**Leonard Cheshire Resonate Project**

File Title: GLC's talk at Bournemouth, public meeting for new home

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Start of Transcription

0:01: GLC: March 19th, talk at Bournemouth to public meeting in support of the new home.

*[Applause 00:10 to 00:19]* GLC is heard saying: Thank you, thank you very much. Very nice of you.

00:21: GLC: Your Worship the Mayor, Lady Mayoress, Doctor Byrne and Mrs Byrne, Mrs Holmes and Betty Donovan, distinguished guests, and ladies and gentlemen. And also, I would like to say Brother Charles who's given us such a beautiful hall to meet in. It really took me by surprise when I walked in the hall, I haven't seen a hall like this in a school, of course I can see the advantage of it to the boys: once you're standing down here, you realise that you are at a lower level.

00:54: *some laughter in the audience*.

00:59: GLC: But I don't suppose it was a boy who designed it, was it, Brother? Was it?

1:02: Brother Charles: yes,...[unclear].

1:06: GLC: Yes, I can see that. Well, we are very fortunate in having this setting, and we are very fortunate too in having the Mayor and Lady Mayoress to give up their evening to help and encourage all of us. And I would like to say what a pleasure it is to me personally, to be standing here at the beginning of what is a new venture. But a new venture in more than one sense, in a very deep sense, because -as I hope I'll be able to explain a little later- this is something different, in the work, in the story of the work that we've been trying to do.

(1:54) I would like to talk a little in general about disability, what it means, and also the role that the disabled have to play in society. And what we can do, in our small way, whoever we might be, to assist them achieve that role. I realise, of course, as I'm sure you do, that when one talks about disability, one cannot generalise, one cannot say that there is only one solution, which is the best solution, or far less, the only solution. Every individual person, every disabled person, I mean, is an individual, and his needs or her needs are individual to himself. And therefore, the solution must be the best solution, must be individual to that particular person.

(3:04) Moreover, we are on new grounds. We are only still as a world, as a world community, at the pioneer stage. Twenty-seven years ago, or so, when I first came into this picture, almost nothing was done in any suitable sense, for the disabled. They were, I think one can say, at the bottom of the list of priorities. And I remember very well, when I was engaged in it then, in such a small way as it was, people kept saying to me “But why do you take the disabled, people who can never get better? If you want to do this kind of thing, why don't you concentrate on those who can get better and who can go back to life, and lead a constructive, normal life?”

(4:10) Of course, if one wants to undertake something, and one sits down to work out which is the greater priority, you would still be sitting down at the end of your life wondering which really was. It's clear that each of us, if we want to do something, must choose whatever we feel is our particular work, and I felt that this was mine. And I felt it was particularly mine, for the very reason that it did seem to be bottom of the list.

(4:48) In those days, the only place that the disabled person could go, if he couldn't live at home adequately, was to a chronic ward. And a chronic ward meant an old persons ward. And even today, with all the advances that we've known, with all the tremendous efforts that the State has put into welfare and health, there are still young disabled in old people's ward, up and down the country.

(5:29) Now, I thought -as I expect many people perhaps still think- I thought, when I first met a disabled, though I am bound to say that those whom I first met were elderly, not young, that what was needed was to look after them, give them the best possible conditions one could in which to live and be comfortable.

(6:05) The first person that I had to look after was an elderly man in his middle seventies, who had cancer, was in Petersfield Hospital, and couldn't stay there because his matron pointed out she only had 25 beds, there were many people waiting to come in, who could be cured after their treatment and go home. And this elderly man, Arthur, could never be cured, and there was nothing to be done for him other than to look after him. (6:48) When he came into this old house, Le Court, the only thing that I could find for him, I soon realised that he didn't want to have everything done for him, he wanted to be independent, and he was independent. (7:08) And he realised pretty quickly, I think, that he had me well under his thumb. The only thing that saved me was, a lesson that I've learnt in the Air Force, and I have found a useful lesson ever since, and that is, when you don't know what you're doing, look at he who's got the position completely under control. [*some laughter in the audience*]. So, I hope that he would think that I knew more about it, and he supposed.

(7:41) And so I soon learnt that first lesson, that a disabled person wants what everybody else wants, for his life. And particularly the young disabled, because it was not long before I realised that the greatest problem was not the elderly, however great that might be, but the young, those whose lives still lay ahead of them. And they want, as every young person wants, to lead a life that is useful, to feel that they have something to contribute in their own way to society, to be creative. Whereas we tend to think when we see them that they are there just to be looked after and made as comfortable as possible.

(8:46) And, unfortunately, disability is a barrier, unless there is somebody to help, unless there is the right environment, then a disabled person will find it very difficult to lead the kind of life that he or she wants.

(9:09) Not everybody of course, will want to work, there are some who, because of their disability, because of the way they feel, would rather just be peaceful and quiet. And there are sometimes differing views as to what should be done. Should we persuade them? Should we try and cajole them into being active and into doing something? Or, should they just be allowed to do what they want to? This is one of the problems, inference in this kind of situation.

(9:45) But the fact remains that with modern technology, and with the right environment, and the right moral encouragement, there is no person however disabled, who can't do something really constructive.

(10:06) And if I may take one example, of the many hundreds I suppose I could take, although I admit that it is an outstanding example, somebody of whom you may well have heard, who died about 4 months ago, called Hilary Pearl. As a young girl, she was active and very athletic, and then at the age of about 19, she got a disease which made her very rapidly paralysed, to the point where the only part of her body that she could move was one big toe. She couldn't see, she couldn't breathe, she was kept alive by a breathing machine, she couldn't feed herself, she had to be artificially fed, but she could hear and she could move that one big toe. And somebody designed a very fine electronic box, called “opossum”, which is operated by a little micro-switch, which was attached to her big toe.

(11:32) And through this micro-switch, there was quite a lot that Hilary could do. She could turn on her radio, select her station and adjust the volume, without having to call anybody to do it for her. She was very musical, and she had a Hi-Fi set, and she could turn this on and control it, so she could listen to her own music. But most important of all, she could type, it was operated typewriter. You could go and see Hilary and talk to her, she couldn't see you but she could hear you, and I might add that she had a remarkable gift to summing you up rather quickly, sometimes uncomfortably quickly, or uncomfortably accurately I should say, and she would hear what you said, and she'd answer you, and you'd pull out the piece of paper and read her answer. She was poetic and she used to compose poems on her typewriter, but most of her time was spent writing letters, writing articles, doing things for other people. She organised appeals collecting money. She used to receive letters from other people, others like herself, asking some personal advice or some personal questions, and that was Hilary's life, for which, before she died, she was awarded the MBE.

(13:07) Now I know that some people, and of course I completely respect the sincerity of their views, if they'd seen Hilary at her lowest, would have said “Better to just let her slip away, and die”. But Hilary was determined to live. And not only determined to live but determined to make something out of her life. And to me, she symbolises the great deep burning desire of all disabled people.

(13:48) But she would never have been able to do what she did achieve, had it not been for the doctors who cared for her and treated her, the nurses, the technologists, the technicians who designed and built her equipment, and of course her family who stayed so close to her right up to the end.

(14:16) And that too is symbolic of the situation in which we find ourselves, in that everywhere, in every community in the world, no matter what country -wealthy or less wealthy- there are those who in one way or another, are handicapped or disabled, and who, if they are given the help that they need by other members of their community, can live the kind of life that Hilary did in her way, and they would like to do in theirs. Now we, in our foundation, which you saw -that one little film- for the most part, since 1948, when we started with the old man, Arthur Dykes, have been building homes.

(15:20) They are community homes, mostly quite small, an average of perhaps 30, there's one in this country as large as 58, there's another as small as 6. So, they vary very, very greatly. But mostly they are small, because we believe that they should be as much as possible run like a family, on a very personal basis. With the minimum of rules, sufficient only, of course, to have an orderly house to run softly; just like in any family, there have to be some kind of rules. But basically, each person is given the opportunity of the kind of life he wants.

(16:19) And each person is contributing in some way, if he wants to, to the home. Not only in a material way, but by participating in making decisions, in the running of the home. Obviously, with 65 or so homes in this country, they vary very greatly, we can't say that every one of them is as he would like it to be, it isn't. In any human organisation, unfortunately, things don't always go as we would like.

(16:55) But these are homes that are trying to build themselves up, into the kind of place, where a disabled person can live his life.

(17:10) The money for them, for the building of them, is funded entirely from the local community. We do have a central trust or foundation, which in fact is the only body that exists in law, and therefore, legally speaking, owns all the homes and owns all the money that is collected, but lease it to the local committee within certain very broad principles and guidelines, to run homes in certain ways. The Central Foundation does have some funds, it can't go out and collect funds or it would be conflicting with the fund-raising activities of

the different homes. But we do have some funds, and these are meant, on a rotation system, to new homes starting up, or existing homes building new extensions.

(18:17) In all, we have to raise over a million pounds a year to keep going, and to build up. And all of that is done in a very small way, practically all by the local homes. We do not believe in going to pay appeal organisers, paying for advertising space and so on. We think that all this raising of money should be done voluntarily, or as much voluntarily as possible. And so our overheads, including publicity and everything, are less than 7%. We feel that this is the way that we should operate, even if by doing it on a voluntary basis, sometimes but not quite as efficient as perhaps we could be.

(19:13) But none of this could be possible, were it not, for the help that we are given by local authority. We do not get anything for the capital cost of building a home, but we do get from local authority in respect to nearly every resident, unless he has a certain amount of capital of his own, a maintenance fund. The amount will vary according to the county concerned, the authority concerned, and, I suppose, the success of the management committee in negotiating the terms. But by and large, it is at least 2/3 of what it costs, and in some cases, all that it costs. And so, we have reasons indeed to be grateful to local authority for the help it has given. We are in fact a partnership between 33 authorities and private giving and service. And I think probably that we each have to learn from each other.

(20:37) Now in the 29 -or whatever it is- years to the past, we've realised that one has to change. And I think one of the most important things in any organisation, is willingly to look at yourself critically and ask “Are we really corresponding to the needs of today?” Because what was right yesterday, may well have been right yesterday, but is not necessarily right today.

(21:13) And although it's easy to stand up before a microphone and say that, it is not always so easy to do it, not if it's something you've been concerned with for a long time. But I know that it's got to be done. And I know that criticism is often essential and healthy. And so we know that in our field too we have to adapt and modernise, and change.

(21:46) The film shows you that one of the things we realised quite a long time ago now, was that disabled people will want to marry, some will, and that married for most of them has brought great fulfillment, and a whole new life. But in the kind of homes we had, it was very difficult to provide the accommodation for a married couple. And then we realised that we really held the part: if we didn't provide the accommodation, they couldn't get married. There were other families, already married, before one member had become disabled, and he was forced, or she was forced, to go into institutional care, breaking up the family. And therefore, there is a tremendous need for married accommodation. And one or two homes have already built around themselves little bungalows or flats where married people can live.

(23:00) The point is that if the disabled member is very heavily disabled, even though you provide the right accommodation, and even with all the progress that has been made by local authorities in providing home help an so on, it will not be possible, unless there is a real backup, and this is one of the things that your project in Bournemouth is pioneering. Because once this stage of the project, the home has been built, there will, in due course, and I hope it won't be very long, to build around it little units where families who are disabled or one of whom is disabled, can live; perhaps, where individual disabled people can live, and all the economic units.

(24:05) Take a family, in which the husband has perhaps dived into a pool that was too shallow and broken his neck, so he's paralysed. Either his wife starts to spend all her time looking after him, in which case they are dependent upon Stage A, or she goes out to get a job, he's helpless at home. But here in the new project at Bournemouth, there will be backup facilities from the home. The wife can go out and be a wage earner, not being dependent upon the State, knowing that when she's away her husband's looked after, if anything goes wrong somebody will come in.

(24:58) There will also be, in the home itself, one or two beds kept vacant in case the disabled member gets so ill that he needs to be taken into, as it were a hospital; so instead of going away into hospital, he moves into a bed into the centre.

(25:22) Most Important of all, the whole idea is based upon flexibility, because no man can really foresee what the future need is going to be. And I, knowing the strength of the team here in Bournemouth, with Dr Byrne, and Betty and Leslie Donovan, and Mrs Holmes and the others, knowing the strength that they make as a team, and the generosity that has already been shown in Bournemouth, I know that this project is going to pioneer a new road in this field of disability.

(26:11) And in doing so, it's going to open up new opportunities to the disabled to lead the kind of life they want. And I think, if I may say this before I close, but what I've learnt from my involvement such as this is, with the disabled and those who work for them, and with them, or who give towards them, is this: when we look at the problems of the world, so many, so great, some of them so insoluble, we say to ourselves “What can I do?” If it's the problem of starvation in the developing world, we think it's hopeless that so many, 'my few pounds will do nothing', there are other problems of a different nature that we feel 'there's nothing I can do'. But the point is, we should not look at the problem in its totality, we should look at what I can do. And be satisfied with making up our mind as to 'whatever little I can do, I'm gonna do it'.

(27:32) In other words, it's not really the great things that count in life, it's the small things that count each in their own way to us as individuals, and doing those small things in a great way, and when all is done and finished, the real test will be “What have I done relative to my opportunities and my resources?” And in that, I think, Hilary and others like her indicate what can be done once we make up our mind and have the will.

(28:19) And I would like to say thank you for the opportunity that I have been given to speak at this opening meeting tonight. And I would like to offer my warmest wishes to all those connected with this project, that they will get the response that they need in order to complete their building and bring this new home into being.

And I thank everyone one of you who've been good enough to give up this evening and come and make this meeting possible. Thank you very much.

28:55 to 29:05: *applause*.

29:05: end of recording.

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