# Step 1: Thinking about disability issues at the start of the policy process

**In this step**, you will consider how to integrate a disability perspective throughout your policy process.

This step is intended for analysts using the tool early in the policy process, which we highly recommend. Given this, it contains links to some material in other steps, which we encourage you to consider now and then later in more depth as you move through the policy process.

Considering a disability perspective in the policy process can be part of a wider ‘commissioning conversation’. The Policy Project has a [commissioning template](https://dpmc.govt.nz/publications/policy-project-start-right-commissioning-conversation-prompts)which you can use to facilitate commissioning conversation in addition to, or in place of, your own agency’s resources in this area.

If you are not having a formal commissioning conversation for your policy project, then consider the questions below and discuss with others as appropriate.

## What can you do to consider disability before a commissioning conversation?

Consider how your own knowledge, experiences and assumptions may influence your understanding of this issue. Are you willing to test your own assumptions? Commitment from you is essential to doing a good job and is demonstrated by a courageous, curious, and thorough approach.

To get started, familiarise yourself with who disabled people are, and what the disability sector consists of.

## Who are disabled people and what is the disability sector?

The 'disability sector' includes three distinct groups:

* **Disabled people:** people with impairments who have first-hand experience of the disabling nature of society.
* **Disability community:** disabled people, partners, friends, family/whānau, relatives, unpaid carers, and others directly involved in informal support as determined by disabled people. This includes advocacy/consumer organisations made up of and representing disabled people.
* **Wider disability sector:** organisations and people (disabled and non-disabled, professional and lay people) who work in support of disabled people and disability issues. This includes service providers and funders (both government and non-government) and umbrella agencies that represent providers and consumers for particular aspects of the disability sector.

This is represented in the diagram below. 

*Diagram of structure of wider disability sector*

Individuals and organisations may belong to all three groups. When considering who to engage with around the disability aspects of your policy process, engaging with family or service providers is not a substitute for engaging with disabled people or Disabled People's Organisations (which are organisations led by, and who advocate for the disabled people they represent).

### Diversity of disabled people

[Article 1 of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)](https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-1-purpose.html)defines disabled people as "...those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others...". Every human being is a unique individual. Even a person with the same impairment as someone else may experience different opportunities and barriers because of who they are, where they live, and how they are treated by those around them. Time and context in a person's life when they may acquire their impairment(s) also inform what barriers or opportunities they may experience and how they feel about them.

Disabled people are part of the vast and diverse human experience. Just like other communities, the disability community has different groups of people who experience life in different ways. The [New Zealand Disability Strategy (the Strategy) 2016-2026](https://www.odi.govt.nz/nz-disability-strategy/?stage=Stage) outlines several points about the diversity of the disability community:

* Māori are the tāngata whenua of Aotearoa and as the indigenous people they have a special relationship with the Crown. This relationship is recorded in the founding document of Aotearoa New Zealand, Te Tiriti o Waitangi.
* Addressing the inequality that tāngata whaikaha (Māori disabled people) face is important; 26 percent of Māori identified as disabled in 2013. When adjusted for age, the Māori disability rate is 32 percent.  A Māori world view needs to be woven into all policy. This includes the cultural importance of whānau and a whānau-centred approach which differs from Western concepts of family and disability. The [Māori Disability Action Plan *Whaia Te Ao Marama 2018-2022*](https://www.health.govt.nz/publication/whaia-te-ao-marama-2018-2022-maori-disability-action-plan) by Manatū Hauora - Ministry of Health contains an illustration for the vision for tāngata whaikaha to be able to lead a good life with connection to their culture.
* New Zealand Sign Language (NZSL) is an official language of New Zealand used by some 20,000 New Zealanders, approximately 4,000 of whom are Deaf people who use NZSL as their first or preferred language.
* The demography of our country is changing, and we are increasingly becoming a multicultural society. This is important to the disability community, as people from different ethnic and cultural backgrounds can sometimes understand and experience disability in different ways to others.
* Pacific peoples make up a growing proportion of our country and of the disability community (19 percent of Pacific people identified as disabled in 2013), as do people from Asian backgrounds (13 percent in 2013). Twenty-eight percent of people from Middle Eastern, Latin American and African backgrounds identified as disabled in 2013. Over the coming decades, we will see more cultural and ethnic diversity in the disability community.
* New Zealand has an ageing population which will result over time in an increasing proportion of people experiencing disability. In 2013, 59 percent of people over the age of 65 identified as disabled. Disabled people are also living longer, and there will be an increasing number of people with age-related impairments. This is a global trend and one that is drawing greater attention to disability. Meeting the needs and challenges of our ageing population is a significant issue now, and will continue to be over coming decades.
* Gender norming plays out in the disability community, just like it does in society more generally. Disabled women and girls face different barriers to disabled men and boys.
* Disability and sexuality is also important for the disabled community. Some do not identify as part of the gender binary (male or female) or have a predominant sexual orientation. There can also be an incorrect perception that disabled people do not have sexual needs or desires.
* The international catch-cry of disabled people is ‘nothing about us, without us’. For the disability community in New Zealand, this also includes those who find it hard to, or are not able to, speak for themselves. They are amongst the most vulnerable and marginalised members of the disability community. While there may be different terms used for this group, such as people with ‘intensive support’, or ‘special’ needs, the thing in common is that they often rely on other people to support them to make decisions and to communicate.

The New Zealand Disability Strategy 2016-2026 uses the term 'disabled people'. This is based on advice from the NZ Disability Strategy Revision Reference Group and in recognition of the history of the term in the 2001 Strategy. ODI encourages all policy practitioners to use this language as recommended by the reference group.

## What do you already know about disability concepts and approaches?

Familiarise yourself with the definitions and concepts on the [things you should know](https://www.odi.govt.nz/disability-toolkit/things-you-should-know-definitions-concepts-and-approaches/?stage=Stage) page if you haven't already, and think about what preconceived ideas you have and whether they need to be challenged or reconsidered.

### Questions to get you thinking

Ask to discuss disability at the commissioning conversation with the commissioner of your policy process. Demonstrate that you have done some preliminary thinking about the following:

* Are disabled people affected by the policy problem(s)?
	+ If your policy problem(s) involves people (whether directly or indirectly), then the answer is yes.
* Are any groups of disabled people, or parts of the disability sector, more affected by the policy problem(s) than others? For example; disabled women, disabled children/youth, disabled Māori, people with learning disabilities, carers of disabled people, family members or service providers.
	+ Remember that disability is very broad, and issues can affect disabled people and others in the disability sector differently. This can be due to environmental, social or situational differences or because disabled people experience disability in different ways.
	+ How many disabled people are part of your target cohort?
		- Remember that [1 in 4 New Zealanders are disabled](http://archive.stats.govt.nz/browse_for_stats/health/disabilities/DisabilitySurvey_MR2013.aspx)
* Given your thinking so far, how significant might the disability implications be for your policy process?

## What can you do to consider disability at the commissioning conversation?

At the commissioning conversation, in addition to demonstrating that you have begun to think about disability issues (as above), you may wish to focus on the following:

* What does success look like (from a disability perspective)?
* How will you know if outcomes for disabled people will have been improved? What data do you intend to collect? How will this data be protected?
* How will you ensure that your engagement obligations are met? (to give effect to [Article 4(3) in the United Nations Convention on the Rights of Persons with Disabilities](https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html)).

You may wish to incorporate these points into your commissioning template(s).

Following the commissioning conversation, consider how to effectively integrate the thinking and discussion into your project, including into planning documents.

## Bonus step: consider conducting a ‘pre-mortem’

Consider running a ‘pre-mortem’ early in the project, or even as part of the commissioning conversation:

### What is a pre-mortem?

A pre-mortem is the opposite of a post-mortem, occurring at the beginning rather than the end of a project. Developed by Gary Klein, in contrast to other risk mitigation techniques, a pre-mortem doesn’t ask what might happen, but rather asks participants to imagine that the project has failed and determine plausible reasons for this failure. By framing the failure as having already occurred, individuals feel more willing to critique and challenge approaches, particularly when organisational hierarchies may prevent them from doing so.

To help with a useful pre-mortem, you could encourage participants to:

* work on the assumption that your current ideas will be implemented without significant alteration
* focus on the character of the policy instrument, whether it is forceful (as in legal requirements) or weak (as in symbolic)
* pay attention to the groups you’ve identified
* think back to the results of similar policies in the past or in a different context, making sure that you consider contextual differences
* pay relatively little attention to detailed factors at this stage of analysis but capture this thinking, or any issues, for further consideration down the track.