



Action for More Independence & Dignity in Accommodation

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Advocacy, Self Advocacy, Rights, Accessibility, & Community Living for People with a Disability

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National Disability Advocacy Framework Submission

AMIDA (Action for More Independence & Dignity in Accommodation) is an independent advocacy organisation which advocates for good housing for people with a disability. AMIDA provide advocacy for individuals, with priority given to people with an intellectual disability, and advocate for change in systems which prevent people from achieving adequate housing.

AMIDA acknowledges that people with disability have a right to choose with whom and where they live. Furthermore, people with a disability have a right to quality housing which is accessible, affordable and non-institutional. In addition, we believe that people with a disability have a right to live in the community with to adequate support to participate fully within the community in order to enhance their quality of life.

1. Do you believe the new NDAF encompasses your vision of advocacy? If not, what changes are required?

The long history of **group self-advocacy** by people with intellectual and other cognitive disability is not reflected in the Advocacy Framework at all. This is despite the fact that both State and Federal governments have and do fund group self-advocacy. It's a glaring omission.

The definition of self-advocacy needs to be expanded, as it leaves out self-advocacy groups who advocate collectively. The framework it limited to individual self-advocacy and says;

"Self-advocacy undertaken by someone with disability who speaks up and represents themselves. Support and training for self-advocacy is available through community-based groups."

This fails to acknowledge that **self-advocacy groups** advocate as a group not just as individuals. Self-Advocacy groups are supported including with training on how to speak up but they also act collectively and speak up for themselves as a group and on behalf of people with a disability collectively. For example, self-advocacy groups for people with intellectual disability have advocated for Easy English and other accessible forms of communication from Government and service providers.

The definition in the National Disability Advocacy Program funding agreement is better as it recognises self-advocacy as a model provided under NDAP and says;

Self-advocacy: supports people with disability to advocate for themselves, or as a group.

Individual Self-advocacy support to empower people to advocate for themselves is also a positive outcome of the individual advocacy process. When Individual advocacy is provided as a collaboration with disabled people, empowerment and skills development is an important component of people with disability learning about their rights and how to effect change for themselves.

The definition listed in the framework doesn't necessarily capture the complexity of how advocacy is applied in action to create change. For example, it is also imperative the person with disability receiving assistance is in control of the process of decision making and this can often mean supported decision making is required. This is sometimes a lengthy process.

2. Are the **principles** of the NDAF appropriate for guiding the delivery of advocacy for people with disability in a changing disability environment, including in the context of the NDIS? If not, what changes are required?

AMIDA agrees with the Rationale stated in the NDAF paper however asks the question of how this is implemented. Ensuring accountability and safeguards with responsibility requires an overseeing body which has powers to compel change and reforms. Again AMIDA agrees with the Principles listed and asks, how is this made to happen. Unless we properly fund independent, Individual Advocacy, Self-Advocacy and Systemic advocacy, the Principles of this paper won't be met. Adequate funding for advocacy and self-advocacy, including for hard to reach groups or those with specific needs, should therefore be a Principle.

3. Are the **outcomes** of the NDAF clear and achievable? Should different ones be included? If so, what should be included?

At present advocacy organisations have not adequate funding, there is enormous unmet need in the community because of the lack in disability services. With the introduction of the NDIS, a lot of services ceased to exist with an assumption the NDIS would provide those services. We know from recent statistics that only 10% of people with disability in Australia have been accepted onto the NDIS. 90% remain unsupported with no access. Major gaps in disability services arose out of the funding models. The community no longer provided case management, support for people with mental illness, together with the lack of accessible, affordable housing anywhere, the gaps remain for general disability support systems and services. All of these are issues that advocates deal with on a daily basis when trying access support for people where there no longer remains funded services.

This huge demand for service that is not being met and due to a lot of factors, one being a lack of accessible, affordable housing and personal choice of "where I live", "who I live with", all the rights around housing that others in the community such as private rental will take for granted.

Living in a group home with other people with disabilities is not something we expect in mainstream society. It is certainly not expected of people living in public housing There is no choice or control in this model.

Inadequate funding in Specialist Disability Accommodation (SDA) and Supported Independent Living (SIL) through the NDIS compounds the lack of access to housing for people with disability. AMIDA has seen evidence of SIL providers taking over tenancies and subletting to people with disability, denying their rights of a residential tenancy agreement, allowing for discrimination in the vacancy process, the SIL provider can deny vacancies to people who are homeless for example, over their choice of SIL provider.

AMIDA also has evidence of people with disability choosing homelessness over any of these other arrangements which then puts them at higher risk of their basic rights being neglected.

The Framework should make a commitment to adequate funding for advocacy and self-advocacy so that it can realistically tackle all the barriers, including systemic ones, that prevent achieving the outcomes.

4. Are the **responsibilities, reform and policy directions** of the NDAF relevant or should different ones be included?

The Framework itself reads very well. It's the implementation of the Framework where problems arise due to inadequate funding and inadequate powers to compel change.

Reporting to the UN committee periodically both the government response and the shadow report show clear differences in interpretation of its implementation in reality. The recommendations that come out of this reporting from the UN are not widely implemented and unable to be enforced. Mechanisms such as those below are important benchmarks but difficult to implement even with advocacy.

- *United Nations Convention on the Rights of Persons with Disabilities*
- *Disability Discrimination Act 1992*
- *Australia's Disability Strategy 2021-2031*
- *Closing the Gap National Agreement.*
- *NDIS Quality and Safeguarding Framework*
- *Information Linkages and Capacity Building program*

While these legislations, agreements and strategies are important and offer protections of people with disabilities rights, in practice they are difficult to use to create change. Once again this shows the need for an independent national body to ensure people with disability's rights are upheld.

If we are truly wanting to live in an inclusive society, the only way to ensure that is to have every person with a disability able to be protected by these safeguards. Advocacy can much better assist people to improve their lives and be free of abuse and neglect where these rights are enshrined and upheld.

A principle of the Framework could be that governments will act to ensure there are easily useable mechanisms with the power to uphold rights and that Advocacy has an important role in assisting disabled people to use these mechanisms to have their rights upheld.

In an environment where these mechanisms do not exist it is not enough to rely on the society that does not fully include people with disability or advocates that can only assist to generate outcomes within the context of a society and government that commit to upholding these rights.

5. Does the NDAF identify what is needed in the current and future disability environment? If not, what changes are required?

The presumption of rights and capacity needs to be part of the Framework which also needs to recognize the need for supported decision making, how important supported decision making is and because it takes time, it needs to be fully funded. For example; Leadership Plus have been running a pilot project for supported decision making where rapport was built with individuals prior to supported decision making

work being done. Timeframe of 6 months working with one person to ensure their rights were being upheld and they had their own say.

In general, people with disability take longer to understand complexity. Often advocacy matters arise around instances of conflict such as disagreement between a service provider and person with disability. Individual advocacy assistance can provide a support for a disability service to understand the rights of people with disability, this can be a positive outcome for both services and service users. Advocacy requires to be ongoing long enough for issues to be understood fully so that informed decisions can be made which recognises the complexity of the decisions some people with disability are forced to make during their lives.

6. Do you have any other comments, thoughts or ideas about the NDAF?

As defined in the National Disability Advocacy Program (NDAP) Operational Guidelines, Advocacy for people with disability can be defined as speaking, acting or writing on behalf of the interests of a disadvantaged person or group, with minimal conflict of interest, in order to promote, protect and defend the welfare of, and justice for, either the person or group.

Advocacy needs to **remain independent from Disability Service Provision** if it is to be quality advocacy where advocates are:

- acting in a partisan manner (i.e. being on their side and no-one else's);
- being primarily concerned with their fundamental needs;
- remaining loyal and accountable to them in a way which is empathetic and vigorous (whilst respecting the rights of others); and
- ensuring duty of care at all times.

AMIDA would recommend the following be included:

- The importance of advocacy funding going to groups independent of disability service provision.
- Recognition of self-advocacy groups who can speak up for themselves individually and as a group.
- Adequate funding to meet the demand of people with disability and tackle the barriers, including systemic, to good outcomes.
- Advocacy that meets the needs of all specific disability types and specific issues should be provided for in the Framework. e.g. housing advocacy, advocacy to Deaf Blind people
- Aboriginal and Torres Strait Islander and CALD communities need culturally and language sensitive advocacy services to ensure accessibility of all communities to services.
- Advocacy that provides Communication in appropriate formats is essential for full access to support. Language can restrict capacity. With support, Easy English, Auslan, Video Captioning and strategies which will allow all people with

disability to access the information they need to be included in the community and information about their rights, presented in a way they can access.

- Legislation is important, e.g. UN CRPD and other listed above. They need to be able to be used to make change happen. For example, the Victorian Charter of Human Rights can only be applied in a legal setting such as a tribunal or court. Advocates need to be able to use these legislations to compel change by restrictive disability services or other restrictive practices in different settings.
- AMIDA requests that recommendations from the Disability Royal Commission be incorporated into the Disability Advocacy Framework.
- Another important part of independent individual advocacy and self-advocacy is that we would hope it will lead to a more inclusive society and community. During the process of advocacy people who are unfamiliar with disability rights become more able to act on these rights.
- The importance of independent individual advocacy is that it must be without any conflicts of interest and working solely with and for the person with disability.