



Submission to the ACT Government Consultation:

ACT Disability Health Strategy

July 2023

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About VolunteeringACT

Volunteering and Contact ACT Ltd (trading as VolunteeringACT) is the peak body for volunteering and provides community information services in the Canberra region. We also deliver programs for people experiencing disadvantage and isolation, people with disability, and people needing support for mental wellness. VolunteeringACT has a vision of an inclusive Canberra, and a mission to foster inclusion by enabling participation and connection.

VolunteeringACT values collaboration, diversity, equity, innovation, integrity, and participation. VolunteeringACT is a people driven, service-focused organisation that represents the interests of 189 members, advocates for and supports volunteers, and engages with the broader Canberra community. Through our activities, we improve inclusivity, enable sustainable volunteering, and create a more resilient Canberra community.

VolunteeringACT is part of the National Network of Volunteering Peak Bodies in Australia.

VolunteeringACT acknowledges the Ngunnawal people as the traditional custodians of the Canberra region. VolunteeringACT pays respect to Aboriginal and Torres Strait Islander peoples and their vital ongoing contribution to our lands.

VolunteeringACT acknowledges volunteers of all genders and sexualities, with all abilities and from all cultures. Their skills, expertise, and time are critical to delivering services and programs, and in making Canberra a better place to live. We also acknowledge the contribution of the volunteer involving organisations that contribute to the health and happiness of our community.

This submission has been made as part of our commitment to ensuring the perspectives and expertise of volunteers, volunteer involving organisations and volunteer leaders informs development of public policy and contributes to achievement of positive social, economic, and environmental outcomes. The content has been informed by the experiences of organisations in our membership and networks, and our experiences of engaging with and delivering services to people living with mental ill health, people with multiple/complex needs including those with a dual diagnosis of substance misuse and mental health, and people with disability, including psychosocial conditions.

Introduction

VolunteeringACT welcomes the opportunity to provide a response to the draft ACT Disability Health Strategy. We support the ACT government's recognition of and response to the specific healthcare needs of people with disability in our community. We also support the key goals and guiding principles of the draft Disability Health Strategy (the Strategy) and its commitment to ensuring that the development and implementation of the Strategy is co-designed with people with disability.

We have provided a series of key recommendations that we believe would strengthen the Strategy below, with further details provided on the following pages.

Recommendations

- 1. That the Strategy clearly articulates how it will align with and inform existing ACT Disability and ACT Health strategies and frameworks to enable a cohesive and strengthened approach to ensuring people with disability attain the highest possible healthcare – free from discrimination and on equal terms with all people in the ACT.**
- 2. That Strategy implementation is supported by detailed, robust, fully costed, and resourced Action Plans.**
- 3. That the Strategy and its action plans provide genuine opportunities for meaningful co-design and co-production with a wide range of people with disability in the design, delivery and evaluation of activities - and that adequate resourcing is provided to achieve this.**
- 4. That the Strategy ensures provision of accessible health information is standard practice across the ACT health system and that adequate resourcing is committed in Budget processes and implementation resourcing to enable this.**
- 5. That the Strategy supports greater investment at the planning and development stage and recognition within Budgets to ensure all ACT health services have inclusive design at the centre, as a minimal standard.**
- 6. That the Strategy includes reference to and consideration of volunteers as an integral element of the health workforce when designing, resourcing, and implementing workforce initiatives.**
- 7. That the Strategy recognises and supports volunteering as a potential pathway to employment for people with disability within the health workforce and allocates funding to ensure the expansion of an ACT Inclusive Volunteering Pathways to Employment Program for people with disability.**
- 8. That the Strategy is strengthened to include clear priorities and actions in relation to monitoring and evaluation. This should include development of a robust monitoring and evaluation framework that aligns with existing data collection and monitoring frameworks and processes within the ACT health system and other key areas of intersection – including the future ACT Volunteering Strategy 2023-2028 Monitoring and Evaluation Framework.**

Alignment with existing strategies and plans

VolunteeringACT supports the ACT government's recognition of and response to the specific healthcare needs of people with disability in our community. We are concerned, however, that creating a Strategy relevant to both the Health and Disability sectors – in this case a standalone strategy for Disability Health in the Territory - may risk creating siloes or duplication. While the current Draft states that the Strategy “*compliments Australia's Disability Strategy 2021-2031 and the ACT Disability Strategy 2023-2033*”, it is not clear how it will align with these strategies and their relevant implementation in a cohesive way. The draft Strategy also does not detail how it will align with and intersect with other existing ACT Health strategies and reform agendas.

Much of the content of the draft Strategy is relevant to all ACT health consumers, not only people with disability. The entire ACT health system should be person-centred, integrated, accessible, and fully inclusive of all community members. It is important that these principles are reflected within broader health strategies.

Currently, the Draft Strategy is very high level and low on detail, making it unclear how it will be actioned, implemented, and resourced effectively. It will be critical to ensure the action plans developed under the Strategy are detailed, costed, appropriately resourced, monitored and evaluated and align cohesively with other reform work underway in the disability and health sectors.

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- 2. That Strategy implementation is supported by detailed, robust, fully costed, and resourced Action Plans.**

Genuine and meaningful co-design

The Strategy's implementation should provide genuine co-design and co-production opportunities for people with disability across design, delivery, and evaluation.

People with disability are the experts of their own bodies, experiences, capabilities, and support needs and can often gauge more effectively what is or isn't possible for them. This perspective needs to be at the centre of service design, planning and decision-making processes and clear mechanisms for engagement to gather these views should be reflected in the implementation approach for the Strategy. With respect to the Strategy's governance, the draft Strategy references the existing ACT Disability Health Strategy Steering Committee and the formation of a Disability Health Reference Group. While it is stated that these bodies include people with disability and their carers, it is important to ensure people with disability are in positions of leadership and hold decision-making powers within these bodies. Research demonstrates that genuine and effective co-design or co-production requires authentic and equitable collaboration and should be underpinned by respect and sharing of decision-making power.^{1,2} Further,

¹ Butler T et al (2022) A Comprehensive Review of Optimal Approaches to Co-Design in Health with First Nations Australians, *Int J Environ Res Public Health*, 19(23):16166, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9735487/>

² [A Guide to Build Co-design Capability - Agency for Clinical Innovation, NSW Government](#)

meaningful and genuine co-design requires allocation of appropriate time and resources to enable it to occur.³

VolunteeringACT would also like to emphasise the importance of reflecting the breadth and diversity of the disability community within the Strategy and its governance. There is a need to respect that people with disability are all diverse human beings, where inclusion and equity may look different for each person. The Strategy presents an opportunity for a wider range of people with disability beyond the current advisory structures to be actively engaged in its implementation and ongoing impact assessment.

Recommendation:

- 3. That the Strategy and its action plans provide genuine opportunities for meaningful co-design and co-production with a wide range of people with disability in the design, delivery, and evaluation of activities - and that adequate resourcing is provided to achieve this.**

Focus Area 1: Health Information and Literacy

VolunteeringACT supports the call for accessible health-related information and a focus on enabling health literacy. However, it is not made clear within this section what will be required to achieve these goals within ACT health services.

VolunteeringACT delivers a Community Information and Referral Service to the Canberra community via our Community Information Hub, which also includes the ACT Community Directory. Analysis of Community Directory usage data for the financial year 2022-23 confirms that more people are using this platform to find the information they need on local services, with a 23.4% increase in users compared to the previous year. Health Services information has remained the category with the highest number of views for the past few years and for the period 2022-23, represented 16.3% of all views. Following the search for health services information, around 12% of those views led people directly onto health services websites to seek more specific information/advice. This clearly demonstrates a strong need for up-to-date information on available ACT health services and how to access/be referred into them.⁴

Inclusivity and accessibility should be standard across the health system and properly built into all information sources, service design, costings and funding arrangements to ensure that services can provide information in a wide range of formats, keep pace with best practice around inclusive digital communications/access pathways as technology evolves, maintain face-to-face options where they are essential, and strive for a service delivery culture where accessibility is apparent from the first interaction.

Many basic accessibility principles are simple to apply from the beginning and review on an ongoing basis within most services. For example, Easy Read documentation is an effective way to make sure health information is accessible. Forms should always be available in all formats such as paper, digital, in different file types and sizes, or perhaps even smart forms that are enabled with voice recognition software so people can speak their responses instead of writing them etc.

³ [Co-design and Co-production - National Mental Health Consumer and Carer Forum](#)

⁴ *VolunteeringACT Internal Reporting – not published.*

The cost of providing accessible formats should be factored into the overall Budget process and accounted for when planning and designing health services. This cost burden should not have to be met by individual organisations or people with disability themselves.

Recommendation:

- 4. That the Strategy ensures provision of accessible health information is standard practice across the ACT health system and that adequate resourcing is committed in Budget processes and Strategy implementation resourcing, to enable this.**

Focus Area 2: Service access, design, and delivery

VolunteeringACT supports the Strategy's focus on service access, design, and delivery. All ACT health services should have inclusive design at the centre, as a minimal standard. This includes design and dissemination of information and access routes, a range of methods/options for service delivery and engagement, and an appropriate balance between utilising technology/digital solutions and human-facing interactions.

There is frustration amongst people with disability that inclusive design principles are not automatically embedded within ACT services. For the ACT Disability Health Strategy to deliver on its aspirations around inclusion and accessibility, more thought, investment, and time needs to be given to understanding the diverse access and communication/information needs of people with disability.

Digital information and processes need to have very clear language/communication instructions, including any specialist communication methods used by people with disability so people can follow those instructions as independently as possible, without having to always rely on support workers, interpreters, or family members to help them navigate basic website functionality or other online platforms. Technology and apps can simplify processes but need to have a high level of intuitiveness to work successfully for people with disability. Digital information solutions and communications can be a great enabler for people with disability, but also require a certain amount of digital literacy to engage with in the first place. Improving diversity in the user testing process before these solutions are fully operational would help make the end products easier to use and more accessible.

It is also important to recognise that one person's solution could present a barrier for someone else's disability, so it is important to ensure that accessibility options are omni-channel, including always retaining a face-to-face human interaction alongside other solutions. Technology and digital solutions should be applied as a way of enhancing/expanding responses rather than just replacing them.

Recommendation:

- 5. That the Strategy supports greater investment at the planning and development stage and recognition within Budgets to ensure all ACT health services have inclusive design at the centre, as a minimal standard.**

Focus Area 4: Workforce

The Strategy should explicitly reference volunteers within the focus area on workforce, recognising the key role volunteers play within health and mental health services. The National Volunteering Strategy reports that as of April 2022, 8.4% of volunteers in Australia volunteered

for health organisations (4.4% for mental health) and 12.9% reported they would like to volunteer for health organisations (15.4% for mental health).⁵

There is currently a lack of awareness of the core role volunteers play in delivering health and mental health services in the ACT. Volunteers are an integral part of our relationship-based care model. There is an opportunity for this Strategy to recognise the potential of volunteering and champion what volunteering can do to help improve people with disability's independence and life changes/choices and the value their diverse life experiences bring to organisations and workplaces within the health sector.

As recognised in the draft Strategy, people with disability are a part of the healthcare workforce, and this includes volunteer roles. Volunteering is a legitimate pathway into employment and acquiring new skills for people with disability. For example, VolunteeringACT currently leads the Inclusive Volunteering Pathways to Employment Program operating across Tasmania, NSW, and the ACT in partnership with the Centre for Volunteering (NSW) and Volunteering Tasmania. This program has a working relationship with Department of Employment Service Providers to facilitate inclusive volunteering opportunities for people with disability and has a proven track record of delivering positive and sustainable volunteering outcomes for them. One of the clear benefits of this program and what it offers is the truly human-centred approach and the one-to-one time spent on understanding an individual's circumstances. This holistic lens allows for easier identification of intersecting issues, and how to address all relevant factors that may be causing barriers. This may require more intensive work initially to uncover the right supports and build solutions around an individual participant, but the longer-term outcomes are more sustainable, where a participant has a greater chance of sticking with the program, is not set up to fail, and goes on to thrive.

Recommendations:

- 6. That the Strategy includes reference to and consideration of volunteers as an integral element of the health workforce when designing, resourcing, and implementing workforce initiatives.**
- 7. That the Strategy recognises and supports volunteering as a potential pathway to employment for people with disability within the health workforce and allocates funding to the expansion of an ACT Inclusive Volunteering Pathways to Employment Program for people with disability.**

Focus Area 5: Data and Research

The Data and Research section of the draft Strategy is currently vague and lacking in detail, making it difficult to comment on. VolunteeringACT would like to highlight the importance of ensuring alignment with existing data collection frameworks and processes within the ACT – this will need to include the ACT Volunteering Strategy 2023-2028 Monitoring and Evaluation Framework, currently still under development. Any data or research activity related to the healthcare workforce should automatically include anyone in a volunteering role, and those who manage and support them, to get a more accurate representation of the full extent of resourcing required to deliver health services/outcomes in the ACT. At present, ACT Government is missing this important data set and insights on how much and where the volunteer workforce is contributing to its priorities.

⁵ [National Strategy for Volunteering 2023-2033 - Volunteering Australia](#)

Recommendation:

- 8. That the Strategy is strengthened to include clear priorities and actions in relation to monitoring and evaluation. This should include development of a robust monitoring and evaluation framework that aligns with existing data collection and monitoring frameworks and processes within the ACT health system and other key areas of intersection – including the future ACT Volunteering Strategy 2023-2028 Monitoring and Evaluation Framework.**

Authorisation

This submission has been authorised by the Chief Executive Officer of VolunteeringACT.

Jean Giese
Chief Executive Officer
