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**Strategic Infrastructure Plan for South  
Australia**

**2010 Community Consultation**

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ABN: 16 464 890 778

104 Greenhill Road Unley SA 5061

PO Box 701 Unley Business Centre SA 5061

t: (08) 8373 8333 f: (08) 8373 8373

e: [admin@juliafarr.org.au](mailto:admin@juliafarr.org.au) w: [www.juliafarr.org.au](http://www.juliafarr.org.au)

## **Table of Contents**

1.0 PURPOSE .....	2
2.0 SUMMARY OF RECOMMENDATIONS .....	2
3.0 INTRODUCTION.....	2
4.0 CONTEXT FOR SOUTH AUSTRALIA'S STRATEGIC INFRASTRUCTURE PLAN.....	3
5.0 TARGETS FOR THE STRATEGIC INFRASTRUCTURE PLAN FOR SOUTH AUSTRALIA....	3
5.1 STRATEGIC PRIORITIES-URBAN LAND .....	3
5.1.1 Residential land .....	4
Public realm .....	4
6.0 TRANSPORT.....	4
6.1 TAXIS.....	4
6.1.1 Availability of accessible taxis for people living with disability.....	5
6.1.2 Experiences of accessing taxis by people living with disability.....	6
6.1.3 Recommendations.....	7
6.2 PLANES .....	8
6.2.1 Experiences of people living with disability travelling by air .....	8
6.2.2 Disability Standards for Accessible Public Transport (2002) - Travelling by Air.....	8
6.2.3 Recommendations .....	9
6.3 BUSES.....	11
6.3.1 Experiences of accessing buses by people living with disability .....	11
6.3.2 Disability Standards for Accessible Public Transport (2002) – Access to Buses.....	11
6.3.3 Recommendations .....	11
6.4 TRAINS.....	12
6.4.1 Introduction.....	12
6.4.2 Experiences of accessing trains by people living with disability.....	12
6.4.3 Disability Standards for Accessible Public Transport (2002) – Access to Trains.....	12
6.4.4 Recommendations .....	13
7.0 INFORMATION AND COMMUNICATION TECHNOLOGY .....	13
8.0 EDUCATION AND TRAINING.....	14
9.0 RECREATION AND SPORT.....	15
10.0 ARTS, CULTURE AND HERITAGE .....	16
11.0 HEALTH.....	17
11.1 The need for greater accessibility of GP services.....	17
12.0 COMMUNITY SERVICES & HOUSING .....	18
13.0 RURAL AND REGIONAL COMMUNITIES .....	19
14.0 CONCLUSION .....	21
15.0 APPENDIX A-Summary of Recommendations.....	23

## **1.0 PURPOSE**

The purpose of this submission is to highlight ways in which the Strategic Infrastructure Plan for South Australia can reflect the perspectives and experiences of people living with disability in the evolving design of the South Australian community. This will ensure that the plan for infrastructure is achieved in a manner which supports active citizenship and lifestyle choice.

## **2.0 SUMMARY OF RECOMMENDATIONS**

The Julia Farr Association makes 35 recommendations in this submission. A summary list is provided in Appendix A.

## **3.0 INTRODUCTION**

The Julia Farr Association makes this submission to the South Australian Government, in particular to the Government Relations and Reform Office and the Department for Transport, Energy and Infrastructure in the context of the consultation process.

The Julia Farr Association and its predecessor organisations have been involved with the disability community for over 130 years. The Julia Farr Association is an independent, non-government entity based in South Australia that fosters innovation, shares useful information, and promotes policy and practice that supports people living with disability to access the good things in life. We are not a conventional service provider – we deliver research, evaluation and information services that are anchored upon the perspectives and experiences of people living with disability, family members and other supporters. As such, we feel we are ideally positioned to offer comment and analysis without vested interest.

The Julia Farr Association believes that the present consultation process facilitating input about the update of the Strategic Infrastructure Plan for South Australia provides a timely and potent opportunity to ensure that the plan reflects current issues impacting on the lives of South Australians who are living with disability.

Since the development of South Australia's first infrastructure plan, released in 2005, there has been a growing national emphasis on upholding the choice, dignity and rights of people living with disability in the opportunities that we provide for them to achieve and participate in the community as active citizens<sup>1</sup>. The social context for providing accessible, inclusive infrastructure has changed significantly and needs to become fundamental to the development of future assets.

In 2008 the Australian Government ratified the United Nations Convention on the Rights of Persons with Disabilities, which calls for measures to be put in place to ensure that people living with disability can fully participate and be included within society<sup>2</sup>. There is also a

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<sup>1</sup> Social Inclusion Board, (2010) Activating Citizenship A Social Inclusion Approach for Disability in South Australia. accessed 12/2010: [www.socialinclusion.sa.gov.au](http://www.socialinclusion.sa.gov.au)

<sup>2</sup> United Nations Convention on the Rights of Persons with disabilities accessed 12/2010: <http://www.un.org/disabilities/>

strong commitment to address the barriers that are faced by Australians living with disability and to promote social inclusion reflected throughout the Draft National Disability Strategy<sup>3</sup>.

Infrastructure developments are an integral part of how people living with disability access and are included within society. Therefore the present consultation process provides a timely opportunity to focus on what it takes to design a community which is truly inclusive of people living with disability and which enables all of us to live as independently as we choose and with enjoyment and fulfilment.

As most infrastructure investments have high capital costs and long asset lives they can positively or negatively impact on community access and inclusion for a very long time. Therefore it is critical that the infrastructure plans and briefs be developed from the outset in a manner that begins with the principles of access and inclusion rather than trying to incorporate or tack this on as an afterthought. It is no longer socially or morally acceptable to exclude members of our community on a cost/benefit analysis. The Disability Discrimination Act also has legal implications for poor infrastructure planning.

#### **4.0 CONTEXT FOR SOUTH AUSTRALIA'S STRATEGIC INFRASTRUCTURE PLAN**

Almost 1 in 5 people see themselves living with disability in Australia. This is expected to grow as the population ages and the international community expectations change.

The recent Australian Bureau of Statistics<sup>4</sup> highlight that 18.5% (4 million) of people in Australia reported having a disability in 2009. The rate of disability increased with age. Almost 9 in 10 people aged 90 (88%) had a disability, compared with 3.4% of those aged four years and under<sup>4</sup>.

The State of South Australia has a relatively higher proportion of older people and tends to have higher prevalence rates of disability and severe or profound limitation than the national average<sup>5</sup>.

#### **5.0 TARGETS FOR THE STRATEGIC INFRASTRUCTURE PLAN FOR SOUTH AUSTRALIA**

The Julia Farr Association makes the following recommendations with regard to further orienting the Strategic Infrastructure plan to the needs of people living with disability.

##### **5.1 STRATEGIC PRIORITIES-URBAN LAND**

There is a strong relationship between housing, health status and living standards<sup>5</sup>. In Australia a high proportion of public housing tenants live with disability due to factors

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<sup>3</sup> Commonwealth of Australia, (2009) National Disability Strategy accessed 12/2010: [http://www.fahcsia.gov.au/sa/disability/progserv/govtint/Pages/nds\\_shorten.aspx](http://www.fahcsia.gov.au/sa/disability/progserv/govtint/Pages/nds_shorten.aspx)

<sup>4</sup> Australian bureau of statistics (2009) 4430.0-disability, ageing and carers, Australia: summary of findings, 2009 accessed 1/2011: <sup>5</sup>Australian Institute of health and welfare (2007) disability in Australia: acquired brain injury bulletin no.55 Cat.no . AUS 96 Canberra: AIHW

<sup>5</sup> Australian Institute of health and welfare (2009) Australia's Welfare 2009 Australia's Welfare series no.9 Cat.no . AUS 117 Canberra: AIHW

such as reduced income<sup>6</sup> and having to respond to extra costs associated with living with disability<sup>7</sup>. Consequently public housing in some cities is concentrated in disadvantaged areas. In Adelaide people living in the most disadvantaged quintile of Adelaide were 2.6 times as likely to have severe disability (4.0%) as people living in the most advantaged quintile (1.5%). The social gradient of disability in Adelaide is very strong<sup>6</sup>.

The Julia Farr Association recommends that the strategic priorities for urban land should be:

#### *5.1.1 Residential land*

**R1:** Land for the development of housing which incorporates the principles of universal design and meets accessibility standards. Such land should be integrated throughout the South Australian community thereby avoiding concentrations of people living with disability in certain areas;

#### *Public realm*

**R2:** Ensuring that all public buildings and indoor facilities, shopping centres, parks and recreational facilities, commercial buildings and sporting arenas incorporate universal design principles and meet Australian Standards 1428 (AS 1428); a is

**R3:** Ensuring that all new public/commercial buildings are compliant with the Disability Discrimination Act 1992, AS 1428 and the recently introduced 'Access to Premises' May 2011;

**R4:** The development of accessible routes to community buildings, public spaces and transport systems.

## **6.0 TRANSPORT**

### **6.1 TAXIS**

Accessible public transport is important to people living with disability since it supports their active participation in the social and economic life of the community. Many people living with disability are reliant on accessible public transport to enable them to keep in touch with family and friends, access essential services when required, work, study and participate in and contribute to community life. The availability of accessible public transport not only benefits people living with disability but assists other members of society such as those who are elderly and families who use strollers. There is a strong national call for all Australians (including people living with disability) to have universal access to and involvement in society through the Social Inclusion Agenda<sup>1</sup>. There is also an international emphasis on the rights of people to have equal access to

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<sup>6</sup> Wilson, E, Oke, N & Vecellio, L (2005), *Economic hardship and social participation*, Issue Paper 1, Scope Victoria, Melbourne.

<sup>7</sup> Tibble, M 2005, *Review of existing research on the extra costs of disability*, Working paper no 21, Department for Work and Pensions, Norwich, UK.

transportation through the UN Convention on the Rights of Persons with Disabilities and Optional Protocol (hereinafter referred to as the 'UNCRPD')<sup>2</sup>.

### *6.1.1 Availability of accessible taxis for people living with disability*

In 2002 the Disability Standards for Accessible Public Transport were developed under the 1992 Commonwealth Disability Discrimination Act to respond to the need to remove discrimination in the provision of public transport to people living with disability<sup>8</sup>. The Transport Standards stipulate minimum guidelines in regards to taxi boarding ramps, doorways and space within taxis for people in wheelchairs to manoeuvre. These standards also specified that by 31 December 2007 accessible taxi response times were to be the same as for other taxis<sup>9</sup>.

The Allen Consulting Group reviewed the 2002 Disability Standards for Accessible Public Transport, and estimated that in 2007 accessible taxis “accounted for ten percent of Australia’s fleet”<sup>9</sup>, equating to 1711 accessible taxis. This does not meet the transport demands of 636,000 Australians living with disability, i.e. 53% of 1.2 million requiring assistance with transport<sup>9</sup>.

In South Australia the availability of accessible taxis is even more limited. As at September 2010, there was a fleet of 90 wheelchair-accessible taxis consisting of both single wheelchair-accessible taxis along with vans equipped to fit two or three wheelchairs and passengers, operating in metropolitan Adelaide<sup>10</sup>. The experiences of people living with disability indicates that this is clearly not enough to meet demand<sup>11</sup>. The limited availability of accessible taxis creates barriers for people living with disability, affecting their capacity to participate inclusively within the community.

In an effort to significantly improve the timeliness of Access Taxis services in the Adelaide metropolitan area the Government introduced the On-Time Bonus Scheme from 1 December 2002. The On-Time Bonus Scheme is paid by the Government to the Access Taxi driver, for each job that has been completed within 30 minutes of the customers' required time of travel (provided a number of administrative requirements are fulfilled)<sup>10</sup>. The report stated that the percentage of jobs completed in 30 minutes of customer required time was between 96% and 99% in 2010/2011 compared to 92% and 25% in 2003/2004<sup>10</sup>.

However these statistics do not correspond with the experiences of people living with disability. The Julia Farr Association has identified through qualitative

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<sup>8</sup> The Allen Consulting Group 2008, Review of the disability standards for accessible public transport. Draft report, < <http://www.ddatransportreview.com.au/downloads/ACGTransportReviewDraftReport.pdf>>.

<sup>9</sup> Ibid, p. 42.

<sup>10</sup> Department for Transport, Energy and Infrastructure, 2010 Department for Transport, Energy and Infrastructure, (2010) Adelaide Accessible Taxis. Performance Report September 2010 Accessed 12/2010:

<http://www.sa.gov.au/upload/franchise/Transport,%20travel%20and%20motoring/Public%20transport%20and%20travel/Access.pdf>

<sup>11</sup> ABS 2004, 4430.0 – Disability, ageing and carers, Australia. Summary of findings – State tables for South Australia, < <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4430.02003?OpenDocument>>.

research<sup>12</sup> that 52.5% of people experienced delays in the time they were picked up by accessible taxis, with a high majority (67%) having to wait from between 30 minutes and two hours to be picked up. In some cases people reported waiting up to three hours for their taxi to arrive, with taxis not arriving on occasions. A number of other challenges are indicated by the experiences of people living with disability in accessing taxis.

### *6.1.2 Experiences of accessing taxis by people living with disability*

For many people living with disability, accessible taxis provide them with the means of accessing the community as they are unable to use other means of public transport<sup>8</sup>. With such a reliance on taxis, people living with disability can experience severe social disadvantage if they are unable to access taxis when required because it obstructs them from accessing opportunities to engage in their local community and in the economy. The Julia Farr Association has also identified through qualitative research<sup>12</sup> a range of other challenges experienced by people living with disability using accessible taxis in South Australia in addition to a lack of reliability as mentioned above. Some of the other key issues include:

- Restricted opportunity to use accessible taxis due to their extensive use for school pick up and drop offs;
- Having to book in advance with no guarantee of being picked up on time;
- Concerns that taxi drivers are not being provided with training to support the needs of people living with disability.

While there are some improvements in the availability of wheelchair-accessible taxis<sup>8</sup> the above experiences have a considerable impact on the lives of people living with disability in obstructing their participation in the community. In a society where the general public are able to access a full range of taxis, people living with a disability are being excluded from a crucial component to their social inclusion<sup>1</sup>.

Nichols (2007)<sup>13</sup> highlights the fact that wheelchair accessible taxis are not financially viable for cab owners and suggest that governments should be prepared to implement measures to address this and to encourage more people to invest in this career. In Dublin, research has indicated that annual operating costs for an accessible taxi are estimated to be nearly 25 percent more than standard taxis. The same research demonstrated that providing licences at reduced costs did not provide sufficient incentive, by itself to encourage either entry or retention in the wheelchair accessible taxi market. This is due to the fact that the economics of purchasing and operating such a vehicle quickly eroded this concession<sup>14</sup>.

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<sup>12</sup> JFA qualitative research with people across the South Australia disability community has included feedback from the [tell us](#) survey where over 780 people provided information about their experiences living with disability issues, and 40 responses from the JFA Access Cab Log survey conducted in 2008.

<sup>13</sup> Nicholls, D 2007, Transporting the wheelchair dependent – A review of the wheelchair accessible taxi industry, The Australian National University, ACT The Australian National University, ACT, p. 21.

<sup>14</sup> Department of infrastructure, energy and resources, (2005) Evaluation of Wheelchair Accessible Taxi Services. Final report Accessed 2/2011: [http://www.transport.tas.gov.au/pdf/misc/1321\\_WAT\\_Final\\_Report.pdf](http://www.transport.tas.gov.au/pdf/misc/1321_WAT_Final_Report.pdf)



### 6.1.3 Recommendations

As legislated through the Disability Standards for Accessible Public Transport 2002, all public transport services (except trains and trams) are to fully comply with relevant Standards by 31 December 2022<sup>15</sup>. This provides the opportunity now to consider how best to allocate resources to improve the availability of accessible taxis to people living with disability.

#### **R5:** Fully accessible “multi-purpose” taxi fleet

- We recommend that a fully accessible “multi-purpose” taxi fleet be established for the entire South Australian community. This will provide people living with disability with greater choice and opportunity to be included in the community through reducing:
  - Taxi response time as a result of more taxis being available;
  - The need for people to call in advance and use specialist booking services, providing them with the opportunity to hail taxis when required.
- The creation of an accessible “multi-purpose” taxi fleet would ensure that the taxi industry is able to fully accommodate the diverse needs of all members of the community. The success of this approach is demonstrated in the United Kingdom where there has been a dramatic increase in the availability of accessible taxis since the introduction of the Disability Discrimination Act 1995 which legislates that all taxis be wheelchair accessible with full compliance by 2020<sup>12</sup>. In 2005, close to “30,000 taxis – or half the fleet – in England are purpose-built taxis which are designed to be wheelchair accessible with assistance from drivers. Of that number almost 21,000 are based in London, where the entire taxi fleet is wheelchair accessible”<sup>16</sup>.

#### **R6:** Investment in awareness training for drivers and taxi sector

- It is important that taxi drivers are provided with disability awareness training.
- Training should also apply to others involved in the taxi industry and be provided periodically to ensure continued awareness of the needs of people living with disability<sup>17</sup>. We recommend investment in training to

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<sup>15</sup> Disability Standards for Accessible Public Transport 2002 as amended (Commonwealth), electronic version, Accessed 12/2010: [http://www.comlaw.gov.au/ComLaw/Legislation/LegislativeInstrumentCompilation1.nsf/0/96EE5ABB923C881ECA256FFE001827AC/\\$file/DisabilityWD02.pdf](http://www.comlaw.gov.au/ComLaw/Legislation/LegislativeInstrumentCompilation1.nsf/0/96EE5ABB923C881ECA256FFE001827AC/$file/DisabilityWD02.pdf).

<sup>16</sup> Victorian Equal Opportunity and Human Rights Commission 2007, Time to respond. Realising equality for people with a disability utilising taxi services, accessed 12/2010:

<http://www.humanrightscscommission.vic.gov.au/pdf/TIME%20TO%20RESPOND%20-TAXI%20REPORT-%20NOVEMBER2007.pdf>, p. 3

<sup>17</sup> Department of infrastructure, energy and resources, (2005) Evaluation of Wheelchair Accessible Taxi Services. Final report Accessed 2/2011: [http://www.transport.tas.gov.au/pdf/misc/1321\\_WAT\\_Final\\_Report.pdf](http://www.transport.tas.gov.au/pdf/misc/1321_WAT_Final_Report.pdf)



raise awareness about the different types of disability that people live with, as well as training on the use of relevant assistive equipment such as ramps and the use of straps. Such training will be more effective if the design and delivery includes people living with disability as co-trainers.

## 6.2 PLANES

### 6.2.1 *Experiences of people living with disability travelling by air*

A common opinion of people living with disability is that their experiences of accessible air travel have declined over the past five years<sup>8</sup>. This is despite the introduction of the Transport Standards in 2002. The types of issues that have contributed to such experiences are:

- Being required to travel with a companion on flights, resulting in costs being doubled and reduced independence<sup>18 19</sup>;
- Having no guarantee that mobility aids such as wheelchairs, will arrive at the same destination or be received in the same working order<sup>18 19</sup>;
- Refusal to load mobility aids such as scooters on planes due to airlines placing restrictions on the size of mobility aids it can transport<sup>18</sup>;
- Being refused access to flights if other people living with disability are already on the flight despite giving prior notice of travel requirements<sup>8</sup>;
- Inadequate staff awareness and training about assisting people living with disability and using equipment such as lifting devices and harnesses<sup>8</sup>;
- Information about the needs of people living with disability provided at booking time not being conveyed resulting in arrangements having to be made at boarding time with no guarantee that trained staff will be available to assist<sup>8</sup>.

The issues identified by people living with disability highlight that a key barrier to access for people living with disability is not necessarily physically accessing planes but the practices and policies adopted by airlines.

### 6.2.2 *Disability Standards for Accessible Public Transport (2002) - Travelling by Air*

As is the case with taxis, it is a requirement that airplanes and airports are fully compliant with the relevant 2002 Transport Standards by 31 December 2022<sup>15</sup>. The extent to which this has been achieved is unclear, although it does appear “that people with disability are generally able to access air travel, with exception of routes that operate small aircraft that are excluded from some provisions of the Transport

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<sup>18</sup> Consultation undertaken by Julia Farr Association on the accessibility of public passenger transport, February 2009.

<sup>19</sup> Bailey, B 2007, Flight closed: Report on the experiences of people with disabilities in domestic air travel in Australia, accessed 12/2010: <<http://www.piac.asn.au/publications/pubs/PIACFlightclosedBooklet.pdf>>.

Standards”<sup>20</sup>. However, as highlighted by the above experiences of people living with disability, this does not guarantee air travel will be trouble-free due to current policies and systems that are enforced by airlines<sup>19</sup>.

In response to feedback from consultation with the Australia’s peak disability and advocacy groups and the Australian Human Rights Commission, Virgin Blue airlines have made policy changes to the application of the airline’s Independent Travel Criteria. The changes provide people living with disability more freedom to make their own choices about independent travel. Importantly; the changes will make travel on Virgin Blue more accessible to people living with disability.

Effectively the changes mean that any person living with disability who:

- is able to understand and respond to briefings about emergency procedures; and
- does not require personal assistance during flight (i.e. assistance with going to the toilet, administering medication and food and beverage consumption);

is able to travel independently<sup>21</sup>.

### 6.2.3 Recommendations

The current airline practices which deny people living with disability equitable and accessible air travel must be ceased or modified. The Julia Farr Association recommends:

**R7:** Investment in training, so that airline industry policies and practices respond to the needs of people living with disability. We recommend there be a focus on:

- Providing regular disability awareness training to all air industry staff including the importance of treating people “with the respect and dignity afforded to other customers”<sup>22</sup> and how to use specialised equipment such as lifting devices. The training will be more effective if it is delivered and provided in consultation with people living with disability;
- Giving priority to the loading of mobility aids, such as scooters on flights as required;
- Developing communication processes to make certain that information relayed at booking time is given to all relevant people to ensure that all personal requirements are met in a timely manner upon arrival at the airport and to the point of arrival at destination;

<sup>20</sup> The Allen Consulting Group 2008, *Review of the disability standards for accessible public transport. Draft report*, accessed 1/2011: <<http://www.ddatransportreview.com.au/downloads/ACGTransportReviewDraftReport.pdf>>, p. 69. Finish is a you are are you on the you are are are are are are are

<sup>21</sup> Virgin Blue airlines, (2009) Virgin Blue and advocacy groups promote independence for travellers with disability. Accessed 1/2011: <[http://www.virginblue.com.au/AboutUs/Media/NewsandPressReleases/P\\_010258.htm](http://www.virginblue.com.au/AboutUs/Media/NewsandPressReleases/P_010258.htm)>.

<sup>22</sup> The Allen Consulting Group 2008, *Review of the disability standards for accessible public transport. Draft report*, <<http://www.ddatransportreview.com.au/downloads/ACGTransportReviewDraftReport.pdf>>, p. 67.

- Mandatory monitoring of progress and provision of accessibility measures to ensure consistency within the industry<sup>19 23</sup>.

**R8:** Invest in subsidies to assist people living with disability to travel by air

- In situations where people are required to travel with support, introduce subsidies to offset the costs of having to pay for an extra ticket.
- We recommend the expense of damage to mobility aids be met by airlines or that they “offer low cost insurance to people living with disability to recover these costs”<sup>24</sup>;

**R9:** Invest in lifting aids on planes to reduce risk of injury to passengers living with disability and airline staff

- A lifter called the Eagle Lifter has been developed which provides greater safety to people living with disability and airline staff through reducing the need for manual transfers to access planes. Through using the Eagle Lifter people are able to access planes in their own wheelchair and be transferred directly to their airline seat. Qantas currently use this lifting device for its commercial jets and smaller commuter planes<sup>25</sup>.

Background information on the Eagle Lifter can be found at:

<http://www.e-bility.com/disability-news/wheelchair-transport-safety.php>

**R10:** Invest in establishing an airport service specifically designed to assist people living with disability to access airlines

- Currently it is a requirement that airlines provide assistance to people living with disability to access their planes. This can create inconsistencies in the assistance provided as staff at different airlines may have differing levels of training and experience in providing the support required<sup>8</sup>. We recommend:
  - The establishment of a service at airports that specifically focuses on supporting people living with disability to access any airline. This will ensure greater consistency in the assistance provided through creating a situation where the staff provide regular support to people living with disability and have the necessary training and experience required. This is the current practice in airports in Canada<sup>18</sup>.

<sup>23</sup> PDCA 2007, Physical Disability Council of Australia submission to Review of the disability standards for those accessible public transport 2002, accessed 12/2010: <[http://www.pda.org.au/uploads/published\\_papers/PDCA%20Submission%20to%20DDA%20Transport%20review.pdf](http://www.pda.org.au/uploads/published_papers/PDCA%20Submission%20to%20DDA%20Transport%20review.pdf)>.

<sup>24</sup> Ibid p.3

<sup>25</sup> Killeen, G 2006, Wheelchair design and related transport issues accessed 12/2010: <<http://www.ebility.com.au/disability-news/wheelchair-transport-safety.php>>.

## 6.3 BUSES

### *6.3.1 Experiences of accessing buses by people living with disability*

Buses are one of the major modes of transportation used within the community<sup>8</sup> and provide people living with disability with a low cost travel option. However, a number of barriers identified by people living with disability can impact on opportunities to take advantage of this. Some of the key issues are:

- Not having enough wheelchair accessible buses available resulting in reduced opportunities to travel and actively participate in the community<sup>8 18</sup>;
- Not being able to access buses due to bus stops, kerbs and paths being inaccessible<sup>8 18</sup>;
- Accessing a bus service one way with no guarantee it will be accessible on the return trip<sup>8 23</sup>;
- Experiencing bus drivers who lack awareness about using disability access equipment<sup>8</sup>.

The above examples highlight that being able to access buses involves not only the provision of accessible buses but also accessible bus infrastructure such as bus stops and surrounding footpaths. Strategies to improve accessibility will only be successful if there is a dual focus on improving accessibility in both of these areas.

### *6.3.2 Disability Standards for Accessible Public Transport (2002) – Access to Buses*

According to the 2002 Transport Standards, buses and bus infrastructure are to fully comply with the relevant standards by 2022<sup>15</sup>. Many states have increased the number of accessible buses available since the introduction of the Transport Standards with many reporting that they have achieved or exceeded the requirement by 31 December 2007 stating that 25 percent of buses were accessible at that time<sup>8</sup>. However people living with disability still report barriers to freely accessing buses reflecting that less progress has been made in bus infrastructure.

### *6.3.3 Recommendations*

The Julia Farr Association recommends a dual focus in ensuring that buses and bus infrastructure are accessible. This will ensure that all factors associated with bus travel are inclusive of people living with disability.

#### **R11:** Investment in making buses and bus infrastructure accessible

- We recommend there be a combined investment in making buses and bus infrastructure accessible to ensure that people living with disability, older persons with limited mobility, and young families with strollers, are able to freely travel by bus.

#### **R12:** Investment in disability awareness training for bus drivers and operators

- We recommend drivers and operators be provided with regular disability awareness training including how to use disability access equipment to assist people living with disability to travel by bus. This training will be more effective if it is delivered and provided in consultation with people living with disability.

## 6.4 TRAINS

### 6.4.1 Introduction

Passenger train travel is available in all States and Territories.

The train industry have been given an extended period of time to meet the 2002 Transport Standards, with full compliance required by 31 December 2032<sup>15</sup>. Overall accessibility to train travel has improved since the introduction of the transport standards with many states achieving a high level of accessibility of train carriages (based on measures of physical accessibility), beyond that which was required in the Transport Standards by 31 December 2007<sup>8</sup>. However this is contingent on trained staff being available to provide direct assistance to people living with disability to board and exit trains using manually-deployed ramps<sup>8</sup>. This can create problems for people living with disability depending on the awareness and training of the individual staff member. The assistance provided can be highly variable.

### 6.4.2 Experiences of accessing trains by people living with disability

People living with disability highlight a range of issues that impact their ability to effectively travel by train, for example:

- Inconsistency in the experience and knowledge that drivers and other train personnel have about supporting people to board the train<sup>8 18</sup>;
- Having to rely on drivers or other train personnel to remember a person's destination station, to deploy the ramp for people to get off. This does not always occur<sup>8</sup>;
- Allocated spaces not signed appropriately resulting in other passengers using the disability space<sup>8</sup>.

Such issues highlight the challenges people living with disability are confronted with when travelling by train.

### 6.4.3 Disability Standards for Accessible Public Transport (2002) – Access to Trains

The train industry have been given an extended period of time to meet the 2002 Transport Standards, with full compliance required by 31 December 2032<sup>15</sup>. There has been some improvement since the introduction of the Transport Standards with many states achieving “a high level of accessibility of train carriages (based on

measures of physical accessibility), in excess of what is required in the Transport Standards by 31 December 2007<sup>26</sup>. This has been achieved through train staff providing direct assistance to people living with disability to board and exit trains using manually-deployed ramps<sup>8</sup>. However, having reliance on such assistance creates issues for people living with disability due to the current lack of consistency in the support they receive.

#### 6.4.4 Recommendations

The Julia Farr Association places emphasis on reducing the need for people living with disability to rely on assistance from others to board and exit trains in order to ensure equity of access.

**R13:** Investment in provision of automated or level access on and off trains

- Reducing the reliance on assistance from train staff to enter and leave trains is essential in ensuring that people living with disability are provided with the freedom to access trains independently. This can be addressed through creating level access to trains or providing automated or electronic ramps.

**R14:** Investment in awareness training for train industry staff

- As is the case with all other modes of public passenger transport, a focus on the provision of regular disability awareness training is essential to ensure that staff are providing the assistance required by people living with disability and are competent in the use of disability access equipment.

**R15:** Investment in improvement of signage to ensure that sufficient space is available for people living with disability using trains.

## 7.0 INFORMATION AND COMMUNICATION TECHNOLOGY

Information and communication services are an essential tool for all people living with disability to be able to participate to the fullest extent possible in Australian society<sup>27</sup>. The UNCRPD emphasises the role of communications in making sure that all people living with disability experience human rights, freedoms and respect<sup>2</sup>. Access to information and communications services is a key element in improving the quality of life for people living with disability, particularly in areas such as employment, and health<sup>27</sup>.

While the introduction of the national broadband network offers much potential for improving the lives of people living with disability there is no plan for how the broadband

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<sup>26</sup> The Allen Consulting Group 2008, *Review of the disability standards for accessible public transport. Draft report*, <<http://www.ddatransportreview.com.au/downloads/ACGTransportReviewDraftReport.pdf>>, p. 28.

<sup>27</sup> Annear, (2010) Connecting us all: the role of the national disability strategy. Australian Communications Consumer Action Network Accessed 12/2010 [LINK](#)

needs of consumers living with disability will be met<sup>28</sup>. Some broadband applications are costly and/or fit-for-purpose while others make use of existing technologies and adapt them for increased accessibility<sup>27</sup>. The question: 'How can consumers living with disability afford to pay for the various devices and services?' remains unanswered. Both the South Australian and Federal Government needs to ensure that there is an adequate subsidised programs for equipment. The current disability equipment program provided by Telstra and Optus has enabled people living with disability to meet their basic telecommunication needs. This type of program will require expansion to ensure consumers living with disability are not left out of the broadband revolution<sup>28</sup>. The Julia Farr Association recommends the following:

- R16:** Identify access issues related to the broadband network and broadband needs by consulting with people living with disability regarding their perceptions of issues related to the adoption of the broadband network<sup>27</sup>;
- R17:** That communication technologies for people who are deaf or living with speech or hearing impairment are affordable and accessible, and are improved with new technologies available via the internet<sup>27</sup>;
- R18:** Ensure that people living with disability (including those living in rural and remote areas) have affordable and accessible internet, voice and government services delivered via the National Broadband Network<sup>27</sup>;
- R19:** Provide a scheme that includes funding for information and communication technology equipment that will meet a person's needs in providing access to telecommunication and information services. This scheme must provide:
  - Funding for the repair, upkeep and upgrading of information and communications technology equipment<sup>27</sup>
  - Funding to access all necessary training in order to use the equipment in a way that best suits person's needs<sup>27</sup>.

## 8.0 EDUCATION AND TRAINING

The Disability Standards for Education (hereinafter referred to as the 'Education Standards') were formulated under the Disability Discrimination Act 1992. The Education Standards provide a framework to ensure that students living with disability have the right to access and participate in education on an equal basis with other students<sup>29</sup>. Yet some young people are still being denied access to educational opportunities because of their disability<sup>1</sup>. Schools and education settings are not always accessible or inclusive of people living with disability. A disproportionate number of people living with disability are not achieving high level qualifications<sup>1</sup>.

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<sup>28</sup> Slater, J Lindström, J and Astbrink, G (2010)Broadband Solutions for Consumers with Disabilities Accessed 12/2010: <http://www.accan.org.au/uploads/Broadband%20Solutions%20ED.pdf>

<sup>29</sup> Australian government, Attorney General's Department 2009 Disability Standards for Education Accessed 12/2010: [http://www.ag.gov.au/www/agd/agd.nsf/page/humanrightsandanti-discrimination\\_disabilitystandardsforeducation](http://www.ag.gov.au/www/agd/agd.nsf/page/humanrightsandanti-discrimination_disabilitystandardsforeducation)



Over the last 20 years there has been an increase in the number of students living with disability<sup>5</sup>. In Australia most students living with disability attend mainstream rather than special schools, with 82% of public and 94% of private school students living with disability attending mainstream schools in 2008<sup>5</sup>. This reflects special funding arrangements that States and Territories have in place to support students living with disability with high or increased needs to remain in mainstream schools. However these arrangements vary between states, with SA being one of four states/ territories having more than 90% of students living with disabilities in government schools attending mainstream schools. The Julia Farr Association supports this trend and wishes to see a strengthening of the numbers of young people living with disability attending mainstream schools. Therefore we do not support the plan for the addition of six special schools which would segregate people living with learning disability into a separate educational setting. The Australian Institute of Health and Welfare states that the primary aim of specialist disability services is to assist people living with disability to access and benefit from mainstream or generic services<sup>5</sup>. Segregation of students living with disability into special schools is not in line with social inclusion policies<sup>1</sup>. Studies now demonstrate that students living with disability who attend mainstream education experience a number of benefits including:

1. Higher academic achievement<sup>30</sup>;
2. Higher self-esteem<sup>30</sup>;
3. Better social skills<sup>31</sup>.

Consequently the Julia Farr Association recommends that resources intended for the addition of six special schools be redirected toward ensuring:

**R20:** That people living with disability are able to access mainstream preschool, primary, secondary and post-secondary opportunities;

**R21:** That buildings, playgrounds, canteens, libraries and all other features of the structural learning environment are not just accessible, but also easy to navigate and user-friendly; you you you you you

**R22:** That all learning institutions are accessible for people with disability.

## 9.0 RECREATION AND SPORT

In Australia, people living with disability are more likely to have poor mental and physical health, and higher rates of smoking and obesity<sup>1 5</sup>. Recreation and sport make an important contribution to the quality of life that is experienced by people living with disability. Importantly recreation, sport and physical activity have a considerable impact on health and well-being<sup>1</sup>. Participation in these activities can reduce the risk of secondary health problems and improve all levels of functioning<sup>32</sup>. Recreation and sport have a strong

<sup>30</sup>The National Research Centre in Learning Disabilities(2007) Twenty-five years of progress in educating children with disabilities through IDEA. National Research Center on Learning Disabilities. Accessed 12/2010: <http://www.nrcld.org/resources/osep/historyidea.html>

<sup>31</sup>Wolfberg P.J., & Schuler A.L. (1999). Fostering peer interaction, imaginative play and spontaneous language in children with autism. Child Language Teaching & Therapy, 15, 41-52. Accessed 12/2010 EBSCOhost database

social value which is important in the context of people living with disability being socially included and maintaining mental health<sup>1</sup>. The barriers that once prevented people living with disability from enjoying the many benefits that recreation and sport bring must be overcome.

The Disability Discrimination Act (1992) makes discrimination against people living with disability unlawful in sport. The rate of participation for people living with a disability or long-term health conditions is lower than the national average in South Australia<sup>33</sup>. Access has been identified as a main theme relating to participation or non-participation by people living with disability<sup>32</sup>. The Australian Bureau of Statistics released data in 2008 which indicates that South Australians living with a disability were less likely to participate in sport or recreation than the equivalent Australian average<sup>33</sup>.

The Julia Farr Association believes that people living with disability have the same right to the benefits associated with recreation and sport that other people without disability experience<sup>2,3</sup>. Consequently the Julia Farr Association recommends:

**R23:** Improving access for people living with disability to mainstream sport and recreation by ensuring that new/existing recreation and sporting facilities comply with the standards set down by the Disability Discrimination Act (1992), the new 'access to premises standards' and AS 1428.

## 10.0 ARTS, CULTURE AND HERITAGE

The Shut Out Report<sup>34</sup> reported that many Australians living with disability perceived themselves to be socially, culturally and politically isolated. The Social Inclusion Board<sup>1</sup> advocates that people living with disability be included in social, arts and cultural initiatives and to be part of community life. The Julia Farr Association wholly supports the principle that people living with disability have the right to take part in the cultural life of the South Australian community on an equal basis with other people. In 2009 the Cultural Ministers Council consented to the National Arts and Disability Strategy which articulates a vision for improving access and participation in artistic and cultural events and activities for people living with disability<sup>35</sup>. The Strategy provides a framework for addressing access and participation in artistic and cultural events and activities. In order to facilitate this right the Julia Farr Association recommends that a plan for infrastructure should:

**R24:** Ensure that premises and facilities associated with cultural performances and services, museums, cinemas, libraries and tourism services comply with the accessibility standards set down by the Disability Discrimination Act (1992), the new 'access to premises' standards and AS 1428<sup>35</sup>;

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<sup>32</sup> Australian Institute of health and welfare 2009 Australia's health 2008 cat no AUS 99 Canberra AIHW.

<sup>33</sup> Australian Bureau of statistics (2006) General social survey accessed 2/2011:  
<http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/C6BF68E57D3A308CCA256E21007686F8>

<sup>34</sup> National People with Disabilities and Carer Council 2009, Shut out: The experiences of people with disabilities and their families in Australia, Commonwealth of Australia, Canberra.

<sup>35</sup> Cultural Ministers Council, (2010) National Arts and Disability Strategy.accessed 1/2011  
[Http://www.cmc.gov.au/working\\_groups/national\\_arts\\_and\\_disability\\_strategy](http://www.cmc.gov.au/working_groups/national_arts_and_disability_strategy)

**R25:** Ensure that people living with disability are able to access monuments and sites of national cultural importance<sup>35</sup>;

**R26:** Ensure that churches, mosques, temples, and other public spaces include ramps, lift access, hearing loops and comply with other accessibility standards as set down by the Disability Discrimination Act (1992), AS 1428 and the new 'access to premises' standards<sup>is</sup>.

## 11.0 HEALTH

Despite overall improvement in population health, the gap between Australians living with disability and those without disability remains large<sup>5</sup>. The prevalence of co-morbid long-term mental and physical conditions is much higher amongst people living with disability in Australia than it is for those who do not have a disability<sup>33</sup>. Consequently people living with disability significant proportion of their time interacting with medical services is is and seeking treatments for medical conditions. The Julia Farr Association welcomes and supports the shift of health support for people living with chronic diseases and disability away from the traditional acute care setting toward primary healthcare. The difficulties that people with complex, chronic health problems experience in attempting to navigate the acute care setting are well documented<sup>36 37 38 39</sup>. This shift is in line with the move towards locating control for decision-making about health issues with the person<sup>1</sup>.

People living with disability have long experience of the health system as 'passive recipients of care'. There is increasing recognition of the need for people living with disability to be principal decision-makers in issues affecting their lives including health<sup>1</sup>. Primary health care which is person centred and where services are delivered close to where people live facilitates empowerment of health care recipients<sup>38 39 40</sup>.

### *11.1 The need for greater accessibility of GP services*

As Australia's population ages, and with the shift of health support from acute care settings to primary health care, there needs to be sufficient capacity for people living with disability to consistently access good service from their GP of choice. The Julia Farr Association conducted qualitative research with people living with disability to determine their perspective and experiences of accessing GP services<sup>40</sup>. Whilst there was a high level of satisfaction with the accessibility of GP services a significant number of participants identified various difficulties with accessing their local GP service. This included difficulties accessing the service through the front door and within the service.

Therefore the Julia Farr Association recommends:

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<sup>36</sup> Chiarella, M. (2009) New and emerging nurse led models of primary healthcare. Australian Government National Health and Hospitals Reform Commission, Sydney, pp. 1 - 51.

<sup>37</sup> Starfield, B. (ed.) (1998) Primary care: balancing health needs, services and technology, Oxford University Press, New York.

<sup>38</sup> Starfield, B., Shi, L. & Macinko, J. (2005) Contribution of Primary Care to Health Systems and Health. The Millbank Quarterly, 83(3), 457 -- 502.

<sup>39</sup> Smith, J. & Ovenden, C. (2007) Developing integrated primary and community health services: what can we learn from the research evidence? Victoria University of Wellington, Wellington

<sup>40</sup> Fidock, A. & Williams, R. (2010) The experiences of people living with disability accessing primary healthcare - Challenges and Considerations, Julia Farr Association, Unley, South Australia.

**R27:** That pressure be applied to the Royal Australian College of General Practitioners (RACGP), together with local GP Divisions to meet their legal obligation to provide fully accessible premises and services;

**R28:** That car parks for GP services include disability parking spaces and that pathways leading to the front door of the service facilitate accessibility for people using wheelchairs and mobility aids.

## 12.0 COMMUNITY SERVICES & HOUSING

Article 19(a) of the United Nations Convention on Rights of Persons with Disabilities states that “Persons with disabilities have the opportunity to choose their place of residence and where and with whom they live on an equal basis with others and are not obliged to live in a particular living arrangement”<sup>41</sup>. The Julia Farr Association supports the strong focus on creative and affordable housing options for people living with disability and other people who are vulnerable such as aboriginal people, homeless people and people living with mental health conditions. The connection between housing and supportive infrastructure which promotes accessibility, social connection and social inclusion is welcomed.

The Australian Health and Research Institute suggest that the provision of housing assistance to people living with disability has important implications for the degree of social inclusion they experience<sup>42</sup>. The provision of appropriate housing assistance is critical in achieving social inclusion as many people living with disability live in insecure housing, inadequate or poorly located housing which can be a significant impediment to employment for people living with disability<sup>42</sup>.

The unacceptable situations that people living with disability face in regard to housing, such as young people living in nursing homes or other institutions and people living with mental health issues living in boarding houses, present the South Australian government with a mighty challenge. However people living with disability should have the range of options for housing and accommodation that other people in the community experience<sup>1 3</sup>.

People living with disability are less likely to be homeowners due to lower income<sup>42</sup>. The Julia Farr Association believes there needs to be a specific focus on measurable initiatives that address the current disparity in home ownership that people living with disability experience, including (as has happened in other jurisdictions) finding ways to achieve sustainable home ownership even when the person living with disability is on a low income.

The Julia Farr Association supports the focus on providing community-based accommodation options for people living with disability. However, we believe that there needs to be a range of flexible and responsive housing options available. We strongly believe that the group home approach should not be seen as the default model through which people living with disability are housed. People living with disability should have the

<sup>41</sup> United Nations Convention on the Rights of Persons with disabilities accessed 12/2010: <http://www.un.org/disabilities/>, p. 13.

<sup>42</sup> Tually, S.& Beer, A.(2010) Housing Assistance, Social Inclusion and People with Disabilities. Australian Housing and Urban Research Institute Accessed 12/2010: <http://www.ahuri.edu.au/publications/p40585>

right to choose their place of residence, where and with whom they live as other people do, rather than a situation where they are obliged to live in a particular living arrangement. Such housing options need to be accessible and meet universal design principles to ensure people living with disability are able to access a home that suits their needs.

The Julia Farr Association recommends:

**R29:** The introduction of progressive housing models, as an alternative to group homes, that provide flexibility, choice and connection within the community including:

- Supported home-ownership
- House-sharing
- Intentional mixed co-tenancy arrangements;

**R30:** Ensure all new social housing in South Australia, constructed with government funding, meets universal access design principles;

- Ensuring special purpose supported accommodation dwellings are constructed to
  - Enable a reduction of the Disability SA Supported Accommodation waiting list
  - Avoid congregate settings, and;
  - Allow tenants to connect with their neighbours and community;

**R31:** Developing a 'supported accommodation needs plan and building program' matched to the supported accommodation waiting list which seeks to address supported housing stress before it becomes an emergency situation. This will allow people living with disability access to information and communications services to plan and transition future arrangements without becoming reliant on institutional or medical facility solutions.

## 13.0 RURAL AND REGIONAL COMMUNITIES

The inequities faced by people living with disability in locations outside major cities in rural and regional areas in Australia are well documented. They include increasing levels of unemployment, poor health, isolation, lack of appropriate housing and financial hardship<sup>43</sup>  
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The National Rural Health Alliance Inc (2010) states that there is an overwhelming case for greater equity to be provided for rural, regional and remote people from investments by

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<sup>43</sup> McPhedran, (2010) Regional living and community participation: are people with disability at a disadvantage? accessed 12/2010: [http://www.fahcsia.gov.au/about/publicationsarticles/research/austsocialpolicy/aspj9/Documents/Regional\\_living\\_community\\_participation.PDF](http://www.fahcsia.gov.au/about/publicationsarticles/research/austsocialpolicy/aspj9/Documents/Regional_living_community_participation.PDF)

<sup>44</sup> Eley, D.S., Boyes, J., Young, L., Hegney, D.G. (2009). Accommodation needs for carers of and adults with intellectual disability in regional Australia: their hopes for and perceptions of the future. Accessed 12/2010: <http://www.rrh.org.au> states since this is a you are is is is is is are you is is is is

the Australian Government in health, education, telecommunications and infrastructure<sup>45</sup>. The National Rural health Alliance Inc (2010) suggests that spending on infrastructure in non-metropolitan areas has lagged dangerously behind the major cities. Infrastructure in many regional communities such as roads, libraries, community halls, museums, swimming pools, sports fields, drainage and seawalls have deteriorated and require maintenance or updating<sup>45</sup>. Deteriorating infrastructure has a significant impact on accessibility for people living with disability. Therefore all of our above recommendations related to improving access are especially relevant for rural and regional areas.

### **13.1 Experiences of people living with disability In Rural and Remote Communities**

The Julia Farr Association conducted a loop conference in 2007 which involved consulting with people living with disabilities in rural areas regarding issues associated with their ability to speak up and be heard<sup>46</sup>. A lack of information was repeatedly identified by people living with disability as a key issue in obstructing their ability to speak up and be heard. Participants described the struggles to get basic information about services and systems, let alone taking on the struggle to assert for change<sup>46</sup>. Articles 9 and 21 of the UNCRPD advocate the vital role of communications in ensuring that people living with disability enjoy human rights, freedoms and respect as is the case for other people<sup>2</sup>. The Australian Communications Consumer Action Network (ACCAN) links information and community services for people living with disability to their ability to participate to the fullest extent possible in Australian society<sup>27</sup>. Consequently the Julia Farr Association believes that a focus on making communications more accessible to people living with disability in rural areas holds significant potential for improvement of their social inclusion and quality of life.

### **13.2 Overcoming the tyranny of distance for people living with disability**

The tyranny of distance results in difficulties in all forms of communication. Telecommunications are poorer and more expensive in rural areas. In 2006, 66 per cent of dwellings in major cities had access to the Internet and 46 per cent to broadband. The comparable rates for dwellings in Inner Regional, Outer Regional, Remote and Very Remote areas dropped off until for Very Remote areas they were 42 and 24 per cent respectively<sup>47</sup>.

Public transport in rural and regional areas is very limited therefore those who cannot afford to drive for or are unable to drive are isolated. Many of these people are living with disability.

Having a disability was identified as a major issue in the ACT Government's report (ACT Government 2003) on the digital divide emphasising the need for home access to ICT services for people living with disability. Williamson, Schauder, Stockfield,

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<sup>45</sup> National Rural Health Alliance Inc., November 2010 Accessed 12/2010: <http://nrha.ruralhealth.org.au/cms/uploads/factsheets/Fact-Sheet-23-rural-inequity.pdf>.

<sup>46</sup> Williams, R. (2007) Why is it so hard to speak up and be heard? Accessed 12/2010: [www.juliefarr.org.au](http://www.juliefarr.org.au)

<sup>47</sup> Black, R. & Atkinson, J. (2002) Addressing the Digital Divide in Rural Australia. Accessed 12/2010: <http://ausweb.scu.edu.au/aw07/papers/refereed/black/paper.html>



Wright and Bow (2001) in their study on the internet's importance for people with disability, found that if appropriate physical access is provided, the internet can increase a person's involvement with the community<sup>48</sup>.

In light of the inequities and the isolation experienced by people living with disability in the rural and regional areas the Julia Farr Association believes the government has an indisputable responsibility to ensure that the transformational infrastructure such as broadband is available at affordable prices to people living with disability. The Julia Farr Association believes access to telecommunications and broadband is critical in enabling people living with disability to be valued as members of the community and to be socially included. We make the following recommendations:

**R32:** That affordable access to communications services and information technologies are facilitated to enable people living with disability the same level of access to telecommunications and information services as the rest of the population, regardless of geographic location and at no additional cost due to the disability. This will enable people living with disability to live independently, and be socially connected and included in their community;

**R33:** That consultation be conducted with people living with disability in rural and regional areas in order to identify their issues and needs in relation to making communications services and information technologies including broadband accessible to them;

**R34:** That funding is provided for people living with disability to obtain necessary training so that they can use their equipment in a way that best suits their needs;

**R35:** That funding be provided for the repair, maintenance and updating of the equipment related to accessing broadband services.

## 14.0 CONCLUSION

Through the United Nations Convention on the Rights of Persons with Disabilities, the COAG approved National Disability Strategy, and the current work being undertaken by the Productivity Commission and the South Australian Social Inclusion Board, there is a long-overdue focus on the rights and responsibilities of people living with disability and their valued places in the heart of our communities. We now have the policies in place to uphold the rights of people living with disability. Infrastructure plays a critical role in the development of a community that is equipped to make the opportunities that other people enjoy accessible to people living with disability. We welcome this opportunity to contribute the disability perspective to the Strategic Infrastructure Plan for South Australia and are happy to comment further on any of the points we have made in this submission.

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<sup>48</sup> Williamson, K, Schauder, D, Stockfield, L, Wright, S & Bow, A (2001). "The Role of the Internet for People with Disabilities: Issues of Access and Equity for Public Libraries in *The Australian Library Journal*, v. 50, n 2.



For further information about this submission, please contact:

Robbi Williams

Chief Executive Officer

Julia Farr Association

Ph: 08 8373 8333

Email: [admin@juliafarr.org.au](mailto:admin@juliafarr.org.au)

## **APPENDIX A** – Summary of recommendations by the Julia Farr Association

- R1:** Land for the development of housing which incorporates the principles of universal design and meets accessibility standards. Such land should be integrated throughout the South Australian community thereby avoiding concentrations of people living with disability in certain areas.
- R2:** Ensuring that all public buildings and indoor facilities, shopping centres, parks and recreational facilities, commercial buildings and sporting arenas incorporate universal design principles and meets Australian Standards 1428 (AS 1428).
- R3:** Ensuring that all new public/commercial buildings are compliant with the Disability Discrimination Act 1992, AS 1428 and the recently introduced 'Access to Premises' May 2011.
- R4:** The development of accessible routes to community buildings, public spaces and transport systems.
- R5:** Fully accessible “multi-purpose” taxi fleet.
- We recommend that a fully accessible “multi-purpose” taxi fleet be established for the entire South Australian community. This will provide people living with disability with greater choice and opportunity to be included in the community through reducing:
    - Taxi response time as a result of more taxis being available;
    - The need for people to call in advance and use specialist booking services, providing them with the opportunity to hail taxis when required.
- R6:** Investment in awareness training for drivers and taxi sector.
- R7:** Investment in training, so that airline industry policies and practices respond to the needs of people living with disability. We recommend there be a focus on:
- Providing regular disability awareness training to all air industry staff including the importance of treating people “with the respect and dignity afforded to other customers”<sup>22</sup> and how to use specialised equipment such as lifting devices. The training will be more effective if it is delivered and provided in consultation with people living with disability;
  - Giving priority to the loading of mobility aids, such as scooters on flights as required;
  - Developing communication processes to make certain that information relayed at booking time is given to all relevant people to ensure that all personal

requirements are met in a timely manner upon arrival at the airport and to the point of arrival at destination;

- Mandatory monitoring of progress and provision of accessibility measures to ensure consistency within the industry.

**R8:** Invest in subsidies to assist people living with disability to travel by air.

- In situations where people are required to travel with support, introduce subsidies to offset the costs of having to pay for an extra ticket.
- We recommend the expense of damage to mobility aids be met by airlines or “offer low cost insurance to people living with disability to recover these costs”<sup>24</sup>;

**R9:** Invest in lifting aids on planes to reduce risk of injury to passengers living with disability and airline staff.

- A lifter called the Eagle Lifter has been developed which provides greater safety to people living with disability and airline staff through reducing the need for manual transfers to access planes. Through using the Eagle Lifter people are able to access planes in their own wheelchair and be transferred directly to their airline seat. Qantas currently use this lifting device for its commercial jets and smaller commuter planes.

**R10:** Invest in establishing an airport service specifically designed to assist people living with disability to access airlines.

- Currently it is a requirement that airlines provide assistance to people living with disability to access their planes. This can create inconsistencies in the assistance provided as staff at different airlines may have differing levels of training and experience in providing the support required. We recommend:
  - The establishment of a service at airports that specifically focuses on supporting people living with disability to access any airline. This will ensure greater consistency in the assistance provided through creating a situation where the staff provide regular support to people living with disability and have the necessary training and experience required. This is the current practice in airports in Canada.

**R11:** Investment in making buses and bus infrastructure accessible.

- We recommend there be a combined investment in making buses and bus infrastructure accessible to ensure that people living with disability, older persons with limited mobility, and young families with strollers, are able to freely travel by bus.

**R12:** Investment in disability awareness training for bus drivers and operators.

- We recommend drivers and operators be provided with regular disability awareness training including how to use disability access equipment to assist people living with disability to travel by bus. This training will be more effective if it is delivered and provided in consultation with people living with disability.

**R13:** Investment in provision of automated or level access on and off trains.

- Reducing the reliance on assistance from train staff to enter and leave trains is essential in ensuring that people living with disability are provided with the freedom to access trains independently. This can be addressed through creating level access to trains or providing automated or electronic ramps.

**R14:** Investment in awareness training for train industry staff.

- As is the case with all other modes of public passenger transport, a focus on the provision of regular disability awareness training is essential to ensure that staff are providing the assistance required by people living with disability and are competent in the use of disability access equipment.

**R15:** Investment in improvement of signage to ensure that sufficient space is available for people living with disability using trains.

**R16:** Identify access issues related to the broadband network and broadband needs by consulting with people living with disability regarding their perceptions of issues related to the adoption of the broadband network.

**R17:** That communication technologies for people who are deaf or living with speech or hearing impairment are affordable and accessible, and are improved with new technologies available via the internet.

**R18:** Ensure that people living with disability (including those living in rural and remote areas) have affordable and accessible internet, voice and government services delivered via the National Broadband Network.

**R19:** Provide a scheme that includes funding for information and communication technology equipment that will meet a person's needs in providing access to telecommunication and information services. This scheme must provide:

- Funding for the repair, upkeep and upgrading of information and communications technology equipment;
- Funding to access all necessary training in order to use the equipment in a way that best suits person's needs.

**R20:** That people living with disability are able to access mainstream preschool, primary, secondary and post-secondary opportunities.

- R21:** That buildings, playgrounds, canteens, libraries and all other features of the structural learning environment are not just accessible, but also easy to navigate and user-friendly.
- R22:** That all learning institutions are accessible for people with disability.
- R23:** Improving access for people living with disability to mainstream sport and recreation by ensuring that new/existing recreation and sporting facilities comply with the standards set down by the Disability Discrimination Act (1992), the new access to premises standards and AS 1428.
- R24:** Ensure that premises and facilities associated with cultural performances and services, museums, cinemas, libraries and tourism services comply with the accessibility standards set down by the Disability Discrimination Act (1992), the new access to premises standards and AS 1428.
- R25:** Ensure that people living with disability are able to access monuments and sites of national cultural importance.
- R26:** Ensure that churches, mosques, temples, and other public spaces include ramps, lift access, hearing loops and comply with other accessibility standards as set down by the Disability Discrimination Act (1992), AS 1428 and the new access to premises standards.
- R27:** That pressure be applied to the Royal Australian College of General Practitioners (RACGP), together with local GP Divisions to meet their legal obligation to provide fully accessible premises and services.
- R28:** That car parks for GP services include disability parking spaces and that pathways leading to the front door of the service facilitate accessibility for people using wheelchairs and mobility aids.
- R29:** The introduction of progressive housing models, as an alternative to group homes, that provide flexibility, choice and connection within the community including:
- Supported home-ownership
  - House-sharing
  - Intentional mixed co-tenancy arrangements.
- R30:** Ensure all new social housing in South Australia, constructed with government funding, meets universal access design principles.
- Ensuring special purpose supported accommodation dwellings are constructed to
    - Enable a reduction of the Disability SA Supported Accommodation waiting list
    - Avoid congregate settings, and in

- Allow tenants to connect with their neighbours and community.

**R31:** Developing a 'supported accommodation needs plan and building program' matched to the supported accommodation waiting list which seeks to address supported housing stress before it becomes an emergency situation. This will allow people living with disability access to information and communications services to plan and transition future arrangements without becoming reliant on institutional or medical facility solutions.

**R32:** That affordable access to communications services and information technologies are facilitated to enable people living with disability the same level of access to telecommunications and information services as the rest of the population, regardless of geographic location and at no additional cost due to the disability. This will enable people living with disability to live independently, and be socially connected and included in their community.

**R33:** That consultation be conducted with people living with disability in rural and regional areas in order to identify their issues and needs in relation to making communications services and information technologies including broadband accessible to them.

**R34:** That funding is provided for people living with disability to obtain necessary training so that they can use their equipment in a way that best suits their needs.

**R35:** That funding be provided for the repair, maintenance and updating of the equipment related to accessing broadband services.