

Why it's important

Disability can happen to anyone. The rate of people in Tasmania who report having a disability is 23%.¹

Disability occurs when people with impairments to the structure or function of their bodies or minds come up against barriers that hinder their full and effective participation in society on an equal basis with others.² Some people are born with conditions that impair their capacity while for others accident, illness or age can lead to disability. Disability can be long or short term or come and go; the impairment that people deal with may or may not be visible and may not even be present some of the time.

People with disability face a range of interrelated challenges resulting in poorer health and wellbeing outcomes:

- Lower levels of education and employment
- Lower incomes, often coupled with increased costs associated with assistive technology and aids or services
- Poorer self-reported health, disproportionately high levels of secondary medical conditions (such as obesity, diabetes and dental problems) that aren't directly related to their disability
- Poorer mental health (which in itself can be a disability)
- More frequent discrimination, abuse and neglect
- Are less likely to seek health assistance, often facing barriers when they do, and more likely to find the help they receive doesn't meet their needs
- Are more likely to smoke and less likely to get enough exercise.

The barriers facing people with disabilities also impact on those who care for them. Unpaid carers also have lower incomes and poorer health outcomes than those who do not fulfil this role.



“I did one year of teacher training but they didn't want blind teachers in their system... No one saw an opportunity in giving me a traineeship or any administrative responsibility... There are a lot of people reaching their 50s and 60s now who may for a lot of their life have been unemployed or working but not to their full potential or full earning power.”

54 year old Tasmanian

Why is disability an issue for the health of Tasmanians?

Many people in our communities live with disabilities

Australian Bureau of Statistics (ABS) figures indicate that Tasmania has one of the highest rates of disability nationally with around 23% of Tasmanians living with a disability that restricts their daily activities.¹

“Disability is normal and difference is human”

www.pda.org.au

On average, at birth Australian males can expect to spend 19 years of their lives with some disability (5 of which are expected to be with a severe or profound core activity limitation). Australian females, who live longer on average, could expect to experience 21 years with disability (8 years severe or profound).³

People with disabilities are at greater risk of living in poverty

The median personal income of both people with disability and primary carers is roughly half that of people without disability or who are not primary carers; 45% of Australians with disability live in poverty or near poverty. The technologies and assistance that enable people with disability to participate in society can be expensive and these costs can push people who might otherwise manage into ‘secondary poverty’.⁴

Some people with disabilities are more likely to have difficulty living healthily

Some people with disability may have additional challenges to living healthily—for example, a higher incidence of unhealthy lifestyle factors such as smoking, alcohol consumption (particularly people with psychological disabilities), inadequate levels of exercise and poor diet. These factors are worsened by issues of accessibility and transport which lessen the options available for people with disability to engage in healthy lifestyles.⁴

In 2010, the Australian Institute of Health & Welfare reported:

- About 69% of adults aged 18–64 years with severe or profound disability were overweight or obese, compared with 58% for those without disability.
- Compared to people without disability aged 15–64 years, people of the same age with severe or profound disability were more likely to do a very low level of exercise or no exercise (43% versus 31%); to be current daily smokers (31% versus 18%); to start smoking before the age of 18 years (38% versus 22%); and were less likely to have never smoked (42% versus 61%).
- About 42% of people aged 16–64 years with severe or profound disability had seriously thought about committing suicide, including 18% who had attempted suicide. This was associated with a high prevalence of mental and behavioural problems.⁵

Tasmanians who care for people with disabilities also face health challenges

According to 2011 ABS Census data, 12% of Tasmanians provided unpaid care for someone with a disability (higher than the national averages of 5% and 11% respectively). Research also indicates carers have poorer physical and mental health (particularly depression), reduced labour market participation and lower incomes than non-carers.⁶

References & Resources

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 4. Vic Health (Kavanagh et al) 2012, *Disability and health inequalities in Australia: Research summary*: vichealth.vic.gov.au/search/disability-and-health-inequalities-in-australia.
 5. ABS 2011, 1307.6 - *Tasmanian State and Regional Indicators 2010*: abs.gov.au/AUSSTATS/abs@.nsf/mf/1307.6.
 6. AIHW 2010, *Health of Australians with disability: health status and risk factors*: aihw.gov.au/WorkArea/DownloadAsset.aspx?id=6442472761.
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 - Anglicare 2007, *Forgotten Families - raising children with disabilities in Tasmania*: www.anglicare-tas.org.au/research-library/report/forgotten-families.
 - Advocacy Tasmania: www.advocacytasmania.org.au and Careres Tasmania: www.carerestas.org.

Communities

- Find ways of enabling and valuing people with disabilities' contributions in your community.
- Lobby local government for accessible pathways, park facilities, arts facilities and events.
- Consult and consider people with disability when planning facilities and activities.
- Check whether your community group is including people with disability. If not, ask why, and remedy this.
- Do not let people be discriminated against in your community – disability can affect anyone. It could be you or someone you care about next!
- Organise your community group into assisting carers with the job of caring.
- Organise and fundraise for inclusive technology or modifications for your community's facilities.
- Ensure children with disabilities and their families are given the same opportunities as others to fully participate in school, sporting and community activities.

Individuals

For people with a disability:

- Believe that you can be healthy despite your disability. Seek advice and help to address any barriers you encounter in achieving this.
- Know your own body, how you feel when you're well and when you're not, and invite a friend, carer or advocate to help if you find it difficult to get the health care you need.

For others:

- See the whole person, not just the disability.
- Speak directly to the person with a disability, rather than through their carer, and speak with adults as adults, and children as children.
- Understand that people with disabilities are sexual beings and have the right to enjoy sexual relationships and express their sexuality in the same way as other people.
- Ask the person with a disability whether he or she needs any help. Don't just assume help is needed.
- Be aware and patient of the extra time it might take a person with a disability to speak or act.
- Be the person who makes a difference.



Workplaces (Managers, Workers, Volunteers) & Service Providers

- A guide to reporting and referring to disability is available from the *People with Disability* website: pwd.org.au/documents/pubs/Guide-to-Reporting-Disability.doc.
- Standards and guidelines concerning accessibility for people with disability are available from the *Australian Human Rights Commission* website: hreoc.gov.au/disability_rights/Standards/standards.html.
- Use web content accessibility technology as standard in the workplace.
- Incorporate into occupational health, safety and risk assessments policies and procedures around workplace issues that affect mental health including stigma and discrimination, responsibility/resourcing and effort/remuneration relationships, presenteeism, job burnout, harassment, violence, bullying and substance misuse.
- Provide Diversity Training, including Disability Awareness Education, for all management and staff as part of their induction or on-going training.
- Consult with people with disability in ensuring workplaces are accessible, and structure job roles to encourage people with disability to apply for positions.
- For workplaces and service providers providing care or services to people with disabilities, ensure:
 - People with disability are treated with respect and dignity
 - Support is responsive to a person's needs.
- Join networks working to ensure inclusion in all aspects of business such as the *Australian Network on Disability*: and.org.au and *Arts Access Australia*: artsaccessaustralia.org.

Politicians & Governments

- Assess all existing and proposed policies, programs and services to ensure that people with disability have access to participate in all aspects of social, economic and civic life.
- Built environments to allow people with disability to freely access government services, education and training opportunities, accommodation and housing.
- Ensure accommodation, housing, and public and private transport are accessible and affordable.
- Take a lead in creating opportunities for people with disability to have a job by improving disability awareness, establishing benchmarks and incentives for employers, breaking down barriers to participation in the workforce, and creating innovative job opportunities for people with a disability.
- Engender a culture across communities of valuing the contribution people with disability make to society.
- Provide funding for Diversity Training including Disability Awareness Education for politicians and staff at all levels of government and incorporate this into the school curriculum.
- Enable the public health system to take greater action on surgery for disabling conditions, such as hip replacements. Redefine such procedures currently labelled 'elective' as 'health enabling' and fund them appropriately.
- Provide funding to support cultural organisations to develop and implement disability action plans.
- Ensure adequate funding for advocacy support.
- Ensure the effective and full rollout of the National Disability Insurance Scheme.
- Provide greater recognition and support for carers.
- Ensure consultation with people with disability in the drafting and review of legislation and public services - "nothing about us without us!"