# Welfare Review Submission Template

## Pillar One: Simpler and sustainable income support system

Changes to Australia’s income support system over time have resulted in unintended complexities, inconsistencies and disincentives for some people to work. Achieving a simpler and sustainable income support system should involve a simpler architecture, a fair rate structure, a common approach to adjusting payments, a new approach to support for families with children and young people, effective rent assistance, and rewards for work and targeting assistance to need.

### Simpler architecture

**Page 42 to 52** of the Interim Report considers the need for a simpler architecture for the income support system. The Reference Group proposes four primary payment types and fewer supplements. The primary payment types proposed are: a Disability Support Pension for people with a permanent impairment and no capacity to work; a tiered working age payment for people with some capacity to work now or in the future, including independent young people; a child payment for dependent children and young people; and an age pension for people above the age at which they are generally expected to work.

In shaping the future directions for a simpler architecture the Reference Group would like feedback on:

* What is the preferred architecture of the payment system?
* Should people with a permanent impairment and no capacity to work receive a separate payment from other working age recipients?
* How could supplements be simplified? What should they be?
* What are the incremental steps to a new architecture?

| This submission is focused on some mental health conditions and persons who are also in receipt of a disability support pension. it may or may not be relevant to all mental conditions or physical disabilities. the Statement ‘Permanent Disability and no capacity to work’ ignores the complexities of some mental health conditions eg: autism, bi-polar, AND SCHIZOPHRENIA and as a consequence will fail to take advantage of any capacity the individuals may have to return to the workforce. you are born with these conditions, they are not acquired, they are permanent and in the case of autism cannot be treated with medication. These people may at times have some capacity to WORK; however this situation can alter at any time. Employers, work colleagues, customers etc may not be aware of the individual’s condition and any ‘unusual’ behaviour can lead to teasing, bullying, loss of employment etc . a ‘more simplified system’ may suit dollars and numbers outcomes but infers a more simple system for government with no recognition of the difficulties already faced by these people. To endeavour to structure a disability support pension to address all circumstances will undoubtedly lead to unfair treatment for some of the most vulnerable people in our society. In so far as the disability pension is concerned it is not possible to simplify the system by placing all disabled people in the one box. for a start there needs to be a distinction made between physical and mental disabilities. For mental health conditions there needs to be subsets identifying the disability and each individual’s capacity to work, any limitations identified with proper safeguards which will allow mobility between pension and work generated income. this will take time and effort but each person’s situation needs to be assessed with the government truly encouraging work participation rather than the current situation where these people are penalised by reducing payments and support when they enter the workforce. As the minister has stated some disabilities are ‘episodic’ and this needs to be recognised. rather than removing people with a mental health condition from the disability support pension when they are working a certain number of hours, the pension should remain even if they are receiving no payment. support mechanisms such as rent assistance, health care card should be kept in place. this could continue for a number of years, say 2 or 3 to ensure these people can really undertake full time work on a long term basis and can operate independently within the community. under the current arrangements there is strong disincentives for these people to seek full time work. No one can fake these conditions and certainly would not do so just to receive a disability support pension. in any event to do so would indicate that person does have a mental health condition of some sort. if governments fail to recognise and address mental health conditions in a truly constructive way then the community is in for long term pain in the form of increased petty and major crime, suicides, prison and hospital populations. this review should reach out to those who presently give daily support to these people. they are in the best position to advise on a positive approach to reducing numbers receiving disability support pension. |
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### Fair rate structure

**Page 55 to 60** of the Interim Report considers changes that could be considered to rates of payment for different groups. In shaping the future directions for a fairer rate structure the Reference Group would like feedback on:

* How should rates be set, taking into account circumstances such as age, capacity to work, single/couple status, living arrangements and/or parental responsibilities?

| the disability support pension should be no less than the adult minimum wage for say clerical officers and increased yearly in accordance with cpi. People are born with a mental health condition, it is not acquired. it is not the person’s or parent’s “fault” and they should not have to carry the burden alone. |
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### Common approach to adjusting payments

**Page 60 to 64** of the Interim Report considers a common approach to adjusting payments to ensure a more coherent social support system over time. In shaping the future directions for a common approach to maintaining adequacy the Reference Group would like feedback on:

* What might be the basis for a common approach to adjusting payments for changes in costs of living and community living standards?

| no less than cpi |
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### Support for families with children and young people

**Page 65 to 68** of the Interim Report considers how the payments could be changed to improve support to families with children and young people. In shaping the future directions for support for families with children and young people the Reference Group would like feedback on:

* How can we better support families with the costs of children and young people to ensure they complete their education and transition to work?
* In what circumstances should young people be able to access income support in their own right?

| This is an area where the government needs to address its mutual obligations for people with a mental health condition. at present the majority of children are educated through the state and private school system. universities and tafe are in similar situations. these areas have very few if any programs that address the special needs of these children. there are a few private institutions which cater for these children but with fees in excess of $50,000 per annum they are inaccessible to most parents. not only does the education system fail these children, the bullying and teasing which by their different behaviour they are most likely attract only exacerbates the difficulties they face in daily living. unless governments face up to their mutual obligations in this field then any investments in programs when they reach adulthood will only deliver minimal benefits. In addition the longer this issue is ignored, only means the more adults in the community that will have minimal chances of being able to live A LIFE independent of government support. this early intervention will truly give credence to short term pain for long term gain. the reason so many adults with a mental health condition are on disability support is because this early intervention was never undertaken in their childhood. Does the panel understand that a person with Autism receives information in a number of individual ways eg. colours, music and has extreme difficulty in understanding teaching in a ‘normal’ classroom situation. the higher the level of education the more difficult it is for these people. it is only their individual intelligence that will enable them to achieve reasonable standards. society has set up most of these people to fail and transition to work is extremely difficult. if society (government) does not accept its responsibility in this area then they insure people remain on support for most of their lives. |
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### Effective rent assistance

**Page 68 to 71** of the Interim Report considers Rent Assistance and suggests a review to determine the appropriate level of assistance and the best mechanism for adjusting assistance levels over time. In shaping the future directions for Rent Assistance the Reference Group would like feedback on:

* How could Rent Assistance be better targeted to meet the needs of people in public or private rental housing?

| Persons with a mental health condition could not consider a rental situation if their sole income was the disability support pension. if part time work with part pension enabled them to rent in the private sector then a minimum of 50 per cent would be required. about 10 years ago in queensland these people who were living in the family home at the time were removed from the public housing list so this option is not available to them. once again governments have failed families of people with a mental health condition. |
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### Rewards for work and targeting assistance to need

**Page 72 to 78** of the Interim Report considers changes to means testing for improved targeting to need and better integration of the administration of the tax and transfers systems to improve incentives to work. In shaping the future directions for rewards for work and targeting assistance to need the Reference Group would like feedback on:

* How should means testing be designed to allow an appropriate reward for work?
* At what income should income support cease?
* What would be a simpler, more consistent approach to means testing income and assets?

| in relation to the disability support pension it is unlikely there will be any assets for persons with a permanent mental health condition. income support could cease when a person’s income is equivalent to the minimum wage. however, support mechanism’s such as rent assistance and health care card should continue even when income support ceases as this will provide a safety net until such time as it is demonstrated that full time work is a long term prospect. removing all support when a person’s income reaches a certain level is a big disincentive to seeking full time work. |
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## Pillar Two: Strengthening individual and family capability

Reforms are needed to improve lifetime wellbeing by equipping people with skills for employment and increasing their self-reliance. To strengthen individual and family capability changes are proposed in the areas of mutual obligation, early intervention, education and training, improving individual and family functioning and evaluating outcomes.

### Mutual obligation

**Page 80 to 85** of the Interim Report considers more tailored and broadening of mutual obligation and the role of income management. In shaping the future directions for mutual obligation the Reference Group would like feedback on:

* How should participation requirements be better matched to individual circumstances?
* How can carers be better supported to maintain labour market attachment and access employment?
* What is the best way of ensuring that people on income support meet their obligations?
* In what circumstances should income management be applied?

| In the first instance focus on the term mutual obligation needs to be shifted from the person receiving the support benefit to the community, government and employers. A cultural change is required and the present approach of labelling these people as disabled should be discontinued. The focus must be on the fact they are “different” not disabled.by focusing on the recipient of the support the need for change in these areas is not addressed. the community, governments employers generally accept and make the necessary adjustments for a person with a physical disability such as only one arm, in a wheelchair etc. they are considered normal just with a physical difference. the community, governments, employers cannot and do not accept that people with a mental disability are normal but just do and approach things differently. persons with mental health conditions are generally very smart, however they can have difficulties in such areas as personal interactions, timelines, organisation etc. this of course can and does lead to difficulties in the workforce and employers and other workers are not prepared to give the same considerations to persons with mental health conditions as they do to persons with a physical disability. alterations to the workplace are required to be made by law to meet the special needs of people with a physical disability. no such consideration is given to persons with a mental health condition. until such time as governments and employers meet their obligations in these areas there is little chance of meaningful work participation for these people.  |
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### Early intervention

**Page 85 to 88** of the Interim Report considers risked based analysis to target early intervention and investment and targeting policies and programmes to children at risk. In shaping the future directions for early intervention the Reference Group would like feedback on:

* How can programmes similar to the New Zealand investment model be adapted and implemented in Australia?
* How can the social support system better deliver early intervention for children at risk?

| Surely australia has sufficient number of people with enough intelligence to develop its own programmes. the new zealand experience has had insufficient time to determine whether it provides benefits which improves the long term outlook for persons with a disability or only for the bottom line of a government. the social support system needs to have the resources provided both in experienced personnel and budget for early identification of these mental health conditions with the associated educational facilities outlined in the response to pages 65 to 68 |
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### Education and Training

**Page 89 to 90** of the Interim Report considers the need for a stronger focus on foundation skills in both schools and vocational education and training, and on transitions from school to work. In shaping the future directions for education and training the Reference Group would like feedback on:

* What can be done to improve access to literacy, numeracy and job relevant training for young people at risk of unemployment?
* How can early intervention and prevention programmes more effectively improve skills for young people?
* How can a focus on ‘earn or learn’ for young Australians be enhanced?

| The previous comments on early intervention apply here as well. unless this issue is addressed you are only blowing in the wind and while alteration to payments etc may address government wishes they will not address the problem. it may alter the bottom line in one area but will appear doubly in other areas which will be more difficult to control. |
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### Improving individual and family functioning

**Page 90 to 93** of the Interim Report considers cost effective approaches that support employment outcomes by improving family functioning and the provision of services especially to people with mental health conditions to assist them to stabilise their lives and engage in education, work and social activities. In shaping the future directions for improving individual and family functioning, the Reference Group would like feedback on:

* How can services enhance family functioning to improve employment outcomes?
* How can services be improved to achieve employment and social participation for people with complex needs?

| to address this question the panel should undertake a short exercise in role reversal. imagine those currently on disability support pension controlled and or operated government and business and filled the majority of places in the workforce and people currently in those positions were on say a “normal” support pension. Then endeavour to address what services could be improved for the ‘normal’ person to achieve employment and social participation. developing adhoc programs which in most instances deliver minimal results will not make the necessary big change this review is seeking. more would be achieved if programs were developed for the community and business to take a more compassionate and understanding view of persons with a mental health condition. if progress can be made in this area family functioning, employment and social participation for people with a mental health condition will look after itself. |
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### Evaluating outcomes

**Page 93** of the Interim Report considers improved monitoring and evaluation of programmes aimed at increasing individual and family capability to focus on whether outcomes are being achieved for the most disadvantaged. In shaping the future directions for evaluating outcomes the Reference Group would like feedback on:

* How can government funding of programmes developing individual and family capabilities be more effectively evaluated to determine outcomes?

| if government funding of a programme whatever it is can’t be effectively evaluated by now then this review will not be able to come up with an answer. |
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## Pillar Three: Engaging with employers

Employers play a key role in improving outcomes for people on income support by providing jobs. Reforms are needed to ensure that the social support system effectively engages with employers and has an employment focus. These reforms include making jobs available, improving pathways to employment and supporting employers.

### Employment focus – making jobs available

**Page 95 to 100** of the Interim Report considers what initiatives result in businesses employing more disadvantaged job seekers. In shaping the future directions for making jobs available the Reference Group would like feedback on:

* How can business-led covenants be developed to generate employment for people with disability and mental health conditions?
* How can successful demand-led employment initiatives be replicated, such as those of social enterprises?

| persons with a mental health condition do not like nor do they want their condition to be highlighted. generally they have much higher capabilities than folding letters, packing shelves, cleaning duties etc. once again the approach by employers and employees is where the focus should be. there needs to be more compassion and understanding just as is generally the case as for those with a physical disability. in saying that employers need to accept that they should have in place proper mechanisms to address situations that may occur because of the person’s condition. |
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### Improving pathways to employment

**Page 101 to 107** of the Interim Report considers the different pathways to employment for disadvantaged job seekers such as vocational education and training and mental health support models. In shaping the future directions for improving pathways to employment the Reference Group would like feedback on:

* How can transition pathways for disadvantaged job seekers, including young people, be enhanced?
* How can vocational education and training into real jobs be better targeted?
* How can approaches like Individual Placement and Support that combine vocational rehabilitation and personal support for people with mental health conditions be adapted and expanded?

| once again, unless early childhood education is modified to properly teach persons with mental health conditions you are really going to find enormous difficulties starting at early adulthood.  |
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### Supporting employers

**Page 108 to 110** of the Interim Report considers what can be done to support employers employ more people that are on income support including better job matching, wage subsidies and less red tape. In shaping the future directions for supporting employers the Reference Group would like feedback on:

* How can an employment focus be embedded across all employment and support services?
* How can the job services system be improved to enhance job matching and effective assessment of income support recipients?
* How can the administrative burden on employers and job service providers be reduced?

| as in a whole range of areas in the community having persons who are experienced in these mental health areas is essential. understanding and accepting any limitations in interpersonal skills, concentration, mood swings etc must be understood and taken into account. this is not to say these people are not capable of performing a job for which they are suitable but without recognising these limitations then success in the workforce is greatly reduced. this may in fact have an outcome of increasing administration but without it there can be no success in placing these people in satisfactory working situations. |
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## Pillar Four: Building community capacity

Vibrant communities create employment and social participation for individuals, families and groups. Investments by government, business and civil society play an important role in strengthening communities. Also, access to technology and community resilience helps communities build capacity. Building community capacity is an effective force for positive change, especially for disadvantaged communities.

### Role of civil society

**Page 112 to 116** of the Interim Report considers the role of civil society in building community capacity. In shaping the future directions for the role of civil society the Reference Group would like feedback on:

* How can the expertise and resources of corporates and philanthropic investors drive innovative solutions for disadvantaged communities?
* How can the Community Business Partnership be leveraged to increase the rate of philanthropic giving of individuals and corporates?
* How can disadvantaged job seekers be encouraged to participate in their community to improve their employment outcomes?

| The third dot point would appear to be looking at ‘work for the dole’ or similar programs. people with a mental health condition generally have a low self- esteem and poor interpersonal skills and these types of programmes do little to assist these people gain employment rather they re-enforce areas and make it more difficult for them to gain employment. |
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### Role of government

**Page 116 to 120** of the Interim Report considers the role of government in building community capacity. In shaping the future directions for the role of government the Reference Group would like feedback on:

* How can community capacity building initiatives be evaluated to ensure they achieve desired outcomes?
* How can the income management model be developed to build community capacity?

| it is actually insulting if the panel is considering income management for persons with a mental health condition. it once again re-enforces the stereotype that somehow these people are stupid and not capable of operating effectively in society. even a cursory look at how families already provide support for these people with no help from government would be embarrassing for the panel.  |
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### Role of local business

**Page 121 to 123** of the Interim Report considers the role of local business in building community capacity. In shaping the future directions for the role of local business the Reference Group would like feedback on:

* How can communities generate opportunities for micro business to drive employment outcomes?
* How can mutuals and co-operatives assist in improving the outcomes for disadvantaged communities?

| *N/A* |
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### Access to technology

**Page 124 to 125** of the Interim Report considers access to affordable technology and its role in building community capacity. In shaping the future directions for access to technology the Reference Group would like feedback on:

* How can disadvantaged job seekers’ access to information and communication technology be improved?

| *no comment* |
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### Community Resilience

**Page 125 to 126** of the Interim Report considers how community resilience can play a role in helping disadvantaged communities. In shaping the future directions for community resilience the Reference Group would like feedback on:

* What strategies help build community resilience, particularly in disadvantaged communities?
* How can innovative community models create incentives for self-sufficiency and employment?

| *n/a* |
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