

Inclusion & Diversity in the APS – what does it look like, how do I do it?

Christina Ryan – General Manager, Advocacy for Inclusion

Paper delivered to the Health Diversity Conference - Tuesday 29 April 2014.

Diversity (slide)

noun, plural di-ver-si-ties.

1.
the state or fact of being [diverse](#); difference; unlikeness: diversity of opinion.
2.
variety; multiformity.
3.
a point of difference.¹

Diversity is about difference, variety. It's about not all being the same. It's about recognising difference in opinion, looks, character, and ways of approaching things.

How many people here have green eyes? Stick your hand up. Okay now keep your hand up if you have green eyes and also have a partner you live with. Right, now still keep your hand up if you are also wearing white socks today?

You see, everyone is a bit different when it comes down to it. We all have something that makes us different from everyone else. It might seem like a little thing, but that little thing to you could seem like a very big thing to other people.

Sometimes our difference is physically obvious, sometimes it's not, but any assumption that all people are the same and should be the same is just ridiculous, and any assumption that being different makes you less of a person, or incapable is also ridiculous. Often it's what makes you more appropriate for the job, or better at understanding aspects of a situation.

So, let's have a look at disability as the point of difference, as the type of diversity:

What do we know about disability?

Most people don't know much. They make assumptions about people with disabilities, assumptions about what we can do, what our lives are like, and about how we will behave. A lot of people empathise but they don't actually understand what it's like to live in a world that is made for someone else, and which looks down on you for looking different.

Assumptions are also dangerous as they can reduce a person's capacity.

Some of the most demeaning and derogatory language used today is actually slang for disability: crip, monga, loony, stupid, ugly, spaz or spac. Many people toss out these hateful and hurtful terms without realising that they all refer to people with disabilities, and are designed to make us seem less than human, and definitely less than "normal" people.

There is also a big trade in euphemisms about disability, words designed to make people feel more comfortable about not having to say "disability" and pretend that it's something

¹ <http://dictionary.reference.com/browse/diversity>

else they are dealing with. These words make us invisible and they are also not okay: differently abled is a good example.

This demeaning language also feeds the myths about disability that still permeate our social view: that people with disabilities are pathetic, that we are burdens on those around us, that we cannot do anything and certainly can't contribute to the community. We are an "inspiration" when we do basic everyday things like get out of bed, go to work or study. We are also unreliable, unpredictable and unsafe to be around. Deep down, most people have some of these myths sitting there, they have been pushed very hard for centuries and resulted in people with disabilities being made invisible by being put away in institutions, or asylums. That practice has still not ceased, in fact there are still large institutions in Australia today. We still don't trust people with disabilities to be a regular part of the community.

Many people with disabilities don't tell others they have a disability because the stigma and hatred about disability is still very strong in our society. If you can get away with being "normal" then it makes life a whole lot easier.

People with disabilities are 18% of the Australian population², 15% of the world population³. We are the biggest minority group on the planet. In the ACT we are about 17.6% of the population. About 1 in 5 Australians are people with disabilities. 1 in 5, that's over 4 million people. In the ACT it's about 66,000 people.

Only about 10% of us are people with high support needs, people who need daily assistance to get by and live with dignity. Those are the people who are targeted to get NDIS packages. Despite this many of that 10% are also productive contributing people, like me for example, others would be if they were given the opportunity.

The rest of us get by, maybe with a bit of assistance or equipment, and live our lives unremarkably like everyone else.

(slide)

There are slightly more women than men with disabilities in both the ACT and Australian population. Some disabilities affect men more than women, and some affect women more than men. Men with disabilities get twice the support dollars that women with disabilities get, and twice the access to employment and education supports. Women with disabilities are much more likely to live in poverty and public housing than men with disabilities. They are also substantially more likely to lose their partner if they acquire a disability.⁴

One of the most interesting aspects of disability is that everyone else seems to know more about what is good for you than you do. Disability is used to childify, reduce intelligence, and people's lives are controlled for them, done for them, decisions are made for people, often in their absence. This happens whether you are highly dependent, or whether you need some workplace modifications. Often the person with disability is the last person consulted and the last person to know. Many people with disabilities become so used to others making their decisions that they never really develop the skill to do it themselves, this is a form of institutionalisation, and it's highly prevalent amongst people in residential care or who have some form of cognitive disability.

So, what's disability like? How is it living on this side of disability?

² Australian Bureau of Statistics
<http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/4446.0Main%20Features42009?opendocument&tabname=Summary&prodno=4446.0&issue=2009&num=&view=>

³ WHO world report on disability - http://www.who.int/disabilities/world_report/2011/report/en/

⁴ Women with Disabilities Australia - Assessing the situation of women with disabilities in Australia: A human rights approach – June 2011

What's it like having a disability in the workplace? How does that look?

People make constant comments about your disability, it's sometimes the only thing they can talk about in your presence. People get a bit fixated, often through embarrassment or discomfort. Sometimes they want to talk about their own experience of disability and you are supposed to be interested and want to listen because of your own disability.

A lot of people think they have the right to ask incredibly personal and private questions about you, about your disability, about how you manage to live. These are called intrusive questions, and they are the most common form of harassment for all people with disabilities. Complete strangers, colleagues, well-meaning acquaintances, in fact anybody thinks they have the right to know things that are between you and your doctor. Not sure why this is but it's definitely how it is.

Short story: One day I was talking with someone about intrusive questioning and comments, and she recounted a situation where she was in a meeting with some people. One of those people was a person of short stature, what used to be called a dwarf in old speak. "but you have to mention that this person is a dwarf" she said. I asked why. "it's obvious, it has to be acknowledged, so he knows that you know" she said. Hmm, but he knows that he's a dwarf and I'm pretty sure he knows that you've spotted it, and I'm sure he doesn't need reminding every 5 minutes when he's there to talk about a government contract. "but it's the elephant in the room, it has to be acknowledged that he's got a disability!" she said.

(slide)

Ah, I said, but whose elephant is it? It's your elephant, it's not his elephant. He lives like that every day, it's pretty normal for him, you are the one who thinks there is something unusual or wrong. You are the one who brought the elephant into the room.

As people with disabilities we often find that there is only one topic of conversation and it's our disability. Can you imagine spending all day having to discuss some aspect of yourself? Perhaps you are in late stage pregnancy, or you are from another culture, or you have a pimple on the end of your nose. Do you really want to spend all day talking about nothing else? Hmm, probably not. Well neither do people with disabilities. We know the disability is there, its others that think its worth commenting on, not us.

Inclusion

Inclusion is another one of those words that gets thrown around a lot. I can assure you that it is used heavily in regards to people who are on the outside, "other" people, but it's rarely achieved in practice. Inclusion has become a regular euphemism for disability, but most people with disabilities still feel like we aren't included and don't get the same opportunities.

So, let explore inclusion a bit more.

If all of us are a bit different from each other, each having our own circumstances, background, experiences, or things that have to be factored in to make things work for us, then what do we do to make that work?

Australia is party to the United Nations *Convention on the Rights of Persons with Disabilities* (the CRPD). In fact we were active in drafting the treaty and were one of the first countries to sign it and later ratify it.

(slide)

The UN *Convention on the Rights of Persons with Disabilities* defines disability as:

(e) Recognizing that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others (CRPD preamble)⁵

This is called the social model of disability. It effectively means that disability, or impairment, is actually caused by the barriers around a person, by the things that prevent them from participating in society equally with others. For someone like me who uses a wheelchair that means stairs and physical structures disable me, for someone who has a cognitive impairment it means how information is presented can be disabling.

This is a big clue to inclusion and what it might look like.

Instead of focussing on what a person with disability can't do, on what their specific label, or diagnosis is, the CRPD tells us that we should be focussing on what is getting in that person's way.

So, these days we talk about physical barriers, or communication barriers, or cognitive barriers when we talk about disability. We don't ask people "what have you got" or "what happened to you", instead we ask "what equipment do you need" or "how can you be assisted?" The NDIS is built around the social model of disability and the National Disability Strategy uses it through acknowledging the CRPD.

This "social model" of disability used by the CRPD turns the equation on its head. It also changes what you need to know about someone. What is the point of being told a lengthy obscure name for some condition that you've never heard of? What is that going to do to assist you to welcome them to your workplace? Or they might have a more commonly known disability but the variations within that disability are enormous so how does knowing the label actually help you understand what they need? It doesn't.

No, what you probably really wanted to know was how do we support you to be here.

Think about it. What do you really need to know?

- As a department you need to know that someone has a disability and requires support so that you can fulfil your duty of care to provide a safe workplace.
- As a supervisor you need to know what support is required and whether any duties may need to be adapted to achieve the outcomes for a position.
- As a colleague you might want to think about having conversations that are the same as for all your other colleagues, not about the person's disability.
- As a person passing in the street you don't actually have the right to know anything at all.
- As a friend you may know something if your friend chooses to take you into their confidence.

Again. What do you really need to know?

Don't forget that one of the biggest brains on the planet today is a person with disability with high support needs. Is anyone seriously going to suggest that Stephen Hawking's disability rules him out? Well what works for him works for the rest of us. With the right supports

⁵ <http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

Professor Hawking has done amazing things and changed our understanding of the universe. Never make assumptions about the capacities of a person with disability!

Every single person needs something to make their workplace comfortable and work for them, to support them to be productive and contributing. We all need something. People with disabilities just have slightly more obvious needs than many other people, but needing particular furniture is no different to needing to leave at 3 o'clock to pick up your kids.

Something that supports people of diversity a great deal is to be in contact with other people in their space. I note that the Dept of Health has a Staff Disability Network, which is very positive. When you are the only one, or one of very few, then it's important to be able to relax for a bit about who you are. Sharing experiences and being able to identify trends or barriers and collectively address them takes a lot of pressure off the individual. Operating on your own all the time is exhausting and becomes a barrier to actually being in the workplace at all.

I want you to develop your own inclusion plan. What are 3 things that you will do in the next 6 months, by the end of October 2014, to make your workplace more inclusive? What can you do personally, what can you get the department to do or what can you work with your team to do? If you are a supervisor your list will be different to if you are a team member. If you are SES then you will have a very different list.

Take a couple of minutes now to have a think, okay now write your 3 things down.

Turn to the person next to you and share one of your 3 actions.

Every single person in the Dept. of Health is a different person. Everyone has a different life, different pressures, and different needs on any given day. Inclusive workplaces harness this and use it with gusto. It makes work exciting to have so many diverse backgrounds, views, skills and understandings. It enriches who you are and what you can achieve collectively.

Thanks very much.