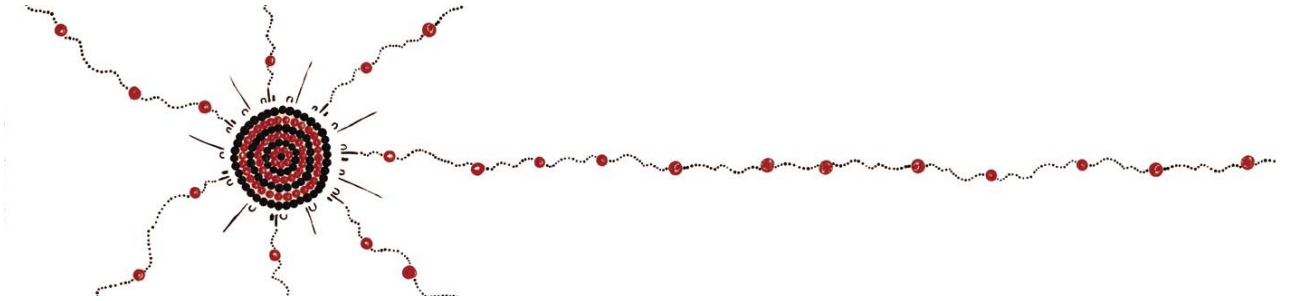


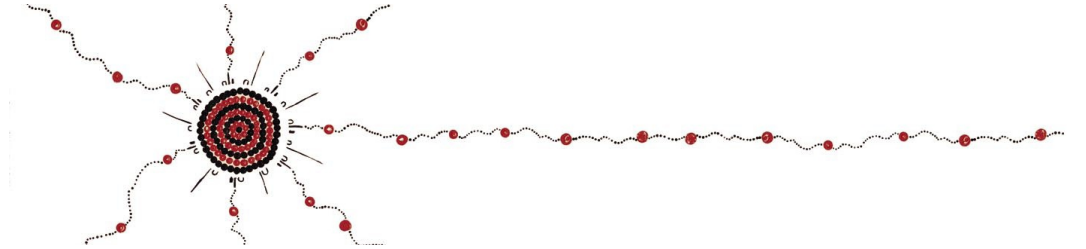
# **The Lived Experience of Aboriginal and Torres Strait Islander people with disability**

**Presented by Damian Griffis, Executive Officer  
First Peoples Disability Network (Australia)**



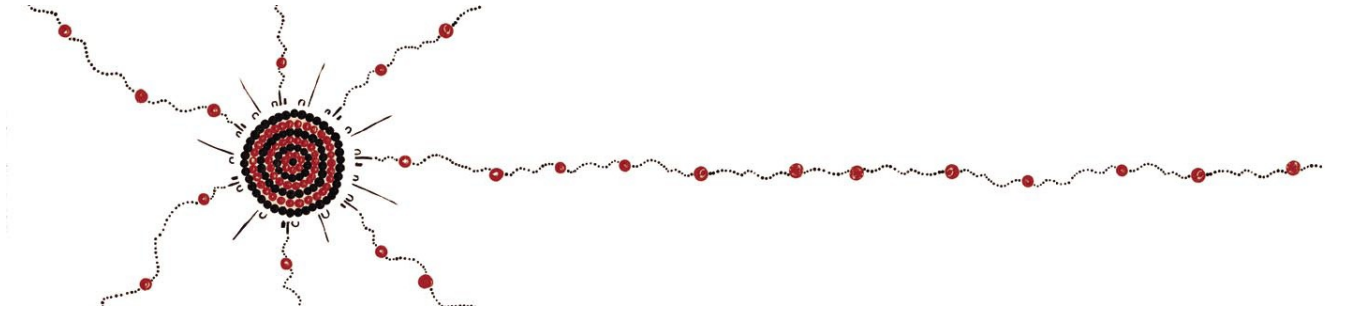
## Some Facts about disability in Aboriginal and Torres Strait Island communities

- Anecdotally it was believed that the prevalence of disability was twice that of the non-Aboriginal population. (Australia has one of the broadest definitions of disability in the world).
- Recently quantified as 37% of the Aboriginal population reporting a disability or long-term health condition. (Steering Committee for the Review of Government Service Provision, *Overcoming Indigenous Disadvantage; Key Indicators 2009*)
- Conservative result given the lack of data on prevalence of psychological disability (mental illness).
- Very little reference material on Aboriginal and Torres Strait Island people with disability.
- Hierarchy of disability appears to have been played out in many Aboriginal communities.
- Many Aboriginal people do not self-identify as a person with disability



## **Some Facts about disability in Aboriginal and Torres Strait Island communities**

- Many Aboriginal do not identify as people with disability because:  
In traditional language there was no comparable word to disability;  
Why would an Aboriginal person want to take on the negative label of disability if they already experience discrimination based on their Aboriginality?  
They don't want to draw attention to themselves  
Some parents are concerned they may be judged as bad parents, or have their children taken away.  
In some communities everyone struggles so having a disability is not viewed as something particularly different.



## **Disability in Aboriginal & Torres Strait Island Communities; Social factors**

There are a number of social factors that contribute to the higher prevalence such as:

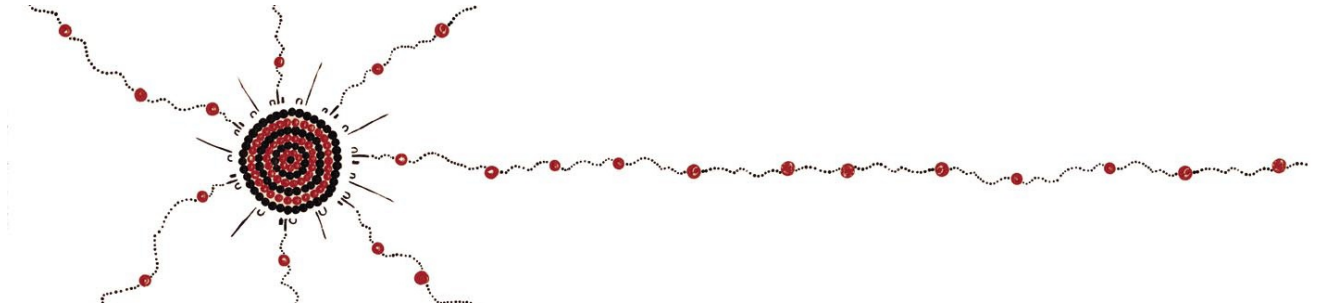
Lack of access to good quality healthcare (including health promotion and health prevention programs).

Lack of access to appropriate housing and urban infrastructure (including clean water and sanitation)

Greater exposure to violence and abuse.

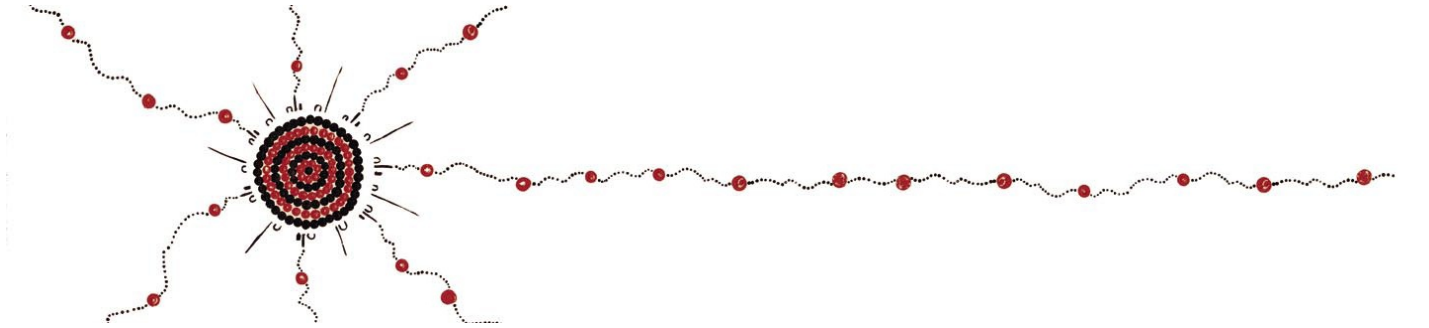
The psycho-social impact of colonisation, dispossession from land.

Substance dependence.



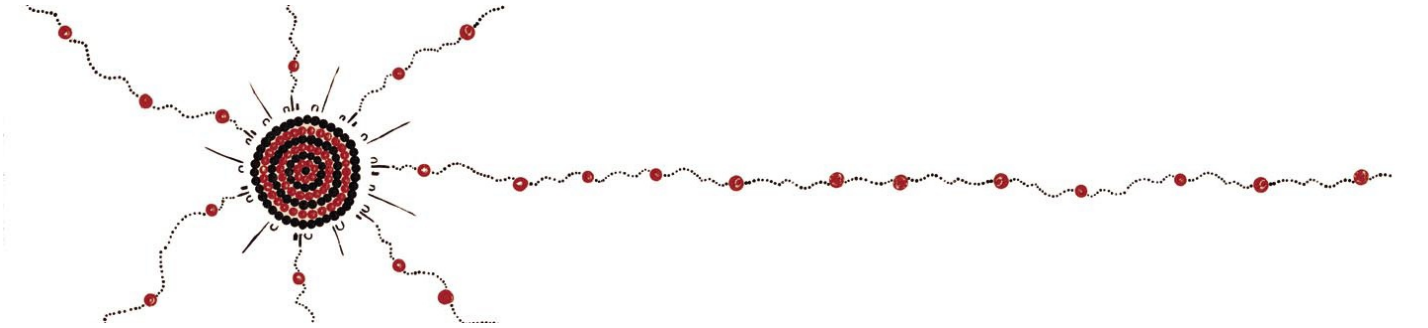
## **The Lived Experience of Aboriginal & Torres Strait Island people with disability**

- The denial of the most fundamental of human rights i.e, access to shelter, access to education, employment
- Aboriginal people with disability have different experiences depending on where they live and the availability of services.
- Very poor access to information. Concerted outreach approach required.
- Lack of awareness of special assistance and other beneficial social programs.
- Diversity of experiences; different jurisdictions at different levels of development with regard the development of the social movement of Aboriginal people with disability.



## **Medical Model of Disability and its negative impact on the lives of Aboriginal people with disability**

- Closing the Gap campaign not focused on disability
- Examples where only part of the job is being done
- Medical model implies that something is wrong with someone and that they need to be cured; not possible given most disability is permanent
- Dominated by the views of medical and other health practitioners and not people with disability themselves.
- Doing ‘for’ as opposed to doing ‘with’
- Often promotes services as the only solution for people with disabilities



## What do we want to achieve?

- Be a voice for Aboriginal and Torres Strait Islanders with disability who can't be here with us. Represent their views.
- Come up with some strategies for creating positive change.
- Reflect upon models like CBR as possible solutions.
- Apply a social model of disability framework.