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National Disability Strategy Governance and Engagement Section
Department of social services

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Submission on the National Disability Strategy Position Paper (July 2020)

Achieve Australia welcomes the opportunity to respond to the Draft Position Paper on the National Disability Strategy (the Strategy) by the Australian Department of Social Services. There is much to affirm in the discussion paper including: a genuine attempt to respond to the critiques of the current strategy; the stated commitment to engagement of people with disability at all stages in the process; the confirmation of Australia's commitments under the Convention on the Rights of People with Disability; and the intention to ensure a more accountable and evidence based strategy is pursued over the next 10 years.

Achieve Australia (Achieve) is a for-purpose community organisation that has been providing accommodation and services to people with disability since 1952. We champion social inclusion, focusing on the individual needs and lives of the people we work with. Achieve is an NDIS registered provider and delivers expert disability support services around our offices and hubs in greater Sydney and the Northern Rivers regions of New South Wales.

Achieve is firmly of the view that the primary stakeholders in this strategy process are people with disability. In our submission we do not seek to speak for our clients, rather we offer the perspective of an organisation that observes how current arrangements both enable and significantly compromise the rights and wellbeing of people with disability.

Our answers to the questions outlined in the position paper are found below.

Question 1: Do you have any comments on the vision and outcome areas being proposed for the new Strategy?

Achieve is broadly supportive of the consensus around the outcome areas in the new Strategy. We affirm the comprehensive nature of the proposed outcomes but note that the breadth of the territory offers a real risk that energy will be dispersed, and substantive progress will be modest. To mitigate that risk, we believe it is critical to identify and systematically pursue the keystone indicators that drive wellbeing. We understand that this is ultimately an empirically driven question that will emerge from careful interrogation of data, but from experience and evidence we would particularly emphasise the importance of housing, employment and health as drivers of wellbeing.

There is abundant evidence that the housing market is not fit for purpose; in both quantity and design, it does not meet existing or emerging demand. We commend the analysis in the submission by the Community Housing Association in this regard. Housing is a precondition for access to a range of other priorities in the strategy (services, education, employment, inclusion in community).

Meaningful employment is a precondition to economic security, a driver of positive health outcomes, a pathway to skill acquisition, a locus of personal and community support and a cornerstone of inclusion. Outcomes for people with disability are poor when compared with other Australians and by comparison with other developed economies (2018, Disabled People's Organisation Australia).

Health outcomes for people with disability are notoriously poor (AIHW, 2020). While the causes of these outcomes are complex, we note that the ability of mainstream health services to respond to the needs of people with disability remains a significant barrier to the attainment of the right to the highest possible standard of health (AIHW, 2017). We have direct experience of hospitals - including intensive care with its 1-1 nursing ratio - requiring specialist disability support workers to attend people with disability because hospital staff assert they do not have the skills to manage disability related health concerns (eg seizures). Further, we periodically observe the health concerns of people with disability being dismissed or minimised as 'behaviours of concern' rather than symptoms of a mental or physical health problem that requires treatment.

Question 2: What do you think of the guiding principles proposed here?

Achieve supports the guiding principles. We recommend that those principles be explicitly included in the accountability measures of the Strategy. That is, that measures for those principles are defined, tracked and reported on.

Question 3: What is your view on the proposal for the new strategy to have a stronger emphasis on improving community attitudes across all outcome areas?

Attitudes to people with disability affect lived experience, the possibility of realising the vision of an inclusive Australian society and individual and collective aspirations around the future. From an organisational perspective, attitudes of people with disability affect our ability to recruit and retain talent. We affirm the increased emphasis on attitudes.

Question 4: How do you think that clearly outlining what each government is responsible for could make it easier for people with disability to access the supports and services they need?

The section this question relates to is entitled Strengthening Accountability. One of the most encouraging features of the Position Paper is the recognition that the previous strategy suffered from the absence of a clear accountability structure; it was not clear who was responsible for delivery. Achieve affirms the intention to clarify which governments are responsible for what. We believe it is particularly important to include local governments in this work. On its own, however, identifying government responsibility will not transform the experience for people with disability in accessing the supports and services they need. To do that, the new Strategy needs to be clear on the following elements of a strengthened accountability:

Accountable for what? While we affirm the domain areas, the absence of any clear goals or targets suggests the strategy lacks ambition and risks failing to make a material difference in the lives of people with disability at population level. In answer to Q1 we noted the need to identify the key drivers of wellbeing (such as employment, housing and health). In order to ensure progress in these areas, the new Strategy should identify targets for our collective national aspiration. Where do Australians aim to be by 2020? Will we have delivered the appropriate designed housing stock that is needed? Will employment rates for people with be broadly equivalent with other Australians? Such an approach would help to focus resources and collective political energy.

Accountable to whom? Achieve is concerned that the treatment of disability within the existing and new Strategy as an undifferentiated whole renders different groups within that community at risk because their needs are not called out or addressed. Our particular concern is for people with moderate to severe intellectual disability. We note that research conducted by Professor Christine Bigby (2020) of La Trobe University found that - in the context of the NDIS - people with intellectual disability achieved poorer outcomes because of its dependence on the ability of Participants to articulate their needs. As Professor Bigby notes, people with intellectual disabilities often have greater reliance on social and contextual factors to make their needs known. In a sense, therefore, this makes the work of the new Strategy - with its focus beyond the NDIS - critically important for people with intellectual disability. At the very least we recommend differentiation at the level of data to monitor improvements in the experience of different cohorts. Data analysis should be accompanied by an adaptive approach to implementation that can pivot to address gaps and omissions if trends suggest the need.

The need to shift to accountability for outcomes, rather than the elements of the process. Clarifying who is responsible for what is important but monitoring the link between the implementation of this agenda and improved experience will be critical. On its own, we suspect it will be insufficient to solve problems at an individual level. Our experience with one client illustrates what is at stake here. Matilda is a woman with disability who participates in a supported employment service (nb. Matilda is an actual client, but we have not used her real name). Her visual impairment means that she requires 1:1 support while at her place of employment. Currently she is not funded for this support so to enable her to attend work the group home provides this support 2 days per week for 4 hours. The refusal of stakeholders to take actual responsibility – in contrast to a process-based division of labour that often results in buck passing – results in less than optimal outcomes.

As a service provider, Achieve observes the extent to which the responsibility for navigating a complex and multi-layered system is allocated to the person with disability and their

supporters. The risk of a power, knowledge and capability gap that results in poor outcomes is significant. People with disability and their supporters are asked ‘what do you want and need?’ as if all people are able imagine the ways in which a system could support and enable improved outcomes. They are then asked to understand who can deliver what and to navigate through that system to ensure their limited resources produce the best result. We need to flip the onus in the system from being on the individual to governments, service providers and corporate entities to deliver results in a timely fashion. This could begin with the adoption of a ‘no wrong door’ approach to service provision.

The NDIS reinforced the principles of choice and control as a cornerstone concept. Achieve believes we have a long way to go to translate those principles into practice. Too often people with disability do not get to choose where they live, who they live with, where they work and what they do for leisure.

The social model of disability emphasises that it is the design of the systems and structures around people with disability that are disabling, rather than attributes inherent to people with disability. There is an urgent need to drive reforms in the service system to eliminate those social / environmental barriers to support. The Strategy should begin with collecting or commissioning the ethnographic data that demonstrates how the system is / not working across Australia. The mainstream response to COVID 19 demonstrated that we can adapt at speed when we need to – such as in the case of using telehealth at scale. We need to harness that capability for action in other domains.

Question 5: How do you think the Strategy should represent the role that the non-government sector plays in improving outcomes for people with disability?

Refer to Q1: Determine the drivers of wellbeing, report on key stakeholders’ contribution. For example:

- In relation to employment, large individual employers could be asked to report on numbers and retention
- for specific cohorts – such as people with moderate to profound intellectual disabilities – the work of For Purpose organisations may be more important. Achieve encourages the identification of indicators where the disability sector could be held to account for better outcomes.

Question 6: What kind of information on the Strategy’s progress should governments make available to the public and how often should this information be made available?

Reports should be made available to parliament and the public every 2 years. While a comprehensive report is welcome, it is critical that progress, or lack thereof is transparent. Achieve recommends a maximum of ten headline indicators to track the way that Australian governments and community have made progress. These should be based around goals and keystone indicators (as per our answers to Q1 & 4).

Question 7 what do you think of the proposal to have Targeted Action Plans that focus on making improvements in specific areas within a defined period of time (for example within one, two or three years)?

This idea has merit but should not replace the idea of overall targets for the Strategy. Action plans have the advantage of enabling stakeholders to change direction in response to emergent data. The efficacy of the action plans will depend on the amount of political capital and resourcing they receive from all Australian governments. In the case of the National Framework for Protecting Australia's Children, the action plans lacked ambition and scale and did not identify or address the levers of transformation within the system.

Question 8: How could the proposed Engagement Plan ensure people with disability, and the disability community, are involved in the delivery and monitoring of the next Strategy?

Achieve believes that disabled peoples' organisations are best placed to respond to this question. From a disability sector perspective, peak bodies will coordinate engagement.

Achieve encourages consideration of using this as a space to innovate and bring 'voices' not usually considered to the table disability. Our client cohort includes people with moderate to severe intellectual disability who are non-verbal and, therefore, often unable to take advantage of the invitation to consult. We are in the process of developing new systems for gathering the views of our clients that are not dependent on the proxy views of families or frontline staff. We particularly encourage consideration of how to ensure that people without the ability to communicate through conventional channels might be included in the ongoing conversations about the Strategy. Our concern is that - without such an intention - their views, interests and aspirations may not receive priority within implementation processes.

Achieve Australia would welcome further dialogue on any aspect of this submission.