CAN PLAY

DISABLED CHILDREN AND ACCESS
TO OUTDOOR PLAYGROUNDS

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Introduction

The right to play is recognised as a human right in UN Convention on the Rights of the Child. This report discusses disabled children’s freedom to play outside, particularly in fixed equipment playgrounds, and makes recommendations for improving access for disabled children.

The report has been commissioned by the National Playing Fields Association (NPFA) so that advice can be given to Local Authorities and other playground managers to assist them in meeting the requirements of The Disability Discrimination Act (DDA) 1995.

The report contributes to NPFA’s strategy of promoting and encouraging Best Practice in Children’s Play.

The consultants who carried out the work are Alison John and Rob Wheway.

The Disability Discrimination Act 1995

The DDA requires service providers to make changes to the way it provides those services to disabled people.

From 2 December 1996 it has been unlawful to treat people less favourably for a reason related to their disability.

Since 1 October 1999 providers have had to make “reasonable adjustments” for disabled people such as providing extra help or making changes in the way services are delivered.

From 1 October 2004 service providers have to make “reasonable adjustments” to the physical features of their premises to overcome barriers to access.

The word “reasonable” is deliberately used. The Disability Rights Commission states: “The law uses this phrase to give some flexibility and allow different solutions in different situations.” and that:

“Some factors when considering what is reasonable” when considering (what adjustments to make to physical features) are:

- Whether taking particular steps would be effective in overcoming the difficulty that disabled people face in getting access
- The extent to which it is practicable for the service provider to take the steps
- Financial and other costs of making the adjustment
- The amount of disruption caused by taking the steps
- Money already spent on making adjustments
- The availability of financial or other assistance

The research found that there is much advice on how to create very expensive playgrounds and that Local Authorities and other providers were
concerned that pressure to adopt this type of advice, to comply with the DDA, could lead to a significant reduction in play opportunities for all children.

This report is therefore designed to assist those who are concerned with the reasonable approaches that need to be taken with existing playgrounds and facilities, rather than on how to create “ideal” playgrounds.

It makes achievable recommendations for modifications and improvements to playgrounds to improve their accessibility. These are what are regarded as good design for playgrounds in any case, rather than complicated exceptions. Such good design will benefit other children, parents/carers with pushchairs, accompanying parents and grandparents etc., who may find the playground disabling.

The research also found that improving access is more to do with overcoming discrimination based on attitude and institutionalised systems than with the design of play facilities. It could therefore be argued that reasonable changes to overcome theses barriers should have been implemented since 1 October 1999. It makes recommendations to overcome these barriers.

Under the DDA a disabled person is anyone with “a physical or mental impairment, which has substantial and long-term adverse effect upon his ability to carry out normal day-to-day activities.”

Whilst the law is what has to be obeyed the authors believe the following to be more helpful.

By “Disabled Children” we mean children who experience discrimination on the grounds of their impairment(s). These discriminative practices will often appear in people’s attitudes, in the built environment and institutionalised systems, thus making it difficult, or sometimes impossible, for disabled children to join in.

“Impairment is what we have.
Disability is what we experience.”

This is the social model approach developed by disabled people in 1981 (International Year of Disabled People).

We already know that lots of children with impairments make good use of their playgrounds with their friends, and benefit enormously from the experience. Where this happens the children are not being discriminated against and therefore not “disabled”.

A list of impairments could not be comprehensive and therefore would exclude. It also infers acceptance of the medical model, which assumes the problem is the person’s condition/impairment and aims to cure them, or at least make them more acceptable. Some statistics are given at Appendix D.

**Background**
For those working in children’s play there has been a long held belief that play opportunities have not sufficiently considered the needs of disabled children.

Various attempts have been made to give guidance to people involved in play but this has primarily been aimed at those involved in playwork, rather than in access to fixed equipment playgrounds, or those providing treatment or care in an institution.

In “Playgrounds With or Without Leadership?” (1969), the report of the Conference of the International Playground Association, Lady Allen of Hurtwood, states:

“The mentally retarded are probably the most neglected of all handicapped children in regard to provision for play.”

And recognising:

“The often terrible residential centres where the children live in isolation from the community and in emotional isolation from their families are used by society to solve its own problems by putting the children out of sight, rather than to attempt to solve the specific problems of the children.”

She goes on to recommend that the hospitals have specific play provision. She also refers to:

“The severely physically handicapped children often lead an unnecessarily limited life. They are often over-protected and are rarely allowed to take risks.”

She goes on to recommend that they should be able to attend holiday playschemes and also recommends the soon to open adventure playground for handicapped children.

Information packs such as, “Play and Handicapped Children”, (May 1981), pub. Fair Play for Children, and “Play and children with special needs”, (circa 1987), pub. jointly Fair Play for Children and PlayBoard, gave advice on contacts for relevant organisations working with disabled people and sources for information, without recommending any strategic approach that might be taken by local authorities.

Pioneering work on adventure playgrounds was carried out from the mid 1960s by the Handicapped Adventure Playground Association (HAPA), which has since become Kidsactive. The NPFA’s Director of the Children and Youth Department, Drummond Abernethy, was heavily involved with HAPA, and the NPFA Regional Officers promoted the idea of these dedicated facilities in different parts of the country and also in hospitals.
The opportunity for disabled children to light fires, use tools, climb and take part in other challenging play activities, was forward-thinking for its day and the disabled children had the benefit of opportunities that they otherwise would have missed.

The playgrounds were segregated facilities but even then Dorothy Whitaker, a Senior Playworker, stated that on Saturdays, when they had opportunities for families to come, the disabled children benefited from playing as equal partners with their siblings. In fact, because they were more used to the playground, they could sometimes show their siblings “This is how you do it”.

The concept of “integration” developed slowly. In “Five to Fourteen” (1974) pub. Inner London Education Authority it states:

“Physically and mentally handicapped children almost invariably suffer additional educational or social disadvantage because of the restrictions imposed by their primary handicap.

In some instances it may be necessary to make special provision for children suffering from a like disadvantage, to enable them to gain self-confidence among themselves as a preliminary to integrating with others as soon as they are able to participate intellectually or physically in what is going on elsewhere. Unhappily, as the skills of older children become more dependent upon quick reactions, some disadvantaged children may find participation more difficult and integration may present the greatest problem at the very stage when it becomes most necessary socially.”

In “Make Way for Children’s Play” (1985) pub. PlayBoard (the Government sponsored lead organisation on children’s play), they stated:

“Some children will have a need for a specific type of play provision. The children of single, working parents, children in hospital, and children from ethnic minorities will sometimes need special provision.” However it continued “Handicapped children may often be integrated into ordinary play projects, if attention has been given in the design and staffing of the facilities to their potential use by handicapped children. Some children, however, will require so much help or supervision, or regular medication or nursing care, that a special project is needed.”

Sheffield Kids Integrated Playschemes (SKIP), which started in the late 1970s, took a much more “can do” approach, believing that it was crucial that the children played together and that problems relating to the design of facilities were there to be overcome with goodwill, rather than the play prevented until all remedial measures could be undertaken. This is reflected in their more recent publication “Integrating Children in Play” (circa 1997).

Some play associations, or play councils, gave advice. An example is that of Wigan Play Association who in its “Playscheme Handbook” (revised 1994) stated:
“Integrated Play – For many years, children and adults with disabilities were kept separate from the mainstream of society. They were often considered to be abnormal and were stigmatised or patronised.

Today people still have reservations about integration because they feel mainstream organisations may not be able to meet all the disabled child’s needs. However, most people realise that people with a disability have an equal right to participate in all aspects of life. They understand that all children irrespective of their ability should grow up to see themselves positively and to feel valued members of their community. No child should feel abnormal or different.”

By 1997 HAPA had significantly changed its approach and in its resource pack “Including Everybody” had stated:

“What do we mean by inclusion? The concept attracts anxiety, fears about ‘incompetence’, anxiety about risk taking. But inclusion is not a single structure. It is a process by which we acknowledge the rights of all children to be a part of their local communities.” (This piece was written for them by Micheline Mason from Parents for Inclusion).

A further document from them “Including children and young people with disabilities in your service or club: an Equal Opportunities issue” gives guidance on how to develop and monitor an Equal Opportunities Policy.

In the publication, “It’s Not All Swings and Roundabouts”, (circa. 1990) pub. Women’s Design Service it states:

“Disabled children can experience severe isolation and loneliness, particularly if they go to special schools, which are often a considerable travelling distance from home, and are separated from playing with able-bodied children because of fear and misunderstanding. Appropriate equipment, and trained staff who are aware of handicappism, as well as access, are needed to achieve integration. ‘Able-bodied’ children benefit from this integration, as they learn respect for their ‘different’ peers.”

The emphasis throughout the play world therefore tended to be on playwork and in dedicated facilities. “Integration” was seen as desirable; there were certainly good intentions from play organisations and playworkers generally felt a commitment to the idea of opportunities for disabled children within their own facilities.

It is the experience of the researchers that these good intentions often did not bring about significant changes. Sadly over the years too often there have been incidents where disabled children have been turned away from play facilities because:

“We’re not insured”.

“We haven’t had the right training”.
“The building hasn’t been adapted”.

The greater discrimination has however come about through omission rather than prejudice. Invitations to a holiday playscheme for example would be sent through a local school, without the special school being informed. Given that children with impairments live in a disabling world, it is likely that the parents would not believe that they would be welcome at their local play facility. The emphasis on “special” schools reinforces in parents the views that what their children need is “special” play facilities. There is also a very real fear for parents that their children will be bullied or stigmatised.

Most advice and schemes concerned playwork opportunities and, though as important and as groundbreaking as some of these were, they did not address the issue of unsupervised play.

Unsupervised, fixed equipment, playgrounds which are open to the public, received less attention than playwork opportunities. Some manufacturers produced swings and roundabouts, to which wheelchairs could be secured. Most of these appear to have been sold to special schools or hospitals and those few that were placed on public playgrounds usually appeared rusted and unused.

Where the equipment was in schools and hospitals, it would be used with supervisors present, and often with moveable equipment and toys. The use in these circumstances was therefore significantly different to the usual playground.

It is of interest to note that British Standard (BS) 3178 “Playground Equipment for Parks” (1959), BS 5696 “Playground Equipment Intended for Permanent Installation Outdoors” (1979 and amended 1986) and the European Standard BS EN 1176 “Playground Equipment” (1998) contain no advice on accessibility for disabled children to either playgrounds or equipment.

The NPFA created the “Duke of Gloucester Playground” in Ward End Park, Birmingham in 1981 (The International Year of Disabled People); this had opportunities such as full access paths, chicanes, rumble strips, slopes and special kerbs for children with mobility impairments, plus a range of equipment focussing on joint use opportunities for children and carers. It also had a double width slide. There were parking areas, an accessible WC in an adjacent club building and washing and changing facilities. It did attract organised trips by disabled children and their parents from other towns and cities but use by local disabled children was limited.

A small section in “Outdoor Play Areas for Children” (1992) pub. The Institute of Leisure and Amenity Management (ILAM) states:
“Play areas should be designed and constructed with disabled children in mind, providing an integrated setting wherever possible. Integration benefits disabled and non-disabled children. It enables them to appreciate the diversity and raises awareness of different needs.”

This document gave some brief general guidance.

In America the “Guide to ADA Accessibility Guidelines for Play Areas” (2001), pub. U.S. Architectural and Transportation Barriers Compliance Board, went into significant detailed suggestions on how playgrounds and the equipment might be designed to meet the requirements of “The Americans with Disabilities Act”. The intention was that:

“Once these guidelines are adopted as enforceable standards by the Department of Justice, all newly constructed and altered play areas covered by the ADA will be required to comply.”

Whilst this document contains much useful advice, it assumes that disabled children are nearly all children with mobility impairments, and primarily in wheelchairs.

The large multi-play structures it envisages are not only expensive but, because of their large footprint, require very large areas of impact absorbing surface. There are probably less than one in a thousand children who require a wheelchair for even short distances and, as the catchment area for most local playgrounds is a lot less than one thousand children, the guidance as mandatory would appear to be excessive, particularly as they are not addressing the wide range of impairments.

The guidance only applies to new or altered playgrounds and would also tend to push local authorities into either providing playgrounds with very expensive equipment, or into removing equipment altogether and having a good path. A consequence of only having very expensive playgrounds would be the inevitable closure of small, local playgrounds.

In this country “Accessible and Inclusive Playspace” (2003) pub. John Hicks and Orston Limited and a predecessor document, “Access to Public Play Space – A guide to Audit” by John Hicks, subsequently republished in an abbreviated form as “Playgrounds for Children with Special Needs” John Hicks with Peter Heseltine, pub. RoSPA, gives much useful advice on the design of equipment and surfacing and the layout of playgrounds. They also give scoring systems, by which a playground can be audited to assess the level of accessibility of both the playground itself and the playground equipment.

The NPFA has an Advisory Note, TAN 113, “NPFA Technical Assessment and Advice on the Implications of the Disability Discrimination Act 1995 for Playing Fields, Recreation Areas and Children’s Playgrounds” (2003). This contains much useful advice on access to the playground and the design of equipment and surfacing. NPFA also carry out Disability Accessibility
Assessments using a scoring system that assesses accessibility of both the playground and the playground equipment.

At the same time as the research for this report, the Office of the Deputy Prime Minister (ODPM) had commissioned its own research. The result of this was published as “Developing Accessible Play Space. A Good Practice Guide” (2003), pub. ODPM. This draws attention to the importance of play for all children and the need to consult and engage disabled children and their families. It gives useful advice on approaches to be taken coupled with information on examples, resources and contacts.

Therefore helpful advice is available from a variety of sources for anyone wishing to create a playground that is “Accessible” to children with a wide variety of impairments.

An assumption running throughout the guidance is that, if the playgrounds are made “Accessible”, disabled children will go to them, or at least what is preventing disabled children going to the playgrounds are problems of accessibility that can be solved through good technical design.

There is, perhaps understandably, a tendency to concentrate on new playgrounds, for it is with a new playground that more imaginative and inclusive approaches can be taken. There is also a tendency to concentrate on the type of larger playground to which children will be taken by car.

For most play providers (generally Local Authorities) however, the bigger issue is not how to create new playgrounds but what to do with their existing playgrounds, the majority of which will have been initially created long before ideas of access and inclusion were considered.

Other research by, and the experience of, the authors has shown that some disabled children do “go out and play” (play out) and also visit local playgrounds, whereas others do not. This does not generally appear to be related to the equipment on the playground, or the “Accessibility” of the playground. The attitudes of other children, the fears of the disabled children’s parents and the belief of what is appropriate parenting, appear to be important determining factors.

The usual approach for developing guidelines for increasing access is to ask stakeholders how to make the playgrounds (more) accessible. The consultants, in agreement with NPFA, took a different approach. They observed disabled children using playgrounds and spoke to the children and their parents in their own homes. An outline of the research is included in an Appendix.

It was hoped that by adopting this approach fresh insights would be gained. It would also enable recommendations to be made that would result in the outcome that more disabled children would play on fixed equipment playgrounds, rather than the output that more fixed equipment playgrounds would become “Accessible”.

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This would not only address what has been a criticism of local authorities, that is the concentration on outputs rather than outcomes, but would also be likely to give guidance, which would encourage use of playing fields, public open spaces and other places where children play.

**Inclusive Play**

Enabling all children to play, and to play together, is about a benefit to the whole community. It is not about overcoming legal hurdles or making expensive provision for a small section of the community. If any child is prevented from playing then it diminishes the play experience of all.

Sadly too much of the debate about disabled children's freedom to play has revolved around treatment or directed activity, rather than play, and around technical modifications to equipment, rather than children playing.

This report is about children and their freedom to play; it does make some technical recommendations but its main thrust is that the desired outcome of any strategy is that:

**Disabled children can and are playing freely.**

This and previous research by the authors found that if parents, experts, manufacturers etc. were asked “How do you make a playground accessible?” then this invited responses which concentrated on design features.

If parents and children were asked: “Do you/they play out?” or “Do you/they go to the local playground/park?” then the answer was too often “No” and the reasons given were usually to do with fears and isolation rather than the accessibility of the neighbourhood or the design of the playground.

The authors conclude that any strategy, which ignores these social and institutional barriers and concentrates on technical means alone to achieve “accessible playgrounds”, is ignoring the real needs of disabled children and their freedom to play.

Expensive and elaborate modifications to make a playground “accessible”, which is not accessed by disabled children, is a somewhat pointless exercise.

Many children who would be described as “disabled” can and do use playgrounds. For those who do not, the major obstacles are within the social and institutional environment. Physical modifications, which can and should be made, to playgrounds are generally low cost and within what would be in any case regarded as good design and of benefit to all.

That good design will also be of particular benefit to parents with pushchairs or disabled parents/grandparents who would like to accompany their children.
PLAY for itself

In assessing whether play opportunities are “accessible” for disabled children, we strongly state that the purpose for which a playground should be accessible is for “play” rather than treatment, educational trips or other purposes. Play is a positive end of itself.

Playgrounds in special schools and hospitals fulfil these purposes and are of benefit to children. These institutions are better with them than without them. The facilities however do not fulfil the same function as a publicly accessible playground.

Play is not easily definable and statements such as “play is nature’s training for life”, though inspiring, are open to many interpretations.

It is widely recognised that the following, whilst not definitions of play, are useful in deciding whether an activity is play or not:

“Play is
Freely chosen,
Personally directed
Intrinsically motivated.”

“Freely chosen” means that the children choose when and which play activity to undertake. It is not part of a set programme or curriculum and does not have any steps that need to be completed.

“Personally directed” means that the children themselves agree the roles or rules of the activity, they decide what outcomes they desire, if any.

“Intrinsically motivated” means that it is done for its own sake and not for any externally provided reward or certificate. In short it is done for fun.

As has been demonstrated by the desk research, disabled children are much more likely to be offered controlled activities, in segregated environments, as an alternative to play, than non-disabled children.

Any approach for accessible play, which offers treatment or organised classes as an alternative to play, is a further discrimination against disabled children.

Research in Zurich “Lebensräume für Kinder” showed that, by the age of five years, children who could not play out freely by their own homes, had less advanced motor and social development and were less autonomous. It also showed that, where parents rushed their children around from organised activities, classes etc., it did not compensate for the loss of play. There is every reason to believe that disabled children denied play and offered classes will similarly suffer.
This does not mean that organised activities and classes are not of benefit to children; they are manifestly beneficial and children enjoy them. It is however to state unequivocally that to deny play and to offer treatment or classes as an alternative is detrimental to children’s development.

This reflects the very positive statements made in “Best Play: What play provision should do for children”, produced as the result of a partnership between the NPFA and PLAYLINK and the Children’s Play Council (CPC).

The criteria by which accessibility should be judged therefore is whether the disabled child was able to play at the playground, rather than whether they were able to access a particular item of equipment, or complete a particular activity.

The emphasis must therefore be on the child’s ability to play, rather than on the technical design of the equipment. It should reflect what the children choose to do.

Non-disabled children will not necessarily use all items of equipment; they have different levels of ability. That does not mean that they cannot play on the playground.

Wheway and Millward in “Child’s Play: Facilitating play on housing estates” (1997), pub. Chartered Institute of Housing and Joseph Rowntree Foundation, found that the popularity of a playground depended predominately on its location near to homes and its visibility from those homes or from other trusted adults and low speeds of vehicular traffic.

Other research by Wheway, for local authorities and housing trusts, has confirmed these aspects to be more important than the level and amount of equipment.

The authors therefore conclude that an accessible playground is one in which disabled children freely play with their friends.

This conclusion frees us from focusing narrowly on equipment and allows us to concentrate on all children having the freedom to play together.

The authors are not suggesting that equipment is not important; children do value a wide variety of play equipment. They would however emphasise that ‘play’ is not dependent upon equipment.

Accessibility

Having a one hundred per cent accessible playground is not possible. Disabled children have a wide variety of needs, and satisfying the needs of one group of children may make a playground inaccessible to others.
For example, some children with autism are very able to use agility items but are unaware of the dangers of running away from a playground, or across a road, and will do so without warning.

An accessible playground for them is one at which the gates can be closed, with latches that are out-of-reach. The parent or carer can then allow them to play freely.

Not all disabled children have mobility impairments

Closed gates with out-of-reach locks would make the playground inaccessible for a child in a wheelchair or a small child.

Such an arrangement would also be unacceptable at an unsupervised playground, as bullies could trap young children inside.

1Measures to give accessibility to high places for all children would also allow toddlers to reach hazardous situations. This would be contrary to good practice and negate guidance in EN 1176 (The Standard for Playground Equipment).

The conclusion is therefore that an accessible playground for all is not possible. Any recommendations that attempt this will either be partial or contain contradictions.

Nevertheless measures can be taken, within reasonable costs, to make playgrounds generally more accessible. Indeed the duty under the DDA is to make “reasonable adjustments” to address physical features which make a service impossible or unreasonably difficult for disabled people to use. This phase should be implemented by 1 October 2004. Physical modifications are discussed later in this report.

“I Am What I Am” - Shirley Bassey

“I know what I can do and know what stops me doing it” Alison John

There are household names in the fields of politics and entertainment who are blind. Their achievements are highly regarded. They quite clearly understand about blindness and being blind. It is however obvious that they will never be eye surgeons.
This is not a matter of lack of access; it is an effect of the impairment.

It is crucial in ensuring accessibility that disabled children are not persuaded to undertake an activity in some convoluted or cosmetic way to satisfy the desire of well-meaning people to satisfy their own ideas of what is “normal”.

People often find it uncomfortable or embarrassing to watch children with impairments. When seeing a child with impairments the reaction is often to rush in to “do something”, in a way which would not be the case with a non-disabled child. The play opportunity can then be lost because of the embarrassment of the adult, not because of the impairment of the child.

The primacy of children freely choosing to play, in the ways they want to play, is again emphasised. The aim is NOT to ensure that they reach goals decided by others.
A “can do” approach and a helping hand can achieve much and add to the fun but the children should be allowed to do what they want to do, even if it doesn’t appear as accomplished.
Overcoming the Urban Myths

Well-intentioned legislation and quasi-legislative standards appear to follow a standard procedure when they are passed, which tends to be based on fear and urban myth, rather than on reasonableness and risk assessment.

The consequence is that once passed the guidance is interpreted too literally, or exaggerated, and facilities that are reasonable are closed down or removed. This happened with the Children Act 1989, the European Standard for Playground Equipment (EN 1176) and the Care Standards Act (2000). Our concern is that it appears to be starting to happen with the Disability Discrimination Act (DDA) 1995.

Statements such as “You won’t be able to have bark/sand/woodchip in playgrounds”, or “Nearly all of your equipment will have to be changed”, or “All of your playgrounds will have to be accessible to all disabled children”, give an impression of massive expenditure, well beyond the DDA requirement of “reasonable adjustments”.

The purpose of this section is therefore to give some guidance on approaches that might be taken to avoid panic and the closure of playgrounds, thus denying children play opportunities in the name of increasing access.

We specifically reject the notion that all, or a fixed percentage of, playgrounds must be made “accessible”.

The first reason is that it is impossible to achieve accessibility for one hundred per cent of children, as discussed previously. Secondly the topography of an area, or the specific location of a playground, may mean that it would be completely unreasonable to expect the costs to be incurred.

Examples would include a playground situated on the side of a steep hill or at the end of a flight of steps.

In these circumstances the installation of a zig zagging path may be either impossible to achieve, or the cost out of all proportion to the cost of the playground.

An incidental playground in the middle of a country park, in an area where there are no footpaths, would be another example, as would an isolated item of equipment at the far side of a playing field.

In these circumstances the question should be asked whether, as a matter of good design, the play area is in the right location. What should not happen is that it be closed down because it is not accessible, or completely disproportionate finances expended to the detriment of playgrounds where much less cost can give much greater accessibility.
RECOMMENDATIONS

Play is About Friendship and Neighbourliness

It is not the purpose of this report to make recommendations for the educational system. However we do note the following are an inevitable result of children attending special schools and have a deleterious effect on the children’s freedom to play.

Many disabled children have to travel for up to an hour to and from school. They therefore only see their school-friends at school (and do not see them at play) and are excluded from the friendship of their neighbours; they are therefore deprived of friends they can go out and play with.

Parents of disabled children (who go to a special school) often do not meet the parents of other children at the school.

Conventionally one of the main places that parents meet each other is at the school gates, or on the journey to school, where they make friends with other parents and learn to trust each other. Their children are then allowed to go to “Johnnie or Mary’s house” because the parents know each other.

Children will drag a parent to meet another parent and child they know if they see them in the street. Social interaction and neighbourliness are thereby increased. The research from Zurich found that when children could play out by their own homes both children and parents had more friends.

The parents of disabled children lose out on the building up of these trusting relationships and so become isolated themselves, and are therefore even less likely to allow their children to go out to play.

We therefore recommend that the usual practice be that all disabled children be offered the opportunity of regularly visiting, and taking part in activities at, their local mainstream school.

Participation and Mediation

There is nowadays considerable pressure for parents to restrict their children and keep them indoors. This is to a large extent caused by the increase in motorised traffic, and initiatives such as Home Zones and traffic calming are beginning to reverse this trend.

Parents of disabled children feel even more pressure to keep their children “safe” and additional support and encouragement for them may be needed.

Inclusivity should be an inherent part of a local authority’s approach to its play opportunities. It should not be a responsibility that is siphoned off to one Officer and in this way institutionalising the segregation.
In many situations children in general are discriminated against, priority being given to the motorcar rather than to children, or complaints by adults being taken seriously, whereas complaints by children are ignored. It is therefore good practice to have a strategy for dealing with such conflicts, which may arise from time to time.

It is good practice to have a strategy for inclusion and involvement of disabled children. This may include some support and introductions to the other children at playgrounds where a disabled child or their parent may initially feel some reluctance.

A considerable barrier to accessibility is fear of, or actual, bullying. Parents also fear, or experience, criticism for their child. Parents of non-disabled children can be irrationally discriminatory because they feel that the impairment may be catching (like a cold or measles).

Making the playgrounds accessible is therefore about overcoming fears and building understanding and relationships. This will require a deliberate strategy to which resources will need to be allocated. Such a strategy may well have an additional input from playworkers, youth workers, housing officers, social workers, police etc.

**We recommend that Local Authority staff undergo Disability Equality Training, so that they can promote community tolerance and understanding of difference. This would also promote the Local Authorities’ Equal Opportunities Policy.**

**We recommend that the Local Authority adopt a participation and mediation strategy.**

**Consultation**

Involvement and consultation with children should be at the heart of a playground strategy. This is particularly important with disabled children, as one reason for discrimination is that they are usually overlooked.

In addition to the participation and mediation strategy above the following suggestions are made.

Playground managers should actively seek out the views of disabled children and their parents. For the reasons we have stated in this report such consultations should usually have the freedom to play as a primary focus, though issues such as design of the playground or the equipment should be considered.

It is good practice to have an “operator sign” giving contact details for damage or incident. Such signs should also state:

“*Should you or anyone you know have difficulty getting into this playground or using the equipment please contact . . .*”
Or a shorter version might be:

“Want to use this playground and can’t? Contact . . .”

Disabled Children Should Be Allowed to Get Dirty

Getting dirty and incurring bumps and scrapes is a usual part of childhood and attempts to avoid these, and the occasional injury that results, can lead to restrictions that prevent children playing. Disabled children are likely to be more restricted than average.

A statement from The Play Safety Forum, “Managing risk in play provision”, (available cpc@ncb.org.uk) has been supported by the Health and Safety Executive; it contains the following extract:

“All children both need and want to take risks in order to explore limits, venture into new experiences and develop their capacities, from a very young age and from their earliest play experiences. Children would never learn to walk, climb stairs or ride a bicycle unless they were strongly motivated to respond to challenges involving a risk of injury. Children with disabilities have an equal if not greater need for opportunities to take risks, since they may be denied the freedom of choice enjoyed by their non-disabled peers.”

We recommend that playground managers use this document to assist them in their Risk Assessment procedures and in discussions with parents.

Health & Safety – The Polite Discrimination

Over the years the authors have noted that disabled children are discriminated against, quite unnecessarily, by reference to health and safety. Quite small children are sometimes prevented from using play equipment because of “Manual Handling Regulations” (which are guidance not law in any case).

Disabled children have been prevented from attending facilities because of over-cautious fears about their safety.

Such approaches are usually not based on a reasonable assessment of the risks involved balanced by the dangers to the health of the child caused by discrimination, but are caused by irrational fears and a lack of forethought.

Staff involved with playgrounds need to know that their organisation is committed to inclusive play and that they will be supported by their managers when making reasonable decisions which enable access by disabled children.
We strongly recommend that a “can do” approach is taken in all play situations and that, whilst regard to health and safety must always be taken, it should only be used reasonably and not as a knee-jerk reaction to discriminate against disabled children.

We recommend those with health and safety responsibilities consider the danger to the health and well being of disabled children if they are discriminated against by over-cautious application of recommendations and guidance.

Local Playgrounds

The general public when thinking about playgrounds will tend to think of the three or four in their local authority area that are located in town parks.

These however constitute a very small amount of the overall number of playgrounds managed by a Local Authority.

Blaenau Gwent has 76, Nottingham has 149, Medway has 87, Bristol 170. There are 400 in the Highlands area of Scotland. In rural areas Parish Councils are often the providers of play areas.

The majority of these will be relatively small, with perhaps three to six items of equipment, and will be located within housing estates, or on small public open spaces or parks or village playing fields. These would be LAPs, LEAPs, and NEAPs, as defined by NPFA in its “Six Acre Standard”

In many ways these cater for play opportunities more than town parks do.

Town park playgrounds or ones in country parks or similar attractions are family facilities, many of which children can, and do, only attend on a visit with their parents; they are important facilities but fulfil a different purpose. Separate recommendations are made for these later in this report. Some of these would be NEAPs but many fall outside the classification. As they require a “visit” and, as the term “destination” is widely used in the retail and tourism sectors, we refer to these playgrounds in destination locations as DEAPs (Destination Equipped Areas for Play).

It is the small local play areas at which children can freely choose to come and go and personally direct their own play.

These are important facilities. Wheway and Millward found that, both by their observed behaviour and in interviews, children placed a high value on their local playground, if it was in the right location. Their findings contradict a widespread belief that, because they only use them for short periods, children do not like fixed equipment playgrounds.

Where they can play out children do use a variety of the opportunities their neighbourhood offers, many for relatively short periods. If there is an appropriately sited playground they do keep returning to it. The playground
cannot be a “reservation” to which they are confined. Their play generally, and their use of the playground, depend on having an environment for play – roads and paths they can walk/cycle along in safety, spaces overlooked by trusted adults where they feel safe, places where they will meet each other and other members of the community.

A strategy of making accessible playgrounds cannot depend on making the playgrounds accessible in isolation from their environment.

Disabled children are discriminated against if they do not feel able, or are unable, to play out with their friends and also visit these local playgrounds.

What is also clear, given the small size of the majority of these playgrounds, is that the amount of adaptation and modifications that are “reasonable” is limited. For example toilet and changing facilities and special car parking spaces at each is massively beyond what is affordable or practicable.

**Recommendations for Existing Local Playgrounds**

As what is “reasonable” is crucial, in deciding whether a playground manager has complied with the DDA requirements for physical features, recommendations have been made below. They are NOT meant to be followed slavishly but are designed to give a reasonable rule-of-thumb.

These recommendations are modest in cost and can reasonably be implemented by all District and County Councils particularly as managers have had since 1996 to make adjustments.

1. A path is essential and deciding what is reasonable will depend on a cost benefit analysis – based on catchment of area and play opportunities available – the greater the opportunities/need the longer the distance that is “reasonable”. However we consider that any playground, which is less than twenty metres from a path or road, should have a surface to the playground that is firm, and wide enough for wheelchairs and pushchairs. The design should be such that a friend can walk alongside the disabled child. This is likely to be a minimum of one metre wide. At a busy playground it may need to be wider for passing. Where the ground is sufficiently hard, stable and even (without rutting or mud) and if grass it is cut short, then a path will be a lower priority.

2. The accessible entrance to a playground should be obvious from any reasonable approaching direction. In most cases painting in a bright contrasting colour will be sufficient. (This avoids difficulties for those with mobility or visual impairments).
3. There should be a dropped kerb at the pavement, reasonably near the playground entrance and obvious, or it should be at end of the path if access is along it from a road. Consideration should be given to the direction from which children are likely to travel and, if appropriate where any car is likely to park.

4. Internal paths or hard patches should be installed (without creating step edges) where ground is not hard and stable; this to apply to routes to equipment or seating that is less than ten metres from the gate or access point. For new playgrounds this should include locations where the ground is likely to become soft or rutted.
5. Steps, stiles, kissing gates or narrow gates/gaps that restrict wheelchair users and people with mobility impairments should be removed or replaced wherever this can be achieved at modest cost and with no creation of additional risk (e.g. where the design prevents a child running into a busy road or into a canal).

6. Dog grids should be removed (in a few Districts this may not practicable within the timescale where there are grids at nearly all playgrounds).

7. Bright or contrasting colours should be used to identify sudden or unexpected changes in level, objects, path edges etc.

8. At least one bench seat with backrest should be provided. It should be easily accessible from the entrance and should have a good view over the play area.

We believe that, because these recommendations are deliberately reasonable, they are achievable by all District and County Councils by 1 October 2004. (Do refer to exclusions below)

Parish Councils are much smaller organisations and should see these as a target to be achieved within a reasonable time frame. Other large organisations, commercial, statutory and voluntary, should implement the proposals as District/County Councils, with smaller organisations implementing them as Parish Councils.

Any organisation that has not embarked on a phased programme of improvements to playgrounds it manages is behaving unreasonably and contrary to the DDA. The statement “there are no disabled children round here” should not be used as an excuse to avoid taking any action.

There are however important exclusions from the recommendations above.

Playgrounds that might reasonably be excluded from these criteria are:

1. Playgrounds where the topography is such that steps are already in position and of such a number that replacement by a sloping path
would be unreasonable, or where the slope of the land is so steep that
the introduction of a path is unreasonable.

2. Playgrounds that have very little usage due to poor locations. Spending money on playgrounds that children do not use, so that
disabled children may equally not use them, is quite obviously a waste
of money. Poor playgrounds like this should be replaced with
alternative provision, rather than be upgraded to comply with legal or
health and safety requirements.

3. Playgrounds where the amount of equipment is so small, or low value,
that a path would be unreasonable. (For example a patch of public
open space that has one balance beam or two very small climbers).

4. Playgrounds where the equipment is near the end of its life and/or
there are plans for removal or replacement of the playground within a
two or three year period.

5. Additional access points to a playground that are rarely used should be
excluded from the requirements. These may be ones for maintenance,
a right of way from fields/hills, or ones that have low usage.

The judgement as to whether a playground should be excluded is the
responsibility of the local authority or managing body. There is a requirement
that an access audit is carried out. Where impartial advice is desired this can
be included as part of the Annual Inspection process undertaken by members
of the RPII. NPFA offer this service.

Our further technical recommendations should be included in rolling
programmes of improvement.

- There are many loose-fill impact absorbing surfaces and they have
different characteristics. In general they are acceptable for a few
metres but, as they easily scuff and some are difficult to traverse, long
travel distances across them to access equipment should be avoided.

- Raised beds without ramps, for impact-absorbing surfaces, should be
avoided, as should sudden steps down into pits. (Ramps into a raised
bed will also require a ramp down into the bed which will need to avoid
the falling space of the equipment).
- Maintenance is important to avoid excessive spillage on to paths which can make them in accessible.

Replacing the stile and installing a gate (also installing a road barrier) is “Reasonable”.

Having to replace these steps with a zig zag path is “unreasonable”.

Our observations and research have shown that some existing equipment does encourage and enable greater use by disabled children; some examples are detailed below.

These examples should not be used as a shopping list but rather as an aid to thinking through the issues of inclusivity.

We recommend that the play equipment manufacturers’ main approach to play for disabled children should be to design their standard equipment in ways which make it more accessible, rather than concentrating on “special” equipment.

- Larger rocking items. These often have the benefits of a backrest, footrest, handrail and a side, so that a child can be reasonably supported in it and have an accompanying friend or adult sitting alongside. This means that they are not only getting the benefit of the rocking motion but also of the adjacent friend and, in addition, it requires somebody on the other side to join in to make the item rock, thereby encouraging social interaction.
- Wide slides. This type of slide enables some children to be supported as they go down by a friend or an adult. Some find that they rotate in descent and so they are not ideal.

![Demonstration of play by Alison (for research purposes!)](image)

- Swinging items on which children lie rather than sit. These enable two or three children to lie together as they are swinging, giving both the fun of the swinging and also the social interaction. (If they do not comply with EN 1176 a Risk Assessment should be carried out – If an item is of good design, well installed and has no hazardous failures of standard compliance, then it is likely to be of acceptable risk).

![Alison cannot access even at ground level](image)

- Deck roundabout. These “old-fashioned” types of roundabout enable a child to sit/lie with an accompanying friend or adult, and we understand that it is possible to get on one with a wheelchair. (If they do not comply with EN 1176 a Risk Assessment should be carried out – If an item is of good design, well installed and has no hazardous failures of standard compliance, then it is likely to be of acceptable risk).

- Giant revolving disc roundabout. Where the surface of these is non-slip then a child can lie on it and be rotated.
- Rigid harness swings. These are popular with all children and in low vandalism or well-supervised sites they can enhance the play opportunities. A regular criticism is that a disabled child may not be able to lift his/her legs out of the way. They therefore need to be installed at a seat height greater than the minimum recommended in EN 1176, (ground clearance 350 millimetres). We recommend that a seat surface to ground height be within the range of 600 to 700 millimetres. (This is higher than the 635 millimetres maximum currently advocated by some inspectors).

Seat set too low

We also noted that parents wanting to sit on a swing, whilst holding a child, often found the seat too narrow for comfort. The manufacturers may wish to consider the design with this in mind.
Stolen Cars etc.

Some playground sites do suffer from stolen cars being driven on to them, from motor-bikes or quad bikes being raced round them or from people using them to fly-tip rubbish. Where this happens it can be a significant nuisance, cause costly damage and be dangerous.

The temptation is immediately to install kissing gates, steps, barriers or other defensive measures. These will have an unintended effect of restricting children and adults with mobility impairments and people with toddlers in pushchairs. It can also start a process where defending increasingly dishevelled and little used playgrounds becomes more important than developing play opportunities, so all children suffer.

We recommend that a more positive strategy be taken.

- Involving local children, parents and other adults in the playground and encouraging a sense of ownership has been found to develop care for the playground and reduce damage and vandalism.

- Increasing casual supervision, by opening up sightlines from nearby housing and passers-by, can make children feel more secure on the playground and discourages inappropriate behaviour and activities.

- Encouraging usage by making access easier e.g. installing traffic calming, improving pathway surfaces, opening up or lighting paths so they are not frightening, re-siting or adding entrances to shorten travel distances. Popular, well-used, playgrounds are less likely to attract inappropriate behaviour and activities.

- Having equipment that is appropriate and exciting for the ages of the local children will encourage usage and a positive approach to the playground.

Where there is significant evidence of stolen cars, motorbikes etc. and some barrier is necessary, consideration should be given to having it in position at known vulnerable periods i.e. so that the playground is accessible at other reasonable times. The need for a barrier may also only be temporary to cope with a sudden craze or to enable a breathing space during which the positive approaches above may be taken.

Barriers should not be installed just because a problem might exist and be then used as a reason for non-compliance with the DDA.
Specific Equipment

Disabled children (as all children) come in many shapes and sizes and therefore, where the severity of the child’s impairment is such that they need specific equipment, it is likely that the equipment needs to be specific to them as an individual. This is a very small number of children.

Specialist equipment is very expensive and is often easily vandalised. Research in Carlisle on special seats has demonstrated this. Moveable straps, which can be supplied for equipment, are usually moved very quickly and disappear.

It is a statement of the obvious but a vandalised “accessible playground”, at which the special equipment is no longer useable, is not really “accessible”. Local authorities may end up being in the position of having designated playgrounds, which they cannot afford to replace with specialist items.

The following approach is therefore suggested:

Where a child’s play would benefit from specific equipment the child and local children should be involved in the introduction and maintenance of specific equipment. The Local Authority should allocate specific funds for this purpose and have a deliberate strategy for inclusion when these opportunities arise.

We are aware that this may appear a hardheaded approach but the reality is that there is not a “one size fits all” for every impairment. The crucial issue is that the child can play with their friends on the playground. The second issue is that play is enhanced by specific pieces of equipment.

The involvement and consultation should be based on several occasions playing at the playground so that all the children can play and address the issues together. Such an approach may mean that the realities end up being different to those anticipated and the children will be better equipped to give informed advice on what they really need. It is also unfair to deny a disabled child the opportunity of playing with and making friends just because the equipment is not ideal.

Where a specific item cannot comply with EN 1176 a risk assessment should be carried out.
Visit Playgrounds (DEAPs)

It is common for local authorities to have a small number of “visit” or “destination” playgrounds in town or similar large parks or at tourism locations.

These often have big playgrounds with a large variety of equipment. They will often have nearby toilet and parking facilities. They may also have a cafeteria and are more likely to have park keepers, ground maintenance staff, or rangers in attendance for prolonged periods.

Whilst some fulfil both a “local” and “visit” function, many are almost entirely “visit” facilities; that is the vast majority of children can only attend when they are brought by an adult; their activities are limited to those occasions when the adult is free to take them, which will usually be less than once a week and may only be a couple of times during the school holidays. The child is not free to come and go as they please. Nor will they be able to play with their friends, or at least no more friends that can be brought in a car.

They are important family facilities and are highly valued as such. However, they do not fulfil the criteria for play.

It is interesting to note that when adults are asked to recall their play experiences, (a common warm-up exercise at play training), they rarely mention the presence of an adult.

Contracts undertaken by Wheway (unpublished), for a variety of local authorities, have found that the ratio of children to adults at these town parks and similar is rarely more than two children to each adult, it often approaches one to one, and occasionally the number of adults exceeds the number of children – groups of two grandparents, a parent and a child are not uncommon.

This is not to suggest that the playgrounds in these destination places are not of value as important family facilities. It is however to urge caution in having a strategy that concentrates all resources in a very small number of high profile and prestigious playgrounds, to the detriment of considering “play” in general, and the importance of local playgrounds and other public open spaces.

To draw an analogy, no-one would deny the importance of a big, central, public library, however a strategy of putting money into that, whilst at the same time closing local and travelling libraries and even worse ignoring the need for children to have books at home, would be wrong.

These “visit” playgrounds can play an important part in providing enhanced opportunities for disabled children, which cannot be provided in small local playgrounds.
We would recommend that these opportunities be integral to the design of the playground, rather than the playground be designated as a “special or disabled playground”.

Such opportunities could include accessible toilets, child washing and clothes changing facilities, lockable gates, and adjustable straps for equipment, sand and water play, sensory items etc.

At such playgrounds there should be designated car parking spaces in the main car park and, if the playground is more than fifty metres from the car park, people with disabled children should be able to drive to a parking spot adjacent to the playground (highway specification need not be necessary). This driving access may need to be restricted to certain times to avoid unauthorised access or dangerous activities.

“The nearest Alison could get in a car (playground far side of pitch).”

“Special Playgrounds” or “Segregated” is Discrimination

It has been the practice for well-meaning people to set up “special playgrounds” as these would give increased opportunities for disabled children who were not getting out to play at all. By “special” we mean ones that are provided as an alternative to public playgrounds, not ones provided for treatment or recuperation, in hospitals for example.

We also do not mean a public playground at which extra efforts have been made to encourage inclusive play.
The problem is that the setting up of special/segregated playgrounds reinforces discrimination on the grounds of impairment. People would not tolerate segregated playgrounds for any other section of the community, so why for disabled children?

Research shows us that it’s about how comfortable adults feel around impairment. This will often link back to their own play experiences and whether or not they played with or saw children with significant impairments in the community.

If a particular part of the community is “invisible” to the child, it will probably remain “invisible” to the adult. So as adults we can unconsciously discriminate. This is done in the nicest way possible; it’s dressed up and called “special” when it’s not; it’s really segregation.

We accept that twenty years ago this model would have been seen as good practice and giant steps were taken at that time. However, thinking has moved on and disabled children and their parents are looking for equality alongside their non-disabled peers.

The cost of setting up and maintaining a special/segregated playground is expensive and if local authorities can use these resources to create accessible playgrounds all children would benefit.

We would recommend that attempts to set up special/segregated playgrounds are generally discontinued and that the resources are used to make playgrounds for all children more accessible.

Alison John
Rob Wheway
January 2004
APPENDIX A

Research was initially carried out during the Summer of 2003 and built on previous research carried out by Alison John and Rob Wheway.

Three special schools in Bristol were identified as having children, of a variety of ages (infant, junior and senior), with a range of impairments. These impairments included severe autism and profound mobility impairments. Some of the children had multiple impairments including visual, hearing and communication impairments.

At each school a preliminary interview was carried out with the Head or Deputy Head Teacher and the opportunity taken to speak to other relevant members of staff. At one of the schools a researcher attended a parents’ meeting and interviewed three parents. A play session, within the school’s equipped playground, was observed whilst a group of junior age children with autism were playing.

For each school a visit was arranged to a local playground that the school already used. At the playgrounds the researchers generally avoided interaction with the children but observed the use the children made of the equipment, the interactions that were, or were not, going on between the children, or children and staff. The researchers tried to ascertain how much “play” was taking place. Towards the end of each visit the researchers talked with the children.

The schools were then asked to pass on the researchers’ interest in interviewing parents. The schools contacted parents asking if they would be willing to be interviewed. The names were then passed back to the researchers.

The researchers contacted the parents by telephone and asked if they could come and interview them and their children within the home environment.

The parents agreed to this and the researchers then visited them in their homes and discussed whether their children played out, and if so where they played and with whom. They were specifically asked if they visited a particular local park or play area and why they did, or did not, go to it. They were also asked if there were any parks or playgrounds, of which they were aware possibly from holidays, days out etc., that they found user friendly for themselves and their children. Within the limits of their impairments, conversations were held with the children.

A selection of play projects, that operated in the Summer holidays, were visited. These were chosen on the basis that they had received additional funding for inclusive play. The researchers observed those children for whom special funding had been received and the interaction between them and the other children and staff members. Members of staff were interviewed and, within the limits of their impairments, brief conversations were held with the children.
At an early stage in the project the researchers visited a random selection of playgrounds within Blaenau Gwent. At each site the car was left at the nearest place a member of the public would leave their own car and the researchers walked on to the playground, where this was possible for both of them. The researchers assessed whether the site was reasonably accessible or not, what improvements could be made that were “reasonable” to improve the accessibility of the site. Consideration was also given to whether the improvements that would need to be made to make the site “accessible” would be so costly that they would be unreasonable. The researchers also assessed whether the site was sufficiently useful as a play resource to be worth spending money on to make it more accessible.

A meeting of the Association of Play Industries (API) was attended by one of the researchers, who gave a brief outline of the project and distributed a summary of the findings to date. Approximately twenty-five representatives of play equipment manufacturers were present. A discussion was held and informal conversations took place over the lunch break. The researcher requested that the members respond to the consultation document that would be circulated.

An essential element of the research was the assistance given by an advisory group that was formed. This group was made up of people with personal experience of living in disabling environments, local government staff with a responsibility for play and/or a responsibility for increasing access and inclusivity, a play manufacturer nominated by the Association of Play Industries and the Technical Director of the National Playing Fields Association.

The advisory group met at the beginning of the project; this was for a scoping exercise to discuss the research project in general, to identify areas of interest and concern and to identify further people and places that needed to be considered within the research project.

The group then met approximately two thirds of the way through the project, having been presented with a paper detailing progress and findings. This paper was discussed in detail and amendments suggested.

From this discussion paper, and the results of the second advisory group meeting, a second consultation paper was prepared that identified the main issues arising from the research. This consultation paper was intended to “encourage discussion on the issues involved and to invite responses so that after a wide consultation authoritative recommendations can be made”. The paper also indicated that the contents should not be construed as “advice”.

The document was then circulated by post and by e-mail. Whilst the precise numbers it reached cannot be known, as e-mails can be easily forwarded and paper copies can be duplicated, the consultants believe that it reached over five hundred individuals and organisations. Details of the circulation are given in an Appendix to this document.
When the responses were received, the respondents were thanked, comments were made relating to individual points raised and, where necessary, questions were asked for further clarification.
APPENDIX B

The consultants thank the following people who made responses to the consultation document:

David Albutt, Business Director, Leisure-net Solutions, (in an individual capacity)

Phil Beaman, Operational Manager, Parks and Grounds Maintenance

Carol Brown, Freelance Consultant in the leisure & cultural sector

Theresa Casey. Independent Consultant and Researcher

Andy Chalmers, Melcourt Industries Limited

Bob Coburn, Head Teacher, Claremont School

Andrew Cooper, SCOPE

Keith Dalton, RPII Registered Annual Inspector, Pi2 Inspection & Training Limited

Paul Eyre, Liverpool City Council

Darren, Parkdale Play and Leisure

Anne Gifford, Company Secretary, Enviromulch

Philip Greswell, Parks Manager, City of Westminster (responding individually as an ILAM member)

Harry Harbottle, Director of Export and European Co-ordination, Richter Spielgerate, GmbH

Dr Mike Hayes, Child Accident Prevention Trust (CAPT)

Rob Heard, Parks Development Manager, Bromsgrove District Council

Hefin Jones, G. L. Jones Playgrounds

Toby Knight, Assistant Manager – Grounds Maintenance, Eastleigh Borough Council

Sandra Melville, Director, Playlink

Kerry Millar, Play Development Officer, The Highland Council

Neil Smith, Head of Consultancy & Training, Centre for Accessible Environments
Lynn Stevens, Parks Officer, Wychavon District Council

Tanny Stobart

Alexandra Strick, Project Manager, No Limits Millennium Awards, Whizz-kidz

Helen Tranter, Head of Open Space, Countryside and Heritage, Bracknell Forest Borough Council


Richard Webb RPII, Children’s Play Consultant, Sugradh, Eire

John Wheway, Special Educational Needs Co-ordinator, a Wolverhampton School.

L.A. Officers wishing to be unacknowledged from
  A City Council
  A District Council

An acknowledgement received from The Disability Rights Commission plus an oral intention to respond.
APPENDIX C

The consultation document was circulated through the following e-mail networks:

- Association of Play Industries (approx. 60)
- ILAM Parks Network (approx. 230)
- ILAM Play Network (approx. 35)
- Play Researchers Network (approx. 95)
- RPII Members (approx. 30)

In addition the consultation document was posted directly to the following:

The Centre for Accessible Environments - Nutmeg House, 60 Gainsford Street, LONDON.   SE1 2NY

John Yearley - Playground Management Limited, Kingston Lisle Business Centre, Kingston Lisle, WANTAGE  OX12 9QX

Dr M Hayes, Child Accident Prevention Trust - 18-20 Farringdon Lane, LONDON.   EC1R 3HA

Disability Rights Commission - FREEPOST, MID 02164, STRATFORD UPON AVON.  CV37 9BR

Nick Balmforth ACP MILAM - 48 Newland Avenue, STAFFORD.  ST16 1NL

Richard Webb (e-mailed) - 3 Hollybrook, Ballywaltrim, Bray, County Wicklow.

Rob Heard, Parks & Recreation Development Manager, Bromsgrove District Council - Burcot Lane, BROMSGROVE  B60 1AA

Ruth Robinson, Leisure & Amenities, Mid Suffolk District Council - 131 High Street, Needham Market, IPSWICH  IP6 8DL

Harmony House - 199 Queensway, Lambeg, Lisburn, Co. Antrim.  BT27 4NH

Mr S Frisby, Amenities Manager, Leisure & Cultural Services South Kesteven District Council - St. Peters Hill, Grantham.   NG31 6PZ

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Mr Alan Williams, Blaenau Gwent CBC, Community Services - Central Depot, Barleyfield Industrial Estate, Bryn Mawr, Gwent. NP3 4YF

Lee Hubbucks, Health & Safety Department, The Spirit Group - 107 Station Road, BURTON ON TRENT. DE14 1BZ

Mr M Bourgaize, Project & Operations Manager, States of Guernsey Recreation Committee - Beau Sejour Centre, St Peter Port, Guernsey. GY1 2DL

Mair Williams, SCOPE Cymru - Burnel Hs, Gwaelod-y-Garth, CARDIFF. CF4 8SS

Mr Philip Robinson, Elmbridge B.C. - Civic Cntr, High St, Esher, Surrey. KT10 9SD

Southampton Centre for Independent Living - 6 Northlands Road, SOUTHAMPTON. SO15 2LF

Andrew Cooper, Scope, West Country Partnership - Olympus House, Britannia Road, Patchway, BRISTOL. BS34 5TA

Somerset Support Services, Physical Impairment & Medical Support Centre - The Holway Centre, Keats Road, Taunton, Somerset. TA1 2JB

Kidsactive, c/o KIDS - 6 Aztec Row, Berners Road, LONDON. N1 OPW

National Centre for Playwork Education - Francis Close Hall, Swindon Road, CHELTENHAM, Gloucestershire. GL50 4AZ

Parents for Inclusion - Unit 2, 70 South Lambeth Road, LONDON. SW8 1RLB

CODP - Litchurch Plaza, Litchurch Lane, DERBY. DE24 8AA

Circles Network, Pamwell Hs, 160 Pennywell Rd, Upper Easton, BRISTOL. BS5 0TX

Disability Wales - Wernddu Crt, Caerphilly Business Pk, Vann Rd, CAERPHILLY. CF83 3ED

WECIL - Leinster Avenue, Knowle. BRISTOL

Amanda Powell, Childcare Development Team, Social Services Department - The Charter, Broad Street, Abingdon, Oxon. OX14 3LT

Play Training Unit - Room 29, City Bristol College, Hartcliffe Ctre, Bishport Ave, BRISTOL. BS13 0RJ

Tim Gill, Children’s Play Council - 8 Wakley Street, LONDON. EC1V 7QE

Jan Cosgrove, Fair Play for Children - 35 Lyon Street, Bognor Regis, West Sussex. PO21 1BW

Play Wales - Baltic House, Mount Stuart Square, CARDIFF. CF10 5FH
PLAYLINK - The Co-Op Centre, Unit 5 Upper, 11 Mowll St, LONDON. SW9 6BG

David Steel, Oxford City Council, Leisure Services - 109-113 St Aldates Chambers, St Aldates, OXFORD. OX1 1DS

Mr Mel Campbell, Play Development Officer, Newtownabbey B. C - Mossley Mill, NEWTOWNABBEY. BT36 5QA

Mr Paul Barr, Landscape Planning & Development, Belfast City Council - The Cecil Ward Building, 4-10 Linenhall Street, BELFAST. BT2 8BP

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Council for Disabled Children - 8 Wakely Street, LONDON. EC1V 7QE

Contact a Family - 209-211 City Road, LONDON. EC1V 1JN

National Autistic Society - 393 City Road, LONDON. EC1V 1NG

Mencap - 123 Golden Lane, LONDON. EC1Y 0RT

Royal National Institute for the Blind - 224 Great Portland St, LONDON. W1N 6AA

National Deaf Children's Society - 15 Dufferin Street, LONDON. EC1Y 8UR

Mr David Bussey, Briarwood School - Briar Way, Fishponds, BRISTOL. BS16 4EA

Whizz-kidz, the Movement for Non-Mobile Children - 1 Warwick Row, LONDON. SW1E 5ER

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APPENDIX D

CHILDREN in ENGLAND AND WALES

The 2001 census recorded that there were 11.7 million under 16-year olds in England and Wales.
1 in a 100 children (1%) would therefore equal 117,000
1 in a 1,000 children (0.1%) would therefore equal 1,170

Disabled Children Statistics

The following information was supplied by The Disability Rights Commission Information Department. Our understanding is that figures cannot be precise, for example, at what point does wearing glasses become a visual impairment for statistical purposes? Children with multiple impairments will probably be in more than one set of statistics. The figures do not come from the same years, or necessarily the same geographical areas. The Department of Health figures confirm the widely used round figure of 3% of all children who are disabled.

Department of Health 2000
393,824 disabled children were under 16 years in the U.K.
Of these: 55,200 were under 5 years. 276,064 - 5 were to 15 years.
Over 100,000 of these have two or more significant impairments.

Royal National Institute for the Blind (RNIB) 1996
Estimated 24,200 under 16 years had significantly impaired vision. Approximately 60% of these had an additional impairment.

Royal National Institute for the Deaf
23,000 – 25,000 0 to 15 year olds are deaf or hard of hearing.

National Deaf Children’s Society
840 children are born every year with significant hearing impairment.

Cerebral Palsy
1 in every 400 babies, and approximately 1,500, born every year.

British Epilepsy Association
Approximately 50,000 children.
5 in every 1,000 children under 11 years old.

National Autism Society
Approximately 73,000 children with autism.

Downs Syndrome
1 in 1,000 babies and approximately 1,000 born every year.
APPENDIX  E

Advisory Group

Anne Boothe – Equality (Disability) Officer, Bristol City Council

Rowan Jade – WECIL (West of England Centre for Inclusive Living), Leinster Ave. Knowle, Bristol

John Knowlson – Play & Youth Officer, Bristol City Council

Paul Mallinson – Technical Manager, Playdale (Equip. Manufacturer), Haverthwaite, Ulverston, Cumbria LA12 8AE

Wendy Sharp – Out of School Co-ordinator (Disabled Children Team)

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CHECKLIST

District and County Councils should have strategies for:

- Ensuring that disabled children have the opportunity to play with friends.
- Offering support introductions and mediation for children and adults, where necessary, to enable children to play together at play places.
- Listening to disabled children and discussing with them, and their parents if necessary, their ideas on improving play opportunities.
- Working with disabled children and local children/parents on specifically designed opportunities for children with profound impairments.
- Ensuring that, where reasonable, all playgrounds have a path to and inside the playground and a clearly identifiable entrance.
- Developing a small number of town parks, which have enhanced opportunities for all children.

Play Equipment Manufacturers

Develop equipment that is robust and suitable for all playgrounds and by its design gives support or allows support to be given.

Develop equipment that avoids unnecessary obstacles for disabled children.

Some strategies for Local Authorities in establishing the needs of disabled children within the community:

- Carry out a community profile.
- Make links with:
  - Social Services (Children in Need Register)
  - Schools for both disabled & non-disabled children (SENCO’s and Inclusion Officers)
  - Adventure playgrounds, Playcentres, Youth clubs, After school clubs
  - Parent groups
- Develop ways of staff observing, consulting, getting to know and working with children in the play space on issues such as bullying, inclusion, diversity and disability awareness.
- Create a budget for inclusion
- Provide staff with Disability Equality Training