|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Just visiting****In hospital without disability supports**  | **Go for a yearly check-up**  | **CHANCE ?Develop toothache**  | **Application for Guardianship or other Substitute Decision Making initiated due to issues with maintaining your healthcare**  | **Have a psycho-social disability**  | **COMMUNITY CHEST****Try and maintain private insurance = $0** | **No height adjustable exam bed** | **Specialist is in Sydney** | **Need a colonoscopy or other intrusive procedure**  | **Need expensive pharmaceuticals**  | **Develop an aged related illness prior to 65**  | **Diagnostic**<wheelchair parking sign with an arrow through it>**Overshadowing** |
| Stuck in rehab  | Article 25 indicator: Persons with disability enjoy the highest attainable standard of health. | Article 25 indicator: Health professionals provide the same quality of care to persons with disability as to others. | Article 25 indicator: Health care is provided only on the basis of the free and informed consent of the person with disability receiving treatment. | Article 25 indicator: Health professionals are educated to raise awareness of the human rights, dignity, autonomy and needs of persons with disability. | Article 25 indicator: Discrimination on the ground of disability in the provision of health insurance and life insurance is prohibited. Such insurance is available to persons with disability on a fair and reasonable basis. | Article 25 indicator: Health professionals provide the same quality of care to persons with disability as to others.Article 25 indicator: Persons with disability have access to any specialist health services they require, including early identification and intervention services, and services designed to minimise or prevent further disability. |  Article 25 indicator: Health services are available in local communities, including in rural areas. | Article 25 indicator: Persons with disability have access to any specialist health services they require, including early identification and intervention services, and services designed to minimise or prevent further disability. | Article 25 indicator: Persons with disability have access to the same range, quality and standard of free or affordable health care and programmes as other persons. | Article 25 indicator: Health professionals provide the same quality of care to persons with disability as to othersAND Article 25 indicator: Persons with disability have access to any specialist health services they require, including early identification and intervention services, and services designed to minimise or prevent further disability. | **My Doctor doesn’t understand my disability**  |
| **I’m indigenous**  | Article 25 indicator: Persons with disability do not experience discrimination in any aspect of the health system. | None of us know what our health might look like round the corner, but every day health issues can be less predictable if you have a disability Play this health themed version of our choice and control game to explore the issuesHealth as a Human Right**International Covenant on Economic, Social and Cultural Rights Article 12**: The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health…**Convention on the Elimination of All Forms of Discrimination Against Women Article 12**: .States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning …**Convention on the Rights of the Child Article 24**: States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health…**Convention on the Rights of Persons with Disabilities Article 25**: States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability.Social Model*I subscribe to the social model of disability, which makes a clear distinction between impairment and disability. Impairment describes our physical or neurological state - like paraplegia or blindness - while disability is created by the barriers we encounter in society - like buildings with no lifts or information not being provided in formats we can access. Source:* Stella Young, The Drum 2012Social determinants of health The social determinants of health influence the health of populations. They include income and social status; social support networks; education; employment/working conditions; social environments; physical environments; personal health practices and coping skills; healthy child development; gender; and culture. Source: AIHW)The Medical Model of Disability The Medical Model sees the disabled person's impairment or health condition as 'the problem'. The focus is therefore on 'fixing' or 'curing' the individual (Source: PWDA resources) | CRPD: Article 26– Habilitation and rehabilitation“States Parties shall organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, particularly in the areas of health, employment, education and social services, in such a way that these services and programmes: a) Begin at the earliest possible stage, and are based on the multidisciplinary assessment of individual needs and strengths”3. States Parties shall promote the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities, as they relate to habilitation and rehabilitation. | **Need rehabilitation**  |
| **I’m from a CALD background**  | Article 25 indicator: Persons with disability do not experience discrimination in any aspect of the health system. | CRPD: Article 29 – Participation in political and public life States Parties shall guarantee to persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others, and shall undertake:.. b) To promote actively an environment in which persons with disabilities can effectively and fully participate in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, includingii. Forming and joining organizations of persons with disabilities to represent persons with disabilities at international, national, regional and local levels. | **Locate systemic advocacy inside the health system**  |
| **I don’t want that treatment or medication or operation <circle with an arrow through it>**  | Article 25 indicator: Health professionals provide the same quality of care to persons with disability as to others. |  | **Dual disability and chronic illness (go back four places)** |
| **I want to eat better**  | Article 25 indicator: Persons with disability enjoy the highest attainable standard of health. | Article 25 indicator: Persons with disability do not experience discrimination in any aspect of the health system. | **CHANCE****?****Am I defined as having a disability or an illness?**  |
| **I want to get fit**  | Article 25 indicator: Persons with disability enjoy the highest attainable standard of health.AND NDS: Outcome 6: Health and Wellbeing: People with disability attain highest possible health and wellbeing outcomes throughout their lives “The level of control an individual has over his or her own life can make a big difference to the quality of their life and to their health and wellbeing.”  | Article 25 indicator: Persons with disability do not experience discrimination in any aspect of the health system.AND NDS: Outcome 4: Personal and Community SupportPeople with disability, their families and carers have access to a range of supports to assist them to live independently and actively engage in their communities AND CRPD Article 21.e and 243b Obligates the government to encourage the learning of Auslan and promote linguistic identity of Deaf Community. | **Use a communication board**  |
| **CHANCE****?****(Or finding a Doctor who understands your needs)** | Article 25 indicator: Health professionals are educated to raise awareness of the human rights, dignity, autonomy and needs of persons with disability. | **Use Auslan**  |
| **I don’t want that treatment**  | Article 25 indicator: Health care is provided only on the basis of the free and informed consent of the person with disability receiving treatment. | **Need plain English**  |
| **I have a drug or alcohol problem and need access to community programs**  | NDS: Outcome 1 Inclusive and Accessible Communities: People with disability live in accessible and well-designed communities with opportunity for full inclusion in social, economic, sporting and cultural life. | CRPD Countries must protect the physical and mental integrity of persons with disabilities, just as for everyone else (Article 17), guarantee freedom from torture and from cruel, inhuman or degrading treatment or punishment, | **Wind up in chemical or physical restraint due to an underlying condition**  |
| **The Dr doesn’t understand the way I speak or I am described as having “challenging behaviours”**  | Article 25 indicator: There are health care ethical standards in place for public and private health care that ensure that persons with disability receive the highest attainable health care without discrimination. | Article 25 indicator: Discriminatory denial of health care or health services, or foods or fluids on the basis of disability, is prohibited. | Article 25 indicator: Persons with disability have access to any specialist health services they require, including early identification and intervention services, and services designed to minimise or prevent further disability. | Article 25 indicator: Persons with disability have access to the same range, quality and standard of population-based public health programmes as other persons. | “With the adoption of the United Nations Convention on the Rights of Persons with Disability (CRPD), a new model emerged which is the human rights model of disability.The medical model of disability, which the CRPD tries to overcome, regards disability as an impairment that needs to be treated, cured, ﬁxed or at least rehabilitated. Exclusion of disabled persons from society is regarded as anindividual problem and the reasons for exclusion are seen in the impairment”. Theresia Degener, Disability in a Human Rights Context, 2016 | Article 25 indicator: Health services, including health-related rehabilitation services, are gender sensitive. | Article 25 indicator: Health services, including health-related rehabilitation services, are gender sensitive. | Article 25 indicator: Persons with disability have access to the same range, quality and standard of population-based public health programmes as other persons. | Article 25 indicator: Persons with disability have access to the same range, quality and standard of free or affordable sexual and reproductive health care and programmes as other persons | Article 25 indicator: Persons with disability have access to any specialist health services they require, including early identification and intervention services, and services designed to minimise or prevent further disability. | **Released early from hospital** |
| **The private clinic won’t take me because of my disability** | **I can’t find, access or afford to travel to a bulk billing doctor in my area** | **They assume my disability is a terminal condition or won’t cut up my food or provide me with assistance in basic areas due to assumptions about my quality of life** | **Need rehabilitation after an accident or have an accident AFTER acquiring a disability** | **Try to access public health programs or information**  | **MEDICAL MODEL SQUARE****They want to fix me rather than make the changes needed to allow me to live independently** **(GO BACK TO THE START)** | **Be a woman with a disability** | **Idetify as LGBTIQ**  | **Flu pandemic or public health emergency but I don’t get informed**  | **Want access to contraceptives or reproductive health advice**  | **Kept in hospital for too long because my home isn’t ready**  | **I need to leave my home temporary and wind up in hospital due to a lack of other options**  |

Produced by the ACT Council of Social Service as part of an I-Day grant provided by the ACT Office For Disability