

Communicating about Disability in Australia

Insights, Challenges, and Opportunities

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Contents

Introduction	3
Methodology	6
Research Insights	7
Conclusions	23
Appendix: Research Methods	24

Introduction

Living with a physical, cognitive, or behavioural disability is a reality for millions of Australians and will become increasingly common as the country's population ages.¹ While some aspects of Australian society have been made more accessible in recent years, people living with disability continue to be marginalised and excluded from society.² People with disability are more likely to live in or near poverty,^{3,4} to face challenges accessing safe and affordable housing,⁵ and to experience higher rates of physical violence than people without disabilities.⁶

Experts emphasise that an impairment is a personal condition, whereas a disability is something that is produced when society has not been designed to include someone with that impairment.⁷ In this sense, disability is a social experience, not a personal condition. Therefore, removing structural barriers and changing attitudes in society to create fully inclusive access and opportunities for people living with disability requires broad cultural and policy shifts.

Progress has certainly been made to improve the lives of people living with disability and to improve their inclusion in Australian society. In 2008, Australia ratified the United Nations Convention on the Rights of Persons with Disabilities.⁸ In 2011, the National Disability Strategy was launched to achieve “an inclusive Australian society that enables people with disability to fulfil their potential as equal citizens.” That same year, grassroots campaigns led by people with disability fought for the introduction of the National Disability Insurance Scheme (NDIS) Act, which was rolled out from 2013 to 2016.⁹ Despite these advances, in 2021, a national survey showed a considerable amount of work left to be done in shifting the Australian public's attitudes about people living with disability and the necessity of doing so to achieve a truly inclusive society.^{10,11} In the *SHUT OUT* report on the experiences of people living with disability in Australia, prepared in 2009 for the National Disability Strategy,¹² many people living with disability described their daily struggle for support, resources, and recognition. They also described the resilience and courage demonstrated by their families, friends, caretakers, and, importantly, themselves. To live ordinary lives and achieve inclusion in a society built to exclude them, people who live with disability must, and do, put forth extraordinary effort.¹³

To change culture and build a more inclusive society, we must first understand the deeply held assumptions and beliefs that underpin public attitudes about people with disability in Australia. The Achieve Foundation commissioned the FrameWorks Institute to help meet this need by conducting qualitative research to capture the commonly held assumptions, or cultural mindsets, that members of the Australian public use to make sense of disability and related issues. The brief is part of a larger research project focused on developing framing and narrative strategies that can be used to improve public understanding of and support for inclusion of people with disabilities. This strategic brief identifies these mindsets and describes a set of strategic challenges and opportunities they pose for advocates and communicators in the disability community. Future research will develop and test specific framing and narrative strategies to overcome the challenges and leverage the opportunities presented in this brief to shift culture and change the policy context towards full inclusion for people with disabilities.

What Are Cultural Mindsets?

Cultural mindsets (or mindsets) are deep, assumed patterns of thinking that shape how we understand the world and how we make decisions. The mindsets we hold can normalise or problematise aspects of the existing social order. For example, a mindset rooted in individualism makes public policies that support the community good seem unnecessary and misguided. Individualism focuses our attention on measures that help individual people make better decisions (for example, health education) and draws our attention away from the ways that broader structures and systems affect our lives (for example, the ways that housing affordability, toxins in our water, or access to quality food affect our health).

Cultural mindsets are highly durable. They emerge from and are tied to cultural and social practices and institutions with deep historical roots. At the same time, in moments of social upheaval, mindsets can be pushed into flux and become destabilised, leading to fairly rapid changes in thinking.

It's also important to acknowledge that we all have multiple mindsets that we can use to think about a given issue. For example, while Australians often think individualistically, we also have access to more ecological and systemic mindsets. When these mindsets are active, they bring into view social systems and the ways that environments shape outcomes alongside individual choices.

What Does It Mean for a Mindset to Shift?

Mindsets can shift in multiple ways. They can become more or less dominant over time (for example, mindsets about the power of the free market became more dominant in the second half of the 20th century while mindsets around the value of collective labour action grew weaker). The boundaries of a mindset can also stretch as people apply existing ways of thinking to make sense of new realities (for example, the contours of established mindsets about marriage have stretched to encompass same-sex marriage). And circumstances can introduce entirely new ways of thinking, as was the case in the mid-20th century, when mindsets about the dangers of smoking emerged and the maleficence of tobacco companies took hold.

How Does Cultural Mindsets Research Differ from Public Opinion Research?

Public opinion research examines the explicit attitudes and preferences that people hold on specific issues. Cultural mindset research explores the deeper, underlying ways of thinking that shape and explain these patterns in public opinion. Where public opinion research examines *what* people think, cultural mindset research examines *how* people think. For example, public opinion research might demonstrate that people support health education programmes more than they support policies that help with access to healthy housing. Cultural mindsets research explains why this is, revealing the role that the mindsets of health individualism and housing market naturalism play in driving these opinions and preferences.

For more on cultural mindsets and mindset shifts, see [*Mindset Shifts: What Are They? Why Do They Matter? How Do They Happen?*](#)

Methodology

To understand the gaps and overlaps between public thinking and ideas that the disability community seeks to advance, we began by conducting an extensive literature review, a series of interviews, and a feedback session with stakeholders. This work was designed to identify a set of key ideas that the community wishes to build understanding of and support for.

FrameWorks researchers then conducted semi-structured interviews with members of the Australian public in May, June, and July of 2022. We interviewed a total of 30 participants, including 10 who identified as living with disability, including physical, sensory, cognitive intellectual, and/or psychosocial disabilities.¹⁴ The overall sample was diverse across other demographics, such as age, gender, income, education level, and cultural and linguistic diversity (CALD).

For interviews with members of the public, FrameWorks researchers designed short-form and long-form interview guides, which were reviewed by a disability expert with lived experience. Rather than using them as a script, FrameWorks researchers used the guides to orient the conversation and allowed the conversation to be driven by the interviewee with probes and follow-up questions from the interviewer. The objective of this open-ended approach to interviewing is to yield a body of discourse rich enough to identify the implicit cultural mindsets embedded in it. Because this brief is focused on the insights that emerged from these public mindsets, some of the language used to talk about disability in the brief is reflective of that used by interviewees themselves, not necessarily how the community talks about the issue.

While a sample of 30 participants is too small to ensure the sample is *statistically* representative, its demographic variability is adequate to ensure the identified patterns in thinking are *shared* across different groups in Australia. While larger sample sizes are needed to investigate *variability* within a population or to allow for statistically significant comparisons between groups, the goal of cultural mindsets research is to describe *common* ways of understanding within a population, which can be identified through a sample size of 30 interviews that represents significant demographic diversity.

A detailed explanation of the methods of data collection and analysis used for this research can be found in the appendix of this strategic brief.

Research Insights

In the following section, we describe the cultural mindsets that emerged from interview data analysis, the implications of these mindsets for the disability community, and a set of emerging framing recommendations. Where appropriate, we include examples from interviews to show how these mindsets were evident in participants' talk. We acknowledge that members of the community are already implementing aspects of the recommendations we offer below. These recommendations are high level and meant as general guidance for the community. In the next research phase, we will design and test more specific framing and narrative recommendations and strategies.

RESEARCH INSIGHT #1

People understand humans to have basic physical, mental, and affective abilities.

Foundational mindset: People assume that human beings have a set of predefined “natural” physical, mental, and affective abilities that are assumed as roughly the same for every person. People reason that these natural abilities are fundamental to being human. In this mindset, people assume the following things about human abilities:

- *Humans can meet their basic physiological needs.* People believe that there are a set of predefined human abilities that exist to meet a set of essential needs, such as eating, bathing, and clothing oneself. In this way, these physiological abilities are considered the baseline of human ability that every human can and should have.
- *Humans can learn.* Participants reasoned that the ability to learn is a defining characteristic of being human. In this view, a human's ability to learn involves the cognitive capacity to process the world around them, recognise patterns, and seamlessly interact and communicate with others. People assume that the ability to learn is straightforward and looks roughly the same for everyone.
- *Humans can form social relationships.* People believe that being human is having the ability to interact, communicate, relate, and form relationships with other humans. Relatedly, people assume that the abilities to feel and express emotion are essential to forming relationships and are quintessentially human.

How does this mindset shape public thinking about disability?

While experts understand the exclusion of people with disability as a result of how society is built to respond to impairments, the public mindset of human ability produces an understanding of disability as the personal impairment of assumed human abilities. Thus, in this mindset, exclusion is caused by a person not having the abilities that lead to their inclusion in society.

In the example below, we see the assumption of natural human abilities to meet basic physiological needs applied to the understanding of what disability is. A human is understood to have eyes and, therefore, should be able to see. It is the person's visual impairment that is their disability, not a society that is built for people with full vision.

Example 1:

Participant 141: It's very hard to comment on these because there's so many different levels. Some person could be totally deaf, another person could hear loud noises but can't hear [...] you know? Um, but in black and white, the inability to lose a power that you should have been able to use. If you have the ability to [...] you've got eyes, you should be able to see, and you can't see, so that's a disability.¹⁵

In the following pair of examples, we first see the assumption of human abilities to learn and the moral value associated with that ability. In the second example we see a separate participant apply the assumption of the ability to learn to their definitional understanding of disability as a deficiency in, or lack of, the ability to learn as well as deficiencies in other human abilities.

Example 2:

Participant 138: Well, I think a human being—I believe that we learn and the better we learn the more doing the right things and we have a good direction there and we become better people.¹⁶

Example 3:

Participant 1: Some people, when they're born, they might be born with no arms or no legs. They haven't got the ability to learn like other people. They might have learning difficulties. They might not be able to talk or feed themselves or do routine things like normal people—normal humans—can. They need assistance.¹⁷

In the following example, we see the assumption of the human ability to have social relationships applied to thinking about disability as the limitations or deficiencies of a person's ability to react and relate to their fellow humans.

Example 4:

Researcher: So, then, do all humans, again, explaining this to a being from another planet, do all humans have the same abilities?

Participant 1: No. Some people have disabilities. Some people are afraid to mix with other people. Some people don't—some humans don't know how to react or mix with other people.¹⁸

When disability is understood in contrast to ability, it creates a perceived separation between people with and without disability. This view leads the public to think about people with disability as “other” or “different” from the rest of society. This mindset about ability is foundational to how disability has been historically understood in Australia: as an individual defect that requires isolation from the rest of society and medical treatment. Although the dominant public discourse has since shifted away from the belief that disability is a defect that needs to be eliminated, cured, or segregated, social exclusion persists. People with disability continue to be relegated to group homes, mental health care facilities, and prisons, as well as being at higher risk of violence, exploitation, and disempowerment.¹⁹

In the example below, a participant who does not live with disability employs this mindset to talk about disability as a difference in ability that gets in the way of “normal” human interaction.

Example 5:

Participant 23: Different—not bad but just different. **And it’s, for me it’s more about learning how do I come get a normal out of that.** So, if I’m dealing with somebody with a disability, how do I get them to understand what I’m trying to say? So it really depends, I guess, on the disability on the person has to how they understand.²⁰

Another participant, who lives with disability, engages with the mindset of ability to express that the assumption of limited human ability does produce a perception that people with disability are fundamentally different as humans, which is then shared by people who live with disability.

Example 6:

Participant 407: Yes. Okay. It means that people see that human as being different. And the person having that disability may feel different to other people. Or that they’re limited in some way.²¹

Importantly, when people use this mindset to understand disabilities, they focus on individual difference as causing exclusion rather than the structures of society itself. For experts in the Australian disability community, disability is something that occurs when a person interacts with a society that has not been designed to include the impairment.²² They emphasise that disability is a broad category that encompasses a wide range of impairments, varying degrees of severity, and includes disabilities with a variety of origins.

Fortunately, the public does also hold some mindsets of human ability that help them understand disability, not as a predefined category but, rather, as existing within a range of abilities. The example below, expressed by a person who lives with disability, helps to illustrate how the mindset of human abilities can articulate a continuum of ability that includes disability.

Example 7:

Participant 418: Yeah, absolutely. I think having different abilities allows us to be a little bit more creative. Seeing the world differently—I think that’s very important. So, you know people might look at people with disabilities and think, “Oh, that’s such a shame,” but they see the world differently, they figure things out differently, so there’s quite an asset there.²³

For Australian society to be fully inclusive, facilities and community interactions must be set up to support diverse disabilities and the diverse needs of people with disability. This will require community attitudes about people living with disability that recognise their diverse experiences as part of the fabric of a diverse community rather than being unrepresentative of, or separate from, the community.

What challenges and opportunities does this mindset present?

Challenge: Public thinking about disability reinforces a fundamentally dehumanising discourse.

When people believe that being human is tied to the existence of certain physical, mental, and affective abilities, anyone who lacks those abilities is seen as less human. Research participants who did not identify as living with a disability often talked about people living with disability as “still human.” While participants’ intention was to reaffirm the humanity of a person with disability, this kind of talk implicitly shows a belief that people living with disability are seen as less than fully human at some level. Seeing a disability as less human is dehumanising and helps to perpetuate exclusion, discrimination, segregation, and systemic disadvantages for people living with disability, and is therefore a fundamental challenge for advocates working on this issue.

Opportunity: Thinking about disability as existing across a range provides a framework for full inclusion of people living with disability in society. When people think about abilities as existing along a range, this makes it easier for people to view those living with disability as a natural part of society and who should be included in society. The view that a disability is a position on the range of human ability, not a lack of ability, can be leveraged to talk about people living with disability as inherently equal members of society. Thinking about abilities as existing as a range can help normalise disability as a type or degree of human ability, which can lead people to think about disability from a more inclusive perspective.

Initial recommendations for overcoming challenges and leveraging opportunities:

Talk about abilities as diverse and ranging rather than something people have or don’t have. This will leverage people’s existing understanding of a range of human ability while overcoming the dehumanising ideas that are currently prevalent in people’s thinking about disability.

Give examples of how people with diverse abilities go about their everyday lives. This will likely help to humanise and normalise people living with disability as just as fully human as anyone else.

RESEARCH INSIGHT #2

People believe that a person's social value comes primarily from their economic productivity.

Foundational mindset: People believe that a person's social value is equal to their economic contribution to the community minus their economic burden to the community. In this capitalistic view, people are valued members of society because of their labour productivity and consumption of goods and services. As a result, people who cannot participate or who are perceived as not contributing to society in this way, including people living with disability, are seen as having less social value. This mindset involves the following key assumptions:

- *People are valuable to society because of their economic productivity.* People believe that a person's social value is defined by their economic productivity. Using this logic, one's value to society is tied to their ability to produce goods and services, participate in the workforce, and financially sustain themselves and their family. Alongside one's ability to hold a job is the belief that the consumption of goods and services is a way to meaningfully contribute to the economy.
- *People are valuable to society if they are self-sufficient.* People believe that a person's self-sufficiency is critical to a person's value in society. In this zero-sum view, if a person cannot provide for themselves, they are assumed to be a burden on others, such as their family, society, the state, or all the above. Relatedly, people using this mindset can believe that life is a competition, resources are scarce, and any resource provided to one group of people results in fewer resources for others. As a result, there is a widespread belief that people should not be dependent on government assistance, and if they are, it harms society by taking scarce resources away from others.

How does this mindset shape public thinking about disability?

For experts in the disability community, people with disability are a fundamental part of social and economic life. However, the community also recognises that people with disability are shut out of community and economic life in important ways. For example, people with disability are more likely to be underemployed and to transition out of full-time employment into part-time employment or unemployment, and are less likely to re-enter the workforce. Relatedly, people with disability are more likely to live in poverty, even with the same education levels as others, and earn only 70 per cent the income of those who do not have disabilities.²⁴

The public mindset that being economically productive is how people are and should be valued in society structures how they think about people living with disability. Underlying this mindset is an assumption that people living with disability are unable to work or to effectively perform work duties because of their disability. The public assumes that people with disability are dependent on their families, the government, and/or the goodwill of charitable individuals or institutions. Consequently, because the public assumes that people living with disability need “extra” support and resources, they

often employ a scarcity mindset to think about the issue of employment for people with disability. They assume that any resource provided to people living with disability results in fewer resources for other people in need.

On the other hand, because people believe that being employed is so fundamental to one's social contribution, people can see the need to provide employment opportunities for people living with disability. In this way, economic inclusion is understood as an important way to achieve social inclusion for people with disability. However, by focusing on people's economic contributions to society, this mindset tends to reduce thinking about employment opportunities for people with disability as the end goal of inclusion rather than one part of a broader strategy to fully include people living with disability in society.

In the example below, a participant uses this mindset to reason that employment is the single most important way to create social inclusion for people with disability while still invoking a scarcity mindset.

Example 8:

Participant 129: It seems to me that the employment support thing is—again, not being an expert, but my observation would be that it is the single most significant thing that could be done to help integrate an individual disabled person into society and improve their life. I presume that it probably can only be realistically successfully applied to people at the lower end of disabilities. But anything could be done to shift that to increase the number of people that are able to participate in that, or to shift the bar in terms of finding a way for people with more severe disabilities to also participate in that, I think delivers the most value. It's probably enormously difficult to achieve and enormously expensive, but it feels like the single best way to help an individual.²⁵

For experts in the community, economic inclusion means facilitating the economic and workforce participation of people with disability so they have the autonomy necessary to live their fullest lives. To do this, experts emphasise the need to eliminate the structural barriers to employment and education, and to facilitate increased workforce participation, income, and consumer power for people with disability.

As the example below illustrates, members of the Australian public share this belief in economic participation as essential to social contribution and, thus, inclusion. However, they also assume that some people with disability are necessarily excluded, and presumably cannot be included, because their specific disability impedes their economic participation.

Example 9:

Participant 510: The impact is lifelong. They can't, humans call life fruitful when a person is a contributing part of a society or a community. That means a human works and contributes part of their efforts to ensuring the stability of the country they live in, and we call that taxes. When we work we pay a percentage of the money that we make to help build our roads, to help build our

hospitals, to help build our infrastructure. And for scientists to develop things to make a human's life easier ... Unfortunately, a person with a disability, especially if they are autistic or Down syndrome, do[es] not have that ability.²⁶

What challenges and opportunities does this mindset present?

Challenge: An overemphasis on economic value makes it difficult for people to think about people's social value more broadly, simply as humans. When a fundamentally capitalist society assigns value to people according to their ability to produce, it makes it more difficult to communicate about the inherent human value of people. If the argument for a person's worth to society hinges on whether they are a financial burden to others, then it is increasingly difficult to advocate for people living with disability since people don't see them as economically productive and assume that their inclusion in society requires additional resources.

Challenge: The belief that people living with disability are burdens to their families and society can make it hard to build support for public programmes and funding. When people believe that society has a limited amount of resources, this can make it difficult to build public support for expanding the distribution of resources or access to those resources. In this mindset, the barriers to economic life for people living with disability are created by the disability, not by society. Thus, when people employ a scarcity mindset, they assume that any attempt at inclusion would make the person living with disability into a burden on society and on the economy.

Opportunity: People's focus on employment makes it easier to build support for policies that can concretely improve quality of life, such as job development. People's belief that social value is associated with one's economic productivity provides an opening for talking about the need to provide employment opportunities to people living with disability because people can understand the importance that jobs play in people's quality of life. However, communicators and advocates will want to be careful not to reinforce the belief that one's value in society is fundamentally tied to the ability to work or obtain a job.

Initial recommendations for overcoming challenges and leveraging opportunities:

Talk about the ways that people living with disability are valued by society beyond their ability to work—such as being friends, family members, caretakers, and members of a community. Giving examples of how people living with disability can and should be valued as members of society beyond their economic contributions will help call into question the capitalist norm of equating human value to economic productivity, which positions people living with disability at a disadvantage.

Avoid talking about inclusion of people living with disability as solely an issue of providing employment opportunities to them. Instead, talk about work opportunities for people living with disability as one of many policy changes that are necessary to fully include them in society.

RESEARCH INSIGHT #3

People view social inclusion and exclusion individualistically, not systemically.

Foundational mindset: People believe that full social inclusion is achieved when people are accepted for who they are, as human beings, and not that they are simply tolerated by society. Acceptance in this mindset is expressed as a person's value as a human being independent of any ability or disability they might have. However, in this mindset, social inclusion is often understood in individualistic terms: as a personal choice both to accept others and to be accepted by others. Social inclusion becomes the result of individual relationships and commitments. If a person is accepted by other individuals, they are understood to be included in society. In this way, social inclusion, as well as exclusion, becomes quite personal rather than systemic. This mindset includes the following key assumptions:

- *Social inclusion and acceptance are individual choices.* People understand social inclusion as an individual choice that a person makes to accept someone or that a person makes to become accepted by others. Inclusion, in this view, is not created by systems but rather is achieved through individual relationships wherein people choose to accept one another and to act in ways that are acceptable to the status quo.
- *Individuals can use their own will to overcome barriers and become included in society.* People believe that a person must overcome barriers and limitations to improve their conditions through perseverance and strength of will. Following this logic, when someone is excluded from society, people reason that the options for an individual are to feel sorry for themselves and withdraw from society or to persevere and adapt to society, thereby being included in it.

How does this mindset shape public thinking about disability?

The discourse of social inclusion in Australia has historically included two key elements: full social participation, and equal and respectful treatment that makes people feel valued in society.²⁷ This understanding is present in how both the experts and the public understand the social inclusion of people with disability. However, while experts understand that full inclusion for people with disability can be achieved only if structural changes are made, the public believes that social participation and acceptance happen almost entirely on an individual level.

For example, in the quote below, a participant living with disability defines inclusion as being accepted for who you are, as a person, independent of one's disability, in a way that individualises the concept of social inclusion.

Example 10:

Researcher: So, how would you define “inclusion” then or being included?

Participant 407: Being accepted for who you are with a disability or no disability. You as a person.²⁸

This same participant also applies this mindset about social inclusion to express a highly individualistic belief that social inclusion is a matter of the individual will of someone with disability to overcome their personal limitations.

Example 11:

Participant 407: Yeah. The positive effect of having a disability is sometimes people, you want to prove other people wrong. If they say you can't do that because you have that type of disability, then you think, "I'm gonna work harder and I will do it." And then, if you push yourself to do it and you get all the support you need to achieve what it is you want to achieve, then anything is possible.²⁹

The quote below provides another example of how people apply this individualistic mindset to understand social inclusion as something that happens at the interpersonal level and, therefore, becomes a matter of individual will and choice to adapt, achieve, and become accepted.

Example 12:

Participant 739: Yes. Some use their disabilities as a reason to not get ahead. Some get ahead despite their disabilities. Some have the drive and some don't.³⁰

In the example below, this individualistic mindset is also used to reason that social inclusion is contingent upon personal desires rather than how society is structured.

Example 13:

Participant 642: I think fully included means that you can participate in society to the extent that you want to participate. It doesn't necessarily mean that you go to every single location that people might want to go to, but you have access to the basis where you want to go to, you personally want to go to.³¹

When social inclusion is understood at such an individual and interpersonal level, there is little to no recognition of the systems that include or exclude people with disability in society.³² This individualistic vision can make it hard for people to think about the need for deeper social and systemic change to fully include people living with disability.

What challenges and opportunities does this mindset present?

Challenge: Individual acts of inclusion, rather than systemic change, are viewed as the solution.

When people think about social inclusion primarily as individual acceptance, it makes it hard for them to see the structural barriers to inclusion. This puts the onus to achieve inclusion on individuals—both people who live with disability and people who do not—rather than on systems. This mindset leads people to reason that making society more inclusive ultimately amounts to getting individuals to think and act differently towards people living with disability. This mindset ignores the systemic barriers to opportunity and belonging that go beyond an individual's choice to accept a person with disability, or a person with disability's desire to overcome their limitations.

Challenge: The public's individualistic ideas end up reinforcing ableist norms and justifying exclusion of people living with disability. When people believe that exclusion is created by an individual's disability, this leads them to conclude that people with disability are at least partially responsible for their own exclusion or inclusion. This thinking reinforces ableist norms about what is considered "normal" or "natural" and leads to the expectation of people living with disability to act in ways that are deemed acceptable and worthy of inclusion. This thinking can serve to justify society's existing structures because it is up to each person with disability to overcome their barriers. Thus, it reinforces the idea that no deeper societal changes are needed to improve inclusion.

Opportunity: People's focus on acceptance can bring attention to the social and psychological impact of disabilities on the individuals living with them. People's focus on individual acceptance of people living with disability can help them see how being accepted by one's family, friends, and community can have positive social and psychological impacts, as well as how not being accepted can have negative impacts on one's mental health. This individualistic understanding of the social and psychological impacts of acceptance (or not being accepted) can be expanded to help people think about the broader impact that inclusion or exclusion can have on people living with disability overall. This can potentially make it easier for people to understand and support systemic solutions, such as improved mental health care, that help address the impact that exclusion and a lack of acceptance have on people living with disability.

Initial recommendations for overcoming challenges and leveraging opportunities:

Connect the positive social and psychological impacts of acceptance on individuals to the positive impacts of inclusion on people living with disability as a whole. For example, when telling stories about individual acceptance, talk about the broader societal context of how acceptance happens and connect the individual's experience to the systemic change needed to create an inclusive society for everyone with disabilities.

Give examples of specific systemic barriers to inclusion and their impacts on individuals with disabilities. This will help overcome people's ideas about individuals needing to "overcome" their exclusion by providing examples of how societal structures, rather than individual willpower, are to blame for their exclusion. Providing context for how people living with disability are currently excluded can also be a jumping-off point to build people's understanding of how systemic change, rather than individual acts of acceptance alone, is needed to fully include people in society.

RESEARCH INSIGHT #4

People think about social inclusion in terms of what's visibly observable in society.

Foundational mindset: People believe that social inclusion is measured by what they can observe. People reason that if something is frequently seen in daily life, that means it has been accepted by society. There are two main ways of thinking that emerge from this mindset:

- *People define inclusion in terms of access to communal physical spaces.* People's focus on what they can see in daily life leads them to believe that being included in society means having access to easily observable physical spaces, such as shopping centres, schools, stadiums, and parks. They reason that when people are physically able to be in these spaces, they can fully participate in the social activities that take place there. People assume that having access to these shared spaces is the same thing as being able to participate in social activities, and they therefore conclude that access to these communal spaces is a visible indication that social inclusion exists. In this way, people see the physical ability to access shared spaces as a key indicator of the level of social inclusion that exists in a community.
- *People define inclusion as the representation of certain groups in public spaces.* Because people focus on what's easily observable to them as the main indicator of inclusion, they reason that social groups that are prominent in public life and discourse must be included in society. In this view, public representations of a marginalised group in media and entertainment or by holding prominent positions in government or the private community indicate that this group is already included in society. People reason that when a few people from a marginalised group are present in the news or entertainment, that representation alone is sufficient for them to feel included in mainstream society. There is little thinking about what more needs to be done to include marginalised groups since they are already visible to the public.

How does this mindset shape public thinking about disability?

This mindset about visible observation leads people to reason that people living with disability are included in society in two ways: either through observable adjustments to the physical, or built, environment and/or through public representation in social and civic life.

Using this mindset, the public can easily see how including people living with disability means giving them access to shared physical spaces that are easily observable in daily life. As a result, people focus on solutions to make society more visibly inclusive, such as making the built environment more accessible through ramps and accessible doorways. Experts in the field also understand the importance of the built environment for the social inclusion of people with disability. A lack of access to buildings and facilities and a lack of accessible transportation are major barriers to full inclusion in the community and to participation in daily activities.

However, for the public, visible access to a space is understood as a marker that people living with disability have been included in society. In our research, participants living with disability and participants who do not live with disability both reasoned that the more visible a person's disability is (such as a physical disability), the more socially accepted it is and the easier it is to create social inclusion. This thinking that disability is harder to understand when it is not easily observable is illustrated in the example below.

Example 14:

Participant 832: Say that a person with a disability has lost a leg in an accident. They're more accepted because you can see that they've lost their leg. So, it's easier for people to make allowances for them and give help to them. Compared to, say, someone that has a genuine back and spine injury. If you can't see, it's harder to understand so it's harder to give them the same sympathy or understanding.³³

Additionally, an overemphasis on what is visible leads people to focus on physical disability over less immediately observable disabilities, such as cognitive or psychosocial disabilities. Experts note that people with psychosocial or intellectual disability are more likely to have experienced violence than people with physical or sensory disabilities.³⁴ The focus in public thinking on physical disability makes it difficult for people to recognise the full diversity of disability in society and makes it hard to imagine solutions for the inclusion of the full diversity of disability.

Example 15:

Participant 3: For example, if it's physical, obviously we've got to make things convenient for them. So, physically they can access easier to areas or events or whatever. And then, benefits mental is a bit harder because you can't really, obviously support that. Like wait, I think that would be mainly educating people how to interact if they see one.³⁵

Within this mindset, people also reason that people living with disability are included in society when they (or at least a select few people) are visibly represented in public life, such as in the news, politics, sport, entertainment, and other media. In some ways, this aligns with the expert view that it is important to increase representation of people with disabilities in public campaigns to change public attitudes and normalise people with disability as a diverse part of the community.

Experts also emphasise that full inclusion means that people living with disability are part of, and have the opportunity to lead, political decision-making processes at the community, local, state, and national level, as well as in the private community. For experts, however, this means that the lived experience of people with disability has become a focus for public and private decision-making and policymaking. For the public, on the other hand, the observable presence of a person with disability in a decision-making position signifies that people with disability have been fully included in society and not much else needs to be done.

The following exchange between the researcher and a participant who lives with disability illustrates how this mindset leads people to reason that visible representation of people with disability means they have been fully accepted across Australian society.

Example 16:

Researcher: There's no ways that people are excluded from Australian society?

Participant 604: No. It's acceptance. Because we also have a senator. I don't know if he got re-elected, but the last parliament we had a disabled person in a wheelchair as a senator. A Greens senator, actually. But he basically, as I said, he was a role model.

Researcher: And so, how does that help in your mind to have someone like that in government?

Participant 604: Uh [...] just there's no prejudices and there's plenty of acceptance of a person with a physical disability.

Researcher: Are there ways, are there things in Australian society where people with disability are less included than other people?

Participant 604: No. No. They're inclusive in society, they're accepted.³⁶

What challenges and opportunities does this mindset present?

Challenge: People think that, if they see a visible accommodation, that means people living with disability are already included in society. When people believe that inclusion is based on what is frequently seen in society, they reason visible accommodations are sufficient to be included in society. Therefore, things like wheelchair ramps to enter buildings are seen as enough for people living with disability to be included in shared physical spaces. There is no further thinking about what is needed to fully include people living with disability in all aspects of society beyond that which is easily observable.

Challenge: People's overemphasis on what's visible makes it difficult for them to recognise other types of disabilities beyond physical disabilities. Because the public's vision of inclusion relies so strongly on what is observable, they assume that any disability should be visibly obvious, as should the ways in which people living with disability are excluded from society. As a result, it is difficult for people to think about people living with disabilities that are more difficult to observe, such as anxiety or dyslexia, let alone how they should be included in society. This can make it difficult to communicate that disabilities other than those that are easily observable also need to be considered in public discourse and policy change.

Opportunity: People can see how the representation of people living with disability plays a role in including them in society. The belief that what's visible in society is a marker of inclusion can help people understand that providing spaces for people with diverse disabilities to be represented in society is an important goal for social inclusion. However, this mindset can lead to thinking that representation is all that is needed to include people living with disability in society, when in fact it's one part of many systemic changes required to achieve full inclusion for people living with disability.

Initial recommendations for overcoming challenges and leveraging opportunities:

Situate the representation of people living with disability in public discourse and media as one of many systemic changes that are needed to fully include people living with disability in society, not as the end solution. Talking about representation of people living with disability will resonate with people, but it's important to leverage people's existing thinking about the importance of representation to expand their understanding of what's needed to achieve full inclusion for people living with disability.

Explain what people with diverse disabilities need to fully participate in society, above and beyond access to physical spaces. Describe the diverse range of disabilities and what is needed for people with each type of disability to be fully included in physical, intellectual, and social spaces. Talk about participation as different from access alone. This can help expand people's understanding of disabilities beyond solely thinking about physical disabilities and build their understanding of solutions beyond that which is observable.

RESEARCH INSIGHT #5

People think that social progress for people living with disability is primarily about reducing harm rather than full inclusion in society.

Foundational mindset: People believe that social progress for marginalised groups means that society is less harmful to them than it was in the past. While people recognise that society can still be improved, people reason that if the ills of the past have been remedied, that means things are better than they were before. In this linear view, progress for marginalised groups is seen as anything that lessens harm. This mindset includes the following assumptions:

- *Social progress is measured by evidence that problems from the past have been resolved.* People believe that things are better now for most people than they were in the past because problems that existed in the past are no longer thought to exist or have been mitigated. For example, people reason that less harm is being done to historically marginalised groups such as LGBTQI people, and therefore society is currently more inclusive than it was in the past.
- *Commitment to social progress is measured by the allocation of resources.* People believe that societal progress is measured by how resources are used. People reason that resources are needed to make changes for the betterment of society. In public thinking, these resources have two primary sources: private charity and government. On the one hand, the government is expected to be a source of funding for programmes. On the other hand, private charity is not expected to provide funding, but the commitment of private and personal funds is considered an indicator of whether attitudes have shifted in society.

How does this mindset shape public thinking about disability?

This mindset's focus on comparing the horrible treatment of people with disability in the past to how things currently are leads to the conclusion that today's society is inclusive. However, experts in the disability community emphasise that social inclusion does not just mean preventing neglect and abuse, but also actively building opportunities for autonomy, independence, and choice for people with disability, all of which Australian society has yet to achieve.

Members of the public refer to a past where people living with disability were institutionalised, as well as being stigmatised and ostracised from their families and communities. As shown in the example below from a participant with disability, when harm is perceived to be no longer accepted in today's society, people reason that society has made progress in the inclusion of people living with disability.

Example 17:

Participant 231: In my lifetime I've seen an evolution of going from institutionalisation of people with disability and intellectual disability to the Jeff Cannon era of getting institutionalisation and shutting down huge places like the Key Cottages. And so, I think that all human beings and people with disabilities are more valued and better understood, and much better supported financially in the community—like my own access to the NDIS is a testament to that. So, in my own lifetime I've seen it go from being something that's quite hidden and not talked about to just, I don't know, living life large.³⁷

Members of the public also use this mindset to understand policy changes. For example, because people think about progress in terms of the allocation of resources, they see government assistance as proof of a broader societal shift towards inclusion of people living with disability.

Experts in the disability community would challenge the notion that is embedded in this mindset: that society becomes inclusive when harms of the past are reduced. People with disability in Australia remain more likely to experience poor health, including mental health issues, higher levels of poverty, housing insecurity, unemployment, and barriers to education, and they are more likely to have lower levels of income, labour force inclusion, and social support.³⁸ Some experts, however, have pointed to potential advantages that come with the public's tendency to treat social inclusion as simply the opposite of social exclusion. This thinking may reflect a broader desire as a culture to focus on positive change to achieve the objective of social inclusion for people living with disability by continuing to reduce harm rather than dwelling on past exclusion.³⁹

What challenges and opportunities does this mindset present?

Challenge: The public currently thinks that people living with disability are already mostly included in society, and not much else needs to be done. When people reason that there is more acceptance of people living with disability because people are no longer being institutionalised, for example, it can create the perception that inclusion has already been achieved. This can make it difficult to communicate that big and important barriers to full inclusion for people living with disability still exist and that it is crucial to address these barriers.

Opportunity: The public believes that change can happen in the future because it has happened in the past. When people hold the idea of a historical arc of progressively increasing inclusion of people living with disability, it can be leveraged to communicate inclusion as something that is desirable and achievable. By connecting the inclusion of people living with disability to the most important socially progressive achievements, such as the inclusion of LGBTQI people, the public can envision disability as part of the larger ongoing progression towards social inclusion in Australian society.

Opportunity: The public considers resource allocation important for making social progress, which could be leveraged to support public funding of inclusion policies. When people believe that the use of resources is connected to social progress, there is potential to increase community and government resources for inclusion. People's belief that the government's main role for people living with disability is to provide funding for programmes, they may be more willing to support government funding for inclusion policies if they understand them as part of broader social progress.

Initial recommendations for overcoming challenges and leveraging opportunities:

Tap into the belief that Australia has made important social progress while also highlighting the continued need to improve conditions so that everyone can be fully included in society, particularly people living with disability. People's belief in the importance of social progress can be leveraged to expand understanding that more needs to be done, particularly for people living with disability. And people's sense that progress has happened in the past can be a source of optimism that more progress can be made to fully include people living with disability in society.

Talk about the role that the government can and should play in making society more inclusive for people living with disability. This can help leverage the belief that government is responsible for creating the conditions for social progress and the sense that the government has previously been successful in fostering social inclusion. Centring the role that the government can and should play can help expand understanding of and build support for inclusive governmental policies and thereby shift thinking away from individualistic solutions.

Conclusions

It can be tempting to reduce public thinking about disability to a social process of “othering” and marginalisation of people living with disability. While true—as evidenced in this and other research—it is important to examine what causes this othering in public thinking. Our research reveals a set of mindsets about human ability and people’s value in society, as well as ideas about acceptance, inclusion, and social progress that shape how Australians make sense of disability and social inclusion.

People hold ambivalent attitudes and contradictory mindsets that shape their thinking about disability and social inclusion, as well as about who is responsible for creating inclusion. Many of the contradictions in public thinking stem from individualistic rather than systemic understandings of both disability and social inclusion. This becomes particularly important because both the Australian disability community and the Australian public define disability by exclusion. The disability community understands an impairment as a personal condition and a disability as the exclusion that happens when society is not built to accommodate that personal condition. However, the public generally views the impairment as the disability, and therefore they reason that a personal condition, rather than the structures of society, causes an individual’s exclusion. Consequently, the burden of inclusion falls on the individual instead of societal structures that require change.

Mindsets about human ability, the economic value of individuals in society, social visibility, personal acceptance, and reduction of harm include unproductive ways of thinking about people with disability that present challenges for achieving the kinds of narrative and policy change required for their full inclusion in society. At the same time, there are aspects of these mindsets that can be productively leveraged by communicators to shift public thinking in productive directions, towards an understanding of disability as part of the diversity of human experience and as something that requires systemic and structural solutions.

Any successful reframing strategy must acknowledge the burden of exclusion is not equal for all people who live with disability and is mediated through multiple identities. It also must recognise that discourses of exclusion have been entrenched over decades and have created hierarchies of power and oppression in Australian society. An effective reframing strategy must expand how people think about disability, systemic change, and what full inclusion looks like.

The insights, challenges, opportunities, and initial recommendations in this brief represent a first step to shift public thinking and discourse around disability and inclusion in Australia. Additional research is needed to design and test specific framing strategies that can help shift public thinking about people living with disability and build support for policies that promote inclusion. The findings in this strategic brief can help reframe the conversation about disability by helping to normalise people living with disability and their needs, and build support for systemic change to fully include people living with disability in Australian society.

Appendix: Research Methods

This appendix provides detailed information on the research informing FrameWorks' strategic brief on communicating about disability in Australia. Below, we outline the research conducted with experts, advocates, and members of the public, providing the evidence base for the brief and describing the methods used and sample composition.

Core Ideas from the Disability Community in Australia

To develop an effective strategy for communicating about an issue, it is necessary to identify a set of core ideas to get across about disability and inclusion in Australia. For this project, these ideas were garnered from experts and advocates in the disability community. FrameWorks researchers conducted an extensive review of the relevant literature on the issue, along with six 1-hour interviews with experts and advocates in the disability community in Australia. Between November and December 2021, researchers conducted interviews and, with participants' permission, recorded and transcribed them for analysis. To refine the core ideas from the community, FrameWorks conducted a 90-minute feedback session with experts and advocates in December 2021.

Interviews with experts in the disability community in Australia were semi-structured, consisting of a series of probing questions designed to capture their understanding about disability and inclusion in Australia, what is most important for people to understand about disability, and solutions to address the inclusion of people living with disability. In addition to a set of predrafted questions, FrameWorks researchers repeatedly asked for elaboration and clarification, and encouraged members of the community to expand on concepts they identified as particularly important. In each instance, the researcher conducting the interview used a series of prompts and hypothetical scenarios for members of the community to explain their research, experience, and perspectives; break down complicated relationships; and simplify complex concepts.

Analysis of the interviews with experts and advocates in the community employed a basic grounded theory approach.⁴⁰ A FrameWorks researcher identified and inductively categorised common themes that emerged in each interview and across the sample. This procedure resulted in a refined set of themes, which researchers supplemented with a review of materials from relevant literature. Members of the disability community in Australia then provided feedback on the key ideas that had been identified from the interviews and literature review, and adjustments to those ideas were made according to that feedback.

Public Understanding of Disability in Australia

A primary goal of this research was capturing various commonly held assumptions, or cultural mindsets, that members of the public use to make sense of disability in Australia and issues related to the topic. Cultural mindsets are cognitive shortcuts to understanding, or ways of interpreting, organising, and making meaning of the world around us, shaped through years of experience and expectations and by the beliefs and values embedded in our culture.⁴¹ These ways of thinking are available to all members of a culture, although mindsets have different degrees of dominance across different groups. Individuals belong to multiple cultures, each of which include multiple mindsets (that is, people participate in public cultures at multiple levels, including national and subgroup cultures). In this project, our goal was to explore the mindsets available in the dominant culture in Australia, but it is important to acknowledge that individuals have access to other mindsets from other cultures in which they participate.

In exploring cultural mindsets, we are looking to identify *how* people think rather than *what* they think. Cultural mindsets findings, therefore, differ from public opinion research, which documents people's surface-level responses to questions. By understanding the deep, often tacit assumptions that structure how people think about disability, we can understand the obstacles preventing people from accessing the core ideas described by experts and advocates in the community. We are also able to identify opportunities communicators can take advantage of; that is, existing ways of thinking that can help people arrive at a fuller understanding of the issue.

Cultural Mindsets Interviews

To identify cultural mindsets the public uses to think about issues related to disability in Australia, FrameWorks researchers conducted interviews with members of the Australian public in May, June, and July of 2022. We interviewed 30 participants, including 10 who identified as living with a disability, including physical, sensory, cognitive intellectual, and/or psychosocial disabilities. A short-form interview guide and a long-form interview guide were reviewed by a disability expert with lived experience. A professional marketing firm recruited and selected the participants to represent variation along several dimensions. For all participants, this included gender; age; cultural and linguistic diversity (CALD); location in Australia; educational background; income; parental status; marital status; and whether they self-identified as Aboriginal/Torres Strait Islander, LGBTQI, or as living with a disability (as self-reported during the screening process).

Cultural mindsets interviews were one-on-one, semi-structured interviews lasting approximately two hours. Instead of going through a list of questions, the interview is designed as a set of queries to elicit as much talk about the topic as possible, driven by the participant rather than the interviewer. In this way, the design of the interviews was intended to allow researchers to capture broad sets of assumptions, or cultural mindsets, that participants use to make sense of a concept or topic area. For this research, interviews consisted of a series of open-ended questions covering participants' thinking about disability and inclusion in broad terms. Researchers then focused more specifically on participants' thoughts on

concepts regarding disability, such as benefits, effects, access, and other factors influencing disability in Australia, as well as what can be done to address any issues regarding disability and inclusion in Australia. With participants' written consent, all interviews were recorded and transcribed.

Researchers used analytical techniques from cognitive and linguistic anthropology to examine how participants understood issues related to disability and inclusion.⁴² First, researchers identified common ways of talking across the sample to reveal assumptions, relationships, logical steps, and connections commonly made but taken for granted throughout an individual's talk and across the set of interviews. In short, the analysis involved discerning patterns in both what participants said (that is, how they related to, explained, and understood things) and what they did not say (that is, their assumptions and implied relationships). In many cases, the analysis revealed conflicting mindsets that people brought to bear on the same issue. In such cases, one conflicting way of understanding was typically found to be dominant over the other in that it more consistently and deeply shaped participants' thinking (that is, participants generally drew on this mindset with greater frequency and relied more heavily on this mindset in arriving at conclusions).

To ensure consistency, researchers met after the first round of coding and analysis to compare and process initial findings. Researchers then returned to transcripts to revisit differences and explore questions that arose through this comparison. As part of this process, researchers compared emerging findings to the findings from previous cultural mindsets research, using this as a check to ensure they had not missed or misunderstood any important mindsets. Researchers then came back together and arrived at a synthesised set of findings. Analysis centred on ways of understanding shared across participants. Cultural mindsets research is designed to identify common ways of thinking that can be identified across a sample. While there is no hard and fast percentage used to identify what counts as shared, reported mindsets are typically found in the majority of interviews. Mindsets found in a smaller number of interviews are reported only if there is a clear reason these mindsets only appeared in a limited set of interviews (for example, the mindsets reflected the thinking of a particular subgroup of people).

While a sample of 30 participants is too small to ensure the sample is perfectly *statistically* representative, its demographic variability is adequate to ensure the identified patterns in thinking are *shared* across different groups within Australia. While larger sample sizes are needed to investigate *variability* within a population or to allow for statistically significant comparisons between groups, the goal of cultural mindsets analysis is to describe *common* ways of understanding within a population. As a result, for cultural mindsets research, sample size is determined by the concept of saturation: A sample is considered a satisfying size when new data do not shed any further light on underlying patterns of thinking within a population. For this project, our analyses confirmed a sample size of 30 interviews was sufficient to reach a point of saturation regarding cultural mindsets of disability and inclusion in Australia.

Endnotes

1. Some examples of physical disabilities include disabilities of the musculoskeletal system and connective tissue, such as arthritis; the ear and mastoid process, such as hearing loss and tinnitus; the circulatory system, such as heart disease and stroke; and impairments of the nervous system, such as cerebral palsy and multiple sclerosis. Some examples of intellectual and developmental disabilities include intellectual disabilities such as autism; mood affective disorders, such as depression; as well as dementia and Alzheimer's disease. See Australian Institute of Health and Welfare. (2020). *People with disability in Australia*. <https://www.aihw.gov.au/getmedia/ee5ee3c2-152d-4b5f-9901-71d483b47f03/aihw-dis-72.pdf.aspx?inline=true>
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11. Among other findings, the survey found that 25 per cent of respondents agreed that people living with disability are a burden to their families, and 16 per cent agreed that people with disability should not raise children.
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13. National People with Disabilities and Carer Council. (2009, August 5). *SHUT OUT: The experience of people with disabilities and their families in Australia* (Easy English ed.). Australia Department of Families, Housing, Community Services and Indigenous Affairs. https://www.dss.gov.au/sites/default/files/documents/09_2022/shut-out-easy-read-mod.pdf
14. When studying cultural mindsets, the unit of analysis is chunks of discourse rather than the participant, and the sample becomes the hours of talk rather than the number of informants. Evidence from research on cultural mindsets has determined that a sample of 20 to 30 informants (equivalent to 400 to 600 hours of data) is sufficient to find commonly held cultural mindsets. (D'Andrade, R. [2006]. Some methods for studying cultural cognitive structures. In N. Quinn [Ed.], *Finding culture in talk: A collection of methods* [pp. 99–100]; Kendall-Taylor, N. [2012]. Conflicting mindsets of mind: Mapping the gaps between expert and public understandings of child mental health. *Science Communication*, 34[6]: 701. <https://www.doi.org/10.1177/1075547011429200>).
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Communicating about Disability in Australia

Insights, Challenges,
and Opportunities

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