

Response to the National Disability Strategy Position Paper



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Vision: an inclusive Australian society that enables people with disability to fulfil their potential as equal citizens.

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Executive Summary

The Centre for Universal Design Australia (CUDA) shares the vision for an inclusive Australian society that enables people with disability to fulfil their potential as equal citizens.

We recognise the National Disability Strategy as Australia’s response to ratification of the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and as a means of ensuring that the principles underpinning the CPRD are incorporated into all policies and programs affecting Australians. Australia also has obligations under the Sustainable Development Goals (SDGs)¹ to “leave no-one behind”. Both the CRPD and the SDGs explicitly cite Universal Design as the means by which to be inclusive, and call upon all three sectors to take responsibility: governments, business, and community. Both Conventions cover people of all ages, not just people aged 18-65 years.

We note that the 2010-2020 Strategy sought to promote and guide action and reform across all Australian governments, private enterprises and the broader community and to provide leadership for a community-wide shift in attitudes to look beyond disability.

This paper is the response by CUDA to the new National Disability Strategy Position Paper. In addition to our responses to the eight questions, **CUDA recommends that Universal Design be a guiding framework for action and evaluation under the new Strategy.**

About Centre for Universal Design Australia (CUDA)

CUDA is a registered charity with the aim of creating a more inclusive world where everyone is included everywhere, every time regardless of their background, age or level of capability. We advocate for the implementation of Universal Design across all fields of design because it is the means by which to achieve inclusive communities.

Universal Design

Universal Design is an approach to designing goods, services, built environments and communications technology so that they include as many people as possible without the need for specialised or separate solutions². This includes the design of policies, plans, and strategies.

The most visible beneficiaries of Universal Design are people with disability, people with chronic health conditions, and older people, but other groups with diverse characteristics and needs are recognised and included.

¹ United Nations, Sustainable Development Goals and Disability <https://www.addc.org.au/home/disability-development/disability-and-the-sustainable-development-goals/>

²Center for Universal Design, (1997) https://projects.ncsu.edu/ncsu/design/cud/about_ud/about_ud.htm

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Incorporating Universal Design does not disadvantage any group in society.

Indeed, Universal Design improves the convenience and ease of use for everyone. This includes carers, parents and small children, people from culturally and linguistically diverse communities, and people who identify with multiple intersecting groups.

The concept of Universal Design accepts that some individuals need support and custom designs, including assistive technologies to support their independence. These supports are individualised and usually provided by disability-specific services. However, most people with disability do not have access to disability services and all people need a universally designed society to participate in everyday life on an equal basis with others³. Disability-specific support is therefore an adjunct or “twin track” of mainstream policies, systems, and services; both work together⁴. This aligns with a disability-inclusive policy approach that prioritises addressing barriers through non-discrimination frameworks and improved accessibility as two of the three key aspects to promote inclusion, with the addition of assistive technologies and support services to enable participation⁵.

Question 1:

During the first stage of consultations we heard that the vision and the six outcome areas under the current Strategy are still the right ones. Do you have any comments on the vision and outcome areas being proposed for the new Strategy?

CUDA supports maintaining the vision of “an inclusive Australian society that enables people with disability to fulfil their potential as equal members of the community” and the six outcome areas of the current Strategy. This applies specifically to the proposed change from “citizens” to “members of the community”. The term citizen has closer ties with human rights. Member of the community implies a consumer approach.

However, clarity regarding the scope of each outcome area is necessary for consistent reporting and accountability for action. Reports on the 2010-2020 Strategy listed similar actions under different outcome areas depending on the jurisdiction and time period, making any assessment of progress or comparison impossible. This was particularly the case for outcome areas 1 and 4, which are too nebulous to guide action or allocate responsibility.

CUDA recommends revising outcome areas 1 and 4 for clarity, for example:

- 1. Inclusive and accessible built, social and virtual environments*
- 4. Individual and community support systems*

³ United Nations Convention on the Rights of Persons with Disabilities (2006).

<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

⁴ Office of the United Nations High Commissioner for Human Rights. (2017). Equality and non-discrimination under article 5 of the Convention on the Rights of Persons with Disabilities.

www.refworld.org/docid/58ad862d4.html

⁵ Devandas-Aguilar, C. (2016). Disability-inclusive policies.

www.un.org/ga/search/view_doc.asp?symbol=A/71/314

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CUDA observes that the Strategy's second implementation plan, 'Driving Action 2015–2018'⁶ added four new areas to the six priority action areas in the absence of community consultation. The mainstreaming approach that was recommended in the Shut Out report and evident in the NDS has been relegated to discrete projects that lack coordination across sectors, as the focus has shifted to the NDIS. The rights of people with disability appeared to be subordinate to economic imperatives of market efficiency and productivity gains.

The 2010-2020 National Disability Strategy provided “a shared agenda to help achieve the vision of an inclusive Australian society that enables people with disability to achieve their full potential as equal citizens”. It was supposed to “guide governments at all levels, together with business and the community sector, to consider the needs and rights of people with disability” (p. 15). The new Strategy needs more than a shared agenda; it requires a mechanism with measurable outcomes, clearly defined responsibilities, and a champion that will bring these various stakeholders together. It also requires external monitoring by independent organisations to provide accountability.

Question 2:

What do you think about the guiding principles proposed here?

In addition to the principles set out in Article 3 of the CRPD, the agreed principles remain relevant and should not be changed. CUDA recommends retaining the wording of the principles from the 2010-2020 National Disability Strategy.

CUDA notes that, in changing the wording of the principles, the Position Paper has changed their meaning. In particular, the 2010-2020 Strategy specifies a principle: *Universal approach - products, services environments and communities are accessible and useable by all people to the greatest extent possible without the need for specialised modification*. The Position Paper has reworded this: *Design universally - have the principles of universal design been applied where possible and has the project taken advantage of accessible and assistive technology where available?*

This re-wording has potential to create confusion and diminish the mainstreaming agenda of the National Disability Strategy. Assistive technology is internationally understood as a disability-specific support (comprising products and services responding to individual need and context); part of the “twin track” that complements accessible mainstream products, systems, and services.

To conflate “accessible technology” with “assistive technology” is a conceptual error with significant policy and legal ramifications.

International guidance on disability inclusive policies is founded on three pillars: non-discrimination, accessibility, and assistive technologies and support services⁷. The principle,

⁶ Department of Social Services. (2016). National Disability Strategy 2010-2020 Second Implementation Plan. www.dss.gov.au/disability-and-carers/programs-services/government-international/national-disability-strategy-second-implementation-plan

⁷ Devandas-Aguilar, C. (2016). Disability-inclusive policies. www.un.org/ga/search/view_doc.asp?symbol=A/71/314

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whether it is named “universal approach” or “design universally” should focus on the accessibility pillar with mainstream products, services and environments being accessible and usable. Provision of assistive technology products and services should constitute an important part of the support services pillar.

The new National Disability Strategy should evidence how it is informed by and situated within Australia’s response to the SDGs. The SDGs address the global challenges we face, including poverty, inequality, climate change, environmental degradation, peace and justice. The National Disability Strategy is cited to ensure that policy settings touching on several SDGs— including health, education, employment, income support systems and infrastructure—are inclusive of people with disability.

Question 3:

What is your view on the proposal for the new Strategy to have a stronger emphasis on improving community attitudes across all outcome areas?

There is no evidence from the previous Strategy to suggest why attitudes should be a stronger emphasis, and it is easier to help people change their actions than change their attitudes. It is important that the new Strategy maintain its focus on mainstreaming and direct policy actions with accountability, such as mandatory accessible public procurement of premises and products. New marketing or awareness-raising campaigns employing “ability” and other euphemistic language will not result in action and may reinforce outdated stereotypes.

The new Strategy should clearly place **Universal Design as an input across all priority outcomes areas**, informing design, delivery and evaluation of actions in all policies and programs. Changes in community attitudes could be evaluated as an outcome across all areas.

Question 4:

How do you think that clearly outlining what each government is responsible for could make it easier for people with disability to access the supports and services they need?

CUDA supports efforts to strengthen accountability in the new National Disability Strategy. We note the intention of the 2010-2020 National Disability Strategy to introduce high level reporting and trend data to track national progress but have observed notable failures of governments to work together to progress the shared agenda. The most notable example is the “aspirational target that all new homes will be of agreed universal design standards by 2020” where interim targets and completion dates were not set or tracked.

We are not convinced that any delineation of responsibilities or monitoring framework will lead to actions as intended or outcomes as desired. Leadership and commitment are required.

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Action is required. The Shut Out report stressed that Australia's ratification of the CRPD does not change the lives of people with disability until the intentions are translated into action: "Without a strong strategy, many participants feared that the Convention would fail to change the lives of Australians with disabilities and become just another piece of meaningless rhetoric"⁸.

CUDA reinforces the recommendation from the Shut Out Report to establish an Office of Disability within one of the central agencies of the Australian Government (e.g. Department of Prime Minister and Cabinet or Treasury) to lead its implementation and monitoring. The Office would lead disability inclusive policy across all portfolios and fund independent advocacy organisations to facilitate regular government and shadow reporting to the UN Committee on the Rights of Persons with Disabilities.

The wording of Question 4 reveals an assumption that the National Disability Strategy is about services for people with disability. The emphasis of the National Disability Strategy 2010-2020 is structural change, addressing physical, attitudinal, and virtual barriers in mainstream society to promote inclusion. This aligns with the key recommendations from the Shut Out report and reflects the voices of people with disability who contributed to it⁹. CUDA recommends that the National Disability Strategy retain its focus on structural change via inclusive mainstream policies, systems and environments rather than "tacked-on" disability-specific services and policies.

Question 5:

How do you think the Strategy should represent the role that the non-government sector plays in improving outcomes for people with disability?

The new National Disability Strategy should look to Closing the Gap for models of partnership, reporting, shared decision-making and accountability. Closing the Gap is built on a shared commitment and has seen a greater focus on partnership between governments and peak organisations¹⁰.

As mentioned in response to question 4, the 2010-2020 National Disability Strategy committed to provide minimum accessibility in all new housing by 2020. This did not happen. The commitment relied on partnership between governments and the private sector but lacked leadership and accountability. Nobody was responsible.

⁸ National People with Disabilities and Carers Council. (2009, p.61). Shut Out: the experience of people with disabilities and their families in Australia - National Disability Strategy Consultation Report. H. Department of Families, Community Services and Indigenous Affairs (FaHCSIA)
www.fahcsia.gov.au/sa/disability/pubs/policy/community_consult/Pages/default.aspx

⁹ Thill, C. (2015). Listening for policy change: how the voices of disabled people shaped Australia's National Disability Insurance Scheme. *Disability & Society*, 30(1), pp. 15-28. doi:10.1080/09687599.2014.987220

¹⁰ National Agreement on Closing the Gap <https://www.niaa.gov.au/indigenous-affairs/closing-gap>

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Question 6:

What kind of information on the Strategy's progress should governments make available to the public and how often should this information be made available?

CUDA supports annual reporting under the six outcome areas rather than announcements of government policy commitments.

Reports under the 2010-2020 National Disability Strategy described piecemeal projects being funded or delivered but failed to tell us whether people with disability and their families had better living conditions, support, health and opportunities.

The Evidence Base for the 2010-2020 Strategy¹¹, produced as a companion document in 2011, drew mostly on data from the Survey of Disability, Ageing and Carers (SDAC). The lack of data on environmental factors meant that it was not possible to evaluate the mediating effect of strategies proposed in the Strategy on the lives of people with disability. Data on processes and outcomes at both the individual level and the societal level of attitudes and infrastructure is needed to guide the implementation and evaluation of the next Strategy.

Many supporters of the 2010-2020 National Disability Strategy have lost confidence in government reports due to inaccuracies, bias, and delays. CUDA recommends publication of real-time, open-source, raw data from all relevant sources, including the non-government sector and all sources collated under the new National Disability Data Asset (NDDA). Funding for independent research and advocacy organisations would enable them to contribute to regular reporting and analysis and create a dialogue around the National Disability Strategy and avoid the perception of government reports being a public relations exercise.

Question 7

What do you think of the proposal to have Targeted Action Plans that focus on making improvements in specific areas within a defined period of time (for example within one, two or three years)?

CUDA supports implementation and monitoring of the National Disability Strategy as a whole. We would only support Targeted Action Plans if they align with the original Vision, Principles and Outcome Areas. Action plans must be specific, with a defined budget and accountable parties, and have measurable and enforceable targets supported by legislation and oversight of government and non-government organisations.

¹¹ Department of Families Housing Community Services and Indigenous Affairs. (2011). National Disability Strategy 2010-2020 Evidence Base. www.dss.gov.au/our-responsibilities/disability-and-carers/program-services/government-international/national-disability-strategy-discussion-paper-easy-english-version/national-disability-strategy-2010-2020-evidence-base

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CUDA observed a shift in priorities through reporting on the 2010-2020 National Disability Strategy in response to government policy agendas rather than shared agendas between people with disability, governments and non-government sectors. The changes in priority came without the extensive consultation that led to the Shut Out Report, and eroded the confidence of people with disability and their allies.

While an engagement plan may sound attractive on paper, experience from the 2010-2020 National Disability Strategy suggests this could delay action on implementing the Strategy. CUDA notes that attitudes often change in response to action, including legislation and funding. Awareness-raising or engagement campaigns do not necessarily result in actions or changes to attitudes.

Question 8

How could the proposed Engagement Plan ensure people with disability, and the disability community, are involved in the delivery and monitoring of the next Strategy?

CUDA suggests that the creation of an Office of Disability and Inclusion within a central agency of the Australian Government (as suggested in response to Question 4) is an opportune time to ensure that government leads by example in promoting inclusive attitudes and ensuring that people with disability lead the delivery and monitoring of the next Strategy.

A new Office would provide immediate opportunities to improve the Australian Government's record on disability employment and could develop workforce capacity in disability-inclusive policy and programs to be shared across portfolios over time. Assigning responsibility to a central agency would facilitate regular reporting to Cabinet. It would also go some way to addressing the reputational damage done to the Australian Government after leaving responsibility to the Department of Social Services, which has only reinforced the myth of the National Disability Strategy being about government disability services through casual references and inconsistent terminology within the Position Paper itself.

In summary, the National Disability Strategy needs to bring together a whole of community approach. This means focusing on people who design our world whether it be the built environment, products or digital technology. We cannot mainstream by only focusing on people with disability. The concept of universal design draws together all design disciplines for a coordinated mainstream approach. Therefore there should be more emphasis on education and implementation of universal design. Each of the outcome areas need to have a government or statutory body which is accountable, otherwise the desired outcome will not eventuate.

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