Submission
No 97

INQUIRY INTO SERVICES PROVIDED OR FUNDED BY THE DEPARTMENT OF AGEING, DISABILITY AND HOME CARE

Organisation:	Aboriginal Disability Network
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Date received:	24/08/2010

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23 August 2010

The Director
Standing Committee on Social Issues
Parliament House
Macquarie St
SYDNEY NSW 2000

Dear Sir/Madam

By any measure Aboriginal and Torres Strait Islander people with disabilities are amongst the most disadvantaged Australians. They often face multiple barriers to their meaningful participation within their own communities and the wider community. The vast majority of Aboriginal and Torres Strait Islander people with disabilities are at the periphery of all aspects of the disability services sector. In accessing individual advocacy services this is particularly acute, despite the fact that in many ways Aboriginal and Torres Strait Islander people with disabilities are the group within the Australian community who are most in need of individual advocacy support.

The prevalence of disability amongst Aboriginal and Torres Islanders is significantly higher than of the general population. Until recently the prevalence of disability in Aboriginal and Torres Strait Islander communities has been only anecdotally reported. However a recent report by the Commonwealth Steering Committee for the Review of Government Service Provision made the following conclusions:

> The proportion of the indigenous population 15 years and over, reporting a disability or long-term health condition was 37 per cent (102 900 people). The proportions were similar in remote and non-remote areas. This measure of disability does not specifically include people with a psychological disability.[1]

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[1] Commonwealth Steering Committee for the Review of Government Service Provision *Overcoming Indigenous Disadvantage Key Indicators 2005 Report.* Page 3.6

The high prevalence of disability, approximately twice that of the non-indigenous population, occurs in Aboriginal and Torres Strait Islander communities for a range of social reasons, including poor health care, poor nutrition, exposure to violence and psychological trauma (e.g. arising from removal from family and community) and substance abuse, as well as the breakdown of traditional community structures in some areas. Aboriginal people with disability are significantly over-represented on a population group basis among homeless people, in the criminal and juvenile justice systems[2], and in the care and protection system (both as parents and children).[3]

Historically much of the focus on Aboriginal people with disability has been from a health perspective. Whilst this is essential, particularly regarding primary health interventions, it has come at the cost of failing to recognise the social aspects of Aboriginal disability. This has meant that the barriers that produce discrimination against Aboriginal people with disability remain firmly entrenched and the general well-being of Aboriginal people with disability has not improved in any meaningful way.

Furthermore the impact of colonisation and the resultant dispossession of land and displacement from places of cultural significance have had an impact on the lives of many Aboriginal people with disability which is difficult to measure.

All of these factors contribute to the fact that disability rights from an Aboriginal and Torres Strait Islander perspective is an emerging social movement. In many ways this social movement is starting from a baseline position.

With regard this submission each item will be addressed in turn.

a. the historical and current level of funding and extent of unmet need

The Aboriginal Disability Network NSW (ADN) argues that its now well established that the disability sector is grossly underfunded. Indeed the Council of Australian Governments has acknowledged this for some time now. To this end the ADN is supportive of the Productivity Commission's inquiry into a potential national disability insurance scheme as a way to begin to address the serious underfunding of the disability sector.

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[2] Aboriginal people are 11 times more likely to be imprisoned than other Australians. Source: *Overcoming Indigenous Disadvantage Key Indicators 2005; Steering Committee for the Review of Government Service Provision.* There is no empirical evidence to quantify the number of Aboriginal people with disability in particular with intellectual disability and mental illness in the criminal justice system. The prevalence of intellectual disability for instance in the prison population is often contested with wide variation in percentages. However a report by the Law Reform Commission published in 1996 entitled *People with an Intellectual Disability and the Criminal Justice System* noted that 12-13% of the prison population were people with an intellectual disability.

[3] *Overcoming Indigenous Disadvantage Key Indicators 2005; Steering Committee for the Review of Government Service Provision* states 'The rate of children on care and protection orders (for a combination of all states and territories except NSW) was five times higher for indigenous children (20 per 1000 children in the population aged 0 – 17 years) than for non-indigenous children (4 per 1000 children). Pg 9.5

With regards the extent of unmet need in Aboriginal communities across NSW the needs are vast. However a major issue is the lack of reliable statistical data on the prevalence of disability in Aboriginal communities across NSW. As outlined earlier there is a figure of 37% of the Aboriginal population are Aboriginal people living with disabilities, however that figure also acknowledges that this figure may in fact be a conservative one given that it does not include psychological disabilities. One of the most basic reasons why data on prevalence continues to be unreliable is that many Aboriginal and Torres Strait Islander people with disabilities do not in fact indentify as people with disabilities. This occurs for a range of reasons including:

- Why would you indentify as a person with disability when you already experience discrimination based on your Aboriginality? i.e. why take on another negative label?
- In traditional language there was no comparable word to disability which suggests that disability may have been accepted as part of the human experience.
- Or in some communities particularly communities that continue to practice a more traditional lifestyle disability may be viewed as a consequence of 'married wrong way.' That is many Aboriginal people with disabilities and their parents and family members experience stigma related to a kind of 'bad karma' view of disability.
- A predominance of the medical model of disability has had a profoundly negative impact on the lives of many Aboriginal and Torres Strait Islander people with disabilities. Much of the focus on contemporary Indigenous Australia relates to the *Closing the Gap* campaign. This campaign whilst essential often focuses heavily on primary health interventions. This does not address the whole of life needs of Aboriginal and Torres Strait Islander people with disabilities. An example of this includes recognition, rightfully of the high prevalence of hearing impairment amongst young Aboriginal children and a concerted campaign to address this. What tends to happen however is that many Aboriginal children are getting their hearing impairment treated however their accompanying learning disability which has occurred because of extended periods without proper hearing does not get addressed? This results in only part of the job being done, that is a medical intervention has taken place but a 'social model of disability' intervention around the more long term related impairment has not.

In many ways 'disability' is a new conversation in Aboriginal and Torres Strait Islander communities. Put simply in some ways the movement supporting Aboriginal and Torres Strait Islander people with disabilities is not unlike the way disability was viewed in the rest of Australian society some fifty to hundred years ago.

Therefore it is difficult to quantify the extent of unmet need, other than to say it is vast and acute. The ADN argues that research that quantifies prevalence must be done sensitively and in a culturally appropriate manner that recognises the different ways disability may be talked about in Aboriginal communities. It must also incorporate an educative function that explains disability in a way that is appropriate for communities. Therefore it is organisations like the ADN who are well placed to do this as they are made up of Aboriginal people with disabilities and their supporters.

b. variations in service delivery, waiting lists and program quality between;
  (i) services provided, or funded by ADHC,
  (ii) **ADHC Regional Areas**

The ADN is seriously concerned about service delivery in regional parts of NSW in particular. Around 50% of the Aboriginal population in NSW does not live in Sydney. The ADN continues to meet Aboriginal people with disabilities across regional NSW who are not part of the disability service system in any capacity. Indeed it is not uncommon for the ADN to meet people who not only have obvious disability but do not identify as having a disability. In some cases Aboriginal people with disabilities may remain effectively 'hidden away'.

Furthermore the resourcing of regional areas is poor which can result in often those most in need not get access to services. It is not uncommon to hear of stories where Aboriginal people with disabilities are waiting 2 years or more for instance for wheelchairs under the PADP scheme. This is a common experience for all people with disabilities in regional NSW.

The ADN argues that one of the fundamental barriers for Aboriginal people with disability, particularly those people living in regional and remote parts of the state is access to meaningful information. The ADN often encounters situations where brochures are developed by various agencies and they may even have Aboriginal motifs on them to make them feel more culturally accessible, however the ADN argues strongly that they are rendered meaningless without a concerted outreach approach to support them. That is, resources and effort must be made on the part of agencies to go to the people instead of continuing to expect Aboriginal people with disabilities and their families to come to them. This is a simple but major barrier for many Aboriginal people with disabilities and their families.

Furthermore ADN argues that it is the ADN itself that is best placed to be the conduit for this information either as the direct distributor of information or as a facilitator of the provision of such information because it is an Aboriginal organisation of and for Aboriginal people with disabilities and not a government or non-government agency for that matter that would have great difficultly engaging with Aboriginal communities because of the well established reasons of mistrust and suspicion that many Aboriginal communities still hold today.

c. flexibility in client funding arrangements and client focused service delivery

Real and meaningful flexibility is critical for effective service delivery across Aboriginal communities in NSW. Flexibility must include recognition of the role of the extended family in the lives of many Aboriginal people with disabilities. In addition the ADN is concerned that whilst 'flexible service delivery' may be the new mantra in disability service delivery and 'person-centred' approaches are often spoke about its another thing altogether to actually implement such approaches.

d. compliance with Disability Service Standards

The ADN calls for the addition of a new stand alone standard that relates to culturally appropriate service delivery.

e. adequacy of complain handling, grievance mechanisms and ADHC funded advocacy services

Access to advocacy services for Aboriginal people with disabilities is of critical importance. The numbers of Aboriginal people with disabilities accessing advocacy services is well below the rates that should be expected. There are a range of reasons why this continues to occur, they include:

- lack of understanding of what 'advocacy' is
- reluctance to identify as a person with disability and therefore resultant reluctance to engage with the disability sector
- no appropriately funded Aboriginal disability advocacy service provider available
- non-Aboriginal advocacy providers not providing their service culturally appropriately
- 'disability' is a new conversation in many ways across Aboriginal communities and needs to led by Aboriginal people with disabilities themselves
- Lack of information about what advocacy services may be available

The ADN has over several years developed a viable and appropriate advocacy service delivery model for advocacy services provision across the state but continues to have this overlooked by ADHC.

f. any other matters

Whilst the ADN gratefully acknowledges our very recent recognition and funding from ADHC as the new peak organisation representing Aboriginal people with disability living in NSW, it has taken 8 years for the ADN to receive this recognition. The ADN has historically felt the frustration of a relatively well funded and resourced Culturally and Linguistically Diverse disability advocacy sector yet not the same level of support given to the Aboriginal disability rights sector. In addition the ADN is concerned about a tendency in our view of ADHC to defer to National Disability

Services (NDS) as the authoritative voice on disability and not organisations of and for people with disabilities. This is a serious error we believe and will only serve to entrench the natural power imbalance that exists between service providers and people with disabilities as service users.

The ADN several years ago had a positive relationship with DADHC as it was then known when it had a stand alone Aboriginal policy unit. However when this Unit was disbanded several years ago support for the ADN went with it. In the last couple of years with the advent of the Aboriginal virtual region within ADHC relationship with the department has reinvigorated. This is a positive step forward as the ADN has consistently articulated it is this relationship done in collaboration that has the potential to make a positive change for Aboriginal people with disabilities living in NSW.

Yours sincerely

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Executive Officer