



Submission:

ACTCOSS ACT Budget Priorities 2021-22

Investing in housing, health and community services for the ACT economic recovery

June 2021

About ACTCOSS

ACTCOSS acknowledges Canberra has been built on the land of the Ngunnawal people. We pay respects to their Elders and recognise the strength and resilience of Aboriginal and/or Torres Strait Islander peoples. We celebrate Aboriginal and/or Torres Strait Islander cultures and ongoing contributions to the ACT community.

The ACT Council of Social Service Inc. (ACTCOSS) advocates for social justice in the ACT and represents not-for-profit community organisations.

ACTCOSS is a member of the nationwide COSS Network, made up of each of the state and territory Councils and the national body, the Australian Council of Social Service (ACOSS).

ACTCOSS’s vision is for Canberra to be a just, safe and sustainable community in which everyone has the opportunity for self-determination and a fair share of resources and services.

The membership of the Council includes the majority of community-based service providers in the social welfare area, a range of community associations and networks, self-help and consumer groups and interested individuals.

ACTCOSS advises that this document may be publicly distributed, including by placing a copy on our website.

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Acronyms

ABS Australian Bureau of Statistics

ACAT ACT Civil and Administrative Tribunal

ACTCOSS ACT Council of Social Service Inc.

AHURI Australian Housing and Urban Research Institute

AMC Alexander Maconochie Centre

ATODA Alcohol Tobacco and Other Drug Association ACT

ATSIEB Aboriginal and Torres Strait Islander Elected Body

CDNet Community Development Network for the ACT and Region

CHPs community housing providers

CASP Community Assistance and Support Program

DSP Disability Support Pension

DSS Department of Social Services

GDP gross domestic product

ICT information and communication technology

LGBTIQA+ lesbian, gay, bisexual, transgender, gender diverse, intersex, queer, asexual and questioning

NDIS National Disability Insurance Scheme

OOHC out-of-home care

OPCAT Optional Protocol to the Convention against Torture

TCC Therapeutic Care Court

UNEC United Ngunnawal Elders Council

Introduction

The ACT Council of Social Service (ACTCOSS) welcomes this opportunity to present community sector priorities for the 2021-22 ACT Budget. This submission has been developed through consultation with ACTCOSS members.

ACTCOSS advocates for social justice in the ACT and represents not-for-profit community organisations.

Our vision is that Canberra is a just, safe and sustainable community in which everyone has a fair share of resources and services.

While ACT has the highest median income of any jurisdiction in Australia, there is significant disadvantage. In the ACT:

* Approximately 8.6% of people (c.38,000) are living below the poverty line.[[1]](#endnote-2)
* Almost 40,000 people live in households that are among Australia’s most disadvantaged.[[2]](#endnote-3)
* Over 25,000 people who live in low-income households are experiencing food stress.[[3]](#endnote-4)

As of March 2021, the number of Canberrans in search of work and relying on JobSeeker and Youth Allowance was 11,311, an increase of almost 60% compared to pre-COVID-19 levels.[[4]](#endnote-5)

However, community sector organisations remain underfunded. In the coming financial year, community sector wages will increase by 2.5%; ACT Government rents by up to 3%; long service leave contributions from 1.2% to 1.6%; and compulsory superannuation contributions from 9.5% to 10%.

**Yet,** **the expected indexation for ACT Government funding to the health and community service sector is only 1.75%.**

And still, other costs increase as a result of service adaptations to COVID-19 and growing demand.

And so, to achieve a just and fair Canberra, the 2021-22 ACT Budget must work towards:

* A sustainable recovery from the social, health and economic shock of COVID-19.
* Adequate funding for community sector organisations.
* Addressing the ACT’s ongoing housing crisis.
* Reducing inequality and supporting increased numbers of Canberrans receiving income support.
* Improving outcomes for Aboriginal and/or Torres Strait Islander peoples.

Fix Canberra’s housing and homelessness crisis

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| Key stats * ACT has a shortfall of around 3,100 social housing dwellings.[[5]](#endnote-6)
* 1600 people are homeless in the ACT.[[6]](#endnote-7)
* For every $1 million of public investment in social housing, gross domestic product (GDP) is boosted by $1.3m.[[7]](#endnote-8)
* Canberrans face a 3.8 year wait for a standard public housing property.[[8]](#endnote-9)
* The ACT has the highest rate of rental stress among lower income private rental households at 73%.[[9]](#endnote-10)
* In the ACT one in 10 young people had couch surfed and 2.6% had lived without a fixed address.[[10]](#endnote-11)
* Housing stress and homelessness in the ACT disproportionately impacts older women, the LGBTIQA+ community, Aboriginal and/or Torres Strait Islander peoples and young people.[[11]](#endnote-12)
* Virtually zero private rental properties on the market in the ACT are affordable to people on the Disability Support Pension (DSP), JobSeeker or Youth Allowance.[[12]](#endnote-13)
 |

* Fulfill commitments under the Parliamentary and Governing Agreement as they relate to housing and homelessness.
* Enact a Right to Housing in the ACT in alignment with international Human Rights Frameworks.
* Commit to full delivery and continuing regular community oversight of the ACT Housing Strategy, including funding for a fully independent, staged 8-year process, and outcome and impact evaluation of the ACT Housing Strategy to commence in 2022.
* Develop an additional action under the goal 3 of the ACT Housing Strategy aimed at achieving minimum energy efficiency standards in all social housing and report annually on progress against this – to provide a baseline against which to measure progress, the ACT Government should fund an energy efficiency audit of all social housing stock in the ACT to identify which properties currently meet or exceed minimum standards and which do not.
* Achieve target of 15% of *effective* land transfers under the Land Release Program for the supply of public, community and affordable homes.
* Empower community housing providers (CHPs) to address shortfall of around 3,000 affordable homes through access to affordable land; re-zoning to allow development by CHPs; and rates exemptions for CHPs.
* Enact permanent Land Tax Exemption for properties leased through registered community housing providers.
* Increase investment in maintenance of public housing stock and improvements to handling of complaints from ACT Housing tenants.
* Strengthen the ACT *Residential Tenancy Act 1997* to provide increased protections for renters.
* Implement long-term housing solutions for detainees leaving the Alexander Maconochie Centre (AMC).
* Exceed the new provisions in the National Construction Code that require all new housing to built to Silver level.
* Re-establish and fund an advocacy voice for tenants in the ACT.
* Develop an Indigenous Housing Strategy for the ACT including a pathway to a community-controlled Aboriginal housing organisation.
* Improve housing responses for LGBTIQA+ Canberrans including: a LGBTIQA+ housing strategy; a trauma-informed LGBTIQA+ homelessness and housing support service; adoption of the *LGBTIQ+ Inclusive Practice Guide for Housing and Homelessness Sectors in Australia* (2020); and provide funding and support for ongoing LGBTIQA+ awareness training to housing and homelessness services.
* Fully fund a specialist youth homelessness service.
* Provide ongoing funding for in-house mental health and social supports within homelessness and community housing services.
* Fund human rights compliant mental health specific supported housing.
* Extend funding for hoarding assistance services.

Valuing community services

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| Key stats* Canberra is ageing but also the number of births is increasing.[[13]](#endnote-14) Income disparity is widening and cost of living is increasing.[[14]](#endnote-15)
* Australia’s gender pay gap currently sits at 13.4%.[[15]](#endnote-16) Around 80% of the industry workforce are women.[[16]](#endnote-17)
* 1% of GDP invested in care work increases direct, indirect and induced employment by 1.7% (vs. 0.9% for construction).[[17]](#endnote-18)
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* Through investment and other supports, recognise the direct role played by the community services sector in helping the ACT Government to achieve positive outcomes for all Canberrans.
* Through investment and other supports, recognise the economic value of the health and community services sector to the economic recovery and growth of the ACT economy.
* Respond to immediate funding gaps in mental health, community legal services, housing and homelessness services, peer lead organisations and disability advocacy.
* Provide adequate indexation increases to funding agreements in light of significant growth in demand as well as wages, rents and other costs of delivering services including but not limited to the Superannuation Guarantee rate increase and ACT Long Service Leave contribution increase.
* Implement the outcomes of the [‘true cost of service delivery’](https://www.actcoss.org.au/sites/default/files/public/documents/ServiceCostingProjectBrief-20210528.pdf) project.
* Commit to funding the cost of a renegotiated ACT Community Sector Multiple Enterprise Agreement on wages and conditions for community services workers.
* In partnership with the health and community sector, implement a key worker strategy to develop, attract and retain a professional, appropriately remunerated community sector workforce.
* Urgently respond to the community sector’s request for information on the commissioning and procurement process outlined in its [position paper](https://www.actcoss.org.au/sites/default/files/public/publications/2021-position-statement-Commissioning-and-Procurement.pdf) with a list of questions and concerns that require a response.
* As part of the commissioning, process work with the community sector to design and implement methodologically sound needs analyses to understand changes to demand for community services in the ACT.
* Support capital investments including zero emissions vehicles and information and communication technology (ICT) infrastructure for the community sector.
* Appropriately fund Aboriginal and/or Torres Strait Islander-led services and support community-controlled approaches in other sectors.
* Renew the commitment to the [ACT Social Compact](https://www.cmtedd.act.gov.au/open_government/inform/key-reports-on-joint-community-government-work) and realise that commitment in the way ACT Government consults, contracts and relates to the community sector.
* Ensure proper resourcing of all strategies, such as the Carers Strategy, and fund the implementation of new legislation such as the Crimes (Offences Against Vulnerable People) Legislation Amendment Bill 2020.
* Commit to properly fund peaks and organisations representing community voices as a critical institutional component of our democracy.
* Reform the ACT’s Portable Long Service Leave Scheme to extend to all community service organisations, including peaks.
* Deliver commitments in the Parliamentary and Governing Agreement for the ACT in relation to community services.
* Fund community sector agencies to manage environmental and energy transitions including transition to electric vehicles.

Better health

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| Key stats * In 2019-20, 6.9% of ACT patients waited more than 365 days for surgery (National 2.8%; NSW 3.6%).[[18]](#endnote-19)
* As of 30 June 2020, there were about 3,700 children under 16 waiting for an initial appointment with a specialist.[[19]](#endnote-20)
* Median wait times for a child to get a dermatology appointment were as long as four years, while for some urology patients it was more than three years.[[20]](#endnote-21)
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* Commit to a real increase in spending on frontline ACT Government and community health services to raise ACT service standards up to those of other jurisdictions.
* Implement key worker strategies to attract and retain health workers in partnership with the community sector where there are shared workforce goals.
* Implement multiyear funding for the co-design and implementation of the Disability Health Strategy.
* Invest in services to improve health outcomes for Aboriginal and/or Torres Strait Islander peoples in the ACT.
* Fund the implementation of the Review of Maternity Services in the ACT recommendations.
* Undertake a scoping study for the creation of a perinatal wellbeing hub as per the ACT Greens election commitment.
* Fully implement the Palliative Care ACT Strategic Plan 2017-2020 including: increased support for in-home palliative care; a palliative care ward at the Canberra Hospital; and a patient navigator service.
* Invest in training and other programs to ensure that public health services are safe and inclusive for people from migrant and refugee backgrounds, LGBTIQA+ Canberrans and people with disability.
* Increase investment in sexual and reproductive health services including free, community-based testing for vulnerable communities.
* Support holistic approaches to pain support including hydrotherapy and ongoing funding for a pain management clinic.
* Invest in trauma-informed practice and service design training for government and non-government workers including in the health system.
* Ensure co-design and adequate resourcing of integrated care models which increase collaboration between the various health sectors and community services to provide holistic and comprehensive care to people with chronic health conditions.
* Increase women’s access to health services by meeting their needs for transport, safety and affordable and accessible health care.

Alcohol and other drugs

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| Key stats * Modelling shows that alcohol and other drug (AOD) treatment and harm reduction are a good investment. For every $1 invested in AOD treatment, society gains $7.[[21]](#endnote-22)
* According to a 2018 [ATODA](http://www.atoda.org.au/%22%20%5Ct%20%22_blank) survey, people accessing ACT AOD services reported:
	+ reduced substance use (75% of people receiving services)
	+ improved general health (81%)
	+ improved mental health (73%)
	+ reduced experience of AOD related harms, including reduced involvement in crime (80%)
	+ improved knowledge of preventing transmission of blood-borne viruses (78%).[[22]](#endnote-23)
* Of Indigenous people in Australia, Aboriginal and/or Torres Strait Islander people in the ACT were the most likely to report substance use (41%).[[23]](#endnote-24) The rate per capita of unintentional drug-related deaths is three times higher for Indigenous people than for non-Indigenous Australians.[[24]](#endnote-25)
* Almost a third of detainees (32.9%) think that drug programs at the Alexander Maconochie Centre are not helpful for addressing drug problems.[[25]](#endnote-26) More than four in five detainees (81.6%) find it difficult to get general medical services when needed, and even more (86.1%) find it difficult to access specialist services.[[26]](#endnote-27) Almost three quarters (71.7%) cannot access psychological services, even though such services are crucial to addressing drug related harms and dependence.[[27]](#endnote-28)
 |

* Develop an ACT Alcohol, Tobacco and Other Drug Strategy with an accompanying Action Plan.
* Fund the AOD treatment sector to double its capacity.
* Fix legislative barriers to enable the diversion of Canberrans away from the justice system and towards support including the decriminalising of small amounts of select drugs for personal use.
* Conduct a comprehensive audit of residential rehabilitation infrastructure to inform decision making and planning to make it fit for purpose now and into the future.
* Establish and fund an Aboriginal community-controlled residential rehabilitation facility.
* Enable better access to the AMC for the AOD sector, including peer support services, specialist services and psychological services.
* Establish and fund a nurse or peer-led supervised drug consumption site.
* Urgently continue and expand funding for the Drug and Alcohol Sentencing List budget appropriately for the true cost of service delivery, and fund AOD service participation in the Therapeutic Care Court (TCC).
* Introduce permanent pill testing at all ACT festivals through additional funding.

Mental health

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| Key stats * In 2019, the number of ACT residents reporting no mental health conditions fell to the lowest level since 2007-08 (72.4%).[[28]](#endnote-29)
* In 2019, the proportion of adults in the ACT reporting that they had been told by a doctor in the past 12 months that they had anxiety (17.1%), depression (15%) and/or stress-related problems (14.5%) all rose to their highest level since 2007-08.[[29]](#endnote-30)
* 1 in 5 mothers and 1 in 10 fathers experience perinatal anxieties. This costs $7.3 billion over the child’s lifetime.[[30]](#endnote-31)
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* Commit to a significant package of mental health investments to build a robust mental health sector that reflects Canberra’s diversity, prioritising early intervention and sub-acute mental health services including:
	+ Significant investment in not-for-profit mental health and wellbeing services as part of prioritising early intervention and prevention.
	+ Increased culturally safe and appropriate mental health support for Aboriginal and/or Torres Strait Islander people/communities.
	+ Investment in improved mental health services for people with intellectual disability and autism spectrum disorder in the ACT, including early diagnosis/intervention.
	+ A permanent Recovery College for the ACT.
	+ Adequate funding for LGBTIQA+ mental health support including increased access to psychosocial and peer support and family therapy/support services that respond to the specific needs of LGBTIQ+ families.
	+ Funding in community services to prevent acute presentations. Investment in a mental health respite facility.
	+ Funding for in house psychotherapy services in community housing and homelessness settings
	+ Community-based mental health peer worker expansion and adequate renumeration and recognition.
	+ Increased services for people with moderate to severe mental ill health – a group for whom there are not currently enough supports available, resulting in increased pressure on acute services.
	+ Mental health workforce strategy for all ACT mental health services.
	+ Address socioeconomic determinants of mental health.
	+ Immediately establishing a minimum of three public mother/baby inpatient mental health units.
	+ Support for families’ mental health on the road to recovery from COVID-19.
	+ Continued and adequate funding for suicide prevention services.
	+ Funding for investment in mental health supports for children – particularly early intervention mental health with flexible outreach for children aged 8 to12 years.
	+ Trauma-informed care across the ACT Government especially in any circumstances that might use restraints.
	+ Older persons’ mental health strategy must ensure that services and supports are adequately funded to deliver staffing and training.

Aboriginal and/or Torres Strait Islander
self-determination

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| Key stats * Aboriginal and/or Torres Strait Islander peoples in the ACT in 2017-18 are clients of specialist homelessness services at a rate of 817.7 per 10,000 people, compared to non-Aboriginal and/or Torres Strait Islander people, who are clients at a rate of 78.7 per 10,000 people.[[31]](#endnote-32)
* Despite making up only 1.9% of the ACT population, Aboriginal and/or Torres Strait Islander people make up over a quarter (25.8%) of the AMC prison population.[[32]](#endnote-33) Between 2019 and 2020, Aboriginal and/or Torres Strait Islander detainees in the AMC increased by 12%.[[33]](#endnote-34)
* Aboriginal and/or Torres Strait Islander young people are incarcerated at 18 times the rate of non-Indigenous children in the ACT.[[34]](#endnote-35)
* As at 30 June 2020, 213 (30%) of 699 children aged 0-17 in out-of-home care (OOHC) in the ACT were Aboriginal and/or Torres Strait Islander children.[[35]](#endnote-36) The rate for Indigenous children in OOHC in the ACT was 72.3 per 1,000 children aged 0-17, which was 14 times the rate for non-Indigenous children (5.2 per 1,000 children).[[36]](#endnote-37) This was also higher than the national rate for Aboriginal and/or Torres Strait Islander children which is 56.3 per 1,000 children.[[37]](#endnote-38)
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* ACTCOSS calls on the ACT Government to consult and co-design with the Ngunnawal people and all Aboriginal and/or Torres Strait Islander people in the ACT on policies to ensure a just and fair Canberra, including:
	+ Delivering promises in the Parliamentary and Government Agreement for Aboriginal and/or Torres Strait Islander people.
	+ Developing an Aboriginal and/or Torres Strait Islander Housing Strategy for the ACT including a pathway to a community-controlled Aboriginal housing organisation.
	+ Support and investment in Aboriginal community-controlled organisations to deliver fully funded community services.
	+ Address the overrepresentation of Aboriginal children in out-of-home care including the implementation of all 28 recommendations from Our Booris, Our Way Steering Committee to improve the systemic failures for Aboriginal and/or Torres Strait Islander children involved with child protection in the ACT.
	+ Address the overrepresentation of Aboriginal and/or Torres Strait Islander people in the prison and the underlying cause of justice interactions including systemic racism, poverty and intergenerational trauma. This should include the establishment of an appropriate inquiry process to investigate the overrepresentation of Aboriginal and/or Torres Strait Islander peoples in the ACT justice system.
* We also call on the ACT Government to:
	+ Work with Aboriginal and/or Torres Strait Islander people to better understand the extent of Native Title rights in the ACT and ensure that Native Title rights are fully realised.
	+ Embed investment in celebrating and protecting Ngunnawal land and culture in the new ACT Planning System.
	+ Implement a United Ngunnawal Elders Council (UNEC) partnership agreement, which outlines shared policy goals and commits to genuine, regular consultation between Ministers and the UNEC.
	+ Develop a comprehensive Aboriginal and/or Torres Strait Islander policy statement.
	+ Invest in supporting Aboriginal and/or Torres Strait Islander children, youth and families with measurable outcomes.
	+ Expand the ACT Human Rights Commission to include an Aboriginal and/or Torres Strait Islander Children’s Commissioner.
	+ Support the design and commencement of an Aboriginal and/or Torres Strait Islander childcare agency.
	+ Invest in the design and construction of a community-controlled Aboriginal residential AOD rehabilitation facility.
	+ Provide additional investment in autonomous, holistic health and wellbeing services at the AMC.
	+ Investigate an expansion of the Ngunnawal Bush Healing Farm to have cottages that can accommodate families.
	+ Fund the Aboriginal and Torres Strait Islander Elected Body (ATSIEB) positions at a full-time rate.
	+ Use its position at the table at National Cabinet to promote treaty and respect, respond and realise the call for a First Nations voice to Parliament.

Poverty, inequality and cost of living

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| Key stats * Approximately 8.6% of people in the ACT (c. 38,000) are living below the poverty line.[[38]](#endnote-39)
* Almost 40,000 people live in households that are among Australia’s most disadvantaged.[[39]](#endnote-40)
* Over 25,000 people in low-income households are experiencing food stress.[[40]](#endnote-41)
* In March 2021, there were 11,311 Canberrans in search of work and relying on JobSeeker and Youth Allowance payments compared to 7,135 in March 2020 – representing an increase of almost 60% above the pre-COVID level – under the current rate of JobSeeker people are living on just $44 a day or even less.[[41]](#endnote-42)
* In March 2021, out of 1,058 private rental properties on the market in the ACT and Queanbeyan, only seven were affordable for a single person on the Disability Support Pension, just two were affordable for a single person on the JobSeeker payment, while none were affordable for a single person on Youth Allowance.[[42]](#endnote-43)
* Around 43% of low-income rental households are in rental stress – spending more than 30% of their gross income on rent.[[43]](#endnote-44)
* Over the past five years, prices for medical and hospital services in Canberra have increased by 28% and prices for electricity and gas have increased by 25% and 31% respectively.[[44]](#endnote-45)
* Prior to COVID-19 and even with an increase in online gambling, pokies continued to cause the most significant harm in the Canberra community – playing poker machines is the single most effective predictor of problem gambling.[[45]](#endnote-46)
* The 2019 ACT Gambling Survey found that, in the previous 12 months, 44,000 people or nearly 14% of the ACT adult population had been affected by gambling harm.[[46]](#endnote-47)
 |

* Take action on key cost of living pressures, including housing, health, transport, education, energy, and ensuring equal access to justice.
* Review the ACT Targeted Assistance Strategy to ensure concessions are targeted to need.
* Ensure that ACT Government revenue is collected in a way that is progressive, equitable, efficient, and sufficient to fund quality community services and infrastructure.
* Introduce an income-based approach to ACT Government fines, fees, and other charges.
* Make free the provision of period products in the ACT targeted to those in need.
* Increase funding to financial counselling services.
* Extend financial and other support for all young people transitioning from care.
* Implement the Canberra Gambling Reform Alliance’s program for reducing gambling harm.
* Call for a permanent and adequate increase (above the poverty line) to JobSeeker, Youth Allowance, and other working-age social security payments.
* Incorporate all economic, social, and cultural rights in the *Human Rights Act 2004* (ACT).
* Recognise the significant economic value and direct role the community services sector plays in improving the wellbeing of all Canberrans.
* Recognise the contribution of older Canberrans to our community through a range of targeted supports and assistance points across the city.

Disability

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| Key stats * In 2018, 19.4% of people who usually reside in the ACT had a disability, an increase from 16.2% in 2015.[[47]](#endnote-48)
* The rate of disability generally increases with age for both males and females.[[48]](#endnote-49) The ACT is expected to experience a significant ageing of our population. The number of Canberrans aged 85 years and over is expected to increase by 509%, reaching a total of 22,500 persons in 2056.[[49]](#endnote-50)
* 47% of adults with disability have experienced violence after the age of 15, compared with 36% without disability.[[50]](#endnote-51)
* Only 24% of adults with disability experience very good or excellent health, compared with 65% of without disability.[[51]](#endnote-52)
* Australia wide in 2018 there were 2.65 million carers, representing 10.8% of all Australians.[[52]](#endnote-53) Seven in ten (71.8%) primary carers were women.[[53]](#endnote-54) Half (50.2%) of all carers lived in a household in the lowest two equivalised gross income quintiles, twice the rate of non-carers (25.6%).[[54]](#endnote-55)
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* Deliver disability and carers commitments in the Parliamentary and Governing Agreement.
* Resource all six areas of the [National Disability Strategy](https://www.dss.gov.au/disability-and-carers/a-new-national-disability-strategy).
* Adequately resource the design and implementation of a Disability Health Strategy with multi-year funding for the strategy and co-design work.
* Ensure people with disability, volunteers, carers, family members and support workers have timely and priority access to the COVID-19 vaccination, personal protective equipment, respite, practical supports, essentials for living and connectivity and mental health supports as the pandemic continues. The ACT Government should continue the flexible respite grants.
* Commit to ending restrictive practices and meet Optional Protocol to the Convention against Torture (OPCAT) obligations in all congregate living situations in the ACT including in aged care facilities.
* Improve access to justice for people with disability and older people by funding the expansion of individual advocacy supports and community legal services.
* Establish and fund a lived experience committee and support lived experience consultative forums focused on improving physical and sensory access for people with disabilities to transport, public space and infrastructure.
* Ensure ongoing funding for community transport to meet demand.
* Properly fund the ACT Taxi Subsidy Scheme by removing the trip limit and increasing the monetary cap to keep pace with increases in taxi fares.
* Commit to all new residential properties in the ACT being built to meet and exceed the Universal Design standards as agreed in the National Construction Code.
* Prioritise funding to improve school infrastructure to support inclusive education.
* Reduce institutionalisation and segregation: commit to a target to reduce the number of people in congregate living situations and special education.
* Any new regulations impacting the disability services sector with reporting or compliance obligations need to be accompanied by funding to undertake them.
* Meet gaps between the health care system and disability support such as transport and in-home support for people ineligible for the National Disability Insurance Scheme (NDIS) or experience gaps in NDIS support including ongoing support for the ACT Community Assistance and Support Program and the [Integrated Service Response Program](https://www.communityservices.act.gov.au/disability_act/integrated-service-response-program).
* Increase and improve holistic support for families with children with disability including services to support early identification.
* Meet the needs of women with disability experiencing violence, abuse or assaults, including upgrading ACT women’s crisis shelters to improve accessibility.
* Address mental illness in people with disability through targeted initiatives.
* Fully fund the second ACT Carers Strategy Action Plan.
* Fund a feasibility study and co-design of a mental health carers respite facility.

Climate and energy

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| Key stats * People experiencing social and economic disadvantage are disproportionately impacted by climate change.[[55]](#endnote-56)
* More than one third of ACT region residents (35.9%) live in homes that perform poorly in heatwaves: they heat up quickly, cool down slowly, and high costs are incurred to cool them during extended heatwaves.[[56]](#endnote-57)
* Low-income households in the ACT spend a greater proportion of their income on energy than the average household – nationally, one in four households whose main source of income is an income support payment spend 10% of their income on energy.[[57]](#endnote-58)
* Over the past five years, electricity and gas prices in Canberra have increased by 25.1% and 30.7% respectively.[[58]](#endnote-59)
* The Australian Energy Regulator estimates that the network component of the typical bill for Evoenergy customers to be $241 higher for households and $1,476 higher for small business in 2021-22 – this increase is primarily due to the impact of the ACT Government’s Large-scale Feed-in Tariff scheme.[[59]](#endnote-60)
* The complexity in comparing market electricity offers has acted as a barrier to consumers’ ability to change plans or switch retailers to lower their energy bills, with 67% of ACT residents who had tried to compare electricity offers finding the experience difficult.[[60]](#endnote-61)
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* Implement an effective plan for a just transition to net zero greenhouse gas emissions in the ACT by 2045, if not sooner. This must:
	+ Develop a roadmap for low-income and other vulnerable households in the transition from natural gas and to zero emission vehicles that identifies and addresses barriers, ensuring no one is left behind.
	+ Resource the collection of detailed data to assess whether a just transition is occurring in the ACT.
	+ Establish a mechanism for joint governance of a just transition by community, government, social and technical experts, and business.
	+ Review the Large-scale Feed-in Tariff scheme to ensure risks and costs of the transition to 100% renewable electricity are distributed equitably.
* Prioritise funding for energy efficiency improvements for low-income, social housing, and private rental households including through the Sustainable Household Scheme and Vulnerable Household Energy Support Scheme.
* Ensure Utilities Concession eligibility is adequate and targeted toward need (including to ACT Services Access Card holders), continue the Utilities Hardship Fund, and fund community education to improve energy literacy across the community.
* Introduce legislation for staged minimum energy performance requirements for rental properties by the end of 2021.
* Provide ongoing funding for energy consumer advocacy to represent the long-term interests of small energy consumers in decision making on climate and energy policy and programs.
* Deliver commitments in the Parliamentary and Governing Agreement prioritising those which meet the energy needs of low-income households and address consumer vulnerability.

Justice

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| Key stats * Despite making up only 1.9% of the ACT population, Aboriginal and/or Torres Strait Islander people make up over a quarter (25.8%) of the AMC prison population.[[61]](#endnote-62) Between 2019 and 2020, Aboriginal and/or Torres Strait Islander detainees in the AMC increased by 12%.[[62]](#endnote-63)
* The ACT has a high rate of re-imprisonment. 2020 ABS data shows that 78% of all detainees had prior imprisonment.[[63]](#endnote-64) For Aboriginal and/or Torres Strait Islander detainees it is 94%.[[64]](#endnote-65)
* In the ACT, First Nations children are locked up in detention at 18 times the rate of their non-Indigenous peers.[[65]](#endnote-66)
* More than one in two Australians (51%) support raising the age of criminal responsibility to 14 years, which is twice as many as those who oppose raising the age to 14 years (26% oppose).[[66]](#endnote-67)
* 81.6% of detainees in the Alexander Maconochie Centre reported that it was difficult to get general medical services when needed, and 86.1% said it was difficult to get specialist medical services.[[67]](#endnote-68)
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* Enact legislation to Raise the Minimum age of Criminal Responsibility from 10 to 14 years of age as committed to in the Parliamentary and Governing Agreement and invest in related support services for vulnerable young people and their families.
* In partnership with the Aboriginal and/or Torres Strait Islander community, establish an appropriate inquiry process to investigate the overrepresentation of Aboriginal and/or Torres Strait Islander peoples in the ACT justice system.
* Improve access to justice by increasing funding to community legal centres, mediation and individual advocacy supports including clinics for women, people with disabilities and / or Aboriginal and/or Torres Strait Islander people.
* Resource the Disability Justice Strategy.
* Resource the Justice Reinvestment Strategy: meet recidivism targets, significantly reduce Aboriginal and/or Torres Strait Islander incarceration, and introduce gender-specific rehabilitation and diversion programs.
* Fix the prison: focus the Alexander Maconochie Centre on rehabilitation.
* Implement and fund all ACT Inspector of Correctional Services Healthy Prison Review recommendations.
* Separate people on remand, including a women’s section.
* Implement a needle and syringe program for the AMC.
* Ensure equivalence of health care and other services for people in the AMC, including for people who use drugs.
* Ensure equal access to services and support for women in the AMC.
* Expand specialist drug and alcohol programs and fix legislative barriers to enable the diversion of Canberrans away from the justice system and towards support.
* Revisit plans for the Reintegration Centre.

Children, young people and families

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| Key stats * Aboriginal and/or Torres Strait Islander children in the ACT are 13 times more likely than non-Indigenous children to be in out-of-home care, and make up almost a third (29%) of children in OOHC or other supported placements in the 2018-19 reporting period.[[68]](#endnote-69)
* According to ACT Electoral Commission accessibility reports, of the 86 currently listed polling places, 62 are schools and all are listed as ‘Assisted Access’, none are ‘Fully Accessible’ (personal correspondence, 14 May 2021).
* Students with disability in Australia experience considerably poorer educational outcomes than non-disabled students. A third of people with disability aged 20 or over have completed Year 12-level schooling, compared with 62% of people without a disability.[[69]](#endnote-70)
* Young people with a disability are overrepresented in the youth justice system.[[70]](#endnote-71)
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* Implement an independent external review mechanism for all child protection decisions in the ACT, as well as an internal review mechanism supported and trusted by all stakeholders.
* Build a restorative child protection system which includes Functional Family Therapy, early support services, and training for workers in child and youth protection services on restorative practices.
* Provide more funding for and better access to advocacy and legal support for parents, children and families in the child protection system, especially for parents with disability and mental ill health and Aboriginal and/or Torres Strait Islander families.
* Provide more funding for adequate services, including information services, for children, youth, parents and families including parents with vulnerability and perinatal services.
* Implement and fully fund all recommendations of the Our Booris, Our Way review into the care and protection of Aboriginal children in the ACT.
* Increase investment in the OOHC system, including expansion of supported placements for all young people in OOHC without individual assessments and incremental approval, from 18 to 21 years.
* Improve inclusive education in the ACT to enable children with disability to participate in mainstream schooling safely and successfully.
* Fund and implement an audit of accessibility levels for all ACT schools to address gaps.
* Commit to raise the minimum age of criminal responsibility from 10 to at least 14 years of age.
* Fund and implement all recommendations in the Inspector of Correctional Services Healthy Centre Review of Bimberi Youth Justice Centre.
* Establish and fund a youth homelessness service, including for young people transitioning from OOHC.

Women, gender and sexuality

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| Key stats * The cost of violence against women – of which the vast majority is domestic and family violence – is high and increasing in Australia and currently stands at $21.7 billion a year.[[71]](#endnote-72) In 2015, Price Waterhouse Coopers and the Women’s Centre for Health Matters calculate that the share of those costs of violence against women in the ACT equated to $355.2 million a year.[[72]](#endnote-73)
* ACT women with disabilities experience violence at approximately twice the rate of non-disabled women.[[73]](#endnote-74)
* LGBTIQA+ people are two and a half times more likely to have been diagnosed or treated for a mental health condition in the past 12 months[[74]](#endnote-75) and more than half (57.2%) of young LGBTIQA+ people in the ACT felt unsafe or uncomfortable at high school due to their sexuality or gender identity.[[75]](#endnote-76)
* One fifth (20.8%) of young LGBTIQA+ people in the ACT had experienced one or more forms of homelessness in their lifetime.[[76]](#endnote-77)
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* Implement all commitments in the Parliamentary and Governing Agreement pertaining to women, gender and sexuality.
* Provide additional funding for community-based specialist women’s services including domestic violence services, community legal services and housing and homelessness services.
* Implement Respectful Relationships Education at a minimum standard for all staff and students in education settings, including from preschool to Year 12, universities and vocational training facilities.
* Increase transparency and accountability around the Family Safety Levy and ensure a fairer share for community services.
* Invest in ensuring women have access to affordable, accessible and safe transport in the ACT.
* Provide additional funding for legal assistance services that support women experiencing sexual harassment at work.
* Commit to greater transparency and gender disaggregated data collection on women’s safety.
* Develop a new, funded ACT Prevention of Violence Against Women and Children Strategy in line with national commitments.
* Fund and support LGBTIQA+ awareness training for frontline community service, particularly in housing, healthcare and domestic and family violence responses.
* Amend the *Crimes Act 1900* (ACT) to include the concept of positive consent as recommended by the Inquiry into Crimes (Consent) Amendment Bill.
* Introduce progressive paid parental leave entitlements that encourage shared parenting and build a culture that normalises male employees’ access to parental leave.
* Increase funding for community-controlled LGBTIQA+ organisations to continue to support LGBTIQA+ communities.
* Further reform legislation to be more inclusive of LGBTIQA+ people in line with A Gender Agenda’s position on transition accessibility.

Human rights Jurisdiction

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| Key data* In 2019, the ACT Auditor-General published its report, [*Recognition and implementation of obligations under the Human Rights Act 2004*](https://www.audit.act.gov.au/__data/assets/pdf_file/0018/1322460/Report-No-2-of-2019-Recognition-and-implementation-of-obligations-under-the-HRA-2004.pdf). It found that:
	+ Although proposed legislation requires a completed ‘Human Rights Scrutiny Assessment’, information for ACT agencies that provides guidance and explanation on the Human Rights Act is dated and mostly limited to legislation
	+ There is varied commitment to embedding a human rights culture across ACT Government Directorates
	+ Agencies should amend annual reports of Directorates to include minimum standards for format for human rights activities to be reported
	+ Agencies should identify additional, meaningful information to be reported that will allow for assessments of the development of human rights culture.[[77]](#endnote-78)
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* Incorporate all Economic, Social and Cultural Rights in the ACT *Human Rights Act 2004* including: the right to housing; the right to an adequate standard of living; the right to physical and mental health; and the right to a healthy environment.
* Through improved access to legal support and better funding for the ACT’s community legal services, ensure equality before the law for all ACT residents, including women and children, Aboriginal and/or Torres Strait Islander people and other Canberrans facing legal disadvantage.
* Improve access to the ACT Human Rights Act by adding a direct complaints mechanism through the ACT Human Rights Commission followed by referral to the ACT Civil and Administrative Tribunal (ACAT) if the complaint cannot be resolved.
* Embed human rights principles and obligations in all procurement processes and service contracts.
* Include a human rights reporting component in Director-General annual reports.
* Establish an annual evaluation and report to the ACT Legislative Assembly on human rights in the ACT.
* Implement and resource clear strategies to address racism, discrimination against LGBTIQ+ Canberrans, gendered discrimination and violence, and ableism.
* Foster an independent advocacy voice for culturally and linguistically diverse Canberrans in the ACT.
* Publicly commit to a federal Human Rights Act.
* Commit to review police complaints handling mechanisms to ensure greater practical independence, accountability and transparency of investigations.
* Maintain position of opposing the introduction of anti-consorting laws and commit to not implementing Firearms Prohibition Legislation.

Older Canberrans

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| Key stats * The number of Canberrans aged 85 years and over is expected to increase by 509%, reaching a total of 22,500 persons in 2056.[[78]](#endnote-79)
* In March 2021, only 32 out of 1,058 private rental properties in the ACT were affordable for a couple on the age pension, while only 20 were affordable for a single person on the age pension.[[79]](#endnote-80)
* Older women – those aged 55 and over – was the fastest growing cohort of homeless Australians between 2011 and 2016, increasing by over 30%. It is likely this trend will continue given the ongoing shortage of affordable housing, the ageing population and the significant gap in wealth accumulation between men and women across their lifetimes.[[80]](#endnote-81)
* Older people are among those demographic groups most likely to experience transport disadvantage.[[81]](#endnote-82)
* It is estimated that between 2% and 14% of older Australians experience elder abuse in any given year, with the prevalence of neglect likely higher.[[82]](#endnote-83)
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* Invest in social housing and community transport to meet community need, including for older Canberrans.
* Provide ACT public service staff with up to two years leave without pay for people caring for aged parents under the ACT Public Service Enterprise Agreement.
* Commit to all new residential properties in the ACT built to meet Universal Design standards making them accessible to all people regardless of age, disability or other factors.
* Provide a range of targeted supports and assistance points across the city for older Canberrans, including seniors hubs in the southern suburbs of the ACT (Tuggeranong) and in a northern suburb of Canberra.
* Ensure the new planning system results in an aged-friendly suburb focus – for instance, so footpaths in Canberra are suitable for people who are aged and enable independent community participation, support independence and prevent falls.
* Invest in ICT training for seniors and other supports that keep people connected including during the COVID-19 pandemic. Consult with older Canberrans when moving to cashless and online systems and ensure alternatives are available so people unable to operate smartphones can continue to access the community.
* Commit to ending restrictive practices and ensure Australia’s Optional Protocol to the Convention against Torture obligations apply to all congregate living situations in the ACT, including aged care facilities.
* Reduce violence and institutionalisation and fully fund the implementation of the ACT *Crimes (Offences Against Vulnerable People) Legislation Amendment Act 2020*.
* Ensure adequate levels of both wellbeing and mental health supports are available to Canberra’s older people and their carers.
* Improve access to justice for older people engaged with the justice system by expanding individual advocacy supports.
* Expand palliative care services and support respite opportunities including for carers and palliative care patients.
* Meet gaps in Commonwealth aged care services.
* Ensure community transport for older people is guaranteed and adequately funded and that mass transit is accessible (see also planning and transport).
* Ensure that carers are valued, recognised and respected with a fully funded Carers Strategy and actions and investments that support them in caring roles such as leave from work, funding, respite and other supports.
* Deliver commitments in the Parliamentary and Governing Agreement for older Canberrans.

Planning and transport

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| Key stats * Population projections indicate our city will need to support over 600,000 people by 2050.[[83]](#endnote-84)
* Transport is the third highest category of expenditure for low-income households in the ACT after housing and food.[[84]](#endnote-85)
* There is growing body of evidence that links well-planned cities to good health, wellbeing, human rights and social justice outcomes.[[85]](#endnote-86)
* The ACT has a shortage of community facilities.
* There is a well-established relationship between transport disadvantage, social exclusion and poor health and wellbeing outcomes.[[86]](#endnote-87)
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* Ensure development in Canberra is integrated, sustainable, high quality and inclusive of people on low incomes and facing disadvantage.
* Fund the ACT Planning Strategy including:
	+ Create Social Planning Unit in the ACT Government with a focus on engagement with marginalised groups and to ensure that planning leads to improved wellbeing.
	+ Fund transport needs analysis with a focus on community transport.
	+ Fund a community infrastructure needs analysis.
* Ensure planning system works to increase approval of high-quality social and affordable housing:
	+ Facilitating access to affordable land including using re-zoning and rates exemptions for community housing providers.
	+ Ensuring planning regulations increase accessible housing that meets and exceed the new specifications for Silver level in the National Construction Code.
* Fund expansion of and improvements to decaying community infrastructure:
	+ Develop a policy framework and investment model for the long-term provision of community facilities across the ACT.
	+ Require developers to build community infrastructure into new developments.
	+ Require developers to make developed spaces more liveable and inclusive.
* Invest to address transport disadvantage:
	+ Fund the transport needs analysis.
	+ Guarantee and adequately fund on-demand transport (like community transport) as well as mass transit (like trams and buses).
	+ Develop a cost benefit business case to make travel on public transport free and in the meantime extend concessions and lift the cap on the Taxi Subsidy Scheme.
* Community development:
	+ Invest in more community development workers, including to mitigate isolation during COVID-19.
	+ Fund the Community Development Network for the ACT and Region (CDNet).

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