ = 20-34, or mental age of 3-6 years
 - Profound learning disabilities indicates an IQ = 20, or mental age of less than 3 years

The average IQ is 100. The arbitrary cut-off to indicate learning disabilities is 70. www.nhsggc.org.uk.

Icebreaker 7: Choose your Side

Time:	10 minutes
Objective:	The objective of this activity is to identify how much the group knows about Disability Hate Crime or disability in general, and to see how much their views/opinions vary.
Equipment:	<p>Scenario 1: 'A person living in a street cons their neighbour who has Down Syndrome to give them £1000.' Is this an example of Disability Hate Crime?</p> <p>Scenario 2: 'A man in a wheelchair is in a busy shopping centre, and when he passes by a family, the mother hides her children from his sight.' Is this an example of Disability Hate Crime?</p> <p>Scenario 3: 'There is a young girl with dyslexia in a class and she is regularly ridiculed and called names such as 'retard' or 'stupid' etc and she retaliates by physically fighting them.' Who is in the wrong in this situation?</p> <p>Scenario 4: 'An individual who has not got a disability fools everyone into believing he has a disability which is not physically obvious. He uses this to his advantage to claim benefits etc.' Is this an example of Disability Hate Crime?</p> <p>Scenario 5: 'On a crowded bus, a person without a disability occupies the seats allocated for disabled people. When a disabled person asks politely if they would give up their seat, they refuse, leaving the disabled person with no choice but to stand on the bus, posing serious threats to their health.' Is this an example of Disability Hate Crime?</p>
Method:	<ul style="list-style-type: none"> The group will stand in the middle of the room, and a scenario will be read out to them. If an individual agrees they will move to the left side and if they disagree they will move to the right. If uncertain they will stay in the middle. After everyone has made their choice, have them discuss their answers (why they chose that side etc). Allow the pupils some time to make their choice and to come up with a reason why they made that choice.
Points of Discussion:	<ul style="list-style-type: none"> Whether each scenario is harmless, an incident or a crime.

PRESENTER NOTES



Prompt group discussion around	<ul style="list-style-type: none"> Scenario 1: Disability Hate Crime. Scenario 2: Not Disability Hate Crime. Scenario 3: Disability Hate Crime. Scenario 4: Not Disability Hate Crime (Fraud). Scenario 5: Not Disability Hate Crime.
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SECTION TWO
Lessons

LESSON ONE

Charlie's Story

*"Sticks and stones may break my bones,
but words can also hurt me.*

*Sticks and stones break only skin,
but words are ghosts that haunt me.*

*Pain from words has left its scar
on mind and heart that's tender.*

*Cuts and bruises now have healed,
but it's words that I remember"*

morethansaying.blogspot.com

I Am Me – Screenplay Synopsis

"Look out for me. Don't ignore me. Don't turn away and pretend you can't see. I am who I am because I am me."

I Am Me tells the story of 24 year old Charlie, a young man with a learning disability and autism. Charlie loves gardening and books but hates shouting and graffiti.

The story begins as Charlie is moving into his own flat. With Charlie's mum being ill and struggling with his care, Charlie's older brother Tom is keen that he takes steps towards living a more independent life.

Charlie is happy to get his own flat. He wants to be independent and likes getting to watch what he wants on television and sit in his own garden.

However, not long after Charlie moves in, he becomes the target of abuse from local youths. Angered by their perception that Charlie has been "handed a flat for nothing" and often fuelled by alcohol, they mock and ridicule Charlie for having a disability and intimidate him when he is out and about. Charlie hides what is going on from everyone, including his brother Tom, for fear that he may lose his flat. Tom, struggling to cope with supporting his mother and Charlie in addition to a demanding job, puts the changes in Charlie down to his mother's illness.

Over time though, the abuse starts to escalate going from low level name calling to vandalism, mate crime and latterly incidents of assault, culminating in a serious attack on Charlie in his own flat.

'I Am Me' is a hard hitting and emotional film that explores many complex issues surrounding the effects of disability hate, in a thought provoking yet sensitive way.

Lesson 1: Charlie's Story

Time:	1 hour
Objective:	Raise awareness of the effects that disability hate crimes and incidents have on individuals and the wider community.
Equipment:	<ul style="list-style-type: none"> • I Am Me DVD (45 mins). • Flip Chart(s). • Pens (3 different colours, including 1 red).
Method:	<p>Watch the DVD.</p> <p>Split group into smaller groups (around 4 or 5 people per group).</p> <p>Ask each group to draw a person on the full size of the flip chart page.</p> <p>Write inside how Charlie felt.</p> <p>Write outside what/who made Charlie feel this way.</p> <p>Write in red pen who could have intervened.</p>
Points of Discussion:	<p>What made Charlie Happy? Who made Charlie happy and how?</p> <p>What made Charlie scared/sad? Who made Charlie feel this way and how?</p> <p>Why did people make Charlie feel this way?</p> <p>How serious could the situation have been?</p> <p>Who could have made a difference?</p> <p>What should or could they have done?</p>

PRESENTER NOTES



Prompt group discussion around	<ul style="list-style-type: none"> • Peer Pressure – How did Jess and Cal feel? • Bystander Effect – Why did Jess and Cal not intervene? • Empathy – How did you feel when watching how Charlie was being treated? • Consequences – What could have happened and how could this have affected Brian, Jess, Cal and the wider community? • Social Isolation – What happened to Charlie, his job, his family, his quality of life?
	<p>If anyone has been affected by Charlie's story and they want to report an incident they can do this either:</p> <p>By calling 101 (999 in an emergency)</p> <p>In person at any Police Station or Third Party Reporting Centre Online at http://www.scotland.police.uk/contact-us/hate-crime-third-party-reporting/</p> <p>Support and assistance can be provided by Victim Support 0845 603 9213</p>
Further Information	
Peer Pressure	Is an influence when a peer group, or individual encourages another person to change their values, or behaviours to suit other peoples convenience. This includes membership groups, in which individuals are "formally" members (such as political parties and trade unions), or social cliques in which membership is not clearly defined. They may also recognize dissociative groups with which they would not wish to associate, and thus they behave adversely, in ways concerning that group's behaviours. In general, peer pressure is a form of social pressure by a group upon an individual who must take action in order to be accepted. (wikipedia).
Bystander Effect or bystander apathy	Is a social psychological phenomenon that refers to cases in which individuals do not offer any means of help to a victim when other people are present. The probability of help is inversely related to the number of bystanders. In other words, the greater the number of bystanders, the less likely it is that any one of them will help. Several variables help to explain why the bystander effect occurs. These variables include: ambiguity, cohesiveness and diffusion of responsibility. (wikipedia).
Empathy	The ability to share someone else's feelings or experiences by imagining what it would be like to be in that person's situation. (cambridge.org).

PRESENTER NOTES cont'd



Consequences

A result of a particular action or situation, often one that is bad or not convenient: Not making a will can have serious consequences for the people you might wish to benefit. Scientists think it unlikely that any species will actually become extinct as a consequence of the oil spill. I told the hairdresser to do what she wanted to my hair, and look at the consequences! Well, if you insist on eating so much, you'll have to suffer/take (= accept and deal with) the consequences! (cambridge.org)

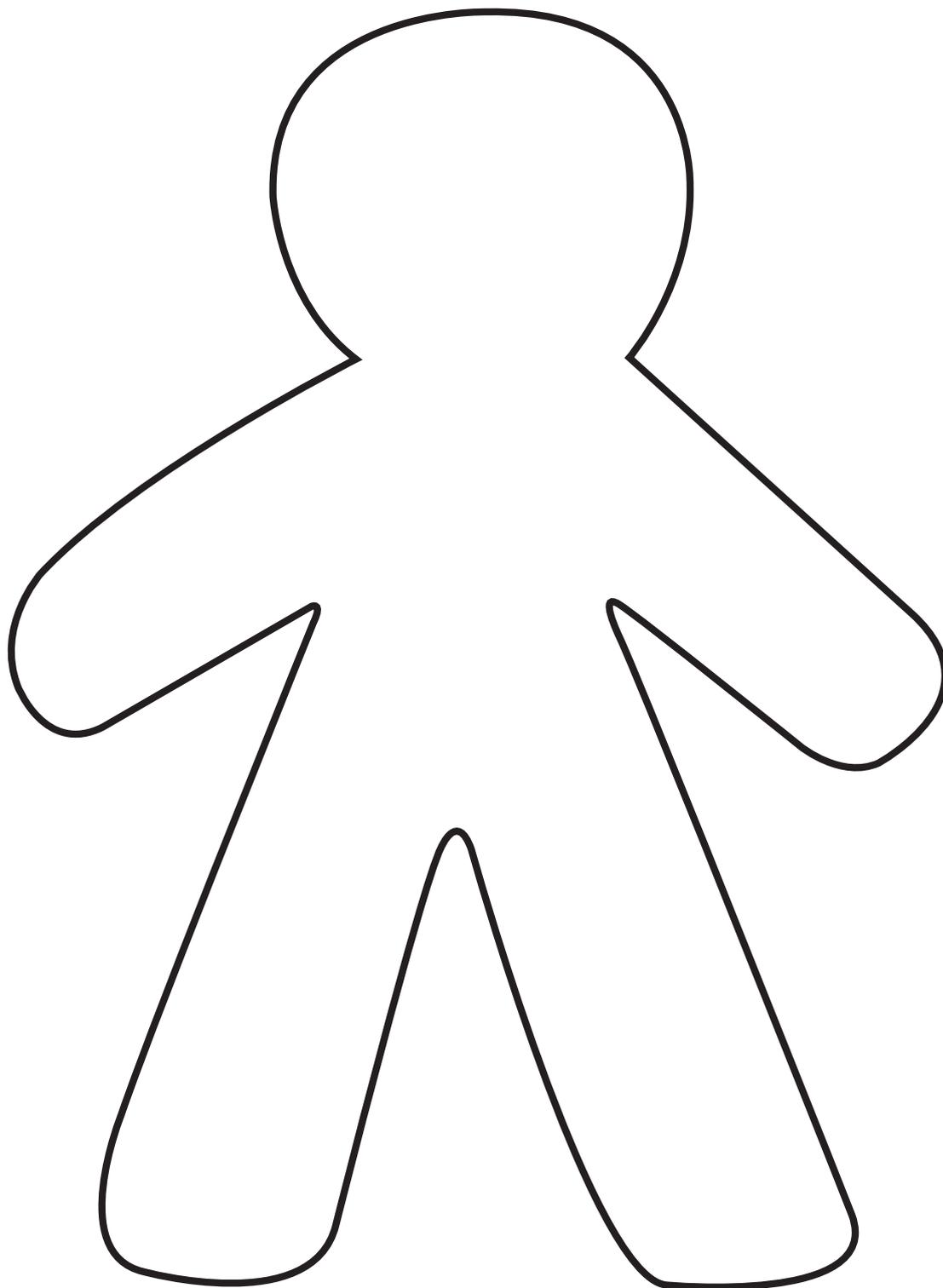
Social Isolation

Refers to a complete or near-complete lack of contact with people and society for members of a social species. It is not the same as loneliness rooted in temporary lack of contact with other humans. Social isolation can be an issue for anyone despite their age, each age group may show more symptoms than the other as children are different from adults.

Social isolation takes fairly common forms across the spectrum regardless of whether that isolation is self-imposed or is a result of a historical lifelong isolation cycle that has simply never been broken, which also does exist. All types of social isolation can lead to staying home for days or weeks at a time; having no communication with anyone including family or even the most peripheral of acquaintances or friends; and wilfully avoiding any contact with other humans when those opportunities do arise. Even when socially isolated people do go out into public and attempt social interactions, the social interactions that succeed — if any — are brief and at least somewhat superficial.

The feelings of loneliness, fear of others, or negative self-esteem can produce potentially very severe psychological injuries.

Activity Sheet - Charlie's Story



LESSON TWO

What is Disability?

"There is nothing wrong with you....

There is a lot wrong with the world you live in"

Chris Colfer

What is Disability?

The Equality Act 2010 defines disability as – “a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities”.

What do ‘substantial’ and ‘long-term’ mean?

‘substantial’ is more than minor or trivial – e.g it takes much longer than it usually would to complete a daily task like getting dressed.

‘long-term’ means 12 months or more – e.g a breathing condition that develops as a result of a lung infection.

Both these definitions describe the medical model of disability – stressing the things people CANNOT do. However, disabled people have developed the social model of disability because the traditional medical model did not explain their personal experience of disability or help to develop more inclusive ways of living.

The **medical model** of disability views disability as a ‘problem’ that belongs to the disabled individual. It is not seen as an issue to concern anyone other than the individual affected. For example, if a wheelchair using person is unable to get into a building because of some steps, the medical model would suggest that this is because of the wheelchair, rather than the steps.

The **social model** of disability says that disability is caused by the way society is organised, rather than by a person’s impairment or difference. It looks at ways of removing barriers that restrict life choices for disabled people. When barriers are removed, disabled people can be independent and equal in society, with choice and control over their own lives. Disability cannot be easily defined or identified by one single statement as there are many categories of disability which affect different people in different ways.

Disability is not easily defined and many people associate disability with someone who uses a wheelchair or who is blind or deaf, however, some disabilities such as Epilepsy and Mental Health conditions may not be immediately obvious. Some people have the attitude that people with a disability need to be treated differently. Unfortunately, this type of stereotyping can often lead to discrimination.

People with a disability are like everyone else, but may not be able to do certain things in the same way as others. Some form of adaptation or alteration may assist someone to overcome their disability. For example: A ramp in place of stairs could ensure that a person in a wheelchair can access a building or providing information in easy read format can help someone with a learning disability understand a document.

Lesson 2: What is Disability?

Activity:	Different not less.
Time:	50 minutes
Objective:	To raise awareness of the definition of disability and range of disabilities.
Equipment:	<ul style="list-style-type: none"> • Post it Notes. • Pens. • Flip Chart. • Activity Sheets. • Pledge Cards (these can be copied and cut out or can be designed and made by the group).
Method:	<ul style="list-style-type: none"> • Split the group into smaller groups/tables. • Activity 1 (total 30 mins) – Ask each group to write disabilities on post it notes (5 mins). Place all of these onto Flip chart (take 5 minutes to discuss the range of disabilities with the group – see activity sheet 1). • Ask the group spend 5 minutes discussing what difficulties people with a disability may face when going about their daily activities. (play 5 minute video showing difficulties people can face https://www.youtube.com/watch?v=vbgE15RomzY) • Discuss with the group what changes could be made to help tackle some of the issues that disabled people face (10 minutes). • Activity 2 (total 15 minutes) – Ask the groups to list famous people who have a disability and to note the person's disability. • Activity 3 (total 5 minutes) – Ask each person to think about what they could do to make a difference. Make a pledge – encourage participants to contribute to a more welcoming society and invite them to complete a pledge card where they promise to take action to make their community more welcoming (be the change that you want to see).
Points of Discussion:	How does the media/society perceive people with a disability?

PRESENTER NOTES



Prompt group discussion around	<p>If using with DVD - Ask group if they could identify Charlie's disability (Autism & Learning disability).</p> <p>Encourage the group to think about what people with a disability say?</p> <p><i>"My disability means people huff and puff when I take longer to get my money out to pay" – John</i></p> <p><i>"I wish people would see my ability rather than my wheelchair" – Gavin</i></p> <p><i>"As a Parent/Carer for my Disabled Son I wish people would be more empathic and not so judgemental in their views". "Different not Less" - Julie</i></p>
Further Information	<ul style="list-style-type: none"> • Over a billion people, about 15% of the world's population, have some form of disability. • 1 Million people in Scotland (20% of the population) have a disability or a long term illness. • Between 110 million and 190 million adults have significant difficulties in functioning. • Rates of disability are increasing due to population ageing and increases in chronic health conditions, among other causes. • People with disabilities have less access to health care services and therefore experience unmet health care needs. • Only around 8% of people with a disability use a wheelchair.

Activity Sheet 1

Range of Disabilities

There are a vast range of conditions associated with disability which manifest in a wide variety of way. Some disabilities may be hidden or less obvious such as Head Injury or Epilepsy. Some may be more obvious such as Paralysis. Some individuals may have more than one disability.

The list below is not exhaustive but gives a broad example of some of the range of disability.

Developmental Disabilities

- ADD/ADHD
- Asperger Syndrome
- Autism
- Down Syndrome
- Dyslexia
- Learning Disability

Visual Impairment

- Blindness
- Blurred Vision
- Cataract

Mental Health

- Anxiety Disorder
- Bipolar Disorder
- Depression
- Obsessive Compulsive Disorder (OCD)
- Schizophrenia

Hearing Impairment

- Hearing Loss
- Meniere's Disease
- Tinnitus (Ringing In the Ears)

Physical Disability

- Arthritis -Rheumatoid Arthritis (RA) Osteoarthritis
- Cerebral Palsy
- Multiple Sclerosis (MS)
- Muscular Dystrophy (MD)
- Paralysis
- Parkinson's Disease
- Stroke

Chronic Illness

- Asthma
- Cancer
- Chronic Fatigue Syndrome
- Diabetes
- Hypoglycemia
- HIV AIDS
- Renal Failure
- Tuberculosis (TB)

Difficulties disabled people may face in the community.

- Cars on pavement (restricting access for blind people or wheel chair users).
- Bins on pavement (as above).
- Cars parking over dropped kerbs (wheelchair users unable to cross road).
- Information not being provided in an accessible format (larger print, easy read, braille, audio, sign language).
- Accessing Transport.
- Cognitive functioning and language, being totally understood by another could be barrier.
- Attitudes and reactive responses of others.

Activity Sheet 1

Famous People with a Disability

Person	Famous for	Disability
Walt Disney	Co-founder of the Walt Disney Company	Learning Difficulty
Albert Einstein	Mathematician/Physicist	Possible Learning Difficulty
Sir Richard Branson	Entrepreneur (Virgin Enterprise)	Dyslexia
Sir Jackie Stewart	Grand Prix Racing	Dyslexia
David Weir	British Paralympic Wheelchair Athlete	Born with spinal chord transection that left him unable to use his legs.
Stevie Wonder	Musician, Singer/Songwriter, Record Producer, Multi Instrumentalist	Blind shortly after birth
Susan Boyle	Singer	Aspergers Syndrome
Stephen Fry	Writer, Actor, TV Presenter	Bipolar Disorder
Helen Keller	Author, Political Activist, Lecturer	Deaf-Blind
Ellie Simmonds	British Paralympic Swimmer	Achondroplasia dwarfism
Cerrie Burnell	Actress, Singer, Playwriter, Children's Author, Presenter	Born with her right arm ending just below her elbow
Sir Douglas Bader	Royal Air Force (RAF) fighter ace during the Second World War	Lost both his legs after a crash
Christopher Reeve	American actor, film director, producer, screenwriter, author, and activist	became a quadriplegic after being thrown from a horse
David Blunkett	MP (Politician)	Blind
Robin Williams	Actor	ADHD
Stephen Hawking	Physicist/Mathematician	Motor Neuron Disease
Tom Cruise	Actor	Severe Dyslexia
Alexander Graham Bell	Inventor (telephone)	Learning Difficulty



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LESSON THREE

What is Disability Hate Crime?

"Your words have powers..... use them wisely"
prideandinspiration.tumblr

What is Disability Hate Crime?

Disability Hate Crimes are amongst the most abhorrent acts an individual or group can commit and Police Scotland are committed to stamping this out and making a positive impact on the under reporting that currently exists.

Crime is an act which breaks the law of the land. Any crime has the potential of being a disability hate crime.

Disability Hate Crime can be described in many ways (bullying, anti-social behaviour, identity based violence, harassment) and in Scotland is defined as 'any crime which is perceived by the victim or any other person to be motivated by malice or ill will based on a person's disability or perceived disability'.

There are also Disability Hate Incidents where no crime has been committed but something has happened which has been 'perceived by the victim or any other person to be motivated by malice or ill will based on a person's disability or perceived disability'

These disability hate crimes or incidents can take place anywhere (in the street, park, on public transport, in your home, in school) and can take the form of many different behaviours (name calling/insults, stealing, physical assaults, sexual abuse).

Deciding whether a disability hate crime or incident has been committed can be difficult. If the victim or any other person believes that the incident was 'motivated by malice or ill will', it should always be reported to the Police so it can be recorded, investigated and the Police can determine if a crime has been committed.

When an incident is identified as disability hate crime the law treats it as an 'aggravated offence'. This means that a judge will take the motivation behind the crime into consideration when deciding on the type or length of sentence given.

Anyone can commit a disability hate crime and you do not need to be a disabled person to be the victim of disability hate crime. Offenders can be young people who shout abuse when a disabled person walks by; a carer who takes advantage of a disabled person by stealing their money; a student who bullies another disabled student or even a retired person who harasses their disabled neighbour because they have a disabled parking bay.

There are also some individuals who befriend a disabled person so that they can take advantage of and exploit them. Some disability organisations call this 'Mate Crime'. This act is an appalling abuse of vulnerable people, and there is very little awareness of it. Frequently, victims who are targeted like this do not recognise that their friends or 'mates' are fake and are taking advantage of and exploiting them. A 'mate' could be a friend, family member or carer. In most cases this exploitation may not be criminal but still has a hugely negative effect on the individual and should still be reported to the Police.

Whilst Hate Crime reporting has improved, in the UK it is estimated that around 97% of disability hate crime still goes unreported.

Lesson 3: What is Disability Hate Crime?

Activity:	Incidents, Crimes & Reporting.
Time:	50 mins
Objective:	To raise awareness of Disability Hate Crime and reporting processes.
Equipment:	<ul style="list-style-type: none"> • Flip chart stand/paper. • Marker pens. • Paper/pens. • If necessary choose an ice breaker from front of pack (select prior to session). <p>Split class or group into smaller groups.</p>
Method:	<p>Exercise 1 Ask the groups to write down what they think the following terms are: (1) crime, (2) hate crime and (3) disability hate crime. Ask one member of each group to feed back the answers to the wider group and discuss (see teachers notes below – Activity Sheet 1 for discussion).</p> <p>Exercise 2 Disability Hate Crime Quiz (Activity Sheet 2) – Answers (Activity Sheet 2A). Discuss answers.</p> <p>Exercise 3 Ask the groups to write down why people don't report (disability) hate crime to the Police? Write down main points and discuss (Activity Sheet 3).</p> <p>Exercise 4 Ask the groups to write down how to report crime to the Police? Write down main points and discuss (Activity Sheet 4).</p>
Points of Discussion:	<ul style="list-style-type: none"> • See below

PRESENTER NOTES



Prompt group discussion around	<p>Exercise 1 See activity sheet 1 for discussion notes. (Trainer may want to have definitions pre-prepared on a flip chart).</p> <p>Exercise 2 Hand out copy of quiz to individuals. Allow to discuss with person beside them if needed. When completed go over answers giving explanations where appropriate. (Activity Sheet 2 and 2 a).</p> <p>Exercise 3 Encourage the group to think about themselves first and why they don't or haven't reported incidents to the Police then consider other peoples reasons. (Activity Sheet 3).</p> <p>Exercise 4 Refer to activity sheet 4 for list of reporting methods.</p>
Further Information	<p>http://www.scotland.police.uk/contact-us/hate-crime-third-party-reporting/</p> <p>Mate Crime Information Sheet attached – supplied by ARC (Association for Real Change) Safety Net Project www.arcuk.org.uk/safetynet</p>

* If using with DVD ask group to identify what incidents were disability Hate Crime (Attack, money under false pretences, name calling, graffiti).

Activity Sheet 1

Crime – There is no universally accepted definition of crime however it is deemed to be a crime if someone '**breaks the law of the land**' or '**commits an unlawful act**'.

Hate Crime is 'any crime which is perceived by the victim or any other person to be motivated by malice or ill will towards a social group'.

5 social groups are covered by hate crime legislation

Disability – impairment or long term health condition/illness.

Race – colour of skin, country of birth, language spoken.

Religion – religious or non religious beliefs.

Sexual Orientation – gay, lesbian, bi-sexual or straight.

Transgender Identity – gender identity or gender expression.

Disability Hate Crime is 'any crime which is perceived by the victim or any other person to be motivated by malice or ill will based on a person's disability or perceived disability'

In order to help people understand the definitions above it may be necessary to help them understand the meaning of some words/phrases.

Perceived: supposed, seeming, alleged, interpreted

Victim: a person harmed, a person who is tricked, a sufferer

Motivated: moved by, encouraged, because of, impelled

Malice: a wrongful act done intentionally without just cause or excuse, the desire to harm somebody, spitefulness, hostility, hatred, wrongful intention

Ill will: animosity, bitterness, hostility, hatred

Anyone can commit a hate crime and you do not need to be a member of one of the five social groups above to be a victim of hate crime (i.e. you do not need to be disabled to be the victim of a disability hate crime or you don't need to be gay to be the victim of homophobic hate crime).

There are also **Disability Hate Incidents** where no crime has been committed but something has happened which has been 'perceived by the victim or any other person to be motivated by malice or ill will based on a person's disability or perceived disability'. Deciding whether a crime is, or is not, a disability hate crime can be difficult. If the victim or any other person believes that the crime was 'motivated by malice or ill will', it should always be reported to the Police.

There are also some individuals who befriend a disabled person so that they can take advantage of and exploit them. Some disability organisations call this '**Mate Crime**'. In most cases this exploitation may not be criminal but still has a hugely negative effect on the individual and should still be reported to the Police.

Activity Sheet 2A

Disability Hate Crime - Answers

1. Fill in the blanks

Disability Hate Crime can be defined as 'any crime which is perceived by the victim or any other person to be motivated by malice or ill will based on a person's disability or perceived disability'.

2. You have to be disabled to be the victim of a disability hate crime?

False

False – Any person can be the victim of disability hate crime. The crime becomes a disability hate crime when it is perceived to be motivated by malice or ill will based on a person's disability or perceived disability.

3. I came out of my house and my garden had been wrecked and the word 'retard' was sprayed on my wall. Is this a.....

Hate Crime

Hate Crime – This is disability vandalism. This sort of language is not acceptable and should be challenged at all times. The context in which the language is used on this occasion along with the garden being wrecked means it should be reported to the Police. If the garden had been wrecked without the spray painting and the victim perceived it to be because of their disability or perceived disability it should still be reported to Police.

The victim does not need to have a disability or perceived disability.

4. I have autism and the boy upstairs is my friend. He always borrows money from me.....he never pays it back but says he will. Is this a.....

Neither

Neither – No crime has been committed as the victim is handing the money over freely. There is also nothing to suggest the incident has been motivated by malice or ill will. As such, there is no hate element, so no hate crime or hate incident has occurred.

This could be an example of 'mate crime' where an individual befriends a disabled person so that they can take advantage of and exploit them. This should still be reported to the Police so these concerns may be recorded and shared with other organisations.

5. When I go on the bus the high school children call me 'stupid', 'spaz' and 'mongo'. I'm really upset and scared when this happens as I have downs syndrome. Is this a.....

Disability Hate Crime - Answers

Hate Crime

Hate Crime – This is a disablist breach of the peace.

A breach of the peace is conduct severe enough to cause alarm to ordinary people and threaten serious disturbance to the community. This sort of language is not acceptable and should be challenged at all times. The context in which the language is used on this occasion constitutes a breach of the peace as it is directed towards one individual and should always be perceived as disablist and reported to the Police. If the victim wasn't disabled it should still be reported to the Police.

6. I am epileptic and I sometimes take seizures when I'm out and about.....people just stare and think I'm a drunk.....I wish they would just leave me alone. Is this a.....

Neither

Neither – No crime has been committed and there is no malice or ill will present.

7. I have cancer and I feel bad as I am always taking time off work for treatment. There is a guy at my work that keeps saying cancer sufferers bleed the system dry. I find it really hurtful but don't know what to do? Is this a.....

Hate Incident

No crime has been committed at present. This is a hate crime incident as there is malice or ill will.

8. I am blind and I use a white cane. Some people throw things in front of me to try and trip me up. Is this a.....

Hate Crime

Hate Crime – This is a disablist assault. Although the items are not thrown directly at the person the intent is for the person to trip over them.

9. At school a girl told a retard joke. Everybody found it very funny....I didn't and was very upset and angry as my brother has a learning disability. Is this a.....

Hate Incident

Hate Incident – No crime has been committed but the joke has caused offence.

10. One day a man pushed me out of my wheelchair and told me to get up and walk. When I couldn't he spat on me and walked away. Is this a.....

Hate Crime

Hate Crime – This is a disablist assault. The victim has actually been assaulted twice, once when pushed out of their wheelchair and secondly when spat upon.

Activity Sheet 3

Reasons why people don't report crime to the Police

Lists may include the following. It is important to remind participants about the positive reasons for reporting to balance out the focus on barriers:

- **Fear of reprisals.**

Remind them that very often nothing will change in a dangerous situation without reporting to the Police and the Police certainly can't minimise the risk to someone if they don't know about the situation.

- **It's too trivial.**

It may be a minor incident but it can still be very upsetting. The Police understand this and will take all incidents seriously.

- **It's too embarrassing.**

Sometimes people feel embarrassed about reporting crimes. The Police will treat you sensitively and fairly and will not judge you.

- **Mistrust, fear and fear of not being believed or taken seriously by the Police.**

There 17,500 Police officers in Scotland and unfortunately not all of them are perfect. The Police rely on the public to identify 'bad' Police officers.

- **Police won't do anything.**

The Police will make robust efforts to detect offenders but our communities need to understand that even though there is no detection it does not mean that the Police have done nothing.

- **Communication and Accessibility issues – First language, speech, BSL, wheelchair user.**

Police utilise interpreting services and are making every effort to ensure all Police offices are accessible. 3rd party reporting centres could also assist here.

- **Did not know a crime had been committed.**

A number of disabled people have grown to accept disability hate crime as part of their day to day life and don't recognise it as crime but as part of their disability.

- **Don't know how to report crimes to the Police.**

A number of people are unsure how to report crimes to the Police.

Other examples could be

- Worried what happens next e.g. Court.
- Do not want family members / friends to know.
- Cultural barriers – females not allowed to report on their own.
- Family member is a suspect.
- Labelled a 'grass'.
- It's their fault.
- No witness.
- Ability to come to Police (means, transport, confidence etc).
- Power to contact the Police, may be inhibited by the abuser.
- Lack of knowledge of alternative reporting options (TPR/Crimestoppers).

Activity Sheet 4

How to report crime to the Police

- **Call 999** (emergency) **101** (non-emergency).
- If you cannot make voice calls, you can contact the 999 emergency services by SMS text from your mobile phone. Emergency SMS is part of the standard 999 service which has been designed specifically for people with hearing loss or difficulty with speech. You will need to register your mobile phone at www.emergencysms.org.uk before using the service.
- **Textphone** or TalkByText users can contact the emergency services by dialing '18000'. This call will be connected to the 999 service and translated by a Text Relay Assistant.
- Contact the Police. Find your local Police station at www.scotland.police.uk/Police-stations.
- You can also fill in an online Hate Crime Reporting Form for non urgent crimes in Scotland at www.scotland.police.uk/hate-crime.
- **Crimestoppers**. If you do not want to contact the Police, you can still report a hate crime by contacting Crimestoppers on 0800 555111 or by filling in the online Giving Information Form at www.crimestoppers-uk.org.
- **Third party reporting**. There are a number of 3rd Party Reporting Centres in Scotland. Staff within these centres have been trained to assist a victim or witness in submitting a report to the Police and can make such a report on your behalf. Find your local 3rd Party Reporting Centre at www.scotland.police.uk/assets/pdf/205073/hate-crime-3rd-party-reporting-centres. 
- Tell someone such as a trusted adviser, friend or family member.
- **Advocacy Service**. An advocate is someone who supports you to say what you want to say, or will say what you want to say, when you are not able to do so. Find your local advocacy service by calling the Scottish Independent Advocacy Alliance on 0131 260 5380 or at www.siaa.org.uk.
- If you have been affected by Disability Hate Crime or know someone who has been affected, you can contact **Victim Support** on 0345 603 9213 or www.victimsupportsco.org.uk.

It is important that all hate crimes are reported to the Police whether it is a disability hate crime or not. No matter how trivial or unimportant it is, every complaint will be taken seriously when the person chooses to report it.

Anyone can report a disability hate crime – whether they are the victim, someone who witnesses a disability hate crime, or someone the victim or witness tells about a crime. Witnesses also do not need to know the victim or give their name when reporting a disability hate crime.

LESSON FOUR

Legislation and the Criminal Justice System

"Closed minds should come with closed mouths"

imgfave.com

Legislation and the Criminal Justice System

What is a Hate Crime?

Hate crime is any crime that is committed because the offender thinks that the victim is of a particular race, religion, sexual orientation, transgender identity or is disabled, whether that is true or not is irrelevant.

Why do we need to act on Hate Crime?

Hate crime is different to other forms of crime:

- Hate crime targets people because of their identity. It is a form of discrimination that infringes human rights and keeps people from enjoying the full benefits of our society
- Research has shown that hate crimes cause greater psychological harm than similar crimes without a motivation of prejudice
- Hate Crime creates fear in victims, groups and communities and encourages communities to turn on each other
- Hate Crime has a "ripple effect" whereby the effect of one attack can cause fear and anxiety to spread throughout that targeted community.

A person can perceive that certain areas are not safe to be in any more, that it's not safe to go out alone, for fear of being picked upon, that school isn't safe anymore, that the local swimming pool isn't safe anymore etc. The person begins to curb their social activities because they don't feel safe outside anymore. This perception of being an "easy target" doesn't exist with other forms of crime. E.g. just because your cousin had their bike stolen last week doesn't mean that your bike will be stolen next, even though you live in the same part of town.

Hate crime can take many forms including:

- Physical attacks such as physical assault, damage to property, offensive graffiti and fireraising
- Threat of attack including offensive letters, abusive or obscene telephone calls, groups hanging around to intimidate, and unfounded, malicious complaints
- Verbal abuse, insults or harassment - taunting, offensive leaflets and posters, abusive gestures, dumping of rubbish outside homes or through letterboxes and bullying at school or in the workplace.

The law in relation to Hate Crime

The fact that hate crimes are committed because the offender thinks that the victim is of a particular race, religion, disability, sexual orientation or transgender identity makes this an **aggravating factor** to original offences. In law an aggravating factor is any fact or circumstance that increases the severity or culpability of a criminal act and is used to increase the sentence imposed on an accused if they are found guilty of a crime. The legislation which introduced these hate crime aggravations is called The Offences (Aggravation by Prejudice) (Scotland) Act 2009 and came into force in March 2010.

Any crime from breach of the peace through to murder can be aggravated by prejudice in relation to race, religion, disability, sexual orientation and transgender identity and we shall now focus on disability hate crime.

Prejudice Relating To Disability

An aggravation of prejudice relating to disability can be added to any charge from a minor assault up to murder. The perception of the accused is the focus of the criminal investigation, not the identity of the victim. The Crown prosecutor must prove that:

- At the time of committing the offence or immediately before or after doing so, the offender showed malice and ill-will relating to a disability (or presumed disability) of the victim, or
- The offence was motivated (wholly or partly) by malice and ill-will towards persons who have a disability.

This means that the aggravation can be applied even in cases where the malice or ill-will is expressed towards a wider group as a whole, without the need for an individual victim to have been identified – for example, where a building used by disability organisations is vandalised or daubed with graffiti that suggests prejudice against those with a disability. The use of the words like ‘cripple’ and ‘spastic’ during the commission of a crime could both be deemed to display prejudice towards persons with a disability.

The definition of Disability used within the Act is very wide and includes:

- Learning difficulties – eg dyslexia, downs syndrome
- Mental health conditions – eg depression, epilepsy
- Physical disabilities – loss of a limb, a speech impediment
- Any sensory impairment, including the wearing of glasses
- Any medical condition which may have a long term effect or is progressive, for example HIV/AIDS, Hepatitis C, cancer and multiple sclerosis, to name just a few.

What happens when someone is accused of a crime aggravated by prejudice?

These crimes are taken very seriously by the police, the Procurator Fiscal and the courts. Usually, a charge against the accused will include wording to reflect that the offence has been aggravated by prejudice. The Fiscal will prosecute if there is enough evidence and if they think that it is in the public interest to do so.

Public interest means that the fiscal will look at the case from all angles – from the point of view of the wider community as well as of the victim and the accused. It includes a number of factors – for example:

- The nature and seriousness of the offence,
- Its impact on the victim and other witnesses, and
- The wider circumstances of what happened and who was involved.

Legislation and the Criminal Justice System cont'd

In all such cases, there is a **strong** presumption that the public interest should be in favour of prosecution where evidence of prejudice exists - in the Sheriff Court or above. The prosecutor will ensure that the Sheriff knows the facts and circumstances around the alleged aggravation.

Where someone is convicted of an offence aggravated by prejudice, not only will they be sentenced – which could involve imprisonment – but the aggravation will be listed on the accused's history of previous convictions and could be disclosed to any future employer.

This means that when this person applies for a job, their prospective employer will be in absolutely no doubt as to the nature of that offence. Given that all main employers have a diverse work force; it is unlikely that anyone with such a conviction will be given a job. In the event of this person attempting to live or work abroad, this criminal record will be checked and it is unlikely they will be allowed to work or live in that country. The commission of that offence could have an effect on their life forever.

Social Media/Communication offences

It is important to remember that texts and internet postings are not anonymous - the police have the capability to trace the origin of these posts and there are two offences which deal specifically with crimes of this nature:

- **Communications Act 2003 Section 127(1) (a)**

Sending by means of a public electronic communications network (which includes land line telephones, mobile phones, tablets, iPads, emails) a message or other material that is grossly offensive or of an indecent, obscene or menacing character.

The maximum sentence is 1 year imprisonment or up to £10,000 fine.

- **Offensive Behaviour at Football and Threatening Communications (Scotland) Act 2012 section 6**

The offence of communicating material to at least one other person or just posting a message on Facebook, Twitter or Instagram etc, which contains threats of serious harm intended to cause fear and alarm, or is reckless as to whether it causes fear and alarm or communicating threats intended to incite religious hatred.

The maximum sentence is 5 years imprisonment or an unlimited fine.

Information the Prosecutor needs from the police when considering whether to charge an accused with a hate crime offence.

As with all crimes reported to the police, the prosecutor relies on the police to gather information from victims and witnesses in order to decide whether or not to prosecute an accused and what charges should be used. The prosecutor needs to know what the impact of the crime has been on the victim and potentially their community. The prosecutor needs to know:

- Whether the victim is in a state of fear due to the crime;
- Whether the victim is considering moving home or business due to the nature of the crime;
- Whether there is any impact on the victim's family and community as a result of the crime;
- Whether their disability is known to their families or other persons.

The Role of the Procurator Fiscal

The Procurator Fiscal is the public prosecutor in Scotland.

If a crime has been reported to the police, they will investigate and may send a report to the Procurator Fiscal, who will consider the facts and circumstances of the case before deciding what to do next.

The Fiscal can decide whether to initiate proceedings against the accused in court, take no action or choose an alternative to prosecution, known as Direct Measures, like issuing a warning letter, a monetary fine, a compensation offer (the accused must pay the victim a sum of money) refer the accused to social work services or, in the case of children, refer the accused to the Children's Reporter.

In reaching any decision, the Procurator Fiscal must be certain that there is:

- Sufficient evidence to prove the charge and that a
- Prosecution is in the public interest.

For this exercise we shall consider the following:

1. No Action.
2. A Warning.
3. A Fiscal Fine (not a conviction).
4. A Prosecution (court case).

In our examples we will assume that there is sufficient evidence to prove the charge.

Lesson 4: Legislation and the Criminal Justice System

Activity:	Look at examples of Disability hate Crime and decide what action should be taken by Procurator Fiscal.
Time:	50-60 mins
Objective:	Have a better understanding of Hate Disability crimes and the role of the Procurator Fiscal.
Equipment:	<ul style="list-style-type: none"> • Flip Chart. • Pens. • Paper.
Method:	<ul style="list-style-type: none"> • Split into smaller groups. • Read the lesson introduction (Legislation & Criminal Justice System). • Discuss each scenario and split the team to allocate the roles in the case study. Rest of team play role of Police following up on the case study, taking statements from the witnesses and writing the Police Report. • Pass the Police Report to another group and from the report each group should discuss what action they would take (taking into account the evidence in the Police report). • Explain reasons for this option and feedback to the rest of the group.
Points of Discussion:	<ul style="list-style-type: none"> • What is the difference between a hate crime incident and an actual hate crime? • Does the victim have to give evidence at the trial or will two other eye witnesses be sufficient to prove the charge?

PRESENTER NOTES



Prompt group discussion around

SCENARIO 1

Possible Crimes - Threatening and Abusive Behaviour + disability aggravator; Assault + disability aggravation

SCENARIO 2

Possible Crimes - Threatening and Abusive Behaviour + disability aggravator;

Additional scenarios and short films are available at

<http://www.copfs.gov.uk/in-your-community/learning-school>

Further Information

The Crown Office and Procurator Fiscal Service (**COPFS**) is Scotland's independent prosecution service. It is a department of the Scottish Government, headed by the **Lord Advocate**. The **Solicitor General** is the Lord Advocate's deputy. She assists the Lord Advocate to carry out his functions. She is also a Minister of the Scottish Government.

The **Crown Agent** is the principal legal advisor to the Lord Advocate on prosecution matters and the Chief Executive of COPFS.

Procurators Fiscal are legally qualified prosecutors who work in specialist units and offices around Scotland. Where necessary, they direct the police in investigating crime. They investigate all sudden and suspicious deaths in Scotland, conduct Fatal Accident Inquiries and handle criminal complaints against the police.

Advocate Deputes are appointed by the Lord Advocate. They make decisions in serious cases and also advise Procurators Fiscal on complex or sensitive issues.

Together, the Lord Advocate, Solicitor General and the Advocate Deputes are known as **Crown Counsel**.

Activity Sheet 1

SCENARIO 1 - Mr X is 78 years old and is registered blind and walks with the aid of a white stick. He lives in Handy Close in Clydebank next door to Mrs Y. Mrs Y is 28 years old, she has 3 children under the age of 7, and 2 dogs. There has been an ongoing neighbour dispute between Mr X and Mrs Y due to the level of noise coming from Mrs Y's property over the last year.

On 8 December 2014 at 8.30am Mr X could hear loud banging on his front door, and shouting coming from outside which sounded like the voice of Mrs Y. Mr X ignored it and did not answer his door. At 1pm, Mr X went out to the shops with the assistance of his sister, Mrs Z. At this time Mr X and Mrs Z saw Mrs Y standing in her driveway. Mrs Y appeared to be under the influence of alcohol and she shouted and swore at Mr X, calling him "one-eyed," and saying "I'm going to wallop you."

As Mr X walked past Mrs Y to get to his vehicle, Mrs Y walked over and pushed him to his upper chest with her right hand. Mr X and his sister got into his vehicle and immediately drove to Clydebank Police office.

Mrs Y has 3 previous convictions, 1 for assault.

SCENARIO 2 The witness Miss A suffered brain damage at a young age and now has some learning disabilities. She is cared for at home by her mother, Mrs B.

On 1st December 2014 Miss A was escorted to the bus stop in Main Street, Dumbarton by her Carer and they got on the No 100 bus. They took a seat directly behind the bus driver, at the front of the bus.

Also on the bus was Mrs C and her son (unknown to the victim), and Mr D, a 25 year old male from Helensburgh. Mr D walks from the rear of the bus towards the front. Whilst he is waiting for the bus to stop, he stands near to Miss A and says in a mean voice "what are you looking at, you spazzy cow." He immediately leaves the bus.

Miss A was distraught and felt extremely intimidated. She immediately returned home with her Carer, and told her mother, Mrs B, what happened on the bus. Mrs B contacted the police to report the incident.

The accused has no previous convictions. The victim is adamant that she doesn't want to give evidence in court as she is fearful of seeing the accused again.

MARKING OPTIONS:

1. Take No Action – ie Do Nothing, it was only a minor incident.
2. Send a Warning Letter to the accused.
3. Send a 'Fiscal Fine' – up to £300 but does not count as a conviction.
4. Prosecute – ie take someone to court to face criminal charges.

Does the Procurator Fiscal need any more information before making a decision?

What action should the Procurator Fiscal take in this case?

LESSON FIVE

The Role of Housing

"The ache for home lies in all of us. It is the safe place where we can go as we are and not be questioned"

Maya Angelou

The Role of Housing

Housing Providers, like other agencies have a role to play in safeguarding children and vulnerable adults.

Harassment of disabled people occurs across the social spectrum, However, disabled people are more likely to live in lower income households and in more deprived areas. The EHRC (Equality and Human Rights Commission) report that "in areas where unemployment is high and poverty is an issue, antisocial behaviour targeted at disabled people may be more prevalent and resentment may build where disabled people are perceived to be getting special treatment, such as extensions and adaptations to their homes, special transport and extra benefits". The report also highlights that when it comes to reporting disability-related harassment to public authorities the issues are often regarded as being typical of the area rather than treated as a disability related incident.

Often when a tenant makes a complaint to their housing provider, the issue is dealt with as low level anti social behaviour. On occasions, the disabled tenant may be forced to move due to the harassment and abuse.

Disability Hate Crime is one of the most under reported crimes in the UK.

Barriers to reporting can include:

- Lack of recognition by victim that they are being abused.
- Lack of awareness by some housing staff of indicators of abuse, or of how to report concerns.
- Reluctance of some housing organisations to report due to fear of damaging reputation, previous lack of response, or fear of over-reaction.
- Problems with consent of victim to referral.

When Housing Officers sign up a family to a tenancy, visit a property, or investigate a complaint of harassment or antisocial behaviour by or against a tenant, there may be early indications of a person's support needs or evidence that warrants a protection referral. Housing Options staff may similarly become aware of issues when assessing a person's homelessness application.

Helping to prevent Disability Hate Crime can include:

- Housing vulnerable person(s) near to existing support networks wherever possible.
- Ensure interagency processes are in place to share information when dealing with vulnerable people.
- Implement a joint eviction protocol with Adult Services, to minimise the risk of eviction in situations where a person has unmet support needs.
- Ensure that Safeguarding is part of the strategic and business plans of local authorities and housing associations.

Lesson 5: Role of Housing Providers

Activity:	It's my responsibility.
Time:	45 mins – 1 hour 30 minutes if using I Am Me DVD.
Objective:	Encourage participants to consider the role of housing and what action should be taken if they become aware of potential disability-related harassment/abuse.
Equipment:	<ul style="list-style-type: none"> • Post it pads. • A3 Flip Charts. • Pens.
Method:	<ul style="list-style-type: none"> • Split group into smaller groups and discuss the case studies in activity sheet A • Ask each group to think about the following and to note an answer for the group. <ol style="list-style-type: none"> 1. Is this disability-related harassment. 2. Do you think this incident is a crime? 3. Do you have a responsibility to report it? 4. Who do you report it to? 5. What could the consequences be if you do not report it? • Ask each group to talk through their answers with the rest of the participants.
Points of Discussion:	<ol style="list-style-type: none"> 1. The hitting/stealing/vandalism could be disability related hate crime/mate crime. 2. The Police can decide if this is a crime. 3. Yes, all agencies have a role in safeguarding individuals. 4. Reports can be made via adult/child support and protection or directly to the Police (in person, by telephone or on-line – even anonymously). 5. Pass round the outcomes of each of the case studies (Activity Sheet 2).

PRESENTER NOTES



Prompt group discussion around

Ask the group to think.

- What action would you take?
- Do you know how to report incidents?
- Do you know of existing support networks?
- Do you know how to report Adult Support and Protection concerns?

Further Information

There is a difference between Safeguarding vulnerable adults/children and adult/child protection:

- Safeguarding is everybody's responsibility, and includes measures to prevent or minimise the potential for abuse occurring.
- Protection is a statutory responsibility in response to individual cases where risk of harm has been identified.

Adult Support and Protection

www.actionagainstharm.org

Activity Sheet A

CASE STUDY 1 Gemma - Age 27 (non factual)

Gemma is a young adult who had been diagnosed with learning difficulties and autism since she was a child. She attended a special school and residential college, but her diagnosis was over-turned as a young adult.

Gemma moved into her first tenancy aged 21, though failed to sustain this, she then moved to a private tenancy and following eviction from this, Gemma was accepted as homeless and after a period in temporary accommodation, was housed with the local authority. She receives floating support from a voluntary organisation to provide low level, preventative support to help to maintain her tenancy, pay bills etc. Housing staff and the voluntary organisation have continuing concerns about Gemma's vulnerability and potential for exploitation, and her inability to cope with her tenancy. Gemma's living conditions continue to deteriorate with evidence of self-neglect, a chaotic lifestyle, debts and inability to manage her finance and a pattern of intermittent engagement with support workers.

When Gemma moved into her own property, she was quickly befriended by a group of young adults. These friends are the first real friends that Gemma has had and they quite often come to her flat or invite her to parties. Gemma has told her housing officer that her friends sometimes hit her or borrow money, food and sweets but don't pay them back but she doesn't want them to get into trouble as they are the only friends that she has.

CASE STUDY 2 Steven – Age 39 (non factual)

Steven has a severe learning disability and has been allocated a bedsit with two hours of support each week to help with budgeting, shopping and bills.

Previous tenancies were difficult with complaints of anti social behaviour and Steven playing very loud music. There have been reports that Steven has allowed a friend and his girlfriend to move in to the new bed sit and neighbours have complained about drug dealing from the property. The Community Care nurse reported that there seemed to be a man living in Steven's flat who is making decisions about what Steven should buy when shopping. 1 month after the report, Steven cancelled his community care assistant service. Recently the Police have been notified that an underage female has been staying overnight in the flat and rumours have started to spread that Steven is a paedophile. Steven has called the Police a few times to complain about his windows being smashed (repaired by housing) and money stolen from his flat (never found). Steven contacted housing to request to move as he was being harassed. The word "Paedophile" has been sprayed onto his wall.

Activity Sheet B

Case Study 1 – The Outcome (true story)

Twenty-seven year old Gemma Hayter's body was found on 9 August 2010 on a disused railway line in Rugby. Her murder and the abuse that she suffered beforehand were abhorrent, committed by people she believed to be her friends. The five people who caused her death were brought to justice, three of whom are serving sentences for murder and two for manslaughter.

The serious case review which followed Gemma's death highlighted that no single agency had a full picture of what was happening in Gemma's life: there were a number of missed opportunities for initiating safeguarding procedures, assessments or other interventions and for agencies to share information.

The review also raised wider issues nationally about community safety for single adults who may be vulnerable to disability-based harassment, hate or mate crime and exploitation. Recommendations included for the safeguarding partnership board to develop procedures to ensure multiple low-level concerns about an individual are escalated and a strategy to tackle "mate crime".

Case Study 2 – The Outcome (true story)

Steven Hoskins was a 39 year old man with learning disabilities who was subjected to harrowing abuse ending in his death in St Austell, Cornwall on 6th July 2006. He had a troubled history, had experienced a significant amount of bullying and discrimination in his life and needed support to live in the community.

Hoskins was placed in a bed sit and he was allocated 2 hours of help each week but he chose to cancel the service in August and by September the council closed his case.

Hoskins then lost all control over his life when Darren Stewart and his girlfriend Sarah Bullock moved in and began to manipulate and abuse him – just prior to his death he was forced to swallow lethal doses of paracetamol, hauled around his bed sit by a dog collar and burned with cigarettes.

Hoskins body was found at the base of the St Austell railway viaduct. He was terrified of heights and had been made to walk to the viaduct where he was forced over the safety rail and made to fall 30 metres to his death by Sarah Bullock kicking his face and standing on his hands. Steven's murder led a serious case review. Housing agencies were criticised for only dealing with the Anti Social Behaviour allegations and for not referring onto the adult protection team.

LESSON SIX

Adult Support & Protection

"Be the change you wish to see in the world"

Mahatma Gandhi

Adult Support & Protection

Adult Support and Protection - legislation.

The Adult Support and Protection (Scotland) Act 2007 can help protect people who are at risk of harm and find it difficult to protect themselves or their property. The Act calls people in this situation "adults at risk".

"Adults at risk" are people over 16 yrs who might:

- Find it difficult to keep themselves or their property (their home, the things they own) safe.
- Be harmed by other people
- Be more vulnerable because of a disability, illness or mental disorder (this could mean people with mental health problems, people with dementia, people with learning disabilities). It doesn't mean that all people with learning disabilities, mental health problems or illnesses or disabled people are always "at risk". It means that there are certain people in this situation who find it more difficult to keep themselves safe.

For an adult to be considered at risk, all three parts of the definition must be met.

The Act introduces measures to identify and protect individuals who fall into the category of 'adults at risk'. These measures include:

- Placing a duty on councils to make the necessary inquiries and investigations (see below) to establish whether or not further action is required to stop or prevent harm occurring;
- A requirement for specified public bodies to co-operate with local councils and each other about adult protection investigations; e.g. Health, Police, Fire and Rescue services.
- A range of protection orders including assessment orders, removal orders and banning orders; and
- The establishment of multi-disciplinary Adult Protection Committees.

The role of Social Work in Adult Support and Protection

Inquiries: The Act places a duty on councils to make inquiries about an individual's well-being, property or financial affairs where the council knows or believes that the person is an adult at risk and that it may need to intervene to protect him or her from being harmed.

Investigations: In order to make inquiries, the Act authorises Council Officers to carry out visits, conduct interviews or require health, financial or other records to be produced in respect of an adult at risk. The Act also allows a health professional (e.g. doctor or nurse) to conduct a medical examination. However, a person is not obliged to answer any questions put to them in an interview, and must be informed of their right to refuse to be examined before a medical examination is carried out.

Independent advocacy and other support services: The council has a duty to consider providing appropriate services, including independent advocacy, to support adults at risk if they feel an intervention under the Act is necessary.

What is Harm?

Physical Harm - Normally involves deliberately inflicting pain or suffering on another individual, such as punching, slapping, shaking, burning, scalding or forcing an individual to take a substance that is likely to harm them.

Sexual Harm - Covers a variety of behaviours, including non-consensual touching or penetration, exposure and showing another individual sexually explicit material. It includes any activity the individual has not or cannot consent to. It is a criminal offence and should be reported to the police. It should be noted that where a care worker has a sexual relationship with someone they support it is still a criminal offence even if it is apparently consensual.

Psychological/Emotional Harm - Causing an individual fear, alarm or distress through abandonment, deprivation of contact, humiliation, controlling, intimidation, withdrawal of services or supportive networks.

Financial or Material Harm - Inappropriate use of an individual's money or property without their agreement or consent, such as use of benefits, bank account or credit card, or pressure in connection with wills, property or inheritance.

Neglect and Acts of Omission - Lack of appropriate care and attention which is deliberate or unintentional, including ignoring medical or physical needs, failure to provide access to appropriate health, social care or educational services, and withholding the necessities of life such as medication, adequate nutrition and heating

Self harm - Not taking enough care of yourself. This could be by not taking required medication or adequate nutrition. It can also include taking harmful substances or engaging in behaviour that is likely to cause harm. Remember that to be considered as an adult at risk of harm, all of the criteria in Section 3 of the ACT needs to be met (see above).

Institutional Harm - Repeated instances of poor care and unsatisfactory professional practice.

Any of these may be perpetrated as a result of deliberate intent, negligence or ignorance. It is not an exhaustive list of the types of harm which can affect an adult at risk and it may occur as a result of a specific incident.

What are Protection Orders?

There are different types of protection orders - assessment orders, removal orders and banning orders. While a council can apply for a Protection order, only a sheriff would decide if someone needs one.

Protection Orders involve understanding complex legislation and they can be very tricky to work with. They are last resort measures and are only taken in particular circumstances...they are uncommon and it tends to be other actions and interventions that impact in terms of providing the support that adults at risk of harm need.

Lesson 6: Adult Support & Protection

Activity:	Adults can be at risk too
Time:	40 mins
Objective:	1) To raise awareness of Adult Support and Protection legislation, 2) Identify types of harm 3) Know how to report concerns
Equipment:	<ul style="list-style-type: none"> • A3 Flip Charts. • Pens.
Method:	<ul style="list-style-type: none"> • Split group into smaller groups • Ask the group to read the introduction pages and discuss and identify different types of abuse/harm.(10 minutes) - Discuss definitions of 'Harm' • Ask the group to work in their groups to explore and discuss the case study (activity 1) • Discuss the outcomes with the group (presenter notes)
Point of Discussion:	<ol style="list-style-type: none"> 1. Is there a link with Disability Hate Crime? 2. What would you do if you think there is an adult support and protection concern? <ul style="list-style-type: none"> - Do you know how to report concerns?

PRESENTER NOTES



Prompt group discussion around

Answers: Harm (description in introduction)

Case Study Discussion

Is George at risk of harm? - LIKELY (possibly from theft, emotional harm causing distress and impacting on mental health). As well as 'harm' from others, George is showing possible signs of self-neglect and this could cause harm

What could be contributing to George being at risk of harm? – Unable to safeguard property (people have taken things without George's permission)

At risk of harm? (see above)

Affected by...in this case illness, POSSIBLY 'infirmity' IF there is a significant alcohol addiction [this would require a full assessment by Social Work]

Are any crimes being committed? – POSSIBLY theft and hate crime. Any concerns should be reported to the Police, who would investigate this.

If an adult at risk does not agree to you reporting concerns that he/she is being harmed, it is necessary to go against his/her wishes when:

- a) A person is, or may be, an adult at risk, and action needs to be taken in order to protect that person from harm;
- b) There is an issue of public safety; other people may also be at risk.

Further Information

Reporting to Social Work: The reporting of concerns to social services relating to adult protection can be done by contacting your local Council Social Work Service. Police Scotland can also be contacted directly on 101 (999 in an emergency).

Further information on Adult Support & Protection can be accessed at www.actionagainstharm.org

Activity 1

CASE STUDY

George is a 63 year old man who lives on his own. He has an adult son who lives too far away to help out with any support and his ex-wife hasn't had any contact with George since they divorced 15 years' ago.

George has a degenerative condition affecting his eye-sight but refuses to attend his GP to have the matter checked out, even though he has a significant visual impairment (his vision is blurry and tunnelled).

George also has a long standing alcohol problem and while he didn't sustain a serious injury, he recently fell down outside when under the influence. George has also been lately seen in an unkempt state, his dirty clothes showing evidence of having wet himself. This is a change in George within the last 4 months.

3 months' ago, new neighbours moved in next door to George. He complains that they are very noisy and are continually borrowing items from his garden without permission.

There are four children in the new family, their ages ranging from 7 to 15; they have been shouting insulting names through George's letter-box. When George approached the children's parents, they swore at him, also calling him names. George is becoming increasingly fearful - he only leaves the house when he runs out of food and needs to go to the shops...or when he wants to buy alcohol (about once per week).

You live near George and are aware of his situation. What might you think about:

- Is George at risk of harm? Yes/no/maybe? [Encourage reference to the criteria to be considered as an adult at risk of harm' in the introduction]
- What could be contributing to George being at risk of harm?
- Are any crimes being committed?
- What could you do to help George?

Further stories/examples of: Neglect, Psychological Harm, Sexual Harm, Physical Harm and Financial Harm are available at www.actionagainstharm.org.uk

LESSON SEVEN

The effects of Anti Social Behaviour and the role of all services

"The world is a dangerous place to live. Not because of those who do evil, but because of those who look on and do nothing about it"

Albert Einstein

The effects of Anti Social Behaviour and the role of all services

The Anti-Social Behaviour (Scotland) Act 2004 provides the legal definition of antisocial behaviour as:

*"A person engages in antisocial behaviour if they act in a manner that causes or is likely to cause **alarm and distress** or pursues a course of conduct which causes or is likely to cause alarm and distress **to at least one person who is not of the same household**. (Course of conduct must involve conduct on at least two occasions)."*

This includes, but is not limited to, the following conduct:

- Vandalism.
- Graffiti.
- Intimidating behaviour.
- Unacceptable noise.
- Violence.
- Bullying (physical or cyber).
- Setting fires.
- Malicious calls.

The legislation states that each local authority and relevant chief constable shall, acting jointly, prepare a strategy for dealing with anti social behaviour in the local authority area.

If anti social behaviour is identified there are a number of actions that can be taken, including:

- Anti social behaviour orders.
- Dispersal of groups.
- Closure of premises.
- Anti social behaviour notice.
- Parenting orders.
- Fixed penalties.

Further information is available www.legislation.gov.uk

Activity Sheet 1

Question 1

What does ASBO stand for?

1. Aggressive stopping behaviour order
2. Anti Social ban order
3. Anti Social Behaviour Order

Question 2

What's the youngest age you can be to have obtained an ASBO in Scotland?

1. 12
2. 13
3. 15

Question 3

Who grants an ASBO in Scotland?

1. Police Scotland
2. Local Authority
3. Sheriff

Question 4

What year is the Anti Social Behaviour etc (Scotland) Act?

1. 2000
2. 2004
3. 2008

Question 5

What happens if you break the conditions of your ASBO?

1. You are arrested and can serve up to 5 years in prison
2. You are given a warning
3. You are reported to the local council

Activity Sheet 2

Mrs Elizabeth Brown is an active 76 year old sole tenant of a local authority property, which she has lived in for 34 years. The property is a 2 bedroom end terrace style house which is accessed through a communal car park at the rear of the property. The car park has an adjoining lane that runs parallel with Mrs Brown's property allowing access to 10 other properties within the area.

Several years ago Mrs Brown had a stroke which left her with weakness on the left side of her body, and blurred vision in one eye. This has limited Mrs Brown's mobility and she now walks with a walking stick or a zimmer frame. On release from hospital, Social Services arranged for a home carer to visit 2 mornings a week to help with her shopping and house-keeping. Meals on wheels visit 5 evenings to deliver Mrs Brown's dinner and the local authority have arranged a weekly assisted collection for her waste. Mrs Brown continues to maintain her garden as this is one of the few areas of enjoyment she has left.

Mrs Brown's family do not live in close proximity and although they have regular contact by phone, they rarely manage to visit. She occasionally gets a visit from her direct neighbour who works off shore.

One evening when Mrs Brown was having her dinner she could hear several voices outside her flat. After initially trying to ignore the noise, the levels increased and Mrs Brown felt she had to increase the volume on her television. This continued for some time and Mrs Brown eventually decided to have a look outside to see what was happening. As she opened the front door she was met with around 10-12 young people hanging around her property drinking and smoking. Mrs Brown gently asked the young people if they could perhaps keep the levels of noise down as she was having difficulty listening to her television. At this point a female was heard shouting "get back into your hoose you auld peg leg and leave us alone you old mongo" the crowd started to laugh and joined in with other offensive comments.

Mrs Brown was exceptionally upset and contacted the Police. The Police took around 2 hours to arrive and Officers gave Mrs Brown advice to contact them if the group returned. Shortly after the Police left, the young people returned and Mrs Brown could hear smashing of bottles and eggs being smashed off her windows. Mrs Brown became very frightened so she turned her lights off and sat in darkness until she felt safe enough to go to bed.

The following morning when the home carer arrived, Mrs Brown explained what had happened and that she was unable to sleep. Her home carer advised her that she had noticed "retard" and "grass" sprayed onto her wall and that she should contact the Police if they returned.

Over the weekend the noise continued with the group becoming bigger. Mrs Brown was too frightened to contact the Police, so continued to sit in darkness each night. More eggs had been thrown at her windows and her front door, plants and garden were damaged.

Activity Sheet 2 cont'd

Mrs Brown's home care worker arrived as arranged on the Monday morning and stressed to Mrs Brown to visit her doctor to help her sleep at night. Mrs Brown phoned a taxi and on passing the outside external building, where the young people had been hanging around, she witnessed several smashed bottles, cigarette butts and litter scattered around the garden. She also noted the graffiti and the damaged garden. On explaining to her doctor the experiences of anti social behaviour, Mrs Brown was prescribed sleeping tablets and advised to return in 2 weeks time.

Mrs Brown did not want to take the tablets as she wanted to be alert in case the young people tried to get into her house.

The group continued to congregate at the property for several weeks and Mrs Brown found herself becoming more anxious, she did not want to return to her doctor as she thought he may be annoyed that she had not taken the tablets he had prescribed.

A few days later a female from the Local Authority came to visit to discuss the increase in bogus callers in the areas. Mrs Brown told the officer about the young people and the officer advised that she had noticed the eggs on the window. She gave Mrs Brown a leaflet with details of who to contact in the Local Authority. Unfortunately due to Mrs Brown's poor visibility she could not read the small print.

Over the weeks, Mrs Brown's health began to deteriorate and she stopped going out of the house. This meant she could not get fresh food or pay her bills.

After a particularly noisy evening, one of the neighbours called the Police to complain about the noise in the street. The Police were in the area and arrived quickly and the young people were spoken to and their names taken. The Police advised they would forward the names of the youths to the Community Safety Youth Team who would carry out visits to the young people's homes to discuss the incidents.

The anti social behaviour stopped eventually after 6 months.

LESSON EIGHT

Bystander Approach

*"If you see someone being bullied, make it stop.
Why is that so hard for us to do?"*

Susane Colasanti

Bystander Approach

Bystanders

The Equality Human Rights Commission (EHRC) refer to Disability Hate Crime as "Hidden in Plain Sight". This is because society seems to be unaware or chooses to ignore incidents of disability related harassment and abuse. Many people will have witnessed a disabled person being harassed or bullied and often wonder why nobody is intervening. This is called the bystander effect and refers to the phenomenon whereby the greater number of people present, the less likely people are to help a person in distress.

There are many reasons that people do not intervene, mainly they fear for their own safety. The larger the crowd, the easier it is to assume that someone else will/should intervene. They may also worry about embarrassing themselves in front of everybody else.

When an incident happens, the witness has four choices.

- **Stand and watch** – It is easy to assume that there is actually nothing wrong because nobody else looks concerned.
- **Support the bully** – Sometimes people wrongly support the bully as they fear that they may be the next victim. It could also be possible that the bully is a friend, colleague or neighbour and it is easier not to get involved.
- **Walk away** – Many bystanders walk away as they do not like what they are witnessing, but do not want to get involved as it is 'none of their business'.
- **Be an active by-stander** – Stopping the incident and/or getting help for the victim (remember always look at the situation carefully and find the safest way to act).

Everyone has a responsibility to do something, as staying silent encourages the perpetrator to continue and lets the victim think that no-one cares - silence could lead to violence!

EXAMPLE

A famous case occurred in the early 1960's, where Kitty Genovese was attacked and eventually murdered over a 45 minute period during which 38 people witnessed the attack and did not help in any way.

This was caused partially by social proof, whereby when people are uncertain, they look to other people as to what to do. It can also be caused by people losing themselves in the crowd and assuming a smaller share of the responsibility.

We have all been bystanders in our lives, and we will all be bystanders in the future. However, we will also have the choice whether we will be an active bystander who speaks up and says something, or whether we will be passive bystanders who stand by and say nothing.

An active bystander takes steps that can make a difference. If bystanders are confident to take safe and effective action to support victims, then there is a greater possibility that the victim can receive support.

Lesson 8: Bystander Approach

Activity:	It's Everyone's Responsibility.
Time:	50 mins
Objective:	The aim of this session is to demonstrate that those who witness Disability Hate Crime (DHC) have the power to challenge behaviour, support victims and prevent DHC. At the end of this session individuals will be able to: <ol style="list-style-type: none"> 1. Define the term bystander. 2. Discuss the impact of DHC on those affected by it. 3. Identify a responsibility to support people affected by DHC and where necessary challenge those who are involved in DHC. 4. List safe options for intervention during DHC incidents.
Equipment:	<ul style="list-style-type: none"> • Flip Chart and pens. • Example DHC scenario's on separate pieces of paper.
Method:	See below
Learning Outcome 1	
<p>Define the Term Bystander</p> <ul style="list-style-type: none"> • Ask Group to define the term bystander - Responses will include – someone who sees or hears about something. • Ask group if bystanders are normally seen as active or passive Responses will suggest that on most occasions bystanders will be passive. 	
Learning Outcome 2	
<p>Discuss the impact of DHC and how incidents affect the victim.</p> <ul style="list-style-type: none"> • Split the audience into three or four smaller groups. Distribute DHC scenarios (available on the activity sheet) to each group giving them one scenario. (There are two sets of scenarios, one for friends and one for incidents that happen to a stranger). • Ask each group to note down the potential impact of the behaviour on the person facing the abuse and if they think the incident is a crime. • Facilitate feedback from each group and use their pieces of paper to highlight the negative impact that DHC could potentially have on a victim. • Ask the group to raise their hands if they consider the scenarios to be wrong/illegal. With their hands still raised ask group to look at their peers. (The hands up question will let the group see that they hold similar views to their peers and supports the notion for intervention). 	
Learning Outcome 3	
<p>Challenging Disability Hate Crime</p> <ul style="list-style-type: none"> • Refer group back to the list of reasons why bystanders don't usually get involved. Highlight the phrase "IT'S NONE OF MY BUSINESS" <p>Ask the group "When does something become your business?"</p> <ul style="list-style-type: none"> • Facilitate some responses. These will include when it affects me, when it affects someone I know. It may affect someone I have a responsibility to support (this may be more relevant for those working in disability organisations). • For young people – "What do friends do for each other?" – Facilitate responses to include supporting friends, sticking up for friends and looking out for friends and ask them to think about their friend as the perpetrator and then as the victim. <p>Ask groups to again look at the scenarios and ask them to identify if they would have a responsibility to do something in each. End discussion by saying it is fear that often stops people intervening.</p>	

Lesson 8: Bystander Approach

Learning Outcome 4

Actions speak louder than words

- Ask the group to consider the scenario they were previously given and ask them to think what options they can come up with to intervene **safely**. (remind the group to think about possible consequences)

Whilst group are considering their options write on a piece of flipchart paper the following:

1. Do nothing.
2. Directly intervene (now or later).
3. Distract.
4. Engage others.
5. Other option.

- Ask the group what would happen if they did nothing?
- Ask each group to share how they decided to intervene.
- Tick beside each intervention on your flipchart. Remember to challenge each response around the potential for the bystander getting hurt.

Discuss the list with the group and the many interventions that can be applied. Remind the group that combining options would also work. For example you could distract a friend who is making jokes but maybe not challenge him until later. Or you could get some friends to back you up when you speak to him. Safety in numbers keeps the bystander safe.

PRESENTER NOTES



Prompt group discussion around

There are a number of safe options for intervention, e.g. walk away and call the Police, ask other bystanders to help you stop the incident, but doing nothing should never be an option.

Further Information



Third party reporting centres will display this logo:

Incidents can be reported directly to the Police:

999 in an emergency
101 for reporting non emergencies.

Hate Crimes can also be reported online or in any third party reporting centre. More information can be found on the Police Scotland website -

<http://www.scotland.police.uk/contact-us/hate-crime-third-party-reporting/>

Activity Sheet 1

Friend Scenarios (for use with young people)

SCENARIO 1 - You are sitting outside your house with some friends. A young man you know from your street walks past and one of your friends starts to shout names and throws litter at him. You know that he has a learning disability. Some of your friends are laughing at this. The man is getting quite upset.

SCENARIO 2 - You are outside your house with some of your friends. The young man who lives next door looks after his garden. He has a learning disability. Two of your friends go into his garden and start pulling plants up, smashing pots and throw litter around the garden. It is clear that others are not happy but don't do anything.

SCENARIO 3 - One of your friends knows that your neighbour has a learning disability and is aware that he receives quite a lot of money in benefits. He suggests that we could get some money from him. Others in the group nod their heads and laugh about it.

SCENARIO 4 - You are at the park with a group of your friends. A young man from your street is walking towards you. You know that he has a learning disability. As he walks past one of your friends slaps him on the face whilst another films this on his mobile phone. Others in the group are laughing at this.

Stranger Scenarios

SCENARIO 1 - You are walking home from work when you notice some young people throwing rubbish and shouting names at a disabled person in a wheelchair. The other children are laughing at him. The man is getting quite upset.

SCENARIO 2 - A new person has recently moved into your street. Your next door neighbour tells you that she has a learning disability. You notice that her garden is always really tidy and full of lovely colourful flowers and garden ornaments. One day you notice the garden has been vandalised and someone has sprayed 'retard' on the wall.

SCENARIO 3 - You are on the train on your way to meet some friends when a group of young adults get on and start shouting and slapping the back of one of the other passenger's heads. You notice that the passenger has a guide dog, which one of the group is pouring alcohol on.

SCENARIO 4 - You work with a colleague whose brother has a severe learning disability. Your colleague tells you that her brother is being bullied in his own home and that the paper boy has been charging him £3 per week for the free newspaper.

SECTION THREE

- **Other forms of Hate Crime**
- **Dementia**
- **Looked after Children**

3.1 Hate Crime

A Hate Crime is 'any crime which is perceived by the victim or any other person to be motivated by malice or ill will towards a social group'.

5 social groups are covered by hate crime legislation:

- Disability
- Race
- Religion or Belief
- Sexual Orientation
- Transgender Identity

You don't have to be physically attacked or injured to be a victim of a hate crime.

Hate crime can include:

- Having insulting graffiti sprayed on your house or car
- Having hurtful things said to you day after day
- Being pushed, hit, hurt, sworn at or abused
- Having something you own vandalised
- Having belongings stolen
- People threatening you, your friends or family
- People making you feel scared, intimidated or distressed.

No hate crime is too minor to report. Reporting hate crime helps the Police find those responsible for and prosecute them. It also helps the Police get a better picture of what's happening in your community, highlights areas of concern, and monitor patterns of behaviour.

Why should you report?

There are many positive reasons for reporting:

- If you have been a victim you can receive help and advice
- You will help build a picture of the nature and extent of hate crime in your community.
- Your information will help the Police understand where to focus their resources.
- You will help to raise public awareness of the issue and change attitudes, which could prevent future hate crime.
- Your information may lead to arrest and conviction.
- Your report may help the victim to have a life free of harassment and abuse.

What happens next?

When the Police receive the report they will investigate the matter giving full attention to your needs. In some cases the matter may not be criminal but will highlight a pattern of behaviour to the Police.

YOU CAN MAKE A DIFFERENCE!

3.2 Dementia

Dementia is one of the major causes of disability and dependency among older people worldwide.

Dementia is a condition that affects the brain, often making it harder to remember things or think clearly. Many different illnesses can cause dementia. The most common is Alzheimer's disease. There are many kinds of dementia including vascular dementia, dementia with Lewy bodies and alcohol-related brain damage. All of them damage the brain so that it doesn't function like it would normally.

Dementia is most common in older people but can also affect people in their 40s or 50s and sometimes younger.

Alzheimer's disease gradually destroys brain cells and their connections. This affects how the person copes with everyday tasks.

Vascular dementia is caused by problems with the blood supply to brain cells. It can involve tiny strokes which damage small areas of the brain.

Dementia with Lewy bodies isn't as easy to identify as some other types of dementia, so it can be hard to diagnose. It can include hallucinations and symptoms that are similar to Parkinson's disease.

Alcohol-related brain damage isn't strictly speaking dementia, although many of the symptoms are similar, including loss of short-term memory.

What are the effects of dementia?

No two people with dementia are affected in exactly the same way. The impact of the illness depends on which areas of their brain are damaged.

Memory loss is one of the most common symptoms of dementia. Everyone forgets things sometimes and most people's memory gets worse as they get older. But when someone has dementia they may become very forgetful. For example, they may forget the names of family members or whether they have eaten lunch or not. They may repeat questions again and again without realising. People with dementia may lose track of the time and day. They may forget where they are or be confused. Their ability to think and work things out can be affected. Dementia can also change the person's personality and the way they behave. Someone who was active and energetic may become listless. A person who was pleasant and polite may become rude and aggressive.

Although people with dementia can experience difficulties with everyday tasks, people can still expect to live well with their illness and lead fulfilling lives. Often it can be small changes that make a big difference to people with dementia, you can help by becoming a dementia friend. You can find out more information about becoming a dementia friend at www.dementiafriendsscotland.org Further information on Dementia can be accessed at www.alzscot.org

3.3 Looked After Children

Under the provisions of the **Children (Scotland) Act 1995**, 'Looked after Children' are defined as those in the care of their local authority. The majority will come into one of these two categories:

(1) Looked After at home

This is where the child (or young person) is in need of "protection, guidance, treatment or control", been through the Children's Hearings system and is subject to a Supervision Requirement with no condition of residence. The child continues to live in their regular place of residence (i.e. the family home). Regular contact with social work and other services occurs to ensure the child's needs are being supported.

(2) Looked After away from home

The child is cared for away from their normal place of residence, by foster or kinship carers, prospective adopters, in residential care homes, residential schools or secure units. Often the child has been through the Children's Hearing System which has made the child subject of a supervision order with a condition of residence, naming where the child should stay. There are many times too when a voluntary arrangement is agreed with the child's parent(s) and the child is looked after away from home.

Why are some children looked after?

The vast majority of looked after children have become 'looked after' for care and protection reasons. Some will have experienced neglect or mental, physical or emotional abuse. Some parents are unable to look after their children because of their own substance misuse or poor parenting skills.

Children and young people with complex disabilities sometimes need to be looked after in specialist settings. Similarly, vulnerable unaccompanied minors seeking asylum and young people who have been illegally trafficked into the UK may also become looked after to ensure their wellbeing. A small minority become looked after following involvement in the youth justice system.

There are around 16,000 Looked After Children in Scotland. A significant proportion of these children are disabled (estimated to be 11% compared with 7% for all children).

Many disabled children are particularly vulnerable to abuse and neglect. Sullivan and Knutson (2000) report that the incidence of abuse is 3.4 times greater for a disabled child than a non-disabled child. Additionally children with communication impairments or behavioural disorders are 5 to 7 times more likely to be abused (Stalker et al 2010).

The Child Protection and Disability Toolkit (CPDT) highlights why abuse can often be under reported by professionals and adults for numerous reasons such as:

- Reluctance to believe that a disabled child would be at risk.
- The child is not seen as a credible witness.
- Reluctance to challenge carers and assessment focussing on the impairment rather than a child's general welfare.
- Abusive circumstances are simply unrecognised.

In terms of looked after children (particularly those away from home) the CPDT highlights that disabled children are more vulnerable to abuse because

- The child is more isolated physically/socially from mainstream services.
- An increased dependence on parents or carers, including intimate personal care, increases risk, as does impaired capacity in being able to resist/avoid abuse.
- The child is exposed to more professionals, carers and volunteers, including respite and residential care. Could be dependant on their abuser.

Similarly the child may not be able to tell anyone because

- The opportunity isn't there or impaired communication difficulties make it very difficult.
- (S)he is unsure if it is abuse, whether (s)he will be believed or just simply out of fear.
- Lack of peer/wider family support/contact to check out and share thoughts and worries with.

Vulnerability to bullying and emotional abuse is heightened for a number of reasons. Changes in school or the child's place of residence can make forming and sustaining friendships very difficult; the child may have poor relationship skills stemming from attachment difficulties; inappropriate reactions to situations as a result of learned behaviours; a reluctance to make friends; low self-esteem, self blame, lack of role models and a heightened sense of privacy.

Those who bully may see a disabled child as being less able to defend themselves and consequently less able to tell an adult about the bullying. This requires considerable vigilance and proactive monitoring by parents, teachers, carers and other professionals. If identified additional support should be provided early and quickly.

Table 1.1: Number of children looked after at 31 July 2011 and 2012 by type of accommodation (1).

Type of Accommodation	2011(2)	2012
In the community:-		
At home with parents	5,476	5,153
With friends/relatives	3910	4,076
With Foster Carers provided by LA	3871	3,946
With Foster Carers purchased by LA	1197	1,333
With prospective adopters	267	262
In other community	49	45
Residential Accommodation:-		
In local authority home	615	564
In voluntary home	88	90
In residential school	460	451
In secure accommodation	86	95
Crisis care	13	14
In other residential	199	219
Total looked after children	16,231	16,248

3.3: Looked After Children

Activity:	Who is Darren?
Time:	50 mins
Objective:	Increase awareness about the vulnerabilities of Looked After Children and encourage participants to look beyond what they see.
Equipment:	<ul style="list-style-type: none"> • Post it pads • A3 Flip Charts • Pens • Icebreaker 2 - latin test
Method:	<ol style="list-style-type: none"> 1. Give the group 5 minutes to do Icebreaker 2. 2. Ask each person to read Darren's story for 5-10 minutes and write down their own 3 answers on a post it pad: <ol style="list-style-type: none"> 2.1 Who is Darren? 2.2 Why is Darren looked after? 2.3 What do you think should happen next for Darren? 3. Split the larger group into smaller groups. Give each group Darren's story (2) and ask them to discuss the following and note an answer for the group. <ol style="list-style-type: none"> 3.1 Who is Darren? 3.2 Why is Darren looked after? 3.3 Are children in care judged? If so, by whom? Did you judge? 3.4 How do you think Darren feels? 3.5 What additional disadvantages do looked after disabled children have? 3.6 What does the future hold for Darren if his circumstances remain the same? 3.7 What could the outcome be for Darren? 3.8 What could we do to help Darren and other children like him? 3.9 What can you do? ("if you change yourself, you have already started to change the world").
Point of Discussion:	<ul style="list-style-type: none"> • Darren is a lonely little boy, who has lost both his parents and has never had the opportunity to grieve for his bereavements and loss properly. • His new school do not seem to be aware of his many additional support needs and have not established an individual support plan to help Darren through his education and life circumstances. • The school have received numerous complaints about Darren's behaviour, but have they investigated the cause? • What could help Darren?/Who should help Darren?

PRESENTER NOTES



Prompt group discussion around	<p>Ask the group to think</p> <ul style="list-style-type: none"> • Is Darren a perpetrator of violence? Is he a victim of Disability Hate Crime? (assault, name calling, theft could all be Disability Hate Crime, as a young child, is he "responsible")?
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Further Information

- There is a difference between Safeguarding vulnerable adults/children and adult/child protection:**
- Safeguarding is everybody's responsibility, and includes measures to prevent or minimise the potential for abuse occurring.
 - Protection is a statutory responsibility and duty in response to individual cases where risk of harm has been identified.
 - However it is everyone's job to report harm and do what they can to prevent it from happening.

Activity Sheet 1

Darren's Story 1

Darren is 12 years old. He has been looked after by the local authority since he was 9 years old.

Darren is a very challenging, angry boy who is difficult to talk to. His behaviour is disruptive both in school and in the residential unit where he lives. Darren has few friends, is often violent and has recently begun to self-harm. Since starting Secondary school Darren's behaviour has deteriorated further and often he doesn't attend school because "it's crap". When he does attend, he is often removed from the class due to his disruptive behaviour.

Recently in class, Darren attacked another boy giving him a black eye. When challenged by the teacher, he threw a chair across the room at her, hitting another pupil in the crossfire. Parents have started to complain to the school about Darren's disruptive behaviour and the effects that this is having on their children.

After the most recent episode, the school have contacted the residential unit to advise that he is being excluded. The school are saying they feel he may not be able to return if his behaviour is to continue. They are now discussing Darren's placement suitability with Education officers. It is advised that a suitable, alternative education placement is likely to not be available in the local area

A professionals meeting has been requested.

Activity Sheet 2

Darren's Story 2

Darren is a 12 year old boy who has dyslexia and been professionally diagnosed with ADHD (Attention Deficit Hyperactivity Disorder).

Darren's father, Iain, a Policeman, was killed in a road accident when Darren was 5 years old and he was raised alone by his mother (Pamela). Pamela, a nurse, and Darren had a loving relationship and Darren was often described as a lovely, helpful, caring, albeit excitable, young boy with an affection for animals (he loved the family dog, a long haired golden retriever called Sandy). Darren also had a particular aptitude for designing and building Lego structures. Pamela worked hard to support Darren and she worked closely with the local primary school to get some additional support for Darren within the classroom. This support included using clearer, larger fonts, coloured paper instead of white and a myriad of positive distraction techniques. Whilst Darren still struggled to maintain concentration, he was rarely disruptive. The school and Pamela had a good support plan in place for Darren and he responded well to this. The school also recognised that Darren could be more vulnerable to bullying and worked with the children to create an anti-bullying culture.

Although the school policy on bullying was clear, Darren would sometimes come home from school upset because some of the other children had called him 'stupid'. Pamela would often hold Darren at night and explain to him that he wasn't stupid, that everyone was different and Darren's brain worked differently

Sadly Pamela was diagnosed with pancreatic cancer and passed away when Darren was 9 year old. As there were no family members who could look after Darren, he was placed under the care of the authority. As a result of this, Darren had to move to a different area and change to a new school.

When Darren moved to his new school, he has been branded as disruptive, violent, lazy and ignorant and his peers often call him 'retard', 'spaz', 'stupid' and 'thicko'. Some of the other boys stole his lunch, money and clothes and kicked or punched him. At first Darren did not react as he was scared and did not know where to go for help, but over the years Darren has realised that if he acts loud and aggressive the tormentors do not hurt him, in fact many people seem to fear him!

Darren also struggles within the unit as he feels lonely and has no friends. He struggles with homework and does not want the other children to know that he can't read or write very well. To avoid homework, he often starts a fight or smashes things so that he is sent to his room. He then bullies one of the other children to do his homework for him.

Darren is struggling with the bullying, the feelings of worthlessness and his own aggressive behaviour. He knows his mother would be sad if she could see him now. He has started to self-harm and often wonders whether he should end his own life and if he did, who would actually care!

SECTION FOUR

Additional Information



4.1 Keep Safe

The **Keep Safe** initiative is the first of its kind in Scotland and aims to support and encourage disabled, vulnerable and older people to keep safe and enjoy ordinary day to day life and activities without fear of abuse, intimidation and harassment.

Keep Safe is a **Police Scotland** led initiative developed in partnership with Renfrewshire community group '**I Am Me**' who are raising awareness of disability hate crime.

How does Keep Safe work?

Police Scotland and **I Am Me** work together to invite and train local businesses and public services to join the initiative and become a Keep Safe premises.

Businesses signed up to the initiative agree to support and help disabled, vulnerable and older people by providing a safe place for them to go if they are lost, scared, need help or if they are the victim of crime.

These businesses are easily recognised as a **Keep Safe** premises as they will display a **Keep Safe** window sticker. Disabled, vulnerable and elderly people are offered a Keep Safe Card to carry which includes their name, telephone numbers of people who can assist them, information on their health, how they communicate and **Police Scotland** telephone numbers.

Staff within the **Keep Safe** premises will be able to help by using the information contained on their Keep Safe Card to contact a relative or named person and the Police or other emergency services as appropriate.

Would your business/organisation like to take part?

Are you a retailer, business or public service who would like to support disabled, vulnerable or older people by signing up to **Keep Safe**?

Please contact us at iammeproject@yahoo.co.uk

Would you like a Keep Safe card?

If you would like a Keep Safe card or would like more information about keeping safe when out and about please contact us at iammeproject@yahoo.co.uk

4.2 What is "Mate Crime"

In recent years, a severely under-reported element of learning disability hate crime has been identified as so-called "mate crime". It can include physical, sexual and financial exploitation, and even lead to murder.

Steven Hoskin, a victim of "mate crime", had learning disabilities and endured months of abuse from people he believed to be his friends. He was tortured and taken to a viaduct where he was forced to hang by his fingers from railings. His hands were then stamped on causing him to fall 100ft (30m) to his death in 2006.

Steven's mother said at the time:

"He was generous...he knew he had a learning disability...he tried to do as others do...he wanted friendships..."

There is evidence that unaddressed minor mate crimes are often repeated and escalate. Steven Hoskin's principal killer lived with him for a year before murdering him, and his Serious Case Review lists more than 40 missed opportunities for intervention.

A typical story of mate crime is so called 'Tuesday Friends'. Tuesday, the day that benefits arrives, sees a particular group of people turn up at victim's flats, 'help' them to the cashpoint and then on to the pub where they 'help' them spend their money. The victim only sees their 'friends' on a Tuesday.

The scale of abuse is broad however, and can include 'borrowing' money, having food or taxis paid for, physical, verbal and psychological abuse or "cuckooing", when abusers use their victim's homes as their own.

Identifying and tackling mate crime is complicated. Victims often do not understand what is happening to them or are too afraid to tell anyone. People with learning disabilities can often find it hard to make friendships of any sort and when it comes to abusive friendships, they can often feel "any friend is better than no friend at all".

The British Crime Survey estimates suggest that up to 98% of disability hate crime is unreported. Anecdotal evidence from the Safety Net project indicates that the figure for mate crime is even higher. This places a great responsibility on anyone who knows or supports people with a learning disability, which is most of us. If people cannot, or will not, see the crimes to which they are subjected, it is up to the people around them to do so and to take decisive action.

So . . . if you see it happening, REPORT IT!

- Tell the Police.
- Tell Your Local Adult Safeguarding Team.

If you would like further information on Mate Crime contact rod.landman@arcuk.org.uk

4.3 How to report Hate Crime

You can report a Hate Crime as follows:

- **Call 999** (emergency) **101** (non-emergency). If you cannot make voice calls, you can contact the 999 emergency services by SMS text from your mobile phone. Emergency SMS is part of the standard 999 service which has been designed specifically for people with hearing loss or difficulty with speech. You will need to register your mobile phone at www.emergencysms.org.uk before using the service.
- **Textphone** or TalkByText users can contact the emergency services by dialing '**18000**'. This call will be connected to the 999 service and translated by a Text Relay Assistant.
- Contact the Police. Find your local Police station at www.scotland.police.uk/Police-stations. www.scotland.police.uk/hate-crime. You can also fill in an online Hate Crime Reporting Form for non urgent crimes in Scotland at www.scotland.police.uk/hate-crime.
- **Crimestoppers**. If you do not want to contact the Police, you can still report a hate crime by contacting Crimestoppers on **0800 555111** or by filling in the online Giving Information Form at www.crimestoppers-uk.org.
- **Third party reporting**. There are a number of 3rd Party Reporting Centres in Scotland. Staff within these centres have been trained to assist a victim or witness in submitting a report to the Police and can make such a report on your behalf. Find your local 3rd Party Reporting Centre at www.scotland.police.uk/assets/pdf/205073/hate-crime-3rd-party-reporting-centres.
- Tell someone such as a trusted adviser, friend or family member.
- **Advocacy Service**. An advocate is someone who supports you to say what you want to say, or will say what you want to say, when you are not able to do so. Find your local advocacy service by calling the Scottish Independent Advocacy Alliance on **0131 260 5380** or at www.siaa.org.uk.

If you have been affected by Disability Hate Crime or know someone who has been affected, you can contact **Victim Support** on **0345 603 9213** - www.victimsupportsco.org.uk.

4.4 Contact details

- **I Am Me Scotland**
www.iammescotland.co.uk
- **Quarriers**
01505 612224/616000
www.quarriers.org.uk
- **Crown Office and Procurator Fiscal Services**
0844 561 3000
www.copfs.gov.uk
- **Adult Support & Protection**
www.actionagainstharm.org
- **Anti Social Behaviour**
www.scotland.gov.uk/Resource/Doc/288794/0088353.pdf
- **Alzheimers Scotland**
www.alzscot.org
- **Victim Support**
0345 603 9213
www.victimsupportsco.org.uk
- **Capability Scotland**
0131 337 9876
www.capability-scotland.org.uk
- **Respect Me**
www.respectme.org.uk
- **Bystander Approach**
www.actiononviolence.com
- **Safer Communities Scotland**
0131 225 8700
www.safercommunitiescotland.org
- **PACE Theatre Company**
0845 130 5218
www.pacetheatre.com
- **Renfrewshire Council**
www.renfrewshire.gov.uk
- **Recovery Across Mental Health**
0141 847 8900
www.ramh.org
- **Police Scotland**
www.scotland.police.uk
- **Crimestoppers**
www.crimestoppers.uk.org
- **The National Autistic Society**
www.autism.org.uk

4.5 Curriculum for Excellence

The aim of this project is to challenge discriminatory and prejudiced attitudes towards disability and raise awareness of the reporting mechanisms, through the use of the creative arts. The project aspires to work in synergy with the Curriculum for Excellence to ensure that the participants develop their attributes and capabilities through active engagement and a participative learning experience.

It is intended that through participating in the lessons within this pack, young people can:

Successful Learners

- Be enthusiastic and motivated to learn new things.
- Be able to make reasoned evaluations.

Responsible Citizens

- Have respect for others and demonstrate a commitment to participating in their community.
- Have the ability to make informed choices and decisions and develop informed, ethical views of complex issues.

Effective Contributors

- Demonstrate self reliance and ability to communicate in different ways.
- Take the initiative, solve problems and work in partnership and in teams.

Confident Individuals

- Be secure in their values and beliefs.
- Relate to others, manage themselves and develop and communicate their own beliefs and view of the world.

Furthermore the project delivery within the schools will enable students to achieve the following experiences and outcomes set out in the Curriculum for Excellence:

Experiences and Outcomes (Secondary Disability Hate Crime Awareness)		
Lessons	Experiences and Outcomes	
Experiences Arts		
DVD	I have experienced the energy and excitement of being part of an audience for other people's presentations/performances	EXA3-01b
Health and Wellbeing		
1-8	I know that we all experience a variety of thoughts and emotions that affect how we feel and behave and I am learning ways of managing them.	HWB 0-01a HWB 1-01a HWB 2-01a HWB 3-01a HWB 4-01a
1-8	I understand that my feelings and reactions can change depending upon what is happening within and around me. This helps me to understand my own behaviour and the way others behave.	HWB 0-04a HWB 1-04a HWB 2-04a HWB 3-04a
1-8	I know that friendships, caring, sharing, fairness, equality and love are important in building relationships. As I develop and value relationships, I care and show respect for myself and others.	HWB 0-05a HWB 1-05a HWB 2-05a HWB 3-05a HWB 4-05a
1-8	I understand that people can feel alone and can be misunderstood and left out by others. I am learning how to give appropriate support.	HWB 0-08 HWB 1-08a HWB 2-08a HWB 3-08a HWB 4-08a
1-8	As I explore the rights to which I and others are entitled, I am able to exercise these rights appropriately and accept the responsibilities that go with them. I show respect for the right of others.	HWB 0-09a HWB 1-09a HWB 2-09a HWB 3-09a HWB 4-09a
1-8	I recognise that each individual has a unique blend of abilities and needs. I contribute to making my school community one which values individuals equally and is a welcoming place for all.	HWB 0-10a HWB 1-10a HWB 2-10a HWB 3-10a HWB 4-10a
1-8	Representing my class, school and/or wider community encourages my self-worth and confidence and allows me to contribute and participate in society.	HWB 0-12a HWB 1-12a HWB 2-12a HWB 3-12a HWB 4-12a
1-8	Through contributing my views, times and talents, I play apart in bringing about positive change in my school and wider community.	HWB 0-13a HWB 1-13a HWB 2-13a HWB 3-13a HWB 4-13a
1-8	I value the opportunities I am given to make friends and be part of a group in a range of situation.	HWB 0-14a HWB 1-14a HWB 2-14a HWB 3-14a HWB 4-14a
1-8	I know that popular culture, the media and peer pressure can influence how I feel about myself and the impact this may have on my actions.	HWB 3-46b HWB 4-46b
Listening and Talking		
	When I engage with others I can make a relevant contribution, ensure that everyone has an opportunity to contribute and encourage them to take account of others' points of view or alternative solutions. I can, respond in ways appropriate to my role, exploring and expanding on contributions to reflect on, clarify or adapt thinking.	LIT 4-02a

4.6 Equality Human Rights Impact Assessment

Overview

I Am Me is a community led project, founded in Renfrewshire in 2013, in partnership with **PACE** Theatre Company and **Police Scotland**. **I Am Me** aims to raise awareness of Disability Hate Crime (DHC).

This training resource has been impact assessed because it is a new resource which will be available in schools, staff groups and Police Scotland training. The training will be delivered by teachers and trainers across Scotland.

There are no negative impacts which have been identified and the training resource will help to eliminate discrimination, advance equality of opportunity and foster good relations, with no negative impacts to human rights.

Evidence of Assessment

- There are 5 million people in Scotland, over 1 million (20%) of the population are recorded as having a disability or long term illness (census 2011).
- Just over 26,000 adults in Scotland are recorded as having a learning disability (scotgov).
- In Scotland, disabled people are more likely to be victims of crime than non-disabled people (rates of around 17-18% for each in 2010/11) (scotgov).
- Research highlights around 90% of people with a learning disability have been bullied or harassed in the preceding year (mencap).
- Around 97% of Disability Hate Crime goes unreported (mencap).

This resource will be used to raise awareness of Disability Hate Crime and increase reporting.

Consultation & Involvement

Those involved in the development of this training resource come from a wide range of skills and backgrounds – Police, Copfs, Project team, Social Work, Education, Community Resources, Housing, Disability Groups and Young People.

Testing will also be carried out with disability groups, staff groups, Police and young people. Further consultation was undertaken with these groups and feedback was considered before publishing the final document.

The resource is available as an online resource and will be available in other formats, if requested. The training can be adapted to suit the needs of participants.

The contents of the pack can be emotive, and encourage participants to discuss areas which they may not have previously discussed in public. If anyone has been affected by the subject there are contact details for support and assistance, if required.

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www.update.org.uk
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