

## Action for More Independence & Dignity in Accommodation

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

## AMIDA Submission Department of Social Services Review of the National Disability Advocacy Framework July 2015

AMIDA is funded via the National Disability Advocacy Program to provide advocacy.

In reviewing the Framework within which we work, and considering how it might be improved into the future, we provide the following feedback on the Discussion paper:

AMIDA's work in housing advocacy has been developed and refined over 30 years. In that time we have adjusted and improved the way we work, and we have undertaken self assessments and audits against disability standards. The expertise gained in advocacy support provided to people with disabilities must be acknowledged.

1. Does the current Framework encompass AMIDA's vision of advocacy in the NDIS environment? If not, what changes are required?

The existing framework for disability advocacy includes all areas that AMIDA considers it should, but it falls down in practice in all areas. The existing legislation framework nationally is not strong enough, or enforced enough or adhered to enough so that the results are a better life for people with disability. To improve the outcomes referred to in the current framework requires stronger rights based legislation which is adhered to closely, as well as an overarching body with the authority to see that the intent of the framework and the legislation is carried out. For example a National Human Rights Charter or Bill of Rights would provide a mechanism to improve people's lives.

As the NDIS rolls out with the aim of allowing and encouraging diverse use of funding, this will result in a larger range of services being employed, and therefore will mean that there are more points that could fail, and will require advocacy intervention.

With the NDIS providing services previously unavailable to some people, ie more personal care and other basic needs, these people will see the possibility of community engagement. This could result in advocacy being called upon to advocate for community access for a greater number of people. Therefore more funding to advocacy will be required. Although building capacity is mentioned in the Framework, self-advocacy is not identified. Part of the community education component of advocacy entails self advocacy and group self advocacy, and this important part of community education carried out by self advocates has proved invaluable in the past. This should be developed and promoted in the NDIS environment.

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

If there are to be changes in advocacy, and changes in the issues people bring to disability advocates because of the NDIS, the transition period should be carefully managed and continuity of service must be ensured. Disability advocacy principles will not change even though issues brought to advocacy may. While there may and will probably be large changes in the sector, people with disabilities should not be disadvantaged by these changes.

The principles do not state that disability advocacy should be free. The framework should make it clear that advocacy is free for people with disability and it is a right. This right needs to be legislated, perhaps via a Human Rights Charter.

Independence of service provision is another important principle. Advocacy providers must be comprised of people with disability and their supporters with experience in advocacy provision.

A competitive tender process does not necessarily provide fair and equitable access to advocacy to people with disabilities.

People need information in different formats, and not everyone has access to the internet. These considerations must be taken into account.

NDIS should be required to provide information on other support services ie what is advocacy and where to obtain it.

The NDIS is not solely about choice and control for people with a disability about what they want and need in life; it is also about their information needs at the very start of the planning process.

3. Are the outcomes of the Framework still relevant or should different ones be included? If so what should be included?

The outcomes themselves could not be argued against, but they are still aspirations advocacy works towards achieving. As such they are good outcomes to aim for.

4. Are the outputs of the Framework still relevant or should different outputs be included?

'(b) Disability advocacy that is informed by an evidence base and is provided in an accountable and transparent manner' - Privacy needs to be respected for service users.

The outputs should be clear, without being overly prescriptive.

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

While the framework does refer to the `...Commonwealth and State governments committing to ongoing policy and reform directions in the provision of disability advocacy...' it does not clearly state that the Commonwealth and State governments will commit to fund independent advocacy. It needs to do this or the disability community and its advocates will continue to live in a state of flux, unable to plan for the future.

It must be ensured that people or issues that do not fall within the scope of the NDIS are not left out and become or remain unsupported. These people will perhaps be in more need of independent advocacy than they have before. Already we are seeing 'we can only deal with NDIS issues' being espoused. The framework must ensure that all people with disability have access to independent disability advocacy, not only those covered for support under the NDIS, and that adequate funding is available.

AMIDA is aware that NDIS does not address education or housing, two areas vital to people with disability. Advocacy to support goals in these areas must be available, and properly funded.

6. Other comments, thoughts or ideas?

On reading the framework and talking with others in the advocacy field it is clear that:

- Advocacy must be independent from service provision. This is agreed by everyone as perhaps the most important point.
- Advocacy must be accessible people must know about advocacy and what advocates can do, they must be supported to access advocates. This does not mean everyone needs an advocate in their area but they do need information in multiple formats on their right to advocacy services.
- Decision-makers must value what is working in Victoria. The present good practice being exercised in Victoria relies on the resourcing through DARU and SARU. This allows continual development and is a model that should be expanded Australia-wide.
- The diversity which exists in Victoria must be maintained, so that the expertise which has been developed over many years is not lost. Disability specific and issue based advocacy services must be maintained, as the area is so complex it is impossible for one agency to have all the knowledge.
- Advocacy agencies must be supported to work with other agencies with expertise in particular areas. This networking and secondary consultation needs to be recognised, acknowledged and properly funded.

- Presently advocacy agencies are audited against the National Standards for Disability Services and this has proved effective. This should be retained.
- The framework does not seem to recognise the link between individual advocacy and systemic advocacy. Of course individual advocacy is vital, but it is this individual advocacy which informs the systemic flaws that need work. We attest that this combination of individual and systemic advocacy must continue across services and within services.
- In the lead up to the introduction of NDIS, there have been a multitude of reviews and submissions sought. The timeframes for most of these reviews and submissions have been impossibly short. It has been necessary to submit less considered papers, or to work long extra hours to ensure that the voices of people with disabilities and their advocates are heard. This process has not been ideal, and in fact if more time were allowed, a better result would be achieved.

## Other:

- Under the framework it is unclear what protections exist for people with disability seeking support. This is being developed under Quality & Safeguards Framework; but advocacy will be a crucial part.
- Funding should be available from both State and Federal governments.
- There should be a range of options for Disability advocacy ie with funding from both levels of government, funding to disability specific organisations, issues based organisations and population groups, eg women, children, young people. This will provide flexibility for people with disability, to gain advocacy from a variety of organisations with specific expertise in a range of subjects. The relationship between these groups needs to be recognised.
- The NDIS Quality & Safeguards Framework has a statement about advocacy providing supports if you are receiving an NDIS package this is not independent advocacy. Definitions of advocacy need to be clearer. It is not case management.
- Disability advocacy supports people with disability but also informs and strengthens the development of government policy.

In conclusion AMIDA asserts that two major points are:

- 1. for advocacy to be effective it must be independent of service provision, and
- Advocacy must also be locally based and run by people with disabilities, and not by organisations which have no knowledge of or expertise in advocacy and disability; and certainly not just for convenience sake as they have offices country-wide.