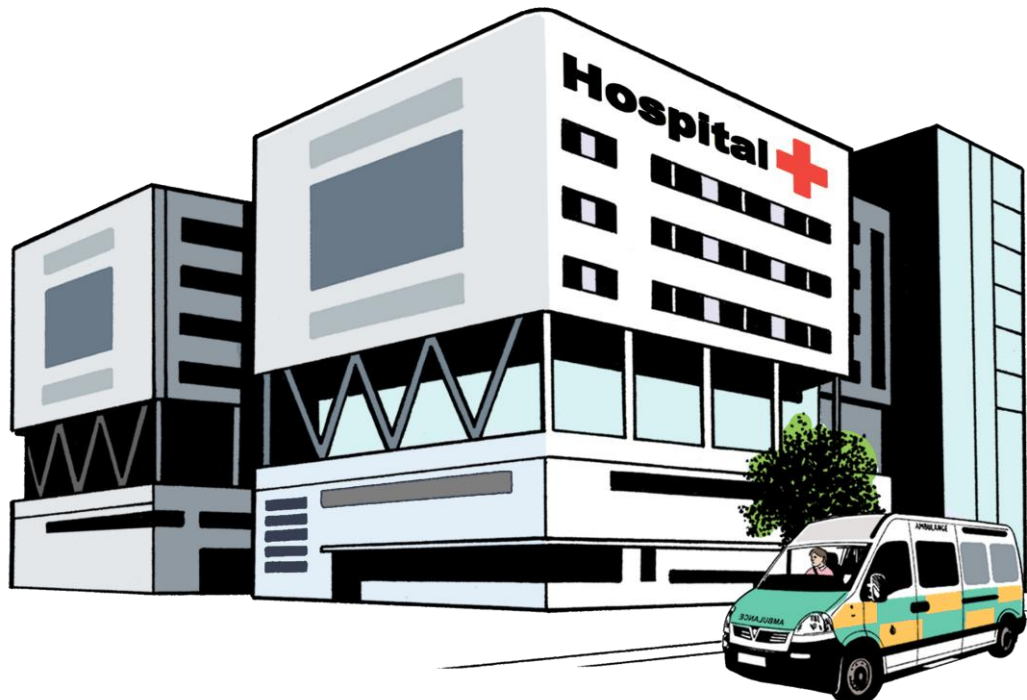




New Zealand Disability Strategy

2026 to 2030:

Health Change Story



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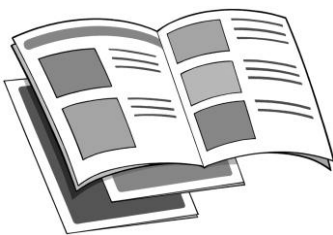
About this Easy Read



This Easy Read is about the **New Zealand Disability Strategy 2026 to 2030**.



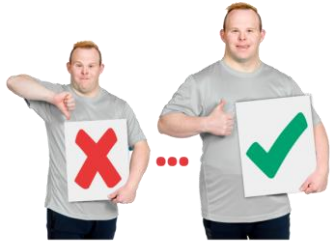
The **New Zealand Disability Strategy** says what the Government will do to make things better for disabled people in Aotearoa New Zealand.



In this Easy Read the New Zealand Disability Strategy 2026 to 2030 will be called the **strategy**.



The **Ministry of Disabled People – Whaikaha** was in charge of writing the strategy.



The **Ministry of Disabled**

People – Whaikaha works to make things better for disabled people by working with:

- the Government
- the community which includes:
 - disabled people
 - tāngata whaikaha Māori / Māori disabled people
- businesses.

In this Easy Read when we say **Whaikaha** this means the Ministry of Disabled People – Whaikaha.

Where it says **we / us** this means Whaikaha.



The strategy has 5 **priority outcome areas**.



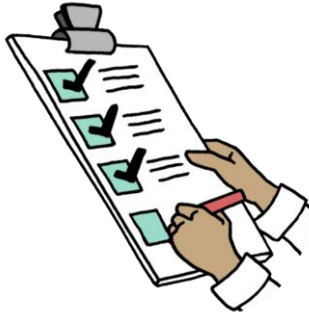
Priority outcome areas are the most important things the strategy will work on.



The priority outcome areas are:

- education / learning
- employment / jobs
- health
- housing
- justice which means things to do with the law.





Each priority outcome area has:

- a **goal**
- **actions.**



Here a **goal** is how we want things to be.



Here **actions** are things we will do to work towards meeting a goal.



This Easy Read is a **change story** for the health priority outcome area.



Here a **change story** tells you:

- what the goal is
- what actions the Government will do
- who in the Government will do each action
- when the actions will happen
- what might stop the actions from happening.

You can find the other change stories in Easy Read on the Whaikaha website.

The link for the education change story is:

<https://shorturl.at/wKTw5>



The link for the employment change story is:

<https://shorturl.at/FJghF>



The link for the housing change story is:

<https://shorturl.at/fiijr>



The link for the justice change story is:

<https://shorturl.at/2v9jr>

Goal for health



The goal for the health priority outcome area is for disabled people to have the best:

- health they can have
- **wellbeing** they can have.



Wellbeing means you are able to live a good life.



It may mean things like:

- looking after your body with good food and exercise
- getting support when you feel sad or worried.



Actions for health

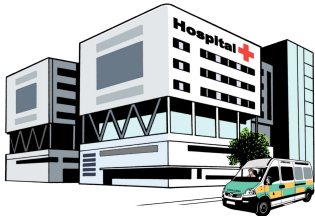


There are 5 actions for the health priority outcome area.



Action 1

Look at the way the **health system** works.



The **health system** includes things like:

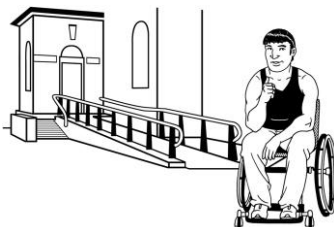


- doctors
- hospitals
- medicines.



Some of the things we will look at are:

- how **health providers** talk to disabled people
- if information about health is easy to understand
- what **technology** the health system uses to support disabled people
- if disabled people get to make their own decisions about their health
- if health services like picking up medicine from the pharmacy work for disabled people
- if buildings like hospitals work for disabled people.





Health providers are people who support other people with their health like:

- doctors
- nurses.



Here **technology** means things like:

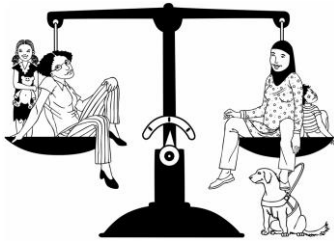
- computers
- apps.



Change the way the health system works to make it more:

- **equitable**
- **accessible**
- **inclusive.**





Here **equitable** means the health system treats everyone fairly.



Here **accessible** means disabled people have what they need to easily:

- use things
- do things.



Here **inclusive** means that everyone can get healthcare that meets their needs.



It is important for disabled people to be able to make their own decisions about their health.



This means health providers need to know about **supported decision-making**.



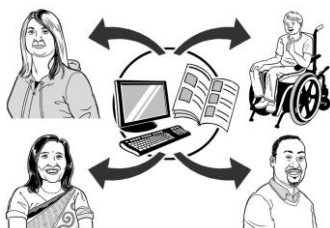
Supported decision-making is when a disabled person gets support so they can make their own decisions.

Action 2



Train health providers so:

- they can provide healthcare that is inclusive
- they understand that **culture** affects how people feel about healthcare
- it is easy for people to know where to go to get support with their health.





Culture is a way of:

- thinking that a group shares
- doing things as a group.

There are many different cultures in Aotearoa New Zealand.

Some examples of the different cultures are:

- Māori culture
- Pacific culture
- Deaf culture.

Understanding disability should be part of all training for health providers.



Disabled people should have a say in what the training covers.



Make sure more disabled people can work in:

- health services
- disability services.

This can be done by:



- having rules about:
 - hiring disabled people
 - including disabled people



- making workplaces:
 - accessible
 - inclusive



- training disabled people so they can get the jobs they want.

Action 3

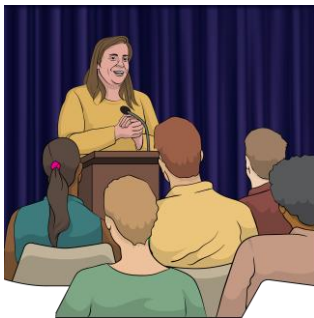


Support disabled people to learn the skills they need to do jobs in the health system well.



The Government will support disabled people to get jobs doing things like:

- leading the health system
- checking the health system is working well
- telling the health system what it could do better.



Action 4

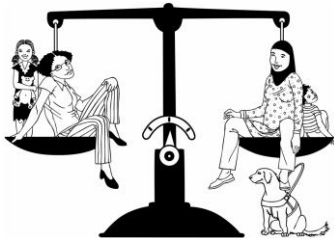


Use **national health data** to find out how the health system is working for disabled people.



National health data is numbers about the health system like the number of people who:

- go to hospital each year
- have surgery each year.



Using national health data this way will make it easier to know:

- if disabled people are as healthy as non-disabled people
- what seeing a health provider is like for disabled people.

Questions

1. What do you think about it?

Good

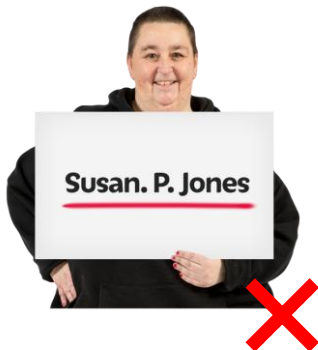
Bad

Not sure



We will make sure the data is kept:

- **private**
- safe.



Here **private** means that no one will know which data belongs to you.

For example we might look at how many people have surgery each year.

We would not look at the names of people who had surgery that year.

Action 5



Let people use their **National Health Index number** to tell the health system what their accessibility needs are.



Your **National Health Index number** is a number the health system uses to keep together all the information about your healthcare.



Everyone has their own National Health Index number.

Your National Health Index number is also called your **NHI**.



Using your NHI to tell the health system about your accessibility needs will mean:

- you will not have to tell lots of different people what you need
- it will be easier for health providers to give you the support you need.



We will ask disabled people to work with us on making a way for people to use their NHI to tell the health system about their accessibility needs.



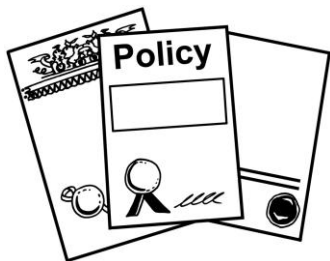
We will make sure there are clear rules about who can look at the information people share.



What work is happening on the actions?



Te Whatu Ora
Health New Zealand

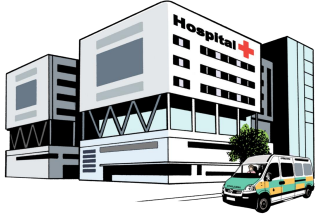


The parts of the Government that will be in charge of the actions are:

- the **Ministry of Health**
- and
- **Health New Zealand.**

The **Ministry of Health** is the part of the Government in charge of:

- deciding what the health system should do
- making sure the health system is safe.



Health New Zealand is the part of the Government that runs the health system.

For example Health New Zealand runs hospitals.

In this part of this Easy Read **the Government** means:

- the Ministry of Health
- Health New Zealand.

The Government has already started working on the health actions as part of:



- **Health of Disabled People Strategy 2023**
- **Te Pae Waenga – New Zealand Health Plan 2024 to 2027.**



Health of Disabled People Strategy 2023 is a plan from the Ministry of Health about how they will support disabled people to have the best health they can have.



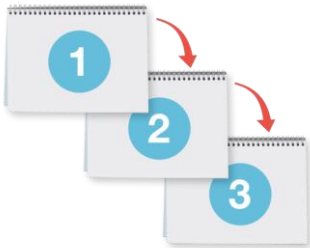
Te Pae Waenga – New Zealand Health Plan 2024 to 2027 is a plan from Health New Zealand about what it will do to support everyone to have better health.



In the first half of 2026 the Government will look at:



- what work is already happening on the actions
- who will be part of working on the actions
- what it needs to do to make the actions happen
- what order the work will happen in
- what links there are between the actions.

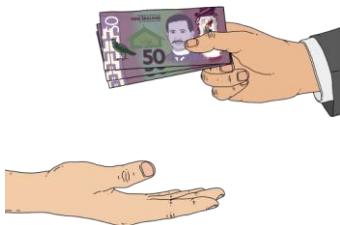


What might stop the actions from happening?



Lots of the health actions are linked together.

This means that if work on one action is too slow it might slow other actions down.



Some of the actions can only happen if the Government agrees to pay for them.



This information has been written by the Ministry of Disabled People – Whaikaha.



It has been translated into Easy Read by the Make it Easy Kia Māmā Mai service of People First New Zealand Ngā Tāngata Tuatahi.



The ideas in this document are not the ideas of People First New Zealand Ngā Tāngata Tuatahi.



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