



**A submission to the Department of Education,
Employment and Workplace Relations
on the
'National Mental Health and
Disability Employment Strategy
Discussion Paper'**

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Anglicare Australia welcomes the opportunity to make a submission on the proposed National Mental Health and Disability Employment Strategy as part of the Commonwealth Government's social inclusion agenda. Anglicare agencies provide a range of services to people with disabilities and mental illness, including employment and accommodation support,¹ social enterprises,² along with research on the links between disability, poverty and other forms of disadvantage.³

As noted in the Discussion Paper, there have been several calls for a national strategy. Anglicare member the Brotherhood of St Laurence made a contribution to the 2005 national inquiry into employment and disability (including mental illness) by the Human Rights and Equal Opportunity Commission (HREOC). In our view, this inquiry remains a definitive treatment of the various issues involved (especially for employment in the open market) with practical recommendations that should inform a national strategy. The Inquiry made 30 specific recommendations which Anglicare Australia fully endorses. In particular, we note the priority areas which HREOC has identified as minimal requirements for any effective strategy. Namely:

- developing a whole-of-government approach to ensuring appropriate financial and practical support to people with disability, including a streamlined system to provide adequate:
 - income support;
 - transport, equipment and health care subsidies and concessions;

¹ Examples include Anglicare South Australia, EPIC Employment Service in Queensland and the Samaritans Foundation in Newcastle.

² Anglicare member WorkVentures is a founding member of Social Ventures Australia.

³ A recent example is Teresa Hinton's *Forgotten Families: raising children with disabilities in Tasmania*, Anglicare Tasmania, 2007.

- workplace supports and modifications; and
 - personal care in the home and workplace.
- improving the effectiveness of government-funded employment service delivery to people with disability and employers (including recruitment assistance and access to supports on an as-needed basis);
- improving transition-to-work schemes for people with disability in secondary, tertiary and vocational education and training institutions;
- ensuring better relationships between private sector employers and government-funded information, recruitment and employment support services;
- increasing recruitment and retention of people with disability in the public sector (at the Commonwealth, State, Territory and local government levels); and
- developing a benchmarking, monitoring and reporting system to ensure accountability and ongoing improvement to the incentives, supports and services available to people with disability and employers.⁴

Given our agreement with HREOC's analysis and recommendations, we shall not rehearse the arguments and empirical evidence contained in the inquiry's two reports and issues papers, but focus instead on broader matters of principle and moral argument. We also request that the general points made in two earlier submissions to the employment services review be taken in account (attachments A and B.)

Disability and participation: two contestable concepts

⁴ Human Rights and Equal Opportunity Commission, *WORKability II: Solutions – People with Disability in the Open Workplace*, Sydney, 2005, p. 15.

As noted throughout the relevant literature, ‘disability’ is a term subject to several interpretations and applications. The matter is further complicated when ‘disability’ is coupled with ‘mental illness’ (or, as in the HREOC inquiry, when the latter is taken as one form of psychological disability). While it is stating the obvious, the point should still be made that the way in which the term is used will significantly affect the direction and detail of any strategy to increase employment for the identified groups.

In its report, HREOC noted that since there was no single way to address the needs and concerns of the diverse range of people with disabilities, its analysis would focus on common themes.⁵ This is a valid approach, but not the only one possible. The clear disadvantage is that what is common to all groups in an otherwise heterogeneous population may not adequately account for, or will simply ignore, what is distinctive about any one of them.

Even with as comprehensive a framework as the International Classification of Functioning, Disability and Health (ICF) — where disability is treated as ‘a multidimensional and universal experience’ containing ‘a wide range of specific purpose definitions and applications [that] can be located, developed and related to each other’ — perspectives on the subject ‘may vary with environment, personal experience and professional training’.⁶

The 2005 UK report on disability life chances worked from the following definition:

⁵ HREOC, p. 50.

⁶ Australian Institute of Health and Welfare, ICF Australian User Guide, Version 1.0, AIHW, Canberra, 2003, p. 1.

Disability is defined for this project as the disadvantage experienced by an individual as a result of barriers (attitudinal, physical, etc.) that impact on people with impairments and/or ill health.⁷

Not a matter of mere semantics, this unavoidable ambiguity and complexity has important practical implications. Two fundamental issues are the very identification of disability/mental illness and the methodology of any attempt to develop an overall strategy.

On the first question, it is evident that the broader the working definition, the more people will be covered by it, and affected by any subsequent policy. It is a commonplace that the move of many older male workers on to the Disability Support Pension (DSP) during the period of its greatest increase — between 1972 and 2004 the number of people receiving the DSP went from 138,800 to 696,700, well above the increase in both the disability and the total working-age populations — reflected poor employment conditions generally, rather than any increase in what had previously been regarded as ‘disability’.⁸ It involved, in effect, a redefinition of the word, and had the effect of keeping official unemployment figures down. This was implicitly accepted by the Howard Government’s Welfare to Work reforms which sought to reduce the numbers on the DSP by altering eligibility requirements.

As just noted, the general difficulty is exacerbated when mental illness is added to the disability population (beyond strictly psychiatric disability), and where statistics are based on self-reported survey data. On the latest ABS data, for

⁷ Prime Minister’s Strategy Unit, *Improving the life chances of disabled people*, Final Report, January 2005, p. 9.

⁸ See, for instance, L. Cai, and R.G. Gregory, ‘Labour market conditions, applications and grants of Disability Support Pension (DSP) in Australia’, *Australian Journal of Labour Economics*, Vol. 7, No. 3, 2004.

example, it seems that fully 11 per cent of Australians have ‘a long-term (that is, lasting or expected to last 6 months or more) mental or behavioural condition’.⁹

Secondly, the circumstances of, and challenges for, individuals with quite distinct disabilities — say, a middle-aged person with multiple sclerosis and a teenager with schizophrenic episodes — are such that a single strategy runs the risk of encompassing both too much and too little. To accommodate all groups recognised as having some form of disability will require high-level conceptualisation that of itself may not generate useful, specific policy measures; while any more detailed recommendations may apply only to certain members of the groups in question. The overall *objective* may be clear enough: to increase the ability of people with disability and/or a mental illness to participate in employment, education and training and the community generally; but an effective strategy has to operate at a much more detailed, empirical level.

A related concern is what, exactly, should be understood by ‘participation’. In public meetings this year, the Parliamentary Secretary on Disabilities and Children’s Services, Bill Shorten, has indicated a degree of flexibility about what constitutes social inclusion for people with disabilities. For example, in an address to the Australian Employers Network on Disability, he expressed his desire to see all people with disability living ‘long lives of meaning and quality’, with decent employment a central factor.¹⁰ But, as Mr Shorten has also acknowledged, for some people employment may not be a realistic option — though such people still deserve to have a purpose in life — ‘a reason to get out of bed’;¹¹ while for others (such as many in ‘Business Services’) employment may be possible, but unproductive, a form of de facto welfare.

⁹ Australian Institute of Health and Welfare, *Australia’s Welfare 2007*, Canberra, AIHW, 2007, pp. 362-3.

¹⁰ Reported on the Australian Employers Network on Disability website, at www.employersnetworkondisability.com.au/index.php?option=com_content&task=view&id=174&Itemid=1

¹¹ Bill Shorten MP, address to the *Reforming Welfare to Work* forum, Parliament House, Canberra, 15 February 2008.

Mr Shorten's remarks on social inclusion are not at odds with the Rudd Government's general policies on maximising employment and productivity, but do indicate the 'creative tension' that exists between the moral and economic justifications for the overall agenda.¹² In the words of Deputy Prime Minister Gillard:

I want to stress one thing about our social inclusion policies — they won't be small-scale stand-alone community-building programs, they will be linked directly to the Government's wider economic development and employment participation objectives ... My portfolios cover a wide range of policy areas, and some have suggested they're a slightly unusual combination. But the reason why they've all been joined together is simple. In today's world, the areas covered by my portfolios — early childhood education and childcare, schooling, training, universities, social inclusion, employment participation and workplace cooperation — are all ultimately about the same thing: Productivity.¹³

The obvious dilemma for the Government's social inclusion agenda is that the moral and economic objectives and arguments may not always be consilient. The economic imperative is for labour market flexibility, lower taxation for companies

¹² In his June 2008 speech on the Rudd Government's 'unifying political philosophy', Craig Emerson MP, the Minister for Small Business, Independent Contractors and the Service Economy, gave an extended exposition of 'the morality of self-interest' as the foundation of what he termed 'market democracy'. The core of his argument is contained in the following two sentences: 'In [the ALP's] political philosophy the role of policy makers is to allow the market to create prosperity and out of that prosperity to expand opportunity, not the welfare state ... Traditional Labor values of prosperity, fairness and compassion fit well with supporting an open, competitive economy that rewards effort, risk-taking and entrepreneurship and where opportunity, not welfare, is available to all.' As commentator Ross Gittins has observed, Dr Emerson's prescription is 'merely an economist-centred view of the universe, focusing almost exclusively on material concerns and materialist ambitions, with the implicit assumption that the world consists of markets and not much else.' (R. Gittins, 'Labor should go back to the drawing board', *Sydney Morning Herald*, 23 June 2008.)

¹³ Julia Gillard, Speech to the Australian Industry Group, 3 December 2007. Reprinted in the *Australian*, 5 December 2007.

and high-income earners, and an increasing reliance on the private sector and user-pay principles for many services. The moral imperative is that 'all Australians need to be able to play a full role in Australian life, in economic, social, psychological and political terms'.¹⁴

If there *is* a conflict, the implication from Ms Gillard's position (reiterated in several oral and written statements) is that the needs of the market will prevail over those of society. Specifically, that employment which is not productive will receive little or no support, even where it contributes to individuals' quality of life and general community participation. As Mrs Thatcher famously explained: 'There is no way to buck the market.'

Employment and employability: the skills question

One of the main arguments for increasing employment opportunities for people with disabilities is that Australia is experiencing a significant skills shortage and the exclusion of disadvantaged groups from economic participation is a serious waste of resources. Dr Rob Salter has succinctly made this case (again, on the assumption that moral and economic interests can be integrated):

What drives us to care for the disadvantaged among us? Usually it's a belief that this is right or just, or perhaps we've witnessed, read or heard about someone in need, and it's tugged at our heart strings.

It's good that we have these motives: kindness and justice are foundation stones of a civilised society.

But they're not the only reasons why we should provide for the disadvantaged. Increasingly, experience and research is demonstrating that it's also good economics, that if we invest more in those who are currently struggling with debilitating problems we can help them overcome those

¹⁴ Julia Gillard MP and Senator Penny Wong, 'An Australian Social Inclusion agenda', ELECTION 2007, at www.alp.org.au/download/071122_social_inclusion.pdf

problems and become more functioning and contributing members of society. Or we can reduce what society has to spend to meet their needs.¹⁵

Disability advocate Mark Bagshaw has been arguing for many years that treating people with disabilities as both producers and consumers makes very good business sense — some \$900 billion worldwide. He has estimated that in Australia government has been spending over \$11 billion on paying people not to work; while the broader community has been losing \$41 billion in potential productivity.¹⁶

Clearly, paying people not to work makes little economic sense. Clearly, too, it is financially as well as socially preferable to have people doing something constructive than being idle or worse (imprisoned, for instance). But it is no easy matter to assess the 'lost potential productivity' this exclusion represents — especially if a figure is reached through extrapolation from current unmet demand for skills. The simple, awkward question has to be asked: to what extent are those with disabilities and currently unemployed able to acquire the skills that are in demand? Some of the disabled are able to function at a very high level with appropriate supports (this is so for many with physical impairment and for some forms of mental illness). Others are not. They and the wider community might be far better served in some variant of the 'Alternatives to Employment' programs.

As noted by the Council of Australian Governments, 'In today's labour market, obtaining an initial Year 12 or equivalent qualification is critical to subsequent

¹⁵ Rob Salter, 'A social investment that pays dividends', *On Line Opinion*, 21 April 2008, at www.onlineopinion.com.au/view.asp?article=7251

¹⁶ See, for instance, 'People with disabilities — a "whole of life" approach', at www.spinalinfo.nsw.gov.au/_data/page/49/2B_MarkBagshaw.pdf

economic opportunities. And with an increasing premium on skills, obtaining a post-school qualification is increasingly desirable.¹⁷

Yet as the Discussion Paper itself makes clear (p. 10):

People with a disability are generally more likely to access lower-level qualifications (certificate II or lower) and are less likely to complete their training than the general vocational education and training population. This is particularly true for people reporting a mental illness, who were the least likely to complete a qualification.

This is not to embrace pessimism. But it is to argue that the overall case for participation should not depend on — still less be reduced to — potential economic benefits. Anglicare agency the Brotherhood of St Laurence has argued:

[S]ocial inclusion must be about more than being productive. It should also recognise the worlds of caring, culture, education and other civil society endeavours. Here, citizen entitlements will differ across the life cycle. A complete social inclusion framework will support citizens realising their full potential in each transition from their early years to retirement and beyond.¹⁸

The ideal of congruent social and economic policy should be retained; but in developing a workable employment strategy for those with disabilities and mental illness, it is essential to appreciate that the ideal should act as a guide, rather

¹⁷ Council of Australian Governments, *Human Capital Reform: Report of the COAG National Reform Initiative Working Group*, Section Three, February 2006, at www.coag.gov.au/meetings/100206/human_capital_reform_report_COAG_100206.pdf.

¹⁸ P. Smyth, 'Rudd Social Inclusion also makes economic sense,' *Eureka Street*, 14 April 2008, at www.eurekastreet.com.au/article.aspx?aeid=6535

than a blueprint. The value of helping individuals lead a dignified life is not a function of higher growth or greater consumption.

The disability strategy and the new employment services model

As noted in our June submission to the Employment Services Review, there is some confusion about the differences between (and criteria for differentiating) the proposed streams two to four in the new model. With regard to the current Discussion Paper, our concern is with the likely overlap between would-be stream four clients and those who might benefit from a disability strategy.

Several Anglicare agencies have noted that a significant number of people using the Personal Support Program (PSP) and the Job Preparation and Employment and Training Program (JPET) are suffering from a mental illness. A 2007 study for the Brotherhood of St Laurence, for example, found that 'nearly 4 out of every 5 (78%) participants [in PSP] suffered from some type of mental health problem (depression, anxiety or a personality disorder)'.¹⁹ Given that the present program is capped, with long waiting-lists, it is reasonable to suppose that the new general model (scheduled to begin in July 2009, with no cap) will take on many people who might better benefit from attachment to a member of the (also capped) Disability Employment Network (for which new contracts are not due until February 2010).

Although we acknowledge the Government's reasons for the differing timetables, the degree of overlap between many potential clients poses an obvious challenge — especially in view of the mooted amalgamations and consortia that may be needed for many specialist services to engage with the new general employment system. If at all possible, it would be desirable for the strategy and the new model to be brought into greater alignment.

¹⁹ D. Perkins, *Making it work: Promoting participation of job seekers with multiple barriers through the Personal Support Programme*, Brotherhood of St Laurence, Fitzroy, December 2007, p. 28.

One particular recommendation in this regard — which has been canvassed by several other peak bodies — is that DSP recipients must not be financially penalised for seeking work; if they are unsuccessful in their endeavours, they should not lose their pre-existing pension benefits.

The realities of prejudice

In discussing what was then a proposal for the HREOC inquiry, the Human Rights Commissioner Dr Sev Ozdowski made the following observation:²⁰

Comments received so far have strongly supported conducting such an inquiry. But I know that some stakeholders, particularly employers, but also perhaps some people in the disability services sector, may have some reservations.

There was limited employer representation on the inquiry's working group. As the primary purpose of a mooted 'job audition scheme' was to provide an incentive for employers to give people with disability an opportunity to prove their capabilities, this did not presage well. Attitudes and fears (primarily about cost and risk, but also much more) were strongly held. In its submission, the Australian Chamber of Commerce and Industry asserted that any such scheme would have to be 'voluntary, cost neutral, terminable at any time and without any obligation to employers'.²¹

The comparable UK inquiry was less equivocal (and not only about employers). Attitudinal barriers are deeply entrenched, with mental health a particular concern for employers, relating not only to such issues as risk and cost, but also 'interactions with colleagues and customers'.²²

²⁰ Sev Ozdowski, Speech to the 2004 ACROD National Convention, at www.hreoc.gov.au/disability_rights/speeches/2004/acrod.htm

²¹ HREOC, p. 97.

²² Prime Minister's Strategy Unit, p. 185.

Even more explicit was the 2007 report by the UK Equalities Review, which noted at one point:

Although it has become increasingly unacceptable to express prejudiced views in public, the old attitudes persist unspoken and are registered in increasingly subtle and insidious ways.²³

Legislation can eliminate only the most formal or overtly egregious practices. The report mentions a survey of 122 recruitment agencies which revealed that more than 70 per cent had been asked by clients to avoid hiring pregnant women or those of childbearing age.²⁴ Anti-discrimination legislation itself can be counter-productive. Prominent British businessman Alan Sugar has specifically questioned the long-standing law stating that employers cannot ask in interviews whether a candidate has, or plans to have, children. Mr Sugar claims that employers 'would like to ask, "Are you planning to get married and have any children?" These laws are counterproductive for women, that's the bottom line, you're not allowed to ask, so it's easy — just don't employ them.'²⁵ This applies a *fortiori* to people with a disability or mental illness.

The report concludes:

Progress has been made, but entrenched inequalities in education, employment and quality of life remain, prejudice towards certain groups is

²³ *Fairness and Freedom: the final report of the Equalities Review*, Crown Copyright 2007, p. 95, at archive.cabinetoffice.gov.uk/equalitiesreview/upload/assets/www.theequalitiesreview.org.uk/equality_review.pdf

²⁴ *ibid.*, p. 72

²⁵ Kira Cochrane, 'You're fired', *Guardian*, 23 April 2008.

still a strong feature of our society and future trends indicate that there are threats on the horizon which may push us backwards rather than forwards.

Specifically,

... progress is being made to remove barriers to participation by disabled people, but on current trends it is unlikely that the employment disadvantage they face will ever be overcome.²⁶

Which suggests that the most difficult term of reference to address in the Discussion Paper is (b): achieving attitudinal change.

The primary role of government

None of this should deter us from developing as comprehensive a strategy as possible; but it does suggest the need for caution and a realistic assessment of what in practice can be achieved.

Both the HREOC and British reports concur that non-discriminatory packages are still largely confined to the public sector and large private sector employers. As the HREOC report recommends:

Real change also requires leadership from all levels of government, employers, employment services and groups representing people with disability. The Commonwealth government must start this process by becoming a 'best practice' employer itself. The Australian Public Service Commission and the Departmental heads of Commonwealth agencies must take responsibility for increasing the number of employees with disability and for providing a model for the private sector to follow.²⁷

²⁶*Fairness and Freedom*, p. 6.

²⁷ HREOC, pp. 11-12.

This is especially critical given that, as the interim report pointed out, the employment of people with disabilities in the federal public service had significantly declined over the previous decade.²⁸ While both Commonwealth and state public services were required to report on their performance in relation to inclusion of people with disability, there was no accountability for poor results, and no strategy in place to improve these results.

Short of legislating for quotas — which would be politically difficult for government, let alone the private sector — the only two ways of encouraging employers to take on more people with disabilities or mental illness are demonstrating economic necessity or advantage; and moral suasion. The first encounters resistance arising from general scepticism (as about the possibility of the necessary skill acquisition) and prejudice; the second arising from ethical indifference (fuelled by the official promotion of opportunity, prosperity and ‘individualism’). As a HREOC representative noted in a talk to the 2006 ACE Conference:

At a time when there is a national skills shortage and record low unemployment rates for people without disability, there is no excuse for the continuing high rates of unemployment and exclusion of people with disability from the open workplace.²⁹

This may be so. But neither is there an excuse for poverty, deprivation and other forms of social exclusion. It is, however, more than heroic to believe the case can be argued in the kind of economic terms that are the main, if not sole, linguistic currency of all major political parties in Australia.

²⁸ Human Rights and Equal Opportunity Commission, *WORKability I: Barriers – People with Disability in the Open Workplace*, Sydney, 2005, section 2.8.

²⁹ Christina Ricci, ‘Working Towards a national disability employment strategy’, Speech to Destination 2010 — ACE Conference 2006, 6 September 2006.

Given the tradition of Christian social justice theory, Anglicare Australia has no hesitation in putting moral argument first and foremost. We begin from a principled conviction about the inherent dignity of all human beings, and the essential part played for most people by meaningful adult work in helping realise and maintain that dignity. In the light of which, we believe that a strategy to encourage and facilitate the greater employment of people with disabilities and mental illness can and should be founded on ethical considerations, independent of any economic benefits that may or may not also accrue.

The strategy is part of the Government's social inclusion agenda. That agenda is grounded in a commitment to integrate social and economic policy, but does not require an ideal manifestation. The maximum possible participation of people with disabilities and mental illness is an objective we should aim to realise as *citizens*, whatever the state of the economy or the transient enthusiasms of public office.

About Anglicare Australia

Anglicare Australia is a nationwide network of locally based Anglican organisations serving the needs of their communities.

From Groote Eylandt, NT to Kingston, Tasmania, from Bondi to Bunbury, Anglicare member agencies are committed to caring for people in need and seeking social justice for all.

Anglicare agencies work in close cooperation with other community organisations and some receive funding from Federal, State and Local Governments to provide a wide range of services including:

- residential and community aged care
- foster care, Out-of-Home Care, adoption and child care
- family relationship support programs

- support for people with disabilities
- financial counselling and low/no interest loans
- family support and relationship counselling
- treatment for drug and alcohol dependence
- family violence
- youth programs
- emergency relief
- employment services
- community housing and emergency accommodation for homeless people
- community development through building communities of hope
- working with Aboriginal and Islander Australians
- assistance to refugees and migrants
- social research and advocacy