

At MDAA we do **advocacy**. This means we work together with people with disability, families, and the community to promote, protect and secure the rights and interests of people from a non-English speaking background (NESB) with disability and their families and carers in NSW.

*How we can help you and your family*

**Individual Advocacy:** A worker, called an advocate, works with you when your rights are ignored. The advocate will 'stand beside' you and support you, so you can make your own decisions and get what you need. An advocate can help you stand up for your rights, for example, when you have problems with housing, immigration, work, school, and disability services.

*How we can help your community*

**Advocacy Development:** We work together with groups of people with disability and their families to learn more about standing up for your rights and needs. This can help you to have a say about the things that are important to you.

**Community Development:** MDAA can work with your community to increase knowledge and awareness about disability, disability services and the rights of people with disability.

**Systemic Advocacy:** We lobby politicians and government departments to make things better for people from a NESB with disability and their families.

**Our advocacy and community development services are free.**

**Multicultural Disability Advocacy Association of NSW**



***opening ways***  
***Disability experienced***  
***in Spanish speaking***  
***countries and Australia***



**Working for a NSW where the diversity of disability and culture is anticipated, supported and celebrated**



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## **Disability experienced in Spanish-speaking countries**

This introduction focuses on experiences of disability for Spanish-speaking people and families in Latin American countries (South and Central America and Mexico), and Spain. Some of the attitudes and beliefs discussed are also common to other cultures.

### **How we treated people with disability in the past**

There is great variety within and between all the Spanish-speaking countries, especially between the developing countries (Mexico and Latin American countries) and Spain. However, certain core values are common to all the countries. Our traditional response to people with disability was generally based on care and support being provided by the family. Our attitudes and beliefs about disability were more negative than positive and the concept of disability as a social or political issue did not exist.

In all developing Spanish-speaking countries, except Spain, disability was and still is strongly linked to poverty. The bad economic situation in these countries, malnutrition and poor standards of public health services have led to an increased number of people with disability. Armed conflicts have also added to that number and many military regimes cut their budgets for health and education, adversely affecting people with disability. Information and knowledge about disability was limited and discrimination and exclusionary attitudes towards people with disability were common.

In the past across all Spanish-speaking countries ignorance and lack of education and information about disability made us often think of a person with disability as a burden. We hardly ever saw a person with disability on the streets as families often tried to hide them from others. Many parents did not want to let the community

know that one of their children had a disability because they felt ashamed and they wanted to protect their child from the teasing of others.



The family had the most important role in providing care to a family member with disability. Generally families got little support from services and there was no financial help from the government. Sometimes church and religious organisations run by volunteers provided assistance. We had some private schools for children with disability, but only rich families could afford these. We usually had no public schools to which children with disability could go, no specific services, such as counselling or therapy and no free programs that could assist the person with disability to live independently. It was common that family members with disability were at home all the time and usually they depended fully on their family.

### **What are the myths or beliefs about disability in Spanish-speaking countries?**

Across Spanish-speaking countries many beliefs and attitudes about disability were and are influenced by Catholicism. In the past some people believed that disability is sent from God; all a person can do is accept it and others should feel pity for a person with disability. Another traditional view was that God punished the parents of children with disability for their former or present sinful lives. Thus parents usually felt ashamed for having a child with disability and tried to hide the child.

In the past we often considered disability an abnormality or threat to society because some of us feared that a person with disability could harm another person. A person with disability was usually worth less than a person without disability. Sometimes we

associated disability with being less intelligent and incapable. Today we still sometimes consider people with disability as needing protection and care. We often think that others know better what people with disability need.



In general physical and sensory disability are perceived more positively than other types of disability. Blindness is often believed to be less of an impairment than other types of disability. We are aware about blind people's abilities. For example the blind writer Jorge Luis Borges was revered as one of the best Argentinean writers. Due to a lack of awareness, people with mental illness or intellectual disability are often mystified and discriminated against. In the past institutions for people with mental illness or intellectual disability were prison-like and mostly people were treated inhumanely. Some people believed that people with epilepsy were possessed by the devil and these people were shunned.

### **Were there any events that changed attitudes to people with disability?**

Nowadays in Latin American countries, attitudes towards people with disability are changing slowly due to internal social movements and external influences from the Western world. People who live in exile and many wealthy people who moved to Western countries for education, come sometimes back with more awareness, information and different perceptions about many issues, including disability.

Between World War II and the 1970s, massive economic growth led to an emergence of a middle class. Educated professionals contributed to the development of more sensitive views on disability and to an increase of services for people with disability. But the upsurge of dictatorships and ensuing civil wars in many

Latin American countries in the 1970s stopped this progress. Social services, especially for people with disability, were not supported and many professionals fled abroad. However, due to the war the numbers of people with disability increased and disability became more common and visible. Physical disability and brain injuries were more common and recognised in the community. People who acquired disability as a result of war or after an accident are often more accepted by their community than those who are born with disability.



Probably the biggest influence in changing attitudes towards people with disability in Latin American countries was through an event called *Teleton*, which started in Chile about 25 years ago. The aim of this annual TV education campaign was to raise money for rehabilitation and care centres for people with physical disability. It challenged perceptions about disability and showcased personal stories of people with disability. Awareness about disability rose and a disability rights movement developed. *Teleton's* idea spread quickly to other Latin American countries and it still exists today.

In Spain changes in attitudes towards people with disability proceeded differently and more quickly. Community education was regarded as the main focus point for increasing awareness about disability. Information about disability was distributed and social workers influenced the change to more positive perceptions about disability, especially in rural areas. In the 1980s the Spanish government introduced a new employment law. As a result companies and especially government agencies started to hire people with disability and disability became an important issue in the public, social and political arena.

## Has the language we use to talk about people with disability changed?

In the past we used language that was often negative, degrading the person with disability and nicknaming people according to their disability was common. In recent years the language we use to talk about people with disability has changed, describing disability in a more sensitive and positive way. But some negative terms, especially for people with mental illness or intellectual disability, are still in everyday use.

## Are there differences in the way city and country people respond to disability?

In the past in rural areas of Latin American countries, people with disability did not go to school and mostly had to travel far to access services. Today people with disability in rural areas have difficulties accessing public places and buildings and generally have fewer opportunities to live independently than people with disability in cities. People living in rural areas have sometimes more traditional and negative attitudes and beliefs towards disability, although in rural areas the compassion for people with disability is sometimes greater. People with disability often rely on family networks, suffer from isolation and a lack of information. Often they also do not get appropriate rehabilitation or treatment due to resources, infrastructure and services not being available.

In Latin American cities people with disability use services more often due to greater availability and choice. There are more schools for children with disability and many places and buildings are more accessible. Still, some people with disability are forced to leave their family due to great poverty and the only way they can survive is through begging.

Today in Spain services are much more available in cities, yet still quite scarce in rural areas.

## What role do families play in caring for people with disability?

Family values are very powerful in Spanish-speaking countries. Generally the family is the most reliable support and has the key role in supporting a family member with disability. It is the family's responsibility to find out about resources and how best to support the family member with disability. In Latin American countries it is common that many generations live together. Traditionally fathers are responsible for generating income and mothers care for the children, keep the household and are the main carers for children with disability. Sometimes fathers cannot cope with having a child with disability and they blame their wife. Breakup of the marriage is often the consequence.

Graciela

When Graciela was born with an intellectual disability her parents felt extremely stressed and upset. Her father decided to leave the family and her mother had very little support from other relatives. Most of the people in the village avoided visiting the family's house.

In past decades family roles have changed, often both parents work outside the home and especially in Latin American countries childcare or the care of a child with disability becomes the responsibility of the grandmother or older female siblings. In Spain it is quite common that families pay a professional carer or give their child with disability into the care of a specialised institution.

## What services are there for people with disability?

In the developing countries of Latin America poverty and disability are strongly linked. Poverty causes disability through malnutrition, lack of basic sanitation, poor health care and dangerous living conditions. In turn disability causes poverty as people with disability are prevented from fully participating in the

economic and social life of their communities. Proper services, support and accommodation are mostly not available or not affordable. The more affluent the family is, the better access to and choice of services they have.



In recent years in cities, mainly non-government organisations and some religious organisations developed services for people with disability, such as employment, recreational, counselling, homecare and educational services. Unfortunately, these services are still insufficient, often too expensive and focus on charity and help rather than supporting people with disability to live independently. The biggest problem is the lack of resources and reaching remote and rural communities. We also have organisations that were formed to advocate for the rights of people with disability, which offer services and support to people with disability by people with disability, but they lack resources as well. Moreover we have special schools for children with disability and some countries run new projects to integrate students with disability, mainly with physical disability, into ordinary schools.

In the past there were no welfare services in Latin America, the governments' role was at best the support of destitute and poor people through charity. However, there are now low disability support pensions or public health insurance available to people with disability in some countries. Unfortunately public health insurance agencies do not offer many services for people with disability and have long waiting lists.

In recent years, city governments across Latin American countries have improved the access for people with disability to public transport through the adoption of low-floor buses, accessible stops and buses adapted with elevator platforms. Despite the introduction of sounding traffic lights, ramps and lifts in some cities, access to public places and buildings for everybody and the elimination of physical barriers are still things to aim for.

## Diego

Diego has Multiple Sclerosis and uses a wheelchair. After finishing his education he was looking for a job for a long time until he finally found one. Unfortunately the office building is not accessible and therefore he is dependent on the help of his colleagues to access his office.

Today in Spain there exists a great variety and range of services for people with disability and their families and carers, such as home assistance, advocacy services and services and centres for certain types of disability. The government partly funds the use of private services and most services are high in quality. There are special schools for children with disability and the integration of children with disability into ordinary schools is strongly supported. In cities it is compulsory to improve the accessibility of places and buildings.

### **What does the community know about the rights of people with disability? How has this changed over the years?**

In Latin American countries poverty is still a massive problem, unemployment is high, political stability low and the gap between the rich and the poor is continually growing. The political priority continues to be the reduction of poverty and unemployment through economic growth. Rights of people with disability are not a priority and disability is hardly spoken about in political, economic and social discussions. However, attitudes towards disability have started to improve as a result of more people with disability being visible in the community. We still need to continue to enhance knowledge about the rights of people with disability and to raise awareness about disability, especially about mental illness and intellectual disability.

## Marcelo

Marcelo is the son of a famous Latin American politician. When he was young he fell into a swimming pool and acquired a brain injury. His parents supported him and visited him in the rehabilitation service for a long time. Today Marcelo works and is able to live independently. His and his family's story raised much awareness about disability in the community.

During the 1980s and 1990s, the disability rights movement in Latin America, based on volunteer activists and supported by social and political progress throughout the world, grew fast. Its main goal is to make people aware of the rights of people with disability by promoting integration and equal opportunities. In 1981 activists prepared the *UN Year of People with Disability* in the Latin American region, which increased awareness about the importance of self-representation by people with disability.

The *UN World Program of Action Concerning People with Disability* from 1982 and the *Inter-American Convention on the Elimination of All Forms of Discrimination Against People with Disability* to promote full integration of people with disability into society and to protect their social, economic and cultural rights from 2000, are now reflected in national policies and laws of most Latin American countries.



However, implementation and enforcement of policies remain inadequate, resources for the implementation are not available and there is very little knowledge about the legislation. There is a huge gap between existing law-regulations and the everyday reality of people with disability.

In Latin American countries it is extremely difficult for people with disability to find work. Those who are employed usually work in small family enterprises. Private firms lack incentives to invest in adjustments for people with disability.

In Spain the situation is different. The recognition of human rights of people with disability is rather broad within society. We have fully enforceable anti-discrimination laws, many advocacy centres for people with disability and the rights of people with disability are protected by law. The employment rate among people with disability has increased, but 66% of people with disability of working age are still unemployed.

There is still much to be done to eliminate discrimination and exclusion of people with disability. However, little by little, people with disability are expanding their participation and political roles and society is becoming increasingly aware of necessary changes. We are beginning to recognise that an independent life and equal opportunities for people with disability is part of our human rights.

### Web Sites used in writing this document

[http://www.iadb.org/sds/SOC/site\\_3098\\_e.htm](http://www.iadb.org/sds/SOC/site_3098_e.htm)

<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSOCIALPROTECTION/EXTDISABILITY/0,,contentMDK:20183399~menuPK:417331~pagePK:148956~piPK:216618~theSitePK:282699,00.html>

[http://www.iicd.org/stories/articles/Story\\_import97](http://www.iicd.org/stories/articles/Story_import97)

[http://www.disabilityworld.org/07-08\\_01/employment/labor1.shtml](http://www.disabilityworld.org/07-08_01/employment/labor1.shtml)

[http://www.disabilityworld.org/11-12\\_01/news/latinamerica.shtml](http://www.disabilityworld.org/11-12_01/news/latinamerica.shtml)

[http://www.disabilityworld.org/06-08\\_02/](http://www.disabilityworld.org/06-08_02/)

[http://www.disabilityworld.org/09-10\\_03/](http://www.disabilityworld.org/09-10_03/)

[http://www.disabilityworld.org/11-12\\_03/](http://www.disabilityworld.org/11-12_03/)

## Disability experienced in Australia

### What is Disability?

A disability is something that stops a person from doing things they want to in their day-to-day activities. At least 19%, or one in five people in New South Wales, will experience one or more of the following:

- blindness or vision impairment (even when wearing glasses or contact lenses)
- deafness or hearing impairment (even when fitted with a hearing aid)
- chemical sensitivity
- speech difficulties in their first language
- blackouts, fits or loss of consciousness
- disorientation in unfamiliar environment
- slowness at learning or understanding
- acute anxiety
- difficulty making decisions
- incomplete use of hands or arms
- difficulty in gripping or holding or carrying small objects
- physical weakness over distance or long waiting periods
- lack of balance and coordination
- incomplete use of feet or legs
- difficulty walking on uneven ground, stairs and slopes
- pain, fatigue and discomfort

- difficulty breathing
- long term illness
- medical conditions and/or physical trauma leading to one or more of the above

In Australia disabilities are often categorised into different types, such as: physical disability (e.g. polio, arthritis, burns, obesity, broken bones, amputation), intellectual or learning disability (e.g. autism, down syndrome, attention deficit disorder), psychiatric disability or mental health problem (e.g. post traumatic stress disorder, schizophrenia, depression), sensory disability (deafness, blindness) and neurological disability (e.g. brain injury, spinal injury – paraplegia and quadriplegia, cerebral palsy, Parkinson’s, multiple sclerosis).

A disability can be permanent or temporary. Many people with disability say that what usually stops them from fully participating in the community is not their disability, but the barriers put up by society and the negative attitudes of the community.

### What support can people with disability get?

In Australia people with disability have the same human rights as other people. This includes having the right to be part of the community, make their own decisions and receive services that assist them to have a reasonable quality of life.

People with disability have the right to all the services people without disability can get. General community services need to provide services to people with disability. Just because somebody has a disability should not mean that they cannot get general services. In many instances people with disability can get support and assistance from the same places as people without disability.

However, to ensure that people with disability have the same opportunities there are specialist services available only to people with disability. These services include:

- Services assisting you to get a job or more training such as *Employment and Vocational services*.
- Services assisting you and your family to have a break from each other such as *Centre-based and In-Home Respite Care*.
- Services assisting you with your personal care such as *Attendant Care Services*.
- Services assisting parents when you first find out that your child has a disability such as *Early Intervention Services*.
- Services assisting mainly younger people with disability to learn more skills such as the *Transition to Work Program, Community Participation Programs, Community Access Services or Day Programs*.
- Services assisting you to live in the community with support such as *Accommodation Support Services*.
- Services assisting you with technology, equipment, therapy and para-medical specialist services, such as *PADP (Program of Appliances for Disabled People)*.
- Services assisting you to have your rights respected and to get information, such as *Advocacy and Information Services*.

### How to find out more about services for people with disability

While there are many services for people with disability, it is not easy to find out about them or find out what the right service is for you. Also sometimes the services are full and have a waiting list, or sometimes you don’t know who to ask and what service to ask for.

Here we have listed only a few services, services that say they will organise an interpreter if you need one:

The Translating and Interpreting Service (TIS) of the Department of Immigration and Multicultural and Indigenous Affairs is available to any person or organisation in Australia requiring interpreting services. TIS is available 24 hours a day, 7 days a week.

*TIS phone: 13 14 50*

You might have to pay a fee depending on the circumstances and depending on whom you are calling.

One good starting point to find out about things is Centrelink.

*Centrelink phone: 13 10 21*

*Centrelink Multilingual Call Centre phone: 13 12 02*

*TTY phone: 1800 810 586*

If you can go to your local Centrelink office, one good person to talk with is the Disability Officer.

Also a good place for you to start is the Commonwealth Carelink Program.

*Commonwealth CarelinkCentres phone: 1800 052 222*

*TTY phone: 1800 555 677*

*Speech-to-Speech Relay phone: 1800 555 727*

Another disability information service is IDEAS.

*IDEASphone: 1800 029 904*

You can also call the Multicultural Disability Advocacy Association (MDAA) which promotes and protects the rights of people from a non-English speaking background (NESB) with disability and their families and carers.

*MDAA phone (02) 9891 6400 or 1800 629 072*

