



*AMPARO Advocacy's Response to
Towards an all abilities Queensland
Consultation Paper*

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Introduction

AMPARO welcomes this opportunity to respond to the ***Towards an all abilities Queensland*** Consultation Paper and to provide input into the next disability plan for Queensland.

People with disability who have limited or no English language skills and who come from diverse cultural backgrounds frequently encounter significant additional barriers to having their needs met.

This submission will largely focus on these additional barriers and is informed by many years of working people with disability and their families from a broad range of cultural and linguistic backgrounds to address issues of disadvantage and discrimination. It is through this work and recent research with Queensland University of Technology that AMPARO has developed a deep understanding of the significant concerns of this highly marginalised group. More recently AMPARO engaged with a small group of people from a NESB with disability to provide specific input to the consultation to develop a new Disability Plan for Queensland.

The Queensland state government is to be congratulated for developing the following legislation and policy documents that aim to achieve an inclusive Queensland for all.

- Multicultural Recognition Act 2016 and Multicultural Queensland Charter
- Queensland Multicultural Policy, *Our story, our future*
- Queensland Multicultural Action Plan (MAP) 2016-2019
- Multicultural Affairs Queensland Language Services Guidelines 2016

AMPARO believes the principles, guidelines and priority commitments for actions contained in these documents, are highly relevant for Queenslanders from CALD backgrounds with disability and their families and must also inform the development of the next state disability plan.

AMPARO encourages the Department of Communities, Child Safety and Disability Services in leading the consultation process ***Towards an all abilities Queensland***, to ensure the new Disability Plan incorporates actions from the Multicultural Action Plan so that Queensland is truly inclusive and responsive to all people with disability.

About AMPARO Advocacy

AMPARO Advocacy is a small non-profit community based organisation which is funded by the Department of Communities, Child Safety and Disability Services to provide independent individual and systemic advocacy on behalf of vulnerable people from a non-English speaking backgrounds (NESB) with disability, between the ages of 0-65.

Since the December 2014 AMPARO has undertaken targeted work to increase the participation of people with disability and their families from culturally and linguistically diverse (CALD) communities in activities to prepare them for the National Disability Insurance Scheme (NDIS).

AMPARO is governed by a voluntary management committee the majority of whom are people from a NESB with disability and is funded by the Queensland State Government Department of Communities, Child Safety and Disability Service.

AMPARO works closely with vulnerable migrants and refugees with a disability and their families, to assist them to understand important information and to successfully access systems, services and supports that they otherwise would not receive.

Through this work we become aware of the multiple layers of disadvantage which restrict their access to important information and services and limits their ability to fully participate and be

included in family and community life. The systemic advocacy that is undertaken aims to influence positive sustainable changes to attitudes, policies and practices in government and community, so that people from a NESB with disability can have equitable access to information, services and supports.

Ensure Services are Accessible to all Queenslanders.



- **Provide accurate information through appropriate communication and engagement.**

Access to accurate information through appropriate engagement and the provision of language services, including credentialed interpreting and translating, is essential to ensure people from CALD backgrounds with disability are able to understand information about available services and programs.

The lack of accessible information about all state government and non-government services, programs and supports, including transport, was raised as a major barrier by those AMPARO spoke with in our recent engagement.

Effective communication and the provision of accessible information was highlighted as crucial in ensuring equitable access to all services and supports that exist for Queenslanders.

“It took me two years to know the sign for people with disability. Back then I didn’t know that this sign on the outside of buses meant I could use that bus.”

“I didn’t know how to get on the bus”.

“I didn’t know about the companion card until recently, but it has been available for many years”.

People we spoke with raised the difficulties they had understanding information that is not translated or interpreted directly to them, particularly when they were less proficient in speaking English.

“I need someone to explain in my own language about what I can access, we are not used to ‘brochures’, this doesn’t work.”

“We need to be told what is available and what we are eligible for and we need support to access these services”.

“Workers need training in how to work with interpreters in all areas so they can communicate with people and they need to allow plenty of time to do this.”

“Too many workers sometime don’t allow enough time for this, including GP’s and so important information and discussions doesn’t get finished”.

AMPARO’s research with Queensland University of Technology (QUT), shows that language barriers and the failure of services to provide access to professional interpreters continues to be a major barrier to finding and utilising services and the cause of much frustration.

The following comments by research participants highlight these difficulties¹:

“Actually she said she very sad, because she doesn’t know the language, so she doesn’t know how to find the service”.

“When in hospital the interpreter isn’t available any time, so very hard to communicate with doctor”

“My mum doesn’t have the English skill to speak, it was extremely hard. So many times she just crying, she was very upset.”

“...do not know how to find out, how to contact, how to talk”.

▪ **Implement Queensland’s Language Services Guidelines 2016**

These Guidelines highlight that engaging language services ensures better understanding of services, programs, regulatory processes and requirements, and that effective communication reduces longer term costs to governments and their funded agencies. The Language Services Guidelines provide important advice on how to include best practices principles in working with interpreters and bi-lingual staff and translating information and assert the following:

“In order to avoid complaints of discrimination in the provision of services, it is important that government agencies and funded services engage interpreters on appropriate occasions where customers have difficulty communicating in English.”²

The **Queensland Accessing Interpreters Working Group** (QAIWG), of which AMPARO is a long-term member, is made up of community organisations and peak bodies advocating for the provision of high quality language services and equitable access to culturally responsive services in Queensland. QAIWG have developed a template policy and guideline on engaging and working with interpreters to provide a best practice model how human services can best support access to credentialed interpreters for their clients. These templates can provide valuable assistance to organisations to support access to interpreters for clients with difficulty communicating in English. These documents are can be accessed via QCOSS Community Door:

¹ King, J., Edwards, N., Correa-Velez, I., Hair, S., and Fordyce, M. (2016). Disadvantage and disability: Experiences of people from refugee backgrounds with disability living in Australia. *Disability and the Global South (DGS)*.

² Multicultural Affairs Qld. (2016). Language Services Guidelines, 2016.

Culturally Competent and Skilled staff

People with disability from CALD backgrounds and their families require staff in non-government and government organisations to be highly culturally competent and able to effectively respond to the language and cultural needs of all clients.

AMPARO has found that people with disability and their families, from new and emerging communities or those who have settled under Australia's Refugee and Humanitarian Program, face particular challenges and require more intensive support to ensure their needs are met.

Inadequate service responses that fail to understand the additional needs of individuals from CALD backgrounds with disability and their families are common, and highlight the need for the Queensland Government to implement its commitment to "build staff and service-level cultural capability and promote the values of the Multicultural Queensland Charter".³

The following story shows a lack of cultural competency, which is common across state and federally funded agencies and highlights the need to build the cultural capability of all staff.

AMPARO is currently working with a young man from Karenni background whose family was originally Myanmar, and who arrived in Australia 3 years ago. This young man has a significant hearing impairment, however information about this was not provided to Centrelink and so he was required to attend English classes and appointments with an employment agency and to actively seek work.

Despite the employment agency paying for additional hours of Adult Migrant English classes his English proficiency was not improving. Unfortunately the employment agency was engaging an interpreter that did not speak the language of the Karenni people and whilst he could understand some of what was spoken he could not communicate in this language. The employment agency was unaware of the extent of his hearing impairment, however they were also not taking steps to investigate why his English language was not improving.

As a result of AMPARO's involvement appropriate medical hearing tests were conducted and reports were provided to Centrelink, this led to a job capacity reassessment. He is now awaiting hearing aids before he can recommence English language classes and his job capacity has been appropriately reduced. The employment agency is also aware of the appropriate language interpreter to engage, as well as the importance of engaging an onsite interpreter to ensure effective communication.

Knowledge of disability specific supports

Given that those who are new to Australia are initially more likely to be connected with services for migrants and refugees, it was raised as equally important for workers in settlement and other multicultural agencies to have a much better understanding about the services, subsidies and

³ Department of Communities, Child Safety and Disability Services (2016). *Queensland Multicultural Policy, Our story, our future*. Queensland State Government.

supports that are specifically available for people with disability and their families. Their experiences were, that this was often not the case.

They stressed that when people are new to Australia they needed more than information, they needed direct support from case managers who could support them to learn about and access many services, including understanding how to use the public transport system and other transport options for people with disability.

They also spoke of the need for workers in many areas to have good knowledge about disability generally and the rights of persons with disability in the Australian context. The suggestion was made that multicultural agencies could have a number of skilled disability specific workers to support case managers working with individuals with disability and their families.

“People with disability can be shy and lack confidence and need help to express themselves. Let them know there are people here to help them”.

“Families need more information about disability and caring for the person with disability”.

“All workers, including settlement workers need to understand the needs of people with disability. Workers in health and education also need training and information on the needs of people with disability”.

“Every year an expo or forum could be held to inform members of CALD communities in Queensland about services and support: What is available for people with disability”.

One person made the following comment when discussing the need for organisations to have a workforce that can apply culturally competent person centred approaches to delivery support, *“they need a flexible framework that recognises that every person is different”.*

Recommendation: The new Disability Plan must include strategies to give effect to the policy commitments and actions in the following:

- Queensland Multicultural Policy, *Our story, our future*
- Queensland Multicultural Action Plan (MAP) 2016-2019
- Multicultural Affairs Queensland Language Services Guidelines 2016

▪ **Increase the Availability of Accessible and Affordable Housing**

Locating suitable accessible housing for many people from CALD backgrounds with disability is extremely difficult. Accessible housing for people with disability is limited generally and very expensive in the private market. People with physical disability may require specific modifications to private rental accommodation, which can be prohibitive because of the high cost and the lack of support by some landlords.

One person we engaged with who had limited mobility, spoke about living in private inaccessible housing and how for a number of months she was forced to live in a private hostel as she was not able to find alternative housing with no steps. She spoke of this time as being extremely difficult and how she had become very unwell physically as she could not bring herself to eat the meals that were provided at the hostel, *“...it was so terrible.”* She was fortunate to be able to leave the hostel, when she was supported to find more suitable accommodation. Many other people with disability remain trapped living in unsuitable hostel accommodation because of the limited affordable and accessible housing that is available.

AMPARO often works with refugees with disability and their families who are living in private rental accommodation that places them at risk physically or keeps them trapped inside because they are unable negotiate stairs. Securing accessible public housing in Queensland is extremely difficult, with a wait list of many years and little hope of being allocated housing unless the person is listed on the very high priority list.

Furthermore, many individuals with disability live in large families where their combined income levels make them ineligible for public housing, so they are forced to live in inaccessible, and expensive private rentals. Limited understanding of public housing processes and tenancy rights and a lack of assistance, further impacts on their housing options.

AMPARO supports the rights of people with disability in relation to housing as articulated in, *A place to call home: a housing issues paper for people with disability*, and that includes:

- Being able to choose where, how and with whom they live.
- Having access to housing that 'enhances the independence and social and economic participation of people in family and community life.
- Keeping the "provision and management of housing separate from provision and management of paid support."⁴

Queenslanders with Disability Network (QDN), National Shelter and Griffith University in *A place to call home: A housing issues paper for people with disability*, identifies eight key areas for action that should be considered when developing strategies to increase access to housing for Queenslanders with disability in the new Disability Plan.

Recommendation: State and Federal governments to work together to address key areas of action identified in *A place to call home: A housing issues paper for people with disability. Strategies relevant to the State Government to be included in Queensland's new Disability Plan.*

▪ Address Barriers to Education and Employment

Attitudes

In discussing an all-inclusive Queensland for people with disability and access to education, in our recent engagement people raised the need to educate their diverse communities, including church leaders and community leaders about disability.

"All communities need to be educated about the capacity of people with disability so they respect people with disability." It is important to raise expectations and understanding of disability."

One person stated that if only people would "...put themselves in the shoes of the person with disability", they would treat people with disability in their communities much better. Others stated

⁴ Queenslanders with Disability Network (QDN), National Shelter, Griffith University (2016). *A Place to call home: A housing issue paper for people with disability*. August 2016

that their communities were not welcoming of people with disability and may *“ignore them and understanding is not there”*.

AMPARO's experience is that many people who are new to Australia are unaware of the opportunities and available supports for people with disability to access training, education and employment. The lack of appropriate information about these opportunities is often not provided to people from CALD backgrounds with disability and their communities and expectations for people with disability may be low.

Physical Access

Some participants spoke of the difficulty undertaking placements as part of their university qualification, as many non-government services are still located in inaccessible office spaces. This was raised as an issue for many people from CALD backgrounds with disability who are undertaking tertiary study, and clearly limits opportunities for learning and future employment.

Another barriers to placements for students with disability included requirements that students be able to drive the organisation's motor vehicle, *“they would not allow me to drive my own modified vehicle, but also said it would cost too much to modify the work vehicle”*.

Participants in the discussion raised concerns about the lack of support for people with disability attending TAFEs and the need for improvements in this area.

There were concerns raised about the lack of support to find employment from disability employment agencies – *“doesn't seem to go anywhere”*. Others suggested that places of employment were often not *‘disability friendly’* and that the workers from the employment agencies often lacked understanding of the disability and the impact of this on them.

Participants in this discussion said that discrimination was sometimes obvious, but more often subtle and *‘sneaky’* and there was nothing you could do to prove this. One person said that the employment agency that was assisting them to find employment had organised for them to undergo a work trial for a few hours had actually worked a full day, but had not received any payment.

Access to Interpreters

AMPARO assists many families from CALD backgrounds who have children with disability attending the state school system. Unfortunately it is common practice for schools to not to engage credentialed interpreters when speaking with parents who have limited English proficiency. Schools often ask the child to interpret what the teacher is saying to the parent, even in parent teacher interviews and providing feedback about the child performance. Alternatively the school will ask another parent to act as an interpreter, even when they speak a different dialect.

This is inappropriate and unprofessional conduct and Queensland Education must ensure staff adhere to the Multicultural Affairs Queensland, Language Service Guidelines of 2016. Parents are often prevented from being fully informed about educational options and are unable to make informed decision about their children's education because of this practice.

- **Improve data collection**

Unfortunately, information collected as part of the Disability Services National Minimum Data Set (DS NMDS) has long been inadequate and limited to country of birth, to determine those born in predominately non- English speaking countries. In addition to this, services have not always provided this basic information. Furthermore, quality service standard

indicators have generally not encompassed specific measures to address access and equity issues for people from CALD backgrounds with disability.

The Queensland Government in its Multicultural Policy, *Our story, our future*, has identified the need for agencies, to “*improve their knowledge and understanding about customers’ diversity through better collection of customer information and planning.*” This is necessary to be able to effectively plan for the delivery of services and programs and must occur across all state government departments and their funded agencies.

AMPARO is pleased that the Queensland’s Multicultural Policy lists as a minimum country of birth, preferred language and interpreter required, as information to be collected and that agencies are expected to work towards collecting information about ethnicity, or cultural identify⁵.

A commitment to improve the collection of data as outlined in this policy, must be included in the new Disability Plan to:

- Monitor levels of access to services by people from CALD backgrounds with disability
- Inform targeted information/ education strategies with specific diverse communities
- Ensure effective policy development and planning
- Inform the development of workforce strategies to: increase numbers of skilled bicultural workers, and credentialed interpreters and translators with disability awareness and create career pathways to support retention of credentialed interpreters.
- Ensure agencies can plan for and meet the increase in the demand for interpreters given the expected increase in the numbers of people from NESB with disability accessing mainstream supports and services under the NDIS.

▪ **Improve the Transport System**

According to *Towards an all abilities Queensland*, **23.9%** of Queenslanders with disability avoided using public transport due to their disability. The impact of this on Queenslanders with disability ability to participate in family and the life of their communities is unacceptable.

The high cost of transport and difficulties accessing and understanding the transport system for people with disability and their families who are new to Australian and particularly for those with limited English proficiency, was raised as a significant issue in joint research undertaken with Queensland University of Technology (QUT)⁶. The research paper, ***Disadvantage and Disability: Experiences of people from refugee backgrounds with disability living in Australia***, discusses the impact a lack of access to public transport has on people’s ability, to attend important medical appointments, take children to school, participate in community events and access other important services and supports.

⁵ Department of Communities, Child Safety and Disability Services (2016). *Queensland Multicultural Policy, Our story, our future*. Queensland State Government.

⁶ King, J., Edwards, N., Correa-Velez, I., Hair, S., and Fordyce, M. (2016). *Disadvantage and disability: Experiences of people from refugee backgrounds with disability living in Australia. Disability and the Global South (DGS) Vol.3, No.1*.

There were many issues raised in our recent discussion about difficulties in accessing public transport, with the lack of appropriate information about the transport system being a significant factor in restricting access.

The lack of physical access to some train stations and the fact that this meant people were often forced to use the more expensive option of taking a taxi for part or all of their journey, was also discussed.

“I did not know how to ask about getting on to the train or that they could put a ramp out for me. No one told me these things.”

“Not all train stations are accessible, they should make them all accessible for people with disability.”

➤ **Taxi Subsidy Scheme**

All participants in the consultation could relate to the following comment and similarly were not aware of the Taxi Subsidy Scheme for months and years after arriving in Australia.

“No one explained about this to me”. “There are lots of subsidies but when I was first in Australia no one gave me this information, it took me years to find out about the taxi subsidy scheme and that I could access this.”

All of those included in recent conversations were potential NDIS participants and they were concerned to hear that once accessing the NDIS they would not be eligible for the Taxi Subsidy Scheme, and that accessing transport assistance to catch taxis would need to be included in their plan with the NDIS.

They were concerned that it would be difficult to plan 12months ahead of time, how often and where they would need to travel by taxi. They did not know how this would allow them to attend unplanned social outings or unexpected medical appointments.

Recommendation: The Queensland Government to:

- Review the decision to include the TSS component for NDIS participants as part of the NDIS Bilateral Agreement between the Queensland and Commonwealth Government and
- Suspend the removal of the TSS card to NDIS participants whilst the current situation is reviewed.

▪ **The Built Environment**

Closely related to the above issue is the impact of the built environment on options of transport that are available for people from CALD backgrounds with disability. Many streetscapes do not have adequate, footpaths that are safe, level and clear so that whilst all Brisbane City Council buses and many train stations are now accessible, travelling independently from a ‘drop off point’ to your destination, can be difficult at best, dangerous or impossible.

Inaccessible streetscapes can make it necessary to travel by train or bus for only part of the journey, and necessitate catching a taxi for part of or all of the journey. Whilst all participants commented that generally physical access to the built environment has improved, they also discussed the limitations they experience because many non-government and private businesses are not physically accessible.

- **Better Access to Health Care**

The following comments highlights the important of GPs and hospitals providing access to credentialed interpreters and understanding that when working with interpreter's additional time must be allowed for this to be successful for the patient.

"GPs often do not provide enough time to explain to the person what is going on for them. Some interpreters are not familiar with medical terminology and sometimes family members are used. This means communication can be very difficult for people."

It can be very difficult to get to a specialist and accessing interpreters at hospital can be hard, because you have to wait and the doctor is not available on time so even when the interpreter is booked the interpreter may only be at the appointment for a short time as they are booked to go to another appointment.

Participants spoke of the common practice of hospitals sending letters to notify patients of date and time of appointments and you are asked to confirm this, but the letter is in English and when you don't understand you miss the appointment and have to wait another 6 months for the next appointment.

"So many times the appointments are cancelled as people do not understand".

A settlement case worker who themselves has a disability spoke of the many people he has come across where this has happened and their need for significant additional support to follow up and make new appointments. He also raised the issue that the hospital forms are complicated and people with limited English proficiency need support to complete these.

"It is also very difficult for people with disability from CALD backgrounds to understand the difference between the public and the private hospital systems."

"There are no interpreters provided by dentists, so people do not understand treatments that they are having."

Another person said that finding a doctor that will bulk bill is very difficult and that when you have a low income and are receiving the disability support pension, this is necessary.

One person said that the Mater Hospital had produced videos in other languages about, how to access a GP and that this was very helpful for members of her community. She thought that this was something which could be replicated by other hospitals and state government departments.

People with disability who have complex medical and support needs, for whom language is a significant barrier, and who have experienced extensive trauma are especially vulnerable and often encounter additional barriers to accessing quality medical care. According to the findings of Dr Nicholas Lennox's research, people with disability often encounter additional barriers to accessing quality medical care, with the most significant including, communicating with patients and obtaining patient histories. Other barriers include: consultation time constraints, examination difficulties, inadequate knowledge of services and resources, complexity of health needs, patients' poor compliance, and the General Practitioner's (GPs) lack of training and experience. Furthermore, some people with disability may not recognise that what they feel is abnormal, and poor continuity of care can mean that support staff are unfamiliar with the person's usual behaviour, appetite and activity levels.

Doctor Lennox's research supports AMPARO's experience that people from refugee backgrounds with disability face similar barriers to accessing effective health care, with GPs experiencing

difficulties with communication, difficulty accessing past medical records and the complexity of health care. However, for people with a disability refugee background these barriers are multilayered, taking different forms and occurring simultaneously. Their disadvantage and vulnerability is magnified by the additional barriers.

Moreover, some GPs have not previously worked with refugees, are unaware of cultural needs and have little or no experience of engaging and working with professional interpreters. Even standard consultations involving interpreters take longer than regular consultations and GPs may not be willing to allocate the required additional time. As a result, GPs may not understand the nature or complexity of the individual's medical needs and may fail to explain the condition, the consequences and the treatment options to the person. In short they may not receive adequate health care and chronic health issues can go untreated.

Participants suggested that, *“general practitioners would benefit from additional education and training on the needs of diverse communities in their local areas.”*

Recommendation: Develop the cultural capability of health care staff to know how to effectively engage and work with interpreters as this is crucial to providing good health care. Provide health care workers with regular and ongoing cultural competency training so that they can effectively respond to the health needs of people from CALD backgrounds with disability.

