

NDAP Review June 2016

Question 1 - Models of Advocacy

1.1 How do people with disability, their families and carers benefit when agencies are funded to provide only one or two models of support?

ADAI would discourage the use of the term “only” in this statement. As a Disability Advocacy agency funded for Individual Advocacy (which includes service to the family members, cares and or representatives of minors and people who do not have capacity to make informed decisions), ADAI and may other Advocacy agencies assist people who live with a disability regardless of age, type of disability or location. This requires an extensive knowledge of disability type, services and resources in the community, varying decision making process and local communities.

Between Jan 2016 and end June 2016 the type of issues presented by people contacting ADAI included;

Education matters	30.5%
NDIS Matters	17.6%
Legal Matters/Orders	11.76%
Housing Matters	11.76%
Other service access	7%
Income security	7%
Employment Rights	4.7%
Health Care	4.7%

Transport 4.7%

In general, an organisation funded to provide one or two forms of Advocacy will be able to readily identify early in their contact with a person with a disability or their representative, whether they are the appropriate agency to assist or not. If they do not believe they are, they will readily refer on to a more suitable service. Where it becomes apparent as a matter progresses that a different model of Advocacy is required the originating service can and often will (if the person or their representative wishes) continue to provide support throughout transition or act as an ongoing liaison between the person and the new agency.

Feedback indicates that clients value;

- Advocates who are local or who have local knowledge
- Advocates with whom they can meet face to face where circumstances require (e.g. direct support provided at interagency meetings)
- Advocates who can commence a process with them and then continue to provide support and act as a liaison person if and when a transition to another model of Advocacy is required, or who can be re-contacted for clarification as and when is required
- Advocacy services which are free, and independent of service provision.

1.2 What are the draw backs

- Any potential drawbacks can be and are addressed through liaison and collaboration between providers of differing models of advocacy. For example, free community legal service providers often utilise Individual or Family Advocacy services to provide support to people with a disability so that the person can work effectively with their legal representative to
- tell their story, and be heard
- clarify their goals,
- focus in on the key story they wish to tell
- gather, sort and be prepared or present any required information
- understand processes- what happens next.
- take appropriate follow up actions, as instructed by their legal representative

Individual Advocacy Services work in partnership with clients and representatives, as well as involved community organisations to

- promote understanding of rights, and of advocacy
- foster increasing confidence and knowledge,
- facilitate increasing skills in and support self-advocacy wherever appropriate and
- assist individual clients to approach policy makers such as MPs to lobby for change.

1.3 How do we value and support the various models of advocacy while ensuring equitable access to individualised, fit-for-purpose advocacy regardless of location?

Increasing use of technologies, including email, skype and phone conferencing as well as the education and support of local community representatives can help to extend the capacity of Advocacy organisations to assist people in more rural and remote locations. Close liaison and co-operation between Advocacy agencies and Community Legal services extends the range of Advocacy types available.

Question 2 - Improving Access to Advocacy Supports

2.1 How do we improve access for;

- People with a disability from Aboriginal and Torres Strait Islander communities and their families?

This may be supported by the funding of Aboriginal and Torres Strait Islander specific services, the training and support of respected Aboriginal and Torres Strait Islander community representative to act as Advocacy agents for their communities, working in collaboration with those agents, the employment of Aboriginal and Torres Strait Islander staff by Advocacy agencies and or routine training of all Advocates in Aboriginal and Torres Strait Islander culture.

- People with disability from culturally and linguistically diverse communities and their families?

This may be supported by the funding of CALD specific services, the training and support of respected CALD community representative to act as Advocacy agents for their communities, working in collaboration with those agents, the employment of CALD and bilingual staff by Advocacy agencies and or routine training of all Advocates in Cultural and linguistic Diversity. Ease of access to telephone interpreting services can be pivotal as can translation services.

- People with a disability in rural, regional and remote locations?

The cost of maintain regional and remote offices, and or regional or remote travel potentially prohibits service into these areas. However improved technologies, and increasing capacity to utilise technology as a tool communication amongst clients and their representatives can assist. The education and support of local community agency staff who are willing and able to provide a degree of face to face support for clients, with the support of trained advocates can also t yield b very positive outcomes.

- People who are very socially isolated, including those with communication difficulties and those in institutional care?

Communication difficulties can often be reduced through the use of technologies (including talk to text programs), through collaboratively working with the person and a family member or trusted representative with whom the person is comfortable involving, and through relevant skill and training for advocates. The training of institutional care staff in the role of advocates and the potential benefits of advocate involvement, may be beneficial. Advocacy staff with a first-hand understanding of institutional care practices and decision making processes as well as the circulation of information into facilities, and a guaranteed ability for those in institutional care to contact advocacy services are essential.

2.2 What are the strategies and models that have worked? What are the strategies that do not work?

As above

Question 3- Improving the advocacy evidence base and coordination on systemic issues.

3.1 What mechanisms could be used to ensure information on systemic issues gets to the right people and organisations?

Quarterly or six monthly reporting on national, state wide and local/regional trends to DANA or an equivalent peak Disability Advocacy body, operating at both state and national level may assist. (Similarly structured to Aged and Community Services). The peak body can then release regular reports to National and state bodies. Data reporting could also be modified to capture and report on age, gender, type of disability, whether on or eligible for NDIS and cultural background.

3.2 How can we help disability advocacy organisations work with a wide range of other organisations with similar aims, such as;

- Disabled persons Organisations (DPOs)
- The Australian Human Rights commission
- Ombudsman Organisations
- State Disability Advocacy Organisations
- Peak Bodies?

It is ADAI's experience that Disability Advocacy Programs currently refer to and collaborate closely with a wide range of organisations, including those listed. Again a state and national Disability Advocacy peak body may enhance the level at which that collaboration occurs.

Question 4 – The interface with NDIS and addressing Conflict of Interest

4.1 What steps or organisational structures should be put in place to ensure conflicts of interest do not arise, or are minimised?

A key aspect of the Advocacy role is often the provision of information, and linkage into a range of community resources. Where an Advocacy organisation wishes to formally engage in NDIS funded activity, whether at Service, Support Co-ordination, or Information, Linkage and Capacity Building level it will be essential that there is clear business, structural and team delineation between the functions, independent Quality review, and distinct service and financial reporting so that any actual or perceived Conflict of Interest can be avoided. Any capacity to utilise a client's NDIS funds to engage, manage or liaise with an advocacy role should also be minimised and transparent.

4.2 How do we avoid a gaps between supports provided by the NDIS and Advocacy funded by the NDAP?

Until the full and equal establishment of the NDIS across Australia is achieved, this will be best achieved by state and regional level review and analysis. Again there may be potential for a peak body to engage in this process with the NDIA and the Department.

4.3 What policies and strategies do we need to protect the rights of people with a disability?

It is essential that policy and strategy keep pace with emerging trends- particularly at this time of transition. For instance – as the NDIS continues to roll out in SA, it is understood that Disability SA is reviewing its position as a provider of supported accommodation. A key question is whether as a government program it can be cost competitive in a market place model. This seems to be creating a movement towards the rationalisation of housing stock, and the consolidation of placements into housing. Until the full roll out of the NDIS which will enable adults with a disability or their representatives to create more housing solutions for themselves, this process is leaving some people in limbo (in long term respite, awaiting a suitable permanent option) or being asked to consider a shift from their long term accommodation with known co-residents into more consolidated housing.

Question 5- Understanding and Improving Access to Justice

5.1 What forms of legal review and representation do people with a disability need most?

Based on the issues that ADAI has been presented with in the last two years. Key legal matters would appear to relate to

- Family court matters, including custody decisions
- Financial and property matters
- Guardianship and administration orders
- Employment discrimination
- Treatment Orders

- Abuse allegations and
- Criminal matters.

5.2 What barriers prevent people with a disability from accessing justice?

Potential cost, communication difficulties (particularly focussing on not enough time allowed for the person to express themselves, a sometimes reduced capacity to present their concerns in a concise and logical manner [people often report the need to talk through their history and their emotions before they can do this] which may reduce the chances of their matter being treated as a priority, to feel heard, to take in and process the information they are being presented with), knowledge of systems and processes, fear and mistrust (particularly where there is a high level of anxiety or other mental health issues), fearing that they will not be believed, wait lists and physical access.

5.3 What models of legal models are most effective?

Potentially those that work hand in hand with the broader range of Advocacy services, and where legally qualified staff either have a lived experience of disability or have undertaken disability awareness studies. .

General Comments;

- Advocacy services play a key role in assisting those living with a disability, and their key representatives understand and access their rights
- The importance of Advocacy services at this time of transition cannot be under-estimated
- Disability Advocacy encompasses a far broader range of issues than those that arise out of the NDIS/NDIA
- It is essential that Advocacy services maintain independence and separation from service provision
- A properly funded peak body could assist in the collection of data, an even greater collaboration between Advocacy providers and other Disability Rights support services and a more in depth understanding of current and emerging issues
- Local knowledge, ease of access, timeliness and face to face contact are essential components of Advocacy provision
- Enhanced use of technology could help to address inequities in access, but would need to be adequately funded
- If Advocacy services are to maintain their potency funding must include indexation increases.

Karen Field

Operations Manager,

Advocacy for Disability Access and Inclusion

21/6/16.