Towards a nondisabling New Zealand

Annual Report from the Minister for Disability Issues to the House of Representatives on implementing the New Zealand Disability Strategy

December 2022

Author

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Minister's Foreword



Image description: In this photo Minister Williams is facing the camera smiling. She is of Cook Islands Māori descent. She has short brown hair, and is wearing a black top, black pearl earrings and a shell necklace.

Tēnā koutou,

2022 has been a landmark year for disabled people, and the wider disability community.

This annual report on the implementation of the New Zealand Disability Strategy 2016-2026 (the Strategy) provides a snapshot of the work across government portfolios to progress the rights of the one million disabled people living in New Zealand.

The Strategy and the Disability Action Plan 2019-2023 (the Action Plan) are important mechanisms to focus on and celebrate the combined efforts to improve outcomes for disabled people in New Zealand.

The Government is committed to building a more inclusive and accessible society and ensuring disabled people have full rights and opportunities like other New Zealanders.

In July, the establishment of Whaikaha – Ministry of Disabled People was celebrated. It was an honour to launch Whaikaha and bring to life a Ministry that many disabled people have been seeking for a long time.

The creation of Whaikaha is timely, as New Zealand 'builds back better' following the impacts of COVID-19, and shift to a whole-of-life, whole-of-whānau approach to addressing inequities and realising aspirations and opportunities for disabled people and whānau.

The Strategy, implementation of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), Declaration on the Rights of Indigenous Peoples (UNDRIP) and the principles in Te Tiriti o Waitangi are key in guiding Whaikaha's work programme. These mechanisms, associated commitments and obligations make it clear that a good life for disabled people is achieved by an all-of-government commitment to disabled people's rights and opportunities.

Whaikaha has the mandate, visibility, and over time is building (in partnership with disabled people, tāngata whaikaha Māori and whānau) its capacity to:

- lead work on cross-government strategic policy, stewardship, and public sector capacity and capability building
- support government agencies to incorporate disability perspectives and needs into their work to meet their own responsibilities to disabled people and whānau
- continue to transform Disability Support Services in line with the Enabling Good Lives approach that will give disabled people much more choice and control over the assistance they need
- lift the profile of disability and drive better outcomes for all disabled people by accelerating the realisation of the Strategy, Action Plan, New Zealand Sign Language Strategy 2018 - 2023, and implementation of the UNCRPD.

The UNCRPD reinforces that disabled people have the same rights as others. It is about making sure everyone is treated with dignity and respect, and that no one is left behind. The data on disabled people in Aotearoa tell us that much more change is required for disabled people to enjoy what every other citizen expects. The call for `nothing about us without us' is central to Whaikaha's commitment. Engagement with the disability sector is critical for Government to effect the change they seek.

I had the privilege to lead New Zealand's Delegation to the United Nations Committee on the Rights of Persons with Disabilities, that examined New Zealand's progress on the realisation of the UNCRPD. The delegation was made up of seven representatives from government agencies, including four staff from Whaikaha.

The Committee asked many questions about New Zealand, our laws and how well officials think current laws and services are working for disabled people. Overall, the committee said New Zealand is making progress and provided useful advice and ideas on how to better serve disabled people. I am now working with others in Government to think about what needs to be done to put those ideas into practice.

Other actions underway include:

- introducing the Accessibility for New Zealanders Bill in July 2022. This Bill establishes a new legislative framework to address systemic access barriers that prevent disabled people, tāngata whaikaha Māori and their whānau, and others with access needs from living independently and participating in all areas of life
- continued efforts by government agencies to improve the identification and removal of barriers disabled people experience to ensure they have the same opportunities and life outcomes as other New Zealanders
- regular reporting by agencies on their progress against work programmes they have initiated as part of their work to realise the Strategy
- continued work to improve data collection, and for the third time this report includes progress on measures against some of the Action Plan outcomes
- ongoing meetings between the Ministerial Leadership Group on Disability Issues and the Independent Monitoring Mechanism.

Looking forward to 2023, the Government will:

- make a formal response to the UN Committee's recommendations
- start work on a new Action Plan
- continue its work, in partnership with the disability community and tangata whaikaha Maori, towards implementing the EGL approach to disability support services on a national scale.

I look forward to building on the achievements outlined in the 2022 Annual Report and continuing to effect meaningful, long-lasting improvements in the daily lives of disabled New Zealanders.

Ngā mihi nui

Hon Poto Williams Minister for Disability Issues

Background

"New Zealand is a non-disabling society - a place where disabled people have an equal opportunity to achieve their goals and aspirations, and all of New Zealand works together to make this happen".

New Zealand Disability Strategy 2016-2026¹

Launched in November 2019, the Disability Action Plan 2019 -2023 (the Action Plan) aims to improve the wellbeing of disabled people through progressing the eight interconnected outcomes in the New Zealand Disability Strategy² (the Strategy): education, employment and economic security, health and wellbeing, rights protection and justice, accessibility, attitudes, choice and control, and leadership.

The Action Plan includes a package of 29 work programmes, across 13 government agencies and their partners, with a cross-agency response focussed on improving accessibility of services for disabled people, better administrative data, and increasing the employment of disabled people in the public service. The Action Plan is not static, and work programmes can be added as required. These work programmes are not business-as-usual disability programmes; they are intended to create a significant shift in outcomes for disabled people.

Whaikaha manages six-monthly reporting against the Action Plan with the Disabled People's Organisations (DPO) Coalition.

Every year, the Minister for Disability Issues provides an Annual Report to Parliament on the progress made to implement the Strategy. This report summarises activities and work programmes, underway or completed in 2022, that contribute to improving disabled New Zealanders' wellbeing through the realisation of their human rights.

The Strategy represents New Zealand's approach for the progressive realisation of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in the New Zealand context.

¹ The New Zealand Disability Strategy 2016-2026: <u>https://www.odi.govt.nz/nz-disability-strategy/about-the-strategy/new-zealand-disability-strategy-2016-2026/</u>.

 $^{^{\}rm 2}$ The relationship between the UNCRPD, the Strategy and the Action Plan is illustrated in Appendix One.

Section One: Key achievements contributing to disabled people's wellbeing in 2022

Without doubt, the most prominent achievement in 2022 was the establishment of Whaikaha – Ministry of Disabled People. While this Ministry does not remove responsibilities for disabled New Zealanders from every other government agency, it does provide a focal point.

Whaikaha was established to:

- lead a true partnership between the disability community, tāngata whaikaha Māori, and Government
- help transform the disability system in line with the Enabling Good Lives (EGL approach)³.

The appointment of Paula Tesoriero MNZM, previously the Disability Rights Commissioner, was well-received by the disability community.

While other achievements may have been less visible, they were no less important. These include:

- the United Nations Committee on the Rights of Persons with Disabilities examination of New Zealand's progress on realisation of the UNCRPD
- the UNCRPD Domestic Forum three days of examination by the Independent Monitoring Mechanism (the IMM)⁴ of the government's implementation of the UNCRPD
- the Royal Commission of Inquiry into Abuse in State Care
- the Waitangi Tribunal Wai 2575 Health Services and Outcomes Inquiry which includes claims from tangata whaikaha Maori
- further rollout of Enabling Good Lives.

Achievements by Outcome Area of the Strategy are detailed over the following pages.

³ <u>https://www.enablinggoodlives.co.nz/</u>

⁴ The IMM comprises six Disabled Peoples Organisations (DPOs), the Human Rights Commission, the Office of the Ombudsman

Section Two: Progress in the Action Plan by Outcome areas

Outcome One: Education

We get an excellent education and achieve our potential throughout our lives

Te Tāhuhu o te Mātauranga (Ministry of Education)

The Ministry of Education remained focused on disabled people's presence, participation, and progress in all levels of education as part of its 2022 work programme. This year has seen progress made with the Highest Needs Review, and New Zealand's second and third reports to the United Nations Committee on the Rights of Persons with Disabilities.

Highest Needs Review

The Government recently announced the findings of the Highest Needs Review and the high-level plan for change.⁵ Cabinet agreed in November 2022 to develop a new system of learning support for learners with the highest level of need [CAB-22-Min-0490 refers].

Policy and system changes

The voices of disabled young people and representatives from the disability community play a key role in many of the Ministry of Education's work programmes to ensure that decision-making is inclusive and guided by what is most important to disabled people and their whānau.

The Ministry of Education has continued valuable engagement with disability groups on key policy work and system changes to further improve outcomes for disabled learners, including:

 The NCEA Change Programme which will enhance the accessibility of NCEA and remove barriers to assessment by improving access to Special Assessment Conditions, creating NCEA resources for teachers around inclusive education pedagogies such as Universal Design for Learning, and including disability and learning support perspectives in the development of standards, assessments, and supporting resources.

⁵ <u>https://www.education.govt.nz/our-work/changes-in-education/highest-needs-change-programme/</u>

- Refreshing *The New Zealand Curriculum* to make sure every child experiences success in their learning, and their progress and achievement across the full educational pathway from Years 1-13 is monitored purposefully to enable school responsiveness. A curriculum Disability Voices Group has been established to support the work, comprised of disabled young people, tāngata whaikaha Māori, disabled Pacific people, representatives from the Deaf community, and whānau.
- The announcement of the Unified Funding System rates, which will provide additional funding to vocational education and training providers to support disabled learners from 1 January 2023.
- Convening a group of disability and vocational education sector experts to provide advice about how to better support disabled learners with the highest needs in vocational education and training, as part of the Reform of Vocational Education.
- Working with the Tertiary Education Commission (TEC) to improve the questions about disability that learners are asked at enrolment, and preparing to undertake joint research alongside the TEC and NZQA in partnership with the National Disabled Students' Association about disabled learners' experiences, barriers, and opportunities in tertiary education.
- Progressing priorities under the Learning Support Action Plan, such as the third phase of evaluation of Learning Support Coordinators (LSC), strengthening learning support in ngā kōhanga reo, maraebased wānanga that explore a Māori worldview on takiwātanga (Autism), and redrafting the Stand-downs, Suspensions, Exclusions, and Expulsions (SSEE) Guidelines.
- Engaging on the Education Research Evaluation and Development (ERED) Strategy in partnership with the Education Review Office and New Zealand Council for Educational Research. This work has reinforced the need for further research and evaluation on inclusive education practices and processes to inform system-wide improvement.

Impact of COVID-19 on teaching and learning

While many learners, educators, and specialists have been able to return to face-to-face learning, staff and student absences due to illness and increased anxiety of teachers, learners and whānau continue to impact learning. This has particularly impacted immunocompromised learners and staff.

COVID-19 has exposed and exacerbated existing inequalities, including the digital divide as many essential services closed physical premises and moved to remote platforms. For some, reliance on digital technology and loss of in-person interaction has caused frustration and anxiety and meant losing access to learning supports or services that require face-toface interaction. For others, increased use of digital technologies has enabled more flexibility in education delivery and allowed them to overcome previous barriers to attendance, communication, or engagement.

COVID-19 has highlighted the importance of a coherent and system-wide approach to digital technology in education. The Ministry of Education, Tertiary Education Commission, NZQA and Network for Learning are developing a refreshed digital and data strategy called "ConnectED Ako; Digital and Data for Learning", which envisages an inclusive digital society where all New Zealanders have the means, ability, and opportunity to connect with their whānau, express their cultural identities, and access inclusive services and education.

Te Amorangi Mātauranga Matua (Tertiary Education Commission)

Strengthening tertiary education responses to supporting disabled people's access, participation, and success.

The Tertiary Education Commission (TEC) has, as its primary focus, equity of access, participation, and outcomes for all New Zealanders. Within this, particular attention is focused on the needs of disabled people as they face a long legacy of being significantly underserved by the tertiary education system. The TEC is progressing work on multiple fronts to address these inequities.

The combined effect of initiatives under the disability work programme seeks to encourage and support tertiary education organisations (TEOs) to take a strong, proactive approach to improving outcomes for disabled and neurodiverse learners.

TEC's goal is to enable TEOs and the tertiary sector to better support disabled learners by improving access to, participation in, and achievement in, tertiary education among disabled people.

All work being undertaken involves disabled people as lived experience experts.

TEC operates under a living Disability Action Plan

The TEC Disability Action Plan (TEC Action Plan) documents TEC's commitment to ensuring the best possible outcomes for disabled New Zealanders. The TEC Action Plan is part of TEC's day-to-day business practice.

TEO Disability Action Plans

The first round of disability action plans from tertiary education organisations (TEO Action Plans) were received in July 2022. The TEO Action Plans are required as part of their Investment Plans.

A TEO Action Plan is a strategy for changing practices which might result in discrimination against disabled and neurodiverse people and to improve outcomes for these learners in their education journey. It helps an organisation to identify appropriate practices and offer a blueprint for change. These Action Plans will sit within wider work on Learner Success Plans undertaken by many TEOs.

The TEC has developed a sector report on the outcomes of the TEO Action Plans, with recommendations for future work. This report will be published soon. TEOs are expected to submit Action Plans again in 2023. The TEC will continue to work closely with the TEOs and the National Disabled Students Association on the Action Plans.

Kia Ōrite Toolkit

The *Kia Ōrite Toolkit*, a New Zealand code of practice to achieve an inclusive and equitable tertiary education environment for disabled learners provides current, New-Zealand-specific guidance to help TEOs to better support disabled learners. It includes both Management and Learning Support implementation toolkits to assist TEOs with best practices and the development of their Action Plans, covering all aspects of a learner's experience while studying.

The aim of the toolkit is to assist all staff to become more 'disability confident' and for managers and staff in the wider institution to take responsibility for implementing the recommendations in the toolkit and the TEC Action Plan.

Kia Ōrite is now a fully accessible website, supported by three free elearning modules for tertiary staff. In 2023, the TEC will expand these resources with the addition of culturally specific guidance for supporting tāngata whaikaha Māori and disabled Pacific learners.

The TEC has supported the creation of capability resources for neurodiverse learners.

Working with Altogether Autism and ADHD NZ, the TEC has made neurodiversity-specific capability improvement tools for the tertiary sector which are freely available online. The TEC has also expanded the content on the TEC website, adding advice on supporting learners with dyscalculia and dyspraxia. The TEC will continue to work with the sector to identify any further supports needed in this space.

The TEC is gathering more detailed data regarding supports for disabled learners in the tertiary system

2022 is the fourth year that the TEC has collected detailed data from tertiary education institutions regarding the supports they provide for disabled learners. It requires all Universities, Wānanga and Polytechnics (the latter are now part of Te Pūkenga) to report on how they spend equity funding for disabled learners. Analysis of this data is being used to help identify best practice, determine system gaps, and inform the design of the new funding system for vocational education. The TEC uses this data to develop a sector-wide report, which is published online. The TEC will continue to collect individual reports from TEOs and report-back to the sector in 2023 and beyond.

Designing Tahatū with accessibility in mind

Tahatū is the next generation online career planning solution that will replace the existing careers.govt.nz website. It will link occupations, training, and study data to help connect employers, government agencies, learners and their whānau, schools and tertiary providers.

Tahat \bar{u} will provide free online information, tools, and advice to help build the skills and confidence of New Zealanders who are thinking about the next step in their learning or work journey. The system will ensure that all New Zealanders, including disabled New Zealanders, are able to use and get value from the site by designing and developing $Tahat\bar{u}$ with accessibility (AX) in mind, building to strict WCAG standards, and testing on varying devices including screen readers.

TEC has conducted user research interviews with disabled young learners and their support people during development and had representative participation on two further research studies. This ensures the Tahatū experience is built with their needs in mind.

An initial pilot release of Tahatū is expected in late 2022, primarily for schools, with a wider public release to follow.

Indicators

Outcome one - Education							
Outcomes	Indicator	Disabled	Non- disabled	NZ average	Source		
1.1 Disabled people and their whānau are welcomed at the education setting of their	3 or more non- structural school moves (5 to 11-year- olds)	8%	2%		Ministry of Education (analysis of 2017 admin data and 2013 Disability		
choice	Home-schooling (12 to 19-year- olds)	3%	1%		Survey), The Educational Experiences of Disabled Learners,		
	3 or more stand-downs (12 to 19-year- olds)	5%	1%		2020		
1.2 Disabled people participate and are included in the entire education system and extra- curricular activities	Enrolled in non- compulsory (post-school) education	3%	12%		Stats NZ, Household Labour Force Survey, 2019		
1.3 Disabled people have positive experiences in education	Low levels of trust in the education system (ratings under 4 on a 10-point scale)	27%	13%		Stats NZ, General Social Survey, 2021		
	Feeling like a part of school – Māori x disability	65%	89%		University of Auckland, Youth 2000 surveys, 2019/20		
1.4 Disabled people achieve and progress in education	Post-graduate qualification or higher as the highest level of qualification	4%	10%		Stats NZ, Household Labour Force Survey, 2022		
	No qualification	35%	15%				

Outcome Two: Employment and economic security

We have security in our economic situation and can achieve our full potential

Te Manatū Whakahiato Ora (Ministry of Social Development)

Disability Employment Action Plan

Working Matters, the Disability Employment Action Plan was launched in August 2020 to help ensure disabled people and people with health conditions have an equal opportunity to access quality employment. This Action Plan is one of seven Employment Action Plans (EAPs) that support the Government's Employment Strategy to create a more productive, sustainable, and inclusive labour market. It is organised around three objectives:

- supporting people to steer their own employment futures
- backing people who want to work and employers with the right support
- partnering with industries to increase good work opportunities for disabled people and people with health conditions.

A reporting dashboard on *Working Matters* is provided to the Minister for Social Development and Employment and the Minister for Disability Issues and publicly released on the MSD website approximately every six months.

Highlights in progressing the objectives of *Working Matters* include:

 The Accessibility for New Zealanders Bill was introduced into the House on 28 July 2022 and passed its first reading in on 2 August 2022. It went before the Social Services and Community Committee, with submissions closing on 7 November 2022. This Bill establishes a new legislative framework that aims to address systemic access barriers that prevent disabled people, tāngata whaikaha Māori and their whānau, and others with access needs from living independently and participating in all areas of life. This may include barriers and practices in, and to and from, workplaces. The Bill also aims to grow accessibility practices across New Zealand.

- An MSD pilot continues to provide access to employment services for disabled young people currently in schools.
- Continued work to progress legislation that extends the period during which Supported Living Payment recipients can work more than 15 hours a week (from six months to two years).
- The NZ Diploma in Health and Wellbeing Applied Practice continues to build workforce capacity. The first cohort are just graduating, having successfully supported people into employment through the applied learning approach.
- The continuous running of Canterbury DHB's Project SEARCH, a business-led internship for school leavers aged 18 to 21 years old who have learning disabilities and want to enter the workforce. The 2021 cohort recently had seven interns graduating, of which three entered part-time employment and three entered full-time employment.

Addressing gaps in Active Labour Market Programmes (ALMPs) for disabled people

MSD is leading work to address gaps in Active Labour Market Programmes (ALMPs) for disabled people, including people with health conditions and people with mental health and addiction issues. This work gives effect to and builds upon the Enabling Good Lives (EGL) principles.

Findings from a cross-agency ALMP Review identified a gap in employment supports for disabled people and people with health conditions. The wide spectrum of need within the disabled population requires a differentiated response. Key focus areas within the Review build upon suggestions from the Working Matters and Welfare Overhaul consultation. Recommendations include exploring:

- in-work and return to work supports (vocational rehabilitation)
- integrated mental health and employment supports
- customised employment.

Work following the review continues and seeks to develop phased improvements over the next three years to build a more joined-up system of employment and health supports for disabled people. MSD is working closely with Te Whatu Ora, ACC, Whaikaha, and other population-specific agencies as well as external stakeholders in the community and sector to explore options for employment supports for disabled people.

As part of this work, MSD are connecting with employers to discuss creating better options and more inclusive workplaces for disabled people who are not yet engaging with the labour market.

Minimum Wage Exemption

Led by MSD with support from MBIE, this work programme aims to replace Minimum Wage Exemption (MWE) permits with a wage supplement. MWE permits, enabled by section 8 of the Minimum Wage Act 1983, allow approximately 800 disabled employees in New Zealand to be paid less than minimum wage on the basis that they are perceived to be less productive due to their disability.

After consultation with the disability sector, officials consider that a government wage supplement is the only feasible way to replace these permits while protecting existing jobs. Replacing MWE permits with a wage supplement is a manifesto commitment.

Throughout 2022, MSD identified and refreshed parts of the work programme that needed to be updated due to changes that have occurred since the wage supplement was proposed in 2019. MSD is continuing to refine the wage supplement approach and work towards securing Cabinet approval to progress its implementation.

Indicators

Outcome two – Employment and economic security						
Outcomes	Indicator	Disabled	Non- disabled	NZ average	Source	
2.1 Disabled people and their	Not enough money to meet everyday needs (15-64 years)	15%	9%		Stats NZ, General Social Survey, 2022	
whānau have economic security	Enough & more than enough money to meet everyday needs (16-64 years)	60%	67%			
	Worrying about essential items at home (Young people in Years 9-13)	35%		23%	Ministry of Social Development, Youth Health & Wellbeing Survey, 2021	
2.2 Disabled people have equitable	Employment rate (15- 64 years)	42%	80%		Stats NZ, Household Labour Force	
access to employment	Employment rate (15-64 years) Disability x Gender	39% (men)	44% (women)		Survey, 2022	
	Labour force participation rate (15-64 years)	45%	83%			
	Unemployment rate (15-64 years)	8%	3%			
	NEET rate, not employed, education & training (15-24 years)	32%	10%			
	Main activity for those not in labour force is own care due to sickness/injury/ disability	37%	7%			
2.3 Disabled people are	Underutilisation rate (15-64 years)	22%	9%			
satisfied with their	Underemployed rate (15-64 years)	7%	3%			
employment situation	Satisfied or very satisfied with their jobs in the last 4 weeks (employed, 15+ years)	64%	77%		Stats NZ, General Social Survey, 2018	
2.4 Disabled people have equitable	Median income per week 15-64 years (all sources)	\$451	\$1,000		Stats NZ, Household Labour Force	
levels of income	Hourly wages and salaries	\$25	\$30		Survey, 2022.	

Outcome Three: Health and wellbeing

We have the highest attainable standards of health and wellbeing

Manatū Hauora (Ministry of Health)

Pae Ora Act (Healthy Futures) 2022

Key progress has been made through the passing of the Pae Ora (Healthy Futures) Act 2022, which took effect on 1 July 2022. This established Te Whatu Ora (Health New Zealand) and Te Aka Whai Ora (Māori Health Authority). Key documents were released, including the interim Government Policy Statement on Health (GPS), and Te Pae Tata - the interim New Zealand Health Plan.

Many disability-focused functions from Manatū Hauora transitioned to Whaikaha from 1 July. Manatū Hauora continues to maintain a strategy and policy function related to the health of disabled people. Policy resource in this area has been focused on ensuring disabled people are a key equity population in the ongoing health and disability reforms work.

The interim GPS set the Government's direction and specific commitments for the health system over the next two years. It recognises that disabled people receive inequitable access to health services and experience poorer health outcomes in comparison to the general population. The GPS also notes the health system will recognise and provide for the rights of all groups, including disabled people.

The Pae Ora Act 2022 signals forward direction for the New Zealand health system by solidifying commitments to disabled people as a key equity group and specifying that the Minister of Health must prepare and determine a Health of Disabled People Strategy. Development of this Strategy will be led by Manatū Hauora and will drive attention and resources for priorities that will make the most difference to achieving positive health outcomes for disabled people.

Manatū Hauora plan to complete a draft Health of Disabled People Strategy by July 2023, based on evidence gathering and engagement with disabled people and the public from November 2022 to May 2023. From mid-2023, Manatū Hauora will then work to finalise the strategy. Information on progress made by Manatū Hauora to repeal and replace the Mental Health Act, and to eliminate restrictive practices, including seclusion and restraint, can be found later in this report under Outcome seven, Choice and Control.

Ihi Aotearoa (Sport New Zealand)

The delivery of the Sport New Zealand Disability Plan is ensuring that disabled tamariki and rangatahi can participate in quality and equitable play, active recreation, and sport of their choice.

The Disability Inclusion Fund

The demand for the \$3.6m fund was extremely strong with 68 applications valued at \$12.6m being received. The 13 funded projects were from a range of organisations across Aotearoa including Regional Sport Trusts, National Sport Organisations, Active Recreation Organisations, and Parafeds. All projects are underway and regular networking opportunities are being facilitated by Sport New Zealand to enable collaboration and practice sharing.

Sector's capability and capacity

The capability of the play, active recreation, and sport sector, and their people, to cater for the needs of disabled tamariki and rangatahi continues to grow. Evidence shows more organisations understand the importance of this work and how to enhance their practices to provide better opportunities for disabled young people.

Sport New Zealands' *Tū Manawa Active Aotearoa* fund has provided opportunities for many community initiatives to receive funding, through Regional Sports Trusts, to increase and improve the provision and quality of physical activity for disabled tamariki and rangatahi.

Ko au, ko koe, ko tātou Disability Hui

Ko au, ko koe, ko tātou Disability Hui – Joining Together as One, was held at Formosa Golf Resort on the 3rd and 4th of October 2022. There were 83 attendees from Parafeds, National Disability Sports Organisations, Regional Sports Trusts, National Sports Organisation, Councils, Active Recreation organisations, Play organisations, Physical Education New Zealand, and the University of Waikato. This was the first time a hui has been held for individuals and organisations from the play, active recreation, and sport sectors to come together in person to share and learn from each other. It was fantastic to feel the energy in the room and the drive to ensure better participation opportunities are provided in the future.

Te Tari Kaumātua (Office for Seniors)

Better Later Life - He Oranga Kaumātua

As age increases, so does the likelihood of living with a long-term health condition, or a disability requiring ongoing support. The 2013 Disability Survey showed that people aged 65 or over were much more likely to be disabled (59 percent) than adults under 65 years (21 percent) or children under 15 years (11 percent). *Better Later Life - He Oranga Kaumātua* is the Government's strategy, published in November 2019, for ensuring New Zealanders can lead valued, connected and fulfilling lives as they age.

The Action Plan *He Mahere Hohenga* setting out the Government's priorities for delivering the *Better Later Life - He Oranga Kaumātua* strategy through to 2024, has continued to be implemented through this reporting period.

Outcomes likely to be of relevance to the *Strategy* include the following:

- launch of the Older Workers Employment Action Plan, which sits alongside Working Matters (the Disability Employment Action Plan) in implementing the Government's Employment Strategy
- acceptance of Auckland into the World Health Organisation's Global Network of Age-friendly Cities and Communities
- continued delivery of the Office for Seniors' award-winning Digital Literacy Training for Seniors initiative
- publication of the Age-friendly Urban Place Guide a technical resource targeted at local and central government urban planning practice to help improve outcomes for older people through the design of public places, land use, spatial planning, and design.

Indicators

	Outcome thre	e – Health	and wellbe	ing	
Outcomes	Indicator	Disabled	Non- disabled	NZ average	Source
3.1 Disabled people have equitable	Unmet need for GP visit due to cost	17%	10%		Health, NZ Health Survey,
access to quality, inclusive and responsive health services, and information	Unmet need for dental health care due to cost	44%	36%		2021/22
3.2 Disabled people have	Meet sleep duration recommendations	50%	71%		
equitable	Physically active	34%	54%		
physical and mental	Mood and/or anxiety	39%	22%		
health outcomes	Fair or poor self- rated health	37%	9%		
	Experience serious distress (Young people in Years 9- 13 with scores>13 out of 24)	56%		28%	Ministry of Social Development, Youth Health and
	Sense of belonging (Young people in Years 9-13, rating out of 10)	6.3		7.2	Wellbeing Survey, 2021/2
	Use of drugs that can cause a high or trip – excl. cannabis (Young people in Years 9-13)	16%		9%	
3.3 Disabled people have meaningful	Face to face contact with friends at least once a week	62%	70%		Stats NZ, General Social
relationships in their lives	Feeling lonely most or all of the time	12%	3%		Survey, 2021/2
	Feeling lonely none of the time	41%	56%		
3.4 Disabled people are satisfied	Low levels of life satisfaction (ratings<6)	42%	18%		
with their lives	Overall life satisfaction (rating/10)	6.7	7.6		
	Just one of four wellbeing aspects	29%	15%		

Outcome Four: Rights protection and justice

Our rights are protected, we feel safe, understood, and are treated fairly and equitably by the justice system

Whaikaha – Ministry of Disabled People

Whaikaha agreed to be the lead agency for Action 28 of the longer-term strategy *Te Aorerekura* released in 2021 as part of Te Puna Aonui, the Joint Venture Business Unit.

Action 28, Te Aorerekura

Action 28 is to "Implement safeguarding responses for disabled and vulnerable adults".

Previously, both ODI and the Disability Directorate (whilst in the Ministry of Health), were involved in a cross-agency advisory group that discussed the best way to support Action 28 and the need for this Action to have a clear agency lead.

Work to support Action 28 includes the Joint Venture Business Units Diverse Communities Project for disabled people in Waitematā, Auckland. Recently, Whaikaha agreed to provide additional funding to support the evaluation of the Waitematā cross-agency pilot. This review is critical to build on the evidence of what works and what does not. It will determine the success of the project and support increased engagement with tāngata whaikaha Māori to inform future work.

Action 28 will also be integrated into the Action Plan (as agreed by the DPO Coalition) which includes six-monthly progress reporting to the DPO Coalition and ODI.

Officials will work with Te Puna Aonui to ensure Whaikaha has representation at the senior officials' governance table for *Te Aorerekura*.

Whaikaha has committed to the development of an implementation plan by March 2023, phased over four years.

Ara Poutama Aotearoa (Department of Corrections)

Te Tāhū o te Ture (Ministry of Justice)

Te Tāhū o te Ture seeks to address inequities within the justice and care and protection systems and improve outcomes for all.

Progress made during 2022

Work progressed on initiatives that seek to improve rights, enhance wellbeing, and protect vulnerable people and communities, including disabled people, through:

- Incitement of hatred and discrimination public consultation on proposals to expand the existing legal protections to include specific groups and communities through amendments to the Human Rights Act 1993.
- Family Court (Supporting Children in Court) Legislation Act 2021 contained a requirement that children, including disabled children, involved in care of children proceedings are given reasonable opportunities to participate in decisions in which they are affected.

Continued improvements to accessibility and services to be more responsive to the needs of disabled people and tangata whaikaha Maori, including:

- Te Ao Mārama, a judicially-led programme to improve access to justice in the District Court and ensure court services are peoplecentred and equitable. This approach ensures courtrooms better reflect a modern New Zealand and can respond to the needs of disabled people.
- The Young Adult List, first piloted in Porirua District Court, was expanded to Gisborne District Court (May 2022) and Hamilton District Court (June 2022). The Young Adult List supports participants to meaningfully engage and participate in proceedings and accommodates participants with neurodiversity, mental health conditions, and disabilities through adopting approaches from the specialist and therapeutic courts. The aim, over time, is for all District Courts to have the Young Adult List.
- Publishing the Communication Assistance Quality Framework to guide communication assistance, making it available for participants who would be otherwise unable to effectively communicate with their lawyer or understand and answer questions in a court environment.

• The Ministry of Justice has also launched online training modules and videos to increase awareness and understanding of the service.

New Zealand Crime and Victims Survey

The New Zealand Crime and Victims Survey (NZCVS) is a nationwide, face-to-face annual survey carried out by the Ministry of Justice. It is the most comprehensive source of data on adult victims of crime in New Zealand, drawing on almost 30,000 interviews.

The information captured deepens our understanding of victims' experiences of crime, the effectiveness of government policies on crime and shows where additional support is required.

The fourth cycle report released in 2022 includes more detailed statistics about the experiences of disabled people in New Zealand, including the specific types and frequency of offences experienced. This cycle is the first time the survey has examined the intersection of disability with other key demographics, including sex, age, ethnicity, and sexual identity.

Looking forward to 2023

Te Tāhū o te Ture will continue to work on improving accessibility, rights, and their own understanding of disabled people and tāngata whaikaha Māori by:

- Continuing to support families through the family justice system with resources designed to be inclusive and reflect the diversity of people using them.
- As part of the Te Aorerekura Action Plan (Action 15), deliver training to each person who supports court proceedings to understand the dynamics and impacts of family violence and sexual violence and how to respond safely.
- Continuing to contribute to other actions of the Te Aorerekura Action Plan.
- Preparing a draft quality framework for interpreter services in courts and tribunals. The framework is intended to set operational policies for the service including qualification requirements, professional conduct, service delivery processes and ongoing quality improvement.
- Cycle five of the NZCVS will expand on the analysis and reporting of disabled peoples' perceptions of safety.

• Continuing the adoption law reform policy proposals, ensuring adoption laws meet Aotearoa New Zealand's international human rights obligations, including the right to be free from discrimination.

Te Puna Aonui (Joint Venture Business Unit)

Progress in 2022

Te Aorerekura: The National Strategy for the Elimination of Family Violence and Sexual Violence, was launched in December 2021. The strategy and associated action plan set out the collective path forward across the 10-member government agencies and four associate government agencies that make up Te Puna Aonui, alongside the family and sexual violence sectors and communities impacted by family violence and sexual violence.

As a result of disabled people's engagement in the drafting of the Strategy, *Te Aorerekura* acknowledges the higher rates of violence experienced by disabled people and that the dynamics of violence experienced and therefore the responses required might differ from the mainstream. Actions under *Te Aorerekura* respond to the need for a twintrack approach to ensure mainstream services and supports are inclusive of, and accessible to, disabled people, and supports that are specific to disabled people are also available.

During 2022, Te Puna Aonui contracted the Disabled People's Assembly (DPA) to carry out a disabled person-led engagement to co-design an enduring engagement platform between disabled people and Te Puna Aonui. The purpose is to ensure disabled people have a leadership role in the implementation and monitoring of *Te Aorerekura*. DPA have carried out over 26 interviews with disabled people who are involved in family violence and/or sexual violence-related mahi. Before the end of the year, DPA will have completed a series of workshops with the wider disability community. DPA are also organising focused hui with tāngata whaikaha Māori to ensure their self-determination in the implementation and monitoring of *Te Aorerekura*. This work is part of Action 5 of *Te Aorerekura* - 'Engage and Value Communities in Collective Monitoring, Sharing and Learning'.

Te Puna Aonui also worked with the disability sector to include a range of disabled people's voices in the inaugural *Te Aorerekura* annual hui held online in July 2022, attended by over 800 people, where the twin-track approach and safeguarding were discussed.

In May 2022, Te Puna Aonui launched two new family violence workforce capability frameworks supporting organisations and workers to respond to family violence in Aotearoa New Zealand. These frameworks provide information that offers a shared understanding of family violence and sets standards and essential knowledge to guide and support people and organisations to respond to family violence in safe and effective ways.

The Specialist Family Violence Organisational Standards (SOS) and Entry to Expert Family Violence Capability Framework (E2E) were developed in consultation with experts from the disability community. Experts also provided feedback through an online hui on the job descriptions for the soon to be established Family Violence and Sexual Violence Workforce capability roles, including four National System Practice Lead roles and four Workforce Trainer roles.

Representatives from the Disability Data and Evidence Working Group (DDEWG) have been engaged in the development of Te Aorerekura's outcomes framework, measurement framework and research plan.

Looking forward to 2023

Te Puna Aonui will implement the recommendations from the co-design process with disabled people to establish an enduring engagement mechanism. This would likely include an open disabled person-led nomination process, and clearly defined roles and accountabilities. A key role and function of this enduring engagement mechanism would be to support Te Puna Aonui to operationalise the twin-track approach within the family violence and sexual violence system. Other functions would likely include providing on-going feedback and insights on system improvements including gaps and opportunities, supporting prioritisation of current work programmes, informing future action plans of *Te Aorerekura*, and monitoring overall implementation of *Te Aorerekura* and how it is delivering for disabled people.

Te Puna Aonui will continue to engage with disabled people on key pieces of work including developing, implementing, and embedding family violence and sexual violence workforce development tools.

Indicators

Out	tcome four – Ri	ghts prot	ection a	nd justic	e
Outcomes	Indicator	Disabled	Non- disabled	NZ average	Source
4.1 Disabled people have the support and accommodations	Low levels of trust in Courts Low levels of trust in Police	33% 17%	13% 9%		Stats NZ, General Social Survey, 2022
needed when interacting with the justice system	Poor quality of service using 111	5%	2%		Public Service Commission, Kiwis Count, 2016-2019
4.2 Disabled people feel safe in their homes	Interpersonal violence (15-64 years)	4%		2%	Justice, NZ Crime and Victims Survey,
and communities	Interpersonal violence - Youth	38%	19%		2022
and are safe from violence and abuse	Interpersonal violence - Māori	27%	20%		
and abuse	Interpersonal violence - Rural	23% 26%	14% 52%		State NZ
	Feeling safe or very safe when using public transport at night		52%		Stats NZ, General Social Survey, 2022
	Family involvement with Oranga Tamariki (Young people in Years 9-13)	25%		17%	Ministry of Social Development, Youth Health and Wellbeing Survey, 2021
	Yelling/swearing from adults at home (Young people in Years 9-13)	62%		46%	
	Bullying in last 12 months (Young people in Years 9-13)	50%		37%	
	Unwanted sexual contact (Young people in Years 9-13)	32%		19%	
4.3 Disabled people's right to make their own decisions is upheld and they are supported, if	Uptake of supported decision making and assistive technology to communicate				
required					

Outcome Five: Accessibility

We access all places, services and information with ease and dignity

Te Manatū Whakahiato Ora (Ministry of Social Development)

The Accessibility Charter

The public sector remains in a leadership role in recognising accessibility as an enabler of inclusion. The Ministry of Social Development continues to work with government agencies to encourage them to sign and implement the Accessibility Charter. This commits agencies to ensuring all information intended for the public is accessible, and that everyone can interact with government services in a way that meets their individual needs and promotes their independence and dignity.

MSD has continued to work with Disabled People's Organisations to develop accessible messages in alternate formats, with increasing demand for this support across most government agencies. This has been particularly relevant in a time when government responses to COVID-19 required ongoing adaptation to meet the constantly changing nature of the pandemic. A monthly accessibility training programme continues to support the Accessibility Guide, which has routinely high uptake by government officials.

Lead Toolkit

The Ministry of Social Development continues to champion the use of the Lead Toolkit across government, to foster an inclusive and welcoming environment for disabled people, and to reduce and remove barriers to their participation in the Public Service. As part of this work, a video demonstrating the use of assistive technologies within employment has been developed and will be shared across government agencies to increase awareness of, and access to, these specific supports. Guidance has been developed to support the implementation of Reasonable Accommodations for disabled people within employment and is being utilised by agencies to develop internal policies to support best practice.

Accessibility for New Zealanders Bill

Cabinet agreed to the detailed design of the accessibility framework in March 2022. This included establishing a Ministerial Advisory Committee (the Accessibility Committee) led by disabled people and tāngata whaikaha Māori to provide the Minister for Disability Issues with independent advice on addressing accessibility barriers and growing accessibility practices across New Zealand.

Following this, the Accessibility for New Zealanders Bill was drafted. The Bill, if passed, would establish a new legislative framework that, through the establishment of the Accessibility Committee, aims to create a consistent way of addressing systemic accessibility barriers that prevent disabled people, tāngata whaikaha and their families or whānau, and others with accessibility needs from living independently and participating in all areas of life, and to grow accessibility practices across New Zealand.

The Bill sets out the overall purpose and principles of the framework and the functions and duties, membership, and operations of the Accessibility Committee. The roles of the Minister for Disability Issues and Chief Executive of Whaikaha, are also provided for, including provisions to enable a cycle of monitoring and evaluation, information sharing, and a review of the effectiveness of the Bill every five years.

The Bill passed its first reading on 2 August and has been referred to the Social Services and Community Select Committee for consideration. Written submissions on the Bill were open until 7 November 2022, following which the Committee is hearing oral submissions.

The Select Committee will report back to the House on the Bill by 16 May 2023. Following this, the Bill will progress through the legislative process. If passed, it will commence by Order in Council, with a backstop date of 1 July 2024. The flexibility in commencement date allows for Ministry of Social Development and Whaikaha officials to work on an implementation plan.

Te Manatū Waka (Ministry of Transport) and Waka Kotahi (New Zealand Transport Authority)

Total Mobility

Waka Kotahi has continued to engage with the disability sector and collect better disability data to assist Te Manatū Waka's review of the Total Mobility Scheme. This resulted in the *Transport experiences of disabled people in Aotearoa New Zealand* research report, published in multiple formats including Plain English, Easy Read, Braille, and video with New Zealand Sign Language (NZSL).

Accessible Streets and Reshaping Streets

As part of *Streets for People*, a package of different design and regulatory changes developed to make our streets safer and more accessible, Waka Kotahi worked with the disability sector to collect feedback and create a disability impact assessment in response to the *Accessible Streets* package.

Reshaping Streets is a regulatory package designed to make it easier for councils to make street changes to support public transport and active travel. It went out for public consultation with versions of the documents available in Easy Read, Large Print, and audio. Workshops were also held outlining the proposals with a NZSL interpreter present.

Public transport

As part of ongoing efforts to promote safe and user-centric public transport infrastructure, Waka Kotahi has continued developing its Public Transport Design Guidance. In 2022, this included engagement with members of the disability sector on bus stop bypass designs that had been built in Wellington. These route cyclists off the road, often on to the footpath, to allow them to avoid interactions with buses. This has informed Waka Kotahi's design guidance.

Waka Kotahi has also developed training for bus drivers to better guide them in interacting with and assisting disabled passengers. The training has since been accepted by industry, released publicly, and taken up by the public transport delivery sector.

Pedestrian Network Guidance

The Pedestrian Network Guidance, which aims to provide best practice for planning and creating accessible communities, went live at the close of 2021. As a living document, new content was added to it in 2022, including the recent introduction of training webinars which cover inclusive access and engagement with the disability sector.

Accessibility of public information

Waka Kotahi continued accessibility testing for all website and web applications which is now part of the digital project lifecycle, from design through to delivery. Waka Kotahi also continued work on creating accessibility guidelines for their communications.

Looking ahead

For 2023, some key items on the Waka Kotahi work programme that will deliver on the Disability Action Plan include:

- applying plain language and an accessibility lens to the road code,
- completing the research paper titled "Investigation of the external noise emitted from electric buses (e-buses) in New Zealand and the need for Acoustic Vehicle Alerting Systems (AVAS) to improve pedestrian safety"
- moving to include accessibility requirements in Waka Kotahi commercial technology contracts with vendors and suppliers.

Kāinga Ora and Te Tūāpapa Kura Kāinga (Ministry of Housing and Urban Development)

The Government Policy Statement on Housing and Urban Development (GPS-HUD) was published at the end of 2021. It sets the long-term direction for housing and urban development and the system level outcomes that we are working towards over the next 30 years. *Implementing the GPS-HUD* was published in September this year and clarifies the focus of the government work programme over the next three to four years. This near-term strategy reinforces the need for a coordinated, system wide approach to universally designed and accessible housing.

In line with this, Te Tūāpapa Kura Kāinga - Ministry of Housing and Urban Development (HUD) is developing indicators to track progress towards the long-term outcomes set in the GPS-HUD and MAIHI Ka Ora – the National Māori Housing Strategy.

Where there is available information, HUD intends to report on progress towards these outcomes for disabled people. The first set of indicators is due to be published by the end of 2022.

To help set expectations that stakeholders work together to deliver more universally designed homes over their lifetime, HUD has recently published Public Housing Design Guidance for Community Housing Providers and Developers with guidance on accessible housing.

A draft code of practice for transitional housing, due to be completed in early 2023, is intended to set out the basic rights and responsibilities and accommodation standards, including for safe and accessible housing, that can be expected by those using or providing transitional housing.

The Aotearoa Homelessness Action Plan includes a longer-term action on 'further responses for groups at risk of homelessness'. The Ministry of Social Development, with support from HUD and input from other agencies, are in the process of scoping this work.

As a part of HUD's stewardship role to promote longer-term system transformation and support more effective system improvements, HUD is developing its Long-Term Insights Briefing which promotes discussion on the criticality of dwellings being built to mitigate the effects of compromised mobility, limited sight and hearing or cognitive issues and enhance functional capacity.

Indicators

	Outcome five – Accessibility						
Outcome	Indicator	Disabled	Non- disabled	NZ average	Source		
5.1 Disabled people have equitable access to all places, services, and information	Health professional listened to them (rate ratio – below 1 is less likely than non-disabled)	0.96			Health Quality & Safety Commission, Patient Experience Survey, 2022		
	Wanted health care from a GP or nurse, but could not get it in last 12 months (rate ratio)	0.90					
	Access to the internet	77%	92%		Stats NZ, Census, 2018		
	Unable to access to public services and activities due to accessibility	52%			Be.Lab, Access 2020		
	Easy or very easy getting to a doctor or using public transport	79%	89%		Stats NZ, General Social Survey, 2018		
	Easy or very easy getting to a supermarket using public transport	85%	93%				
	Good quality service when applied for, used or asked for information about a building permit	53%	63%		Public Service Commission, Kiwis Count, 2019		
5.2 Government takes the lead in raising accessibility across all areas	Signed up to the Accessibility Charter			40 Govt Agencies, 4 districts, 3 local govt authorities	www.odi.govt.nz Sept, 2022		

Outcome Six: Attitudes

We are treated with dignity and respect

Indicators

Outcome six – Attitudes						
Outcome	Indicator	Disabled	Non- disabled	NZ average	Source	
6.1 Disabled people are treated with	Discrimination in the last 12 months	30%	23%		Stats NZ, General Social	
dignity and respect by everybody	Low trust in New Zealanders	27%	10%		Survey, 2022	
	Others are patronising towards me because of my disability	51%			Be.Lab, Access 2020	
	Others feel sorry for me because of my disability	48%				
6.2 Disability is portrayed positively in the media	Low trust in the media (ratings <4)	62%	41%		Stats NZ, General Social Survey, 2022	
6.3 Disabled people are recognised as citizens in their own right	Feel very comfortable about a new neighbour with a disability or long-term health condition	87%	84%			
	Easy to express my identity (rating out of 10)	6.2		7.3	Ministry of Social Development, Youth Health and Wellbeing	
	I am proud of who I am	5.7		7.1	Study, 2022	

Outcome Seven: Choice and control

We have choice and control over our lives

Whaikaha – Ministry of Disabled People

Disability support system transformation

Transformation of the disability support system in line with the Enabling Good Lives (EGL) vision and principles is still progressing and is a high priority for Whaikaha. All disability support services have now moved under the management of Whaikaha with an annual appropriation of \$1.7b from Vote Health to support approximately 40,000 eligible disabled people with long term supports. This includes specialist disability services (e.g., Behaviour Support).

The Ministry of Health funds supports for disabled people (mainly) *under* the age of 65 who have a physical, intellectual, or sensory disability (or a combination of these), which is a) likely to continue for at least six months, and b) limits their ability to function independently to the extent that ongoing support is required. Te Whatu Ora funds disability support services for older people, those with long-term conditions, and mental health and addiction needs, to provide assistance with everyday tasks in their own homes (e.g., personal care or household management), or assistance in residential care.

In addition, over 80,000 disabled New Zealanders have access to equipment and modification services and supports (e.g., hearing and vision services for people with a sensory disability).

Demonstrations of a transformed disability support system based on an EGL approach have been trialled in Christchurch and Waikato and their funding has been made permanent. A prototype called Mana Whaikaha has been running in the MidCentral DHB region since 2018.

In 2021, a repeat evaluation of MidCentral demonstrated considerable positive change in people's experiences including a greater sense of choice and control over their lives supported by increased flexibility. The lessons from all three sites have contributed to the decisions that led to the allocation of \$100 million in the 2021 budget (held in contingency by Treasury), for the development of a nationwide rollout of Enabling Good Lives.

Supported decision-making

During the COVID-19 lockdown, the Ministry of Social Development created a guide, *Supported Decision Making*, for managers of services and disabled people. As communities moved through the COVID-19 Alert Levels, the information aimed to remind managers of services, family/whānau, carers and supporters about their role when supporting people to make decisions for themselves. The information was translated into the five alternate formats: Braille; Large Print; Audio; Easy Read and New Zealand Sign Language.

A supported independent decision-making guide based on the above will be converted to a web resource and will be a critical part of Whaikaha's overall work on implementation of a safeguarding plan of action in 2023.

Manatū Hauora (Ministry of Health)

Progress to repeal and replace the Mental Health Act

Manatū Hauora is leading work to repeal and replace the Mental Health (Compulsory Assessment and Treatment) Act 1992 (the Act) with modern, fit-for-purpose legislation that reflects a human rights-based approach as recommended in *He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction*.

The public were invited to give their views on what new mental health legislation should look like in Aotearoa New Zealand. A three-month consultation period closed in January 2022. Over 300 written submissions were submitted, and feedback was gathered from over 500 people who attended over 60 online information sessions and consultation hui.

Feedback came from a range of key groups, including tāngata whaiora (people seeking health) and their whānau, Māori, Pacific, Asian and ethnic communities, the mental health sector, as well as the general public. The feedback is being used to guide the development of proposals for new legislation. Following public consultation, the Ministry established an Expert Advisory Group to assist with the testing and refining of policy proposals.

The Minister of Health will seek Cabinet agreement to proposals for new legislation in the period December 2022 to March 2023. It is expected a bill will be introduced into Parliament in 2023.

Seclusion and restraint

Work is underway to reduce and eventually eliminate restrictive practices, including seclusion and restraint in Aotearoa New Zealand.

While new legislation is being developed, Manatū Hauora is also replacing its current seclusion guidelines with new ones, which will have an explicit focus on reducing and eliminating seclusion and restraint, as well as ensuring the safe use of these practices when they cannot be avoided.

The draft guidelines have been developed with the assistance of a working group that includes people who bring the perspectives of Māori, people with lived experience, disabled people, and clinical practice. Membership of the working group includes Whaikaha and Disabled People's Organisations.

The draft guidelines went through a targeted external consultation process in September and October 2022. Feedback through this process will inform the final version of the guidelines for publication.

Indicators

Outcome seven – Choice and control								
Outcome	Indicator	Disabled	Non- disabled	NZ average	Source			
7.1 Disabled people have and maintain control over decisions about their lives	Low ratings of sense of control (<6)	41%	24%		Stats NZ, General Social Survey, 2021			
	High sense of control (15-54 years)	64%	82%		Stats NZ, Te Kupenga, 2018			
7.2 Disabled people and their whānau have choice and control over government funded services that address their needs	I have real choices about the kind of support I receive, and where and how I receive it	Still no measures	Still no measures	Still no measures	Enabling Good Lives Outcomes and Principles in Action			
7.3 Disabled people and their whānau have control over who provides services	I am in control of planning my support, and I have help to make informed choices if I need and want it.	Still no measures	Still no measures	Still no measures				

Outcome Eight: Leadership

We have great opportunities to demonstrate our leadership

Whaikaha – Ministry of Disabled People

Nominations Database

Whaikaha, through the Office for Disability Issues (ODI) administers a Nominations Database for disabled people who are interested in governance positions on government-appointed boards, committees, and advisory groups. The purpose of this work is to increase the representation of disabled people on boards, and in turn, to build capacity in the areas of leadership and governance among the disabled community. It is envisioned that disabled people will be represented at all levels of leadership and governance within the Public Sector.

As of 20 October 2022, 194 disabled people were registered with the Nominations Database, compared to 178 people last year. Of the 194 people on the database, 49% are women, 48% are men, 1% identified as gender-diverse and 2% did not complete the question. When measuring primary ethnicity, 3% identify as Māori, 1% as Pacific peoples, 0.5% as Chinese, 86% as New Zealand European and 9.5% preferred not to say. While gender balance has been achieved, Whaikaha needs to work on recruiting more gender-diverse individuals, and more people from ethnic minorities, particularly tāngata whaikaha Māori and Pacific peoples.

Since the start of 2022, nominations have been made to over 89 boards, committees, groups, and tribunals. It is difficult to report how many people have been successful because it can take up to nine months for a nomination to be confirmed, and because nominating agencies are not always informed if a nominee was successful. As at the start of July 2022, Whaikaha has started keeping more in-depth records of the number of people put forward for nomination opportunities. Whaikaha nominates up to six candidates for a position. For any given opportunity, Whaikaha notifies up to 194 potential candidates.

At the time of writing, one of our members has been asked to join the Electoral Commission and has been successful in being elected to one of the Health agencies. Others have been selected to be part of consultation groups for the Law Commission.

Work is underway to verify that Whaikaha has the most up-to-date details for its database members which will be completed by the end of 2022.

The database had an overhaul this year, making the system of registering for the database more straightforward to complete. The data is also more defined and easier to manage, which means it is easier to match the people with the right skills to the right opportunities.

Whaikaha has begun work with the Public Services Commission on creating a single database for all government agencies involved in nominations. Unfortunately, this work has been put on hold due to circumstances outside Whaikaha's control.

Next steps

Next year, Whaikaha will visit many of the appointing agencies and engage them in a discussion about how they can increase diversity on their boards, particularly the number of disabled people. A paper is being prepared for Chairs of Boards to discuss improving the accessibility of the board and boardroom practice for disabled people.

Whaikaha is also working with the project team from Manutū Wāhine (Ministry for Women), who are investigating how to improve capability for minority groups interested in governance positions. To date, the project has found that minority groups, including those who identify as disabled, need:

- accessible and easy to find information about governance, what it involves, and where to find professional development opportunities
- bespoke governance training that focuses not only on the key concepts of governance, but the challenges of governance for a member of any given minority group.

Finally, Whaikaha is part of a cross-agency group working towards increasing the numbers of disabled people on boards. The primary focus of this group is to ensure that data about disabled people serving on boards is collected as part of the Department of the Prime Minister and Cabinet's annual board stocktake. It is expected that from the December 2023 board stocktake, disability data will begin to be collected on a regular basis.

New Zealand Sign Language (NZSL) Board community survey

The NZSL Board commissioned a national survey to gather data about the NZSL community's satisfaction with NZSL, ensuring it is responsive to the views of the community, in relation to the five priorities from the NZSL Strategy.

The Board will consider the survey findings in its recommendations for the review of the NZSL Act 2006 that will be presented to Cabinet in 2023. The survey information will also be used as a baseline to help the NZSL Board monitor, evaluate, and make informed decisions on actions to maintain and promote NZSL.

The survey was developed in the first half of 2022 and tested with a small group of Deaf people. It was translated into NZSL, and community engagement hui were held across the country.

Sample characteristics

The sample size used for analysis was 584 individuals who knew or use NZSL. The sample was predominantly female, aged between 30-60 years, New Zealand European, and living in Auckland, Wellington, and Canterbury. 58% had no difficulty hearing. 230 people identified as Deaf, 58 as hard of hearing.

The prevalence of a mental health condition was higher among Deaf & hard of hearing than hearing respondents. 75% of Deaf & hard of hearing respondents were proficient in NZSL compared to 46% of hearing. While the sample is by no means representative, it has captured a wide range of issues that are currently relevant to many NZSL users and will help to grow NZSL and promote the inclusion of the Deaf community.

Priority 1 – Acquisition

Informal learning and community programmes were the most popular modes of acquisition of NZSL, followed by learning NZSL in the home as a natural language. 32% of Deaf & hard of hearing identified NZSL as their natural language and Deaf & hard of hearing were more likely to learn NZSL at school (23%) compared to hearing respondents (5%). Respondents reported greater satisfaction with the content covered in NZSL classes and the cost of classes, and greater dissatisfaction with the location and the availability of NZSL classes. There is a call to prioritise the acquisition of NZSL for Deaf children, and for the Deaf community to take more of a leadership role in Deaf education in New Zealand.

Priority 2 - Use and access

Deaf/NZSL events were the most popular Deaf spaces among respondents, followed by Deaf clubs. A greater proportion of Deaf & Hard of hearing respondents attended Deaf clubs, Deaf organisations, and online Deaf spaces than hearing respondents. The most frequent communication contexts among respondents were with Deaf friends, followed by home, Deaf club, and the workplace. 91 Deaf and hard-ofhearing respondents had trouble using NZSL, which arose in a variety of spaces and for different reasons. Difficulties occurred in all public spaces and service places, all places where masks are used, in the family home, with friends, and at work or school. The reasons identified by respondents included lack of knowledge of NZSL/lack of effort made to learn NZSL, being unaware of Deaf culture, prohibitive cost and unavailability of interpreters, large gatherings where there were multiple speakers and lots of noise.

Respondents were most satisfied with translations into NZSL provided by Deaf organisations, and reported lower satisfaction with translations by the media, and lowest satisfaction for translations provided by government agencies, and the education sector. The good news is that inclusion is being felt by some - close to two-fifths of Deaf and hard of hearing respondents are extremely and very satisfied with the provision of an interpreter when accessing a government service.

Priority 3 – Attitudes

Most respondents agreed that NZSL is a valid language and equal to other languages. However, they were less likely to agree that NZSL is valued, recognised, and accepted by New Zealanders in general.

Priority 4 – Documentation

The most popular source of documentation was the NZSL online dictionary, followed by Learn NZSL. Hearing respondents were more likely to be familiar with NZSL online dictionary and Learn NZSL than Deaf hard-of-hearing respondents. In contrast, a greater proportion Deaf and hard-of-hearing g respondents were familiar with other source e.g., Deaf short films, Sign DNA and NZSL share. Most respondents agreed it was very or usually easy to find information about NZSL signs. 7% found it hard to find information.

Priority 5 – Status

Free text entries from respondents regarding what the government could do to support the NZSL community, and any further comments about NZSL, were analysed according to themes that corresponded to the priorities of the NZSL Strategy. Respondents acknowledged the role of legislation, in particular the NZSL Act 2006, and protective bodies, such as a commission equivalent to the Māori Language Commission, in elevating NZSL. There is a call to establish roles for Deaf cultural advisors within government agencies, and ensure front line government and public service staff are educated on Deaf culture and the rights of a Deaf person.

A call was also made for a public apology to the Deaf community for historical abuse, language deprivation, and subsequent inequities. A more positive environment for NZSL use will be created through enhancing access e.g., when NZSL provisions are built in at the beginning of service design, when NZSL is also provided for cultural events, when Deaf in rural areas have improved access to interpreters, and when more Māori Deaf are enabled to learn and use NZSL. Using existing resources in the community such as Deaf professionals was suggested.

Te Manatū Whakahiato Ora (Ministry of Social Development)

Amending the NZSL Act 2006

In September 2022, Cabinet agreed that MSD, in collaboration with Whaikaha, would consult with the Deaf community and wider New Zealand public on suggested amendments to the New Zealand Sign Language Act 2006 (the NZSL Act). The proposed amendments were intended to strengthen the leadership of Deaf people over the promotion, maintenance, and acquisition of NZSL. The suggested amendments were:

- the New Zealand Sign Language Board (NZSL Board) becomes a statutory advisory group
- create a mechanism for the NZSL Board to monitor government agencies' actions in response to their obligations under the NZSL Act
- embed Te Tiriti o Waitangi

The Ministry of Social Development worked with the NZSL Board on developing proposals to amend the NZSL Act. The DPO Coalition and Deaf Aotearoa were also consulted.

The consultation took a 'NZSL first' approach, which meant that information was firstly provided in NZSL, and six hui across the country were held in NZSL. Deaf people and NZSL users have provided their feedback on the proposals in NZSL.

The Minister for Disability Issues will consider the outcomes of the consultation process and final policy proposals before seeking Cabinet agreement to introduce an amended NZSL Act into the House in 2023.

I.Lead

I.Lead is a national network for disabled youth to have a voice around the barriers, challenges and concerns they face within New Zealand today. In the 2022 year I.Lead held their National Conference as a two-day virtual event (due to COVID-19 restrictions). This was a huge success, with high numbers of attendance from disabled youth, community organisations and government officials.

From this conference the I.Lead committee were able to draw 16 recommendations they have for government official across several areas including:

- tailored supports for transitioning from school into employment
- accessible and affordable housing incentives for developers
- disability awareness training for public transport operators.

All the recommendations will be important to inform government work programmes for disabled youth.

Whaikaha continues to work with I.Lead and Yes Disability Resource Centre to build on their regional networks and projects to empower and amplify disabled youth voices. Whaikaha also regularly supports I.Lead to connect with other agencies to ensure the voice of disabled youth is reflected and incorporated into government work programmes.

Waitangi Tribunal Health Services and Outcomes Inquiry (Wai 2575)

The Waitangi Tribunal (the Tribunal) is a process that provides a pathway for nationally significant claims (grievances) that affect Māori to be heard in court.

Wai 2575 is the Health Services and Outcomes Inquiry and includes claims from tāngata whaikaha Māori. Wai 2575 is large with over 200 claims participating.

The Inquiry is being held in stages. Currently, the Tribunal is holding hearings for the Stage Two Wai 2575 claims. Stage Two covers three priority areas, including disabled Māori.

All claims relating to disability are in the first part of the Stage Two. Officials across agencies will continue to support the Crown Response team through discovery request and subject matter expert advice, and have been viewing the hearings online. By the end of 2022 there will have been four weeks of hearings.

Crown witness evidence will also be presented in the last hearing weeks, expected to be held in the second half of 2023, following which the Tribunal will make recommendations to address the grievances of claimants.

Royal Commission – Inquiry into Abuse in Care

The Royal Commission of Inquiry into Abuse in Care (Royal Commission) was established in 2018 to inquire into and report on agencies' responses to allegations of historical abuse towards children, young people, and adults at risk (including Deaf people and disabled people) in state care and faith-based institutions between 1950-2000.

The Royal Commission has been hearing the traumatic experiences of survivors and their whānau of being disconnected from each other and their community, of neglect, seclusion and restraint, overmedication, unwarranted procedures and treatments, power imbalances, lack of autonomy, and inadequate staffing numbers and training.

Cross-agency government officials attended and provided evidence at the Disability, Deaf and Mental Health Institutional Care hearing (held in August 2022) and will continue to be engaged with the Commission as they develop their report and recommendations (expected mid-2023). Work is also beginning on reforming the Redress System.

Outcome eight – Leadership								
Outcome	Indicator	Disabled	Non- disabled	NZ average	Source			
8.1 Leadership in the disability sector is effective	Sector groups have a strong mandate from the people they represent	No current measures	No current measures	No current measures	Whaikaha			
8.2 Disabled people are represented in	Proportion of disabled Board members	No current measures	No current measures	No current measures	Public Service Commission			
leadership roles across society	Proportion of disabled public servants	5.5%		No current measures	Public Service Commission,			
	Feel accepted as a valued team member	67%	80%	No current measures	Public Service Census, 2021			
8.3 Government demonstrates good leadership on disability issues	Trust in ODI and Whaikaha Satisfaction with the work of ODI [and Whaikaha]	7.5			Whaikaha ODI, Stakeholder Engagement Survey,			
	rating out of 10				2022			

Indicators

Disability Data

Disability Data across eight outcome areas

Article 31 (Statistics and data collection) of the United Nations Convention on the Rights of Disabled People (UNCPRD) expects that States Parties undertake to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the present Convention.

The Disability Data and Evidence Working Group (DDEWG), alongside Whaikaha has over the last five years been advocating for Governmentfunded surveys to include the Washington Group Short Set of questions that measure six areas of functional impairment.

ODI is now able to monitor progress towards more equitable outcomes for disabled New Zealanders through a variety of indicators that correspond to eight outcome areas of the Strategy.

Updated indicators for the Outcomes Framework showing the disparity in outcomes between disabled and non-disabled, and between disabled and the overall New Zealand population, are presented at the end of each outcome area in this report. Whaikaha expects to update the online dashboards and data pages available on our website in the first quarter of 2023.

Finding significant differences in outcomes in a single survey is not easy because small sample sizes of disabled people mean the sampling error is too large. However, when data is pooled across cycles this enables the comparison of outcomes between different types of disabled people, and between disabled and non-disabled. This was the approach adopted by the Ministry of Justice in cycles 1-4 of the NZCVS (over 30,000 interviews).

Note, because disabled people tend to experience higher levels of deprivation than non-disabled people, some of the reported differences in outcomes are likely due to the interrelation between disability and deprivation. **Data releases in 2022** from our colleagues across government that have contributed to key indicators for the eight outcome areas include:

Stats NZ

- General Social Survey Wellbeing Statistics were released in July 2022. This relates to Outcome 3 - Health and Wellbeing. Life satisfaction is lower among disabled people, and they were less likely to report wellbeing across all four key aspects (good health, enough money, not lonely, and no major problems at home), and twice as likely to have just one key aspect of wellbeing compared to non-disabled people. Disabled people are more likely to have low levels of trust in others, in the Courts, and in the education and health systems.
- Household Labour Force Survey findings were released in August 2022. This relates to Outcome 2 Employment and Economic Security. There is an extremely wide gap in median weekly income (all sources, 15-64 years) between disabled people (\$451) and non-disabled people (\$1,000). Among individuals not in the labour force, the main activity for disabled people was self-care, while the main activity of non-disabled people was study or training. Labour force participation rates and employment rates among disabled people continue to be about half that of non-disabled, while unemployment rates are more than double. There has been a marked improvement in the employment rate of disabled women, which is now higher than that of disabled men. The NEET rate has also been trending downwards since June 2020, where it was 49%, and is now sitting at 32%, which is lower than the pre-COVID-19 NEET rate.

Ministry of Justice

New Zealand Crime and Victims Survey findings from the fourth cycle were released in June 2022. This relates to Outcome 4 – Rights Protection and Justice. Age and level of deprivation are key factors that influence the experience of victimisation. Disabled people are at twice the risk of interpersonal violence than the NZ average, and disabled youth, disabled Māori and disabled people living in rural areas are at greatest risk.

Ministry of Social Development

Youth Health and Wellbeing Survey Whataboutme? findings were released in October 2022. This relates to Outcome 2 – Employment and Economic Security, Outcome 3 – Health and Wellbeing, Outcome 4 – Rights Protection and Justice, and Outcome 6 - Attitudes. Results mirror what is seen in other studies among the adult population in New Zealand through administrative data from the Ministry of Health, the General Social Survey and the Crime and Victims Survey. What disabled adults feel and experience, is being felt and experienced by young disabled adults e.g., feeling worried about having essential items at home, experiencing serious distress, and feeling overwhelmed.

Social Wellbeing Agency

 Covid-19 vaccine uptake by disabled people information sheet was released in May 2022. This relates to Outcome 3 – Health and Wellbeing. Vaccination uptake (at least one dose) was higher among the disabled community (92%) than among non-disabled people (85%). A high proportion of tangata whaikaha Maori and Pacific disabled people also received at least one dose, compared to non-disabled Maori and Pacific people.

Ministry of Health

New Zealand Health Survey was released in November 2022, contributing to Outcome 3 of the NZDS – Health and Wellbeing. The sample size was substantially smaller than previous years due to Covid (approx. 4,400 adults instead of 14,000). Disabled adults have lower overall health, mental health, life satisfaction and family wellbeing than non-disabled adults. They are also more likely to have lower levels of physical activity, less sleep, and less likely to maintain good oral health. Disabled adults are more likely to smoke and be heavy smokers and engage in illicit drug use. When it comes to accessing healthcare, disabled adults are more likely to experience barriers due to transport and cost. They are also less likely to access private health insurance.

Agency reports in 2022 have also provided key information on outcomes for disabled people:

Oranga Tamariki

 Good practice for disabled tamariki and rangatahi in care was released in May 2022. This relates to Outcome 3 – Health and Wellbeing, and Outcome 4 – Rights Protection and Justice. The report highlights how better supports should be provided to whānau to enable tamariki whaikaha to remain at home, with Out of Home Care considered only as a last resort.

Waka Kotahi

- Transport experiences of disabled people in Aotearoa New Zealand was released in August 2022. This relates to Outcome 5 – Accessibility. The report is a combination of literature review and survey data. Most respondents do not use public transport and are holders of mobility parking permits through CCS Disability Action. The report highlighted challenges with travel faced by disabled people, and how often they will skip a journey and miss out on resources or activities that would have enhanced their wellbeing because of the time and effort required to travel. A whole-of-journey approach is recommended for transport planning, where each step in a journey is understood and checked for accessibility. Tāngata whaikaha Māori are most at risk of transport-based exclusion because local activities and sites tend to be rural and less accessible.
- Electric bus noise and road user safety was released in November 2022. The first study looked at the difference in noise emitted. Electric buses were approximately 8 dB quieter than diesel buses at 10 km/h, but no difference was found at 30 km/h. In contrast, electric buses were slightly louder than diesel buses at 50 km/h, likely due to a greater number of tyres. A second study using small samples of low-vision and non-disabled participants in Wellington and Auckland looked at detection rates and times of electric vs diesel buses (15 participants in total). Ambient noise was different in both cities and findings were mixed. While no difference was found in Wellington, participants in Auckland detected diesel buses more frequently and rapidly than electric buses. More research needs to be conducted before adopting acoustic vehicle alerting systems (AVASs) in different environments.

Health Quality and Safety Commission

 A window on quality 2022: Covid-19 and impacts on our broader health system (Part 2). The adult primary care patient experience survey shows that disparities between disabled and non-disabled people in access to and experience of primary care has not worsened because of the pandemic. However, the gaps remain large with one quarter of disabled people not always able to get care when they want it compared to 17% of non-disabled people. Young tāngata whaikaha Māori report the worst access to care (41% could not get care when they wanted). The number of complaints to the Health and Disability Commissioner almost doubled in the 2021/22 financial year, with one-quarter of complaints related to Covid-19.

Education Review Office (ERO)

- A Great Start? Education for Disabled Children in Early Childhood Education and Thriving at School? Education for Disabled Learners in Schools reports were released in September 2022.
- Too many disabled learners are experiencing exclusion. Many disabled learners were discouraged from enrolling at their local school (one in five learners) or asked to stay home due to resourcing issues or for specific activities (one in four learners). Disabled students have been stood down and needed to move schools.
- ERO concluded that education is still not delivering for all disabled learners, and improvements are needed. Four areas were identified to raise the quality and inclusiveness of education for disabled learners in early childhood, primary and secondary education:
 - prioritisation of disabled learners in ECEs and schools, and accountability for how well they are doing
 - increase disabled learners' sense of belonging and acceptance, and kaiako and teachers' capability in teaching disabled learners
 - increase parents, whānau and disabled learners' understanding of their education rights, how to raise concerns, make a complaint, or get someone to advocate on their behalf
 - improve the coordination of support for disabled learners, and pathways both in and beyond school.

- Missing out Why aren't our children going to school? was released in November 2022. The report provides important insights on the school attendance of New Zealand children and looks at attendance barriers for disabled children. Parents of disabled learners are more likely to keep their child out of school due to:
 - resource and participation barriers e.g., if their child is unable to participate in a school activity, or if they have difficulty transporting their child to school
 - health and wellbeing concerns e.g., if their child had a chronic illness or mental health challenges/anxiety
 - \circ bullying.
- Disabled learners are more likely to want to miss school because:
 - they can't participate in some activities at school e.g., sports and clubs or they don't want to participate in certain activities
 - \circ their schoolwork is too hard
 - they didn't feel like being around their classmates.
- When their disabled child doesn't want to go to school, parents are more likely to keep their child out of school (this happens twice as much compared to parents of non-disabled children).
- ERO made recommendations for improving attendance such as schools proactively managing regular non-attendance, make learning more engaging, teaching the relevance and value of all learning, and making available catch-up material. Parents need to set expectations for school attendance and working with schools to either overcome or find other ways to deal with issues that lead to non-attendance. Parents are also expected to support their learner to catch up on missed learning.

Upcoming releases of survey and administrative data

HQSC

• Adult primary care patient experience survey will also be available in November 2022. Information is also related to Outcome 3 of the NZDS – Health and Wellbeing.

Ministry of Social Development & University of Auckland

 Growing up in New Zealand "Now we are 12" will release findings in mid-2023, with a bespoke report on disabled young people.
Findings will relate to several outcome areas of the NZDS such as Outcome 1 – Education, Outcome 2 – Employment and Economic Security, Outcome 3 – Health and Wellbeing, Outcome 4 – Rights Protection and Justice, and Outcome 6 – Attitudes.

Stats NZ

- Census 2023 is scheduled for 7 March 2023. This Census will combine data collected through the forms with administrative data. Improving accessibility for the Census has been a key priority. Screening questions in the Census will help to determine the sample for the Disability Survey. The release schedule is set for mid-2024.
- *Disability Survey* is due to be in the field in August 2023, with results available in mid-2024. This will provide us with up-to-date estimates of the size and status of the disabled population in New Zealand.

Justice

- Insights into disabled people's experiences of crime is a tailored report using pooled data from the NZCVS, to be released in September 2023.
- *Legal Needs Survey* will be in the field mid-2023 with results available in early 2024.

Disability Data and Evidence Working Group (DDEWG)

DDEWG is jointly led by Stats NZ and Whaikaha, and comprises representatives from Disabled People's Organisations, several government agencies, key service providers, and universities. DDEWG's work programme has been refreshed in 2022 and comprises three areas:

- engagement, capability building and resources (coordinated by MSD)
- access to data (coordinated by the Social Wellbeing Agency, SWA)
- disability research (coordinated by Whaikaha).

This year was marked by the development of a disability indicator in the IDI by SWA, published in November 2022 (*Te Atatū – Developing an indicator of disability*), and the retirement of Anne Hawker, public service disability advocate.

Now that Whaikaha has been established, DDEWG will revisit its Terms of Reference. Some membership attrition resulted from the movement of colleagues across agencies and the restructure of the health sector agencies. Communities of practice will be established to enable connectivity between colleagues in government agencies who work in disability measurement and outcomes monitoring.

Identifying New Zealand's disabled population using administrative data

Data on outcomes for disabled people was included for the first time in the 2020 Annual report. This was possible because of the increased availability of disability data through household surveys implemented by Stats NZ and other government agencies which are now, as standard practice, disaggregating by disability. In this report, new reports and data are highlighted.

Data, evidence, and insights are important in terms of measuring progress. Data and evidence have its major benefit when it leads to new policy, innovation, and responsive public service.

There is currently no dataset that can identify the broader population of disabled people in New Zealand. Administrative data is linked to service provision in most, if not all, government agencies.

Lack of disability data at the individual level (as opposed to surveys and the Census which help us to understand population-level trends) is not only a barrier to service development for disabled people, but also can be a breach of Te Tiriti o Waitangi⁶ and a gap in our responsiveness to Article 31 of the UNCRPD.

To mitigate this, the Patient Profile and National Health Index Project (PPNHI) is a health-led disability data kaupapa that aims to identify all disabled people and their access needs in health datasets by a National Health Index (NHI) identifier. This will enable health entities and Whaikaha to identify and monitor outcomes for the broader disabled population and enhance service responsiveness and accessibility. Whaikaha is also in the early stages of exploring whether a similar approach to PPNHI could become is better tailored to the individual and information part of a cross-government disability data system approach, where service provision about needs is communicated to agencies. It will also be a key mechanism in New Zealand's ability to respond to the UN Committee recommendations presented below.

Looking ahead - UN Committee Concluding Observations on disability data and reporting

The UN Committee reviewed New Zealand's progress in implementing the CRPD this past August. Concluding Observations were made regarding disability data and the Government's responsibility to capture relevant information and monitor outcomes for the disabled population.

Whaikaha and DDEWG members such as Statistics New Zealand and Manatū Hauora will work together in 2023 to develop responses to the UN Committee recommendations on data and monitoring.

A full list of the UN Committee recommendations is attached as an appendix.

⁶ Haumaru: The Covid-19 Priority Report

New Zealand's International Obligations

Independent Monitoring Mechanism Domestic Forum

The Independent Monitoring Mechanism (IMM) was recognised in 2011 as having the mandate under Article 4.3 to monitor the implementation of the UNCRPD. They lead a four-day online domestic forum to review the implementation of the UNCRPD in Aotearoa in preparation for New Zealand's examination by the United Nations Committee on the Rights of Persons with Disabilities (UN Committee).

There was extensive engagement with over 70 officials involved from across Government, and considerable work was undertaken by officials to prepare responses.

The IMM developed questions based on their expectations of the Government on behalf of disabled people, and the forum's content was based on reporting provided by government agencies. The information provided during the forum assisted the IMM to make a more up-to-date assessment of the Government's progress in protecting the rights of disabled people under the UNCRPD ahead of New Zealand's second examination.

The forum provided an opportunity for civil society (disabled people and non-disabled people) to participate by asking supplementary questions online and hear what the Government has achieved so far and the direction for the future.

The forum was also an opportunity to acknowledge inequities, report on the encouraging progress in some areas, as well as an opportunity to recognise that more work is required to ensure disabled New Zealanders can participate fully in all areas of life.

United Nations Examination

On 23 and 24 August 2022, New Zealand's implementation of the UNCRPD was examined in Geneva. The UN Committee was made up of 18 disabled people from across the world who work for the United Nations and are disability experts.

Following the examination, the UN Committee identified approximately 60 concluding observations (recommendations) to progress the UNCRPD in New Zealand. These recommendations span many government agencies.

Whaikaha will co-ordinate and provide stewardship for the acrossgovernment response to these recommendations.

Consideration will need to be given to:

- the prioritisation of recommendations
- how these will be progressed
- the development of a multi-year plan towards implementation.

Government agencies are expected to fully consider the recommendations relevant to their responsibilities and to outline whether they accept or reject a recommendation, in close partnership and engagement with the IMM.

As a matter of record the concluding observations and recommendations from the UN Committee are included as an appendix.

Appendix – United Nations Examination

Committee on the Rights of Persons with Disabilities

Concluding observations on the combined second and third periodic reports of New Zealand*

I. Introduction

1. The Committee considered the combined second and third periodic reports of New Zealand⁷ at its 596th and 597th meetings,⁸ held on 23 and 24 August 2022. It adopted the present concluding observations at its 613th meeting, held on 5 September 2022.

2. The Committee welcomes the combined second and third periodic reports of New Zealand, which were prepared in accordance with the Committee's reporting guidelines and in response to its list of issues prior to reporting.⁹

3. The Committee appreciates the constructive dialogue held with the State party's large high-level delegation, which included delegates from various ministries, entities and institutions and provided further clarifications to the questions posed orally by the Committee. It also acknowledges the additional written information provided to it by the State party.

II. Positive aspects

4. The Committee welcomes the measures taken by the State party to implement the Convention since its previous concluding observations in 2014 and welcomes the measures taken to promote the rights of persons with disabilities, including:

(a) Acceding to the Optional Protocol to the Convention on the Rights of Persons with Disabilities, in October 2016;

(b) Establishing the Whaikaha – Ministry of Disabled People, in July 2022;

(c) Establishing the Royal Commission of Inquiry into historical abuse in State care and in the care of faith-based institutions, in 2018;

- (d) Implementing the Enabling Good Lives initiative nationally;
- (e) Establishing the Government Inquiry into Mental Health and Addiction, in 2018;
 - (f) Adopting the Family Violence Act of 2018.

^{*} Adopted by the Committee at its twenty-seventh session (15 August-9 September 2022).

⁷ <u>CRPD/C/NZL/2-3</u>.

⁸ See <u>CRPD/C/SR.596</u> and <u>CRPD/C/SR.597</u>.

⁹ <u>CRPD/C/NZL/QPR/2-3</u>.

III. Principal areas of concern and recommendations

A. General principles and obligations (arts. 1–4)

5. The Committee is concerned about:

(a) The lack of recognition, across all government portfolio areas, that disability is a whole-of-government responsibility, the lack of engagement with organizations of persons with disabilities outside the ministry of disability portfolio, and the lack of appropriate resourcing for organizations of persons with disabilities to build capacity to meaningfully engage in legislative and policy processes;

(b) The underrepresentation of Māori persons with disabilities in legislative and policy processes to implement the Convention.

6. The Committee recommends that the State party:

(a) Develop strategies to strengthen commitment across all government portfolio areas to ensure disability is recognized as a cross-cutting issue, that meaningful partnerships are developed with organizations of persons with disabilities to ensure close consultation and active involvement in legislative and policy processes to implement the Convention, including co-design, co-production and co-evaluation, and that organizations of persons with disabilities are appropriately resourced to build capacity to participate in partnerships across government portfolio areas;

(b) Develop legislative and policy frameworks that reflect the Treaty of Waitangi, the Convention on the Rights of Persons with Disabilities and the United Nations Declaration on the Rights of Indigenous Peoples to ensure that Māori persons with disabilities are closely consulted and actively involved in decision-making processes and that their right to self-determination is recognized.

B. Specific rights (arts. 5–30)

Equality and non-discrimination (art. 5)

7. The Committee is concerned about:

(a) The lack of an explicit provision within the Human Rights Act of 1993 to recognize the denial of reasonable accommodation as a form of discrimination;

(b) Multiple and intersectional forms of discrimination, including for Māori and Pasifika persons with disabilities;

(c) The high number of complaints received by the Human Rights Commission on the ground of disability and the significant length of time for the resolution of complaint cases submitted to the New Zealand Human Rights Commission and the Human Rights Review Tribunal.

8. The Committee, recalling its general comment No. 6 (2018) on equality and nondiscrimination, recommends that the State party:

(a) Amend the Human Rights Act of 1993 to include an explicit recognition of the denial of reasonable accommodation as a form of discrimination and include a legislative definition of reasonable accommodation consistent with the meaning provided in article 2 of the Convention;

(b) Adopt the legal and other measures necessary to provide for explicit protection from multiple and intersectional forms of discrimination, including discrimination based on the intersection between disability and other identities and life status, such as age, sex, gender, race, indigenous status, lesbian, gay, bisexual, transgender and intersex status, ethnicity, migratory status and national origin; (c) Provide the New Zealand Human Rights Commission and the Human Rights Review Tribunal with the necessary financial and human resources for timely resolution of discrimination complaints.

Women with disabilities (art. 6)

9. The Committee is concerned about:

(a) The lack of a comprehensive intersectional approach to ensure that issues for women and girls with disabilities, including for Māori, Pasifika persons, and migrant women and girls with disabilities, are mainstreamed in both gender and disability legislative and policy areas;

(b) The lack of a representative organization of women and girls with disabilities to advance and promote their human rights.

10. The Committee recalls its general comment No. 3 (2016) on women and girls with disabilities, and Sustainable Development Goal 5, and recommends that the State party:

(a) Strengthen measures and policy mechanisms, including within the gender impact statement and the disability perspective statement, to ensure that the issues for women and girls with disabilities, including for Māori, Pasifika persons and migrant women and girls with disabilities, are comprehensively addressed within gender and disability legislative and policy areas;

(b) Develop strategies and measures, including financial resourcing, to support women and girls with disabilities to develop their own representative organization.

Children with disabilities (art. 7)

11. The Committee is concerned about:

(a) The lack of measures and standing mechanisms to ensure that children with disabilities, including Māori children with disabilities, are able to express their views in legislative and policy development and decision-making processes;

(b) The lack of disaggregated data collected on children with disabilities, including by the Ministry of Education and Oranga Tamariki (Ministry for Children), to inform implementation of national frameworks on children, such as the child and youth well-being strategy.

12. The Committee, recalling the joint statement of the Committee on the Rights of the Child and the Committee on the Rights of Persons with Disabilities on the rights of children with disabilities, issued in 2022, recommends that the State party:

(a) Establish measures and standing mechanisms to ensure that children with disabilities, including Māori children with disabilities, are able to express their views on an equal basis with other children;

(b) Strengthen the collection of comprehensive disaggregated data on children with disabilities, including on Māori children with disabilities, to inform effective early intervention, particularly in the fields of education, care and protection, and youth justice.

Awareness-raising (art. 8)

13. The Committee is concerned about:

(a) The lack of a comprehensive national strategy for awareness-raising activities and campaigns to foster respect for the rights and dignity of persons with disabilities and to create sustained and systemic attitudinal change;

(b) The limited participation of persons with disabilities and their representative organizations, particularly underrepresented groups, such as persons of small stature in awareness-raising programmes on the rights of persons with disabilities.

14. The Committee recommends that the State party:

(a) Adopt and fund a comprehensive national strategy to raise awareness throughout society, particularly among persons with disabilities, their parents and families, professional groups, the media and government officials at all levels, regarding the rights and dignity of persons with disabilities, in order to combat stereotypes, prejudice and harmful practices in all aspects of life and to create sustained and systemic attitudinal change;

(b) Strengthen measures for close consultation and active participation of organizations of persons with disabilities, including underrepresented groups of persons with disabilities in the design, development and delivery of awareness-raising programmes about the rights and dignity of persons with disabilities.

Accessibility (art. 9)

15. The Committee is concerned about:

(a) The slow progress in implementing the Building Act of 2004, which prolongs inaccessibility to public buildings and the progressive upgrade of existing buildings;

(b) Continued barriers experienced by persons with disabilities in accessing the physical environment, transportation, information and communications, including information and communications technologies and systems;

(c) The lack of affordable and accessible housing and the modest target of 15 per cent accessibility for new build public housing;

(d) Reports from organizations of persons with disabilities that the Accessibility for New Zealanders bill, currently before Parliament, does not contain enforcement mechanisms, may not cover private entities or local government, lacks standard-setting and decision-making bodies and lacks obligations to make tangible changes within fixed time frames.

16. Recalling its general comment No. 2 (2014) on accessibility, the Committee recommends that the State party:

(a) Expedite implementation of the Building Act of 2004 and commit to targets and time frames for implementation measures;

(b) Adopt and implement an accessibility strategy underpinned by the principle of universal design to eliminate existing access barriers, in close consultation with and with the active involvement of organizations of persons with disabilities, including underrepresented groups, such as persons of small stature;

(c) Adopt the principle of universal design and commit to a target of 100 per cent accessibility for any newly built public housing and introduce mandatory accessibility requirements for new housing constructed by the private sector;

(d) Establish a co-design and co-production process with organizations of persons with disabilities to address concerns about the Accessibility for New Zealanders bill, following release of the Select Committee's report.

Right to life (art. 10)

17. The Committee is concerned about the negative perceptions and the devaluing of persons with disabilities expressed during the passage of the End of Life Choice Act of 2019, and the potential negative impact of such views on the implementation, monitoring and review of the Act.

18. The Committee recommends that monitoring and review mechanisms for the End of Life Choice Act of 2019 provide publicly available information on the impact on persons with disabilities, including the effectiveness of safeguards to counteract negative perceptions held by medical professionals and to prevent coercion in decision-making.

Situations of risk and humanitarian emergencies (art. 11)

19. The Committee notes with concern the lack of involvement of organizations of persons with disabilities, resulting in shortcomings in the State party's coronavirus disease (COVID-19) response measures for persons with disabilities, such as the lack of accessible and timely information, communication strategies and services.

20. The Committee recommends that the State party closely consult with and actively involve organizations of persons with disabilities in designing and implementing COVID-19 response and recovery measures, informed by the recommendations contained in the report on making disability rights real in a pandemic, prepared by the Independent Monitoring Mechanism in 2021.

Equal recognition before the law (art. 12)

21. The Committee notes the review into adult decision-making capacity by the Law Commission, but it is concerned about the lack of progress made in abolishing the guardianship system and substituted decision-making regime, and the lack of a time frame to completely replace that regime with supported decision-making systems.

22. Recalling its general comment No. 1 (2014) on equal recognition before the law, the Committee recommends that the State party repeal any laws and policies and end practices or customs that have the purpose or effect of denying or diminishing the recognition of any person with disabilities as a person before the law, and implement a nationally consistent supported decision-making framework that respects the autonomy, will and preferences of persons with disabilities.

Access to justice (art. 13)

23. The Committee is concerned about:

(a) The overrepresentation of persons with disabilities in the care and protection, youth justice and prison populations;

(b) The lack of free independent advocacy and legal representation.

24. The Committee recommends that the State party:

(a) Develop a disability justice strategy to address the overrepresentation of persons with disabilities in the care and protection, youth justice and prison populations, including by strengthening age-appropriate procedural accommodations, measures to prevent persons with disabilities coming into contact with the justice system, and training on disability rights in the justice and care and protection systems;

(b) Establish and adequately resource free independent advocacy and increase resources for community legal advice services.

Liberty and security of person (art. 14)

25. The Committee welcomes the commitment to repeal and replace the Mental Health (Compulsory Assessment and Treatment) Act of 1992, but is concerned that new mental health legislation may still allow for involuntary detention and compulsory treatment and may not actively involve the participation of persons with disabilities, particularly persons with psychosocial disabilities through their representative organizations in the development process.

26. The Committee recalls its guidelines on the right to liberty and security of persons with disabilities and recommends that the State party ensure that new mental health legislation embeds the Convention principles and standards to ensure that there are no provisions that allow for the deprivation of liberty on the basis of impairment or that allow for compulsory treatment, and that the development process actively involves persons with disabilities, particularly persons with psychosocial disabilities.

27. The Committee is concerned about:

(a) Legislation that allows for involuntary detention and compulsory treatment on the basis of impairment, including the Substance Addiction (Assessment and Treatment) Act of 2017;

(b) The Intellectual Disability (Compulsory Care and Rehabilitation) Act of 2003, which includes extensions to compulsory care orders and which allows persons with intellectual disabilities to be detained for periods of time exceeding the maximum length of the sentence they would be liable to in the criminal justice system.

28. The Committee recalls its guidelines on the right to liberty and security of persons with disabilities and recommends that the State party:

(a) Repeal all provisions that allow for the deprivation of liberty on the basis of impairment, including the Substance Addiction (Assessment and Treatment) Act of 2017;

(b) Repeal provisions within the Intellectual Disability (Compulsory Care and Rehabilitation) Act of 2003 that allow for persons with disabilities to be detained for periods of time exceeding the maximum length of the sentence they would be liable to in the criminal justice system.

Freedom from torture or cruel, inhuman or degrading treatment or punishment (art. 15)

29. The Committee is seriously concerned about the continued, and in some cases prolonged, use of solitary confinement, seclusion, physical and chemical restraints and other

restrictive practices on persons with disabilities, in particular persons with psychosocial and/or intellectual disabilities, in places of detention.

30. The Committee recommends that the State party take immediate action to eliminate the use of solitary confinement, seclusion, physical and chemical restraints and other restrictive practices in places of detention.

Freedom from exploitation, violence and abuse (art. 16)

31. The Committee is concerned that:

(a) Rates of violence against persons with disabilities are much higher than those experienced by the rest of the population, and women and girls with disabilities, including Māori and Pasifika women and girls with disabilities, experience high levels of gender-based violence;

(b) The National Strategy to Eliminate Family Violence and Sexual Violence is gender-neutral in relation to its focus on persons with disabilities.

32. The Committee recalls its general comment No. 3 (2016) on women and girls with disabilities and recommends that the State party, in close consultation with and with the active involvement of persons with disabilities, in particular women and girls with disabilities, including Māori and Pasifika women and girls with disabilities:

(a) Develop measures to address the high rates of violence experienced by persons with disabilities and to combat all forms of gender-based violence for inclusion within outcome area 4 of the New Zealand Disability Strategy;

(b) Incorporate gender-specific measures for the disability focus within the National Strategy to Eliminate Family Violence and Sexual Violence and ensure specific issues for women and girls with disabilities are mainstreamed throughout the Strategy.

33. The Committee is concerned that persons with disabilities in existing institutional settings experience violence, abuse and neglect that is similar to that exposed by the Royal Commission of Inquiry into abuse in care.

34. The Committee recommends that urgent action be taken to amend legislative and policy frameworks that facilitate violence, abuse and neglect in institutions, to remove persons with disabilities from institutional settings with adequate support for living in the community, to investigate and sanction institutions and perpetrators and to provide victim and recovery support services and redress.

Protecting the integrity of the person (art. 17)

35. The Committee is seriously concerned about:

(a) The lack of action by the State party, in response to the Committee's 2014 concluding observations, to address the fact that parents can consent to sterilization of their children with disabilities and to also address laws that allow for the use of sterilization, contraception and abortion procedures with regard to women and girls with disabilities without their personal consent;

(b) The lack of a prohibition on non-urgent, intrusive and irreversible medical interventions or the imposition of hormones on intersex infants and children before an age at which they can provide informed consent;

(c) The lack of legislative provisions to prohibit Ashley Treatment or growth attenuation treatment for children with disabilities, including to prohibit accessing these procedures outside New Zealand;

(d) The lack of data in relation to sterilization and abortion procedures performed on persons with disabilities without their personal consent, non-urgent medical interventions on intersex children without their consent and growth attenuation treatment.

36. The Committee urges the State party to:

(a) Immediately place a moratorium on sterilization, contraception and abortion procedures performed without personal consent, and take urgent action to adopt uniform legislation prohibiting such procedures on women and girls with disabilities;

(b) Adopt clear legislative provisions that explicitly prohibit the performance of unnecessary, invasive and irreversible medical interventions, including surgical, hormonal or other medical procedures on intersex children before an age at which they can provide informed consent;

(c) Recalling previous recommendations made by the Committee on the Rights of the Child,¹⁰ develop and implement a child rights-based health-care protocol for intersex children, setting the procedures and steps to be followed by health teams, ensuring that no one is subjected to unnecessary medical or surgical treatment during infancy or childhood, guaranteeing the rights of children to bodily integrity, autonomy and self-determination, and provide families with intersex children with adequate counselling and support;

(d) Adopt legislative provisions to prohibit growth attenuation treatment (Ashley Treatment), including a prohibition on procedures sought outside New Zealand;

(e) Adopt legal provisions to provide legal remedies and holistic redress to victims of medical interventions performed without personal consent, including access to support and recovery services and adequate compensation;

(f) Develop measures to ensure reporting and data collection on sterilization, contraception and abortion procedures performed without personal consent, on nonurgent medical interventions performed on intersex children and on growth attenuation treatment.

Liberty of movement and nationality (art. 18)

37. The Committee is concerned about:

(a) The acceptable standard of health requirements applied under the immigration rules of New Zealand, which allow for discrimination in practice against persons with disabilities in immigration and some asylum procedures;

(b) The ineligibility under the acceptable standard of health medical waiver policy of persons with disabilities whose impairment requires full-time care, including care in the community;

(c) Provisions of the Immigration Act of 2009, which prevent people from lodging complaints related to immigration decisions with the New Zealand Human Rights Commission.

38. The Committee recommends that the State party:

(a) Review and amend its immigration and asylum legislation and administrative rules, in close consultation with and with the active involvement of organizations of persons with disabilities and migrants and refugees, to ensure that persons with disabilities do not face discrimination in any of the formalities and procedures relating to immigration and asylum, in particular as a result of the application of the acceptable standard of health requirements;

(b) **Reverse the ineligibility under the acceptable standard of health medical** waiver policy of persons with disabilities whose impairment requires full-time care;

¹⁰ <u>CRC/C/NZL/CO/5</u>, para. 25.

(c) Repeal section 392, paragraphs (2) and (3), of the Immigration Act of 2009, which prohibits the lodging of immigration-related complaints to the Human Rights Commission.

Living independently and being included in the community (art. 19)

39. The Committee is concerned about:

(a) The protracted rollout of initiatives under the Enabling Good Lives programme and the exclusion of particular impairment types, such as people with foetal alcohol syndrome disorder, from the programme;

(b) The lack of a comprehensive deinstitutionalization strategy to close all residential institutions, including group homes and residential specialist schools, and to enable community supports for persons with disabilities to live independently in the community;

(c) Barriers for persons with disabilities to choose where and with whom they live, such as the lack of affordable and accessible housing and the Disability Community Residential Support Services Strategy that provides congregate living arrangements linked with shared support;

(d) The continued investment of public resources in residential specialist schools for children with disabilities.

40. The Committee recalls its general comment No. 5 (2017) on living independently and being included in the community, and its guidelines on deinstitutionalization, including in emergencies, and recommends that the State party:

(a) Expedite the national rollout of the Enabling Good Lives programme and ensure that all persons with disabilities, including people with foetal alcohol syndrome disorder, are eligible;

(b) Develop a comprehensive deinstitutionalization strategy, with specific time frames and adequate budgets, to close all residential institutions, including group homes and residential specialist schools, to provide community supports for persons with disabilities to live independently in the community;

(c) Develop measures to remove barriers for persons with disabilities to choose where and with whom they live, including by committing to increase the supply of affordable and accessible housing and by reforming programmes, such as the Disability Community Residential Support Services Strategy to prevent congregate living arrangements linked with shared support;

(d) Take measures to cease investment in residential specialist schools for children with disabilities and establish a deinstitutionalization process that ensures adequate support is provided for children with disabilities to return to their families and exercise their right to an inclusive education.

Personal mobility (art. 20)

41. The Committee is concerned that as a result of funding caps and the high cost of assistive devices and equipment, persons with disabilities are unable to afford the appropriate assistive devices, modification services and mobility aids.

42. The Committee recommends that the State party take measures to ensure the affordability of necessary assistive devices, modification services and mobility aids, including assistive technology for persons with disabilities.

Freedom of expression and opinion, and access to information (art. 21)

43. The Committee is concerned about:

(a) Gaps in the provision of government information in accessible formats, such as Easy Read, sign language, Braille, and tactile, augmentative and alternative means of communication;

(b) The shortage of New Zealand Sign Language interpreters, including trilingual interpreters who can interpret between New Zealand Sign Language, English and Te Reo Māori.

(c) The limited television channels that provide captioning and audio description with funding only provided on a yearly basis;

(d) The lack of specific initiatives to increase the provision of accessible information and communications for Māori persons with disabilities.

44. The Committee recommends that the State party:

(a) Strengthen implementation of the Accessibility Charter by expanding its coverage to local authorities and district health boards, and increasing funding and capacity for the provision of accessible information and communication formats and technologies;

(b) Implement incentives and increase funding for the training and employment of sign language interpreters, including trilingual interpreters who can interpret between New Zealand Sign Language, English and Te Reo Māori, and adopt a national standardized accreditation framework for sign language;

(c) Adopt legislation to ensure captioning and audio description is provided on television channels with funding security;

(d) Develop specific initiatives to increase the provision of culturally appropriate, accessible information and communications for $M\bar{a}$ ori persons with disabilities.

Respect for home and the family (art. 23)

45. The Committee is concerned about:

(a) The lack of action by the State party, in response to the Committee's 2014 concluding observations, to repeal section 8 of the Adoption Act of 1955, which allows for children to be removed for adoption from parents with disabilities without their consent;

(b) The lack of suitable family placements for children with disabilities taken into care, including the ability for siblings to be placed together in families;

(c) The lack of comprehensive information, services and supports for children with disabilities and their families, resulting in out-of-home placements, including placements in residential specialist schools;

(d) The lack of specific policies and guidelines concerning parents with disabilities within Oranga Tamariki (Ministry for Children) and a limited human rights understanding of disability, resulting in the removal of children, including newborn babies, from their parents

with disabilities, particularly parents with intellectual disabilities and Māori parents with disabilities.

46. The Committee recalls the joint statement issued by it with the Committee on the Rights of the Child on the rights of children with disabilities, and recommends that the State party:

(a) Repeal section 8 of the Adoption Act of 1955 and amend the statute to ensure that parents with disabilities are treated on an equal basis with other parents with respect to adoption;

(b) Implement strategies to increase family placements for children with disabilities and to ensure that siblings can remain together in these placements;

(c) Significantly increase and resource comprehensive information, services and supports for children with disabilities and their families to prevent out-of-home placements and placements in institutions, including residential specialist schools;

(d) Take immediate action within Oranga Tamariki (Ministry for Children) to implement the recommendations from the 2020 Ombudsman report, entitled "A matter of urgency", and increase disability, gender and culturally appropriate expertise, policies and guidelines that adhere to the Convention in order to ensure that newborn babies and children are not removed from parents with disabilities, particularly parents with intellectual disabilities and Māori parents with disabilities, on the basis of impairment.

Education (art. 24)

47. The Committee is concerned about:

(a) The increased enrolment of students with disabilities in separate learning environments, such as specialist schools, residential specialist schools and special education satellite units, despite legislative and policy commitments to inclusive education;

(b) The proposal to change entry requirements for enrolment at residential specialist schools for children with disabilities rather than investing in inclusive education;

(c) The high proportion of Māori children with disabilities in residential specialist schools.

48. Recalling its general comment No. 4 (2016) on the right to inclusive education and target 4.5 and 4.a of the Sustainable Development Goals, the Committee recommends that the State party:

(a) Develop an inclusive education strategy that includes measures for the devolution of segregated education settings into a mainstream inclusive education system, to transition funding and resources from specialist education to inclusive education, to prioritize inclusive education in teacher training, to establish uniform, inclusive education policies and guidelines, to develop an inclusive education curriculum and to promote and raise community awareness;

(b) Withdraw the proposal to change entry requirements for enrolment in residential specialist schools and redirect funding and resources into an inclusive education system;

(c) Develop specific culturally appropriate strategies to address the high proportion of Māori children with disabilities in residential specialist schools, including the provision of supports to remain with whānau (extended family networks) in their local communities.

Health (art. 25)

49. The Committee is concerned about the poorer health outcomes and life expectancy, compared with the general population, experienced by persons with disabilities, in particular persons with intellectual disabilities, and Māori and Pasifika persons with disabilities.

50. The Committee recommends that the State party progress development of the Health of Disabled People Strategy and strengthen and expedite measures within the New Zealand Disability Strategy, the Health Services and Outcomes Kaupapa Inquiry and the Pathways to Pacific Health and Well-being Strategy, to increase access to health services and improve health outcomes for persons with disabilities.

Work and employment (art. 27)

51. The Committee is concerned about:

(a) The continued low rate, compared with the general population, of labour force participation and the low rate of employment of persons with disabilities in the open labour market;

(b) The continued segregated employment programmes for persons with disabilities ("business enterprises") and the use of minimum wage exemption permits.

52. The Committee recommends that the State party:

(a) Expedite the development of the Disability Employment Action Plan in close consultation with and with the active involvement of persons with disabilities, including women with disabilities, Māori with disabilities and Pasifika persons with disabilities;

(b) Incorporate concrete measures in the Disability Employment Action Plan, with resources, time frames and monitoring mechanisms that ensure the transition from segregated employment to the open labour market;

(c) Repeal section 8 of the Minimum Wage Act of 1983 and ensure that persons with disabilities are paid on the principle of equal pay for work of equal value.

Adequate standard of living and social protection (art. 28)

53. The Committee is concerned about:

(a) The disproportionate levels of poverty among persons with disabilities, who are twice as likely to live in poverty than the general population, and for Māori persons with disabilities, who are three times as likely to live in poverty, and the protracted implementation of the recommendations from the Welfare Expert Advisory Group report;

(b) The fragmented model of support for persons with disabilities, and the disparity in access to health care, habilitation and rehabilitation services and income support between those who are eligible for coverage under the Accident Compensation Corporation and those who are supported through the disability support system, with those in the latter category more likely to face barriers in maintaining an adequate standard of living;

(c) The exclusion from the disability support system of people with foetal alcohol syndrome disorder, chronic fatigue syndrome and other chronic and rare conditions.

54. The Committee recommends that the State party:

(a) Expedite implementation of the recommendations of the report from the Welfare Expert Advisory Group to address the inequity and complexity within the social security system for persons with disabilities;

(b) Urgently address the fragmentation of the support system for persons with disabilities through a co-design and co-production process to address the inequity between Accident Compensation Corporation recipients and other persons with disabilities, including considering an integrated model of support to ensure uniform standards for all persons with disabilities.

(c) Ensure people with foetal alcohol syndrome disorder, chronic fatigue syndrome and other chronic and rare conditions have access to the disability support system and are included in disability policies and programmes.

Participation in political and public life (art. 29)

55. The Committee is concerned about the lack of support for persons with disabilities to form their own sustainable organizations and build their capacity to represent persons with disabilities, and in particular the lack of organizations to represent Māori persons with disabilities, Pasifika persons with disabilities, lesbian, gay, bisexual, transgender and intersex persons with disabilities, children with disabilities and women and girls with disabilities.

56. The Committee recommends that the State party develop strategies and measures, including financial resources to support persons with disabilities to form sustainable representative organizations, including to support the development of organizations of Māori persons with disabilities, Pasifika persons with disabilities, lesbian, gay, bisexual, transgender and intersex persons with disabilities, children with disabilities, and women and girls with disabilities.

C. Specific obligations (arts. 31–33)

Statistics and data collection (art. 31)

57. The Committee notes with concern the serious shortcomings with regard to data and statistics on the situation of persons with disabilities across all life domains, including in health, education, employment and justice. It also notes with concern the lack of disaggregated data, including in relation to the situation of Māori persons with disabilities, Pasifika persons with disabilities, lesbian, gay, bisexual, transgender and intersex persons with disabilities, children with disabilities and women and girls with disabilities.

58. The Committee recommends that the State party, in conjunction with Statistics New Zealand, develop a national disability data framework to ensure appropriate, nationally consistent measures for the collection and public reporting of disaggregated data on the full range of obligations contained in the Convention, especially with regard to Māori persons with disabilities, Pasifika persons with disabilities, lesbian, gay, bisexual, transgender and intersex persons with disabilities, children with disabilities and women and girls with disabilities.

National implementation and monitoring (art. 33)

59. The Committee is concerned about:

(a) Information received indicating that the State party is not responding to or incorporating the recommendations contained in reports of the Independent Monitoring Mechanism;

(b) The lack of resources, including financial support available to support the Disabled People's Organisations Coalition to fulfil its mandate as one partner of the Independent Monitoring Mechanism, including to engage broadly with the disability community, to participate in Convention implementation activities and forums with government agencies and other stakeholders and to effectively communicate with persons with disabilities, including translation into Māori as an official language.

60. The Committee recommends that the State party take into account the Committee's guidelines on independent monitoring frameworks and their participation in the work of the Committee.¹¹ It also recommends that the State party:

(a) Strengthen its accountability processes and its partnership with the Independent Monitoring Mechanism to track and publicly report on the outcomes and implementation of the recommendations contained in the reports of the Mechanism;

¹¹ <u>CRPD/C/1/Rev.1</u>, annex.

(b) Allocate adequate resources, including financial support to the Disabled People's Organisations Coalition, to enable it to effectively fulfil its mandate as a partner of the Independent Monitoring Mechanism.

IV. Follow-up

Dissemination of information

61. The Committee emphasizes the importance of all the recommendations contained in the present concluding observations. With regard to urgent measures that must be taken, the Committee would like to draw the State party's attention to the recommendations contained in paragraph 40, on living independently and being included in the community, and paragraph 54, on adequate standard of living and social protection.

62. The Committee requests the State party to implement the recommendations contained in the present concluding observations. It recommends that the State party transmit the concluding observations for consideration and action to members of the Government and Parliament, officials in relevant ministries, local authorities and members of relevant professional groups, such as education, medical and legal professionals, as well as to the media, using modern social communication strategies.

63. The Committee strongly encourages the State party to involve civil society organizations, in particular organizations of persons with disabilities, in the preparation of its periodic report.

64. The Committee requests the State party to disseminate the present concluding observations widely, including to non-governmental organizations and organizations of persons with disabilities, and to persons with disabilities themselves and members of their families, in national and minority languages, including sign language, and in accessible formats, including Easy Read, and to make them available on the government website on human rights.

Next periodic report

65. The State party has opted to report under the simplified reporting procedure regarding its periodic reports. The Committee will prepare list of issues prior to reporting and request the State party to submit its replies within one year upon receipt of the list of issues. The replies of the State party, expected by 25 October 2030, will constitute its combined fourth to sixth periodic reports.