

Snapshot of community attitudes on disability in the ACT

Key findings from research commissioned by the ACT Disability Advisory Council



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Earlier this year, the ACT Disability Advisory Council launched *Challenge 2014*—a ten year vision for disability in the ACT.

Challenge 2014 asks all of us to take responsibility for improving outcomes for people with disabilities, families and carers in the Canberra community.

Strides have been made but a task ahead is changing community attitudes so that people with disabilities are welcomed as full and equal members of the ACT community.

Such a community is possible if we have the evidence, the means and the courage to change. For this reason recent research commissioned by the ACT Disability Advisory Council, in conjunction

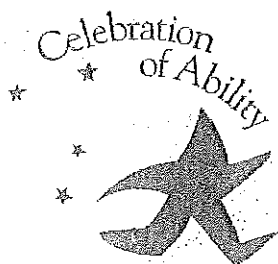
with the ACT Department of Disability, Housing and Community Services, surveyed Canberra residents to gauge attitudes on disability.

This 'snapshot' of findings gives an overview of the research and tells us about important attitudes that need to change and the agents that can achieve this.

What better day to release it than the International Day of people with a disAbility which is all about changing attitudes and raising awareness of the achievements of people with disabilities.

Craig Wallace

3 December 2004



Released:

3 December 2004

International day of people with a disAbility



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key findings

What were the overall survey findings?

- **89% of Canberra residents agree that the ACT community is becoming more accepting of people with a disability over time.**
- **However, there remain key areas of community life where knowledge and attitudes towards disability could be substantially enhanced.**
- **These include awareness of the abilities of people with different disabilities, employment, education, and attitudes about psychiatric disabilities.**
- **Practical work is needed — powerful change agents include education in schools, community events, first person contacts, integration at work and school and information campaigns.**

How was the research conducted?

Confidential, anonymous telephone interviews were conducted with 300 randomly sampled ACT residents. The views of these residents, without a disability, were the focus of the research and are presented in this snapshot.

The research also included interviews with 70 residents who defined themselves as having a disability. This provided important validation for the primary results in some key areas.

What do ACT residents know about disability?

The survey showed that community awareness of different types of disability is varied.

- **Figure 1** below shows that residents tend to most commonly think about physical disabilities, while other types are less well recalled.

Residents do not have a consistent understanding about the scope of disability in the ACT.

- 16% of residents say that the incidence of disability is 5% or less in the ACT population, while 40% think the incidence is greater than 20%.

Figure 1: Conditions spontaneously identified by residents as a type of disability

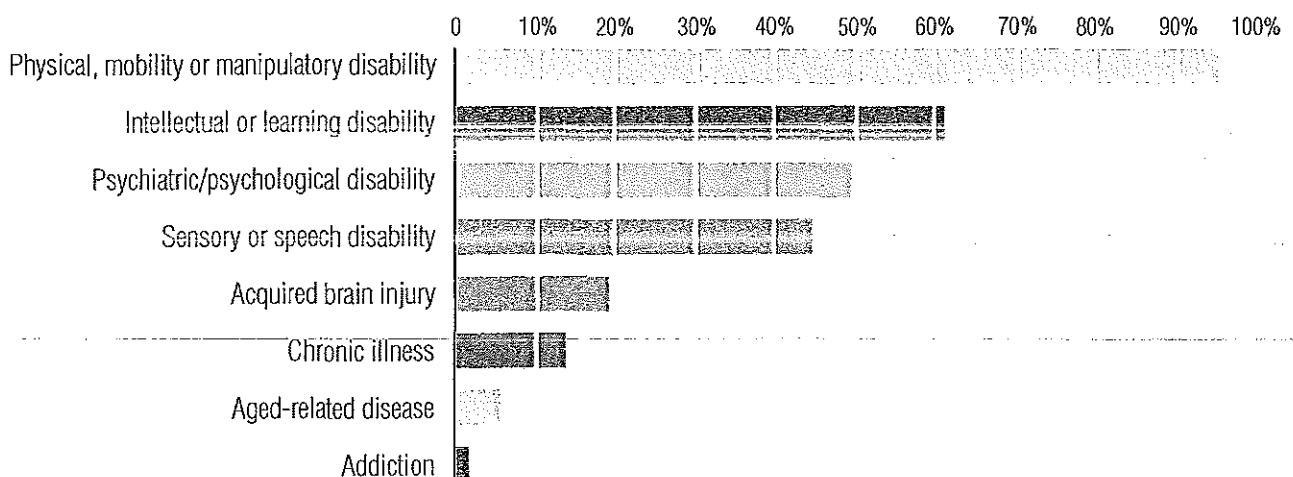
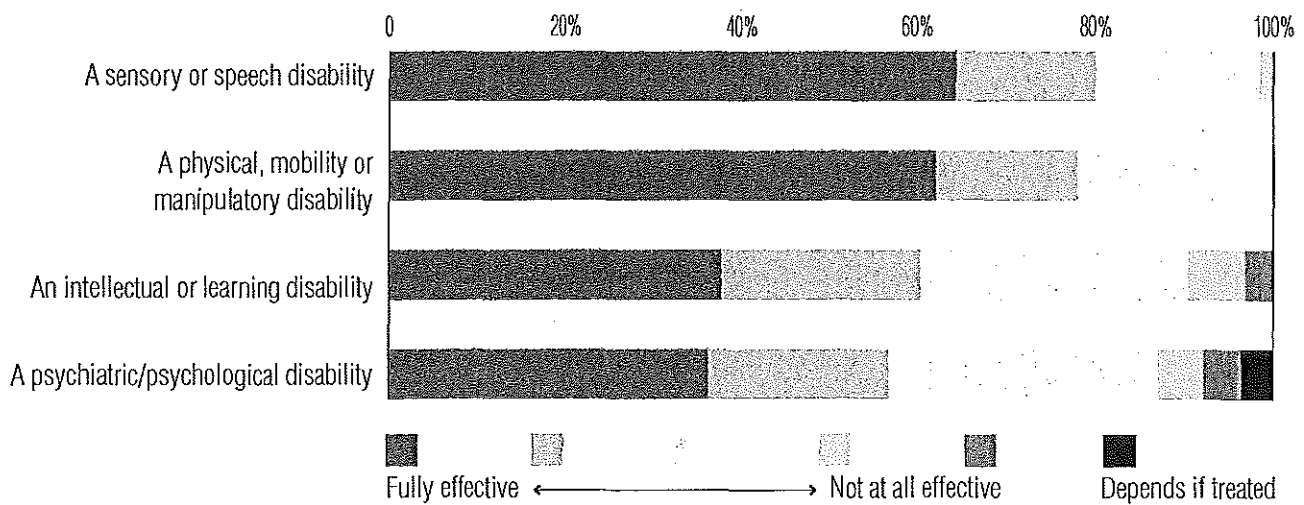


Figure 2: Extent to which residents feel that people with different types of disability are able to be effective in contributing to society



How are different types of disability perceived by the community?

There are clear differences in community understanding and comfort with various types of disability.

- 97% of residents said they would be comfortable about helping a person in a wheelchair carry groceries to the supermarket checkout.
- However, 17% said they would be uncomfortable if a new work colleague confided that they have Schizophrenia and a quarter (26%) said they would be uncomfortable if a person displaying challenging behaviours sat next to them.

As shown in **Figure 2** above, residents are significantly less likely to consider that people with intellectual, learning, psychological or psychiatric disabilities are able to fully contribute to society than is the case in relation to people with other disabilities.

What are community views on access and opportunities for people with disabilities?

A significant proportion of ACT residents consider that people with a disability do not have the same opportunities as other community members.

- 45% of ACT residents indicate that people with a disability do not have the same access to services as other people in the ACT.
- 44% of residents suggest that people with a disability do not have the same opportunities to participate in community life as other people.
- 30% indicate that, overall, people with a disability are not treated fairly in the ACT.

More than half (54%) of the community feel that people with a disability do not have adequate government financial support.

What issues were raised about disability in the workplace?

Disability was seen as a barrier in the workplace, both in terms of perceived effectiveness and attitudes of colleagues and employers.

- Around three-quarters (74%) of community members agree that the main problem faced by people with a disability at work is other people's prejudice.
 - 20% of residents say they agree that, in general, people with disabilities cannot be as effective at work as people without disabilities.
- More than a third (40%) of residents feel that people with a disability are not treated fairly by employers in the ACT.

The community wants to see more of an effort made to support the employment of people with a disability.

- Around 80% of respondents feel that employers should make accommodations for people with a disability.
 - 47% agree that local businesses should be required to employ more people with a disability.
 - Two-thirds of residents (66%) agree that large national and multinational businesses operating in the ACT should be required to do more to employ people with a disability.
- Further integration of people with a disability at work and in schools is seen as one of the best approaches for impacting on community understanding and acceptance.

How do people think that attitudes could be changed?

Education and personal contact are viewed as the main methods by which attitudes and discriminatory behaviours could be addressed.

- Nearly two-thirds (64%) of residents view ignorance or lack of knowledge about disability as the main cause of prejudice and discrimination.
- In addition, around 15% see a lack of personal contact with people with a disability as a main cause.
- 40% of residents say that community education and publicity would help increase understanding and acceptance of people with a disability in the ACT—including strategies such as an information campaign (17%), education in schools (19%) or community disability events (4%).

How can I find out more about the survey results?

A comprehensive report on all of the survey results will be provided to the ACT Disability Advisory Council.

For more information about Council follow the links to Council's webpage from www.dhcs.act.gov.au/disabilityact

O R I M A

R E S E A R C H

**ACT Disability Advisory Council,
in conjunction with the ACT
Department of Disability, Housing and
Community Services**

**Report on a survey of community attitudes towards
disability in the Australian Capital Territory**

December 2004

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I. Introduction

A. Background

ACT Disability Advisory Council

The ACT Disability Advisory Council was appointed by the then Disability Services Minister, Bill Woods, in April 2003. The Council has representation from a broad cross section of the disability community as well as ex officio representation from Disability ACT and the Australian Government Department of Family and Community Services.

Council's terms of reference include advising the Minister on disability issues, working in partnership with Disability ACT on key activities, communicating the needs of people with disabilities and families and establishing links with the National Disability Advisory Council on federal matters.

Understanding community attitudes towards disability

One of the focus areas identified by the Council is to examine ways that the ACT community can create a more welcoming environment for people with disabilities. A key part of determining appropriate approaches is to understand public perceptions of and attitudes towards people with disabilities.

As no such information was previously available, Council identified the need to establish benchmark data on ACT community attitudes towards disability issues.

Research objectives

The main objective of this research was to review and sample ACT community perceptions towards disability. This will inform the subsequent development of a Council strategy, which will include specific measures (such as a communications campaign) to encourage the local community to be more welcoming towards people with disabilities.

The research was also seen as an opportunity to establish data in the Australian context, which could be compared to international findings.

The survey was conducted during October 2004. This report presents the findings of the research.

B. Research methodology

A quantitative, telephone interview survey approach was adopted for the research to:

- ◆ enable stratified random sampling of general ACT community members;
- ◆ allow collection of comparable data from a group of ACT residents with a disability;
- ◆ maximise accessibility of the survey to different groups in the community within the budget constraints; and
- ◆ facilitate confidentiality in the survey process.

The survey was also available as a paper-based questionnaire for accessibility purposes.

Questionnaire development

To develop a comprehensive and sensitive survey questionnaire for this research two methods were adopted:

- ◆ a review of international literature relating to attitudes toward disability and people with a disability; and
- ◆ conduct of two focus groups exploring the attitudes of ACT residents—one focus group with people with a disability or direct experience with people with a disability, and one with residents with minimal experience with people with a disability.

The issues and themes identified through these processes assisted in developing a tailored survey questionnaire that addressed key issues related to attitudes regarding disability.

The process also helped to determine the style of language that was appropriate for use in the questionnaire, and the phrasing of questions so that they were most effective in encouraging disclosure and exploring issues relating to the objectives of the research.

The questionnaire was finalised in consultation with the ACT Disability Advisory Council project team. A copy of the questionnaire is provided at Appendix A.

Survey pilot testing

Prior to the commencement of the survey, the questionnaire was pilot tested via telephone interviews with a small sample ACT residents (n=5).

This exercise led to some minor revisions in the presentation of the questionnaire to improve its accessibility, and also some small changes to the content of the questionnaire.

Confidentiality

Research participants were able to maintain their confidentiality and anonymity as part of the research methodology as they were not required to provide any identifying information. However, a large proportion of respondents chose to provide their name and contact number as part of the interview because they were interested in taking part in any future research on social attitudes. This identifying data has not been linked to the survey results in any way.

C. Presentation of data

Percentages presented in the report are based on the total number of valid responses made to the particular question being reported on. This generally differs from the total number of responses received because of omissions in individual responses.

'Not Applicable/Don't Know' responses are generally not presented in the report. For ease of reading, five point scales have been condensed and are reported in the form of three point scales. For example, the proportion of respondents who stated they 'Strongly Agree' or 'Agree' to a particular question are reported as the proportion who 'Agree'. Those who 'Strongly Disagree' or 'Disagree' are reported as the proportion who 'Disagree'.

Percentage results throughout the report may not add up to 100% due to rounding.

A frequency distribution of the final results of the survey is presented in Appendix B.

Weighting

The sample design was based on a random stratified sample of people 18 years or older across seven ACT regions (Belconnen, Gungahlin-Hall, North Canberra, South Canberra, Tuggeranong, Weston Creek / Stromlo and Woden Valley). The overall sample was then weighted using ABS population data for age and gender for each of these regions to ensure that the sample reflected the actual population ratios for the 7 survey segments. All results for respondents without a disability shown in this report are based on this weighted data.

The n=70 respondents with a disability were identified during the survey process by the demographic questions. As this sample was not stratified across the seven ACT regions, their results have not been weighted. All results for respondents with a disability shown in this report are based on unweighted data.

Statistical significance and comparison of demographic groups

Sampling error is a mathematically measurable error that arises from the selection of only a part of the target population for participation in a survey. The larger the sample size, the lower the degree of sampling error.

For this survey, the level of sampling error is very low. Where all 308 respondents without a disability answer a question, the *confidence interval* is no greater than 6 percentage points (pp) at the 90% *confidence level*.

- ◆ For example, if 45% of respondents without a disability said that they have had 'some' contact with a person with a disability, then we can be 90% confident that between 39% (45% less 6pp) and 51% (45% plus 6pp) of persons without a disability in the ACT have had some contact with a person with a disability.

Where all 70 respondents with a disability answer a question, the *confidence interval* is no greater than 10pp at the 90% *confidence level*.

Throughout this report, the results for respondents without a disability and those for respondents with a disability have been compared, with the labels PWOD (people without a disability) and PWD (people with a disability) used in the various charts.

Other demographic comparisons have been made, either where a difference in views or behaviour may be expected, or the results are statistically significantly different at the 90% confidence level.

- ◆ This means that there is a 90% chance that a difference is present in the reference population, with the most likely size of the difference being the interval indicated by the results of the sample survey.

The most common comparisons that are made are based on education levels, degree of contact with people with a disability, whether or not the respondent has responsibility for hiring staff, and gender. Each of these comparisons is made within the group of respondents without a disability.

D. Structure of the report

The survey results have been presented under a range of chapters in this report, reflecting the structure of the questionnaire and issues covered.

- ◆ about the respondents (demographic profile);
- ◆ the respondents' knowledge of disabilities;
- ◆ the respondents' views on community support for people with a disability;
- ◆ the respondents' own views on various disability issues; and
- ◆ the respondents' views on changing attitudes to disabilities with the ACT.

II. About the respondents

There were n=308 respondents randomly selected from the ACT residential population who did not identify themselves as having a disability, and n=70 ACT residents who defined themselves as having a disability.

- ◆ Where relevant throughout this report, the charts will label the results for respondents without a disability as PWOD (people without a disability), and for respondents with a disability as PWD (people with a disability).

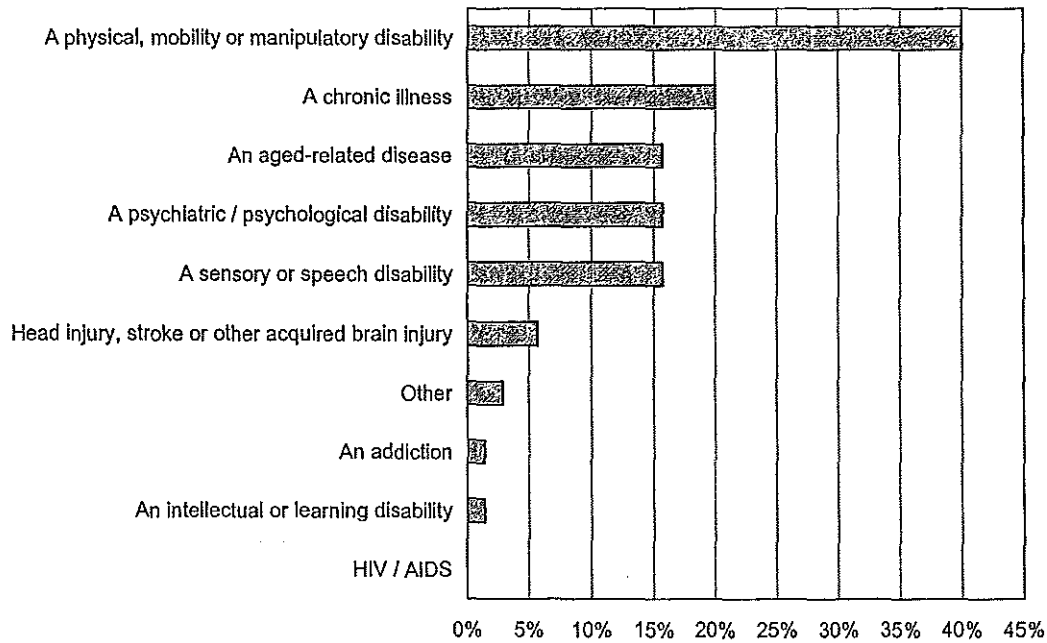
A. *Types of disabilities*

Of the n=70 respondents who were defined as having a disability, 33% identified themselves as a 'person with a disability', and 67% identified themselves as having a 'limitation, restriction or impairment, which has lasted, or is likely to last, for at least six months and restricts their everyday activities'¹.

The most common condition, provided by 40% respondents with a disability, was a physical, mobility or manipulatory disability (see Figure 1), with 20% of respondents reporting they suffered from a 'chronic illness', and 16% reporting they had an aged related disease, a psychiatric/psychological disability, and/or a sensory/speech disability.

**Figure 1: Nature of condition (q41)
(percentage of respondents with a disability – multiple response)**

¹ meet a definition of disability but do not spontaneously identify themselves as having a disability. The Australian Bureau of Statistics definition of disability was therefore used to identify respondents in this category.

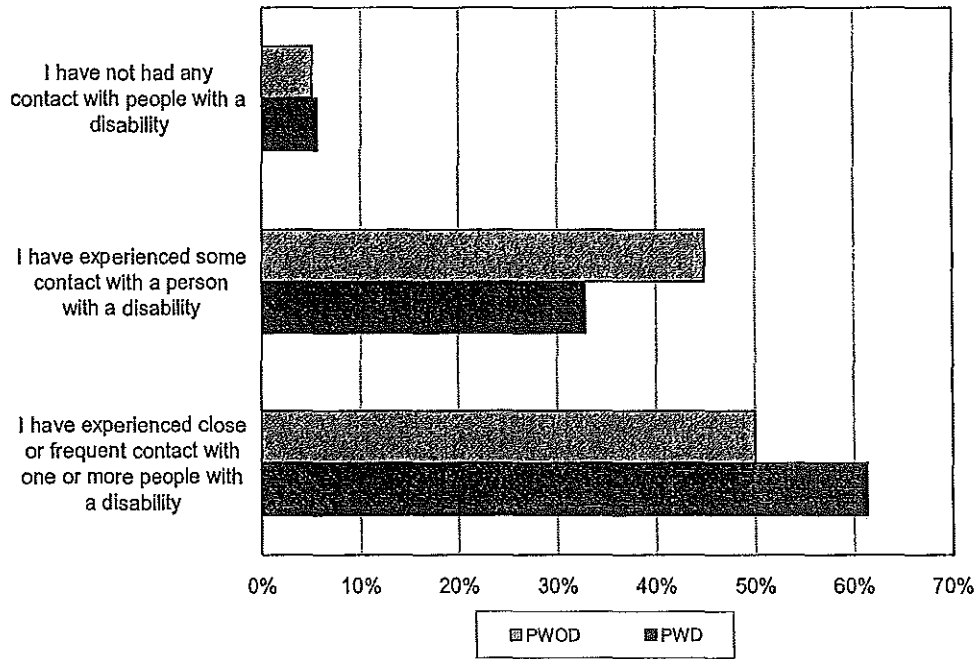


B. Experience with disabilities

Respondents were asked to describe the degree of contact that they have with people with a disability.

- ◆ As shown in Figure 2, only 5-6% of respondents with and without a disability reported that they had not had any contact with people with a disability.
- ◆ 45% of respondents without a disability and 33% of respondents with a disability have experienced 'some' contact with a person with a disability, and half of the respondents without a disability have experienced 'close or frequent' contact with people with a disability (compared to 61% of respondents with a disability).

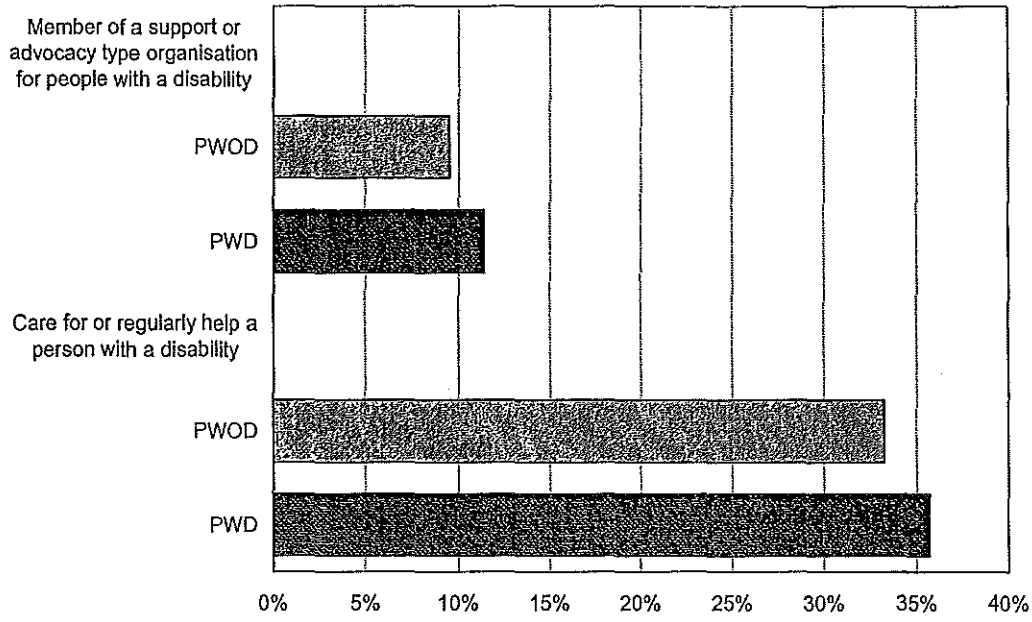
Figure 2: Experience with Disabilities (q42)
(percentage of respondents)



Similar proportions of respondents without a disability (10%) and with a disability (11%) are members of a support or advocacy type organisation for people with a disability (see Figure 3). Likewise, similar proportions of respondents without a disability (33%) and with a disability (36%) reported that they cared for or regularly helped a person with a disability.

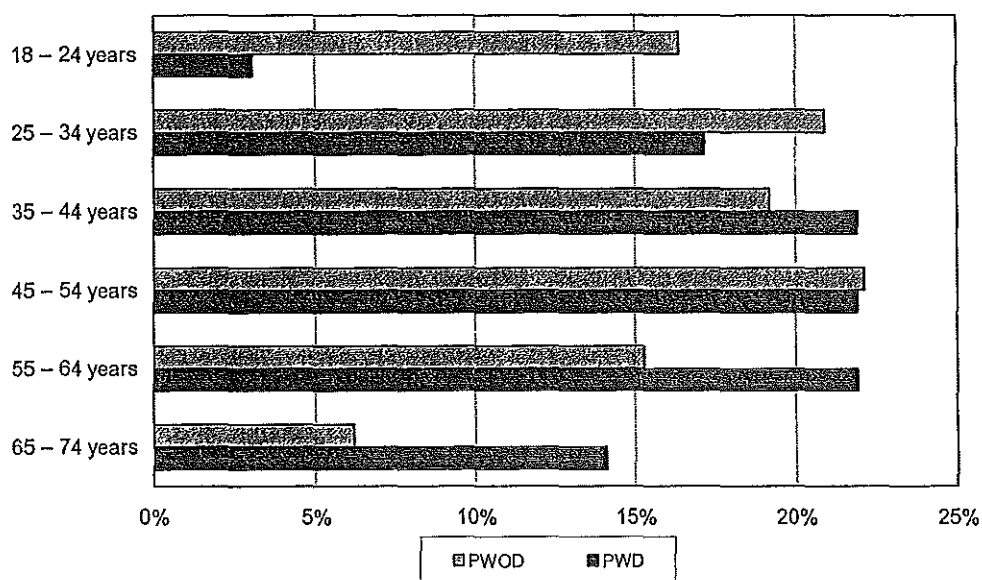
Figure 3: Experience with Disabilities (q49 and 50)
 (percentage of respondents)

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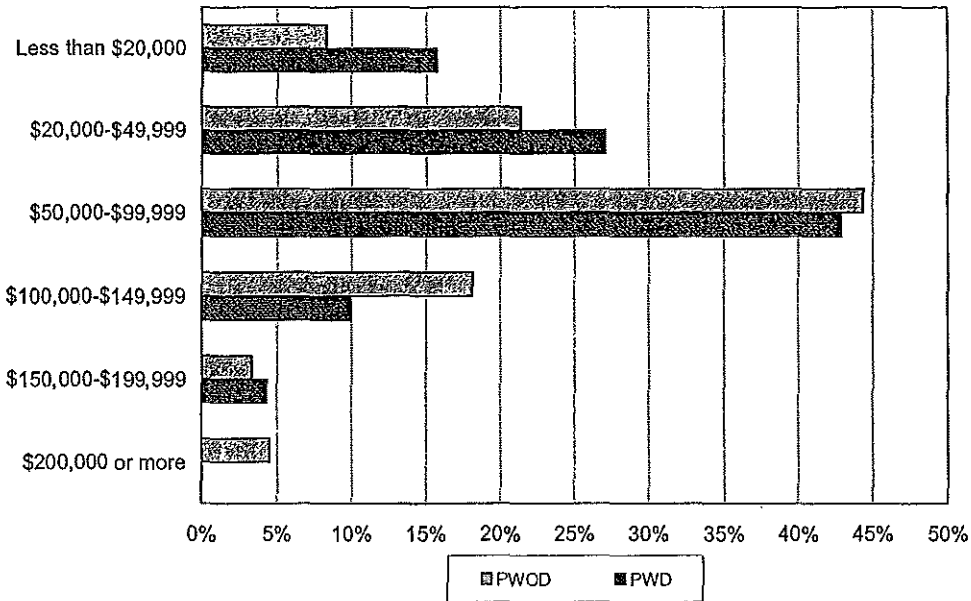
C. Key demographics

Figure 4 and Figure 5 show the age and income profile of respondents. Note that respondents with a disability tended to have an older profile than the respondents without a disability, with a higher proportion of respondents aged 55–64 years and 65–74 years. Respondents with a disability also had a greater proportion of respondents in the lower income groups.



**Figure 5: Gross Annual Total Household Income (q44)
(percentage of respondents)**

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As shown in Figure 6, educational attainment did not differ greatly between respondents with and without a disability.

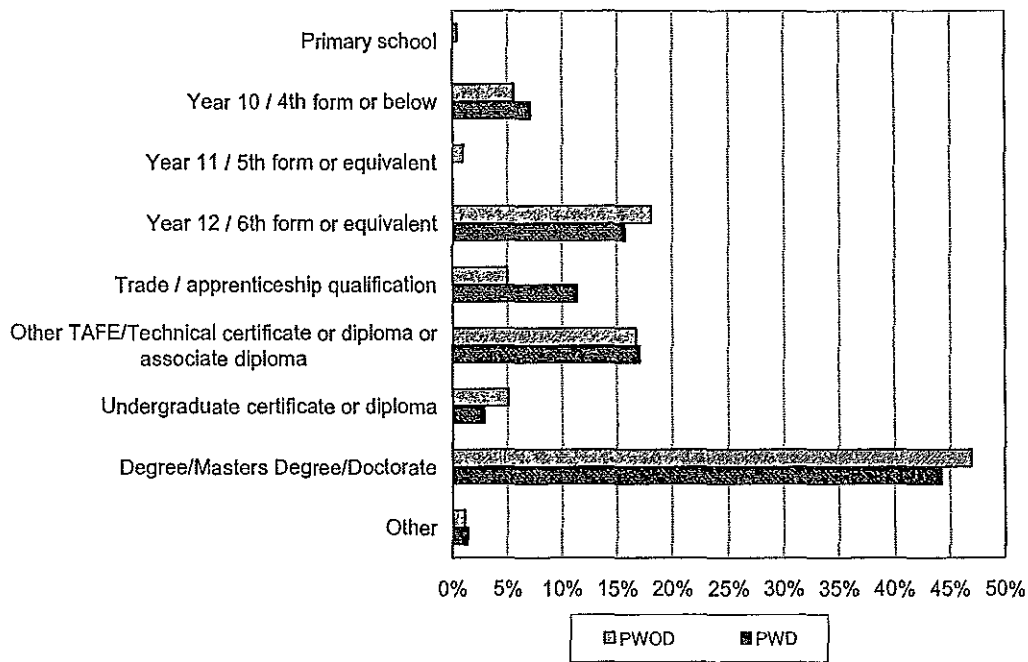


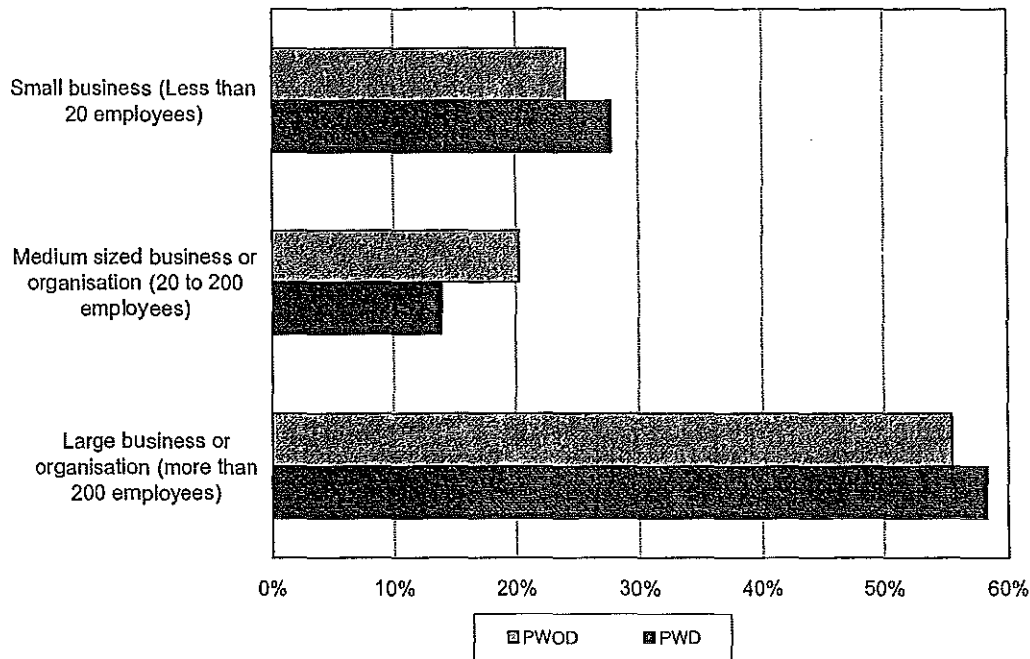
Figure 6: Highest Level of Education Completed (q45)
 (percentage of respondents)

D. Employment characteristics

Seventy two per cent of respondents without a disability indicated that they were currently employed, compared to 51% of respondents with a disability.

- ◆ Of those respondents who were employed, similar proportions of respondents without a disability (37%) and with a disability (36%) had some responsibility for employing or recruiting staff.

As shown in Figure 7, more than half of respondents currently employed are working in a large business or organisation, with similar results for respondents with and without a disability.

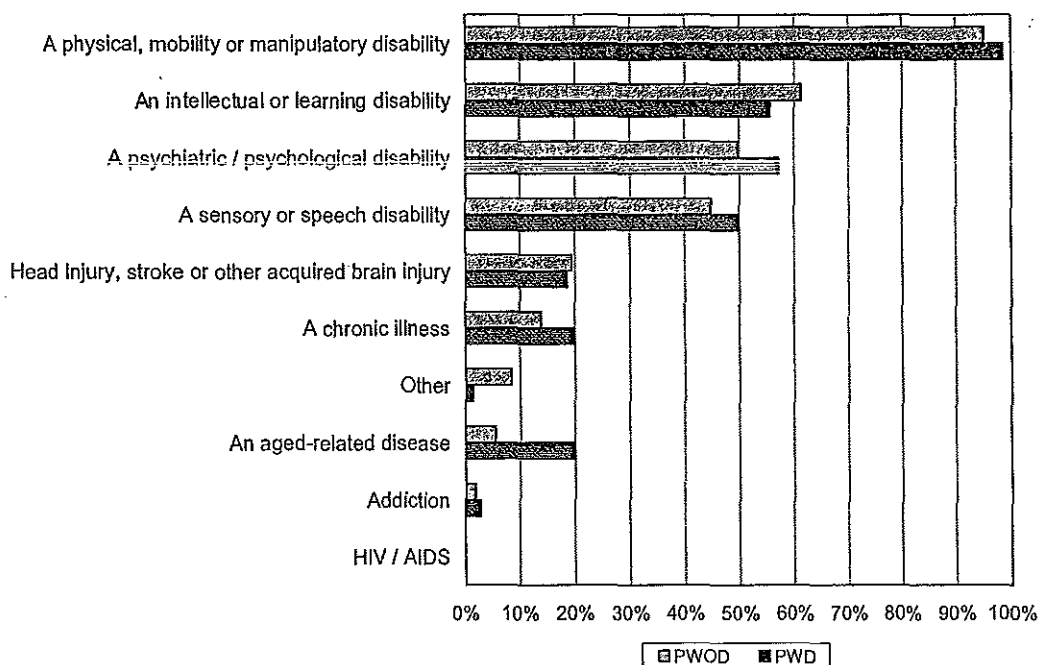


**Figure 7: Size of Employer (q48)
(percentage of respondents currently employed)**

III. Knowledge of disabilities

Respondents were asked to describe without prompting the types of conditions that people with a disability may have. As shown in Figure 8, almost all respondents with and without a disability nominated a 'physical, mobility or manipulatory' condition as being one that defined a disability.

- ◆ Between 45 and 61% of respondents with and without disabilities nominated 'intellectual or learning disabilities', 'psychiatric or psychological disabilities' and 'sensory or speech disabilities' as being conditions that defined a disability.
- ◆ Only 19% of respondents with and without a disability nominated a 'head injury, stroke or other acquired brain injury' as being a condition that defined a disability.



Respondents were then provided with a list of conditions, and asked to describe whether they considered each of these conditions to be a disability.

As shown in Figure 9 and Figure 10, respondents with a disability were more likely to consider these conditions to be a disability than respondents without a disability.

Figure 8: Unprompted Definitions of Disabilities (q1)
 (percentage of respondents – multiple response)

- ◆ In particular, while 96% of respondents with a disability considered a psychiatric or psychological condition to be a disability, only 82% of respondents without a disability considered this to be the case.
- ◆ Only between 40 and 54% of respondents without a disability considered HIV/AIDS, addiction or a chronic illness to be a disability, consistent with the very low unprompted responses these conditions received (as shown in Figure 8 above).

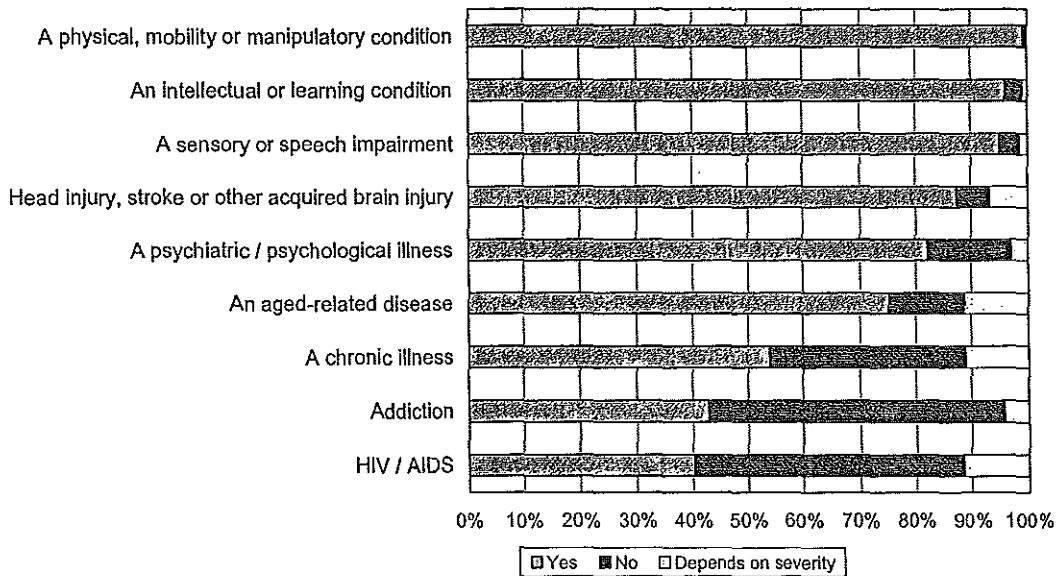
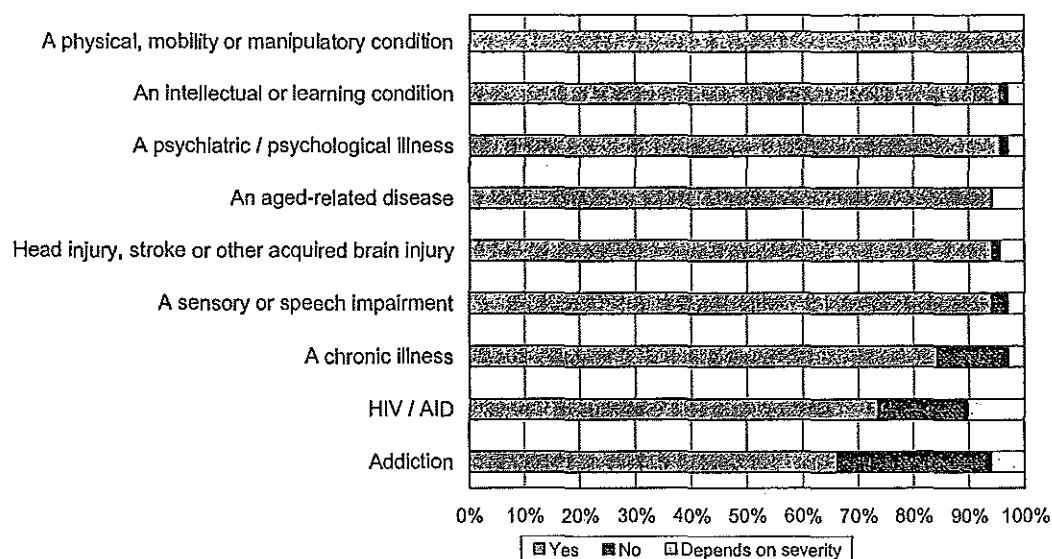


Figure 10: Prompted Definitions of Disabilities (q2)
 (percentage of respondents with a disability)

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These results are generally similar to those from an Irish study of public attitudes to disability conducted in 2002², although the higher results for most of the ACT results suggests a higher degree of awareness.

In the Irish study, an unprompted question on what respondents thought defined a disability showed:

- ◆ 80% suggested 'physical disability';
- ◆ 48% suggested 'intellectual or learning disability';
- ◆ 34% suggested 'mental health difficulty';
- ◆ 26% suggested 'hearing loss / visual difficulties';
- ◆ 12% suggested 'long-term illness';
- ◆ 5% suggested 'HIV / AIDS'; and
- ◆ 4% suggested 'addiction'.

When respondents to the Irish survey were provided with a prompted list of conditions, the following proportions thought that the condition characterised a person with a disability:

- ◆ 97% thought 'physical disability';
- ◆ 90% thought 'intellectual or learning disability';
- ◆ 81% thought 'hearing loss / visual difficulties';
- ◆ 77% thought 'mental health difficulty';
- ◆ 60% thought 'long-term illness';
- ◆ 41% thought 'HIV / AIDS'; and
- ◆ 34% thought 'addiction'.

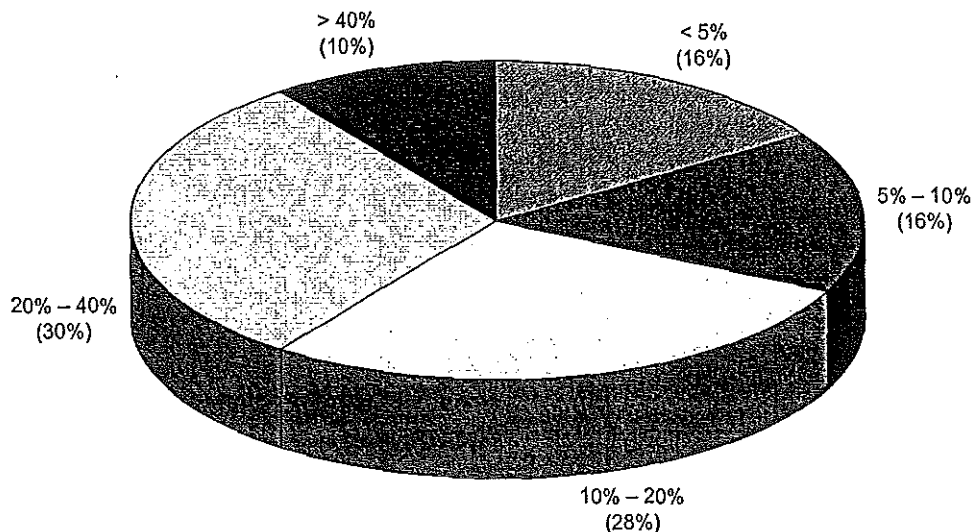
² *Public Attitudes to Disability in the Republic of Ireland*, National Disability Authority, December 2002.

Following the collection of information about what ACT residents felt constituted a disability, respondents were provided with a commonly accepted definition of disability (as used by the Australian Bureau of Statistics in the 1998 Survey of Disability, Ageing and Carers).

- ◆ This definition states that a disability is any limitation, restriction or impairment, which has lasted, or is likely to last, for at least six months and restricts everyday activities.
 - It may include sensory or speech impairments, psychiatric and psychological disabilities, physical disabilities, intellectual or learning disabilities, head or brain injuries or restrictions resulting from an illness.

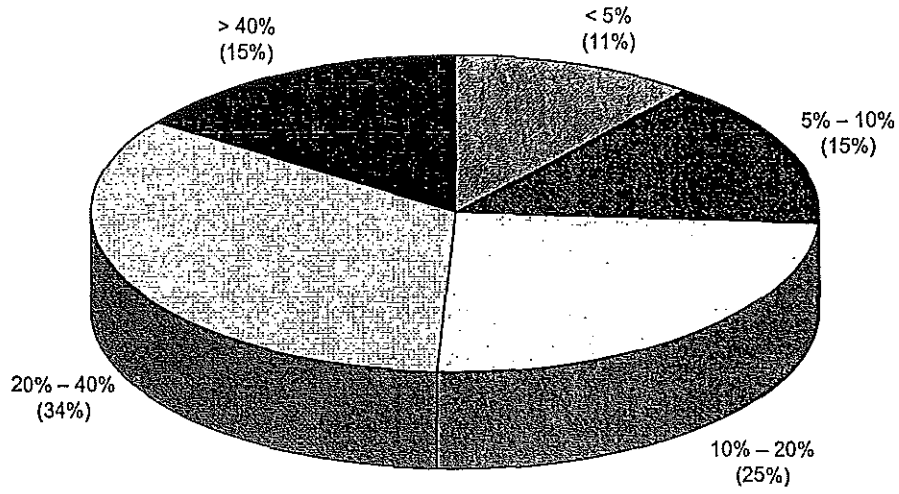
Based on this definition, respondents were asked to provide an estimate of the percentage of the population in the ACT that had a disability (see Figure 11 and Figure 12).

- ◆ Forty per cent of respondents without a disability and 49% of respondents with a disability estimated that 20% or more of ACT residents had some form of disability.



**Figure 12: Estimated percentage of ACT population with a disability (q3)
(percentage of respondents with a disability)**

COUNCIL IN CONFIDENCE

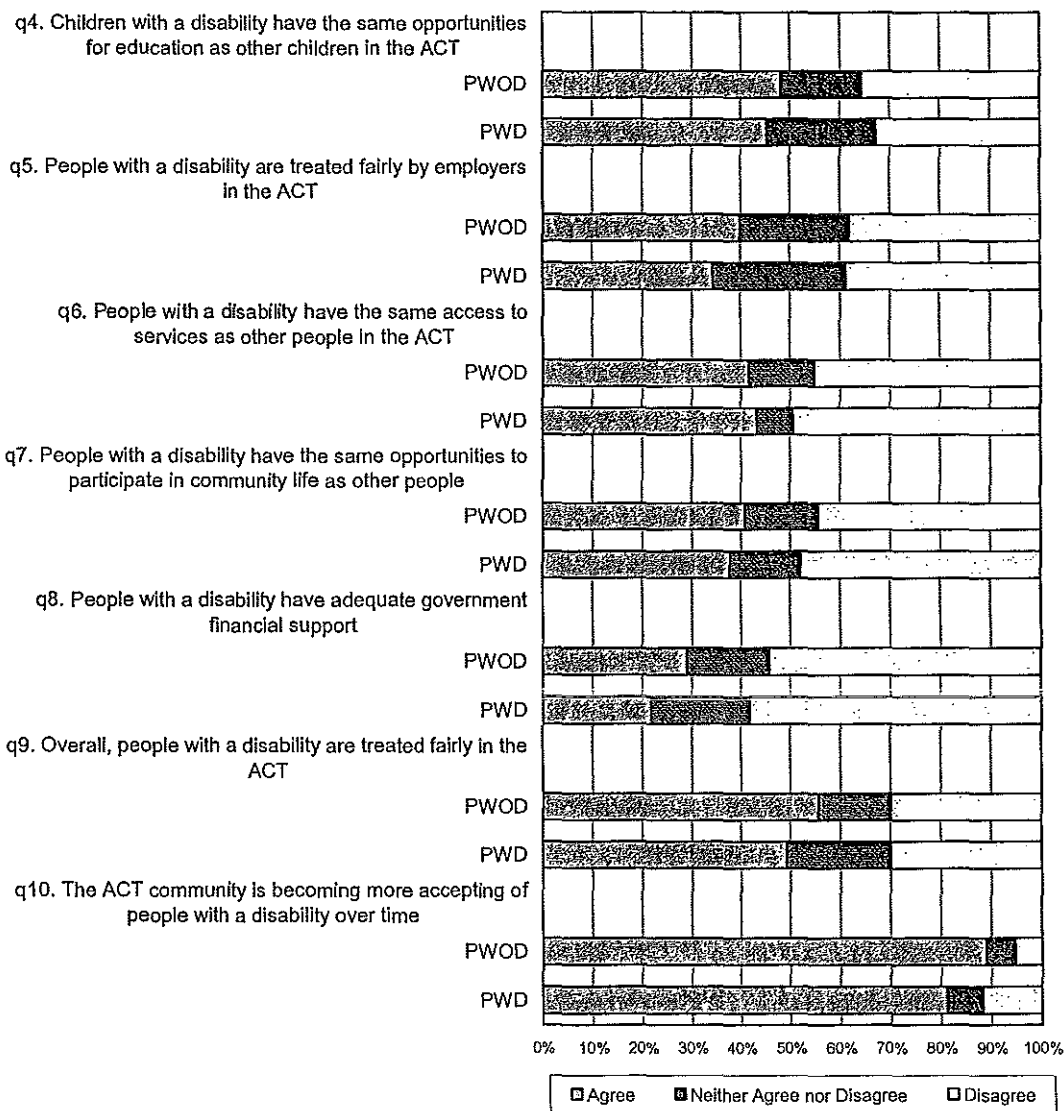


IV. Access and opportunities

Respondents were asked to describe their agreement with a range of statements regarding the degree of ACT community support for people with a disability (see Figure 13). In general, the results for respondents without a disability were similar to those for respondents with a disability.

- ◆ The most positive response was for *the ACT community is becoming more accepting of people with a disability over time*, with agreement from 89% of respondents without a disability and 81% of respondents with a disability.
- ◆ However, the results for statements pertaining to the current degree of support and opportunities for people with disabilities in the ACT were less positive, with:
 - around half of respondents agreeing that *people with a disability are treated fairly in the ACT* (question 9) and that *children with a disability have the same opportunities for education as other children in the ACT* (question 4);
 - around 40% of respondents agreeing that *people with a disability are treated fairly by employers in the ACT* (question 5), *have the same access to services as other people in the ACT* (question 6), and *have the same opportunities to participate in community life as other people* (question 7); and
 - 29% of respondents without a disability and 22% of respondents with a disability agreeing that *people with a disability have adequate government financial support* (question 8), with more than half of respondents disagreeing that this was the case.

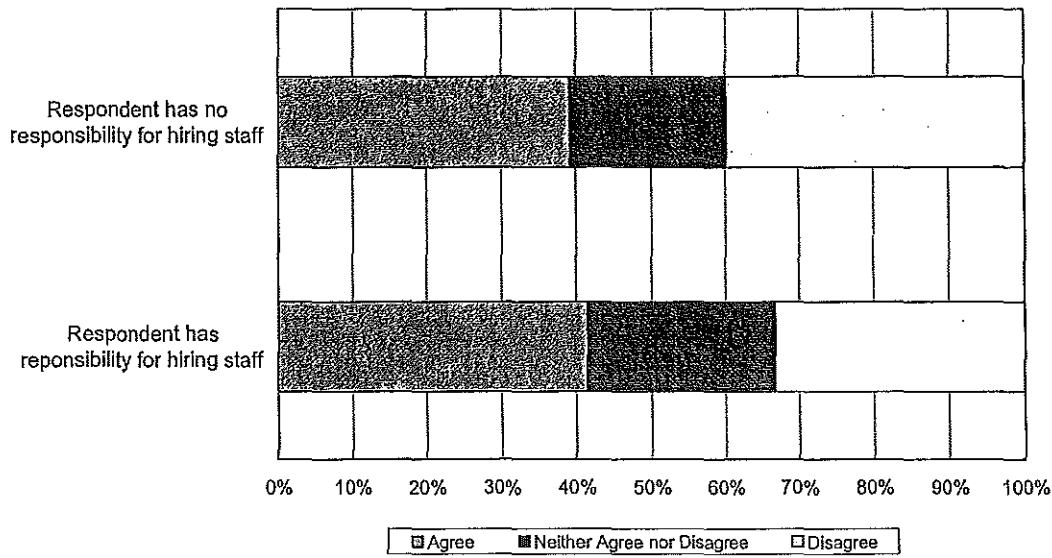
In the *Public Attitudes to Disability in the Republic of Ireland* report, 41% of respondents agreed that people with disabilities were treated fairly by employers, similar to the ACT result of 40% for respondents without a disability. This report also found that 25% of respondents felt that the State provided adequate benefits for people with disabilities, and 3% felt that the State provided more than adequate benefits.



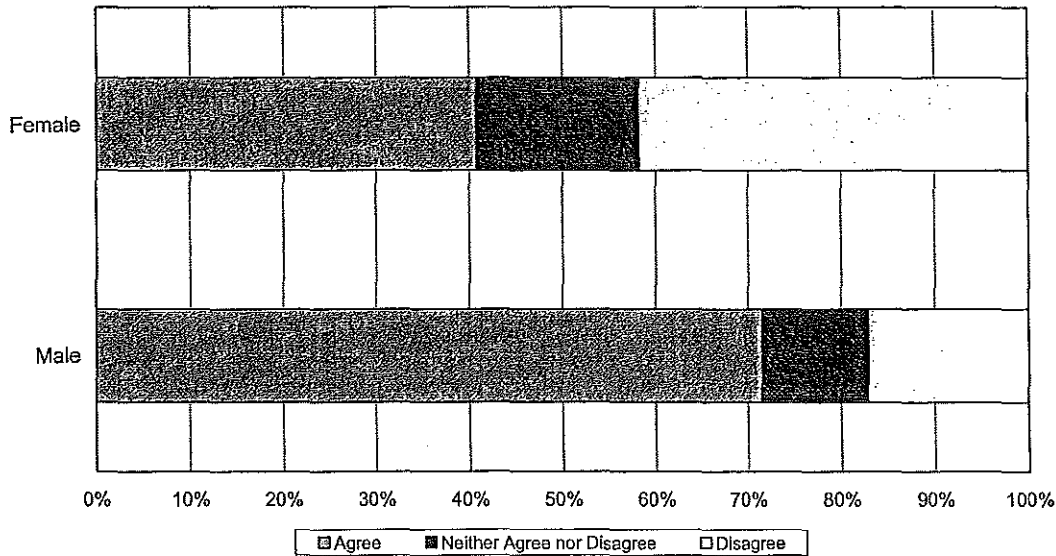
Comparing the results for respondents with and without responsibility for hiring staff, there was no significant difference in the extent of agreement with the statement that *people with a disability are treated fairly by employers in the ACT* (see Figure 14).

Figure 13: Community Support for People with a Disability (q4-10)
Figure 14: Agreement that “People with a disability are treated fairly by employers in the ACT” (q5)
(percentage of respondents with and without responsibility for hiring staff)

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Females were less likely to agree that *overall, people with a disability are treated fairly in the ACT* (question 9), with only 41% agreeing (and 42% disagreeing), compared to 72% agreement from male respondents (see Figure 15).



Respondents who had close or frequent contact with people with a disability were less likely than the other respondents to agree that:

- ◆ people with disability had the same access to services as other people in the ACT (see Figure 16);

Figure 15: Agreement that “Overall, people with a disability are treated fairly in the ACT” (q9) (percentage of respondents by gender)

- ◆ people with disability were treated fairly in the ACT (see Figure 17); and
- ◆ the ACT community was becoming more accepting of people with a disability over time (see Figure 18).

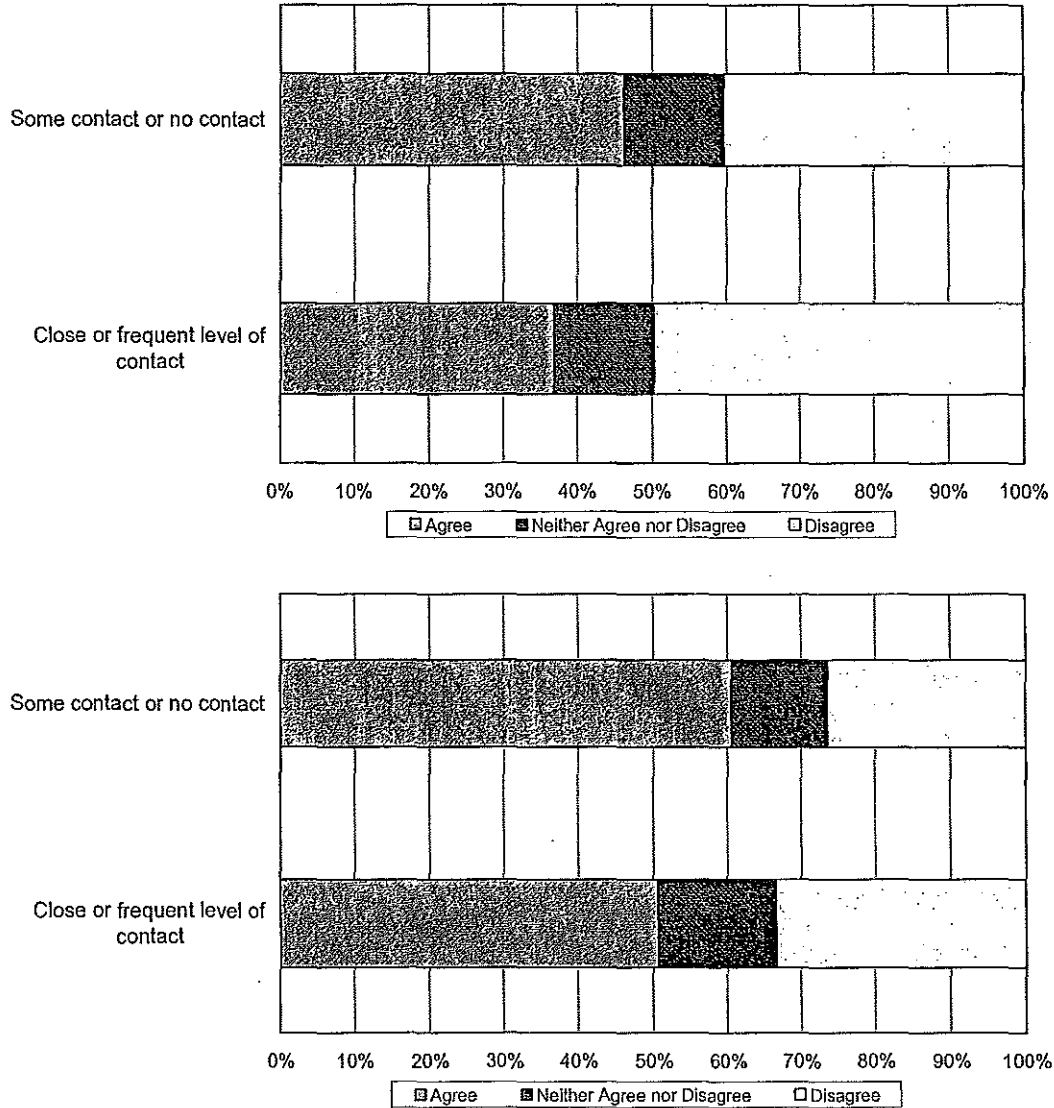
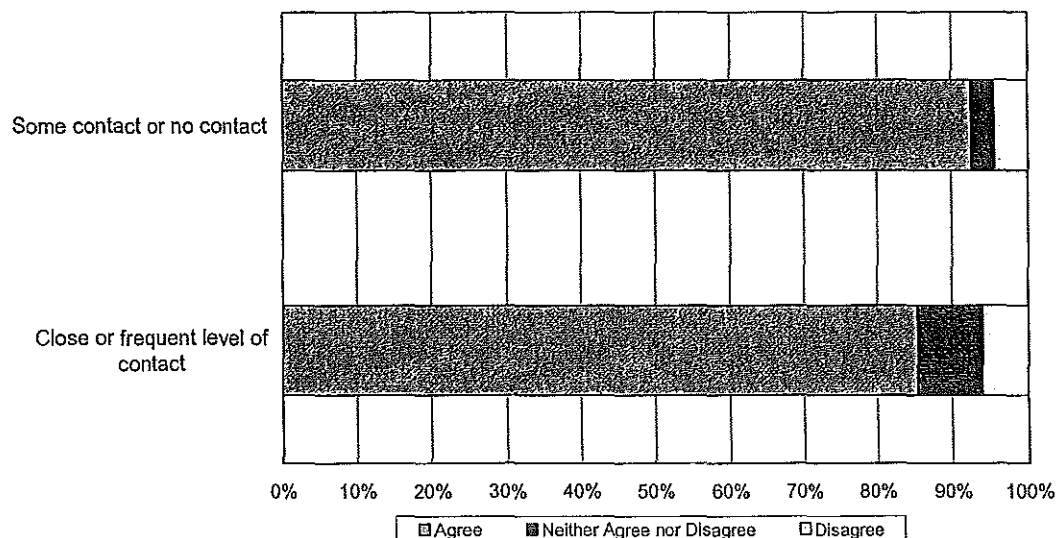


Figure 18: Agreement that “The ACT community is becoming more accepting of people with a disability over time” (q10) (percentage of respondents with and without regular contact with people with a disability)



Respondents with some form of tertiary education were less likely than respondents without tertiary education to agree that people with a disability:

- ◆ have the same access to services as other people in the ACT (see Figure 19);
- ◆ have the same opportunities to participate in community life as other people (see Figure 20); and
- ◆ overall, are treated fairly in the ACT (see Figure 21).

**Figure 19: Agreement that “People with a disability have the same access to services as other people in the ACT” (q6)
(percentage of respondents with and without tertiary education)**

COUNCIL IN CONFIDENCE

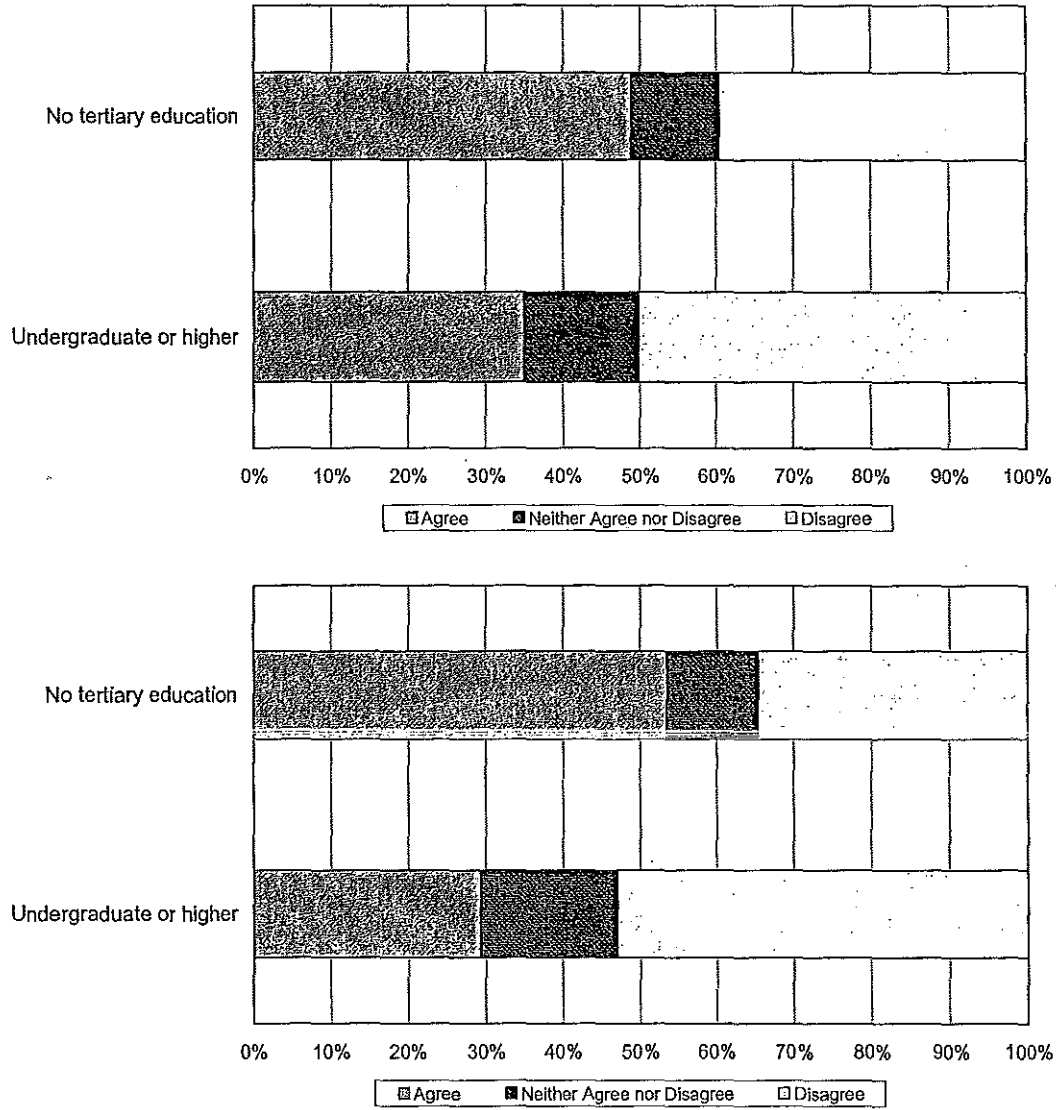
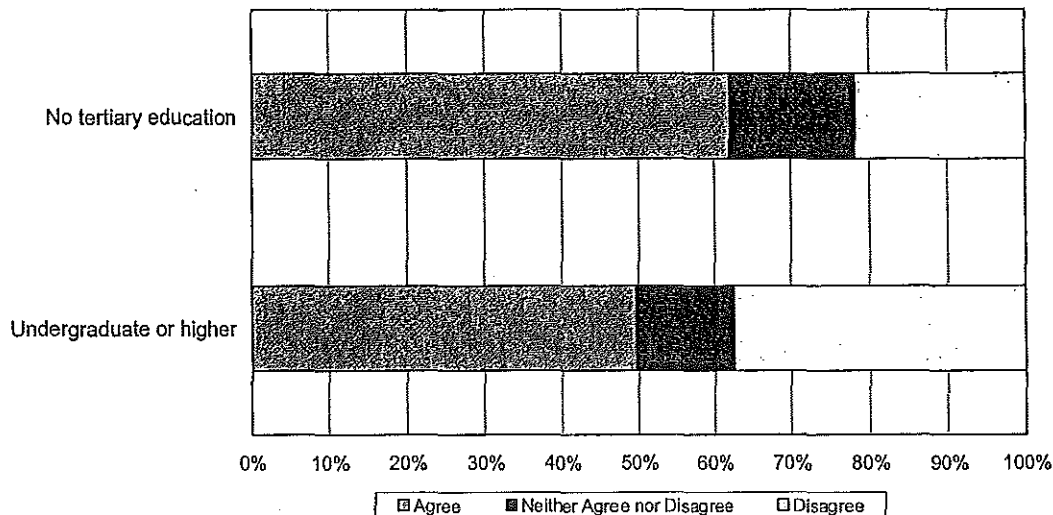


Figure 21: Agreement that “Overall, people with a disability are treated fairly in the ACT” (q9) (percentage of respondents with and without tertiary education)

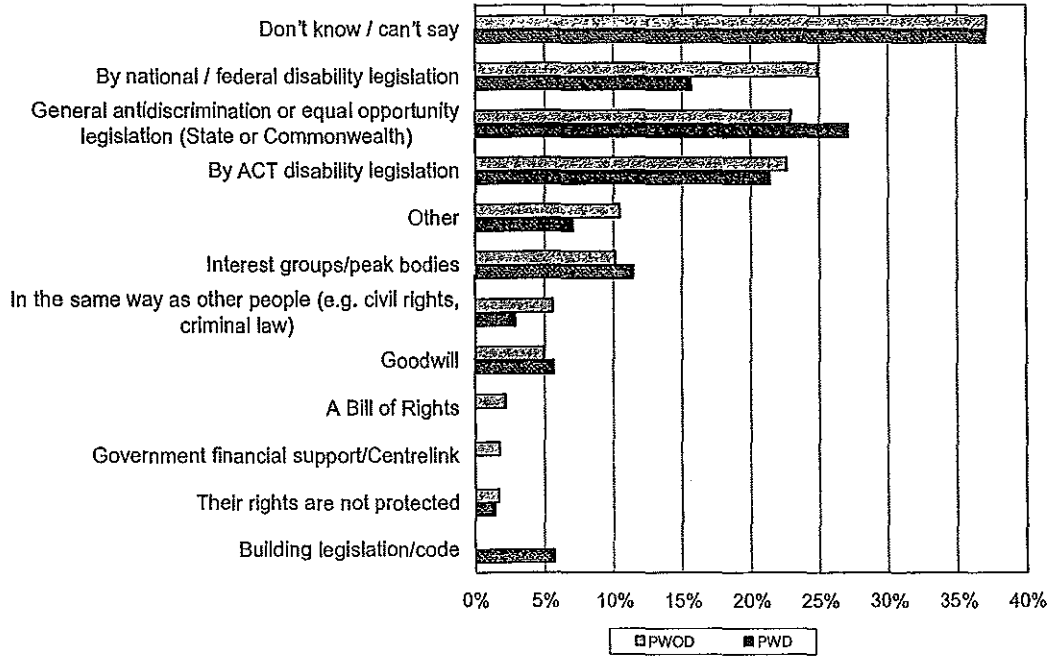


Respondents were asked if they knew how the rights of people with a disability were protected in the ACT (see Figure 22). 37% of respondents (both with and without a disability) indicated that they did not know how such rights were protected.

- ◆ Around 20–25% of respondents suggested that the rights were protected by some form of legislation (either specific disability legislation at the national or ACT level, or general antidiscrimination/equal opportunity legislation).
 - These respondents were asked if they could name the relevant legislation. Around one quarter of these respondents said that they could name the legislation, with most suggestions being variations of ‘Antidiscrimination Act’ or ‘Equal Opportunities Legislation’.
- ◆ Respondents with tertiary education were more likely to say that they knew how the rights of people with disabilities were protected in the ACT, with only 21% saying that they did not know and 31% saying that it was some form of general antidiscrimination or equal opportunity legislation.

Figure 22: How the rights of people with a disability are protected in the ACT – unprompted (q11) (percentage of respondents with and without a disability – multiple response)

COUNCIL IN CONFIDENCE



V. Views on disability issues

Respondents were asked for their views on a wide range of issues, including the employment of people with disabilities, making government and business services more accessible for people with disabilities, the education of children with disabilities, and general social/community issues.

Figure 23 shows the results for the five statements relating to employment issues. Note that two of these statements (questions 13 and 15) are asked in the negative, so a 'disagree' response can be considered positive.

- ◆ The most positive result was for the statement *employers should not make special allowances for people with disabilities* (question 15), with 82% of respondents without a disability and 79% of respondents with a disability disagreeing with this statement.
- ◆ Around three-quarters of respondents agreed that *the main problem faced by people with a disability at work is other people's prejudice* (question 14), and nearly 60% of respondents disagreed that *in general, people with disabilities cannot be as effective at work as people without disabilities* (question 13).
- ◆ There was some agreement that businesses should be required to employ more people with disabilities, even if this might lead to extra costs, but agreement was lower amongst respondents with a disability, and was lower in reference to local business compared to national/multinational businesses:
 - 47% of people without a disability and 34% of those with a disability agreed that *local businesses should be required to employ more people with disabilities, even if it might lead to extra costs* (question 16), with around 40% of respondents disagreeing
 - two-thirds of respondents without a disability and 59% of those with a disability agreed that *large national and multinational businesses operating in the ACT should be required to employ more people with disabilities, even if it might lead to extra costs* (question 17).
- ◆ There were no statistically significant differences between the results for respondents with and without responsibility for hiring staff.

Figure 23: Agreement with statements relating to employment issues (percentage of respondents with and without a disability)

COUNCIL IN CONFIDENCE

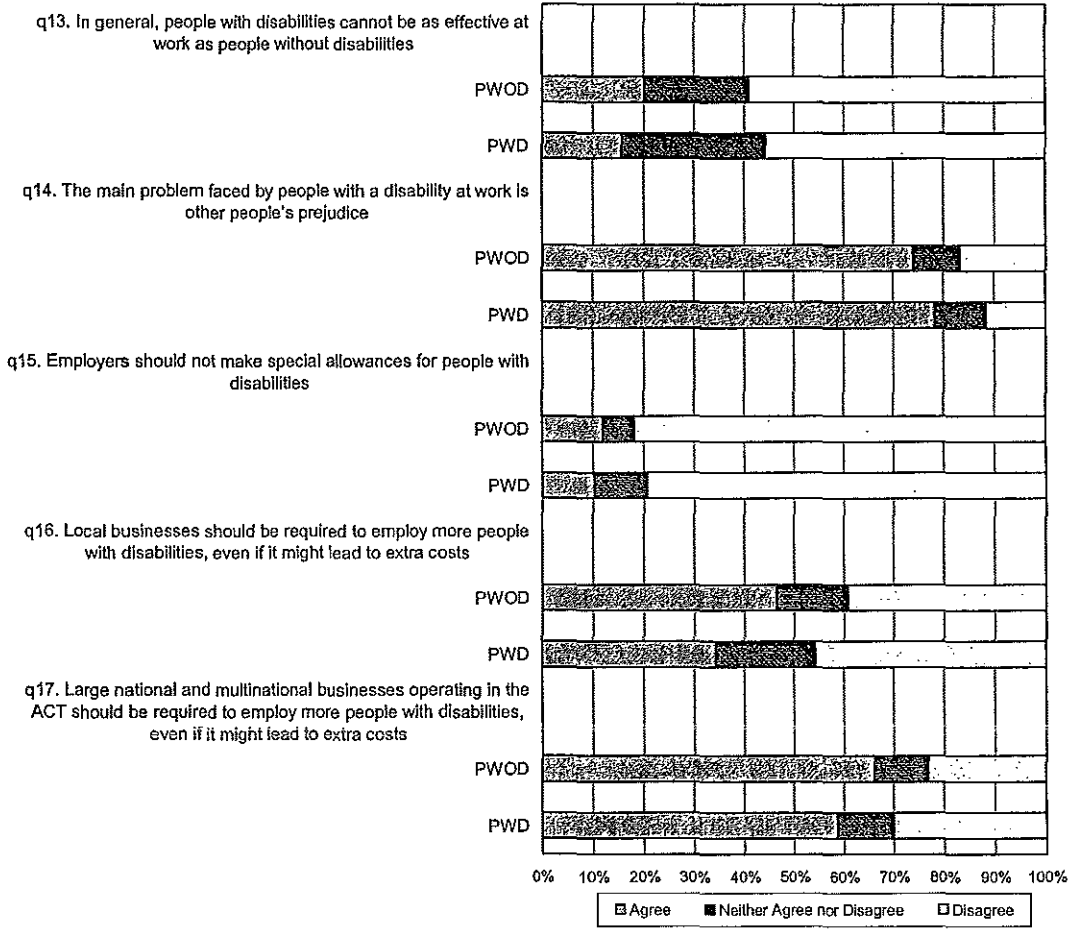


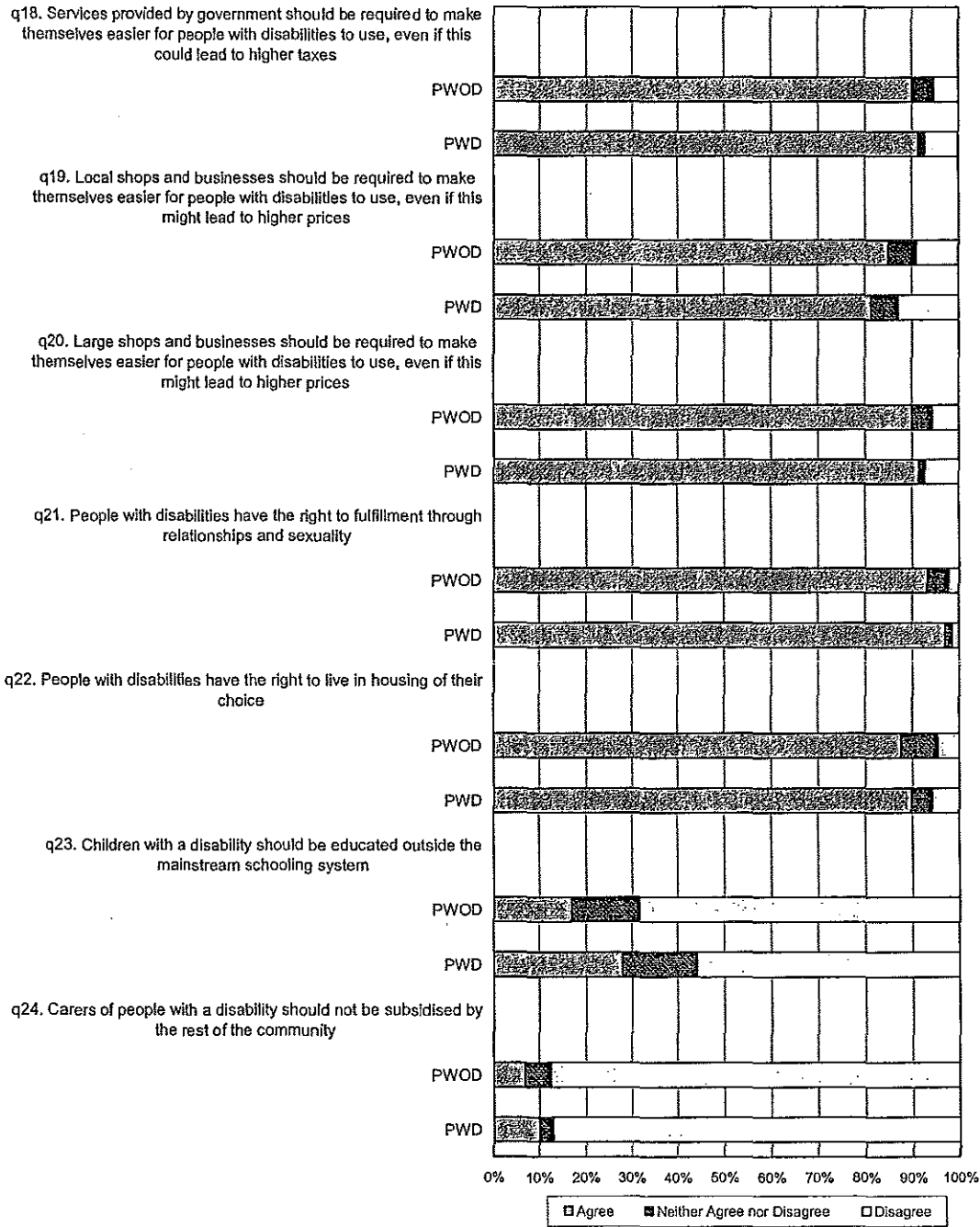
Figure 24 shows the respondents' agreement with the statements dealing with a range of social and community issues. Note that the last two statements (questions 23 and 24) are asked in the negative, so a 'disagree' response can be considered positive.

- ◆ For most of these statements, the results were strongly positive and similar for respondents with and without a disability, with around 90% or more agreeing that:
 - *services provided by government should be required to make themselves easier for people with disabilities to use, even if this could lead to higher taxes (question 18);*
 - *large shops and businesses should be required to make themselves easier for people with disabilities to use, even if this might lead to higher prices (question 20);*
 - *people with disabilities have the right to fulfilment through relationships and sexuality (question 21);*
 - *people with disabilities have the right to live in housing of their choice (question 22); and*
 - *carers of people with a disability should be subsidised by the rest of the community (question 24 – note that the actual question in the survey was worded 'should not be subsidised').*
- ◆ Between 81–85% of respondents agreed that *local shops and businesses should be required to make themselves easier for people with disabilities to use, even if this might lead to higher prices (question 19).*
- ◆ 68% of respondents without a disability and 56% of respondents with a disability disagree that *children with a disability should be educated outside the mainstream schooling system*, a statistically significant difference.

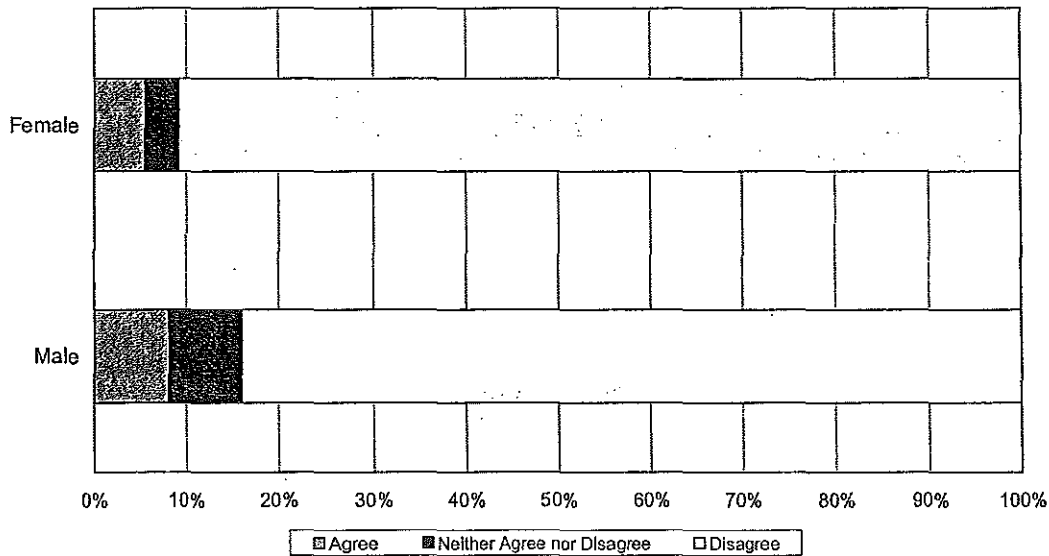
In the *Public Attitudes to Disability in the Republic of Ireland* report, 83% of respondents agreed that people with learning, physical or sensory disabilities had the same rights to fulfilment through relationships and sexuality as everyone else. Only 59% of respondents agreed that people with a mental health disability had the same right. Also, the Irish report found that 85% of respondents agreed that people with disabilities have the right to live in the accommodation of their choice.

Figure 24: Agreement with statements relating to community issues (percentage of respondents with and without a disability)

COUNCIL IN CONFIDENCE



There was a statistically significant difference between female and male respondents to the statement *carers of people with a disability should not be subsidised by the rest of the community* (see Figure 25), with 91% of females and 84% of males disagreeing with this statement.

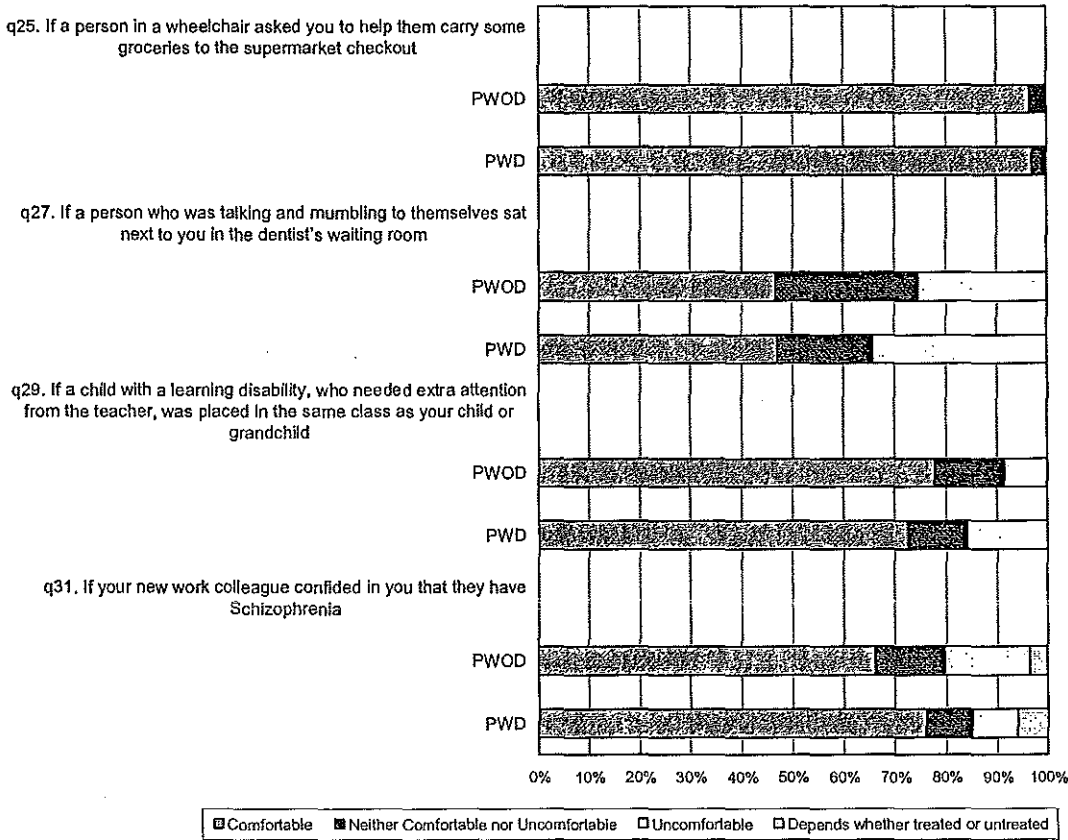


Respondents were asked to consider a range of possible situations involving contact with persons with a disability and to rate their degree of comfort in dealing with these situations (see Figure 26).

- ◆ Almost all respondents reported that they would feel comfortable if they were asked to *help a person in a wheelchair carry some groceries* (question 25).
- ◆ Less than half of respondents reported that they would feel comfortable if a *person who was talking and mumbling to themselves sat next to them in a dentist’s waiting room* (question 27), with 26% of respondents without a disability and 34% of respondents with a disability reporting that they would feel uncomfortable in this situation.
- ◆ Around three-quarters of respondents reported that they would feel comfortable if a *child with a learning disability, who needed extra attention from the teacher, was placed in the same class as their child/grandchild* (question 29).
- ◆ Two-thirds of respondents without a disability and 76% of respondents with a disability reported that they would feel comfortable if a *new work*

Figure 25: Agreement that “Carers of people with a disability should not be subsidised by the rest of the community” (q24) (percentage of respondents by gender)

colleague confided that they had schizophrenia (question 31) – a statistically significant difference.



For each of the situations described above, respondents who reported that they would feel uncomfortable in the situation were asked to explain why they would feel this way. Figure 27 shows the reasons provided by respondents who would feel uncomfortable in the dentist's waiting room scenario. Around half of respondents reported that they would be uncomfortable because they would be unsure why the person was behaving in that manner, with a substantial proportion of respondents concerned that they may do the wrong thing or offend the person.

Figure 27: Reasons for feeling uncomfortable if a person talking and mumbling to themselves sat next to respondent in a dentist's waiting room (q28) (percentage of respondents with and without a disability who would be uncomfortable in this situation – multiple response)

COUNCIL IN CONFIDENCE

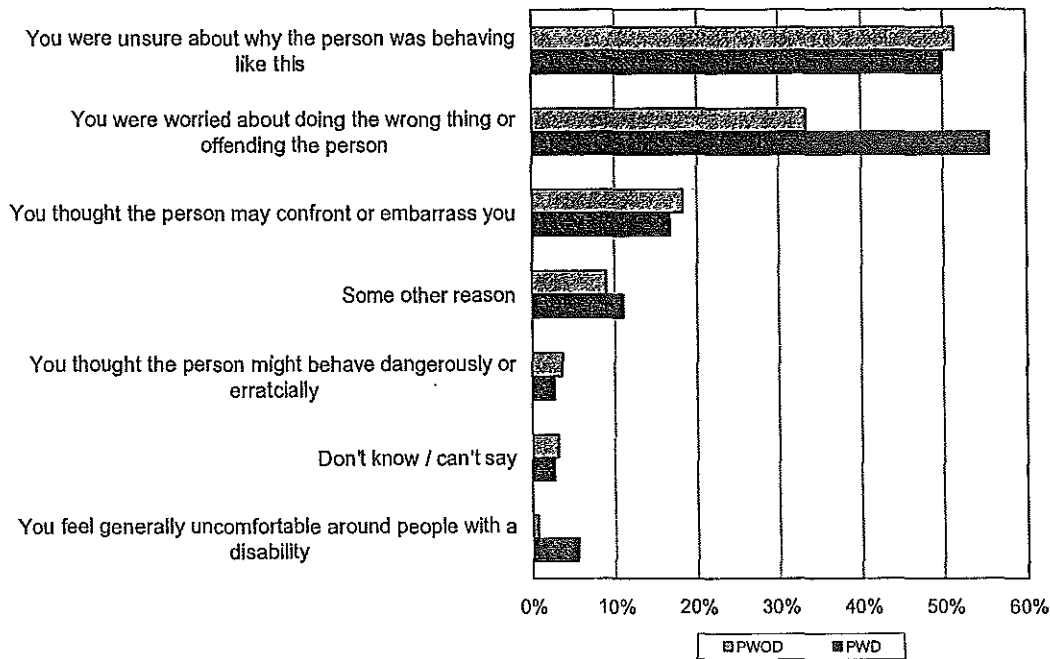


Figure 28 shows the reasons provided by respondents who would feel uncomfortable in the scenario where a child with a disability was placed in the same class as their child/grandchild.

- ◆ The majority of these respondents were concerned that their child/grandchild may not receive adequate attention.
- ◆ Other significant concerns were that the child with a disability may not get the attention that they needed, or with how the other children in the class would react to the child with a disability.

Figure 28: Reasons for feeling uncomfortable if a child with a learning disability was placed in the same class as respondent's (grand)child (q30) (percentage of respondents with and without a disability who would be uncomfortable in this situation – multiple response)

COUNCIL IN CONFIDENCE

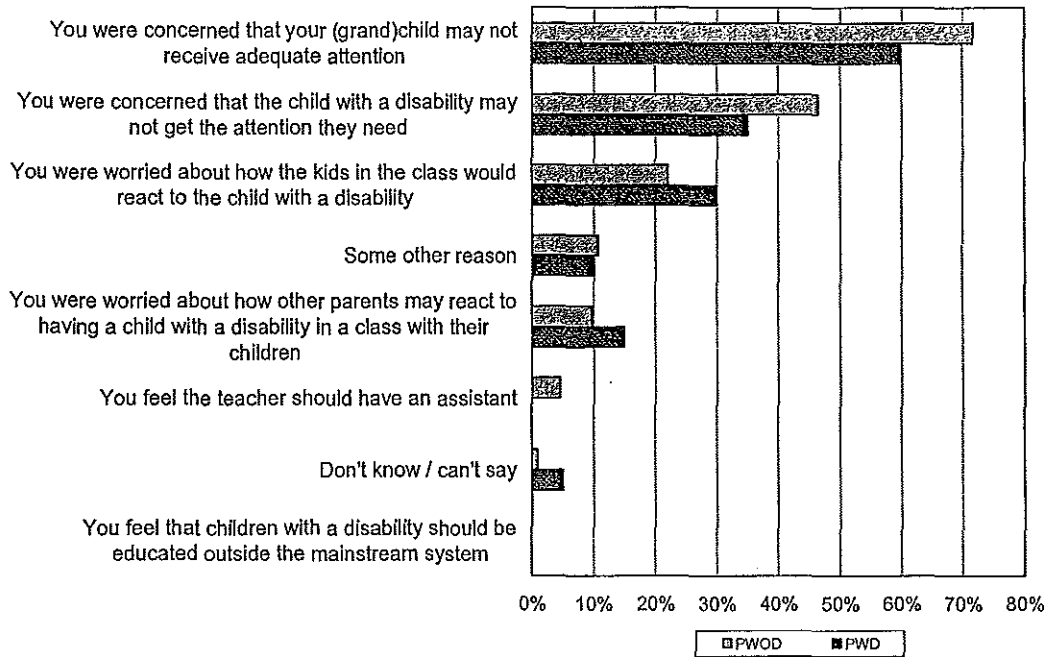
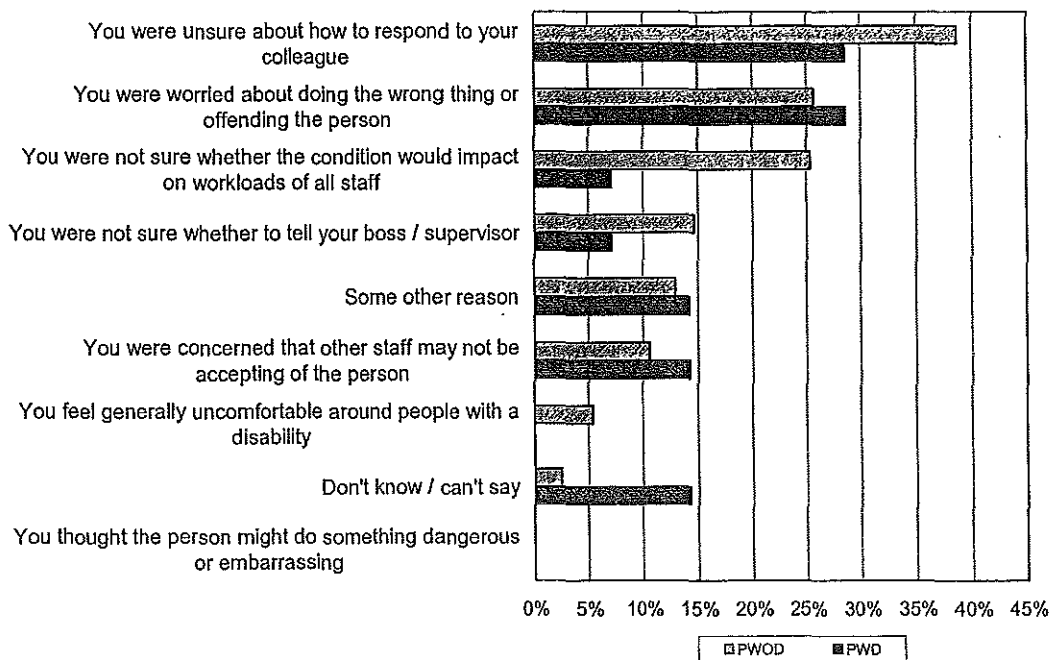


Figure 29 shows the reasons provided by respondents who were uncomfortable with the scenario where a new work colleague confided that they had schizophrenia.

- ◆ The most common concerns were with being unsure on how to respond to the colleague, doing the wrong thing or offending the person, and the impact the condition could make on the workloads of all staff.

Figure 29: Reasons for feeling uncomfortable if a colleague confided they had schizophrenia (q32) (percentage of respondents with and without a disability who would be uncomfortable in this situation – multiple response)

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Respondents were asked to rate on a scale of 1 to 5 the extent to which people with different types of disabilities were able to be *effective in the workplace*, where 1 = 'fully', 3 = 'partially' and 5 = 'not at all' (see Figure 30).

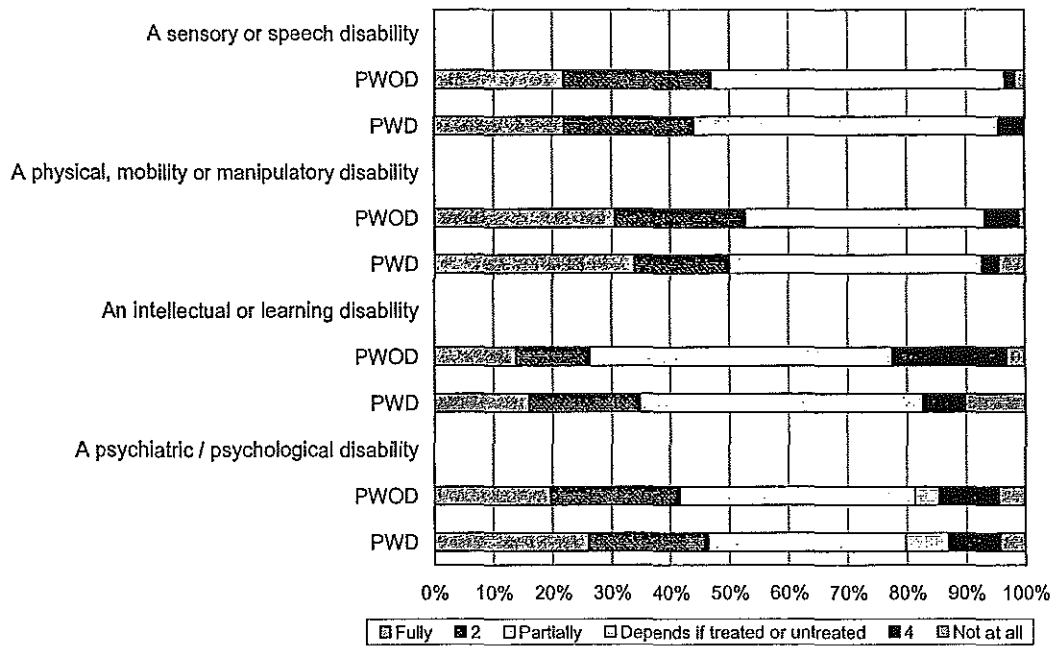
The results are generally similar for respondents with and without disabilities, with:

- ◆ around one-third of respondents feeling that people with *physical, mobility or manipulatory disabilities* are able to be fully effective in the workplace; and
- ◆ between 14 and 26% of respondents feeling that people with an *intellectual or learning, sensory or speech, or psychiatric/psychological disability* were able to be fully effective in the workplace.

Respondents who had regular contact with people with a disability were significantly more likely than those without regular contact to feel that people with a *physical, mobility or manipulatory disability* could be fully effective in the workforce (36% versus 26%) – a statistically significant difference.

**Figure 30: Extent to which people with the following types of disability are able to be effective in the workplace (q33)
(percentage of respondents with and without a disability)**

COUNCIL IN CONFIDENCE

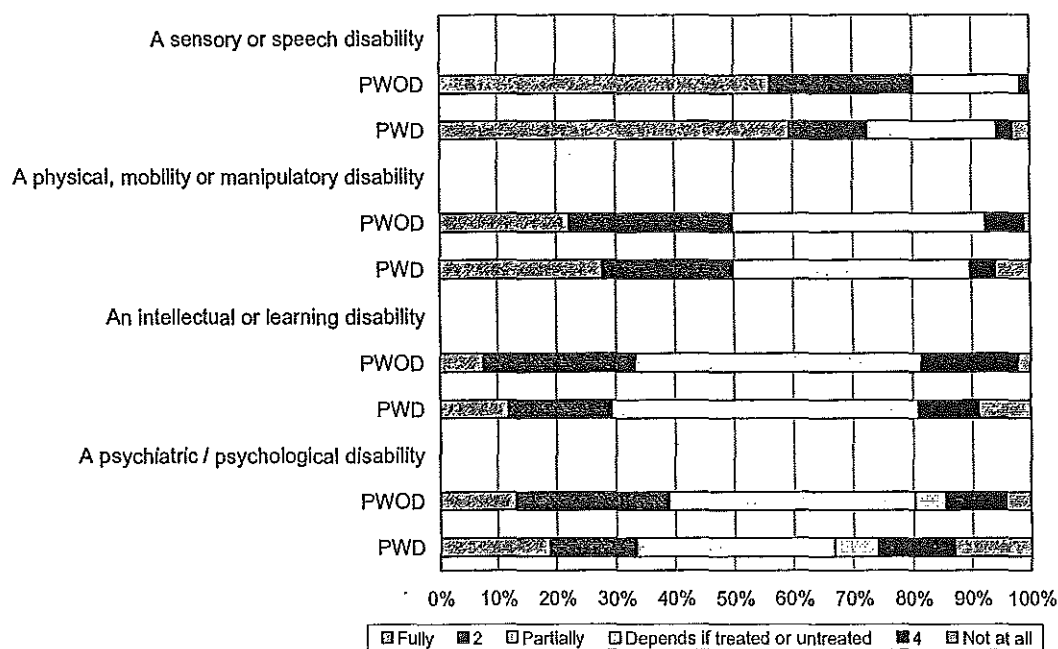


Respondents were then asked to rate the extent to which people with different types of disabilities could be effective in *having control of and managing their own lives* (see Figure 31). The results are again generally similar between respondents with and without disabilities, with:

- ◆ the majority of respondents (nearly 60%) feeling that people with a *sensory or speech disability* could be fully effective;
- ◆ around one quarter of respondents feeling that people with a *physical, mobility or manipulatory disability* could be fully effective; and
- ◆ between 8 and 19% of respondents feeling that people with an *intellectual or learning or psychiatric/psychological disability* could be fully effective.

Respondents who had regular contact with people with a disability were more likely than those without regular contact to feel that people with a *sensory or speech disability* or a *physical, mobility or manipulatory disability* could be fully effective in having control of and managing their own lives (62% versus 51% for a sensory/speech disability, and 27% versus 17% for a physical/mobility/manipulatory disability) – both statistically significant differences.

Figure 31: Extent to which people with the following types of disability are able to be effective in having control of and managing their own lives (q34) (percentage of respondents with and without a disability)



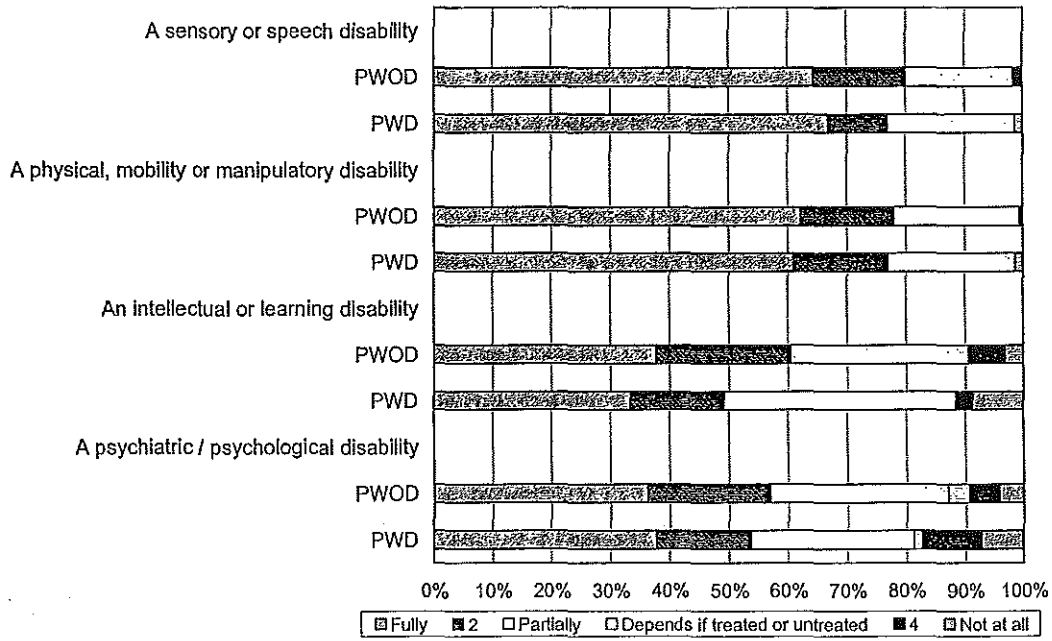
Respondents were then asked to rate the extent to which people with different types of disabilities could be effective in *contributing to society* (see Figure 32). The results again show very little difference between the results for respondents with and without disabilities, with:

- ◆ between 61 and 67% of respondents feeling that people with a *sensory or speech* or *physical, mobility or manipulatory disability* could be fully effective; and
- ◆ between 33 and 38% of respondents feeling that people with an *intellectual or learning* or *psychiatric/psychological disability* could be fully effective.

Respondents who had regular contact with people with a disability were more likely than those without regular contact to feel that people with an *intellectual or learning* or *psychiatric/psychological disability* could be fully effective in contributing to society (46% versus 30% for an intellectual or learning disability, and 41% versus 31% for a psychiatric/psychological disability) – both statistically significant differences.

**Figure 32: Extent to which people with the following types of disability are able to be effective in contributing to society (q35)
(percentage of respondents with and without a disability)**

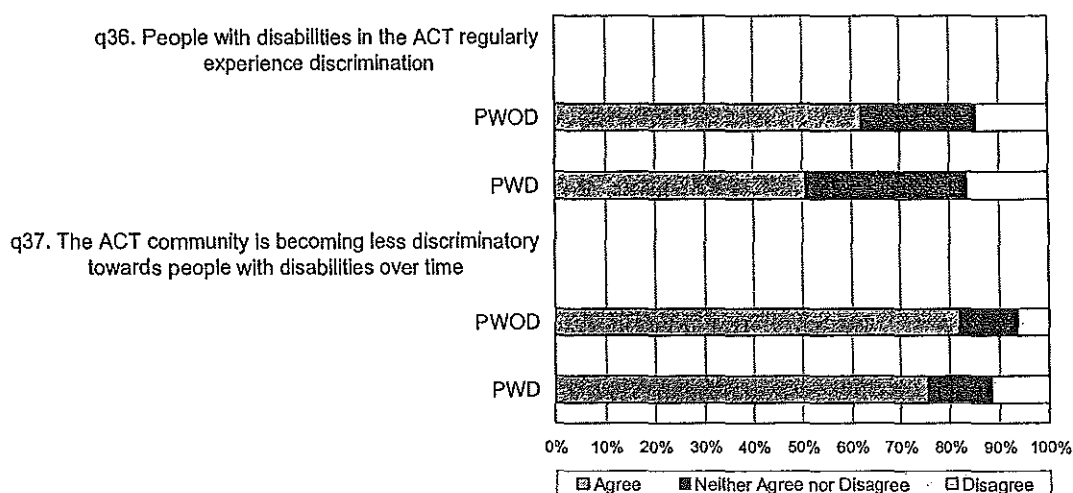
COUNCIL IN CONFIDENCE



VI. Changing attitudes

Respondents were asked for the extent of their agreement that *people with disabilities in the ACT regularly experience discrimination* and that *the ACT community is becoming less discriminatory towards people with disabilities over time* (see Figure 33).

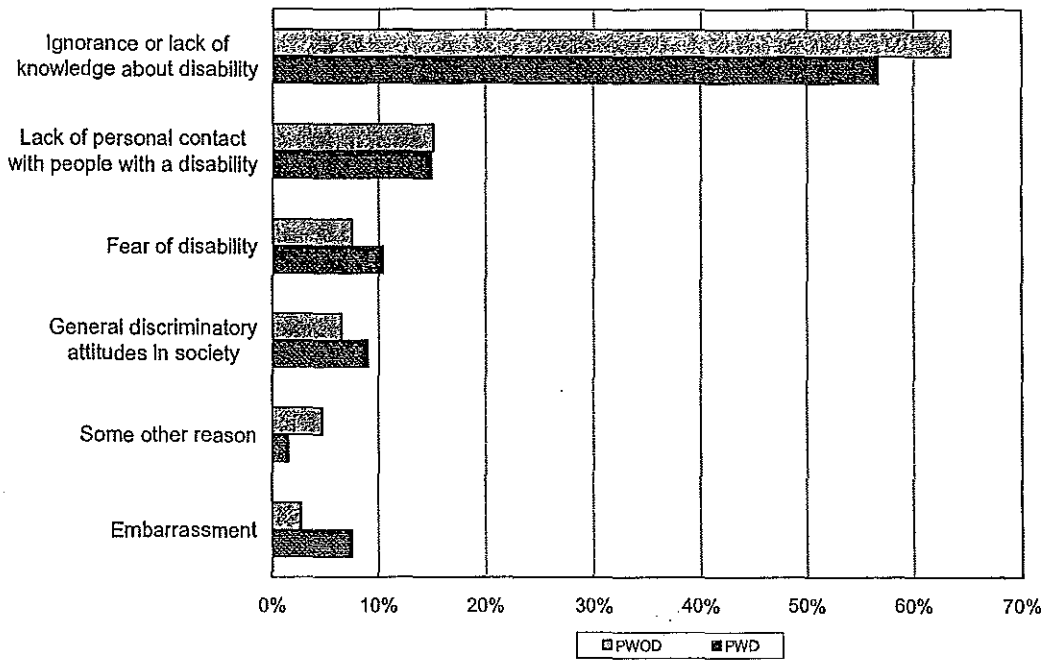
- ◆ Respondents without a disability were more likely to agree that *people with disabilities in the ACT regularly experienced discrimination* (62% - compared to 51% of respondents with a disability).
- ◆ The majority of respondents agreed that *the ACT community is becoming less discriminatory towards people with disabilities over time* (82% of respondents without a disability and 75% of respondents with a disability).
- Respondents who had regular contact with people with disabilities were significantly more likely to agree that the ACT community was becoming less discriminatory over time (87% agreement, compared to 77% agreement amongst respondents without regular contact).



Around 60% of respondents felt that prejudice and discrimination against people with a disability was mainly because of ignorance or a lack of knowledge about disability, by far the most common reason given (see Figure 34).

Figure 34: Possible reasons for prejudice and discrimination against people with a disability (percentage of respondents with and without a disability)

COUNCIL IN CONFIDENCE

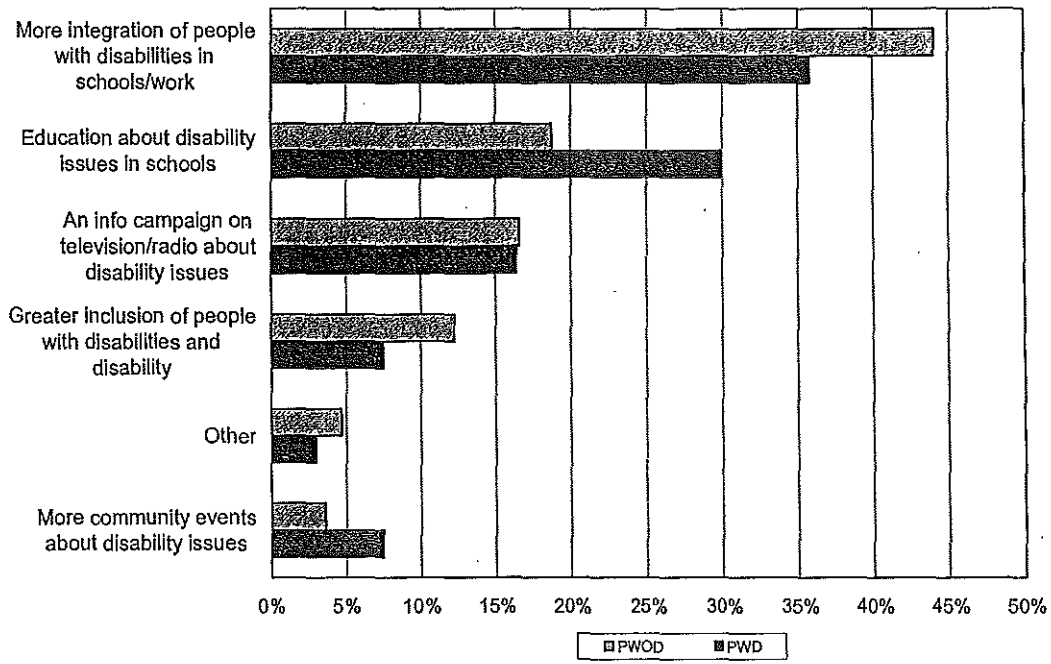


Respondents were asked to choose an approach that would have the most impact on increasing community understanding and acceptance of people with a disability in the ACT (see Figure 35).

- ◆ The most common suggestion was greater integration of people with disabilities in schools and workplaces (made by 44% of respondents without a disability and 36% of respondents with a disability).
- ◆ 30% of respondents with a disability also suggested that education about disability issues in schools would have an impact.

Figure 35: Approaches that could have the most impact on increasing community understanding and acceptance of people with a disability (percentage of respondents with and without a disability)

COUNCIL IN CONFIDENCE



VII. Conclusions

The results of this survey showed that the ACT community's perceptions of disability are largely based on physical characteristics. While almost all respondents nominated without prompting a physical, mobility or manipulatory disability as characterising a person with a disability, only around half of respondents recalled intellectual/learning disabilities, psychiatric/psychological disabilities, or sensory/speech disabilities.

The respondents also provided a wide range of estimates for the scope of disability in the ACT. 40% of respondents without a disability estimated that 20% or more of ACT residents had some form of disability (based on a commonly accepted definition of a disability), while 16% of respondents felt that 5% or less of the ACT community had some form of disability.

The vast majority of respondents (89% of those without a disability and 81% with a disability) agreed that the ACT community is becoming more accepting of people with a disability over time, and around 80% of respondents agreed that the ACT community was becoming less discriminatory towards people with disabilities over time.

However, a significant proportion of respondents felt that people with a disability did not receive the same opportunities as other members of the community, with around one-third of respondents disagreeing that people with a disability are treated fairly in the ACT, and more than half of respondents agreeing that people with disabilities in the ACT regularly experience discrimination. Nearly half of respondents felt that people with disabilities did not receive adequate financial support from the government.

There was very high agreement with a variety of statements concerning the role of people with disabilities in the community, with around 90% or more of respondents agreeing that people with disabilities have the right to fulfilment through relationships and sexuality and that they have the right to live in housing of their choice. Similar proportions agreed that government services, shops and businesses should be required to make themselves easier for people with disabilities to use (even if this could lead to higher taxes and prices).

While only 20% of respondents felt that people with disabilities were not able to be as effective at work as people without disabilities, respondents clearly felt that disability was seen as a barrier in the workplace. Around three-quarters of respondents agreed that the main problem faced by people with disabilities at work was other people's prejudice, and 40% felt that people with disabilities were not treated fairly by employers in the ACT. The majority of respondents (around 80%) felt that employers should make special allowances for people with disabilities.

To help test the community's degree of understanding and comfort with different types of disabilities, respondents were described a series of scenarios depicting interactions with people with disabilities. The results showed that while the respondents were comfortable dealing with physical disabilities (with 97% of respondents indicating that they would feel comfortable helping someone in a wheelchair with their groceries), they were far less comfortable in dealing with a person who may have had a psychiatric or psychological disability. For example, only two thirds of respondents said they would feel comfortable if a new work colleague confided that they had schizophrenia, and less than half said they would feel comfortable if a person displaying challenging behaviours sat next to them.

This result was also reflected in the responses for the extent to which people with different types of disabilities could be effective in contributing to society, where more than 60% of respondents said that people with a sensory/speech or physical, mobility or manipulatory disability could be 'fully' effective, but less than 40% said that people with an intellectual, learning or psychiatric/psychological disability could be 'fully' effective.

The most common reason for prejudice and discrimination against people with a disability was thought to be ignorance or a lack of knowledge about disability. In line with this, the most common

COUNCIL IN CONFIDENCE

suggestions provided by respondents for increasing community understanding and acceptance of people with a disability was for more integration of people with disability in the workplace and schools, and for increased education and information campaigns about disability issues.

Inclusive schools **ideas for awareness raising on disability in ACT schools**

Some options for scoping during post survey fieldwork arising from the principle findings of *The Report on a survey of community attitudes towards disability in the Australian Capital Territory* conducted by the ACT Disability Advisory Council in conjunction with the ACT Department of Disability, Housing and Community Services

a) AMBASSADOR PROGRAM:

The ACT could pilot **Disability Ambassadors in ACT Schools** by involving people with a range of disabilities, including people in a youth demographic, who would be available to come into classrooms and talk about disability and raise awareness on a range of issues including psychiatric disability.

The Ambassadors could include people with a youth appropriate profile who have achieved in employment, youth development or sport.

The Ambassadors could also be role models for children and young people with disabilities in schools, youth development organizations and other community groups.

b) AWARENESS BUILDING IN SCHOOLS:

1. Placement of a lively **newspaper education supplement** on people with disabilities in the Chronicle or Canberra Times.

This might include discussion activities, puzzles, word games, information on different disabilities, interesting facts, historical information, stories/poems, a sign language and Braille alphabet, access tips, interesting www links and ideas for various school based activities.

2. An ACT Inclusive Schools week or day

- A menu of school based activities across ACT Schools which would focus on raising awareness about disability. This could include hands on activities, Ambassador visits, storytelling, excursions, classroom, school and community based celebrations - a list of celebration ideas would be circulated - i.e, an essay competition, classroom window displays, developing a school book/poster, button to wear during the week, writing or performing in a role play, making a video or radio play or having an inclusion based school assembly.
- A second tranche of the celebrations could be promoting action to increase the capacity of schools to include students, staff and other members of school communities who have disabilities, e.g, better practice stories from inclusive schools, statements of commitment from school communities to meet Challenge 2014, challenging the student body to find one thing they can fix in their school.

environment and then fixing it and so on. The actions could be school based or coordinated in the local community through Parent Citizen Associations.

- The week or day could be held to coincide with the UN International Day of People with a Disability in December.
- It might also be possible to include a **focus on inclusion in ACT Schools in this year's ACT Inclusion Awards.**

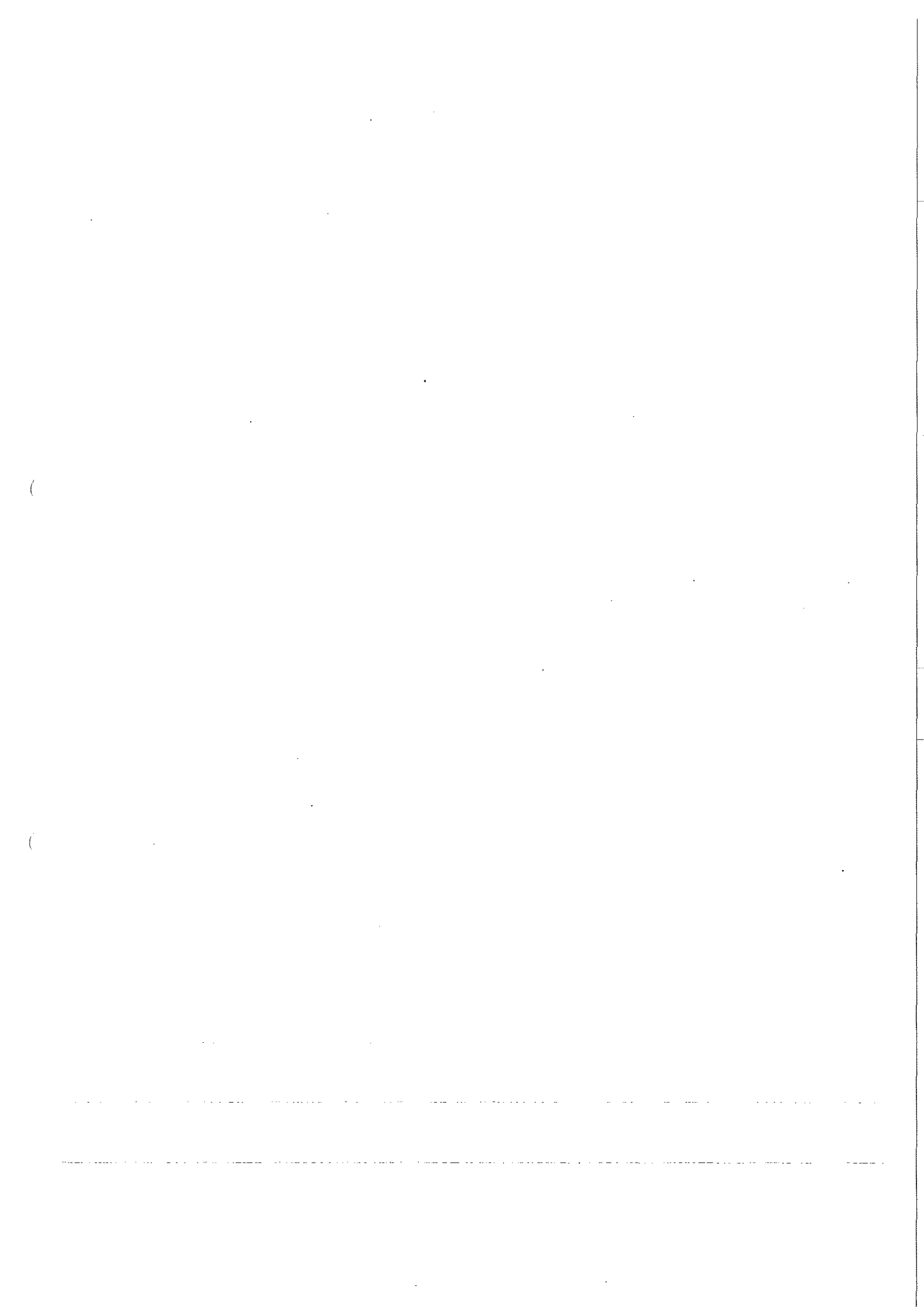
c) OFFERING OUT OF SCHOOL EXPERIENCES

iii) **Having a temporary or permanent exhibition, space or place** where Canberra children (and possibly others) could go to learn about disability possibly bundled up with a trip to local cultural/science institution or placed within a disability organisation.

This could have interactive features like Questacon with a school group workbook program lead by a facilitator, possibly a person with a disability.

There could be opportunities for children and young people to journey through the exhibition in a thematic way and learn, explore & experience different kinds of disability along the way.

The menu of fun activities on offer might include some 'come and try activities' in areas such as wheelchair sport as well as some experiential games designed to simulate the experience of having different disabilities, role playing games, examples of new technology, learning a word in braille or sign language, interactive puzzles and other games.



FILE



JOHN HARGREAVES MLA

MINISTER FOR DISABILITY, HOUSING AND COMMUNITY SERVICES
MINISTER FOR URBAN SERVICES
MINISTER FOR POLICE AND EMERGENCY SERVICES

MEMBER FOR BRINDABELLA

Mr Craig Wallace
Chair
ACT Disability Advisory Council
C/- Secretariat
PO Box 5372
Cooma Nth NSW 2630

Dear Mr Wallace

Thank you for your letter dated 22 February 2005 and the enclosed copy of 'Snapshot of community attitudes on disability in the ACT'. Thank you for keeping me informed about Council's activities supporting the inclusion of people with disabilities in the Canberra community.

It is evident that the 'Snapshot of community attitudes on disability in the ACT' provides Government and the community with valuable insight into community perceptions of disability and the areas of attention where further action is required to promote a welcoming community.

Such insights are important in working to achieve the Vision for people with disabilities and goals set out in *Challenge 2014 - A ten-year vision for disability in the ACT*. At the heart of the Vision that "all people with disabilities achieve what they want to achieve, live how they choose to live and are valued as full and equal members of the ACT community" is the premise that everyone makes a valuable contribution to their community. I acknowledge that Government and the community must work together to meet the challenges and break down the barriers to achieving these goals.

The ACT Government's strategic framework for disability is set out in *Future Directions: A Framework for the ACT 2004-2008 (Future Directions 2004-08)*. Strategic Direction 1 aims to:

- foster positive community attitudes towards people with disabilities;
- minimise barriers and maximise opportunities;
- promote legislation in the ACT that is inclusive and promotes human rights;
- influence mainstream policies so that they reflect the perspectives of people with disabilities; and

ACT LEGISLATIVE ASSEMBLY

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ACT 2601

Phone (02) 6205 0020 Fax (02) 6205 0495



-
- adopt and promote inclusive workplace policies and practices resulting in increased participation in the workforce.

As the lead government agency responsible for implementation of *Future Directions 2004-2008*, Disability ACT will be consulting with the community about priorities and actions to support people with disabilities as full and equal members of the Canberra community.

Current initiatives that support the aims under Strategic Direction 1 include:


- *International Day of Disability Inclusion Awards* - an ongoing opportunity to recognise businesses that support the inclusion of people with disabilities.
- *ACT Access to Government Strategy* - aims to improve access to all ACT Government services and facilities for people with a disability. Government Departments have completed accessibility audits and the majority have an Action Plan in place.
- *ACT Public Service Employment Framework for People with a Disability* - The Department of Disability, Housing and Community Services (DHCS) anticipates the launch of an Employment Framework Toolkit for potential employees with a disability, as well as current DHCS staff and supervisors. The toolkit will address the 'Snapshot' finding that "the community wants to see more of an effort to support the employment of people with a disability".

In addition to those initiatives, the Disability Awareness Group recently met for the first time. This group identified that the development of awareness raising campaigns and training will be an effective way to highlight the abilities of people with disabilities. This initiative will provide an opportunity for Council to work with the community and Disability ACT towards raising general awareness, decreasing barriers of access and improving direct service responses for people with a disability.

I have been informed that the Department's Media and Communications Unit is interested in discussing the 'Snapshot' with Council and ways of addressing the key findings of the research; the contact being Julie Jefferis on either phone: (02) 6205 0619 or email: julie.jefferis@act.gov.au

I would be happy to discuss the "Snapshot" work further at our next meeting.

Yours sincerely


John Hargreaves MLA
Minister for Disability, Housing and Community Services

27 March 2005



A.C.T. Disability Advisory Council

Advising the Minister for Disability, Housing and Community Services

Please direct correspondence to:
Craig Wallace, Chair
The ACT Disability Advisory Council
Co/- The Secretariat
PO Box 5372
Cooma NSW 2630
talyealyc@netspeed.com.au

Monday, 14 June 2005

MEDIA RELEASE

Public Meeting on Wheelchair Accessible Taxis

The ACT Disability Advisory Council has invited people with disabilities and friends to a meeting to give their views on the standard of service being provided by wheelchair accessible taxis in Canberra.

The outcomes of this consultation will be provided to the Wheelchair Accessible Taxis Reference Group, which is advising the Minister for Urban Services, and Disability, Housing and Community Services, on this issue.

Where: Meeting room, Grnd floor, ACT Legislative Assembly, Civic Square
When: 12 noon - 2pm, Saturday 18 June 2005

Craig Wallace, Council Chair, said that the meeting '*will provide people with disabilities and families with an important opportunity to provide feedback about improving services. We are serious about listening to people, lifting the standard and getting it right.*'

This meeting is supported by People with Disabilities ACT, the Department of Urban Services and the Department of Disability Housing and Community Services.

Media Contacts: Craig Wallace, Chair ACT Disability Advisory Council ph. 0413 135 731
PWD – Dennis Stabback or Megan Kelly ph 6290 1984.



ACT Government



**People With
Disabilities.**
ACT Inc

Have YOUR say on Wheelchair Accessible Taxis

The ACT Disability Advisory Council invites people with disabilities and friends to a meeting to give their views on the standard of service being provided by wheelchair accessible taxis in Canberra.

The outcomes of this consultation will be provided to the Wheelchair Accessible Taxis Reference Group, which is advising the Minister for Urban Services, and Disability, Housing and Community Services, on this issue.

Details of the meeting

Where: Meeting room, ground floor, ACT Legislative Assembly Building, Civic Square
When: 12 noon - 2pm, Saturday 18 June 2005

RSVPs for this meeting are not required. If you have any specific support needs please contact Geraldine Haywood Mercer, Secretariat to the Council, on ph 6452 5387 or email talyealye@netspeed.com.au by 13 June 2005.

This meeting is supported by People with Disabilities ACT, the Department of Urban Services, and the Department of Disability Housing and Community Services.



ACT Disability Advisory Council

What WAT customers want

A submission to the Reference Group on Wheelchair Accessible Taxi's

Reliability, consistency, dependability...'

A person asked to summarise what they would change

"there is potential but... there needs to be radical changes. All issues raised today need to be taken seriously as they are valid! And real!"

A person asked about their hopes for the future

"There are too many to describe ... I (have them) written on file at home – over a period of 25 years..."

A person asked to describe their 'worst' experience

"We're spending all this money! Shouldn't we be 'gold card' customers or something, instead of at the bottom of the heap?"

A person asked about customer service

'a group of people in our Canberra community are being required to spend around one-third or in some cases more than half of their income on a commercial service they believe is not customer focussed and that they describe almost universally as poor'

From the report

Quotes & extracts arising from the ACT Disability Advisory Council wheelchair accessible taxi public consultation meeting, ACT Legislative Assembly, 18 June 2005

Date submitted: 22 June 2005

Contact: the Secretariat, PO Box 5372 Cooma NSW 2630

COUNCIL IN CONFIDENCE

INTRODUCTION

A Reference group has been formed by the ACT Minister for Transport to look at ways to improve services to users of Wheelchair Accessible Taxis. The Reference Group consists of a Steering Committee and a Working group both of which include ACT Disability Advisory Council representation.

The Group has issued a call for public submissions and Council agreed to facilitate a consultation opportunity for people with disabilities and families at the Legislative Assembly on 18 June 2005. The consultation was supported by the ACT Government Departments of Urban Services, Disability, Housing and Community Services and People with Disabilities ACT.

It was a productive and well-attended meeting, which involved 40 registered participants, including a high proportion of WATS users. The CEO of Canberra Cabs, the Minister and the Shadow Minister were present at various points.

The meeting was structured around identifying views on the features of an ideal taxi service as well as identifying problems and solutions especially in the areas of safety, comfort and access; timeliness and reliability; and customer service. There were small group sessions and open discussion.

Feedback forms were distributed including a survey on customer experiences to complement the larger session.

There is no better feedback than from WATS customers themselves and we were pleased with the quality of the feedback provided by them. They tell us that we may require the courage to make radical change if we are to create the kind of service that the customers of wheelchair taxis want and deserve.


Some people told us about safety concerns in WATS, including one very serious incident. Taken at face value we warn that they warrant immediate analysis and risk minimisation by the company or the regulator before an accident resulting in the serious injury or death of persons occurs.

Council; has decided that the report from this meeting, along with some additional comments in part 1, will form the body of our submission to the reference group.

We thank them for their valued, honest contributions and the partner agencies involved and my Council colleagues and staff for their support of the forum.

In the words of a forum participant, we *really* do hope change happens this time and welcome the opportunity to contribute to that through this submission.

Regards



Craig Wallace
Chair
ACT Disability Advisory Council
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PART 1: WHAT PEOPLE TOLD US

A summary and some observations on the key findings

- **People with disabilities are a valuable and loyal customer base for Canberra Cabs.**
 - The people with disabilities we spoke to use taxis around 5 times in any one week and on average spend around \$77 per week on them – a significant cluster of people¹ reported spending \$150 per week.
 - Even accounting for inherent biases in this meeting based survey, this is a startling figure which questions the notion that people with disabilities are not an important, viable market for the Canberra taxi industry if it were managed properly
 - Instead we say people with disabilities are an important market and premium customers who should be getting more from the company.
 - It is worth noting the context that a number of people with disabilities who are WATS users are reliant on Disability Support Pension which for a single person over 21 without a child is \$238.15 per week (plus \$34.85 per week Mobility Allowance in most cases). That same group still cannot by large successfully use buses or any other form of public transport. Many cannot drive.
 - So we suggest that a group of people in our Canberra community are required to spend around one-third or in some cases more than half of their income on a commercial service they believe is not customer focussed and that they describe almost universally as poor.
- **People report serious ongoing concerns about the reliability and timeliness of Wheelchair Accessible Taxi's.**
 - When asked *no one* described service as excellent, most said poor.
 - They tell us WATS are late nearly all the time and sometimes for hours at a time.
 - People are late for medical appointments, for job interviews, for work and for family and community activities.
 - They describe a situation which Council believes is unacceptable and inconsistent with community expectations that people with disabilities are entitled to equality, access and fairness.
 - Radical, fundamental change may be needed given such a breakdown of service. The scale of the issue means a range of solutions should be looked at, including the governance and business model. This should include looking at making all taxis accessible, with a range of vehicle options to accommodate both driver and customer issues.

¹ Around a quarter of respondents to that question

COUNCIL IN CONFIDENCE

- **People are concerned about safety and comfort in the taxis.**
 - Very few people told us they were completely happy with the current maxi vehicle.
 - People did say that there needed to be a range of models including maxi buses to meet a range of needs and that some bus type vehicles were better than others.
 - A few people told us about accidents, injuries and serious adverse events connected to WATS and, taken at face value, these are of concern to the Council. These concern reports about driving style and a lack of or use of seat belts securing the seated person in transit.
 - Council warns that these issues warrant immediate attention before a more serious, perhaps life threatening, accident occurs.
 - Better driver training is urgently needed – both on safety issues and attitudes to disability. There is no reason why this should wait until the reference group has reported and Canberra Cabs and the Government should start the process now.

- **Some people have formed positive, existing relationships with drivers based on private bookings.**
 - People with disabilities know who the good drivers are and they value this service and customer focus.
 - Despite the many problems people with disabilities are remaining constructive and don't want to 'blame' drivers – they want a focus on solutions and an end to blame shifting between drivers and the company.

- **Better driver education and training and tailored responsive services** were key themes across the consultation. Perhaps the key issues are best summarised by one respondent to the written feedback component who simply wrote this about the issues....
 - 'Reliability, consistency, dependability'

PART 2: AN IDEAL SERVICE

Participants were asked through a small group exercise to imagine a scenario where they were responsible for designing policies for a new taxi service, which provided an ideal standard of service to Canberra people with disabilities.

Key outcome themes were grouped under headings as follows. They provide a good description of what the customers want from WATS.

QUALITY, CUSTOMER SERVICE & RELATED ISSUES

- Customer service – time/safety, comfort, no. of cabs and drivers.
- Complaint mechanism – allows people to provide constructive feedback of customer service.

COUNCIL IN CONFIDENCE

- Education / training of cab drivers with refresh courses.
- Communication between Canberra Cabs / Taxi Drivers / Operators & Client.
- Process for booking taxis with separate line/number for wheelchair taxis.
- Need to examine booking process allocation of work/notice to drivers.
- Told at time of booking if peak time notify customer best time to travel.
- Currently not enough vehicles for demand not making \$.
- Incentives to retain drivers.
- Personal relationships; all customers have different needs.
- Customers to stay inside – tell taxi company pick up destination.
- Customer profile – special needs – transfer of knowledge of each driver. Use in computer system info to all drivers.
- Customer pick-up many in one trip.
- No competition / Canberra small buses.
- “Gold Card Service” taxi company make \$ of these customers develop customer profile extra step of service include to go inside and assist client to taxi

TIMELINESS & RELIABILITY

- Within a reasonable time. 10 – 15 mins.
- Plastic card with all travel being subsidised.
- Booking system problems.
- Must always be a minimum number on the road.
- Ownership of cabs – driver or company
- All taxis be wheelchair accessible.
- Private bookings
- Problems when taxi is in Belconnen and the job is in Tuggeranong – too expensive for the taxi driver – could there be compensation?
- Should be able to phone and book a cab and the cab arrive the same as for the rest of the public.
- Should you need to phone and book?
- Should drivers be employed on a salary?
- Drivers must take all jobs.
- Why do people need the taxi?
- Database of people and their specific needs.

COUNCIL IN CONFIDENCE

- All WAT taxis should be able to carry all sizes and types of wheelchairs.
- Time of year should not matter – the service should be constant.
- All needs should be assessed.
- A mission statement is needed.
- Drivers need to be accredited.
- Driver should look for the passenger – perhaps phone the passenger and find out where they are.
- Permanent bookings should be in the system at all times.
- Dedicated phone number for people with wheelchairs ie 1300 666666
- Training is vital for reliability.
- To set up properly from the start would be cost effective because drivers and passengers would be happy.
- Taxi's must always be accessible under the TSS – no matter what the season.

SAFETY

- What does safety involve? – in case of crash – low care for seat belt – extra support.
- Seatbelts attached to taxis
- Neck support for minimising whiplash.
- Additional safety for attachments. Whilst taxi's are Australian Standards approved – these standards do not incorporate the needs of the wheelchair enabled client.
- There needs to be a range of vehicles to carry different clients.
- Monitor & random checks – also driver training.
- New Standards and Best Quality operations.
- Elevator Tray – tipping – encapsulate or block/brake chain.
- Extend gaps on sides of tray or better yet, internal lifts.

COMFORT

- Better suspension
- Wider cabs – not Toyota
- Exhaust fumes (snorkel exhaust)
- Ensure capsule is sealed.
- Seated lower for better suspension or ride over rear axle.

COUNCIL IN CONFIDENCE

- Climate control.
- Not smoking
- Efficient fuel use (gas/electricity)

ACCESSIBILITY

- Systemic changes required.
- Priority notice.
- More taxis available
- Difference of needs identified.
- Efficient use of time for drivers with pre-organised schedule to organise day.
- Better management of calls/distribution.
- Schoolbus for children (i.e, an accessible one instead of school runs operating from the network) .
- GPS tracking – on at all times.
- Taxi to stay within Canberra zones.

PART 3: WHAT PEOPLE THINK OF THE SERVICE NOW?

3.1 Open discussion

In a plenary session people listed what they thought were the main problems and positives about the service as it stands

PROBLEMS

1. Peak hours (8-10am – 2.30 – 6pm), Weekends and Public Holidays, Parliament Sitting
2. Taxi's not turning up
3. Booking and despatch – allocation of set person dedicated to taking calls.
4. Taxi delays
5. Complaints
6. Timeliness
7. Can't see the meter – turned off and possibly overcharged.
8. Harnesses for safety.
9. Responsibility
10. Running down – not enough replaced.

COUNCIL IN CONFIDENCE

- 11. Communication skills of taxi driving – loss of control.
- 12. Drivers needing training.
- 13. Loss luggage
- 14. Abuse
- 15. Drivers do not want the wheelchair clients due to timing.
- 16. Not turning up within a reasonable time.
- 17. Waiting for a taxi – not knowing when it will arrive.
- 18. Lack of communication.
- 19. People who need a WAT need to spend twice the time to travel.
- 20. Further into cab – riding on back axle.

PLUSSES

- 1. Some drivers are wonderful.
- 2. Private bookings.
- 3. Some taxis have internal lifts – feel safer as other trays are too short.
- 4. Some driver good but need more support.

3.2 Results of the service experiences survey

To capture information in more detail and issues that people might not wish to share in open forum we asked participants to participate in a brief survey to document, their use of taxi services, what they think of the service now and what they would most like to see changed. This is a consolidated summary of responses:

1. Are you (or a family member/friend) a regular user of wheelchair accessible taxis?

Yes	1111111111111111	15
No	111	3
Other	Support worker	

From the 40 registered participants, and the 18 received feedback forms, 15 people or their family member/friends is a regular user of wheelchair accessible taxis and 3 were not.

How often?		0
Number per week	5,3,10,2,4,6,7,6,3,4,4,1,1,10	Average: 4.7
Number per month	6	

COUNCIL IN CONFIDENCE

From the 40 registered participants, and the 18 received feedback forms, the number per week was added together and divided by 14 (those who gave answers and not by the amount of 18 feedback forms.

2. How much approximately would you, or they, spend on taxis in an average week? 0, 20, 60,150,80,120,75,50,35,150,150,40,10,150 highly variable, I try and avoid them if I can, (Average of \$77 per week)

From the 40 registered participants, and the 18 received feedback forms, the number per week was added together and divided by 14 (those who gave answers and not by the amount of 18 feedback forms.

3. How would you rate the service in Canberra?

Excellent		0
Good	1	1
Just OK	11111	5
Poor	11111111111	11
Other	Very variable.	

From the 40 registered participants, and the 18 received feedback forms, 0 rated the service in Canberra as Excellent, 1 rated the service in Canberra as Good, 5 rated the service in Canberra as Just OK and 11 rated the service in Canberra as Poor.

4. Have you or they ever missed a crucial appointment (such as a job interview, court hearing, medical appointment, air flight) because of a late WATS taxi? If so, briefly describe that event:

- Yes, - Hydro therapy sessions – the only session that is available for him to go to is “Post Op Therapy” and school exams – arrived late for college and missed some of his exam time.
- There are too many to describe in this space. I would have had details if I needed them written on file at home – over a period of 25 years.
- Regular osteopathy treatments, missed or cancelled due to late or non-arrival of cabs. (Appointments still have to be paid for at \$50 per session). Miss days of work due to late/non-arrival.
- Booked WAT. Turned up late making my wife late for her appointment for this reason I usually accompany her in a standard cab with the manual wheelchair.
- Seat belt issues a MUST and some of cabs need fixing badly. My husband ended up with 2 broken legs because he wasn't strapped in and the driver was tailgating and said it was the 2nd time this has happened, (an old lady landed in his lap). Not funny.
- Medical appointment. Taxi over an hour late – I have already allowed 1/2 hour at a time. Once it didn't come at all.
- Going to work – daily basis unless specific driver – won't guarantee being picked up for work. At least once a week – ring and check. Shouldn't need to be booked/checked as is daily need.
- No.
- Being late to medical appointments is a common thing for some of my clients.
- Clients of mine often miss out on activities and appointments.

COUNCIL IN CONFIDENCE

- Yes, I use taxis for work and find it very hard to be reliable. Allocating several hours for a single hour meeting is ridiculous.
- Yes – several times. Job interview – was very late. Very significant and large work event I was running – was late and couldn't set up for event. This event was being attended by executive members of work place.

5. If you could change one thing, what would it be?

- The culture of drivers and the industry toward people in wheelchairs – MORE TRAINING!
- Reliability, consistency, dependability
- That we could rely on this service when we need it.
- Reliability
- If you book a cab, it's guaranteed to arrive.
- Seat belt issues a MUST and some of cabs need fixing badly.
- Guaranteed pickup at appointed time.
- Canberra Cabs should make contact if a car cannot be found for this job.
- Reliability of cabs.
- More help, more compliance.
- Educate more drivers.
- Make more attractive for drivers to give better service.
- The response time.
- The drivers attitude are great, there are a few bad eggs. Improving the system is a must.
- Greater number of taxis. Newer taxis.
- More taxis – better call centre.
- Timelines and reliability.
- 1) Response times/reliability and 2) Safety (straps/tie down/seat belts)
- Waiting times.

6. Are there any other comments that you would like to make?

- Great Forum. Good Job
- I will write further to the watreferencegroup@act.gov.au
- Give us a plastic card with no stipulations as to purpose so I can have a life. (Similar to a Cab Charge Card)
- The company has given me a difficult time and has denied some of the incidents eg. Being late or taxis going to the wrong place – honesty would go a long way.
- Aerial taxis rarely follow through with any advice about late taxis.
- Good luck.
- A useful forum. Let's hope change actually happens this time.
- I believe there is potential for this but there needs to be radical changes. All issues raised today need to be taken seriously as they are valid! And real!

Meeting Evaluation Report ACTDAC WATS consultation 18 June 2005 for Council and project partners

1. How would you rate today's consultation overall?

Excellent	11111	5
Good	1111111111	10
Just OK	11	2
Poor	1	1

From the 40 registered participants, and the 18 received feedback forms, 5 rated today's consultation as Excellent, 10 rated today's consultation as Good, 2 rated today's consultation as Just OK and 1 rated today's consultation as Poor.

2. How was the venue, catering and disability support?

Excellent	1111111	7
Good	111111111	9
Just OK	11	2
Poor		0

From the 40 registered participants, and the 18 received feedback forms, 7 rated venue, catering and disability support as Excellent, 9 rated venue, catering and disability support as Good, 2 rated venue, catering and disability support as Just OK and 0 rated venue, catering and disability support as Poor.

3. Did you feel you got your say?

Completely	111	3
Mostly	11111111111111	12
Not at all		0

From the 40 registered participants, and the 18 received feedback forms, 3 felt like they completely got their say, 12 felt that they mostly got their say and 0 said that they did not feel that they got their say.

4. What areas do you think might be improved?

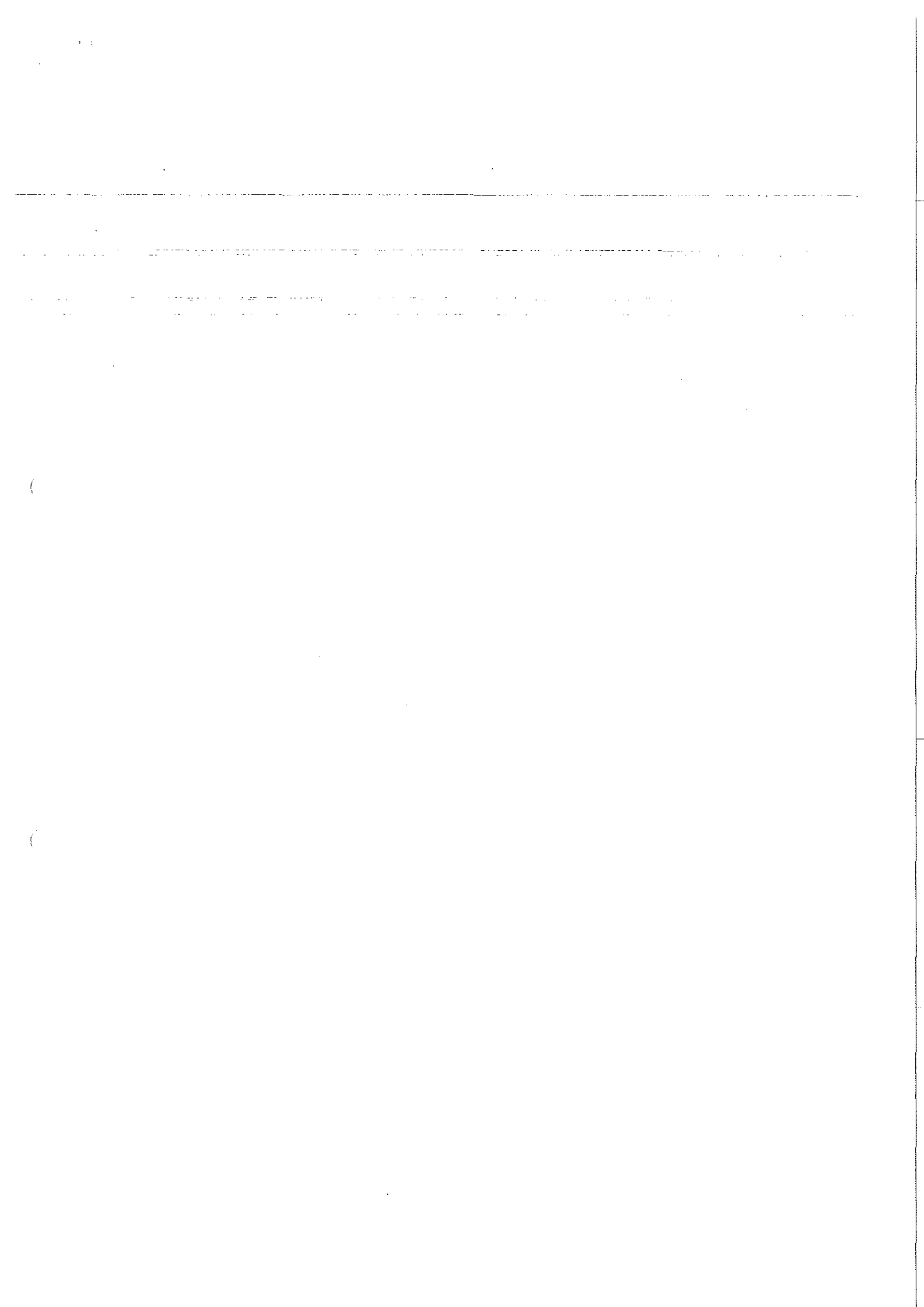
- A lot more control over input – a microphone or similar to speak into so that no-one becomes overwhelmed by those who are more assertive or pushy.
- Tighter running of groups.
- Venue made some speakers difficult to hear.
- More frequent meetings.
- Meetings to be allocated more time.
- More meetings between DAC & Canberra Cabs.
- More drivers and taxis need to be made available. Then the other issues may be addressed.
- More information at the start about the statistics on the subject. IE How many WATS are there? How much use do they get?

COUNCIL IN CONFIDENCE

- Acknowledge the commercial realities and government budget limitations in any implementing any ideal solutions.
- All is good.
- I was conscious of getting a good say. This happened generally, but one or two people overrode a few times. A difficult subject with strong emotions.
- Time – it's a common problem with any event of this type. Facilitation – it was good but able to be consumed with its own problems to be constructive.

5. What other issues would you like covered in a similar forum?

- Community Awareness
- Hydrotherapy
- The high cost of being disabled – chairs, equipment, health, in spite of subsidies like expensive. Bus accessibility & availability.
- Protection of compensation funds.
- Disability access / audits of buildings, bus access eg R34 supposed to be dedicated to wheelchairs. This is not always the case. This results in people being stranded. Therefore people must take taxis.
- How to use text messages for Canberra Cabs.
- This was a great forum, many issues were covered. Well done. Keep the fight going.
- Representatives from all sides talk at the start.
- Areas of health and specifically – how health professionals assist people who are disabled.
- General inclusion in community and how WAT's buses, etc contribute to this. Motherhood statements are useless without community commitment.





Disability Advisory Council

**Disability Ambassadors in Schools -
Outcomes of planning workshop**

5 April 2006



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Background

In 2004 the ACT Disability Advisory Council (DAC) in partnership with the Department of Disability, Housing and Community Services (DHCS) commissioned research on community attitudes to disability. Orima Research conducted the project, which included desk research, focus groups and a household survey. These culminated in a *Snapshot of community attitudes on disability 2004* which was released on 3 December 2004, the UN International Day of People with a Disability.

One of the key suggestions of respondents to the survey was to increase community understanding and acceptance of disability through education in schools. To develop this, further research was undertaken in late 2005 which comprised fieldwork with teachers, principals and curriculum developers in ACT Schools on ways to encourage attitudinal change amongst children and/or young people.

The fieldwork identified a number of possible program opportunities. With the Minister's agreement contact was initiated with Craig Curry Executive Director, Education in the Department of Education and Training (DET), to discuss these opportunities. It was agreed that the preferred initial focus should be to develop a pilot 'Disability Ambassador Program' in schools. Early thoughts on the program were that it should involve people with a range of disabilities, including young people, who would come into classrooms to talk about disability and to raise awareness on a range of related issues. The Ambassadors would include people with a youth-appropriate profile who had achieved in employment, youth development or sport.

Subsequently, a working group, with members from DAC, DET and DHCS was set up to:

- provide advice on the aims of the pilot program;

- suggest a preferred model including evaluation;
- advise on the scope, location, commencement and duration of the pilot; and
- advise on other issues which might need to be considered in implementing the program, including opportunities to identify Ambassadors via existing programs involving people with disabilities.

On 5 April 2006 the working group held a full day workshop, facilitated by RPR Consulting, to commence planning for the program. This report attempts to capture the spirit of the discussion and to describe the outcomes of the workshop to assist the group to move forward with the planning process. It will address issues raised at the workshop related to:

- the rationale for the program
- its vision and purpose
- a suggested model
- stakeholders and their needs
- communication strategy
- risks and approaches to managing them
- a governance structure
- evaluation.

This covers a wide range of matters, some of which require further discussion or decisions.

Rationale for Disability Ambassadors program

The evidence base for the Disability Ambassadors program is drawn from a range of sources and from the practical experience of people with a high degree of experience in the areas of disability and of education.

ACT research into community attitudes

The 2004 Orima research identified that while people in the community now know what are the correct things to say about disability, at a deeper level many still held a range of negative attitudes about people with a disability and their capacity to contribute to the community.

Research on attitude change¹

People are not born with attitudes they are learned from experience because we automatically evaluate as we begin to define our beliefs about people or issues. Our attitudes can be described as a summary of these positive or negative evaluations. Attitudes are relatively enduring and are strongest in mid-life. We tend to generalise attitudes from one person or issue to others which we see as similar.

Attitudes are easier to change earlier in life and this is done via cognitive and affective methods ie new information combined with feelings and emotional reactions. Ways of changing attitudes include:

- exposure to a new experience or new knowledge about the object of the attitude, particularly if the exposure is subliminal²;
- personal relevance of that experience or knowledge;
- experiencing the source of the new information as credible, attractive and in some ways similar to oneself; and
- receiving balanced information about the object.

¹ This whole paragraph is a summary of an excellent paper on attitude change prepared by DHCS participants in the Graduate Administrative Assistants Program in 2004.

² An example of subliminal experience of disability occurred in a recent reality TV show which showed the struggle of a young low income woman to achieve her ambition of becoming a chef. The focus of the drama was on this journey rather than on the fact that she used a wheelchair, although this added considerably to the challenges she faced.

Translating attitude change into behaviour change generally requires some assistance in planning the change in behaviour which is required and making people realise how important each person's contribution is in changing attitudes.

Particular research into attitude change with respect to disability indicates that attitudes can be changed through:

- contact with a person with a disability particularly if it allows similarities to emerge;
- new knowledge about disability, which can generalise from one disability to another;
- experience of co-operative interactions with a person with a disability; and
- Real life stories, drama and literature about people with a disability.

Relevance of the research to disability in the ACT

Building on the 2004 survey respondents' suggestion that one way of fundamentally changing these attitudes was to start in schools, the 2005 Orima research selected the Disability Ambassadors program as a preferred option from a number of others considered because it:

- is practical and capable of being introduced on a small scale without a huge investment of resources;
- focuses on children and can easily incorporate many aspects identified in the research as leading to successful and sustainable long term attitude change;
- enjoys strong support from both departments, but particularly from DET which is likely to be its major sponsor; and
- has the potential to yield benefits to the school community, the Disability Ambassadors themselves and the broader community.

Vision, purpose, objectives of Disability Ambassadors Program

Vision

The vision is a statement about where the program is headed over the longer term. A vision is not essential for a program like this but a memorable, motivating and engaging vision can be helpful. (I think they are better short also, but that is a personal opinion)

Some suggestions based on the conversations at the workshop include:

- Disability Ambassadors in Schools – showing the way to a better society.
- Schools and Disability Ambassadors – leading the way to a more inclusive society.
- Inclusive schools, inclusive communities.
- Schools leading the way to a more inclusive community.

These are only suggestions. If you decide to have a vision, the working group will need to generate other ideas at its next meeting.

What is the purpose of the program?

The purpose of the program, provided here in draft, is:

To reshape and enrich community attitudes to disability by demonstrating the value that Disability Ambassadors add to the school community and, through this, to build support for greater inclusion in all spheres of life.

Objectives to be achieved by the program

Objectives are generally used as a framework for evaluation. From the discussions at the workshop the following objectives are suggested as drafts for discussion.

- Primary school students' knowledge of disability and their comfort in relating to people with a disability is increased.
- Disability Ambassadors are provided with an empowering, positive and enjoyable developmental experience.
- Teachers and schools benefit from the program and school communities are enriched.
- Partnerships across different sectors of the community around disability are strengthened.

The name of the program

The working group may also want to consider what name the program will have and whether you will shorten it eg Disability Ambassadors in Schools (DAIS) program or the Disability Ambassador in Residence (DAIR) program.

Stakeholders

The following stakeholders were identified:

- The Education sector – Special Education Reference Group, Executive Director Education, Curriculum Development area, possibly the non-government schools
- The Disability sector – DAC, DACT, Non govt sector, Advocacy organisations, Disability peak organisations, Agencies which may refer Ambassadors to the program, other agencies doing something similar programs
- The Ministers of DHCS and DET
- The School community
 - Board
 - Principal
 - Staff
 - Students, including students in the school who have a disability
 - Parents
 - Wider community in which school is located
- The broader community and people with a disability in the broader community – attitudes are an issue for everyone.

As planning progresses the working group will need to ensure that the varying needs of stakeholders are met for example some may merely need to be kept informed others may need full consultation and involvement at various stages of the process

Suggested tasks for the working group

These include:

- Deciding whether a vision is required and if so what it should be;
- Reviewing the draft purpose and objectives of the program; and
- Deciding what name the program will have.
- Ensuring that the needs of stakeholders are considered at all stages of the planning and implementation process.

How the vision, purpose and outcomes will be achieved

The original model for the program appeared to involve a Disability Ambassador either contributing a session or sessions on disability in the classroom or a Disability Ambassador contributing at appropriate places in the curriculum (a scientist with a disability contributing to a maths class is an example of this). This idea was based on a Disability Ambassador working in a cluster of schools. Instead, discussions at the workshop resulted in the selection of a Disability Ambassador-in-Residence model. The selected model would not preclude either of the approaches described in the original concept, but the crucial difference is that it is based on building a relationship with the school community rather than simply undertaking some awareness raising activities.

The Disability Ambassador-in- Residence model

The model is based on a Disability Ambassador or a small team of Ambassadors taking up residence in a school for period of time eg one term, but not the first or fourth terms. In essence they would ~~adopt and be adopted by a school. The extent of their presence in the school might vary but it would~~ need to be on a regular basis in order to build the Ambassador-School relationship which is an essential ingredient of this model.

Their role and tasks would be developed in consultation with the school and would be designed to add value to the particular school community. This implies an element of matching the skills and capacity of the Ambassador to the particular needs of the school. The preference at this stage is for the Disability Ambassador to be a young person with a disability.

This model fits well with the research which indicates positive exposure, co-operative interactions and capacity to identify are important in changing attitudes.

Target group

After much discussion it was decided that the target group for the program would be Grades 4-6 as it was felt that they would gain most direct benefit from the Ambassador approach. However it was hoped that the in-residence model would at least have an indirect impact on all members of the school community.

Location of the program

There was also consideration of how schools should be selected and whether the program should be run in a cluster of schools or in one school.

For the pilot program it was agreed that a school or schools with a known positive attitude to inclusion should be invited to participate to give the greatest chance of success in the pilot. Such a school or schools should also have a well established Principal who would be willing to champion the cause. Assuming the pilot program is successful, the process for selecting schools to participate in the future can be determined at a later date.

There was considerable debate about whether a school or a cluster of schools should be included in the pilot. There was a slight preference for basing the program in one school because this would be more manageable administratively and is likely to cost less. However, the potential learning from evaluating the program in only one school is reduced.

Components of the model

There are three broad components of the model.

- Preparation which includes:

- selecting, preparing and supporting Disability Ambassadors to enable them to make a valued contribution in the school and to enjoy a positive development opportunity; and
- consulting with selected school communities to identify opportunities for people with a disability to contribute in ways that add value to the particular school;
- Implementing the program and monitoring the process to ensure that young people in ACT schools have experiences through the program which are designed to build positive and inclusive attitudes; and
- Evaluating the outcomes for all key stakeholders.

Each of these is described in more detail in the following paragraphs.

Selecting, preparing and supporting Disability Ambassadors

For the pilot program, it was suggested that the first Disability Ambassador/s should be invited to participate rather than calling for nominations. They would be people whose general capacity to perform the functions was already established so that the pilot has the greatest chance of success. The workshop defined the role and capabilities required of the Disability Ambassador

The potential roles of the Disability Ambassador

To add value to the school community through

- providing a positive image of disability to the whole school community;
- participating in a range of face to face activities in class³, and/or in the playground and/or in school clubs etc;
- mentoring students, particularly those with a disability; and
- being a role model for students, particularly those with a disability.

Capabilities required of the Disability Ambassador

Workshop participants felt that a successful Disability Ambassador is likely to be a positive open and playful person who is:

- able to relate well to children;
- confident in themselves and able to get the message across;
- capable of being seen as a person first and a person with a disability after that;
- comfortable in telling their story and talking about disability;
- capable of sharing a skill or developing a relationship;
- able to make a commitment of time and energy to the program; and
- willing to accept training, support and supervision as needed. (added by LS)

Training Disability Ambassadors

Other organisations have developed or are developing training programs for people with a disability who are willing to talk in schools about disability. These include the Canberra Blind Society and a local Mental Health organisation. Rather than developing a separate training package, it was suggested that the approaches taken by these organisations should be investigated further to ascertain their suitability as training for Disability Ambassadors. The working group may need to revisit this after the content and approach taken in the training provided by these organisations is understood.

Linking Disability Ambassadors with the school and supporting them

These issues were not discussed fully at the workshop and will need to be revisited at some stage. This function could be part of the Program Coordinator role described in para 4.2.3.

³ It was also suggested that some Ambassadors might fill the functions of an STA

Consulting with school communities participating in the program

The strong message was that unless schools 'own' the program it will not succeed. While this was acknowledged as critical to the success of the program there was not time to flesh the process out in great detail. The working group did establish the principle that there would be consultation with any school participating in the program and that it would have the flexibility to take account of the circumstances and needs of particular schools.

The role of the Principal as champion is of course is very important and the support of the school board will be required before the program could be implemented in a school. Teachers, already very busy in the class room, will also need to see value in the program. If it involves substantial additional effort for individual teachers it will not be sustainable. To gain their support for implementation, teachers will need to feel that it will not be a drain on their already stretched resources. This also requires the working group's further consideration.

~~Implementing the program and monitoring the process~~

It was agreed at the workshop that there would be a requirement for a Program Coordinator who would work part time to assist in implementing the program. This person would need to be familiar with the school system. There was some discussion about whether their location and emphasis should be school based or office based in the department. This may depend to some extent on whether the program is in one school or a cluster. As mentioned previously this person is also likely to undertake the supervision and support of the Ambassadors. A task for the working group will be to describe this role in more detail.

Evaluation

Evaluation was raised and is an important issue, but as aspects of the model have not been finalised, detailed discussion on the evaluation process was not undertaken at the workshop. Planning the evaluation will be a task for the working group later. As planning progresses, it would be good practice to consider the purpose and design of the evaluation well in advance of the completion of the pilot, particularly if attitude change is to be measured by before and after samples.

Suggested tasks for the working group

These include:

- refining and confirming the model;
- confirming the role and capabilities of the Disability Ambassadors;
- exploring available training options for Disability Ambassadors and determining the approach to be taken;
- agreeing whether the pilot should be in one school or a cluster;
- outlining a consultation process with school communities participating in the pilot;
- describing the role and functions of the Program Coordinator; and
- developing an evaluation plan.

Communication strategy

It was agreed at the workshop that a communication strategy would be required. Again more planning is needed, but some fundamentally important messages for stakeholders were identified. They included:

- why the program is needed and why we are approaching it in this way
- what school communities will get out of the program
- reassurance that the program will be effective and the evidence to support this

- assuring teachers about what human, financial and time resources will be provided to support the program so that it does not add to their workload
- giving people confidence that the Ambassadors can be trusted to fulfil their role well eg their interpersonal skills, ability to handle personal questions etc, and that training and support will be provided to them
- any school participating in the program will be consulted about their needs and the details of the Disability Ambassador-in-Residence program will be designed realistically to fit with the school context.
- why the program is a pilot, that it will be evaluated, and how the evaluation will be used.

Suggested tasks for the working group

These include:

- developing a communication strategy to support the different stages of program development implementation and evaluation taking account of the particular needs of different stakeholders.

Governance Model

It was agreed at the workshop that there should be:

- a reference group for the program which would have high level oversight and reporting responsibilities; and
- a steering group which would develop and manage the day to day processes of the program and report to the reference group.

Given that this program is fundamentally about reframing and enriching attitudes towards disability the workshop believes that the program should be linked at the highest level to the governance structures for Strategic Direction One of *Future Directions*, the Disability Planning Framework for the ACT. Strategic Direction One is 'Influence policy and culture to promote an inclusive society.'

Strategic Direction One already has a high level reference group and the same senior members of staff of DHCS and DET sit on that reference group as would be required for any reference Group for the Disability Ambassadors program. Consequently it makes sense to have this level of governance linked to *Future Directions*, the broader ACT plan and there are potential benefits in linking the program to this broader framework.

Membership of the steering group would be similar to the current working group. Secretariat services will be provided by DAC. If the Program Coordinator position is established, that person could report to this group.

While this basic structure has been agreed there is more work to be done on the detail of the governance model.

Suggested tasks for the working group

These include:

- agreeing a draft governance model for consultation with the key players;
- ensuring that terms of reference and levels of authority for each level of governance are clear and agreed.

Risks

Risk identification and management also need some more work. The risk issues identified so far relate to:

- funding – ensuring that it is adequate to support the program;
- legal issues eg insurance, protection of students (compliance with school visitor policy);
- human resource management issues (pay and conditions of Ambassadors including their accountability);
- Commitment of the school community
 - Lack of staff engagement
 - Lack of parental support
 - Failure to support teachers
 - Change in staff eg Principal;

- managing disclosure issues for children with a disability already in the school, noting that for some unwanted attention could potentially damage their self esteem;
- using only one school as a model in the pilot
 - if it doesn't work what happens with the program?
 - if it does work how do we make sure the lessons learned can be generalised;
- failing to find suitable Ambassadors and/or not supporting them appropriately;
- failure of the partnership through unclear roles and responsibilities; and
- incompatible philosophies or approaches with other organisations undertaking this type of work confuse stakeholders and/ or undermine the effectiveness of the program.

Tasks for the working group

These include:

- reviewing the list of risks and add to it if necessary. Ensure that the details of the planning and process either address these risks or develop a risk management strategy to minimise the effect of risk.
- developing an approach to funding. (It was too soon to discuss particular approaches to funding at the workshop, but this is clearly a priority area for the next stages of planning).

References

- *Attitude Formation and Attitude Change: What the Research Shows*. Unpublished paper, DHCS, 2004
- *Public attitudes towards People with a disability in the ACT*. Key findings from post-survey groups. Orima Research, 2005.
- *Snapshot of community attitudes on disability 2004*. Orima Research, 2004



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19 May 2006 – immediate release

MEDIA RELEASE

DISABILITY AMBASSADORS IN SCHOOLS

The ACT Disability Advisory Council is to unveil plans for a pilot programme to involve people with disabilities working as Ambassadors within primary schools at its first community based meeting at the **Canberra College Phillip Campus** from **12.30 pm** on **Tuesday 23 May**.

A working group that includes the Department of Education and Training and the Department of Disability, Housing and Community Services is developing disability Ambassadors in Schools (DAIS). It follows the first ever community attitudes survey commissioned by the Council in 2004.

ACT Volunteer of the Year 2005 and ACT Young Australian of the Year 2006 Sharon Sobey will join council members, students and staff.

According to Council Chair, Craig Wallace, "the programme is designed to enrich school communities through the contributions of people with disabilities and was suggested to us by people with disabilities, teachers and the community themselves".

"It is essential that we challenge entrenched attitudes that prevent full participation by people with disabilities in employment, continuing education and community living. Schools are the place to start", Mr Wallace said.

The Torrens Primary School has agreed to be the site for the pilot for DAIS and Principal Debra Chase said that "the Ambassadors approach is a great idea which will build on our efforts to promote inclusion, tolerance and diversity in a first class school system here in the ACT.

"We know the importance of reaching children and that the best way to connect is to provide first hand access to people with disabilities who can share their stories, skills and abilities in a classroom setting Torrens Primary is thrilled to be involved", Ms Chase said.

Tuesday will also see the first Council meeting to be held in the community. It will also see the announcement of two new members of the Disability Advisory Council, Justin Ray and Sharon Sobey.

Media can attend the event at the Canberra College Gymnasium from 12.30 pm and Craig Wallace, Sharon Sobey and Debra Chase (Principal of Torrens Primary) will be on hand for interviews.

Media Contacts

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media release

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22 September 2006

ACT DISABILITY – CITIZENS JURY, NEW SERVICE AND TRAINEESHIPS

The ACT Disability Advisory Council's (DAC) community meeting next **Tuesday 26 September** will be the forum to launch a new service for people with disabilities. Council will also be announcing plans to use an innovative, deliberative process called a Citizens Jury to judge the communities progress towards Challenge 2014.

"Our community meetings are part of Council's push to move out of the boardroom into the community to listen and talk about disability — and about the work of Council", said Craig Wallace, Chair of DAC

"We're delighted that ACT Minister for Disability Services, Katy Gallagher will be joining us to launch Frameworks — a new Northside Individualised Community Access and Inclusion Service", said Mr Wallace.

The event will feature Council's announcement that it will use an innovative process called a Citizens Jury to measure progress by the community against objective's in Challenge 2014, a ten-year vision for disability in the ACT — released by the Stanhope Government in 2004 as part of its response to reform in the disability sector.

"The Citizen's Jury — to be opened by ACT and Commonwealth Ombudsman, Professor John McMillan in October — is a creative approach to looking at progress across the whole community for the biennial scorecard, and ask what we are doing well and where we need to improve.

"The Jury will hear from people with disabilities and families themselves, and will be able to scrutinise the communities performance in the disability area.

"This is a timely check back for us all 3 years after the Gallop inquiry and is a sign that we intend to see it through. We must continue to focus on change and improvement in disability", Mr. Wallace said.

Graduates who received traineeships from the Community Programs Association will also receive their certificates during the event. Also on the meeting's agenda will be the release of an overview of key findings from the ACTDAC desk research project on learning disability information in the workplace.

This is Council's second community meeting, and follows on from a successful event held at the Canberra College, Phillip Campus in May.

The meeting at Community Programs Association (CPA)
Level 5, 8 -10 Hobart Pl, Civic will be open to media from 4-5pm.

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ACT / DAC

ACT DISABILITY ADVISORY COUNCIL

Presents

The Report of the Citizen's Jury on the community's
progress towards Challenge 2014 – a ten-year
vision for disability in the ACT



Includes

Introduction from the ACT Disability Advisory Council

..
Letter from the Jury

..
Overview

..
Citizen's Jury Report
2006

Introduction from the ACT Disability Advisory Council

Challenge 2014 is a vision for the future of disability in the ACT. It describes a world where the vision and values developed by the ACT Disability Reform Group in 2002 are readily available for people with disabilities and their families throughout their lives.

It talks about what individuals in various life domains might expect in terms of rights, services, supports and aspirations in their day to day lives in 2014. The change areas include those within the remit of business, government and the broader community.

The document was launched by the Council on 3 September 2004 along with the strategy document from Disability ACT, *Future Directions: A Framework for the ACT 2004 – 2008*.

Council has stewardship over *Challenge 2014* and is charged with preparing a scorecard every two years on the progress of ACT community, business and government sectors towards meeting the challenge.

For this first scorecard in 2006, Council decided that a tailored Citizens Jury approach would be a powerful and inclusive approach to producing this scorecard.

Specifically, a Jury provided a way to get the community involved in renewing the challenge and in a sense it means that the community itself issues the scorecard.

In hindsight, it is hard to imagine a better way to deliver this report card on *Challenge 2014*.

The Jury convened on 21 – 22 October 2006 had a number of important features:

- Proceedings were filmed by Greg Lacey, an independent filmmaker who has had experience with producing small scale documentaries. A documentary DVD is being released to coincide with this report. Greg and his son Nathan contributed much 'outside time' to complete the documentary and also designed the cover of this report. Gabrielle Higgins, a student with an interest in the process, spoke to Jurors, presenters, members of the organising team and the Gallery to compile an anecdotal record of the project.
- The public gallery was invited to participate and leave feedback via a visitor's book and a jargon box was opened to demystify technical terms in disability.
- The Jury proceedings were opened by the ACT and Commonwealth Ombudsman, Professor John McMillan, who provided a valuable insight into his role and the context of the process.

It was hard work and we asked much of those involved, especially the Jury.

We were lucky to have presenters, especially people with disabilities and families, who told their stories with passion and enthusiasm.

The support of Disability ACT, the work of Max Hardy and Twyford Consulting and the Jurors all made an impossible task suddenly seem more possible. Council members and the executive officer, Sarah Buchanan, worked long and hard on the planning and delivery of the project.

The Canberra Institute of Technology (CIT) was an important partner, providing a venue and much more.

We commend this report to the ACT Community – Business, Community and Government. The jury have ‘told it like it is’ and while they find some progress has been made it’s not all easy reading or good news. It’s clear that there is still a challenge to make.

Perhaps the most heartening finding was the reservoir of goodwill towards disability that exists within Canberra people, like the 12 jurors. There is a willingness to change and set aside prejudice, to engage and to act in a positive way given the right opportunities and processes, especially those that provide personal discovery for those involved.

That alone should give us all hope that together we *can* all do better and rise to the challenge over the next eight years and beyond. We look forward to the next scorecard in 2008.

Craig Wallace,
Chair ACT Disability Advisory Council
3 December 2006

Chair
ACT Disability Advisory Council

Dear Mr Wallace,

Please find enclosed a report from the Citizen's Jury outlining our two day deliberations on *Challenge 2014*.

The Citizen's Jury was invited to assess to what extent the Canberra community is 'on track' to achieve the vision of *Challenge 2014*. We were asked to consider:

- In what areas is solid progress being made and what can the ACT community specifically celebrate?
- What areas require more attention or intervention?
- Given progress to date, what areas of focus would this Citizen's Jury recommend in the short and medium terms for the ACT (Government, Business, Community) in order to achieve the vision by 2014?

Our Executive Summary lists our recommendations and its attachment lists those areas the Jury felt could be celebrated or requiring further attention and intervention. We felt unable to comment more fully on children with disabilities although we were able to observe through the evidence presented, the general unresponsiveness of mainstream services to their needs.

We also invite the Council to include in our report a covering page about the Challenge and how the Jury came about.

We found the Jury process enlightening and generally worthwhile and we take great pleasure in presenting this report to you.

Yours faithfully

The 2006 Citizens Jury for *Challenge 2014*.

Overview

The Citizen's Jury for *Challenge 2014* based its assessment in this report on presentations made by a wide range of people. These included representatives from:

- non-government service providers and advocacy bodies;
- parents caring for children with disabilities;
- government service providers;
- individuals with disabilities; and
- the Commonwealth and ACT Ombudsman.

The Jury also drew on written material provided for its deliberations, on the collective experience of its members and public material available through the Internet, including annual reports where relevant.

It was noted that within the ACT, 53,000 people have some form of disability (17% of the community, with 3% suffering profound limitations). There were 43,000 voluntary carers within the ACT community. Disability is an issue in the life of the whole community.

The Citizen's Jury supports the aspirational goals and values in *Challenge 2014*, acknowledging the document is aimed at inspiring the community, government, business and service providers to make the shift in attitude and action needed for people with disabilities to take their rightful place as full citizens.

The Jury found that the community could celebrate developments begun by the work of the ACT Disability Reform Group in 2002. The most evident developments over the three years were:

- Development of a broad based policy framework to meet the needs of people with disabilities and evidence of willingness to change by government embodied in such instruments as
 - The Canberra Plan, The Social Plan, *Challenge 2014*, *Future Directions 2004-08*;
 - Adoption of 'human rights' and a philosophy of full inclusion of people with disabilities into the community; and
 - A commitment to consultation and partnership.
- Willingness to change within the specialist services stream and the dedicated efforts of non-government service providers:
 - Realisation that specialist services alone cannot deliver "whole of life" responses for people with disabilities.
- A move towards improved community partnerships and willingness to try innovative ideas:
 - For example, piloting of local area co-ordination responses to target and co-ordinate support on the ground

- Efforts to raise the profile and visibility of people with disability in the ACT through government sponsored events.

However, the Citizen's Jury found significant gaps in implementation. There was a long way to go in many areas of service delivery and integration of people with disabilities into the community. The Jury believes that:

- Sustainable cultural change in the community and among some service providers, politicians and media are yet to meet the level required by the goal and values of *Challenge 2014*
- Awareness raising was occurring in business circles through BLITS – Business Leaders Innovative Thoughts and Solutions project. But generally business seems to view disability issues in a negative light and had not embraced their responsibilities. This requires much more education to change attitudes.
- Funding levels were not consistent with the Government's espoused commitment to positively changing the place of people with disabilities in the community.
- Employment opportunities for people with disabilities had contracted significantly - particularly in the public sector.
- Access remains a major concern, not only in terms of physical access to community facilities (shops, parking meters, schools, offices, etc) but also barriers to employment participation.
- There was still too much focus on demand management by specialist services. Also there is a significant risk that providers could revert to espousing segregated accommodation and service models for dealing with people with disabilities.

The enclosed attachment highlights the areas the Jury believed required further attention or intervention.

The Citizens Jury recommends the following priorities for the period ahead:

- More effort on education campaigns and information events targeting the younger generation, business, media and community mainstream organizations.
- Early intervention activities to be given increased focus with greater emphasis to be placed on life long planning for people with disabilities.
- A greater focus to be given on support arrangements being in generic, normative community settings with segregated accommodation and service models being only part of much more comprehensive service delivery solutions.

- Government must provide sustainable funding levels including appropriate indexation without annual fluctuations in budget allocations that impact adversely on quality business planning and service delivery.
- Business should be represented on the Disability Advisory Council and BLITS outcomes should ensure that the business sector takes a lead role in improving access for people with disabilities including to employment opportunities.
- Government and business to address barriers to employment of people with disabilities and to create more part-time employment opportunities supported by appropriate training.
- Increased focus by government on facilitating adequate housing and accommodation consistent with *Challenge 2014*.

Attention to these areas should provide greater scope for a future Citizens Jury to highlight the progress needed to make *Challenge 2014* a living reality for people with disabilities in the ACT community.

The 2006 Citizens Jury for *Challenge 2014*.

In the broader community

1. *A community that is not afraid of disability and which recognises that people with disabilities have the same rights and responsibilities as any other citizen and has cleared the way for them to exercise those rights and responsibilities.*
2. *The general capacity of the whole community is engaged to support people with disabilities rather than having them rely solely on formal mainstream or specialist services.*



The Citizens Jury considered willingness to change, evidence of dedicated service, evidence of sustainable cultural change and integration of people with a disability into the community when developing its scorecard on the broader community.

Progress to be celebrated

- Willingness to change is evident in some service areas and community groups, *However, sustainable cultural change has yet to take significant root in the community towards including and integrating people with a disability as contributing members.*
- Work to change community attitudes can be seen through ACTDAC research, the ACT Inclusion Awards, International Day of People with a Disability, Arts Festival and BLITS.
- There is some improvement in community partnerships and this has been demonstrated through the Future Directions Working Groups, outreach to community organisations. The community was involved in the ISP process and the Innovations process was community governed. There is a willingness to listen e.g. the proposed change to the Taxi subsidy scheme.
- Ongoing dedication of some groups (especially community groups) to assist people with disabilities is evident.
- The ACT approach to measuring community attitudes stands alone and has taken the lead nationally.

Requires more attention or intervention

- Integration into all levels of society should not be limited to just acceptance. Community culture and attitudes should be at a level to enable people with disabilities to aspire to a fulfilled life and to achieve friendships, intimate relationships and creating their own family.
- Access to community facilities is of primary concern as many shops, offices, restaurants, community facilities and some transport services still remain inaccessible to people with disabilities.
- People with disabilities are still marginalised in mainstream Australia given their statistical significance in the population.
- People with recognisable disabilities are rarely seen in positions of power or leadership at either State or Federal level. Nor are they seen in a role model position for young people or as Business leaders.
- There is still the negative perception that people with disabilities are a drain on taxpayers. Welfare to Work reforms need to be balanced with efforts to remove barriers to participation.
- More needs to be done to raise the awareness through community events and information campaigns are a priority. Significant strides in community education and publicity are needed particularly targeting the younger generation.
- More support is needed for people with hidden disabilities such as learning disability.
- Community awareness about NGO's and their ability to provide effective support to people with disabilities needs to be improved.

Mainstream Services

1. Mainstream services that meet the needs of a range of different people with disabilities including children and adults with different types of disabilities and from different cultural backgrounds.
2. Many different individuals, groups and government and non-government organisations will have worked together to improve the well being of people with disabilities and they include, therapy services, education, housing, transport, health, justice, employment, sport and recreation, cultural development.



The Citizens Jury considered the role and performance of Business and service providers in developing its scorecard in this area. Some progress had been made in terms of aspirational goals and models, but on the ground implementation was limited, constrained by funding shortages, lack of life- long planning & responsiveness to changing needs.

Progress to be celebrated

Business

- The establishment of BLITS, the Inclusion Awards and the Housing for Life program.

Education

- Evidence of some services for children with disabilities in schools.
- Post School Options (PSO) program has continued to offer limited support to a dozen or so school leavers each year.
- Post School Options Expo.
- Frameworks service at CPA (Community Programs Association).

Requires more attention or intervention

Business

- Business should be represented on DAC.
- A recent survey through BLITS demonstrated the business community has a poor understanding of disability in general.
- Small business specifically needs to fix everyday access issues to amenities and shops at a local level. People with disabilities are paying customers.
- A targeted business education campaign should be a priority.

Education

The Jury listened as parents raised access and inclusion issues within schools which underscored ignorance and unresponsiveness to needs of children and young people with disabilities in some schools. Parents scored the adequacy of services available to their children with disabilities at an average of 5 out of 10 overall and the ACT Department of Education at 4 out of 10.

- An information campaign targeting unresponsive schools should be considered as well as a funding incentive for schools with a sustainable track record in addressing the needs of people of disabilities.

- Recognition by school authorities that parents of children with disabilities need to be closely involved in their child's education and especially where disability is significant.

Employment

- Increase in number of people with disability in recent ACT graduate recruitment rounds.

Housing

- Recognition by some decision makers and specialists that some institutional and group housing models are less sound, unsafe and work against human rights and the *Challenge 2014* Vision and Values.
- There is strong healthy debate looking for solutions to housing.
- Abbeyfield and Linc Accommodation programs have been established, catering for around 20 people with a disability.
- TAS housing is funded to provide alternative accommodation under a responsible landlord model - 15 properties managed.

- Lack of appropriate resourcing and training. There is insufficient assistive technology, teaching methods for children and teachers with appropriate training to deal with requirements of children with disabilities.

Employment

- People with disability make up over 10% of the potential labour pool in ACT but face major barriers to employment and long periods unemployed. They are over represented in the second and third lowest income quintiles for working age Australians.
- Lengthy delays in job placement/pay regularity were identified as significant barriers to work.
- The private sector is perceived as generally unresponsive to employment of people with disability in the ACT. Attitudes of the community and business sector as well as lack of adequate access to employment support and placement services for people with disabilities are contributing factors.
- The jury heard evidence that many parents/carers are left with responsibility to find and fund volunteering options and job placement for young adult children. Young people who do not have parents/carers who can do this are more likely to remain isolated at home.
- It is difficult to establish financially viable businesses that employ people with intellectual disabilities. Other employment options in mainstream business and government need to be found.
- Young people with disabilities are under-represented in new apprenticeships takeup.
- More places need to be available in the Post School Options scheme.

Housing

- There is a clear need for more (and more suitable) housing.
- There is a push for a return to segregated accommodation and service models and a perception that there is a lack of alternatives to counter them.
- People with disability are not safer in institutional care. People with disability are more vulnerable when congregated together. What makes a person safe is proximity and involvement with other members of the community. Institutional care is more costly than other accommodation models that promote community living as a better human rights approach to meeting needs of people with disabilities.

Transport

- Action buses will be increasing its fleet of easy access buses for people with reduced mobility.

Health

- The adaptation of health care services such as manuals for supporting people with disabilities in hospital.

Sport and recreation

- Training workshops for young musicians.
- Australian Institute of Sport offers scholarships for athletes and swimmers with disabilities.
- The Disability Sport Recreation Program (DSEP) is the state government program, housed at ACTSPORT, which coordinates the sport and recreational activities of people with a disability in the ACT.

- There is a profound shortage of accommodation for people with intellectual disabilities.
- The massive cuts in community housing in recent ACT Budgets should be reviewed as part of the government's commitment to giving effect to the aspirational goals set in *Challenge 2014*.
- Alignment with the building code; adoption of the building access standards for people with disabilities by the Australian Building Codes Board.
- 'Age in Place'-- Often people with disabilities are placed in inappropriate Aged Care facilities because of lack of other age and need appropriate accommodation facilities.

Transport

- Transport is the key to many aspects of community and job participation.
- Need for improved access to parking suitable for people with disabilities, in particular people with wheelchairs.
- Bus services need to be more reliable and accessible.

Some areas seem to be going backwards such as airlines and taxis. More wheelchair accessible taxis are needed.

Health

- Many health services still work on a medical model. That is out of touch with an individualised person centred approach.
- Generic health services are not recognising the access needs of people with disabilities (eg lack of height adjustable examination tables).



Cost

The Citizen's Jury recognised that living with a disability is generally more expensive. This cost is usually met by the individual and / or their families as best they can. Not having the capacity to gain adequate finances to meet these costs creates a significant barrier to participation and this has direct impact on the quality of life of people with a disability.

- Some of the direct costs can include things like personal care, transport, scooters, aids and appliances.
- Associated costs can include therapy, paramedical and pharmaceutical needs.
- Some luxury items become essentials. Taking taxis everywhere, mobile phones, gardening services, house cleaning, home delivery.
- Some people require expensive versions of things we all use. Furniture is one example.
- There is very little assistance for people with disabilities who are working.

These financial issues should be examined by policy makers with a view to considering relevant relief either through the tax system or further financial assistance based on demonstrated need.

In specialist disability services

1. Services that:

- meet professionally recognized standards of quality
- provide clear pathways for getting assistance.
- work collaboratively
- reach out to all people with disabilities and their families across life stages
- provide access to relevant and timely information in formats which are accessible for people with disabilities
- support individuals and their families to imagine "better" and to plan the ways in which the goals they choose might be pursued.



2. Person-centred, flexible disability support services tailored to meet the needs of individuals including those from Indigenous backgrounds and from culturally and linguistically diverse backgrounds.
3. A workforce in the disability sector and associated areas that is inspired by the vision and values, works in an integrated way, meets professional standards, and is highly respected for its expertise, innovation, commitment and accountability.

The Citizen's Jury considered specialist service provision noting that while some innovative progress was evident, there remained evidence of chronic gaps in services, lack of sustainable funding, issues with access and continuity of service to users and need for funding injection to non-government service providers.

Progress to be celebrated

- The Non Government Organisations (NGO's) are committed, accountable, highly respected and are inspired by visions and values.
- NGO's are staffed by dedicated people offering individualised services.
- Some service providers are working towards more 'inclusive' practices and awareness of consumer involvement.
- Pilot Local Area Co-ordination Service has been established in Woden and Gungahlin.
- Advocates for people with disabilities have greater input into government policy.
- Quality of Life Grants.
- Working collaboratively.
- ACT leadership and innovation is gaining national recognition.

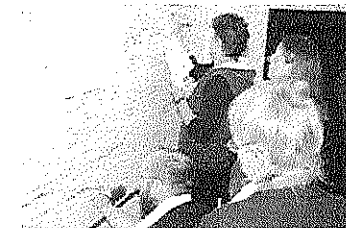
Requires more attention or intervention

- Need for more Carer support.
- Chronic shortage of respite care.
- Continued search for better accommodation models.
- Lengthy delays in job placement/pay regularity.
- More accessible facilities.
- Improved support and funding of non-government service providers.
- Improved Emergency and Crisis intervention. The capacity to effectively deal with these situations and provide people with disabilities with timely access to support.
- More services and supports to be delivered in normative settings as opposed to specialist disability settings (full inclusion and integration of people with disabilities into the community).

- Housing for Life. The move away from segregated housing.
- The NGO sector complies with various internal and external quality assurance mechanisms and has stringent financial accountability requirements in place.
- Emphasis on improved training for staff in disability services. Work has been done to lift the skills of Disability Support Officers and implement workforce strategies to attract and retain quality skilled people in the sector.

In government

A whole of government approach to all issues affecting people with disabilities and their families; strategic planning based on an accurate disability demographic information; a clearly understood government role in relation to people with profound and severe restrictions, disabilities requiring assistance and the overall disability population; and transparent processes around access, eligibility and funding arrangements.



The Citizen's Jury considered the Government's performance noting that progress had been made in terms of policy development and aspirational goals and philosophy of inclusion, there is a long way to go in terms of implementation and sustainable funding.

Progress to be celebrated

- Improved 'True Partnership' between ACT government and the community, e.g. reference groups community co-chairs and members.
- Increased attention to disability issues within Government since establishment of Disability ACT and its separation from the Health portfolio.
- Move within Government away from medical model of disability that says the person is the problem to a social model that says the barriers are the problem.
- A commitment to change, consultation and partnership.
- Policy frameworks are in place; ACT's Social Plan, *Challenge 2014* that link in to the National Standards for Disability Services and international standards such as *Standard Rules on the Equalization of Opportunities for Persons with Disabilities. Future Directions* – A framework for the ACT 2004-2008, ACT Access to Government Strategy (ATGS).
- Funding was supplied to the Master Builders Association to design and build universal housing.
- Joint management of housing, disability and community services have improved interagency communication and partnership approaches to increasing access to affordable housing. Funding of a range of different housing options.
- Funding of ISP packages.
- Funding of the *ACT Business Leaders Innovative Thoughts and Solutions* (BLITS).

Requires more attention or intervention

- Government to take a lead role in ensuring people with disabilities have a role in the community.
- The vulnerability of the carer role provided by ageing parents has been recognized by the government however, effective and suitable solutions have yet to be implemented.
- Ring-fenced (Committed) Public Housing Stock for People with a Disability. There has been changes to the early allocation of public housing but it still falls far short of requirements.
- There is a focus on providing funding to extreme crisis cases. Priority and additional funding needs to be given to early intervention programs in disability and health for disabled persons and their families / carers to deal with issues before they reach crisis point. This needs to occur without effecting crisis care programs.
- Bi-partisan long-term government planning (beyond election cycles) and implementation e.g. sustainable funding and adequate indexation of annual allocations is very important.
- Transparency and equity on resource allocation between funding provided by government to the NGO sector and funding for direct government service provision.
- Continued and increased funding of ISP packages.

- A start has been made on a whole of government approach to services for people with disabilities but much more needs to be done.
- Policies and strategies are well documented but this needs to be implemented and reinforced at grass roots and service delivery levels. Government and other service providers need to place greater emphasis on lifelong planning for people with disabilities.

The ACT Disability Advisory Council thanks the Jurors, presenters and members of the public who participated in the production of this Report

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We dedicate this production to people with disabilities, families, volunteers and the planners and providers of disability services who are working to realise the vision of Challenge 2014

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i

I believe there is confusion over understanding what exactly a 'learning disability' is, what it means for a person, and what it means to work with that person.

Too many assumptions and incorrect beliefs and not enough true understanding.

A co-worker of a person with a learning disability

Learning disability information in the workplace - Overview of key findings from the ACTDAC desk research project

Early in 2006, Council presented some ideas to the Chief Ministers Department and identified the potential for Guidelines to provide advice and support to people with disabilities, co workers, staff and managers on their rights and responsibilities relating to the experience of learning disability in the workplace.

We identified that more information was needed especially what is already available, what the level of perceived need was, what might be the most useful types of information and what was being done in other jurisdictions.

A desk research project was undertaken by the ACT Disability Advisory Council, which looked at the need for learning disability guidelines in the public sector workplace.

Work was undertaken to survey internet resources including examples of guidelines here and overseas. A brief knowledge survey was developed and circulated to a group of key informants including executives, managers, people with learning and other disabilities, co workers, trainers and others who could provide feedback.

- 28 responses were utilised with a mix of perspectives. A third were from managers.
- A high number of respondents (86%) believe assistance is needed
- Most people would prefer separate Guidelines, while others argued for information within other disability material.
- Most people (60%) are unsure about the practical tools and strategies that they can use to assist people with a learning disability in the workplace.
- Managers and co workers want more information ranging from what learning disability is and is not to tools and techniques that can be used in the workplace.
- There are features which make the needs for learning disability exceptional - for instance the potential for issues to manifest in ways that threaten job stability
- There are other Guidelines that could be adapted for the ACT, but there is a difference in the quality of information in the Guidelines, so a tailored approach is recommended.

There is a strong case for more information about learning disability being made available to managers, staff, coworkers and people with disabilities in the public sector. The best approach might be a series of ready reference fact sheets that provide key information.

More information will be available on our website:

www.dhcs.act.gov.au/DisabilityACT/AdvisoryCouncil/Council.htm

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ACT | DAC

**ACT | DISABILITY
ADVISORY | COUNCIL**

TOO MANY ASSUMPTIONS ...

**A CASE FOR GUIDELINES TO BUILD TRUE
UNDERSTANDING ABOUT LEARNING DISABILITY
FOR STAFF, MANAGERS AND CO WORKERS
IN THE PUBLIC SECTOR WORKPLACE**

**REPORT OF A DESK RESEARCH PROJECT
BY THE ACT DISABILITY ADVISORY COUNCIL**

LILY TROUPE, SARAH BUCHANAN AND CRAIG WALLACE

MAY 2007

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It is not surprising then that people with a learning disability themselves sometimes experience these grey areas and assumptions in the form of inconsistent or hasty responses and negative attitudes, such as being portrayed as 'lazy' or problem workers.

We already know much about negative attitudes from Councils' community attitudes research released in 2004.

That also identified the challenge presented by limited community understanding of unfamiliar disabilities, especially those that included barriers to communication.

Council believes that addressing these gaps in our knowledge are important and hopes that this report will do more to build understanding of learning disability and the needs of staff in the public sector workplace.

We commend the report to you and thank those who participated - especially the staff with a disability, managers and co-workers who shared their experiences with us.

Lily Troupe, Sarah Buchanan and Craig Wallace
ACT Disability Advisory Council
September 2006

9. The survey included qualitative and quantitative elements including questions designed to elicit information YES/NO responses on key perceptions and others geared to deeper narrative responses.
10. 28 responses were received with a mix of perspectives. A third of respondents were managers.
11. Almost all the respondents believe Guidelines or some form of assistance is needed with some differences in the preferred delivery of the information.
12. Most people would prefer separate Guidelines, while another argued for information within other disability material fearing information overload.
13. Most people are unsure about the practical tools and strategies that might be employed to assist people with a learning disability in the workplace.
14. Managers and co workers seem information hungry about learning disability and are not shy about identifying their specific information needs.
15. These range from information about what learning disability is to information about the tools and techniques that can be used in the workplace.
16. A common response was for information about what a learning disability is, and what it is not, and how to recognise it.
17. There are other Guidelines that could be adapted for the ACT, but there is a difference in the quality of information in the Guidelines, so a tailored approach is recommended.
18. We suggest that there is a strong case for more information about learning disability being made available to managers, staff, co-workers and people with disabilities in the public sector.
19. The clear preference seems to be for practical information – clear definitions, tips and tools through the recruitment process into life in the job and information on how to provide accommodations (and how not to).
20. Rather than 'Guidelines' on learning disability perhaps the best approach might be for a series of ready reference fact sheets which cover these issues and provide key information.

- People with a learning disability do not have mental retardation, nor are they slow learners. They have an average or above-average intelligence. It is referred to as a hidden disability because there is no obvious physical disability.
- A disorder that affects people's ability to either interpret what they see and hear or to link information from different parts of the brain. These limitations are characterised by difficulty in reading, writing, and arithmetic.
- Any of a variety of disorders, including hyperactivity, attention, comprehension, perception and auditory processing problems, which can interfere with a person's ability to learn.

The Internet research Appendix (iv) canvasses the gamut of definitions.

Early in 2006, Council presented some early ideas to the Chief Ministers Department and identified a need for further supporting information to enable it to fully put the case for work on Guidelines.

More information was needed especially, what is already available, what the level of perceived need was and what might be the most useful types of information and ways of delivering it.

The Council therefore initiated this desktop research project to investigate the potential for Guidelines to provide advice and support to people with disabilities, co-workers, staff and managers on their rights and responsibilities relating to the experience of learning disability in the workplace.

We hope that the work may have wider relevance and inform thinking on providing support to people with learning disabilities beyond an ACT context.

3.2 Methodology

A small working group convened by Council member Lily Troupe, the Council Secretariat Sarah Buchanan and the Chair Craig Wallace formed a steering group for the project.

We scoped the project and developed a project blueprint, which outlined the timeframes, resources, scope, research questions and key deliverables. The project included the following phases.

- Produce project blueprint
- Agree limits and scope
- Work plan – who does what
- Internet searches
- Design and implement a small standardised emailable survey of people with learning disability, HR managers, co-workers and peaks focussed on the core research questions
- Small number of deeper stakeholder interviews if needed arising from the survey
- Write up findings
- Present to DAC September meeting
- Send to Chief Minister

The main survey target groups included:

- Executives
- HR Managers
- Managers of staff in the public sector
- Person with a disability in the public sector
- Public sector employee without contact with learning disability
- Co-worker of a person with a learning disability
- Training provider/support person
- Key informant in the area of learning disability
- Other

3.3 Response to the Survey

28 responses were received with a mix of perspectives. A third of respondents were managers.

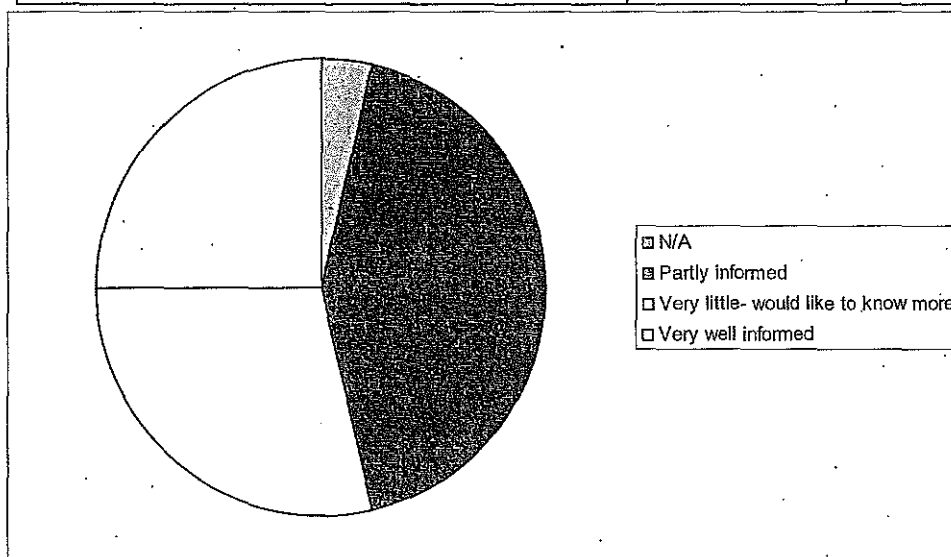
The group included nine people who were managers or had HR responsibilities, three co-workers and people without contact and four people with disabilities, as well as a number of consultants, training providers, disability coordinators and a union official and a teacher.

Some deeper information can be gleaned from the responses to questions designed to canvass existing levels of literacy regarding learning disability issues and rights and responsibilities, including the legislative framework.

Table (ii) below shows responses to a question about basic knowledge and that 72% describe their self-knowledge as partial or very minimal:

Table (ii) Respondents Perceptions of Self-Knowledge

Your knowledge about Learning Disability and rights and responsibilities in the workplace?		
N/A	1	4%
Partly informed	12	43%
Very little- would like to know more	8	29%
Very well informed	7	25%
Grand Total	28	100%



Perhaps not surprisingly given these results, the survey shows that people are also unsure about the practical tools and strategies that might be employed to assist people with a learning disability in the workplace.

Around 60% described their knowledge as very limited or partial and a further 11% gave a non-response (which may reflect the high proportion of people who indicated minimal knowledge of the learning disability itself). These results are high considering the group included practitioners and others who have pre-existing knowledge of learning disability.

5. WHAT MIGHT BE INCLUDED?

With so little known and understood by the community, a danger for many with Learning Disability (LD) is being misinterpreted as lazy/inefficient workers. The information would acknowledge the seriousness of LD, define LD, and clarify what can be achieved by providing appropriate supports /techniques.

A consultant in the field.

The research project found that managers and co-workers seem information hungry about learning disability and are not shy about identifying their information needs.

These range from information about what learning disability is to information about the tools and techniques that can be used in the workplace. A snapshot of some of the responses is presented in Appendix (ii).

A common response was for information about what a learning disability is and what it is not and how to recognise an LD:

Terminology of what exactly a learning disability is, what it means for a person, and more importantly, what it DOES NOT mean.

Another respondent seeks a:

Plain word description of learning disabilities and their effects. Will need to be brief and very clear

Managers identified needs right through the employment process including interviews:

I would definitely like to see some do's and don'ts. What a LD is, how to best to accommodate needs, best forms of communication, how to interview and LD person, how to assess the LD person's interview skills and overall job application process.

6. WHAT IS BEING DONE ELSEWHERE?

This is well covered in Appendix (iv); however, some of the more significant international sites include:

- The British Dyslexia Association - Dyslexia Style Guide.
- Dyslexia in the workplace - Dyslexia Adults Link - dyslexia adult
- Dyslexia Online Journal - Dyslexia - an employer's guide
- Finding the "Best Fit" for Young People with LD in the Workplace - SchwabLearning.org
- Guidelines for Succeeding in the Workplace with ADHD
- How People with Disabilities Use the Web
- <http://www.help4adhd.org/documents/Workplace.pdf>
- http://www.ncset.hawaii.edu/Institutes/mar2004/papers/pdf/RCrawford_revised.pdf
- Dyslexia and the Workplace
- <http://www.jrf.org.uk/bookshop/eBooks/1859352413.pdf>
- NCSALL: Adults with Learning Disabilities: A Review of the Literature

Appendix (i)

Copy of the Questionnaire

**Learning Disability
KNOWLEDGE SURVEY**

Dear Colleague,

The ACT Disability Council is a Ministerial Advisory Body appointed by the ACT Government to advise it on a range of issues relating to people with disabilities. The Council has initiated a desktop research project to investigate the potential for Guidelines to provide advice and support to people with disabilities, co-workers, staff and managers on their rights and responsibilities relating to the experience of learning disability in the workplace. Learning Disability includes a range of conditions relating to the processing of information such as dyslexia.

You have been forwarded this survey as a stakeholder or informant who might be able to provide information on the need for Guidelines and what might be included.

We are keen to hear a range of views about whether these Guidelines would be useful, what might be in them and whether you are aware of work being done elsewhere that supports similar aims. You do not need to be an expert about learning disability to respond. We would appreciate it if you would complete the short survey below and return to dacsecretariat@ozemail.com.au by Friday the 25th of August 2006.

About You:

Are you an ...

(Delete non applicable)

- Executive
- HR manager
- Manager of staff in the public sector
- Person with a disability in the public sector
- Public sector employee without contact with learning disability
- Co-worker of a person with a learning disability
- Training provider/support person
- Key informant in the area of learning disability
- Other: [describe]

1. Your knowledge:

What do you know about Learning Disability and rights and responsibilities in the workplace?

- Very well informed
- Partly informed
- Very little- would like to know more
- Nil

What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?

- Very well informed
- Partly informed
- Very little- would like to know more
- Nil - would like to know more

- Nil - Don't believe its relevant to me

Comments by Respondents

Appendix (ii)

Survey Questions	Question 1 - Your knowledge: What do you know about Learning Disability and rights and responsibilities in the workplace?	What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?	Nil - Don't believe its relevant to me	Comments:	Question 2 - Guidelines: Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?	Comments: Discuss how they might be useful or why you think they would not be useful.	Question 3 - What do you think might be included in Guidelines of this kind?	Question 4 - Optional: Are you aware of relevant work being done in other jurisdictions?
<ul style="list-style-type: none"> • Manager of staff in the public sector • Public sector employee without contact with learning disability 	Partly informed	Partly informed			Only partly	Most workplaces have an overwhelming number of work guidelines, manuals, procedures manuals, protocols, etc. Another manual or guideline will get lost in the mix. Without doubt training of any sort, either theoretical awareness or practical on-the-job will help alert the issue of Learning Disability in the workplace. However, I offer caution of isolating Learning Disability training from other disability awareness training regimes. Segmenting disability training into various components will cause audience fatigue towards disability issues.	Any guidelines need to be included in wider disability training regimes (see above).	No.
<ul style="list-style-type: none"> • Manager of staff in the public sector 	Partly informed	Partly informed		People with a learning disability captures a wide range of learning difficulties. Each person needs to have their own individual plan to assist them in the workplace. You need to clarify if a learning disability covers people with intellectual disabilities.	Only partly	General principles would be good, however as previously stated, individuals would need to sit down with their manager and HR section to develop a work plan.	Explain how people with learning difficulties require different supports..	No
<ul style="list-style-type: none"> • Person with a disability in the public sector • A person with a learning disability • Key informant in the area of learning disability • Disability Coordination Officer 	Partly informed	Partly informed		As a person with a learning disability in the workforce I have developed a number of strategies from using a digital recorder to take voice notes to using Dragon Naturally Speaking to enable me to do my job.	Useful	<ul style="list-style-type: none"> • By seeing what strategies other people with a learning disabilities have utilised to overcome their disability in the workplace a person with a learning disability can develop and improve their own strategies. • Demonstrate what a person can do to overcome their learning disability and thereby countering any misconceptions of the capability of people with a disability. 	<ul style="list-style-type: none"> • Case studies of people with learning disabilities in the workplace • Strategies to overcome learning disabilities in the workplace • A list of resources and useful software/hardware • Who to contact for various resources 	NO

Survey Questions	Question 1 - Your knowledge: What do you know about Learning Disability and rights and responsibilities in the workplace?	What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?	Nil - Don't believe its relevant to me	Comments:	Question 2 - Guidelines: Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?	Comments: Discuss how they might be useful or why you think they would not be useful.	Question 3 - What do you think might be included in Guidelines of this kind?	Question 4 - Optional: Are you aware of relevant work being done in other jurisdictions?
						Guidelines wrapped up with others on disability.	ii Contacts resources for further info	
• Independent Consultant	Partly informed	Very little- would like to know more		It is my experience that employers and co-workers are unsure or unaware of the meaning of LD. For that reason, little is known of the techniques that may be employed. A related matter of interest might be the extent to which LD is not identified.	Very useful	With so little known and understood by the community, a danger for many with LD is being misinterpreted as lazy/inefficient workers. The information would acknowledge the seriousness of LD, define LD, and clarify what can be achieved by providing appropriate supports /techniques. Guidelines would also assist people with LD in being pro-active in identifying available techniques.	Relevant legislation International definitions of various types of LD Techniques Referrals: advice; further information; training?	
• Manager of staff in the public sector	Partly informed	Very well informed			Very useful	It would give some consistency to treatment and allow managers to treat their staff fairly . also documentation would help staff with learning disabilities initiate conversations with their managers	Brief description of some learning disabilities /suggestions for ways to support staff/list of resources available etc.	I am aware of work being done in the education sector in terms of students much of this work could be adapted and applied to workers
• Public sector employee without contact with learning disability • Training provider/support person	Partly informed	Very well informed		Provision of appropriate support, especially during the transition/early stages of a placement are hugely important. Often a workplace coach is required. If a coach is provided the success of the placement is greatly increased. Coaches can be funded through post school option packages.(in England individuals with disabilities are funded directly and are able to use these funds to enable their particular job plan occur eg.	Very useful	Discuss how they might be useful or why you think they would not be useful. Understanding the true meaning of the disability standards and how they would apply to their workplace would be a beginning. Knowing that what is expected is actually attainable within their workplace. That it is minor adaptations which are required not massive re-shaping.	Ideas from Disability Standards, case studies of success stories and a breakdown how it was made possible. Info from parent bodies, organizations and educators.	No...small pieces of info are shared...it would be great to hear what it happening in our area. I'm unsure if much is happening that is relevant at all.

Survey Questions	Question 1 - Your knowledge: What do you know about Learning Disability and rights and responsibilities in the workplace?	What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?	Nil - Don't believe its relevant to me	Comments:	Question 2 - Guidelines: Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?	Comments: Discuss how they might be useful or why you think they would not be useful.	Question 3 - What do you think might be included in Guidelines of this kind?	Question 4 - Optional: Are you aware of relevant work being done in other jurisdictions?
							with a learning disability are discriminated against in our criteria? I don't really know what sort of guidelines you would have as I do not know enough about it. However i believe that if a task can be modified to suit a person's ability than it should.	
• Allied Health professional – working with families with member with Autism Spectrum Disorder	Very little- would like to know more	Very little- would like to know more		In the public sector all employees are expected to be familiar with the statutory requirements for equal employment opportunity and workplace diversity. I think most people understand this in terms of multicultural and physical disability issues where there is an obvious issue/impairment. Learning disabilities are not visible and not obvious. Since I have begun to develop a greater knowledge of autism spectrum disorders it has become clear to me that a number of the difficulties which contribute to a formal diagnosis are experienced by a much larger segment of the general population who are not on the diagnostic threshold, but nevertheless learn to try harder and to expend greater energy keeping up with their peers. I think there is very little	Very useful	Guidelines would raise awareness of the difficulties experienced by many people in the workplace with environmental things such as: • open plan offices, • crowded and noisy workstation arrangements, Work allocation and performance issues such as • team based work • information overload • increasing demand for consistently fast work throughput • assumptions that all employees can juggle competing work priorities on an ongoing basis as opposed to a cyclical or occasional basis	A simple outline of the different types of learning disabilities people my experience, eg information processing speed, sensory issues, visual disturbance and how these characteristics are distributed across the population, not just experienced by those with a formal diagnosis. A simple explanation of why it is important that all employees appointed to team leader and management positions should talk to those they supervise about their work management and work satisfaction individually and with sensitivity to above issues. Supervision tends to focus on "performance management", throughput, organisational goals and ever	No

Survey Questions	Question 1 - Your knowledge: What do you know about Learning Disability and rights and responsibilities in the workplace?	What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?	Nil - Don't believe its relevant to me	Comments:	Question 2 - Guidelines: Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?	Comments: Discuss how they might be useful or why you think they would not be useful.	Question 3 - What do you think might be included in Guidelines of this kind?	Question 4 - Optional: Are you aware of relevant work being done in other jurisdictions?
• Training provider/support person	Very little- would like to know more	Very little- would like to know more			Very useful	Providing an overall framework from which to base decisions about these issues on.		
• Co-worker of a person with a learning disability	Very little- would like to know more	Very little- would like to know more		I believe there is confusion over understanding what exactly a 'learning disability' is, what it means for a person, and what it means to work with that person. Too many assumptions and incorrect beliefs and not enough true understanding.	Very useful	Guidelines provided to all employees to help stamp out incorrect assumptions and create a true understanding of learning disabilities.	Terminology of what exactly a learning disability is, what it means for a person, and more importantly what it DOES NOT mean. How to assist your co-workers, and how to assist yourself (assist them).	Only through some Australian Universities – not in any Government Departments.
• Resource teacher in a secondary college	Very little- would like to know more	Very little- would like to know more		it would be helpful to know more as I prepare students for transition from school to the workplace or further study.	Very useful	Guidelines would be useful as they could clarify expectations on the part of both employer and employee. It may help employers to consider the possibility of employing someone with a disability if there were guidelines which were clear and easy to work with. Guidelines may put an employer off if they appeared to be complicated	Accommodations which may be needed for a particular disability Employer and employee rights and responsibilities	
• HR manager – Disability Employment Contact officer	Very little- would like to know more	Very little- would like to know more			Very useful			We did some extensive consultations during 2005 and the consultant prepared a literature review. Can I suggest that you look at the Disability Toolkit prepared by Chief Ministers Department for ideas

Survey Questions	Question 1 - Your knowledge: What do you know about Learning Disability and rights and responsibilities in the workplace?	What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?	Nil - Don't believe its relevant to me	Comments:	Question 2 - Guidelines: Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?	Comments: Discuss how they might be useful or why you think they would not be useful.	Question 3 - What do you think might be included in Guidelines of this kind?	Question 4 - Optional: Are you aware of relevant work being done in other jurisdictions?
learning disability – Dyscalculia (maths disorder), ADD and language disorder (problems articulating speech).				in general. There is not enough support for the employees, or enough knowledge by senior staff about the complexities, possibilities and talents that learning disabled people have to offer. Even the definition of a learning disability is compromised within society and the workplace.		workplace. Mentorships and cadetships could be developed for learning disabled staff, for support and better understanding of their learning disability by senior staff members. Doing things differently or learning and training programs done differently would be more widely accepted.	forms of communication, how to interview and LD person, how to assess the LD person's interview skills and overall job application process. There should also be a decision made on whether to have an LD person produce evidence of their LD, so that equipment/products and other accommodations are not bought hastily. The guidelines should also include examples of how different people plan and do their work as some might work differently to 'abled' bodied people. Coaching and mentorship should also be offered to LD sufferers.	
	Very well informed	Very well informed			Very useful	Guidelines would be very useful for all stakeholders, but will need to be carefully written to take account of all needs and responsibilities.	Plain word description of learning disabilities and their effects. Will need to be brief and very clear. Legal responsibilities. Simple ways of understanding and helping with common problems. Technology which may be utilised.	No
• Manager, Disability Services - University	Very well informed	Very well informed		I am experienced in working with people with LD – I was co-author of "Opening All Options" a Resource to assist Students with	Very useful	If they were clear and appropriate, with a real understanding of the multiplicity of impacts of LD, and the need to respond to individual needs, they could provide a capacity for	• General information about disability, discrimination and relevant legislation & policies • Information on the nature,	I am particularly aware of work being done in the education sector,

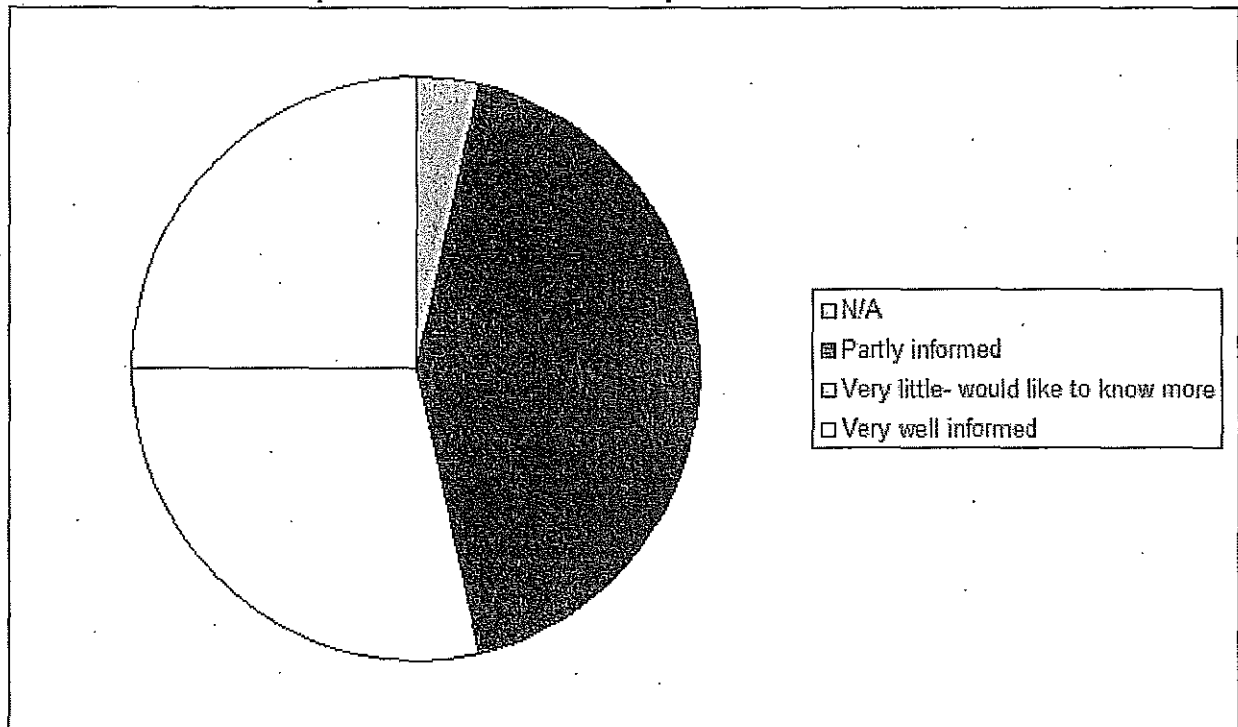
Survey Questions	Question 1 - Your knowledge: What do you know about Learning Disability and rights and responsibilities in the workplace?	What do you know about techniques to help people with a learning disability, co-workers and managers work with Learning Disability in the workplace?	Nil - Don't believe its relevant to me.	Comments:	Question 2 - Guidelines: Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?	Comments: Discuss how they might be useful or why you think they would not be useful.	Question 3 - What do you think might be included in Guidelines of this kind?	Question 4 - Optional: Are you aware of relevant work being done in other jurisdictions?
Network DEN)				environment. General speaking though, most people with a learning disability find aids helpful such as a list of tasks, or pictures. It is also useful for more one on one training with the worker and showing tasks rather than just explaining. It is also good to educate the co-workers with the client's permission, on their situation and draw on the client's capabilities and explain ways to combat some of the barriers. So giving co-workers solutions rather than just facts.			mechanisms, such as DEN's or other providers.	individual level in our agency we try to educate employers.
• Manager of staff in the public sector	Very well informed	Very well informed		Work in Disability Services	Very useful	Would assist in educating staff directly affected and building an awareness of Disability issues within the organisation.	Basic information on some of the differences between learning styles and how that may affect the employees work experience. Information on what others can do to help the new worker. Have information about the position available in different formats... i.e.: written, printed, Interactive etc.	NO
• Manager of staff in the public sector	Very well informed about rights and responsibilities. Not so well informed about the range of			I find this second question very difficult to understand. I'm not sure what you mean by 'techniques'.	Useful	Some broad guidelines might be useful, but my view is that everyone is different with different ways of learning and working, depending on the environment and requirements of the job.	• General information about the range of learning disabilities, their impact in the work environment and suggested ways of addressing the support needs for individuals with learning	No

Appendix (iii)

Combined Responses to Questions (with Graphs)

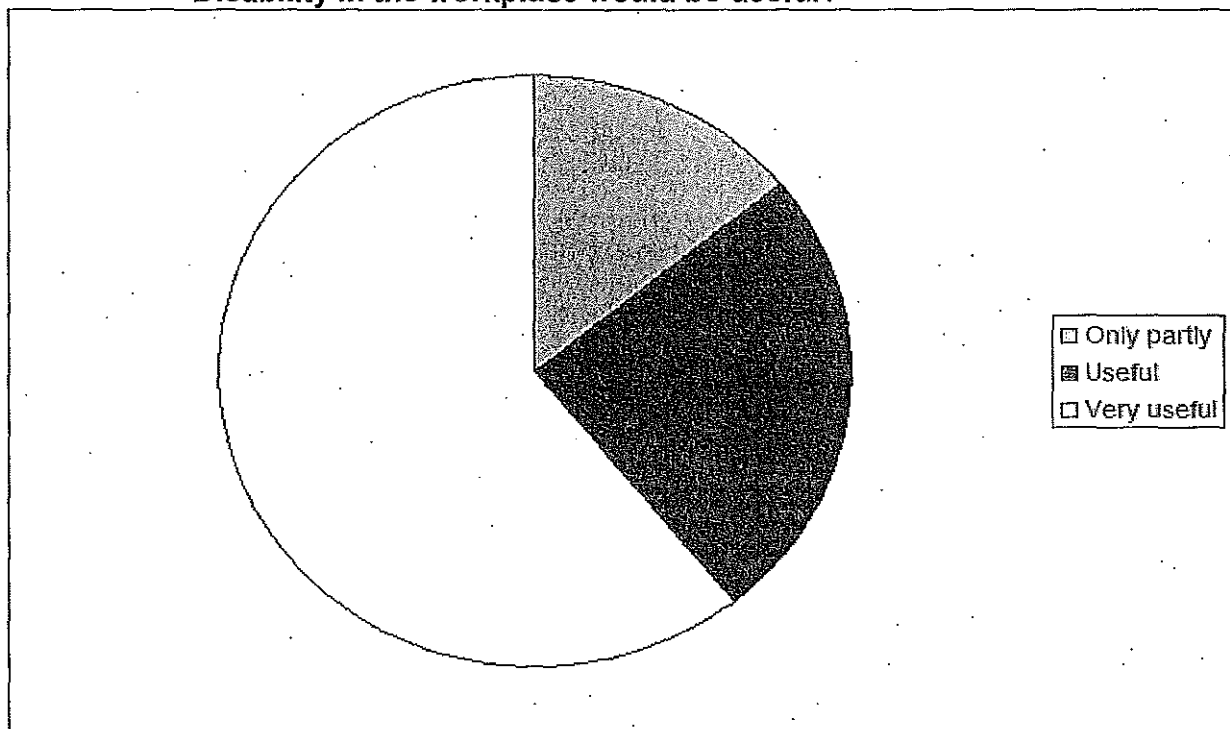
Count of Question 1	Total	
Your knowledge about Learning Disability and rights and responsibilities in the workplace?		
N/A	1	4%
Partly informed	12	43%
Very little- would like to know more	8	29%
Very well informed	7	25%
Grand Total	28	100%

Your knowledge about Learning Disability and rights and responsibilities in the workplace?



Count of Question 4	Total	
Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?		
N/A	0	0%
Only partly	4	14%
Useful	7	25%
Very useful	17	61%
Grand Total	28	100%

Do you think that Guidelines for staff and managers on Learning Disability in the workplace would be useful?



Appendix (iv)

Results of the Desk Literature Research

Web Page	Title	Country / State	Description
Definitions			
http://home.iprimus.com.au/rboon/EarlyInterventionInquiry.htm	Learning Discoveries Psychological Services	Harris Park NSW	<p>Definition of Specific Learning Disability</p> <p>A Specific Learning Disability (usually abbreviated to LD) means a disorder in one of more of the basic psychological processes involved in understanding or in using language (spoken or written), which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or to do mathematical calculations. It also includes directional confusion, sequencing difficulties, and short-term memory retention problems and inefficient working memory. These problems are NOT primarily due to visual, hearing or motor handicaps, NOR due to mental retardation, emotional disturbance, or because of environmental, cultural, or economic disadvantage. The individual is considered to have a LD if achievement is not commensurate with age and ability levels in one or more of the above specific areas when provided with learning experiences appropriate for age and ability levels [1].</p> <p>Early Intervention (0-8 years) for Learning Disabilities and ADHD/ADD – Multi-modal intervention strategies- Rosemary Boon, Psychologist (02) 9727 5794</p> <p>In reference to the Legislative Council of New South Wales' Standing Committee on Social Issues, in their current inquiry into Early Intervention into Learning Difficulties during the early-childhood years (ages 0-8), it must be understood that the term learning difficulties covers a broad spectrum of disorders. For the purpose of this paper, only three of the more prevalent disorders will be considered viz. Attention Deficit Hyperactivity Disorder (ADHD), dyslexia and dyspraxia. Since there is a considerable overlap of these conditions, a range of outcome-based multi-modal interventions is necessary.</p> <p>Therefore, the current diagnostic procedures for learning disabilities and ADHD, and the therapeutic interventions currently used to manage these conditions will require a significant paradigm shift by the medical profession in particular, by special learning disabilities teachers, classroom teachers, some educational psychologists including school counsellors, parents and the community in order for society to give these children a fighting to achieve their potential without the need for stimulant medication.</p> <p>This submission offers an alternative perspective and safe and effective non-pharmacological treatments and strategies for teachers and parents who must work and live with the children in their charge, but who recognise the fallacy underlying the current practice of administering</p>

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			<p>disabilities are suggested by unexpectedly low academic achievement or achievement that is sustainable only by extremely high levels of effort and support.</p> <p>Learning disabilities are due to genetic, other congenital and/or acquired neuro-biological factors. They are not caused by factors such as cultural or language differences, inadequate or inappropriate instruction, socio-economic status or lack of motivation, although these and other factors may compound the impact of learning disabilities. Frequently learning disabilities co-exist with other conditions, including attentional, behavioural and emotional disorders, sensory impairments or other medical conditions.</p> <p>For success, persons with learning disabilities require specialized interventions in home, school, community and workplace settings, appropriate to their individual strengths and needs, including:</p> <ul style="list-style-type: none"> • specific skill instruction; • the development of compensatory strategies; • the development of self-advocacy skills; • appropriate accommodations.
<p>http://www.aph.gov.au/senate/committee/eet_ctte/completed_inquiries/2002-04/ed_students_withdisabilities/report/c02.pdf</p>	<p>Report - Education of students with disabilities</p>	<p>Australia</p>	<p>Commonwealth definitions of disability</p> <p>2.3 The definition of disability under the Disability Discrimination Act 1992 is very broad. This ensures that people with a wide range of disabilities are protected from discriminatory practices in the areas of employment, accommodation, the disposal of land, the activities of clubs, sport, the administration of Commonwealth laws and programs and in requests for certain information. Section 4 of the Act defines disability as follows:</p> <p>disability, in relation to a person, means:</p> <ol style="list-style-type: none"> (a) total or partial loss of the person's bodily or mental functions; or (b) total or partial loss of a part of the body; or (c) the presence in the body of organisms causing disease or illness; or (d) the presence in the body of organisms capable of causing disease or illness; or (e) the malfunction, malformation or disfigurement of a part of the person's body; or (f) a disorder or malfunction that results in the person learning differently from a person without the disorder or malfunction; or (g) a disorder, illness or disease that affects a person's thought processes, perception of reality, emotions or judgment or that results in disturbed behaviour; <p>and includes a disability that:</p> <ol style="list-style-type: none"> (h) presently exists; or

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			<p>The definition includes physical, intellectual, psychiatric, sensory, neurological or learning disabilities, physical disfigurement, and the presence in the body of a disease-causing organism (eg HIV virus).</p> <p>The definition provides for disabilities which people have now, had in the past, may have in the future or which they are believed to have.</p> <p>The definition of disability under the DDA is broader than the CEO definition, which is aligned to Australian Government requirements. Refer to Section 3 of the 2004 Special Needs Learning Support Handbook.</p>
<p>http://www.drc-gb.org/your_rights/are_you_being_discriminated_ag/definition_of_disability.aspx</p>	<p>Disability Rights Commission Definition of disability</p>	<p>Britain</p>	<p>Definition of disability</p> <p>Based on research, around one in five people of working age are considered by the Government and by the DRC to be "disabled".</p> <p>What that means is that they have a disability or a long-term health condition that has an impact on their day to day lives. People in these circumstances and some others (such as people with a facial disfigurement) are likely to have rights under the Disability Discrimination Act (DDA).</p> <p>It is important that people have rights – people with cancer, diabetes, multiple sclerosis and heart conditions; people who have a hearing or sight impairment or a significant mobility difficulty, caused for example by arthritis, can be treated unfairly. The same is true of people who have mental health conditions or learning difficulties.</p> <p>People need protection against being treated unfairly. While they might be considered "disabled" according to the Disability Discrimination Act, they don't need to use that term about themselves – and very many people with rights under the DDA don't.</p> <p>Many people think that you can tell if someone is disabled and that people are usually disabled from childhood. In fact, most people who have a disability or a health condition develop it in later life - only 17 per cent are born with a particular condition.</p> <p>And while Britain is getting wealthier and medicine is developing, in fact an increasing proportion of the population have some form of health condition or disability, partly because many of us are living longer and because treatments are improving. People are able to live for a long time, after cancer, after a heart attack, after an accident – a cause for celebration.</p> <p>The DDA provides disabled people with rights and it also places duties on employers. More importantly, it helps encourage employers and employees to work together to break away from rigid employment practices, identify what adjustments and support might be needed, and find flexible ways of working that may benefit the whole workforce.</p>

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			<p>persistence. They develop a sense of competence and become more motivated as they learn that their efforts do make a difference.</p> <p>Many students who are identified later in life with learning differences, disabilities, or skills deficits, wish that their needs had been recognized and addressed when they were initially observed as "having difficulty." Difficulties should receive attention while they are simply difficulties, before they have a chance to start a negative chain reaction that can include broad educational, social, personal, emotional, and family issues.</p> <p>"Learning difficulty" is not a diagnostic label or term recognized under the law, and does not imply a need for modifications or services</p> <p>Learning—Disabilities</p> <p>There is no single definition of the term "learning disability." Different people - from parents and children to educators, lawmakers, diagnosticians, and researchers - use the term in a variety of ways. Its definition has changed over time, as understanding of learning and learning problems have changed.</p> <p>Before they ever hear the term "learning disabled," most people have learned the common meaning and connotations of the word disabled. Dictionaries variously define the word as "incapacitated by illness or injury;" "unable to perform;" or "physically or mentally impaired."</p> <p>But the term "learning disability" has a different meaning and specific legal implications. Parents and students who understand its definition may be able to obtain services, modifications, and information that support success in school and on the job. In addition, much important research into the nature of learning and effective teaching is based on definitions of specific learning disabilities.</p> <p>Therefore, it is important for parents, students, teachers and others to learn these definitions if they wish to access help, information, services, accommodations, and rights.</p> <p>What are the most common and useful definitions of learning disabilities?</p> <p>What are the laws that pertain to individuals with diagnosed learning disabilities?</p> <p>Definitions of Learning Disabilities</p> <p>The term "learning disability" is most commonly used to describe children who have qualified for special education services under the provisions of IDEA, the Individuals with Disabilities Education Act. This law defines the term "children with specific learning disabilities" as: those children who have a disorder in one or more of the basic psychological processes involved in understanding or in using language spoken or written, which may manifest itself in</p>

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			<p>person's life: school or work, daily routines, family life, and sometimes even friendships and play. In some people, many overlapping learning disabilities may be apparent. Other people may have a single, isolated learning problem that has little impact on other areas of their lives.</p> <p>The Coordinated Campaign for Learning Disabilities</p> <p>The Coordinated Campaign for Learning Disabilities, a public awareness campaign funded primarily by the Emily Hall Tremaine Foundation, has worked with a coalition of national organizations to develop the following simple definition:</p> <p>People with learning disabilities have average to above average intelligence but have trouble learning because their minds process words or information differently.</p>
http://www.help4adhd.org/	National Resource Centre on AD HD A Program of CHADD	Landover	<p>Attention-deficit/hyperactivity disorder (AD/HD) affects how millions of children and adults function on a daily basis. The NRC was created to meet the information needs of both professionals and the general public.</p>
http://www.infonet.unsw.edu.au/poldoc/97rag412.htm	Reasonable Adjustment Guidelines for Managers of Staff and Potential Staff with Disabilities	The University of New South Wales Sydney, Australia	<p>2. What is a disability?</p> <p>Disability is defined very broadly as any physical, sensory, neurological, intellectual, psychiatric or learning disability, and includes physical disfigurement, the presence in the body of disease-causing organisms (for example the HIV virus) and total or partial loss of part of the body or a bodily function. It also includes a temporary, permanent, current, past or future disability.</p>
http://www.ldanatl.org/	Learning Disabilities Association of America	Pittsburgh	About Learning Disabilities (various)
http://www.learningconnections.com.au/	Learning Connections Centre (previously ANSUA Learning Centre)	Paddington Qld	<p>Learning difficulties</p> <p>Learning difficulties are caused by developmental delay, which may come in the forms of ADD and ADHD (attention deficit disorders).</p> <p>But at Learning Connections, we don't rely on labels. We believe that each child is unique. The reasons why children may have learning problems are unique too.</p> <p>Poor reading, comprehension, writing, mathematics and spelling are symptoms of learning difficulties - not causes. When the cause is overcome the symptoms disappear.</p> <p>Learning Connections programs don't just treat the symptoms of learning difficulties. They treat underlying causes not addressed by existing remedial methods.</p> <p>If your child displays any of the following signs, he or she could benefit from Learning Connections' help:</p> <ul style="list-style-type: none"> • delayed motor milestones e.g. walking, sitting, crawling • delayed language and speech development, reading and spelling difficulties

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			<p>questioned the incidence of LD among adult learners and debated appropriate practices for adults with LD. But adult literacy programs were for the most part not yet attending to LD in the design and delivery of services for learners or in staff development.</p> <p>It is primarily in the past fifteen years that studies on adult populations have caused both the special education and the adult basic education (ABE) fields to acknowledge that LD represents a persistent challenge. An important benchmark in the growing recognition of LD as a lifelong condition was the establishment of the National Adult Literacy and Learning Disabilities Center (National ALLD Center) in 1993 with funds from the National Institute for Literacy. The center's goals were to raise awareness among practitioners, policymakers, and researchers about issues of LD in adults, to add to the knowledge base about LD in adults through a research and development effort, and to build capacity among literacy programs to enhance the quality of services provided for adults with LD. The center represented the first effort to bring together professionals in the fields of adult literacy and learning disabilities on a professional advisory board.</p> <p>With the recognition of LD as a lifelong condition, new definitions have been crafted, making the important acknowledgments that LD affects individuals of all ages, can occur concomitantly with other disabilities, and can impede social skills. One widely accepted definition is that of the National Joint Committee on Learning Disabilities:</p> <p>Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability. Although learning disabilities may occur concomitantly with other handicapping conditions (for example, sensory impairment, mental retardation, social and emotional disturbance) or with environmental influences (such as cultural differences, insufficient/inappropriate instruction, psychogenic factors), it is not the result of those conditions or influences. [1994, pp. 65-66]</p> <p>Simply stated, LD is an umbrella term for a broad array of disorders in information processing, including disorders in one or more of the basic processes involved in understanding or using spoken or written language. Adults with LD are likely to experience problems that significantly affect their academic achievement and their lives.</p>

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	Definitions		<p>organizations within the learning disabilities community, defines LD as "a neurobiological disorder in which a person's brain works or is structured differently."</p> <p>Diagnostic and Statistical Manual of Mental Disorders — Fourth Edition (DSM-IV), used by psychologists and medical doctors, doesn't list "learning disability," but describes disorders in reading, mathematics, and written expression. Academic achievement, as measured by standardized tests, must be substantially below expectations for the child's chronological age, intelligence, and age-appropriate education.</p> <p>Individuals with Disabilities Education Act (IDEA), the federal law that provides for special education, defines "specific learning disability" as a disorder in one or more of the basic psychological processes involved in understanding or using spoken or written language. Skills of listening, speaking, reading, writing, and/or mathematics may be negatively affected.</p> <p>What a Learning Disability Is Not:</p> <ul style="list-style-type: none"> • Attention disorders, such as Attention-Deficit/Hyperactivity Disorder and learning disabilities often occur at the same time, but they're not the same. • Learning disabilities are not the same as mental retardation, autism, hearing or visual impairment, physical disabilities, emotional disorders, or the normal process of learning a second language. • Learning disabilities aren't caused by lack of educational opportunities, such as frequent changes of schools, poor school attendance, or lack of instruction in basic skills. <p>Learning Disabilities — An Overview</p> <p>Facts about Learning Disabilities:</p> <ul style="list-style-type: none"> • Difficulty with basic reading and language skills are the most common • learning disabilities. • Learning disabilities may be inherited. • Learning disabilities affect girls as frequently as they do boys. • Kids don't outgrow or get cured of LD. • With support and intervention, kids with LD can be successful in learning and life.
http://www.w3.org/WAI/EO/Drafts/WAI-access-profiles	W3C World Wide Web Consortium Leading the Web to its Full Potential How People with Disabilities Use the Web	France, Japan, USA,	<p>Cognitive and Neurological Disabilities</p> <p>Learning disabilities</p> <p>Individuals with learning disabilities may have difficulty processing written language or images when read visually, or spoken language when heard, or numbers when read visually or heard. Specific learning disabilities can affect the ability to focus.</p>

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			<p>Avoidance of these visual or audio frequencies in Web sites prevents inadvertent triggering of seizures. Barriers include:</p> <ul style="list-style-type: none"> • use of visual or audio frequencies that can trigger seizures <p>Psychiatric disabilities</p> <p>Individuals with mental or emotional disabilities may have difficulty focusing. To use the Web, people with psychiatric disabilities may turn off distracting visual or audio elements.</p> <p>Barriers include:</p> <ul style="list-style-type: none"> • lack of clear and consistent organization of a Web sites • distracting visual or audio elements
<p>http://www.work.asn.au/disability/info/types_of_disability.cfm</p>	<p>Diversity@work Australia Inc. Types of Disability</p>	<p>Melbourne Victoria, 3000 Australia</p>	<p>Types of Disability</p> <p>Intellectual or learning disabilities</p> <p>People with an intellectual, learning, or cognitive disability have a reduced capacity to learn tasks or process information.</p> <p>A learning disability may make it difficult for a person to take in information and communicate what they know. Learning difficulties can cause difficulties in reading, writing, or mathematics. Celebrities who have made public statements about their learning disability include Susan Hampshire, Greg Louganis, and Nelson Rockefeller.</p> <p>Attention Deficit Disorder (ADD) is an intellectual disability, and it may make it difficult for a person to sit calmly and give a task their full attention.</p> <p>Learning disabilities and Attention Deficit Disorder together affect between 3% and 10% of the workforce. As workers, people with these disabilities are often intelligent, creative, and productive. Both are considered psychological or mental impairments.</p> <p>The term Cognitive Disability is derived from the word 'cognition', which is the mental processes by which knowledge is acquired. These processes can include perception, reasoning, problem solving, and intuition. People with a Cognitive Disability may have trouble learning new things, in making generalisations from one situation to another, and expressing themselves through spoken or written language.</p> <p>The disability comes in varying degrees and may be found in people who have been classified in school as learning disabled, mentally retarded, autistic, multiply handicapped, or who have suffered a head injury or Down's Syndrome.</p>

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Guidelines / Reports / Guides			
http://dept.kent.edu/sds/learning_disability_guidelines.htm	Ken State University Student Disability Services	Kent, Ohio	Guidelines For Documentation Of Specific Learning Disabilities
http://education.qld.gov.au/students/disabilities/adjustment/index.html	Queensland Government Department of Education and the Arts Education Adjustment Program	Queensland	<p>The Education Adjustment Program (EAP) is a system identifying and responding to the educational needs of students with disabilities.</p> <p>It identifies the teaching adjustments that are made in a class/school program to provide an inclusive education for students with a verified diagnosis in autistic spectrum disorder, hearing impairment, intellectual impairment, physical impairment, speech-language impairment, vision impairment or a combination of these.</p> <p>This site is the gateway for:</p> <ul style="list-style-type: none"> • information about the EAP, its history and development • educators seeking information on the EAP process, professional development opportunities and time line implementation details • parents and carers wanting implementation time lines, support or contact details and explanations on the EAP process • community groups interested and involved with students with disabilities • interested agencies either government or non-government in a related field of interest to students with disabilities
http://literacyworks.org/cls/ PowerPoint Presentation http://www.literacyworks.org/cls/resources/differences/maxlearningstrengths/mls.ppt#263,11,What%20is%20LD?%20The%20distinctions	California State Literacy Services	California	<p>I. Brief History of LD Guide</p> <ul style="list-style-type: none"> • LD Task Force formed in 1999 - 2001 • Why? The Need <ul style="list-style-type: none"> ➢ confusion between differences, difficulties, and disabilities ➢ conflicting paradigms (deficit oriented vs. growth models) ➢ lack of research on adults/generalizations from children ➢ new research focusing on phonemic awareness ➢ competing approaches – real life vs. language processing skills ➢ heightened emphasis by "LD specialists" <p>What is LD? The distinctions</p> <ul style="list-style-type: none"> • Learning differences – cultural, environmental or cognitive preferences, including learning styles & multiple intelligences. • Learning difficulties - refers to reading difficulties caused by a variety of factors including emotional, psychological or physiological barriers that affect language processing.

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<p>http://literacyworks.org/cls/resources/differences/ldr.pdf</p>	<p>The Learning Disabilities Task Force Supported by The California State Library LD Resource Guide Making Sense of Learning Difficulties, Disabilities, and Differences for California Library Literacy Services</p>	<p>California</p>	<p>LD Resource Guide Resource Guide CONTENTS Chapter 1 Introduction Chapter 2 Understanding Learning Disabilities Chapter 3 Language and Comprehension Chapter 4 Assessment and Screening Chapter 5 Materials and Methods Chapter 6 The Americans with Disabilities Act, Definitions, and Glossary of Terms Chapter 7 Resources Chapter 8 Articles and Other Resource Materials Appendix A Learning Disabilities/Difficulties/Abilities Survey Appendix B The Role of Phonological Awareness in Learning to Read Appendix C Learning to Read, Reading to Learn Appendix D Access Ingenuity Resource Guide</p> <p>These disparities are also evident in the definitions that respondents gave when asked to define a learning disability and describe whether it was different than a learning difference. Here is a sampling of definitions offered:</p> <p>Any disorder, which causes the ability to acquire new information to be slowed down. There is no difference between disability and difference.</p> <p>Students who demonstrate an inability to learn despite numerous attempts using a variety of teaching techniques may be considered learning disabled.</p> <p>Not the same as a learning difference, which may be addressed by changing the type of instruction.</p> <p>There is no clear and widely accepted definition of "learning disabilities."</p> <p>Possibly one simple definition is that "A learning disability is a learning problem associated with the way the brain processes information."</p> <p>Someone who processes information differently than the norm. Adults who are developmentally delayed are disabled. Those with "learning disabilities" are of average intelligence.</p> <p>LD = doesn't have the ability to learn more.</p>

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http://services.admin.utas.edu.au/disability/learning_disabilities.html	University of Tasmania	Launceston, Tasmania	<p>Disability Service - Guidelines Learning Disabilities</p> <p>A student with a Learning Disability is a student with learning abilities who:</p> <ul style="list-style-type: none"> • falls within the range of intellectual ability from average to superior intelligence; • is able to learn (including tertiary level subjects); • has disabilities in one or more of the academic skills of reading, writing, spelling or mathematics; and • is able to progress in their learning achievements by navigating around their learning difficulties.
http://services.admin.utas.edu.au/options/LD_Decision_Tree.pdf	Australian Learning Disability Association Assessing Learning Disability	Australian State & Territory Representatives	<p>Assessing Learning Disability "LD Decision Tree"</p>
http://www.adelaide.edu.au/services/disability/	University of Adelaide	Adelaide	<p>Policies Guiding Learning Disability and Access (LDA)</p> <p>In keeping with the aims of the Disability Discrimination Act and the University's policy regarding Students with Disabilities, The University of Adelaide provides a range of services to students with temporary or ongoing disabilities or medical conditions. This may include adjustments to the standard teaching or assessment processes.</p> <p>The Disability Discrimination Act (DDA) ensures students with a disability attending university in Australia have the right to be treated without discrimination.</p> <p>The University's position is that:</p> <ul style="list-style-type: none"> • People with a disability have the same right to study at University as everyone else. • Students with disabilities have the right to reasonable adjustment to learning and assessment in order to minimise the impact of their disability or medical condition. • Students with disabilities have the right to access a range of support services made available through the University. <p>Links for further information on Legislation Policies and Operational Plans:</p> <ul style="list-style-type: none"> • Equal Opportunity Act • Disability Action Plan • AVCC Guidelines Relating to Students with Disabilities • Students with Disabilities: Code of Practice for Australian Tertiary Institutions <p>Policies of The University of Adelaide:</p> <ul style="list-style-type: none"> • Reasonable Adjustments to Teaching and Assessment for Students with a Disability policy

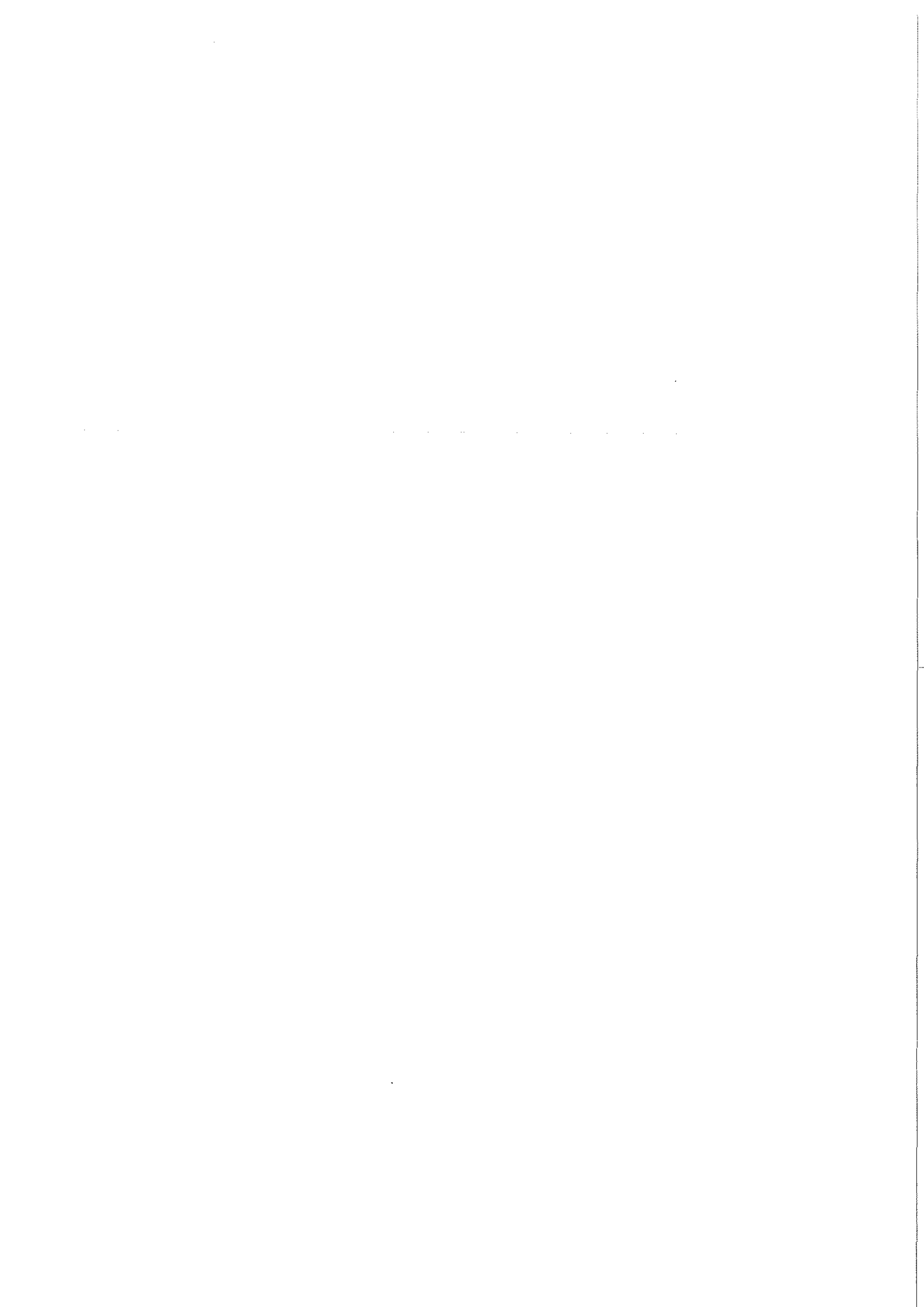
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http://www.goddard.edu/student/LD.html	Goddard College	Plainfield, VT	Guidelines for Documentation of Learning Disabilities
http://www.help4adhd.org/documents/Workplace.pdf	National Resource Centre on AD/HD A Program of CHADD Guidelines for Succeeding in the Workplace with AD/HD	Landover	Report
http://www.jrf.org.uk/bookshop/eBooks/1859352413.pdf	Employing people with learning disabilities A handbook for employers	United Kingdom	Report
http://www.mesastate.edu/enrollman/acadserv/EAS/Learningdisabilities.htm	MESA State College	Colorado	Documentation Guidelines for Specific Learning Disability Educational Access Services (Division Of Advising & Academic Services)
http://www.ncwc.edu/offices/student_support/ld%20doc%20guidelines.html	North Carolina Wesleyan College	North Carolina	Learning Disability Documentation Guidelines A learning disability is a diagnosable, clinically significant difference between ability and achievement. Testing is used to determine the type of deficiency that exists and the severity of the deficiency. A learning disability can be best described as an inability to acquire or relate specific information. It is not a form of mental retardation or intelligence impairment. Learning disabilities can exist in various areas, such as math, reading, or writing. Some of the more common types of learning disabilities are arithmetic deficit, auditory processing, constructional dyspraxia, dysgraphia, dyslexia, language comprehension, long term memory deficit, reading deficit, short term memory deficit, spatial organization, spelling dyspraxia, traumatic brain injury, visual processing and writing deficit. Some students may have combinations of these disabilities or have these disabilities in combination with social/emotional adjustment problems. Accommodation plans try to help compensate for specific deficits. The documentation should indicate that the learning disability substantially limits one or more major life activities. The following guidelines are provided in the interest of assuring that learning disability documentation is appropriate to verify eligibility and to support requests for accommodations. The documentation must comply with the following four areas. 1. Qualifications of the Examiner The professional conducting the evaluation must be qualified to make the diagnosis of a learning disability and to recommend appropriate academic accommodations. Experience with

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			accommodations provided for learning disabilities are a quiet environment, extended test-taking time, and a reader or scribe. These guidelines have been modified and adapted from the AHEAD "Guidelines for documentation of a learning disability in adolescents and adults." The Association on Higher Education and Disability, Columbus, Ohio, 1997.
http://www.virginia.edu/studenthealth/lnec/guidel.html	Elson Student Health Centre At the University of Virginia Learning Needs and Evaluation Center	Virginia	Guidelines for Documentation of a Learning Disability or Attention Deficit Hyperactivity Disorder (ADHD)
Strategies			
http://www.dyslexia-adults.com/a15.html	Dyslexia Adults Link Dyslexia in the workplace - employment issues	Cambridge	Overall strategies
Statistics			
http://www.schwablearning.org/pdfs/EGuideLDBasics.pdf?date=2-22-05&status=updated	SchwabLearning.org A Parent's Guide to Helping Kids with Learning Difficulties LD Basics A Parent's Guide by SchwabLearning.org Statistics	America	Statistics To understand the impact learning disabilities have on children and young adults in the United States, it's helpful to look at some key statistics. This fact sheet provides a current snapshot of those figures. <ul style="list-style-type: none"> Nearly 2.9 million students are currently receiving special education services for learning disabilities in the U.S. (Source: 24th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2002) 50% of students receiving special education services through the public schools are identified as having learning disabilities. (Source: 24th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2002) The majority of all individuals with learning disabilities have difficulties in the area of reading. (Source: President's Commission on Excellence in Special Education, 2002) Two-thirds of secondary students with learning disabilities are reading three or more grade levels behind. Twenty percent are reading five or more grade levels behind. (Source: The Achievements of Youth with Disabilities During Secondary School, National Longitudinal Transition Study-2, 2003) 44% of parents who noticed their child exhibiting signs of difficulty with learning waited a

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http://www.dest.gov.au/sectors/higher_education/programmes_funding/programme_categories/special_needs_disadvantage/higher_education_disability_support_program.htm#Additional_Support_for_Students_with_Disabilities_(ASSD)	Australian Government Department of Education, Science and Training Higher Education Disability Support Program	Australia	The Disability Support Program provides funding to eligible higher education providers to undertake activities that assist in removing barriers to access for students with disabilities. It consists of three components. <ul style="list-style-type: none"> • Additional Support for Students with Disabilities (ASSD) • Regional Disability Liaison Officers (RDLO) • Performance-based Disability Support Funding
http://www.schwablearning.org/articles.asp?r=331&f=search	SchwabLearning.org A Parent's Guide to Helping Kids with Learning Difficulties Resources for Adults with Learning Disabilities & Attention-Deficit/ Hyperactivity Disorder (AD/HD)	America	List of resources ... Our mission is to help parents whose children (aged preschool through high school) have learning difficulties. This includes kids with learning disabilities (LD), Attention-Deficit/Hyperactivity Disorder (AD/HD), and other learning struggles. We recognize that LD lasts a lifetime and kids who have AD/HD may continue to struggle as adults. If you or an adult you care about needs assistance, we recommend the following list of resources. Best of luck!
General			
http://www.addressources.org/article_workplace_chadd.php	Attention Deficit Disorder Resources Guidelines for Succeeding in the Workplace with ADHD	Tacoma, America	Improving On-the-Job Functioning
http://www.drc-gb.org/	Disability Rights Commission	Britain	Disability Rights Commission Your Rights Employers and Service Providers The Law
http://www.drc-gb.org/newsroom/notice_board/2006/live_discussion.aspx	Disability Rights Commission Read the Minister's answers to some of your questions about welfare reform Jim Murphy MP, Minister of State, Department of Work and Pensions (DWP), answered a cross-section of your questions about welfare reform in a live discussion on Tuesday 18 July.	Britain	Question 3 from Sarah Crowther: I am bi-polar. I think long and hard before disclosing this to my employer, unless specifically asked. I have friends who are bi-polar and refuse to disclose altogether due to the vast stigma attached to mental illness. How can the government assist people who are scared of disclosing their disability, and what reforms can be put in place for people who don't want to disclose their disability at an interview stage, but would prefer to keep it confidential unless it causes a problem at work. ANSWERED BY JIM MURPHY MP: Thanks for getting in touch Sarah. I think to some extent employers' attitude reflect a wider misconception in society generally about mental health illnesses and learning disabilities. My sense is that this is about day by day changing society

Web Page	Title	Country / State	Description
<p>http://www.ncset.hawaii.edu/Institutes/mar2004/papers/pdf/RCrawford_revised.pdf</p>	<p>Learning Disability vs. Learning Difference: How to Avoid Conflict in the Workplace and Postsecondary Settings</p> <p>Learning Differences And Disabilities In The Workplace</p>	<p>Honolulu</p>	<p>Learning Differences And Disabilities In The Workplace</p> <p>At present, there is no legal protection for individuals with learning differences. In the black and white world of for-profit corporations, the rule of law is followed regarding the view of a work limitation as being related to the manner of manifestation, condition (environment, etc) of occurrence, and duration (onset, waxing/waning). Specific provisions can be made on behalf of an employee who is both a protected class and a qualified applicant (Americans with Disabilities Act [ADA], 1990).</p> <p>The adult with LD seeking employment-based accommodations faces a different set of hurdles that must be crossed in order to meet ADA standards as a person with evidence of a disability. At the basis of receiving help is the concept that employers are not mind readers. They are under no obligation to know about the presence of a disability or provide accommodations unless individuals notify them. While some conditions such as physical or sensory impairments may appear to be obvious to an employer, hidden disabilities such as learning disabilities are not so apparent. When the need for workplace accommodation is not obvious, the employer has the right to ask for reasonable documentation of the disability and functional limitations relative to the task/situation (EEOC, 1992).</p> <p>There are three basic elements of disability documentation needed to be eligible for workplace accommodations: (1) diagnosis, (2) evaluation of impact, and (3) recommendations. Together they establish the existence of a disability, the areas of functioning affected by the disability, and the specific interventions and accommodations made necessary by that disability (Latham, P. & Latham, P., 2002).</p> <p>The major difference in the work world as opposed to school is not whether the person has a disability, but whether they have a disability UNDER THE LAW. Not every impairment that affects a major life activity is a disability under the ADA. Only those whose effects substantially limit a major life activity are considered disabilities in workplace settings.</p> <p>Work is treated differently from all other major life activities for purposes of considering whether an individual with a learning disability has an impairment that substantially limits them from significant classes of jobs and not just a particular job.</p> <p>Prior to 1999, most courts held that, under the ADA, the severity of an impairment was measured without considering the effects of a person's coping/compensatory strategies (differences). In <i>Sutton v. United Airlines, Inc.</i> (1999), the Supreme Court ruled that Congress never intended to protect, as disabled, individuals who are able to "function identically to individuals without a similar impairment," when using "mitigating measures such as medicines,</p>

Web Page	Title	Country / State	Description
			<ul style="list-style-type: none"> • How employers can adjust current practices to support individuals • What methods of support and advice are available to employers and employees Plus lots more..
http://www.schwablearning.org/articles.asp?r=982	SchwabLearning.org A Parent's Guide to Helping Kids with Learning Difficulties Finding the "Best Fit" for Young People with LD in the Workplace	America	"Best Fit" in the Work Environment Self-Disclosure and the Americans with Disabilities Act (ADA) "Reasonable Accommodations"



Wheelchair Taxi Review

Request for Terms of Reference

Submission

ACT Disability Advisory Council

Chair - Mr. Trevor Robinson

Friday 21st August 2009

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Background

Despite numerous reviews and reforms over the last decade, the ACT's Wheelchair Accessible Taxis (WATs) continues to marginalise the most vulnerable in the community. The addition of a second operator several years ago did little to address the pitiful service in Australia's capital.

ACT Disability Advisory Council

The Disability Advisory Council was established in May 2003 to independently advise and make recommendations to the ACT Minister for Disability across a range of issues in relation to people with disability in the ACT. The Council has representation from a broad cross section of the disability community as well as from Disability ACT and the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs.

The Council has broad Terms of Reference and is tasked with: advising the Minister on disability issues; working in partnership with Disability ACT on key activities; communicating the needs of people with disability and their families and carers; and establishing links with interstate Disability Councils.

Supplementary Submissions

Several members of the Disability Advisory Council also took part in submissions from other disability community organisations in the ACT. Such is the significance of Wheelchair Accessible Taxis (WATs) issue. It can be said that the substandard service provided by WATs, and the lack of response by the arms of the ACT government, has coalesced the disability community into action.

The Disability Advisory Council is proud to support like-minded submissions from individual and groups within the ACT disability community.

Terms of Reference

The focus of this submission is to look beyond just the service delivery of WATs, and examine more fundamental aspects of operating a transport service. While many may think it overly simplistic, if you have the appropriate number of trained drivers driving serviceable vehicles under the watchful eye of a diligent agency, you have all the ingredients to facilitate acceptable service delivery.

While acutely aware that WATs are accessible to other users with a disability, the focus of this submission is very much from the perspective of wheelchair users.

The object of this submission is to provide desired outcomes for inclusion in the Terms of Reference, and not pre-empt or be prescriptive.

1. Consumer Data

A methodology must be employed to ascertain:

- a. Number of power and manual wheelchair users residing in the ACT;
- b. Number of power and manual wheelchair users residing in the ACT that use Wheelchair Accessible Taxis (WATs), and their frequency of use;
- c. Number of single and dual WATs vehicles;
- d. An acceptable ratio of single and dual WATs to applicable wheelchair users.
- e. Number of people requiring a WAT to and from the Canberra Airport

Rational

Informal inquiries with ACT Health and Disability ACT revealed that neither government agency has an accurate knowledge of the number of manual or power¹ wheelchair users in the ACT. Without accurate data, it is impossible to know how many WATs are required to service the community.

Similarly, data on the frequency of WAT usage is non-existent. While there is strong empirical evidence to suggest that peak usage periods reflect though of school and work hours – 8:30-9:00am / 3:00-4:00pm – evidence is scant with regards to usage on weekends, public holidays, special events and school holidays.

2. Driver Training

Drivers of Wheelchair Accessible Taxis (WATs) must be trained and accredited in applicable aspects of:

- a. Manual and power wheelchair handling and loading;
- b. Communicating with people with a disability;
- c. Equity and Diversity;
- d. Defensive and considerate driving when driving with a wheelchair passenger.

Rational

As with other transport modes, wheelchair users are given special consideration because of their unique and varied challenges. Depending on their ability to communicate, most wheelchair passengers may be able to provide guidance on handling their wheelchair (e.g. how to apply the brakes, identifying tie-down points, turning power off). However, there may be passengers that are unable to impart this critical information. WAT drivers need to be aware how to handle and stow a wheelchair safely and securely so not to damage a wheelchair and to make the wheelchair passenger feel safe.

When secured in a WAT, wheelchair passengers are transfixed in a much more precarious position compared to passengers utilising the taxis normal seats, with the centre of gravity much higher, passive containment non-existent (via bucket seats) and suspension (from spring-loaded car seats) absent. Adding to the problem is the marginalised safety WAT passengers are exposed to by not enjoying lap-sash seatbelts and airbags. WAT drivers need to be acutely aware of these issues, and to be trained accordingly in their driving habits.

¹ In this submission, power wheelchair also includes scooters and other forms of self-propelled, non-registered vehicles.

3. Vehicle Serviceabilityⁱⁱ

Wheelchair Accessible Taxis (WATs) must be;

- a. Serviceable, including hoists, ramps, tie-down points and strap/belts;
- b. Must not be a health risk to passengers;
- c. Presentable.

Rational

Many of the single WATs are used more as a multi-hire taxi to and from the airport than they are for wheelchair passengers. Because of this disregard towards wheelchair passengers, the equipment associated with wheelchair passengers is allowed to fall into disrepair. Electric inertia reels, strap/belts and electrical or hydraulic hoists are either not replaced promptly or allowed to remain in service despite their unserviceability and the risk to wheelchair passengers.

With passengers of single WATs loaded from the rear of the vehicle, many are exposed to exhaust fumes because of torn, missing or poorly seated rear door seals. This exposure to exhaust fumes can have an extremely detrimental effect on journeys over 30 minutes.

4. Operator Surveillance

The agency responsible for licensing Wheelchair Accessible Taxis (WATs) must have a robust surveillance regime to ensure regulatory compliance of WATs operators. Any compliance programme must be robust and transparent, with the agency prepared to take either pecuniary or administrative action against errant operators.

Rational

Reluctant motivation to service wheelchair users, defective wheelchair equipment and a booking system that favours ad hoc consumers over regular, habitual user demonstrates a poor understanding of business principles. These are just a few examples of how a recalcitrant service has been allowed to operate in plain sight of distracted and disinterested authorities. Despite the service costing considerable taxpayer dollars, WATs operators have been allowed to ignore the customer they were licensed to serve.

5. Harmonisation

Conditions placed on the ACTs Taxi Subsidy Scheme must closely reflect those of other jurisdictions, particularly NSW.

Rational

With ACT bordering only one jurisdiction, NSW, it makes sense to align our Taxi Subsidy Scheme with whatever similar scheme NSW employs. However, should the ACT scheme differ with NSW, a long transitional period should be incorporated to allow the less generous scheme to catch up.

6. Service Delivery Standards

Stakeholders should be consulted on the formulation of a minimum service delivery standard. Service delivery should include:

- a. Availability for ad hoc wheelchair users;
- b. Pick up times for reserved or booked WATs;
- c. Passenger satisfaction and/or complaints.

Rational

This is the sharp end of why the review was commissioned. The volume of complaints against WATs meant that the system was at breaking point. The service was so bad that many consumers felt it was useless to complain, since no one listened.

With no data to either support or criticize service delivery standards of WATs, it suffices to say that lengthy waiting times, a non-existent booking system and operators insensitive to the needs of wheelchair users converts to service delivery that is bereft of consideration.

ⁱⁱ Consumers require protection via a serviceable vehicle. Its maintenance status is irrelevant.

7. Economic Viability

Subsidies, operational restrictions, licensing fees and financial enticements available to operators, drivers and owners of Wheelchair Accessible Taxis (WATs) should be sufficient to allow profitability under reasonable business model.

Rational

While it is not the duty of government to tell businesses how to operate, governments must nevertheless be extremely conscious of the impost they place on business through fees and charges. This is particularly true in areas where the government is the main financial customer.

Mindful that WATs operators cannot survive solely on the proceeds from wheelchair users, it is important there aware that wheelchair users are the reason why they get cheap licenses, extensions on the use of WAT vehicles and financial enticements.

Drivers and operator complain of tedious, bureaucratic and protracted system of payment from the ACT government for honouring the ACT Taxi Subsidy Scheme. If government administration is slowing the movement of money in what is a predominately cash business, can this be streamlined?

8. Customer Equity

The Review needs to re-assess the:

- a. Eligibility criteria for ACT Taxi Subsidy Scheme, particularly the difference between the 50% and 75% discounts;
- b. Inability of power wheelchair users to use single Wheelchair Accessible Taxis (WATs);
- c. Inability of the ACT Taxi Subsidy Scheme to adjust its subsidy according to changes in the Consumer Price Index (CPI), inflation or some of indicator of price fluctuation.

Rational

There is considerable angst by some ACT Taxi Subsidy Scheme users that the scheme favours wheelchair users with a 75% discount, while others equally reliant on taxis as a form of transport only receive a 50% discount. This needs to be revisited.

Anecdotal evidence indicates that the \$35 limit of the ACT Taxi Subsidy Scheme has been the same value since 2003. With numerous taxi fares increases in the last six years, the lack of parity in the scheme has meant that the vouchers aren't taking you as far as they used to.