



# SUBMISSION – Review of the NDAP

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*April 2016*

## **GCDA Background**

The model of advocacy undertaken by GCDA is individual independent advocacy for people with disability. This includes children and adults up to the age of 65. We receive our funding from Department of Communities Child Safety and Disability Services. Many of our advocacy efforts involve long term, intensive work with people who experience complex issues and who are extremely vulnerable. It is common for somebody in these circumstances to dip in and out of vulnerability as they are often socially isolated, suffer from poverty and lack of service provision. For these reasons GCDA can have an advocacy relationship with many people that spans a number of years.

In order to be effective in our work it is important for us to be able to invest as much time in a person's issues as is needed by that person. The work that we do is partisan and led by the specific needs of the person. The issues that we cover reflect the person's need and right to have a valued place in their community and to be free from neglect, abuse or exploitation. GCDA is concerned and disappointed at the assumption that is apparent from the Review Discussion Paper that elements of advocacy will be provided **via the NDIS**. A cursory glance at current and past year's funding of advocacy will show how ineffective advocacy is when delivered by the person's support service. State and federal "advocacy" funding at first glance might appear substantial but the bulk of that funding is allocated to support services that include "advocacy" as part of their service. GCDA views this type of service as "advocacy lite" as it is defined and restricted by the paradigm of the organisation. Outcomes from this type of service provide little or no value for money to the funding body or value to the person as in many cases the person's situations are not improved and they are not at the centre of the advocacy efforts. Effective and rigorous advocacy has to be independent.

## **Models of Advocacy**

DSS accurately points out that “the exact manner in which .. advocacy is provided will depend on each person’s situation” and should focus on the “human rights of the person with disability and their individual needs”. This is at complete odds with the notion that some advocacy may be provided via the NDIS and some via the NDAP. As individual advocates at GCDA we provide a holistic approach to our advocacy work. People with complex needs don’t fall into convenient boxes of NDIS issues and none NDIS issues. Existing advocacy organisations have continuously demonstrated through rigorous reporting and financial and quality audit outcomes that they already provide “individualised, fit-for-purpose advocacy”.

To value and support the various models of advocacy DSS needs to recognise the existing skill base within each of those models and the integrity with which organisations apply those skills. Advocacy organisations of various differing models in Queensland, though independent of each other, have on their own initiative formed a connectedness through Combined Advocacy Groups of Queensland and through membership of the peak body Disability Advocacy Network Australia. These linkages provide an opportunity to identify systemic issues from advocacy work that is being undertaken on an individual basis and ensure that systemic advocacy is driven by people with disability.

## **Improving Access to Advocacy Supports**

DSS identifies that key barriers to people accessing advocacy supports are “geographical distance, social isolation, communication difficulties and a lack of culturally appropriate or accessible supports”. GCDA must disagree with this statement. **The key barrier to people accessing advocacy supports is funding.** Increased funding would improve people’s access to advocacy. As an example – GCDA is the only independent disability advocacy organisation on the Gold Coast for people under the age of 65. At the 2011 Census the Gold Coast population was over 555,000 with over 25,000 of that population described as having “a severe or profound disability”. GCDA is made up of 3 staff and is only funded to operate 4 days per week.

As a small organisation GCDA is conscious of the need to direct as many of our resources as possible to fulfil our mission “to promote, protect and defend with equity the fundamental needs, welfare and rights of people with disability who are vulnerable, through advocacy with heart, compassion and integrity”. I am grateful for the opportunity to contribute in some way to the review of the NDAP and I am confident that my colleagues in both individual and other advocacy models will address the key issues that DSS has addressed in addition to key issues that they themselves have.

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on behalf of  
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