



Between 19 October and 7 December, Disability Advocacy Network Australia ran the "Advocates Zoom In On..." series of weekly hour-long discussions via Zoom - creating an opportunity for interested advocates to take a closer look at and speak about a number of key topics emerging in the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Disability Royal Commission or DRC) and its examination of abuse, violence, exploitation and neglect.

Participants were encouraged to share their insights, observations, stories and case studies, and the discussion questions each week included opportunities to share perspectives on what recommendations advocates would like to see being made by the DRC, in relation to the topic in focus.

Identifying details have been removed from the edited transcript below. Participants in each session are identified as advocates from their State and Territory, and are also numbered, where multiple advocates from that jurisdiction took part. Participants were informed that sessions would be recorded to capture their insights and observations. Live captioning of this discussion was provided by [AI-Media](#). Care has been taken but errors may exist in the transcription.

DANA would like to acknowledge the Traditional Owners of the various lands around Australia from which advocates participated in these virtual meetings and pay our respects to Aboriginal and Torres Strait Islander Elders, past, present, and emerging.

DANA would also like to acknowledge the time and generosity of participating advocates from a diverse range of advocacy organisations around Australia, and the funding of the Australian Government Department of Social Services for DANA to provide DRC systemic advocacy support. Visit www.dss.gov.au for more information.

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[DANA CEO, Mary]:

Today is the last for the season of this Zoom sessions DANA has been running. Every week we discovered there are twice as many people registered for them that join, and lots of people hope they can join, but something comes up and they are too busy to come on. But we do appreciate that you take this time out of your day to join in for these discussions.

Today's discussion is about advocacy. Each of these sessions has been about an issue in relation to the Royal Commission, that is the context in which we are doing these discussions. And today's one is particularly about advocacy.

This is your patch. I will just run through a few of the questions [...] These are big questions, Siobhan! Any one of those could take three hours, I reckon. I will ask the first one and then come to the second, and that we might come back to the others.

The questions I want to ask in the first place is, there are two that we might run through together, which is, what role is currently played by advocates in *responding* to violence, abuse, neglect and exploitation of people with a disability and what role is currently played by advocates in *preventing* violence, abuse, and exploitation of people with a disability.

Does anybody want to start us off in any way? In your everyday work, how do you respond to, or prevent violence, abuse, neglect and exploitation?

[SA Advocate]:

It is just more of a general comment, that at times we are first responders and already engaged with somebody for a completely separate reason, and as you build a better relationship with them, or information comes to light. I know, myself, I have had to be in situations where this is the first time they have had a conversation with someone, then having to be strategic about what to do with that information.

[DANA CEO, Mary]:

Thanks, [SA Advocate]. Could you introduce yourself and your advocacy organisation? And we will get everybody to do that, as you speak, it is useful and interesting for others to hear where the advocate is from.

[SA Advocate]:

I am from [SA Advocacy Organisation]

[DANA CEO, Mary]:

[...] Anybody else want to have a go at you or your organisation's role in responding to and/or preventing?

[NSW Advocate 1]:

I am [...] from [NSW Advocacy Organisation]. I've literally just had a client meeting this morning with a lady, talking about her husband in the home, and what is going on for him. It's not so much abuse or violence, but potentially exploitation, and there are no supports in the home, and different things. I have just today provided some brief education and potential resources and referrals, and that sort of thing. This woman was like, "I didn't know that existed."

As much as I have said I'm here to support you with your matter, but you have just mentioned your husband who you are meant to be caring for, and what's going on there... did you know, and can I send you those resources? And who else can I talk to, to provide that information within your informal supports? And she has someone younger, and she said it would be great if you can explain it to her and she can explain it to me. I think our role is certainly education or referral, definitely.

[DANA CEO, Mary]:

Thanks, [NSW Advocate 1]. Anybody else want to talk about how you see your role?

[TAS Advocate]:

I am from [TAS Advocacy Organisation]. One of the biggest things is the independence that the advocate has to talk to people about their rights and what the options and choices are.

Often in our role we might have family members saying, 'this has happened', but they don't want to go to the police, they don't really understand what has happened. And I think the role of advocacy, to be really independent and make sure that everyone knows all of their options, is important. I also think it has changed a bit in Tassie now we have the Quality and Safeguards Commission.

There is a clearer process for organisations and for support staff. But before then I found I had a lot of support workers and people who worked in organisations contacting me to follow up to make sure they were following the right process to report abuse, neglect and violence. And that people had had that independent voice. I think it's happening better now, in some ways, that we have got the Quality and Safeguards Commission here in Tassie.

[DANA CEO, Mary]:

Thanks, [TAS Advocate], that is an interesting point that I might pursue with you separately another time. Does anyone else want to have another first go at this role of advocacy in working with people, either in responding to and/or preventing abuse?

[VIC Advocate 1]:

I guess the role is somewhat multifaceted, in terms of responding. Sometimes, as [TAS Advocate] said, it's about a service ringing to say, 'This has been reported, what do we do?' So, we are guiding this service. If there's been allegations of physical assault, sexual assault, financial exploitation, it's about guiding that person who first reports to support that person to go to police, and what needs to be put in place in terms of their end, with police. That there needs to be an independent third person with the person with the disability during the interview stage.

We also often act, particularly for people with disability that we know very well, we will act in terms of helping police and other authorities understand that person's disability, their behaviours, their communication style, educate around the disability itself. So, what autism may look like, or an intellectual disability, and how that presents in that individual.

We have a large role in supported decision-making. And that's a vital role for the person with a disability to be able to make a choice as to what they want to do. Especially around those things such as sexual assault. We all know that not every sexual assault is prosecuted. So, it's about that person having independent support to make that decision about what they want to do.

Sometimes it's not just a service, but family that are perpetrating abuse and exploiting. So, it is about how to safely support that person as to what they want to do. And we make referrals and link with vital services. So, if there is sexual assault, we will link with the sexual assault counselling service. We link with any other services that need to come in, whether that's... if someone has an administrator, we might have to get administration involved.

It's very much a coordinated, cohesive approach. And making sure that supports are in place for that person with a disability, so they are safe and feeling safe. If something has happened within a group home, for example, or SDA, the Specialist Disability Accommodation setting, is this individual feeling safe? What are you going to do? It is quite a multifaceted role and it's important.

[DANA CEO, Mary]:

Can I ask, do you think the rest of the sector, the broad disability sector, understands what the role of an advocate is, of an independent disability advocate, when there are allegations or suggestions that a person is experiencing violence or abuse, neglect or exploitation?

So, you all, you have given between you really good and clear descriptions of the role of an advocate and how you are involved in these issues. Do you think that understanding is shared...?

[VIC Advocate 1]:

No.

[DANA CEO, Mary]:

And [NSW Advocate 2] shaking her head no and [TAS Advocate] is waving her hand to say so-so. Do you want to speak to that?

[NSW Advocate 2]:

What I found is that even service providers who may once upon a time have understood the role of advocacy, a lot of them have assumed it has disappeared with NDIS. I'm seeing a lot of the campaigns about it being at risk. And assuming the person needs NDIS funding, I think that is a low priority, that kind of thing.

There are also a lot of assumptions that a support coordinator should somehow cover that role without any comprehension of potential conflicts of interest and things there.

There's also been a lot ... I guess, the changes around Quality and Safeguards and the changes to how restrictive practices are managed with the transition to the Practise Standards has also seen a lot of confusion and cover-up, for lack of a better word in some of the more institutionalised group home providers. And a lot of just going to ground because it's a business now. And you've got to lock that business in.

[DANA CEO, Mary]:

Again, some of the things that get raised in the sessions, I feel at some stage need a bit of further exploration. The behaviour of the service providers and to what extent that has changed, and has the market setting now of the NDIS, is it creating those coverups that you are talking about? Advocates all know that disability providers were good at covering up issues anyway, but maybe that has got more...

[NSW Advocate 2]:

I have got some public guardians who have given consent to make Royal Commission submissions from clients I have seen through from the point of uncovering the abuse - right through to cracking that system open. So, there are some really proactive and enthusiastic guardians in NSW who I think are really contributing to some of this work that we're doing at the moment. And they are seeing a lot of these patterns as well.

I've spoken to a couple of the public guardians, and they as teams are putting in submissions about what they see, back of house, as a team, around some of this stuff. Which I think is a really positive thing.

[DANA CEO, Mary]:

There is a question in my mind, which is, the advocacy data that is available is difficult to get hold of. [...] But one of the things that that data, the last time I was able to get some public data from them, the numbers of abuse cases are... It's a very small percentage. The figure in my mind is something like 3%. So compared to all the other categories of cases that you deal with...

I don't know whether any of you have a view about that, but that's what the data shows. That advocates are only helping... Among the cases you deal with, NDIS is way out as the leading issue, really. For some organisations, DSP rejections are up there as one of the highest ones.

But violence and abuse are low as a percentage of the number of issues. So, we had one of the questions today that we wanted to ask was about what improvements is it possible to make for the advocacy sector, to improve or strengthen what advocates can do around responding to violence, abuse and neglect.

But one of the things that strikes me about it is, are advocates... Are you being called in enough, often enough, and at the right time when these issues are happening? I can see people shaking their heads. Do you think there is lots of this stuff happening that we just don't find out about because an advocate isn't called? Does anybody want to respond to that? And then we have to think what can we do about it?

[NSW Advocate 2]:

I've dealt with two really, really egregious abuse cases in the last two years. Both of those cases took between 12 months and 18 months to resolve. And in neither case was the referral because anyone suspected abuse. In both cases, the referral was for something really almost insignificant, where referring for advocacy was a tick box issue.

Neither of the people had any formal communication. And it was about doing quality intake screening and identifying fundamental unmet needs and about not accepting the referrer's formulation of advocacy needs.

And in both those cases it also required having to go to the guardianship tribunal [Guardianship Division of NSW Civil and Administrative Tribunal] to secure the right of that person to advocacy and consent and things like that.

That's a massive, massive amount of resources. And time and expertise. And it's quite an intimidating situation to be put in, as an advocate, when you are brick-walled, and the shutters are being pulled down.

If those two cases are even remotely the representative of what I suspect is out there, the sector would collapse under vicarious trauma. We don't have what we need to be able to do it. There's not the resources in terms of supervision to be able to deal with this level of work.

There isn't an understanding among service providers that the person has a right to have independent people in there. Certainly, in NSW, since they got rid of the community visitor, there's no teeth behind any of the compliance frameworks to back that up.

If you suspected abuse prior to Quality and Safeguards rolling out in NSW, you could call the Ombudsman, give them the factual basis for your concerns, and by and large if you knew what you were doing and you could highlight the right kind of thing, you could get a Community Visitor there within two weeks who had a legal right not to be blocked. They would identify the issues and say yes, there is something wrong here, this person definitely needs an advocate... and you didn't have to go through the guardianship process.

Quality and Safeguards is mediation. It's great if you have some kind of service agreement dispute with your provider and the outcome you want is for them to do something. But it really, really doesn't work in the cases of abuse.

I had people that in lockdown, nobody set eyes on for three months other than the group home provider. I know a number of them were subject to physical abuse during that time. But when it is a service that doesn't keep records of incidents, proving that is virtually impossible.

[DANA CEO, Mary]:

Thanks, [NSW Advocate 2]. A few other people have hands up, and I am making notes about the stuff you are saying, because I think we need to pursue some stuff with the Quality and Safeguards Commission.

[VIC Advocate 1]:

Sometimes when matters come to court legal practitioners need education about how to support a person at court. We'll come in and be an extra person at court, that is something else we do.

However, I agree with everything that [NSW Advocate 2] is saying, it is very challenging. If I look at our supported residential services in Victoria, the SRS [Supported Residential Services] sector, like boarding housing in NSW, for-profit businesses, often there are rumours and reports of sexual abuse, proprietors, and not every SRS is like this, but the unscrupulous ones, where there are proprietors or managers with predatory behaviour, we find out way too late. Way too late into the matter. To the point that the person with disability is fundamentally denied access to justice. Police will not pursue a matter if they don't feel it has merit and that they can't get it up to a certain line with the evidence they need, beyond reasonable doubt.

I had one young woman who had reported sexual abuse to police, but we didn't find out until many years later what had happened. The Department of Health and Human Services are the regulators in terms of the authorised officers to go in and see that the SRS is complying. But often when we have complained about things, they are advocating for the SRS provider, as opposed to being independent and impartial. I've raised complaints and they've said 'well, we'll just have to see what they see it as.'

Complaints go nowhere. So, there is a difficulty in a sector of accommodation that is not part of the NDIS. When I eventually went to the police with this young woman, because she made a disclosure to me, she had inferred things before, but on this occasion after building trust with her, she made a disclosure. I went to the sexual offenders unit of the police and reported that... that is when I found out they had received a report of this many years earlier and they were not going to pursue it. And they were not going to reopen it because that SRS has been closed by the Department.

The Department closed the SRS because of rumours and innuendo, and yet this woman has made allegations of a horrific assault and nothing has happened. We are finding out way too late, and there is far more of this happening, out there.

I'm hearing SRS proprietors where... this is not sexual abuse alone, there is financial abuse of SRS proprietors who have a business on the side, such as a warehouse where they are packing, and they are taking residents with disability to work in that factory, for nothing.

When we raise it, nothing is ever done with it. It's wrapped up as 'we are going to go on a special outing for you, and you are going to get things and you are going to wrap these things and it is going to be fun', but they are an unpaid labour force, people with a disability that often don't have anybody else in their life in terms of informal supports.

There's a whole lot of stuff happening out there, and they are not clear pathways of getting something done about this. We try to make noise about this, try to do things about it, but it goes nowhere.

[DANA CEO, Mary]:

Thanks, [VIC Advocate], and I will let all of you know, because there is so much of the stuff you are saying today - we need a really good avenue for this information. For the stuff that you see and hear and know about, for that to be made more visible.

[...] ... What I can see is that there are issues that you deal with formally as part of your work with some clients and then there are the things that sit off to the side of what you are doing. You are working on an issue, and you can see glimpses of other things that are happening, which you don't always have the capacity to do something about, and when you try, you get blocked anyway and stymied, and that's where it ends. We do need the Royal Commission to understand all of that properly...

Another thing I was going to mention, which was... It might have been you, [NSW Advocate 2], when you talked about what the Ombudsman would have done in the past, if there was abuse. In the NSW setting, you might have got a Community Visitor to go in, they would then recommend an advocate, and it was a quick and easy way. As opposed to the difference when you see the Quality and Safeguards Commission not as effective as that. But in Tasmania, where there were no community visitors, no pre-existing Commission, and [TAS Advocate] was saying the Quality and Safeguards Commission is responding quite well. So, the way you see and interact with the Quality and Safeguards Commission to some extent depends on what you already had.

[TAS Advocate]:

But also the pressure from organisations, because they might be aware of what they have to do to report, and they seem to be getting us in earlier. That's my experience anyway. Since the introduction of the Quality and Safeguards Commission.

[DANA CEO, Mary]:

That's interesting. [VIC Advocate 1]?

[VIC Advocate 1]:

Could I just add in terms of the Supported Residential Service sector, the for-profit boarding house type of accommodation, what concerns me is the interface between DHHS [Department of Health and Human Services, Government of Victoria] and their role as authorised officers, so they are making sure that these services are compliant with regulations.

Now, what we will often hear, this is a systemic issue, in that when there is not any other accommodation, this is where people with a disability often end up living. Not just people with a disability, a broad range of people in our community end up living in an SRS.

Now, a case in point is that there is one that is about to close. There is one that has closed recently, another two about to close... Suddenly, the Department of Health and Human Services who are the authority that regulates, have en masse homelessness issues for these residents. More often than not, it's something that they have to pick up.

So, there is a real conflict that the Department will have the financial responsibility in some cases, but also the resources of finding accommodation for 30 residents at a time. So maybe it's the cynic in me, but it seems they turn a blind eye to certain things, because otherwise the problem becomes theirs... to manage and find accommodation for people.

But where does that leave vulnerable people living in this kind of accommodation, when we know things are happening that shouldn't be happening at all, and the person regulating has a conflict? Because they are responsible for making sure of compliance, but when it goes wrong, they are financially responsible for finding alternative accommodation for these residents. It is a real conflict, and I think it needs to be addressed.

I'm not sure about how it works in other states, but it is a problem.

[DANA CEO, Mary]:

I completely agree it is a conflict, because the department that is providing would have to find alternative accommodation for them. It is easy, perhaps, for them to just accept that some of those SRS boarding houses are not good, but perhaps they view them as better than a person sleeping on the street.

It's similar for the NDIA where they fund all the people in group homes, they get the SIL [Supported Independent Living] funding, and many of them might like to try or look for other independent living options, or other situations. At the end, a hesitation between, they have a known fixed cost, more or less, to keep person in the group home, and it is not necessarily in the NDIA's interest for that person to explore other opportunities because it might cost the agency more. These potential tensions are all over the place.

We have a question which I am in two minds about asking. We have a question which came out of the Rights and Attitudes Issues paper from the Royal Commission, and it asks for suggestions for

reform or improvement to advocacy to help prevent and improve responses to violence, abuse, neglect and exploitation.

But it seems to me it is the wrong way to look at it, maybe. It's not really reforms and improvements to advocacy that we need, although we would like that, because you want more resourcing, it is reform and improvements to all kinds of other things in the system. And in people's lives - that's what needs reform.

Reforming advocacy could be..... doubling or trebling the amount of advocacy funding might help you to respond to more people, but it won't stop those people being abused in the first place. It's a challenge, isn't it, that we can get caught up in the wrong arguments.

Really, it seems to me that some of you have already been suggesting ways that the system, and parts of the system, should be reformed, that would help people, help prevent and respond to violence, abuse and neglect. Anybody else want to respond to those questions?

[QLD Advocate 1]:

One of the things I think we have all experienced is one of the difficulties of obtaining entry to some of the places. It's not like advocacy wants powers or anything, but it's the opportunity to being able to visit places like aged care homes, group homes, some of them have very closed doors and they don't want you coming in to see.

That's one of the barriers we have. You hear little concerns. You might have a support worker who says these things about the place, and it rings alarm bells, but they won't allow you access to just go and say hi. So that's one of the barriers I always find... being able to even start the process to see if things are OK in some of these places. When they won't even allow you entry.

[DANA CEO, Mary]:

Thanks. So that right of access, which of course community visitors, where they exist, they have a right of access, but advocates don't. It is a consistent barrier that advocates raise, and may be one of those big picture things that we should be addressing systemically to try and get changes.

[VIC Advocate 2] has put a message up on the chat. Discussions around mandatory reporting and our duty of care. 'Often services will call the advocate and they are just ticking a box as they have notified someone of suspected abuse. It is a huge weight for advocates to take on and I'm not sure it should be our responsibility.'

That's interesting, [VIC Advocate 2], you can follow-up your comments if you want to say whose responsibility you think it should be. And [VIC Advocate 2] has a follow-on comment about speaking about 'advocacy and people's rights and abuse and neglect and what it looks like.' And that helps with prevention of abuse. And has brought about some disclosures. But it takes time, of course. So, they are constrained by the amount of time they had available.

There was a suggestion when I was talking about the small percentage of abuse cases that show in the data, I think two people have mentioned this, which might be the way that the systems work. [VIC Advocate 2], you brought it up first. That the person might come in for a different issue. So, they're not coming in about abuse, they are not referred in for abuse. They come in for advocacy about something else. And during the process of working on that issue, the advocate realises there is abuse happening. But it doesn't mean that the recording in the system will get changed. The advocate might just keep it under financial or whatever the person came in on. And that's a suspicion and gut feeling I've had for some time. And I wonder whether it is possible to do something about that.

It's sort of... if you have a number of cases where the primary issue is abuse and then others where the primary issue is something else, but it turns out that underlying it there is abuse. And whether there is a way to unpick that a little bit.

Does anyone else want to have a go... And feel free to suggest improvements to advocacy, of course, if you think of them, that there should be. But also, to any other part of the sector or the system that would help either prevent or respond to violence, abuse, neglect or exploitation. It can be as big or small as... It doesn't matter what it is. Just anything that you think might help.

[QLD Advocate 1]:

I notice some people have legal representation within their organisation, which is great, but some small groups don't have it. From our point of view, it's actually being able to access better legal representation and advice, if we're going down those lines. Because sometimes that's very difficult. We are calling on lots of different organisations or people that we know, for some legal advice.

Sometimes when you do have a case, and you think there needs to be some sort of legal representation, some small advocacy groups don't have that access on hand.

It would be great if we could have something like that. So many hours once a month, that we have legal representation actually can come in.

[DANA CEO, Mary]:

That sounds like there are a couple of elements to that. One is legal advice, so that a resource somehow that was available to advocates that you can ring up and speak to a lawyer who will give you advice about managing the case.

And then the actual legal representation for the person if they require it.

And it's true. There are only a small of advocacy organisations that would have that in-house. Not many do.

Anybody else want to make any suggestions?

[NSW Advocate 2]:

One of the big gaps is soft entry block-funded things. NDIS covers the big headline support needs, but a lot of the soft small stuff is gone. And some of that is what provided the safety networks around people.

[DANA CEO, Mary]:

Tell me the kind of things you're thinking of.

[NSW Advocate 2]:

There were a lot more small programs at community centres and things that you could refer people to, to build their unpaid networks around them. That's largely gone. And even NDIS-funded services that used to be more wraparound, that discretion with how they apply supports has gone.

So even services that used to provide some of the buffer and protective mechanism to more vulnerable clients I work with, are no longer able to do it because it's a unit cost system. There are lots of advantages to individual funding, but it has removed a lot of the undocumented safety nets that were there... that in a block funded system would go, that person is really vulnerable, I'm going to spend a bit more time on that. If there are not the allocated hours in the system, that just doesn't happen.

The other thing that I've noticed that makes advocacy harder is when it wasn't a competitive environment it had more services going "this isn't quite right, maybe I should refer that person there,"... that kind of linkages and discussion work that has gone.

A lot of service providers I have worked with in the past that were really good at picking up and referring in a proactive way, that is just not happening, because everything is staying in house and you are only doing exactly what you can claim for.

[DANA CEO, Mary]:

Ugh, honestly. It is a challenge, isn't it, the way this new system has come in. You can't turn back the tide, can we?

[NSW Advocate 2]:

I don't want to, but I also know there are a lot of pressures on the system. I know there are a lot of former state-run... in NSW, the large providers got their share of the previously state-operated group homes. And some of the less-than-honest ones have gone about evicting less profitable clients. And so, the only services that will accept them for supported accommodation are the ones that are new and run on a much thinner model of staffing, a lot lower level of expertise and skills in staff.

So, you've actually got those market pressures operating in terms of the quality of care and things like that as well. So that's putting downward pressures on the cost for NDIS, and again it is stripping out those... unquantified kind of protections.

You might have someone move from a service where there are workers who know their informal communication style out to a new start-up service that runs entirely on agency staff, who don't know the person ...

[DANA CEO, Mary]:

[NSW Advocate 2], do you think the Quality and Safeguards Commission is aware of that kind of issue?

[NSW Advocate 2]:

Yes, I told them! The particular service that had a mass lot of evictions, I managed to get the same Quality and Safeguards operator investigating the complaints across the board. The trouble is, their jurisdiction is incredibly limited, and you have to have made a complaint, the service has to have failed to adequately resolve the complaints. And because it's all tied to market-based registration, you've got to find an issue where you can escalate to a complaint.

If they are just being obtuse, that is not complaint worthy. In one situation the only reason we managed to get it to a substantiated complaint, was because they were refusing the person responsible restrictive practices data when she was the appointed guardian for restrictive practices. But if they are just ignoring you, it's a lot harder to get that to a formal complaint that they haven't responded in the timeframe, and then moving it on. It is very bureaucratic.

So, you're looking... and you shouldn't have to look, for your technical way in. It should be just, "This is not right, we need to do something about it."

[DANA CEO, Mary]:

[VIC Advocate 1] has made a comment that as advocates, you can make a complaint without a client, which is true, they have a system where anybody can make a complaint. And one of the problems, because I've heard them talking about this, and we haven't managed to get them to come to grips with this fully... they treat advocates the same as everybody else. Whereas advocates actually have this really good kind of helicopter view across the systems. And if information is coming in from an advocate, they should take that at a higher level, really, and pay more attention to it and treat it more seriously. But we haven't managed to get them to acknowledge that yet, or do something about it. We're working on it, though.

And yes, [VIC Advocate 1] is saying exactly the issue that advocates have... they don't hear back on the resolution, they are not necessarily informed about the outcome, or they might be informed about the outcome but not what happens in between. Yes, I think we are all aware that more work needs to be done with the Quality and Safeguards Commission.

[VIC Advocate 1] made a point also about the right of access and the right of access to records. We've only got a small amount of time left. Does anybody else... it can be on any aspect of this issue about advocates dealing with violence, abuse, neglect or exploitation... either suggestions for how the advocacy sector can be improved and strengthened to deal with it, or any other part of the system, really, that you think would help.

That's fine. If there were easy solutions that we could all be suggesting, that would be nice, wouldn't it? But they aren't. I think the reality is, and you are working at the edge of this reality, really. That this stuff is difficult and challenging and messy.

But there were some things in among what you've been saying today, there are some things that have leapt out at me. One is that the right of access and right of entry of advocates is a major issue, but it also requires... that is a major piece... that is, legislative requirements that would need to happen probably separately in every State and Territory. And that is a giant piece of systemic advocacy that might well take us years and years and years to get that outcome. But maybe we need to make a start.

And it could be that in the work the Royal Commission does on advocacy, once they decide and we talk to them a bit further about what they're going to do, I think what we will organise for next year as they get started on whatever they're going to do, we will try to stay a half step ahead of them and bring the advocacy sector together as much as we can. Either these online ones, or maybe next year we might be able to have some face-to-face stuff happening.

To try and tease out what are the serious recommendations we would like to Royal Commission to make about advocacy, the context you work in, the funding you get, the kind of work that you do. What are the other support things that should sit around it. Like that legal advice availability that somebody suggested. It's about the advocacy sector, but it's about other things. Advocates, you do a good job, but you shouldn't have to do miracles every day. There should be no expectation for you going out as Saint Advocate every day to save the world.

You should be playing a part and being able to make a difference, but you shouldn't have to have the weight of all those issues on your shoulders alone. You should be an important player, an important cog in the system, and that is what we know is not quite the balance...The balance isn't right. [NSW Advocate 2], you are referring to this, the vicarious trauma and the challenge of those very difficult abuse cases that you refer to. It shouldn't be like that.

It shouldn't be that every advocate, and I interact with lots of advocates and advocacy organisations, and I see and hear the people who are so close to being completely burnt out that they will be lucky to make it through to the Christmas break. The only thing helping keep people going at the moment is the fact that they are getting closer to a bit of a break at Christmas. We don't want that. We want advocates to be able to do their job without killing themselves in the process.

[VIC Advocate 3] has a comment up there, 'we need to be consulted and heard in this arena... Free confidential legal calls service would be a really good thing for advocates to have.

In your Christmas break [laughs] in your spare time, you can redesign the system! And just think about what is it that is ...yes, one of the things we are trying to advocate for is increased funding for advocacy. That is only part of the solution. We need all those other elements as well, about what are these supports and resourcing that can sit around advocacy.

The Victorian government, I was interviewed this morning by a woman doing a piece of work for the Victorian Department, and they seem to think that maybe, or one of the things they are looking at is maybe some kind of single-entry point. Like a common intake process or system, in Victoria. I don't know how many of you would think that was a solution? Maybe in a bureaucratic sense it looks tidy. Advocacy generally is funded to, and most of you operate in a particular geographical area - that is where you are. Advocacy is place based. Generally. For those advocates, who are funded to operate in a particular geographical area, and in actual fact having to send somebody off to a centralised intake point, for them to send back to you, doesn't seem very productive to me.

Somehow, we need to harness out of the sector some of the potential solutions we can see. What would be interesting and useful, if you see other systems that you interact with, other places and organisations and systems that you are referring to some of your clients to, and if you think, "That's a good idea, they do that really well, they do the intake really well," or, "Oh my God, that's awful." Either way. I don't know, the family violence sector, or homelessness organisations, it doesn't matter, but what would be useful would be to have examples from organisations that operate a bit like advocacy, where advocacy is not a national system of cookie cutter organisations around the country - you are a loose collective, really,

You are autonomous organisations funded to operate in a particular area and provide advocacy. It is not as if you are all [Disability Employment Services provider] employees everywhere around the country, or [large provider], or [church-affiliated provider]. It's completely different from that.

It would be good if you see good examples that you interact with, besides the gaps that you mentioned, maybe something that used to be there and isn't. [VIC Advocate 2] says, "centralised point could be a disaster, advocates build up relationships and trust over time."

Yes, I can't see the point of this. If governments are dreaming up... it is a problem, governments, only ever come up with simple solutions. In theory, they should be able to design nuanced responses, but they don't. They only come up with fairly black and white, simple solutions and they won't necessarily fit with what advocacy needs. What you need is relationships within your communities, hospitals, councils, etc. You need time, not just the time to work with your clients, but each of your organisations needs the time to network properly locally on the ground.

That is an issue, people I have seen as advocates get busier and busier, with longer and longer wait lists for your organisations, I suspect one of the things that's giving... that there is less time for that local networking.

I think we might have to wind up, as we have gone well beyond the time... Was there somebody who wanted to say something?

[QLD Advocate 2]:

Quick question, is it just me, or do other advocates feel like they're doing the OPG's [Office of the Public Guardian's] job?

[DANA CEO, Mary]:

That's interesting, that's from [QLD Advocacy Organisation] again. Talking about the official public guardian. Doing their job in what way?

[QLD Advocate 2]:

Seems to be a lot a lot of things they should be doing and following up, that we are doing.

[DANA CEO, Mary]:

Because they just don't do it?

[QLD Advocate 2]

Or you're waiting forever for decisions...

[QLD Advocate 1]

Urgent decisions that need to be made within 24 hours, and we are still waiting weeks, we are doing the chasing up, because they are not doing it.

[QLD Advocate 2]

And then when it come to a head with vulnerability, where somebody is going to become homeless because the OPG hasn't done their job.

[DANA CEO, Mary]:

It might be worse in Queensland...

[TAS Advocate]:

Some of our issues definitely we find ourselves doing a fair bit of the leg work but not all. And it depends a bit on the guardian.... Some work really well and are active support for the person's decision-making, but others not... so good.

[DANA CEO, Mary]:

There is an issue, I can't see the statistics, but my memory is that Queensland is a state with the highest percent of people under guardianship, so it could be true that in Queensland the guardians are literally under the pump because they have more people under guardianship.

But that statistic is from a little while ago so I would have to refresh that. I think we might wind up and leave it there.

We are going through these because we have live captions, we have a transcript of these, and we go through them and gather and put some of the material together. Some of it is to go into the Royal Commission as part of submissions, but also, we will feed it back out to you all in the New Year as we look at picking up some of the systemic issues next year, and try to tease out, where do we go first?

But as I mentioned, the Royal Commission will be picking up and looking at advocacy as a serious topic next year - that was a really good acknowledgement by them. They talk about advocacy being important for the operation of the Royal Commission, so they get it to some extent. They don't quite understand fully the context of funding and who funds what, but we can clarify some of that for them.

I think next year we will be called upon to try to come up with, not just suffer within the existing system, but to try to help design some better solutions. Thanks, everyone.

Comments typed in Zoom chat function:

[VIC Advocate 2]:

I think the stats are sometimes reflective of us taking the client intake first for an (advocacy and support) for a different issue say DSP [Disability Support Pension] as an example and then the issues unfold later in the relationship we find out about abuse and the tick boxes in IVO [advocacy client and service management software] has not been changed to abuse. Might be a reason for the lack in stats. More training is needed in this area. I am grateful I have external and internal supervision to manage such clients.

Discussions around mandatory reporting and our duty of care as advocates are topic for discussion. Often services will call the advocate and therefore tick their box as they have notified someone of suspected abuse. This is a huge weight for advocates to take on and I am not sure it should be our responsibility.

[NSW Advocate 2]:

also RE: DEX [DSS Date Exchange] data, an NDIS advocacy case around NDIS may only take 5 sessions and I have capacity for multiple simultaneous cases. With abuse, the case may have 90 sessions and I can usually only manage 1 at a time.

[VIC Advocate 2]:

In our area we tend to go speak about Advocacy, a person's rights, Abuse and neglect, what it looks like. This has been helpful in prevention of abuse and brought about disclosures. It is a time constraint although it is helpful to do as prevention.

This is done in our local groups

That is something I will watch in my own work. To make sure that I change it into a new adv issue

[VIC Advocate 1]:

Right of access is a significant issue. Advocates having right of access to not just premises but client records is often key in moving forward with an issue.

Q & S Commission - we as advocates can make a complaint without a client entirely

But we don't hear back on the resolution. Advocates being informed of the outcome and what is happening in between is important.

[VIC Advocate 3]:

As advocates we are at the grass roots level & considering the current Royal Commission outcomes advocates need to be consulted & heard within this arena - It would be great to have a free confidential legal call service! Definitely a current systemic advocacy issue & need!

[VIC Advocate 2]:

We can increase the hours in advocacy, but it is not the only issue we have.

To have a centralised intake would or could be a disaster. We build relationships over time, trust with long term community members who might not call for help if they had to go through a massive intake call centre.

We have to network and make relationships within our community. with local councils, community health, hospitals etc etc

[VIC Advocate 1]:

I believe DSS lacks insight into the significant complexity of cases we work on. The vicarious trauma. Often, I feel their focus is on insignificant data. That an issue presents but from that, several others result. Yet only one of those issues will count in the data. They don't count the other work we do in their numbers. Yet will say well you have a choice as to whether you address those other issues. We can't just leave someone in limbo saying come back to us in 3 or 6 months when we have addressed this first issue because that other issue won't count in our stats. This is not okay.

[VIC Advocate 3]:

Thank you - interesting & much needed conversation.

[VIC Advocate 2]:

Thanks everyone. Take care and it has been great to explore all these issues.