

Logo: ACT Council of Social Service Inc. (ACTCOSS).

Submission:

ACT Disability Strategy

July 2022

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.

Contact Details

Phone: 02 6202 7200  
Address: Weston Community Hub, 1/6 Gritten St, Weston ACT 2611  
Email: [actcoss@actcoss.org.au](mailto:actcoss@actcoss.org.au)   
Web: [actcoss.org.au](https://www.actcoss.org.au)

CEO: Dr Emma Campbell   
Policy Officers: Dr Gemma Killen, Emma Hawke

July 2022

© Copyright ACT Council of Social Service Incorporated

This publication is copyright, apart from use by those agencies for which it has been produced. Non-profit associations and groups have permission to reproduce parts of this publication as long as the original meaning is retained and proper credit is given to the ACT Council of Social Service Inc (ACTCOSS). All other individuals and Agencies seeking to reproduce material from this publication should obtain the permission of the CEO of ACTCOSS.

An ACT Government funded initiative.



# Table of Contents

[Table of Contents 3](#_Toc111194745)

[Acronyms 4](#_Toc111194746)

[Introduction 5](#_Toc111194747)

[Key Focus Areas 6](#_Toc111194748)

[1.1 ACT disability community sector organisations 6](#_Toc111194749)

[1.2 Implementation of the ACT Disability Strategic Plan 6](#_Toc111194750)

[1.3 Aboriginal and/or Torres Strait Islander communities 7](#_Toc111194751)

[1.4 Housing 8](#_Toc111194752)

[1.5 Employment 9](#_Toc111194753)

[1.6 Inclusive Education 9](#_Toc111194754)

[1.7 Transport 10](#_Toc111194755)

[1.8 Health 10](#_Toc111194756)

[1.8.1 Mental health 11](#_Toc111194757)

[1.9 Justice System 12](#_Toc111194758)

[1.10 Addressing COVID 19 12](#_Toc111194759)

[Recommendations 14](#_Toc111194760)

Acronyms

ACCOs Aboriginal Community Controlled Organisations

ACT Australian Capital Territory

ACTCOSS ACT Council of Social Service Inc.

ACTCSD ACT Community Services Directorate

ACTDS ACT Disability Strategy

ACTDSA ACT Down Syndrome Association

ADACAS ACT Disability, Aged Care Advocacy Service

AFI Advocacy for Inclusion

AMC Alexander Maconochie Centre

AOD Alcohol and other drugs

CASP Community Assistance and Support Program

HPR Healthy Prison Review

NDIS National Disability Insurance Scheme

Introduction

The ACT Council of Social Service (ACTCOSS) is pleased to make a submission to the ACT Community Services Directorate (ACTCSD), ACT Office for Disability on the development of the ten-year ACT Disability Strategy (ACTDS).

As 9.4% of people who reside in the ACT have a disability,[[1]](#footnote-2) ACTCOSS welcomes the development of the ACT Disability Strategy as an initiative to ensure that the ACT Government is making Canberra an accessible and inclusive city for all Canberrans to live, work and play. It is essential that people with disabilities are supported to live healthy and meaningful lives, free from segregation and discrimination.

We endorse any submissions made by disability advocacy organisations in the ACT, including Advocacy for Inclusion (AFI), the ACT Disability, Aged Care Advocacy Service (ADACAS) and the ACT Down Syndrome Association (ACTDSA), and note the importance of ensuring that the voices of people with lived experience are prioritised throughout the Strategy. We particularly support AFI’s call for the ACTDS to be underpinned by an overarching principle of human rights for people with disability. Disability should be approached with a social rather than a medical lens throughout the ACTDS.

To address outcome disparities and quality of life for people with disabilities ACTCOSS recommends the following key areas of focus for the ACTDS, with detail outlined in this submission:

* ACT disability community sector organisations
* Implementation of the ACT Disability Strategic Plan
* Aboriginal and Torres Strait Islander communities
* Housing
* Employment
* Inclusive education
* Transport
* Health
* Justice
* COVID 19

# Key Focus Areas

## 1.1 ACT disability community sector organisations

As noted in our[Counting the Costs Report](https://www.actcoss.org.au/publications/advocacy-publications/report-counting-costs), inadequate funding and insecure contracts are hindering community organisations that provide crucial government-funded services. Government contracting and funding arrangements continue to place community service organisations under undue strain due to inadequate funding, insufficient flexibility, short funding cycles and performance targets that poorly reflect service priorities.[[2]](#footnote-3) In light of this, ACTCOSS recommends that the ACTDS includes:

* Increasing standard contract lengths for disability community sector grants to at least five and preferably seven years for most contracts
* Funding the full cost of service delivery, including:
  + Infrastructure, management and administration costs
  + Appropriate indexation, that is uniform across funded organisations, published annually, and reflects the actual increase in costs incurred by funded organisations
  + Committing to non-application of efficiency dividends to community sector funding.
* Funding systemic disability advocacy, as well as individual advocacy.

## 1.2 Implementation of the ACT Disability Strategic Plan

For the ACTDS to have meaningful and successful outcomes, ACTCOSS recommends:

* The plan develops goals and targets with timelines for completion, allocation of responsibility with monitoring and evaluation strategies.
* Ensuring there are feedback channels for key stakeholders and community members to improve the delivery and evaluation processes.
* Sufficient funding and human resources are dedicated to the actions, monitoring and evaluation strategies of the plan and that any evaluation is independent and made public.

## 1.3 Aboriginal and/or Torres Strait Islander communities

Indigenous Australians are 1.5 times more likely than non‑Indigenous Australians to have a disability or restrictive long-term health condition (51% and 34%, respectively) and 2.6 times as likely to have a profound/severe core activity limitation (10% and 4%, respectively).[[3]](#footnote-4) In 2018-19, 46% of Aboriginal and Torres Strait Islander people over the age of 15 had a disability or restrictive long term health condition.[[4]](#footnote-5) It is vital that the ACTDS prioritises Aboriginal and Torres Strait Islander communities in the ACT by:

* Ensuring adequate funding is given to Aboriginal Community Controlled Organisations (ACCOs) and other culturally appropriate services to support and advocate for Aboriginal and Torres Strait Islander people. This includes:
  + Funding the employment of additional Aboriginal and Torres Strait Islander people with lived experience of disability, particularly in the Health Sector
  + Consistency and continuity of care
  + Culturally appropriate respite services
  + Culturally appropriate alcohol and other drug (AOD) rehabilitation facilities and services.
* Ensuring adequate and ongoing training is given to all public service and health sector staff to enable cultural appropriate and responsive service delivery to Aboriginal and Torres Strait Islander people
* Ensuring the availability and accessibility of basic information, education, support and advocacy for Aboriginal and Torres Strait Islander people, particularly regarding:
  + Access to NDIS, the Disability Support Pension (DSP), Housing and any associated review or complaints processes
  + Human rights, disability education and knowing where to go to for support and assistance. This could include a coordinated, single point of information and resources such as a hub or directory service under a community-controlled organisation to reduce the stigma of disability within Aboriginal communities
  + Access to and availability of Aboriginal or Torres Strait Islander Plan Managers and Local Area Coordinators.
* Incorporating Aboriginal and Torres Strait Islander holistic wellbeing practices, including spiritual wellbeing, healing, and traditional medicinal practices into mainstream service provision
* Ensuring better resourcing of early intervention and prevention supports in the community, driven by Aboriginal and Torres Strait Islander people, particularly around promotional health measures
* Reducing access barriers for services such as specialists, counselling, GPs and other allied health and mental health providers
* Reforming social security, superannuation, seniors’ cards and any other ACT Government concessions based on age to consider lower life expectancy for Aboriginal and Torres Strait Islander people
* Eliminating systemic racism within institutions, particularly housing, education, justice, health, employment, and transport
* Ensuring decision makers within Government and mainstream services, are informed and guided by Aboriginal and Torres Strait Islander people and can acknowledge the cultural differences and groups that make up the ACT First Nations community
* Allowing Aboriginal and Torres Strait Islander people to decide their needs, with the appropriate resourcing and support to meet those needs.

## 1.4 Housing

People with disability face significant barriers to accessing safe, secure, and affordable housing. As noted in AFI’s submission and within the [ACT Housing Strategy](https://www.act.gov.au/__data/assets/pdf_file/0004/1265638/ACT-Housing-Strategy-2018.pdf), nearly a third of social housing tenants are people with disability. In order to ensure accessible housing in the ACT, the ACTDS must:

* Invest in more social and community housing that is accessible and affordable
* Educate community housing providers, private developers and landlords on disability inclusion and universal design
* Commit to ensuring all new residential properties in the ACT being built to meet and exceed Universal Design standards
* Incentivise private investment to deliver increased accessible and affordable housing stock
* Resource homelessness, crisis and community housing organisations to ensure that modifications to homes can be carried out to make them accessible for clients with a disability.

## 1.5 Employment

In order to meaningful address barriers to employment for people with disability, the ACTDS must:

* Evaluate and update the ACT Government People with a Disability Employment Framework
* Develop and implement an employment program to increase the number of employees with disability being employed within the ACT Government
* Promote information and examples of the benefits to businesses and organisations of employing people with disability
* Develop employment resources and provide support to employers employing a person with a disability through such programs as the [ACT Education Directorate Head Start Pilot Program.](https://www.education.act.gov.au/public-school-life/transitions-careers/vet-and-australian-school-based-apprenticeships/head-start)

## Inclusive Education

Research shows many benefits of inclusion in ‘mainstream’ education for students with disability. These include better academic and vocational outcomes than their peers in segregated settings, greater social interaction, resulting in more opportunities to establish and maintain friendships, access to a broader range of play and learning activities, which can stimulate physical development and enhance children’s experiences. Inclusive education also benefits students without disability, teachers and educators, and the wider community.[[5]](#footnote-6)

Though the ACT Government holds Inclusive Education as a priority within the Future of Education Strategy, the Education Directorate has not yet agreed upon a definition of Inclusive Education. This is a significant barrier for ensuring that all students feel welcome, safe and supported to learn alongside their peers in all schools.

ACTCOSS is guided by the Inclusive Education definition offered by *Imagine More* and the UN Convention on the Rights of Persons with Disabilities as an education setting where all students are physically present and participating in the same classroom, in the same playground and at the same time as all children in the school community.

A complete picture of school segregation in the ACT is hard to obtain as we do not routinely collect data on specialist units within schools. However, we know that we have a high number of specialist schools compared with other jurisdictions and that many of our mainstream public schools are inaccessible for students, parents and carers with disability.

In order to ensure students with disability are able to access high quality, safe and meaningful education, the ACTDS needs to:

* Define Inclusive Education in line with the UN Convention on the Rights of Persons with Disabilities, Article 24, General Comment No 4, Paragraph 11[[6]](#footnote-7)
* Address social and educational attitudes towards students with disability that mean they are routinely excluded from mainstream settings
* Focus education funding on transitioning to a fully inclusive education model with the long-term goal of making all schools accessible and inclusive for all students, using the Australian Coalition for Inclusive Education’s [roadmap for achieving inclusive education in Australia](https://acie.org.au/acie-roadmap/).

## 1.7 Transport

People with disabilities can have trouble accessing transport and getting around in Canberra. There are long noted issues with reliability of accessible public transport, uneven footpaths and inaccessible public buildings. The ACT Transport Group were consulted for their input into the development of the following recommendations:

* Fund a transport needs analysis particular to the needs of people living with a disability
* Establish and support a consultative forum on transport for people with disabilities
* 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
* Adequately fund on demand transport such as community transport as well as mass transport such as public transport
* Increase the hours that the Community Minibus Service is permitted to operate (currently 25 hours per week)
* Increase the hours and expand the zones of the Flexible Bus to ensure adequate transport and access to all parts of Canberra for passengers.

## 1.8 Health

Compared to 65% of adults without disability, only 24% of Australian adults with disability experience very good or excellent health.[[7]](#footnote-8) To address these disparities and to ensure a healthy and well-cared for population in Canberra, the ACTDS must commit to:

* Adequately funding the ACT Disability Health Strategy
* Greater investment in the Community Assistance and Support Program (CASP) or its successor
* Identifying gaps in specialist health services in the ACT and region and initiate strategies to fill these gaps while providing interim financial and logistical support for people who need to travel
* Employing people with disability within the ACT Health system in authorised positions to enable, communicate and spread cultural change
* Providing a range of training, disability confidence and skills development work lead by people with disability to a range of people including practitioners, health and wellness services outside the formal system and, specifically, to doctors doing Centrelink assessments
* Providing Easy English medical and systems documentation
* Providing funding and training in the access and use of communication boards, facilitated communication, learning of Auslan and Easy English within all publicly funded and regulated health settings
* Maintaining and strengthening alternatives that cater to people with barriers to accessing digital devices and technology (i.e. people who cannot access online health information or who need to communicate via phone to access health information)
* Addressing cost issues through dedicated low-cost services, including a providing a once-a-year free extended consultation to all people with disability
* Auditing, stocktaking and investing in improvements to all public and allied health infrastructure in the ACT to meet modern standards of accessibility in physical, digital and communications infrastructure
* Ensuring that all screening kits and preventative health information and devices are reviewed by people with disabilities prior to being issued
* Supporting wellness and lifestyle services including gyms, pharmacies, holistic health providers, dieticians, clinics, dentists and community health centres to meet disability access requirements
* Strengthening disability advocacy with a health lens.

### Mental health

To deliver robust and sustainable mental health treatment and services the ACT Government must:

* Address significant gap for people with complex mental health issues who are not eligible for the NDIS
* Invest in integrated housing and mental health support.

## 1.9 Justice System

Across Australia people with disability are over-represented in the criminal justice system and are estimated to constitute up to 50 per cent of detainees.[[8]](#footnote-9) According to the [2019 Healthy Prison Review](https://www.ics.act.gov.au/reports-and-publications/healthy-prison-reviews/healthy-prison-reviews/healthy-prison-review-of-the-alexander-maconochie-centre,-2019) (HPR) of the Alexander Maconochie Centre (AMC), 30% of detainees in the ACT self-identify as having a disability. This is likely an underestimation, given the lack of screening processes within the prison. The HPR also notes 82% of detainees report difficulty accessing general medical services and 86% report difficulty accessing specialist medical services in the AMC.

According to recent research conducted in the ACT and in NSW, identification of people with disability in custodial settings is poor, and prisons are ill-equipped to provide services and support required by people with disability.[[9]](#footnote-10)

In order to reduce the level of contact with the justice system for people with disability in the ACT, the ACTDS needs to:

* Adequately fund and implement the ACT Disability Justice Strategy
* Fund and resource a specialty Disability Legal Service within the community legal sector
* Ensure the criminal justice system is safe and inclusive for people with a disability
* Support people with cognitive disability to get through the criminal justice process
* Work closely with Aboriginal communities to improve outcomes for Aboriginal people with disability in the justice system
* Provide training for police and all staff in the justice and corrections system to better serve people with disability.

## 1.10 Addressing COVID 19

Many people with disability are at an increased risk of severe illness from COVID-19, both due to direct impacts of any underlying chronic conditions and to possible challenges with maintaining physical distancing and applying other COVID-19 precautions[[10]](#footnote-11). The ACTDS needs to include strategies to:

* Continue to resource, implement and evaluate the ACT COVID 19 Disability Strategy and the Disability Strategy Action Plan
* Improve communication between health and disability services so that people with disability are able to receive comprehensive information relating to COVID 19
* Prioritise the availability of oral antiviral treatments to people with disability that have COVID 19.

|  |
| --- |
| Recommendations Ensure adequate resourcing of the ACT disability community sector organisations   * Increasing standard contract lengths for disability community sector grants to at least five and preferably seven years for most contracts * Funding the full cost of service delivery, including:   (a) Infrastructure, management and administration costs.  (b) Appropriate indexation, that is uniform across funded organisations, published annually, and reflects the actual increase in costs incurred by funded organisations.  (c) Committing to non-application of efficiency dividends to community sector funding.  **Ensure adequate resources for the implementation of the ACT Disability Strategic Plan**   * Funding systemic disability advocacy, as well as individual advocacy. * The plan develops goals and targets with timelines for completion, allocation of responsibility with monitoring and evaluation strategies. * Ensuring there are feedback channels for key stakeholders and community members to improve evaluation processes. * Sufficient funding and human resources are dedicated to the actions, monitoring and evaluation strategies of the plan.   **Aboriginal and Torres Strait Islander Communities**   * Ensuring adequate funding is given to Aboriginal Community Controlled organisations and other culturally appropriate services to support and advocate for Aboriginal and Torres Strait Islander people. This includes:   + funding the employment of additional Aboriginal and Torres Strait Islander people with lived experience of disability, particularly in the Health Sector.   + Consistency and continuity of care   + Culturally appropriate respite services   + Culturally appropriate AOD and detox facilities and services * Ensure adequate and ongoing training is given to all staff to enable cultural appropriate and responsive service delivery to Aboriginal and Torres Strait Islander people. * Ensure the availability of basic information, education, support and advocacy for Aboriginal and Torres Strait Islander people, particularly regarding:   + Access to NDIS, DSP and Housing etc. and any associated review or complaints processes   + Your Rights, what is disability and knowing where to go to for support and assistance. This could include a coordinated, single point of information and resources such as a hub or navigation/directory type service delivered through a community controlled organisation and reducing the stigma of disability within Aboriginal communities   + Ensure access to and availability of Aboriginal or Torres Strait Islander Plan Managers and Local Area Coordinators. * Incorporate Aboriginal and Torres Strait Islander holistic wellbeing practices, including spiritual wellbeing, healing, and traditional medicinal practices. * Better resourcing of early intervention and prevention supports in the community, driven by Aboriginal and Torres Strait Islander people, particularly around promotional health measures. * Reduce barriers around accessing services such as specialists, counselling, GPs etc * Reforms in relation to social security, superannuation, seniors’ cards and other ACT Government aged based concessions, to take into account life expectancy for Aboriginal and Torres Strait Islander people. * Eliminate systemic racism within institutions, particularly housing, education, justice, health, employment, and transport. * Ensure decision makers within Government and mainstream services, are informed, and guided by Aboriginal and Torres Strait Islander people and acknowledge the cultural differences and groups that make up the ACT First Nations community. * Allow Aboriginal and Torres Strait Islander people to decide their needs, with the appropriate resourcing and support.   **Housing**   * Educate community housing providers, private developers and landlords on disability inclusion and universal design. * Commit to all new residential properties in the ACT being built to meet and exceed Universal Design standards. * Support to incentivise private investment to deliver increased accessible and affordable housing stock. * Resource homelessness, crisis and community housing organisations to ensure that modifications to homes can be carried out to make them accessible for clients with a disability.   **Employment**   * Evaluate and update the ACT Government People with a Disability Employment Framework. * Develop and implement an employment program to increase the number of employees with disability being employed within the ACT Government. * Promote information, resources and examples of the benefits to businesses and organisations of employing people with disability. * Develop employment resources and provide support to employers employing a person with a disability through such programs as the ACT Education Directorate pilot program.   **Inclusive Education**   * Define Inclusive Education in line with the UN Convention on the Rights of Persons with Disabilities, Article 24, General Comment No 4, Paragraph 11. * Address social and educational attitudes towards students with disability that mean they are routinely excluded from mainstream settings * Focus education funding on transitioning to a fully inclusive education model with the long-term goal of making all schools accessible and inclusive for all students, using the Australian Coalition for Inclusive Education’s [roadmap for achieving inclusive education in Australia](https://acie.org.au/acie-roadmap/).   **Transport**   * Fund a transport needs analysis particular to the needs of people living with a disability. * Establish and support a consultative forum on transport for people with disabilities. * 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. * Adequately fund on demand transport such as community transport as well as mass transport such as public transport. * Increase the hours that the Community Minibus Service is permitted to operate (currently 25 hours per week). * Increase the hours and expand the zones of the Flexible Bus service to ensure adequate transport and access to all parts of Canberra for passengers.   **Health**   * Adequately fund the ACT Disability Health Strategy. * Commit to greater investment in the Community Assistance and Support Program (CASP) or its successor. * Identify gaps in specialist health services in the ACT and region and initiate strategies to fill these gaps while providing interim financial and logistical support for people who need to travel. * Employ people with disability within the ACT Health system in authorised positions to enable, communicate and spread cultural change. * Provide a range of training, disability confidence and skills development work lead by people with disability to a range of people including practitioners, health and wellness services outside the formal system and, specifically, to doctors doing Centrelink assessments. * Provide plain English medical and systems documentation. * Provide funding and training in the access and use of communication boards, facilitated communication, learning of Auslan and easy English within all publicly funded and regulated health settings. * Maintain and strengthen alternatives that cater to people with barriers to accessing digital devices and technology (i.e. people who cannot access online health information or who need to communicate via phone to access health information). * Address cost issues through dedicated low-cost services, including a providing a once a year free extended consultation to all people with disability. * Audit, stocktake and invest in improvements to all public and allied health infrastructure in the ACT to meet modern standards of accessibility in physical, digital and communications infrastructure. * Ensure that all screening kits and preventative health information and devices are reviewed by people with disabilities prior to being issued. * Support wellness and lifestyle services including gyms, pharmacies, holistic health providers, dieticians, clinics, dentists and community health centres to meet disability access requirements. * Strengthen disability advocacy with a health lens. * Address significant gap for people with complex mental health issues who are not eligible for the NDIS. * Invest in integrated housing and mental health support.   **Justice System**   * Adequately fund and implement the ACT Disability Justice Strategy. * Fund and resource a specialty Disability Legal Service within the community legal sector. * Ensure the criminal justice system is safe and inclusive for people with a disability. * Support people with cognitive disability to get through the criminal justice process. * Work closely with Aboriginal communities to improve outcomes for Aboriginal people with disability in the justice system. * Provide training for police to better serve people with disability.   **Addressing COVID 19**   * Continue to resource, implement and evaluate the ACT COVID 19 Disability Strategy and the Disability Strategy Action Plan. * Improve communication between health and disability services so that people with disability are able to receive comprehensive information relating to COVID 19. * Prioritise the availability of oral antiviral treatments to people with disability. |

1. Australian Bureau of Statistics (2018) Available at: [Disability, Ageing and Carers, Australia: Summary of Findings, 2018 | Australian Bureau of Statistics (abs.gov.au)](https://www.abs.gov.au/statistics/health/disability/disability-ageing-and-carers-australia-summary-findings/latest-release#key-statistics), accessed 15th July 2022 [↑](#footnote-ref-2)
2. Blaxland, M and Cortis, N (2021) Valuing Australia’s community sector: Better contracting for capacity, sustainability and impact. Sydney: ACOSS [↑](#footnote-ref-3)
3. Australian Institute of Health and Welfare 2020. Aboriginal and Torres Strait Islander Health Performance Framework 2020 summary report. Cat. no. IHPF 2. Canberra: AIHW. [↑](#footnote-ref-4)
4. Australian Institute of Health and Welfare 2020. Aboriginal and Torres Strait Islander Health Performance Framework 2020 summary report. Cat. no. IHPF 2. Canberra: AIHW. [↑](#footnote-ref-5)
5. Cologon, K. (2019) Towards inclusive education: A necessary process of transformation. Report written by Dr Kathy Cologon, Macquarie University for Children and Young People with Disability Australia (CYDA) [↑](#footnote-ref-6)
6. Committee on the Rights of Persons with Disabilities *General Comment No. 4 (2016) on the right to inclusive education CRPD/C/GC/4* 25 November 2016 para 11. [↑](#footnote-ref-7)
7. Australian Institute of Health and Welfare (2022) People with disability in Australia 2022, catalogue number DIS 72, AIHW, Australian Government. [↑](#footnote-ref-8)
8. Human Rights Watch 2018, I Needed Help, Instead I Was Punished: Abuse and Neglect of Prisoners with Disabilities in Australia [↑](#footnote-ref-9)
9. Doyle, C., Dodd, S., Dickinson, H., Yates, S. & Buick, F. [‘There’s not just a gap, there’s a chasm’: The boundaries between Australian disability services and prisons](https://apo.org.au/sites/default/files/resource-files/2022-06/apo-nid318387.pdf), UNSW Canberra, ACU, Public Service Research Group, 2022, accessed 22 July 2022. [↑](#footnote-ref-10)
10. Department of Health 2021 [*For people with a disability | Australian Government Department of Health*](https://www.health.gov.au/health-alerts/covid-19/advice-for-groups-at-risk/people-with-a-disability), Department of Health website, accessed 15 July 2022 [↑](#footnote-ref-11)