

Disability rights activism has moved from the streets to the law firms, banks and other organisations of the City

City rhetoric on disability 'must be turned into action'

A new charity is launched this week to support disabled professionals, reports **Frances Gibb**

The meeting lasted just 90 minutes, but in that time Robert Hunter had to ask his solicitor-colleagues and counsel to "please speak up" no fewer than 60 times. He recalls going home that evening, sitting on the stairs and for the first time in decades, being overcome with "the shame and humiliation of it".

Hunter was a litigation partner in a City law firm and in charge of a substantial case. But he had been losing his hearing since his mid-teens (he is now profoundly deaf) and could not persuade his team to speak up enough for him to take part in the meetings over which he was meant to preside. It was, he says, a crisis point: he contemplated giving up his career.

But the firm's senior partner sent out an edict—"the effect of which was that the firm would have to be more politically correct". What followed was like daylight, he says. Partners who had previously shown no interest in his plight spoke up. "No one wanted to be the odd one out in not making an effort. I was able to conduct my large case and other cases that followed it."

That was the early 1990s. Since, City law firms, banks and other organisations have made strides in dealing with discrimination generally. Yet Hunter, an internationally acclaimed fraud litigator with Herbert Smith, has been struck by the "disconnect" in many

firms between intentions and reality.
Diversity is promoted vigorously and used as a recruitment tool. But he says: "There's a danger of believing in our own hype, a danger in any organisation that is going to promulgate a diversity policy to staff of becoming complacent, resistant to change."

Hunter and his then colleague Kate Rees-Doherty (now an associate at Boodle Hatfield) started to think about

why this disparity existed. At the request of the Law Society he delivered a paper this year, finding that his experiences were common among those with disabilities and long-term medical conditions. He wrote: "Commendable though it is, the current diversity movement that has affected so many City law firms had little effect upon my working environment."

While diversity is insisted upon by many clients of large City firms, the latter's high-profile policies do not necessarily reflect what happens on the shop

The way people are treated can affect careers and earnings

floor, he argues. "Those responsible for diversity may be hugely competent and well-intentioned but it is not the same as being responsible for the treatment of people as they go about their work." Such staff were also expected to have an unrealistic knowledge of issues across gender, race, social background — and all the range of disabilities.

Hunter and Rees-Doherty, a private client lawyer with experience of charity work, with Kayleigh Farmer, a personal executive who works with deaf professionals, were spurred to set up City Disabilities, a charitable trust to help and support lawyers with disabilities; students and those who assist disabled professionals. In the City, Hunter says, to work with a disability or affecting medical condition can be "a bewildering and isolating experience".

City Disabilities (citydisabilities.org.uk — it is for all London, despite the name) will put disabled people in touch through mentoring schemes;

offer advice to those thinking of professional careers and share practical advice among employers.

The way people are treated can affect careers and earnings: a recent report by Radar (Disability Rights UK legacy organisation), backed by Lloyds Banking Group, found that non-disabled people were three times more likely than the disabled to earn £80,000 or above; and twice as likely to be board-level directors. Three in four of those able to hide their disability or health condition did so, for fear of the impact on careers.

The City culture brings its own problems, Hunter says, because disability awareness training often focuses on the obvious — lack of facilities, inappropriate language. "With its boardroom skills, the City tends to pride itself on social subtleties and people are good at getting messages over in a very low-key way. So one needs to address getting and receiving 'disablist' messages in that same way."

He has produced an "etiquette guide" (on the charity's website) with tips on dealing with colleagues with a disability. "Many people are anxious about saying or doing 'the right thing'. In fact 'the right thing' is almost always to treat disabled people normally." Tips include: don't assume the person cannot do things unrelated to their disability; beware of personal space (do not lean on wheelchairs); offer help where you think it is needed but make sure it is not based on a patronising assumption; and if you get it wrong, don't hide behind 'only trying to help' but apologise.

People who experience gender or race discrimination can usually walk down the corridor and find someone to share it with, Hunter says. "If you're disabled, it's harder to find someone with the same disability as you; there's very much the feeling that you are the 'only gay in the village.' "He adds: "We hope to provide mutual support... to connect the disconnect—and as the Radar survey put it, turn rhetoric into action."

David Pannick, QC

Lord Saatchi's Medical Inn Bill completed its committe in the House of Lords last I has government support at become law before the end parliament next May. The have a positive effect — the as substantial as its support, and it contains (or will with further amendments protections to prevent it charm. It therefore deserve lukewarm support.

The bill says that its pur encourage responsible inr medical treatment". It pro it is not negligent for a do depart from the existing accepted medical treatmed decision to do so is takens "personsibly".

decision to do so is takens "responsibly".

For the purposes of taki responsible decision; they must, in particular, obtain account of the views of or appropriately qualified derelation to the proposed tand consider the risks an of that treatment, having other available options.

The bill needs to that a doctor is a obliged to innova

This adds very little to law. The common law te by Mr Justice McNair in case in 1957. A doctor is negligence "if he has ac accordance with a pract as proper by a responsit medical men skilled in particular art". In the Si in 1985, Lord Diplock et that because the state o knowledge is not, and s stagnant, the Bolam tes require the doctor to fo most orthodox approac may be a number of dif practices" that satisfy t particular time.

The courts apply the criteria in a liberal ma interests of patients.

Typical is the judgm Dame Elizabeth Butler president of the family in the Simms case in 2 approved innovative to two incapacitated patifrom brain disease. The was "untried" with "nof the experimental was Japan". But, she noted responsible medical of favour of trying the transhe explained, the Bo not be applied in such "no innovative work of penicillin or perfor transplant surgery we attempted".