

Home is where the start is

The housing and urban experiences of
visually impaired children

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First published in Great Britain in November 2002 by

The Policy Press
34 Tyndall's Park Road
Bristol BS8 1PY
UK

Tel no +44 (0)117 954 6800
Fax no +44 (0)117 973 7308
E-mail tpp@bristol.ac.uk
www.policypress.org.uk

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Published for the Joseph Rowntree Foundation by The Policy Press

ISBN 1 86134 456 2

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The Joseph Rowntree Foundation has supported this project as part of its programme of research and innovative development projects, which it hopes will be of value to policy makers, practitioners and service users. The facts presented and views expressed in this report are, however, those of the authors and not necessarily those of the Foundation.

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Cover design by Qube Design Associates, Bristol.
Printed in Great Britain by Hobbs the Printers Ltd, Southampton.

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Acknowledgements

We would like to thank our Advisory Group for their enthusiasm about what we were doing and for providing us with a constant stream of excellent advice. The Advisory Group comprised: Angela McCullagh, Allison James, Christine Oldman, Laura Middleton and Olga Miller, and we are very grateful to them all. We would also like to thank Alison Jarvis, our contract manager at the Joseph Rowntree Foundation, for being so helpful, supportive and enthusiastic about our project. Leslie and Jo at Vision Aid (in Bolton) and Wendy at Henshaw Society for the Blind (in Manchester) were extremely nice to us and put us in touch with visually impaired children, so we are particularly grateful to them. Special thanks go to Nigel Sprigings (Salford University) and Dr R.B. Deering for being such reliable and invaluable sources of support during some difficult times.

We would like to dedicate the report to Lauren Joanne Ferris, Joseph Daniel Sheerin, Sarah Dobson, Connor Beswick and Mairi Livsey, and to the many children and parents we met while doing the fieldwork for the project.

Introduction

Policy and theoretical context

From medical to social problem

Social research on disability issues has conventionally been influenced by the medical model of disability (Swain et al, 1993). The medical model characterises disability as a problem that results from personal inadequacy (Oliver, 1990, 1993, 1996a; Barnes, 1990). It therefore prescribes medical treatment to correct what is seen to be wrong with the individual, or personal care to compensate for the functional inadequacies of the individual (Allen, 1999). Key writers such as Michael Oliver (1990, 1996b) and Colin Barnes (1990) claim that the 'medical model' has provided an *implicit* theoretical framework for much social research on disability. This is because social researchers tend to unquestioningly use the 'official' definition of disability, as a personal problem, and then investigate it as such. This produces 'facts' about the personal difficulties of disabled people, and thus reinforces the scientific validity of the 'official view' (Oliver, 1990). Since the official view is consequently seen as scientific, rather than value based, it continues to go unchallenged. Thus the principles that underpin key policies for disabled people, such as 'community *care*', have attracted widespread support rather than criticism (Allen, 1997, 1999).

Disabled researchers (see especially, Swain et al, 1993) have been highly critical of the way in which social researchers and policy makers have regarded the medical model as value neutral. For them, the medical model simply represents *one* way of viewing the problems that disabled people face. They have formulated a 'social model' of disability in order to provide an alternative view.

This model makes a distinction between impairment and disability. We are all impaired to different degrees. For example, most people have impaired vision, although the degrees of sight impairment that we have differ. Vision impairments only result in disability if society imposes something "on top of [them] by the way we are unnecessarily isolated and excluded from full participation in society" (UPIAS, 1976, p 14), for example, because society does not accommodate people who are blind. Thus, proponents of the social model of disability argue against policy measures that focus on the individual's impairment, for example, medical treatment and personal care. Conversely, they argue for policies that lead to social change, for example, measures that ensure universal access to public buildings. This then enables *all* impaired people to participate in society.

In recent years, the social model appears to have been gaining influence with policy makers and influencers (such as social researchers), indicating that it is now exerting influence beyond the disabled people's movement where it was originally conceived. For example, the Disability Discrimination Act of 1995 (hereafter referred to as 'the DDA') has now been introduced and requires the removal of social and physical 'barriers' that exclude disabled people from participation in everyday life, although its provisions have been criticised for being weak (Imrie and Kumar, 1998). Similarly, the independent, policy influencing social research organisation, the Joseph Rowntree Foundation, has formulated a *lifetime homes* concept that has been influenced by the principles of the social model of disability. The lifetime homes concept is therefore based on 'barrier-free' design principles that enable *all* people to make *full* use

of their housing environment (see www.jrf.org.uk for more details).

While this can be seen to represent significant progress, our research was conceived in response to the limited ways in which policy makers and policy influencers have hitherto used the social model of disability. First, the social model has been widely used to make sense of – and to tackle – the social problems of people with *physical impairments*, while neglecting the application that it may have to the problems of people with *visual impairments*. Second, the social model has been widely applied to the social experiences of *adults* with physical impairments, while overlooking the social experiences of *children*. We will consider these two issues in more detail before we discuss the aims and objectives of our research.

Lacking vision

The legislative definition of disability in the DDA is “those people with a physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities” (DDA, 1995, quoted in www.disability.gov.uk/dda/#part1). This reflects what Morris (1993) has identified as a ‘general tendency’ to think about disabled people in homogeneous terms, as *men with physical impairments*. It has therefore resulted in housing and urban policies that exclusively concentrate on removing the *physical* barriers and restrictions on *wheelchair users* (Imrie and Kumar, 1998). For example, the recent amendments to the building regulations, Approved Document Part M (England) and Part T (Scotland) now require that all new private dwellings meet access specifications. However, the building regulations and guidelines emphasise a minimal level of physical accessibility. They do not address issues of sensory accessibility.

While welcoming many of these recent legislative developments, then, some organisations of disabled people have been eager to stress the heterogeneity of disabled people’s needs. To this end, Jenny Morris (1993, p 92) has suggested that the majority of research “cannot tell us much about the general experience of disability; rather, it is research on a particular experience of disability”. Thus, Groenveld (1993) has expressed concern that there has been a lack of research to

examine the impact that the built environment has on the everyday lives of people with visual impairments. This denies the statistical significance of visual impairments, which are one of the most common forms of disability in the world. In Britain, nearly one million people are blind or partially sighted, that is, almost one person in 60, and over 20,000 children are growing up with a visual impairment.

Missing children

While there is a demonstrable need for social research to be undertaken on the housing and urban environmental experiences of people with visual impairments, writers such as Long (1995) have been particularly concerned to ensure that the experiences of children be examined as a matter of urgency:

One notable gap in research in this area is the absence of studies on housing-design features to meet the needs of children who are visually impaired. It seems likely that visually impaired young children who are developing social, motor, language, and cognitive skills may acquire them more readily when environments are designed to encourage movement and interaction with objects and people. (Long, 1995, p 61)

This gap in our knowledge has already been identified by forward and critical thinking researchers such as Christine Oldman and Bryony Beresford (1998, p 4), who recently undertook “the first study of the issues related to housing, disabled children and their families”.

Nevertheless, the information that their research unearthed was limited in two ways:

- Despite Oldman and Beresford’s attempts to incorporate children with a heterogeneity of impairments in their 1998 study, only one visually impaired child was involved in the qualitative aspects of the study which concentrated mainly on children with physical impairments.
- The *main* source of data in Oldman and Beresford’s 1998 study was parents, of whom 40 were interviewed, compared with a total of seven children. The *only* source of data in Long’s study was professional experts, while Beresford (1995) made *exclusive* use of parents

as ‘experts’ to gather data in a similar piece of earlier work.

This raises a number of key issues that we will now turn to. Work in the ‘new’ sociology of childhood suggests that it is inappropriate to use adults as the sole or main source of data (James and Prout, 1997; James et al, 1998; Lewis and Lindsay, 2000). Thus, while children are socialised into an adult world, it would be inaccurate for two reasons to focus exclusively on socialisation processes. First, while socialisation processes may have a strong influence on children’s lives, recent developments in social theory have warned against the methodological dangers of concentrating solely on such structural factors in research. This is because there is always the possibility of ‘children’s worlds’ existing semi-independently of the adult world, and which are therefore underpinned by their own unique ‘childhood’ logic (James et al, 1998). Second, the adult ‘ways of seeing the world’ tend to result in children being positioned as ‘future adults’, with their experiences rationalised in ‘developmental’ terms. Yet, as James et al (1998) point out, children tend to experience their everyday lives in the ‘here and now’, while Steinzor (1967) and Jenny Morris (1998a, 1998b) found that living with a disabled child did not result in a greater understanding of their immediate experiences.

For these reasons, Macfarlane and Laurie (1996) suggest that the key lesson to be learned from the social model of disability is the importance of incorporating *direct experience*, in this case, of children, into research methods and analysis. We hope that this research report will build on what researchers such as Christine Oldman and Bryony Beresford have already achieved, by placing visually impaired children at the centre of an investigation of their experiences of housing and the urban environment.

About the study

The main aim of our study was to identify the social restrictions that visually impaired children found to be disabling, which reflects the principles of the social model of disability. This aim consisted of the following three objectives:

- To describe visually impaired children’s everyday experiences of their home *and urban neighbourhood* environment. This is particularly important in the context of children since:

The ability of young blind children to go in and out of their homes independently and to play outdoors in a safe environment may have a significant impact on their development of skills and self-confidence. (Long, 1995, p 65)

This reflects our concern to avoid the exclusive focus on the utility of the *home environment* that occurs in current housing policy and research, and which reinforces a sharp delineation between the design of the house (which is regulated under Part M of the new building regulations) and the external environment covered by planning laws.

- To identify how the home and neighbourhood environment impacts on the everyday lives of children with visual impairments, for example:
 - exploring how visually impaired children’s experiences of their home and neighbourhood environment impact on their ability to engage in childhood activities with their peers;
 - exploring how visually impaired children’s experiences of their home and neighbourhood environment impact on the nature of their relationship with their parents, in particular by considering the extent to which inappropriate environments generate conflicts, for example, as a result of the parents’ desire to ensure safety in unsafe environments and the child’s desire for independence.
- To identify how visually impaired children think that environmental measures could improve their use of their housing and neighbourhood environment, for example, by considering:
 - how housing design features, such as *light*, *contrast*, and *size* could be incorporated into the lifetime homes concept in order to increase the general utility of the home environment for children with visual impairments;
 - how neighbourhood design features can promote the social inclusion of children with visual impairments into the social childhood activities experienced by their peers.

A key principle of our approach was to talk directly to a sample of 44 boys and girls with visual impairments that were between the ages of 5 and 16. The characteristics and socioeconomic circumstances of the boys and girls are presented in Appendix A.

We conducted at least two interviews with each family. The first interview was undertaken with children *and* their parents and was used to (a) establish a relationship with the children and (b) generate ‘open-ended’ data that could be used as probing material in subsequent interviews. Typically, the parents took the role of lead respondent in the first interview, with children providing supporting material.

Between the first and second interviews, the children were to be asked to keep a diary, outlining their home and neighbourhood environmental experiences during a typical week in their lives. Approximately half of the children produced a diary for us. The diary material and material from the first interview was then used, prior to the second interview, to generate ‘grounded theories’ (Glaser and Strauss, 1967) about the everyday lives of each of the children. In a small number of cases, we were able to conduct a third interview. This was used as an opportunity to ‘complete the picture’ of the children’s everyday lives, and also to test the empirical themes that were emerging from the earlier fieldwork (see Appendix B). A small number of focus groups were also conducted with the children, within their school environment.

In writing the report, we have endeavoured to make maximum use of the qualitative data obtained from the children’s interviews, for reasons of principle that should now be clear. However, we are also mindful that we need to present the issues as clearly as possible – so that the report has maximum impact – and so have followed our key principle with the following three qualifications. First, we have used material from the transcripts that best articulates the issues at stake, which has meant that we have quoted some of the children more than others. Thus, while the views of *all* the children are represented (as a result of the inclusive way we undertook the analysis), sadly, the children that gave us yes/no responses are not as well represented by way of quotation. Second, the nature of some issues has required us, at certain points, to make extensive use of qualitative data

from parent interviews. This is particularly the case in Chapter 5, when we discuss households’ dealings with public agencies, such as social landlords. Finally, we have used quotations from parents – if possible alongside quotations from children, although in one or two places on their own – when this enabled us to present the issue at stake more powerfully than we would have been able to present it by exclusively using quotations from children, for example, containing only yes/no responses.

The children

We have already noted that society tends to view disabled people as victims of a 'personal tragedy', whose 'functional inadequacies' are to be pitied (Oliver, 1990). However, while those who knew the children 'from afar' (for example, teachers) subscribed to this 'personal tragedy' view of visually impaired children, this was not true of the parents and children with visual impairments, who viewed themselves more positively.

Visual impairment as a 'personal tragedy'

Our main interest was in the children's everyday experiences of their housing and neighbourhood environment (for example, 'street life'). However, for reasons that will become apparent later, the parents and children spent most of the interviews talking about 'school life', which they regarded as more important. The parents were concerned that teachers *in mainstream schools* could only see their children's *disability*:

"They were sort of seeing Justin's disabilities more, they were. They weren't seeing him as a normal little boy, they were sort of seeing his problems first, it was things like, special needs, are you with me?" (Justin's mum)

They thought that mainstream schoolteachers had a tendency to 'write off' visually impaired children's academic ability, which led them to neglect their participation in the education process. Thus, many of the children complained of being left at the back of the class, where they felt excluded and were unable to learn and to participate:

"Well, it, it's basically, stuff like, the desks were arranged in a corner, and I was given a separate desk at the back, away from all the other children, you know." (Martin)

Similarly, Peggy complained that her computer studies teacher only provided her with academic assistance when he had "been around the rest of the class":

Peggy: "On the Internet [in class, at school], it's all written in red, most of it so I can't read it, so Mister X has to come over, highlight it, and then put it on a Word document, so then I can read it, and he puts it bigger."

Mum: "So, whereas everyone else goes in, clicks on, off you go. Peggy has to wait."

Peggy: "But I have to wait."

Mum: "Then for them to do that."

Peggy: "And I waited, I, 'cos this [class] is an hour [when there was] fifteen minutes left in the lesson he came over, 'cos he was sorting people out with their computers I'm always last."

The visually impaired children that thought they had been academically 'written off', instead, felt valued for (and judged against) non-academic criteria such as their 'lovely personality': "Mrs Y his headmistress thinks he's a star because he never complains, he never, he never moans or groans or you know he's, he's a trier, and, he's brilliant" (Tim's mum). These children felt that their academic abilities were consequently patronised and that their academic achievements were overlooked; for example, Peggy was praised for being able to write the date, while her 'real' academic achievements were being overlooked:

Mum: "And at school, the teacher for, the special needs teacher, she thinks, she really she gives Peggy commended slips and a certificate for writing the date on the board every day, and I really can't understand what the huge, you know why it's such a big thing to her when you've got, you know Peggy's, she's very intelligent."

Peggy: "Am I?" (Laughter)

Mum: "Yes. But something like writing the date on the board every day, you know it's starting to get to me now. When she achieves, you do find in schools that where Peggy has put the work in and has achieved something that for her is a good achievement, at school it's overlooked. Whereas she can do something like write the ... date on the board every day, it'll be, 'Oh well done Peggy, that's really good'. And yet if she spends an hour, you know really closed in on doing something and producing something for school and it's like, 'Oh right', you know it doesn't get noticed, it's really weird."

Similarly, Andy's teachers praised his personality but denied the extent of his reading ability even though he was a fast reader who could talk at length about the stories he had read:

Andy's dad: "It seems contradictory when we talk about him having a visual impairment. Andy's greatest skill is his reading ability. At the age of seven he had a reading age of ten-and-a-half, and he loves books. On Sunday night he [had been reading and] came down, he said 'That was great'. I said, 'What chapter are you on?' He says 'I've finished'. And the teachers were saying 'Yeah he reads, but he doesn't understand'."

Andy's mum: "What a load of rubbish Chris."

Andy's dad: "I said [to the teacher] 'I'm starting to worry a bit', and he said 'Why?' I says 'Well, if he doesn't understand the book I'll need to find out what in God's name he's laughing at upstairs!'"

Visual impairment as 'nothing out of the ordinary'

With only a few exceptions, the children and parents resisted the notion that visual impairment implied their dysfunction, abnormality or 'having problems'. For example, Frank did not regard himself as "having" his diagnosed disability because his visual impairment did not bother him:

Mum: "Frank was born with Congenital Nystagmus, which was diagnosed when he was eight months old."

Frank: "But I don't have it anymore."

Mum: "It doesn't bother you anymore. Is that what you mean?"

Frank: "Yes, because now I don't have any glasses. I don't need them anymore."

Similarly, most of the parents identified with their children's visual impairments as "nothing out of the ordinary" and unproblematic, which contrasted with parents of children with physical impairments who viewed their children as "totally different":

"Er, well obviously Matthew's, he's totally different you know [with his physical disability], but I mean Peggy's been sort of normal in a way, apart from having to go to Saint Vincent's, you know I used to take her to the normal nursery, just down the road here and er, I mean she coped with it well." (Peggy's mum)

Indeed, one of the main themes to emerge from the transcripts was also the notion that visually impaired children were "brilliant", "intelligent", and "extraordinarily bright" rather than inadequate:

"He's always been that bit ahead of everybody else, the way he talks, his vocabulary, erm, er, you have to remind yourself he is only, he's only little. He's great, yeah, if you've a potential brilliant child, then they should be given every opportunity if not more because of their disability, don't you think? Not held back like which is clearly what the authorities, I think, want, I mean they don't want Tim to do well. You know you have to be in awe of him because erm, you know he's just so, so brilliant, the way he handles everything, the

way he does everything, and the way he learns everything, yeah, and, and so he goes on, he's so hungry for knowledge all of the time." (Tim's mum)

There is clearly a tension between these descriptions of the children as 'normal' and simultaneously 'extraordinary', which can be explained from a closer analysis of the data. During the interviews, in which parents and children were encouraged to 'tell their story', the idea that the children were 'extraordinary' reflected the 'heroic narrative' that was given to us by parents. Thus, the parents highlighted the bravery of children in overcoming the odds to succeed in, for example, coping with the built environment: "He is phenomenal, by the way he conducts himself with, with the severity of his [visual impairment]" (Tim's mum). The children were anything but normal, then, because they were 'heroic'. And, it was the manner in which they 'heroically' coped with their visual impairment that enabled them to *accomplish* their normality. Thus, their normality was regarded as *accomplished* rather than *innate*.

Accomplishing normality

The children were motivated to accomplish a sense of normality for two key reasons. First, many of the children had been trained to be 'normal' by their parents, who thought that their children should adapt to the built environment rather than have the built environment adapted to their needs. For example, Mrs Jackson was training her five-year-old daughter, Sonia, to adapt to her environment so that she used it *in a normal way*, by insisting that she walked rather than 'bumped' her way downstairs:

"I need to get her in the right environment to train her up in the skills she might need to be in a normal situation, so she will be as normal as everyone else, that's the thing really." (Sonia's mum)

Second, some of the children were 'self-motivated' to train themselves to be normal, because they wanted to resist being labelled as visually impaired. For example, Barrymore was highly critical of the manner in which some visually impaired children did not try to conceal their 'spoiled identity':

"I see some kids in our school you can tell straight away he's visually impaired and some of the things they do, you know blind people will do that. You know and I know it looks awful doesn't it? Looks awful and I wouldn't be like that. I mean there's people that will do that and they, you know that kind of stuff." (Barrymore)

To evade his 'spoiled identity', then, Barrymore had 'trained' himself to appear normal, by copying 'normal' people and then 'adjusting' his actions accordingly:

"I just try and act normal. Just hide it, I don't know how I hide it, I just do, I just try and be as normal as possible. I think I've adjusted myself to try and be as normal as possible. Yeah I've looked at people, I've looked at mainstream people and I've seen how they react. 'Cos when I was young I probably wouldn't look at you. I'd have to be told to look at you, I might be, I might, I'd be like this. [Barrymore looks away from the interviewer.] Maybe and I wouldn't look at you 'cos I didn't have the knowledge, I didn't understand. Now I do. I don't like people staring at me. [People looked at me a lot] when I was younger, I had people staring at me. So, yeah I'm conscious, I'm very conscious of my appearance, so that's probably what it is. I'm not too bothered about the clothes but looks and things like that and how I act and I like to be as normal as possible. I like people to treat me normal because if you look funny people will treat you, people will treat you funny if you look funny. That's the, yeah, do you know what I mean? I like to look as normal as possible." (Barrymore)

Summary

The sum of the observations in this chapter constitutes a few points. First, people *in general* appear to view visually impaired children in stereotyped terms, as victims of a 'personal tragedy'. This contrasts with the parents and children with visual impairments themselves. While they viewed physical impairment as 'dysfunctional', they regarded their visual impairments as "nothing out of the ordinary". This was partly because the children had

undergone 'training' so that they could (a) not only use their home and neighbourhood environment but (b) in a way that was normal, for example, by walking rather than bumping downstairs. Thus, when asked to identify problems with the built environment of the home, neighbourhood or school, the children and parents had difficulty identifying any so, instead, tended to mention other non-environmental problems, such as study aids.

Fixed environments

The social model of disability that influenced the conception of our study makes a distinction between impairments, which we all have to greater or lesser degrees, and disability, which results from the social restrictions that are placed on our participation in society. This means that it does not regard social participation as a product of the ability of people with impairments to engage in everyday life because such a view would individualise the problem of non-participation, and thereby justify policies to increase the functional capacities of individuals.

Conversely, the social model shifts our attention away from individuals and their impairments onto the social restrictions that result in their disablement. In doing so, it regards the *ability* of people with impairments to participate in social activity as contingent on their social circumstances, for example, whether the built environment is, or is not, conducive to their participation in a given social activity. In doing so, it portrays disabled people as victims of a social injustice (rather than victims of a personal tragedy, as in the medical model). The task for researchers, then, is to identify these social restrictions so that they can be removed.

However, while the social model is progressive, its exclusive focus on identifying the social restrictions that disabled people face has encouraged researchers to overlook the manner in which impaired individuals develop strategies to enable them to overcome these restrictions. This certainly constitutes an oversight because one of the strongest themes to emerge from our research was the extent to which visually impaired children in our sample were strategically active within – rather than hopeless victims of – the built environment. The purpose of this chapter is to examine how the children developed strategies

to enable them to use the built environment of their home and neighbourhood.

Developing 'memory maps'

The overwhelming theme to come out of our research was that parents and children with visual impairments portrayed themselves as strategically active *within*, rather than *victims of*, the built environment of their home and neighbourhood. They developed their capacity to use the built environment of their home and neighbourhood environment by constructing memory maps of it so that it was “known in my mind” (Steve) rather than through sight:

“You just memorise it really. If you go into a room carefully you won't bang into anything and sometimes someone will tell you. Then you know that's there and you can remember where it is and navigate yourself around it.” (Nigel)

These memory maps were constructed over time as the children became more and more familiar with the environments that they were mapping until, in Mark's words, “the layout [is] in my memory, and it'll always stay there, you know”. Martin's description of the house owned by his aunt and uncle illustrates the amount of detail that was contained in the children's memory maps:

Martin: “Well erm, the way the rooms are set out, I mean you go in erm, and the first thing you come to is the kitchen and erm, you sort of like turn left from the door right, straight in front of you is the living room, you turn left again, you come in, you come into erm, it's like a cloakroom really,

you know, just like a long corridor with hooks on it, you know with hooks on the sides, you know on the walls and that, and there's some stairs to your left and just directly to your right as you go into the cloakroom, so that's basically how I find the, the ground floor different."

Interviewer: "Ah ha, what about upstairs?"

Martin: "Upstairs, as you go upstairs, erm, you've got like two larger bedrooms right in front of you, the, the actually on the right, you know the toilet room, and then as, if you go on, if you turn right and then you go straight on, you come to the bathroom, 'cos they have a toilet and a bathroom separate, and then if you, you know erm, if you go upstairs and you turn left, then you'd then you'd come to a small room if you went straight down, but all along the middle of erm, you know, between all the rooms, there's like a little hallway, I suppose is how I find it different it's easy [to find my way around the house] you know I mean I've been there quite, you know, I've been there, countless times, yeah, I find it easy, it's quite easy to move around and get around."

In constructing their memory maps, the children oriented themselves to the built environment in a number of ways. They did this by using their cognition (for example, counting steps), sense (for example, listening for sounds) and by establishing routines (for example, habitual ways of walking 'particular routes'). The fourth strategy involved transposing their cognitive, sense and habitual orientations towards environments that they had become familiar with, onto unfamiliar environments (for example, by using the memory map of home to make sense of a friend's house). We discuss each of these methods below.

Cognitive orientation

First, the children were able to use their home and neighbourhood environment by developing a 'cognitive orientation' towards it, for example, counting steps, bus stops, learning where pavements stick up and so on:

"I know it in my mind. I don't have any problem with walking around. I just tend to know when I'm walking that there's a bump coming up." (Steve)

Similarly, Jane was able to find her way around her way to her own class by counting 'environmental signifiers', such as the number of classroom doors along the corridor:

"I can kind of see the doors a little bit, and I know the first one's year four, and the next one's year four, then it's my classroom, then it's the next classroom, the next year six classroom." (Jane)

Jane's dad explained how Jane also used this cognitive orientation within her neighbourhood environment, and so was able to travel into the town centre on her own:

"I had no qualms 'cos she, I knew she could do it, when she wanted to do it, so if she wanted to take herself, er, into Wigan er, she's been on the bus into Wigan, hasn't she? The wife put her on the bus, she counts the stops, gets off." (Jane's dad)

Sense orientation

The visually impaired children had also developed a 'sense orientation' to their home and neighbourhood environment. They were able to establish their location and facilitate their mobility within their home and neighbourhood environments by using their sense of touch, for example, by using the bump mats near pedestrian traffic lights:

"If I went to a new place, I drag my feet across the ground to see what it's like, and if I like, if I'm like walking over one I bump into the bump 'cos I would miss the bump going up like that, so I'd bump into it before I got up it." (Peggy)

Connor's mum described her surprise at how he was able to locate himself within his neighbourhood by 'picking up' on sounds:

"As you come into Sutton to Rosehill you come to a bridge and each side it has a wall on each side that goes up and down and as soon as you start getting to the start of this

wall the floor is different, it's not tarmac, it's not a smooth tarmac it's a bumpy tarmac on the road as I'm driving and he knows as soon as the wheels go on to that bumpy tarmac he says 'Welcome to Sutton' because that's what the bridge says – he says 'We're in Sutton, welcome to Sutton'. He knows from the wheels touching that surface that it's a bit different to the surface on the whole of that road, it actually changes and goes not as smooth there – I said to him 'How do you know it's "Welcome to Sutton?"' and he said 'It's because the road's not the same.' (Connor's mum)

Similarly, Mark described how moving to a new college had not presented problems for him because he was able to use 'fixed' sounds within the college environment in order to, first, locate himself and, second, facilitate his mobility within the college environment:

"Everything is like all fixed, so whatever tone is there, or doors, or sounds you know, everything like that. [Sounds] are quite important really. Any sound that's in the room or the corridor, you know? Some of them are fixed sounds anyway, so they're just there all the time, you know. Like the light, really. It makes a sound, you know, like a buzzing sort of noise. So I know where I am if I hear that." (Mark)

Habitual orientation

The cognitive and sense orientations appeared to be used mainly when the children were either learning their home and neighbourhood environment, or because they did not yet know these environments in a 'matter of fact' way. In other words, they were used when children needed to think about what they were doing and where they were going, and therefore when they needed to make explicit use of a 'memory map'.

However, Mark went on to suggest that "once I know the place, then I won't even need the sounds, I mean, all it needs is taking, like, getting used to the layout and once you've done that then you're fine". In other words, when the coordination of individuals' memory maps and their actions becomes effortless, a 'habitual orientation' to the home and neighbourhood environment emerged. This habitual orientation

emerged out of the routines that were initially established as a result of constantly repeating (for example, on an everyday level) cognitive and sensory orientation practices, such as counting steps, listening to sounds. Once such routines were established, such cognitive and sensory orientation practices were dispensed with.

Mark: "There are creaking doors and eventually that will be an important sound, but once I know the place, then I won't even need the sounds, you know."

Interviewer: "So, you're saying that sound is a way of learning about the place?"

Mark: "Yeah."

Interviewer: "And, once you've learned it [the place], you don't need the sounds anymore?"

Mark: "No."

Transferable orientation

The previous three orientations involve a process of developing and using a 'memory map' of *particular* built environments that were integral to the children's lives, such as the home, the street, and the school. Thus, the cognitive and sense orientations constituted an explicit knowledge of these environments, while the habitual orientation constituted a tacit knowledge of these environments. However, the children also *visited* places, such as their friends' houses, on a more irregular basis. One of the ways in which the children described orienting themselves to these less familiar built environments was through the use of a transferable orientation. This required them to use their familiarity with, for example, their own home or school and then transposing this 'memory map' onto the houses or schools that they were visiting. This then enabled them to orient themselves within these unfamiliar environments. Martin provided us with a particularly interesting example of how this 'transferable orientation' was employed, when he described how he *inverted* the principles of his familiarity with his own home when he visited houses on the opposite side of his cul-de-sac:

Martin: "I moved here when I was about two and, we moved here when I was about two, and erm, you know, I've got used to my surroundings, over that time."

Interviewer: “Yeah, how do you find it when you say go across a road to a friend’s house or something?...”

Martin: “Well it’s just like, oh the opposite, opposite way round.... Twisted.... That’s what I call it anyway. It is twisted because everything’s the other way round, ’cos erm, our house right, the both of the houses on either side, are like erm, the opposite way round to ours. So like the house on the corner is like ours, and then the next one’s the opposite way round, and this one’s ours, you know, and then the next one’s the opposite way round, do you get what I mean? It goes round in a pattern.”

Stuart: “The house we had before had a curve in a couple of stairs.”

Stuart (to mum): “Do you remember the first bit of stairs?”

Mum: “Yeah.”

Stuart: “And, erm, everyone else, I mean Danny [brother] used to regularly fall down them. ’Cos it was, you know, those stairs they make, when they come round a curve and you’ve got the narrow bit. And it goes out like that. They weren’t nice stairs.”

Mum: “I think I fell down a couple of times, trying to go down quick. But, Stuart was, once you know he knew they were there, he was the safest one on them I think, you know.”

Similarly:

“The doors were particularly sharp on the edges and when they were small they were hitting their heads on everything and corners were always a problem and we’ve got walls that come in with very sharp corners on them so we’re constantly aware, not just with Nigel but with his sister as well. Nigel seemed to actually do it far less than his sister – he learnt fairly quickly that there were corners there and didn’t hit his head as often, whether it’s because he’s visually impaired or not I don’t know but he didn’t hit his head as often as his sister did.”
(Nigel’s dad)

The extent to which the children were able to use their home environment as effectively as their sighted peers was a clear theme to emerge out of the interview transcripts with parents. Thus, another parent described how she had fitted a light sensor to the outside of their home, so that she could guide her visually impaired child from the car to the front door of the house when it was dark. However, when the light failed to operate, the child guided the parents to the front door of the house in the dark and the parents realised that the need for the light had been for themselves rather than their child:

“I mean we’ve got a lamp fitted on the front now, with a sensor that comes on, mainly for us really because obviously we have to be able to see to guide him but to be honest he’s a lot better at it than us, [laughs] so really I can’t say we’re doing it for him

Built environments as fixed, familiar and predictable

Our research was conceived as a result of a concern that visually impaired children experienced the *built* environment as oppressive. Our assumption was that visually impaired children did not participate in everyday childhood activities *because* the built environment was oppressive. We hoped to be able establish this and, more importantly, to identify *why* and *how* the built environment was oppressive. Our overall aim, then, was to highlight how the built environment could be improved so that visually impaired children could participate in everyday activities, such as play.

However, as we have seen, our research indicates that visually impaired children *were* able to use the built environment of their home and neighbourhood. We have also seen that their ability to use their home and neighbourhood environments reflected their ability to memorise it rather than the ‘good design’ of those environments, which appeared to be incidental (see the quote from Steve in the conclusion to this chapter). Their ‘memory maps’ were developed out of their cognitive, sense and habitual engagements with their home and neighbourhood environments. In some instances, then, parents described how their visually impaired children had had *less* accidents with dangerous objects in the home than their sighted parents and siblings:

because he, he's laughing, he can just, 'cos it's like a grass verge and he can, he feels along the verge and comes to the door straight way. Yeah, we ask him for guidance when it's dark. That's when he shows us, ooh I'm helping you lot now, 'cos the electric went off and I thought oh now Martin, you can guide us can't you, like you know, obviously we could see a little bit but I thought oh you know make him feel good you know, he seemed quite chuffed with himself, knows where everything is, so it's not a major problem." (Martin's mum)

For the visually impaired children, then, the *built* home and neighbourhood environments were considered to be 'non-issue'. For example, even when pushed to answer on improvements to the built environment of his school, Bruce was unable to identify any adjustments that would have improved it for him and, instead, became frustrated with the line of questioning:

Interviewer: "Is there anything in the school, say, just thinking about the classrooms first of all. Anything in the classroom that you would want to change?"

Bruce: "No."

Mum: "Bruce. Change the classroom so it's best for you. What would you do if you could change the classroom?"

Bruce: "Mum, stop distracting me, ok. I don't know."

When probed several times about problems in the home and neighbourhood, then, most of the visually impaired children tended to answer our questions in the way Rionach does below:

Interviewer: "Is there anything in the house that you don't like? You like the bedroom don't you?"

Rionach: "Yeah."

Interviewer: "Is there anything that you don't like?"

Rionach: "No."

Thus, when asked to describe their favourite room and their 'perfect room', the visually impaired children talked in generic terms, for example, about the importance of having a television, rather than design issues, as we had originally anticipated:

"Well I suppose my, my [bed]room is like my favourite room really, 'cos it's got all my things in it you know, I mean there are some of my things down here as well but that's got my most, most of my things in it, and I can, and I can actually do, you know stuff up there, you know like copying tapes and that. How would I kind of see a perfect room? I'd see one you know with like erm, you know stuff like a wardrobe and a desk and things like that really, that's how I'd see it." (Martin)

As a consequence and, again, contrary to our original expectations, the children's visual impairments did not have any bearing on the housing choices that their parents made. Thus, we did not identify any instances in which parents moved house *because* their existing accommodation was unsuitable for children with visual impairments. In so far as children's visual impairments informed house moves, this only occurred 'by chance'. For example, the Thompsons moved house for employment reasons, but saw this as an opportunity that they otherwise would not have had (or sought) to move to a bungalow:

"We moved house because of my husband's job, but we moved into a bungalow because of Phil. Because he fell down the stairs when he was little, and daddy said, 'Right, that's it, you're not going in a house, we're not having a house with stairs, we'll have a bungalow'." (Phil's mum)

Similarly, the Mitchell's main criteria for deciding on the suitability of their new home was related to the size of 'mum's garden':

Mum: "[We moved to this house] to get the big garden."

Peggy: "She's a garden person. (Laughter) Can you tell by her muddy hands now?"

There were very few instances in which parents had made any (or even minor) adjustments to their property, in order to take account of their children's visual impairment. Interestingly, these parents thought that adjustments to the home were only necessary for children with physical impairments and for children who were wheelchair users:

“Because he’s not in a wheelchair so we don’t need to do [any adjustments to the house or] make ramps. What we, what we, the steps out of the house are manageable for him. Yeah. So as far as structural’s concerned, no because, because the balance between Helsby and trying to progress as he gets older and more capable of getting around [means] we don’t have structural changes to the house as such. But what we do, is we always make sure that the place is, that the floors are clear, you know there’s nothing lying around the stairs or on the landing. There’s no shoes because if you put a pair of shoes, you open that door and you put a pair of shoes there, right there now I can guarantee he’ll walk in among one of them shoes and fall because he finds it difficult to lift his feet. His feet when he walks, he just sort of walks, he hovers just above the ground and that’s why he stumbles.” (Helsby’s mum)

A handful of parents did mention that they had made adjustments to their homes, on behalf of their visually impaired children. For example, two families had erected garden fences to ensure that their children did not wander “out of the garden and into danger”. However, the fact that they only mentioned these adjustments after significant probing had taken place was indicative of the manner in which they viewed the built environment of the home and neighbourhood as non-problematic. It was revealing, then, that one parent had made adjustments to her son’s bedroom to stimulate the development of his sight rather than to facilitate his use of that part of the house:

“[We] put silver metallic strips up his cot, and some in his cot, and erm, we er, we put, do you know those chaser lights? Those light what chase. We put all them round his cot and we bought pens with lights on, ultra violets that project things, and make them move round his room, and he used to watch them go round. It took a lot, it took a lot of work and Vision Aid said to us if you use that remaining vision he’s got, which is only a very small bit, it’ll bring it out and it could stop him from losing it, ’cos if you’ve got a leg and you don’t use it, it just goes into nothing doesn’t it?” (Paul’s mum)

Summary

This chapter has shown that the visually impaired children in our sample were highly skilled at constructing ‘memory maps’ (as a result of their cognitive, sensory and habitual experiences) of their home and neighbourhood environment, which enabled them to use it independently. It follows that, generally speaking, the parents and visually impaired children did *not* consider the built environment of the home and neighbourhood to be problematic or oppressive. Indeed, the best illustration of our finding that the built environment of the home and neighbourhood was seen as unproblematic could be found in the children and parents’ attitudes towards our research questions, which did not make perfect sense to them:

Tim’s mum: “But I don’t know what you’re trying to establish here, whether we haven’t really dealt with any hardship, I don’t really know what it is you want to find out.”

Interviewer: “Well thank you very much, it’s [been very helpful].”

Tim’s mum: “Has it?”

Interviewer: “Yeah, yeah really, very helpful, absolutely, very helpful.”

This sense of bemusement was certainly reflected in children such as Bruce, who became frustrated at our questions because they seemed, to him, to be ‘off the mark’ (see earlier in this chapter). For Steve, then, the ‘good design’ of his home and neighbourhood environment was constituted in his knowledge of it rather than the quality of the design principles that had been applied to it.

Interviewer: “Do you find that there are any difficulties with the design?”

Steve: “It’s good.”

Interviewer: “Is that because you know it so well now?”

Steve: “Yes.”

The children that commented on our research objectives valued their participation in our project because it was enabling them to speak for themselves rather than because they thought it would lead to policies that would improve the built environment. Thus, Mark valued the research because it meant that adults would see that visually impaired children were “perfectly

capable of leading their own lives independently” and therefore did not need to be wrapped in cotton wool:

Interviewer: “What have you felt about being involved in the research I’m doing?”

Mark: “Yeah, I actually feel it’s gonna be good, because at least we don’t have to be wrapped up in cotton wool after your research has been done, you know, we’ll be allowed to basically do whatever we want, as long as we, you know, as long as we don’t break the law, we should be able to do whatever we want, when we want, and how we want, you know.”

4

Mobile environments

So far, we have established that parents and children with visual impairments did not consider the *built* environment of the home and neighbourhood to be a problem. This was mainly because the visually impaired children were able to construct and maintain a memory map based on 'fixed' points (for example, sounds, textures, objects and so on) in the built environment. These maps provided the visually impaired children with 'predictive confidence', that is, a sense of certainty about their knowledge of the built environment of their home and neighbourhood so that they could use it effectively. Thus, "I personally think mobility issues are child confidence" (Paul's mum). However, the built environment of the home and neighbourhood – with its fixed points – constitutes only *one* aspect of the urban environment and, for the parents and children with visual impairments, a fairly insignificant aspect of it. The parents and visually impaired children also characterised their home and neighbourhood environments as 'littered' with mobile objects, unpredictable movement and an intensity of movement. Herein lay their problems with the home and urban environment. This chapter analyses the nature of this problem of movement, from the children's and parents' perspectives, and examines their different approaches to dealing with problems of movement.

The problem of movement

The visually impaired children considered the level and intensity of movement in the urban environment to be their main problem. This was because it resulted in 'unanticipated encounters', which undermined the 'predictive confidence' that

they were able to derive from their memory maps. However, the problem of levels and intensity of movement in the home and neighbourhood was multi-dimensional. First, the parents and children talked at length about the problems of 'constant movement', that is, movement occurring 'there and then' as people went about their everyday business, for example, cars, people, shopping trolleys.

Interviewer: "Oh, yeah, Bognor's nice isn't it? When you're walking around, any kind of problems you come up against when you're walking round in the town?"

Phil: "Crowds of people."

Interviewer: "Why are there crowds of people?"

Phil: "I dunno. 'Cos Saturday we go, and so there's lots and lots of people. If it's busy, it's a problem."

The problem of 'constant movement' was always talked about in the context of the neighbourhood environment where the level and intensity of movement (for example, from people, cars and so on) undermined the children's ability to 'manoeuvre' themselves as effectively as they were able to within the 'fixed' built environment:

"Well, you know they, they're good. You know I would walk like up, up and down them, I've never been actually able to walk all the way round our street unless a car, you know in case a car comes right out. You know crashes into me or something."
(Martin)

Second, the children and parents talked at length about problems caused by the 'intermittent movement', that is, 'now and then' movements that led to unpredictable changes to the home

and neighbourhood environment as objects were moved around, so that they were ‘there today, gone tomorrow’, and vice versa. Intermittent movements occurred, first, as a result of everyday human activity, such as cars being parked when adults returned home from work:

- Jane: “People park their cars [on the pavement].”
 Interviewer: “Yeah, do you think, you’ve changed me you know because erm, last time I parked my car half on the kerb, half on the road, and I thought I was being good letting other cars through and you said that you didn’t like that and so I’ve never done it since.”

It also occurred when households moved their wheelie bins onto the street so that their refuse would be collected, or when they were moved within the school playground:

“The bins are a bit of a problem because people keep moving them so when I run into the playground everyone shouts ‘Look out’ and I just run into a huge blue bin – they used to be in all four corners but now someone’s moved one from over there, one from over there and one from over there and one from there, so [they] all are in one big huddle.” (Nigel)

Elements of the ‘natural’ environment (such as overgrown hedges and dog excrement) were also mentioned as problems because they were not being subjected to appropriate levels of human control:

“There are twigs, big twigs that I don’t look out for [using my memory map]. I trip on them and fall back down. Fall down.” (Gerard)

However, while intermittent movement was particularly prevalent in the neighbourhood environment, it was also evident in the home environment as well (for example, furniture being moved around the home, doors being left open). For example, Janine described how she regularly had accidents in her father’s house because the doors leading into the various rooms opened outwards (as opposed to inwards, as in her own home) and were often left open:

“I mean you come out of the back room and if I’m not awake I bump into the front room door because it’s like [opens] outwards and you have to like come away from it a bit so you can get to go upstairs, do you know what I mean, so if I’m not awake it’s like ooh ouch, oh yes that’s there.” (Janine)

Parents and the problem of movement

The level and intensity of movement in the home and neighbourhood environment was an issue for both parents and children. However, the strategies that the parents and children used to cope with this movement differed. On the one hand, parents were able to combat the problem of movement within the home by limiting the movement of furniture, while some parents talked about how they had developed a regular routine of tidying-up:

- Sarah’s dad: “We’ve got to tell the kids [that] we keep everything flat really, we’ve got to tell the kids not to leave their toys laying on the floor, [so] they won’t!”
 Sarah’s mum: “Well I try to keep the furniture in the same place.”
 Sarah’s dad: “Yeah.”
 Sarah’s mum: “I’ll always use the table and move out and I try to put it back in the morning before Sarah comes in.”
 Sarah’s dad: “Yeah major landmarks.”
 Sarah’s mum: “She can work her way around the room umm I mean if there’s things on the floor then it’s tough, but with having young kids.”
 Sarah’s dad: “She stumbles over them [things on the floor].”

Thus, in so far as parents made adjustments to their home environment, this simply involved minimising changes to the layout of furniture, and making changes to their behaviour (for example, by developing a regular routine of tidying-up). However, while this gave their children a sense of predictive confidence within their home environment, parents described how their children suffered from stress and anxiety *during their momentary encounters with movement* in their neighbourhood environment:

Roy's mum: "See if you were to take him to somewhere strange, the town centre, now you would see his eyes go more wobbly."

Roy's dad: "Yeah and the anxiety is there and his null point and his mouth opens. That's the most obvious sign that and everything happens because he's just coordinating things, new location everything because everything else is forgotten."

Since parents were less able to control movement within the neighbourhood environment, they could only allow their children to use it under supervision, at certain 'clock times', and on certain days when movement was minimal. Thus, they allowed their children to make *limited* use of their neighbourhood environment under supervision, when other adults had abandoned their neighbourhood in order to attend their place of work during the daytime: "Mummy watches out of the door ... [while I go] next door" (Gerard). This was because the dangers associated with adults (for example, moving cars, parked cars and so on) were then largely absent threats. However, when adults returned home from work during the evening and weekend, parents felt that neighbourhoods became dangerous places again and therefore tended again to enforce their restrictions on the children's movements:

"People bring vans home. There are two vans down this road every night, and weekends, we've got cars parked all the way down. Cars drive too fast bearing in mind they shouldn't have children who are three and four out on their own unsupervised, I agree with that." (Paul's mum)

The extent to which parents *reluctantly* placed restrictions on their children's freedom of movement within their neighbourhood environment was one of the strongest themes to emerge from the data:

"It's what's stopping me from letting her go up there. She said 'I'm going to be nine next year, in two years' time you'll have to let me go on me own'. It's that going on her own, that I'm afraid of, I think if I did send her somewhere, I think I'd be walking behind her and not because she'll be

looking round to see if I'm there [laughing], but that's going to be me big milestone, to let her out on her own. She's got no road sense at all, she walks and she looks and she looks again, and she's not going across the road cold, but I don't think that if it happens. Like she said to me the other day, 'Can I go across to the shop?' No, I can't think, 'Can I go somewhere?' she said, and I said to her, 'I daren't let you out Laura, sorry, I know it's frustrating for you, but it's frustrating for me', I said, 'there's a road to cross, you don't know road sense'. 'I know me green cross code', she said. I said, 'That's all right, but if a car comes'. I said 'So many speeding cars come now' I said, 'you've got no chance'." (Laura's mum)

These restrictions impacted on parent-child relationships, which at times became fraught. However, the restrictions led to a series of other impacts on the everyday lives of the children. First, another of the strongest themes to emerge from the data was the extent to which the children's 'spare time' activities were home-based (and thus out of 'harm's way'). Thus, several of the children described reading a large number of books each week and how this differentiated them from their sighted friends:

Interviewer: "How, how many books do you read say in, in the summer holidays?"

Jane: "Loads. As many as I can really, yeah, I suppose, if I really tried hard I could read about six a week."

Interviewer: "Six books a week!"

Jane: "Yeah, if I really tried, I could read one every night."

Interviewer: "Wow, wow, do any of your friends read that much?"

Jane: "No."

The 'spare time' of other children was described as being taken up with organised activities that were undertaken in supervised environments, such as girl guides and boy scouts. For example, Laura's mum described how her daughter had an activity for every day of the week:

"She's got Brownies on a Monday, sewing on a Tuesday, craft work on a Wednesday, she should have swimming on Thursday, but that's gone ... that's gone at the moment because if she's having coaching lessons on a Thursday. I don't know whether I'm

coming or going half of the time.” (Laura’s mum)

Second, restrictions on the children’s freedom of movement within their neighbourhood environment resulted in their social networks being dominated by adults. (This also occurred because some of the children attended ‘special needs’ schools that were located some distance away from their homes and which catered for a wide catchment area. Their school friends therefore lived around the region, rather than locally.) The high adult density of Barrymore’s social networks stimulated his desire to get involved in organised activities where he could meet other children of the same age:

“I was very isolated. I hung round with my parents all the time. They did things with me. Play games and do stuff like that, you know, I had no one to play with. And my friends in school, that’s the problem with our school you see, I’m lucky having a girlfriend from our school now, who lives in Woodgrove. I can get the bus up there. I can go up, you know but with having a girlfriend. It’s like I’m 16 now, I’m into girls. I could have a long, I couldn’t have a relationship with a girl in our school who lived in Yorkshire.” (Barrymore)

While the children valued their relationships with adults, and the extent to which their parents had (for example, financially) supported them to participate in organised activities, they all wanted to escape the *extent* of these restrictions, which resulted in their *reliance* on organised activities.

- Mum: “What’s the one you used to go to? Fair Play?”
- Les (to interviewer): “It was stupid. They made me.”
- Mum: “It was Fair Play, but now they’ve grown out of it, you know, that’s for younger children.”
- Les: “I’ve always hated it. They kept making me [go].”

One of the more remarkable strategies that children used to escape parental restrictions was to ‘fake sight’:

“This symptom of the eye sight wasn’t something that was apparent to us although I’m sure that some period of time

beforehand Rionach was experiencing difficulty with her eyesight and erm, you know she’d not said anything, she, she’d sort of, she’d managed to sort of cope with it, from day to day, I think erm, looking back at it there were one or two events like the piano practice where she was, she was really distraught at one stage, just like a week or two beforehand, it then transpired later on, she just couldn’t see the notes on the page, and she was playing the tune from memory.” (Rionach’s mum)

This apparent strategy of ‘faking sight’ constituted a response to the priority that parents gave to sight over the children’s other (for example, cognitive, sense, habitual) ways of knowing their home and neighbourhood environment, hence the parents’ restrictions on their freedom of movement. It therefore illustrates how the parents and children formulated different responses to deal with the problem of movement in the home and neighbourhood environment.

Children and the problem of movement

Parents *and* children regarded the level and intensity of movement in the home and neighbourhood environment to be problematic. However, there were key differences between the parents and children in the way the nature of the problem of movement was, first, defined and, second, overcome. While the parents described the ‘fixed’ built environment as unproblematic for their children, the problem of movement was thought to result from their children’s sight limitations. Thus, parents portrayed their children bumping into mobile objects, such as shopping trolleys, because they were unable to anticipate them. Since the problem of movement was a consequence of their children’s sight limitations, parents’ responses to the problem of movement were based on a ‘strategy of withdrawal’ from the neighbourhood environment, as we saw above. In contrast, the children regarded the problem of movement as one caused by ‘social’ factors rather than their own ‘limitations’. Thus, visually impaired children considered sighted people to be responsible for bumping into them, rather than the other way around:

- Tommy: "They always do it on purpose."
 Les: "They do."
 Tommy: "Yeah."
 Les: "Yeah, they bump into us, it's on purpose, with their trolley. Yeah, they think it's funny."
 Tommy: "Yeah I say 'get stuffed'."

For these children, the problem was not simply one of movement, then, but ignorance. For example, several of the children described members of the public as ignorant because they thought the children were "too young to have visual impairment" or, at best, did not understand what their white cane represented. Either way, they did not take account of the needs of the children as they tried to negotiate their way around problems of movement, for example, when crossing roads.

- Mum: "One of the things I have found is a lot of drivers will drive past, they'll look at Phil with the cane, holding the cane out, and they'll have this, this look on their faces, as if to say 'What, a child?' Yeah? It's almost as if they think that, you know, a white cane belongs to an old person."
 Phil: "They don't always, no. They don't stop for children."

Cheryl mentioned the prevalence of the same situation in her experience, but diagnosed the problem of drivers failing to stop as due to their excessive levels of speed rather than their ignorance of what the white cane denoted:

"Yes, I mean you can hold out a little signal cane but they're going too fast to see you anyway." (Cheryl)

This raises an important point that was reflected across the interviews with children. The children did not regard the problem of movement as insurmountable. Rather, they experienced the speed and intensity of movement as a barrier that they found intimidating and difficult to overcome:

"I can only see when they're coming [if they are going slow but] because often they speed around the corner, you can't see if you can cross or not." (Cheryl)

Nevertheless, children (particularly the older teenagers) did not withdraw from the dangers of

the urban environment. Conversely, they described the creative strategies that they routinely used to overcome problems caused by the speed and intensity of movement. For example, Anthony described how he rejected offers of help to cross busy roads, preferring instead to take time to negotiate the obstacle independently:

- Anthony: "Yes and [people] ask me if I want any help, sometimes that's happened. Usually I just say 'No, I'm ok thank you' because I can manage most of the time but I don't mind."
 Mum: "I suppose it looks as if it's taking a very long time – there's one particular road that Anthony crosses going into town which he's been trained to go over, it's about two or three car lines across the road and then he has to wait because he's relying on his ears rather than vision to cross the road and you have to be patient. Anthony's very good, he will wait five or six minutes until the road is clear and I suppose anybody else walking past can't help but get involved really but as Anthony's told you, he's not supposed to accept help unless he's desperate."

Thus the children regarded the speed and intensity of movement as something to be overcome, rather than as something that should restrict their activities. In so far as the children did use their white canes, they did so to overcome the problem of movement and, furthermore, regarded it as 'fun'. For example, Jane and Peggy described how large and intense crowds of people provided an opportunity for them to have some fun by 'whacking' people on the ankles with their canes, rather than a problem that they should withdraw from:

- Jane: "We went to Wigan in the arcades and when it was busy. It was really funny 'cos I knew there was this group of people ahead of me and I was thinking of going round them but I just walked right through them, instead."
 Interviewer: "Did they, did they get out the way?"
 Jane: "They tried to, yeah. It was funny."

Similarly:

“If someone comes near me and tries to mug me, I go whack [with my cane].
(laughs) (Peggy)

Essentially, then, children used strategies such as ‘taking time’, and instruments such as their white canes, to re-establish their sense of predictive confidence in neighbourhood environments that they described as “messy” because of high and intense levels of ‘constant movement’. Indeed, the older children often described how they began to expand their horizons into unknown urban territory when they became teenagers, rather than how they were withdrawing from the “messy” urban environment because of the dangers it presented.

“I’ve only been actually going round places on my own in the past year really, but it was still really big, I mean I can just about get round Liverpool with friends and that’s big enough.” (Janine)

This often involved a strategy of ‘wandering’ into the unknown:

Mum: “Neil who comes up on a Friday night and another boy called David comes up most weeks and they go up, for a walk.”
Charlie: “We just set off and see where we end up.”

This interest in exploration was often driven by the children’s frustration at the way in which parental restrictions had been placed on them when they were younger and, to this end, reflects the resourceful and strategic way in which teenage children began to think about how to enrich their everyday lives *independently* from adult supervision:

“In the summer holidays I’ve really had enough, because having to get my mum and dad to take me places and I’ve done mobility lessons from lots of different places but never had the confidence to go on my own. And I haven’t done them in ages so I think I went out for a walk one day and I was just looking at the bus stops and everything. Oh I know I was, I’d pushed, ’cos I got a girlfriend, I was getting sick of getting dropped off all the time by my mum

and dad and sometimes I couldn’t go ’cos they couldn’t take me. So I’d been pushed and looking at bus routes sort of how can I get there. So for a start I wanted to go to Huyton village one day, came home after this walk and went to me dad, and says ‘I don’t care. If I get lost I’ve got my mobile phone, you can come and pick us up’. If I don’t do it now, I’m never going to do it. I just said I’ve had enough, so I went in the house, got my coat on, got my trainers on, got my bus pass and everything, my mobile phone and all that and I went to Huyton. I didn’t even know, I didn’t even know how to get back.” (Barrymore)

Thus, Barrymore and some of the other teenage children did not regard getting lost in unfamiliar urban territory as a ‘drama’. Indeed, instead of regarding unknown urban territory as problematic, Barrymore thought that it was “good to have to struggle” because this encouraged him to reflect on, and refine, the strategies that he used to negotiate his way through environments in which he lacked ‘predictive confidence’.

Summary

This chapter highlighted the problem of movement in the home and neighbourhood environment. It distinguished between ‘intermittent movement’ and ‘constant movement’. Intermittent movement was less of a problem for a number of reasons. First, the level and intensity of this type of movement within the home (for example, toys strewn across the floor) could be minimised by regular ‘tidy-ups’. The level and intensity of this type of movement in the neighbourhood environment was more of a problem because, while some forms of intermittent movement (for example, wheelie bins) could be anticipated by *unnecessarily* having to use a white stick, others (for example, dog excrement) could not.

The problematic issue of ‘constant movement’ threw up some interesting differences in the ways in which parents and children sought to overcome it. For parents, the problem of constant movement (for example, cars, crowds of people and so on) was ‘too big’ for their children to overcome. They therefore formulated ‘withdrawal strategies’ to protect their children from it. This

involved placing restrictions on their freedom to use the neighbourhood environment, and resulted in a wide take-up of home-based and organised activities. Conversely, the children regarded constant movement as a challenge to be overcome by engaging with it rather than avoiding it. In doing so, they demonstrated the creative ways in which they overcome problems in their home and neighbourhood environment.

Changing the home and urban environment

Chapters 3 and 4 demonstrated how built and urban environments were experienced as largely (though not wholly) unproblematic by children with visual impairments. In this chapter, we show that while most parents and visually impaired children experienced the built environment as unproblematic, and while most visually impaired children (although not parents) experienced their urban environment as unproblematic, a minority of parents and children experienced both of these environments as problematic. The commonality between these children and parents was the poor quality of their neighbourhood environment (for example, caused by the usage and disposal of drugs equipment in public areas).

In the open-ended interviews, respondents living in poor quality neighbourhoods concentrated on the adjustments that they had made, or wished to make, to their home and neighbourhood environment. We use the term *adjustment in housing circumstances* as opposed to *dwelling adaptation* because the latter well-used term is taken to denote changes to the physical environment of the *existing* home, through the provision of aids and adaptations. It therefore narrowly reflects the experiences of people with physical impairments. In contrast, the term *adjustment in housing circumstances* can encapsulate moves to another dwelling (for example, in order to escape a poor social environment or to obtain more space) as well as efforts to change one's behaviour (for example, by developing a regular routine of tidying up). Since these were issues that particularly affected children with visual impairments, the term *adjustment in housing circumstances* better reflects their experiences of – and action for – social change.

The politics of the built and neighbourhood environment

In previous chapters we have referred to the manner in which many of the children developed strategies to overcome obstacles in built and urban environments, which did not, therefore, constrain them. However, not all visually impaired children were able to exercise the same level of control over their built and urban environments. This was because some children lived in much poorer quality neighbourhood environments than others, and this created a barrier to their capacity to 'branch out'. For example, one parent talked extensively about how the poor physical and social environment of the estate where she previously lived had acted as a constraint on Sharon's ability to use her environment:

Sharon's mum: "She used to get called blind, deaf, she used to get her glasses took off her, where we lived before, they were absolutely horrible, they'd pinch her roller blades off her, you know they really did, they were nasty people. It was, that's why I moved out. Because of five years of deterioration, I just didn't want the children, there was drugs there which there's drugs everywhere, there was car theft, there was children smoking the drugs and they were dealing it outside your door, there were house robberies the, it just wasn't an environment to bring them up in."

Interviewer: "Right, was there anywhere for Sharon to play?"

Mum: "Just outside the front door."

Interviewer: "Did she, did she play a lot?"
 Mum: "No."
 Interviewer: "Why not?"
 Mum: "Because they were horrible to her, they made her feel different."

This was later reflected, as a key issue, in an interview with Sharon. While Sharon described leading an active life in her new neighbourhood environment (for example, riding her bike in the street, going to the park with her friends, and so on) because it was "nice and quiet", she described herself as leading a much more restrictive existence in her previous neighbourhood which she described as "rough":

Sharon: "I didn't go to the park [when I lived in the last house]."
 Interviewer: "Yeah, what was in the, the park where you used to live? What was it like?"
 Sharon: "Loads of people."
 Interviewer: "What were they doing like?"
 Sharon: "Prostitutes and [laughs]. Very naughty people."
 Interviewer: "Oh right, so we're talking extremely naughty."
 Sharon: "Naughty people, yeah. That's what I said, they were very naughty people about there, so you were very limited where you could and couldn't go. You could be walking through the park and you could be asked, that's how bad it was. [You were asked] did you need, did you want any business?"

There are two issues to note here. First, the environmental issues that concerned parents and visually impaired children living in poor quality neighbourhoods were generic rather than specific to visual impairment (that is, generally poor living conditions). Second, social researchers, such as Simon Charlesworth (2001), have argued that early social experiences, such as this, result in a way of seeing, thinking about and engaging with the social world. In other words, the extent to which children feel able to 'branch out' generally depends on the extent to which their early experiences of their social environment (for example, bullies) constrain their ability to use it.

In cases such as Sharon's, then, the parents and visually impaired children developed a *general* attitude towards the built and urban environment

that was politicised rather than individualised. This meant that they identified problems with 'the environment' as the source of their social restrictions. They did not, so much, develop strategies to manoeuvre themselves *within* their built and urban environment (that is, in order to use it) as *against* it (that is, in order to change it). Whereas most households had not felt it necessary to move house in order to accommodate their children's visual impairments, a recurring theme in the interviews with those living in poor quality social environments was the numerous attempts they had made to move to a more suitable neighbourhood environment. In doing so, they encountered a variety of difficulties. For families that are homeowners, this involves taking steps to find another dwelling in the private housing market, for example, through an estate agency. However, since homeowners often face difficulties selling property in poor quality neighbourhoods, moving is not always a choice that is available to them. For families that are renting from a private landlord, the option of moving could be pursued through a letting agency or the local newspaper. However, families trying to move dwelling in a better neighbourhood tend to find that property in the private rented sector, in their price range, is generally of poor quality. Nevertheless, many of the families that lived in poor neighbourhoods, in our study, rented their home from a social landlord, such as a local authority or a housing association. For these families, manoeuvring *against* the built and urban environment necessitated working through social landlords in order to secure a 'transfer' to a better neighbourhood. However, many of these families reported receiving unfavourable responses from social landlords. We will discuss the types of responses that they reported receiving from social landlords below, and address the policy and practice implications of them in Chapter 6.

Response 1: "You're swinging the lead"

When Sharon's mum tried to use her social landlords' 'transfer system' in order to tackle a generic problem (that is, poor living conditions) but for 'special' reasons (that is, visual impairment), she said that her social landlord told her she was "swinging the lead" and therefore chose not to respond (at least initially) to her request for rehousing:

Interviewer: “Was Sharon the reason then that you asked Weatherfield Council for a transfer?”

Mum: “Yes, yes I did. And erm, but it, they do get quite stroppy with you when you start you know, to them you’re being petty and it’s not a reason for you [to need to move] house, now it’s all wrong because they don’t have a child with a visual impairment, to deal with, so they think that you’re swinging the lead, you just want a proper house and, you want everything your own way, and that’s how you feel, you feel a nuisance, in a nutshell, that’s how they treat you, what right have you got to ask, there’s people in more need of a house than me, I’m living in a three bedroom house, I don’t need it, to be moved, and that’s how they look at you.”

Response 2: “Being offered the rubbish”

The several families that had applied to their social landlord for a housing transfer said that they had received several inappropriate offers of accommodation before being transferred to a suitable home and neighbourhood environment. For example, Sharon’s mum said that she had been offered “the rubbish” as well as houses on main roads before being moved to her current home, which was a good quality dwelling in a quiet cul-de-sac:

“I got [offered] the rubbish ones first. I got offered two houses before this one, erm, the first one was a smaller house than this, which was no good because and it was on a main road. I told them, I just told them, you know what kind of house we wanted, I told them I didn’t want to be slap bang on to a main road because of Sharon’s difficulties, because you’ve also got to think well a main road, and if she goes out she’s straight on to the road, I didn’t want that. The council do offer you the rubbish before they offer you a good one, and it is one of the council’s and that’s what I got, so, one was in the middle of the estate which I didn’t ask for, and one was on the main road which I said no to,

and then I got one situated right, ideal.”
(Sharon’s mum)

Similarly, Steve’s father and mother described how they felt their transfer request had been responded to with a similar offer of poor quality housing, although, on this occasion, because the housing needs of his family were ‘racially stereotyped’. His social landlord therefore offered to rehouse his family in the ‘Asian area’, which consisted of poor quality housing:

Steve’s dad: “They just expect you to take the first offer they give you and that’s it. It was a bottom flat but there was a kitchen downstairs and a bedroom upstairs but the area was very bad. Upstairs, a smuggler lived there, druggies lived there – all around us and cars were burnt, the police were there. We know some people who lived there.”

Mum: “There’s no way you could let your children out to play.”

Interviewer: “And they actually said one of the reasons why they were offering it to you was because other people from Pakistan or other Asian people were there?”

Dad: “They said that your community live there. Yes and I told them I want to get away from them.”

Nevertheless, in cases where social landlords had been reported as thinking of families asking for transfers as ‘swinging the lead’, and had been alleged to have offered poor quality accommodation, there was usually a happy ending to the story. The parents and children were *eventually* rehoused within a better quality home and neighbourhood environment, although, in some cases, they said that this occurred because they had “put up a fight” rather than because the social landlord had had a change of heart. Nevertheless, when households with visually impaired children were eventually offered ‘better quality’ housing, parents recalled that the properties they were offered reflected the way they felt housing officers defined their children, in stereotyped terms, as *needing* ‘barrier-free housing’.

Response 3: "Being stereotyped"

In the mid-1990s, many social landlords began to keep a 'register of adapted properties'. This was to enable them to identify suitable property for housing applicants with physical impairments. It now appears that this policy, which was originally formulated with the best of intentions, is encouraging housing officers to stereotype the housing needs of families with visual impairments. Thus, in cases where social landlords had thought of families' requests for a transfer on the grounds of disability as legitimate, they formulated what *they* regarded as an appropriate response. However, this response was often based on a 'disability stereotype'. Thus, several families described how their housing needs had been stereotyped as requiring 'disabled housing' simply because they had a child with a visual impairment:

"They kept saying, 'We would rather put you down as to be rehoused to a suitable house – a house that's already adapted'. So they put me in this one, and here's me, I was told that there was a toilet downstairs, but according to the lady next-door, she said these two houses are the only ones with no toilet downstairs – every other house has got a toilet downstairs. Now that is crucial for me. Um, because I'm on tablets also that I have to be going up and downstairs for the toilet. Doesn't bother Mark. Um, but I can tell you what's suitable for me and what's suitable for Mark." (Mark's mum)

Similarly, when Sharon's mum requested that adjustments be made to the distance between the toilet and the bathroom sink (because Sharon kept bumping her head on the sink when standing up from the toilet), she said her request was rejected because she did not want a ramp – the stereotyped need of 'disabled people' – which her social landlord would have installed:

"They won't do anything [if you've got visual impairment needs]. I don't know, I personally don't know how you go about getting anything done. Oh they'd get one put on. You'd get an intercom put on but not for, 'cos I explained to the surveyor who come round about the problem with the toilet with Sharon's impairment and he said no, not interested. [They'll give you] wheelchair ramps, they build you a ramp,

put your, the rails on your door and put your intercom on. But not for [visual impairment], because I think their attitude is they can walk." (Sharon's mum)

Nevertheless, parents felt that housing officers did not only stereotype visually impaired children as needing 'disabled housing'. They also claimed that other stereotypes strongly permeated social housing practice as well. Most notably, they felt that social landlords tended to think of disabled people as *single-person adult households*, which undermined their ability to think in terms of multi-person, multiple disability households consisting of adults and children with different impairments. Thus, Mark's mum refers to her child as having housing needs as well as herself. Yet, she claimed that her social landlord could only accommodate *one physically* impaired person within their thinking, and not two people with different impairments:

"It's housing. The thing that bugs me about housing, um, there's nobody to really understand you. They just [can't deal with you] if you've two disabilities in one family." (Mark's mum)

This second form of stereotyping – of disabled people as single-person adult households – had significant implications for the lives of visually impaired children and their families when it was followed through in both housing management and housing development practice.

Stereotyping in housing management

Where households consisted of two individuals with impairments, parents claimed that social landlords would prioritise one of the individual's housing needs over the other. They said that the individual that would receive priority tended to be the adult rather than the child:

"They kept on pushing me to property that would be suitable for me and I said, 'You're helping me. You're not helping my son'. So it would be helping us both then – not just one of us. They just turned round and said, 'We are here for you – not for your blind son. He will be able to' I don't know what was the word they used, but 'he will be able to find his way' and I said, 'that's not the point!'. It all started about one-and-a-half

years ago. I'd left a good property – had a toilet down the stairs, it was fine for me except they said they would rehouse me because I needed a stair-lift. So they rehoused me to this property. It's even worse for Mark – the stairs and so on. They're too narrow [for him]. When they're built like this they need space, they need places to move around. They should have something where they have one building where you can approach if you've two or more disabilities in one family rather than having somebody coming out from the medical team, from the adaptations place and saying, 'Oh yes Mrs X'. Then you turn around and say, 'Yes, but that is no use for my son', and they can turn around to you and say, 'But we're not here for your son'. So and I said, 'Well who did I go to for my son?' and [they say] 'I don't know, how about a social worker?' The Housing Office should say, 'Mrs X, *plus* her blind son.'

(Mark's mum)

In this instance, the adult-led considerations that underpinned housing management practice created a *more* dangerous situation for Mark, the child. This was because Mark's mum was offered a house with a stair-lift, from the 'register of adapted properties', so as to accommodate her physical impairment, yet this impeded Mark's use of the stairs:

"This place, you've only got one stairway, really, you know, one or two, but the stairway is not enough. The stairs are so small [in width], they're quite dangerous really." (Mark)

"I've got this fear when Mark comes around the corner from his bedroom, if his school bag and these straps are dangling, they're going to get caught on this here [stairlift] track." (Mark's mum)

Stereotyping in housing development

The stereotyping of disabled people as *single adults with physical impairments* was also reflected in the design of 'barrier-free' housing. Thus, barrier-free housing is built according to certain specifications, such as door widths that enabled a wheelchair to pass through. However, the barrier-free homes that we visited were also

designed to poor space standards (for example, they had small living rooms and kitchens) reflecting the apparent design assumption that single adults would live in them. As William's mum says, below, this failed to take account of the housing needs of families with impaired children. For example, William was a wheelchair user with multiple impairments (including visual impairment). He needed space to accommodate the array of equipment that he needed by his side, wherever he was in his home. However, while his equipment could be accommodated within the individual rooms of the house, this was at the cost of other family members being able to use that same room at the same time. This meant that William was unable to participate in 'family gatherings' to watch television in the living room because it was too small to accommodate the entire family (including William and his equipment):

"I mean, look at this living room. It's designed for a [single] disabled adult and so is the garden. There's no room in here [the living room] for William and his equipment, let alone the rest of the family. We just cannae sit down as a family as watch the telly in it. It's out of the question. And the garden. I mean it's so small in comparison to all the others on the row just because this is a disabled person's house. I think they made it small because they think the type of person who will live here can't do the gardening. But what about when there's children living in the house? I mean, what about when Sally wants to play in the garden. She can't because it's too bloody small." (William's mum)

William's mum also raises another key 'space issue' in the quotation above. This is the tendency – apparently derived from the assumption that disabled people were single adults with physical impairments – to design and build 'barrier-free housing with small gardens. The design assumption here could be that disabled people would be unable to maintain a garden.

There are two further things about these space issues. First, some public-renting households (such as William's family) accepted barrier-free housing because they believed this would be more appropriate for them. They only learned, through experience of using their barrier-free

home, that it was spatially inadequate. For these households, with space (as opposed to adaptation) requirements, the housing transfer system was the only mechanism through which they could secure a move to a more appropriate housing situation. However, some of the parents said that social landlords had either turned down – or gave low priority to – their transfer requests on the grounds that the household had already been moved once.

Second, the problem of inadequate space – identified above – was raised by households with politicised attitudes towards their home and neighbourhood environments. As we have already seen, these households developed a politicised way of thinking about their housing experiences due to their negative experiences (a) of living – or having lived – in poor social environments, or (b) at the hands of social landlords, who were unresponsive to their housing needs and had made their housing situation worse or inappropriately stereotyped them. For these households, then, the issue of space was connected to the range of environmental issues that they were *politically* sensitive to. However, it would be wrong to suggest that space was an issue that was only raised by ‘politicised households’. This was because it affected all households. The key difference between the ‘politicised households’ and the ‘better-off’ households, then, was that the latter were less likely to connect their space issues to other environmental issues, such as living in a poor social environment or having negative experiences of social landlords. They therefore tended not to politicise the home and neighbourhood environment. Conversely, they talked about space inadequacy as a consumption issue that presented choices to the household in terms of its budgeting priorities, for example, relating to decisions about whether to build an extension or take a holiday. For readers interested in knowing more about the space needs of disabled children generally, they are analysed more fully by Beresford and Oldman (2002).

Summary

This chapter has examined visually impaired children and their families’ experiences of poor quality home and neighbourhood environments as different from those of the children living in ‘good areas’. The former children’s early experiences of their home and urban environment as ‘dangerous’ and therefore something to withdraw from meant that they developed a particular way of seeing, thinking about and engaging with their social world. This emphasised the home and urban environment as a problem to avoid engaging with, on an everyday level, at least until it was ‘made suitable’. In other words, they viewed the environment as a ‘political’ issue rather than a personal issue.

Thus, in contrast to the children living in ‘good areas’, who developed strategies to mobilise themselves *within* their home and neighbourhood environment, children and their parents living in poor social environments tended to mobilise themselves *against* their home and urban environment. Some of these families rented their home from social landlords, and so they attempted to secure a house move by asking their landlord for a transfer. Their negative experiences of their social landlords (which sometimes worsened their housing situation and required them to engage in a ‘fight’) then reinforced this view of the home and neighbourhood environments as a political issue. For families renting their home from social landlords, and other families living in poor social environments, the home and neighbourhood environment was therefore something that they were more likely to withdraw from, and mobilise themselves against, until the problems with it were corrected. With the exception of the space issue, they were less tolerant of their home and neighbourhood environment and, for this reason, were probably our best source of information about home and neighbourhood environmental problems and strategies to tackle them.

Towards the social inclusion of visually impaired children

In this chapter, we identify three main themes to emerge from our research, and summarise our key findings under these themes. These themes are:

Theme 1: the high level of creative adaptation on the part of visually impaired children in relation to managing the design of their home and neighbourhood environment.

Theme 2: while the 'fixed' design of the built environment was not perceived as a problem by visually impaired children and their parents, unanticipated encounters with 'moving objects' within were seen as very problematic.

Theme 3: visually impaired children that experience social, educational, and environmental disadvantage are less able, and less likely, to develop effective strategies to manage their neighbourhood environments.

We discuss the policy implications of these three themes, and make some recommendations for policy and practice, in the latter part of the chapter.

Theme 1: the high level of creative adaptation on the part of visually impaired children in relation to managing the design of their home and neighbourhood environment.

Parents	Children
<ul style="list-style-type: none">• Parents do not consider visual impairment to be 'abnormal' or 'dysfunctional'• Parents do not see their children as 'victims of' or as 'oppressed' by the 'fixed' built environment, as they place a strong emphasis on their children adapting to and overcoming building design problems• Parents train their children to adopt 'normal' behaviour within the built environment, for instance, encouraging their child to 'turn on a light' rather than 'feeling the walls', or to 'lift' rather than 'drag' their feet over the ground, or to have a strict behavioural routine• Parents carry out <i>minor</i> rather than <i>major</i> structural adjustments of the design of their home on account of their child's visual impairment, for instance, install handrails and light over front door, or paint steps red in the garden to increase their visibility• Major structural adjustments such as building an extension to provide an extra bedroom, redesigning the patio with a level rather than stepped gradient or even moving house are not attributed to their child's visual impairment but rather to more generic 'safety' or 'play space' issues which affect all children	<ul style="list-style-type: none">• The children also do not see themselves as abnormal and resist the term 'disability'. Children regard the design of their home and neighbourhood as largely unproblematic, as they learn to develop memory maps of their environment• Children use a wide variety of creative strategies to incrementally increase their knowledge of the layout of their homes and neighbourhoods, for instance, walking around the edge of a room, counting steps, picking up sounds, colour, light, movement, air currents and texture through touch until they 'learn' their area• Children habitually develop over time detailed awareness of where safety hazards are within their home, so as to avoid them. The children's safety awareness sometimes exceeds that of their sighted siblings• Children expressed need for control over their home environments by, for example, having their own bedrooms, which if shared with siblings may undermine their personal routine of tidying and confidence of knowing where everything is• Children having plenty of play space is important not only inside the home, but especially in the garden, where the children can more safely increase their physical confidence and skills

Theme 2: while the 'fixed' design of the built environment was not perceived as a problem by visually impaired children and their parents, unanticipated encounters with 'moving objects' within were seen as very problematic.

Parents	Children
<ul style="list-style-type: none"> • In contrast to the 'fixed' design of the built environment, parents found the unpredictable movement of mobile objects within it, to be very problematic • As the movement of the objects could be classified as either <i>intermittent</i> or <i>constant</i> according to relative intensity, parents tended to respond to each differently. While examples of 'intermittent' movement might include, for instance, a living room strewn with toys, a parked car or dog excrement on the pavement, 'constant' movement might include, for example, crowds of people or a lot of fast moving cars • Parents felt more able to exert personal control over 'intermittent', rather than 'constant' movement, especially within the home, and therefore developed strategies for managing this, where they regularly removed and tidied household clutter, limited the movement of furniture, minimised any changes within the home, and alerted their children to any such changes which may comprise safety hazards • Parents also exercise control by placing an emphasis on training their children to anticipate and manage such encounters in the environment as much as possible, for instance, by focusing on their child's level of proficiency in mobility and traffic safety • The parents reluctantly placed restrictions on their children's movement, for example, by preventing their child from playing in the street or walking unsupervised in their neighbourhood 	<ul style="list-style-type: none"> • The children found that their confidence in their orientation skills which relied on predicting the layout of the built environment, was undermined by unanticipated encounters with mobile objects • Although the children were highly aware of the problems arising from both 'intermittent' and 'constant' movement within their home and neighbourhood environment, they still largely saw their independent mobility as a priority and a challenge to rise to even if it meant taking risks • The children responded by adapting their behaviour using mobility aids, for example, a white stick and orientation techniques such as step counting, or judging the direction of traffic by sound when at a junction • The children were also less likely to blame their own limitations and to see the problem of movement as lying with 'social' factors, such as other's ignorance, or car drivers driving too fast • Aware that the techniques for developing memory maps must be continually refined and extended as they expand their horizons into less familiar territory, the children also learn that such knowledge is built upon their ability to manage risk and fear. They have therefore developed strategies of resistance to unwanted parental restrictions on their movement, which include, for example, 'faking sight'

Theme 3: visually impaired children that experience social, educational, and environmental disadvantage are less able, and less likely, to develop effective strategies to manage their neighbourhood environments.

Parents	Children
<ul style="list-style-type: none"> Parents who rented their homes rather than owner-occupiers were more likely to make a clear connection between their child's visual impairment and design problems within their homes and/or the poor quality of the urban environment they lived in. They were therefore also more likely to move house and place pressure on their social landlord for a transfer to a more suitable home 	<ul style="list-style-type: none"> Children who lived in social rented housing were more likely to live in poor quality housing and in a disadvantaged neighbourhood, and were more vulnerable to bullying and health and safety hazards, such as discarded debris including drug users' syringes

Policy implications and recommendations

The 1989 Children Act is often seen as the only legislation relevant to children's rights. The Children's Rights Development Unit regard this as unfortunate because the act only overlaps with the 1989 UN Convention for the Rights of the Child "in relation to ... relatively small numbers of defined children, to particular services – child care and child protection in particular – and to particular court hearings. It [therefore] has no influence at all on many aspects of most children's lives" (CRDU, 1994, p xii). One of the most striking issues raised by our research is the way in which various social policies fail to take account of children. For this reason, our recommendations will address the way in which a variety of social policies can – and should – take better account of children's needs.

Housing policy: design, development and management

Design and development issues

Accessibility guidelines tend to narrowly focus on 'barrier-free' design criteria for *physically impaired adults as single-person households*, largely to the exclusion of the health and safety factors that are so important for accident prevention within the home, especially for *visually impaired children*. Thus,

- 'Mobility' and 'wheelchair accessible' social housing is often based on the concept of the disabled person as a single adult rather than as part of a family. Housing might be wheelchair accessible, but space standards (for example, living room space, size of gardens and so on) are small, possibly because it is assumed the house will be occupied by a single, physically impaired adult.
- Lifetime homes have been specifically developed around the concept of supporting people throughout the course of their lives, but the 16 design criteria are designed to accommodate the changing needs of older people later in their life course rather than the early years needs of children (Sopp and Wood, 2001). For example, the lifetime homes concept does not adequately take account of safety issues or children's needs for space to play.
- The criteria defining the 'visitability' of private dwellings in the Building Regulations (Approved Document Part M in England and Part T in Scotland) is also based on a stereotyped concept of a disabled individual as physically impaired, single and adult. Thus, it allows wheelchair users to cross the threshold of a door entrance unassisted, and also includes WC provision, a level entrance, and circulation space wide enough to allow wheelchair access on the first storey. It does not, however, include safety features for children.
- The 2001 British Standard 8300 is based on the needs of physically impaired adults, largely excluding the needs of people with sensory impairments and children. Furthermore, it

does not make “specific recommendations relating to the use of buildings by children” (British Standards Institute, 2001, p 1).

Design and development recommendations

Housing design policies should be reviewed to identify and accommodate the specific needs of children. Children should not be seen as an homogenous group, but rather as a social group with diverse needs that reflect the diverse set of circumstances in which they live.

- Current concepts of disabled people, which appear to inform the design of ‘wheelchair accessible’ social housing, should dispense with the stereotype of disabled people as ‘single adults living alone’ and embrace an understanding of disabled people, for example, as children, or as parents of children. The diversity of household types should be a key consideration.
- The lifetime homes concept is currently based on 16 design criteria that aim to increase the adaptability and flexibility of housing design throughout the life course by providing for the installation of through floor lifts, stair-lifts and space for a living/bedroom on the ground floor. The lifetime homes design criteria and other accessibility guidelines should now be reviewed to take into account the ‘play space’ and ‘health and safety’ needs of children.
- The long awaited British Standard 8300 *‘Design of buildings and their approaches to meet the needs of disabled people – Code of Practice’* (2001) has been developed to complement and expand the guidance offered in Part M and Part T. The 2001 British Standard 8300 now incorporates design criteria, such as car parking, which our research has shown to be crucial to visually impaired children who experience cars parked on the pavement as an obstacle. Approved Document Part M and Part T should be revised to take account of design criteria – such as parking space requirements – relevant to children’s needs. Approved Document Part M, which comprises a set of guidelines specifically aimed at disabled people’s needs, should now also be integrated into the General Building Regulations.

Management issues

The parents and children in our study thought that housing practitioners held stereotyped understandings of disabled people as physically impaired adults, and therefore did not fully recognise or understand visually impaired children’s needs. They said that the stereotyping of disabled people as physically impaired adults resulted in a number of housing management policies and practices that discriminate against visually impaired children.

- Housing needs are often prioritised using a medical priority system, which is based on the severity of a medical condition. This might result in physically impaired adults receiving priority for rehousing, but it disadvantages visually impaired children because their needs tend to result from generally unsuitable housing circumstances (such as living on a main road) which raise child safety issues that may not receive priority within a medical points system.
- Lists of ‘barrier-free’ and adapted properties can encourage the stereotyping of visually impaired children as needing a dwelling from the list of adapted properties. The properties on these lists were appropriate for physically impaired adults, but were often spatially inadequate for visual impaired children.
- Parents said that their transfer requests were turned down when they had already been allocated to a property from the list of barrier-free and adapted properties. They said that this was because housing managers failed to recognise that families and visually impaired children were only able to determine whether these properties were appropriate to their needs as a result of time and experience of living in them. For example, some families automatically accepted barrier-free properties, believing them to be appropriate to their needs, only to find them located in areas with high flows of traffic and therefore danger.

Management recommendations

There is a need for training programmes to give housing practitioners an awareness of disabled people’s needs throughout their life course, and to highlight the impact of living in a range of housing circumstances on visually impaired children. While this is clearly necessary to

comply with the 1995 DDA, it will also serve to inform good practice as it relates to,

- *Prioritising housing needs and medical priority.* The RNIB discourage practices that use ‘medical priority’, as they discriminate against visually impaired people. It is suggested that housing authorities allocate points on the basis of access and use issues as well as medical priority (Derbyshire, 1998). Please refer to the National Disabled Housing Service for further guidance.
- *Allocation procedures and transfer requests.* Section 167 of the 1996 Housing Act outlines the groups which authorities are expected to give ‘reasonable preference to’ when allocating dwellings. They include “households consisting of or including someone with a particular need for settled accommodation”. Derbyshire (1998, p 64) points out that because visually impaired people take time to familiarise themselves with a new environment, housing authorities should continue to give them reasonable preference if – as a result of their experience of living in property previously allocated to them – they determine their housing situation to be inappropriate at a later date.
- Lists of adapted and accessible properties are recommended as good practice by the Code of Guidance, which supports the 1996 Housing Act, but encourage stereotyping. Derbyshire (1998, p 68) has previously noted that there is a need to “to overcome stereotyped assumptions ... that only a scarce adapted ground floor property will be required”. To improve the match between visually impaired children’s housing needs and available properties, factors such as access to local amenities, security, spatial needs, local schools and public transport should also be considered (Derbyshire, 1998).

Urban and neighbourhood planning

Planning issues

Children are more susceptible to the health risks in the environment than adults because they spend longer playing outside, and are therefore more likely to come into contact with hazards, such as derelict building sites and dog excrement. Our research has shown that visually impaired

children are particularly vulnerable to hazards in the following ways:

- The built environment is designed to fit the needs of non-disabled adults. The design of the street environment is especially important for visually impaired children, as it presents obstacles such as bollards, kerbs, parked cars and road crossing junctions.
- Children’s play range and play environments have considerably decreased, to a point where they are often “encouraged even forced to play indoors” (Freeman et al, 2000, p 120). This is because parents have become increasingly concerned about ‘stranger danger’, street crime, and the dangers of traffic (Freeman et al, 2000; O’Brien et al, 2000). Traffic accidents comprise the main cause of accidental deaths of school-aged children, and rank as the highest in Europe for children (Lucas et al, 2001).

Planning recommendations

There is an artificial separation between ‘internal’ and ‘external’ built environments. The former is covered by the Building Regulations whereas planning law covers the latter. The internal/external division is reinforced by a difference in the way policy measures are applied. While the provision of a minimal standard of internal features is mandatory, external environmental design is subject to local discretion and, unfortunately, local planning officers are generally reluctant to impose disabled access requirements as their measures may either be weakened or overturned by appeal (Imrie and Hall, 2001). Measures aimed at reducing traffic accidents have thus tended to focus on the road traffic skills of children rather than traffic reduction schemes (Freeman et al, 2000). Planners can do the following to reverse the responsibility for child safety in the urban environment:

- Planning guidance needs to give a higher profile to transport issues relating to children’s play needs and accident prevention. Integrated planning and transport policies have been shown to successfully promote play through “traffic calming, street closure, walls and driveways, grassy areas set back from the roads, a footpath network linking open spaces, cul-de-sacs ... and informal play areas” (Freeman et al, 2000, p 118).

- The Department for Transport, Local Government and the Regions should continue to promote Home Zones because they ensure the rights of pedestrians, especially children, over car users (who must comply with a 10 mph speed limit), and encourage more attractive and lively street spaces with seating, different types of paving and plants (Biddulph, 2001).
- Urban planners should become familiar with the UN Convention of the Rights of the Child (1989), and the 1995 DDA to provide a framework for reforming all urban planning policy and practice.
- The UN Convention of Rights for the Child (1989) is based on the principle of equal participation for children in every aspect of society. Articles 2 and 23 relate to disabled children's needs, while Articles 6, 12, 24 and 27 cover the key aspects of the environmental needs of children. For further information refer to the Children's Rights Alliance for England, formerly the Children's Rights Development Unit.
- The 1995 DDA places duties on all service providers to challenge discrimination in a number of areas from employment, access to goods, services and facilities, to education. From December 1996, less favourable treatment of disabled people was unlawful and from October 1999, there was a requirement to amend, adjust or provide policies, services and procedures, or aids in line with disabled people's needs. From October 2004 there will be a requirement to make reasonable adjustments to physical features of premises and remove physical barriers to access.
- The 26 Planning Policy Guidance notes (PPGs) are supported by circulars and guides. The most relevant for visually impaired children are PPGs 1, 3, 11, 12, 13 and 15, although clearly all will have an impact on their lives in some way and should therefore be reviewed to incorporate children's environmental design needs. For further information relating to the design of the built environment for visually impaired people refer to *Building site* by Barker (1995), and for the legislative and policy guidance for disabled people refer to *Disability: Making buildings accessible – Special report 2002*, by Bright (2002).

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A

Appendix A: Overview of the characteristics of the sample

(n=44)

Table A1: Sample of children by gender

Gender	Male	Female
	26	18

Table 2: Sample of children by age

Age	5	6	7	8	9	10	11	12	13	14	15	16
	7	2	2	1	7	2	2	4	5	2	7	3

Table 3: Sample of children by tenure

Tenure	Homeowner	Renting from social landlord	Renting from private landlord
	34	10	0

Table 4: Sample of children by schooling

School	Mainstream	Visual impairment school	Don't know
	22	19	3

Table 5: Sample of children by socioeconomic status of head of household

Socioeconomic status	White collar/professional	Blue collar/manual	Not in formal paid employment
	26	11	7

Table 6: Sample of children by ethnicity

Ethnicity	White British	White Other	BME
	36	1	7

Appendix B:

Further information on methodology and data analysis

While second interviews commenced in a non-directive manner, they became more focused as the diary, and data from the first interview, were fed to the children for them to reflect and elaborate on. In a small number of cases, second interviews were undertaken with the children, without their parents being present. However, the majority of second interviews were necessarily undertaken in the presence of parents. In many cases (usually with the older, teenage children), the children took the role of lead respondent or, at least, made an equivalent contribution to their parent(s). Nevertheless, there were a significant number of cases (usually with the younger children below the age of 10), where the children either remained silent or gave short answers to our questions. In these interviews, the parents would further elaborate what they believed their children wanted to say, and continued to take a leading role. (We discuss the methodological implications of parental influence in Appendix C.)

Since our research method was 'non-directive', we began the process of analysis during the fieldwork. The themes that were emerging out of the first interviews were transformed into 'grounded theories' (cf Glaser and Strauss, 1967) that were pursued in greater depth in second interviews. When all of the fieldwork had been completed, each interview was fully transcribed and analysed using the 'constant comparative method' (Glaser and Strauss, 1967). This involved coding each sentence of every interview, in turn, and establishing their relationship with the concepts that had already been generated during

the fieldwork (and, if necessary, amending the concept). If new issues emerged from the transcripts (that had not been identified in the field), these were used to generate new concepts and issues.

The concepts that had been developed in the field, and during the analysis of the interview transcripts, were then placed into two separate coding frames as 'theme headings'. One coding frame consisted of the data collected from the children, while the other consisted of the data collected from the parents. An identifier, denoting the location of the text (for example, the page and line number of illustrative quotations) from which the concepts had been derived was then transferred from each interview transcript into the appropriate coding frame. This contained information about the interviewee (denoting the identity of the case), the date of interview (denoting the identity of the transcript) and page and line numbers (denoting the location of the quotation in the transcript) and was placed under the appropriate 'theme heading' in the respective coding frames.

This system enabled us to establish the empirical significance of each concept across interviews. For example, it enabled us to determine whether the concepts recurred across all interviews, whether they related to the children interviews only (or, indeed, the parent interviews only), or whether the concepts simply represented 'one-off' scenarios. This then enabled us to structure the report into chapters that reflected the strength of the conceptual themes emerging from the data.

C

Appendix C: Accounting for the influence of parents in the research method and analysis

Our original intention was to interview the children alone. The practical realities of conducting the fieldwork showed this intention to be idealistic. This was because parents (and, in the cold light of the fieldwork situation, ourselves) were concerned about the desirability of unknown researchers spending time alone with children. For this reason, we had to make a methodological compromise and interview most of the children in the presence of their parents, which, of course, changed the nature of the interview situation. The parents tended to use these first interviews as an opportunity to get to know us, and thus either dominated this interview or were the stronger presence. We were initially concerned that this would produce a piece of adult-centred research. However, while we cannot claim to have achieved our original methodological intention, to produce a piece of child-centred research, we were able to capture the voices of children as much as it was possible to do and to a greater extent has been the case in other studies of disabled children. This is because we produced separate coding frames for the parents and children. These coding frames were developed independently of each other, yet showed clear patterns of convergence *and* divergence in perspectives between the parents and children. This has been reflected in our report, which shows how and where parent and children's perspectives converged and diverged, and the implications that these similarities and differences had for the home and neighbourhood environmental experiences of the children.

Nevertheless, although we have been able to pick up key differences between the children and parents, we do not deny the possibility that the presence of parents resulted in some children being reluctant to tell us everything that they would have liked.