

**Australia’s
Disability
Strategy**

2021 – 2031

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# **Foreword**

*Australia’s Disability Strategy 2021–2031*

Australia’s Disability Strategy 2021–2031 calls on all Australians to ensure people with disability can participate as equal members of society.

At its heart is a commitment to create an inclusive community.

The Strategy speaks to our national aspirations to enshrine and elevate the ideals of respect, inclusivity, and equality. This is why all governments – Australian, state, territory and local – are committed to delivering on its principles.

More than one in six Australians have a disability. More than one in six of the people who share our homes and workplaces, our streets and cities, our lives and hearts. They are our brothers and sisters, parents and children, colleagues and co-workers, partners and friends.

Our responsibility as governments, leaders and citizens is to build a society in which people with disability can participate as equal members with equal opportunities to fulfil their potential.

The success of this Strategy rests in a whole-of-community response, inclusive of business, the non‑government and services sectors and individuals. Only by working together can we ensure all aspects of Australian life are inclusive and accessible.

The findings of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability will further advance the on-going development of the Strategy as a blueprint for a more inclusive and just society.

The Strategy acknowledges and respects the diversity of people with disability. It recognises the importance of tailoring actions to take into account this diversity.

Through extensive consultations and engagement, people with disability and the disability sector have shared their experiences and generously given their time to ensure the new Strategy is practical, effective and targeted.

The stronger policy focus on housing, safety, employment and community attitudes is the direct result of what people with disability nominated was important to them.

Above all, the Strategy is focused on interrelated outcome areas with tangible, achievable policy priorities. Rigorous measuring, evaluation and reporting of outcomes are inbuilt.

The Strategy builds on the significant work of the National Disability Strategy 2010–2020 to establish a national approach to improving the lives of people with disability. The National Disability Insurance Scheme was the stellar achievement of this process.

The new Strategy is an aspirational road map pointing the way ahead. It represents our national commitment to enabling every Australian to meet their potential, to achieve, to have a fair go and to have real choices.

In *Australia’s Disability Strategy 2021–2031*, we affirm the values of respect, inclusion and equality and espouse them as fundamental to our national identity.

**The Parties have confirmed their commitment to this
agreement as follows:**

Signed for and on behalf of the Commonwealth of Australia by

The Honourable Scott Morrison MP
Prime Minister of the Commonwealth of Australia
3 December 2021

|  |  |  |
| --- | --- | --- |
| Signed for and on behalf of the State of New South Wales byThe Honourable Dominic Perrottet MPPremier of the State of New South Wales3 December 2021 |  | Signed *for and on behalf of theState of Victoria by* The Honourable Daniel Andrews MLAPremier of the State of Victoria3 December 2021 |
| Signed for and on behalf of theState of Queensland by The Honourable Annastacia Palaszczuk MPPremier of the State of Queensland3 December 2021 |  | Signed for and on behalf of theState of Western Australia by The Honourable Mark McGowan MLAPremier of the State of Western Australia3 December 2021 |
| Signed for and on behalf of theState of South Australia byThe Honourable Steven Marshall MPPremier of the State of South Australia3 December 2021 |  | Signed for and on behalf of theState of Tasmania byThe Honourable Peter Gutwein MPPremier of the State of Tasmania3 December 2021 |
| Signed for and on behalf of the Australian Capital Territory byMr Andrew Barr MLAChief Minister of the Australian Capital Territory3 December 2021 |  | Signed for and on behalf of the Northern Territory byThe Honourable Michael Gunner MLAChief Minister of the Northern Territory of Australia3 December 2021 |

Signed for and on behalf of the Australian Local Government Association by

Councillor Linda Scott
President of the Australian Local Government Association
3 December 2021

# **Introduction**

*Australia’s Disability Strategy 2021–2031* (the Strategy) is Australia’s national disability policy framework. It sets out a plan for continuing to improve the lives of people with disability in Australia over the next ten years.

The Strategy builds on its predecessor, the National Disability Strategy 2010–2020, which saw a range of reforms introduced to better support and include people with disability. These included:

* establishing the world-leading National Disability Insurance Scheme (NDIS)
* new disability legislation, such as state Disability Inclusion Acts, to strengthen legal protections for people with disability
* new Australian, state, territory and local government disability inclusion plans
* local initiatives focused on creating inclusive communities, accessible transport, and improving access to health and education services
* establishing the NSW Ageing and Disability Commissioner to investigate and protect older people and people with disability from abuse, neglect and exploitation
* significant shifts in government and social and community services towards rights-based approaches to remove barriers for people with disability.

The Strategy was developed by Australian, state, territory and local governments, through more than two years of engagement with people with disability, their families and carers.

The outcomes and recommendations from several reviews and evaluations of the *National Disability Strategy 2010–2020* has also informed the development of this Strategy.

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and the work of the Commission has also shaped the development of this Strategy and will shape future updates to the Strategy. Governments are committed to reviewing the Strategy upon the release of the Commission’s final report.

For further information on the development of the Strategy refer to Appendix 1.

## **Vision and Purpose**

The Strategy’s vision is for **an inclusive Australian society that ensures people with disability can fulfil their potential, as equal members of the community**.

In line with Australia’s commitments under the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), this Strategy will play an important role in protecting, promoting and realising the human rights of people with disability.

The Strategy sets out practical changes Australia can make to improve the lives of people with disability.

The purpose of the Strategy is to:

* provide national leadership towards greater inclusion of people with disability
* guide activity across all areas of public policy to be inclusive and responsive to people with disability
* drive mainstream services and systems to improve outcomes for people with disability
* engage, inform and involve the whole community in achieving a more inclusive society.

## **The Social Model of Disability**

This Strategy is based on the social model of disability. It recognises attitudes, practices and structures can be disabling and act as barriers preventing people from fulfilling their potential and exercising their rights as equal members of the community.

This aligns with the UN CRPD, which provides that disability results from the ‘interaction between persons with impairments and attitudinal and environmental barriers hindering full and effective participation in society on an equal basis with others’.

The Strategy focuses on removing these barriers so people with disability can fully and effectively participate in and contribute to society. Where this Strategy talks about people with disability, it means people with disability of all ages, whether their disability has been present from birth or acquired through illness, injury, accident or the ageing process.

People with disability include, but are not restricted to, those who have long-term physical, mental, cognitive, intellectual or sensory impairments. People with disability have specific needs, priorities and perspectives based on their individual identities including their gender, age, sexuality, race and cultural background, and can face additional barriers and inequities.

## **Outcome Areas**

The Outcome Areas in the Strategy set out where governments at all levels, working with the community and business, and people with disability will focus on delivering the needed changes.

By delivering against the Policy Priorities under each Outcome Area, governments envisage all aspects of Australian life becoming more inclusive of people with disability.

Collectively, the Outcome Areas represent the areas people with disability have said need to improve in order to achieve the Strategy’s vision. The seven Outcome Areas are:

* Employment and Financial Security
* Inclusive Homes and Communities
* Safety, Rights and Justice
* Personal and Community Support
* Education and Learning
* Health and Wellbeing
* Community Attitudes.

The Outcome Areas are interrelated and necessarily connected. For example:

* improved education and learning outcomes lead to better employment and financial security outcomes
* improved outcomes in safety, rights and justice leads to better health and wellbeing outcomes.

# **Outcome Areas**

**Employment and Financial Security**

Outcome: People with disability have economic security, enabling them to plan for the future and exercise choice and control over their lives

Employment and financial security are central to improving outcomes for people with disability. This includes providing jobs and career opportunities, and having adequate income for people to meet their needs.

Policy Priority 1:

Increase employment of people with disability

Employment supports people with disability to have more control over their lives, be financially independent and have a better standard of living. Paid employment also leads to better mental and physical health and wellbeing. Rates of employment for people with disability are significantly lower than for those without disability. While recognising some people with disability are unable to work, increasing employment of people with disability will ensure these skilled individuals are fully participating in the economy. Increasing employment opportunities for people with disability includes encouraging business ownership and development, self-employment and entrepreneurship.

“Benefits to the Australian economy as a result of increased workforce participation [of people with disability] are well established including increased gross domestic product (GDP), reduced overall welfare expenditure and increased self-reliance in retirement.” (Australian Human Rights Commission 2016)[[1]](#endnote-1)

“The unemployment rate of working-age people with disability (10% or 113,000) is twice that of those without disability (4.6% or 544,000).” (Australian Institute of Health and Welfare 2020)[[2]](#endnote-2)

“[T]he most common reason for a lack of employment opportunity is low disability awareness among employers, which leads to a lack of understanding of people’s abilities.” (National Disability Strategy Consultation Report 2019)[[3]](#endnote-3)

Policy Priority 2:

Improve the transition of young people with disability from education to employment

Evidence shows preparing young people for employment, including supporting them to access skills development and work experience, can have long-term benefits for their employment prospects and careers.[[4]](#endnote-4)

“Many young people with disability however have extremely poor post school transition experiences. This is impacting negatively on life outcomes where there is low participation in employment.” (Children and Young People with Disability Australia 2017)[[5]](#endnote-5)

“A lack of early planning and collaboration between community and employment services and schools, combined with a low expectation that young people with disability will work upon leaving school, contribute to poor employment outcomes for students with disability in Australia.” (National Disability Services Centre for Applied Disability Research 2017)[[6]](#endnote-6)

Policy Priority 3:

Strengthen financial independence of people with disability

Adequate income provides increased financial security, economic independence and an appropriate standard of living, giving people more choice and control over their lives, and enabling their participation in community life. The income support system provides an important safety net for people with disability who are unable to work or cannot find employment. Ensuring income support, tax and the industrial relations systems work together to avoid creating barriers and disincentives is critical to supporting people with disability to gain employment and increase the number of hours they work.

“In 2018 the median gross personal income for people with disability was $505 per week, less than half that of people without disability ($1,016 per week).” (Australian Bureau of Statistics 2019)[[7]](#endnote-7)

“[H]aving employment with fair wages was critical to being able to achieve independence and to live a full and healthy life.” (National Disability Strategy Consultation Report 2019)[[8]](#endnote-8)

**Inclusive Homes and Communities**

Outcome: People with disability live in inclusive, accessible and well-designed homes and communities

Having appropriate housing, and a community that is accessible and inclusive, is central to how people with disability live, work and socialise.

Accessible housing, transport, communication and the built environment are key factors supporting the participation of people with disability. Accessible public buildings, facilities, parks and events all support the inclusion of people with disability in community life.[[9]](#endnote-9)

Policy Priority 1:

Increase the availability of affordable housing

Access to affordable, safe and long-term housing underpins a person’s sense of home and their ability to participate in their communities. For people with disability to have choice about where to live and with whom, a range of housing options are required, including public and community housing, private rental and home-ownership.

“11.2 per cent of Australians with disability were living in unaffordable housing compared to 7.6 per cent of people without disability.” (University of Melbourne 2019)[[10]](#endnote-10)

“[The Australian Civil Society Shadow Report recommends] that Australia significantly increase the range, affordability and accessibility of public and social housing to ensure that people with disability can maximise their level of independence and freedom.” (Australian Civil Society Shadow Report to the United Nations 2019)[[11]](#endnote-11)

“Moving to independent living in appropriately designed and located housing achieves important shelter and non-shelter outcomes for people with disability, including a growing sense of independence, improved privacy, choice of housemates, improvements in physical and mental health, and improved social participation.” (Australian Housing and Urban Research Institute 2015)[[12]](#endnote-12)

Policy Priority 2:

Housing is accessible and people with disability have choice and control about where they live, who they live with, and who comes into their home

Accessible and well-designed housing supports independence and social and economic participation. Increasing the availability of accessible housing provides choices on where to live, who to live with, and enables people with disability to visit, socialise and connect with neighbours, family, and friends. Improved takeup of universal design principles will support people regardless of age or disability to live in their home through all stages of their lives.

“No-one should be forced to live with their parents solely because suitable accommodation is unavailable.” (Every Australian Counts Campaign 2015)[[13]](#endnote-13)

“Fifty-nine per cent of survey respondents said access to affordable and accessible housing and accommodation was a major or severe issue.” (National Disability Strategy Consultation Report 2019)[[14]](#endnote-14)

“Participants also described physically accessible design features as promoting a person’s independence for a longer period and reducing the number of injuries sustained at home.” (Australian Network for Universal Housing Design 2018)[[15]](#endnote-15)

“Accessible housing is not just needed by Australians with mobility disabilities. [It] assists people with sensory, intellectual or cognitive disabilities. Housing designed with universal design characteristics reduces care needs and costs, ensures people can live at home for longer, enables people with disability to leave hospital more expeditiously and facilitates people with disability obtaining employment.” (Australian Human Rights Commission 2020)[[16]](#endnote-16)

Policy Priority 3:

People with disability are able to fully participate in social, recreational, sporting, religious and cultural life

People with disability should be supported to live more accessible and connected lives within their communities, including being able to fully participate in social, recreational, sporting, religious and cultural life. This requires accessibility to be an integral part of the design of services and systems to avoid barriers arising. It requires going beyond just physical accessibility. Providing easily accessible information about community services, events and facilities, and providing low sensory spaces, helps support the inclusion of people with disability in their communities.[[17]](#endnote-17)

“Having a long term disability doesn’t stop Australians being active; around four in five (79%) participate in some kind of sport or physical activity at least once a year, a third (32%) play at least one Olympic sport and a quarter (26%) play at least one Paralympic sport.” (Sports Australia 2021)[[18]](#endnote-18)

“Children with a disability are one third less likely to play sport than those without a disability, but having a disability is not the main reason that prevents children participating in sport… [Sports Australia Foundation’s] experience shows that programs for children with a disability are most effective when there is a connection between sporting bodies, community groups, disability groups and parents.” (Sports Australia Foundation 2019)[[19]](#endnote-19)

“Artists with disability are under-represented, earn less than their counterparts without disability, experience unemployment at higher rates, and are more likely to identify a lack of access to funding as a barrier to their professional development.” (Australia Council for the Arts 2018)[[20]](#endnote-20)

Policy Priority 4:

The built and natural environment is accessible

Adopting universal design principles enables everyone, regardless of age or ability, to use buildings, transport, parks, and playgrounds without the need for specialised or adapted features. Buildings and outdoor spaces that are not accessible exclude people with disability from participation in work, education, and social and cultural life.[[21]](#endnote-21)

“[U]niversal design and built environment accessibility often needs to go beyond access for people with physical impairments and should include design for other issues such as hearing impairment, cognitive impairment, psychosocial disability, or autism” (Senate Community Affairs References Committee 2017)[[22]](#endnote-22)

“[B]y ensuring all communities have adequate accessibility infrastructure (hearing loops, ramps, etc.) we can build a more seamless experience for people with a disability, allowing them to feel more comfortable being in the community.” (Centre for Disability Research and Policy 2020)[[23]](#endnote-23)

“For people with disability the lack of access to services results in poorer health outcomes, less full and effective participation and inclusion in society, and a reduction in dignity, autonomy and the ability to be independent.” (Senate Community Affairs Reference Committee 2017)[[24]](#endnote-24)

“[T]here is considerable frustration at the slow pace of change at the practical and policy level to ensure universal design principles are included in the development of all new public and private buildings and infrastructure.” (People with Disabilities Western Australia 2017)[[25]](#endnote-25)

“The natural environment is less likely to represent a greater challenge for hearing impaired people than for non-impaired people, because most outdoor locations and activities do not rely on audio communication. In outdoor locations, good clear and appropriate signage is important for both hearing impaired and non-impaired people.” (Self Help for Hard of Hearing 2017)[[26]](#endnote-26)

Policy Priority 5:

Transport systems are accessible for the whole community

Being able to use public, private and community transport to move around the community underpins all aspects of life for all people. Being able to move around the community has positive impacts on everyone’s health, social life, education and employment. For this to occur, transport and its entry points (e.g. stations and platforms) need to be accessible to everyone, including people with disability. Other key factors include access to emerging technology and point-to-point transport (e.g. rideshare), proximity of transport systems, frequency of services, information to support the journey (e.g. hearing loops and alerting devices), and getting to and from the transport (e.g. footpaths and walkways).

“Many people with arthritis and musculoskeletal conditions report that difficulties with travelling to and from work are an important factor in their decision to reduce or cease employment.” (Arthritis Australia 2017)[[27]](#endnote-27)

“I have had so many taxi drivers refuse to take me because I use a Seeing Eye Dog that I don’t bother to even try to go out anymore – the constant refusals make me feel humiliated and degraded – I deserve better than that.” (Vision Australia 2020)[[28]](#endnote-28)

“Broadly speaking, public transport accessibility has improved, incrementally, since the last [Disability Standards for Accessible Public Transport] review. Nonetheless, people with disability continue to experience significant disadvantage due to real public transport inaccessibility. Daily exclusion from public transport results in people with disability being shut out from their community. It restricts their ability to work; study; shop; socialise with family and friends; be engaged in recreational activities; and, access vital government services.” (Disabled People’s Organisations Australia 2018)[[29]](#endnote-29)

Policy Priority 6:

Information and communication systems are accessible, reliable and responsive

Being able to access information and communicate is vitally important in all aspects of life. It is central to people’s safety and health, to involvement in their communities, employment and education, and to using transport, banking and shopping. Provision of communication in accessible formats (e.g. Braille, Auslan, Easy Read formats) can have a positive impact on the health of and opportunities for people with disability. With technology becoming a key means to participation across all elements of individual and community life, it is important that technology is inclusive of all Australians.[[30]](#endnote-30)

“Generally, people said when information was not easily available to people it prevented them from getting the support they needed. They were prevented from participating in their community and from accessing services.” (National Disability Strategy Consultation Report 2019)[[31]](#endnote-31)

“Many websites continue to be inaccessible to people with disability. This especially affects people who are blind or have low vision, as websites are often not compatible with screen reader technology. This has a broader effect as it prevents individuals from accessing services.” (Public Interest Advocacy Centre 2017)[[32]](#endnote-32)

**Safety, Rights and Justice**

Outcome: The rights of people with disability are promoted, upheld and protected, and people with disability feel safe and enjoy equality before the law

People with disability are experts in their own lives and have the same rights as people without disability. Community acceptance of these rights and experiences will maximise individual power and autonomy, and support economic participation, social inclusion, safety and equality.

Australia’s Disability Discrimination Act 1992 (DDA) makes discrimination on the basis of disability unlawful in areas including employment, education, and access to premises, goods, services and facilities. Disability advocacy can enable and support people with disability in ways which protect and uphold their rights. Despite this, rights protection, safety and discrimination of people with disability continue to be areas requiring improvement.[[33]](#endnote-33)

Refer to Appendix 2 for more information on the UN CRPD, the DDA and the Australian Human Rights Commission, and Appendix 3 for more information on Advocacy.

Policy Priority 1:

People with disability are safe and feel safe from violence, abuse, neglect and exploitation

People with disability are more likely to experience violence, abuse, neglect and exploitation, and fare worse in institutional contexts such as group homes and boarding houses where violence may be more common. People with disability are also more likely to be victims of crime.

“People with disability may be exposed to increased risk of violence, abuse, neglect and exploitation if they do not have access to appropriate resources and supports during life transitions. If a person with disability experiences violence or abuse at one point in their life, it can affect them later in life.” (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability 2020)[[34]](#endnote-34)

“47% of adults with disability have experienced violence after the age of 15, compared with 36% without disability… 1 in 5 (20% or 1.1 million) [people with disability] experienced abuse before the age of 15 compared with 1 in 10 [people without disability] (11% or 1.3 million).” (Australian Institute of Health and Welfare 2019)[[35]](#endnote-35)

Policy Priority 2:

Policies, processes and programs provide better responses to people with disability who have experienced trauma

A trauma-informed approach promotes safety and upholds the dignity and wellbeing of people with disability. It also respects and recognises that people with disability are experts in their own lives. Traumatic life experiences require responses catering to the lived experience of the individual.

“We know that people can and do recover from even severe early life trauma. Research shows that we have every reason to be optimistic about recovery from trauma. And the importance of honouring survival, survivors’ strength and courage, holding a sense of hope and optimism.” (Blue Knot Foundation 2021)[[36]](#endnote-36)

“Being trauma-informed is about supporting people to feel safe and be safe in their interactions with services.” (Kezelman 2020)[[37]](#endnote-37)

“Knowing how to ‘talk about trauma’ is essential to supporting traumatised people. It is also critical to establishing service systems which are ‘trauma-informed’ i.e. in which all professionals and personnel, regardless of qualification/s, occupation or skill base have a basic understanding of how overwhelming stress can affect the way we function as human beings and a working knowledge of how not to compound stress (‘do no harm’).” (Blue Knot Foundation 2018)[[38]](#endnote-38)

“The trauma arising from violence, abuse, neglect and exploitation can have long term physical and psychological effects.” (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability 2020)[[39]](#endnote-39)

Policy Priority 3:

Policies, processes and programs for people with disability promote gender equality and prevent violence against groups at heightened risk, including women and their children

To improve the safety of people with disability there is a need to take targeted action for groups at heightened risk of violence. Women, children and young people are at a particularly heightened risk of violence, abuse, neglect and exploitation.[[40]](#endnote-40) Effective preventive actions targeting violence against women and children require an inclusive and collaborative effort across a range of settings.[[41]](#endnote-41) The Strategy should be considered in conjunction with other plans such as the next National Plan to Reduce Violence against Women and Children and the next National Framework for Protecting Australia’s Children.

“… Australian research has similarly found that women with disability were twice as likely to say they had experienced sexual harassment at work than those without a disability. This data and research is consistent with other research which has suggested that women with disability are at greater risk of violence than other people in the community.” (Australian Human Rights Commission 2020)[[42]](#endnote-42)

“The prevalence of disabilities in the child protection system suggests a need for awareness of the scope of issues faced by these children and the need for interagency collaboration to ensure children’s complex needs are met. Supports are needed for families with children with disabilities to assist in meeting the child’s health and developmental needs, but also to support the parents in managing the often more complex parenting environment.” (Maclean et al. 2017)[[43]](#endnote-43)

“Many women who experience violence have children in their care. Exposure to violence against their mothers or other caregivers causes profound harm to children, with potential impacts on attitudes to relationships and violence, as well as behavioural, cognitive and emotional functioning, social development, and – through a process of ‘negative chain effects’ – education and later employment prospects.” (Our Watch 2015)[[44]](#endnote-44)

“In its submission, Families Australia noted that there is an increased risk of violence, abuse and neglect for children and young people with disability in school and transportation to and from school. These experiences range from physical abuse and violence to emotional abuse and bullying from teachers, aides and fellow students alike.” (Senate Community Affairs References Committee 2015)[[45]](#endnote-45)

“Ensuring that gender is a central consideration in the development and implementation of policy and programs is critical in advancing gender equality and the human rights of women and girls with disabilities in Australia.” (Women with Disabilities Australia 2014)[[46]](#endnote-46)

“Children and young people with disability are more vulnerable [than children and young people without disability] to experiencing harm and abuse, such as harassment, bullying, physical and sexual abuse.” (Commissioner for Children and Young People WA 2020)[[47]](#endnote-47)

“More than a third of children in out-of-home care placements are Indigenous. Compared with non-Indigenous children, Indigenous children are 10 times more likely to be in out-of-home care and 9 times more likely to be on care and protection orders. There remains inadequate culturally appropriate support available to Indigenous children with disability and their families.” (Australian Civil Society 2019)[[48]](#endnote-48)

Policy Priority 4:

The rights of people with disability are promoted, upheld and protected

Promoting awareness and respect for the rights of people with disability, and building on Australia’s rights-focused legislative protections for people with disability, will help to systematically uphold and safeguard these rights. It will also help realise Australia’s commitments under the UN CRPD. The Australian Human Rights Commission, and state and territory human rights/anti-discrimination bodies play an important role in promoting and protecting these rights, including helping individuals and organisations understand and meet their legal responsibilities. Disability advocacy also supports people with disability to safeguard their rights, experience equality and overcome barriers that can affect their ability to participate in the community.

“In 2019–20, 44 per cent of AHRC complaints were lodged under the Disability Discrimination Act.” (Australian Human Rights Commission 2019)[[49]](#endnote-49)

“A lack of understanding of the rights of people with disability by people and services across the community leads to the discrimination, exclusion and marginalisation of people with disability.” (National Disability Strategy Consultation Report 2019)[[50]](#endnote-50)

“People said there was little information available to inform people with disability about their own rights. In the survey 60% of respondents said that it is very or somewhat difficult to find information about the rights of people with disability.” (National Disability Strategy Consultation Report 2019)[[51]](#endnote-51)

“Representative organisations of people with disability have an important role to play in advocating for the rights and interests of people with disability.” (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability 2020)[[52]](#endnote-52)

Policy Priority 5:

People with disability have equal access to justice

Effective access to justice for people with disability requires consideration of individual needs. Without this there can be no equitable or equal participation. This requires appropriate strategies, including aids, equipment, and accessible legal information and advice to facilitate equal and effective participation in all legal proceedings. In addition, greater awareness of disability is needed among some parts of the judiciary, legal professionals and court staff.

“Interactions between the mental health and justice systems are important. People with mental illness are over-represented in the criminal justice system and as victims of crime. They are also more likely to find themselves dealing with legal issues than the general population.” (Productivity Commission 2020)[[53]](#endnote-53)

“Without appropriate adjustments and support, the legal system is largely inaccessible for many people with disability. This can produce unjust outcomes.” (Law Council of Australia 2018)[[54]](#endnote-54)

“People with disability engaging in the justice system face significant barriers, with many finding access to justice difficult, hostile and ineffectual. As a result, they are often left without legal redress.” (Australian Civil Society 2019)[[55]](#endnote-55)

Policy Priority 6:

The criminal justice system responds effectively to the complex needs and vulnerabilities of people with disability

People with disability who have complex needs, multiple impairments and/or multiple and intersecting forms of disadvantage, face even greater obstacles within the justice system compared to other people with disability and people without disability. People with disability in the criminal justice system are at a heightened risk of violence, abuse, neglect and exploitation. Reducing the over-representation of people with disability across the criminal justice systems of Australia and other systems of detention requires appropriate strategies, including adoption of diversionary approaches and transition to community supports.

“[P]eople with intellectual disability are understood to be over-represented in prisons. [S]everal studies have found that 25%–30% of people in prison have borderline intellectual disability, and 10% have a mild intellectual disability. Almost 1 in 3 (29%) prison entrants reported a chronic health condition that affected their participation in everyday activities (21%), education (11%), or employment (16%).” (Australian Institute of Health and Welfare 2019)[[56]](#endnote-56)

“Aboriginal and Torres Strait Islander women with disability are at an even greater risk of experiencing violence and of being involved in violence and imprisoned, as they face intersecting forms of discrimination because of their gender, disability, and ethnicity.” (Law Council of Australia 2018)[[57]](#endnote-57)

“Justice Project stakeholders have also underscored the strong correlation between disability and heightened interaction with the criminal justice system, as well as raised serious concerns about the imprisonment and indefinite detention of people with disability.” (Law Council of Australia 2018)[[58]](#endnote-58)

“These assessments [intellectual disability, language and literacy] demonstrate that the level of disability and its impact on young people is significantly higher than indicated by self-report, suggesting that young people in custody are significantly under-reporting the level and impact of their disability. Young people in the juvenile justice system are at risk of not receiving the educational and disability support they require if they are not able to self-report their disability support needs.” (Justice Health & Forensic Mental Health Network and Juvenile Justice NSW 2015)[[59]](#endnote-59)

“Assessment for disability in prison is patchy and not consistently measured. The Commission heard that even if a person’s disability is identified or known, appropriate support, medication and services are frequently not provided in prison or there is limited follow-up.” (Australian Human Rights Commission 2014)[[60]](#endnote-60)

**Personal and Community Support**

Outcome: People with disability have access to a range of supports to assist them to live independently and engage in their communities

Personal and community supports, including both specialist disability supports and mainstream services available to the general public, are fundamental to improving overall outcomes for people with disability.

Some people with disability need support to be able to maintain everyday wellbeing at home and to be fully included in community activities. It is important for people with disability to be able to live independently and be involved in community activities, such as education, work, training, recreation, cultural life and neighbourhood activities.

Policy Priority 1:

People with disability are able to access supports that meet their needs

Like all Australians, people with disability need access to personal and community supports. This includes both disability services and mainstream services.

Mainstream services such as relationship or financial counselling, parenting support and crisis services need to be universally available and accessible to all people in the community, including people with disability.

“67 per cent of respondents thought that finding and getting good quality supports and services is a major or severe issue.” (National Disability Strategy Consultation Report 2019)[[61]](#endnote-61)

“Requiring mainstream services and public facilities to have disability inclusion and action plans would create immediate and tangible improvements in accessing the community.” (National Disability Strategy Consultation Report 2019)[[62]](#endnote-62)

“There is a lack of expertise and a range of structural barriers within domestic violence, sexual assault and women’s crisis services that prevent appropriate responses to support women with disability.” (Disabled People’s Organisations Australia and the National Women’s Alliances 2019)[[63]](#endnote-63)

Policy Priority 2:

The NDIS provides eligible people with permanent and significant disability with access to reasonable and necessary disability supports

As a world-first approach to providing disability support, the NDIS enables people with disability to receive the reasonable and necessary package of flexible supports that help people pursue their goals and aspirations. In putting people at the centre of NDIS decision-making, people with disability can exercise choice and control as they seek to live an ordinary life like any other member of the Australian community. The NDIS, along with other supports and services, can help contribute to the broader outcomes of the Strategy.

“The NDIS is available to all eligible Australians, no matter where they live, and is estimated to grow to support around 500,000 people within the next five years.” (National Disability Insurance Agency 2020)[[64]](#endnote-64)

“The NDIS is a critical investment in the supports and needs of people with disability to live their day-to-day life in their communities, based upon principles of choice and control.” (Queenslanders with Disability Network 2019)[[65]](#endnote-65)

“With the scheme now fully operational, the focus needs to be on making the NDIS market work more effectively and efficiently to secure the scheme’s overall objectives and improve outcomes for people with a disability.” (Queensland Productivity Commission 2021)[[66]](#endnote-66)

“While the NDIS has improved individualised supports, many people said access to these supports was limited in some areas.” (National Disability Strategy Consultation Report 2019)[[67]](#endnote-67)

Policy Priority 3:

The role of informal support is acknowledged and supported

The informal support provided by parents, siblings, kinship guardians, other family members and friends is vitally important to people with disabilities. The support provided in these close relationships can often be one of mutual support.

In addition to providing practical and emotional support, those providing informal support can represent the interests and rights of the person they support.[[68]](#endnote-68) The informal support provided by voluntary organisations is also important to enriching the lives of people with disability. Acknowledging and supporting individuals and organisations who provide informal care and support can increase the participation of people with disability in community life.

“In 2018, of the 2.5 million people with disability (living in households) who needed assistance, 79.1 per cent received assistance from informal providers.” (Australian Bureau of Statistics 2018)[[69]](#endnote-69)

“Informal carers can also be key sources of information and often play the role of advocate for the person they care for.” (Carers NSW 2015)[[70]](#endnote-70)

“The demand for informal carers will grow from around 1.25 million in 2020 to 1.54 million in 2030, representing a 23% total increase. In contrast, the supply of informal carers will rise from 674,000 to 780,000, a total growth of 16%.” (Deloitte Access Economics 2020)[[71]](#endnote-71)

Policy Priority 4:

People with disability are supported to access assistive technology

Assistive technology is any device or system used by people to make tasks easier. Most people use assistive technology in their daily lives, such as smart phones or remote controls. Assistive technology also includes grab rails, hoists, wheelchairs, hearing aids, text captioning services, home modifications, digital assistive technology, prosthetics and devices to support memory.

For people with disability, assistive technology supports inclusion, participation, communication and engagement in family, community and all areas of society, including political, economic and social spheres.[[72]](#endnote-72)

“In 2018, of the 4.4 million Australians with disability, over half used aids or equipment because of their condition.” (Australian Bureau of Statistics 2018)[[73]](#endnote-73)

“Technology was identified as having the potential to change the lives of people with disability. Workshop participants said the assistive technologies that have emerged over the past 10 years had already significantly improved access for people with disability.” (National Disability Strategy Consultation Report 2019)[[74]](#endnote-74)

“Modifications can be a necessity to enable a person to remain living at home; without them it can lead to people including young people being placed in aged care facilities.” (Motor Neurone Disease Foundation Australia 2018)[[75]](#endnote-75)

**Education and Learning**

Outcome: People with disability achieve their full potential through education and learning

Access to formal and informal education is critical to the development of skills, independence and wellbeing of people with disability. It provides pathways to fulfilling employment, financial independence, and enriched lives.

Despite educational reforms over the last decade, there remain significant gaps for students with disability. These gaps are notable in attainment of Year 12 or equivalent, vocational education and training qualifications, and participation in university studies.

Policy Priority 1:

Children with disability can access and participate in high-quality early childhood education and care

High-quality, affordable, inclusive, and accessible early childhood education and care equips children and their families to succeed throughout life. The benefits of accessing quality early-years education continue throughout children’s primary education years and can support future success, including educational attainment, employment, and economic and social participation.[[76]](#endnote-76)

“Matched data from the Australian Early Development Census (AEDC) showed a positive association between preschool experiences and children’s development at school entry, especially for developmental domains related to learning.” (Australian Institute of Health and Welfare 2020)[[77]](#endnote-77)

“The participation rate for children with disability 0–5 years in child care services increased from 2.9% in 2013 to 3.4% in 2018.” (Australian Bureau of Statistics 2019)[[78]](#endnote-78)

“Preschool programs can help children acquire school readiness by developing learning-related skills.” (Australian Institute of Health and Welfare 2020)[[79]](#endnote-79)

Policy Priority 2:

Build capability in the delivery of inclusive education to improve educational outcomes for school students with disability

When children and young people have positive educational experiences, they are more likely to remain engaged in learning. Students with disability have a right to access and participate in education on the same basis as students without disability, in an environment free from bullying, harassment or exclusion. Education providers who embed inclusion foster a sense of community and belonging, and are integral to improving the educational experience of children and young people with disability.

Strengthening system capability to support students with disability to access and participate in education on the same basis as students without disability is essential for improving all students’ educational outcomes. While accessibility and inclusion strategies have supported increased secondary school completion for some students with disability, there remains a significant gap in outcomes between students with disability and students without disability.[[80]](#endnote-80) Narrowing these gaps in educational attainment is essential to improve lifetime outcomes for people with disability.

“Education is one of the most significant determining factors in young people’s future outcomes.” (Mission Australia 2020)[[81]](#endnote-81)

“In 2018, only 64 per cent of students with disability completed secondary education, compared to 81 per cent of people without disability.” (Australian Institute of Health and Welfare 2019)[[82]](#endnote-82)

“The biggest difference between students having strong educational attainment and outcomes and not, is the culture of the school… this culture comes directly from the school principal and other leaders making a priority of inclusive education.” (Senate Committee on Education and Employment 2016)[[83]](#endnote-83)

“Barriers to attendance and participation for students with disability include lack of supports, of teacher and staff understanding of issues for students with disability, information not being delivered in appropriate formats, [and] an entrenched culture of low expectations.” (National Disability Strategy Consultation Report 2019)[[84]](#endnote-84)

“Research has shown that students who feel more accepted, included and involved in their school are more likely to be engaged in classroom learning, in extracurricular activities, in interpersonal relationships, and in the wider school community.” (Children and Young People with Disability Australia 2014)[[85]](#endnote-85)

“Transition between stages of education often represent periods when additional supports may be required to ensure an effective and smooth transition.” (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability 2020)[[86]](#endnote-86)

Policy Priority 3:

Improve pathways and accessibility to further education and training for people with disability

Tertiary education attainment supports improved employment rates and income. Improving access to and participation in post-school education and training assists people with disability to achieve their full potential and access the same opportunities as Australians without disability. This includes supporting students with disability in high school with career and transition planning.

“Missing out on the benefits of education generates costs not only because it affects occupational prospects, wages and job satisfaction, but also because it influences decisions people make and behaviours affecting health, marriage, parenting, civic engagement, and preparing for retirement. These costs accumulate as those who miss out progress through adulthood till the end of their working lives.” (National Centre for Student Equity in Higher Education 2017)[[87]](#endnote-87)

“Undergraduate enrolments in Australian universities by students with disability rising from 5.5 per cent in 2013 to 7.3 per cent in 2018.” (National Centre for Vocational Education Research 2020)[[88]](#endnote-88)

“Consultations have highlighted the need for career and transition planning and support to begin early in junior high school to successfully identify and access the pathways to further education.” (Children and Young People with Disability Australia 2020)[[89]](#endnote-89)

Policy Priority 4:

People with disability have increased opportunities to participate in accessible and inclusive lifelong learning

The benefits of lifelong learning include building knowledge, acquiring, maintaining and developing skills and facilitating career advancement. Opportunities for this type of learning should be equally accessible to people with disability through adult and community education, continuing education and training, professional development and self-directed learning, in both formal and informal settings.

“Without lifelong learning, the capacity of individuals and communities to renew their knowledge and skills and adapt to political, economic, environmental, technological or social changes is considerably reduced.” (World Health Organization 2010)[[90]](#endnote-90)

“Within vocational education and training, in 2019 there were around 172,000 VET [Vocational Education and Training] students with disability. Over half (54 per cent) studied at private training providers, around a third (34 per cent) at TAFE and around one in eight (12 per cent) at community education providers.” (National Centre for Vocational Education Research 2020)[[91]](#endnote-91)

“There is a relatively higher proportion of people with disability enrolled at Adult and Community Education providers than other provider types – 17 per cent of government funded program enrolments in 2019 at these providers are from students with disability.” (National Centre for Vocational Education Research 2020)[[92]](#endnote-92)

“The community education sector has a strong ability to engage with disability networks and stakeholders to create positive pathways for students with a disability.” (Adult Learning Australia 2020)[[93]](#endnote-93)

**Health and Wellbeing**

Outcome: People with disability attain the highest possible health and wellbeing outcomes throughout their lives

Good health and wellbeing are critical determinants of a person’s quality of life. This is especially the case for people with disability. In addition to the physical aspects of health and wellbeing, improving mental health outcomes for people with disability is also a key focus of the Strategy. It is also important to address the social, cultural and economic determinants of health and wellbeing.

Policy Priority 1:

All health service providers have the capabilities to meet the needs of people with disability

People with disability continue to experience poorer health and wellbeing outcomes compared to people without disability.[[94]](#endnote-94) This is not always an inevitable consequence of living with disability. It can be a consequence of inadequate access to health care or inadequate care provided by health care workers. Issues around health care can include access to health services; the appropriateness of equipment, training or facilities; the operation of health systems and processes; and personnel and provider attitudes.

“Respondents told us of having to bring their own equipment to hospital, sometimes at the cost of several round trips by car each time, because what was on the wards was just not suitable for them.” (Health Performance Council South Australia 2020)[[95]](#endnote-95)

“The reasons for people with a disability having poor health are complex but include… health care workers having trouble seeing the ‘person’ behind the disability and only treating their disability and not other things that make them unwell.” (Smith-Merry 2016)[[96]](#endnote-96)

“[D]octors need to be better skilled in explaining health problems, test results and medications in ways that can be easily understood by people with intellectual disability.” (Trollor 2019)[[97]](#endnote-97)

“The evidence revealed that… additional and improved training of health professionals is needed to ensure they are equipped to provide quality health care to people with cognitive disability on an equal basis with others.” (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability 2020)[[98]](#endnote-98)

“1 in 5 (18%) [people with disability] who need help with health-care activities have their need for assistance only partly met or not met at all.” (Australian Institute of Health and Welfare 2019)[[99]](#endnote-99)

Policy Priority 2:

Prevention and early intervention health services are timely, comprehensive, appropriate and effective to support better overall health and wellbeing

Prevention and early intervention health services are important to lifelong health and wellbeing. People with disability continue to experience preventable health conditions and comorbidities at higher rates than people without disability.[[100]](#endnote-100) This places people with disability at significantly higher risk of adverse health outcomes.[[101]](#endnote-101) Better outcomes are achieved for people with disability when health providers understand their individual situation and circumstances, communicate well, do not allow disability to overshadow health issues, and provide services, premises and facilities that are accessible and appropriate.

Access to early intervention, regular health assessments and rehabilitation is critical for people with disability. This improves long-term outcomes for individuals and can help reduce future costs of care and support.[[102]](#endnote-102)

“[A]pproximately 50 per cent of the health conditions of people with intellectual disability are undiagnosed.” (Department of Health 2019)[[103]](#endnote-103)

“24% of adults with disability experience very good or excellent health, compared with 65% of people without disability.” (Australian Institute of Health and Welfare 2019)[[104]](#endnote-104)

“Maternal, sexual and reproductive health – increase access to information, diagnosis, treatment and services for sexual and reproductive health; enhance and support health promotion and service delivery for preconception, perinatal and maternal health.” (National Women’s Health Strategy 2018)[[105]](#endnote-105)

“Overall life satisfaction of Australians aged 15 years and over was 7.5 out of 10 in 2019… average life satisfaction was relatively low for people with disability (7.0).” (Australian Bureau of Statistics 2020)[[106]](#endnote-106)

Policy Priority 3:

Mental health supports and services are appropriate, effective and accessible for people with disability

Mental health is a major determinant of general health and wellbeing. People with disability continue to experience poorer mental health, including higher rates of anxiety and depression, than people without disability. Understanding the relationship between health, mental health and disability is essential for improving outcomes for people with disability.

People’s mental health can determine their ability to lead productive and fulfilling lives. Poor mental health can lead to lower levels of social and community engagement, and poorer education, employment and housing outcomes, which can further worsen mental health. Having appropriate, effective and accessible mental health supports and services, including in forensic mental health settings, which meet the needs of people with disability, and embedding a cross-sector approach to building mental health and wellbeing, are essential.

“32% of adults with disability experience a high or very high level of psychological distress [compared to] 8.0% without disability.” (Australian Institute of Health and Welfare 2019)[[107]](#endnote-107)

“Some barriers [to accessing mental health treatment and supports for people with intellectual disability] relate to service factors, such as inadequate training and awareness in mental health professionals, diagnostic overshadowing, lack of [intellectual disability] specific mental health services or a lack of coordination between agencies. Systemic barriers include poverty, limited education, lack of inclusive service models and policy, and the lack of data to evaluate service access.” (University of New South Wales 2014)[[108]](#endnote-108)

“For many Deaf people, the constant indirect and seemingly minor barriers to community participation can build up over time and have a devastating impact on long term mental health.” (Deaf Victoria 2019)[[109]](#endnote-109)

Policy Priority 4:

Disaster preparedness, risk management plans and public emergency responses are inclusive of people with disability, and support their physical and mental health, and wellbeing

The needs of people with disability should be catered for in disaster risk management plans and public emergency responses in order to protect their mental and physical health and wellbeing.

Before, during and after emergencies, people with disability may require targeted and accessible information and communication. They may also require additional assistance to plan and prepare for an emergency, additional assistance and appropriate support in the event of evacuation or physical isolation, and support through the recovery process.

Organisations responsible for emergency management should also work with those responsible for urban planning and design to understand where people with disability are at greater risk of harm during disasters, and how these risks can be reduced.

Including people with disability in disaster preparedness and risk management discussions, and related policy development, and consulting them in the very early stages of responding to and recovering from emergencies, will ensure their needs are accounted for.

“People with disability are disproportionately affected and experience higher rates of injury and death as well as face increased challenges during disaster response and recovery.” (Villeneuve 2019)[[110]](#endnote-110)

“Evacuation shelters designed to protect the community in the event of natural disasters are often difficult to access for people with disability – lacking ramps, railings, accessible toilets and other accessible facilities, including accessible information.” (Disabled People’s Organisations Australia and the National Women’s Alliances 2019)[[111]](#endnote-111)

**Community Attitudes**

Outcome: Community attitudes support equality, inclusion and participation in society for people with disability

Building positive community attitudes towards people with disability is central to achieving an inclusive society and improving all outcomes for people with disability under the Strategy.

People with disability report the greatest barriers they face are not communication or physical, rather they are created through stigma, unconscious bias and lack of understanding of disability. This can include ableism, where people with disability can be seen as being less worthy of respect and consideration, less able to contribute, and not valued as much as people without disability. Removing these barriers will contribute to positive daily experiences and recognition of the contribution people with disability can make to society.

People with disability have said changing attitudes of others will provide more choice and independence, and lead to better support, improved treatment and more respect. Focusing on community attitudes will lead to better education outcomes, job opportunities, increased feelings of safety, and improved mental health and wellbeing for many people with disability.

Community attitudes and awareness of disability have improved in recent years.[[112]](#endnote-112) However, lack of social and professional acceptance of disability and limited disability literacy remain issues which often create barriers for people with disability. Other factors such as gender, age, sexuality, race, type of disability, and cultural background can also influence how people with disability are treated in society.

Recognising the importance of improving community attitudes on achieving the Strategy’s vision, one of the initial Targeted Action Plans (refer to page 36) focuses on addressing the following four Policy Priorities.

Policy Priority 1:

Employers value the contribution people with disability make to the workforce, and recognise the benefits of employing people with disability

While the majority of people with disability can and want to work, people with disability of working age (15–64 years) are significantly under-represented in the Australian workforce. In 2018, 47.8 per cent of people with disability were employed compared to 80.3 per cent of people without disability.[[113]](#endnote-113) Having career opportunities and finding and keeping a job are significant issues for people with disability.[[114]](#endnote-114)

Many of the obstacles to employing people with disability that employers perceive to exist stem from negative attitudes and misconceptions. Evidence suggests employees with disability may be just as productive or more productive than people without disability and contribute to the profitability of businesses.[[115]](#endnote-115)

“The vast majority of [small and medium enterprise] employers (69%) stated that employing someone with a disability delivered a positive employment outcome for their business, and more than half said their experience was ‘very positive’.” (Council of Small Business Organisations Australia 2018)[[116]](#endnote-116)

“Just over half of people surveyed (55.6 per cent) disagreed that employers should be allowed to refuse to hire people with disability.” (University of Melbourne and the Victorian Government Department of Health and Human Services 2018)[[117]](#endnote-117)

“The use of science to reveal the unique talents and skills of those living with neurological conditions impressed us as a particularly compelling way to inspire confidence in the value of employing people with disabilities in the workplace. We are proud to support Northern Pictures to make Employable Me and hope it will challenge perceptions and create opportunities.” (Screen Australia 2017)[[118]](#endnote-118)

Policy Priority 2:

Key professional workforces are able to confidently and positively respond to people with disability

An improved understanding of disability by workers in professions people with disability often interact, will increase access to, and the quality of, the services and supports people with disability need. These professions include, but are not limited to, health, education, justice, emergency services and community services.

“Professional training with respect to understanding, identifying and responding to disability is critical to ensuring access to justice for people with disability. Training can help challenge negative stereotypes about disability and assist those working in the justice system to identify disability, which is a prerequisite for the provision of appropriate services and support systems.” (Law Council of Australia 2018)[[119]](#endnote-119)

“People said disability literacy could be delivered through dedicated education and training programs across the breadth of community services.” (National Disability Strategy Consultation Report 2019)[[120]](#endnote-120)

“Culturally safe practice is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism.” (Medical Board AHPRA 2020)[[121]](#endnote-121)

“Some people with disability experience difficulties accessing health services, such as discrimination by health professionals. 1 in 6 (17%) people with disability aged under 65 experienced discrimination by health staff (GP, nurse, hospital staff).” (Australian Institute of Health and Welfare 2017)[[122]](#endnote-122)

“Even mental health professionals, who are considered to be the most educated members of our society in regard to mental health conditions, can hold stigmatising attitudes towards their patients.” (Hampson et al. 2018)[[123]](#endnote-123)

“Many staff are great at providing adjusted activities (and listening to advice and ideas) to include all students, but other staff think of adjustments and inclusion as an afterthought and leave the student with a disability to do an alternate activity, often separate to their peers. Staff often think that some curriculum areas will not be possible for students with a sensory disability, and that the students will not be capable.” (Final Report of the 2020 Review of the Disability Standards for Education (2005) 2020)[[124]](#endnote-124)

Policy Priority 3:

Increase representation of people with disability in leadership roles

People with disability are significantly underrepresented on boards, in politics and in other leadership roles in Australian society. Increased inclusion of people with disability in leadership will enable the perspectives of people with disability to be included in decision-making, thereby making decisions more reflective of the community.

“[T]he best challenge to deeply rooted exclusionary attitudes and prejudices is everyday contact with people with disability.” (Office of the Public Advocate 2020)[[125]](#endnote-125)

“The most effective way to improve community attitudes is to increase levels of inclusion of people with disability in all aspects of society, particularly education, employment, leadership roles, and the media.” (Centre of Research Excellence in Disability and Health 2020)[[126]](#endnote-126)

Policy Priority 4:

Improving community attitudes to positively impact on Policy Priorities under the Strategy

Improved community awareness and understanding of disability will increase inclusion and accessibility for people with disability. Improving attitudes is as important as removing physical barriers to the built and natural environment.[[127]](#endnote-127) The Policy Priorities of this Strategy focus on improving in areas of everyday life so people with disability achieve the same outcomes as people without disability.

“83 per cent of respondents agreed that ‘people without disability are unsure how to act toward people with disability’ and 63 per cent agreed ‘people without disability ignore people with disability’.” (National Disability Strategy Consultation Report 2019)[[128]](#endnote-128)

“[I]n the case of psychosocial disability many of the changes required are not physical but attitudinal. And much more can be done in this respect.” (Senate Standing Committee on Community Affairs 2017)[[129]](#endnote-129)

“Awareness within the wider community and social media has had an impact on disability becoming more socially accepted and ‘normal’ which has also given people with disability more of a voice to be seen and heard.” (National Disability Strategy Consultation Report 2019)[[130]](#endnote-130)

“All people have rights – but ability to actually use and enjoy these rights on an equal basis with all others requires that information is provided in a form that the person can comprehend, that communication meets the communication needs of the individual and that support for decision making is available as required.” (Senate Standing Committee on Community Affairs 2017)[[131]](#endnote-131)

# **Implementation—Delivering on the Outcome Areas**

Governments are committed to working together alongside people with disability, communities, businesses and the non-government sector to implement this Strategy and realise its vision in a coordinated and targeted way. This includes ensuring that over the life of the Strategy, its design and implementation is responsive to changing needs.

The following key initiatives will facilitate this approach:

* promoting and ensuring actions to deliver against the Policy Priorities address issues of intersectionality
* a clear and easy-to-locate outline of governments’ roles and responsibilities
* guiding principles for policy and program development that are based on and reflect the human rights principles of the UN CRPD
* the implementation of time-limited Targeted Action Plans and longer-term Associated Plans
* the implementation of an Outcomes Framework to track progress against the Strategy, a data strategy to support regular reporting and improvements to evaluation and research
* the implementation of governance arrangements, including a centralised unit to drive implementation
* the implementation of a Strategy Engagement Plan to ensure people with disability actively participate in implementation, monitoring and evaluation
* a clear roadmap to keep governments accountable for achievement of key deliverables and milestones
* ongoing development of a Strategy website.

## **Intersectionality and Diversity**

The diversity of people with disability needs to be understood, acknowledged and celebrated. Part of this involves an understanding of the concept of ‘intersectionality’. The Strategy recognises the importance of making sure actions taken to deliver on its Policy Priorities are implemented using an intersectional and diversity lens.

Intersectionality recognises that a person or group of people can be affected by multiple forms of discrimination and disadvantage due to their race, sex, gender identity, sexual orientation, impairment, class, religion, age, social origin and other identity markers.

It acknowledges identity markers (such as “Woman”, “Disabled”, “Aboriginal or Torres Strait Islander”, “Culturally and Linguistically Diverse”, “LGBTIQA+”) do not exist independently; rather, each informs the other and can have overlapping and compounding effects. These effects can also be felt by other diverse groups of people with disability – for example, those in rural or remote areas.

The impact of this can be illustrated through considering outcomes for some of these groups. For example, people with disability aged 15–64 years experience lower levels of employment (47.8% are employed) than people without disability aged 15–64 (80.3%). Levels of employment also vary significantly for different groups:[[132]](#endnote-132)

* Women with disability aged 15–64 years (45.9%) compared with men with disability aged 15–64 years (49.9%)
* Young people (15–24 years) with disability (39.6%) compared with young people without disability (63.5%)
* People with disability born overseas who speak a main language other than English at home (38.3%) compared with people with disability who were born in Australia who mainly speak English at home (48.0%)
* Aboriginal and Torres Strait Islander people with disability (28.3%) compared with Aboriginal and Torres Strait Islander people without disability (31.4%), or compared to Aboriginal or Torres Strait Islander women with disability (26.8%).[[133]](#endnote-133)

Not only can intersectional discrimination impact on how these groups are viewed, understood and treated, but it also impacts on how they access, or are unable to access, resources, services and supports.

Policy responses and strategies which assume the experience and impact of disability is the same, can fail to take into account intersectional impacts disproportionately affecting groups of people with disability. Activities taken in line with the Strategy’s Policy Priorities should consider incorporating tailored approaches designed to enable and include people and groups who face intersectional barriers. For example, our work with Aboriginal and Torres Strait Islander people will be informed by the National Agreement on Closing the Gap.

## **Roles and Responsibilities**

Australian, state, territory and local governments, along with businesses, the community and the non-government sector all play a role in supporting people with disability to enjoy their human rights on an equal basis with others.

Clarifying these roles, especially with regards to the responsibilities of governments, supports the involvement of all parties in designing and implementing inclusive policies and programs for people with disability.

The Strategy recognises that all levels of government continue to play a role in providing mainstream and targeted services, supports and infrastructure systems to people with disability. Governments have obligations to provide services to all citizens and are responsible for making reasonable adjustments to accommodate people with disability so they can access and use those systems and services.

The table at Appendix 4 shows where one level of government holds *primary responsibility* for the delivery of a system. There is also a section in the table showing systems where responsibilities are shared to an extent that primary responsibility for delivery cannot be assigned to one level of government.

## **Guiding Principles**

To achieve the Strategy’s vision, governments are committed to the development and implementation of policies, programs, services and systems which reflect the human rights principles of the UN CRPD.

Therefore, the following Guiding Principles are based on Article 3 of the UN CRPD.

Governments have agreed to use these Guiding Principles when developing policies, programs, services and systems. It is vital that business, the non-government sector and the broader community also consider how they can apply these principles.

|  |  |
| --- | --- |
| Principle One | Respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons |
| Principle Two | Non-discrimination |
| Principle Three | Full and effective participation and inclusion in society |
| Principle Four | Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity |
| Principle Five | Equality of opportunity |
| Principle Six | Accessibility |
| Principle Seven | Equality of people |
| Principle Eight | Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities |

Refer to Appendix 5 for further details on the principles, and guidance on how to apply them.

## **Targeted Action Plans**

Targeted Action Plans apply an intensive focus over one to three years to achieve specific deliverables which improve outcomes for people with disability.

Each Targeted Action Plan is commissioned and endorsed by disability ministers and includes a series of targeted and coordinated actions from governments. Actions are based on available evidence and people with disability are involved in the implementation of the actions. The annual progress report for each Targeted Action Plan provides an update on what has been delivered against each action.

The five Targeted Action Plans launched with the Strategy are focused on improving employment, community attitudes, early childhood, safety, and emergency management.

Over the life of the Strategy, new Targeted Action Plans will be commissioned. The focus of the Targeted Action Plans will be informed through engagement with people with disability. All Targeted Action Plans will be published on the Strategy’s website.

## **Associated Plans**

Associated Plans are strategies, plans, roadmaps and frameworks that focus on improving aspects of Australian life for people with disability and also work to deliver the vision of the Strategy. Associated Plans can be sector specific (e.g. the arts sector) or for a specific segment of the community (e.g. people with intellectual disability) and generally run for three to ten years.

Associated Plans were introduced to provide a more coordinated, long-term approach to how governments work to improve outcomes for people with disability. All Associated Plans clearly identify how they contribute to achieving the outcomes of the Strategy.

This recognises that the Strategy sets the high-level policy framework for disability to guide public policy decisions by governments and outside of government.

Associated Plans show how different government initiatives work together to support people with disability. They are developed in consultation with people with disability and they track, monitor and report on their achievements against the Outcome Areas of the Strategy.

To increase recognition of Associated Plans and other documents, they may feature the Strategy brand set out below. All Associated Plans will be published on the Strategy’s website.



Business and community organisations may also show their commitment to the Strategy by using the logos below.



## **Outcomes Framework**

The Outcomes Framework measures, tracks and reports on outcomes for people with disability. This includes measuring the contribution key systems such as healthcare, housing, education and employment are making to achieve outcomes. It also tracks the changes in outcomes happening over time for people with disability.

The annual Outcomes Framework reports and dashboard (an interactive online reporting tool) show what progress is being made against each Policy Priority in the Strategy. Where data is available, information is disaggregated to provide detail on what progress is being made for specific cohorts of people with disability.

Governments will work together to link de-identified data between systems, to improve measures and to refine the Outcomes Framework. The Outcomes Framework is published on the Strategy’s website. The version launched with the Strategy has future measures that will be introduced when data is improved and these measures will replace the measures used at launch.

## **Improving the Data**

Governments are committed to collecting and sharing relevant data to support effective monitoring and reporting of outcomes for people with disability in order to drive change. Australian state and territory data, for both disability-specific and mainstream service systems, will be essential for measuring outcomes and tracking the degree of change.

Governments will work together to develop a comprehensive data strategy in 2022. This will ensure data needed to measure outcomes for people with disability is collected, shared and progressively improved over the life of the Strategy. It will also identify where data needs to be linked between systems to improve our understanding of the impact of the Strategy. Linked de-identified data will provide improved disaggregated data, support the development of new measures and deliver deeper insights into how and why certain outcomes occur.

The National Disability Data Asset (NDDA) could provide a better understanding of how people with disability are supported through services, payments and programs across multiple service systems through the linkage, improvement and sharing of de-identified data.

Improving data to track progress against the Outcomes Framework will also support evaluations and policy development, and will lead to improved outcomes for people with disability.

## **Reporting under the Strategy**

All levels of government have committed to deliver more comprehensive and visible reporting. Reporting under the Strategy aims to ensure accountability and build the evidence base for making informed decisions on areas of future focus. It will also drive improvements in the design and implementation of future policies and programs. Reporting under the Strategy will be an important input to reports developed to meet Australia’s reporting obligations under the UN CRPD, and will support Australia in continuing to strengthen its response to ensure the equal rights of people with disability in line with the UN CRPD.

Reporting will capture available information from Australian Government agencies, state, territory and local governments, the Australian Human Rights Commission, state and territory human rights/anti-discrimination bodies and the National Disability Insurance Agency (NDIA). It will also capture information from people with disability, Disability Representative Organisations and the Strategy’s Advisory Council (the Advisory Council). Reporting under the Strategy will complement the reporting already undertaken by state and territory governments, and many local governments, as part of their own disability plans.

* **Targeted Action Plans Report** – Produced annually on a financial year basis. This high-level report will cover the implementation of the Targeted Action Plans, actions and successes, other key steps taken or planned, and overall status. It will be coordinated by the Australian Government.
* Outcome Framework Report and Dashboard – Updated annually, the Outcomes Framework Report and Dashboard will publish a detailed spreadsheet and high-level data against the outcomes of the Strategy as per the Outcomes Framework. It will be prepared by a third-party data specialist.
* **Implementation Report** – Produced every two years. This implementation report will include the voice of people with disability and the broader community. It will include progress against disability initiatives at all levels of government. People with disability, the Australian Human Rights Commission, and key stakeholders, including the Advisory Council, will be consulted in preparing the report before it is provided for endorsement by Australian, state and territory disability ministers.
* **Evaluation reports** – The two Major Evaluation Reports (2025 and 2029) will provide analysis and findings from independent evaluations of the Strategy, including recommendations for improvement. They will be undertaken by an independent reviewer. People with disability, the Australian Human Rights Commission, and key stakeholders, including the Advisory Council, will be consulted before the report is endorsed by Australian, state and territory disability ministers.

A number of ongoing projects will strengthen the quality and quantity of data available for reporting. Over time, reporting will improve, increasing the evidence base to make informed decisions to enhance service systems.

Reports developed under the Strategy will be available on the Strategy’s website and will be in accessible formats.

## **Evaluating what we do**

Evaluation is critical to knowing what is working well and what needs improvement for people with disability. Evaluations of policies, programs and systems are key to understanding why current outcomes are being achieved and point to strengths and gaps in these interventions. The information and results provided by evaluation will inform investment decisions and the design of future policies and programs.

Evaluations will be able to show how policies, services and programs have contributed to the outcomes under the Strategy. A list of planned evaluations and links to published evaluation reports will be made available on the Strategy’s website.

Evaluations will enable a clear link to be drawn between the Outcomes Framework, Outcome Areas, Policy Priorities and their impact on the lives of people with disability.

The Strategy’s Evaluation Good Practice Guide Checklist, published on the Strategy’s website, will help governments to conduct evaluations for disability specific and mainstream policies and services.

Governments will work together with people with disability to develop a guide on how to involve people with disability in evaluation. This is expected to be completed by the end of 2022 and will be published on the Strategy’s website.

Under the Strategy, governments are making a commitment to:

* publicly list planned policy, program and system evaluations
* consider the Strategy’s Evaluation Good Practice Guide Checklist when conducting evaluations involving people with disability
* publish evaluation findings to build the evidence base and help inform policy decisions across Australia
* include key findings from evaluations in Strategy’s two-yearly Implementation Reports.

## **Building the Evidence Base**

Building the evidence base is a key part of the Strategy. The Strategy will do this by supporting the development of disability research, including the translation of this research into tangible concepts and policies supporting the outcomes of the Strategy. This will encourage continued reform of disability and mainstream policy in government, in business and in the non-government sector.

The National Disability Research Partnership (the Partnership) will be instrumental in building the evidence base. The Partnership will facilitate a collaborative, translational research program through partnerships between academics, people with disability, their families and carers, peak advocacy and consumer groups, governments and service providers to conduct cutting-edge policy-relevant research that enables people with disability to participate fully in society.

The Partnership promotes the use of evidence-informed policy and practice to ensure people with disability have equal opportunities and are included in all aspects of community life.

​The Partnership focuses on disability and mainstream services including education, health, housing, and justice, and facilitates research recognising the diversity of experiences for people with disability.

The Partnership’s research agenda and practical guides for disability inclusive research will help drive improvements for people with disability.

## **The Governance Model**

The Governance Model (the Model) sets out a visible and robust accountability structure to drive implementation and decision-making under the Strategy. The Model helps governments work together in a coordinated way to achieve the goals of the Strategy. It identifies and prioritises areas of focus, drives change across these areas and reports on progress made to improve the lives of people with disability.

Mechanisms to achieve this include:

* establishing the Advisory Council, which will play an important role in both governance and the engagement of people with disability under the Strategy
* identifying and prioritising key areas of focus under the Strategy
* promoting the Strategy and the work being undertaken to drive change
* creating initiatives to address Strategy priorities – for example, Targeted Action Plans
* influencing or guiding government policies at local, state and national levels
* sharing knowledge, such as best practices and research.

Further detail on this Model is at Appendix 6.

## **Engaging People with Disability**

People with disability will play a central and active role in the Strategy over its life. For the Strategy to be implemented effectively, the views of people with disability, disability sector stakeholders and diverse groups within the sector must be heard and considered. Engagement with groups such as Aboriginal and Torres Strait Islander people with disability and people with disability from culturally and linguistically diverse communities will ensure inclusion and consideration of a broad range of views.

The Strategy’s Engagement Plan (the Engagement Plan) is published on the Strategy’s website. Itoutlines the ways people with disability will be engaged over the life of the Strategy to inform its implementation, monitoring and reporting, and the future direction of policy.

The Engagement Plan will give people with disability a voice in the implementation and monitoring of the Strategy and a structured, ongoing role in influencing how it is addressing their rights and needs. Ensuring people with disability can make a tangible difference to a Strategy designed to assist them, is an important step in helping the Strategy achieve its vision and purpose. The Engagement Plan will also ensure people with disability are connected with governments and can be involved in guiding governments to consider how policies and programs impact on their lives.

The Engagement Plan includes:

* The Advisory Council, which provides advice to Australian, state, territory and local governments, and to disability ministers on implementing and monitoring the Strategy.
* The Strategy’s public forums and consultations, one of which will be held every year from 2022 to 2031 on a rotating basis, including:

– the Strategy’s National Public Forum to enable all people with disability to play an active role in shaping implementation of the Strategy

– state and territory-based Strategy Forums over the term of the Strategy, hosted by jurisdictions in years the National Public Forum is not held

– public consultations over the term of the Strategy, to align with the Major Evaluations.

* A commitment to involve people with disability and organisations such as the Australian Human Rights Commission, Disabled People’s Organisations and Disability Representative Organisations in designing and delivering the public forums and consultations. The forums and consultations may be conducted in a range of ways and could include face-to-face and virtual elements.
* The development of Good Practice Guidelines for the Engagement of People with Disability. The Guidelines will facilitate improvements in the engagement and inclusion of people with disability in community consultation, policy development and government decision-making.



## **The Strategy’s Roadmap (Roadmap)**

The Roadmap gives a simple overview of the key deliverables being produced under the Strategy. This provides transparency of the road ahead and accountability for delivery. It helps raise awareness of when reports are expected to be delivered and when consultations and other major activities will occur. The Roadmap will be updated as required.

The Roadmap is published on the Strategy’s website.

## **The Strategy’s Website**

A dedicated website accessible to people with disability has been created to make it easier to locate the latest information on the Strategy.

The website provides easy access to:

* the Strategy and its supporting documents, such as the Outcomes Framework, the Engagement Plan and Roadmap
* an overview of the disability landscape including Australia’s international obligations, state and territory disability plans and other related frameworks
* information on the rights of people with disability through sources such as the UN CRPD, the *Disability Discrimination Act 1992* and Disability Standards, and other guidelines
* the Strategy reports, including Targeted Action Plans Report, Outcomes Framework Reports and Dashboard, two-yearly Implementation Reports and Evaluation Reports
* research, evaluation and data to show how outcomes for people with disability are tracking and to provide the evidence required to inform policy.

The website complements the Disability Gateway, which provides information and services to help people with disability and their family, friends and carers access the support they need in Australia.

Both websites have been developed following the Australian Government’s Digital Service Standards. This includes ensuring the websites are accessible and inclusive of all users. The websites will be expanded over time.

The Strategy’s website is at [www.disabilitygateway.gov.au/ads](http://www.disabilitygateway.gov.au/ads) and the Disability Gateway is at [www.disabilitygateway.gov.au](http://www.disabilitygateway.gov.au)

# **Appendices**

## **Appendix 1 Development of the Strategy**

Consultation

The voices of people with disability, their families, friends, carers, advocacy organisations, peak bodies and service providers were central to developing theStrategy.

Consultations on the Strategy were designed and delivered in collaboration with people with disability. The consultations were flexible and adaptable to provide a range of different ways for people with disability to participate. The consultations also had a focus on engaging directly with people who do not typically participate in high numbers in public consultation processes.

All consultation activities were delivered in a range of accessible formats. This included the production of Easy Read and Auslan materials, captioning, the use of interpreters, and the ability to provide submissions in a range of formats (e.g. written, audio or video). Many of the focus groups, workshops and forums were co-facilitated by people with disability and run face-to-face where possible, as well as through online platforms to consult in a COVID-safe environment.

Consultations were run in stages over three years to enable people with disability to have a say during all phases of developing the Strategy.

In 2018, targeted consultations were held with around 150 people from 80 organisations. These consultations focused on the *National Disability Strategy 2010-2020* to understand what worked well and should be retained in a new Strategy for beyond 2020, and what could be improved.

In 2019, Stage 1 consultations were held to inform development of the new Strategy. These consultations reached around 3,000 people through 17 community workshops, consultations with Aboriginal and Torres Strait Islander people with disability, an online public survey and 15 targeted stakeholder meetings.

The advice people provided in the 2018 and 2019 consultations was used as a key input into the National Disability Strategy Position Paper (the Position Paper), which was publicly released in July 2020. The Position Paper was also informed by a number of reviews and inquiries into the *National Disability Strategy 2010-2020*.

The Position Paper outlined governments’ proposals for the new Strategy and formed the basis of Stage 2 consultations held in the second half of 2020, which saw:

* 237 submissions from people and organisations with feedback on the proposed features of the new Strategy
* more than 800 people registered for a webinar on the new Strategy, hosted by the Australian Human Rights Commission and Centre of Research Excellence in Disability and Health
* 132 people participate in 18 focus groups with cohorts of people with disability who did not participate in high numbers during Stage 1 consultations
* 102 people participate in five cross-sector collaborative workshops
* a series of workshops held directly with Disability Representative Organisations.

In addition, 74 submissions were received on a separate public submission process on the Outcomes Framework proposed for the new Strategy.

Reports on the Stage 1 and Stage 2 National Disability Strategy consultations are available on the [Department of Social Services website](http://www.dss.gov.au).

Reviews and Reports that Informed the Strategy

A series of reviews, inquiries and reports were conducted that looked at the *National Disability Strategy 2010-2020*, National Disability Agreement, and the rights of people with disability. These included:

* the Senate Inquiry report into the delivery of outcomes under the *National Disability Strategy 2010-2020* to build inclusive and accessible communities (2017)
* the Social Policy Research Centre’s independent review of the implementation of the *National Disability Strategy 2010-2020* (2018)
* the Productivity Commission Review of the National Disability Agreement (2019)
* the Australian Government reports and the Civil Society reports to the United Nations Committee on the Rights of Persons with Disabilities and the UN Committee’s Concluding Observations (2013, 2019)
* The Royal Commission into the Violence, Abuse, Neglect and Exploitation of People with Disability, including the hearings and interim report.

The findings and recommendations from these have informed the development of the Strategy.

The Outcome

Feedback from consultations and the findings and recommendations from the reviews and reports listed above, has resulted in the Strategy having stronger reporting, monitoring and implementation than its predecessor. It has also resulted in a stronger and a more structured role for people with disability in the implementation of the Strategy, as outlined in the Engagement Plan. These structures mean people with disability will be able to have a say on the things that are important to them and will influence the future direction of the Strategy, including actions and investments made as part of it.

**Appendix 2
The UN CRPD, *Disability Discrimination Act 1992*, and the Australian Human Rights Commission**

UN CRPD

In 2008, Australia ratified the UN CRPD. The UN CRPD is a human rights treaty establishing normative standards and principles for the treatment of people with disability under international human rights law. Its purpose is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

In line with Australia’s commitments under the UN CRPD, the Strategy will play an important role in protecting, promoting and realising the human rights of people with disability. The Strategy will also contribute to Australia’s reporting responsibilities under the UN CRPD.

*Disability Discrimination Act 1992*

The Strategy is reflective of the objects of the *Disability Discrimination Act 1992* (DDA), which is in place to eliminate discrimination against people with disability as far as possible. This Act also aims to promote community acceptance of the principle that people with disability have the same fundamental rights as all members of the community.

The DDA provides that direct and indirect discrimination on the basis of disability is unlawful in a broad range of areas of public life. This includes employment, education, access to premises and access to goods, services and facilities.

Employment

Subject to some exceptions, it is unlawful to discriminate against a person on the ground of that person’s disability in determining who should be offered employment, or the terms and conditions on which employment is offered, or by dismissing the employee, or subjecting the employee to any other detriment.

Further, people with disability may face barriers in their employment because of a feature of their work situation which could readily be altered. Making these changes is referred to as ‘reasonable adjustments’. Employers can be required by law to make reasonable adjustments to the workplace. Failure to do so may be discrimination. Examples of adjustments include changes to work premises, changes to work schedules, modifying equipment and providing training.

Standards

The Attorney-General, under section 31(1) of the DDA, has formulated three standards that aim to provide more detail on rights and responsibilities about equal access and opportunity for people with a disability:

* The Disability Standards for Accessible Public Transport 2002 (Transport Standards) to enable public transport operators and providers to remove discrimination from public transport services.
* The Disability (Access to Premises – Buildings) Standards 2010 (Premises Standards) aim to provide people with disability with dignified and equitable access to buildings and provide certainty to industry that they are complying with the DDA.
* The Disability Standards for Education 2005 (Education Standards) clarify the obligations of education and training providers, and seek to ensure students with disability can access and participate in education on the same basis as other students.

Australian Human Rights Commission

The Australian Human Rights Commission is accredited as an A-status national institution under the Principles Relating to the Status of National Institutions (the Paris Principles).

The Australian Human Rights Commission is an independent statutory body with functions relating to education and awareness training, investigating complaints of unlawful discrimination, and conducting national inquiries and reporting on issues of human rights concern.

The Australian Human Rights Commission, through the Disability Discrimination Commissioner, works with governments, businesses and civil society to help individuals and organisations understand their rights and meet their legal responsibilities.

The Australian Human Rights Commission undertakes educational programs to raise awareness of the human rights of people with disabilities, ensuring people with disability and their representatives are actively involved and represented in its awareness campaigns and strategies.

The Disability Discrimination Commissioner leads the Australian Human Rights Commission’s work relating to the rights of persons with disabilities, including:

* promoting understanding and acceptance of, and compliance with, the DDA
* encouraging reform by promoting disability standards and guidelines
* engaging with stakeholders to address disability discrimination in the workplace and in the community
* addressing barriers to equality and participation caused by disability discrimination
* undertaking research and education projects to combat the attitudes and stereotypes that can contribute to disability discrimination
* implementing and monitoring actions relating to the UN CRPD
* building the knowledge and capacity of domestic and international organisations to understand the UN CRPD.

## **Appendix 3 Advocacy**

Advocacy helps safeguard people’s rights and overcome barriers to their inclusion and participation in the community.

Disability advocacy supports people with disability by ensuring their rights are maintained, promoted and valued. It can enable people with disability to actively participate in decisions and processes which advance their rights, wellbeing and interests. For some people with disability this involves being supported by advocacy services to participate in the decisions that affect their lives, especially around access to services and support, and to be actively involved in their communities.

Advocacy can support people with disability in all areas of their lives and in ways which relate to all of the Outcome Areas of the Strategy. It also helps to identify where the quality of services and support provided to people with disability is inadequate or inhibits their participation.

Individual advocacy supports people with disability to understand and exercise their rights, through one-on-one support or by supporting people to advocate by themselves or on a group basis.

Systemic advocacy seeks to introduce and influence longer-term changes to ensure the rights of people with disability are realised and upheld through changes to legislation, policy and service practices. Systemic advocacy works towards raising and promoting community awareness and education of disability issues.

## **Appendix 4 Roles and Responsibilities of Governments**

Listing key government roles and responsibilities helps everyone understand which level of government is responsible for the systems that may be used by people with disability.

In many cases, more than one level of government has some responsibility for a support, service or system. For example, the Australian Government and state and territory governments are all involved in funding, delivering and/or regulating systems like education, community housing, and the NDIS.

The table on government roles and responsibilities that is included in this Appendix shows where one level of government holds *primary responsibility* for the delivery of a system. There is also a section in the table showing systems where responsibilities are shared to an extent that primary responsibility for delivery cannot be assigned to one level of government.

More detailed information about roles and responsibilities, as well as some of the key systems outside of government, can be accessed through the Strategy’s website. This information includes:

* points of contact for people to identify and contact the agency responsible for delivering the service they want to access or to handle a specific issue they are experiencing
* legislation and agreements outlining the funding, regulation and operational responsibility for those services and systems
* the NDIS Applied Principles and Tables of Support setting out responsibilities between the NDIS and other service systems.

People who do not have access to the internet can contact the National Disability Information Gateway telephone helpline on 1800 643 787.

The table on government roles and responsibilities is high-level and does not include every support, service or system. It lists the main service and support systems within the scope of the Strategy’s Outcome Areas. The table also does not include all systems provided by governments.

All governments will work together to seek collaborative solutions to progress the Strategy and enhance access and inclusion for people with disability where roles and responsibilities cross multiple agencies or levels of government.

Table on Government Roles and Responsibilities

|  |  |
| --- | --- |
| Primary responsibility for delivery lies with the Australian Government  | Primary responsibility for delivery lies with state and territory governments |
| * NDIS\* (administration)
* Information, Linkages and Capacity Building (ILC)
* NDIS Quality and Safeguards Commission
* Employment services
* Income support payments
* Federal justice system
* Australian Federal Police
* Child Care Subsidy
* Medicare Benefits Schedule
* General practitioners
* Pharmaceutical Benefits Scheme
* Aboriginal Community Controlled Health Organisations
* Aged Care system
* My Aged Care
* Veterans’ Care system
* Universities
* Hearing Services Program
* Commonwealth Ombudsman
* Australian Human Rights Commission
 | * Public, social and community housing
* Public hospitals
* Community health services
* Home and Community Care programs for under 65s
* Public transport services
* Public primary and secondary schools
* TAFE/Vocational Education and Training (VET)
* Kindergartens and pre-schools
* Jurisdictional court systems and correctional centres
* State and territory Police
* Guardianship, Public trustees and Ombudsman
* Child protection
* Community visitors programs for disability\*\*
* Domestic and family violence services
* Major sporting facilities
* State and territory human rights/anti-discrimination bodies
 |
| Primary responsibility for delivery lies with local governments\*\*\* | Responsibility for delivery is substantially shared across levels of government |
| * Urban planning/design of the built environment
* Accessible buildings
* Local development planning
* Local roads, bikeways and footpaths
* Local parks and recreational facilities
* Local sports grounds
* Public toilets
* Playgrounds
* Council-run childcare and aged care centres
* Municipal services
* Parking regulation
* Public libraries and community halls
 | * NDIS\* (funding and shared governance)
* Mental health supports and services
* Disability advocacy services – individual and systemic
* Concessions for government services
* Community infrastructure
* Arts and cultural funding and support
* Public museums, galleries and performance facilities
 |

**Note**: This listing of roles and responsibilities is not comprehensive and some responsibilities may change over time.

\* The National Disability Insurance Scheme (NDIS) is a nationally based scheme jointly governed and funded by the Australian, state and territory governments. Delivery of the NDIS is the responsibility of the National Disability Insurance Agency, a Commonwealth Corporate Entity.

\*\* Not all states have community visitors programs for disability (e.g. Tasmania, Western Australia).

\*\*\* Local governments are established by state and territory governments (except the ACT) to deliver a range of municipal services and infrastructure, which is determined by each state and territory government. Listed examples of key responsibilities of most local governments are not representative of the responsibilities of all local governments.

The Australian, state and territory, and local governments make and uphold laws, rules and regulations, and agreements that play a role in supporting people with disability and upholding their rights. Examples include:

* The *Disability Discrimination Act 1992* (Commonwealth) and the Standards made under this Act
* The *National Disability Insurance Scheme Act 2013* (Commonwealth) and NDIS Rules
* Bilateral Agreements on the NDIS
* NDIS Applied Principles and Tables of Support
* National guidelines for safety, employment, and disability access
* Agreements between the Australian Government and state and territory governments under the Intergovernmental Agreement on Federal Financial Relations
* State and territory disability services Acts and disability inclusion Acts
* State regulations on planning, development and management of state-based infrastructure and resources
* Local government planning and regulation.

There is also a range of international instruments that establish normative standards and principles for the treatment of people with disability. Examples include:

* The UN CRPD
* Convention on the Rights of the Child, Convention on the Elimination of all Forms of Discrimination Against Women, International Convention on the Elimination of All Forms of Racial Discrimination, International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, and the Declaration on the Rights of Indigenous Peoples.

## **Appendix 5 Guiding Principles**

The table below sets out prompting questions to help governments, business and the community apply these principles.

The prompting questions aim to draw out the key issues which may need to be addressed so the policy, program, service or system is appropriate and accessible for people with disability.

These questions will be supplemented with a guide to these principles which will be released in 2022 and published on the Strategy’s website.

|  |
| --- |
| Principle 1: Respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons |
| * Does the policy/program/service/system (proposal) allow people with disability to make their own choices in the same way as people without disability?
* Does the proposal give access to supported decision making as required?
 |
| Principle 2: Non-discrimination |
| * Does the proposal avoid both direct and indirect discrimination?
* Are reasonable adjustments available that meet the needs of each individual, so people with disability can exercise the same rights and freedoms as other Australians?
* Is the proposal compliant with the Disability Discrimination Act 1992, the UN CRPD and with state and territory anti-discrimination legislation?
 |
| Principle 3: Full and effective participation and inclusion in society |
| * Will the proposal support people to fulfil their potential?
* Will the proposal provide for a person’s inclusion and participation in all aspects of community life?
 |
| Principle 4: Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity |
| * Does the proposal respect and recognise the equal value, worth and dignity of all people with disability?
 |
| Principle 5: Equality of opportunity |
| * Does the proposal provide for people (including people facing multiple forms of discrimination) to be treated fairly, including by taking positive actions to accommodate differences?
* Are there any barriers or processes in the proposal that unfairly limit people with disability from achieving their goals?
 |
| Principle 6: Accessibility |
| * Can people with disability access all aspects of the proposal, including the information, technology, services and location?
* Have the principles of universal design been applied?
 |
| Principle 7: Equality of people  |
| * Does the proposal support the full development, advancement, empowerment and equality of all people irrespective of differences and identities, including in relation to gender, age, sexuality, race, or cultural background?
* Has consideration been given to ensure policies/programs/services/systems are culturally safe and appropriate?
 |
| Principle 8: Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities |
| * Are children with disability being treated equally to children without disability?
* Is the best interest of the child a primary consideration?
* Are children with disability being given the opportunity to participate in decisions based on their age and maturity, and on an equal basis with other children?
* Do children with disability have access to appropriate supports to make or participate in making decisions?
 |

The Guiding Principles and prompting questions aim to assist individuals and organisations to consider whether their proposal upholds the rights of people with disability in accordance with the UN CRPD. They do not exhaustively indicate when Australia’s obligations under the UN CRPD are being fulfilled. As such, those using the Guiding Principles are encouraged to:

* look at the Guide to the Guiding Principles (available on the Strategy’s website by the end of 2022)
* reference general comments and statements noting they provide interpretive guidance to the provisions of CRPD.

## **Appendix 6 Governance**

The Governance Model for the Strategy consists of three main components:

* **sources of input and advice** that will feed into decisions on the operation of the Strategy
* the **decision-making** process that will provide direction and accountability
* the **coordination** of the governance process.

Sources of input and advice

As Australia’s disability policy framework, the Strategy will receive input and advice from a broad range of sources:

* **People with disability** – are supported to have their say on the Strategy via a range of mechanisms identified in the Engagement Plan, including the Advisory Council.
* **Jurisdictional expert advice** – for example, state and territory governments, disability advisory bodies, ministerial advisory councils, human rights/anti-discrimination bodies, and input from local governments.
* **Australian Human Rights Commission** – in line with their role as the Australia’s National Human Rights Institution for the protection and promotion of human rights.
* **Australian Government agencies** – a working group of Australian Government agencies discusses implementation of the Strategy across the major Australian Government departments.
* **Ad hoc input** – a range of stakeholders are consulted on a regular basis, or when appropriate, to provide topical and timely input on particular matters. Stakeholders could include people with disability, peak bodies, service providers, Disability Representative Organisations, research bodies, data specialists etc.

The Engagement Plan includes periodic public consultations to ensure people with disability and their representatives can have genuine, regular input.

Decision-making

Major decisions on the Strategy are approved by a forum comprising Australian Government, state and territory disability ministers. Ministers are supported by their own government departments with responsibility for disability matters in their jurisdiction.

Overall strategic oversight and direction for the Strategy is managed by a forum of Deputy Department Heads from the Australian Government and state and territory government departments with responsibility for disability matters.

General operational decisions around the implementation of the Strategy will be made by the Australian Government with state and territory governments. Consultation and engagement with stakeholders will guide these decisions. Australian Government ministerial approval will be sought where appropriate.

All levels of government, businesses, communities and organisations are encouraged to implement the Strategy in a way that aligns with the Guiding Principles and is appropriate to their circumstances and stakeholders. This can be done through specific disability strategies and plans, while still reflecting the vision and purpose of the Strategy.

The Advisory Council will periodically provide advice to disability ministers to ensure people with disability have a direct line of advice to the top line of decision makers on matters related to the Strategy. As part of this role, the Advisory Council will engage people with disability and the broader disability sector through sub-groups and other initiatives outlined in the Strategy’s Engagement Plan.

Coordination

A Central Policy and Implementation Unit has been established to drive implementation of the Strategy and manage the governance process. The unit is managed by the Australian Government.

As the success of the Strategy relies heavily on governments working together, states and territories are responsible for ensuring communications between the Central Policy and Implementation Unit and their governments are as streamlined and simple as possible.

## **Endnotes**

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