

Submission on Public Consultation on the Draft New Zealand Disability Strategy from Arthritis NZ

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Overview and Concerns

Background

Many people with arthritis cannot access support outlined in the previous Disability Strategy because arthritis is often not recognised as a disability. This leads to discrimination in daily life such as being challenged for using mobility parking or priority bus seating, and systemic exclusion, including being denied NASC assessments and funding.

We stress that disability should be assessed by impact, not diagnosis. Arthritis can be profoundly disabling, and this reality must be recognised. We also note that physical disability can be unseen and is often wrongly equated only with wheelchair use.

The [New Zealand Health Survey 2023/24](#) adjusted ratios for the indicator of living with a disability show people living with arthritis are significantly more likely (2 in 5 people) than the general population to also be living with a disability (Table 1):

Table 1: Comparison of the number of people in the general population and people living with arthritis who are also a disability (adjusted odds ratios NZ Health Survey 2023/24 update)¹

Type of Arthritis*	Population Total	Subgroup Comparison Adjusted Ratios
Arthritis	~750,000	1.8
Osteoarthritis	450,000	1.81
Gout Arthritis	200,000	1.95
Rheumatoid Arthritis	100,000	1.95

*In addition to the main types of arthritis, there are several other less well-known forms such as, axial spondylarthritis, (including psoriatic arthritis, ankylosing spondylitis and other inflammatory arthritis) juvenile idiopathic arthritis and systemic lupus erythematosus (SLE) also known as lupus. More than 45,000 people are also estimated to have more than one form of arthritis.

We frame our submission and recommendations with this background in mind.

The proposed vision

“New Zealand is an accessible and equitable society for disabled people and their whānau – a place where disabled people thrive, lead, and participate in all aspects of life.”

Arthritis NZ supports the intention of the proposed vision. However, the strategy lacks clarity on how principles and actions will deliver it. Without stronger alignment between principles and actions, the vision risks being aspirational but not actionable. Partnerships between disabled people, families, and whānau must be carried through from the vision into principles and outcomes.

Principles

Definition of Disability

Arthritis NZ supports the inclusion of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) which defines a disabled person as *“someone with long-term physical, mental, intellectual, or sensory impairments that, in interaction with various barriers, hinder their full and effective participation in society on an equal basis with others.”*

And we support the concept of disability rights as set out i.e. *“Disability rights are the rights set out in the UNCRPD, and in other places, including New Zealand laws that protect and empower disabled people to fully participate in society.”*

Supported Principles

We endorse principles of Choice and Control, Equity and Cultural Inclusion, Human Rights, Participation and Inclusion, and grounding in Te Tiriti o Waitangi.

We note however, that meeting the obligations inherent in disability rights for disabled people, as quoted, are not included in measures of success for the priority outcome areas and actions, with the exception of the Justice priority outcome area. These omissions give the impression that it is not necessary to consider the definition and concept of rights in all the five priority outcome areas.

Concerns and Refinements

- **Accessibility:** The phrase *“not just disabled people”* undermines the universality of accessibility and carries dismissive overtones (as in *“it’s just arthritis”*).
- **Respect and Dignity:** The phrase *“regardless of their abilities”* risks weakening the principle. Respect must be unconditional.
- **Enabling Good Lives (EGL):** EGL principles—self-determination, person-centred and mana-enhancing services—should be embedded in the strategy.

Priority Outcome Areas

- **Education:** Reframe the goal as *“All learners are supported to achieve their potential in the education setting of their choice.”* Support, not expectation alone, enables success. Avoid separating “all learners” from “disabled learners.”
- **Employment:** Goal should be motivational rather than directive: *“Disabled people may seek meaningful career opportunities.”*
- **Health:** Support the goals, but request clarity on how data use will affect privacy, autonomy, and treatment.
- **Housing:** Actions must include use of state resources to expand affordable housing. Reforms to the Housing Modification Fund are overdue; changes must prioritise people living with progressive conditions like arthritis.
- **Justice:** Out of scope for Arthritis NZ.

Recommendations

Principles

- Explicitly recognise arthritis and other medical impairments as disabilities under Whaikaha.
- Include a principle on community leadership, ensuring the voices of disabled people, whānau, and Tāngata Whaikaha Māori are central as Tiriti partners.
- Embed Enabling Good Lives principles to guide change. These principles include self-determination, services being-person centred and being mana-enhancing.

Priority Issues

- The UNCRPD Disability Rights statement be explicitly stated as a leading goal in each priority area. Partnerships between disabled people, families, and whānau should be carried through from the vision to principles and outcomes.
- That the definition of a disabled person should be included in the preamble to each priority area.
- Consideration needs to be given to how disabled people and their whanau will learn about and negotiate the outcomes for each priority area. This needs to include support services and advocacy to ensure people who require assistance receive it, as well as knowing their full entitlements. This is fundamental to ensuring the needs for disabled people are met. Ensure disabled people and their whānau have access to support services and advocacy to understand and secure their entitlements.

Recommendations

- We suggest re-wording the goals for education and employment to make them less prescriptive and more in-line with the varying aims of learners in relation to their disability.
- Goals should not be qualified by their impact on non-disabled people (positive or negative) and recommend removing all clauses that do this.
- There is little to show how education, training, and supported employment pathways will be linked. These links need to be articulated.
- More clarity around data strategy is developed. At this stage it seems like a lot of change relies on data collection, but there is no explanation of how it will be used, or how it could facilitate change.

- Clarity around coordination prioritisation is required, along with accountability with other government agencies to ensure the goals in the strategy can be implemented. Meaningful partnerships across government and community services, and shared delivery of goals will be needed to meet objectives. This would include legislated standards for accessibility, housing, and digital inclusion.