

Discussion Paper

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# NDIS Review: Fires, Floods and COVID-19



**DANA** Disability Advocacy  
Network Australia

## Foreword

DANA has commissioned a series of four discussion papers as part of our contribution to the National Disability Insurance Scheme (NDIS) Review.

Disability advocates across the country spend close to half their time on NDIS related matters. This means advocates have a wide range of expertise and experiences about what is, and isn't, working in the Scheme.

The NDIS Review is interested in learning from this expertise, and to hear about how to make sure the Scheme is delivering for people with disability, their families and supporters.

DANA has considered what is important for the NDIS Review to understand, both now and into the future.

In addition to these discussion papers, DANA will hold workshops and survey advocates and people with disability. The feedback will be delivered to the NDIS Review.

We want to ask for your big ideas on the following key ideas:

- Fires, floods and COVID-19
- Tier 2 and mainstream supports outside the NDIS
- Quality and safety
- Support for decision making for advocacy

DANA is also working with Inclusion Australia on issues that particularly impact on people with an intellectual disability.

Please get in touch if you have any questions or comments and we look forward to hearing from you.

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## Acknowledgements

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## Introduction

For the past five years, Australians have lived through one disaster after another. From the 2019-2020 Black Summer Bushfires to the global Coronavirus (COVID-19) pandemic to the 2022 floods. Whether it's fire, floods or pandemics, more than ever all levels of government and our social infrastructure, including the National Disability Insurance Scheme (NDIS), must be equipped to respond to people with disability when disaster strikes.

The disability community has been one of the groups most impacted by these disasters, particularly from poor disaster planning, response and reconstruction. Not only are people with disability at greater risk of death and injury during a disaster,<sup>1</sup> but the Disability Royal Commission (DRC) also found that during COVID-19, people with disability were at greater risk of violence, abuse, neglect and exploitation.<sup>2</sup>

In times of disaster, disability advocacy organisations provide crucial support to people with disabilities, helping them regain access to vital services, navigate crisis-ridden systems, and develop accessible communication materials. However, this assistance significantly increases the organisations' workloads and poses financial and long-term sustainability challenges due to inadequate funding.

These issues point to Australia's failure to realise its obligations under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).<sup>3</sup> Australian governments are responsible for ensuring people with disability have full and equal access to information and services, such as medical facilities during emergencies, as well as upholding the right to health without discrimination on the basis of disability (Articles 9, 11 and 25).<sup>4</sup> Australia has a responsibility to ensure people with disability are not deprived of their liberty on the basis of their disability during emergencies (Article 14).<sup>5</sup>

However, it is possible to address the current failures and put in place solutions that uphold the human rights of people with disability and focus on centring the voices of people with disability and their experiences during disaster events. Governments at all levels must include people with disabilities in their disaster planning, response, and reconstruction processes. Most importantly, it is essential to increase access to Person-Centred Emergency Planning, which can prevent many issues from arising during a disaster event.

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<sup>1</sup> Alexander, D. (2015). Disability and Disaster: An overview. [https://doi.org/10.1057/978113486004\\_2](https://doi.org/10.1057/978113486004_2)

<sup>2</sup> Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, (2020), *Commissioners' Report on Public hearing 5: Experiences of people with disability during the ongoing COVID-19 Pandemic*, <https://disability.royalcommission.gov.au/system/files/2020-11/Report>

<sup>3</sup> Ibid.

<sup>4</sup> Convention on the Rights of Persons with Disabilities, opened for signature 30 March 2007, 999 UNTS 3 (entered into force 3 May 2008). The CRPD was signed by the Australian Government on 30 March 2007 and ratified on 17 July 2008.

<sup>5</sup> Ibid.

## What does the evidence say?

Australians with disabilities are disproportionately impacted by natural disasters, including fires, floods, cyclones, and heatwaves. As these events become larger in scale and occur more frequently as a result of climate change, it is imperative that significant work is done to ensure people with disability are not increasingly left stranded and unsafe.

Extensive research indicates that people with disabilities are at a higher risk - at least two to four times more likely - of suffering fatalities or injuries during disaster events compared to the general population.<sup>6</sup> Additionally, the disabled community experiences an increased risk of injury, property loss, and encounter greater challenges when evacuating and finding suitable shelter.<sup>7</sup>

In emergency situations, particularly involving fires, floods, and cyclones, people with disabilities have encountered significant difficulties in evacuating and accessing public shelters that adequately meet their basic needs.<sup>8</sup> For example, evacuation spaces often lack wheelchair access, and essential announcements are not translated for those with hearing impairments or intellectual disabilities.<sup>9</sup>

The absence of accessible communication methods, such as Easy English, Auslan or Braille, has resulted in safety warnings being overlooked, and people with disabilities being unable to access shelters.<sup>10</sup> In shelters where these communication options are absent, evacuees with disabilities remain unaware of the availability of fundamental supplies like food and blankets.<sup>11</sup>

Disasters also pose a particular threat to individuals with disability who rely on electricity for their medical support or require medical care while seeking shelter away from home.<sup>12</sup> During fire emergencies, people with disability are more susceptible to the adverse effects of poor air quality and heatstroke. Consequently, people with disability generally require more intensive health and social services during and after disasters.<sup>13</sup> Unfortunately, health services often become inaccessible and more costly around the time of disasters.<sup>14</sup> As a result, community-led initiatives and mutual aid groups have emerged to try and fill the gap, including the collection and distribution of masks and personal protective equipment (PPE)

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<sup>6</sup> University of Sydney, What people with disability told us about their experiences of disasters and emergencies (2020), <https://www.sydney.edu.au/news-opinion/news/2020/12/03/what-people-with-disability-told-us-about-their-experiences-of-d.html>

<sup>7</sup> Ibid

<sup>8</sup> Australian Institute for Disaster Resilience, Experiences of individuals with disabilities sheltering during natural disasters: an integrative review (2019), <https://knowledge.aidr.org.au/resources/ajem-april-2019-experiences-of-individuals-with-disabilities-sheltering-during-natural-disasters-an-integrative-review/>

<sup>9</sup> John Twigg, Maria Kett, Helen Bottomley, Lin Tze Tan & Hussam Nasreddin (2011) Disability and public shelter in emergencies, Environmental

Hazards, [https://www.researchgate.net/publication/254230286\\_Disability\\_and\\_public\\_shelter\\_in\\_emergencies](https://www.researchgate.net/publication/254230286_Disability_and_public_shelter_in_emergencies)

<sup>10</sup> Alexander, D., Gaillard, J.C., Wisner, Ben, Disability and disaster - Handbook of hazards and disaster risk reduction (2021), [https://www.researchgate.net/publication/285004501\\_Disability\\_and\\_disaster](https://www.researchgate.net/publication/285004501_Disability_and_disaster)

<sup>11</sup> Ibid.

<sup>12</sup> University of Sydney, (2020), What people with disability told us about their experiences of disasters and emergencies, <https://www.sydney.edu.au/news-opinion/news/2020/12/03/what-people-with-disability-told-us-about-their-experiences-of-d.html>

<sup>13</sup> Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, "Emergency planning and response Issues paper" (2020), <https://disability.royalcommission.gov.au/system/files/2022-03/Issues%20paper%20-%20Emergency%20planning%20and%20response.pdf>

<sup>14</sup> Alexander, D., Gaillard, J.C., Wisner, Ben, Disability and disaster - Handbook of hazards and disaster risk reduction (2021), [https://www.researchgate.net/publication/285004501\\_Disability\\_and\\_disaster](https://www.researchgate.net/publication/285004501_Disability_and_disaster)

to people with disabilities during recent disasters. These initiatives are also often disability-led, such as finding beds for people and animals displaced by disaster events.

Overall, the evidence highlights the profound challenges faced by people with disability during disaster events.<sup>15</sup> Significant measures must be implemented to ensure inclusivity, accessibility, and the provision of necessary support and resources for people with disabilities during and after catastrophic events.

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<sup>15</sup> Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, “Emergency planning and response Issues paper” (2020), <https://disability.royalcommission.gov.au/system/files/2022-03/Issues%20paper%20-%20Emergency%20planning%20and%20response.pdf>

## What are the problems?

During planning and preparation, activation, reconstruction, and reflection following a disaster the needs of people with disability and how they are impacted are currently not being adequately recognised and addressed.

The problems identified fall into five categories:

### **1. Absence of disability representation and consultation in the governance of disaster management in Australia**

People with disability are rarely consulted in the planning and preparation of policies and procedures prior and during a disaster event. This means that during an event, people with disability are rarely considered as a specific cohort, requiring specific supports. The disability community reports often feeling like an afterthought during a disaster and in the reconstruction that follows.<sup>16</sup>

### **2. Lack of individual disaster planning**

Every person with disability has different needs during a disaster event. Planning tools such as Person-Centred Emergency Planning Toolkit gather vital individual information that needs to be accessible to the person with disability, informal and formal supports during a disaster.<sup>17</sup>

Completing an individual plan requires time and support from an informal or formal support who understands the person's situation.

Furthermore, government cannot access critical information on individuals who are impacted by a disaster as there is no repository of disaster plans. So when a disaster event unfolds identifying those people with disability impacted and what support they need does not occur easily.

### **3. Continuity of supports during disasters**

For all people with disability, the lack of accessible and available mainstream evacuation and disaster management services can be catastrophic. In addition, for many people with disability, a disaster means their essential supports are disrupted.

For people with disability who get supports through the NDIS, during disaster events the NDIA response has often led to greater confusion. There has been inflexibility around the

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<sup>16</sup> Every Australian Counts (2020), "Left out and locked down" *The experiences of people with disabilities and their families during COVID-19*, <https://everyaustraliancounts.com.au/wp-content/uploads/left-out-locked-down-experiences-of-pwd-and-families-during-covid19.pdf>

<sup>17</sup> Villeneuve, M. (2020). *Clearing a path to full inclusion of people with disability in emergency management policy and practice in Australia*. Centre for Disability Research and Policy. The University of Sydney, NSW, 2006. <https://collaborating4inclusion.org/wp-content/uploads/2022/09/clearing-a-path-issues-paper.pdf>

use of people with disability's plans and inconsistent decision making. At times, the NDIA acts as a conduit to mainstream supports during a disaster, however this is inconsistent. Finally, many people with disability don't have access to the support workers they need during a disaster. The NDIA currently has no plan on how to address workforce issues during a disaster.

For people with disability outside the NDIS, the existing crisis of a lack of supports and a lack of access to mainstream services is magnified.

#### **4. Unsustainable workload of advocacy services**

Australia's advocacy organisations are on the frontline, supporting people with disability at all stages of a disaster. This increase in the workload is unfunded, unsustainable and advocacy organisations need greater financial support.

This increased workload is often in response to a disaster, assisting people with disability to reconnect with essential supports and services, checking in to ensure people are safe and navigating systems in crisis. Advocacy organisations are also well positioned to undertake preventative work with people with disability in their local communities.

#### **5. Inadequate safeguards**

The use of restrictive practices during a disaster is often not identified, understood, reported or investigated. Restrictive practices under the guise of keeping people safe results in people with disability often being isolated and with increased vulnerability to abuse. The NDIS Quality and Safeguards Commission (NDIS Commission) do not have the resources or systems to effectively address this issue. They are also not reporting specifically on restrictive practices during disasters.

## What are the solutions?

The following potential solutions have been developed to address the problems raised in the discussion paper.

### **Establish a Disability Disaster Management Centre**

The Disability Disaster Management Centre (DDMC) is the body that could investigate, coordinate and bring a best practice approach to respond to a disaster event in a way that ensures people with disability are safe and supported. A crucial first step would be for the DDMC to audit existing plans, programs and facilities to ensure that they meet the needs of people with disability.

The DDMC could be established within the National Emergency Management Agency. When a disaster response is activated the DDMC could have representatives as part of the Disaster Management Committees at the state level to ensure there is disability representation at all levels of government.

The DDMC would ensure people with disability's voices are considered during planning and disaster management policy development by facilitating ongoing consultation processes. The DDMC would ensure people with disability have a seat at the table and are considered a distinct cohort during an emergency, requiring specific consideration and response, as opposed to being an afterthought.

The DDMC, in consultation with people with disability, disability organisations and service providers, would develop Disability Disaster Plans based on distinct disaster scenarios. For example, floods, fires, disease outbreaks etc. In particular, the plans would detail the steps to be taken once a disaster is activated to ensure the timely release of independent accessible information. For example, this may include the process of working directly with disability advocacy organisations to distribute Easy English guides. Additionally, the Disability Disaster Plans should consider the different responses depending on the type of disability accommodation setting, including negotiating the differences between residential aged care settings and disability accommodation settings.

During a disaster the DDMC would also work with mainstream agencies, including housing and health to ensure that people with disability are appropriately prioritised and planned for. The DDMC could also house the database where details of people with disability's disaster plans could be collected, so that government could immediately identify of people with disability impacted and their support needs.

### **Invest in Person-Centred Emergency Planning**

The importance of individual planning cannot be overstated. For people with disability, their informal and formal supports, it gives reassurance that during a disaster event they will have the supports they need to survive and connect. On a systemic level, if government can



identify people with disability involved in a disaster and what support is required it will ensure supports are rolled out more efficiently and allows for the best outcomes for individuals.

To ensure people with disability have the support they need to create individual disaster plans, the NDIA should initially fund three hours of support coordination in all plans to develop a Person-Centred Emergency Planning Toolkit and one hour per year for every year after that to review the plan.

If a person with disability has an NDIS Plan, but is not funded for a support coordinator, there should be funding for a key support worker, chosen by the person with disability, to assist in the development of their Person-Centred Disaster Plan.

For people with disability who are not funded through the NDIS, the Person-Centred Emergency Planning Toolkit should be readily available through mainstream government services. Disability advocacy organisations should be funded to host workshops to assist people with disability to develop their own plan.

### **Flexible use of NDIS funds during disasters**

The NDIA needs to consider how people with disability can use their plans more flexibly during a disaster event and create an NDIA Disaster Funding Plan.

For example, core funds not specifically allocated to short-term or medium-term accommodation could be used for that purpose if housing is impacted by a disaster.

Additionally, Assistive Technology limits before an assessment is required should be lifted to allow people with disability to easily access the support they need.

The potential to release emergency funds during disasters should also be established through contingency budgeting for this purpose. For example, short term funding for using informal supports should be considered due to the challenges of accessing supports due to location and the impact of support availability in rural and regional areas.

In disaster identified Local Government Areas (LGA), plans should be reviewed within three months of the disaster to ensure that funds used during the disaster will not leave the participants short for other supports moving forward.

### **NDIA to develop a Workforce Disaster Surge Plan**

The NDIA in consultation with people with disability and service providers should develop a Workforce Disaster Surge Plan. The plan should consider how a disaster impacts the disability support workforce and assess how to best facilitate a workforce surge to an impacted area during a disaster event to ensure no person with disability is left without supports. The plan should consider all disability accommodation settings, including residential aged care settings and disability accommodation settings.

As part of this plan, the NDIA should budget for, and establish, a crisis hotline for the duration of the disaster and recovery to support both people with disability and service providers to get timely and accurate information.

### **Specific disaster funding stream for advocacy organisations**

During times of crisis, people with disability look to advocacy organisations for information and support. These organisations have the networks and skills to distribute information and support the development of clear and accessible information. They also have an important oversight role in times of disasters to ensure people with disability do not face violence, abuse, exploitation or neglect. However, the informal role they play during disasters currently leads to a significant increase in their workload and pressure on resources.

There is a need to establish a specific funding stream that supports advocacy organisations during times of disaster. This pool of funding should be made up of 50% federal government contribution and 50% state government contribution.

When a disaster is activated, all advocacy groups responsible for supporting that LGA should receive a boost to their funding (of, say, 20%) to undertake disaster relief work. Advocacy organisations should also receive specific funding for preventative disaster responses in their local communities, working with other local organisations and people with disability to prepare and plan in advance.

### **Strengthening safeguards**

The NDIS Commission should develop a Restrictive Practices During Disasters Plan in consultation with people with disability and disability organisation with a focus on how to reduce use of restrictive practices during a disaster.

The plan should include understanding the type of restrictive practices that are more likely to be used during a disaster, the people with disability at greater vulnerability to these practices, how to monitor and report in a disaster event given the many challenges and the best ways to scale up oversight in disaster affected areas to respond to reports and deter inappropriate practices.

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