
My Experiences, My Rights:

A Monitoring Report on Disabled People's Experiences of Health and Wellbeing in Aotearoa New Zealand

Key Findings and Recommendations

1/20

Aotearoa New Zealand is a signatory of the **United Nations Convention on the Rights of Persons with Disabilities** (UNCRPD).

This means the New Zealand Government has agreed to implement the Convention's provisions, monitor progress, and report back to the Convention's Committee on **various issues affecting disabled people** (Article 33).

In 2018, the Donald Beasley Institute (DBI) was commissioned by the Disabled People's Organisations (DPOs) Coalition to **independently monitor the health and wellbeing experiences of disabled people in Aotearoa New Zealand**.

Article 25 of UNCRPD recognises disabled people's right to the highest attainable standard of health.

Key Finding 1:

Many disabled people experience financial, physical, mental, communication and sensory barriers when accessing affordable, high-quality healthcare and services.

Key Finding 2:

The health and disability support system is complex. It is often difficult for disabled people to navigate.

Key Finding 3:

Many disabled people have limited choice and control over the services, treatment and medication they receive.

Key Finding 4:

Some disabled people experience barriers when accessing public health programmes and sexual or reproductive health services.

Key Finding 5:

A lack of disability support and specialist care in rural areas has been detrimental to the health and wellbeing of disabled people.

Key Finding 6:

For many disabled people it is difficult to get an accurate diagnosis and treatment.

Key Finding 7:

Health and disability professionals often lack the disability training and awareness needed to provide disabled people with high-quality health care.

Key Finding 8:

The negative attitudes of health professionals towards disability can be a barrier to disabled people receiving high-quality health care.

Key Finding 9:

Many disabled people cannot access private health and life insurance because their disability is considered a pre-existing condition.

Key Finding 10:

Many disabled people covered by ACC (as a form of insurance) find it complex, inconsistent and overly focused on rehabilitation.

Key Finding 11:

A lot of disabled people are afraid of being denied healthcare due to prejudices held by health care professionals.

Recommendation 1:

The implementation of a more equitable health and disability support system that does not discriminate on the basis of disability.

Recommendation 2:

The implementation of a more holistic and equitable approach to disabled people's healthcare, including free primary healthcare and dental care.

Recommendation 3:

The provision of equitable health and disability supports and services in regional and rural areas.

Recommendation 4:

Improved disability rights training and awareness within tertiary health programmes and ongoing professional development.

Recommendation 5:

Improve and introduce insurance-related legislation that prohibits discrimination on the basis of disability.

Recommendation 6:

Ensure all health-specific policy and legislation is developed using a rights-based framework according to the UNCRPD.