

# Australia’s draft National Autism Strategy

Submission to the Commonwealth Department of Social Services

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## About AFDO

The Australian Federation of Disability Organisations (AFDO) is a Disabled People’s Organisation (DPO) run by and for people with disability, reaching over 4 million Australians.

We are a unique representative organisation covering both disability specific and population-based disability communities and the pre-eminent national voice representing people with disability across Australia and internationally.

Our Members are 37 national and state disability advocacy organisations run by and for people with disability and their families, representing Australians with disability.

Our vision is “That all people with disabilities must be involved equally in all aspects of social, economic, political and cultural life.”

[**Our Members:**](https://www.afdo.org.au/members-2/members/)

|  |  |
| --- | --- |
| Advocacy for Inclusion Inc. - ACT | Arts Access Australia  |
| Autism Aspergers Advocacy Australia | Blind Citizens Australia  |
| Brain Injury Australia | Deaf Australia  |
| Deafblind Australia | Deafness Forum Australia  |
| Disability Advocacy Network Australia | Disability Justice Australia   |
| Disability Resources Centre - Vic | Down Syndrome Australia  |
| Enhanced Lifestyles - SA | Physical Disability Australia |
| People With Disabilities WA | Polio Australia  |
| South West Autism Network - WA | Women With Disabilities ACT |
| Women with Disabilities Victoria  | National Mental Health Consumer & Carer Forum  |
| Advocacy WA | All Means All |
| AED Legal Centre - Vic | AMAZE - Vic |
| Arts Access Victoria | Aspergers Victoria |
| Disability Advocacy & Complaints Service - SA | Explorability Inc - SA |
| Integrated disAbility Action - NT | Leadership Plus – Vic |
| Multiple Sclerosis Australia | National Union of Students - Disabilities Dept. |
| National Organisation for Fetal Alcohol Spectrum Disorder | Star Victoria Inc |
| TASC National Limited - Qld | Tourettes Syndrome of Australia |
| Youth Disability Advocacy Service - Vic |  |

## Acknowledgement

AFDO acknowledges Aboriginal and Torres Strait Islander people as the traditional custodians of the land on which we stand, recognising their continuing connection to land, waters, and community. We pay our respects to the peoples of the lands on which these operate and to their respective Elders past and present. We also pay our respects to the traditional owners of all lands on which we operate or meet around the country.

AFDO acknowledges people with disability, particularly those individuals that have experienced or are continuing to experience violence, abuse, neglect, and exploitation. We also acknowledge their families, supporters, and representative organisations and express our thanks for the continuing work we all do in their support.

## Introductory comments

AFDO and our Members thank the Department of Social Services for the opportunity to provide feedback on the draft National Autism Strategy (the Strategy). This submission has been informed by a consultation forum we held with the following AFDO Member organisations in May 2024:

* Autism Aspergers Advocacy Australia (A4)
* South West Autism Network (SWAN)
* Amaze
* Down Syndrome Australia
* Disability Advocacy and Complaints Service of South Australia (DACSSA).

We would like to thank all Members who participated in this forum for their subject matter proficiency, lived experience expertise, and the spirit of collaboration in which they have approached this work. We have endeavoured to ensure the perspectives and views of all Members are incorporated into this submission. We acknowledge, however, that each of our Member organisations reserves the right to express an alternative view on any aspect of the Strategy.

A National Autism Strategy is critically important to ensuring we move towards a society where the rights of Autistic Australians are effectively promoted, protected, and upheld and they can participate fully in all aspects of life. A separate Strategy which focuses on the needs of Autistic Australians is necessary when considering that in Australia, people with autism:

* Continue to experience some of the worst education and employment outcomes.
* Are at increased risk of violence, abuse, neglect, and exploitation.
* Are overrepresented in the criminal justice system.

It is important to recognise that autism exists on a spectrum, with people’s needs varying greatly depending on a range of factors.

We stress that there is “no silver bullet” in terms of policy solutions that will effectively meet the needs of every Autistic Australian. This is why the Strategy needs to facilitate a broad suite of services, supports, and policy responses that have been co-designed with Autistic people with varying support needs.

## Summary of recommendations

1. The final Strategy must include clear timelines, defined responsibilities, and measurable outcomes to drive accountability.
2. The final Strategy must clearly articulate the level of funding/resourcing that will be committed to ensure its long-term success.
3. Each Outcome Area included in the Strategy must be accompanied by a problem statement which articulates the specific problem/s the Strategy is aiming to resolve.
4. The final Strategy must clearly articulate Government’s intentions in relation to the suite of strategies, frameworks, and plans recommended by the Select Committee on Autism, including:
* National Autism Advocacy Plan.
* National Autism Workforce Plan.
* Guidelines on autism-friendly service design.
* National Autism Research Framework.
* National Autism Employment Framework and Transition to Work Roadmap.
1. The final Strategy must be based on the human rights model of disability not the biopsychosocial model of disability.
2. The final Strategy must create a mechanism:
* To coordinate broad-based change across all levels of Government, and
* For complex inter-jurisdictional issues to be dealt with by the Disability Reform Ministerial Council.
1. “Freedom of expression and opinion and access to information” must be referenced as a guiding principle under the final Strategy to give rise to Article 21 of the CRPD.
2. The Department must urgently review the level of funding that has been provided to Autism Aspergers Advocacy Australia (A4) under the Disability Representative Organisations (DRO) program, ensuring they receive at least $220,000 per annum in recognition of their national role and membership.

This is necessary to ensure the voices of Autistic people are effectively upheld as Government approaches the development of the Implementation Plan and Outcomes Framework that will accompany the National Autism Strategy, as well as the reforms arising out of the Disability Royal Commission and the Independent Review of the NDIS.

1. The Department of Social Services must refer to AFDO’s position statement on consultation and co-design, to be published in June 2024, as it:
* Approaches the development of the Implementation Plan, Outcomes Framework, and any other documents associated with the Strategy, and
* Approaches the implementation of the various commitments referenced underneath the Strategy.
1. The following guidelines must be followed by any third party provider that is undertaking work under a government contract:
* Accessibility requirements must be clearly stated in all requests for tender and contractual agreements with third party providers.
* There must be checks and balances in place to ensure accessibility requirements have been adequately met by third party providers.
* There must be repercussions for any provider who fails to meet the accessibility requirements specified under a government contract.
1. The Department must ensure the final Strategy, Implementation Plan, Outcomes Framework, and any other related documents align with the outcome areas and policy directives referenced underneath Australia’s Disability Strategy 2021-31.
2. The final Strategy must:
* Include a definition for the term, “Autistic people with complex and high support needs”, which has been developed in consultation with Autistic people and their representative organisations
* Clearly articulate that evidence demonstrates that Autistic people with complex and high support needs experience poorer outcomes across all life domains and may require a range of targeted approaches.
* Include **targeted actions** commitmentfor Autistic people with complex and high support needs.
1. The final Strategy must adequately capture the needs of older Autistic people. To facilitate this, the Department must:
* refer to AFDO’s Briefing Paper on Equitable Access to Disability Services and Supports for Older People.
* Ensure the final Strategy adequately captures the policy context affecting the provision of services and supports to older Autistic people.
* Ensure the final Strategy adequately captures the fact that some Autistic Australians, particularly those with comorbidities, may need to access aged care services prior to age 65.
* Ensure the final Strategy, Implementation Plan, and Outcomes Framework allow for the comparison of outcomes between older and younger Autistic people.

## What is missing from the Strategy?

Many of these matters will be covered in greater detail elsewhere in this submission. In summary, however, AFDO asserts that the following elements are missing from the draft:

* Specificity and detail. The Strategy adopts vague language, commonly utilising nebulous words such as “consider”, “explore”, and “encourage”. We understand that additional detail in relation to how the commitments outlined under the Strategy will be implemented are to be articulated in Action Plans that are yet to be developed. In the interim, however, we would like to see clear timelines, defined responsibilities, and measurable outcomes articulated under the Strategy to maximise accountability and progress.

The absence of any clear commitments or targets to improve outcomes for people with complex and high support needs is particularly problematic.

* A clear articulation of the level of funding/resourcing that will be committed to ensure the long-term success of the Strategy.
* An acknowledgement of the human rights model of disability which is fundamental to the effective implementation of the *Convention on the Rights of Persons with Disabilities* (CRPD).
* A problem statement which clearly articulates the specific service gaps and issues the Strategy is seeking to resolve.
* An interjurisdictional approach that seeks to drive change across all levels of government and address matters that largely fall to the responsibility of state and territory governments. At present, whole areas such as housing, justice, and education are largely absent from the document.
* Alignment with the Outcome Areas and Policy Priorities included underneath Australia’s Disability Strategy 2021-31.
* An intersectional approach that properly acknowledges and addresses the needs of people with complex and high support needs. There is concern that the Strategy does not adequately include the voices of all Autistic individuals, especially those from marginalised communities such as Indigenous Australians and those with higher support needs.
* Specific commitments aimed at strengthening and improving the availability of independent disability advocacy, including both systemic and individual advocacy with appropriate funding.
* A commitment by Government to develop a separate autism healthcare capability framework that includes clear targets, outcomes, and measures for accountability with this reviewed at a minimum of every three years.
* Relevant reform agendas arising out of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability. We recommend the Department refer to [AFDO’s comprehensive report card](https://www.afdo.org.au/wp-content/uploads/2023/12/AFDO-Report-Card-on-the-Final-Recommendations-from-the-DRC-December-2023.pdf) on the 222 recommendations arising out of the Royal Commission, which was comprehensively developed in partnership with our then, thirty six Member organisations.
* Relevant reform agendas arising out of the Independent Review of the NDIS. We recommend the Department refer to [AFDO’s official response](https://www.afdo.org.au/wp-content/uploads/2024/05/2024_05-AFDO-Response-to-the-NDIS-Review-Report-May-2024-Final.pdf) to the recommendations and supporting actions arising out of the Review, which was developed in partnership with our then, thirty six Member organisations.

We also note that a wide range of measures that were recommended by the Select Committee on Autism in its report entitled ‘[Services, support and life outcomes for Autistic Australians](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Autism/autism/Report#:~:text=Generic%20disability%20strategies%20have%20proven,life%20outcomes%20for%20autistic%20people.&text=The%20National%20Autism%20Strategy%20should,actions%20to%20support%20vulnerable%20cohorts.)’ are completely absent from the draft Strategy, including:

* The development of a National Autism Advocacy Plan.
* The development of a National Autism Workforce Plan
* The development of a National Autism Mental Health Plan aimed specifically at improving the treatment of people with autism who have co-occurring mental health conditions.
* The development of guidelines on autism-friendly service design.
* The development of a National Autism Research Framework.
* The development of a National Autism Employment Framework and Transition to Work Roadmap.
* The need for the health and wellbeing priority under the new National Autism Research Framework to include a focus on:
	+ Routine analysis and reporting of population health data for Autistic people, including health status, health service utilisation, health outcomes, and mortality data;
	+ The risk factors, causes, and presentation of comorbidities; and
	+ Evaluation of health and mental health interventions for Autistic people.

 **Recommendation 1:**The final Strategy must include clear timelines, defined responsibilities, and measurable outcomes to drive accountability.

**Recommendation 2:**The final Strategy must clearly articulate the level of funding/resourcing that will be committed to ensure its long-term success.

**Recommendation 3:**Each Outcome Area included in the Strategy must be accompanied by a problem statement which articulates the specific problem/s the Strategy is aiming to resolve.

**Recommendation 4:**The final Strategy must clearly articulate the Government’s intentions in relation to the suite of strategies, frameworks, and plans recommended by the Select Committee on Autism, including:

* National Autism Advocacy Plan.
* National Autism Workforce Plan.
* Guidelines on autism-friendly service design.
* National Autism Research Framework.
* National Autism Employment Framework and Transition to Work Roadmap.

## Foundations of the Strategy

The Strategy states that it is based on the “biopsychosocial model of disability”, which is an attempt to combine the medical and social model. AFDO asserts that this is completely the wrong framing for the Strategy.

The Strategy must be framed around the human rights model of disability, which is established under the CRPD, and expands on the social model. We are perplexed as to why the human rights model has been included in the glossary of terms but is not referenced elsewhere in the Strategy. This model:

*“…recognises that disability is a natural part of human diversity that must be respected and supported in all its forms. People with disability have the same rights as everyone else in society, and disability ‘must not be used as an excuse to deny or restrict people's rights.’”[[1]](#endnote-2)*

The human rights model also acknowledges that disability might be just one of several aspects of an individual’s identity. As such, disability law and policy must factor in and accommodate the diversity of people with disability.[[2]](#endnote-3)

**Recommendation 5:** The final Strategy must be based on the human rights model of disability not the biopsychosocial model of disability.

## Reinforcing the need for an interjurisdictional approach

One of the greatest criticisms our Members raised with the draft Strategy relates to its inability to address interjurisdictional issues or matters that largely fall to the responsibility of state and territory governments. It appears that the Strategy is only intended to support governments with the existing infrastructure they have in place. This is despite the fact that the Department’s discussion paper on the Strategy recognised that:

*“Government services and information are fragmented, with Autistic people falling through gaps between supports provided by different levels of government.”*

We also refer to Recommendation 7 from the report published by the Senate Select Committee on Autism, which states:

*“The committee recommends that the National Autism Strategy identify actions to drive better integration between federal and state service systems, including a roadmap to better integrate NDIS and mainstream services. This roadmap should be consistent with the recommendations made by the Joint Standing Committee on the NDIS in relation to service integration and overlap with other systems.”[[3]](#endnote-4)*

In its official response to the Select Committee’s report, the Australian Government noted:

*“Development of a National Autism Strategy should provide a coordinated, long-term approach to how governments work to improve outcomes for Autistic people.”[[4]](#endnote-5)*

AFDO’s observation is that the draft Strategy falls well short of this commitment. The final Strategy must create a mechanism:

* To coordinate broad-based change across all levels of Government, and
* For complex inter-jurisdictional issues to be dealt with by the Disability Reform Ministerial Council.

We can only assume it is this fear of tackling interjurisdictional issues that has resulted in education, housing, and justice being largely absent from the Strategy, despite the Select Committee having highlighted the appalling outcomes for Autistic people across each of these areas.

**Recommendation 6:**The final Strategy must create a mechanism:

* To coordinate broad-based change across all levels of Government, and
* For complex inter-jurisdictional issues to be dealt with by the Disability Reform Ministerial Council.

## Feedback on the Guiding Principles included in the Strategy

We support all the Guiding Principles included in the draft Strategy, but wish to offer comments on the following two principles:

* **In partnership - Nothing about us, without us**
* **Accessible based on Universal Design**

We would also like to see 'Freedom of expression and opinion and access to information’ listed as a Guiding Principle underneath the final Strategy. This is critical to upholding Article 21 of the CRPD. As such, the Strategy must recognise that:

* Autistic people use a range of communication methods and devices.
* Autistic people must have choice and control over the methods and devices they use to communicate.
* We need to foster greater community awareness and understanding of the various ways in which Autistic people communicate.

**Recommendation 7:**‘Freedom of expression and opinion and access to information’ must be referenced as a Guiding Principle under the final Strategy to give rise to Article 21 of the CRPD.

### In partnership - Nothing about us, without us

 *“Nothing about us without us”* is the mantra of the disability rights movement internationally. It speaks to the need to actively involve people with disability and their representative organisations in all matters that affect them. This obligation is set out underneath:

* Article 4:3 of the *Convention on the Rights of Persons with Disabilities*.[[5]](#endnote-6)
* General comment No. 7 on the Participation of persons with disabilities through their representative organisations in the implementation and monitoring of the Convention.[[6]](#endnote-7)

We agree that this Guiding Principle must be central to the development, implementation, and monitoring of the National Autism Strategy and associated frameworks. Regrettably, however, the outcomes of the most recent Disability Representative Organisations (DRO) funding round do not reflect this sentiment or demonstrate equity of funding of representative organisations. The Department is responsible for the DRO Program which lacks transparency in its operation, decision making, funding rationale or equity between selected organisations contrary to ensuring adherence the Guiding Principle.

It is critical that organisations of and for Autistic people are adequately funded to meaningfully contribute to the reforms arising out of the NDIS Review and the Disability Royal Commission. Such organisations will also play a critical role in facilitating the effective implementation and monitoring of the National Autism Strategy and associated frameworks and must be adequately resourced to undertake this work.

We are also mindful that “consultation” and “co-design” are terms that are commonly thrown around by government departments without being clearly articulated or defined. AFDO has very clear expectations as to what these two processes should look like. We are currently working with our 37 Member organisations to finalise our position statement on consultation and co-design, which we will provide to the Department once completed in June 2024.

**Recommendation 8:**The Department must urgently review the level of funding that has been provided to Autism Aspergers Advocacy Australia (A4) under the Disability Representative Organisations (DRO) program, ensuring they receive at least $220,000 per annum in recognition of their national role and membership. This is necessary to ensure the voices of Autistic people are effectively upheld as Government approaches the development of the Implementation Plan and Outcomes Framework that will accompany the National Autism Strategy, as well as the reforms arising out of the Disability Royal Commission and the Independent Review of the NDIS.

**Recommendation 9:**The Department of Social Services must refer to AFDO’s position statement on consultation and co-design to be published in June 2024 as it:

* approaches the development of the Implementation Plan, Outcomes Framework, and any other documents associated with the Strategy, and
* Approaches the implementation of the various commitments referenced underneath the Strategy.

### Accessible based on Universal Design

Our concern in relation to universal design stems from the fact that much of Government’s work is not undertaken in-house but is instead outsourced to third-party consultancy firms who may be less committed to accessibility.

Our concerns are well-founded, as our staff have recently been prevented from undertaking some aspects of their work due to important government reports and consultation documents not being provided in accessible formats.

This often, although not exclusively, occurs when a government department has outsourced a project to a third-party provider. The NDIS Review Report and associated fact sheets provide a perfect example of such oversights.

These documents were released in a format that did not provide people who use screen reading software with equitable access to these materials. This matter has taken more than four months to resolve, and necessitated a complaint being lodged under the *Commonwealth Disability Discrimination Act 1992 (Cth)*.

Accessibility requirements must be clearly stated in all future requests for tender and contractual agreements with third-party providers. There must also be checks and balances in place to ensure these requirements have been sufficiently met. We recommend the Department refer to our [position statement on access to information and communications across the public service](https://www.afdo.org.au/wp-content/uploads/2024/05/AFDO-Briefing-Paper-Accessible-Information-Across-the-Public-Service-Final.docx) for further advice on this matter.

**Recommendation 10:**The following guidelines must be followed by any third-party provider that is undertaking work under a government contract:

* Accessibility requirements must be clearly stated in all requests for tender and contractual agreements with third-party providers.
* There must be checks and balances in place to ensure accessibility requirements have been adequately met by third-party providers.
* There must be repercussions for any provider who fails to meet the accessibility requirements specified under a government contract.

## Feedback on commitments included under the Strategy

### The need for greater alignment with Australia’s Disability Strategy 2021-31

We refer to Recommendation 3 from the Select Committee on Autism as follows:

*“The committee recommends that the National Autism Strategy and accompanying implementation plan include an outcomes framework, as well as specific and measurable actions, targets and milestones. Where appropriate, the framework and measurable items should align with those in other national strategies.”[[7]](#endnote-8)*

It is unclear why the Department has not taken steps to align the draft Strategy with the Outcome Areas and Policy Priorities included underneath Australia’s Disability Strategy 2021-31 (ADS), particularly given Recommendation 3 from the Select Committee was accepted by the Australian Government. In its official response to the recommendations from the Committee’s Inquiry, the Australian Government notes:

*“The Australian Government supports the development of a National Autism Strategy and accompanying implementation plan. It is envisaged this will include an outcomes framework with specific and measurable actions, accountabilities, targets and milestones that will align with other national strategies, including Australia’s Disability Strategy outcomes framework.”[[8]](#endnote-9)*

AFDO would ultimately like to see greater alignment between the National Autism Strategy and the ADS; noting that the ADS is currently in the process of being updated. Unless this commitment is upheld, it will not be possible to accurately track outcomes for Autistic people against outcomes for people with disability more generally. In the event that alignment with the ADS cannot be achieved, it would be helpful for the Department to articulate:

* Its rationale for following a different framework.
* How the Strategy will integrate with the National Disability Data Asset, in light of the fact that the National Autism Strategy includes different outcome areas to the ADS.

We recommend the Department refer to our [Communiqué on Australia’s Disability Strategy 2021-31](https://www.afdo.org.au/wp-content/uploads/2024/04/AFDO-Policy-Position-Statement-Australias-Disability-Strategy-2021-2031-Final-March-2024.docx) for further information about the issues we hope will be addressed as part of the current review.

**Recommendation 11:**
The Department must ensure the final Strategy, implementation plan, outcomes framework and any other related documents align with the outcome areas and policy directives referenced underneath Australia’s Disability Strategy 2021-31.

### Autistic people with complex and high support needs

All the commitments listed underneath the Strategy speak to attempts to improve outcomes for people with autism as a collective. There are no measures aimed at improving outcomes for Autistic people with complex and high support needs, even though the Select Committee on Autism found that actions and supports targeted towards all Autistic people often fail to meet the needs of this cohort.

The final Strategy must include separate **commitments and targets for** Autistic people with complex and high support needs, and more marginalised intersectional cohorts such as First Nations Autistic people.

**Recommendation 12:**
The final Strategy must:

* Clearly articulate that Autistic people with complex and high support needs experience poorer outcomes across all life domains and may require a range of targeted approaches.
* Include a definition for the term, ‘Autistic people with complex and high support needs’, which has been developed in consultation with Autistic people and their representative organisations.
* Include **targeted actions** commitmentfor Autistic people with complex and high support needs.

### Older Autistic people

The needs of older Autistic people and the intersection between disability and ageing are completely absent from the draft Strategy. This is a significant oversight when considering that:

* Australia’s population is rapidly ageing.[[9]](#endnote-10)
* [Section 22](https://www5.austlii.edu.au/au/legis/cth/consol_act/ndisa2013341/s22.html) of the *National Disability Insurance Scheme Act 2013 (Cth)* states that an individual must be under age 65 at the time of making an access request for the Scheme to be eligible.[[10]](#endnote-11) Those who entered the Scheme prior to their 65th birthday are able to remain in the Scheme as they age. People with disability who were already 65 when the NDIS became available in their area and those who acquire a disability after their 65th birthday are excluded from the NDIS. These people are required to access their support from the aged care system instead.[[11]](#endnote-12)
* The reform of Australia’s aged care system is well under way subject to the recommendations arising out of the Royal Commission into Aged Care Quality and Safety. These reforms will have a significant impact upon older Autistic people into the future.
* Some people with disability may be required to access aged care services earlier than the general population. For example, people with Down Syndrome and acquired brain injury typically experience higher rates of dementia, including early onset dementia, than the general population.[[12]](#endnote-13) In fact, 50 per cent of people with Down Syndrome develop Alzheimer’s disease by the age of 60.[[13]](#endnote-14) People with disability may also experience ageing differently due to having a shorter life expectancy. According to the Australian Institute of Health and Welfare (AIHW), people who use disability services are more than four times more likely than the general population to die before reaching their 65th birthday.[[14]](#endnote-15)

We recommend the Department refer to our [briefing paper on equitable access to disability services and supports for older people](https://www.afdo.org.au/wp-content/uploads/2024/04/AFDO-Briefing-Paper-Access-Equity-to-Supports-Older-PWD-Final-March-2024.docx) to gain a deeper understanding of the policy gaps preventing older people with disability from accessing the services and supports they need. The intersection between disability and ageing cannot simply be ignored in the final strategy. When looking at the recommendations arising out of the Independent Review of the NDIS alone, there are several issues that relate to the arbitrary age 65 cut-off of 65. For example:

* The new Navigator role outlined underneath Recommendation 4 is proposed to be restricted to people with disability under 65. It is imperative that equivalent navigation services are available to Autistic people with disability over 65 to ensure equality of opportunity. The Care Finder services that exist in the aged care system are designed around principles of frailty and ageing and are ill-equipped to meet the specialist needs of Autistic people – particularly those with complex and high support needs.
* The Review Panel has stated that people with disability aged 65 and over will most likely access the majority of their supports from the aged care system. They have, however, also recommended that NDIS participants over the age of 65 be able to concurrently access supports from both the NDIS and the aged care system. It is imperative that the Commonwealth and State and Territory Governments determine who is responsible for providing mental health-related services and supports to Autistic people over the age of 65.[[15]](#endnote-16)

**Recommendation 13:**

The final Strategy must adequately capture the needs of older Autistic people. To facilitate this, the Department must:

* Refer to AFDO’s Briefing Paper on Equitable Access to Disability Services and Supports for Older People.
* Ensure the final Strategy adequately captures the policy context affecting the provision of services and supports to older Autistic people.
* Ensure the final Strategy adequately captures the fact that some Autistic Australians and in particular, those with comorbidities, may need to access aged care services prior to age 65.
* Ensure the final Strategy, Implementation Plan and Outcomes Framework allow for the comparison of outcomes between older and younger Autistic people.

## Concluding comments

We thank the Department once again for providing AFDO with an opportunity to represent the concerns of its Member organisations by way of this submission. We look forward to being involved in future consultation processes, and hope Government will adequately fund us to undertake this important work.

Should you have any questions in relation to any of the matters raised throughout this submission, please contact our Senior Systemic Advocate, Lauren Henley, via the below information.

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1. Office of Equity, Diversity, and Inclusion (2021) *Human Rights Model of Disability*, Accessed 12 June 2024, Retrieved from <https://www.edi.nih.gov/blog/communities/human-rights-model-disability> [↑](#endnote-ref-2)
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