

## **Submission re National Disability Advocacy Framework 2022-2025**

Rights & Inclusion Australia (R&IA) is a national Disabled People's Organisation promoting the rights and inclusion of people with disability, with a focus on accessibility in the built environment. R&IA activities include work with First Nations people and Asia Pacific programs. R&IA is a member of the Pacific Disability Forum (PDF) and Asia Pacific Disability Forum (APDF).

R&IA provides individual and systemic Advocacy to people with disability, in relation to housing and the built environment. Specifically, R&IA has advocated, as part of the Australian Network for Universal Housing Design (ANUHD), for housing in Australia to be built to a standard where basic access is provided and available to all across all housing markets. R&IA continues to lead Advocacy in those states of Australia which refuse to adopt these basic provisions of accessibility which are meant to come into effect through the National Construction Code in September 2022. R&IA also engages constructively in the development of mechanisms which promote accessibility in the built environment and is currently concluding a contract funded by the Pacific Disability Forum, to develop guidelines and standards that will guide the building of public infrastructure to enable access by people with disability in all 20 countries across the Pacific.

## Responding to specific questions in the Framework consultation document

- 1. Do you believe the new NDAF encompasses your vision of advocacy? If not, what changes are required?
- 1.1. The Framework broadly articulates a "vision", not so much of Advocacy in its ideal form, but of how the various brands and versions of Advocacy can successfully co-exist within a national context. The main challenge is to recognise and accept that Advocacy in Australia is funded under contract to Government. Given the responsibility of Government to improve conditions for people with disability and the role that Disability Advocacy plays in this, a balance has to be struck between the imperative to address issues, both individually and systemically in a fearless and partisan way, and to meet public standards of accountability for the funding that is expended. The Framework goes some way to achieving this.
- 1.2. There needs to be a stronger focus within the framework on the range and extent of Advocacy that is delivered in support of people with disability. It is worth comparing the scope of Aged Care Advocacy, as delivered by the Older Persons Advocacy Network (OPAN) which is primarily focused on advocacy support to older people in or attempting to engage with the aged care system in Australia.

Disability Advocacy in Australia has always dealt with non-service issues, taking its lead from the social model of disability, the Convention on the Rights of Persons with Disabilities (CRPD) and the principles of inclusion embedded within successive National/Australian Disability Strategies. It has focused on areas where barriers are commonly experienced such as exclusion from employment, housing, income equity and health outcomes. With the introduction of the NDIS, the demand on Advocacy to assist people with disability to enter the Scheme, to get what they need from it, and to challenge decisions, has placed a significant burden on the already underfunded Advocacy services, and once again presented a "postcode lottery" to those people with disability who may or may not be fortunate to have state/territory-based Advocacy available to them to help them navigate the many issues with the Scheme. Given the current spirit of "harmonisation" across departments of the Australian Government, there should be an attempt to review the scope and mode of delivery of Advocacy in the aged care system and to Veterans, as well as Disability Advocacy, with our preference being for the current broad scope of harmonisation pertaining to all forms of Advocacy in Australia.

- 1.3. Following on from 1.2, the Framework should more clearly articulate the roles and responsibilities of the various levels of government in Australia to deliver goods and services to all citizens and residents, and the role that Advocacy plays in assisting people with disability have equitable access to the same opportunities as others. Reference is made to the responsibility of all tiers of government to ensure access to Advocacy services. However, it is not made clear that this in turn stems from a continued experience of people with disability to have lesser access and poorer opportunities than others across a range of activities that overall constitute "inclusion" in the community.
- 1.4. The document highlights the importance of including people with disability in codesign. This principle should be carried to all aspects of Advocacy provision, starting with a commitment to enabling all Advocacy agencies to have governance and management systems which have people with disability at the core. This has been an endeavour that many good Advocacy services have initiated independently, either by using their own resources or through specific funding such as ILC grants. Having this as an aspiration, and providing a funding mechanism to achieve it within the Advocacy program, helps to establish Advocacy agencies as the natural "go-to" resources within communities which have the capability of supporting people with disability more actively, and fostering innovation based on the skills and talents of the people with disability with whom they interact.
- 2. Are the <u>principles</u> 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?
- 2.1. The principles are well stated and able to be referenced back to the various human rights and disability-specific laws and regulations that have been in force for some decades in Australia, and to the CRPD. We think the NDAF would also benefit from referencing the Sustainable Development Goals (SDGs). Australia has signed up to the SDGs but they are rarely mentioned, and provides us with another principle of "No one left behind". The SDGs have particular relevance for ongoing economic development and participation in an era of climate action, and the potential change to the way in which business operates, with

the associated risk of further disruption to employment and income security for people who have traditionally not fared well, such as people with disability.

- 2.2. Another principle that could be included is data sovereignty. Data is mentioned in the context of First Nations people, as a means to enhance the delivery of Advocacy. Data collected about people with disability have largely been in relation to the services they receive. It serves an administrative purpose, rather than having the capacity to measure and communicate the disparity of opportunity and achievement of people with disability when compared to others and to monitor progress that addresses this. Engagement with people with disability in 2021 by the group promoting the new Disability Data Asset raised a number of issues, mainly to do with the ownership and use of data that may be collected in future. This has not been resolved, but the human rights foundations of Advocacy require a statement about the purpose for which data will be collected, the use to which it will be put, and who will own and be able to use that data. Even if all this cannot be resolved in the text of this framework document, the principle must reflect that each of these things should work for the benefit of people with disability and the recipients of Advocacy.
- 3. Are the **outcomes** of the NDAF clear and achievable? Should different ones be included? If so, what should be included?
- 3.1. The outcomes are broadly well-stated, but, similar to the point raised in the first section, there should be some statements of aspiration about Advocacy assisting in the reduction of barriers for people with disability across a whole range of life areas. Specifically, R&IA is concerned about issues of exclusion for people with disability which continue in the built environment and housing.
- 3.2. When Advocacy is done well it helps to build the capacity of individuals with disability to face and deal with issues in the future. This aspect of capacity building should be captured as an outcome in this document, and a more consolidated and well-funded, independent Advocacy program could become the engine-room for genuine capacity building amongst people with disability in Australia. Comments in 3.3 below indicate our support for much greater distinction in funding and outcome delivery for Advocacy that is targeted specifically at participants of the NDIS. Separate funding for capacity-building should target not only those who are funded participants of the NDIS, but also those who fit within "Tier 2" and require capacity to navigate, and lobby for, the availability of generic goods and services.
- 3.3. The inclusion of an outcomes about assisting people with disability supports is appropriate, but it does pinpoint a major problem with the delivery of Disability Advocacy since the introduction of the NDIS in 2013. Since that time, a high proportion of Advocacy time and resources has been spent on assisting people with various problems and issues they have getting into the Scheme, and dealing with the Scheme as participants. Some Advocacy programs, such as that funded to assist participants with their Administrative Appeals Tribunal (AAT) cases, have been funded separately, and this principle should be carried over into an ongoing stream of funding for individual support and capacity building of participants. This will enable the NDIS to become what it promised a consumer-driven and responsive scheme that is capable of delivering funding and support that enhance individual aspirations and needs.

- 4. Are the <u>responsibilities</u>, <u>reform and policy directions</u> of the NDAF relevant or should different ones be included?
- 4.1. This section of the framework document sets out the challenge of consolidating Disability Advocacy across Australia. Given the current patchwork of funding and provision by the various states and territories, it would be premature to determine exactly how the issues of filling the gaps and guaranteeing equity of access to people with disability are implemented everywhere.
- 4.2. As previously pointed out in 1.3, there should be stronger linkage between the responsibilities of each level of government for the goods and services they deliver to the community becoming more accessible and availability to people with disability and the role of Advocacy in holding them to account for the delivery of these in a non-discriminatory manner.
- 4.3. The point raised in 4.2. is just one example of a concrete commitment which needs to be reached quickly across all levels of government once the framework is underway. There will be some scepticism about the scope of some of the commitments stated in this section, given the history of disagreement amongst states and territories, and with the Commonwealth. Some mechanisms to hold governments to account would be helpful. The commitment to build consistency across the country, for example, could be articulated in terms of some clear stages of development (still expressed in general terms) with a timeframe for achievement, which is linked to the COAG Disability Ministers Meeting (DMM) schedule. To show true commitment there needs to be an end-date identified, and a schedule of work and decisions allocated to the DMM schedule.
- 5. Does the NDAF **identify what is needed** in the current and future disability environment? If not, what changes are required?
- 5.1. Significant change in the opportunities available to people with disability in Australia has been slow, despite the innovations in legislation (Disability Service Acts, Disability Discrimination Act, CRPD, etc.) and the introduction of the world-first NDIS that have occurred in the past three decades. There needs to be greater acknowledgement in the framework that the policies enacted by governments at all levels sometimes actively disadvantage people with disability, as does the stifling administration of programs that are developed for the benefit of people with disability.
- 5.2. The commitment to ensure "policy and reform that affect people with disability are designed and implemented included people with disability at the centre of design" is laudable, but also speaks to the ongoing dynamic of "managers" and "managed" that, in our view, perpetuates the disadvantage experienced by people with disability. What is needed in the future disability environment is a paradigm shift in the thinking of governments about who runs the administrations which manage the services, systems and programs which directly impact on people with disability. These should be predominantly run and governed by people with disability themselves.

- 5.3. Given the focus on consolidation of offer and delivery of Advocacy in what are currently disparate programs across Australia, there should be some mention in the framework of the need for industry Standards which articulate quality in Advocacy, and become the benchmark by which Advocacy agencies are measured and, ideally accredited. The current system of auditing Disability Advocacy agencies against the National Standards for Disability Services (NSDS) or the NDIS Standards does not do justice to the human rights and justifiably partisan (seeking to support the will and preference of the client) approach of Advocacy practitioners. It also stands in sharp contrast to Older Persons Advocacy, which is not subject to accreditation to the Aged Care Standards - OPAN agencies are not approved service providers and are not under the remit of the Aged Care Quality and Safety Commission. A project is already underway to develop a Standard which could serve all Advocacy sectors and provide a mechanism by which quality and innovation in Advocacy can be recognised and implemented once Advocacy agencies are audited against it. The Standard could and should be used as a benchmark of quality and consistency that would have enormous utility in consolidating Advocacy across the states and territories.
- 5.4. While Standards can improve quality of Advocacy agencies, there needs to be investment in training and development for Advocates under a bigger and more well-resourced system. A project was completed in 2011 by PWDA and DARU, to develop a set of competencies for Disability Advocacy that was lodged with the Victorian Training Authority (previously VTAB), but has since lapsed in terms of its availability to serve as a training framework for Disability Advocacy. It was used to inform the online training delivered by DARU. This set of competencies was arrived at after extensive consultation with the Disability Advocacy sector, not only in Victoria but across Australia, and included research into training available elsewhere in the world. These competencies were arrived at as a solution despite early indications that Advocates were very opposed to them. In short, a competency framework, in the hands of Advocates, provides opportunities for innovative delivery, if it is led by assessment rather than being used wholly to drive training-led curricula. The work done in 2010-2011, and the units of competency which were developed at that time should still be available, although in need of revision given the reforms which have taken place since 2011, including the introduction of the NDIS.
- 6. Do you have any other comments, thoughts or ideas about the NDAF?
- 6.1. Let's show some appreciation for Advocacy provided to date and fund this muchneeded sector to be able to not only address the issues that confront its clients, but also to
  focus on its own continuous improvement and building up its strength as an equal and
  respected voice in the disability sector, capable of significantly influencing future policy
  and reform. Older persons advocacy has enjoyed an elevation in status over the past 4
  years, which has been reflected not only in funding increases but also in the status and
  respect it is afforded, such that it is a vital pillar in the reforming aged care system
  currently being developed.