Policy Document

Medical Students with Disabilities Policy

Background

The Australian Medical Students’ Association (AMSA) is the peak representative body of Australia’s medical students. AMSA believes that all communities have the right to the best attainable health. Accordingly, AMSA advocates on issues that may impact health outcomes. AMSA aims to complement existing university systems and procedures that support medical students with disabilities throughout their study.

According to the Disability Discrimination Act (DDA) [1], an individual is considered to have a disability if they have a physical or mental impairment, which has a long-term adverse impact on their ability to carry out normal day-to-day activities [1]. While there is no comprehensive list of impairments that constitute disability, examples include sensory impairments, mobility difficulties and other physical impairments, learning difficulties and mental illness (as covered in AMSA’s Mental Health and Wellbeing Policy [2]). The Australian Bureau of Statistics has identified that approximately 1 in 5 Australians have some form of disability [3]. Although there are no national statistics on the number of people with a disability applying to or being accepted to medical school, or on the number of doctors with disabilities [4, 5], anecdotal evidence suggests there is a significant number who face discrimination [5, 6].

Discrimination against medical students and doctors with disabilities may be direct, for example failure to make reasonable adjustments, or implicit, such as inherent attitudinal, assumptive, exclusionary or
segregational inequality. One reason for this implicit discrimination stems from the traditional view that doctors have to be flawless and fully fit [7].

There are numerous barriers faced by doctors with a disability, which include:

- Inflexible working patterns for their specific needs
- Poor contingency cover
- Unsympathetic or prejudiced colleagues
- Little understanding of their disability and functional abilities
- Stigma attached to doctors with a disability or chronic illness [8].

Medical students with disabilities face similar barriers. However, it is now possible for some of the aptitudes, abilities, and skills required by medical students to be attained by individuals with a disability using technological compensation or other reasonable accommodations [9]. For example, special devices enable paraplegics to stand up in the operating theater, electronic medical records using screen-reading software allow visually-impaired individuals to read charts and electronic stethoscopes allow those with hearing difficulties to perform cardiac auscultation [10]. These existing technological accommodations enhance the functional potential of those with motor or sensory limitations, enabling a wide range of disabilities to be accommodated within medical practice. Moreover, there are doctors who have acquired a disability once qualified and continue practicing competently within their specialty, demonstrating that there is still capacity for doctors to practise despite having disabilities [5].

Equal opportunity

The DDA [1] states that it is unlawful for an educational authority to discriminate against a person on the grounds of disability. Specifically, failing to accept a person's application for admission, creating terms or
conditions on which it is prepared to admit an individual or limiting access to any benefits on the grounds of disability breach this Act. The DDA also describes that students with disabilities are entitled to reasonable adjustments that enable them to study. Each State has its own Equal Opportunity Act, which provide further explanation on how the principles of the DDA are applied. The Equal Opportunity Act VIC 2010 [11] provides comprehensive definitions for what is considered a reasonable adjustment and an unjustifiable hardship (see Appendix 1,2).

**Reasonable accommodation and inclusion in education**

Reasonable accommodation is any appropriate adjustment to minimise or eliminate a disability-related barrier, without altering course requirements or causing excessive administrative or financial burden [12,13]. For medical students, reasonable accommodation must also consider any possible impacts on patient safety or care (Appendix 3). The denial of reasonable accommodation is a form of discrimination. Under the Convention on the Rights of Persons with Disability (CRPD) [12], those with disability have a right to education and it is the responsibility of the State to ensure that reasonable accommodation is provided.

Inclusive education is defined by Cologon [14] as “valuing and supporting the full participation of all people together within mainstream educational settings”. Inclusive education is facilitative and involves adapting teaching methods and environments to allow equal opportunity for all students to actively participate. The positive effects of inclusive education are widespread and significant for both students with and without disabilities [15]. Reasonable accommodation and inclusion are both required to realise the right to education, and are explicitly endorsed by the CRPD as well as a variety of government policies and domestic law, including the National Disability Strategy [15].
Position Statement

AMSA believes that medical students and doctors with disabilities are invaluable within the medical profession as they are uniquely placed to advocate for the healthcare needs of people with a disability and foster a diverse and inclusive environment within the medical profession. Medical schools should encourage equal opportunity for students with disabilities to access medical school, making reasonable accommodations where necessary to support these students with their study and health, whilst still maintaining patient safety.

Policy

AMSA calls upon

1. Australian medical schools to:
   a. Adjust medical school admissions:
      i. So that clear guidelines are available outlining the requirements for admissions and the reasonable adjustments that may be available to students with disabilities
      ii. Provide assistance such as with a Disability Support Officer prior to admission process
   b. Provide an inclusive, non-discriminatory environment that supports disabled students during their medical studies
   c. Work collaboratively with the university disability support service to offer equitable access to and opportunity in its programs and facilities according to ethical and legal responsibilities by:
      i. Providing reasonable accommodations to students with disabilities as determined on a case-by-case basis. This may include, but is not limited to:
         a. Employment arrangements for specialised staff
         b. Education and examination arrangements
         c. Building modifications to improve accessibility
         d. Provision of specialised equipment or services
2. Provide flexibility in enrolment, attendance and assessment requirements to students with a disability by:
   a. Recognising that students with a disability may require absences from placements or assessments that are unexpected and unpredictable, and allowing them to do so without penalty
   b. Providing alternative assessment arrangements that respect students with a disability, without compromising quality education or patient safety

3. Medical colleges, hospitals and other places of healthcare provision to:
   a. Provide an inclusive environment that actively encourages and enables doctors with a disability to practise medicine.
   b. Make reasonable accommodations to allow doctors with disabilities to practice clinically by:
      i. Making use of technology, flexible working arrangements and clinical teams
      ii. Enabling access to a Disabilities Support Officer
   c. Ensure patient safety is maintained at all times and in no way compromised

4. The Australian Medical Association (AMA) to:
   a. Support, and actively advocate for doctors and medical students with disabilities
   b. Develop policy in support of creating an inclusive and supportive environment for medical students and doctors with disabilities

5. AMSA Executive and Australian medical students to:
   a. Recognise and challenge stigma against students with a physical or mental disability
   b. Provide an inclusive and supportive environment for medical students with disabilities
   c. Make AMSA events accessible to students with disabilities
   d. Actively advocate, where appropriate, to relevant stakeholders to ensure medical students and doctors living with disabilities are not discriminated against, have access
to education and employment within the medical profession with reasonable adjustment and support

6. The Australian Government to fund research investigating:
   a. The nature and prevalence of disabilities among healthcare professionals and medical students
   b. The primary barriers to work that medical students and doctors with disabilities experience
   c. The effect of disability on medical practice

Appendix

1. The Equal Opportunity Act [10] defines that “a reasonable adjustment for a person with disability must take into account: the person’s circumstances (including the nature of his or her disability), the nature of the adjustment required, the effect on the person of making the adjustment, the number of people who would benefit from the adjustment, the consequences for the educational authority of making the adjustment, the consequences for the person of not making the adjustment and if there any relevant Action Plans made under Part 3 of the DDA [1].”

2. The Equal Opportunity Act [10] defines exemptions from making reasonable adjustment on the grounds of unjustifiable hardship. “If the required adjustments for a person or persons with disability to participate in or continue to participate in or derive or continue to derive any substantial benefit from an educational program are not considered to be reasonable after taking into account the above factors then the educational authority can be exempt from making an adjustment on the grounds of unjustifiable hardship.”

3. Reasonable accommodation offered by universities may include:
   a. For examinations – where it does not change the nature of assessment
      i. Additional time
ii. Accommodation separate to main examination venue and supervision
iii. Sign interpreters, scribes, readers
iv. Use of a computer
v. Specialist equipment – voice recognition/synthesis software, modified computers, screen enlarging software
vi. Alternate print formats

b. Outside examinations
i. Taped books
ii. Reduced caseload

References


   http://blogs.scientemag.org/sciencecareers/2010/10/a-more-level-pl.html

Policy Details

Name: Medical Students with Disabilities Policy

Category: C – Supporting Students

History: Adopted Third Council, 2015