

Progress In Implementing The New Zealand Disability Strategy

2003 – 2004

**Fourth Annual Report from the
Minister for Disability Issues
to the House of Representatives**

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Minister's Foreword

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It gives me a great deal of pleasure as the Minister for Disability Issues to present the fourth progress report on the implementation of the *New Zealand Disability Strategy*.

This year all government departments, as well as three Crown entities, have reported on what they have been doing to implement the Strategy. Only government departments are required to report, so it is very encouraging to find organisations from outside the core Public Service such as the Accident Compensation Corporation, Sport and Recreation New Zealand and the Housing New Zealand Corporation, getting behind the Strategy.



In the first three progress reports I focused on what government agencies were doing to implement the Strategy. However, I am concerned that we do not get caught up in the detail of each year's activities, no matter how excellent they may be, and become complacent.

This year for the first time the progress report puts government activities within a broader context. This report provides a snapshot of the overall issues and trends that are relevant to the Strategy's objectives. It uses this information, including statistics from the 2001 Disability Survey and other recent research, to provide a baseline against which to measure progress.

The government introduced the *New Zealand Disability Strategy* because disabled people are seriously disadvantaged in our society. Therefore it is not surprising the contextual and baseline information in this report shows that disabled people have lower levels of educational attainment, lower employment incomes, a poorer general health status, less choice in housing, and higher unemployment rates than the general population. Disabled people also face barriers to accessing public transport and find accessing disability support services to be overly complicated and sometimes inequitable.

This situation is not going to change overnight. Many disabled people are caught in a cycle of deprivation, with low incomes and poor access to the support services and working arrangements that might allow them to move from their marginalised position in society. It is a difficult cycle to break.

However, I remain confident the *New Zealand Disability Strategy* provides the best long-term plan for breaking the cycle. What is more, I am proud of a number of key activities described in this report that demonstrate the real commitment our government has to ongoing investment in the systematic implementation of the Strategy's actions and objectives.

Over the last year, highlights include but are not limited to:

- New Zealand's efforts, in partnership with disabled people, at the United Nations negotiating a convention on the rights of disabled people
- work analysing the post-census disability surveys and the decision to fund a third and fourth survey in 2006 and 2011
- the introduction of the New Zealand Sign Language Bill
- the establishment of a major review of long-term disability supports
- the development of a number of innovative initiatives and pilots to help disabled people who want to work get into work
- support for the recommendations in the National Health Committee's seminal report on the lives of adults with an intellectual disability
- changes to the rules of the Invalids Benefit to make it easier for people to move into employment
- the inclusion of disability chapters in a number of other key government documents such as the *New Zealand Housing Strategy* discussion document and the *Action Plan for New Zealand Women*.

It is important for government to maintain this focused effort alongside the continual improvement in our knowledge about, and measurement of, what works. This is why I am pleased our reporting process is providing more information and in this way can be used to help us collectively implement the Strategy. I intend to build on this approach for future reports.

I look forward to continually improving our understanding of what matters most and how to make the best use of all our resources so that, in the future, disabled New Zealanders can say they live in "a society that highly values our lives and continually enhances our full participation".



Hon Ruth Dyson
Minister for Disability Issues

Message from the Disabled Persons Assembly

As the only national pan-disability organisation owned and operated by disabled New Zealanders, the Disabled Persons Assembly (DPA) welcomes the opportunity to preface this progress report.

We are encouraged by the continuing commitment of government agencies to the New Zealand Disability Strategy's implementation. It demonstrates a raised consciousness of the whole of government approach to a whole of society strategy. However, there are still some areas where we are concerned that the kaupapa may not yet be well enough understood. Therefore, we have used this opportunity to raise issues with three critical areas for implementing the Strategy.

Over the last year we were pleased to see strong challenges made and opportunities presented for the provision of disability support services, particularly at the *'Nothing Special'* conference and in the National Health Committee report *To Have an 'Ordinary' Life*. We believe these left no doubt about the merits of a 'supported independent living' approach, and of its clear alignment with the objectives of the Strategy. However, government support for this approach is conspicuous by its absence. DPA urges government to work towards ensuring access for disabled people to supported independent living.

Another area of concern is around bioethics. Despite the fact that people with impairments are the target of much of the development of genetic technologies, our participation in the debate about these issues is sorely lacking. That lack of involvement requires urgent attention.

Last, but not least, we note that there is little work to report in relation to objective one of the Strategy i.e. educate for a non-disabling society. We believe the successful approach of the Like Minds, Like Mine Campaign, which focuses on people with experience of mental illness, would be well suited to an extension to all areas of disability. We look forward to government support for the development of such an initiative.

The Strategy is now in its fourth year of operation. It's time to raise the bar!



Mike Gourley
President DPA New Zealand

Introduction and Background

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THE NEW ZEALAND DISABILITY STRATEGY

A partnership between disabled people and government underpinned the development of the *New Zealand Disability Strategy* (the Strategy). It was launched in April 2001 following extensive consultation and continues to be embraced by government and the disability sector as the best action plan for achieving an inclusive society.

The substance of the Strategy's vision, 15 objectives, 113 actions and underpinning principles, challenges most aspects of the way society has historically dealt with disability issues. It introduces requirements for government agencies and the wider community to transform their understanding of disability and to take many practical steps.

The Strategy shows how and why society should move from considering disability issues within a welfare or medical framework to understanding disability within a rights framework using a social model. It recognises that disability results from barriers people face when society does not take into account their impairments. The continued implementation of the Strategy requires progressively more sectors of the community to embrace these fundamental shifts in how to think about disability and to make the consequential changes in their areas of influence.

REPORTING REQUIREMENTS

This annual report to parliament is required under the New Zealand Public Health and Disability Act 2000. To inform this report, government departments are required by Cabinet to develop departmental plans for implementing the Strategy and to provide annual progress reports on how they are carrying out their plans. This year three Crown entities have also voluntarily chosen to report on their activities in relation to the Strategy.

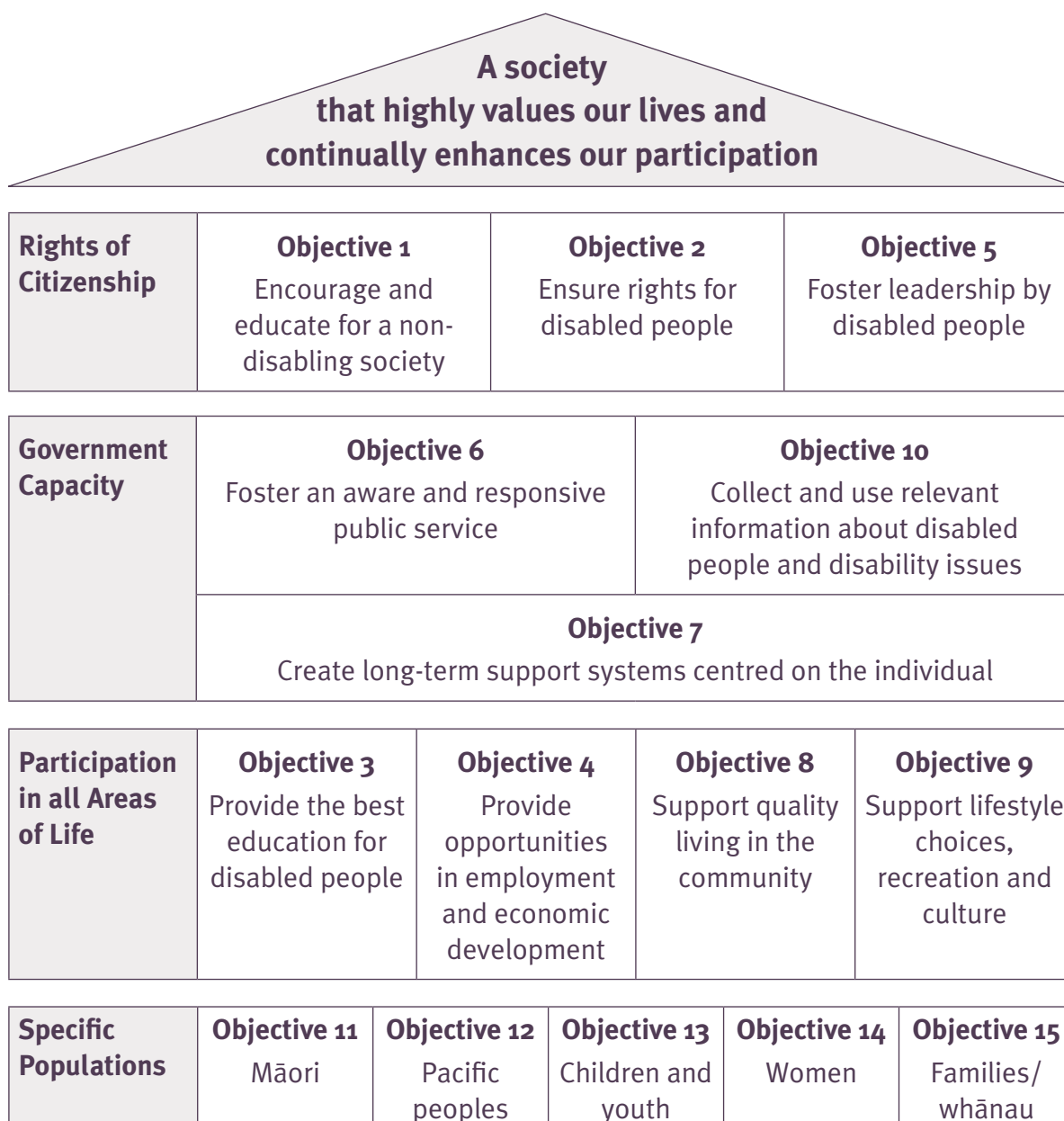
Reporting can and should be about more than holding government agencies to account for their activities. An underpinning theory of the Strategy is that an increased understanding of disability as presented in the Strategy will help to achieve the long-term transformation of New Zealand from a disabling to an inclusive society.

The reporting process can promote this understanding.

Reporting can also help us to understand the current situation and status of disabled people. In this way, this report can collect and present knowledge and ideas and improve our capacity to move towards the Strategy’s vision.

STRUCTURE OF THIS PROGRESS REPORT

Last year, the progress report grouped the 15 objectives according to four general themes outlined in the diagram below.



Adapted from a model developed by the National Health Committee, 2003

These groups do not reflect a hierarchy of priority nor are they mutually exclusive. Progress towards the vision of the Strategy requires simultaneous progress in all groups and work towards one objective may contribute to all.

This report adopts the same organising principle, with some minor adjustments. There is a chapter for each of the four themes that summarises activities undertaken by government agencies between July 2003 and June 2004 according to the Strategy's objectives and actions. There is also additional contextual information at the front of each chapter which is not confined to the reporting year. This is designed to give a better sense of how the reported activities might connect to the overall desired outcomes and how we might measure or show progress towards them.

ARE WE CREATING A MORE INCLUSIVE SOCIETY?

Previously, the progress reports were based solely on self-reporting by government agencies. Since the launching of the Strategy in 2001, every government department has undertaken activity in response to the Strategy. We might surmise, therefore, that every department has contributed in some way to getting better outcomes for disabled people. But this is very difficult to demonstrate. Change often takes years to show up in statistics that indicate outcome status and, when it does, it is not usually possible to show a definite connection between particular activities and outcomes.

One way of tracking progress is by making transparent:

- the current situation faced by disabled people, using available information on trends
- the key factors identified as disabling
- the key assumptions about why particular strategies and activities should lead to improved outcomes, and gaps in current activity.

This information can collectively provide a baseline for measuring change and determining trends in the future.

The main statistical information on trends for overall outcomes is found in chapters three and four of this report and uses the 2001 Disability Survey data. Clearly, this information cannot provide any indication of progress

since the launch of the Disability Strategy which was also in 2001. However, it gives a good sense of some of the problems the Strategy was developed to address. Moreover, following the next census and the 2006 Disability Survey it will be possible to get a better sense of whether the Strategy has made a difference.

This report does not provide comprehensive contextual information for each chapter. Rather, it provides a snapshot of issues and trends. This will be built on in future years to enhance the effectiveness and relevance of the reporting process to help us make systematic progress towards an inclusive society. The Office for Disability Issues welcomes contributions of information to improve their knowledge and for inclusion in future reports.

Chapter One: Rights of Citizenship

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Objective 1 Encourage and educate for a non-disabling society	Objective 2 Ensure rights for disabled people	Objective 5 Foster leadership by disabled people
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CONTEXT: ISSUES, ACTIVITIES AND TRENDS

‘Increasingly, disability is seen as a result of how society treats its citizens. Failure to recognise that we can’t all see signs, read directions, hear announcements, reach buttons, have the strength to open heavy doors and have stable moods and perceptions, diminishes the ability of many people to live independently and participate fully in society. Because disability relates to the connection between people with impairments and the environments in which they live, failure to accommodate their different abilities and lifestyle amounts to discrimination.’

(Human Rights in New Zealand Today, The Human Rights Commission, August 2004)

The adoption of a rights-based framework for the Disability Strategy recognises that, all too often, disabled people are not able to enjoy their human rights and freedoms on an equal basis to other citizens. This international issue has been attributed to a general lack of knowledge and understanding within society about disability, and also to the lack of disabled people participating in decision-making processes around policy or services that affect them. In 2002, a report to the United Nations noted that ‘the core problem in the field of disability is the relative invisibility of persons with disabilities, both in society and under the existing international human rights instruments’ (Quinn and Degener, 2000).

Activities around the three objectives covered in this chapter should work together to address these problems in New Zealand. The assumption is that education about disability and rights, a strong legislative rights framework that acknowledges disability issues, and leadership by disabled people will collectively cover and/or influence all the power bases of a democratic society.

Wide public understanding of rights and disability issues ensures both the political motivation and individual capacity within society to honour those rights. This includes the capacity of those who make and those who administer the law. An effective legislative framework helps promote understanding and provides for remedies. Leadership by disabled people raises the visibility of disability and ensures experts are involved in monitoring. Participation of disabled people in policy-making around services that affect them reinforces a fundamental right to autonomy. The catch cry of the disability movement throughout the world is ‘nothing about us without us’.

Key activities

1. One of the main activities for New Zealand in the area of rights has been at an international level. The United Nations has agreed to develop a convention on the rights of disabled people to make disability issues within human rights more visible, to help shape human rights norms to meet the particular circumstances of disabled people, and to make obligations clearer for all countries.

The process for developing this treaty contributes to all three objectives in this chapter. The negotiation and consultation process on the detailed content of the convention raises awareness of what recognising human rights for disabled people means for the various government agencies. Also the New Zealand delegations to the United Nations have modelled partnerships between government officials and disabled New Zealanders who represented the Human Rights Commission, the Mental Health Commission and the Disabled Persons’ Assembly (DPA).

2. Another major activity aimed at improving the enjoyment of citizenship rights by disabled New Zealanders is the ongoing implementation of the *Like Minds, Like Mine* campaign: a project to counter stigma and discrimination associated with mental illness. This project has been underway for more than six years and involves mass media advertising as well as a diverse range of capacity building, advocacy and awareness-raising initiatives. Much of the process has been evaluated, providing useful information about how to improve the campaign. Significant findings have supported the use of mass media, careful and inclusive strategic planning, increased targeting, increased participation of people with an experience of mental illness and increased advocacy using a human rights model.

3. In last year's progress report it was noted that work had begun on getting New Zealand Sign Language officially recognised. The New Zealand Sign Language Bill received its first reading in parliament in June 2004, and was referred to the Justice and Electoral Select Committee, unopposed. This Bill acknowledges, for the first time, that Deaf people have a right to use their own language. Public submissions on the Bill have been called for.
4. Another activity of note is the development of the New Zealand Action Plan for Human Rights by the Human Rights Commission. This process has involved consultation with disabled New Zealanders and the first report outlining the status of human rights in New Zealand today contains an extensive chapter on disabled people. This is an acknowledgement of the significant rights issues for this group and should lead to, at the very least, a better knowledge and understanding of disability issues.

Gaps In Activity

There is a gap in the development of advocacy services for disabled people. The ACC has begun work in this area for their clients. However, there are no significant developments for wider groups and in wider areas of life.

The success of the *Like Minds* campaign highlights a gap – there is not yet an equivalent campaign for the wider population of disabled people.

While there are a number of small leadership initiatives and development opportunities for disabled people within the government sector, there is still a lot of room for growth in both this sector and in the private sector.

Trends

This chapter does not lend itself to statistics around outcomes. However, there is some information that can be usefully noted and possibly used as a baseline for comparison at a future date.

Inquiries and formal complaints to the Human Rights Commission about discrimination on the grounds of disability have increased significantly in the last few years, to nearly one quarter of the total. This probably indicates increased awareness and advocacy rather than increased discrimination.

Attitude-tracking surveys found improvements in public attitudes towards people with mental illness as a result of the mass media advertising by the *Like Minds* campaign. Also in an in-depth survey of people with mental

illness, over half of the participants reported reduced levels of stigma and discrimination from family, mental health services and the public. A little less than half reported a reduction from Work and Income staff and a third mentioned a reduction within the Police, Housing NZ and the media.

A survey by the Mental Health Commission of how people with mental illness are represented in the news-print media found that, compared to 1998, journalists in 2003 are more likely to represent people with mental illness in a neutral rather than a negative way. It also found an increase in positive stories about mental health issues. However, negative stories still dominate in terms of the content of what is published.

Six people who identified as being disabled and 10 people working within the disability sector received honours in the Queens Birthday and New Year honours lists for 2004. This comprises approximately 1.5 percent and 2.5 percent of the total honours list, well below the percentage of disabled people in the community.

One positive trend is the increasing number of government agencies with reference or advisory groups that include disabled people. In this reporting period, six agencies reported one or more such groups. Two government agencies signalled their intention to start such groups in the coming year.

REPORTED ACTIVITY BETWEEN JULY 2003 AND JUNE 2004

Objective 1: Encourage and educate for a non-disabling society

1.1 Develop national and locally based anti-discrimination programmes

The *Like Minds* campaign funded by the Ministry of Health published a national plan for the 2003–2005 period. This plan has taken evaluation findings into consideration and is better integrated with the Disability Strategy and, in particular, the social model of disability.

1.2 Recognise that it is disabled people who are experts on their own experience

All departments delivering services to disabled people reported consulting with the sector about specific projects or issues. Many noted they were working to develop and strengthen relationships with key community agencies (see 5.1).

1.3 *Recognise and honour the achievements of disabled people*

The New Zealand Police in-house magazine featured articles on disabled employees who have overcome work-related barriers.

1.4 *Include the perspectives of disabled people in ethical and bioethical debates*

No specific activity reported.

1.5 *Encourage ongoing debate on disability issues*

The National Health Committee published a major report, *To have an 'Ordinary' Life*, in September 2003. The report assessed the rights of adults with an intellectual disability and made detailed recommendations for change. This provoked lively discussion in the media and at conferences.

A number of conferences held over the last year have involved debate and knowledge-sharing about disability issues. These included the: Supported Living Conference, Wellington September 2003; National Residential Intellectual Disability Providers Conference, Christchurch 2004; Federation of Vocational and Support Services Conference, New Plymouth June 2003; Rehabilitation Conference, Dunedin 2003; Workbridge Provider Conference, February 2004; and Autism: Unlocking the Potential Within, Christchurch March 2004; Association of Supported Employment Providers' Conference, March 2004.

Objective 2: Ensure rights for disabled people

2.1 *Provide information for everyone about the rights of disabled people*

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2.2 *Provide education to ensure that disabled people understand their rights, recognise discrimination and are able to be self-advocates*

In February 2003, the ACC established a Code of Claimants' Rights under the Injury Prevention, Rehabilitation, and Compensation Act 2001. This code confers rights on claimants and imposes obligations on the ACC in how it deals with claimants. The purpose of the code is to meet the reasonable expectations of claimants, including providing procedures for lodging and dealing with complaints following breaches of the code, and remedies for addressing any breaches.

2.3 *Educate agencies responsible for supporting children and families & about the rights and abilities of disabled parents*

2.4 *Review human rights legislation to ensure the ongoing enhancement and strengthening of the rights of disabled people*

No specific activity has been reported on these actions.

2.5 *Investigate and, if appropriate, support development of a United Nations convention on the rights of disabled people*

The Office for Disability Issues and the Ministry of Foreign Affairs and Trade have worked with the Human Rights Commission, the Mental Health Commission and the DPA on negotiations for this convention. Since June 2003, New Zealand has assumed a facilitating and leadership role. Contributions have included being the chair of and providing drafting services for an intersessional working group set up to develop a draft text. New Zealand helped to co-ordinate informal negotiations during an ad hoc committee meeting and has made many submissions. New Zealand has also been active in negotiations around an appropriate process and, in particular, has modelled and promoted the involvement of disabled people.

2.6 *Investigate the level of access that disabled people have to independent advocacy, and address any shortfall in service provision*

The ACC reports the development of a framework for the delivery of advocacy services to claimants. This includes funding the delivery of training to advocates on the use of mediation to gain early resolution of issues and a Citizens Advice Bureau advocacy pilot. Also, community law centres are preparing a proposal to develop a handbook to help advocates working with the ACC.

2.7 *Evaluate New Zealand's performance on the rights of disabled people*

The development of a national action plan for human rights requires a comprehensive look at the existing state of affairs, a realistic recognition of priorities and a setting of practical goals for the future. The Human Rights Commission has begun this process, including consultation with disabled people. They expect to have developed the action plan by the end of 2004.

2.8 Consider disabled people whenever New Zealand's performance is being evaluated against international human rights obligations, for example the Convention on the Elimination of all Forms of Discrimination against Women, and the United Nations Convention on the Rights of the Child

The Ministry of Women's Affairs presented its fifth report to the Committee on the Elimination of all Forms of Discrimination against Women in July 2003. The Ministry of Youth Development presented its third report under the United Nations Convention on the Rights of the Child in September 2003. Both reports mention disability issues, which are discussed in chapter 4.

Objective 5: Foster leadership by disabled people

5.1 Encourage disabled people to take part in decision-making as service users, as staff in the delivery of services, and in the governance, management, planning and evaluation within all services that disabled people access

The Ministry of Health reports a project to develop ways for disabled people and their families and whānau to participate in Disability Support Services activities. The project was led by a disabled person, included consumer organisations in the steering group and undertook consultation with the sector. It resulted in a decision to establish an annual forum of representatives of national consumer organisations, a smaller group to communicate with the Disability Support Services directorate on an 'as needs arise' basis, and ethnic specific forums in key locations.

The ACC reports establishing a Consumers' Outlook Group, which includes a representative from the DPA, to seek community advice on claimant service issues, to prioritise issues of concern and to further assist the ACC in its work with claimants, particularly those with long-term disabilities. The meetings are attended by the ACC's Chief Executive Officer.

The New Zealand Police report their staff Disability Network is consulted and/or advised of policy development and initiatives.

The Ministry of Education reports:

- the Special Education National Reference Group, which includes two disabled students, two disabled adults and family members, met with members of the Ministry's Special Education team
- a reference group for students with physical disabilities
- future plans for better monitoring of advice and reference groups to ensure the increased representation of disabled children and young people.

The Department of Internal Affairs reports their Disability Advisory Group ensures the views of its disabled employees are considered as part of the day to day business of the department.

5.2 Assist self-help initiatives, service provision and advocacy organisations run by disabled people for disabled people

A calendar focused on the Disability Strategy was developed by disabled people and distributed throughout New Zealand during October 2003. The calendar was well received by both providers of disability support services and disabled people.

5.3 Model the inclusion of disabled people in leadership roles within government departments, in order to encourage leadership by & disabled people within all organisations

5.4 Support the establishment of a leadership development and mentoring programme for disabled people

The State Services Commission reports a programme designed to improve the quality, quantity and diversity of candidates available for appointment to senior management roles in the State sector.

The Ministry of Health reports the establishment of a leadership programme. Disabled leaders in some regions will be chosen for their leadership potential and given the opportunity to acquire specific skills.

The Office for Disability Issues supported 15 people with intellectual disabilities to attend and, for some, present at the Supported Living Conference in September 2003.

A number of departments report human resource initiatives designed to develop and support their disabled staff:

- the New Zealand Customs Service reports their Performance and Development programme provides development opportunities for disabled staff
- the Department of Internal Affairs reports a management development programme to address the individual needs of disabled managers
- the Ministry of Fisheries reports management training focused on the coaching and career development of disabled staff
- the Ministry of Agriculture and Forestry reports a programme to provide disabled staff with training and development opportunities to help them perform to their potential and further their career aspirations.

5.5 Establish a register of disabled people for government appointments

The Office for Disability Issues has started work on the development of a nominations register to identify and nominate disabled people who have relevant skills, experience and qualifications for government appointments.

5.6 Make information available to disabled people and their advocacy organisations about how to influence government policy

The Office for Disability Issues worked with the Clerk of the House to translate *Making a Submission to a Parliamentary Select Committee* into plain language. The Office also developed video clips in New Zealand Sign Language with specific information on how to make a submission on the New Zealand Sign Language Bill.

The Chief Electoral Office reports improving their accessibility checklist for polling places, and further consultation with the Royal New Zealand Foundation of the Blind, the Blind Association and the Deaf Association about alternative formats for providing information.

Chapter Two: Government Capacity

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Objective 6 Foster an aware and responsive public service	Objective 10 Collect and use relevant information about disabled people and disability issues
Objective 7 Create long-term support systems centred on the individual	

CONTEXT: ISSUES, ACTIVITIES AND TRENDS

The objectives covered by this chapter acknowledge the key role government plays in achieving an inclusive society and the need for it to be well-equipped for this role.

Historically, government policy and programmes often failed to consider disability perspectives and issues. This resulted in policy which either created or ignored serious barriers to participation in society and the loss of opportunities for disabled people. The assumption behind the first two objectives of this chapter is that, if government policy and service development is informed by more aware public servants and relevant, high quality information and research, it will be more able to reflect the realities of disabled peoples' lives. Consequently it will have the capacity to ensure processes, policies and services are at least consistent with the Disability Strategy and, even better, progress some aspect of it.

The third objective in this chapter is focused on interagency issues and the overarching systems government uses for funding and providing disability supports. Changes in our understanding and approach to disability have led to the concept of 'disability supports' as a particular set of services with the common goals of participation and independence. However, there has not been a common set of principles guiding the development of support services as a whole. Rather, our support service systems reflect diverse and historic approaches to disability. Supports are funded out of more than seven government Votes and the ACC Account, each with its own goals, priorities, funding mechanisms and logic for providing them.

Currently we know that, from a client point of view, disability support services are often experienced as complicated to access and inequitable. From the government point of view there are overlaps, gaps and administrative inefficiencies. Moreover, many aspects of support services are not consistent with the vision articulated in the Disability Strategy. Some services fail to allow the personal autonomy and flexibility necessary to design the most sensible supports for an individual and there is a lack of responsiveness to cultural, gender or impairment-specific issues.

The assumption is the adoption of the Strategy as a common framework across all agencies that provide support, along with the systematic implementation of its objectives, should lead to a more coherent, equitable and easy-to-access system for providing supports. It is also assumed this improved coherency will allow for more consistent information collection across agencies about disability issues, thereby further improving the government's capacity to implement the Strategy.

Key activities

1. When the Office for Disability Issues was established two years ago, it was tasked with building the capacity of government agencies to deal with disability issues. This includes developing general initiatives to improve the awareness, responsiveness and information gathering of agencies as well as leading some cross-government policy work to improve the overall systems for providing services to disabled people. The Office's work programme aims to ensure there is a systematic approach to increasing the awareness of and solutions to disability issues across government.
2. Over the last year, the Office for Disability Issues has scoped a cross-sector project to promote coherence across government with the *New Zealand Disability Strategy* and equity of access across government-funded disability supports. In June 2004, the government agreed to a review of long-term disability supports. The objectives of the review include: advice to government on how to achieve durable improvements to the systems for providing disability support services, consistent with the Strategy; and structures and processes which allow people with similar impairments and associated needs to have improved and more equitable access to long-term support services. The review will report on options for improvement in 2005.

3. There are three main levers used to ensure government agencies consider disability issues and the Disability Strategy in their policy and service development work:

- government requires all Cabinet papers to consider the need for a disability perspective
- all government departments are required to develop work plans outlining how they will implement the Strategy, and to report progress on these plans annually (as included in this report)
- government is required by statute (the Bill of Rights Act 1990 and the Human Rights Act 1993) to ensure legislation, policy and services do not directly or inadvertently discriminate against disabled people through a failure to consider the unique life experiences and needs of disabled people.

An individual can make a complaint about the activities of a government agency to the Human Rights Commission. This has sometimes led to significant policy development activity.

4. Statistics New Zealand's post-census disability surveys of 1996 and 2001 are the first significant surveys in New Zealand to focus on disabled people as a population group. It is important to make good use of this data. An extensive report based on the 2001 Disability Survey will be published by the Ministry of Health in 2004. Also, the Ministry of Social Development conducted a more focused analysis of the 2001 Disability Survey data, looking specifically at disability and work participation.

These reports are valuable for policy development and can be used as a baseline for measuring progress across many government programmes. Data from the post-census disability surveys informs much of the status trends described in chapters three and four of this report. Therefore, it is particularly pleasing that funding has been approved for a post-census disability survey in 2006, which will allow useful comparisons to be made in the future.

5. The National Advisory Committee on Health and Disability reported to the Minister of Health and the Minister for Disability Issues its findings from a two and a half year research project which built a detailed picture of the lives of adults with an intellectual disability. Much of the information for the project was collected through talking directly to adults with an

intellectual disability. The report, *To have an 'Ordinary' Life: Community Membership for Adults with an Intellectual Disability*, provides a good model for disability research. The Committee has also published on their website nine literature reviews prepared by the Donald Beasley Institute and other background papers developed during the project.

Gaps in activity

Research into the costs of disability would fill a major knowledge gap about the impact of disability on society and the economy.

Trends

The achievement of the objectives in this chapter will particularly affect the government's capacity to achieve the objectives in chapters three and four that relate to government-funded services to support participation in all areas of life. Therefore the outcome trends in these later chapters will give the best indication of the effectiveness of activity under the objectives of this chapter. However, there is some information that can be usefully noted here and possibly used as a baseline for comparison at a future date.

Over the last 30 years, the main shift in disability support services has been from an institutional approach to community-based services. The majority of disability support services are now provided by not-for-profit agencies contracted by a wide range of government agencies. There has been considerable movement, including restructuring and reform, in the management and funding of these contracts, and in which government agency is responsible for them.

Currently, some government agencies provide services on a demand-driven basis according to a legally defined entitlement (ACC) and/or an income test (Social Development). Other services are provided out of a capped budget rationed on the basis of clinical, educational and/or vocational need. The underlying goals for providing support also differ: Education provides support to enhance education goals; Social Development is concerned with providing security and helping people into work; Health has health and independence goals; and the ACC is required to return people to their previous condition or to compensate them.

There has been no single agency responsible for developing policy for disability support, and the diverse mix of policy drivers across the agencies

with a role contributes to a lack of co-ordination between policy-makers, purchasers and providers. Currently, there is a lack of consistent and co-ordinated criteria for support across agencies and regions, and a wide range of eligibility mechanisms.

There is a current trend across all government agencies to focus on a more co-ordinated and 'whole of government' approach to service development. This should have a positive impact on the future development of disability support.

REPORTED ACTIVITY BETWEEN JULY 2003 AND JUNE 2004

Objective 6: Foster an aware and responsive public service

6.1 Develop mechanisms to ensure that all government policy and legislation are consistent with the objectives of the New Zealand Disability Strategy

The Ministry of Social Development reports work on better integration of Disability Strategy objectives in their planning processes, including a clearer link with the Ministry's Statement of Intent.

Land Information New Zealand reports incorporating the Disability Strategy into their own capability strategy as a way of making sure disability issues are part of their mainstream approach.

The ACC reports the appointment of a Rehabilitation Advisor who provides support in the development of operational and strategic policy relating to claimant rehabilitation and, where appropriate, includes a disability perspective.

6.2 Adapt public sector training to ensure that service development and service delivery are consistent with the New Zealand Disability Strategy

All government agencies report some activity to make management and staff, particularly front-line staff, more aware of and responsive to disabled people. Most agencies report including information about the Strategy in their staff induction and training programmes.

The New Zealand Police report a national awareness initiative organised by their Disability Network. This included encouraging

staff in police stations to attempt a number of tasks while using a wheelchair, crutches or darkened glasses, as well providing articles in internal newsletters about how employees with disabilities have overcome work-related barriers.

The Department of Conservation reports New Zealand Sign Language classes for interested staff, at no cost.

The Ministry of Housing reports the development of training for front-line staff to better equip them to provide services to people with mental illness. The Ministry will work together with the Ministry of Social Development, the Housing New Zealand Corporation and the Christchurch City Council to pilot this training programme.

The Ministry of Health reports the introduction of a service excellence pilot. This is a change-management process in which over 50 providers are participating. Consultation tools have been developed for employment practices and induction processes for senior and middle managers. Disabled people are being trained to introduce the tools and help with the implementation of the pilot.

6.3 *Ensure that all government agencies treat disabled people with dignity and respect*

The New Zealand Police report consultation with consumer groups to produce a comprehensive reference module on how to manage incidents with people with a mental illness.

The Ministry of Health reports a process for making sure district health boards and other health providers are aware of and responsive to disabled people, including accessibility, signage and access to New Zealand Sign Language interpreters. These requirements are specified in accountability documents.

Inland Revenue reports research to help focus on the needs of disabled clients.

The Department of Internal Affairs reports a review of all their services to find out whether they are accessible to people with disabilities and if there are any specific ways service delivery could be improved.

6.4 *Improve the quality of information available, including where to go & for more information, the services available and how to access them*

6.5 *Make all information and communication methods offered to the general public available in formats appropriate to the different needs of disabled people*

The internet has proven a great door-opener for many disabled people. The State Services Commission has used an external reference group to make sure the e-government portal is accessible, and manages government website guidelines to continue to increase accessibility.

A large proportion of departments report how they have made publications and information, including their websites, more accessible to disabled people.

The National Library reports its Print Disabilities Unit issued about 32,000 items to local authority libraries, educational organisations and disability services to support their services to print-disabled clients. A review of the Print Disabilities Unit's future position and strategic direction was also completed. As a result, there will be an assessment of future formats for audio books and of the use of digital books.

6.6 *Ensure the locations and buildings of all government agencies and public services are accessible*

The majority of government departments report on physical access. In the few buildings where access does not comply with the access standard, the relevant departments report plans to remedy the situation. All new refurbishment projects incorporate access for disabled people. A number of departments also report they ensure their cars are able to accommodate the needs of disabled staff, and they provide accessible car parks for disabled staff and clients.

6.7 *Work with territorial authorities to develop ways they can support the New Zealand Disability Strategy*

In June 2004, the Office for Disability Issues met with three metro-authorities, Auckland, Manukau and Wellington, to brainstorm how the Office and other central government agencies can work with Local Government New Zealand and territorial local authorities to support the Strategy.

Objective 10: Collect and use relevant information about disabled people and disability issues

10.1 Ensure that guidelines for research funding take into account the need for research on disability issues, include disabled people in the development and monitoring of the disability research agenda, and enable disabled people to put forward their own experiences in the context of the research

The Health Research Council uses relevance to the Disability Strategy as a criterion for prioritising research in the assessment process for its annual funding round. However, it reports very few applications that address the Strategy. In the 2002–2003 funding round, no proposals relevant to the Strategy were submitted. The Council is currently considering whether the assessment process should be changed to allow the special consideration of proposals classified as disability research. The Council is also planning specific capacity-building initiatives for the disability research workforce.

The Ministry of Research, Science and Technology reports activity to ensure the government's investment in research supports the knowledge requirements for implementing the Disability Strategy.

The Department of Labour has published a report that sets out the framework, assesses the quality of data available, and indicates priorities for addressing the gaps in information available for measuring the costs of injury.

10.2 Collect relevant and useful information about disability through all relevant surveys to inform the research programme

Statistics New Zealand is currently leading work on the development of a co-ordinated social statistics programme across government to develop more coherent and integrated statistics. As part of that work, options will be examined for improving the range and quality of official statistics on disabled people.

The Ministry of Health reports work on a national population health survey that includes the collection of disability data. The Ministry also reports work on a national mental health epidemiology study, which will help to describe patterns of mental health service use and how mental health problems and substance abuse limit people's activities.

The final report is expected be published in June 2006.

The Department of Corrections reports that information on disability was included in the November 2003 Prison Census. The Department is currently considering a more in-depth approach for the next prison census.

The new Centre for Housing Research New Zealand focuses on the information needs of the wider housing sector. It has commissioned a scoping report on housing issues for disabled people.

The Ministry of Health produced two reports that include disability data: *Health and Independence* and the *New Zealand Health Survey*.

10.3 *Use disability research, and analyse disability data, including that from the 1996 and 2001 Disability Surveys, to contribute to policy work, service development and monitoring*

The ACC produces quarterly serious injury reports to inform future improvement work, especially for injury prevention, case management practice and service delivery. The information also helps inform the development of lifetime rehabilitation planning.

The Ministry of Social Development makes information available, via its website, on working age Sickness and Invalids Benefit recipients. The objective is to provide data that may help other agencies improve their provision of services to disabled people.

10.4 *Undertake research focusing on disability issues for Māori and Pacific peoples*

See 11.3.

10.5 *Make disability research information available to disabled people & in culturally appropriate and accessible formats*

10.6 *Adopt ethical and procedural standards for disability research projects*

Statistics New Zealand identified barriers for disabled people participating in all their surveys, and provided training and guidelines to field interviewers.

10.7 Appoint disabled people as members of ethics committees

No specific activity is reported on this action.

Objective 7: Create long-term support systems centred on the individual

7.1 Ensure that overarching processes, eligibility criteria and allocation of resources are nationally consistent, but that individual needs are & treated flexibly

7.2 Ensure that government agencies, publicly funded services and publicly accountable bodies co-operate to ensure that the disabled person is at the centre of service delivery

The Ministry of Health reports the completion of a review of specialist health and disability services for older people. The aim of this project was to develop a service framework for specialist health services for older people that integrates services across physical and mental health, disability support services, primary care and other secondary services. A report will be published late in 2004.

The Ministry of Health has been the lead agency in a cross-sector project aimed at improving the co-ordination of intra-sectoral and inter-sectoral assessments and services. It reports the establishment of three pilot programmes in June 2004. It also reports work with local communities to develop networks of learning support, aimed at reducing the fragmentation of services and encouraging collaboration.

The Department of Child, Youth and Family Services reports an initiative focused on children and young people with high and complex needs. This spans two or more sectors and is designed to provide tailored services over and above what can be provided within sectors.

The Department of Corrections reports work with the Ministry of Health to develop an appropriate delivery model for providing health services to inmates, including disabled inmates. The focus is to deliver accessible support services, including needs assessment and service co-ordination, equal to the standards that generally exist in the community. It reports their living needs assessment process, which includes disability information, is intended to be progressively undertaken as part of the offender-management process, particularly for sentence planning.

The Housing New Zealand Corporation reports developing their Neighbourhood Units' working relationships with local service providers, and inter-sectoral service delivery initiatives for their high and complex needs clients, including those with intellectual and psychiatric impairments.

7.3 *Investigate the development of an holistic approach to assessment and service provision that applies across agencies and funding & sources*

7.4 *Develop and maintain effective rehabilitation services*

The ACC reports recruiting 12 lifetime rehabilitation planners who are responsible for making sure all claimants who have experienced a serious injury have a plan designed to increase their inclusion and participation in society. This holistic approach is based on assessment, the identification of support, and options that will help the claimant to achieve their rehabilitation goals.

The ACC has also produced a video for claimants who have suffered a serious injury. The video provides information for the claimants and their families and whānau, to help them to adjust to life following a serious injury.

The Ministry of Health reports the Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003 was passed by Parliament and came into effect in September 2004. The Act and related amendments provide courts with the power to order a person with an intellectual disability charged with or convicted of an imprisonable criminal offence to accept compulsory care and rehabilitation. It also allows the Family Court to order the transfer of people from prison or a mental health facility. The Ministry of Health reports the development of rehabilitation services for the intended client group and also for people with an intellectual disability who have high and complex behavioural support needs. As at June 2004, approximately 200 people were supported by these services.

7.5 *Encourage equity of funding and service provision for people with similar needs, regardless of the cause of their impairment*

In June 2004, the government agreed to a major review of long-term disability supports to be led by the Office for Disability Issues.

One of the review's objectives is to ensure more equitable access to long-term support services, regardless of whether a person's impairment is the result of an accident, sickness or a congenital condition, where they live, their gender or their ethnicity.

7.6 *Identify unmet need and develop affordable solutions to fill & these gaps*

7.7 *Improve timeliness of service provision*

There is no reported activity for these actions.

7.8 *Develop a highly skilled workforce to support disabled people*

The Ministry of Health reports working with the Tertiary Education Commission to complete an analysis of the health and disability education and training courses funded by the Tertiary Education Commission and the Clinical Training Agency. The second stage of this project aims to gain an understanding of the needs of the health and disability support sector. The project's focus is on improving the workforce/training sector interface in the health and disability sectors.

The Ministry of Health reports a nation-wide provider survey collecting data on the support workforce and a national certificate for support workers lodged with the New Zealand Qualifications Authority. These two initiatives have been part of a quality and safety project for improving the support services for older people and disabled people.

7.9 *Ensure that disability services do not perpetuate the myth that disabled people are ill, while recognising that disabled people do need access to health services without discrimination*

This is no specific action reported.

Chapter Three:

Participation in all Areas of Life

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<p>Objective 3</p> <p>Provide the best education for disabled people</p>	<p>Objective 4</p> <p>Provide opportunities in employment and economic development for disabled people</p>	<p>Objective 8</p> <p>Support quality living in the community for disabled people</p>	<p>Objective 9</p> <p>Support lifestyle choices, recreation and culture for disabled people</p>
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CONTEXT: ISSUES, ACTIVITIES AND TRENDS

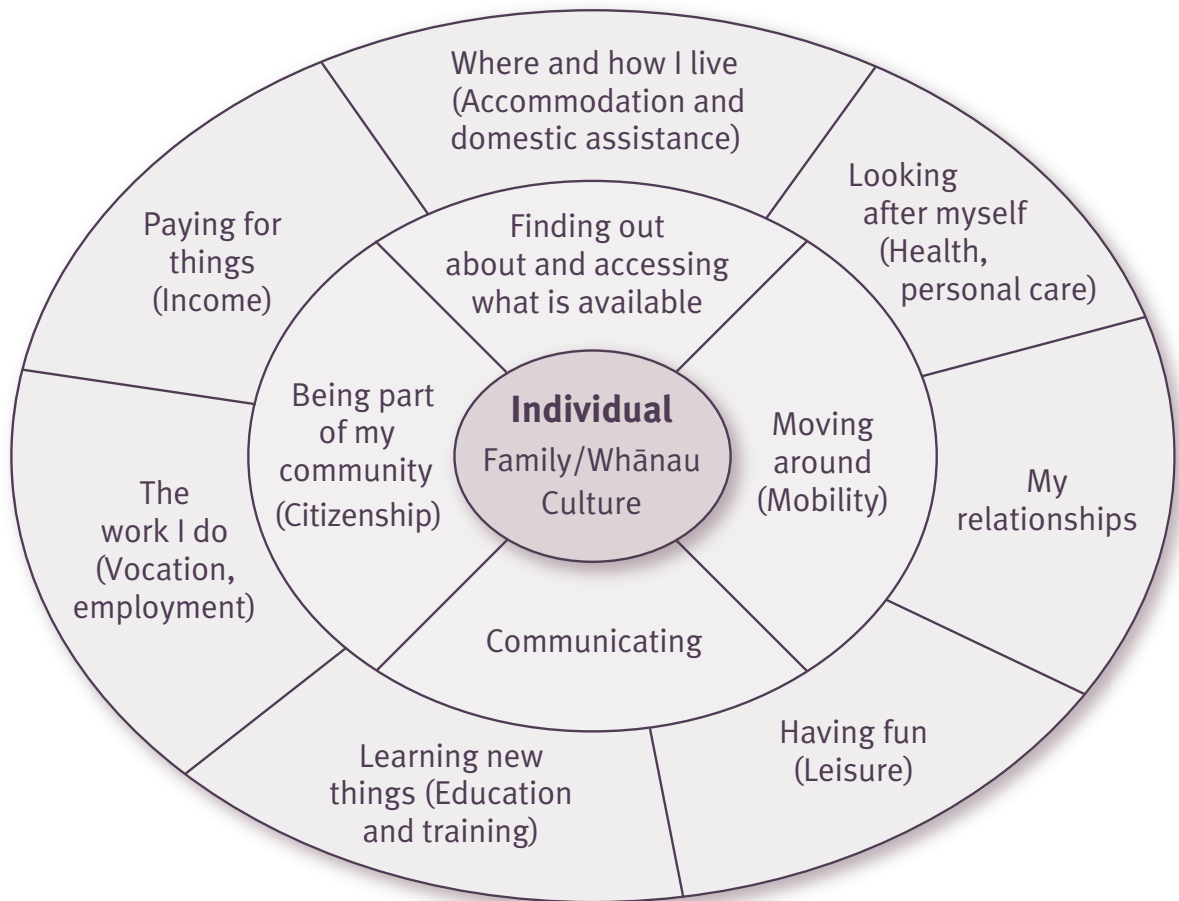
The objectives in this chapter aim to achieve participation and independence for disabled people in all areas of life. This includes enhancing their access to education, employment, housing, transport, recreation, culture and their freedom to make lifestyle choices.

Disabled people want to live ‘ordinary’ lives where they experience the same sorts of choices, rights, and responsibilities that a non-disabled person expects to experience in their life. For this to happen, the assumption is that it is necessary for government to consider what support services and environmental accommodations need to be provided in all areas of life.

Another assumption is that if disabled people are able to participate in all areas of life, with the same sorts of opportunities non-disabled people experience, statistics indicating the overall outcomes for the disabled population will be similar to those for non-disabled people. Currently there is a significant gap.

The introduction to this chapter reports on issues and trends for five areas of life. These indicate the current status of disabled people in relation to the overall desired outcomes of the Disability Strategy.

Areas of Life



Adapted from a model developed by the National Health Committee 2003

Education: issues and trends

The 2001 Disability Survey found significant differences in education outcomes for disabled people compared to people without impairments, as shown in the table below.

2001	Disabled adults in households	Non-disabled adults
No educational qualification	39%	24%
Highest qualification a school qualification	34%	42%
Post-school qualification	27%	34%

Source: 2001 Disability Survey, Statistics New Zealand

The analysis of the 1996 and 2001 disability surveys showed there was a 7 percent increase in the proportion of disabled children receiving some form of special education, a 9 percent increase in the proportion of disabled children receiving educational assessments and a 6 percent increase in the percentage of 0-4 year olds participating in early childhood education. There was also a slight increase in the percentage of disabled adults living in households who were enrolled in formal education, but the university enrolment rate was slightly lower.

The 2001 Disability Survey showed that most caregivers of disabled children had been able to enrol their child in the school of their choice. However, 7 percent (an estimated 5,000) said they had not been always been able to do so. The most common reason reported was that the school was unwelcoming.

A survey of parents of deaf students in mainstream schools found that while teacher aides are a central component of deaf students' education, and potentially have a considerable impact on the quality of the learning outcomes of these students, most aides lack the necessary skills (McKee and Smith, 2003).

The DPA's *Annual Report 2003* outlined concerns that education funding does not follow a person through life, with the result that parents and disabled people have to fight for disability support services at each level of education. The sector has also expressed concern that the current education funding framework is not flexible enough to respond to the diverse needs of disabled students.

A substantive programme of research is underway in the area of special education. This should help build a body of knowledge about what practices are effective.

Another key initiative in education is the development of a code of practice – *Achieving Equity: New Zealand Code of Practice for an Inclusive Tertiary Environment for Student with Impairments*. This is a resource for tertiary providers setting out best-practice standards.

Employment: issues and trends

The 2001 Disability Survey observed significant differences in labour market outcomes for disabled people compared to people without impairments.

The difference is particularly pronounced for full-time employment outcomes, as shown in the table below.

	Working age disabled population	Working age non-disabled population
Any employment	58%	77%
Full-time employment	29%	65%
Benefit receipt	30%	11%

Source: 2001 Statistics New Zealand Surveys, Ministry of Social Development

A Human Rights Commission equal employment opportunities (EEO) report, released in June 2004, noted that disabled people are over-represented in lower-paid occupations and the large majority of disabled people are employed in organisations not subject to mandated EEO practices. The authors noted the number of disabled people working in the public service has declined in recent years and considered disabled people to be one of the most disadvantaged groups in the current New Zealand labour force.

The Human Rights Commission figures show that, over the four-year period from July 1999 to June 2003, the number of pre-employment and employment complaints relating to discrimination on the basis of disability rose each year. The authors also noted that ‘major gaps exist in our knowledge about the position of disabled people in the labour force’.

Since this report, a multivariate analysis of disability data from the 2001 Disability Survey and the 2001 Household Labour Force Survey has been undertaken by the Ministry of Social Development. It confirms that disability has the effect of greatly diminishing the likelihood of full-time employment. The effect is much smaller when the outcome examined is any degree of employment (ie part-time employment).

A key initiative in this area was announced in the 2002 Budget. It included an additional \$44 million over four years for employment support for disabled people. In addition, the Ministry of Social Development has a major project underway to improve services for sickness and invalids beneficiaries and to help them move into paid employment, if they want to.

Health: issues and trends

The 2001 Disability Survey shows that 15 percent of disabled adults living in households reported an unmet need for at least one type of health service. This was a slight increase compared to the 1996 survey. Over 17 percent of disabled children reported an unmet need for at least one type of health service, which is the same as the 1996 survey.

International literature reviews done by the National Health Committee and the Mental Health Commission found that disabled people have higher mortality and morbidity than non-disabled people. The same reviews show there is a lack of health promotion and illness prevention information available in accessible formats.

Low income and discriminatory attitudes are considered barriers to ensuring disabled peoples' health. There is also evidence of poor prescribing practice and unnecessarily high levels of medication among adults with intellectual disability.

A key initiative to address these concerns is the Ministry of Health's Reducing Inequalities Intervention Framework. This involves tools to encourage mainstream health and disability support services to make a positive contribution to reducing inequalities, and a monitoring framework.

Another key activity is the undertaking by the Ministry of Health to address issues raised by the National Health Committee on the neglect of the health care of adults with an intellectual disability.

Housing: issues and trends

The 2001 Disability Survey found disabled adults were less likely than adults without a disability to own or partly own their home. As almost half of disabled adults aged 15-64 years have incomes of less than \$15,000, affordability is a key issue in their access to housing.

Comparisons between the 1996 and 2001 surveys show no shift towards disabled people having an increased choice in housing.

The report, *To Have an 'Ordinary' Life* (National Health Committee, 2003), noted that in many cases community homes for people with intellectual disabilities have replicated the institutional practices they were meant to replace.

Consultation undertaken by the Housing New Zealand Corporation in 2002 found not enough choice in accessible housing for people with mobility and sensory difficulties, and a lack of suitable rental-housing stock, particularly single units for people for whom living alone is the most appropriate option.

This consultation also heard reports that some local authorities use town-planning mechanisms to restrict the locations available for supported accommodation for disabled people. A survey commissioned by the Mental Health Commission in 2000 found that many district plans contain definitions, rules and policies for community care centres which affect the location of accommodation for disabled people. There are also claims of the inappropriate use of building and fire regulations adding inappropriate compliance costs for supported accommodation.

The major activity in this area is the development of a *New Zealand Housing Strategy*. This has included consultation with disabled people and the draft includes specific consideration of disability issues.

Another key activity in this area is the new Building Act 2004 and the consequential review of the building code. The Act introduces new quality standards and provisions for access by disabled people, and the review will take these into consideration.

Transport: issues and trends

Transport is critical for participation in work, education, social life, recreation and community activities. Many disabled people rely on public transport as their only means of transport.

Between the surveys of 1996 and 2001, there has been an increase in the percentage of disabled adults reporting they could not get to a bus stop or railway station easily from home (24 percent in 2001 compared to 17 percent in 1996). The 2001 Disability Survey also found that an estimated 47,700 disabled adults and children said they would travel on buses if they were made easier for disabled people to use.

The main difficulties for disabled people are boarding and getting off trains, buses or aeroplanes, and inadequate seating. Also, because most disabled people are on low incomes, the cost of more accessible transport such as taxis is a barrier to their use.

On a positive note, there has been a decrease in the percentage of children prevented from long distance travel, from 5 percent in the 1996 survey to 1 percent in the 2001 survey.

The total mobility scheme provides a subsidised transport service through taxi vouchers and financial support for the installation of wheelchair hoists in taxi vans. Currently the scheme is not available in many regions and it is often not promoted. Nevertheless, a growing demand means that often the regional budgets are capped. Furthermore, many disabled people cannot afford even the subsidised taxi fares.

Key activity in this area has begun under the government's *Transport Strategy 2002*. This strategy includes a commitment to improve the consistency and quality of the total mobility scheme across New Zealand and the development of a framework to measure improvements in access and mobility.

The other major activity is the inquiry into accessible public land transport initiated by the Human Rights Commission. This inquiry resulted from the considerable numbers of complaints about transport not accessible to disabled people. Their consultation report uses the concept of an accessible journey to identify the barriers. The report shows that at each point of the journey, from finding the information about timetables and accessible services, to arriving at their destination, many disabled people face considerable problems. In many cases there are no available services.

Gaps in activity

Many of the gaps in this chapter should come under the scope of the review of long-term supports for disabled people being led by the Office for Disability Issues in 2004–2005. This review should provide policy solutions in the longer term. However, there is a lack of shorter-term solutions to address the sometimes urgent support needs of disabled people to give them access to education, employment, health services, housing and transport now.

REPORTED ACTIVITY BETWEEN JULY 2003 AND JUNE 2004

Objective 3: Provide the best education for disabled people

3.1 Ensure that no child is denied access to their local regular school because of their impairment

No specific action is reported.

3.2 Support the development of effective communication by providing access to education in New Zealand Sign Language, communication technologies and human aids

The Ministry of Education reports:

- developing a curriculum for teaching New Zealand Sign Language in mainstream schools, to be completed by September 2005
- the contract with the Royal New Zealand Foundation of the Blind to provide educational support services now includes curriculum materials in electronic format, particularly XML, suitable for ready conversion to accessible formats, eg Braille
- the Vision Education Agency developed national standards for the production of collage materials for blind and vision impaired students
- completing a review of allocation and funding processes for assistive technology.

The Ministry of Health reports:

- jointly developing an inter-agency sensory action work plan with Group Special Education which identifies over 20 pieces of joint work, ranked for priority
- a review of the use of cochlear implants was completed in June 2004
- launching a new hearing screening pilot in February 2004
- Deaf Education Aotearoa New Zealand has established a Service Design Group to design improved educational services consistent with the Disability Strategy.

3.3 *Ensure that teachers and other educators understand the learning needs of disabled people*

The Ministry of Education reports:

- research involving the perspectives of students with physical impairments, which is expected to be published in 2004
- commissioning a literature review of the definition and diagnosis of and education support for children with severe behaviour problems
- a national programme of action research into effective services for children and young people with autistic spectrum disorders, involving nine project teams of educators, families, and children and young people (a summary of the projects will be made available in early 2005)
- an Enhancing Effective Practice in Special Education Research and Professional Development programme which aims to increase the awareness of effective practice in working with children with moderate and high special education needs who require significant curriculum adaptation
- a review to identify which special education teaching practices best improve outcomes – a literature review has been completed and a pilot study of 25 schools, including special schools, kura kaupapa Māori and schools with classes for students with special educational needs, will be completed in 2004
- five schools that trialled the Index for Inclusion self-review tool to help schools in developing their culture, policies and practices to support students with special educational needs, found positive learning experiences.

3.4 *Ensure that disabled students' families, teachers and other educators have equitable access to the resources available to meet & their needs*

3.5 *Facilitate opportunities for disabled students to make contact with their disabled peers in other schools*

No specific activity is reported on these two actions.

3.6 *Improve schools' responsiveness to and accountability for the needs of disabled students*

An Education Review Office report on the extent to which the education provided in schools meets the needs of disabled students was completed in June 2003. A summary publication, *Education Evaluation Reports in Brief 2002-03: School Sector*, was released to schools in August 2004.

All Ministry of Education purchase agreements include a clause on considering the needs of disabled people. Specialist providers are required to indicate their contribution to the Disability Strategy.

3.7 *Promote appropriate and effective inclusive educational settings that will meet individual educational needs*

The Ministry of Education reports:

- an extensive engagement process with disabled people, their families and whānau, and educators about local special education services and resources – all views and aspirations will be reflected in a summary of information to be used for ongoing service and policy development
- district level special education offices have formed 16 local reference groups
- an advisory reference group for autistic spectrum disorders provided advice to the Ministry of Education
- services at the Homai National School for the Blind and Vision Impaired were informed by the views of students gained during the preparation of their individual education plans
- continued work with local communities to develop networks of learning support, aimed at reducing the fragmentation of services and encouraging a greater collaboration of provision.

3.8 *Improve post-compulsory education options for disabled people*

The Ministry of Education reports that tertiary education organisations get a Special Supplementary Grant to contribute towards supporting students with disabilities who have high-cost support needs.

Information from tertiary providers about participation, retention and achievement statistics and reports on disability support are being analysed.

A resource centre for deaf and hearing-impaired tertiary students has been established in Auckland. This will offer services from August 2004. The overall aim of the centre is to raise participation and achievement by deaf and hearing-impaired tertiary students in the Auckland region through the provision of assistive resources.

Objective 4: Provide opportunities in employment and economic development for disabled people

Planning and training for entering employment

4.1 Provide education and training opportunities to increase the individual capacity of disabled people to move into employment

The Department of Labour reports that the Community Employment Group supported 13 capacity-building and/or community employment initiative projects for disabled people.

The Ministry of Social Development reports a policy review which identified a number of options to strengthen the Training Incentive Allowance programme. These have not yet been put into effect.

The Ministry of Economic Development reports offering a disability scholarship in 2003 to enable a person with a disability to study at a university.

4.2 Enable disabled people to lead the development of their own training and employment goals, and to participate in the development of support options to achieve those goals

No specific activity is reported for this action.

4.3 Educate employers about the abilities of disabled people

The Department of Labour, in partnership with the EEO Trust, has completed a project, People Power – Successful Diversity at Work, aimed at promoting the value of a diverse workforce to employers. The project involved the collection of around 50 successful workforce diversity stories from New Zealand employers.

Disabled people are highlighted among these case studies, which are available through the EEO Trust's website. Selected case studies are also featured in a publication available from the Department of Labour.

4.4 *Provide information about career options, ways to generate income, and assistance available for disabled people*

The Department of Labour publication, *WorkINSIGHT*, has included a generic profile on the barriers disabled people face entering employment, along with information on organisations that support disabled people in their transition to work.

4.5 *Investigate longer-term incentives to increase training, employment and development opportunities for disabled people*

The Department of Labour reports that their future of work research fund has targeted labour market issues for disabled people.

4.6 *Ensure a smooth transition from school to work*

The Department of Labour reports identifying the problems facing young people with disabilities in making the transition from school to work. Work is beginning on policy options for addressing the issues.

4.7 *Investigate the requirements of the International Labour Organisation Convention on Vocational Rehabilitation and Employment, with a view to ratification*

No specific activity is reported on this action.

Employment and economic development

4.8 *Encourage the development of a range of employment options recognising the diverse needs of disabled people*

The State Services Commission reports extending the Mainstream programme to fund at least 20 new two-year placements. The Mainstream programme is a supported-employment programme for disabled people with significant impairments that operates across the state sector. Currently, its coverage extends to 146 State sector agencies and 554 schools, with around 205 placements.

The ACC reports the start of a pilot return-to-work programme to provide opportunities in employment for disabled people who, because of their injury, would not otherwise be likely to enter mainstream employment. Work has been commissioned from the Alan Bean Centre to identify ways of helping these claimants back to work.

The Department of Labour reports work on a set of occupational health and safety resources to help staff recognise disability issues and reduce barriers. It also reports completing a major literature review looking at comparative international practice in getting injured people back to work.

4.9 Ensure disabled people have the same employment conditions, rights and entitlements as everyone else has, including minimum wage provisions for work of comparable productivity

The Department of Labour reports the introduction of the Disabled Persons Employment Promotion Act (Repeal and Related Matters) Bill, which covers the operation of registered sheltered workshops. Changes relating to this Bill, including the end of blanket exemptions from the minimum wage, are being implemented over a transition period that began in 2001 and expires on 1 July 2007. These changes include:

- working with key disability groups to educate staff and residents of vocational rehabilitation services and sheltered workshops about the changes
- developing guidelines for under-rate worker permits and the transitions to waged work
- setting measures and initial targets/standards for sustainable employment – it has been agreed these measures will cover income support beneficiaries, including non-work tested clients.

4.10 Make communication services, resources and flexible workplace & options available

4.11 Operate equal employment opportunity and affirmative action policies in the public sector

Most departments reported on their EEO and good employer practices with regard to disabled people and claimed the appropriate

recruitment, selection, training, mentoring and provision of support to help overcome barriers to staff reaching their potential. Some departments noted the use of wellness leave and flexible work practices by all staff members, including those with disabilities.

The Ministry of Health reports a database for managers employing disabled staff.

The Department of Child, Youth and Family Services reports work to identify whether there are pay-equity issues for their disabled employees by reviewing the outcomes of recent performance development and assessment processes.

A number of departments report efforts to ensure workplace equipment helps to remove barriers to disabled people's ongoing performance.

4.12 Investigate a legislative framework for equal employment opportunities across the public and private sectors,

4.13 Ensure disabled people have access to economic development & initiatives

4.14 Encourage staff and service organisations (eg unions) to appoint or elect disabled people as delegates and members of their executives

No specific activities are reported for these actions.

4.15 Ensure that the needs of disabled people are taken into account in developing more flexible income support benefits, to make access to work and training easier

The Ministry of Social Development reports:

- changes to the rules for Invalids Benefit to make it easier for people to move into employment
- changes to Disability Allowance forms so that people with permanent disabilities no longer need a General Practitioner to confirm their disability is ongoing when they renew their Disability Allowance

- five demonstration projects, *EmployAble: Nga Pukenga Hei Whai Mahi*, designed to support and to develop opportunities for Sickness and Invalids Benefit recipients to enter the paid work force – a final evaluation report on will be completed in 2004.

4.16 Review income support provisions to ensure they provide an adequate standard of living

The Ministry of Social Development reports:

- in Budget 2004, the government announced its decision to increase its direct funding to vocational service providers through contracts and to stop funding these services through the Disability Allowance – this change allows disabled people to receive their disability allowance entitlement and is to take effect from 1 July 2005
- a pilot has been established in each Work and Income region to deliver enhanced case management for Sickness and Invalids Benefit clients that will focus on ensuring the clients receive their full and correct entitlement, and on identifying clients' needs and aspirations
- all Work and Income 2003/2004 regional plans included a demonstrated focus on the effective delivery of services to disabled people.

Objective 8: Support quality living in the community for disabled people

Living in the community

8.1 Increase opportunities for disabled people to live in the community with choice of affordable, quality housing

The Housing New Zealand Corporation reports:

- starting a disability audit process for all their houses
- a Suitable Homes Service which uses case managers to help disabled people find a suitable or adaptable home
- updating the computer system and implementing a quality management system to manage applications for modified housing

- reviewing existing guidelines and procedures for the Suitable Homes Service
- developing a priority framework for establishing new housing in response to demand, as part of a housing partnerships approach
- adding 87 houses to the community housing portfolio that are rented to community groups, including those providing supported housing for disabled people
- modifying 570 properties, including modifications to meet the specific needs of disabled clients.

The Ministry of Health reports relocating people with intellectual disabilities living at the Kimberley Centre into residential services. At the end of June 2004, 42 people had left the Kimberley Centre. Some people have moved into existing homes and the rest have moved into purpose-developed homes. A large number are in the process of leaving. It is a complex process and requires extensive collaboration between all agencies, and the positive involvement of residents, families and welfare guardians of residents, and the Kimberley staff. All people are expected to have left the centre by 30 June 2006.

The ACC reports a detailed proposal on the planning and viability of supported accommodation for younger claimants currently living in inappropriate accommodation, such as rest homes for older people.

The Ministry of Housing reports a review of the Residential Tenancies Act 1986, which will consider the rights of people in supported accommodation and whether they are adequately protected.

8.2 Support disabled people living in rural areas to remain in their own communities by improving their access to services

No specific activity is reported for this action.

8.3 Support the development of independent communication for disabled people

The Ministry of Economic Development reports it is establishing a telecommunications relay service (TRS) to help meet the telephone communication needs of deaf, hearing-impaired and speech-impaired New Zealanders. Sprint International New Zealand has been appointed

to provide the TRS on a nationwide basis. The TRS is scheduled to be launched in November 2004.

The New Zealand Police report an evaluation of emergency communication systems for deaf people. This includes teletypewriters and facsimile machines and alternative options such as text phone messaging, e-mail and the TRS. The TRS was found to be the most promising emergency communication tool.

8.4 *Ensure disabled people are able to access appropriate health services within their community*

The Ministry of Health reports working on raising the awareness that the actions of mainstream health and disability support services can contribute considerably to tackling disadvantage and to reducing inequalities between population groups. This includes the disabled population.

Moving around the community

8.5 *Require all new scheduled public transport to be accessible in order to phase out inaccessible public transport*

There have been four initiatives reported with objectives which aim to address the needs of disabled people's access to transport. These are:

- an inquiry into accessible public land transport by the Human Rights Commission
- a review of the Total Mobility programme by Transfund
- the passing of the Land Transport Management Act which provides for an integrated, long-term approach to land transport funding and management, with greater emphasis on social and environmental needs, including improved access and mobility
- a review of patronage funding of public passenger transport by the Ministry of Transport, including considering changes consistent with the government's accessible transport objectives (eg low-floor buses).

8.6 *Encourage the development of accessible routes to connect buildings, public spaces and transport systems*

The Land Transport Safety Authority reports developing and publishing standards and guidelines for installing pedestrian facilities for people with vision impairments. It also reports including disability issues in a pedestrian network and facilities design guide for the planning and engineering of pedestrian facilities.

8.7 *Develop nationally consistent access to passenger services where there is no accessible public transport*

No specific activities have been reported.

Objective 9: Support lifestyle choices, recreation and culture for disabled people

9.1 *Support disabled people in making their own choices about their relationships, sexuality and reproductive potential*

No specific action is reported.

9.2 *Provide opportunities for disabled people to create, perform and develop their own arts, and to access arts activities*

The Ministry for Culture and Heritage reports activities to improve the memorandum of understanding with each Crown entity administered by the Ministry. These improvements involve requirements to report progress in reflecting the Disability Strategy, including information on how the activities involve disabled people.

9.3 *Educate arts administrators/organisations and other recreational and sporting organisations about disability issues and inclusion*

Sport and Recreation New Zealand reports consultation with the disability sector to review their *No Exceptions – Sport Strategy for People with a Disability*. Ways of improving participation rates have been identified and an implementation plan drafted and circulated for comment.

9.4 Support the development of arts, recreational and sports projects, including those run by and for disabled people

The Ministry for Culture and Heritage reports considering the needs of disabled people in their development of policy and legislation.

The Department of Conservation reports a consultation process regarding track upgrades and making tracks more accessible. The department is also considering the feasibility of creating an external reference group. As a first step, the department contacted disabled people's organisations asking them to register their interest in finding out more about the department's services and opportunities.

Chapter Four: Specific Population Groups

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Objective 11	Objective 12	Objective 13	Objective 14	Objective 15
Promote participation of disabled Māori	Promote participation of disabled Pacific peoples	Enable disabled children and youth to lead full and active lives	Promote participation of disabled women to improve their quality of life	Value family, whānau and people providing ongoing support

CONTEXT: ISSUES, ACTIVITIES AND TRENDS

There are serious issues of double disadvantage for disabled people who also come into other population categories that experience discrimination (eg on the basis of gender, age or ethnicity). This is very apparent in the data on the outcome status of the population groups discussed in this chapter. The specific issues for family, whānau and caregivers also warranted individual attention in the Disability Strategy.

Cutting the Strategy, as we have done, on the basis of population groups as well as on the basis of ‘areas of life’, creates overlaps. The assumption is these overlaps ensure there are no inadvertent gaps, and the specific issues of these population groups are addressed through the proactive promotion of the issues. The following discussion of issues and trends provides an important baseline from which to measure progress for disabled people who experience double disadvantage, and for their families and whānau.

Māori: issues and trends

The 2001 Disability Survey shows that, of all groups, Māori had the highest age-standardised rates of impairment. Compared with non-Māori they tended to have more severe impairments at younger ages. Māori were also more than twice as likely to report an unmet need for transport costs. Half of all disabled Māori adults living in households had a total annual income of \$15,000 or less. Over a third had no educational qualification. This was considerably higher than their non-Māori counterparts.

The survey found nearly one quarter of disabled Māori living in households reported an unmet need for some type of health service. This compares with 14 percent of non-Māori. Having an unmet need was particularly high for younger Māori (15-24 years), where the rate was almost double that for their non-Māori counterparts. Fifteen percent of disabled Māori had an unmet need for special equipment compared to 11 percent of disabled non-Māori. Comparatively fewer disabled Māori were living in residential institutions.

A key initiative for disabled Māori was the launching in 2002 of *He Korowai Oranga: Setting new Directions for Māori Health*. This is based on the principles of partnership, participation and protection. A related action plan, Whakatataka, includes strategies for ensuring disabled Māori receive disability services to improve whānau ora and to reduce inequalities.

Pacific people: issues and trends

The 2001 Disability Survey shows that disabled Pacific people have high needs for health and disability support services, some of which are not being met. Disabled Pacific adults were less likely than their non-Pacific counterparts to use equipment, including hearing-related equipment, and disabled Pacific children were also much less likely to have ever received a needs assessment. Compared to their non-Pacific counterparts, disabled Pacific adults living in households were less likely to have access to a car, less likely to have post-school educational qualifications, and more likely to be using income support services.

Children and young people: issues and trends

The 2001 Disability Survey shows that 11 percent of children (90,000 0-14 year olds) living in households had an impairment. This was the same level as in 1996 and in both surveys boys had a higher rate than girls. Nearly half the disabled children in 2001 had more than one type of impairment. The most common was learning disability, followed by chronic condition/health problem, psychiatric/psychological problems and hearing impairment. Forty-one percent of disabled children had impairments at birth.

The 1996 and 2001 Disability Surveys show an increase in the delivery of special education services. However, compared with non-disabled youth, disabled young people aged 15-24 were less than half as likely to have post-school qualifications.

A negative trend was the 9 percent decrease in labour force participation of disabled young people (15-24 year olds). The labour force participation for all 15-24 year olds remained about the same during this period.

In recent years, the Human Rights Commission has received a number of complaints from parents about access to the services and support needed for the care of their disabled children.

In October 2003, the United Nations Committee on the Rights of the Child provided New Zealand with recommendations to improve the outcomes of disabled children. These included the better integration of disabled children into mainstream education and other aspects of society.

The *Youth Development Strategy Aotearoa* (Ministry of Youth Affairs, 2002) identified key issues for young disabled people. These included providing opportunities for connections with peers, in particular young non-disabled people, and opportunities for meaningful work and ongoing education.

Women: issues and trends

The 2002 report to the United Nations on New Zealand's progress on implementing the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) noted a concern within the disability sector that the management of the sexual behaviour and reproductive health of women with intellectual impairment has been over-medicalised and over-managed. This compromises the rights of the women concerned.

The United Nations committee that considered New Zealand's report on CEDAW in July 2003 recommended that action be taken to make sure disabled women do not suffer discrimination, in particular in the areas of employment and access to health care and loans. The committee also suggested New Zealand pay attention to ensuring married disabled women are able to be economically independent.

Women, including disabled women, have traditionally been the primary caregivers of family members. As a result, they have been the most likely to bear the costs of providing care which can include isolation from the wider community, a weakened economic position, and little time for themselves. This can create double disadvantage for disabled women.

A key initiative in this area is the inclusion of a focus on disabled women

in the *Action Plan for New Zealand Women*, launched in March 2004 by the Minister for Women's Affairs.

Families, whānau and caregivers: issues and trends

The 2001 Disability Survey found that disabled people relied heavily on their spouse, daughter, son or mother to get help for everyday activities. Nearly one fifth of parents or caregivers of disabled children reported needing respite care or carer support in the previous 12 months, and nearly half said they had been unable to get this respite care. About 11 percent of adults with a severe impairment reported an unmet need for respite care in the previous 12 months, usually because they did not know it was possible to apply for free respite care or where to apply for it.

A comparison between the disability surveys found the unmet need for respite care did not change substantially between 1996 and 2001.

New Zealand's report to the United Nations on the Rights of the Child, presented in December 2000, expressed the view that parents and families with a disabled child have a particularly hard time. Key issues noted in the report's submissions included hardship for middle income families subject to income-testing for a disability allowance, and the lack of co-ordination between services.

Problems for family caregivers of disabled people include a lack of information about available government services, the ineligibility of immediate family members to be paid carers, criteria which exclude low-cost items from funding support and general difficulties in accessing services.

A key area of activity in this area has arisen as a result of the complaints to the Human Rights Commission. The Office for Disability Issues is charged with reviewing payments to and support of family caregivers of disabled people.

Gaps in activity

There are more gaps in the reported activities in this chapter than in the other chapters, particularly for women and family and whānau. Some of these gaps will be addressed as the action plan for women and the review of payments to and support of family caregivers make progress.

Reported activity between July 2003 and June 2004

Objective 11: Promote participation of disabled Māori

11.1 Build the capacity of disabled Māori through the equitable allocation of resources within the context of Māori development frameworks

Te Puni Kōkiri reports that 12 regional whānau development hui were completed during the reporting period and the action plans being developed as a result of these hui will identify the needs of disabled Māori.

11.2 Establish more disability support services designed and provided by Māori for Māori

No specific activity has been reported.

11.3 Ensure mainstream providers of disability services are accessible to and culturally appropriate for disabled Māori and their whānau

The ACC has appointed a General Manager for Māori Development. The appointment should improve the co-ordination of initiatives designed to meet the ACC's goals of increasing access and improving outcomes for Māori claimants.

The Ministry of Health reports a partnership with the Health Research Council and the ACC in a three-year project to provide information about the experiences of Māori when accessing health and disability support services.

The Ministry of Education reports progress on the *Māori Strategy for Special Education*. Three initiatives are underway in 16 districts. These were discussed in several national forums. The Pouwhakarewa (regional Māori advisers) were noted for the excellent job they did in driving the initiatives and ensuring that all Pouārahi-ā-Takiwā (district Māori advisers) were aware of their requirements.

The initiatives include programmes to build relationships at the early intervention level and to make referral processes easier for whānau, workshops to build understanding, awareness and cultural sensitivity among special education staff to improve services to Māori, work to attract suitably qualified Māori specialist staff, projects on appropriate

cultural supervision practices and a disability expo at Ngai Tahu Hui-a-tau.

An independent study on Māori families with children and young persons with autistic spectrum disorder has been done by Massey University. In total, 19 families participated and provided a rich anthology from which a report is expected by November 2004.

11.4 *Train more Māori disability service provider professionals and increase the advisory capacity of Māori*

Te Puni Kōkiri reports its regional offices were involved in several projects, including helping:

- Tamaki Ngati Kapo, an Auckland roopu of about 200 blind Māori, to identify gaps in their service delivery – as a result, it is expected an advocacy person will be appointed
- Māori kaimahi working in the health sector in Tauranga to receive cultural supervision and training, so they are able to provide kaupapa Māori services
- agencies working on the *Waikato Employment Strategy for People with Disabilities*, which focuses on rural-based disabled Māori.

The Department of Labour reports working with disability agencies to promote labour market participation by Māori.

11.5 *Ensure that government funded or sponsored marae-based initiatives meet the access requirements of disabled people (and encourage all other marae-based initiatives to also meet those requirements)*

11.6 *Support training and development of trilingual interpreters for Deaf people*

No specific action has been reported.

11.7 *Ensure Te Puni Kōkiri undertakes a leadership role in promoting the participation of disabled Māori*

Te Puni Kōkiri reports participation in key government policy and programme development, to ensure the needs of disabled Māori are included.

Objective 12: Promote participation of disabled Pacific peoples

12.1 Increase access to, and quality of, both Pacific and mainstream service providers that deliver disability services to disabled Pacific peoples, their families and communities

The Ministry of Pacific Island Affairs reports working with government agencies, including disability service-related agencies, on the implementation and monitoring of agreed milestones in the Pacific capacity building programme of action.

The Ministry of Education reports that its Group Special Education has, with the support of the Ministry of Pacific Island Affairs, developed a Pasifika action plan. The implementation plan will be developed in 2004–2005.

12.2 Support disability workforce development and training for Pacific peoples, by training Pacific peoples as providers of disability information and services for their local communities

The Ministry of Pacific Island Affairs reports continued work on the *Pacific Workforce Development Strategy*.

12.3 Encourage Pacific communities to consider disability issues and perspectives and further their own understanding of disability through the development of community-based plans for disability issues

A national Pacific radio network, Niu FM, continues to highlight the services available to and the needs of disabled Pacific people.

12.4 Support training and development of trilingual interpreters for & Deaf people

12.5 Ensure the Ministry of Pacific Island Affairs undertakes a leadership role in promoting the participation of disabled Pacific peoples

No specific action is reported under these actions.

Objective 13: Enable disabled children and youth to lead full and active lives

13.1 Ensure all agencies that support children, youth and families work collaboratively to ensure that their services are accessible, appropriate and welcoming to disabled children, youth and their families

A key activity in this area is the establishment of a High and Complex Needs Unit (funded jointly by the Ministries of Health and Education, and Child, Youth and Family). This considers the total needs of a disabled child or young person to get the most effective outcomes. To date, over half of the disabled children in this programme have been able to have their needs met by mainstream service provision. The next largest group have progressed from high and complex needs funding to adult disability support services.

13.2 Ensure that the Youth Development Strategy recognises the needs of disabled children and youth

The *Youth Development Strategy Aotearoa*, published in 2002, includes an objective of “enabling disabled children and youth to lead full and active lives”. The Ministry of Youth Development reports work to support this objective involving disability awareness training for youth development programme providers.

The Ministry of Youth Development also reports a number of meetings with disability providers to strengthen relationships. It has developed a *Keepin’ it Real* work programme which involves training Nelson and Waikato-based disability organisations to identify special issues for young disabled people around youth participation.

13.3 Conduct anti-discrimination and education campaigns that are age- & appropriate and effective

13.4 Establish a process for including advice from disabled people on disability issues for children and youth within relevant government agencies and Commissioners’ offices

No specific activity is reported on these actions.

13.5 Provide access for disabled children, youth and their families to child-, youth- and family-focused support, education, health care services, rehabilitation services, recreation opportunities and training

Child, Youth and Family reports a six-month seconded position was funded to help with disability-related work within the department. This position provided advice and assistance to social work staff working with families with disabled children, and liaison with other

government agencies to ensure effective interagency collaboration and joint service delivery.

Sport and Recreation New Zealand reports funding support for the Halberg Trust Sport Opportunity programme. It reports that targets for support to disabled children in physical education were exceeded. It also contributed funding to the development of a programme and activities resource booklet by Scouting New Zealand. The content of the publication was sensitive and accessible to disabled people.

13.6 Improve support for disabled children and youth during transition between early childhood education, primary school, secondary school, tertiary education and employment

The Ministry of Youth Development reports ongoing contributions to the interagency youth transition work, led by the Department of Labour, on successful youth transitions for young disabled people.

The Department of Labour reports a partnership with CCS to undertake in-depth research and an assessment of barriers to career opportunities for young people. The Young People Designing their Own Future project will develop and support best practice models that facilitate interagency co-ordination.

13.7 Introduce ways of involving disabled children and youth in decision-making and giving them greater control over their lives,

13.8 Develop a range of accommodation options so that disabled young people can live independently,

13.9 Provide and evaluate educational initiatives about sexuality, safety & relationships for disabled children and youth

13.10 Ensure the Ministry of Youth Affairs and Ministry of Social Policy undertake a leadership role in promoting the participation of disabled children and youth

No specific action is reported on these actions.

Objective 14: Promote participation of disabled women in order to improve their quality of life

14.1 *Promote women's rights and provide opportunities for disabled women to achieve the same level of economic wellbeing and educational attainment as men,*

14.2 *Provide equitable, appropriate and welcoming access to services &*

14.3 *Support disabled women to live independent and secure lives in the environment and with the people of their choosing*

No specific activity is reported on these actions.

14.4 *Ensure that criteria and considerations for the health- and reproduction-related treatment of disabled women are the same as for non-disabled women*

The Ministry of Health reports work to improve disabled women's access to breast-screening services. After consultation with disabled women and service providers, national policy and quality standards were revised. These are still in the process of implementation.

14.5 *Include the perspectives of disabled women in the development of all strategies*

The Ministry of Women's Affairs' nomination service database has been upgraded to allow the names of women who identify themselves as disabled to be retrieved easily when searching for appropriate nominations. There are currently 20 women on the database who wish to be identified as disabled.

14.6 *Ensure the Ministry of Women's Affairs undertakes a leadership role in promoting the participation of disabled women, to improve their quality of life*

The Ministry of Women's Affairs launched the *Action Plan for New Zealand Women* in March 2004. The development work for this included consultation with disabled women and key agencies. Actions are identified which should improve disabled women's participation.

Objective 15: Value families, whānau and people providing ongoing support

15.1 Ensure needs assessment processes are holistic and take account of the needs of families/whānau as well as the disabled person,

15.2 Improve the support and choices for those who support disabled & people

15.3 Provide education and information for families with disabled family members

The Office for Disability Issues reports on an interdepartmental review of the payment to and support of family caregivers of disabled people.

15.4 Ensure that, where appropriate, the family, whānau and those who support disabled people are given an opportunity to have input into decisions affecting their disabled family member

The Office for Disability Issues reports part-funding the Standards and Monitoring Service to prepare a training programme to help disabled people's parents and families to become better advocates and to understand how policy is developed and implemented.

15.5 Develop a resource kit for professionals on when and how to interact with families/whānau of disabled people,

15.6 Work actively to ensure that families, whānau and those who support disabled people can be involved in policy, service development and delivery and in monitoring and evaluation processes where appropriate,

15.7 Encourage debate around responsibility for caring, payment for & caring and how to further recognise and value the caring role

15.8 Provide families and those who support disabled people with information that is accurate, accessible and easily found

No specific activities have been reported for these actions.

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SOME RELEVANT WEBSITES

ACC	www.acc.co.nz
Disability Issues, Office for	www.odi.govt.nz
Education, Ministry of	www.minedu.govt.nz
Education Review Office	www.ero.govt.nz
Health, Ministry of	www.moh.govt.nz
Housing New Zealand Corporation	www.hnzc.co.nz
Human Rights Commission	www.hrc.co.nz
Labour, Department of	www.dol.govt.nz
National Advisory Committee on Health and Disability	www.nhc.govt.nz
Social Development, Ministry of	www.msd.govt.nz
Sport and Recreation New Zealand	www.sparc.govt.nz

A full copy of the *New Zealand Disability Strategy* in a range of versions is available online at the website of the Office for Disability Issues

Report presented under the
New Zealand Public Health and Disability Act 2000 (section 8)