

Committee Secretary
Joint Standing Committee on Treaties
Department of House of Representatives
PO Box 6021
Parliament House
CANBERRA ACT 2600
AUSTRALIA

Wednesday, 18 June 2008

Positive Life NSW (Positive Life) is a non-profit community organisation representing the interests of people with HIV across NSW. We provide health promotion, advocacy, peer support, health information resources and representation to ensure that people with HIV are able to access quality health care and participate in ways that can bring the best quality of life for them, their partners and families.

I am writing in response to the National Interest Analysis of the UN Convention on the Rights of Persons with Disabilities (The Convention)

Positive Life applauds and supports the release of the analysis and its recommendation to approve ratification and to move quickly to ensure that Australia is able to participate in the early stages and decision making by the UN.

People with HIV in Australia have, mostly, been well served by the Disability Discrimination Act. HIV, and discrimination against people with HIV, were significant issues in Australia in 1993. This is reflected by the disability definition used, which included reference to the actual or perceived presence of "pathogens". Subsequently, as the impacts of HIV have changed, there has been a growing awareness of the parallels with the experiences of people with other chronic illnesses and better understanding of the application of the Social Model of disability.

In summary, Positive Life supports the Convention, and Australia's ratification of it. We also support the proposals of the National Interest Assessment.

For people with HIV, particular issues or themes are more significant or relevant than others. While not necessarily calling for major changes, the progressive realisation approach of The Convention suggests that we

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reiterate issues we have previously raised through avenues including the Productivity Commission Review of the DDA.

In this review, and subsequently, Positive Life has questioned the health requirement related to immigration. We support the submission of AFDO which called for a more balanced consideration of both the costs and benefits to Australia of immigrants with disabilities and their families.

Similarly, we have previously opposed the continuing exemption relating to insurance incorporated in the DDA. Successful complaints and court action relating to discriminatory practice highlight the lack of consideration by the insurance industry of a constructive approach to insurance for people with disabilities. They instead rely on the exemption provision to justify and entrench poor actuarial practice.

Finally, we support the increased priority for action plans under the DDA. They are mandatory now for many government agencies, but not applied or reported on. Independent public annual reporting on outcomes and progress and "rewards" for progress and achievement might achieve more than yet more requirements for what can be seen (and treated) as bureaucratic exercises. There should also be a mechanism to plan and improve access to human services. Action plans are most effective in planning for improvements to the physical environment or information and communications. Much of the discrimination faced by people with Hiv occurs in the health system and relates to attitudinal or infection concerns. An accessible health care system needs not only accessible infrastructure. It needs a workforce supported to learn and take time to provide care in non judgemental ways. It also needs measures to identify and address problems that have a graduated response and are useable by patients.

In summary, we applaud the decision to progress the ratification, urge the government to do so to enable Australia to participate at the earliest possible stages and look forward to the development of indicators and reporting processes that can truly lead a progressive improvement to the removal of barriers and the full participation of people with disability in Australia.

Yours Sincerely
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Funded by NSW Health