

## **Including people with learning difficulties from Chinese backgrounds: an ethnography of three services**

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This research aims to investigate the culture of two culturally specific and one integrated service used by people with learning difficulties from Chinese backgrounds. The study was undertaken to address the lack of literature and research currently available on the service and inclusion experiences of people with learning difficulties from Chinese backgrounds in England, to explore the importance of taking specific cultural contexts into account in policy development and service practices and to consider the importance of culturally specific services for this group of people.

This study uses a qualitative ethnographic methodology which involves participant observations, semi-structured interviews and ethnographic analysis to explore the ways in which Chinese-specific services and integrated organisations include adults with learning difficulties from Chinese backgrounds. Because the study sought to understand the nature of three very different services and how they worked with people across cultural differences and with learning difficulties, an ethnographic approach was particularly appropriate as it is premised on the immersion of the researcher in particular social contexts, in this case social care and welfare services (Spradley, 1980, Hammersley and Atkinson, 1983). A strong reflexive approach was adopted in which my experiences and responses to the research settings form part of the research material (Etherington, 2004).

Key informants provided specific cultural knowledge that added to the researcher's observations and the understanding of participants' experiences of the service they used. In total, participants included 8 people with learning difficulties who were from Chinese backgrounds, 5 family/carers, 5 service managers, 10 staff and 2 sessional workers who were aged eighteen and over. Participants originated from Hong Kong, Mainland China, Vietnam, Malaysia and England. Participants lived in and around a city in the West Midlands. In some cases an interpreter was used.

To realise the aim of this study, I sought to maintain a balance between the uniqueness of each service and an understanding of both unique and common themes which emerged from the data (Wolcott, 1999). I started this study by recording my informal ideas, thoughts, assumptions and my intuitive approach in the early stages of contact with people from Chinese backgrounds and service providers. From that point, the analysis started (Spradley, 1979). The formal part of the analysis was with the field notes, the interview material, documents, the reflexive reflections on the research and the similarities and differences of themes and patterns generated (Hammersley and Atkinson, 1983, Fetterman, 1998, Etherington, 2004). Analysis started early in the fieldwork and was not a distinct stage (Hammersley and Atkinson, 1983, Spradley, 1979). This process has been described as the 'funnel' structure of ethnographic research because of its progressive focusing on events in the field (Hammersley and Atkinson, 1983). Gradually over time I moved from a broad descriptive account of each service culture to a more focused approach on specific issues and themes which were both common and unique that emerged from the data.

This study has highlighted the ways in which a particular view of disability can lead to a focus on different issues. The medical model focussed very much on the individual seeing disability as a characteristic of the person and leading to practices which aimed to cure or to ameliorate the condition. The social model by contrast constituted disability in terms of the social and physical barriers to inclusion and participation experienced by people with impairments. This led to a strong emphasis on the removal of such barriers and with less emphasis on the impairment of the individual. Both of these models were developed within a particular cultural context and provide particular lenses through which to consider disability, impairment, research and policy and practice in relation to disabled people. In relation to the present study the social model informed the development of the research which was concerned with the experiences of people with learning difficulties and the barriers and facilitators they experienced in relation to inclusion. However, it also sought to explore its relevance to those who came from different cultural backgrounds.

The results from this study add to the existing knowledge by challenging generalised assumptions that all people from different cultural groups can be categorised under one label of black, Asian and minority ethnic (BAME) groups and the study highlights the dangers of doing this. This study found that staff in the services were generally influenced more by a 'medical model of disability' than a social model, despite government policies. They also showed little evidence of understanding the principles of personalisation.

The findings reveal that the experience of people with learning difficulties from Chinese backgrounds in accessing services was different for those in culturally specific and integrated services. In particular within the culturally specific services family members were seen to be of primary importance for the person with learning difficulties accessing and using the services. However, across all the services in this study, people with learning difficulties from Chinese backgrounds experienced life as fringe-dwellers, as people who had a physical presence with limited social inclusion.

This study reveals that none of the services used the expertise and knowledge of other services in this area. Finding ways for services to work together more closely may provide one way to solve this problem. Recommendations in the policy document *Learning Difficulties and Ethnicity* (Mir et al., 2001) suggest that while integrated services have greater resources than culturally specific provision, culturally specific networks may provide a way to support integrated provision. My study suggests that such links would also be beneficial to culturally specific services in that expertise about people with learning difficulties would be available to them. Yet the Mir et al. recommendations do not suggest a combination of integrated and culturally specific networks and services working together in sharing knowledge and resources while at the same time promoting multiculturalism.

The development of such networks at a national and local level could be mutually beneficial. For example, given that one of the participants with a learning difficulty had funding in relation to language and cultural needs, this could have been used to support the use of a Chinese Service Centre. Such networks could provide a way to address concerns that disabled people from minority cultural groups often fall between integrated and culturally specific services (Evans and Banton, 2001, Singh, 2005).

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