

Newsletter – Volume 10 – 01/12/2019

SPECIAL POINTS OF INTEREST

- People with learning disabilities shut out by recruitment processes
- World AIDS day
- How do you get or transmit HIV?
- Machete brawl arrests



People with learning disabilities ‘shut out of work’ by poor recruitment processes

Charity says online-only application forms and formal interviews are ‘closing the door’ on an untapped talent pool of 1.5 million. Inaccessible job applications are preventing nearly 3 in 10 people with a learning disability from finding employment, according to research by the UK’s leading learning disability charity. Mencap, which surveyed 1,625 adults with a learning disability from across the UK, discovered that 29 per cent of unemployed working age adults with a learning disability found it difficult to fill in application forms, preventing them from getting a paid job.

A quarter (26 per cent) said they had applied for jobs but had not got one, while 23 per cent said they did not know how to get a job. Although the Mencap survey revealed that 62 per cent of working age adults with a learning disability wanted to work, official data from the NHS and Office for National Statistics found less than 6 per cent of people with a learning disability who are known to their local authority are in paid employment. This is compared to more than three-quarters (76 per cent) of the general population.

Mark Capper, head of development at Mencap, said a poor understanding of learning disabilities, as well as practical

barriers such as inaccessible application forms, had resulted in people with a learning disability being "shut out of work" even though these individuals can be productive employees with the right support. "People with a learning disability face many barriers to getting into work, but many people with a learning disability often fall at the first hurdle because the recruitment process is inaccessible," Capper said.

"Most employers will not even be aware that by having online-only application forms and formal interview processes, they are closing the door on an untapped talent pool." Capper said often "small and cost-effective" reasonable adjustments in the workplace were all that was needed to "open up doors" to people with a learning disability and provide them access to employment opportunities. Dr Jill Miller, diversity and inclusion adviser at the CIPD, said adjustments could be as simple as tailoring job advertisements to show an organisation's commitment to inclusion, and ensuring recruitment processes examine the particular skills needed for a job, not just how an applicant does in interviews.

"Employers should also look to make reasonable adjustments that are often low-cost, easy to implement and vital to enabling people to perform their best at work," Miller said. "Stating 'happy to talk reasonable adjustments' on job adverts can make people feel more comfortable to request one and shows employers are thinking inclusively." She added that employers could also include a link to their diversity and inclusion statement, policy or approach in job advertisements to demonstrate their commitment to inclusion.

The Mencap research, published to coincide with Learning Disability Work Week this week, aimed to show that people with a learning disability can make good employees, and change employer practices to help open doors to an untapped talent pool of 1.5 million people in the UK with a learning disability. Angela Matthews, head of policy and advice at the Business Disability Forum, told People Management the key error it found in recruitment processes was that the application and selection methods used by employers rarely replicated the skills and level of knowledge needed for the job being recruited for.

"Too many employers use the same recruitment method for every role," Matthews said. "For example, a writing-based and computer-literate application process is often used for every role, including roles that do not include writing or use of a computer." She said some employers failed to understand a blanket approach to recruitment was an "anti-inclusive" approach that could result in unfairly excluding people with learning disabilities from employment opportunities. Mencap said support was available for employers to ensure people with a learning disability had greater access to recruitment opportunities. It added that people with a learning disability could take longer to learn new tasks and might need support to develop new skills, understand difficult information and engage with other people, but that the level of support each individual person needs differs.

https://www.peoplemanagement.co.uk/news/articles/people-with-learning-disabilities-shut-out-of-work-by-poor-recruitment-processes?utm_source=mc&utm_medium=email&utm_content=pm_daily_18112019.People+with+learning+disabilities+%e2%80%98shut+out+of+work+%e2%80%98

World AIDS day - 1st December

What is World AIDS Day?

World AIDS Day takes place on 1 December each year. It's an opportunity for people worldwide to unite in the fight against HIV, to show support for people living with HIV, and to commemorate those who have died from an AIDS-related illness. Founded in 1988, World AIDS Day was the first ever global health day.

Why is World AIDS Day important?

Over 101,600 people are living with HIV in the UK. Globally, there are an estimated 36.7 million people who have the virus. Despite the virus only being identified in 1984, more than 35 million people have died of HIV or AIDS, making it one of the most destructive pandemics in history.

Today, scientific advances have been made in HIV treatment, there are laws to protect people living with HIV and we understand so much more about the condition. Despite this, each year in the UK over 4,300 people are diagnosed with HIV, people do not know the facts about how to protect themselves and others, and stigma and discrimination remain a reality for many people living with the condition. World AIDS Day is important because it reminds the public and government that HIV has not gone away.

What is HIV?

HIV (Human Immunodeficiency Virus) is a virus that attacks cells that help the body fight infection, making a person more vulnerable to other infections and diseases. It is spread by contact with certain bodily fluids of a person with HIV, most commonly during unprotected sex (sex without a condom or HIV medicine to prevent or treat HIV), or through sharing injection drug equipment.

If left untreated, HIV can lead to the disease AIDS (Acquired Immunodeficiency Syndrome). The human body can't get rid of HIV and no effective HIV cure exists. So, once you have HIV, you have it for life.

However, by taking HIV medicine (called Antiretroviral Therapy or ART), people with HIV can live long and healthy lives and prevent transmitting HIV to their sexual partners. In addition, there are effective methods to prevent getting HIV through sex or drug use, including Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP). First identified in 1981, HIV is the cause of one of humanity's deadliest and most persistent epidemics.

What is AIDS?

AIDS is the late stage of HIV infection that occurs when the body's immune system is badly damaged because of the virus. In the U.S., most people with HIV do not develop AIDS because taking HIV medicine every day as prescribed stops the progression of the disease.

A person with HIV is considered to have progressed to AIDS when:

The number of their CD4 cells falls below 200 cells per cubic millimeter of blood (200 cells/mm³). (In someone with a healthy immune system, CD4 counts are between 500 and 1,600 cells/mm³.) or they develop one or more opportunistic infections regardless of their CD4 count.

Without HIV medicine, people with AIDS typically survive about 3 years. Once someone has a dangerous opportunistic illness, life expectancy without treatment falls to about 1 year. HIV medicine can still help people at this stage of HIV infection, and it can even be lifesaving. But people who start ART soon after they get HIV experience more benefits—that's why HIV testing is so important.

How do I know if I have HIV?

The only way to know for sure if you have HIV is to get tested. Testing is relatively simple. You can ask your health care provider for an HIV test. Many medical clinics, substance abuse programs, community health centers, and hospitals offer them too. You can also buy a home testing kit at a pharmacy or online.

How do you get or transmit HIV?

You can only get HIV by coming into direct contact with certain body fluids from a person with HIV who has a detectable viral load. These fluids are:

- Blood
- Semen (cum) and pre-seminal fluid
- Rectal fluids
- Vaginal fluids
- Breast milk

For transmission to occur, the HIV in these fluids must get into the bloodstream of an HIV-negative person through a mucous membrane (found in the rectum, vagina, mouth, or tip of the penis); open cuts or sores; or by direct injection.

People with HIV who take HIV medicine daily as prescribed and get and keep an undetectable viral load have effectively no risk of sexually transmitting HIV to their HIV-negative partners.

How is HIV spread from person to person?

HIV can only be spread through specific activities. In the United States, the most common ways are:

Having vaginal or anal sex with someone who has HIV without using a condom or taking medicines to prevent or treat HIV. Anal sex is riskier than vaginal sex.

Sharing injection drug equipment (“works”), such as needles, with someone who has HIV.

Less common ways are:

From mother to child during pregnancy, birth, or breastfeeding. However, the use of HIV medicines and other strategies have helped lower the risk of mother-to-child transmission of HIV to 1% or less in the United States.

Getting stuck with an HIV-contaminated needle or other sharp object. This is a risk mainly for health care workers. The risk is very low.

HIV is spread only in extremely rare cases by:

Having oral sex. But in general, the chance that an HIV-negative person will get HIV from oral sex with an HIV-positive partner is extremely low.

Receiving blood transfusions, blood products, or organ/tissue transplants that are contaminated with HIV. The risk is extremely small these days because of rigorous testing of the U.S. blood supply and donated organs and tissues.

Being bitten by a person with HIV. Each of the very small number of documented cases has involved severe trauma with extensive tissue damage and the presence of blood. There is no risk of transmission if the skin is not broken.

Contact between broken skin, wounds, or mucous membranes and HIV-infected blood or blood-contaminated body fluids.

Deep, open-mouth kissing if both partners have sores or bleeding gums and blood from the HIV-positive partner gets into the bloodstream of the HIV-negative partner. HIV is not spread through saliva.

Eating food that has been pre-chewed by a person with HIV. The contamination occurs when infected blood from a caregiver’s mouth mixes with food while chewing. The only known cases are among infants.

Birmingham Star City - Girl, 13, among machete brawl arrests



Five teenagers, including a 13-year-old girl, have been arrested after a mass brawl involving machetes broke out at a cinema.

Seven West Midlands Police officers were hurt while attempting to disperse the fighting at the Star City complex in Birmingham on Saturday evening. The force said for those responding to the disorder "it may be the worst thing they have ever seen". Police drew Tasers and used a dispersal order to clear about 100 youths. Footage from inside the venue appears to show disorder breaking out and people on the floor screaming.

A girl aged 13, a girl and boy both aged 14, and a 19-year-old man were all held on suspicion of assaulting police. In addition, a boy aged 14 was held on suspicion of obstructing police. All five were later arrested on suspicion of violent disorder but have now been released on bail with conditions which ban them leaving home at night and ban them from Star City and any cinema in the UK, police said. A 14-year-old boy had also been arrested on suspicion of violent disorder after an image circulated on social media showing a number of youths, with one carrying a machete. Asked if he was concerned about the ages of those involved, Ch Supt Steve Graham said: "It is concerning, there's no point pretending otherwise.

"That's why we've got plans in place, starting from first thing on Monday morning, where we'll be sending neighbourhood policing officers into schools around Birmingham to try and find out why."

Mr Graham added: "It's always hard to gauge these sorts of things - but what I will say is incidents like last night are rare. "As for some officers who were there last night, it may be the worst thing they have ever seen." The trouble "seemed to be focussed at the cinema" but "pockets of disorder" broke out around the whole complex for between 90 minutes and two hours, the force said. Two machetes were seized and a knife was recovered from a roundabout nearby.

<https://www.bbc.co.uk/news/uk-england-birmingham-50536472>