

16th Oswald Barnett Oration (21 October 2010)¹

Reforming Disability Policy: From Charity and Welfare to Social Insurance and Investment

by

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I am deeply honoured to have been invited to present the Oswald Barnett Oration for 2010. Barnett's inspiring legacy in the form of public housing and the distinguished list of speakers who have delivered previous Orations make this a very special occasion for me.

All great reforms require both clarity of vision and effective implementation, which were the hallmarks of Barnett's work. The establishment of the Housing Commission of Victoria and his advocacy for a National Housing Scheme, as part of Australia's post-war reconstruction plans, were timely, far-sighted and led to transformational changes. Very few people have had the enduring impact that he initiated.

As I reflect on Barnett's pioneering work, the similarities and links between Barnett's advocacy for a National Housing Scheme and the current vision for disability reform through a National Disability Insurance Scheme go well beyond the resonance in their names.

Oswald Barnett's ideas about housing reform were largely generated by a small group outside government and then refined and developed both within and without government. The same is true of the National Disability Insurance Scheme or NDIS.

Just as secure housing is a foundation stone on which inclusive and productive lives can be built, so is the NDIS. Without entitlements to essential care, support, therapy, equipment, early intervention and access to education and work inclusive and productive lives for people with disabilities will remain a lottery.

¹ Delivered at the Treasury Theatre, 1 Macarthur Street, Melbourne, 21 October, 2010.

In 1944, Barnett and his two co-authors, Oswald Burt and Frank Heath, in *We must go on*, observed:

‘[T]he man in the street has become a realist. He is tired of hearing about ideals without learning something of the means by which these are to be realised. Unless he is presented with working plans his idealism will change to cynicism and despair.’²

They could have been writing about people with disabilities, their families and carers in Australia today.

Most of the large institutions in which people with disabilities were housed at Barnett’s time have been closed, but appropriate housing and the support structures to provide safe and inclusive lives in the community for people with disabilities, beyond a caring family, remain the exception rather than the rule.

The housing careers of people with disabilities are very different to most Australians. Many people with disabilities live at home until an ageing parent can no longer provide care or dies and then, suddenly, they have no option but to accept a vacancy in a group home living with strangers, often some distance from previous networks and friends and in unfamiliar territory. While people with disabilities represent 20 per cent of the population, 40 per cent of people living in public housing have a disability. But these are the lucky ones, as people with disabilities are also overrepresented amongst the homeless and in the judicial system.

Oswald Barnett's Methodist beliefs provided him with the values that led him, along with other members of the Methodist Church, to seek housing reform. In my life journey, it was the Methodist values of my closest school friend and his family, which have had a profound effect on my values of family, work and fairness³.

² FO Barnett. WO Burt and F Heath, *We must go on*, 1944

³While this Oration is dedicated to the memory of Oswald Barnett, I would like to acknowledge my deep gratitude to Judy and Bruce Dewhurst on this occasion. One of Judy's favourite sayings was: "if you're going to do it, do it properly". Certainly, this maxim applied to Oswald Barnett. In time, I hope that it will also hold true for a National Disability Insurance Scheme.

In the case of the National Disability Insurance Scheme it was Brian Howe, a former Methodist Minister, who first alerted me to the idea that disability policy could be reframed from the current welfare and charity approach to an insurance framework. It was also Brian's wife, Renata, who delivered the inaugural Oswald Barnett Oration.

In many cases, the support for people with disabilities in Victoria has been built on Methodist foundations. Yooralla, which I have chaired for the past six years, was formed by a Methodist Mission Sister, Sister Faith, who in 1917, while working in the slums of Fitzroy discovered a young girl with disabilities caged in a chicken coop while her family went out to work. Sister Faith was appalled, not by the action of this girl's parents but by the lack of opportunity for their child, because at that time, children with disabilities were excluded from schools. She therefore raised civic concern and established the Yooralla Kindergarten, which became the Yooralla School and has since developed into the largest provider of disability services in Victoria, now touching the lives of more than 25,000 Victorians each year.

Support for people with disabilities continues through the Uniting Church, today. In the lead up to the recent Federal Election it was the Uniting Church, through Uniting Care and Uniting Justice, which included information on the NDIS in the advice to parishioners on the key issues to be considered when casting their vote.

So, the parallels between the work of Barnett and the current vision for disability reform are strong. But while solid progress towards the introduction of a National Disability Insurance Scheme has been achieved, it is still only an aspiration. So, in this Oration, I would like to focus on three areas, as part of the continuing quest for disability reform, from the current charity and welfare model which is clearly outmoded and failing, to a new paradigm based on social insurance and investment.

First, I would like to provide an historical context for the NDIS. Second, I will outline the details of the Scheme and why this reform is so essential. In this section I will draw heavily on the work of the Disability Investment Group, of which I was a

Member, and its report *The Way Forward: A New Disability Policy Framework for Australia*. And thirdly, I would like to suggest that the National Disability Insurance Scheme is a part of a much broader political change which should be seen as taking disability policy and disability issues from the margins to the mainstream of the Australian body politic.

The Current and Historical and Current Context

The relief of poverty and disadvantage has been the basis of charity since the original *Statute of Charitable Uses* of Queen Elizabeth I in 1601. In that first statute people with disabilities were explicitly included as worthy of charitable support, although the reference specified 'sick and maimed soldiers and mariners' only.

Over time and with the growth in the role of government, especially in the 20th-century, this system of support for people with disabilities evolved into a welfare and charity system. For example, in the UK, in 1942, William Beveridge laid the foundation for the modern British welfare state, with his report on Social Insurance and Allied Services. He recommended a coordinated system of benefits for those who are sick, unemployed, retired or widowed, which is also a feature of Australia's social security system today.

The first modern system for accident compensation was Bismark's Imperial German Accident Insurance Law of 1884, which emerged in response to high rates of industrial accidents. This was quickly followed by the English Workmen's Compensation Act of 1897, because until its introduction the courts viewed employment as a master-servant relationship. Their interpretation of common employment, voluntary assumption of risk and contributory negligence meant that relatively few victims of occupational injury were able to successfully claim compensation. In effect, the workers compensation acts shifted the basis of compensation to injured employees from 'fault' to 'cause'.

In 1910 Sir William Meredith was appointed to review workers compensation arrangements in Ontario. He recommended a new approach based on what is now known as the Meredith principles, which were subsequently adopted by all of the

Canadian provinces and were influential world-wide. It was in 1946 that Saskatchewan introduced the first no-fault motor vehicle accidents scheme, even though by then motor vehicles had become a major source of injury in many countries.

In Australia, the first no-fault workers compensation schemes was established in South Australia in 1900 and the last in Victoria in 1914, while the first no-fault motor vehicle accident schemes were established in Victoria and Tasmania, in 1974.

Also in 1974, Sir Owen Woodhouse, recommended a no-fault accident schemes for all injuries. While the scheme was adopted in New Zealand, and still underpins the Accident Compensation Commission today, his report was not implemented in Australia, as it was on the floor of the House for debate on 11 November, 1975, and was then abandoned by the Fraser Government.

In Australia, the impetus for a broader no-fault approach to supporting people with disabilities lay dormant until 2005 when John Walsh and some colleagues recommended a long term care scheme for the catastrophically injured to Insurance Ministers. This report included a revolutionary actuarial approach, devised by John, to costing and structuring disability support, but yet again there was no political will to act and it remained on the shelf, like the earlier Woodhouse Report.

As a result of the failure of governments to introduce uniform and broad no-fault compensation arrangements and the Commonwealth, States and Territories Disability Agreement, which led to very different approaches and rates of progress, support for people with disabilities became increasingly fractured across Australia.

This has culminated in the situation, today, where for example, children with autism have access to large early intervention packages while children with other disabilities do not. Some people have access to no-fault accident compensation schemes, a few more receive a lump-sum payout after years of draining litigation while the vast majority are forced to rely on family or friends or a complex service system, which purports to allocate services according to needs but is actually more akin to a lottery.

Now, how, where and what your disability is, rather than need, determines the support you receive.

The inequities and crevasses in Australia's system for supporting people with disabilities were highlighted starkly in early 2009 by someone who knows the system very well. Brendan O'Reilly, who at that time had just retired as Director General of the Department of Ageing, Disability and Home Care in NSW, confided in a farewell speech that:

‘he had told his wife that if he fell from a ladder when cleaning the gutters and was seriously disabled, she should bundle him into the car and roll it into the house "because there's a system that covers car accidents [in NSW]"⁴

The media, for its part, has personalised the consequences of this fractured system by reporting individual cases, but one of the unfortunate consequences of this has been to portray people with disabilities as a burden. Nevertheless, one story that I find particularly poignant as well as deeply motivating is a report in *The Sunday Age* from 2008 by Gary Tippett, where he reported:

‘TRUE love never dies. But, in a sense, one of Melbourne's most moving little love stories ended on Friday.

Kenny Morrison, 61, passed away last Saturday and was farewelled on Friday, leaving behind his devoted mother, Gwen [aged 92]. And that's the way Gwen always wanted it.

Fourteen years ago, when I first met Gwen and Kenny, she told me she couldn't die before him. From the time Kenny was born — on January 21, 1947, with Down[s] syndrome — Gwen had dedicated her life to him. From the day her husband Arthur died, in March 1971, she had done so alone.

‘Staying alive, that's my aim and my necessity,’ she said. ‘My main object is to keep alive for him as long as I can, because he's on his own after that.’⁵

⁴ Adele Horin, *The Sydney Morning Herald*, 19 February, 2009, Official calls for disabled care levy

⁵ Gary Tippett, *The Sunday Age*, April 6 2008, Story ends as it began—with love

Less than a year after Kenny's death, Gwen passed away peacefully, knowing that her life's work was complete.

Now, for the first time in many decades, based on two milestone reports, as well as deeply disturbing stories like Gwen's, there is an emerging consensus amongst governments at all levels and all political parties that major disability reform is long overdue.

First, the *Shut Out* Report, prepared by the National People with Disabilities and Carer Council and released in August 2009 provided a first-hand account of the lives of Australians with disabilities and those who care for them⁶.

It is based on more than 750 submissions and consultations with more than 2,500 people across Australia. In her introduction to this landmark report the Chair of the Council, Dr Rhonda Galbally, stated, without exaggeration:

‘For many years people with disabilities found themselves shut in – hidden away in large institutions. Now many people with disabilities find themselves shut out – shut out of buildings, homes, schools, businesses, sports and community groups. They find themselves shut out of our way of life.’⁷

Shut Out therefore established the imperative for disability reform.

Then, a few months later, the Disability Investment Group published its report: *The Way Forward: A New Disability Policy Framework for Australia*.

In his covering letter to the Parliamentary Secretary, the Chair of the Disability Investment Group, Mr Ian Silk, stated

‘The lack of proper planning and integrated service delivery [for people with disabilities and carers] is a national disgrace and ...will undoubtedly worsen

⁶ National People with a Disability and Carer Council, *Shut Out*, 2009.

⁷ National People with Disabilities and Carer Council, *SHUT OUT: The Experience of People with Disabilities and their Families in Australia*, 2009

so long as the current arrangements remain in place... We believe that a National Disability Insurance Scheme is required to create the transformational shift to move care and support for people with disabilities out of the dark ages and into the 21st century.’⁸

Taken together, the reports from the National People with Disabilities and Carer Council and the Disability Investment Group provide both the case for radical reform and a potential solution. It is these reports which have led directly to the current Productivity Commission Inquiry into a Disability Care and Support Scheme and, in particular, a National Disability Insurance Scheme.

A National Disability Insurance Scheme

A NDIS would provide essential services for people with disabilities and assistance for carers, based on their needs, including:

- support and therapy
- case management, brokerage services and advocacy to facilitate independence, maximise potential and plan transitions over the life course
- family support, including respite and support for carers
- early intervention to maximise long term outcomes
- aids, equipment, technology and home modifications on a timely basis, and
- training, development and access to work to build self-esteem and reduce long term costs.

The Scheme would include people born with disability or who acquire disability through an accident or progressive medical condition and mental illness.

The scheme would be person centred and so put people with disabilities and their families in control.

⁸ Disability Investment Group, The Way Forward: A New Disability Policy Framework for Australia, September, 2009

The costs of the scheme were calculated by John Walsh of PricewaterhouseCoopers (PwC) based on the same methodology as his earlier work on life-time care and using data on the incidence, life expectancy and likely severity of all types of disability. According to PwC the additional *gross* costs of a NDIS, over and above current government expenditures, would be equivalent to 0.8 per cent of taxable income. For people on average weekly earnings this equates to about \$8 per week or two cups of coffee.⁹

About one-half of this additional funding would be sufficient to meet the current unmet needs, while the other half would be set aside to meet future needs so that as Australia's population ages there would be no need for the levy to be increased.

The net costs will be lower, because people with disabilities are over-represented in emergency hospital admissions, amongst the homeless and in the judicial system, as in many cases today they do not get the support they need. A NDIS could be expected to lead to very significant savings in these areas as additional tailored supports allow people with disabilities to live independently. Over time, a NDIS, due to its focus on early intervention and access to education and work, could also be expected to lead to much better employment outcomes and so significantly reduced Disability Support Pension costs.

The recommendation for a NDIS in the DIG Report was based on four key principles:

- Equity
- Self determination
- Efficiency; and,
- Sustainability

First, equity. While the UN Convention involves a paradigm shift in thinking from people with disability as objects of charity to citizens with rights, those rights do not guarantee resources.

⁹ Disability Investment Group, *The Way Forward A New Disability Policy Framework for Australia*, September 2009

In economic terms, as well as social justice terms, the key principle is equity. In designing a new system for supporting people with disabilities there must be equity within the group of people with disabilities, between people with disabilities and without, and the costs of funding disability services must be shared equitably.

A NDIS would ensure all people with a disability had access to services and support regardless of their specific disability or how or where they acquired their disability.

But it is just not inequity between people with a disability. It is also inequity between people with a disability and the rest of the population which must underpin an NDIS.

The 2008 Pension Review for the Federal Government, which was chaired by Dr Jeff Harmer, found that people on the Disability Support Pension are in fact, on average, poorer than other income support recipients such as old age pensioners, because the costs of disability are so high. This Report therefore recommended that ‘an NDIS would be worthy of further consideration’¹⁰.

The other dimension to equity is how disability services in general and a NDIS specifically should be funded. Because disability can affect anyone at anytime, the most equitable way is based on capacity to pay and this would be most readily achieved by extending the Medicare levy to include disability. Alternatively, it could be funded from general revenue.

The situation is analogous to the usage and funding of intensive care units in public hospitals. Every taxpayer contributes willingly to the costs of building and staffing these facilities as a form of insurance payment, hoping never to need them while providing an entitlement to life saving care if it is ever required.

Second, self determination.

Today, the extent of individual packages or self directed funding varies dramatically across the States. A NDIS would shift power to people with disabilities. It would be

¹⁰ Department of Families, Housing, Community Services and Indigenous Affairs, Australia's future tax system, Pension Review Report, February 2009

person-centred; individualised; built around the choices of the person with a disability and their family; flexible; responsive; and, recognise the changing needs of a person with a disability over their lifetime.

The DIG saw a NDIS as a critical opportunity to transform the way services are delivered and finally make sure people with disabilities and their families are placed at the heart of the disability system. It also favoured self determination, because once people with disabilities become consumers who are free to choose, the market will drive innovation and provide individuals with value for money, much more effectively than so-called quality systems, which really are form-filling exercises.

Individual choice and the market are the best ways for people to maximise their well-being, recognising that in some cases people with disabilities will need support, through advocacy, in their decision making.

Third, efficiency.

In the current welfare model there are enormous pressures to reduce costs in the short term. As a result there is very little attention paid to long term outcomes. This is true for both people with a disability and their families. Early intervention is “barely intervention”¹¹. As a result, many become more disabled than they should or miss out on opportunities. Carers are burnt out rather than nurtured and sustained in their roles.

In total, governments are spending around \$6 billion per annum on direct disability services, \$1 billion on Home and Community Care for people with disabilities, \$12 billion on the Disability Support Pension and \$2 billion on Carer Payment and Carer Allowance; a total in excess of \$20 billion.

¹¹ Rhonda Galbally, SHUT OUT-Life for Australians with a disability and their families, National Press Club, 7 October, 2009

This is a lot of money, but in terms of outcomes the results are poor. People with disabilities have two thirds the labour force participation rate of people without disabilities and twice the unemployment rate¹².

Many carers become disengaged from the labour force as a result of their responsibilities at home. Compared with the total population, the Australian Institute of Family Studies¹³ estimates that carers are twice as likely to be in poor physical health, twice as likely to experience financial stress and nearly one half of all carers have experienced a mental illness for six months or more since they became carers.

Amongst carers who provide informal care full time and are in receipt of Carer Payment only 11 per cent work part-time. Then, in 60 per cent of cases when they are no longer eligible for Carer Payment, they shift across to other forms of government income support, because either long term disengagement from the workforce or the onset of physical disabilities or mental illness due to their caring roles have made them unfit for work¹⁴. This is a huge cost to society.

Dr Ken Henry in his review of Australia's future tax system commented¹⁵:

The current disability service system is fragmented, insufficient to meet current needs, difficult for people to access, and has no incentives to promote increased efficiency or effectiveness. This system will face considerable challenges in the future in meeting the demand for accommodation, care and respite services for people with a severe disability.

In contrast, no-fault accident insurance schemes in Australia achieve much better outcomes through their focus on minimising lifetime costs and maximising lifetime

¹² Australian Institute of Health and Welfare (AIHW), Disability in Australia: trends in prevalence, education, employment and community living, Bulletin 61, June 2008. In 2003, the latest year for which data is available, labour force participation rates for males and females with disabilities were 59.3% and 47.0%, which were approximately two-thirds the rates of participation for males and females without disabilities of 89.0% and 72.3% , respectively. In the same year the unemployment rate for people with disabilities was nearly twice the national average at 8.6%, compared with 5.0% for people without disabilities.

¹³ B Edwards, D J Higgins, M Gray, N Zmijewski and M Kingston, The Nature and Impact of Caring for Family Members with a Disability in Australia, 2008

¹⁴ In 2009/10 19,554 people ceased receipt of Carer Payment and 60.0% moved onto other forms of government income support; the corresponding figures for 2008/09 were 18,240 and 61.6%

¹⁵ Australia's Future Tax System

opportunities. The lifetime insurance approach also creates a natural alignment of interests between the scheme management, people with disabilities and carers. Therefore while a National Disability Insurance Scheme would add to costs in the short term, as it would meet current unmet needs, it has the potential to significantly reduce costs in the long term.

Finally, sustainability.

There are a number of key dimensions to sustainability, including fiscal responsibility, inter-generational neutrality, workforce training and development and a competitive market; all of which need to be placed in the context of on-going demographic and social changes.

Over the last 30 to 40 years disability in Australia has been shaped by very powerful demographic and social trends. It is these inexorable forces that lie at the centre of the current policy failings.

Over recent decades as the life expectancy of Australia's population as a whole has increased, the life expectancy of people with disabilities has increased even more significantly. Families, in general, are also having children later in life. As a result, people with disabilities are often outliving their parents, which was almost unheard of in previous generations.

In addition, while the number of neonatal deaths has been declining for many years, as has the number of still-births, the number of children being born with disabilities has been rising slightly. Rates of acquired disabilities are also rising, due to foetal alcohol syndrome and alcohol fuelled violence.

At the same time as the rates of disability are increasing, the capacity of the community to provide informal care is declining. Families are smaller, women want and often need to work and rates of marital breakdown are increasing, especially amongst families with children with disabilities.

As a result of these two trends, demand for government funded disability services is rising at 7.2 per cent per annum in real terms and government expenditures on disability will need to double in less than 15 years¹⁶.

Currently, Australia sets aside no funds to meet the future costs of care for people with disabilities. This may be contrasted with superannuation where billions of dollars are set aside each year and total superannuation assets exceed a trillion dollars, so that future generations will not be solely responsible for the retirement incomes of people who are working today. Similarly a NDIS would allow Australia to strike an appropriate balance of disability costs between current and future generations and so be intergenerational neutral.

Governments around Australia therefore face a choice. They can continue to ignore the current demographic and social trends or they can develop a fiscally responsible approach by putting people with disabilities at the centre of a new service system, which is equitable, efficient and sustainable.

Finally, there are a number of features to the structure and operation of insurance companies which make them uniquely placed to drive optimal outcomes for people with disabilities and the nation.

First, insurance companies throughout their history have been a force for positive social change. An early example was the role that insurance companies played in the establishment of fire brigades in many communities and improvements in building regulations to reduce fire risks. A more contemporary example is the role played by the Transport Accident Commission in Victoria. In 1989 when the TAC launched its controversial *Drink Drive Bloody Idiot* campaign Victoria's road toll was 776. Since then through further powerful advertising campaigns and other initiatives, such as eradicating 'black spots' on Victoria's roads, the State's road death toll has fallen to 290 last year, while the number of road users has doubled. As a result, Victoria's road death toll is one of the lowest in the world, which is an extraordinary achievement.

¹⁶ Independent analysis cited in The National Disability Strategy 2010 – 2020 prepared for the Department of Ageing, this Disability and Home Care, NSW, 2010 (not available publicly), page 20.

The potential for a disability insurer to become a powerful force was highlighted by Graeme Innes, the Disability Discrimination Commissioner, in a speech to the National Disability Summit in April this year. Initially quoting Clint Eastwood, he said:

“A man alone is easy prey.” But a person whose cause is represented by an organisation, or a statutory authority—or perhaps an insurer with an interest in favourable and efficient resolution of the matter—is not a man, or woman, alone anymore.

There is more to a social insurance scheme than payments to insured individuals.

As well as paying benefits to individuals, insurers do all sorts of things to manage risk. And these things as it happens look very similar to many of the major mechanisms for social change provided in the obligations in DisCo [the UN Convention on Rights of Persons with Disabilities]¹⁷.

Second, insurance companies, as a matter of necessity, are forward-looking. They plan for future needs. There is a natural alignment between the insurer and those they support based on optimal long term outcomes. Similarly, they nurture and support informal care systems, rather than burning out carers as happens too frequently in the current under-funded and short-term welfare model.

Third, insurance companies are forever comparing the actuarial forecasts built into their financial models and actual experience. If there is a divergence, they investigate in order to determine the cause. This results in a continuous drive for efficiency and better practice. More generally, and the Victorian Transport Accident Commission is a notable current example, insurance companies invest in research and best practice driving further improvements in service quality and outcome.

Disability Policy: From the Margins to the Mainstream

¹⁷ Graeme Innes, DIG it at the DisCo: Or Money Changes Everything, National Disability Summit, 30 April 2010

There are three forces which are now driving disability policy from the margins to the mainstream of the national reform agenda. These are a reframing of disability as an economic as well as a social issue, a new sense of shared purpose within the disability sector and the emergence of disability as a new force in Australian politics.

The last great advances in the disability sector were almost 30 years ago, in the 1970s and 1980s, as a result of the disability rights movement, which established the importance of disability as a social issue and rejected segregation and institutionalisation. These were great steps forward, as was the International Year of Persons with a Disability in 1981. But it is clear that the hopes and aspirations of that time were not realised.

Therefore, in looking forward and suggesting a very different future, it is essential also to look back, in order to understand why for the past 30 years when Australia has experienced the most profound social and economic reforms in its history, disability was left on the sidelines.

Paul Kelly, in his seminal study, *The End of Certainty*, describes the 1980s as the end of the Australian Settlement. The Australian Settlement was built on the Harvester Case, in the Commonwealth Conciliation and Arbitration Commission in 1907. In that year Justice Higgins set the first national wages standard, when he determined that the wage for unskilled labourers should be sufficient to allow them to feed, clothe and house a wife and two children.

For the next 80 years this minimum wage applied to all industries and sectors irrespective of their profitability or productivity. Where industries could not compete with imports, tariffs and quotas were used to protect local industries. Over the years rates of protection rose as more industries became uncompetitive and labour and product markets became progressively less and less flexible.

In effect, economic policy became subsidiary to social policy and the minimum economic wage became a social wage. However, this social equality came at a very high cost in terms of total prosperity and the economy's overall growth rate.

In the face of low growth and high inflation, the Hawke Government began to deregulate the economy. The Australian dollar was floated, the financial system was opened to foreign competition, wage setting became less centralised and trade barriers were reduced.

Directly as a result of these reforms, Australia began moving from the bottom of the OECD economic league tables towards the top, culminating in Australia's extraordinary economic performance during the Global Financial Crisis, when Australia was the only OECD country not to go into recession.

One of the consequences of these cataclysmic changes, which sharply distinguishes the policy environment today from the 1970s when the last great reforms in disability policy commenced, is that social policy is now either subsidiary to economic policy or at least must be embedded in an economic policy framework to cut through.

It is in this context that I believe that the National Disability Insurance Scheme and the work of the Disability Investment Group are so important, because for the first time governments have been given a powerful economic case for disability reform, which is now being reviewed and tested by the Productivity Commission.

The second aspect of the work of the Disability Investment Group that is critical is that through the conceptualisation of the needs of people with a disability as a single demand for a National Disability Insurance Scheme, people with disabilities, their families and carers have a unifying claim, for the first time.

Up to now, it has been easy for governments to ignore the demands for better support for people with disabilities, because demands for reform have often been at crossed purposes. It has been easy to ignore people with disabilities when a few people have been asking for increased therapy, others for buses and others for accommodation. Or groups with different disabilities have pursued their own agendas, frequently competing bitterly for government attention.

The potential for unity has already been reflected in the formation of the National Disability and Carer Alliance, which brings together the Australian Federation of Disability Organisations, Carers Australia and National Disability Services. It represents the first time that the three arms of the sector have formed a joint organisation and the initial priority for the Alliance is a National Disability Insurance Scheme.

Many service providers, including Yooralla, have committed funds in pursuit of exponential change, a National Campaign Committee has been formed and John Della Bosca, the former Minister for Disabilities in NSW, has been appointed Campaign Director. So far, more than 590 submissions have been made to the Productivity Commission, 40 per cent more than any previous enquiry.

Much of the language of disability is the language of war. People with disabilities are brave and heroes. Family members who provide life long care are courageous. People with disabilities and their families fight and battle for support. These characteristics are now being harnessed to shift public opinion, in order to secure lasting political and policy change.

All political parties and all levels of government are now hearing and responding to the call for disability reform. In the recent Federal Election campaign the major parties all acknowledged that ‘the current disability support system is unsustainable and indefensible [and that] reforms, most importantly the introduction of a National Disability Insurance Scheme, should create a system that is equitable, efficient, sustainable and based on self determination’¹⁸. There have also been similar statements of support for a NDIS from the major parties in the current Victorian State Election.

Bill Shorten, who is one of the most astute politicians in Australia today; a possible future Prime Minister, has read the signs. He, more than any other political leader, has grasped the latent political power of people with disabilities, their families and carers. Even more significantly and enduringly in his time as Parliamentary Secretary, he

¹⁸ National Disability and Carer Alliance, All parties commit to National Disability Insurance Scheme, 16 August 2010

drew on his deep experience in the union movement to encourage the disability sector to become well organised and unified.

Now, it is essential that all Australians engage in this important national issue. Each of us is only a genetic accident or an injury away from acquiring a disability personally or having a child or grand-child with a disability.

A National Disability Insurance Scheme would replace the current outmoded Dickensian welfare approach to disability with a modern insurance and investment framework, designed for the 21st century. An NDIS would be equitable and meet the needs of all people with disabilities their families and carers. It would provide peace of mind for every Australian while for people with disabilities it would mean, at long last, the chance of a fair go; “the right to an ordinary life”¹⁹.

It is a reform which would be practical, just and worthy. A reform in keeping with Barnett’s pioneering work more than half a century ago. A reform worthy of championing as part of Barnett’s enduring legacy.

¹⁹ Hon Bill Shorten, The right to an ordinary life, National Press Club, 1 April, 2009