

*Accessible Transport Strategy – Draft Action Plan 2009-12*

***Response from Arthritis Care,  
July 09.***

Arthritis Care Northern Ireland welcomes this opportunity to comment on the latest draft Action plan for the Accessible Transport Strategy. Arthritis Care Northern Ireland is the Northern Ireland component of the UK wide charity Arthritis Care. We are a user led organisation, working with and for people in Northern Ireland who have arthritis:

Approximately 230,000 people in Northern Ireland are affected by arthritis; it is the largest physical cause of disability and days off work in Northern Ireland; arthritis and related musculoskeletal conditions are the largest cause of disability in Northern Ireland; 72% of people with arthritis are sufficiently affected to come within the terms of the Disability Discrimination Act. Arthritis therefore has a major impact throughout our society, and can affect people of all ages. Mobility and transport are important issues for people with arthritis.

We are happy to work with IMTAC in this area, and are partners in Baywatch. We are aware of and broadly support the comments of IMTAC on the Draft Action Plan. However there are some points which we would want to make which are particularly relevant to people with arthritis.

Primarily, there needs to be greater awareness at all levels of the needs of people with 'invisible' disabilities, particularly difficulties with walking and standing. Some people with arthritis use wheelchairs, but many do not. Those people may be able to walk some distance, but often have to do so slowly and with caution. Stepping up or down may be painful, as may simply standing. There is insufficient awareness and consideration for this numerically quite large group amongst transport planners and staff and more needs to

be done to make it easier and safer for them to use public transport. That could include measures as simple as providing seating at bus stops and training drivers to be more aware of and considerate of people with walking difficulties, especially when moving off.

We would also note that more needs to be done in respect of door to door services. Such services, and information about them, need to be more widely available, and a sufficient variety of vehicles need to be available to meet particular needs, such as those who have particular difficulty with steps. Rural services are also a major issue in many areas.

We welcome the proposal to extend Part III of the DDA to transport services here.

We also welcome the Department's willingness to consult on these issues, and look forward to participating more fully in such consultation in the future.

Steve McBride,  
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